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Department for Education

Investigating Special Guardianship: experiences, outcomes and challenges

Research Brief

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Background

When a child can no longer live with their birth parents or, after a period of stay in the care system, there is no realistic prospect of a return to their parents, a permanent alternative solution needs to be found. Since the introduction of the Children Act 1989, the main forms of permanent placement for children living with relatives, friends or strangers have included residence, adoption or long-term fostering. Amendment to this legislation brought about by the Adoption and Children Act 2002, and fully implemented on 30 December 2005, provided a further form of permanent placement called Special Guardianship (SG).

A special guardianship order (SGO) is a private legal order that enables a special guardian to exercise full parental responsibility for a child up to the age of 18. Unlike adoption, a SGO does not legally sever the child's relationship with its birth parents. Broadly speaking, therefore, there is an expectation that contact with birth parents and other family members will continue if that is in the best interests of the child. While birth parents may apply to the court for a change in contact or in relation to specific issues, they cannot challenge the order itself unless given leave to do so by the court.[1] Where a child had been looked after by a local authority (LA), they cease to be so once the order is made. Local authorities have no powers to intervene in the lives of SG families beyond those that exist for any child in the community. However, LAs have a duty to make provision for financial and other support services. The regulatory framework governing services is quite extensive, but provision of particular services following an assessment of need is discretionary. This framework was originally modelled on that for post-adoption services, but the introduction in the Children and Families Act 2014 of a post-adoption support fund, 'adoption passports' and 'personal budgets' has now created a divergence based on type of legal order rather than need.

Although SG has been in existence for a number of years, research on how well it is working for children and their families has been very limited. The present study builds on an earlier investigation (undertaken by the same York team) that investigated the implementation of SG over the first two years.[2] This study has a longer reach and, in addition to an investigation of the developing policy and practice of LAs, has centred on a three to six year follow-up of a sample of SG families.

Aims and methods

Using a mixed methods design, the aims of the study were to:

- Describe the characteristics, experiences and services provided to SG families (including experiences of disruption);
- Assess progress and outcomes for children some three to six years after the SGO was made and identify factors associated with children doing well;
- Identify key issues in LA policy and practice in relation to the development of SG services.

[1] The Children and Families Act 2014 replaced residence and contact orders with a new child arrangement order. Birth parents may apply to the court for a change in contact, for prohibited-steps or specific-issues orders, unless the court has imposed a restriction on further applications under s91(14) of the Children Act 1989.

[2] Wade, J., Dixon, J. and Richards, A. (2010) *Special Guardianship in Practice*, London: BAAF.

The research design incorporated secondary analysis of national datasets, a brief survey of all English LAs and a retrospective follow-up study of SG families.

Analyses of national data

- A brief national survey of all 152 LAs in England to scope the extent to which SGOs were being used for looked after and non-looked after children (2006-2012). Some data were obtained through a Freedom of Information request from 132 LAs.
- Secondary analysis of government administrative data on all 5,936 looked after children made subject to a SGO between 1 January 2006 and 31 March 2011 (from the SSDA 903 data collection). These data were used to describe the characteristics of these children, LA variations in the use of SGOs, the implications of these for the use of other permanence pathways for children (principally adoption) and to establish a rate of post-order disruption for children who returned to the care system.

An intensive study in seven local authorities

The main aims of the intensive study were to (a) understand how SG had developed in these areas and identify key issues of policy and practice that had arisen; (b) conduct a three to six year follow up of a sample of 230 SG families to describe their experiences, the support and services that had been provided and to assess progress and outcomes for children. The intensive study comprised several elements:

- A follow-up survey of special guardians (n=115)
- An audit of social work case files to provide baseline and more limited follow-up data for a larger sample of children (n=224)
- Interviews with a sample of 20 guardians and 10 children
- A policy study, including 23 interviews with LA managers and national stakeholder agencies.

Findings

The development of special guardianship

Special guardianship had been welcomed by practitioners and families. Over the past eight years, it has bedded in. Many practitioners reported that it was now more firmly on the agenda of review and care planning meetings and that LA policy and procedures had become more established. National statistics demonstrate a year-on-year increase in the numbers of children leaving care for SG and our national survey estimated that in excess of 13,000 SGOs had been made in the study period, with approximately one-third concerning non-looked after children.

There was no evidence that the rise in SGOs had led to a diminishing use of adoption or residence orders. Use of these orders has remained broadly stable (or slightly increased) over the study period. There was also no evidence that authorities that encouraged a high use of SGOs made

less use of adoption. Instead, as originally intended, there has been an overall increase in permanent placements for children and the proportion of children leaving the care system by one of these routes has increased from 17-24 per cent over the study period.

The profile of families taking up SG has not changed greatly in recent years. It is overwhelmingly used for children, predominantly young children, living with relatives or family friends (mostly grandparents or aunts and uncles). Its location within kinship care is the most marked difference with adoption. Take-up by unrelated foster carers is low (at no more than 15 per cent of all SGOs made for looked after children). It is also overwhelmingly used for children in or on the edge of the care system. In our survey sample, almost three-quarters of children had been looked after immediately before the SGO was made (73.5 per cent) and most children came from troubled families marked by parental mental health problems, drug or alcohol misuse, domestic violence and other difficulties. Almost two-thirds of children were reported to have been at risk of abuse or neglect (63.5 per cent).

Our LAs reported very few 'private' applications concerning children not previously known to them (around three per cent of our survey cases). However, there was evidence of an increase in cases concerning children 'in need' either as an outcome of care proceedings or as an alternative to it at the pre-proceedings stage (around one-quarter of survey cases). As they are required to do, most LAs were seeking to identify suitable relatives at an early stage and some had invested in family group conferencing and/or other parallel planning strategies as a methodology for doing so. Use of SGOs in these contexts may therefore expand further.

Local authority variation

Local authorities varied widely in respect to the use that was being made of SG. Analysis of national statistics on looked after children showed very large variations between authorities in the extent to which SGOs were being made for related and unrelated foster carers, in the proportion of SGOs that were made to carers with whom children were already living (and not necessitating the child to move) and in the proportion of SGOs that were made within one year of the child entering care. These variations link to differences in policies, procedures and promotional strategies and could not be explained by differences in the children concerned.

Differences between LAs were also evident in the structure, organisation and scope of services. While some LAs had developed more specialised models of service (usually located in kinship or post-adoption teams), others had not. The former tended to reflect a more open approach to the potential of SG to provide permanence to a broader range of children and families, with recognition that services would be needed to support these families successfully. The latter tended to restrict SG to highly settled children in families where follow-up support was less likely to be needed.

The potential to expand SG will therefore depend on the priorities set by individual LAs about the circumstances in which an SGO is considered to be in the best interests of the child and, if greater use is made, on the willingness to commit resources to service provision. Where a SGO enables a child to leave care or to avoid entering it in the first place, the financial savings to LAs are large

and should be sufficient to provide good preparation and support packages to families in line with those being developed in adoption.

Preparation for special guardianship

Local authorities have a duty to assess the suitability of all applicants for SG, to prepare a report for the court and, where applications concern looked after children, to assess their needs for support services if requested to do so. For non-looked after children, LAs may conduct an assessment of need and written reasons must be provided if such a request is refused. The expected timescale for a SG report to be completed is 13 weeks from the date of application. However, the Children and Families Act 2014 has introduced a requirement for care proceedings to be completed within 26 weeks. This is tending to reduce further the timescales for assessment in these cases.

Many practitioners expressed concern at the limited timescale for conducting analytical assessments, especially where family structures and dynamics were complex or children were new to placement. Time to adequately prepare special guardians for the challenges that may lie ahead was also constrained. Only around one-half of guardians in our survey felt they had been fully prepared for the task of parenting their children and, most worryingly, one-in-five felt they had been strongly pressured by the LA to accept SG when an alternative legal order may otherwise have been preferred.

Time for preparation is accepted as good practice in fostering and adoption. Adoption orders are not made without a prescribed period of monitored ‘settling in’. No equivalent provision exists for SG, in large part because it was assumed that SGOs would be made for children living in settled homes and with already established relationships with their carers. However, this is not always the case. A sizeable minority of children in our survey (17 per cent) only moved to live with their guardian at the time of the SGO and, as we have seen, one-quarter of cases arose in the context of care proceedings. The potential of SG to build on existing relationships is an important strength. Where a close relationship is lacking, however, greater caution should be exercised, as strength of the pre-existing bond between child and carer was a key predictor of later disruption (see below). In these circumstances, therefore, there is an argument for relationships to be first tested (perhaps under fostering regulations) before a move to SG is made.

The information that is available to LAs at the assessment stage is important, as it can help to predict later difficulties. Local authorities were highly supportive of three-quarters of SGO applications in our survey. Where concerns existed, they centred on the quality of guardian-birth parent relationships, the age, physical or mental health of guardians or the special needs of children (especially behavioural needs) and whether guardians could meet them satisfactorily. Where these concerns existed, children subsequently tended to do less well in placement overall and guardians reported experiencing greater strain in caring for them.

Stability over the follow-up period

One measure of a successful placement is that it lasts as long as it is needed. Overall findings on stability were positive. Using the yardstick of a later return to care, the disruption rate for looked

after children made subject to SGOs was estimated at just over one per cent per year (just under six per cent over five years). Children who were older at the time of the SGO were at greater risk, rising to an estimated peak of nearly three per cent per year for those aged nine or ten when the SGO was made. Of course, these statistics underestimate overall disruption. Children may have changed area and re-entered the system there; others may have moved informally within the family network or outside it. We should also note that the sample was still relatively young at follow-up (over half were aged 10 years or younger) and that further problems may arise in later years. Despite these caveats, however, the findings on stability were encouraging.

Children were more likely to experience a disruption where:[3]

- They were older at the time the SGO was made;
- Where they had been last placed with a stranger (rather than a relative) before the SGO was made;
- Where the SGO was made to a carer with whom the child had not already been living;
- Where the bond between carer and child was not rated as having been strong at the time of the SGO;
- Where looked after children had experienced more past placement moves.

The findings highlight the importance of children having a settled relationship and close bond with their carer prior to the SGO being made. As indicated earlier, this is an important strength of SG. In other respects, the findings on age at placement, on the tendency for kinship placements to endure when compared to stranger placements and on the effects of past instability are consistent with those found for comparable populations of fostered and/or adopted children. Being a teenager was the strongest predictor of disruption, reflecting the greater ability of teenagers to leave when unhappy and/or the more disturbed behaviour characteristics of those who are only removed from parents when they are older. The existence of a strong pre-existing bond between child and carer has an independent and positive effect.

The association between placement with relatives and stability should be read with some caution. This finding was found only in the national dataset and not in the admittedly much smaller survey sample. It may therefore be the case that disruption in kin settings is less likely to result in a return to care and may be more likely to involve an informal move within the network. Qualitative data from our survey suggested this may be the case, with only one-half of known kinship disruptions involving a return to care.

These findings should not be used to rule out certain children from SG. After all, the risk of breakdown was low, even amongst higher risk groups. However, it should caution practitioners to proceed more slowly in such cases and to weigh up carefully the short- and long-term support needs that might be needed to ensure the best chance of success.

[3] Age was a significant predictor of breakdown in both the national dataset on looked after children and in our survey sample (that also included non-looked after children). 'Bond' could only be measured for our survey sample. Other factors originated from the national dataset only.

The progress and wellbeing of children

While stability is one measure of outcome, it was also important to know whether the children were thriving and doing well. Three measures were developed to assess: (a) the overall placement progress of the child; (b) the degree to which guardians thought their children were well integrated into the family and (c) the development and wellbeing of children in key life domains (health, education, friendships, behaviour, confidence and skills). The first measure was available for the whole sample (n=223), the other two for the reduced sample of guardians who returned questionnaires (maximum n=115). The great majority of children were reported to be doing well in all areas, although over one-third were reported to have some emotional and behavioural difficulties and three-in-ten were doing less well in education, especially children with additional special needs.

The overall progress of children in placement was rated more highly where:

- The bond between the child and guardian was stronger prior to the SGO;
- Where children were not reported to have emotional and behavioural difficulties.

Children scored more highly for family integration where:

- They had fewer emotional and behavioural difficulties;
- Guardians felt they had been well prepared for their role;
- Greater support was available from the guardian's immediate birth family;
- And where frequency of contact with birth mothers was lower.

The progress and wellbeing of children was rated more highly where:

- They had fewer emotional and behavioural difficulties;
- They were female and were younger at the time the SGO was made.

Where children did have emotional and behavioural difficulties, this was a negative predictor of all three outcomes. These children fared worse overall and guardians coping with the sometimes highly challenging behaviour of children were amongst those experiencing most strain and anxiety. Boys, especially those who were older at the time of the SGO, and children with learning disabilities scored more highly for these difficulties and were faring less well in relation to educational progress and social skills. The quality of the pre-existing bond between the guardian and child may help to provide a protective barrier against these difficulties. It may be that it engendered greater staying power or enabled carers to better manage and defuse challenging behaviour. It was certainly a factor that predicted a positive rating of how well the placement had gone for the child, even where these problems existed.

Relationships with birth parents and other family members

Children's integration within the family was higher where guardians reported receiving a higher level of support from their immediate families. Everyday interaction with kin appeared to

strengthen feelings of inclusion amongst children, provided some practical and emotional support to guardians and helped to relieve stress.

Given that almost one-half of the guardians surveyed were lone female carers, support from within the family network was likely to be essential and was rated as being far more important to guardians than any help they received from professionals. However, these networks could be quite thin and could also be fragile. While some family relationships were harmonious and supportive, others were marked by a high degree of tension and conflict. In these latter scenarios, support tended to diminish. Almost one-third of guardians (31 per cent) reported that they were rarely able to get a break and one-quarter (24 per cent) that they felt tired most of the time. Social workers should therefore be mindful of the need to assess the strength of these networks and, wherever possible, help guardians to strengthen them before cases are closed.

An advantage of SG is perceived to lie in its inclusiveness. In keeping with this, contact between children and a wide range of non-resident family members was relatively high (when compared to adoption). However, over time, some erosion in contact with birth parents was evident. Just over one-half of children (55 per cent) had no face-to-face contact with birth fathers at follow-up and more than one-quarter (27.5 per cent) with birth mothers.

Parental contact in kinship settings can also be a source of considerable tension. Guardians rated contact with birth mothers as being positive for the child in only just over one-half of cases. Contact with fathers, though less common, was rated more positively. A negative rating for contact with birth mothers was more likely where children scored highly for emotional and behavioural problems and where their overall developmental progress was rated as being poor. Presumably the fallout from difficult contact sessions was perceived to exacerbate these problems.

Paradoxically, once other factors had been taken into account, family integration was rated as being lower where children had more frequent contact with their birth mothers. This finding was more difficult to interpret. Guardians were generally committed to promoting contact. Its frequency was higher where it was considered to be positive for the child. These relationships tended to be more harmonious but could also serve to weaken children's integration within the SG family. For some children, then, it may generate tension or a sense of divided loyalty. This interpretation was confirmed by other findings. For example, where birth mother contact was higher, the more likely it was that children would speak about returning to live with them. Guardians and social workers therefore need to be mindful that these tensions can arise and that children may need help to reconcile them. It is important to strengthen children's feelings of security and inclusion within their SG families if it is to provide the secure base that children need.

Support services

Local authorities have a duty to make provision for needs assessments and post-order services. Entitlements are stronger for foster carers than for carers of non-looked after children, for whom provision is largely discretionary. It was therefore encouraging to find that most guardians (80 per cent) had received an assessment and written support plan, although the range of services planned for foster carers was greater. Getting agreement in writing before the SGO is made was considered to be important to ensure that agreed services were subsequently delivered. It is also

important to review these assessments periodically. Many children were very young. Not all needs were known and some only emerged later. Regulations place a duty on LAs to conduct annual reviews where services are delivered. Such reviews should provide opportunities for reassessment, although guardians reported that these frequently failed to take place.

Not all guardians wanted continuing contact with social workers and a desire to establish a normal family life was uppermost for many. Less than one-fifth received continuing contact throughout our follow-up period. One-third of cases had been closed when the SGO was made and three-quarters within one year. While this was what some guardians wanted, others felt they had been given no choice and closure was abrupt. In some cases (11 per cent) supervision orders had been attached to the SGO to ensure access to services for a time or in response to initial concerns about the viability of the arrangement.

Prior to closure, it is important that contingency plans are put in place to enable guardians to re-establish contact at a later point. This happened too infrequently. A named contact, newsletters, support groups or an annual visit or phone call were all considered by guardians to be helpful strategies for seeking help or advice without the stigma that they would be judged as failing.

Special guardianship regulations emphasise that financial issues should not be an obstacle to an otherwise suitable arrangement for the child. The vast majority of guardians in the survey (87 per cent) had received a regular financial allowance for some part of the follow-up period; generally until the child reached 18 or the placement had ended. However, there was variation. While this was the case for virtually all former foster carers (97 per cent) and most guardians of children who had been on the ‘edge of care’ (86 per cent) and might otherwise have entered the system, it was the case for just one-half of ‘private’ cases concerning children not previously in contact with the LA (50 per cent). In most cases financial packages had been agreed beyond the minimum two year period stipulated in regulations, although the current financial pressures on LAs were leading some to consider scaling back these more generous packages.

Over the follow-up period, a sizeable minority of children had accessed therapeutic (34 per cent), behavioural (25 per cent) or educational (32 per cent) support services at some stage. While many guardians were appreciative of this help, some found these services to be ineffective while others, who desperately needed them, had been left to cope with the challenging behaviour of their children alone. Although one-third of guardians reported not needing these services for their children, a further third reported that they had not been made available or had been too difficult to access.

Some services were directed more at the needs of special guardians. These included provision of LA advice, guidance and advocacy, financial assistance (with legal costs or settling-in grants) and, perhaps most importantly of all, support in relation to the management of birth family contact. Over the follow-up period, one-half of guardians had received social work support to supervise contact arrangements, usually where these sessions were marked by tension and conflict. Access to these services (and those for children) varied considerably by LA. While some areas had invested more readily in post-order services, others had not.

Evidence on the effectiveness of child services was, however, not very encouraging. More child-centred services had been provided where children were not doing well and guardians were struggling to cope with cycles of challenging behaviour. As such, the delivery of more services was associated with poorer child outcomes. This is a familiar finding in relation to children's social work services. Although services do not cause or generally exacerbate children's problems, they often tend to be applied too late or at insufficient intensity to be effective in remedying the often deep-seated problems that they seek to address. Furthermore, not enough is yet known about the kinds of interventions that are effective in bringing about positive change for children in these settings and there is a considerable need for ongoing evaluations of promising initiatives in this area.

Messages for policy and practice

The final section summarises some of the key messages for policy and practice that arise from this study. Overall, the findings on Special Guardianship (SG) are encouraging. Most children were reported to be thriving and doing well. The risk of breakdown appeared to be quite low, even amongst higher risk groups. From the perspective of guardians, SG was delivering what it had promised by providing a legally secure relationship and a high degree of parental control over decisions affecting children's lives. This positive central message is important and should encourage the further use of SG as a permanence pathway for children, alongside adoption. However, some children and guardians experienced difficulty and there are actions that government, LAs and other agencies could take to strengthen these provisions and to enable SG to work more effectively for families. These messages are summarised briefly below.

Statistics on SGOs

At present, there is no single source of information on the total numbers of SGOs that are made for looked after and non-looked after children. This can be obtained through LAs if there is a requirement for this information to be collected and submitted to Department for Education. This information is essential for planning national and local service developments.

Regulations, guidance and strategic messages

Not all LAs are fully compliant with the requirement set out in statutory guidance on family and friends care (2011) to publish their policies on promoting and supporting the needs of children living in all forms of kinship care. In particular, they should include local policies in relation to all legal orders, including SGOs, and set out any differences in provision for different categories of applicant (stranger/kinship, looked after/non-looked after).

Access to leaving care services was a deterrent for some foster carers caring for older children, especially concerning support for further/higher education. The entitlement of children in SG families to leaving care services should be strengthened in line with provisions in the *Care Leavers (England) Regulations 2010.*

Transitional arrangements, where former looked after children moved from one LA to another or where service responsibility was transferred at the end of the required three year period, were not always smooth. Currently there is no requirement to notify the receiving LA when a child moves

into that area. This should be reconsidered in guidance and should include non-looked after children who move area.

Where the receiving LA is to take up responsibility for service provision, it should notify the child and special guardian in writing of the services that are available locally and how to access them.

Organisation of SG services

SG is now more routinely considered for looked after children and children on the 'edge of care' through care planning mechanisms. Some LAs were resistant to promoting it more widely and information for relatives in the community was often sparse. LAs should develop strategies to publish information on SG more widely within their communities, with a focus on those groups where take-up has been low.

Where numbers justify it, consideration should be given to development of more specialised models of service. Specialisation benefits from the development of pools of expertise and more coherent service structures. Linking SG with specialist kinship or adoption teams, as some LAs were doing, may be a helpful strategy. The role and scope of SG services should be documented and be made publicly available.

Assessment and preparation

Assessments should take account of factors that predict later difficulty. In addition to the parenting capacity of carers, focus should be placed on the quality of pre-existing relationship between carer and child. Caution should be exercised about moving to a SGO before there has been a chance to assess and monitor the strength of this bond. With sanction of the court, some LAs had made use of Care or Child Arrangement Orders to allow time for these relationships to be properly assessed.

Age was a powerful predictor of later disruption and many older young people had come to SG later with a range of difficulties already evident. Plans for SG should therefore be developed early in the child's care career. Those who were younger at placement tended to fare better.

SG involves whole families. It is important that all are consulted at the assessment stage. Children need help to understand the meaning of SG, why it has come about and how it will affect their family relationships.

In adoption and fostering the importance of good preparation packages is well understood. Many special guardians felt ill-prepared for the role they were taking on. LAs should consider developing preparation courses within the 13 week window (or as soon as practicable after this) along the lines of those provided to potential adopters.

LAs are required to provide a range of dedicated SG support services. These include financial support, support groups, help for contact, therapy, advice and information. For children looked after immediately before the SGO, LAs must carry out an assessment of their support needs at the request of the child, guardian or birth parent. In cases where the child was not looked after, while no equivalent duty exists, LAs may offer such an assessment. It is a matter of good practice, however, for these assessments to be undertaken with all applicants, including those concerning children not previously known to the LA. Provision of support is, however, discretionary.

Reports for the court should always include a detailed support plan (even where no services are required). It is important that all services that are to be provided are agreed in writing in advance of the SGO. This was not always the case.

Support plans should also include a clear contingency plan to enable guardians to access support should difficulties arise at a later stage. Contact details for a person or team known to the guardian appeared most helpful. Not all guardians wanted support at the time the SGO was made, but did do so later on as new difficulties emerged.

Provision for training and support groups were helpful for some guardians. Guardians needed help to understand and manage the complex behaviour patterns of some children and support groups (and newsletters) helped to reduce feelings of isolation and provided a mechanism for peer support.

The structure and dynamics of family relationships in kinship settings are often complex. Many guardians struggled in this area and only one-half thought contact with birth parents was positive for their children. Assessments of need should include a thorough assessment of these relationships, including the potential need for supervising contact, supporting guardians to manage contact successfully and to monitor the impact of contact on the child and SG family. Legal solutions may be needed where contact is dangerous or destructive to the child.

Provision for respite or short-breaks was extremely rare. While many guardians first seek solutions within their own networks, there are circumstances where such provision is vital. Creative solutions may need to be found to avoid children having to become looked after, since this would not be acceptable to many families. Where provision of this kind may be needed, this should be considered during the assessment stage, but also include contingencies in case circumstances change.

Financial services

Financial arrangements to support the children of special guardians are highly variable. All guardians need to be informed in advance of the financial support package that they will receive and be made aware of procedures for review and complaint.

Access to independent legal advice is important. Reductions in legal aid make this more difficult. LAs should therefore give consideration to assistance with legal fees. Many did so and it was greatly appreciated by guardians. This may arise not only in relation to the SGO application, but also in relation to later legal challenges by birth parents.

Services for children

Access to CAMHS and other therapeutic services (including those provided through post-adoption support services) was often difficult. Where they were accessed, they were generally found to be helpful. Further consideration should be given to how these services can be made more comprehensive and more easily accessible to special guardians and their children.

Provision of support and services must be subject to annual reviews. Evidence suggested, however, that these frequently failed to take place. It is important that these are undertaken (by visit or phone), not just to establish that the child is still resident, but also as a check on how things

are going. Many guardians would have appreciated this and it may provide an avenue for detecting difficulties at an early stage.

A minority of children had highly complex needs (learning disabilities, mental health problems and/or serious emotional and behavioural difficulties). These children tended to have poorer outcomes. Specialist multidisciplinary services will be needed to provide tailored interventions for these groups of children and young people, many of whom were teenagers.

Additional support provided by schools was generally appreciated. Further work is needed to raise awareness of SG amongst the teaching profession. Virtual heads, designated special needs teachers in schools and education teams for looked after children may have a valuable role to play in helping school staff to recognise and respond to the particular needs of SG children.

Loss of contact with birth parents or siblings was often distressing for children. One-fifth had no contact with either birth parent. Some children will need to be helped to construct a coherent life narrative to explain the shape their life has taken. Some guardians were undertaking life story work, but some will need support to do this successfully.

In contrast, social workers and guardians need to be mindful of the potential for children to experience a conflict of loyalties, especially where contact with their birth mothers is frequent and positive. Where this occurs, it is important to find ways to help the child come to terms with their feelings.

Allegations and breakdowns

Where allegations are made against SG carers or re-referrals are made on child protection grounds it is a feature of good practice that cross agency collaboration and communication is established. Guardians should also have access to independent advice and support.

Where notification is made to an LA that a child is no longer resident or there is a risk of breakdown this should trigger a visit to assess the needs of the child, guardians and other family members. Provision of support after breakdown is needed to help everyone come to terms with what has happened, to maintain communication between family members and to assess the potential for reunion or continuing contact and support.

Where young people move to independent living at an early age, this may be a sign that things have not gone well. LAs should help young people to access supported accommodation where this is needed and identify and respond to any continuing support needs.

Evaluation and dissemination of positive practice

The study has identified large variations in the way SG is being used from area to area. There is a need to identify LAs that are successful in promoting and using SG across different social groups and that are developing promising models of practice and disseminate these examples as widely as possible. Pockets of good practice did exist and need to be more widely known.

A baseline of effective interventions is needed, especially in alleviating the difficult behaviour of some children. The applicability of interventions to kinship settings needs to be tested. Promising

initiatives require rigorous evaluation and the results to be disseminated to LAs and other agencies with an interest in this field.

We should be mindful that, even at follow-up, many of these children were still relatively young and further difficulties were likely to lie ahead for some. Further research will therefore be needed to track outcomes for children through the teenage years and into early adulthood. Only then will the permanence outcomes of SG arrangements be fully understood.

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