Effective Participation of Children and Young People in Alternative Care Settings
Guidance for Policy Makers
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Acknowledgements
1 Introduction

This guidance aims to raise awareness of the importance of children and young people in alternative care settings being able to make, influence and participate in decisions about their own lives, and other matters affecting them. It emanates from the Involved by Right European project 2011-13, funded by the European Commission’s Daphne III programme.

Involved by Right was a partnership between the Royal Borough of Kensington and Chelsea (RBKC) in England, Helsingborg local authority in Sweden and the local Social Health Unit in Bassano del Grappa, Italy, as well as Barnardo’s and the National Children’s Bureau. The intended audience is policy makers working in EU member states, though we hope the document will also be of value to those working in alternative care settings, and to children and young people.

The Involved by Right Youth Advisory Board (YAB) participated in a child protection workshop with the author of this guidance during a weekend residential meeting in September 2012. All YAB members, who were aged between 12 and 20 years, had experience of alternative care, either in England, Italy or Sweden. Four key messages came from the workshop which have informed, and underpin, the whole of this guidance:

- Children and young people are really good at judging whether adults respect them or not
- Children and young people have lots of ideas and views about how they are cared for, and what would make life better for them. They are willing to share these ideas and views but professionals have to be genuine about wanting to listen and learn
- Social services can make things much worse for children and young people when they do not support them to make and influence decisions about their own lives
- Many of the changes which children and young people want would not cost a lot of money: what’s extremely important is that social workers and others have a good attitude and show they care about children and young people.

Although the document makes reference to law, policy and practice in a variety of European countries, England features heavily because young people in alternative care in this country have been collectively pressing for change for 40 years and the legal and policy framework is generally sound.

Many of the practices common in English children’s homes in the 1970s, and before, would be unthinkable today – the purchase of children’s clothes using an order book; the routine recording of girls’ menstrual cycles; and Black children’s identity, culture and hair and skin needs being systematically denied for example. These stopped because young people – often with adult assistance – documented the harm they caused and persuaded policy makers to bring about change.¹

Painful lessons have been learned about the abuse of children living away from home, and we are now more aware of the needless suffering caused by running establishments as institutions, rather than homes.
2 Definitions

‘Alternative care’

Alternative care in this guidance means the different settings in which children are placed (or monitored) by the state to safeguard and promote their rights and welfare. This encompasses family-based care (fostering) and residential care, including establishments that provide short-term care to disabled children and those that restrict the liberty of children for welfare reasons (called “secure children’s homes” in England). It also includes private fostering arrangements, whereby families themselves arrange for a child to live with a relative or friend: these children have the same rights to special protection and assistance and periodic review within the Convention on the Rights of the Child (CRC) as other children separated from their families.

Moves to de-institutionalise and improve the quality and outcomes of alternative care in the 1990s led to children in alternative care in England being officially re-defined as “looked after” and the responsible authorities “corporate parents”.

‘Participation’

This document uses the Council of Europe Committee of Ministers’ 2012 definition of participation: ‘individuals and groups of individuals having the right, the means, the space, the opportunity and, where necessary, the support to freely express their views, to be heard and to contribute to decision making on matters affecting them, their views being given due weight in accordance with their age and maturity’. Effective participation requires changes in adult attitudes, actions and power.

‘Child’

This document uses the domestic and international law definition of a child – a person aged under 18 years. Young people often object to being described as children: references to ‘children and young people’ mean people aged under 18 years.
3 Setting the scene

All EU member states have ratified the CRC, and they are therefore required by international law to ensure every child, irrespective of age and circumstance, can express his or her views freely in all matters affecting him or her. Each child has the right to have these views given due weight in accordance with his or her age and maturity. Furthermore, every child has the right to be heard, directly or through a representative, in all judicial and administrative proceedings.

As parties to the European Convention on Human Rights, EU member states must adapt decision-making procedures to ensure children can effectively participate. Strasbourg case law has established a number of procedural rights for parents in social care decision-making and it is at least arguable that children have these same rights.

In addition to being bound by international and European human rights instruments, many EU member states have enshrined participation rights for children in alternative care in their domestic laws. This is consistent with article 4 of the CRC which requires states parties to take all appropriate legislative, administrative and other measures to implement the rights in the Convention. Some examples are provided below.

Children’s participation rights in alternative care – a selection of EU member states

**England**
Before making any decision about a child they are looking after, or proposing to look after, local authorities in England must, so far as is reasonably practicable, ascertain and give due consideration to the child’s wishes and feelings. Children’s homes managers must prepare a written plan for each child they look after. When preparing or reviewing this placement plan, the manager must, so far as practicable having regard to the child’s age and understanding, seek and take account of the child’s views. Each children’s home must have a statement of purpose summarising the aims and objectives of the home and how children are looked after. This statement must describe how children are consulted in the running of the home. Information must also be included about complaints and anti-discriminatory practice in relation to children’s rights. Fostering services have similar legal duties, and they are additionally required to consult children when monitoring and improving the quality of provision.

**Finland**
In Finland there is a duty on authorities to ascertain and take into account the wishes and views of children before making a decision about taking a child into care, substitute care and termination of care. The child’s wishes and views, and how these have been ascertained, must be recorded in his or her file. Furthermore, the child’s social worker must ensure the reasons for the child being taken into care, and actions taken as a result, have been explained to the child, in a manner suited to his or her age and development.

**Iceland**
In Iceland, homes and institutions are run under the aegis of the Government Agency for Child Protection which, together with other central and local government bodies, is under a legal duty to take account of children’s views and wishes, in accordance with the age and maturity of the child.

**Italy**
The Constitutional Court of Italy determined in 2002 that article 12 of the CRC was now part of that country’s legislative framework, by virtue of Law 176/1991.

**Romania**
Parents and others legally responsible for children in Romania are required by law to provide information, explanations and advice – in accordance with the child’s age and understanding – and to allow children to express their own point of view, ideas and opinions. This complements children’s right in domestic law to freely express their opinions in any matter affecting them and to be heard in judicial and administrative proceedings (children’s participation in hearings is mandatory from the age of 10 years).

**Sweden**
The objectives of social services in Sweden are set out in law and include the promotion of people’s ‘active participation in the life of the community’ and ‘liberating and developing the innate resources of individuals and groups’. Self-determination is also promoted. In all measures taken by municipal social welfare committees affecting children, ‘the child’s attitude shall be clarified as far as possible’ and ‘allowance’ must be made for the child’s views, having regard to his or her age and maturity.
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A Eurochild survey in 2009 found ‘very weak’ children’s involvement in decision-making in alternative care in many European countries and recommended EU member states align their law and policy to the Guidelines for the Alternative Care of Children. These guidelines specify, among other things, that:

- All decisions, initiatives and approaches should respect fully the child’s right to be consulted and to have his or her views duly taken into account in accordance with his or her evolving capacities, and on the basis of the child being given all necessary information (paragraph 6)
- The process of determining the child’s best interests should incorporate the right of the child to be heard and to have his or her views taken into account in accordance with his or her age and maturity (paragraph 7)
- Decision-making concerning individual children should involve full consultation at all stages with the child, according to his or her evolving capacities (paragraph 57)
- States should ensure the right of any child who has been placed in temporary care to regular and thorough review, which should fully involve the child (paragraph 67)
- When children are in alternative care, a designated individual or competent entity should be vested with the legal right and responsibility to make decisions in the place of parents, in full consultation with the child. The duties of this designated individual or competent entity include ensuring the child has access to legal and other representation where necessary, consulting with the child so that the child's views are taken into account by decision-making authorities, and advising and keeping the child informed of his or her rights (paragraphs 101 and 104).

An analysis of Committee on the Rights of the Child recommendations concerning 15 EU member states examined between 2008 and 2012 shows:

- Many member states were criticised for placing children in institutions, including in penal young offender institutions, rather than family-based care
- 60 percent of member states were told to improve their abuse and complaints procedures for children in alternative care
- Nearly half of member states were told to either establish or improve independent monitoring, inspection and/or visiting to children in alternative care
- One-third were told to ensure children have an individual care plan and/or their care is regularly reviewed
- 1 in 5 were issued with recommendations relating specifically to the participation of disabled children and young people in alternative care.

The Committee consistently stressed the importance of legislation, policies and training to ensure carers and staff are able to support the child’s right to be heard and taken seriously. It made recommendations relating to children in alternative care being involved in the development and evaluation of strategies, policies and programmes. And it urged states to encourage and fund child-led organisations at both municipal and national level and indicated support for the extension of the franchise to young people in Austria and Norway – see Annex A.

In England, where local authorities have had a legal duty to ascertain and give due consideration to the wishes and feelings of children and young people in alternative care since 1975, and there have been extensive efforts to improve the “care system”, there is still plenty of scope for progress. Nearly half of looked
Children and young people in local authorities inspected over the past three years did not know, or were not sure, how to make a complaint. And only 51 percent of these children’s social workers always talked to them on their own during visits. Over 100 children in care — 2 percent of the sample — reported never receiving visits from a social worker.23

Children’s rights instruments and standards represent human knowledge at a given point in time about what children need to thrive and be happy. They also denote childhood dangers and risks. The CRC grants children separated from their family environment the right to special protection and assistance in recognition of what they have already suffered as well as the challenges ahead.24

Children who have endured abuse and exploitation are entitled to care and recovery in environments that foster their self-respect, health and dignity.25 It is no accident that hearing, respecting and taking account of children is given so much prominence in children’s rights instruments relating to alternative care. How else are children separated from their parents to feel safe and secure?

In tune with international standards, professional guidance on promoting the quality of life of looked after children and young people stresses the importance of participation. The guidance was produced for the UK Government and summarises the best available evidence, including on children’s own views of being looked after.26 A separate review of positive outcomes for looked after children and care leavers observed:

“...the message is loud and clear — for [children and young people] it’s all about relationships — ones that are caring, dependable and that last. They want care workers who are genuine and respectful, who make them feel special and safe and who are good listeners — they want someone to be there for them, who really cares and treats them like individuals, not problems.”27

A 15 year-old in a secure children’s home wrote a diary for the Office of Children’s Rights Director for England. Here she explains the importance of her relationships with staff:

“I always feel a mixture of emotions throughout the day — the build up of emotions leaves me depressed — I used to self harm but stopped after I found staff members I could talk to. Today was a good example of happiness, depression, anxiety; having my [youth offending team] worker to talk to and trust is a lot to me in this secure unit or I’d have no one, but he and my other key worker help me to feel happy.”28
4 Why involve children in alternative care in decision-making?

Effective participation in alternative care settings:
- Shows children they matter and are valued
- Improves decision-making and quality of care
- Improves safeguarding
- Enhances relationships and reduces conflict
- Makes services child-centred.

**Shows children they matter and are valued**

Participatory cultures and practices in alternative care settings value children, as individual people and as a constituent group. The importance of this cannot be overstated for any child, not least for children who have endured abuse, neglect and loss, as well as poverty and other forms of discrimination. The emotional upheaval of entering alternative care is depicted below in an extract from a letter written to a future child in care, from a young person currently in care in Sweden:

“You don’t have to feel alone. There are people who care a lot about you and want the best for you. You should not be ashamed of what happens in your family; it is not your fault.”

A study of social pedagogy in English children’s homes asked children about their relationships with staff. One girl explains the emotional impact of being heard:

“She is just special and she just understands you like from the bottom of your heart, like what you mean and like what you’re talking about. Other staff … they think they know everything, but [she’s] not like that, she doesn’t choose her opinion over you – she chooses your opinion like. She explains things to you … because every time I’ve had a problem, after talking to her I just feel so, so good, and I feel happy again.”

**Improved decision-making and better quality of care**

Far from being professional and well considered, assessing someone’s needs in the absence of talking and listening to them entails a great deal of guesswork, as this child reflects:

“I suppose they guessed what I needed – they didn’t really ask me direct. You can’t know what someone needs without asking them.”

Another child noted:

“They decided my needs amongst themselves and then told me what they were.”

Government guidance on care planning in England explains:

“When plans are being made for the child’s future, s/he is likely to feel less fearful if s/he understands what is happening and has been listened to from the beginning. Close involvement will make it more likely that s/he feels some ownership of what is happening and it may help him/her understand the purpose of services or other support being provided to him/her, his/her family and carer.”

International guidelines on alternative care are unequivocal:

‘Children must be treated with dignity and respect at all times’. In England, children’s homes managers are required by law to ensure the home is run ‘in a manner which respects the privacy and dignity of children accommodated there’ (there is no equivalent duty on fostering services).

A child cannot grow in dignity unless his or her wishes and feelings are sought and validated – from the moment he or she arrives in care. YAB members from England gave this advice to children and young people entering care:
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Improved safeguarding

In England, the recognition that listening to children is vital to keeping them safe followed widespread abuse in residential care in past decades. While most children are now placed in family-based care, the importance of listening to them as a form of safeguarding is promoted in national law, guidance and standards. UK safeguarding guidance points to the particular vulnerability of all children placed away from home and advises:

“Previous high profile inquiries and reports into abuse of children living away from home have raised awareness of the particular vulnerability of these children. We should not be complacent that such abuse could not occur again. We need to be continually vigilant so that children today do not suffer as others have.”

An open, transparent culture, where children are encouraged to express themselves and participate in decision-making, contrasts starkly with old-style hierarchical institutions where children were often powerless to speak up and few outsiders sought to hear their concerns. The statutory complaints procedure for children in contact with social care agencies, including those in alternative care, came into force in 1991 and access to independent advocacy within these procedures in 2004.

There have been substantial improvements in law, policy and practice in alternative care in England. Despite this, the confidential telephone helpline ChildLine counselled 3,196 children and young people in 2009/10 about problems related to being looked after. Nine percent of these children raised concerns about physical abuse and many said they felt completely alone.

Areas that have introduced tendering for children’s placements involving the child or young person report greater placement stability:

“There is evidence that when children and young people are involved in deciding on their service (for example having the opportunity to visit a placement beforehand), the service will be better designed, the child or young person will be more committed to the service, and the placement will be less likely to break down.”

The Committee on the Rights of the Child’s guidance on the right to be heard and taken seriously emphasises that a child’s best interests cannot be known without taking into account the child’s views: “there can be no correct application of article 3 [the best interests of the child] if the components of article 12 are not respected.” The International Federation of Social Workers similarly instructs:

“Although they may have access to information not shared with children, social workers must never assume they know more about a child’s life than the child.”

In two randomised controlled trials it was shown that children involved in managing their asthma complied more with treatment, had better health and took less time off from school. A qualitative study of children and young people with cancer showed that active engagement in childhood and adolescence helped individuals make better health decisions in adulthood.

Furthermore, children and young people told England’s Children’s Rights Director that the best way of preventing them running away would be for residential staff to listen to children and communicate with them. The inspection framework for alternative care services in England includes an evaluation of the extent to which agencies ‘enable them to participate so that their voices and experiences inform practice at an individual and collective level’.

Making better decisions

A 10-year-old boy in foster care wanted to live with his aunt. With assistance from an advocate from Derbyshire Children’s Rights Service, he communicated his wishes and feelings to his social worker and the independent reviewing officer (IRO). This resulted in funding being agreed for an extension to his aunt’s house, thus enabling the child to live there.
Children seeking protection from the courts
A case brought to the High Court by two teenage brothers looked after by Lancashire County Council in England is a striking reminder of children’s vulnerability. The two children had been freed for adoption when they were five and three years old; all contact with their mother and siblings was stopped; and they were placed in separate placements (the judge noted that this had occurred despite the fact the children’s only constant relationship throughout their lives had been with each other).

By the time the children were aged 16 and 14, they had endured 77 and 96 placement moves respectively. The boys were never adopted and their repeated requests for family contact (made during the formal review process) were not acted upon. They were subject to degrading treatment and physical assault in care, and one of their former foster carers was later imprisoned for sexual offences against a child who had been fostered at the same time as the two brothers.

The local authority was found to have extensively breached the children’s human rights, including by not promoting their right to seek independent legal advice. The IRO was also found, among other things, to have failed to identify that the children’s human rights were being breached.51 The case only came before the courts because the older boy had been told he was to be moved again. He wanted to stay with his foster carers and so made his way to a solicitor’s office, arriving before opening hours.52

Many of the routines and practices of residential care are idiosyncratic to this setting. One of these is the use of physical restraint. In England, residential staff must record each use of physical restraint and the measures they took to avoid using force and they must also have a discussion with the child afterwards.53 Government guidance states that it is good practice for the child to record their own version of events and they should be given access to an advocate to help them do this.54 A group of looked after children told England’s Children’s Rights Director that providing staff with training reduced the use of restraint:

“This was because the training also gives staff skills in calming young people down without using restraint.”55

Enhanced relationships and reduction in conflict
A national scoping study of advocacy services in England found placements were the most common concern raised by looked after children: ‘They may want urgent support to freeze a decision to move them, to be moved from an inappropriate placement, or help because they have nowhere to live’.56

Empowering Young People in Care in Ireland was formed in 1999 and advocates for the rights of young people in care. The organisation also provides independent advocacy for children and young people. Of the 76 young people (aged 11 and above) who contacted the service in 2010, placement was the main presenting problem in 41 percent of cases.57 Problems with breaches of rights surrounding placement change is the most frequent category of call from children for casework assistance from the Office of Children’s Rights Director for England.58

A consultation with 62 looked after children and young people in England in 1994 found that nearly everyone had deliberately tried to be moved from a placement or their family home because they were unhappy. Children and young people listed a variety of negative (and sometimes extremely dangerous) behaviours aimed at forcing a move: running away, being aggressive and hurting others, damaging property, trying to kill themselves, swearing and shouting, spending time alone in their bedroom and setting things on fire.59

There is an abundance of evidence of the harm caused to looked after children and young people by professionals excluding them – physically and/or psychologically – in decision-making meetings. Young people in England first documented their experiences of review meetings, with proposals for change, 30 years ago.60 National statistics show that 45 percent of children in England aged four and over physically
attended their review and spoke for themselves in 2010/11; a further 17 percent attended and had an advocate speak for them; and only 3 percent of children neither attended nor had their views conveyed to the meeting.61 These statistics are recorded by local authorities for national government so some caution is necessary. Nevertheless, the general picture is a massive improvement on the situation in the early 1980s when a third of children in children’s homes, and a quarter in foster care, told the National Association of Young People in Care they had not attended a review.62

Being physically present does not, of course, guarantee participation, as these young people from three different countries explain:

“Panels, I absolutely hate panels. People you don’t even know sitting there talking about you, discussing your business, judging you. How would they like it if I was judging them? I’ve been to about 40 panels so far and I’ve probably got a lot more to come. There’s no point in them anyway, I don’t listen.”
– Young person in Scotland63

“I don’t think [professionals] are aware of what they are doing. It is just something I am feeling. They try to respond to me, but then they just gang together. It depends on their ignorance. They think they know everything and then they come there and decide how everything shall be. They sit there as the worst crowd against you. They don’t know anything about my life. I get angry … They think they know what is the best for me, but they don’t know what is the best for me, because it is not their life…”
– Young person in Sweden64

“They talk about you as though you’re not there, you feel like you’re invisible. You wave your hands to say ‘hello, I want to speak’ and you’re aware they’re thinking you’re not there and why should they listen to her?”
– Young person in England65

Child-centred services

Children and young people in alternative care are extremely knowledgeable about the services they use. They bring fresh intelligence and authentic experience – they know what it is like to live and be cared for in this particular home, establishment or institution, and by this local authority. They are also the people most likely to receive the first information (including disclosures from other children) of failures and abuses in the system. It is incomprehensible that any policy maker would wish to ignore, or fail to capitalise on, this expertise.

The first local group run by and for young people in care in England was Ad-Lib in Leeds, formed in 1973.66 Over 40 such groups were recorded in the UK in 1997.67 A survey of participation workers in England in 2009 found children and young people in and leaving care were the most likely group to be engaged in local participatory initiatives.68

In 2006, the UK Government announced it now expected every local authority to establish a Children in Care Council and to develop a pledge for children in care.69 Although there is no statutory underpinning to Children in Care Councils, 97 percent of local authorities now have them.70

An in-depth analysis of the impact of Children in Care Councils in London found that individual children and young people benefited greatly from participating: pride, confidence, self-esteem and independence as well as material benefits like cars and driving lessons were outcomes reported by children and young people.

In addition, some local authorities have introduced new ways of working – such as young people being involved in the assessment of foster carers – and creative forms of accountability. For example, each year, young people and Southwark local authority agree 10 “golden rules” governing the care of children and young people (there were 13 rules at the time of the research, including children’s views being taken seriously, social workers turning up on time and children being told about their right to access written records about them). Breaches of the golden rules are dealt with through a “three-strike” system. If a golden rule is breached once, the individual worker has to account for their actions; if the same rule is broken twice a service manager becomes involved; and three strikes results in the manager having to go before the “Speakerbox” young people’s panel to explain the breach, and the remedial action he or she will take.71

The development of pledges by local authorities provides a number of opportunities to mainstream participation. Children and young people should:

- Be offered the chance to engage in the strategic process of identifying priorities
- Assist in the construction of meaningful promises on matters that are important to them
- Be involved in the monitoring of promises
- Help to improve and change promises over time.

Two promises made by Essex County Council in England stand out as being especially significant to children and young people’s participation in alternative care settings – see below. It is noteworthy that the first promise tells children they will be cared about, as this is such a dominant theme throughout the literature on young people’s views.

A campaign being launched this year by A National Voice, the organisation run by and for care-experienced young people in England, will stress that children in care need positive physical contact just like children living with their families. The charity’s chief executive explains: ‘it’s often the children who really need the hugs that don’t get them’.72

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young people assess services to looked after children and young people against seven standards and make recommendations for improvements. The seven standards encompass values, leadership, structures, staff, recruitment and selection, care planning and review and complaints and advocacy.

The 30-page report from an assessment carried out in one London local authority in 2011 explains that the four assessors had over 40 years’ combined care experience. The local authority achieved all seven standards and was given a number of good practice proposals to further improve services. For instance, LILAC assessors advised more involvement in the preparation of job descriptions and in short listing, in addition to the existing practice of young people sitting on recruitment panels.

Assessors recommended that foster carers be asked to sign to confirm they had read the young person’s welcome/participation pack. The local authority was also advised to add information about article 12 of the CRC to its statement of values on its official website to ensure awareness was as wide as possible.

The RBKC pledge to care leavers and young people in care includes a promise relating to independent advocacy – ‘You will have a person who is not your carer or social worker to help you if you are not happy with something and need help to complain’ as well as a commitment that a child’s social worker would only ever change following consultation with the child.

“LILAC” is the acronym given to a scheme initiated by A National Voice in England, whereby care-experienced young people assess services to looked after children and young people against seven standards and make recommendations for improvements. The seven standards encompass values, leadership, structures, staff, recruitment and selection, care planning and review and complaints and advocacy.

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Leadership at senior level is crucial, as is a broader commitment to democratic decision-making. Staff and carers who feel under-valued and disempowered can be threatened by the notion and practice of children’s rights, as can individuals who have been used to their authority and decisions going unquestioned.

What follows are 10 principles for achieving effective participation, with commentary below each principle summarising key points and best practice. The principles are written as statements from an alternative care provider: this could be an individual home or care setting, or an organisation that commissions and/or provides such care in a number of settings.

5 What makes effective participation?

Child participation in alternative care settings is not an optional extra to be introduced once other responsibilities have been met. It should define the child’s whole experience. However, there is nothing accidental about child-respecting communities and environments – they have to be purposefully constructed and maintained.

Implementing the child’s right to be heard and taken seriously is not easy, as UK Government guidance relating to children’s homes acknowledges: ‘This requires skilled and confident staff’. In a similar vein, fostering guidance explains that the requirement to provide information, discuss and offer choices to children ‘requires skilled and confident foster carers who can communicate easily and understand the importance of listening to, involving and responding to the children and young people they care for’.

5 What makes effective participation?

5.1 The children we look after are individual people who have the right to be treated at all times with respect and dignity.

5.2 Our commitment to supporting children to express their wishes and views runs through all of our care and relationships with them.

5.3 We recognise that it can be difficult for children in alternative care to express their wishes and views, and we will do all we can to help them feel comfortable and able to express themselves. This includes providing relevant information that is both accessible and meaningful to the child.

5.4 We take seriously what children communicate and tell us.

5.5 We want to hear and understand children’s wishes and views about the matters that affect them as individuals, and as a group.

5.6 When making decisions, we give due weight to children’s wishes and views, in accordance with their age and maturity.

5.7 Assistance is available to children and young people to ensure their wishes and views are heard, understood and taken into account.

5.8 Staff and carers are selected, trained and supported to enable children and young people’s participation in decision-making and matters that affect them.

5.9 Ongoing monitoring tracks how well we are supporting children and young people to participate in matters that affect them, so we continuously improve.

5.10 There are independent procedures and people who monitor and safeguard children’s right to be heard and taken seriously.
5.1 The children we look after are individual people who have the right to be treated at all times with respect and dignity.

Participation in decision-making is a right that all children have under international law. It is predicated upon treating children as people who have equal worth to adults and to each other. It should be a highly visible and permanent feature of all forms of alternative care and decision-making, and something that is routinely checked during the child’s periodic reviews and the commissioning and inspection process – see 5.10 below.

The opportunity to express views freely, and to have these views taken into account, must never be denied to children because of their age, behaviour or any other factor (such as disability or parental status).

The Committee on the Rights of the Child’s guidance on young children’s rights emphasises that article 12 of the CRC applies from birth and reminds us: ‘Young children are acutely sensitive to their surroundings and very rapidly acquire understanding of the people, places and routines in their lives, along with awareness of their own unique identity. They make choices and communicate their feelings, ideas and wishes in numerous ways, long before they are able to communicate through … spoken or written language’.79

The Convention on the Rights of Persons with Disabilities strengthens the participation rights of disabled children and young people, requiring in article 7(3), for example, that disabled children be provided with disability and age-appropriate assistance so they can enjoy their right to be heard and taken seriously on an equal basis with other children.

5.2 Our commitment to supporting children to express their wishes and views runs through all of our care and relationships with them.

Whilst specialist postholders, projects and programmes can enhance the scope and impact of children’s participation, the right to be heard and taken seriously must permeate all care and adult/child relationships. Children and young people consistently stress the importance of respectful and authentic relationships with carers. In a large survey of children and young people in alternative care in the UK in 1997, the most common best thing about care was ‘having someone who cares’ (children in foster care being noticeably more positive than those in other placement types).81

In Italy, children and young people participating in the Involved by Right project stressed that adults who work with children should ‘put heart in their work’.

A recent English study found that young people value staff in children’s homes being reliable, sensitive and able to share a joke and listen. Relationships resembling those in families stood out. Noting that this finding is supported by previous research, the authors describe positive relationships as ‘a vital precondition for effective care’.82

Importantly, English law requires that the wishes and feelings of looked after children be ascertained and given due consideration (having regard to the child’s age and understanding) before any decisions are made about them. This necessitates building up trusting relationships and having ongoing communication and dialogue, including with those who are sometimes deemed too young or incapable of having views, for every child has feelings.

Positive adult/child relationships enable free expression, dialogue, negotiation and shared decision-making as a continuous and natural experience. Participation resources – such as booklets, forms, group-based activities, online resources and use of arts and drama – can assist children to express their wishes and views. But use of these tools does not alone signal a care environment that supports the child’s right to be heard and taken seriously. It is rare that children in care ask for more forms to fill in: the quality of everyday care and relationships is what matters to them.

The Involved by Right project also found the physical care surroundings to be important, with children’s homes in England appearing considerably more institutional than the attractive, modern, family-type homes in Italy and Sweden. Physical surroundings communicate a great deal about the purpose of buildings and the value given to the people who live in them.83

Even if the physical environment of a placement is homely – indeed, is a family home – social workers and managers must ensure the child and his or her carers can make everyday decisions. This means minimising and removing bureaucracy that does not serve the interests of children. One young child told England’s Children’s Rights Director: ‘people aren’t treated like we are because they are more free and don’t have as many rules by social services’.84

Children in foster families being prevented from having sleepovers at friends’ houses has become a significant national issue in England in recent years. There have even been problems of children in foster care not being allowed to have a haircut without their birth parents or social workers being consulted. The Government Minister responsible for looked after children in 2010 wrote to directors of children’s services asking them to promote ‘the clear default position that children should as far as possible be allowed the same opportunities to take part in normal everyday activities as would reasonably be granted by parents to their own birth children’.85 Statutory guidance the following year explicitly addressed sleepovers86 and a Government consultation in 2012 proposed amendments to secondary legislation to enable decisions about
matters like sleepovers, haircuts and use of social media to be ordinarily taken within the foster family. Communicating respect is important in the way in which professionals write about children, as well as in their face-to-face communications. In 2009, the Care Leavers Association conducted a groundbreaking survey of care leavers aged between 17 and 78 years (the majority had been in care in the UK). A 58 year-old man in Hull shared his experience of reading his care file:

“... ultimately it left more questions unanswered. There was little in my Care File. I was in care for 7 years but there was not one photo, no parental letters, not one school report, no mention of how I was doing at school, nothing insightful. My Care File had all the use and interest of an old shopping list. It seems to have been written by complete strangers about a complete stranger.”

5.3 We recognise that it can be difficult for children in alternative care to express their wishes and views, and we will do all we can to help them feel comfortable and able to express themselves. This includes providing relevant information that is both accessible and meaningful to the child.

All children experience challenges in being heard and understood at some point in their lives. This can emanate from difficulties they have themselves, due to their age and capacity for example, and also from an inability (or reluctance) among adults to encourage children to assert themselves. Children who live in alternative care have, by definition, endured trauma and turmoil and they no longer live with people they know deeply, or who know them deeply. The Italian members of the YAB gave this advice to children entering care: ‘It will be difficult for a time to change habits of what you are used to but it will be only for a short time and it will be better...’. The mere fact of living with strangers requires enormous strength and resilience. Children are then subject to processes and terminology that can be both bewildering and frightening.

This principle commits staff and carers to proactive measures that assist children to express themselves. This is not about cajoling or coercing children, but giving relevant information, encouragement and reassurance. Practical examples of how children’s views are taken into account, and affect matters in the care setting will be useful, particularly for those children who have no prior experience of adults taking them seriously. In England, fostering services and children’s homes must produce a children’s guide explaining the purpose and ethos of their care in an accessible way. This would be an ideal place to list the different ways in which children’s views and wishes are sought and taken into account, giving concrete examples of the changes made over the years as a result of children expressing themselves and participating in decisions. As well as being invaluable for children, this would be useful material for commissioners making decisions about the quality and suitability of placements.

Children will also need broader information about their legal rights in alternative care – not lists of statutes or regulations but meaningful facts, covering matters such as keeping in touch with their parents and brothers and sisters; getting to school or college; how often their social worker will visit; when information about them will be kept private and when it will be shared; how their care and treatment will be reviewed; and who they can contact if they are worried or frightened about something. This kind of information can help to ameliorate children’s fears and powerlessness.

Staff and carers must never assume that a child who has not expressed their views actually has no wishes or feelings about their care or treatment, as this Italian social worker’s surprise on hearing a child in care speak in a public hearing demonstrates: ‘Really the girl that is now talking on the microphone is Martina!!? She never said a word during the conversations with her psychologist!’.

Staff and carers must also be cautious about making assumptions about children’s views and experiences, based upon what others have expressed. Research into young people’s experiences of residential care in Sweden highlights: ‘Although young persons live in the same institution and meet the same staff during the same time period, the environment is in great part nonshared’. Similar findings emerged from a recent study of children’s homes in England.

Furthermore, it has to be recognised that children, like adults, do change their views. In making decisions about individual children, as well as groups, it will be necessary to check that your understanding of their views is accurate and up-to-date, and to respond accordingly.
In care planning and decision-making, the child will need information, time and encouragement and a trusted adult to support them (a dedicated worker or an independent advocate). Processes should be adapted according to the individual child’s age, circumstances and preferred means of communication. In Milton Keynes in England, for example, a pilot was introduced so that young people could chair their own statutory review meetings, with support from their IRO: feedback from young people and professionals was ‘extremely positive and encouraging’.94

Deciding matters relating to group living, whether this be in a children’s home or a foster family, will require careful preparation to ensure each child feels they have an equally valid contribution to make. Foster carers should be sensitive to children in care perhaps feeling their views carry less weight in family decision-making because they are not the carers’ ‘own children’93 (the UK Government’s Foster Carers’ Charter urges foster carers in England to ‘treat the foster child as they would their own child’).94

Specialist participation officers trained and skilled in group dynamics and decision-making could be a valuable asset, particularly in residential settings. They are not themselves part of the establishment so, crucially, can bring fresh insight and ideas. They can give children the confidence to raise concerns of their own (rather than simply responding to adult questions and agendas) and encourage the expression of minority views, be these positive or negative. They can also perform a watchdog function in ensuring agreed actions are carried out, and signpost children and young people to independent advocacy services that provide specialist assistance.

5.4 We take seriously what children communicate and tell us.

Article 12 of the CRC is clear: children have the right to express their views freely and these views must be given due weight. It is not enough to go through the physiological process of listening to children: their wishes and views have to be understood and then acted on. Evidence of acting on children’s views includes: checking with the child you have properly understood what they have communicated; taking the child’s views into account (see 5.6 below); agreeing to follow the child’s views, wholly or in part; giving the child the opportunity to further discuss their views and any decisions made; and enabling the child to question or challenge (including through child-friendly complaints mechanisms) decisions made.

The Office of Children’s Rights Director for England finds that in some settings children are infrequently asked their opinions but are usually taken notice of when they are, whereas in other settings children’s views are frequently sought but less often taken on board.95 Both of these scenarios are unsatisfactory: children’s views must be sought as a matter of routine and given due weight on each occasion.

Proof of taking children’s views seriously should be continually demonstrated in the care setting and in wider policies and procedures. For example, the inspection process for fostering services in England provides a range of opportunities for children and young people to express their views. After every inspection, a letter is sent to the participating children telling them of the main findings. Fostering services are then expected to widely circulate this letter to children in foster care.96

Children may communicate their views in non-verbal ways, through computers and symbol cards, play, arts and creative writing for example: adults should be adaptable and proactive in finding out what works best for individual children. An 11 year-old boy in residential care said the best thing about his social worker was: ‘He helps me a lot, and he helps me when I cry. He helps me draw about my feelings’.97

It is important not to expect children to have fully-formed views on all matters affecting them (this would be an unrealistic expectation of adults too). It is perfectly natural for children’s thoughts and feelings to develop (and change) over time, in light of new experiences, information and knowledge.

Interestingly, twice as many participation workers in England said that children’s involvement in decision-making could be improved by promoting the benefits (impact) compared with having written policies on participation.98

5.5 We want to hear and understand children’s wishes and views about the matters that affect them as individuals, and as a group.

Children in alternative care need ongoing encouragement to raise matters that are important to them individually – seeing their brothers and sisters, getting help at school or accessing their records for example. A study into children’s involvement in service design and evaluation in one English local authority found that looked after children mostly mentioned concerns about contact with their family. They also highlighted practical issues relating to clothes, pocket money and bedtime arrangements.99 Children will have views just like their peers who are not in alternative care about their friends, leisure pursuits and plans for the future. Here, carers and staff need to tread carefully – just as parents do – so as not to dampen children’s hopes and dreams, as explained by this young man who is part of a self-advocacy group of young asylum seekers and refugees in London:

“It makes younger kids feel smaller when they know what they’re talking about. It’s like patronising, like ‘you’re just a kid, you don’t know what you want’.
5.6 When making decisions, we give due weight to children’s wishes and views, in accordance with their age and maturity.

The Committee on the Rights of the Child stresses that minimum age conditions are not legitimate, and that all children’s wishes and views must be considered seriously. The amount of weight given to children’s views will be affected by their age and maturity. This does not mean the views of younger children can be set aside.

Below the age of majority (18 in England but significant rights are acquired at 16), there is no chronological age or stage at which a child can be said to be unable to make any decisions for themselves, or able to make all decisions. In England, we use the term “Gillick competent” to describe the extent to which a child under the age of 16 understands the matter under consideration and the implications of their choices. The term derives from a legal challenge brought by a mother, Victoria Gillick, who did not want her daughters to be able to access contraceptive advice without her consent. Professionals often use the “Fraser guidelines” to determine whether a child is Gillick competent. Lord Fraser was one of the judges who considered the case when it reached the House of Lords (since replaced by the Supreme Court) and his detailed guidance is included in the judgment.

The combination of the child's age and maturity must be considered and individual factors are critical, such as the level of responsibility the child has had in the past, and the depth of their knowledge and experience. The Committee on the Rights of the Child stresses that minimum age conditions are not legitimate, and that all children’s wishes and views must be considered seriously. The amount of weight given to children’s views will be affected by their age and maturity. This does not mean the views of younger children can be set aside.

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The combination of the child's age and maturity must be considered and individual factors are critical, such as the level of responsibility the child has had in the past, and the depth of their knowledge and experience.
understanding of a particular subject. Children in alternative care will have experienced many things not common among their peers and they may have been used to a greater degree of independence and responsibility. The steps they have taken in the past to protect themselves or their siblings should be recognised, whilst providing a nurturing environment.

In 2009/10, 221 children aged 11 and under contacted ChildLine to talk about their concerns about being looked after. An 11 year-old boy explained: ‘I have been in care from when I was a baby. Life has always been a problem for me. I went to live with a foster family a year ago. I am unhappy there and depressed. I cut myself’.105 That a child in this situation could be accorded little (or no) weight in decision-making simply because of his age is deeply disrespectful and professionally unwise – who else really knows what life is like for him?

The Committee advises: ‘Maturity is difficult to define; in the context of article 12, it is the capacity of a child to express her or his views on issues in a reasonable and independent manner. The impact of the matter on the child must also be taken into consideration’.106 Children in England gave advice to the Children’s Rights Director about how adults can determine whether children have sufficient understanding (the context was information sharing). This was then included in Government guidance,107 and is summarised below:

**Does a child understand enough to make this particular decision: children’s advice to UK Government**

- Consider the child’s understanding – not their age
- Always give the child an explanation first, in terms they are able to understand

**Does the child now understand …**

- The question or issue being considered
- The main reasons behind it
- What the alternatives are
- What will happen if they decide one way
- What will happen if they decide another way

**And can they …**

- Weigh things up for themselves
- Say what they want for themselves
- Keep to the same view without constantly changing it? 108

The importance of giving feedback to children cannot be overstated. Concrete examples should be given of the decisions and/or changes that have been made in response to children’s expressed views. When not accompanied by evidence of action, platitudes like ‘we learned a lot’ and ‘we promise to listen’ can devalue children’s contribution and investment in decision-making processes.

Staff and carers will be keenly aware that demonstrating to children that their wishes and views have made a difference, even if not exactly how they wanted, is the best means of encouraging them to express themselves in future. Conversely, appearing to ignore, misunderstand or belittle children’s views risks silencing them in future. Children are extremely perceptive and can tell when adults are serious (or not) about listening to them – see the YAB messages on page 3.

**5.7 Assistance is available to children and young people to ensure their wishes and views are heard, understood and taken into account.**

The first children’s rights service was established in the UK in 1987. This was conceived by elected members to: promote the rights and interests of children in care in all aspects of child care policy, planning and practice; provide advice to professionals and foster carers; distribute information and advice to children in care; and to investigate and report on concerns and complaints raised by children in care.109 Fifteen years later, the provision of independent advocacy for children in and leaving care was enshrined in law, and a 2011 mapping exercise found the vast majority of local authorities commission these services from voluntary organisations to bolster independence.110 Yet, there is much evidence that children lack information and awareness of the purpose and value of independent advocacy.111 The Children’s Commissioner for Wales’ latest review of independent advocacy for looked after children and young people, and care leavers, in Wales recommends that each child be allocated an advocate on entry into the care system.112 Even if the child decides to decline such support, at least he or she would be aware of the role of advocacy and where to go for help in future.113

Many local authorities in England employ participation workers to assist Children in Care Councils and other groups of young people to influence policies, procedures and commissioning. Increases in the leaving care grant and pocket money, better access to social workers and involvement in training and staff and carer recruitment are some of the reported changes brought about by Children in Care Councils.114 These Councils, often with the assistance of independent advocates and participation workers, can deliver and arrange training for children and young people to improve their confidence and skills in participating in a variety of settings, from individual care planning to staff and carer recruitment, to commissioning and service design and inspection.
5.8 Staff and carers are selected, trained and supported to enable children and young people’s participation in decision-making and matters that affect them.

The importance of listening to, and taking children seriously, must be included in the job descriptions and recruitment processes of all those who work with, and make decisions affecting, young people. Prospective candidates will gain their first impression of your organisation’s values and approach by what you communicate in recruitment literature. If you are looking for people who treat children with respect and dignity, say this upfront in your adverts.

There is much to be gained from seeking the input of young people when drafting job descriptions and person specifications, preparing selection procedures and operating the actual recruitment process. This will enhance decision-making; it will also powerfully communicate to candidates that their prospective employer is serious about children’s participation.

The seminal research on children’s views and experiences of social workers found that children wanted ‘someone who smiled a lot, had a sense of humour, maintained a lot of eye contact, did not interrupt, and appeared engaged and interested in what they were saying’. Children are best placed to judge the presence or absence of these qualities.

The positive effects of involving children in staff recruitment are now accepted widely and are transferable to commissioning services. A 17 year-old young woman involved in commissioning independent visitor and advocacy services in Buckinghamshire, England, explained: ‘I enjoy being involved in Commissioning panels because the process concentrates on services for young people and that is more important than looking at individual jobs’. A specialist children’s commissioner in that locality observed: ‘I would not consider undertaking a tender process without the involvement of young people, as their engagement adds the “real life” dimension needed to ensure the services are developed around young people’.

Training and support is vital at all levels of your organisation to ensure participation is mainstreamed. At the end of the 1990s, the UK Government established a five-year programme (“Quality Protects”) aimed at transforming services for children and young people in alternative care in England, in which the participation of children and young people was placed centre-stage. It funded the development of a national training course, called “Total Respect”, to equip those working with looked after children and young people to uphold their right to be heard and taken seriously.

Hundreds of looked after children and young people were consulted during the preparation of the course, which has been adapted over time and is still widely used today. One young contributor summed up the importance of participation: ‘It makes you feel proud and confident with yourself and it makes you feel like an important person’.

5.9 Ongoing monitoring tracks how well we are supporting children and young people to participate in matters that affect them, so we continuously improve.

Participation serves the needs of children and young people, and of organisations. It is through listening to children and young people, and hearing what they want and need, that services become more effective – see pages 11-12. The purpose of monitoring participation is not to prove that listening to children is beneficial. Such an endeavour would be like trying to prove children benefit from nutritious food or kindness. Rather, the point is to seek evidence that children’s right to be heard and taken seriously is being implemented, and to identify any gaps, challenges and areas for improvement. Evidence can also inspire and motivate others to try new methods and approaches.

Independent monitoring, including through inspection, can alert organisations to patterns and “blindspots”, as well as act as a valuable conduit for sharing good practice. It will very likely challenge the tendency of adults to under-estimate children’s capacity whilst over-estimating our own, as this disabled young person told The Children’s Society:

“I’d have all the adults who discriminate against us, to listen to our opinions and what we’ve got to say. Because, our opinions count, more than what they think, because they don’t know who we are, so they can’t say what we are thinking. We are the people who think not them. We think for ourselves, they don’t think for us. They should know that, they should learn that.”
Swedish young people participating in the Involved by Right project recommended that, six months after contact with a social worker has ended, the social worker should send the young person a letter asking how they are doing. This could also be an effective mechanism for receiving feedback from the young person on their care and treatment.

5.10 There are independent procedures and people who monitor and safeguard children’s right to be heard and taken seriously.

In England, participation in the care environment is strongly supported by domestic law, national guidance, standards and the inspection process.80 Children in alternative care have extensive legal rights; there are Children in Care Councils in virtually every local authority; there are dedicated professionals employed to monitor, review and ensure the implementation of legal requirements and standards, and they must assist children to obtain legal advice and representation when necessary; independent advocates must be available for all children using social care services (whether or not these are provided by the local authority or contracted); and Directors of Children’s Services and Lead Members are now required by statutory guidance to have regard to the general principles of the CRC and to ensure that children are involved in the development and delivery of services.119 Yet, in 2009, a Parliamentary select committee recommended several changes in law and practice to strengthen the participation of looked after children and young people in care in England, observing:

“Only by setting more store by children’s satisfaction with their care will we get closer to finding out how ‘cared about’ they really feel … The variation currently apparent in services leads us to believe that more independent support is needed for children to express their views and have them listened to.”120

This categorically shows that participation is not something that can ever be fully achieved. It requires constant vigilance and willingness to introduce ever-more mechanisms and safeguards. Independent people and procedures – inspectors, advocates, participation workers, elected members, complaints, judicial reviews and inquiries for example – contribute enormously to children’s well-being in care precisely because they focus on children’s own accounts and concerns. Children should be able to express themselves at all times without fear or intimidation or, as one child indicated to England’s Children’s Rights Director, being made to feel bad: ‘Social services make you feel guilty if you are not happy’.121

6 Summary

This guidance examined the legal framework underpinning children’s participation in alternative care and indicated key issues and challenges in 15 EU member states, following their examinations by the Committee on the Rights of the Child between 2008 and 2012. It reported on the efforts of young people in care in England over a 40-year period to improve their care, treatment and status, and signposted self-advocacy in other countries such as Ireland, Scotland and Sweden.

Notwithstanding the legal requirement to ensure all children in alternative care can participate in, and influence, all matters affecting them, four main reasons were given for involving children in decision-making: it shows children they matter and are valued; it improves decision-making and the quality of care; safeguarding is improved; relationships are enhanced and conflict reduced; and it helps to make services child-centred.

A set of 10 principles with adjoining commentary was provided to demonstrate the full implications of mainstreaming participation in alternative care.

Any organisation or care setting wishing to strengthen its capacity and success in implementing children’s right to be heard and taken seriously must join forces with those who are the real experts – children and young people. In the YAB workshop, a series of role-plays were devised and performed by children and young people showing social workers, advocates, foster carers and psychologists in action. Children and young people invariably depicted professional carers holding mugs of coffee and note-pads. This was not adults in a state of alertness, ready to record children’s every word. Rather, the image was of professionals being self-interested and distant, hiding behind office furniture. This was highlighted also in the Involved by Right activities in Italy, whereby children in care produced advice for adults working in social care, including: ‘the psychologist should comment with us [on] the problems that we face instead of writing’.

In the YAB workshop, caring adults were shown as calm and relaxed and they smiled and gave physical comfort. They took time to get to know children and young people and looked at them – not at a piece of paper or file – when they were speaking. A Swedish young person summed up: rather than being known of, children and young people in alternative care want to be known.
Appendices

- Annex A
- Notes and references
## Annex A

### Committee on the Rights of the Child’s recommendations relating to children’s participation in alternative care settings, EU member states, 2008-2012

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<td><strong>Austria (2012)</strong></td>
<td>Improve measures to encourage children in alternative care institutions to report abuse(^{122})</td>
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<td>Conduct research on the impact of lowering the voting age and educate children on the exercise of their right to vote(^{123})</td>
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<td><strong>Belgium (2010)</strong></td>
<td>Prioritise family-type care settings over institutionalised placements</td>
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<td></td>
<td>Ensure periodic review of placements(^{124})</td>
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<td></td>
<td>Ensure domestic legislation upholds article 12(^{125})</td>
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<td><strong>Bulgaria (2008)</strong></td>
<td>Strengthen and expand foster care</td>
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<td>Establish standards and procedures for all those working with children in alternative care, emphasising the best interests of the child and respect for the views of the child</td>
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<td>Ensure periodic review of placements and individual care plans for all children</td>
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<td>Ensure regular visitation and inspection of alternative care facilities</td>
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<td>Provide an independent and accessible complaints mechanism for children(^{126})</td>
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<td>Ensure children are heard and taken seriously in judicial and administrative proceedings affecting them</td>
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<td>Increase public awareness of the rights of children to express their views and be heard and encourage respect for the views of children within care institutions and the administrative and judicial system</td>
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<td>Ensure the involvement of children in national development plans and programmes</td>
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<td>Ensure the involvement of children and child-focused organisations in the preparation and implementation of major development plans and programmes in the country(^{127})</td>
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<td><strong>Cyprus (2012)</strong></td>
<td>Increase the proportion of children aged five and over, and children with behavioural difficulties, in foster care</td>
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<td>Ensure carers in alternative care settings receive training on the Convention</td>
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<td>Ensure the quality of care in alternative care settings is regularly evaluated</td>
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<td>Ensure children have access to effective complaints mechanisms to remedy abuse and/or neglect(^{128})</td>
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<td>Take legislative and other measures to ensure the implementation of article 12</td>
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<td>Undertake awareness-raising campaigns on the child’s right to be heard</td>
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<td>Increase the funding and resources allocated to the Youth Board to ensure its effectiveness in communicating the views of the child on government policy</td>
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<td>Support the implementation of youth-related government programmes incorporating full respect for the views of the child(^{129})</td>
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<tr>
<td><strong>Denmark (2011)</strong></td>
<td>Ensure children in care are provided with individual action plans that take their views fully into account</td>
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<td></td>
<td>Prioritise family-type care over institutional care&lt;sup&gt;130&lt;/sup&gt;</td>
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<td></td>
<td>Amend legislation to ensure that disabled children and young people in all settings are guaranteed the right and opportunity to freely express their views and that they have access to age- and disability-appropriate support</td>
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<td>Provide alternative communications facilities for children with disabilities&lt;sup&gt;131&lt;/sup&gt;</td>
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<td></td>
<td>Ensure that the views of children are taken into account when drafting municipal child policy, including on matters relating to placements and the education, health and welfare of children with disabilities</td>
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<td></td>
<td>Ensure training is provided so that all professionals and staff are informed and competent to support the expression of children’s views&lt;sup&gt;132&lt;/sup&gt;</td>
</tr>
<tr>
<td><strong>Finland (2011)</strong></td>
<td>Ensure that children are placed in family-type and foster family care and not in institutions</td>
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<td></td>
<td>Establish unified national standards covering all aspects of alternative care</td>
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<td></td>
<td>Ensure the provision of effective, well-known, independent and impartial complaints mechanisms for children without parental care&lt;sup&gt;133&lt;/sup&gt;</td>
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<td></td>
<td>Abolish age limitations in domestic laws to ensure that all children – including those with disabilities – under the age of 18 are duly heard in judicial and administrative proceedings&lt;sup&gt;134&lt;/sup&gt;</td>
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<td><strong>France (2009)</strong></td>
<td>Take into account the views of children in all measures relating to the placement and treatment of children in alternative care settings</td>
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<td>Provide children with child-accessible complaints mechanisms&lt;sup&gt;135&lt;/sup&gt;</td>
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<td></td>
<td>Ensure that the right to a hearing in all proceedings concerning a child is widely disseminated</td>
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<td></td>
<td>Give due weight to the opinions and recommendations of the Children’s Parliament in all instances of legal reforms that have a direct effect on children</td>
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<td></td>
<td>Encourage initiatives to create children’s parliaments at the departmental and municipal levels&lt;sup&gt;136&lt;/sup&gt;</td>
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<tr>
<td><strong>Greece (2012)</strong></td>
<td>Ensure the Youth Parliament is representative of all sectors of the child population</td>
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<td></td>
<td>Ensure the right to be heard is guaranteed for all children</td>
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<td></td>
<td>Strengthen efforts, including through legislation, to ensure that children’s views are heard and taken into consideration in all judicial, administrative and other decisions affecting them</td>
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<td></td>
<td>Ensure professionals receive training on hearing and taking into account children’s views in all decisions affecting them&lt;sup&gt;137&lt;/sup&gt;</td>
</tr>
<tr>
<td>EU member state (year of examination in brackets)</td>
<td>Recommendations relating to children’s participation in alternative care</td>
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<tr>
<td>Italy (2011)</td>
<td>Introduce a comprehensive legal provision establishing the right of the child to be heard in all settings and decision-making processes</td>
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<td>Take measures to allow for the direct hearing of the views of the child and provide safeguards and mechanisms to ensure children can participate effectively and free of manipulation and intimidation</td>
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<td></td>
<td>Take measures to ensure that children are included in the development of legislation and policies relevant to them, including the strengthening of Children's Councils, by setting up regional or national support structures¹³⁸</td>
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<tr>
<td>Netherlands (2009)</td>
<td>Evaluate the reasons behind the high number of alternative care placements, and the long waiting lists, and establish a comprehensive strategy to address these issues, with the participation of children and their families¹³⁹</td>
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<td></td>
<td>Take immediate action to ensure that children in need of alternative care who have not committed a criminal offence are not placed in institutions for young offenders¹⁴⁰</td>
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<td></td>
<td>Strengthen state support to the National Youth Council and youth organisations¹⁴¹</td>
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<tr>
<td>Norway (2010)</td>
<td>Continue to strengthen efforts to fully implement article 12 of the Convention, including in children’s institutions, national policy formation and in the evaluation of plans, programmes and policies¹⁴²</td>
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<td></td>
<td>Ensure the pilot project on voting from the age of 16 in 21 local areas is appropriately supported through the provision of civic and human rights education and that impact of the project on the citizenship role of adolescents is evaluated¹⁴³</td>
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<tr>
<td>Romania (2009)</td>
<td>Continue to promote foster care</td>
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<td>Ensure children’s views are taken into account in all measures</td>
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<td></td>
<td>Provide children with accessible complaints mechanisms in all parts of the country</td>
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<td></td>
<td>Ensure regular visitations and monitoring of children in alternative care placements</td>
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<td></td>
<td>Develop care plans for each child which are reviewed on a regular basis</td>
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<td></td>
<td>Strengthen the supervision and training of foster carers¹⁴⁴</td>
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<td>Ensure full implementation of article 12 in all institutions and administrative and judicial proceedings¹⁴⁵</td>
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<tr>
<td>Spain (2010)</td>
<td>Develop standards and procedures governing the care of children with conduct disorders placed in private centres</td>
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<td>Ensure children are only placed in these centres as a measure of last resort, authorised by the courts after having respected the right of children to be heard</td>
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<td>Establish an independent body for the monitoring of placement conditions and the investigation of complaints from children in these privately run centres</td>
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<td></td>
<td>Ensure placements in institutions are periodically reviewed¹⁴⁶</td>
</tr>
<tr>
<td>EU member state (year of examination in brackets)</td>
<td>Recommendations relating to children’s participation in alternative care</td>
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<tr>
<td><strong>Sweden (2009)</strong></td>
<td>Ensure adequate supervision and monitoring of the situation of children placed in alternative care institutions</td>
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<td></td>
<td>Ensure the provision of effective, well-known, independent and impartial complaints mechanisms for children without parental care(^{147})</td>
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<td></td>
<td>Continue to promote and facilitate the implementation of article 12</td>
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<td></td>
<td>Ensure that adults who work with children are trained to effectively ensure that children capable of expressing their views are provided with adequate opportunities to do so and that their views are given due weight</td>
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<td></td>
<td>Ensure that all municipalities meet the requirements for active participation by children and regularly review the extent to which children’s views are taken into consideration, including their impact on relevant policies and programmes(^{148})</td>
</tr>
<tr>
<td><strong>United Kingdom (2008)</strong></td>
<td>Take into account in all measures the views of children</td>
</tr>
<tr>
<td></td>
<td>Provide children with child-accessible complaints mechanisms in all parts of the country</td>
</tr>
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<td></td>
<td>Ensure regular visitation and monitoring of children</td>
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<td></td>
<td>Assess why so many children with disabilities are in long term institutional care</td>
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<td></td>
<td>Review the care and treatment of children with disabilities in institutional care(^{149})</td>
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<td>Promote, facilitate and implement, in legislation as well as in practice, the principle of respect for the views of the child</td>
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<td>Support organisations and fora which enable children’s self-advocacy and participation</td>
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<td></td>
<td>Continue to collaborate with civil society organisations to increase opportunities for children’s meaningful participation, including in the media(^{150})</td>
</tr>
</tbody>
</table>

Participation is not something that can ever be fully achieved. It requires constant vigilance and willingness to introduce ever more mechanisms and safeguards.
References

7. Regulation 12, Children’s Homes Regulations 2001 (as amended).
8. Paragraphs 15, 23 and 27 of Schedule 1, Children’s Homes Regulations 2001 (as amended).
16. Article 23(3) Law no. 272/2004 on the protection and promotion of the rights of the child.
17. Article 24 Law no. 272/2004 on the protection and promotion of the rights of the child.
18. Chapter 1, Section 1 Social Services Act 2001 (as amended).
21. The UN General Assembly welcomed the ‘Guidelines for the alternative care of children’ on 20 November 2009, coinciding with the twentieth anniversary of the adoption of the CRC.
22. Section 59 of the Children Act 1975, which amended the Children Act 1948, introduced the following provision: ‘In reaching any decision relating to a child in their care, a local authority shall … so far as practicable ascertain the wishes and feelings of the child regarding the decision and give due consideration to them, having regard to his age and understanding’. The duty then became Section 18(1) of the Child Care Act 1980 and then transferred (in a modified form) to Section 22(4) of the Children Act 1989.


Section 119 of the Adoption and Children Act 2002 introduced the duty (through amending the Children Act 1989) on local authorities to make arrangements for the provision of advocacy to children wishing to make a representation. This part of the Act was brought into force in April 2004 by The Adoption and Children Act 2002 (Commencement No. 4) Order 2003.


A & S (Children) v Lancashire County Council [2012] EWHC 1689 (Fam).

Ibid. Paragraph 90.

Regulation 17, Children’s Homes Regulations 2001 (as amended).


Personal communication from Children’s Rights Director, February 2013.


The ‘Please listen’ short film can be viewed here: www.eusarf2012.org/Highlights/tabid/678/Default.aspx


The young people chose Ad-Lib as the group’s name because it is short for ad-libbing – making things up as we go along – and for adolescent liberation.


Personal communication from Maxine Wrigley, chief executive of A National Voice, February 2013.


LILAC stands for ‘Leading Improvement for Looked-After Children’.


See, for example, Department for Education (2011) Children’s homes: national minimum standards. Standards 1, 3, 6, 9, 10, 11, 19, 21 and 25 and Department for Education (2011) Fostering services: national minimum standards. Standards 1, 6, 9, 10, 15, 20, 21, 24, 30 and 31.


29

Effective Participation of Children and Young People in Alternative Care Settings

Guidance for Policy Makers

Policy Makers

Effective Participation of Children and Young People in Alternative Care Settings

Guidance for Policy Makers


Taken from the ‘Flowers that grow from concrete’ film made by Brighter Futures, which can be viewed here: www.kazzum.org/page.php?pid=180&PHPSESSID=d943dff7c58dd2d38d4f32ee97ab8b00

A National Voice (undated) These matter to us. A National Voice position paper on the Care Matters Bill.


Section 8(1) of Family Law Reform Act 1969.

Hutchinson, D. (2011) Looked after children talking to ChildLine. NSPCC. Table 2. Being looked after was either the main or additional reason for children calling ChildLine.


Boxed information provided by Roger Morgan, Children's Rights Director for England, February 2013.


Buckinghamshire Children and Young People's Trust (undated) Buckinghamshire involving children and young people in commissioning guidance. Pages 4 and 5.


Department for Education (2012b) Statutory guidance on the roles and responsibilities of the director of children's services and the lead member for children's services.


Carolyne Willow wrote this guidance. Carolyne started her career as a child protection social worker and was a children’s rights officer and Chair of Children’s Rights Officers and Advocates in the 1990s. She managed the National Children’s Bureau’s programme on children’s rights and participation in the care environment and was then national co-ordinator of the Children’s Rights Alliance for England (CRAE) between 2000 and 2012. At CRAE, she prioritised seeking legal and policy changes to strengthen children and young people’s participation and influence in care and elsewhere.

This guidance evolved from a weekend workshop with the Involved by Right Youth Advisory Board. Once it was drafted, Camilla Webster, Jane Menday, Linda Marshall, Maxine Wrigley, Dr Roger Morgan and Steve Lowe offered much encouragement and advice, drawing on decades’ worth of experience of promoting and protecting the rights of children and young people in alternative care.

Any errors or omissions are the responsibility of the author.