



# Challenges from the frontline

Supporting families with multiple adversities in a time of austerity

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# Foreword

Barnardo's Scotland and NSPCC Scotland are pleased to have collaborated on this research, which reports from the frontline of services that are helping families in our communities across Scotland. The evidence collated here represents a major challenge to all those involved in delivering children's services. However, recent Scottish Parliament legislation has opened up new opportunities to address these issues.

The first round of Children's Services Plans, which will be required under Part 3 of the Children and Young People (Scotland) Act 2014, the strategic plans created by each of the integration authorities created by the Public Bodies (Joint Working) Act 2014 and the procurement strategies developed by public bodies under the Procurement Reform (Scotland) Act 2014 will all have a major impact on the future shape of children's services. They offer the opportunity for a fundamental rethink of what we do and how we do it.

We would hope that the wider issues raised by this research – the impact of austerity, benefit sanctions or delays in payments and increasing prices for basic commodities – are recognised as the context for these new statutory plans, and that tackling the growth in, and changing nature of, child and family poverty is therefore recognised as a key priority.

We recognise the difficulties faced by Local Authorities and other public bodies in Scotland in dealing with the spending challenges they face. As organisations both Barnardo's Scotland and NSPCC Scotland have strong partnerships with statutory bodies, and are committed to helping them meet these challenges.

However, the specific issues for children's services identified in the research – increasing severity and complexity of need leading to higher thresholds, and the impact this has on early intervention policy, will need to be addressed in the future design of children's services.







As Susan Deacon said in the conclusion of her 'Joining the Dots' report for the Scottish Government "We must recognise that much of what we have done to date has not achieved what we aspired to. That is not because we have been 'bad people', nor that policymakers or politicians have set out to do the wrong thing. Rather we have tried – but often failed. To recognise that is not, and should not be seen as, blaming – rather it is learning ... Many of our old ways of working are no longer affordable – but neither are they desirable; many have not been effective."

We hope this report challenges all of us to think how we need to transform our services so that we can effectively tackle the challenges we now face. It shows that every day vulnerable families are waking up to profound problems - how they

keep a roof over their head and food on their table. That generates in turn profound challenges for all those who provide services to children. We can only rise to, and overcome, those challenges through bringing about transformational change to Scotland's services for vulnerable children.

We have new legislative vehicles for that change, we hope that Scotland has the collective will to take the necessary action.

**Martin Crewe, Director, Barnardo's Scotland**  
**Matt Forde, National Head of Service,**  
**NSPCC Scotland**

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#### Acknowledgments

The authors would like to thank the Service Managers and Team Leaders across Scotland who kindly gave their time to assist with this research. Thanks are also due to Mark Ballard of Barnardo's Scotland, to Mary Glasgow and to Dr Lisa Bunting, formerly of NSPCC Northern Ireland, for their advice and support.

# Introduction

This report investigates how the challenges of UK-wide welfare reform and austerity policies are affecting practical and therapeutic work with vulnerable families in Scotland.

Intensive Family Support Services (IFSS) help children and parents with complex adversities in their lives but who are below the threshold for statutory intervention. These services play a vital role in delivering Getting It Right For Every Child (GIRFEC) on the ground in partnership with local authorities and other agencies. By supporting families these interventions can break the well-established association between childhood experience of multiple adversity and the increased likelihood of negative outcomes continuing throughout the life course. Indeed, in our experience, many of the problems for which parents receive help are rooted in their own childhood experiences.

The Adverse Childhood Experiences (ACE) study from the United States established a strong, graded relationship between the two.<sup>1</sup> The Growing Up in Scotland (GUS) findings confirm this; they show that it is not poverty per se, but poverty combined with other disadvantages or adversities, which are associated with the worst outcomes for children.<sup>2</sup> And it is “the presence and accumulation of these disadvantages (which) can have negative impacts on outcomes for young children.”<sup>3</sup> A comprehensive overview of theoretical explanations about how adversities lead to outcomes has already been published by Barnardo’s, NSPCC and NCB.<sup>4</sup>

Tackling the effects of poverty is part of the role of Intensive Family Support Services and investing in these services has been a part of the Scottish Government’s Child Poverty Strategy. It is one of the means by which the Government aims to ensure that all children are Respected and Included.<sup>5</sup> The strategy acknowledges the complexity of child poverty and sets out the type of coordinated multi-level governmental action that is needed across a wide range of policy areas in order to end it. To be effective these efforts need to pull in the same direction.

Some of the major factors affecting children’s lives in Scotland at the moment are the effects of Europe-wide austerity programmes, welfare reform, and changes in the public sector, including procurement reform. These all lie outside of what is regarded as children’s policy yet have a significant impact on children.

A recent report by the New Policy Institute on behalf of the Joseph Rowntree Foundation highlighted that “In the ten years to 2011/12, the proportion of children in poverty in Scotland fell ten percentage points on both the ‘before’ and ‘after’ housing costs measures – about twice the fall in England (six and three percentage points respectively) ... Despite this success, poverty for

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<sup>1</sup> Felitti, V.J. et al., Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventative Medicine* 1998; 14(4).

<sup>2</sup> <http://www.scotland.gov.uk/Publications/2010/04/26095519/0>

<sup>3</sup> <http://www.scotland.gov.uk/Publications/2010/04/26095519/2>

<sup>4</sup> Davidson, G, Bunting, L, Webb, MA (2012) Families experiencing multiple adversities: a review of the international literature, Belfast: Barnardo’s Northern Ireland.

<sup>5</sup> These are two of the SHANARRI indicators, covered by article 27 of the UNCRC.

children in workless families in Scotland remains high. Changes to benefits from 2012 are likely to have increased it further.”<sup>6</sup> In addition, recent research by Save the Children Scotland found that:

“the gap in outcomes for children living in poverty and those who do not remains wide in terms of standard of living, quality of life, opportunities and educational achievement. It emphasises that these differences matter more for younger children, because of the importance of early years on lifetime development. In addition, gaps that are already visible between children at the age of 5 are harder to close as they get older.”<sup>7</sup>

The Scottish Government has also highlighted the impact of the austerity programme in UK budgets on spending in Scotland. In the foreword to the draft 2014-15 Budget, John Swinney MSP, the Cabinet Secretary for Finance, stated that “The Scottish Government’s budget is being cut by close to 11 per cent in real terms between 2010-11 and 2015-16, despite the crucial role that

public spending and the public services play in supporting the economy. Based on the projections set out in this year’s UK Spending Round, it is likely that further budget reductions will be imposed on Scotland until at least 2017-18. The costs of the UK Government’s commitment to austerity are increasingly borne by the most vulnerable in our society, with cuts to welfare benefits that are estimated to remove £4.5 billion from Scotland’s economy over the five years to 2015.”<sup>8</sup>

We want to understand how these significant structural/macro issues are affecting the population of children and families whose needs lie just below statutory thresholds:

- How are austerity and welfare reform affecting the most vulnerable and disadvantaged children?
- What is happening to face to face services being delivered to children and families with the most complex needs?

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<sup>6</sup> Aldridge H. & Kenway P. Child poverty in Scotland (2014) NPI, London

<sup>7</sup> Telfer C. & Nutbrown E. A fair start for every child (2014), Save the Children Scotland, Edinburgh

<sup>8</sup> Scottish Government draft Budget 2014-15 (2013) Scottish Government, Edinburgh

# Main Findings

- Services report that more families are presenting in a state of crisis, even where the service is designed and funded to deliver early intervention or preventative help.
- The cumulative effect of benefit sanctions, benefit delays, price rises in basic commodities such as food and energy is tipping more families into crisis and aggravating pre-existing difficulties such as mental health problems, substance misuse and relationship breakdown.
- The severity of need is visibly growing. Some Services report that caseloads are increasingly complex, with a growing number of issues involved.
- In addition, Services are finding they need to meet basic material needs and stabilise home conditions before intensive family support work can begin.
- As a result the ‘gap in the middle’ is widening, as Services shift to higher thresholds, leading to opportunities for early interventions being missed.
- In some places, the “whole family” approach is in danger of being undermined by the difficult spending decisions public bodies are having to make; austerity policies are limiting the opportunities for change.
- There is evidence that the current policy focus is succeeding in shifting resources towards the early years. However, some Services expressed concerns that there were particular issues about insufficient resources for vulnerable teenagers, especially in terms of youth work, youth diversion and youth justice services.
- Some Services are having difficulty maintaining the strong, secure & consistent relationships between families and trusted professionals, which are critical factors in supporting families, because of the impact of funding uncertainty.

# Definitions

The definitions used here are derived from the review of international literature on families with multiple adversities undertaken as part of this project.<sup>9</sup>

A broad definition of family is used which acknowledges that ‘an inclusive twenty-first century definition of family must go beyond traditional thinking to include people who choose to spend their lives together in a kinship relationship despite the lack of legal sanctions or blood lines’.<sup>10</sup>

The definition of multiple adversity used reflects the breadth and complexity of types of multiple adversities identified by the literature review in key studies and UK policy documents. There is a plethora of terms linked with the concepts of ‘complex’ and ‘multiple’ needs, used by various disciplines, sometimes specifically, and often interchangeably. Lea’s analysis suggests that most definitions include reference to education, crime and health disadvantage, alongside poverty and risky behaviour. Similarly, the range of different adversities used can be grouped under eight broad headings:

- Poverty, debt, financial pressures
- Child abuse/child protection concerns
- Family violence/domestic violence
- Parental illness/disability
- Parental substance misuse
- Parental mental ill-health
- Family separation/bereavement/imprisonment
- Parental offending, anti-social behaviour

# Methodology

Semi-structured interviews were conducted with the Service Managers or Team Leaders of 14 Intensive Family Support Services run by Barnardo’s Scotland in 14 local authority areas across Scotland. These services deliver intensive work with an average of 192 children and young people a year (with the largest service seeing 512 children and young people and the smallest seeing 49), in a range of locations, including major urban centres, smaller towns and more rural settings.

Services were selected for inclusion in the survey if they provided intensive support to families at levels 3–4. In other words, if they provided services to children in need in the community, or to children who are already in crisis and require rehabilitation. Some of these children may already be looked after or accommodated (see Chart 1).

The interview topics included: the history of the service, how it was commissioned and designed, and its development over time; issues to do with funding, including direct and indirect impacts of the economic downturn; demands on the service, including trends in referrals, capacity issues, and changes in service level agreements; the types of needs presented to the service and the factors driving these; views about gaps in support, development of new services and the barriers to this.

<sup>9</sup>Davidson, G., Bunting, L & Webb, M.A. (2012) Families experiencing multiple adversities: A review of the international literature. Barnardo’s NI, Belfast.

<sup>10</sup>Goldenberg, H. & Goldenberg, I. (2008) Family therapy: An overview. Seventh Edition. Thomson Higher Education, Belmont CA. p.2



# Profile of services

In practice there is a considerable degree of variation, not only between the services but in the context in which they operate.

## *Variation in the services*

The services vary in terms of:

- their origins, length of time in existence, and development;
- the type of services they provide and the age groups of Children and Young People worked with (and in some cases the age of parents, with some focusing on young parents);
- their focus. These include parental substance misuse, domestic abuse, prevention of exclusion from school/family/community, housing/homelessness, and wider parental support.

However, what all the services have in common is a 'whole family approach', and the fact they offer a range of types of support to both Parents and Children and Young People experiencing multiple adversities.

Chart 1 gives an overview of the 14 services mapped against the four levels of support (1-4) identified in the Hardiker model of prevention, which has been influential in the design of children and families support services in the UK.

**Chart 1 Profile of services by level of intervention (The Hardiker Model)**

Level	No of services
Level 1 – all children and young people Universal services may prevent needs developing	0
Level 2 – children who are vulnerable Children are vulnerable to being in need	4
Level 3 – children in need in the community Children are already in some form of need	16
Level 4 – children in need of rehabilitation Families will have identified complex needs and children may be in state care	12

Note: services may match more than one level of intervention



The majority of the projects are 'core' (revenue) funded by the Local Authority, either by Social Work or Education, or a combination of both. Just two of the 14 services do not receive the majority of their funding through a Local Authority. In these cases the service relies upon donations and charitable giving for funding.

Because the services are delivered by Barnardo's Scotland, a large children's charity, the experiences of these services in terms of funding issues and procurement may be different to that of small community-based charities that provide similar types of family support services.



#### *Variation between areas*

The context in which services operate also varies. This adds considerable complexity and nuance to the findings. The fourteen areas had varying:

- levels and patterns of need involving concentrated areas of urban and rural deprivation.
- structures for children's services, and different arrangements for working with the third sector. The degree to which authorities provided services in-house or utilised the third sector varied.
- stages of development of GIRFEC implementation as well as different approaches, for example, to multi-agency working in relation to referrals.
- positions in relation to procurement policy. The approach to commissioning and managing services differed, although the direction of travel was towards competitive tendering of children's social care services.
- experiences of budget cuts. All local authorities face extremely challenging decisions around managing contracting budgets and cost pressures. Priorities at local level vary and there were different experiences of cuts affecting services. The impact of this is more complex because it overlaps with decision-making around public service reform.
- experiences of the UK Government Department for Work and Pensions' implementation of its welfare reform programme, including benefit sanctions. This appears to vary by local area, so the experience of services is likely to differ in terms of the impact on families.

# 1: The growing severity of need

Frontline services talked about changes in the needs being presented by children and families, their perception of the causes, and their experience of the pressures involved in trying to meet these needs.

We explored with services the potential for using referral numbers and waiting lists as quantitative indicators of demand. However, we found that these measures could not be considered reliable for the purposes of making comparisons over time or between services because of the considerable complexity associated with them.<sup>11</sup>



## Basic needs and the impact of Welfare Reform

Across the services, there is a consensus that basic material needs are not always being met amongst the children and families they work with. Service Managers said poverty was at the core of the issues experienced by the families concerned.

“It is not the case of families not getting what they are entitled to, it is a case of what they are entitled to is not enough”.

One Service Manager reported that workers were witnessing increased stress levels and mental health issues for service users, with benefit problems exacerbating the issues people already have. Another service described how the number of families subject to benefit sanctions in their area was ‘going through the roof’.

“Our work will be undermined. It goes back to Maslow’s hierarchy of need - if you don’t have the basics, if you don’t know where you are sleeping, if you don’t have food in your belly, you can’t do more complex work you can’t change behaviour.”

<sup>11</sup> More detail about this is included as Appendix A.

Service Managers talked about referring families to recently set up food banks in their local areas, and stepping in with practical support such as money for fuel meters, furniture donations and clothing. One Service Manager said that visits to families' homes often revealed a lack of basic necessities such as warm clothing, bedding, toothbrushes and toilet rolls. As a result the Service is increasingly using money which was previously used to fund extra-curricular or more developmental activities to provide basic necessities. Other Services reported that they were increasingly funding basics such as food and bus tickets.

A number of Service Managers referred to benefits training their service staff had received as part of 'gearing up for Welfare Reform' in order to help families through the process. This included training delivered by the Child Poverty Action Group and funded by the Scottish Government. They also mentioned variously that Citizens Advice staff are providing Service staff with training, 'upskilling them for what lies ahead', while one Service has introduced a benefits checker software into their Service. Managers argued that there will be an increasing number of Service Users who will struggle with further cuts to benefits. Managers expected this to be a growing challenge for them in working with families despite initiatives such as the Scottish Government's Scottish Welfare Fund, which replaced the Department For Work and Pensions administered Fund in 2013. A Manager stated:

**"I am worried about the future for service users. Universal credits will cause problems for service users getting benefits once a month and all at once in particular will cause real issues for vulnerable young people. I feel that homelessness, poverty, debt, alcohol and drugs problems are going to increase. The measures are based on the sense that if you hit people hard enough they will do something about it. It is a perverse idea of incentives, but the most vulnerable people will not be able to get work and get off benefits."**





## Severity and Complexity of Need

By their nature Services are working with families with multiple, overlapping issues. However, Managers report that families are presenting with increasingly complex issues and spoke of the greater incidence of particular issues within the families they work with. One Manager expressed the view that the number of families referred with 3 or more issues has risen time and time again, “You could surmise that cases are more complex and there is an increasing level of multiple disadvantage within families”.

Many of the services are focused on a particular issue, e.g. school exclusion or domestic abuse, and Service Managers tended to report in relation to this issue.

Where services collect and record data this evidences an increase in the complexity and severity of problems:<sup>12</sup>

- One service reported a 53% increase in referrals recorded as having 3 or more issues.
- Another service had experienced a 31% increase in children presenting with 3 or more of the following issues in their families: alcohol misuse, drug misuse, domestic violence, parental mental health issues and family breakdown.
- Of families referred to this same service, 49% present with 3 or more of the following issues: parental mental health, alcohol/drug misuse in family, domestic violence, family break up and loss/separation e.g. due to bereavement, divorce, imprisonment.

Looking at trends over time, the figures show that, within this Service, parental substance misuse has decreased as an issue but parental mental health issues have increased. The Service does not collect information about poverty but service users come from areas of multiple deprivation.

The growing problems reported by Services are seen as being linked to the economic recession and to welfare changes. However, many managers identify these problems as having longer term roots in deindustrialisation, job losses and entrenched unemployment, stretching back to the 1980s. Many managers feel there are significant intergenerational issues around poor physical, emotional and mental health related to poverty in local areas.

Reflecting on the impact of the current recession, one Manager noted that aspirations which were already low, are now even lower in communities where there is deep rooted poverty and disadvantage. Several services observed a link between poverty, disadvantage and unemployment and what they perceive as a significant increase in mental health issues from minor depression through to bi-polar, as well as a significant increase in parental substance misuse. One Manager argued that although poverty is a significant issue for service users, it is the added dimension of addiction issues which means families are deeper in crisis. The fact that the economy has contracted and there are fewer jobs has left parents with addiction issues even more excluded from the labour market.



<sup>12</sup> Data recording by services tends to reflect the requirements of funders. Services do not systematically collect and record data of this kind, and of those that do, it is not recorded in a standardised way. This is illustrated in the fact that the statistics here relate to different time periods.



## 2:Early Intervention

All of the Services are funded as early interventions. What are the implications of these changes for activities designed to achieve early intervention?

Service Managers gave concrete examples of early intervention 'in action'. In particular, they talked about ways in which GIRFEC referral systems were having a positive influence on referral procedures and ensuring that children and young people were helped in ways that met their needs better. However, their accounts also exposed gaps between policy and practice. Indeed, some felt that funding challenges and the impact of poverty and welfare reform are threatening the very way in which services aim to provide early intervention in families with multiple adversities. As already noted, services report they often have to deal with issues arising from benefit delays and sanctions, debt and poverty before they can start working on wider, more complex issues.

During interview, questions were asked around referrals and at which stage they were being referred to Services in order to gauge whether the policy agenda has filtered through to practice. Again, the fact that Services are working with younger children and young people and using a 'whole family approach' can be seen as significant local application of the high level policy drivers around GIRFEC. However, Managers spoke of areas where there can be a gap between policy and practice.

A number of Managers raised with us that although there is a local and national commitment to early intervention, as local authority budgets are contracting, little additional resource is available to support this. In some Local Authority Social Work Departments the lack of additional resources has

meant cases are increasingly not picked up until they reach crisis point. As mentioned previously, this is having a knock on effect on services. As Social Work thresholds increase, referrals made to Services via the Social Work route may have already reached crisis point.

One Manager painted a particularly vivid picture arguing that 'we seem to be going backwards', in that the Service often receives referrals at a late stage. She gave concrete examples of cases where neglect or abuse had not been picked up due to pressures on Social Work departments. Other Managers highlighted the fact that in terms of referral processes there needs to be an 'incident' before they are referred such as a domestic violence or a police incident and noted a lack of requests for service for under 5 year olds. Another Manager argued that they often get cases after things have already gone badly wrong, with young people of around 14 just having contact with their first worker.



## The Question of Thresholds

Increased levels of complexity as well as the financial climate and subsequent pressures on local authorities suggests that many of the IFSS were helping service users with much more complex needs than they had in the past, or had originally set out to deliver services to. This often had an impact on capacity. Service Managers discussed the constant negotiation involved in managing caseloads; between achieving good outcomes for the families they are already working with, against taking on new referrals as quickly as possible. A number of Service Managers described the ways this played out in practice.

Variations in local authority structures and policies for children's services, the place and role of IFSS services within their provision, and local referral arrangements all had a bearing on the responses.

Not all services shared the experience of rising thresholds. One had re-focused its provision towards a lower tariff of family in recent years, in response to local authority policies, and now no longer tended to see families affected by domestic abuse or substance misuse. However, this was not the most common experience amongst Services.

One Service Manager explained that the tariff for referrals to their Service had gone up significantly. In previous years the Service was working with children and young people who had not significantly been affected by parental substance misuse. Now in order to take on a referral they usually have an involvement with Social Work, are on the Child Protection Register, are self-harming, have parents in prison or are living with domestic violence. The Service Manager stated that:

“the complexity of the cases has increased, this is not where we started off. There has been a huge shift and now it is a much longer involvement and an

increased level of input. We used to work with children and young people for 6 – 9 months now it is around a couple of years. And we are closing cases which really need more work. This shift has an impact on capacity.”

Similarly, a Manager of an urban-based service reported that, “it is all about higher thresholds” and referred to the fact that 60% of Service Users within the local authority contract are on the Child Protection Register.

The Manager of another service, in a semi-rural area, described a re-focus of priorities – as resources decreased and demand increased, the Service became more targeted and concentrated on the most complex families where there was already involvement with Social Work or where there were identified child protection issues and argued that there was not much capacity to deliver in the wider community.

Highlighting tensions and capacity issues, one Service Manager explained that they now need to offer a less intense service due to the greater number of referrals as the geographic reach of the service has expanded. The Service is unable to offer the same level of comprehensive service (where children were allocated a teacher, a family worker and community worker) however, the Service now works with children over a much longer period. This is now around 18 months, in contrast to 8 months previously.

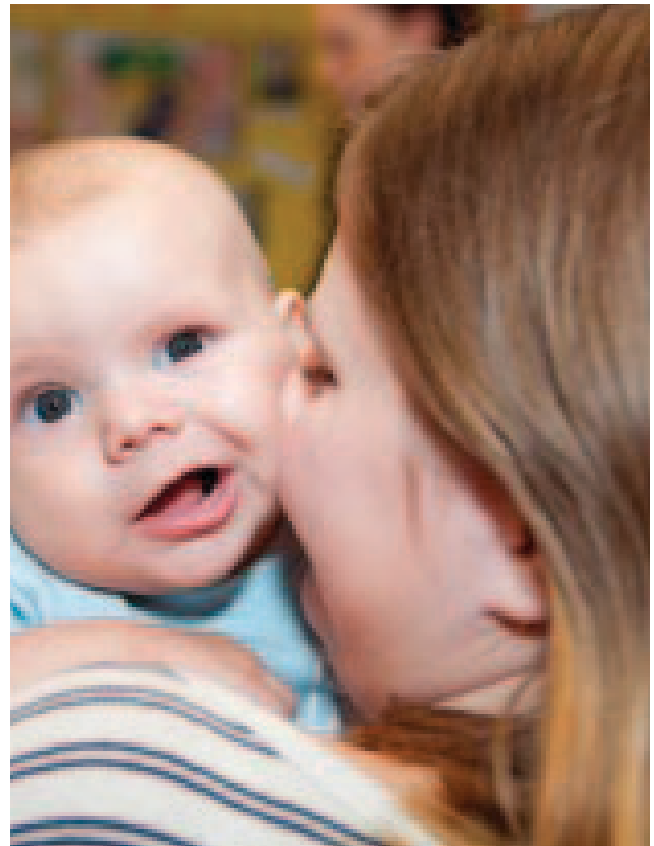
## The Early Years Agenda

In discussing the origins and history of their Service, a common thread is the way Services have developed more recently to provide support to a younger age group than was the original remit. This appears to be reflecting the policy agenda around early intervention in the early years and the harnessing of funding around this.

A number of Services have developed from a youth justice or homeless focus and are now focusing support on younger age groups and families with multiple issues. Service Managers often indicated a shift in the types of referrals away from youth justice towards Children and Families. One of the urban based Services for example, which has its origins in diversionary activities working with 8 – 15 year olds is now working mainly with children and young people affected by parental substance misuse, while another Service was originally commissioned to work with young homeless people aged 16 -25. Funding was then gained which allowed the Service to develop along Family Support lines and work with younger children.

On the whole, these developments were viewed positively as Services are able to work with the 'whole family', particularly younger siblings of those referred initially. It was also seen as making sense from an Early Intervention perspective as Services are in theory able to work with children and young people at an earlier stage in order to prevent youth offending and youth homelessness.

There is a definite perception that budgets are shifting towards the younger age group, in line with national government policy, with third sector organisations activities reflecting this shift in funding.



# 3: Austerity – the challenges for helping families

## Funding support for families with adversities

The current climate is challenging for all publicly funded services, whether in the statutory or the third sector. Insecure funding has a particular effect on staff retention and recruitment and the profile of the workforce by age and experience.

The extremely difficult financial climate for local government, and the challenging decisions necessitated, were well in evidence. While the majority of the services surveyed had not received direct cuts to their funding, those that relied upon this source tend to be in receipt of standstill budgets, a real terms reduction in funding once inflation is taken into account.

In one service funding had remained frozen for 6 consecutive years. Frozen or reduced funding was leading to a growing reliance on Voluntary Funds (charitable giving) to support provision in most services. Despite this, several Service Managers said they felt fortunate to be in this position, being well aware of the funding difficulties faced by many other third sector providers.

A minority of Services, 3 of the 14, had experienced direct cuts to their funding and since this research was undertaken one service has closed following the withdrawal of funding.

The question of funding is closely entwined with changes in procurement. The picture here varies across the 14 local authority areas. While some authorities retain traditional commissioning and funding arrangements, others have adopted competitive tendering processes for services. A number are working with neighbouring authorities on shared service/joint commissioning agendas.

Five of the 14 services are the result of the parent organisation winning tenders and, in some cases, staff have transferred over from previous providers.

One or two Service Managers explained that tendering had been preceded by a rationalisation process resulting in the closure or contraction of other local third sector services.

Tender specifications often expected 'more for less'. One Manager explained that their service had succeeded in winning the tender, enabling it to continue supporting families in their area, but the value of the contract had been reduced by 60%.

## The wider ecology of support services

Services built around a "whole family" approach need to be embedded in communities and are part of a wider ecology of support that can be drawn upon in working with parents and children. The indirect impact of austerity on partner organisations, large and small, is therefore part of the picture.

Service Managers described some of the service reductions by partner agencies in their local areas and in some cases were able to identify the indirect impact of these on their own work with families.

Local authority budgetary decisions have an impact on IFSS due to the fact that they are working directly with council staff in local authority Social Work, Education and Community departments. From the accounts of Service Managers it is clear that local authorities are adopting varied approaches to managing declining budgets.

Restructuring within authorities was described as having led to the loss or scaling back of specific areas of work, with community work being mentioned in two council areas. Managers report that there are 'fewer people around' and that staff are busier and have heavier workloads. In the experience of some services it is now more difficult to access staff in departments and response times can be longer. In one authority where there have been around 700 job losses, the resultant loss of



established relationships was seen as significant for inter-agency working.

Pressures within Social Work Departments were referred to most often, perhaps because this is the agency with which Services work most closely. Managers cited their experience of rising thresholds and fewer opportunities for early intervention. A number illustrated this with reference to specific examples.

In some areas the CAMHS Service<sup>13</sup> is described as being particularly pressured with long waiting lists at a time when demand is growing, due to apparent increases in self-harming and mental health issues. The Service Manager of one Service argued that referrals were increasing as a result, as she believed that they are receiving referrals that would previously have been referred to CAMHS. One Service dealing with domestic abuse felt that it had been affected by the closure of an NHS Domestic Abuse Service, with a resultant ripple effect in increased referrals to their Service from the NHS.

## Wider budget cuts

Service Managers gave concrete examples of cuts to local services which were impacting on their own Services. Smaller community based voluntary organisations and local facilities were frequently given as examples. As already noted, there is a link with changes in procurement. Most of the Service Managers gave concrete examples of organisations that had either received funding cuts or had closed as a result of cuts. Services in alcohol and drugs settings were the most commonly quoted services and these seem to be particularly badly affected by cuts.

One Service Manager spoke of a 'postcode lottery' within community based resources, with cuts and closures being particularly pronounced in certain areas, noting that there is a particular lack of

addiction services, domestic abuse services, and youth work (particularly 'diversionary') services. She argued that the situation has felt much worse in the past two years. This has an impact on work with families as there is a lack of services to refer onto when an intervention comes to a natural end.

In terms of joint, collaborative work one Service Manager argued that as other voluntary organisations are contracting there is a growing need to collaborate or do joint work in order to achieve the same results as in the past, "To do the same as 3 years ago we need to do it together, we need to pull levels of expertise."

Another Manager noted, similarly, that a number of local facilities are no longer available, which has affected established links in the area. He made particular reference to drugs rehabilitation facilities and remarked that he seemed to always be getting emails about local closures. The building the Service operates from is under threat of closure because of the departure of local organisations.

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<sup>13</sup> Child & Adolescent Mental Health Services

# Conclusion

The promise of GIRFEC is that there will be a cross-cutting focus on improving outcomes for children, young people and their families based on a shared understanding of wellbeing. Our organisations support this, and have welcomed the consistent commitment from all parties in the Scottish Parliament to a set of principles that go back at least as far as the 'For Scotland's Children' report into better integration of children's services in 2001. We have more recently welcomed the Scottish Government moves to put GIRFEC on to a statutory footing through the Children and Young People (Scotland) Act.

However, to effectively deliver on these principles and the recent legislation around children's services, we need to take full account of the changing context for children's services. We therefore wanted to find out what is happening at the frontline of work with families with multiple adversities. This will be crucial in order to achieve the shared aspiration of making Scotland the best place in the world for children to grow up.

Despite the variation between the Services and the contexts in which they operate, we found there are some common messages.

Firstly, there is a shared anxiety and anticipation of worsening of conditions over the next few years for these already disadvantaged families. Services well used to poverty describe a growth in the level of material need unprecedented in recent decades. Parents who already have significant difficulties in their lives are struggling with benefit delays and sanctions and food and fuel inflation. This is intensifying existing problems especially around mental health, and Services are seeing an increase in the complexity and severity of problems in families. Many Services are finding it difficult to do the work intended with families, until they have first addressed basic needs such as food, heating and clothing.

Although they are funded as early intervention services, in general the direction of travel – particularly in areas with longstanding concentrations of poverty and deprivation with high levels of need – is towards working with children and families who are already in crisis.

The implication is that the “gap in the middle” around children and families below the threshold for statutory intervention is widening. In addition, in some cases the orientation of Services is shifting towards less intensive support.

Despite the policy emphasis on early intervention and on Getting It Right For Every Child, the services surveyed are all reliant to a growing extent on charitable giving to meet the shortfall in statutory financial support.

The policy and funding focus on early years is seen as effective. However, it appears in some places to be drawing resources away from early intervention youth work with teenagers, creating the risk of a growing gap in support for vulnerable older children.

The wider ecology of community support, on which the 'whole family' approach of these Services depends, is being undermined by budget cuts and in some areas, by procurement policy. In some places there are fewer services to refer on to, fewer options for follow on plans, and less effective multi agency working due to the loss of posts. Individual Services – whether statutory or voluntary – have found it a major challenge to re-shape service provision to take account of new contexts.

In short, the evidence is that year on year the picture is getting more challenging and the drivers for the challenges are likely to continue for the next few years. If ever increasing numbers of families are presenting to Services in a stage of crisis, whatever the intentions around earlier intervention, it is likely



that responding to crisis will dominate the work of children's services. The challenges we face cannot therefore be addressed through incremental adjustment to new realities – a shift to a radically different model of statutory and voluntary support for vulnerable families will be required to ensure that we can find a way to still deliver the effective early intervention and intensive work that helps to prevent long term harm to children.

However, as set out in the foreword, there are important opportunities to shape radically different models of Services arising from the recent legislative developments in the Scottish Parliament. We therefore hope that this frontline perspective will be

taken into account as the first round of Children's Services Plans, which will be required under Part 3 of the Children and Young People (Scotland) Act 2014 are drawn up. We also hope that it will help inform the strategic plans created by each of the integration authorities created by the Public Bodies (Joint Working) Act 2014 and the procurement strategies developed by public bodies under the Procurement Reform (Scotland) Act 2014. We hope these new plans will set out a clear vision for how current models of Services can be transformed to meet the challenges we face. By doing this, we can help ensure that the aspirations we all share can be delivered on the frontline.

# Appendix A

## Indicators of Demand & Unmet need

Referral numbers and waiting lists cannot be considered reliable quantitative indicators of demand for the purposes of making comparisons over time or between services. The potential for this was investigated with Services, but disregarded because of the considerable complexity we found associated with these measures.

It is hard to compare between Services due to the different ways in which referrals are managed. Waiting lists are not used by all IFSS's and some waiting lists/referral procedures are the responsibility of Local Authorities.

Another shortcoming is the fact that Services also do not tend to record referrals that are not taken on, referred elsewhere or not offered a service. Therefore, numbers do not give an accurate indicator of demand/unmet need. Evidence of demand will therefore, be more anecdotal in nature.

Another level of complexity is that a number of Service Managers attributed increased referrals to internal restructuring of waiting lists/ referral procedures or improvements to the Service itself. For example, one Service had experienced a huge increase in referrals which the Manager attributed to a revamp of the Service and a conscious effort to publicise its achievements, whilst another Service was dealing with more Service Users as a result of city wide expansion.

There had also been changes to referral procedures in many places as a result of local authority reviews and restructures of children's services and family support services and the introduction of new structures and processes for carrying out assessments, deciding how needs are best met, and referring to Services. In several areas multi-agency Locality Teams now decide referrals. These developments are a response to national policy frameworks including GIRFEC, Early Years and current initiatives such as the Early Years Collaborative.

On the whole Managers reported that demand was currently manageable. However, of those Services which do hold a waiting list, a number reported that there are capacity issues with demand being greater than they could deliver. The Manager of a Youth Justice Service reported a peak of 18 on the waiting list around a year ago; this has since dropped off to 'normal' levels of around 4 or 5. The Manager referred to staff capacity as a factor here. Similarly, another service reported having periods where they hold waiting lists which is typically due to staff absence or lengthy recruitment processes to replace staff who have left. Another Service had 15 unallocated cases on the waiting list but no key workers to allocate to them.