


# A line in the sand: Moving from surface improvement to foundational shifts to develop effective responses to extra-familial risks and harms

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## Abstract

For over a decade, UK policymakers have responded to global ambitions to protect children from exploitation and other forms of extra-familial risks and harms by recommending that social workers coordinate local responses. This has required a significant shift in the design and delivery of social care services. In this article, we report findings from a three-year Institutional Ethnography of six social care sites that used three innovation frameworks to facilitate this shift. We identify corresponding points of progress and challenge regarding the ability of these sites to create systems in which responses to extra-familial risks and harms were reflective of the dynamics of this harm-type; relational; and interagency. While site progress illustrated improvements in service, delivery challenges indicated an absence of shifts in service foundations. By discussing our findings in dialogue with psychosocial theories, we uncover a direct relationship between day-to-day practice shortfalls and often unseen 'ruling relations' that govern safeguarding systems of Anglophone countries. At a time when further UK policy reform is anticipated, we draw a line in the sand and recommend national and international policymakers look beyond service improvement and commit to reform system foundations to effectively safeguard young people abused beyond their homes.

**Keywords:** exploitation, extra-familial harm; innovation; safeguarding; social work

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## Introduction

Exploitation, peer abuse, weapon-enabled violence, and other forms of extra-familial risks and harms (EFRH) can significantly compromise young people's welfare (United Nations 2022; Action for Children 2024). During a 2024 UK inquiry into child criminal exploitation, the Children's Commissioner for England reflected that, addressing this issue:

has been perhaps one of the most significant **shifts** in children's social care practice since the Children Act 1989 was introduced. (Action for Children 2024: 56) (our emphasis)

Her comments came a decade after a seminal report by the UK Association of Directors of Children's Services foretold that 'a paradigm **shift**' would be required in how services understood and responded to EFRH. Such a shift seemed essential, given that EFRH—and the young people who experienced it—were often viewed as beyond the family-focused remit of UK child protection systems (Hanson and Holmes 2014); a remit shared with child protection systems in many other Anglophone and European countries (Gilbert, Parton and Skivenes 2011; Appen Nissen 2023).

The aforementioned UK inquiry identified Trauma-Informed Practice (Sweeney et al. 2016), Contextual Safeguarding (Firmin 2020), and Transitional Safeguarding (Holmes 2022) as practice/system innovations utilized to facilitate this 'shift' over the preceding decade. In this article, we report findings from a three-year 'Institutional Ethnography' (Smith 2005), which, for the first time, looked at the use of all three innovations to bring services closer to what research suggests EFRH requires. Our analysis indicates that shifts in *service delivery* are being undermined by an absence of shifts in *service foundations*—foundations enshrined in child protection paradigms reproduced by the academy, legislative frameworks, and practice models in the UK and beyond.

By discussing our ethnographic findings in dialogue with psychosocial ways of understanding social care innovation (Cooper and Lees 2015), this article uncovers the direct relationship between day-to-day practice shortfalls in responding to EFRH in the UK and the underpinning, often unseen, discourses and 'ruling relations' (Smith 2005) that govern safeguarding systems. We argue that, to resolve these shortfalls, and realize national and global policy ambitions to protect young people from abuse and exploitation (McAllister 2022; United Nations 2022), the foundations upon which many social care services are conceptualized, legislated for, and enacted, need to be disrupted and re-envisioned.

## Background

Since 2018 policy across the four UK nations has increasingly authorized social work responses to EFRH, with reforms of safeguarding guidance in England ([HM Government 2018](#)), Scotland ([Scottish Government 2023](#)) and Wales ([Welsh Government 2020](#)) and a National Action plan published in Northern Ireland ([NI Department of Health 2024](#)).

Such has been the pace of change that, in 2022, the first global benchmark looking at how countries are addressing ‘child sexual exploitation and abuse’ ranked the UK top out of sixty countries around the world ([The Economist Intelligence Unit 2018](#)). Examining the trajectory of UK policy and practice reforms, international scholars concluded that the UK ‘stands as a rare case of relative success among countries with respect to priority generation for CSA [Child Sexual Abuse within and outside the family]’ ([Shawar, Truong and Shiffman 2022](#): 12). Despite this perceived success, a 2023 review of social care in England concluded that ‘the existing child protection framework is not working for tackling extra familial harms’ ([McAllister 2022](#):105), and further substantial changes to England’s child protection guidelines are consequently anticipated. These changes would further engage with the United Nations’ 2022 statement that the exploitation of children is a ‘global emergency’, that ‘individuals, institutions and agencies that are meant to care, protect, and provide for children sometimes perpetuate this violence’ and that ‘States [should] substantiate the best interests of the child ... while addressing weaknesses in protection systems’ ([United Nations 2022](#)). Yet, authorizing something to happen, or recommending that it does, is not commensurate with its possibility. While the United Nations first published an Optional Protocol on exploitation in 2002, international EFRH research shows that the required services are routinely undermined by the systems in which they are delivered ([McKibbin and Humphreys 2019](#); [Musto 2022](#); [Koch, Williams and Wroe 2024](#)).

## Service and system responses to EFRH

Young people who have experienced or are at risk of harm in extra-familial relationships require support from relational services, ones that feature trusting relationships between young people and their parents/carers, communities, and professionals ([Coy 2017](#); [McGuire 2019](#); [Pike, Langham and Lloyd 2019](#)). They also need to be contextual; capable of recognizing and responding to the contextual dynamics of harm, and relational/structural factors that shape them ([Foshee et al. 2014](#); [Billingham and Irwin-Rogers 2022](#); [Koch, Williams and Wroe 2024](#)). Due to the developmental features of adolescence, responses to EFRH need to be youth-centred and engage with young people’s desire for

autonomy through collaborative methodologies (Hanson and Holmes, 2014; Gibbs et al. 2015; Coy 2017). Services are likely to be coordinated, if not delivered, across multiple agencies, (McKibbin and Humphreys 2019; McAllister 2022). And finally, services appear to work best when oriented to the dynamics of EFRH; for example, being able to support young people across victim/perpetrator binaries, or to protect young people from extra-familial abuse who are in relatively safe family homes (Fong and Cardoso 2010; Pike, Langham and Lloyd 2019; Action for Children 2024).

Such service ambitions require specific structural conditions. First, they are rooted in a welfare-orientated, rather than justice-led, paradigm. Moving in this direction has engaged child safeguarding systems, which were historically designed to responsabilize parents for the protection of their children, in responses to harms beyond the control of parents, and in the process has surfaced systems/legislative barriers in need of reform (McAllister 2022; Musto 2022). Secondly, in moving away from justice-centred responses to EFRH, service providers see young people whom they previously viewed as ‘delinquent’ (responsible for EFRH) as vulnerable (needing protection from EFRH). This has been more feasible for the reframing of child prostitution/solicitation to sexual exploitation (Fong and Cardoso 2010; Cody, Bovarnick and Soares 2024) than for other forms of EFRH—for example, young people criminally exploited to supply drugs or weapons (McAllister 2022; Action for Children 2024) where, as in the case of counter-terrorism (Stanley and Guru 2015) public protection goals appear to outweigh welfare goals. Finally, the approaches outlined above champion relational forms of safety, yet out-of-home care is a common intervention model for EFRH in many Anglophone and other European countries, potentially disconnecting young people from protective relationships in order to move them away from community/neighbourhood or school contexts where they experience EFRH (Degani et al. 2015; Scott, Botcherby Ludvigsen 2017; Koch, Williams and Wroe 2024).

Our study examined whether social care organizations/partnerships could address these challenges by introducing one or more of three innovation frameworks. We gathered extensive data from 2019 to 2023 through evidence reviews of social innovation and effective responses to EFRH, policy review, a practice survey, and ethnography of six sites. Ethical approval was provided by the University of Sussex. Overarching site permissions were obtained from a senior leader and specific consent from each individual interviewed or observed.

This article reports key findings from the ethnography to identify: (1) the extent to which sites successfully redesigned local systems; (2) the ways in which progress was halted, undermined, or otherwise challenged; (3) the macro-system transformations that are imperative for international evidence, global policy ambitions, and national policy

recommendations to be translated into services that safeguard young people abused beyond their homes.

## Methodology

### Data collection

The six sites were innovating service responses to EFRH based on Trauma-Informed Practice (Sweeney et al. 2016), Contextual Safeguarding (Firmin 2020), and/or Transitional Safeguarding (Holmes 2022). Each approach offers a framework of principles to be tailored flexibly to the demands/affordances of a local context but, importantly, requires radical disruption and transformation in practice methods and systems to be fully realized: trauma-informed organizational systems, interventions, and clinical supervision need to be constructed in ways that enable staff to remain emotionally engaged, develop resilience, and avoid burnout (Bloom 2005); Contextual Safeguarding demands that services identify, assess, and intervene with the social and contextual conditions, which perpetuate harm *beyond* the home and family (Firmin 2020); Transitional Safeguarding proposes a ‘joined-up’ approach to policy and practice across children’s and adults’ safeguarding systems to enable more developmentally attuned responses to young people’s changing needs and avoid system ‘gaps’ around the age of 18 years (Holmes 2022).

Fieldwork, using a range of methods (see Table 1), was conducted by researchers from two universities over two years, informed by consultative dialogue with partner organizations in the practice development sector.

### Analytic approach

The analysis in this article is drawn particularly from our online observations of multi-agency panel meetings, involving practitioners and leaders from social work, health, education, the police, youthwork, and youth justice. These panels were held regularly in each site to create and review protection plans for each young person in the locality considered at substantial risk of extra-familial harm. Most data collection took place within virtual environments as our study began in the midst of restrictive public health measures introduced in response to the coronavirus disease 2019 (COVID-19) pandemic.

We drew primarily on Smith’s (2005) Institutional Ethnography, which proposes observation of what people are doing and exploration of what they (as subjects and ‘knowers’) can tell us about what they and others are doing. The approach surfaces implicit and explicit forms of discourse, management, power, and control (‘ruling relations’) that govern,

Table 1. Data collected.

Data collection method	Site 1 Trauma-informed practice	Site 2 Trauma-informed practice	Site 3 Contextual safeguarding	Site 4 Contextual safeguarding	Site 5 Transitional safeguarding	Site 6 Transitional safeguarding
Observations of meetings	30	30	16	22	23	24
Professional interviews	23	15	16	24	22	25
Professional focus groups	6	6	0	0	3	1
Documentary review	20	56	11	45	34	8
Case file reviews	13	10	8	5	0	0
Surveys	115	169	60	80	0	0
Engagements with young people	6	0	1	6	0	0
Engagements with parents	0	0	35	0	0	1

organize, and influence everyday work lives and practices within organizations and systems (Smith 2005: 68). We produced maps of these processes at three levels: micro (the particularities of each site, its cultures, systems, and geographies); meso (generalizing beyond the particular to form inferences about ruling relations within social care or large organizations); and macro (potential learning about national policies, cultures and practices in relation to concepts such as risk, vulnerability, youth, protection, exploitation, and criminality). Psychosocial methods offered complementary insight into how emotional and psychological ‘defences against anxiety’ (Cooper and Lees 2015) commonly arose for professionals, highlighting their need for containment and mediation at organizational and system levels.

## Limitations

As the ethnography, due to pandemic restrictions, was largely conducted through observation of online meetings, we had no access to the informal interactions of everyday working practices through which the ‘flesh and blood’ sense of each site’s cultures, practices, and relations would best be captured (Forberg and Schilt 2023: 9), and risked attributing more significance to what we witnessed in bounded digital spaces. Our own observations suggested, however, that the observed practices and interactions were similar to those witnessed in-person in other areas prior to the pandemic, and this was confirmed by site leads.

Due to the pandemic restrictions, we only engaged directly with young people and parents about their participation in innovation work in the

latter stages of the ethnography, so their voices are more muted than originally intended.

## Findings

Innovation in the six sites was largely targeted at practice methods, service delivery, and organizational design. In line with the Institutional Ethnography method, we present key findings in this article via case vignettes offering emblematic accounts of progress and challenges in service innovations to address EFRH. These vignettes were constructed from observations of multi-agency child exploitation panel meetings and illustrate dominant patterns across the entire dataset of panel observations; hence, they are representative of the wider data set. Each vignette presented below is a composite summary of the meeting process as detailed in the observing researcher's fieldnotes. Double inverted commas represent verbatim quotes from professionals being observed. Single inverted commas represent fieldnote extracts. Standard text represents our subsequent paraphrasing. Through the findings presented below, we show that, for service improvement to be achieved, innovation was necessary (and often absent) in the cultural, macro-systemic, and structural underpinnings of those practices, services, and organizations.

### Two emblematic vignettes

#### *Vignette 1 (practice observation, 2021)*

Project researcher, 'Jocelyn' (pseudonyms used for researchers to guard against identification of research sites), observed an online interagency 'missing and exploitation' panel meeting where members reviewed risks and created safety plans for five young people. Each was discussed for approximately 10 min. Discussions began with either a youth justice or social worker providing an update about a young person, after which remaining panel members shared their views, designated a 'risk rating' and noted actions for their safeguarding plan. It was notable that, other than pronouns, no demographic or wider information was provided about who each young person was, their likes or needs. As a result, Jocelyn found it hard to picture the young people discussed.

Child 1 had recently become a parent and had a pending trial for possessing drugs with intent to supply. His youth justice worker noted that a 'huge step forward' had been made as Child 1 was 'engaging', could now 'regulate himself' and did not 'over-speak professionals'. Panel members discussed whether, given these changes, Child 1 should be 'stepped down to amber' (medium risk); however, they decided to keep

him on their list as ‘red’ (high risk) given the change was recent and some were sceptical about his motivations.

Child 2’s social worker announced she had little updated information, as the family ‘wouldn’t engage’ with her. Child 2 was graded as ‘red’ as he had been ‘arrested with four adults who had knives in their car’. Staff at Child 2’s school believed he was being ‘exploited to transport drugs’. Most of the panel’s discussion focused on the ‘defensive’ behaviour of Child 2’s mother and stepfather, whom they described as ‘well-known’ to the police and not sharing information with professionals. Jocelyn’s fieldnotes commented, “‘Don’t engage’ – no-one asks why they don’t have anything to do with social care, this is just accepted’, and ‘will anyone ask why mum doesn’t have faith in services... Professionals are very curious about other people but not themselves or their own organisations’. All panelists agreed provision of support would be ‘challenging’ as their work was consent-based, and they did not have consent from Child 2 or his parent(s); the panel did not discuss ways to resolve this.

By the time the panel got to Child 5, they were running over time. Child 5 was described as having ‘breached his order’ because he had ‘point blank refused to engage with us’. His social worker was leaving the organization that day and the chair recognized that this inconsistency might unsettle Child 5. Another panelist suggested that the police officer in the meeting could be the one to provide consistency. Jocelyn wrote, ‘it doesn’t seem right here that the consistent person in the child’s life is police officer and not social care worker’.

### *Vignette 2 (practice observation, 2022).*

Jocelyn is observing another online exploitation panel in a different research site. At the start, the chair thanked those who had provided written reports before the meeting, describing them as ‘really comprehensive’ and giving ‘a good understanding of the [young person’s] history and background’. The chair advised that the panel task was to ‘look at the context, peers, locations and what we can do to respond to that. See what [the young people’s] views are, family views and strengths’. The chair reminded panelists it was important to enable young people to ‘exercise their rights to be safe in [their] community’, and to do so by clarifying, ‘What resources can we mobilise to make this happen?’ and ‘Where are the key risks?’.

A social worker started by giving a broad picture of Child A, describing him as ‘really likeable... typical teenager... bit huffy but he works well with us’, before providing more details of his background and presentation. Child A, ‘known to’ social workers ‘since birth’, was described as having ‘experienced a lot of trauma and loss throughout his life’, and spending time ‘in the community... seeking out relationships... he wants to belong’. The social worker, having tried for six months, believed he



had now ‘created a relationship’ with him. Child A was said to come from an area and family which distrusted social workers and had tried to find his ‘his own safe places’ physically and relationally within his local community. The worker was concerned he could not help Child A to make ‘the choices he needs to ... change his life direction when we don’t have the support staff’. The chair praised the social worker’s focus on strengths and asked panel members if they knew the adults the young person was spending time with.

A second social worker introduced Child B, who had been accused of stabbing another young person. The street where the stabbing occurred was described as one where weapon-carrying was relatively common, but other contextual information was limited. B was friends with A, and they had been spending time in a specific location. As there was no information about their wider peer group, B’s social worker offered to ‘spend individual time with both and do some work together’. Child A’s worker offered to speak to him about ‘his version’ of what had happened. Jocelyn wrote that the social workers had ‘really beautifully put’ Child B’s situation, recognizing his strengths, asking about ‘his hopes and his family hopes’, and exploring his ‘sense of safety’ and ‘vulnerab[ility] in contexts when he’s out and about’.

Police members of the panel then offered further ‘intelligence’ about A and B, stating that they, and the adults they were with, were ‘known’. They reported that ‘relationships have not been great with local kids’, and they were now ‘trying [to] get to know the kids’. When a panelist asked if anyone was doing ‘group mapping’, the police offered to take this forward. The exploitation manager expressed concerns about the impact of ‘high police presence’ in the areas where young people spent time. The exploitation worker offered to provide information about the strengths of the group so that they could ‘pull together a community-based plan’ but admitted, ‘there’s still a lot we don’t know [and] that’s a bit of a worry’. A social worker suggested that some of the young people were keen to join the football group; they wanted ‘practical activities’ to ‘fill their time’. An interim plan was finalized to increase youth work and to look into any steps Community Safety could take in the area.

### Points of progress, points of challenge

These vignettes are emblematic of organizational progress and challenges that we came to understand through our ethnography. While different in many ways, both illustrate how sites progressed over time in the extent to which they could:

1. Respond to specific, and often contextual (peer, school, community), dynamics of EFRH, despite working within binarizing victim/

perpetrator models of service provision that often impacted the pace or consistency of their success;

2. Support young people through collaborative and trusting relationships, despite the climate of high workloads and risk aversion;
3. Build interagency responses to EFRH, in the absence of shared practice/legal frameworks, value bases or strategic aims, particularly between policing and social care.

While practice improvement was possible, the challenges experienced indicated that transformation in the foundations of social care in the UK, and in other countries with similar neo-liberal, justice-orientated, or procedural structures, was necessary to achieve a 'shift' in responses to EFRH.

### *Responding to the dynamics of EFRH*

Our research sites were in the throes of redesigning their services to better reflect the specific dynamics of EFRH. All five sites holding statutory safeguarding responsibilities had established bespoke multi-agency panels to oversee their responses to EFRH in recognition that conventional child protection processes, primarily focused on parenting, were inappropriate. The voluntary sector site brought together its previously siloed areas of service provision (for harmful sexual behaviour, sexual exploitation, youth violence, etc.) into an integrated EFRH response. These structural changes were intended to better address the dynamics of EFRH that had compromised responses hitherto, namely: (1) that EFRH predominantly occurred in relationships/contexts beyond the home and so were outside parental and professional oversight and control and (2) many young people experiencing victimization through EFRH were simultaneously involved in criminality, challenging the division of protection and justice systems.

In terms of responding to extra-familial contexts, we observed efforts to better contextualize young people's behaviours. Over time, professionals dedicated whole meetings to mapping peer relationships (observed in two sites) or planning responses beyond 1:1 casework intervention (three sites), for example, the offer of activities for peer groups. However, most sites struggled to move beyond *recognizing* extra-familial contexts to *understanding* and *responding* to them. EFRH often occurred in places that social workers never visited and were sometimes enacted by people they had not seen and/or could not name. Practices in EFRH panels masked these vast gaps in knowledge. Contextual unknowns in all sites were hidden behind jargon such as 'red-rated-risk' and accompanied by exasperated sighs, heads in hands, shoulder shrugs and blank stares, that social workers indicated during interviews might be shorthand for 'I am worried this child could die'. Panels provided a place to surface these

feelings of anxiety, fear, and worry, occasionally containing them, yet rarely facilitating responses that alleviated them.

Contextual drivers of EFRH often appeared beyond the reach of sites' safeguarding frameworks and partnerships. Consequently, social care professionals sometimes agreed to—or even recommended—interventions centred on justice responses that disrupted contextual dynamics, including increasing police presence in public places, and using police intelligence to map peer relationships. As shown in the vignettes, social care professionals raised concerns about the potential harm of such an approach, including how increased criminalization and over-surveillance of young people meant they might disperse into areas even more out of sight. However, given the perceived threat of EFRH, partnerships often foregrounded policing responses, sometimes in parallel to welfare-based work with young people and their peers (see Vignette 2).

Social workers struggled particularly with those who had 'committed offences' in the context of their abuse as they were required to both advocate for and challenge the behaviour of, the same individual, rather than splitting their emotional and practical responses between a protective approach towards a victim and a justice approach for a 'perpetrator'. This dual role was emotionally, cognitively, ethically, and practically challenging, and professionals often appeared exasperated—'I'm fed up with him ... because we've given him every possible chance' (Vignette 1)—as if the 'offending' side of the coin made the 'protecting' side harder to maintain.

Analysis across the dataset suggested the struggle to prioritize the welfare needs of young people affected by EFRH was particularly stark for young men, young people who were racially minoritized, young people impacted by serious violence from peers, and those for whom these three identities intersected. In contrast, the response to young women, particularly those who had experienced sexual exploitation and/or were white, appeared more consistently welfare-orientated, with offers of equine therapy, de-escalation activities within residential children's homes, and efforts to introduce them to supportive friendships via school or out-of-school activities.

Recognizing contextual drivers of EFRH aided professionals in identifying welfare concerns for young people who straddled a victim/offender binary. Some social workers sought to identify the contexts/situations where young people were unsafe ('his behaviour changed' depending on 'who he is spending time with'—Vignette 2), and consequently temper more punitive attitudes within their partnerships ('we need to say he is being exploited. We need to be careful about the language we use because it will frame what we do'—Vignette 1). By foregrounding the contextual antecedents of harm (streets where weapon-carrying was 'normalised'—Vignette 2) and structural ('we don't have the support staff'—Vignette 2), social workers reminded colleagues that young

people were not the fundamental source of the challenges they were facing; often contexts in which they crossed victim/perpetrator boundaries also needed a response. However, all sites were largely without the legal, cultural, or structural routes to resolve these tensions. Even if they found ways to support young people across a victim/perpetrator boundary, that boundary was still legally enforced for criminal exploitation and serious violence, and sites persisted in commissioning frameworks for ‘victim’/‘perpetrator’ services and structural forms of discrimination.

### *Capacity to provide youth-centred, relational support*

Relationships, and an (in)ability to form them, were at the heart of responses to EFRH. To respond to the dynamics of EFRH, social workers had to reimagine:

- *who* they needed relationships with; for example, we observed social workers in statutory and voluntary organizations building new relationships with people who had a presence in extra-familial contexts (e.g. local business owners and staff managing transport hubs).
- *how* they engaged with existing relationships—whether that was harmonizing with traditional partners such as policing and education, or positioning some parents/carers as partners in safeguarding interventions, rather than the subject of them.

As both vignettes illustrate, an inability to form relationships with young people undermined or restricted professional responses, for example in Vignette 1 where the responsibility for engagement appeared to be located with Child 5 rather than the worker. In contrast, more relaxed engagement (the football activities in Vignette 2) bolstered safety planning with young people. In the statutory sites, professionals reimaged practice by foregrounding their relationships with young people, and not solely their parent/carer, as a route to safety, as it was consent from young people that could make or break a safety plan.

Professionals needed to demonstrate patience and understanding when relating to young people. Some referenced the trauma young people had experienced to remind themselves and each other that trust can take time. Professionals also needed space and permission to prioritize what young people said that they wanted, rather than what systems suggested was possible. In one site, for example, where a worker was leaving, professionals agreed that the loss of this relationship would likely reduce this young man’s trust in services and escalate the risks he faced. Together they agreed to identify ways to maintain that relationship, at least in the interim, as that was what the young person needed, albeit counter to organizational policy. In other situations, young people told their workers information that challenged the beliefs of wider

professional networks. Social workers needed to advocate on behalf of their young people, highlighting shortfalls in agency-held ‘knowledge’, and finding space to hold multiple truths, so as to respect young people’s assessments of situations they faced.

A desire to prioritize working *with* young people illustrated a level of awareness across sites that responses to EFRH needed to be youth-centred. Some social workers achieved this by recognizing young people’s agentic collaboration in the design (and partial delivery) of safety plans, as in Vignette 2, rather than framing them as passive recipients of support. For young people approaching 18 years of age, this meant prioritizing safety in relationships that would outlive statutory intervention and were of young people’s own choosing.

Relational approaches were not universal. As we see in Vignette 1, social workers often did not know the young people they were tasked with supporting. In these conditions, social workers’ relationships with young people (and their families) were often fraught with tension, characterized by mistrust and a lack of time/curiosity to understand/address that mistrust. Moreover, recognizing that young people and/or families had been traumatized by interpersonal harms was not the same as professionals recognizing the institutional harms that their services had caused. The relational underpinnings of trauma-informed practice were only apparent in one site (Vignette 2). In others, the dominance of risk management and/or timescales, and the fact that professional intervention ended as risk reduced or young people turned 18 years, created conditions in which professionals problematized young people as the source of their relational shortfalls, rather than the services which compromised them.

In our interviews, professionals recognized the structural ways in which relational practice was undermined:

‘... So what is our safeguarding responsibility to this person?...[our] greatest tool is about a way of being in relationship with young people...[but] we go into those meetings and nobody really knows how to fix it. We’re kind of sitting there and going, ‘these things feel beyond our grasp’, and that feels quite self-defeating’. (Interview, Site 4)

However, innovations were introduced to mitigate the impact of these structural issues, rather than deal with them at source. For example, new approaches sought to target how professionals *viewed* a young person (as traumatized, as navigating harmful contexts, as in need of support despite being over 18 years of age), rather than how the system helped/hindered professionals in working relationally. Goals were representative of what organizations deemed important (and were measured against) rather than what young people needed or wanted. In more than one site, we reviewed plans aimed at reducing a young person’s reliance on substances, without evidence of an understanding of the needs that substances may have met for them. Efforts by professionals to power-share/shift

with young people conflicted with established ways of working, creating tensions both within social care and their wider partnerships.

### *An interagency endeavour*

Whilst our ethnography found EFRH responses to be an interagency endeavour, with panels providing a structure to operationalize interagency strategic commitments, they rarely facilitated coordinated actions or shared values/objectives. Conversely panels sometimes surfaced conflicting approaches, particularly between social care and the police (see Vignette 2):

My young man that's missing currently, the police think they may know where he is, but they're not willing to disclose that information to anyone because they want to shut down the county line that he's operating within. And they have said that when they find him, they will most likely arrest him. He's fourteen... The police have one angle, social care have an angle... (Transitional Safeguarding Learning Group)

Elsewhere, we saw little-to-no interagency disagreement, and in the process, a loss of social care identity, such as a police officer being considered a sufficient replacement for a social worker to provide a young person with a consistent relationship (Vignette 1), or hearing social workers use the term 'intel' to describe information gathered for their assessments (three sites). On these occasions, social work appeared more orientated to a crime-prevention culture and the pursuit of criminal justice goals, rather than child welfare systems.

Some professionals drew upon the innovations being adopted by their organizations to address this tension, for example, providing advocacy when they believed young people had encountered traumatic policing practices (two sites) or challenging partners who criticized young people for committing offences, without acknowledging the unsafe contexts within which those offences occurred (three sites). Such green shoots were rare. More common were situations in which professional boundaries, responsibilities and cultures blurred and threatened to undermine the innovations attempted. Innovation adoption was rarely interagency—at least not in day-to-day professional practice, even if there was an interagency commitment in local protocols. For example, supporting a young person moving from children's to adult social care was not a transition reflected in the practice of criminal law, which maintains a cliff edge between childhood and adulthood.

## **Discussion: What lies beneath**

The points of progress and challenges presented in this article tell an important tale about where innovation has been targeted versus where it is

actually required if responses to EFRH are to fulfil global commitments, national policy aspirations, and meet young people's needs and expressed concerns. The innovation frameworks studied offered the potential to radically disrupt the status quo and transform paradigms, systems, and practices of social care. Yet, our ethnography revealed that, in the process of implementation, the frameworks took on features of pre-existing social care systems and were undermined in the process. Contextual Safeguarding in UK systems risks being used to work with individuals within extra-familial contexts rather than to understand/change the social conditions of those contexts. Services incorporating principles of Transitional Safeguarding may recognize that EFRH continues into adulthood, while still engaging with justice systems that process young people as 'perpetrators' upon turning 18 years. Trauma-informed approaches can be used to recognize trauma as a feature of young people's extra-familial relationships without recognizing professional relationships as a potential source of additional harm. These innovations, disruptive as they were to service features and facilitative as they were of gradual service improvement, remained frustrated by service foundations. Transformation at this level requires four foundational assumptions to be addressed, that service-level innovation alone cannot disrupt.

First, individualism within service design remains.

All sites operated to structures and cultures in which social workers assessed 'individuals' whom they 'case-managed' to provide protection. Responsibility was passed to individual young people for their decisions/behaviours associated with EFRH, and to their parents/carers or individual workers for safeguarding, support and control/containment. Individual young people remained the focus of assessment and intervention, the efficacy of interventions measured largely in respect of changes to their behaviour. Even when services explicitly attempted a contextual response to EFRH, they predominantly did so by tracking, or changing the behaviour of, individuals who were in unsafe contexts.

Secondly, the mitigation of risk/threat continues to be prioritized over the creation of safety/flourishing.

Many interventions were narrowly designed around 'risk' and 'threshold' as it related to both the severity of the harm and the ages at which young people could access support. Therefore, if situations were not considered risky enough, or young people had aged out of child protection pathways, social workers struggled to resource plans to meet needs and often appeared unable to effectively impact the social conditions in which young people survived.

Thirdly, tensions between criminal justice outcomes and children's interests remain.

The inclusion of EFRH in child protection guidance has not resolved problematics of criminal justice goals outweighing the welfare

paramountcy principle when young people ‘commit offences’ in the context of EFRH. The UN’s calls to address system harms and centre children’s best interests do not address how justice-orientated cultures and practices risk undermining or colonizing welfare-orientated systems.

Fourthly, institutional and structural discrimination are often unaddressed and sometimes reproduced by safeguarding systems, which ignore the structural/system drivers of harm.

A social work assessment of whether a local park is safe/unsafe for young people is not contextual if it fails to acknowledge either the risk-contribution of public service under-resourcing of youth facilities where young people might have safely congregated or racist attitudes amongst residents or professionals that view young people in the park as a risk rather than an asset. Under-resourcing and discrimination are rarely cited as issues undermining child welfare. They are neither targeted by national safeguarding policies nor a dominant mainstay in international child protection discourses on child maltreatment and abuse, particularly those emanating from colonial research traditions.

These four foundational features are the problematic ‘ruling relations’ of social care made visible in our findings. Our ethnography featured responses to young people who were not in mainstream education, whose families did not trust services, who had been subject to significant physical harm, and who posed a risk of harm to others in the context of exploitation. If services applied Trauma-Informed Practice, Contextual Safeguarding and Transitional Safeguarding to support such a young person, but within these ruling relations, professionals might:

- recognize the young person’s behaviour as affected by trauma associated with experiences of exploitation;
- acknowledge risks of harm within his wider peer group and consider using criminal justice sanctions or changing his education timetable to reduce his time spent with that group;
- explore sanctioning the young person’s parents for not consenting to interventions as he nears his 18th birthday.

In this scenario, professionals recognize the effects of trauma, intervene in some contexts where the young person is unsafe, and try to consider his transitional needs. This reflects much of what was observed across sites, is characterized in Vignette 1, and was evident, albeit to a lesser degree, in Vignette 2. In contrast, if a service uses these innovations in a system, which has disrupted the ruling relations, professionals might:

- Recognize the trauma caused by intrusive, mis-attuned, and even oppressive service responses to that young person and their



family, and seek collaboration to build understanding and avoid repeating mistakes;

- Advocate to increase a young person's time in education, potentially in mainstream settings from which they have been excluded;
- Identify opportunities to build safety in relationships that outlive statutory intervention through welfare-based, rather than risk-focused, assessments of young people's friendships, reserving justice interventions for adults who pose a risk of significant harm.

Vignette 2 illustrated elements of this disruptive response, particularly welfare-based interventions with peers and recognition of system harm. However, individualism and a lack of community-based interventions limited system transformation across all sites.

A system's foundation shapes the impact of innovations on service delivery. When services respond to peer groups, for example, in systems that maintain individualism, are risk-averse, prioritize justice over welfare, and reinforce structural harms, we see individually orientated interventions that frame young people's friendships as deviant, and seek to separate or disperse them. The global commitments and national policy reforms outlined at the outset of this article have not disrupted these ruling relations; EFRH is drawn into existing systems, rather than systems being transformed to address the demands of EFRH.

The extent to which the identified ruling relations are entrenched in attitudes and structures that prohibit change is often unvoiced and invisible, but should not be underestimated. Psychosocially oriented analysis allowed us to identify how individual behaviours and organizational processes/structures associated with EFRH were configured in ways that defended professionals from the unbearable realities that young people are exposed to and the fundamental insufficiencies of their response. Attention needs to be paid not simply to introducing new structures, but to the prevailing *culture and affective landscape* that determines whether professionals can tolerate the emotionally charged, high-risk, uncertain contexts of working with EFRH and innovation/system change (Cooper and Lees 2015). Unless the resultant anxiety evoked in professionals, which leads to defensive practices and structures, is acknowledged and contained, innovative initiatives will only touch the surface rather than transform the foundations of services.

## Conclusion

We have found that social care organizations and the social workers within them remain significantly constrained in developing effective responses to EFRH. As others have noted, challenges persist despite service improvement produced through practice and system innovation

(Billingham and Irwin-Rogers 2022; Action for Children 2024). We could frame these challenges as insufficient/ineffective practice and recommend ways to improve them. However, in foregrounding the ruling relations of social care, our institutional ethnography invites us to look beyond *service performance* and instead recommend changes to *system purpose*. Innovations observed were concentrated on practice methods and service/design and overlooked the essential shifts required in the cultural, macro-systemic and structural underpinnings of these practices, services, and organizations. Rather than continue to identify and lament the limitations of existing systems we call upon scholars, service leaders, and practitioners to collaborate with the communities and families they serve, and implement the transformational reimagining we know is required, beginning by re-centring social work values in waters muddied by policing priorities. Concurrently we recommend: increased international debate about the place of social work (and welfare-orientated systems) in meeting the needs of adolescents abused beyond their homes; reform of national policies to centre children's best interests and contextual/structural safety over criminal justice goals and the resourcing/commissioning services to meet young people's needs accordingly. Rather than resourcing training on the nature of EFRH, practice support in the form of consciousness-raising seems more critical, providing social workers with space to recognize the impact of operating in criminal-justice-focused partnerships, so that they can re-focus on children's needs and best interests. In the absence of transformation at this more foundational level effective responses to EFRH will remain as a global ambition rather than a local reality.

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## Data availability

The authors do not have permission to share data as the organizations where the research was conducted wished this to remain confidential. This is due to the sensitive nature of their social care services and the possibility that individuals could be potentially identifiable should full transcripts be accessed by others.

## Ethics approval

Ethics approval was granted on 5 October 2020 by the Social Sciences & Arts C-REC committee (certificate: ER/FAFG8/18).

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