

Dee- Written submission (PSC0056)

Role of Public Services in Addressing Child Vulnerability – Evidence.

Summary

The opportunity to submit evidence for this cause is important to me. I was a vulnerable child myself and my own children are now classed as vulnerable.

I would like to highlight that the most predominant factor that has continued to prolong my suffering as a vulnerable child, into adulthood and now onto my children's lives is the fact I've never had a stable home and been homeless for most of this time. My children now share this fact and I need it to stop. We are inadequately housed in a run down temporary homeless hostel, close to 4 years in Lambeth. The council threaten us with eviction as they plan to demolish the site and build private homes. My children (4 & 8 years old), who have SEND, will lose the stability of school, doctors, social workers etc. if we are moved to yet more temporary accommodation in a different area. There is no end in sight to this cycle of upheaval due to a lack of council housing.

Ending child suffering and vulnerability is desperately needed and imperative if we expect to be classed as a morally justified society. It is soul destroying and cruel to be in this position. I have spoken to some of my peers in trying to identify factors that contribute to a failure in addressing child vulnerability, these were things they wanted to be heard:

- Bureaucracy stops public services cooperating together to protect vulnerable children and families;
- Public Services such as doctors, social services, mental health, police, councils, charities/voluntary sectors commonly say they are oversubscribed. There is not enough staff as funding has been cut, and as a result the services do not have enough support, they cannot change or make the decisions;
- ACEs (Adverse Childhood Experiences) from occurrences like homelessness, bullying, parental incarceration, family separations, domestic abuse/violence, drugs, alcoholism, debt, poverty etc., are not addressed. The excuses of being unable to change circumstances due to lack of resources, are heard often, however these cycles are repeated and learnt behaviours manifest into adulthood, children do not recognise any other beneficial system;
- It needs to be noted that poor and unsettled housing is an overwhelmingly cause of ACEs, meaning that parents cannot protect their children effectively, even if they'd like to;
- Statutory agencies need to intervene at an earlier stage;
- Social services and early intervention are closing cases too quickly to clear workloads and aren't supporting child protection properly;
- Most public services apply a "complete all tick boxes" approach and not a common sense approach. They come across with a lack of real knowledge, real experience and understanding to be able to judge sensibly or apply solutions;

- Lessons are not learnt. Public services have repeated interactions with families and cases are reopened frequently. Caregivers can evidence short term improvements to “tick boxes” and then fall back into destructive patterns. Ultimately, for children there is no stability and they are the ones left to suffer the negative effects;
- There should be more outreach and intervention - there is an issue with forcing service involvement unnecessarily, but it needs to be overridden for the sake of the child/children;
- Public services need to foster positive and trustful relationships with families and children, to be able to support them effectively;
- You cannot penalise or judge families and individuals who have never had positive stable input in their own lives and expect them to pass it onto their children. If they have never learnt positive structure, can demonstrate alternative ways of dealing with challenging periods, have positive coping techniques, struggle with weak willpower or mental health difficulties, then you need to support them intensively with long term mental health programmes and/or parenting classes.
- Many children are having neurodivergent diagnoses in adult life, ADHD, ASD, Dyslexia, Dyspraxia etc. Why is this happening and where is the duty of care with schools? Are there too many children in the classes to pick these issues up and why is there no consideration for the suffering a child goes through awaiting ‘discovery’? and
- Do different cultures affect children being diagnosed? Are there language barriers? Are parents who do not invest in their child’s development being picked up? Is there institutional racism affecting the ability for parents to address/invest in their child’s development?
- Children centres & youth services are important and required to deliver community support and further individual development opportunities.

1. How is child vulnerability best defined?

All children are vulnerable.

The children who need immediate protection are:

- neglected by their caregivers or society. They have not been raised or nurtured with a positive sense of wellbeing, responsibility or preparation for the world ahead and their basic needs are not attended to;
- they are forced into a role of caring and responsibility way before their time; and
- exploited because of their limitations in behavioural, cognitive and physical development.

This can be apparent regardless of socioeconomic status yet it will commonly be found that children associated with factors like low income background, single parent households, ethnic minorities or disabilities are disproportionately affected. There is little recompense awarded or recuperated in later years to reduce the effects.

I was a vulnerable child. A girl, born to migrant parents: with different cultures, religious backgrounds; brown skin; and a working class background. Key factors that exacerbated my vulnerability at home were: alcohol and substance abuse, domestic violence, physical abuse, mental abuse, and sexual abuse.

Publicly, my home environment was not a particularly troubled broken one, apart from having a parent in prison when I was first born and later in my teenage years I was under social services care.

Social services neglected me and I became lost in the system, conveniently forgotten and left as prey to vultures which understandably had devastating consequences to my life and mental health.

So be aware of missing children like me as they will forever be a burden to the state through a broken life unless they turn up dead.

Societal elements of the time which are still rife today, like institutional racism, sexism, and poverty played a part in instigating these issues in the home but so did a lack of education – especially around child development. There was/is a lack of understanding and an ignorance around the impact, by individuals and the state.

I was a vulnerable child who grew into a vulnerable adult because my needs weren't addressed when I was young. My debilitating poor mental health was exacerbated as opposed to eased. The corporate parent failed to protect me and provide me with safety security and consistency. It had no conscience to save me from the negative effects of where I had come from, of not having the love and care of a real parent or the want to invest in my life, instead the state ended up exposing me to all the bad things life had to offer.

I know what it is to be a vulnerable child as I was one. My children have now fallen into this category no matter how hard I have tried to avoid it. By the very nature of my long term homelessness, poor mental health and the low socioeconomic bracket we have remained in, and will struggle to get out of. We are surrounded by vulnerable children who come from similar environmental factors and who are stuck within a world only we get to experience.

2. How well do public services address underlying causes of child vulnerability within families, such as domestic abuse, mental ill health and addiction?

Services required for vulnerable children and families are only available in extreme circumstances. When public services intervene they do so with a lack of understanding, which results in unsuitable or insensitive behaviour. A lack of funding means opportunities are missed to support families holistically at the outset to prevent the requirement for extreme remedial action.

Often in these cases, follow up care is not offered or implemented to deal with the causes of the vulnerability for example: gambling, debt, poor learnt

behaviour, a lack of life skills or skills in raising children positively. There are no strategies to avoid further connection to those issues or programmes to help families rehabilitate or heal from the effects of these problems.

Programmes like DVIP (Domestic Violence Intervention Project) are hard to engage with. There is limited availability nationwide. Generally, only men are applicable and can be referred by social services, usually in extreme cases only and it is unlikely that many men would openly qualify. Police should be able to refer perpetrators to these types of services when call outs are made to them as they are likely to be on the front line with domestic violence. Police also deal with a lot of criminal behaviour linked with poor mental health, like aggressive confrontational types who may also benefit from monitoring of their relationships with their children.

Schools miss opportunities continually. They do not address the causes of repeated negative behaviours in bullying or disruptive children, controlling, isolated, tearful or sad children.

Children from many different socioeconomic backgrounds are neglected in their homes. There are middle class children whose parents have terrible mental health, take lots of medication, drink way too much alcohol and argue regularly. The only thing that saves some of these children is that money can hide their problems at home but they still cause terror to children they are around and grow their own set of disturbing mental health problems linked to behavioural or neurodivergent. These could be identified and diagnosed earlier by schools and health services but people who administer these services judge and they discriminate against the poor and non-typically educated. Ultimately all of these neglected children suffer and society does not protect them.

As a child in Bristol, social services were unable to engage with my family as they could not understand the cultural dynamic. This meant they were unable to keep a child, me, within my family, They didn't investigate the reasons why they were involved and assumed a contingency role given my teenage years of around 14-15. They lost engagement with my parents only dealing with one parent. They were left with a child they didn't know what to do with, so assumed minimum responsibility and record keeping. I was a child where a full protection order was not issued or sought after yet they were meant to be responsible for me until I was 18 years old. Bristol Social Services did not address my mental health, addiction or safety needs even though severe incidents happened that they were fully aware of. They did not care that they were a last resort after I had been:

- a long term runaway and had tried to kill myself and had very nearly been successful,
- kicked out of school for being violently aggressive,
- sexually groomed and abused as a minor, exploited by criminal gangs; and
- bullied and sexually harassed in my foster home.

Social services did not consider the financial pressure or implications they put me under from the age of 16 when they put me in an independence unit; to get a job even though I was nowhere near suitable or stable for a job and I had no

support. I could not comply and I became too much to handle which resulted in me being kicked out from the unit with nowhere to go apart from a secure unit.

A social worker who I barely saw "saved" me and put me in a women's hostel, which was half a safe house and half a bail hostel. I was the youngest member living with some very troubled women, many were domestic abuse survivors in hiding, drug addicts or jail leavers. These women became my role models and teachers, you can only imagine what that did for me, my drug addictions, my vulnerabilities and my personal safety. However it was the only alternative to a secure unit.

Regardless of how my life was unfolding, I had still never been in trouble with the police and I was generally an innocent child who just needed love and care. And yet I was experiencing ostracization from society by trying to remove myself from a damaging family environment. What is also becoming apparent is that I was probably a neurodivergent child whose symptoms were missed and I'm only understanding and investigating these avenues at this late stage in my life which has resulted in a lot of pain and lost opportunity.

Today, my children are also increasingly left in a vulnerable position, Although services have been employed at an earlier stage due to pressures being more pronounced, society still does not recognise that being together as a whole family and in adequate housing are key parts of life. We have somehow become more deprived in the efforts to enhance and further our society and have ignored the pressures or limitations a modern family or individual can be under. We are beginning to implement the same social ills of a Dickensian society. It has still not been understood, acknowledged or fought for, that my children and I need a safe and secure home to live in to reduce our vulnerabilities in society. By having an adequate home we could have an equal chance to thrive in society. In addition mental health support will always be required to keep us safe and independent.

3. How should central Government coordinate public services to support vulnerable children to recover from the effects of the COVID-19 pandemic?

My children lost pace with all of their academic achievements and progress during lockdown.

Focussed support is required for them to catch up either via tutorship or with more staff in schools during lessons to emulate the time given in one to one sessions. Teachers need to be certain children have understood and can demonstrate the curriculum. My children are capable but a lack of attention and devoted care in school will guarantee they never catch up due to large classroom numbers. This kind of remedial action could ensure that no extra pressure is put on the children to learn or take excessive amounts of anyone's time.

As my children are classed as homeless and therefore live in temporary hostel accommodation, during lockdown they were stuck in a one bedroom flat. They lost a lot of their physical strength and development, they become tired and disengaged very easily. Sports and activities are integral to counteract this and put their health at the forefront. As a result of lockdown they also missed out on their developmental milestones and social skills by not interacting with their peers. They are desperately in need of lots of safe outdoor play space to

support this, their mental health and wellbeing. I could actually see my children regress during the lockdowns which was beyond my physical control and are more reasons why having them do labour intensive learning is damaging to their stress levels.

4. How well does central Government coordinate the activities of the various Government departments working with vulnerable children, parents, guardians and families?

The most severely affected children and families are the ones stuck in poverty and are homeless. Social support systems instigated by government are not currently stopping these two factors.

From poverty, you incur ill health, poor education, desperation and crime.

With homelessness you perpetuate all of this and create an instability which within, it thrives.

From my experience, integrated health, children services and police are unable to support families or provide safe havens for families and stop instability.

Local government are not putting homes for low income households at the forefront of their agendas and are missing out on providing the most basic form of human rights in place, the right to secure housing.

There is also a lack of spending and investing in youth and families for our communities to prosper, this is detrimental to our society.

5. How should central Government work with public service providers to integrate public services to meet the needs of vulnerable children, parents, guardians and families?

A focus on housing, education, mental health awareness and wellbeing should be at the forefront for affected peoples. Once you are aware of what a community is missing you can tackle the inequalities and answer to their needs.

If affected communities are struggling with domestic violence, addictions, low income employment/unemployment, debts etc., then housing/education inequality and mental health are behind it.

Women are also disproportionately affected by these factors and are vulnerable. As the predominant sole caregivers to children, it increases their vulnerability by the very nature of these circumstances.

You can never stop vulnerable children being born but you can enable the caregivers to provide the best possible outcome.

6. Do vulnerable children, parents, guardians and families receive sufficient support from early intervention and preventative services? If not, how might such support be improved? Can early intervention and prevention deliver more efficient and effective public services?

No. There are hardly any preventative services that I have experienced. Early intervention has the same role and responsibilities as full social service care, yet less obligation to commit or to provide in supporting families or vulnerable children.

Parenting classes offered by my local children's centre were one of the key things that helped support me in providing the best for my children. It helped me to know what was better for them and their development and it helped close the gaps of social inequality between different socioeconomic cultures. It gave me a way to unlearn the negative ways of resolving issues and challenges that can be associated with raising children.

Sadly due to being a low income family, my children's father had strict work commitments to ensure our survival, which meant he could not attend as they were not readily available for all. This led to him not understanding or learning the same skills and their importance. As a result he could not invest into our children or family in the same way which led to a lot of stress and contributed to family breakdown.

We were a high risk family for child vulnerability when our first child was born. Services were unable to support our family with adequate housing, mental health care and parental skills.

I was the main figure who was already known to public services and I highlighted the potential for child vulnerability due to wanting to protect our child and family. Public services quickly became the enemy, not the help I hoped for. My care was not coordinated between boroughs and as a result I lost all of my social support. I had to reapply for everything again, losing a lot in the process due to different borough restrictions, my medical care and social support did not follow me and in doing so it put an inexcusable amount of stress on a vulnerable pregnant woman and a man who was never known to services and a world he was unaware of.

I requested help from adult social services to support me through this challenging period and to ensure I had the right social and mental health support in place. However instead children's social services superseded this and they planned to take our child away before he was even born. They were unable to address my needs and I was put in peril being made to jump through hoops I was unable to jump through at the same time as removing my care. They made it all about the baby, making me even weaker inferring I was unable to provide for him in the long term and defeating the object of my request for help to protect him and keep him in a stable family. We would have been willing to take on extra preventative measures for our son but social services wanted to sacrifice my care for a child who wasn't born yet with an unknown impact. This was a strange and stupid decision, it incurred more cost and time from public services, legal services and legal aid.

7. At the local level, where does responsibility rest for addressing cross-cutting issues that affect children's vulnerability, such as parental mental health, addiction and domestic abuse issues? How are those who are responsible for such issues held to account, and how might such accountability be improved?

I cannot answer this wholly, as local government blame central government for a lot of their failings, however I do feel that community could be a great ally. If we could foster and invest in truly integrated communities, we could have great "villages" to raise our children in and keep our families safe.

What is evidenced, historically, is the poor are segregated from mainstream society and its benefits, therefore we are continuing to fail and sustain a disproportionate level of vulnerable children and encourage their suffering.

8. What practical steps can the Government and providers of public services take to encourage different agencies – such as NHS bodies, councils, schools and the police – to share data that helps keep vulnerable children safe, and to support early intervention and preventative services?

This question is difficult as I do not understand all of the ethics around data sharing & autonomy, however, public services need an efficient instant data sharing channel/procedure that can keep all safe, especially when it relates to domestic abuse and crime. Public services need to be able to use this to their benefit to provide solutions for their affected population in trying to help limit the public services needed and effectively reduce the apparent problems.

9. **How effectively do statutory services collaborate with the voluntary sector and community groups to support vulnerable children and their families? Could such collaboration be improved?**

There is too much reliance on charity/voluntary services to support families and I think it is obscene that they are used mainstream, as statutory support is not available or sufficient. The charities/voluntary services that I have engaged with to support a wide range of my family's needs are Every Pound Counts, Age UK, Shelter, Citizens Advice Bureau, Look Ahead, Cocoon Family Support, In-Deep, Family Fund, Home Start, LEAP, DASL, HASL, Welcare, AFRUCA Safeguarding and many, many more.

Please fund these people and listen to what they say is needed. They have been integral in keeping me and my family from drowning and being a serious burden to the state. Families and vulnerable children would not survive without these organisations.

10. The Government has stated its ambition to 'level-up' underperforming regions. How could the Government's 'levelling-up' agenda address regional and local disparities in children's education, health and wellbeing outcomes?

Provide stable, safe, secure homes for these families and their children, invest in their education, health and wellbeing and hold local government responsible when their statistics are failing their communities.

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