'This has given people what is needed': Progress and Pitfalls for establishing child protection pathways in England that address significant harm beyond families

Abstract

Child protection systems, and the legal frameworks underpinning them, are central to safeguarding young people at risk of significant harm. However, their design often assumes that the risks young people need protecting from are attributable to the action or inaction of their parents/caregivers. In the UK, growing interest in significant harm that young people experience in extra-familial contexts and relationships has raised questions about the sufficiency of such child protection systems. In this paper we present the results from three English pilots of alternative child protection processes; ones intended to safeguard young people at risk beyond their family homes and relationships. We identify five features of these alternative pathways and discuss their conceptual, legal, and practical implications for child protection systems to extra-familial harm, such progress was hampered by wider system features and foundations that, while not prohibitive of the approaches piloted, did not enable them. These pitfalls require attention and debate to develop/sustain effective child protection responses to extra-familial harm in the UK and internationally.

Keywords: Extra-familial harm, Child Protection, Contextual Safeguarding, Social Work with Adolescence, Exploitation

Introduction

Child protection systems have been implemented in various countries around the world to intervene when children and young people are at risk of significant harm or abuse (Gilbert, Parton, & Skivenes, 2011; Merkel-Holguin, Fluke, & Krugman, 2019). But what is the role of these systems and social workers within them when the harm in question not only sits outside of a caregiver-child relationship, but is largely beyond the control of a young person's parent/carer? In this paper we report qualitative data from three children's social care departments in England who piloted alternative child protection processes for young people who were at risk of significant harm that was not attributable to parental (in)action and instead existed in extra-familial contexts/relationships beyond parental control. We use a framework analysis to identify five features that characterised the processes piloted and reflect on their implications for key conceptual, legal, and practical signifiers of child protection. We argue that, despite limitations warranting redesign and further piloting, these alternative pathways disrupt core tenants of child protection systems and create space to reimagine roles of, and power relations between, social workers, wider partner agencies, parents/carers, and young people. However, for these opportunities to be maintained conceptual and legal parameters of child protection require debate and potential revision.

Background

England's child protection procedures

Albeit subject to minor revisions over the years, the Children Act has provided the legal framework for England's child welfare system since 1989. For the purposes of this paper there are three sections which underpin the child protection process within that system:

- Section 17: 'It shall be the general duty of every local authority (in addition to the other duties imposed on them by this Part)

- a) to safeguard and promote the welfare of children within their area who are in need; and
- b) so far as is consistent with that duty, to promote the upbringing of such children by their families, by providing a range and level of services appropriate to those children's needs'
- Section 47: 'Where a local authority...
 - b) have reasonable cause to suspect that a child who lives, or is found, in their area is suffering, or is likely to suffer, significant harm, the authority shall make, or cause to be made, such enquiries as they consider necessary to enable them to decide whether they should take any action to safeguard or promote the child's welfare
- Section 31: A court may only make a care order or supervision order if it is satisfied
 - a) that the child concerned is suffering, or is likely to suffer, significant harm; and
 - b) that the harm, or likelihood of harm, is attributable to—
 - (i) the care given to the child, or likely to be given to him if the order were not made, not being what it would be reasonable to expect a parent to give to him; or
 - (ii) the child's being beyond parental control.

Statutory guidance '*Working Together to Safeguard Children*', converts this legislative framework into stages/processes of social work and multi-agency intervention.

In accordance with s.17 of the Children Act, social workers can coordinate assessments and plans for children/families in need of support. Such support is voluntary, takes place with parental/caregiver consent, and can be provided for reasons ranging from the children having a caring responsibility for parent or children being at risk of harm (that is not considered significant) through to children requiring accommodation and/or support related to learning needs and disabilities.

Social work responses based on s.47 enquiries are reserved for children who are experiencing, or at risk of, significant harm. In these situations, consent is not required, and engagement with social workers is not voluntary. It is the duty of the children's social care department to conduct enquiries to establish risk of significant harm, and the duty of others they work with (such as the police and health agencies) to participate in this process. The process through which these enquiries are enacted feature:

- A 'strategy' discussion between children's social care, the police, and any other partner agencies to agree the approach to enquiries and any immediate actions
- A meeting, entitled an Initial Child Protection Conference, chaired by an independent Child Protection Chair, to discuss the enquiry results and associated assessment, and develop a plan under one of four child protection categories – neglect, emotional abuse, sexual abuse, or physical abuse.
- A core group of professionals to oversee the implementation of the plan

The plan is reviewed at regular time periods. Parents/caregivers are generally invited to participate in child protection conferences, and in some cases young people participate as well; although the extent to which conferences create the conditions for such participation is questionable (Muench, Diaz, & Wright, 2017). The conference chair speaks to the children and family ahead of meetings to explain the professional reports and elicit any views they want to share.

Should child protection planning fail to bring about safety for children and/or reduce the risks identified then using s.31 a local authority can seek a court order to place those children into the care of the state. In these situations, a judge needs to establish that the risk of harm is significant and that such harm is either attributable to (in)action of the parents and/or is due to the child being beyond a parent's control.

This legal and policy scaffold for organising responses to children at risk of harm is largely reflective of child protection arrangements in the three other UK nations (Safeguarding Board for Northern Ireland , 2023; Scottish Government, 2021; Welsh Government, 2023) (with variability in respect of how juvenile/youth justice processes/practices operate in relation to wider child welfare services). Points of similarity include: coordination of assessment and planning by social workers; multi-agency meetings to agree plans for young people at risk of significant harm; parents/carers being the primary target of intervention; and intervention being informed by whether harm is attributable to parents.

Child protection responses to adolescents in England

Child protection procedures in England apply to all adolescents up until their 18th birthdays. However, the role of social work intervention in safeguarding their welfare, particularly when using child protection processes, has been the subject of ongoing debate (Hanson & Holmes, 2014; Anon & Author A, 2020; MacAlister, 2022). A central feature of this debate has been that child protection processes were designed to facilitate state intervention when the (in)action of parents were in question, not when young people were experiencing harm associated to criminality or external factors. As one of the designers of the original legislation noted, one intention behind the act was to separate out:

proceedings in respect of delinquent or naughty children – those who were out of control, falling into bad associations or in moral danger ... [from] proceedings in respect of children who were suffering or at risk of suffering neglect or abuse (Hale 2019).

This legislative demarcation is extended by the policy frameworks that guide child protection processes by focusing on parental, and wider family, responsibility (summarised in the previous section). For example, the description of child protection conferences in England's statutory guidance requires that the plans they produce should:

support the family and wider family members to safeguard and promote the welfare of their child, (HM Government 2018: 52)

When it comes to social work with adolescents the practical limitations of this policy framework are threefold.

Firstly, social work with adolescents requires a relationship between the practitioner and the young person; not just between the practitioner and their parent (Hanson & Holmes, 2014; Lefevre, Hickle, & Luckock, 2019). Adolescence is a time in human development, generally defined as between the ages of 12 - 25, where individuals have a growing desire for autonomy (Coleman, 2011); where we want to make decisions for ourselves, and often preference the social taste of our peers, over the leanings of our parents/carers (Coleman, 2011). The increasing amounts of time we spend without the supervision of our caregivers, at least in England, hanging out in cinemas, parks shopping centres, and after school activities with friends, furthers this temporal drift. Temporal because as we age out of adolescence we tend to return to the norms instilled into us in early childhood intermingled with those we honed independently during our adolescent years.

My frame of reference for this is often Clarks shoes. As a young child my mum would only buy me shoes from Clarks, insisting that they were the only shoe to give my growing feet adequate amounts of protection. By age 11 I refused to wear shoes from Clarks and spent significant energy seeking out footwear akin to the tastes dominating my school corridors that my mum might also sign-off on. As an adult most of my shoes are now from Clarks – and so too are my sons. So, for social workers, seeking to change the footwear preferences of a young person's caregiver is likely insufficient for changing what their child wears to school; it is far more key to understand the footwear preferences of the young person in question and to work with them to reach a shared goal. Yet, processes of consent, and voluntary/statutory engagement in England's child protection system, prioritise parental consent (rather than that of the young person).

A second, and associated factor, is the ways that child protection systems attribute harm to parental action or capacity. Care orders require evidence that harm is attributable to parenting; and the social care pathway of support (for both voluntary and statutory intervention) is littered with reference to parenting assessment and intervention (HM Government, 2018; MacAlister, 2022). Parents/carers have commented on how they have often felt blamed by social workers for failing to protect their children without consideration of broader contextual factors (Bilson, Featherstone,, & Martin, 2017; Featherstone, Gupta, Morris, & White, 2018). This feature is particularly challenging when young people face risks in extra-familial contexts and relationships t(Pike, Langham, & Lloyd, 2019; Hickle & Shuker, 2022).

When spending time away from caregivers, a significant minority of young people in England, and in other countries around the world, are harmed by peers or adults in public, online and education spaces (Barter, et al., 2015; Dierkhisinga, Walker Brown, Ackerman-Brimbergb, & Newcombeb, 2020; Hanson & Holmes, 2014; Unicef, 2019; Turner, Belcher, & Pona, 2019). Whether being criminally exploited to sell and distribute illegal substances, sexually exploited, physically assaulted (including with the use of weapons), or abused by their first romantic/intimate partners, these experiences can pose a risk of significant, and occasionally fatal, harm. As such they would, in theory, reach the legal threshold for statutory social work enquiry under s.47 of England's child protection legislation. Yet these harms are rarely instigated by parents and so not attributable to them (Hanson & Holmes, 2014; Anon & Author A, 2020), and as Baroness Hale noted the intention in England at least had been to situate these matters outside of legal family proceedings. Young people may be beyond the control of their parents as a consequence of these harms, but this is not the same as these harms occurring because a young person is already beyond parental control (Author A & Anon, 2022). In these scenarios, social work practices that assess the capacity of parents to protect, and intervene to build parental capacity, are likely misplaced.

Finally, and associated still, are the extra-familial contexts and relationships relevant to young people's experiences of harm/protection. Social work practices in England that assess and intervene with parenting, often screen out peer group, school, or public space contexts where young people come to harm or seek safety (Anon, 2020). While criminal justice interventions have been drawn upon to disrupt contexts (Home Office, 2019), this does not necessarily equate to safeguarding the welfare of young people (who may leave one context and move into another where they are even more unsafe as a consequence of such disruption). An absence of effective responses to extra-familial contexts has seen social workers rely on out-of-home care, or in the most severe situations the deprivation of young people's liberty via secure placements, to remove young people from unsafe contexts (Ellis, 2018; Author A, Anon, & Anon, 2022). While these interventions often provide physical safety, they also disrupt young people's safe and protective relationships with family, peers and/or professionals (Author A & Anon, 2022; Anon, Anon, & Author A, 2023)

In short, when it comes to young people impacted by extra-familial harm, child protection processes are limited in that they: foreground parental, rather than a young person's, consent; assess parental responsibility, attribution, and capacity to protect; and fail to assess and respond to extra-familial contexts/relationships.

Child protection and adolescents – global questions and challenges

Far from being unique to an English context, the features of child protection systems outlined above, and their potential/actual shortfalls in respect of adolescents, are found internationally.

Whether they adopt a family support, or assessment and investigation, model, child protection processes in many European countries, in addition to North America and Australia, are designed on the assumption that a) the state intervenes when (in)action from parents/carers is a source of risk and b) that the role of child protection professionals (largely social workers) is to work with parents/carers to increase protection (Gilbert , Parton, & Skivenes, 2011; Merkel-Holguin, Fluke, & Krugman, 2019).

In international comparisons of child protection systems, thresholds for state intervention are described with reference to parenting capacity, and system practices are often characterised by parental assessment and consent (or lack thereof) (Merkel-Holguin, Fluke, & Krugman, 2019). David Lätsch and Tim Tausendfreund's ongoing work on social work during the Covid pandemic in Switzerland, for example, has identified the challenges of using child protection systems to safeguard adolescents. In their paper, *Who is being helped? The challenge of including adolescents in child protection*, (2022) they note how adolescents do not view child protection processes as relevant to them, and viewed social workers as professionals who worked with, and for, their parents, rather than for them. This is despite the social work interventions being initiated due to concerns for those adolescents.

In terms of extra-familial harm, Jennifer Musto's account of a Court of Care in California, North America, describes efforts to reduce a focus on parenting in child-welfare decisions for young people who have been exploited. Interventions made available at the court target young people, rather than their parents. However, Musto notes that accessing these services 'requires their parents to concede that they are unable to protect their child but not at fault... the pipeline to services is conditional on their parents' acknowledgment of their 'failure to protect'' (2022:13-14). The legislative framing of the court's work remains wedded to parental responsibility, or the relinquishing of it, mirroring family-centred legal frameworks to protect adolescents in England.

Finally, we see the use of out-of-home care, and secure facilities, in a range of countries for young people who have been exploited (Aussemsa , Muntingaa, Addinkb, & Deddinga, 2020; Dierkhisinga, Walker Brown, Ackerman-Brimbergb, & Newcombeb, 2020; McKibbin & Humphreys, 2019). This type of intervention is symptomatic of situations in which professionals remove young people from unsafe situations (and in some instances control their behaviour/decision-making such as going missing), rather than intervene in contexts where they are unsafe.

Challenges with where child protection systems locate harm/protection, and therefore what they assess when protecting adolescents and/or responding to extra-familial harm can be found beyond England. In this paper, we present efforts in three parts of England to address these challenges by piloting alternative child protection (ACP) pathways for young people at risk of significant extra-familial harm. We discuss the results of their work with reference to features of child protection systems outlined thus far; asking what they suggest about the sufficiency of legal and practice frameworks that guide such systems in situations of extrafamilial harm.

Methodology

The overarching study

In this paper we report findings from a subset of data collected during a three-year study into children's social care responses to extra-familial harm. The study used embedded, action research in nine children's social care departments (sites) in England and Wales, to design,

pilot and embed a Contextual Safeguarding approach (Anon, 2020) to extra-familial harm. Contextual Safeguarding is a four-part conceptual framework recommending that childwelfare systems:

- a) Target the contexts (and social conditions of those contexts) in which extra-familial harm occurs
- b) Respond to contexts (peer groups, schools, public spaces) where extra-familial harm occurs through a child welfare, and where required child protection, legal/policy framework, as opposed to solely a criminal justice /community safety one
- c) Feature partnerships with individuals and agencies who can influence the nature of extra-familial contexts (such as retail, hospitality and waste management services in shopping districts, or park gardeners, dog walkers, other residents in parks)
- d) Measure the impact that social work, and wider safeguarding responses, have on the contexts where extra-familial occurs (and not solely the individuals affected by it)

In 2019 five sites England and Wales began work with a research team to convert this conceptual framework into a system-wide operational response to extra-familial harm. In 2020 four further sites joined them. All nine took a three-phase approach:

- Phase 1 Create an on-paper version of Contextual Safeguarding in the site: research team use a range of qualitative embedded methods to map the sites current approach to extra-familial harm and assess alignment with Contextual Safeguarding.
 Professionals from each site identify which elements of the mapped approach they want to amend, and how, to increase alignment with Contextual Safeguarding.
- *Phase 2 Pilot the on-paper version of Contextual Safeguarding created in Phase 1*: professionals in the site agree system change activities they wish to pilot, and the research team document those activities (and the steps taken to implement them)

Phase 3 Embed changes piloted in Phase 2 to sustain Contextual Safeguarding:
 Researchers assess Phase 2 activities against the Contextual Safeguarding framework and support professionals to identify which practices, processes, systems, and cultures they wish to embed into their system to sustain the approach

The system-wide progress made across sites has been reported in other publications (Author A and Anon, 2022, Author A and Anon, 2023 Forthcoming). In this paper we report results of a specific system-change activity piloted in three sites during Phase 2.

The sub-study: Child protection pathways for extra-familial harm

In all sites it was clear that some instances of extra-familial contexts/relationships posed a risk of significant harm to young people's welfare. The significance of the harm was such that, if it was attributable to the (in)action of parents/caregivers, a response would have been planned via a traditional child protection pathway. However, without such attribution, during Phase 1 of the project all sites appeared uncertain on the role(s) of social workers in responding (Anon et al. 2021). On occasions where social workers were involved in a response, their role was to target parents, and their capacity to protect young people, without consideration of extra-familial contexts/relationships that harm was occurring. These features of site responses were misaligned to the Contextual Safeguarding framework as they; a) did not target contexts associated with extra-familial harm; and b) did not draw extra-familial contexts into child protection processes. Three sites opted to focus on this conundrum as one of their Phase 2 pilots. Each designed an alternative pathway for child protection responses to cases of significant extra-familial harm.

The first site opted to use their existing child protection pathway (that which was usually reserved for harm attributable to parenting) in cases of significant extra-familial harm. They introduced new activities into this pathway, such as 'context weighting' to prompt professionals to explicitly consider all contexts that may be impacting a young person's safety and agree which one held the greatest weight of influence. They also made concerted efforts during child protection conferences to note when harm was not related to parenting and instead attributable to extra-familial factors. All the main features of a child protection pathway however – the terms used to categorise plans, the structure of the meetings, the assessments used to inform discussions, the structures of the reports written by professionals and the approach to engaging parents/carers in planning – were untouched.

The second site initially opted to amend their voluntary s.17 processes to include some elements of a child protection pathway, for cases of significant extra-familial harm. As noted in the background section of this paper, s.17 processes are usually used for children and families in need of support but not at risk of, or experiencing, significant harm; and therefore, the parental engagement is voluntary rather than compulsory. This site wished to maintain the voluntary nature of s.17 processes in their alternative extra-familial harm pathway, as they believed: a) the active engagement of young people and families in the planning process was critical to its success; and b) that their child protection processes were too focused on parenting to be useful. Their proposed amendment was to attach a child protection-style 'conference' to s.17 processes when developing plans for young people who were facing significant extra-familial harm. They believed this amendment would provide the robust resourcing and engagement from partners they required in these cases. However, as piloting commenced professionals in the site became anxious about intentionally overseeing cases of significant harm outside of child protection processes. As such they made a last-minute decision to take an approach similar to the first site and use their child protection processes instead, with some small amendments to delivery such as using an alternative planning template that they had originally designed for use in their s.17 model.

The third site redesigned their child protection processes for cases of significant extrafamilial harm, to create a 'Risk Outside of the Home' (ROTH) Child Protection pathway. This pathway was reserved for cases where the principal risk of significant harm was extrafamilial. For young people who were at risk of extra-familial and familial harm, and familial harm was the principal concern, traditional child protection processes remained in the place. Key features of this pathway included: new reporting templates for professionals where they were explicitly asked to provide information on the contexts where young people were at risk of harm (and not just information on the young person and family); a restructured conference agenda in which a young person's views were shared first, followed by a parent/carer and then professionals, and where the parent/carer and young person were invited to reach a conclusion about whether the harm in question was significant; conferences where chairs asked all participants where a young person was safe or unsafe, and with who, as the key structure for meetings; a new term used to categorise plans, in short a 'ROTH' category. This process maintained some key features of a traditional child protection pathways including: a statutory, rather than voluntary, legal footing (i.e. built upon s.47 of the Children Act); an independent chair to convene planning conferences; fixed timescales to reviews plans; and the establishment of a core group of professionals to oversee delivery of a plan.

Despite their differences, all pathways were coordinated by social workers, to respond to situations of significant extra-familial that were not attributable to (in)action of parents and were built upon s.47 of the Children Act 1989. Pilots ran for 4-6 months between June 2021 and February 2022. Four researcher collected pilot data.

The dataset

Data was captured via; pilot documentation (such as guidance documents, assessment/ reporting templates); observations of conferences; interviews and focus groups with professionals involved (see Table 1)

	Site 1	Site 2	Site 3
Pilot documentation	1	6	15
Observations	3	3	2
Interviews	2	1	1
Focus Groups	1	2	3

Table 1 Dataset for sub-study

Focus groups and interviews were conducted and recorded online using Microsoft Teams. Recordings were transcribed after which audio recordings were destroyed.

Observations were also conducted online using Microsoft Teams. A researcher would introduce themselves to meeting participants before switching off their camera. They wrote their observations on a template that featured space to record: the purpose of the meeting; participant roles; the researcher present; what was said, and how, sometimes verbatim or by summarising discussion points or decisions reached; the key actions agreed in terms of planning support for the young person and/or intervening with any contexts identified; the desired outcomes of the plan; and the researchers immediate reflections on what they had observed, including discourse/actions that aligned or not with Contextual Safeguarding.

Analysis

Initially, data collected for each pilot was analysed as part of wider datasets collected from their respective sites for the purpose of assessing progress in implementing Contextual Safeguarding (Author A and Anon, 2022).

For this supplementary study, we drew together data collected from the three alternative planning pilots into one dataset, to ask specific questions about a) the nature of ACP responses to extra-familial harm, and b) what these alternative processes suggest about how child protection responses to extra-familial harm may be conceptualised, proceduralized and practiced.

In respect of the first question, about the nature of ACP responses to extra-familial harm, we asked the following sub-questions of the data:

1. What was the rationale for the pilots?

1.a. What definitions/language were used to explain the rationale?

- 2. How did participants understand/communicate the purpose of the pilots?2.a. What was the purpose they communicated?
- 3. In delivery of the pilots, what was the ask, and nature of, partnerships with:
 - 3.a. Professional agencies
 - 3.b. Parents/carers
 - 3.c. Young people
- 4. How was the social work role constructed in the pilots?

We explored these questions through two stages of analysis. Firstly, we coded observation, interview, and focus group data in NVivo 12 using codes correlated to the six questions above. We manually reviewed the results from this coding exercise to identify themes in each code. Secondly, we used a Framework Analysis (Richie, Spencer and O'Connor, 2003) to group themes initially identified under each code and detect points of convergence. For example, were there particular themes under purpose of the pilot, definitions used in the pilot and the role of social work in the pilot that could be grouped together to communicate an overarching finding about ACP pathways? Through this process we identified five descriptive features of child protection processes extra-familial harm (features that distinguished them from traditional child protection processes) and considered these in the context of wider pilot documentation that we also reviewed manually. We present these

features in the findings section of this paper, before discussing them with reference to the legal underpinnings, and policy frameworks, of child protection systems outlined in background section. In doing so we identify features of these alternative pathways that align with or disrupt existing child protection paradigms, and the implications for policy and legal child protection frameworks that guide responses to extra-familial harm.

Ethics and Limitations

This study received approval from ethics panels at ANON University and ANON University; the early stages were completed at the former institution and the final stages at the latter. Ethics approval considered: consent for observations, focus groups and interviews; anonymity and redaction; the rights to withdraw from the study; and researcher welfare, given that researchers heard to accounts of significant harm experienced by young people.

Data for this study was collected in three parts of England in 2021-2022. It is used as representative of three attempts to pilot alternative responses to extra-familial harm; alternative to what is outlined in statutory child protection guidelines in the four UK nations. The national or international relevance of the study is demonstrated through discussion of this data with reference to legal/policy frameworks that guide social work with adolescents and child protection responses to extra-familial harm, detailed as background to this paper.

A key limitation of this study was that, while young people and parents were present at some of the meetings observed, and their thoughts expressed in those meeting captured by researchers, there was not capacity in the research team, or time within the pilot period, to receive direct feedback from young people and parents who participated in pilot pathways. As such, the findings in this paper largely represent how professionals, and researchers, viewed and experienced ACP pathways.

Findings

ACP responses to extra-familial harm differed to traditional child protection processes in terms of:

- 1. Where the pathway was focused
- 2. The extent and nature of familial engagement in the pathway
- 3. The responses the pathway generated
- 4. The roles occupied by professionals, parent and young people in the pathway
- 5. How the power of statutory agencies was used and/or challenged

As outlined in Table 2, these characteristics were identified to varying extents in answer to

the six questions posed by the study.

	Theme	1.Focus of pathway	2.Familial engagement	3.Response generated	4.Roles	5.Power
Research question						
Pilot rationale / definitions used		Focus unable to hold potential overlap with EFH and familial harm	A common understanding of the harm facilitated parental engagement	The extent to which categories indicated an extra-familial response	Insufficient data – no theme identified	Address legacies of how harm has been conceptualised
Purpose of pilot pathway		To broaden the focus of assessment and planning	To facilitate parental engagement	To produce differently targeted plans	To safeguard young people across a victim / perpetrator overlap	To respond to broader issues that had been out of scope for social work
Partnerships with a) Parents b) young people c) agencies		 a. Facilitated by focusing beyond parental (inaction) b. New/increased focus on young person (their behaviour and situation) c. Focus created a role for non-traditional partners 	a. Parental engagement improved via the pathway	 a. Surfaced tensions between parents and policing requiring a response b. Highlighted gaps in services required to build relevant response 	 a. Positioned parents/carers alongside professionals c. Reframed the ask of traditional partners and the partners considered important 	 a. Restored relationships after negative / blaming experiences b. Enabled new perspectives on source of risk not always aligned with professionals c. Surfaced tensions in power between policing and other agencies

Role of	Social work	Social work	Social work	Reframes the	Requires social
social work	focus beyond	role not	intervention	role of social	workers to
	assessment of	associated with	required	work in respect	redirect their
	family	parental blame	beyond	of advocacy	statutory powers
		-	parenting	-	• •

Table 2 Results of framework analysis

Below we summarise each of the five themes with reference to data from observations, focus groups and policy documents, before applying these results to the four research questions. We then discuss what these results collectively suggest about how child protection systems are conceptualised, legalised, and practiced – and the implications of this for social work responses to extra-familial harm.

Focus of the pathway

Meeting observations, and participant accounts, consistently described a notable difference in the 'focus' of ACP pathways. ACP pathways appeared to look beyond assessment of, and recommendations for, parents/caregivers, a focus that professionals in all three sites ascribed to traditional child protection pathways.

The role of social workers was critical in this. In ACP pathways social workers assessed risks/safety beyond, and faced by, families – rather than solely (or principally) assess risk/safety within or created by families:

I'd probably say it's essentially the same as an initial Child Protection Conference, however, rather than focusing on the risk with parents or carers you're kind of more looking outside of the home (Focus Group 49)

I also think as well, because obviously with a child protection [ACP Pathway}, we're not making any judgements or opinions on people's parenting, and what's going on within their home. (Focus Group 48)

In some respects, this changing role was inevitable given a key purpose of piloting an ACP pathway was to broaden the focus of assessment and planning to incorporate extra-familial contexts and relationships where young people were at risk of significant harm:

Some [contextual] interventions discussed, safety planning, peer mapping... the social worker/exploitation worker...were pushing for those contextual interventions rather than falling back into parenting e.g. parent support" (Observation, Researcher Notes, 2A)

We also wanted to look at other contextual dimensions, things like peer groups and locations so we built that explicitly into the plan... Well, I think for me it's all of those wider issues for adolescents particularly front and centre. Because I think previously we've always looked at kind of children meeting statutory thresholds and looking just at the family and the family home. And I think what this does and what these conferences do is it goes actually risk is much wider than that, it's much bigger than that. (Focus Group 44)

By looking beyond identifying/addressing parental (in)action, assessment and planning activities had space for parents to be viewed as partners in plans to safeguard their children rather than be the focus of the child protection process:

"...mum was able to give erm, a really concise view of what her, her views were on what the risks were where they were, who they were, all of those kind of things... the [child protection] chair actually, said quite a lot, you know, we must remember this is about risk outside the home and not parents." (Focus Group 48)

However, as parents were positioned more as partners, young people (both their behaviour and the situations they were in) received new or increased focus as the target of professional assessment/intervention:

Professional: in terms of myself I continue see [young person] regularly once a week and large part he engages well and as a result of that I've been able to talk about risk and consequences and, and he understands that but at the same time sees the allure of being seen by his peers (Observation 1A. researcher notes of professional account)

Because like I say, a lot of the time we're looking at the parent, their behaviour, the impact on the kids but you know with this style of conference you really get to also see the weight and impact on this young person and also the, what the, the fact that this is not who they are, this doesn't make them who they are, they have aspirations, they have talents, like they're more than just a gang member or whatever, do you know what I mean? (Focus Group 45)

The alternative focus of an ACP pathway required social workers in all pilot sites to engage non-traditional partners (beyond health, policing and education) who could create safety in extra-familial contexts. However, with the exception of partnership with parents, this change in focus was an ambition, clearly communicated in guidance documents for example, rather than a reality in observed meetings.

This conceptual and practical change in focus presented a definitional for ACP pathways. Rather than be characterised by a broadened focus that included extra-familial contexts as well as families (as a source of harm), ACP pathways were typified by a shift in focus (conceptually if not always in practice) away from challenges/harm within families and towards challenges/harms in extra-familial contexts. This presumed a clear water between familial and extra-familial harm that professionals did not always consider to be present:

usually the extra-familial issues that we're facing now are predominantly on the back of intrafamilial issues that may have happened earlier in that child's life. So, whilst that might not be the current risk, that certainly is a factor in what's going on for that young person and it needs to not be not picked up in those conferences. (Focus Group 44)

But I felt on occasions that concerns in the home were being not, were not being as focused on, because of the contextualised issues and they were being overfocused on, and, and it's around that balance (Focus Group 22)

In two sites, the approach being piloted maintained nationally used categorisations of abuse (neglect, physical abuse, sexual abuse, emotional abuse) to record plans. This meant they recorded plans on an ACP pathway for children affected by criminal or sexual exploitation under the category of 'neglect'; to reflect situations where parents were not physically, emotionally, or sexually abusing their children but were unable to protect them from the harms that they faced. This approach meant that despite professionals stating that the pathway was not focused on parents, plans were still categorised in reference to parental (in)action:

Chair: so as the threshold for Child Protection has been met so the plan will continue, there is a legal planning meeting today. [mum] will be updated. Concerns in relation to category I was debating if emotional risk was...and if its physical harm, and in the absence of being able to pick numerous categories we have the category of neglect (Observation D1, researcher notes of professional account)

Familial engagement in the pathway

Introducing an ACP pathway appeared to increase the positive engagement of parents/caregivers in activities child protection processes. This increase in engagement was identified/described in reference to: a reduction in the amount of 'blame' levelled at parents for harm that occurred beyond their front doors; the positioning of parents as partners alongside professional agencies in safeguarding their children; and in the ways that parents and professionals built or shared a common understanding about both the significance of the harm in question and its source.

As the role of social workers shifted from assessing parenting capacity to assessing risks faced by families, participants described that social workers were less likely to apportion 'blame' to parents for what was happening to their children ...families felt very stigmatised going through child protection.... So, very much the way that I have, sort of, come to the [ACP Pathway], er, sort of, documents is- and agendas is about putting child first, parents second, and professionals last.... we seek to not stigmatise or blame parents, erm, in- in risk outside the home – we want to get alongside and support (Focus Group 26)

Such accounts illustrated how participants associated parental blame with the role of social workers in traditional child protection processes. All sites reported that parents engaged better, and easier, in a ROTH pathway with notions of blame and parental responsibility removed or diminished:

... the CP chair actually erm, said quite a lot, you know, we must remember this is about risk outside the home and not parents. And she, she did say that a lot throughout the conference, so mum was kind of reassured that she had to remember it wasn't about her parenting. (Focus Group 48)

One of the really massive, especially as someone who's done social work for some time, one of the really beautiful things that came out of the conference for me was that you know there is a real sense that blame is not being placed on any particular individual or group or party (Focus Group 45)

Through increased parental engagement space was created for parents to be positioned as partners alongside professionals in safeguarding their children

... it helped the parent engage a lot more. Erm, and she was asked within the conference to erm, to scale what she thought the risk was for her child... and mum was able to give erm, a really concise view of what her, her views were on what the risks were where they were, who they were, all of those kind of things' (Focus Group 48)

A shared definition of the harm considered on ACP pathways was held between social workers and parents/caregivers in all three sites. Parents were able to articulate that the harm

in question was beyond their control (and therefore defined as extra-familial), while also agreeing with professionals that it was so significant that it warranted statutory intervention.

her initial view, she just heard the CP, she didn't hear the contextual safeguarding element of it and her first response was, "I'm not sure if I want to consent to this because I don't want my children to be taken away". And that's why I had to highlight, "Actually in fact, the concerns we have are outside the family home and because of those concerns, we do need to protect your child, that's the purpose of the title "Child Protection" and that's why we've added the contextual safeguarding element" (Focus Group 45)

Having a common understanding of the problem(s) that needed attention, without that acknowledgement being synonymous with a deficit in parenting, allowed for the engagement of and partnership with working outlined previously, However, efforts to build a common understanding of harm as extra-familial was apparent even in situations where a separation between extra-familial harm and familial challenges was less clear cut (as noted above). In these scenarios ACP pathways did not always provide space to recognise and address challenges that were familial as well as extra-familial.

Response generated by the pathway

The intention of ACP pathways was to generate responses to extra-familial harm that intervened with contexts beyond families, rather than with parents/caregivers. All three sites demonstrated this intention, in both how pilot participants described their pathway and in the documents that sites used to support the pilot process. However, practice observed during the pilot period indicated that this intention was rarely realised. While ACP pathways generated a reduction in responses that targeted parents, they did not always generate an alternative response to extra-familial contexts, or systems/structures, associated to extra-familial harm. Focus group participants stated that ACP pathways were introduced, in part, to produce plans that differed to those facilitated by traditional child protection processes.

... we changed the reports, um, that we sent to professionals, to agencies in terms of tailoring them a bit more specifically to pull out the contextualised safeguarding issues. So, we specifically asked questions around, you know, where do you feel the biggest risks are for this child or young person? their peers in school, in their community, their neighbourhood's etcetera etcetera, to try to tease those things out?' (Focus Group 17)

Plans were expected to feature responses that addressed risk factors beyond parenting, facilitated partnerships with families, and acknowledged that a different set of partners, or different actions from similar partners, may be required to bring about safety for young people. However, only one site appeared to achieve this. In that site, a change in the nature of social work intervention was illustrative of the different responses that were possible on an ACP pathway. Positioned alongside parents, in assessment of what they faced, rather than what they were doing, social workers were expected to coordinate interventions that built safety around families rather than within them. For example, in one case a social work intervention included a detailed critique of the decision made by an education provider who had asked a young person not to attend college as they could not guarantee their safety while they were there:

Social worker: this needs to be a learning curve – we can't change the situation for [young person] but the safety measures need to be looked at in the future why was the perpetrator not removed. That is what I am struggling with personally... (Observation 1A, researcher notes of professional account)

The repositioning of parents as partners also surfaced tensions between the views of parents and the police in agreeing the direction of support plans. On some occasions parents and the police did not agree on the situations young people were facing, or the actions young people themselves had taken

It was absolutely awful. Same police person, police representative, same approach, again had to intervene and deal with that. It was just oppressive for mum (Interview 41)

Some parents did not feel comfortable with police presence in ACP meetings, and/or viewed the police as a source of harm rather than protection for their young people:

And there's some real challenges for us I think, in terms of the police role at conference, in terms of how we get that right...We need their input, we need them on board in terms of the plan etcetera, but there's some real challenges around how parents and families and young people view that, when they've often had really long complex histories with police, when there are significant differences of views etcetera (Focus Group 17)

However, social work interventions with services and systems, rather than with parents, were novel in this pilot period. For the most part social worker responses featured a reduction in interventions with parents, but this did not equate with an increase in interventions that targeted contextual, system, or structural sources of harm. Participants commented that this was in part due to a lack of relevant responses/services to address the extra-familial factors identified through ACP processes, alongside under-developed relationships with non-traditional partners who could play a role in creating safety for young people in public spaces, school environments and peer groups:

The poor social workers, if they've got a criminal exploitation case on their case notes, they are stressed, because it's like, "What do you do?" And so what we have to do then is we do all the process-y stuff, don't we? We have the strategy meetings, and then we have that meeting, and everyone feels like, "I've done everything I need to do in order to cover myself." But we almost

need permission to deal with risk. We almost need permission that we can think outside the box (Focus Group 17)

Another challenge really is about services. I think services is a real issue because you might have parents who say, "I want more than this" or, "I need more than this to keep my child safe" you know? So, in the normal realm of child protection we have a range of the things that we can do that are very generic. In contextualised safeguarding, because it is all very new and because different local authorities are doing their own thing ... t is not clear yet what services can be generally implemented and are evidence-based to be able to work. (Focus Group 45)

In this sense ACP pathways evidenced where responses/interventions were required, and why parenting interventions were likely to be insufficient at best and problematic at worse. However, the services that young people and families required, and occasion asked for, were rarely available; creating the potential to undermine the capacity of ACP pathways to facilitate young people's positive engagement.

In the two sites that made no changes to how they categorised the harm in question (outlined previously), many plans produced during the pilot were categorised on the grounds of neglect; with neglect used to denote the inability of parents to effectively respond to harms beyond their control.

R: Because, its difficult really, when it isn't the parents causing the harm, but yeah, the parents sometimes feel that they're the ones who are being blamed. ...

M: Um, what category do you usually end up using?

R: ...I think people just normally go for neglect, because it seems to encompass everything. (Focus Group 22)

Whereas, in the site that introduced a 'risk outside of the home' category, professionals consistently challenged each other to consider whether their response was addressing those extra-familial sources of risk/harm, and whether safety had/would increase as a result of the proposed response

When a parent is doing everything they can, and the young person is still at risk, where we think, what do we tick? We can't say risk of neglect, mum isn't neglecting them. It's the village that raises the children, and we all have a duty to safeguard children (Observation A2, researcher notes on professional account)

Roles that are reframed in the pathway

Having a different focus, increasing parental engagement, and the potential to generate alternative responses to harm, meant ACP pathways reframed (and were facilitated by a reframing of) various roles.

Firstly, the role of professionals within children's services, particularly child and family social workers and youth justice workers, were geared towards advocacy. For social workers this was a reframing from assessing the deficits of parents, to advocating for what parents needed. For youth justice workers this meant reframing from assessing likelihood of a young person reoffending, to advocating for service responses that created contexts/conditions in which young people were less likely to offend.

So, in terms of like advocating for, for mine [social worker] and [youth justice worker's] family, we were able to, to get their opinions, get their views and actually know what they probably respond to some of the things that were being said. Erm, so we were able to, I, me personally, I'm not one to really challenge erm, but I felt like I could challenge (Focus Group 48)

For the professional network as a whole, ACP pathways were intended to support young people who were viewed as both victims/perpetrators, rather than solely to support young people who were being victimised (by their caregivers). As such the pathway had to provide space for young people's challenging behaviours, and not reference these behaviours as offering any reason for reducing professional efforts to protect them. Professionals involved

in ACP pathways were there to identify opportunities to protect a young person, including a young person who may also pose a risk of harm to others:

...having quite a lot of arguments with them and actually how to approach this young person. Like, yes, you may seem them as an offender, but actually at this, this instant they're a victim. So, they need to shift their mindset a little bit, and, and not target the young people and actually take a little bit of a different approach (Focus Group 29)

As demonstrated in previous sections, roles of parents/carers and existing/potential partner agencies were reframed also in ACP pathways.

Parents/carers were often positioned alongside professionals (particularly social workers) in assessing risks and developing/agreeing plans, rather than being the target of said assessments/plans. Secondly, parents/carers acted as potential assessors of the actions taken by other partner agencies, including challenging conclusions some agencies reached, especially the police and education.

This reframing of the role(s) played by parents was reflected in turn by roles adopted by other partner agencies. For example, traditional safeguarding partners (education, police, health) were not only asked about providing support to young people but were also asked about the roles they played in creating safe or unsafe extra-familial contexts. Such an approach surfaced insufficiencies with what these agencies could offer by way of response. ACP pathways in all three sites were hampered by a lack of services needed to create safety in extra-familial contexts, compared to those that were available to intervene with families. Partnerships with private, voluntary and statutory partners who were better placed to intervene with extra-familial contexts were required to build effective responses, and no participating sites had established these.

Social work power and legacy in the pathway

Finally, power-relations that characterise the relationship between social work, other statutory agencies, and families in child protection processes, and the legacy of this, were challenged and on occasions reframed during ACP processes.

Participants stated that one reason to introduce ACP pathways was because social workers, and wider partnerships, needed a mechanism to respond to harms/abuses that were caused by issues beyond the capacity or behaviour of parents/caregivers; issues that had been framed as out of scope in child protection processes previously.

we were stuck a little bit, because social workers were then not seeing what their role was, because the risk wasn't in the family. Especially those cases where the parents look like everything's OK in the home. Social workers didn't know what to do with that... So we were hitting a barrier around that in terms of what their particular role is and what's needed intervention. (Focus Group 17)

Introducing a role for social work that was beyond parenting, disrupted the status quo of child protection in the three sites, and the parameters of social work intervention in this respect, even if each site had varying degrees of success in enacting this intention.

As the role of social workers changed and included increasing advocacy on behalf of parents and young people (demonstrated in earlier sections), some used their statutory powers to enquire (s.47 Children Act 1989) to surface concerns about the actions of partners as well as any actions of parents. Their duty to assess and coordinate plans to safeguard and promote the welfare of young people (Children Act 1989) was also enacted, but in ways that sought to coordinate partners around extra-familial concerns, rather than around concerns related to parenting. The different ways in which social workers enacted their powers, and the broadening scope of child protection processes, went some way to restore negative parental experiences of social work:

'So, she [mum] was very anxious, the minute you talk about social work, she'd start crying. Erm, they'd had a single assessment done previously, and she just didn't want anything to do with it. Erm, but actually she, she's engaged amazingly throughout the whole process, and I think that is again, to do with the reassurance that it's got nothing to do with her parenting, and actually, we've got no concerns for her.' (Focus Group 49)

As noted previously, this restoration appeared particularly connected to the attribution of blame, with ACP pathways explicitly moving beyond the idea that all harm (including extrafamilial harm) experienced by children was in some way attributable to the care provided by parents:

'I also think as well, because obviously with a [ACP Pathway], we're not making any judgements or opinions on people's parenting, and what's going on within their home. So, we're able to build that relationship very quickly, compared to if we're doing a, a standard child protection conference.' (Focus Group 48)

All three sites stated that they hoped an ACP pathway would create space for new perspectives on risk and safety to be shared; particularly the perspectives of young people.

'And we have a couple of, we had a couple of examples where young people participated in the conferences, one in particular where the young person came and stayed and participated in the whole conference, and asked questions of agencies etcetera, etcetera. And that was really good, and you seem to get a lot from that.' (Focus Group 22)

However, as noted previously an increased focus on the actions taken by young people, and limited access to the services/responses young people said they wanted, undermined young people's full and consistent engagement in ROTH processes, and the extent to which their wishes could be prioritised.

With a shifting use of social work powers, and the space for young people's perspectives to be shared, ACP pathways also surfaced tensions between young people/families and the police, particularly (as noted previously) in respect of what was known about young people and the risks that they faced. Creating the conditions in which

families or young people could query police 'intelligence' and/or offer alternative accounts of the risks in question shifted the power dynamic between the police and young people/families in some circumstances:

Chair states that there is often 3 sides to a situation; one side, the other and the police report: Mum questions why presenting with the police information as if it is the facts and asks why her reports are not included in the update from the police (Observation F1, researcher notes)

In respect of both the power held by social workers and by the police therefore, pilots shone a light on how young people and families had previously experienced those agencies as well as created the conditions to reframe that dynamic. Moreover, the engagement of parents/carers, and to a lesser extent young people, in ACP pathways evidenced gaps in what statutory partners knew or understood to be risks to young people. The knowledge held by parents and young people was valued, sometimes over and above the knowledge offered by professionals; and young people and parents contributed that knowledge in pilot sites that successfully positioned them as partners in safeguarding. In doing so, established relational patterns between partner agencies were also disrupted, for example partnerships between police and social work, further destabilising established power relations within child protection processes (or having the potential to do so).

Responding to the study questions

All three sites communicated a dual *rationale* for piloting an ACP pathway. They wanted a pathway that both, provided an escalatory route akin to traditional child protection in cases that posed a *significant* risk of harm, <u>and</u> recognised that the source of harm was distinct from that associated to traditional child protection response. This dual rationale was evident across all five features of ACP pathways identified through the framework analysis.

The *purpose* of ACP pathways was aligned to this rationale. ACP pathways were designed to broaden the focus of child protection responses beyond parenting and reduce the extent to which parents were considered responsible for (or the sole solution to) the harm in question. In this sense the purpose was to shift the focus away from parents in systems previously used to focus on them. However, the this was largely realised through an absence of what was common to traditional child protection pathways, rather than in relation to any new focus that ACP planning generated.

In terms of the *ask of different partnerships*, our analysis identified a number of gaps as well as points of progress. The types of agencies engaged in ACP pathways remained largely the same as in traditional child protection processes. Statutory agencies dominated all meetings, and very few alternative or non-traditional agencies were asked to participate. One site made alternative asks of traditional to partners during meetings, for example challenging a college on student safety within their setting rather than solely asking about an individual young person's attendance at the setting. However, very few partners were asked to respond in ways that changed the contexts in which young people encountered harm and were instead still mainly tasked with requests for services for individual young people and families.

The most significant shift in partnerships appeared to be with parents/caregivers. All pilots were designed to alter relationships with parents and position them as partners alongside professionals rather than the subject of the pathway. Efforts to sustain parental partnerships, however, also raised questions about the feasibility of ACP pathways. In particular: the tendency across to exclude any recognition of challenges or vulnerabilities within families on ACP pathways in order to protect a partnership position; and the fact that some pathways maintained traditional child protection features focused on parenting (such as how plans were categorised).

All three pilots illuminated how partnerships between professionals and young people are both essential to any ACP pathway and also the most complex to establish. While two sites created the conditions for young people to participate in some meetings and contribute in-advance of others, reducing a focus on parenting as source of harm, magnified a focus on individual young people as a point of intervention (rather than contexts in which they were unsafe). This potential consequence of ACP pathways required far greater thought and preparation than the pilot period afforded; and was in part dependent upon the ability of participating sites to generate plans that sufficiently targeted contexts and relationships beyond family homes. An increased focus on the behaviour of young people emerged in the gap created in plans that had a reduced focus on parenting interventions without an alternative focus on extra-familial intervention.

The *role of social workers* in ACP pathways differed to that which they occupied in traditional child protection processes. All three sites attempted a pathway in which social workers were alongside, rather than holding scrutiny, over families. Social workers were also positioned (either conceptually or practically) as advocates for young people's access to services and/or for challenge to partner agencies. In the process of these adjustments, changes were observed in the practice of power relations between social workers, families, and wider partnerships, and how these manifested in the practice of 'parental blame'. On an ACP pathway, social workers were positioned to hold services responsible for protection, rather than families. Noticeably this transference in responsibility to services did not necessarily result in a transference of 'blame' to services. At best notions of blame were removed from ACP pathways, with a recognition that the sources/dynamics of the harm in question were complex and rarely easy to attribute to one source. At worst young people blame was inadvertently transferred to young people; not verbally, but in the actions taken by

professionals involved in meetings and the nature of the plans produced which both overwhelming focused on altering young people's behaviour.

Discussion

As noted in the title of this paper, ACP pathways were thought to give sites what they 'needed': namely a process through which to recognise incidents of significant harm impacting young people's welfare that were not attributable to the actions of their caregivers. However, in meeting that need, ACP pathways trouble features of existing conceptual, legal and practice frameworks that guide child protection processes.

Firstly, many child protection systems, including those in the UK, are built upon a notion of state intervention into *family* life when (in)action of *caregivers* poses a risk of significant harm to children and young people. ACP pathways remove both these notions. Firstly, they seek to intervene in young people's extra-familial lives (including with peers and in public spaces), and secondly, they do so when they are at risk of issues that cannot be attributed to parental (in)action. This approach was made feasible in pilots due to the legal basis for completing enquiries in England (s. 47 of the Children Act), which does not specify the origin of the harm in question, only that it be significant. In this sense England's legislation did not prohibit what ACP pathways attempted. However, the interpretation of the wider act into statutory guidance and practice frameworks binds s.47 enquiries to assessments of, and interventions with, parenting. Furthermore, legal escalation beyond child protection processes, for example seeking a care order if risks are not addressed or continue to escalate, does centre parenting, and results in an intrusion in familial, rather than extra-familial, life.

Escalation is not the only place we see a divergence between what legal and practice frameworks currently afford social workers and what ACP pathways sought to deliver. Duties placed on partners, to work with social workers (local authorities), relate to the provision of services to children and families and participation in enquiries. This is interpreted into practice frameworks to require partners to share information about children and families during periods of assessment, as well as provide services that they need. Neither the legal framework, nor the practice framework, explicitly identify the provision of services into extra-familial contexts and/or the need to identify/address system or service level harms. ACP pathways required services that targeted extra-familial contexts, and these were rarely available. They also had the potential to, and on occasion did, identify and challenge partners to address system, rather than interpersonal, harms. It is far from clear whether the legal duties provided for in England's child protection legislation, in the UK nations more widely, or elsewhere require (rather than fail to prohibit) such an interpretation of duties on partner agencies.

Finally, ACP pathways appeared to reduce the division between youth/juvenile justice and child protection frameworks; in short required the opposite of what was intended by the Children Act. They required professionals to respond to young people who both posed a risk of harm and were at risk of significant harm themselves in the same situation. The division attempted by the Children Act assumed that child abuse was a familial issue, and that offending behaviour was an extra-familial issue; two different sources, two different targets. And yet in cases of extra-familial harm both the risks posed to young people and risks they pose others often emanate from the same source(s) or driving factors.

However, in trying to address these interconnected matters we saw ACP pathways increase focus on young people's behaviours, reduce a focus on parenting, and often fail to address extra-familial, contextual, or structural issues. This is somewhat unsurprising in that child protection processes were designed with a focus on parents, and youth justice systems were designed to proceed against individual young people. Both systems were designed upon assumptions of individual responsibility, and risk and protection being situated within that responsibility. In England this is reinforced through a criminal age of responsibility being set at the age of 10 years old (compared to between 14 and 18 years old for most other European countries).

While not explicit in the rationale provided, a feature of ACP pathways was reimagined notions of 'responsibility' for child protection. ACP pathways required a legal and practice basis that recognised the responsibility of wider services/systems to create safety in extra-familial contexts and to address harms that they may themselves cause; rather than solely meet their duties to safeguard through a responsibility to provide services to individuals. This reimagining of responsibility came to the fore when the limits of parental responsibility were explicitly recognised; and all pilots did this.

ACP pathways therefore required a legal and practice framework that provided a basis for: social work intervention into extra-familial contexts and relationships (and a threshold for this level of intrusion); requiring partner agencies to provide services into extra-familial contexts; recognising state responsibility for young people's safety in extra-familial contexts, including through attention to service/system harms; and drawing together frameworks for addressing harms that span youth justice and child protection paradigms. In the absence of this, while the legal basis allowed for social workers to complete enquiries in response to significant harm (regardless of the source) an absence of legal/practice provisions for how to respond to such enquiries created the conditions for a myriad of implementation pitfalls.

Creating legal and practice frameworks more attuned to ACP pathways would, however, also raise questions about how we conceptualise the role(s) of social workers. ACP pathways positioned them as being alongside, rather than holding oversight over families; and the provisions outlined above would reinforce this further. Questions remain as to whether any child protection frameworks in Europe, North America or Australia that share some features with the UK are better placed to reconceptualise child protection social work in this manner.

Conclusion

To offer alternative child protection responses to extra-familial harm, social workers need to be operating in systems that reconceptualise their role, the role/responsibility of parents, and the role/responsibility of partner agencies in keeping young people safe. Legal frameworks are required that do not require harm be attributable to parenting to facilitate an escalatory response in the most severe cases, or to compel partner agencies to respond in ways that addresses interconnected nature of interpersonal, contextual and system harms. And practically, responses are required that intervene with contexts, and not solely with individuals, as a means to creating protection.

Given the varying success of the three pilots featured in this study, there may be merit in scaling the version that featured the greatest level of redesign work into further UK sites. Such scaling would help us to identify whether the progress made, in surfacing and addressing system harms, was truly facilitated by the new pathway or was more a consequence of the wider ethos/approach of the site in question. Further mapping is also required of how international child protection systems respond in cases of extra-familial harm. Variable terminology and system design makes this process challenging, but it is a critical one for identifying countries in which the conditions are more/less conducive for alternative responses to extra-familial harm.

Finally, it is important for practitioners, policymakers and researchers invested in social work to further debate the role of the profession in safeguarding children at risk beyond their families. These pilots demonstrated that when social workers mount a response to extra-familial harms their role in relation to families and in relation to wider partner agencies needs to be reconsidered. As such this work has the potential to redefine the parameters and responsibilities of social work. Some may view any redefinition as a return to the social, community and/or justice foundations of the profession; others ay view it as a conflation of social work with crime and disorder interventions and/or youth work. The question remains – when it comes to children who experience abuse or significant harm beyond their families, which profession, if any, is best placed to coordinate plans to safeguard their welfare? In the absence of clear answer young people may continue to shoulder the responsibility for own protection; a consequence completely out-of-step with the intention of the Children Act.

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