Evaluation of Barnardo’s Safe Accommodation Project for Sexually Exploited and Trafficked Young People

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# Table of Contents

Figures, Tables, and Case Studies .................................................. 6  
Acknowledgements ........................................................................ 8  
Executive Summary ....................................................................... 9  

**Chapter 1: Introduction** ................................................................. 19  
  1.1 Child sexual exploitation ......................................................... 19  
  Child sexual exploitation and the need for safe accommodation ...... 20  
  1.2 Trafficking .............................................................................. 22  
  Trafficked young people and the need for safe accommodation ...... 22  
  1.3 Other relevant terminology within the report .......................... 24  
  Child/young person .................................................................... 24  
  Looked after young people ......................................................... 25  

**Chapter 2: The Safe Accommodation Project** ............................... 26  
  2.1 Overview of the project ......................................................... 26  
  2.2 The evaluation ................................................................. 27  

**Chapter 3: Methodology** ................................................................. 28  
  3.1 Evaluation aims ................................................................. 28  
  3.2 Realist evaluation .............................................................. 28  
  3.3 Formative feedback .......................................................... 29  
  3.4 Evaluation design ............................................................. 29  
  Evaluation of specialist placements ........................................ 29  
  3.5 Analysis and reporting ........................................................ 32  
  Qualitative data ....................................................................... 32  
  Quantitative data ..................................................................... 32  
  3.6 Ethics and research issues ..................................................... 32  
  Ethical issues of involving young people in the evaluation of their specialist foster placements ......................................................... 33  
  3.7 Limitations of the study ........................................................ 34  
  3.8 Structure of the rest of the report .......................................... 34  
  Pre-evaluation consultation with young people ......................... 34  
  Evaluation of the training strand of the project .......................... 34  
  Evaluation of the specialist foster placement strand of the project 34  
  Conclusion .............................................................................. 35  

**Chapter 4: Pre-Evaluation Consultation with Young People** ........... 36  
  4.1 Overview and methodology of pre-evaluation consultation ....... 36  
  4.2 Findings from the pre-evaluation consultation with young people 37
Chapter 8: Mechanisms of Change

8.1 Summary of key findings ................................................. 93
8.2 Mechanisms of change and realist evaluation ...................... 94
8.3 Care mechanisms .......................................................... 94
Mechanisms of care for sexually exploited young people ............. 94
Mechanisms of care for trafficked young people ........................ 95
8.4 Safeguarding mechanisms .............................................. 96
8.5 Child-centred mechanisms .............................................. 98
8.6 Communication mechanisms ........................................... 100
8.7 Relational/family mechanisms ........................................ 101
8.8 Activity mechanisms .................................................... 102
8.9 Advocacy mechanisms .................................................. 104

Chapter 9: Contexts of Change ............................................. 105

9.1 Summary of most significant contexts ................................. 105
9.2 Specialist foster carer capacity to provide appropriate care to high risk young people ........................................... 105
9.3 Level of understanding of sexual exploitation/trafficking within multi-agency teams/professionals involved in young people’s lives ...... 106
9.4 Length of placement/commissioned support for young person .... 107
9.5 Location of placement relative to risky areas/people ................ 108
9.6 Young person’s willingness and capacity to engage in a placement 109
9.7 Young person’s strength of attachment to friends/family/communities that present a risk ..................................................... 110
9.8 Context, mechanism, outcome patterns ................................ 110

Chapter 10: Cost Effectiveness of the Specialist Placements ........ 115

10.1 Summary ........................................................................ 115
10.2 Methodology .................................................................... 115
Problems associated with assessing the cost-effectiveness of specialist placements ......................................................... 115
Breakeven analysis .................................................................. 116
10.3 Missing episodes ............................................................. 118
Missing Episodes: indicator information and valuing outcomes ........ 118
Missing episodes: outcomes data and discussion ....................... 119
10.4 Educational achievement .................................................. 120
Educational achievement: indicator information and valuing outcomes .............................................................. 120
Education: outcomes data and discussion ................................ 121
10.5 Youth justice .................................................................... 122
Youth justice: indicator information and valuing outcomes ........... 122
Youth justice: outcomes data and discussion .............................. 123
10.6 Placement stability ................................................................. 124
Placement stability: indicator information and valuing outcomes ................ 124
Establishing the form of troubled care pathways in adolescence .................. 126
Establishing a hypothetical high risk pathway ......................................... 128
Limitations to this approach ........................................................................ 130
Placement stability: outcomes data and discussion ..................................... 131
10.7 Cost of the Safe Accommodation Project ............................................ 132
Costs which fell within the project budget .................................................. 132
10.8 Breakeven analysis ............................................................................ 132
Breakeven analysis assuming constant risk profile ...................................... 134
10.9 Conclusions ..................................................................................... 135

Chapter 11: Theories of Change ............................................................... 137
11.1 Specialist placements are likely to be most successful when young people are ready, willing and able to engage in them, regardless of their level of risk ................................. 137
11.2 In light of ‘pull factors’ drawing them away from safe environments, specialist foster care must give sexually exploited and trafficked young people a reason to stay and invest in a placement ........................................... 138
11.3 Positive trusting relationships within a specialist foster placement underpin all wider attempts and strategies to improve a sexually exploited or trafficked young person’s safety and well-being .............................................. 138
11.4 Safety is multi-faceted. It takes time to progress from short-term physical safety to medium term relational safety, and then long-term recovery ............ 139
11.5 A shared, informed, multi-agency approach is crucial to the effective use of safeguarding measures to protect sexually exploited and trafficked young people from exploitation .............................................................. 140
11.6 Where effective multi-agency partnerships are not present, the model of specialist carers and project workers can act as a buffer against poor practice and continue to create a safe environment .............................. 140
11.7 Refining the placement model ............................................................ 141

Chapter 12: Conclusion .......................................................................... 143
12.1 Did the project achieve its core aims? .................................................. 143
12.2 Key messages for practice .................................................................. 145

Appendices ............................................................................................. 147
Appendix 1: Data collected for evaluation of specialist placements .................. 147
Appendix 2: Pseudonyms used in the evaluation .......................................... 148
Appendix 3: Barnardo’s marketing campaign to recruit specialist foster carers ........ 149
Appendix 4: Roles of those attending the two day awareness raising training course on CSE and trafficking ................................................................. 152
Appendix 5: Key contexts affecting the outcomes of specialist foster placements ................................................................. 153

References ............................................................................................... 155
Figures, Tables, and Case Studies

Table 1: Evaluation design ................................................................. 30
Table 2: Overview of training and evaluation participants ....................... 41
Table 3: Respondents to online survey .................................................. 42
Table 4: Percentage of attendees who rated training aspects as ‘Good’ or ‘Excellent’ .................................................. 43
Table 5: Relevance of training to participants’ role .................................. 43
Table 6: Survey respondents’ report of number of sexually exploited and/or trafficked young people they had cared for/supported ................................................ 44
Table 7: Percentage of participants who were confident or very confident in their knowledge and understanding of CSE/trafficking learning outcomes ................................................ 45
Table 8: Profile of the placements .......................................................... 64
Table 9: Summary of outcomes achieved in specialist foster placements .... 67
Table 10: Placement stability ............................................................... 71
Table 11: Mechanisms of change .......................................................... 93
Table 12: Context, mechanism and outcome patterns ................................ 112
Table 13: Categorisation and valuation of missing incidences indicator .... 119
Table 14: Outcomes associated with missing incidences indicator ............ 119
Table 15: Categorisation and valuation of educational engagement indicator ................................................ 121
Table 16: Outcomes associated with educational engagement indicator ...... 122
Table 17: Categorisation and valuation of youth justice indicator .............. 123
Table 18: Outcomes associated with youth justice indicator .................... 124
Table 19: Total number of placements after the age of 14 by 10th, 50th, and 90th percentile ................................................ 125
Table 20: Types of placements experienced by children in the care system post-14 and average length of time in placements ................................................ 127
Table 21: Proportion of children experiencing different care settings by total number of lifetime placements ................................................ 128
Table 22: Establishing hypothetical high risk and low risk care pathways to assess cost savings .................................................. 129
Table 23: Categorisation and valuation of placement stability indicator ....... 130
Table 24: Outcomes associated with placement stability indicator ............ 131
Table 25: Discounted costs of the specialist placement strand of the Safe Accommodation Project .................................................. 132
Table 26: Number of young people requiring change in outcomes in order for project to breakeven, by outcome indicator ................................................ 133
Table 27: Estimated project benefits assuming constant risk profile during specialist placements ................................................ 135

Figure 1: Pre course confidence in knowledge and understanding of learning outcomes (CSE) ........ 46
Figure 2: Post course confidence in knowledge and understanding of learning outcomes (CSE) ........ 46
Figure 3: Pre course confidence in knowledge and understanding of learning outcomes (trafficking) ................................................................................. 47
Figure 4: Post course confidence in knowledge and understanding of learning outcomes (trafficking) ................................................................................. 47
Figure 5: Pre and post course confidence to support a sexually exploited or trafficked young person ................................................................................. 48
Figure 6: Foster carers’ responses to the statement ‘Going on the training made me more likely to consider fostering a child who has been sexually exploited or trafficked’.

Figure 7: Percentage of respondents who had maintained or increased confidence in their knowledge and understanding of CSE outcomes six months after training.

Figure 8: Percentage of respondents who had maintained or increased confidence in their knowledge and understanding of trafficking outcomes six months after training.

Figure 9: Percentage of respondents who had maintained or increased confidence in their ability to support or care for a sexually exploited or trafficked young person six months after training.

Figure 10: Model of specialist foster care.

Figure 11: Linh’s collage.

Figure 12: Briony’s collages of life before and during her specialist foster placement.

Figure 13: Total number of placements for those experiencing a placement after the age of 14.

Figure 14: Original placement model.

Figure 15: Revised placement model.

Case study 1: Trafficking.
Case study 2: Sexual exploitation.
Case study 3: Different perspectives on safety.
Case study 4: Risk of re-trafficking.
Case study 5: Holding risk.
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Executive Summary

Headlines

• The Safe Accommodation Project piloted the use of specialist foster placements for young people at risk, or victims, of sexual exploitation and/or trafficking, for the first time in England, as well as providing training to foster carers and associated professionals, and 1-1 support to young people in other care settings.

• Warm, trusting relationships are at the heart of creating safe and stable specialist foster placements. These take time to develop but unlock a series of other positive outcomes.

• Effective specialist placements are supported by a team around the child which shares a common safeguarding approach and attitude toward a young person’s level of risk.

• There is clear potential for specialist placements to be cost-effective, particularly where they deter young people from unstable care pathways and being referred to residential care.

• Where specialist placements are offered in line with the model developed in the evaluation, sexually exploited and/or trafficked young people can be effectively protected and can continue to go on to recover from abuse.

• Specialist placements appear to be meeting a need amongst young people at risk, or victims, of sexual exploitation and/or trafficking. As such it is recommended that this model of specialist foster care should continue to be provided, drawing on the learning generated from the evaluation, in order to ensure that more young people can benefit from such specialist provision.

Background and overview

1 In recent years there has been growing concern about the capacity of the current care system to safeguard looked after young people who are at risk, or victims, of child sexual exploitation (CSE) and/or trafficking. This has often centred on concerns about levels of appropriate training for all carers, and how specialist foster care can be developed to address the specific vulnerabilities and safeguarding needs of these young people.

2 In 2011 Barnardo’s received grant funding from the Department for Education to deliver a two-year ‘Safe Accommodation Project’ in response to these concerns. The project comprised three strands:
   a forty four two-day training courses for foster carers and associated professionals to raise awareness of CSE and child trafficking (see point 8);
   b direct work with 88 looked after young people who were at risk, or victims, of CSE and/or trafficking; and
   c sixteen specialist foster placements for young people at risk, or victims, of CSE and/or trafficking.

3 The Safe Accommodation Project was aimed at under-18 year olds who were at risk, or victims, of
sexual exploitation and/or trafficking. The project adopted the definition of CSE found in government guidance (DCSF, 2009), and the definition of trafficking used in the Palermo Protocol (United Nations, 2000).

4 Children and young people can be trafficked within and across national borders and for a variety of reasons, including but not limited to sexual exploitation. However for the purposes of the project a ‘trafficked’ young person was defined as one who had been moved into the United Kingdom (UK) from another country for the purposes of exploitation, rather than a young person who had been moved internally within a nation or region.

Evaluation approach and methodology

5 The project was evaluated by the International Centre for the Study of Sexually Exploited and Trafficked Young People, at the University of Bedfordshire. The main aims of the evaluation were to:
   a use findings formatively to contribute to the development of the project and any future work;
   b identify outcomes and how these were achieved; and
   c identify the potential of the specialist foster placements to offer a cost-effective and safe alternative to other forms of local authority care for young people at risk, or victims, of sexual exploitation and/or trafficking.

6 The 44 awareness raising training courses were evaluated in partnership with Barnardo’s Training and Consultancy. Pre and post-training evaluation questionnaires were completed by 95 per cent of attendees, and an online survey was completed by 12 per cent of attendees six months after they were trained.

7 A realist evaluation approach was taken to evaluating the specialist foster placements. This involved gathering mostly qualitative data to identify the key mechanisms and contexts of change that underpinned the outcomes achieved within and across placements. Data was collected in the form of interviews with young people, specialist foster carers, project workers, and local authority (LA) and Barnardo’s social workers, as well as weekly monitoring logs. Although the findings should not be widely generalised, this data was used to identify key theories of change about how future specialist placements can learn from the project.

Findings from the evaluation of the awareness raising training for foster carers and associated professionals

8 The training of carers and other professionals in children’s services has been consistently identified as a route to improved safeguarding. The Safe Accommodation Project therefore aimed to provide a two-day training course to 660 foster carers on the sexual exploitation and trafficking of young people.

9 Training was only delivered to half the original target number of 660 foster carers (n=352). However the courses were also attended by other professionals involved in supporting or caring for vulnerable young people (n=311) and who reported the training to be valuable and relevant for their practice. For a list of the roles of these associated professionals see appendix 4.

10 Participants reported low levels of confidence in their understanding of child sexual exploitation and trafficking before the training, particularly in terms of their awareness of child trafficking.
Training substantially increased participants’ reported confidence in their knowledge of sexual exploitation and trafficking, as well as their confidence to support a trafficked or sexually exploited young person.

Most participants who responded to an online survey six months after attending training had maintained or increased their immediate post-training confidence in knowledge and understanding of sexual exploitation and trafficking, and their confidence to support a trafficked or sexually exploited young person.

Where foster carers were hesitant about caring for young people at risk, or victims, of sexual exploitation and/or trafficking, their concerns centred on the potential impact on children already in their care.

Participants predicted that the training would impact their practice primarily by improving their awareness of the risk indicators associated with sexual exploitation and trafficking. Those who responded to an online survey reported this as the primary change in their practice six months later.

Findings from the evaluation of the training suggest that there is an ongoing need for training which raises awareness of sexual exploitation, and particularly child trafficking, among professionals who work with children.

Training can be used as an effective recruitment tool for specialist foster care, through increasing awareness and confidence.

Overview of the specialist foster placements

Within the Safe Accommodation Project the model of specialist foster care comprised five key elements:

- a trained specialist foster carer;
- planning and reviewing;
- working in partnership;
- specialist project worker support for the young person and foster carer; and
- advocacy and brokering other services.

The project faced a number of obstacles in attempting to deliver a small number of specialist placements, including difficulties recruiting new specialist carers within the timescale of the project. This may be explained, in part, by the generally low levels of confidence in supporting sexually exploited and/or trafficked young people reported by carers and professionals who attended the two-day training course.

Barnardo’s conducted an online marketing campaign to recruit specialist foster carers which targeted professionals with experience of working with vulnerable young people. The low numbers recruited suggest that it may be easier to ‘up skill’ existing carers than to recruit new carers into these specialist roles, especially in a time-limited project such as this. See appendix 3 for further details.

While recruiting carers was difficult, the project also faced challenges in getting sufficient numbers of referrals to match the availability of those carers who were able to take placements. Although placements were provided at no cost to local authorities, some authorities were hesitant to ‘label’ young people as victims of sexual exploitation. Again, low awareness of the needs of these young
people may well be a contributing factor. As a result of these challenges the target number of placements was revised down from 16 to 11 in Year 2 of the project, although 13 placements were finally provided in total.

21 Of the 13 specialist foster placements provided, four were to victims of trafficking and nine to young people at risk, or victims, of sexual exploitation. Twelve of the young people were female, and one was male. Four of the 13 placements were pre-existing Barnardo’s placements that transferred into the scheme.

22 The young people in these 13 specialist placements had multiple vulnerabilities including: abuse and neglect; unstable care histories; low self-esteem; bereavement; domestic abuse; self harm and poor mental health; disengagement from education; and going missing. Six were known victims of sexual exploitation and/or trafficking, and the remaining seven were assessed to be at high or medium-high risk of sexual exploitation and/or trafficking.

**Specialist foster placements: outcomes**

23 The evaluation tracked a series of outcomes across the 13 placements. These were:

   a  carers aware of safety strategies;
   b  stable, safe accommodation;
   c  reduced risk of going missing;
   d  increased awareness of the difference between healthy and exploitative relationships;
   e  increased protective factors in young person’s life;
   f  recovery from abuse/exploitation and improved well-being; and
   g  positive relationship built with specialist foster carer(s).

24 Evidence was gathered against these seven outcomes primarily through the collation of qualitative data in the form of interviews with a range of people involved in the placements, and weekly logs produced by foster carers. Some quantitative data was gathered on missing incidences and placement stability.

25 Specialist foster carers learned about and employed a range of safety strategies as a result of the training they received, and ongoing support and advice from Barnardo’s.

26 One of the clearest outcomes achieved was the development of warm and trusting relationships between young people and specialist foster carers in the majority of specialist placements. These relationships enabled the achievement of wider outcomes related to young people’s safety and well-being.

27 Nine placements had either achieved medium-term stability (six), or were expected to continue beyond the end of the project (three). The remaining four placements broke down within three months.

28 Positive outcomes were clearly related to placement length and stability. In general the nine specialist placements that lasted beyond a few months (or looked likely to continue at the end of the project) saw greater improvements across all outcomes than the four that broke down quickly (see Table 9).

29 Nine out of 13 specialist foster placements lasted beyond a few months, and in eight of these the
following outcomes were achieved:

a Young people were reported to be, and reported themselves to feel, safe and protected from exploitation (see section 7.4);

b Young people’s awareness of the difference between exploitative and healthy relationships increased; (see section 7.6);

c There was evidence of protective factors in young people’s lives e.g. engagement in education, development of hobbies or skills, positive friendships, and participation in decisions that affected them (see section 7.7);

d There was evidence of improvements to young people’s physical, emotional and psychological well-being (see section 7.8).

In seven of the nine stable placements, there were either no missing episodes, a reduction in missing episodes, or very few occasions of missing (see section 7.5).

30 One of the nine placements that lasted beyond a few months did not conform to this pattern, having achieved stability and a positive relationship with a carer, but no real reduction in risk of sexual exploitation. This was primarily because of the young person’s patterns of going missing, which were affected by her unresolved experiences of bereavement and her resistance to receiving support (see case study 5).

31 In the four placements that broke down quickly there was very little evidence of improvement across these outcomes. Two of these placements ended because the young people went missing and refused to return. One ended because the foster carers struggled to cope with their anxieties about the placement. The other ended because the young person changed her mind about living in the placement and the foster carers were not provided with adequate information about some of her challenging behaviour before the placement began.

Specialist placements: mechanisms of change

32 The evaluation used qualitative data to identify the ‘mechanisms of change’ captured in the behaviour of specialist foster carers, and others supporting them, that produced the outcomes described above.

33 The following mechanisms (see 35 below) were identified within the specialist foster placements. They are presented in order of how often they were identified by interviewees as the drivers of positive change, with the most significant categories first. For further explanation of these mechanisms see chapter 8 of the full evaluation report.

34 Where positive outcomes were achieved, mechanisms that might appear contradictory were often balanced against each other. For example, in the early days of a placement risk was monitored closely, but this often developed into ways of trusting the young person to manage risk safely themselves as the placement progressed. Where safeguarding mechanisms were interpreted by young people as restrictive and even oppressive, it was possible for specialist foster carers to counter-balance this through expressions of care, understanding the young person’s perspective, and sensitive communication.

35 Caring mechanisms: Seeing past challenges to the need for compassion and unconditional acceptance

a Providing positive attention
b Persisting without evidence of change
c Avoiding escalation
d Helping the young person to communicate
e Meeting practical needs
f Noticing and responding to emotional needs

36 Safeguarding mechanisms: Appropriate sensitivity to risk
   a Applying boundaries consistently
   b Disrupting exploitation
   c Making it harder to run away
   d Monitoring risk
   e Trusting the young person to manage risk
   f Ongoing vigilance

37 Child-centred mechanisms: Working from the young person’s perspective
   a Therapeutic outreach
   b Making sense of the young person’s world
   c Persistently reaching out to the young person
   d Giving the young person control
   e Valuing cultural identities

38 Communication mechanisms: Sensitive communication
   a Taking opportunities to discuss risk in everyday life
   b Challenging oppressive assumptions
   c Talking frankly and openly

39 Relational/family mechanisms: A non-abusive environment
   a Being included in everyday family life
   b Modelling healthy relationships
   c Facilitating safe friendships

40 Activity mechanisms: Offering viable alternative activity
   a Offering activities to promote positive self-esteem
   b Occupying spare time in the early days of a placement
   c Relieving the pressure and intensity of a placement
   d Building relationships through doing things together

41 Advocacy mechanisms: Representing young people
   a Gate-keeping and brokering

Specialist placements: contexts of change

42 The impact of specialist placements was influenced by various contextual factors that could hinder or enable the support Barnardo’s was attempting to provide. The following is a summary of the most
significant contextual factors affecting the efficacy of the specialist placements. For a full list of all of the most significant contexts that were coded from interviews and other data, see appendix 5 of the full evaluation report.

43 **Specialist foster carer capacity to provide appropriate care to high risk young people.** Interviewees were clear that not all foster carers would be able to provide the kind of care needed by sexually exploited and trafficked young people. There were five areas that were identified as being relevant to the role of a specialist carer: personality, support, experience, training and availability. Interview data suggested that the approach used by successful carers could be summarised in four Cs: confidence, commitment, compassion, and the ability to cope.

44 **Level of understanding of sexual exploitation/trafficking within multi-agency teams/professionals involved in young people’s lives.** Levels of professional understanding of child sexual exploitation and trafficking clearly affected placement outcomes. A lack of agreement between professionals about risk was particularly problematic in placements that broke down quickly.

45 **Length of placement/commissioned support for young person.** The evaluation clearly demonstrated a positive relationship between the length of time a young person was in a specialist placement, and their safety and well-being. This reflected the time it takes to build a trusting relationship with a young person who may have good reasons to be mistrustful of adults, and consensus among interviewees that short term interventions were generally not appropriate for such young people.

46 **Location of placement relative to risky areas/people.** The location of the foster home could either help to disrupt exploitation, or was too close to risky environments to be effective. Crucially, the impact of the location of the placement depended on the strength of a young person’s attachment to family, friends or adults who posed a risk to them, and their willingness to ‘buy in’ to their placement (see below).

47 **Young person’s willingness and capacity to engage in a placement.** A young person’s desire to stay in a specialist foster placement and get to know new carers was one of the most significant contexts affecting the success of that placement. Some young people embraced 1-1 support or a family environment, while others struggled to adapt to these contexts for various reasons, including finding it hard to reconcile this with their relationships to birth parents.

48 **Young person’s strength of attachment to friends/family/communities that present a risk.** A young person’s strong attachment to risky environments was particularly challenging if the specialist foster home was close by and young people were struggling to build relationships with their foster carers. Moving between care placements can be very destabilising. For young people at risk of sexual exploitation in particular, the people and places they felt anchored to were often considered to be problematic by professionals in their lives.

**Cost effectiveness of specialist placements**

49 It was not possible to undertake a full cost-benefit analysis as part of the evaluation because of the lack of evidence about what would have happened to young people in the absence of a specialist placement, the small number of placements, and the different lengths of time each placement lasted. Consequently the evaluation employed a ‘break-even’ analysis approach.
This approach involved identifying four outcomes that were relevant to victims of child sexual exploitation and/or trafficking, and which carried a financial cost to the tax-payer. These were: going missing, engagement with education, contact with the youth justice system, and placement stability. These outcomes were monitored throughout each specialist placement and then compared with data gathered at the baseline. The costs of delivering the specialist placements were then compared with the savings generated by outcomes achieved in these four areas, to come to a judgment about whether the project had broken even and could therefore be considered cost-effective.

The potential savings to the State arising from improving the outcomes of the highest risk sexually exploited and/or trafficked young people are large, and it would only take a small number of those with the highest risk to see an improvement in their outcomes in order for the overall costs associated with placement instability are particularly large, and the evaluation suggests that targeting young people who would otherwise go on to placements in residential or secure accommodation is likely to produce the greatest savings.

Assuming the underlying risk profile of young people in specialist placements would not have improved in the absence of a placement there is tentative evidence that the specialist placement element of the project broke even in terms of returns delivered to the tax-payer.

There are, however, important caveats to this finding. Firstly, the small number of placements undertaken means it is not possible to be fully confident of how outcomes would have changed for these young people if they had not been selected to be part of the project. Secondly, estimates of cost savings are subject to uncertainties, and varying the assumptions employed for calculating cost savings associated with placement stability would reduce the validity of this claim. Thirdly there are a wide range of outcomes that have not been costed as part of this exercise which, if factored in, could increase the cost-effectiveness of the specialist placements (e.g. improved earning potential and increased wellbeing).

Theories of change

Together, recurring patterns of key contexts, mechanisms and outcomes can help identify theories of change about how effective safeguarding happens in the context of specialist foster care. The six theories of change below were identified as the most significant for refining the original model of specialist foster care in light of the evaluation findings.

a. Specialist placements are likely to be most successful and cost effective when young people are ready, willing and able to engage in them, regardless of their level of risk.

b. In light of ‘pull factors’ drawing them away from safe environments, specialist foster care must give sexually exploited and/or trafficked young people a reason to stay and invest in a placement.

c. Positive trusting relationships within a specialist foster placement underpin all wider attempts and strategies to improve a sexually exploited and/or trafficked young person’s safety and well-being.

d. Safety is multi-faceted. It takes time to progress from short-term physical safety to medium-term relational security (positive trusting relationships), and then long-term recovery.

e. A shared, multi-agency approach is crucial to the effective use of safeguarding measures to protect sexually exploited and/or trafficked young people from exploitation.

f. Where effective multi-agency partnerships are not present, the model of specialist foster
carers and project workers can act as a buffer against poor practice and continue to create a safe environment.

55 The model of specialist foster care was revised in light of the key contexts and mechanisms of change identified in the evaluation, and the theories of change above. This revised model can be found in section 11.7 of the full evaluation report.

Key messages for practice

56 Specialist foster placements should be in place for at least a year to enable trusting relationships to be built, which are crucial to achieving further positive outcomes.

57 Given the importance of consistent, trusting relationships, consideration should be given to employing project workers to provide 1-1 support to young people to support their transitions between specialist foster placements, into other placements or independent living post-18.

58 Specialist placements are at highest risk of breakdown where a young person does not want to be in a foster family environment and has a strong attachment to people/communities they are likely to run back to. Specialist care plans therefore need to consider how to ‘hold young people in’ to their specialist foster placements by giving them viable reasons to stay and invest, particularly in the short-term.

59 All relevant information should be shared as early on as possible so that all agencies and partners can agree on a young person’s level of risk and appropriate safeguarding strategies. This includes agreement between police and other services about responses to young people going missing.

60 All those in a team around the child supporting a young person at risk, or a victim, of sexual exploitation and/or trafficking should receive appropriate training to ensure they are working from similar perspectives on the risks to young people.

61 A range of therapeutic interventions should be available to young people in specialist placements who are in need of support, including both formal counselling and informal outreach-based project work.

62 In the case of trafficked young people who are new to the UK, the specialist placement team should consider how to ensure young people are able to participate in decision making, without over-burdening them in the early days of a placement. This could include providing explanations in a young person’s language of who various professionals are and the role they play, as well as limiting the number of meetings young people are expected to attend in a week. ¹

63 A framework/tool should be developed to support reflection on trafficked young people’s changing levels of risk and resilience in foster/other care placements. This could draw on the perspectives of the young person and wider team around the child to enable safeguarding measures to be responsive to changes in the placement. ²

64 An ability to build positive trusting relationships with young people should be the primary quality that fostering teams look for in their recruitment of specialist carers. This is likely to be characterised

¹ Although this emerged as a finding for trafficked young people, it may also be applicable to other young people, such as those who are new to the care system.

² See section 6.4 of the full evaluation report for further information on the assessment of risk for trafficked compared with sexually exploited young people.
by confidence, commitment, compassion and the ability to cope with challenging situations. At least one carer in a placement should be available to provide full-time support to the young person – especially in the early days of a placement.

65 Ongoing support should be available to carers in the form of respite and opportunities for peer-support with other specialist carers.

66 Advanced or more specialist ongoing training should be available to specialist carers. This could include information about the immigration system in order to support trafficked young people, the use of specific safety measures, and challenging societal assumptions that increase young people’s vulnerability to exploitation, including inequality and discrimination. See section 1.1 on the need for training to explore gender inequality.

Conclusion

67 The Safe Accommodation Project had three core aims:

a to improve front-line practice through flexible, sensitive intervention with children at high risk;

b to build capacity/expertise within the sector so that responses are better informed and sustainably improved; and

c to keep children safe from harm.

The evidence from the evaluation suggests that, between the outcomes achieved by the training and the specialist placement strands of the project, all three aims were achieved.

68 The evaluation has shown that where placements are offered in line with the model suggested in Figure 15, sexually exploited and/or trafficked young people can be effectively protected and can continue to go on to recover from abuse. As such it is recommended that this model of specialist foster care should continue to be provided, drawing on the learning generated from the evaluation, in order to ensure that more young people can benefit from specialist accommodation.
Chapter 1: Introduction

In recent years there has been growing awareness of the need to ensure that young people at risk, or victims, of sexual exploitation and/or trafficking are provided with safe and appropriate accommodation when they are in local authority care (Beddoe, 2007; Pearce et al., 2009; Brodie et al., 2011; ECPAT, 2011; OCC, 2012; Pearce, 2012). These young people are recognised to be vulnerable in many ways. They have become looked after because of poor experiences at home, or because they are separated from caregivers. While the care system can afford protection and opportunity (Morgan, 2007) it can also compound those vulnerabilities in a variety of ways (Chase and Statham, 2005; Coy, 2008).

1.1 Child sexual exploitation

The sexual exploitation of children and young people is a form of child sexual abuse that occurs in all communities (Berelowitz et al., 2012), and affects both girls and boys (Scott and Skidmore, 2006) - although boys who have been sexually exploited are often overlooked in policy and practice (Lillywhite and Skidmore, 2006). Although most identified victims are adolescents, children of all ages can be victims of exploitation, and the risks to younger children are becoming more apparent. Barnardo’s report the average age of those being supported by their sexual exploitation services to have fallen from 15 to 13 in five years (Barnardo’s, 2011).

The following definition of child sexual exploitation (CSE) was developed by the National Working Group for Sexually Exploited Children and Young People (NWG, 2008), and is used in ‘Safeguarding Children and Young People from Sexual Exploitation: Supplementary guidance to Working Together to Safeguard Children’ (DCSF, 2009).

Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive ‘something’ (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child’s immediate recognition; for example being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person’s limited availability of choice resulting from their social/economic and/or emotional vulnerability.

Young people have offered their own definition of CSE as the following.

Someone taking advantage of you sexually for their own benefit. Through threats, bribes, violence, humiliation, or by telling you that they love you, they will have the power to get you to do sexual things for their own, or other people’s benefit or enjoyment (including: touching or kissing private parts, sex, taking sexual photos).  

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3 As defined by the Young Women’s Group, New Horizons: 2008 (NIA project and Children’s Society)
In 2009 the Department of Children, Schools and Families advised services to be aware that forms of CSE were constantly changing (DCSF, 2009). However, in their research with Local Safeguarding Children Boards across England, Jago et al (2011) found that the ‘older boyfriend’ or grooming model was the best understood, and was most often identified as a primary form of coercion in sexually exploitative relationships. Other forms identified in their study included: pressure from an exploited peer; gang-related activity; local businesses; social networking; other uses of the internet; mobile phone; risky peer behaviour; gifts (variously money, a place to stay, alcohol, cigarettes and drugs); and ‘party lifestyle’. As awareness of the different forms of CSE has increased attention has more recently been drawn to peer-on-peer exploitation (Firmin, 2011) and gang-associated sexual exploitation (Beckett et al., 2012), both of which present particular considerations for the provision of safe accommodation.

Child sexual exploitation and the need for safe accommodation

Young people at risk, or victims, of exploitation, often have a number of other vulnerabilities. These include a disrupted family life, a history of physical or sexual abuse, neglect, domestic violence, problematic parenting, disengagement from education, going missing, drug and alcohol misuse, poor health and well-being, histories of disrupted care placements, and experience of the criminal justice system (Pearce et al., 2002, Scott and Skidmore, 2006; Coy, 2008; Pearce et al., 2009). Sexually exploited young people are not a homogenous group, and there is a danger that such lists reduce wider structures of poverty and disadvantage to risk factors that are only recognisable on an individual level (Brodie et al., 2011). Nevertheless research has consistently demonstrated that these background vulnerabilities mean sexually exploited young people are already in need of multi-agency support and care. The experience of being abused and exploited then deepens the need for appropriate support and safeguarding. CSE can affect a young person’s ability to form relationships and their mental and physical health. It can trigger self-harm because of feelings of worthlessness, increase the risk of sexually transmitted infections, HIV, unwanted pregnancy and abortion, and lead to isolation from family and friends (DCSF, 2009).

Safe accommodation therefore has a key role to play in disrupting exploitation and supporting recovery. However research has identified a number of challenges to the effective use of accommodation in safeguarding sexually exploited young people.

It has been suggested that foster care is generally more appropriate for those at risk, or victims, of CSE, but that ‘chaotic behaviour’ often leads to young people being placed in residential units (Lillywhite and Skidmore, 2006). It is also the case that foster carer numbers are not keeping pace with those entering care, and there are specific shortages of carers for teenagers generally (Clarke, 2009). Other research has found sexually exploited young people to be disproportionately likely to be placed in residential care compared to their looked after peers. For example, Jago et al (2011) found that of their sample of young people being supported because of concerns about sexual exploitation and who were looked after, 55 per cent were in residential care, compared with only 12 per cent for the general population of looked after children (DfE, 2011a). While residential and secure accommodation can be successfully used to disrupt exploitative relationships, it can also potentially increase the risk of sexual exploitation (Harper and Scott, 2005; Jago and Pearce, 2008). Where young people are accommodated together, professionals report problems with peer introduction to exploitative men and lifestyles (Melrose et al., 1999; Cusick, 2002; Coy, 2008), and with perpetrators targeting such units (Munro, 2004; Cregan, Scott and Smith, 2005; Lillywhite and Skidmore, 2006). The expansion of private care homes has also been highlighted as problematic given that they may not be strategically linked to local safeguarding processes and organisations (DfE, 2012; OCC, 2012). In response to many of these
concerns a Task and Finish group on Out of Area Placements was convened by the Department for Education in July 2012, and has recommended a series of measures to reduce reliance on out of borough placements that are not in the young person's best interest (DfE, 2012).

Despite government guidance on CSE having been available since 2000 (DoH, 2000) awareness and training is piecemeal across the country, and social workers are often unable to recognise and address risk within existing child protection procedures, which focus far more on the abuse of young children within families (Brodie et al., 2011; Jago et al., 2011). Most young people identified as having been sexually exploited are adolescents (Jago et al., 2011). Age and growing independence can therefore make it harder for professionals to identify how young people’s vulnerabilities may make them less resilient to the pull of exploitative relationships and contexts. Consequently, constrained choice is often misconstrued as free choice, leaving workers feeling unable or unwilling to intervene and safeguard young people (Beckett, 2011; OCC, 2012; Pearce, 2013 forthcoming).

Research has consistently shown girls to be more likely to be victims of sexual exploitation, which is likely to reflect the invisibility of boys and young men as being at risk (Lillywhite and Skidmore, 2006). However it also presents a clearly gendered pattern to this form of abuse that should not be overlooked. In residential settings, staff have been shown to interpret sexual behaviour from young men and women in ways that would obscure the risks of their being abused through exploitation e.g. accepting sexually violent behaviour from boys as normal, while positioning girls’ sexuality as provocative and manipulative (Barter, 2006). There is a real need therefore for foster carers and residential workers to be able to recognise and appropriately respond to the signs that a young person is at risk, and to be aware of and challenge the ways girls and young women can be blamed for their own abuse (Farmer and Pollock, 1998; Green, 2005).

Young people in care are three time more likely to run away than those living at home (The Children’s Society, 2011), and going missing is consistently reported as one of the strongest indicators of risk of CSE (Sharp, 2012). Consistent missing incidences destabilise care placements, make it more likely young people will be placed in secure accommodation, and contribute to instability in young people’s lives, which in turn can increase the risk of sexual exploitation (Creedan et al., 2005; Coy, 2009). Safe accommodation should therefore be particularly sensitive to this risk indicator. However, the recording of missing incidences is highly inconsistent between police and local authorities (OCC, 2012) which undermines a shared strategic response to those who are at risk of being exploited while missing. In March 2013 the Association of Chief Police Officers launched a new approach to defining and responding to missing incidences, in response to problems highlighted with young people going missing in the Rochdale CSE cases (ACPO, 2013). Young people will now be identified as ‘absent’ or ‘missing’, depending on an assessment of their risk by police receiving the initial report. A missing person co-ordinator from the police will be expected to work with care providers and statutory services to identify ongoing concerns for those who are persistently ‘absent’, but not ‘missing’. The impact of this is yet to be seen. However the system appears to rely heavily on services looking proactively for patterns of concern within the lower-risk category of ‘absent’ young people, which in many areas may mean these young people slip through the net.

Many of the issues raised in this brief review of the literature have also been highlighted by young people themselves when expressing concerns about their accommodation. In a participatory consultation project with 28 young people affected by CSE, 19 were living away from their families. The young people raised concerns about instability and uncertainty in care, physical safety, their relationships with carers, restrictions, the suitability of temporary accommodation, and shame and stigma because of living conditions (The ‘Having Our Say’ Project, 2010 cited in Brodie et al., 2011).
1.2 Trafficking


(a) “Trafficking of persons” shall mean the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat of or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.

(b) The consent of a victim of trafficking in persons to the intended exploitation set forth in sub-paragraph (a) of this article shall be irrelevant where any of the means set forth in subparagraph (a) have been used.

(c) The recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered “trafficking in persons” even if this does not involve any of the means set forth in sub-paragraph (a) of this article.

(d) “Child” shall mean any person under eighteen years of age.

In their Child Trafficking Update, CEOP (2011) identified the following forms of exploitation, for which young people had been trafficked into the United Kingdom (UK) in the first nine months of 2011: benefit fraud; cannabis cultivation; forced criminality (e.g. shoplifting/pick-pocketing); domestic servitude; labour exploitation (e.g. in agriculture/hospitality/nail bars); and sexual exploitation.

Young people may be trafficked across international borders and/or internally within a nation or region. The Barnardo's Safe Accommodation Project defined as ‘trafficked’ those young people who had been brought into the UK from other countries, for various kinds of exploitation. Young people can also be trafficked internally within England and the UK for the purposes of sexual exploitation. However within the scope of this project such young people were supported by Barnardo's sexual exploitation, rather than trafficking, services.

Trafficked young people and the need for safe accommodation

A range of international conventions adopted by England and Wales provide trafficked young people with the right to safe and appropriate accommodation, including: Article 20 of the United Nations Convention on the Rights of the Child (1989); Article 6 of the Palermo Protocol (United Nations, 2000); and Article 12 of the Council of Europe Convention on Action Against Trafficking in Human Beings (2005). Within these conventions, trafficked young people should be accommodated under Section 20 of the Children's Act (1989), whereby the Local Authority (LA) has a range of legal responsibilities.
Accommodation for trafficked young people needs to take account of the high level of support and care they need. This involves consideration of the immediate threat of a young person being abducted by, or going missing to rejoin, traffickers. Traffickers are recognised to be highly persistent and intelligent in their attempts to take young people back after they have been placed in LA care, evidenced by the high numbers that go missing (CSJ, 2013). This vulnerability is exacerbated by the ways traffickers may coerce young people into leaving safe care (e.g. threats to families, debt bondage, juju curses), which can create the impression of a young person leaving a placement voluntarily (NSPCC, 2012). Consequently DfE guidance states that ‘In all cases there is a likelihood that a child victim of trafficking is at risk of serious immediate harm’ (DfE, 2011b, p. 22).

Trafficked young people will also have a range of wider support needs. They may have left environments of poverty, discrimination, persecution or international or civil war (Pearce et al., 2009, 2013). They are usually separated from their home, culture, family and friends and are having to manage the impact of their experiences en-route to, and within, the UK. Separated young people in the UK report suffering from anxiety, stress, isolation, loneliness, disturbed sleep, headaches, eating difficulties, panic attacks and depression (Chase et al., 2008). For those who have also been trafficked, there is the significant additional stress of having been abused and neglected for long periods of time. Traffickers are known to exert physical, monetary, emotional and/or psychological control in their deception and coercion of child victims, often leaving them with complex and confusing feelings and relationships with the adults who have abused them (Pearce et al., 2013). The cumulative effect of these traumatic experiences means that many trafficked young people will suffer a range of physical, psychological and emotional effects (Zimmerman et al., 2006; Beddoe, 2007).

However many trafficked young people continue to be abused, unseen, and without access to the support and accommodation they need. Awareness of the indicators of child trafficking remains low among social workers (Pearce et al., 2009) who report difficulties recognising these indicators when they are used to identifying forms of abuse occurring in home environments (CSJ, 2013). The risk of trafficked young people being placed in unsuitable and unsafe accommodation (including bed and breakfast or mixed hostel accommodation) is therefore much higher when professionals are unable to identify their vulnerabilities. Those who are placed in such accommodation are then far more vulnerable to being contacted by traffickers, and are often isolated from the practical and emotional support they need (Pearce, 2012).

The need for safe and supported accommodation is most powerfully illustrated by the persistently high numbers of suspected or known victims of child trafficking who subsequently go missing from LA care. Of 64 authorities surveyed in 2012, only two collected centralised data on whether young people missing from their care had been trafficked (APPG, 2012). Nevertheless a clear picture has emerged in the last five years of disproportionate numbers of these young people going missing. In their scoping study of child trafficking into the UK, CEOP (2007) estimated that 56 per cent of the 330 known or suspected trafficked young people they identified went missing and were not found. Similarly, Harris and Robinson (2007) found that over half of the young people suspected of having been trafficking in their sample went missing within a week of arrival, and Beddoe (2007) reported that of 80 suspected child trafficking victims identified across three regions, 60 per cent went missing from care and were never found. More recently the NSPCC (2012) identified that 23 per cent of young people referred to their National Child Trafficking Advice Centre (CTAC) from 2007-2012 had gone missing at some point, and 45 per cent

\[4\] For more information, see Pearce (2012).
The age at which most suspected victims of child trafficking become known to social services is also a concern for providing safe accommodation. The number of separated young people in care aged over 16 has been growing (Pearce et al., 2009). Where separated young people arrive into the UK without proof of identity or date of birth they then undergo the difficult and inexact process of being age assessed, impacting their eligibility for services and particular forms of safeguarding, including forms of safe accommodation reserved for those under eighteen (Crawley and Kelly, 2012). The provision of services for vulnerable young people aged 16-18 and then post-18 has often been cited as a cause for concern (Stein, 2006), and there is a particular lack of appropriate therapeutic and support services for trafficked young people (CSJ, 2013). Given the range of emotional and psychological difficulties they are likely to experience, this is problematic. Chase et al (2008) report that many western frameworks for, and responses to, mental health problems are alien to unaccompanied young people. They identify the need for less stigmatising language to describe mental health – as well as a gap in appropriate mental health services for this group.

Young people from the CTAC Advisory Group advised the NSPCC that they needed time to build relationships, to be believed and to have an accessible key-worker they could contact for help advice and practical support. Consequently the NSPCC recommends that foster care with its surrogate family environment may be more appropriate for trafficked young people than independent living, and may help them resist the pull of traffickers. However, of those reported missing to the CTAC, 38 per cent went missing from foster care. The NSPCC (2012) argue that this underlines the importance of individual assessments, placement planning and training. In other research, practitioners report that untrained carers within unsupported placements can indeed increase the risks to young people, and may account for the very high numbers of trafficked young people who go missing from LA care (Pearce et al., 2009).

As a result the authors highlight the need for ‘…trained carers, supported by a multidisciplinary team, including children’s safeguarding services, health and police’ (Pearce et al., 2009, p. 9). The campaigning charity ECPAT (2010) has also recommended that the government provide safe accommodation for all trafficked young people in the form of specialist foster care, and has identified ten principles of safe accommodation. These include: the use of safety measures to reduce a young person’s risk of going missing, especially within 24 to 72 hours; asking young people what makes them feel safe and keeping them informed; understanding safety as multi-faceted; the importance of training; and ensuring young people do not feel overly restricted or punished by safeguarding measures (ECPAT, 2011).

### 1.3 Other relevant terminology within the report

**Child/young person**

This report concerns the sexual exploitation and trafficking of children. In 1991 the UK government ratified the UN Convention on the Rights of the Child, which defines a child as ‘Every human being below the age of eighteen years unless, under the law applicable to the child, majority is attained earlier’ (Article 1, Convention on the Rights of the Child, 1989). In England, a child is defined as ‘Anyone who has not yet reached their 18th birthday’ (DCSF, 2010). However research has shown that

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5 National Society for the Prevention of Cruelty to Children

6 End Child Prostitution, Child Pornography and Trafficking of Children for Sexual Purposes
professionals do not always perceive adolescents to be at risk, and that child protection responses designed for younger children are not necessarily appropriate to safeguard older children (Pearce, 2009; Jago et al., 2011). The report therefore uses the term ‘young person’ and ‘young people’ to help the reader recognise the particular age and vulnerabilities of this group of adolescents, compared with younger children.

**Looked after young people**

A ‘looked after’ young person is defined as someone under the age of 18 who is in the care of the LA by reason of a care order, or is accommodated under section 20 of the Children’s Act (1989) for more than 24 hours with the agreement of the parents, or of the young person if s/he is aged 16 or over (section 22(1) and (2) of the Children’s Act 1989). Where a young person is accommodated under a section 20 voluntary agreement, parental responsibility remains with the parents, and the LA must comply with the duties set out in the 1989 Act and the Care Planning, Placement and Case Review (England) Regulations 2010. ‘Looked after’ young people also include those accommodated by the LA under an emergency protection order; those on remand or under supervision and required to live in LA accommodation; and those in police protection or arrested and accommodated by the LA (DCSF, 2010).

The majority of trafficked young people are accommodated under section 20 of the Children’s Act (Pearce, 2012). However there is usually no parent or guardian for the LA to share parental responsibility with, and the LA is not considered to have full parental responsibility for the young person. There is, therefore, a question about whether the LA is able to fully act in the young person's best interests, leading some campaigners to argue that these young people are in need of an independent guardian (Pearce, 2012).

Being ‘looked after’ or ‘in care’ can therefore describe a variety of different experiences. The care status of each young person placed into foster homes within the Safe Accommodation Project can be found at Table 8.
Chapter 2: The Safe Accommodation Project

2.1 Overview of the project

Barnardo’s has provided specialist support to young people abused through sexual exploitation since 1994, and at the time of writing operates 20 sexual exploitation services across the United Kingdom (UK), and three services for trafficked young people in England. Barnardo’s has consistently highlighted the need for safe accommodation for victims of child sexual exploitation (CSE), through research and internal reports (Munro, 2004; Scott and Skidmore, 2006; Dillane et al., 2008). In 2011 Barnardo’s received grant funding from the Department for Education (DfE) to deliver a two-year ‘Safe Accommodation Project’. The project was operational between April 2011 and March 2013, with the aim of delivering a cost-effective, sustainable programme that offered alternatives to potentially unsafe and more expensive forms of accommodation, and safeguarded children affected by exploitation. The project aimed to:

- improve front-line practice through flexible, sensitive intervention with children at high risk;
- build capacity/expertise within the sector so that responses are better informed and sustainably improved; and
- keep children safe from harm.

The project brought together fostering, CSE and trafficking services within Barnardo’s, along with Barnardo’s Training and Consultancy (BTC), to deliver three strands of work across England, in order to achieve these aims.

The three strands of the Safe Accommodation Project were as follows.

1 Direct work with 88 young people at risk, or victims, of sexual exploitation and/or trafficking who were in local authority (LA) foster or residential care.
2 Forty four two-day training courses for local authority (LA) foster carers and associated professionals to raise awareness of the issues of CSE and trafficking and how to provide safe accommodation.
3 Specialist foster placements for young people at risk, or victims, of sexual exploitation and/or trafficking.

A Project Manager co-ordinated the delivery of the Safe Accommodation Project across Barnardo’s different regions and services, and reported on a monthly basis to a project board, which oversaw the strategic delivery of the business plan and associated key performance indicators. A steering group was also established in each region to deliver local aspects of the business plan, and was chaired by Assistant Directors in each region.

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7 Delivery of training and specialist placements continued beyond March 2013.
8 Aims taken from Barnardo’s tender to the DfE Safeguarding funding stream, 2011.
9 Direct work was provided to 106 young people in total over two years within this strand of the project.
10 The original target of 16 foster placements was revised to 11 placements during the second year of the project in light of challenges in recruiting specialist carers and low referrals to the service from LAs. See section 6.3 for further details.
2.2 The evaluation

The International Centre for the Study of Sexually Exploited and Trafficked Young People at the University of Bedfordshire was commissioned to independently evaluate the Safe Accommodation Project, as part of the original tender to the DfE. Dr Lucie Shuker was the evaluation lead, and was supervised by Professor Jenny Pearce, Director of the International Centre and Professor Donald Forrester, Director of the Tilda Goldberg Centre for Social Care Research. A research board was established alongside the project board, comprising key members of the project and evaluation teams. This board met bi-monthly to monitor the collection of data, any ongoing ethical concerns, and to provide guidance and support to the evaluator.
Chapter 3: Methodology

3.1 Evaluation aims

The aims of the evaluation were as follows.

- To inform the development of the Safe Accommodation Project by reporting on findings throughout the two years
- To identify and describe the model of intervention and support offered within the specialist placement element of the project
- To identify outcomes from the specialist placements and training, and how these were achieved
- To evaluate the potential of the specialist placements to offer cost effectiveness in comparison with alternatives including local authority (LA) foster care, residential, and secure accommodation
- To identify learning that could be shared with other practitioners to improve safeguarding through the development of new theories about providing safe accommodation for sexually exploited and/or trafficked young people

3.2 Realist evaluation

The evaluation adopted a ‘realist’ approach in order to achieve these aims (Pawson and Tilley, 1997). From this perspective not all social projects and interventions are expected to be successful for all participants. Rather than aiming to uncover whether something has ‘worked’, evaluators instead ask ‘what worked, for whom, in what circumstances, and why?’ By taking account of the various contexts that can impact even the best-designed projects, it is then possible for future work to be better targeted to those environments and participants where it is likely to have the most positive effects.

While realist evaluations gather multiple kinds of data on outcomes, they also use qualitative methods to uncover the key mechanisms of change that produced these outcomes – exploring why young people reacted positively to certain approaches to safeguarding, for example. Finally, realist evaluators gather information about the many contexts in which the project is happening. Gathering information on the type of young person or foster carer, awareness of the issue of exploitation locally, or cuts to other services, can help to identify patterns around the circumstances that will help or hinder this kind of work in the future. Further description of this approach can be found in section 8.2.

This is a theory-driven approach to evaluation, and aims to draw on previous research and practitioner wisdom to identity, test, and refine theories about how a program is expected to work. The evaluator therefore presented her developing analysis back to participants on subsequent research visits to ask them to confirm, deny or refine her understanding of each case. Interviewees were also asked how their experience of each placement was similar or different to their wider experience of caring for or supporting young people. Although only a small number of placements were evaluated, the findings should therefore also capture a much wider pool of experience that helps to generate theories about the particular ways these young people can be kept safe (see chapter 11).
3.3 Formative feedback

The evaluation had a strongly formative element, to ensure that data informed the development of the Safe Accommodation Project over the course of the two years. The following reports were produced over the two years to support this process.11

- A literature review on what is known about providing safe accommodation to sexually exploited and/or trafficked young people was written, circulated to all regions and distributed as part of the training pack
- A small-scale pre-evaluation consultation project was undertaken with young people about safe accommodation and distributed as part of the training pack (see section 4.2)
- A literature review on the recruitment of foster carers was undertaken after this was identified as an area of concern, and key messages were used to design the Year 2 recruitment campaign
- An internal stakeholders review, drawing on semi-structured interviews with 16 key stakeholders from within Barnardo’s helped to identify areas for development in Year 2
- An interim evaluation report was produced at the end of Year 1, identifying progress to date, key challenges, and making recommendations for Year 2

3.4 Evaluation design

Both quantitative and qualitative data were gathered to evaluate the impact of the Safe Accommodation Project, and to provide recommendations to the project board in relation to the development of its work.

To our knowledge, the specialist foster placements provided within the project were the first attempt at developing a model of specialist foster care for sexually exploited and/or trafficked young people in the United Kingdom (UK). The evaluation therefore focused primarily on evaluating and identifying learning from the piloting of these placements, and on evaluating the training. As a result the direct work with 106 young people was not evaluated, although previous evaluations of Barnardo’s support for sexually exploited young people are publicly available.12

Details of the design for each element of the project can be found in Table 1.

Evaluation of specialist placements

The Safe Accommodation Project aimed to offer a small number of specialist placements over two years. Each placement was therefore viewed as a case study, and multiple sources of data were gathered to understand it in detail. The realist evaluation framework of contexts, mechanisms and outcomes was used to structure and design the research tools. The first phase of interviews therefore centred on understanding the key contexts in which the placements were being provided, the second phase on uncovering mechanisms of change and the final interview on outcomes. The evaluation

11 These can be found at http://www.beds.ac.uk/research/iasr/centres/intcent/publications
12 A two year evaluation of ten Barnardo’s sexual exploitation services reported substantial reductions in risk for young people, particularly on measures of going missing and sexual exploitation (Scott and Skidmore, 2006). More recently a report by Pro Bono Economics (Thwaites et al., 2011) found that services reduced the risk of sexual exploitation and four other highly correlated risk factors – going missing, substance abuse, disengagement from education and unsuitable accommodation, and concluded that for every £1 spent on an intervention £12 is saved for the taxpayer.
gathered quantitative data on a small set of outcomes including the number of missing incidences prior to, and during, a specialist placement and the length of a specialist placement compared with all placements a young person experienced in the previous year. All other outcomes were monitored qualitatively using a weekly monitoring log which was completed by the specialist foster carer, and through interviews with specialist foster carers, young people, project workers, and LA and Barnardo’s fostering social workers.\textsuperscript{13}

The data that was finally collected is at appendix 1. More data was collected in placements that were established earlier in the project, and/or were stable for the medium to long term, than in those that were established within a few months of the end of the project and/or ended quickly. In placements that broke down very quickly an interview was conducted with a Barnardo’s fostering social worker to establish the reasons, but interviews were not pursued with specialist foster carers, young people or LA social workers. All interviews with young people were conducted face to face, and as many interviews as possible with adult interviewees were also face-to-face. Where this was not possible, telephone interviews were arranged.

<table>
<thead>
<tr>
<th>Safe Accommodation Project strand</th>
<th>Description of data collected</th>
<th>Tools</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct work with 106 young people</td>
<td>Not evaluated</td>
<td></td>
</tr>
</tbody>
</table>
| Training course\textsuperscript{14} | • Self-reported level of confidence in knowledge and understanding  
• Anticipated impact of training on practice | Pre and post training course questionnaire |
|                                    | • Self-reported level of confidence in knowledge and understanding  
• Impact of training on practice  
• Effective aspects of training  
• Barriers to becoming a specialist carer | Six month post-training online survey |
| Specialist foster placements      | • Historical and baseline data about young person’s needs and previous care history | • Interview with social worker  
• Placement referral form |
|                                    | • Contextual data on carer(s) training and experience | Semi-structured 1-1 interviews 6-8 weeks into placement with  
• young person\textsuperscript{15} |

\textsuperscript{13} Access to the research tools used in the evaluation can be gained by emailing cara.senouni@beds.ac.uk

\textsuperscript{14} The two-day training course developed under this project was evaluated in partnership with Barnardo’s Training and Consultancy (BTC) who collected and analysed pre and post-training evaluation forms, and shared the raw data with the evaluator.

\textsuperscript{15} All young people interviewed were given the opportunity to discuss their specialist foster placements by creating collages of their life before and after placement. 180 words/images were provided from magazines and newspapers. 60 were positive, 60 were negative and 60 were ambiguous. Young people then chose words/images to construct an image of their life before and during the Barnardo’s placement.
<table>
<thead>
<tr>
<th>Specialist foster placements</th>
<th></th>
</tr>
</thead>
</table>
| • Initial assessments of risk and need (contextual data on young person) | • specialist foster carer\(^\text{16}\)  
| • Initial experiences and perceptions of specialist foster placement | • local authority social worker\(^\text{17}\)  
| | • Barnardo's supervising social worker (fostering service)  
| | • Barnardo's specialist project worker (trafficking/sexual exploitation service)  
| • Experiences and perceptions of specialist foster placement (exploration of mechanisms of change) | Semi-structured 1-1 interviews 4-5 months into placement with  
| • Initial assessment of early short-term outcomes | • young person  
| • Reflecting on/testing interpretation of previous interview data | • specialist foster carer  
| | • Barnardo's supervising social worker (fostering service)  
| | • Barnardo's specialist project worker (trafficking/sexual exploitation service)  
| • Experiences and perceptions of specialist foster placement (exploration of mechanisms of change) | Semi-structured 1-1 interviews at 8-9 months young person  
| • Assessment of medium-term outcomes | • specialist foster carer  
| • Reflecting on/testing interpretation of previous interview data | • local authority social worker  
| | • Barnardo's supervising social worker (fostering service)  
| | • Barnardo's specialist project worker (trafficking/sexual exploitation service)  
| Ongoing information on key indicators of risk and well-being including  
| • young person's engagement with education  
| • missing incidences  
| • positive activities  
| • contact with police  
| • contact with family and friends  
| • health and well-being  
| • behaviour | Weekly monitoring log completed by specialist foster carer(s)  
| Further contextual data on placement progression, and reasons for break-down | Project management documents including  
| | • disruption reports produced by Barnardo's where placements broke down  
| | • placement updates and reviews  
| Hours spent by Barnardo’s placement team supporting each specialist foster placement | Monthly report from Barnardo’s

\(^{16}\) The evaluator offered to interview both the primary and secondary carer in homes where there was more than one foster carer. However, only one couple were interviewed together due to most secondary carers being out at work during the day.

\(^{17}\) The LA social worker was only interviewed twice, with a focus on gaining contextual data in the first interview and considering placement outcomes in the second interview.
3.5 Analysis and reporting

Qualitative data

The evaluation gathered primarily qualitative data in the form of interviews, narrative data within weekly monitoring logs, referral forms and reports, and collages made by young people.

Transcribed interview material, and all other narrative and visual documentation were uploaded into the qualitative analysis program NVivo 10. This data was then coded thematically within a realist evaluation framework, under the primary categories: ‘contexts’, ‘mechanisms of change’ and ‘outcomes’. These codes were further organised and then ranked by the number of times they occurred within and across interviews to identify the most frequently recurring contexts, mechanisms and outcomes for each placement. The assumption was that a more reliable account of a placement would emerge where it was based on opinions and observations that were shared by multiple people involved in a placement. The key elements of the story of each placement were captured in a written ‘case memo’, and these memos were then compared with one another to identify and confirm the most significant and recurring themes across all placements.

Quotes have been used in the following chapters to illustrate and to bring to life the findings that are being reported. Quotes are only used to illustrate the most significant and common findings as identified in the process above. In this respect they do not provide a ‘balanced’ picture of what happened across all placements but are used as the best examples of the most reliable patterns that emerged.

Quantitative data

A small amount of quantitative data was also gathered. This data was primarily analysed and reported for chapter 10, which considers the cost-effectiveness of the specialist placements. For more information on the methodology and analysis of this aspect of the evaluation, see section 10.2. Quantitative data was gathered through an interview with the young person’s LA social worker, and the weekly monitoring logs completed by specialist foster carers. The following quantitative data was collected.

- Estimates of the number of times a young person went missing from their care placement in the six months prior to being placed with the Safe Accommodation Project, and actual number of times a young person went missing while in a specialist placement
- Number of unauthorised absences from school/college each week during placement
- Number of offences committed in the 12 months prior to, and during, a specialist placement
- Length and type of care placements in the 12 months prior to a young person being placed with the Safe Accommodation Project

3.6 Ethics and research issues

The ethical protocol and research plans for the evaluation were approved by the Ethics Committees of the University of Bedfordshire, Barnardo’s, and the Association of Directors of Children’s Services
Ethical issues of involving young people in the evaluation of their specialist foster placements

Young people who are considered vulnerable can be excluded from research because of various practical and ethical challenges, including their availability, workers’ resources, and concerns about how young people’s perceptions might clash with professional opinion (Warrington, 2010). Consequently, consideration was given at the outset to how the views of the young people in specialist placements could be heard in a safe and supported way.

All young people were given an information sheet by their LA social worker, project worker or specialist foster carer that explained in accessible language what their participation would involve. After discussing it, raising any questions, and giving young people the chance to give or withhold their consent, these gatekeepers then arranged a time for the evaluator to meet the young person. The evaluator went through the key information on confidentiality/anonymity again at the start of each interview, and asked if the young person would prefer to have written notes taken, or a digital recorder used.

A variety of research tools were designed that gave the flexibility in each interview to respond to young people’s preferences about how they shared their views. This included creative materials for making collages with words and images that captured their experiences before and during the specialist placements, a score-card that they could use to rate different aspects of their specialist foster placement, and more standard sets of interview questions. This flexibility worked well and as a result various kinds of data were produced, including images, words, rating scales and recorded interviews.

There were many ways in which an imbalance of power was unavoidable in these interviews. All the young people in placements were under 18, four were adapting to a new country and to English as a second language, most were managing experiences of loss and separation from family, and had suffered abuse or neglect of various kinds. The evaluator therefore took advice from those supporting and caring for the young people about any particular ways they could be made to feel safe. In some interviews young people were very confident, and able to express their preferences about how and when they shared their experiences. Others however were more timid and compliant, and the evaluator had to actively offer opportunities for them to take control within the interview process. This meant reminding them that they could end the interview whenever they wanted, and in two cases judging by the young person’s behaviour that ending an interview or their involvement in the evaluation early was in their best interests, even if they did not say so explicitly. The evaluator took advice from gatekeepers on whether an interpreter was needed, and only used interpreters for half the interviews with young people who were learning English as a second language. In some placements it transpired that interpreters should have been used more generally, and on reflection young people themselves should have been asked if they would like an interpreter, so that they were able to more fully share their feelings and experiences.

18 The only limit to this confidentiality was where the evaluation team judged the interviewee, or someone else, to be at risk of significant harm if information was not passed on to a relevant individual.
Finally, each young person was given a £10 high street shopping voucher for each interview they participated in, and was sent a short summary of the research findings after the project ended.

3.7 Limitations of the study

There are a number of ways in which this evaluation was limited in its scope. Firstly only 13 placements were evaluated, and only four were for trafficked young people. This heavily constrains the scope for identifying patterns across placements and means that these findings should not be generalised to all young people affected by CSE and/or trafficking in specialist foster care. Rather, the mechanisms, contexts, and theories of change identified in chapters 8, 9 and 11 should be taken as theories for further consideration within future research. Secondly half of the placements (seven) lasted for under four months, either because they broke down quickly, or because they began within the last few months of the project. Findings from these placements are therefore based on fewer interviews and monitoring logs than those placements that lasted longer – limiting the strength of the findings overall. Thirdly, the evaluation reported shortly after the end of the project itself, and therefore was unable to explore the longer term impact and outcomes of the specialist placements.

3.8 Structure of the rest of the report

Pre-evaluation consultation with young people

• Chapter 4 presents the findings of a pre-evaluation consultation report with sexually exploited and/or trafficked young people in care, that was undertaken to inform the development of the project.

Evaluation of the training strand of the project

• Chapter 5 reports on findings from the evaluation of the training strand of the Safe Accommodation Project, which saw 663 LA foster carers and associated professionals trained in CSE, trafficking and safe accommodation.

Evaluation of the specialist foster placement strand of the project

• Chapter 6 offers an overview of the specialist foster placement strand of the Safe Accommodation Project. This covers the placement model, challenges in delivering the target number of placements, and the risk profile and vulnerabilities of the young people who were placed.

• Chapter 7 presents the outcomes that were achieved across all specialist placements. These outcomes are: carer’s awareness of safety strategies; safe and stable accommodation; reduced risk of going missing, increased awareness of the difference between healthy and exploitative relationships; increased protective factors in young person’s life; recovery from abuse/exploitation and improved well-being; and the quality of relationships built with specialist foster carer(s).

• Chapter 8 identifies the most significant mechanisms of change that were active in specialist placements to produce positive outcomes for young people.
• **Chapter 9** reports on the key contexts that enabled or undermined the support offered to young people through the specialist placements.

• **Chapter 10** analyses and reports on the cost effectiveness of the specialist placements.

• **Chapter 11** summarises the evaluation of the specialist placements by presenting six theories of change that are then used to refine the original placement model in light of what was learned through the evaluation.

**Conclusion**

• **Chapter 12** draws together the key findings to consider whether the Safe Accommodation Project achieved an overall improvement in front-line safeguarding practice, and a reduction of the risk of CSE and trafficking for young people.
Chapter 4: Pre-Evaluation Consultation with Young People

4.1 Overview and methodology of pre-evaluation consultation

In their original tender for the Department for Education (DfE) grant, Barnardo’s committed to consulting with children and young people about their plans. Consequently, the University of Bedfordshire was commissioned to conduct a small consultation project in the early months of the project, to inform the development of the project. This consultation was subject to the same ethical protocol as the wider research, and the same considerations in terms of research with vulnerable young people.

Rather than seeking feedback on specific plans for the specialist placements, the consultation focused on understanding young people’s general experiences of the care system and foster carers’/professionals’ attempts to keep them safe, or not, from exploitation. In this sense it was not a highly participatory consultation, but one in which the evaluator had pre-determined the themes and use of the data to be collected.

The evaluator conducted face-to-face semi-structured interviews with nine young people about their experience of being in the care system, and what made them feel safe. Seven were in foster care when they were interviewed, and two were in residential care but had previously been accommodated with foster carers. 19 All nine were involved with specialist services to ensure each had access to ongoing support. One had been trafficked, and eight were being supported by Barnardo’s sexual exploitation services. Seven were female, one was male, and one was transgender.

The CTAC and ECPAT youth groups were approached to take part in the consultation, but were unable to because of other commitments. 20 As a result only one young person affected by trafficking was interviewed. However, to ensure foster carers were aware of the perspectives and experiences of trafficked young people, all those who attended the two day awareness raising training course have received ‘On the Safe Side’. This is a booklet produced by ECPAT about the principles of safe accommodation for trafficked children, which was produced in consultation with trafficked young people.

A report was written to share the findings from this small-scale consultation, and was distributed to those attending the training element of the Safe Accommodation Project in Year 2. The full report is available online and a summary of the key findings is below. 21 All names have been changed, but ages are correct.

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19 It is not known whether these care placements were provided by the local authority or alternative providers.
21 http://www.beds.ac.uk/research/iasr/centres/intcent/publications
4.2 Findings from the pre-evaluation consultation with young people

1 Relationships with family and friends were very important to these young people – even more so when they could not see or talk to them easily. As a result they appreciated foster carers recognising and valuing these relationships, and helping them find ways to stay in touch.

2 This group of young people did not necessarily have the same understanding of risk as their carers and LA social workers, nor think about their own safety in the same way. However, their understanding of risk and safety did develop positively as they were supported.

   It’s like they say you can go somewhere but you have to be back at a certain time and that time will be stupid. Stupid! And I wouldn’t come back at that time and before you know it the police start looking for you. It’s like it doesn’t make sense – yeah. And then I think you’re basically wasting police time out looking for me, and I’m perfectly fine. Obviously I understand that they think something could happen to me but most of the time I’m fine (Marsha, 16).

3 There are good reasons someone goes missing, and these young people wanted carers to be interested in what those reasons were. Even if a young person gave the impression that they were independent, didn’t want anyone to interfere and didn’t trust anyone – it didn’t mean they didn’t need caring for. Although they complained about rules and boundaries, they thought these were better than carers being indifferent to their safety and needs, especially when they returned home.

   She (foster carer) didn’t say ‘Stop’. She didn’t care to be honest. If I went missing, she’d say ‘Where you been?’ I’d say ‘Out’ and that would be it. She never asked any more questions. She should have convinced me not to, asked me ‘What’s up?’ Sat me down, asked me if I was alright, but she never did. She could have welcomed me back or something, or sat me down and started talking to me or something but she never did (Natalie, 15).

4 Like many young people, they described a growing need for independence, which may, at times, have been satisfied through experiences that others would see as ‘risky’. As a result they often experienced boundaries as being controlling. Where young people have experienced exploitation, carers therefore need to look for ways to recognise the value of their independence, and give them chances to exercise choice.

   I feel very angry. I feel very sad. And I feel I been in prison, you know, prison? Because not allowed for go out, not allowed mobile phone. Not talk to friends a lot, not see friend. I feel I been in prison (Mai, 17).

   Now I’m surprised that I was going out at this time and I didn’t come home for ten hours. So right now it is different. Right now I have to be home at six but when I was 11 and a half I was going out at six! (Ola, 12).

5 This group of young people appreciated adults who took time to build their trust, who didn’t judge them or their relationships, and who tried to understand or remember what it was like to be a teenager.

   First of all she (foster carer) didn’t like the fact that I wasn’t a virgin. She was not happy with that, definitely not happy with that! My social worker said, ‘and she’s sexually active’. (Acting as her carer with a disgusted face) – ‘How old is she again?’ (Laughs) she was like, ‘14’. She said
‘Oh my God!’ She wasn’t happy about that. She didn’t want me to do anything! I was thinking obviously me doing stuff at that age, that young was not great but it’s done now (Marsha, 16).

6 All of the young people felt nervous, scared and emotional when they first arrived to a care placement, regardless of whether or not they showed it. They felt welcomed when carers took the time to find out about them, and made sure they had everything they needed.

    She (foster carer) came to my room and told me I didn’t need to cry. She asked me if I wanted something to eat, if I wanted something, if I was alright (Ania, 13).

7 It was important to these young people to feel that you were ‘one of the family’. They liked being taken out for meals and trips with the rest of the family, carers showing concern about where they were if they were out, and being talked to with respect.

8 For these young people, food was a sign of care, inclusion and feeling ‘at home’, and could either make them feel that they were welcome, or that they were intruders in a new home.

    When I come here first time, I think for lunch, and I feel hungry. And Ruth (foster carer) make me sandwich, and I very surprised, ‘cause I live with Helen, Helen never do that for me. But when I come here Ruth make me sandwich and I feel very happy. And I feel her very good people. I feel very close you know? (Mai, 17).

9 Many aspects of these young people’s lives had changed for the better while they had been in care. This included going to school/college, becoming more confident, learning new skills, and learning how to keep themselves safe.

    I got through school in one piece, that’s one. I got into college. I picked a college far away from people I didn’t like so that I couldn’t – yeah. I don’t go out as much as I used to, and if I do I say where I’m going and stuff like that. Yeah. I take precautions with my sex life and stuff (Marsha, 16).

10 The young people’s advice to carers was to listen to young people, to not judge them and to give them space.

    Give them space, and if they think that something’s going on, let the foster daughter/son talk to them when they want to. Don’t pressurise them. Do it at their own speed (Kelly, 16).

    Show them that you’re there for them, by listening if they want to speak. If someone says ‘Don’t do this’ then it makes you want to do it more to prove them wrong. So work with them, not against them (Rihanna, 17).
Chapter 5: Evaluation of Awareness Raising Training for Foster Carers and Associated Professionals

There is consistent agreement on the need for professionals working with young people to receive training about child sexual exploitation (CSE) and trafficking. Training is recognised to improve safeguarding through helping professionals identify a young person as at risk, appreciate the complexities of a young person’s experience, and equip professionals to respond (Pearce et al., 2009; ECPAT, 2011; Jago et al., 2011; OCC, 2012; CSJ, 2013). As discussed in chapter 1, a lack of training among carers and associated professionals is a contributing factor to young people’s ongoing risk of exploitation and abuse.

The Safe Accommodation Project therefore aimed to improve front-line safeguarding practice by developing and delivering a two-day training course entitled ‘Working with sexually exploited and/or trafficked young people – awareness raising for foster carers and associated professionals’. Twenty two training courses were to be delivered in each year of the project, to a minimum of 15 foster carers per course (660 carers in total).

Foster carers within the specialist placement strand of the project also attended this two-day course, which was a core element of the placement model. The evaluation of the training is reported separately but further consideration is given to the role of training within the specialist placements in chapters 8, 9 and 11.

5.1 Summary of key findings

1 Training was only delivered to half the original target number of 660 foster carers (n=352). However the courses were also attended by other professionals involved in supporting or caring for vulnerable young people (n=311) and who reported the training to be valuable and relevant for their practice. For a list of the roles of these associated professionals see appendix 4.

2 Participants reported low levels of confidence in their understanding of CSE and trafficking before the training.

3 Before training participants were consistently less confident in their understanding of trafficking compared with CSE.

4 Training substantially increased participants’ confidence in their knowledge of CSE and trafficking.

5 Training increased participants’ confidence to support a trafficked or sexually exploited young person.

6 Participants predicted that the training would impact their practice primarily by improving their awareness of the risk indicators associated with CSE and trafficking. Those who responded to an online survey reported this as the primary change in their practice six months later.

7 For survey respondents the most powerful aspects of the training were meeting experienced trainers, and understanding how young people may be controlled and the impact this has on them.
Where foster carers were hesitant about caring for young people at risk, or victims, of CSE or trafficking, their concerns centred on the potential impact on children already in their care.

Most participants who responded to an online survey six months after attending training had maintained or increased their immediate post-training confidence in knowledge and understanding of sexual exploitation and trafficking, and their confidence to support a trafficked or sexually exploited young person.

5.2 Methodology for evaluating the training

Participants were asked to fill out a form immediately before and after the two-day training course, to identify how their levels of confidence, and knowledge and understanding of CSE and trafficking had been affected. Ninety-five per cent of participants completed these forms. Participants were then invited to share their email addresses if they were happy to be invited to complete an online survey six months after their training. Two hundred and sixty-five provided their email addresses (40 per cent of all participants), and of these 80 completed the online survey—a response rate of 30 per cent. Two separate surveys for foster carers and associated professionals were piloted, and then launched in December 2012. Invitations were sent on a monthly basis to those who had completed their training six months previously. The last survey invitation was sent in February 2013, so that participants of courses between September and November 2012 had five, four or three months between training and follow-up, rather than the full six months.

5.3 Key findings from the evaluation of the Training

Finding 1: Training was only delivered to half the original target number of 660 foster carers (n=352). However the training was still reported to be valuable and relevant for the 311 other associated professionals who attended, and who supported foster carers, were involved in residential care, or worked with vulnerable young people.

Table 2 shows that 663 people were trained over two years. While evaluation data is missing for 34 participants, the remaining forms show that 352 foster carers and 277 associated professionals were trained. While the number of foster carers is just over half the original target figure of 660, Table 2 shows an increase in foster carers attending the training course in Year 2 as a result of improved targeting. In consultation with the Department for Education (DfE) Barnardo’s also targeted the training beyond foster carers in Year 2, to include professionals who were involved in the support of vulnerable young people (e.g. social workers, residential care home workers, police). The relatively low levels of knowledge and understanding reported in the pre-training evaluation forms suggest that there continues to be the need for awareness raising amongst professionals as well as carers (see Table 7).
The majority of participants who were not foster carers were involved in supporting the safe accommodation of young people, either through supporting foster carers, or providing residential care. Where not involved in providing or supporting accommodation directly, other professionals were generally involved in providing services to young people (see appendix 4 for list of roles). Eighty eight per cent of respondents reported that all or most aspects of the training were relevant to their role (see Table 5), and 98 per cent of those completing the six month post-training survey felt that the training was worth doing. This suggests that although fewer foster carers attended the training than originally hoped for, it was appropriate to widen the audience to include associated professionals.

**Table 2: Overview of training and evaluation respondents**

<table>
<thead>
<tr>
<th></th>
<th>Year 1</th>
<th>Year 2</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Courses delivered</td>
<td>22</td>
<td>22</td>
<td>44</td>
</tr>
<tr>
<td>Total number trained</td>
<td>330</td>
<td>333</td>
<td>663</td>
</tr>
<tr>
<td>Number of evaluation forms not completed</td>
<td>15</td>
<td>19</td>
<td>34</td>
</tr>
<tr>
<td>Total number of evaluation forms</td>
<td>315</td>
<td>314</td>
<td>629</td>
</tr>
<tr>
<td>Local Authority (LA) foster carers</td>
<td>111</td>
<td>206</td>
<td>317</td>
</tr>
<tr>
<td>Barnardo’s foster carers</td>
<td>23</td>
<td>12</td>
<td>35</td>
</tr>
<tr>
<td>Total foster carers</td>
<td>134</td>
<td>218</td>
<td>352</td>
</tr>
<tr>
<td>Professionals who support foster carers</td>
<td>122</td>
<td>49</td>
<td>171</td>
</tr>
<tr>
<td>Residential accommodation professionals</td>
<td>24</td>
<td>22</td>
<td>46</td>
</tr>
<tr>
<td>Other associated professionals</td>
<td>35</td>
<td>25</td>
<td>60</td>
</tr>
<tr>
<td>Total other professionals</td>
<td>181</td>
<td>96</td>
<td>277</td>
</tr>
</tbody>
</table>

22 These figures differ slightly from those reported in the Year 1 Interim Report because that report was produced before all the evaluation forms from Year 1 were available for analysis. However they are accurate for the courses delivered over the two years.
Table 3: Respondents to online survey

<table>
<thead>
<tr>
<th>Online survey respondents</th>
<th>80</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>11</td>
</tr>
<tr>
<td>Female</td>
<td>69</td>
</tr>
<tr>
<td>Role</td>
<td></td>
</tr>
<tr>
<td>Foster carers</td>
<td>53</td>
</tr>
<tr>
<td>Residential workers</td>
<td>4</td>
</tr>
<tr>
<td>Professionals who support foster carers</td>
<td>17</td>
</tr>
<tr>
<td>Other associated professionals</td>
<td>6</td>
</tr>
<tr>
<td>Primary/secondary carer</td>
<td></td>
</tr>
<tr>
<td>Primary carer</td>
<td>49</td>
</tr>
<tr>
<td>Secondary carer</td>
<td>4</td>
</tr>
<tr>
<td>Number of years experience as a foster carer</td>
<td></td>
</tr>
<tr>
<td>1-5</td>
<td>22</td>
</tr>
<tr>
<td>6-10</td>
<td>11</td>
</tr>
<tr>
<td>11-20</td>
<td>13</td>
</tr>
<tr>
<td>21-30</td>
<td>6</td>
</tr>
<tr>
<td>30+</td>
<td>1</td>
</tr>
<tr>
<td>Age range of foster carers</td>
<td></td>
</tr>
<tr>
<td>21-30</td>
<td>2</td>
</tr>
<tr>
<td>31-40</td>
<td>3</td>
</tr>
<tr>
<td>41-50</td>
<td>15</td>
</tr>
<tr>
<td>51-60</td>
<td>26</td>
</tr>
<tr>
<td>60+</td>
<td>7</td>
</tr>
</tbody>
</table>

The majority of those completing evaluation forms after two days of training rated the course as either good or excellent in terms of the quality of the materials, the trainers’ presentation style, and the level and type of training, and 88 per cent reported that all or most aspects of the training were relevant to their role.
Table 4: Percentage of respondents who rated training aspects as ‘Good’ or ‘Excellent’.  

<table>
<thead>
<tr>
<th>Training Aspect</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>The level the training was pitched at</td>
<td>96%</td>
</tr>
<tr>
<td>The balance between taught elements and activities</td>
<td>92%</td>
</tr>
<tr>
<td>Presentation style of the facilitators</td>
<td>99%</td>
</tr>
<tr>
<td>The materials and handouts available</td>
<td>99%</td>
</tr>
</tbody>
</table>

Table 5: Relevance of training to participants’ role

<table>
<thead>
<tr>
<th>Relevance</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>All aspects</td>
<td>61%</td>
</tr>
<tr>
<td>Most aspects</td>
<td>27%</td>
</tr>
<tr>
<td>A few aspects</td>
<td>12%</td>
</tr>
<tr>
<td>Not at all</td>
<td>0%</td>
</tr>
</tbody>
</table>

Finding 2: Participants reported low levels of confidence in their understanding of CSE and trafficking before the training.

Participants were asked to rate their confidence in their knowledge and understanding of the following five areas, for sexually exploited and trafficked young people separately, on both pre and post-training evaluation forms.

1. CSE/trafficking as a child protection issue
2. How children and young people become sexually exploited/trafficked and the support they need
3. How children and young people are affected by CSE/trafficking and the behaviours they may present
4. The specific risks which may present for children and young people who are sexually exploited/trafficked whilst in safe accommodation
5. The need for multiagency working and the additional support needs of young people and carers

Across the five key areas for CSE, very few participants reported feeling confident or very confident about their own understanding before the training (see Table 7). The area participants were most confident in was their knowledge of the need for multi-agency working, and the additional support needs of young people and carers in sexual exploitation cases, which nevertheless was very low at 34 per cent. The area where fewest participants reported feeling confident or very confident was how

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23 Participants were asked whether they thought each element of the training was ‘poor’, ‘fair’, ‘good’ or ‘excellent’
Finding 3: Before training participants were consistently less confident in their understanding of trafficking compared with CSE.

Table 7 shows that, across all five learning outcomes, those attending the training felt less confident about their knowledge of trafficking compared to CSE. Before training, 15 per cent reported being confident or very confident in understanding trafficking as a child protection issue for example, compared to 29 per cent for understanding CSE as a child protection issue. This suggests that trafficking is generally less well understood by foster carers and professionals working with young people, which may be because of a lower level of experience supporting these young people.

Respondents to the six month post-training online survey were asked how many young people they had cared for or supported who they knew (or by then suspected) were at risk, or victims, of CSE or trafficking (see Table 6). Although professionals reported having supported more trafficked and sexually young people than foster carers, both professionals and foster carers were more likely to have supported/cared for young people at risk, or victims, of CSE, than trafficking.

Table 6: Survey respondents’ report of number of sexually exploited and/or trafficked young people they had cared for/supported

<table>
<thead>
<tr>
<th>Number of young people</th>
<th>Respondents who reported having supported or cared for this number of young people at risk, or victims, of CSE</th>
<th>Respondents who reported having supported or cared for this number of young people at risk, or victims, of trafficking</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>14</td>
<td>48</td>
</tr>
<tr>
<td>1</td>
<td>18</td>
<td>17</td>
</tr>
<tr>
<td>2</td>
<td>13</td>
<td>5</td>
</tr>
<tr>
<td>3</td>
<td>8</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>5</td>
<td>6</td>
<td>1</td>
</tr>
<tr>
<td>6</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>8</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>10+</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>NA</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Total number of young people</td>
<td><strong>214</strong></td>
<td><strong>51</strong></td>
</tr>
</tbody>
</table>
Government guidance and policy on CSE has been in circulation since 2000 compared with 2007 for trafficked young people (DoH, 2000; DCSF, 2007). Similarly the DfE Action Plan on CSE was launched in late 2011 (DfE, 2011c), in response to a series of high profile court cases and research reports, all of which may have influenced the relative profile of CSE compared to trafficking for those who work with young people.

**Finding 4:** Training substantially increased participants' confidence in their knowledge of CSE and trafficking.

Across all learning outcomes, more than 90 per cent of participants reported feeling confident or very confident in their knowledge and understanding of CSE/trafficking at the end of two days of training.

**Table 7:** Percentage of participants who were confident or very confident in their knowledge and understanding of CSE/trafficking learning outcomes

<table>
<thead>
<tr>
<th>Outcome 1</th>
<th>CSE/trafficking as a child protection issue</th>
<th>Pre-training</th>
<th>Post-training</th>
<th>Pre-training</th>
<th>Post-training</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>29</td>
<td>96</td>
<td>15</td>
<td>94</td>
</tr>
<tr>
<td>Outcome 2</td>
<td>How children and young people become sexually exploited/trafficked and the support they need</td>
<td>22</td>
<td>95</td>
<td>13</td>
<td>93</td>
</tr>
<tr>
<td>Outcome 3</td>
<td>How children and young people are affected by CSE / trafficking and the behaviours they may present</td>
<td>29</td>
<td>95</td>
<td>18</td>
<td>93</td>
</tr>
<tr>
<td>Outcome 4</td>
<td>The specific risks which may present for children and young people who are sexually exploited/trafficked whilst in safe accommodation</td>
<td>22</td>
<td>94</td>
<td>15</td>
<td>93</td>
</tr>
<tr>
<td>Outcome 5</td>
<td>The need for multiagency working and the additional support needs of young people and carers</td>
<td>34</td>
<td>96</td>
<td>28</td>
<td>96</td>
</tr>
</tbody>
</table>
**Figure 1:** Pre course confidence in knowledge and understanding of learning outcomes (CSE)

**Figure 2:** Post course confidence in knowledge and understanding of learning outcomes (CSE)
**Figure 3:** Pre course confidence in knowledge and understanding of learning outcomes (trafficking)

**Figure 4:** Post course confidence in knowledge and understanding of learning outcomes (trafficking)
Finding 5: Training increased participants’ confidence to support a trafficked or sexually exploited young person.

The number of respondents who reported feeling quite or very confident to support a sexually exploited young person increased from 31 per cent pre-training to 86 per cent post-training. Twenty three per cent reported feeling quite or very confident to support a trafficked child, increasing to 83 per cent after the two days.\textsuperscript{24} Initially lower levels of confidence in supporting trafficked young people are likely to reflect the lower levels of knowledge and understanding reported above.

Figure 5: Pre and post course confidence to support a sexually exploited or trafficked young person

Reasons for confidence level reported

Respondents were asked to explain their reported confidence levels before and after training, and where multiple reasons were provided, these were coded and counted separately. Ninety four per cent of the explanations provided by foster carers for low confidence before the training were centred on a lack of previous training or experience.

\textit{I don’t know enough about the subjects and I haven’t any experience with anybody who has been through these experiences.}

As might be expected, 82 per cent of the answers given by foster carers reporting quite or very high confidence after the training attributed this to knowledge gained from the course.

\textit{Feeling empowered since enrolling on this course. Feel I can identify the vulnerabilities and risks for the child/young person.}

A much smaller number of carers were quite or very confident before the training (32 per cent for sexually exploited and 26 per cent for trafficked young people). Eight five per cent of their answers

\textsuperscript{24} 31 per cent of foster carers reported being ‘quite’ or ‘very’ confident to support sexually exploited young people before training, rising to 83 per cent afterwards. This figure was 25 per cent, rising to 82 per cent for foster carers being ‘quite’ or ‘very’ confident to support a trafficked young person after the training.
centred on their previous experience fostering a young person who had been trafficked or sexually exploited/abused, or their general experience of fostering teenagers and/or providing emotional support/a safe environment.

Many years of experience with young people involved with CSE but not in trafficking, however, training course has helped fill in the gaps.

Finally for the minority of foster carers who reported feeling not at all, or only slightly, confident after the training: 35 per cent of their answers attributed ongoing low confidence to their need for experience not just training; 31 per cent concerned low knowledge/awareness or the need for further training; 24 per cent of answers were about barriers in carers’ circumstances or a lack of professional support; and 10 per cent of answers reflected carers’ feelings that they didn’t have the right skills for, or did not want, the role.

I feel I have learned a great deal but equally I feel that these areas in particular require experience in order to be confident in helping children and young people who have been through either ordeal.

I am slightly confident now as I have knowledge of the trafficked/exploited children but I would not feel able to foster them as it would require too much of a change to my present role.

As I have never been involved in these sorts of cases I do not feel ‘very confident’ but this training has given me the confidence not to refuse these cases.

This suggests that this level of training is sufficient to substantially increase most foster carers’ confidence to support a trafficked or sexually exploited young person in the short-term, but that a minority of carers would need experience of some kind first.

**Impact of training on increasing the potential pool of specialist foster carers**

Foster carers who responded to the online survey were asked how far they agreed with the statement: ‘Going on the training made me more likely to consider fostering a young person who has been sexually exploited or trafficked’. The largest single group (48 per cent) agreed or strongly agreed, 38 per cent were not sure, and 14 per cent disagreed or strongly disagreed. Respondents who agreed or strongly agreed identified their increased knowledge and confidence, and a greater desire to help these young people, as the reason they would now consider fostering a young person who had been sexually exploited or trafficked. Those who were unsure, disagreed or strongly disagreed were concerned about the impact on, and risk to, children already in their care, or felt they needed more training and support if they were to seriously consider this type of fostering.
Finding 6: Participants predicted that the training would impact their practice primarily by improving their awareness of the risk indicators associated with CSE and trafficking. Those who responded to an online survey reported this as the primary change in their practice six months later.

When filling out the post-training evaluation forms participants were asked for three ways in which they anticipated that the training would impact their practice. The answers given most frequently were as follows.

1. Increased awareness of the indicators and possibility of CSE or trafficking (30 per cent of answers)
2. Changing ways of working with young people e.g. internet or phone safety, level of supervision, more 1-1 work, better listening, asking more questions and being aware of who young people socialise with (11 per cent of answers)
3. Sharing information from training with colleagues/foster carers (10 per cent of answers)
4. Looking for more information/materials (9 per cent of answers)
5. Talking to young people/families about risks (7 per cent of answers)

Eighty eight per cent of those completing the six month post-training online survey then reported that the training had had a positive impact on their practice, with a further 10 per cent being unsure whether this was the case. The most often reported form of impact was a greater awareness of the signs of trafficking and CSE. The top five answers were as follows.
1. Being better equipped to recognise the signs of exploitation (16 per cent of answers).
   
   *I watch now for signs that previously I may have missed.*

2. Having better understanding – 13 per cent of answers.
   
   *The training opened my eyes to issues I hadn’t previously thought about. I have a child in my care that was exploited and I feel the training gave me a much better insight to the problem.*

3. Greater confidence to care for young people (8 per cent of answers)
   
   *After the training I felt justified in my safe care policy regarding access to mobile phones and internet and in the work I had already done with a child placed in my care, despite her social worker’s objections.*

4. Having the tools to manage risk more effectively (8 per cent of answers)
   
   *I am more aware of the need to protect my vulnerable placements by ensuring their exact whereabouts, contact arrangements and involving other agencies if I have concerns.*

5. Being more sensitive to a young person’s needs, feelings and experiences (8 per cent of answers)
   
   *After the course I looked after a 15 year old girl who was being trafficked by a 34 year old male and understood that part of the girl’s behaviour was controlled by the male, therefore I could try to look after her without judgement and tried to keep her as safe as I possibly could.*

Respondents also referred to the following ways the training impacted their practice in order of significance: applying learning to a placement; becoming sensitised to how exploitative relationships work; feeling able to challenge poor practice; passing information on to others; reinforcing/justifying the need for particular safety measures; being better able to support foster carers; and caring with more empathy.

**Finding 7:** For survey respondents the most powerful aspects of the training were meeting experienced trainers and; understanding how young people may be controlled and the impact this has on them.

Online survey respondents were asked to choose an aspect of the training which they had found most useful, from a range of options. The option most often identified was ‘Meeting trainers who had experience working with young people who had been sexually exploited or trafficked’ (24 per cent). This was followed by ‘Being trained about grooming power and control’ (20 per cent) and then ‘Hearing about the effects of sexual exploitation and trafficking on young people and their particular vulnerabilities’ and ‘Reflecting on case studies about young people who have been trafficked/sexually exploited’ (both at 13 per cent).

When asked to identify the aspect of the training they found least useful, 49 per cent of respondents chose ‘None’. This was followed by ‘Reflecting on the training by doing group exercises’ (14 per cent) and ‘Meeting other people on the course’ (11 per cent).

When asked to recall one or two things that had stayed with them since doing the training, respondents identified the following themes
Finding 8: Where foster carers were hesitant about caring for a sexually exploited or trafficked young person, their concerns centred on the potential impact on, and risk to, children already in their care.

Online survey respondents who were foster carers were asked if there was anything that would make them hesitant to consider caring for a young person at risk, or a victim, of sexual exploitation or trafficking. Of those who provided an answer (n=37), 17 said no; there was nothing that would make them hesitant. Some reported that they had a pre-existing desire to support young people affected by these issues, or now believed they had the right skills to do so.

After I have finished the training I am more confident to care for a young person who has been trafficked or sexually assaulted so no.

I have felt for some time that I would like to be more proactively engaged in helping this particular group of young people.

Seventeen foster carers reported that the potential risks to themselves, their children, or other children in their care would make them hesitant.

I still have my own teenage boys living at home so it’s not something I would consider at the moment because of all the safeguarding issues.

The effect on any other foster kids or my own family.

Other barriers identified included: a lack of confidence that they would be well-supported; the challenges of being a single carer; a lack of knowledge about how best to provide care; and for one respondent, concern about allegations being made.
Finding 9: Most participants who responded to an online survey six months after attending training had maintained or increased their immediate post-training confidence in knowledge and understanding of sexual exploitation and trafficking, and their confidence to support a trafficked or sexually exploited young person.

Online survey respondents were asked to rate their confidence in their understanding and knowledge on five learning outcomes as a direct repetition of the question asked immediately pre and post training (see Table 7). Nearly all respondents had maintained or increased their pre-training level of confidence in their knowledge and understanding across the five outcomes. The majority of respondents also maintained or increased their post-training level of confidence in their knowledge and understanding of CSE and trafficking, despite this figure reducing by around a third across all outcomes.

Figure 7: Percentage of respondents who had maintained or increased confidence in their knowledge and understanding of CSE outcomes six months after training
Finally a higher percentage of survey respondents reported maintaining or increasing their confidence to support or care for a sexually exploited or trafficked young person (rather than their understanding) at 78 and 73 per cent respectively.

**Figure 8:** Percentage of respondents who had maintained or increased confidence in their knowledge and understanding of trafficking outcomes six months after training
5.4 Implications of the findings

- The low levels of confidence reported by most participants before the awareness-raising training suggest that there remains an ongoing need for those involved in supporting or caring for vulnerable young people to receive training on CSE and trafficking.
- There is scope for Barnardo’s and other organisations to develop tiered training courses that move from general awareness-raising to more specific training for those who will provide specialist support and accommodation for sexually exploited and/or trafficked young people.
- Training is very likely to improve the identification of young people at risk, or victims, of sexual exploitation and/or trafficking – and safeguarding responses as a result.
- While understanding of CSE and trafficking appears to be very low, local authorities should consider how to raise the profile of child trafficking amongst professionals and foster carers given the low levels of knowledge and confidence reported compared to CSE.
- Through raising confidence, training has the potential to increase the pool of potential specialist foster carers for sexually exploited and/or trafficked young people, and should therefore be considered as a tool for recruitment.
Chapter 6: Overview of Specialist Foster Placements

6.1 The model

The Barnardo’s model of specialist foster care for sexually exploited and/or trafficked young people developed over the course of the two years, in response to feedback from the evaluation and wider learning generated in Year 1. Consequently not all of the elements of the model described below were in place at the start of every specialist foster placement, and placements starting in Year 2 conformed more closely to the model below than those in Year 1.

From the start of the project the following people were identified as key stakeholders.

1. Barnardo’s specialist foster carer(s)
2. Young person in care placement
3. Barnardo’s project worker (CSE or trafficking service)
4. Barnardo’s fostering social worker
5. Local authority (LA) social worker

A trained specialist foster carer

The primary specialist foster carer was expected to have attended the two day training course before any placement began (see chapter 5). By the end of the two days, specialist foster carers were expected to understand and be able to respond to the needs of young people who were at risk of, or victims of, sexual exploitation and/or trafficking. Specifically they would:

- have a basic knowledge and understanding about child exploitation and child trafficking as child protection issues;
- have an awareness of the nature of risk for young people facing trafficking and/or sexual exploitation;
- be aware of the effects of sexual exploitation and/or trafficking and understand behaviours young people in these situations may present with;
- be aware of vulnerability factors and risk indicators associated with young people who are sexually exploited and/or trafficked; and
- understand the need for multi-agency working and be able to identify additional support needs of young people, carers and associated professionals.

Planning and reviewing

Many trafficking and CSE placements are established on an emergency basis. While this is sometimes unavoidable, it can contribute to placement instability and breakdown. The project aimed to ensure that
placements were as well planned as possible and involved young people in decision making. Within the model, the Barnardo’s project worker and fostering social worker would co-produce a ‘Specialist Intervention Plan’ prior to placement or within two weeks of the start of the placement, which would be agreed by the manager of the Barnardo’s Family Placement Service and the LA social worker. CSE and trafficking placements were to have distinct plans, and information was to be incorporated from previous assessments in order to avoid asking for repeated information from the young person or specialist foster carer. The plans were to be reviewed monthly and at each Looked After Child (LAC) review to ensure they were responsive to developments within the placement.

**Working in partnership**

Multi-agency working and information sharing is vital to safeguarding young people. Within the specialist placement model the Barnardo’s project worker therefore aimed to work jointly with the Barnardo’s fostering social worker to complete and review the Specialist Intervention Plan in full cooperation with the LA and other relevant agencies. Likewise, the referral process required LAs to share information with Barnardo’s from the outset. Barnardo’s project workers, fostering social workers and specialist foster carers (where appropriate) were to be invited to all meetings concerning the placement.

**Specialist support for the young person and specialist foster carer(s)**

Each placement was to be supported by a project worker from either a trafficking or sexual exploitation service provided by Barnardo’s. The model stated that the project worker would offer a minimum of weekly 1-1 sessions to both the specialist foster carer and the young person, although the type and amount of support required in practice would depend upon the details of the Specialist Intervention Plan. This direct work would cover generic CSE or trafficking issues along with any additional concerns identified within the Specialist Intervention Plan. The model acknowledged that if it was not appropriate or desirable for the same project worker to support both the specialist foster carer and the young person, alternative arrangements should be made to respect a young person’s wishes.

**Advocacy and brokering other services**

Finally, the model identified that the foster carer and young person may have needs that could not be met by Barnardo’s within the Specialist Intervention Plan. Such additional support might include:

- Legal assistance
- Specialist counselling
- Access to an educational psychologist
- Access to an interpreter
- Support for sexually harmful behaviour

As such, Barnardo’s aimed to identify any additional needs, and work with the LA and other agencies to ensure these were met.

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25 Barnardo’s operates on a regional model, which means that services with the same remit (e.g. CSE) can develop independently of each other across different regions and nations. Consequently there was not one model of offering direct work to young people. Although many resources are shared across the organisation, the particular support provided and work covered, varied from placement to placement.
Model of specialist foster care

Figure 10 attempts to describe this model diagrammatically. The arrows in the model show the primary source of support for both the young person and specialist foster carer within each placement e.g. the project worker was available to support the carer but was primarily meeting with the young person.

Figure 10: Model of specialist foster care

- Working in partnership
- Planning and reviewing
- Advocacy and brokering other services

6.2 Overview of placements provided

Barnardo’s originally aimed to provide 16 specialist foster placements over two years for young people who were at risk, or victims, of sexual exploitation and/or trafficking. This target was revised down to 11 placements during Year 2 as a result of the challenges of recruiting carers and gaining referrals. However by the end of the project 13 placements had been provided.\(^{26}\) Four were for young people who had been trafficked into the United Kingdom (UK), and nine for young people at risk, or victims, of sexual exploitation.\(^{27}\)

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\(^{26}\) Barnardo’s were providing at least one other placement that used the model of a trained foster carer and specialist project worker, to a 17 year old young man during the course of the project. While this placement was not officially part of the Safe Accommodation Project and did not fall within the scope of the evaluation, the evaluator interviewed the foster carer, young man, fostering social worker and project worker to capture any additional learning. Where quotes are used for this young man, he is referred to by the pseudonym ‘Mohammed’.

\(^{27}\) The Safe Accommodation Project was targeted at children and young people who had entered England as victims of cross-border rather than internal trafficking. Victims of internal trafficking for sexual exploitation are supported under Barnardo’s CSE services.
6.3 Challenges to recruiting carers and gaining referrals

**Recruiting specialist carers**

The project aimed to recruit and train new foster carers to provide specialist placements, as well as to draw on the existing pool of Barnardo’s foster carers. By the end of the first year of the project it was evident that the recruitment of both new and existing carers to the specialist scheme was one of the project’s main challenges. No new carers were recruited to the project in Year 1. Consequently, three of the placements provided in Year 1, and one in Year 2 were pre-existing Barnardo’s placements that transferred into the project. In Year 2, three new Barnardo’s foster carers provided specialist placements, but only one of these had applied specifically to become a specialist carer.

Internal stakeholders within Barnardo’s suggested that it may have been unrealistic to expect to recruit any new carers in Year 1 because of the length of time it took to establish the project, advertise the role to potential carers, and go through the assessment and approval process. They also suspected that given potential concerns about the risks of caring for a sexually exploited/trafficked young person it may be easier to ‘up-skill’ existing carers than to recruit new carers to this specialist role. The findings in chapter 5 would certainly suggest that without training, foster carers are indeed likely to have low confidence in their ability to support a young person. One Barnardo’s foster carer whose placement had converted to specialist status in Year 1 explained that it was only when she realised she was already caring for a young woman at risk of sexual exploitation that she changed her mind about being involved.

> It was just a bit scary at first – could I do something like that? Do you know what I mean? I was thinking the worst. I was thinking of a child who would be hard to manage, would be out all hours – sounds like Rhiannon! Who would be quite cheeky, stealing – Rhiannon doesn’t steal – not trustworthy, answering back, drinking, smoking. But Rhiannon's not scary. Overall it's not the image I first had (Specialist foster carer).

Barnardo’s ran a national media campaign to recruit specialist carers in Year 2 of the project. While the campaign was successful at targeting those with some professional experience in supporting vulnerable young people, it ultimately yielded fewer carers for the Safe Accommodation Project than attempts to convert existing Barnardo’s carers to the role. For example, 6,121 ‘hits’ on the Barnardo’s recruitment website converted to 422 enquiries. Of these, only one couple went on to provide a placement, although two more were going through the assessment process at the time of writing. In contrast, 19 internal Barnardo’s foster carers were approved for specialist care during the life of the project, 11 of whom went on to have a placement. A more extended report on the recruitment of specialist foster carers can be found at appendix 3.

**Referrals from local authorities**

The second challenge to achieving 16 placements was the low numbers of referrals to the specialist placements. There were a number of instances where free specialist foster placements were offered to LAs that did not take them up. Staff in Barnardo’s fostering services used risk indicators to evidence that these young people were at risk of sexual exploitation, but reported that some LAs said they did not want to ‘label’ young people. Nineteen foster carers had been recruited within Barnardo’s to provide specialist care (see above). However referrals were not forthcoming during the time these foster carers were being retained in anticipation of starting a specialist placement. Low numbers of referrals were
judged by Barnardo’s services to be driven in large part by a lack of awareness of CSE and trafficking within LAs, where staff did not recognise the risks young people faced. The generally low levels of confidence reported by professionals attending the training in chapter 5 provides some evidence to support this claim. Finally, some referrals were made for emergency placements or for placements in particular areas that, given the small scale of the pilot program, Barnardo’s were not always in a position to accommodate. However referrals did increase in the second year of the project, which may have been affected by the release of the ‘Tackling Child Sexual Exploitation Action Plan’ in November 2011 (DfE, 2011c), and accompanying letters being written to Chairs of Local Safeguarding Children Boards and Directors of Children’s Services asking for their support in addressing CSE in their locality.

6.4 Profile of the young people referred to the Safe Accommodation Project

Research suggests that at the time of becoming known to services most victims of sexual exploitation and trafficking are adolescents (CEOP, 2007, 2011; Jago et al., 2011), and in the case of sexual exploitation most are female (Jago et al., 2011). The young people referred to the Safe Accommodation Project conformed to this pattern. All were aged between 13 and 17, and, apart from one young man in a trafficking placement, all were female (see Table 8).

Risk level at placement

Eleven of the 13 young people in specialist placements could justifiably be described as being at high risk of sexual exploitation or trafficking. This suggests that on the whole the Safe Accommodation Project was successfully targeted at those young people who were most vulnerable. Three young women in CSE placements were known victims of sexual exploitation, and the remaining six were all at ‘high’, or ‘medium to high’ risk of sexual exploitation when placed. These assessments were made through a combination of the narratives provided on referral forms about young people’s behaviour and vulnerabilities, scores on the Sexual Exploitation Risk Assessment Framework (SERAF) form completed at the point of referral, and the professional judgements of their LA social workers and/or Barnardo’s project workers.28

Of the four young people in trafficking placements, two were known victims of trafficking for sexual exploitation and had consequently been given leave to remain in the UK for five years. They have been described as being ‘medium risk’ at the time of placement because they had been in stable, safe placements for 11 and 15 months each when their placements were transferred into the Safe Accommodation Project. The other young woman and young man were believed to have been brought to the UK for sexual exploitation and forced domestic labour respectively. They have been described as ‘high risk’ because they had been referred directly to the project after having come to the attention of children’s services, and were therefore at the highest risk of going missing, according to existing research (see section 1.2). At the time of writing both had submitted claims for asylum and were awaiting judgements from the United Kingdom Border Agency (UKBA) about whether they would be given leave to remain in the UK. One had been formally identified as a victim of child trafficking, while the other was awaiting a conclusive decision alongside his asylum claim.

28 The Sexual Exploitation Risk Assessment Framework (SERAF) allows practitioners to identify the vulnerabilities and risk indicators associated with sexual exploitation and produce a score that categorises the severity of the risk (Clutton and Coles, 2007).
Limitations and challenges when describing risk

Risk is a dynamic, rather than a static construct (Coleman, 2007; Pearce, 2007) and any attempts to capture and describe risk levels are always limited to capturing moments in time. Risk assessments are also based on partial knowledge of a young person’s situation and environment, and as such are limited in their ability to accurately describe a problem. In the case of sexual exploitation and trafficking, disclosures and ‘evidence’ often emerge some time after a young person is at highest risk. As such professionals rely on proxy indicators, which often produce ambiguity about whether a series of underlying risk factors ‘add up’ to known or even suspected sexual exploitation or trafficking. Furthermore a single risk category can obscure a wide variety of experiences and levels of vulnerability, particularly where it has not taken account of the protective factors in a young person’s life that may increase their resilience. For example, two young people in sexual exploitation placements with high scores on the SERAF form could have very different patterns of risk and behaviour simply because one young person is engaged in full-time education and has a positive relationship with their specialist foster carer.

Despite these limitations, tools like the SERAF form can generate a score and risk level which enables professionals to justify otherwise un-evidenced concerns about a young person, and potentially advocate for the resources to explore a matter further. In contrast there is no such tool available to assess the level of risk facing a known or suspected victim of trafficking. Risk indicators for sexually exploited young people include missing episodes, drug and alcohol use, emotional and behavioural difficulties, and poor educational attendance. However each of the trafficked young people in the specialist placements was keen to attend full-time education, none displayed challenging behaviour, and they did not go missing.

Consequently they might appear to be low risk in comparison with young people in CSE placements. However such patterns of presentation may well mask the coercion and abuse that keeps young people afraid, silent, and awaiting an opportunity to return to traffickers. Even when Barnardo’s carers were confident that young people did not want to run from their placements, the risk remained of young people being contacted by traffickers and potentially abducted. Specialist foster carers therefore had to manage the tension of remaining vigilant to these risks even when a placement had been stable for six months. Further research is therefore needed to illuminate how the risks to a trafficked young person change over time, and in response to support and safeguarding.

Vulnerabilities and background of young people in specialist placements

The young people in specialist foster placements had a variety of wider vulnerabilities and behaviours that intersected with their risk or experience of being sexually exploited or trafficked. These included the following.

- Multiple care placements and poor quality of care
- Bereavement through the death of one or both parents
- Parental rejection and neglect
- Parental substance misuse
- Difficult relationships with family
- Domestic abuse
- Low self-esteem
• Sexual abuse/rape
• Sexually transmitted infections
• Self-harm
• Eating disorders
• Poor personal hygiene
• Poor mental health/being sectioned/depression/difficulty sleeping/anxiety
• Going missing
• Stealing/offending behaviour
• Disengagement from education

The case studies below are composites of different young people’s experiences prior to being placed with Barnardo’s specialist foster carers. They provide an indication of the kinds of abuse and risk that these young people had experienced through sexual exploitation and/or trafficking.

Case Study 1: Trafficking

When Linh was 15, her father discovered he had cancer and decided that Linh should be adopted by a woman he had met in Taiwan. The step-mother held Linh’s travel documents and flew her to Thailand, to Russia, and then to Germany. She spent six weeks in a house in Germany with other Vietnamese people where she witnessed tired looking young women being brought in and out of the house, and older women being tied down and raped by men who came to the house. Linh was told that her step-mother and some other men were running a prostitution business, and that she owed her step-mother £10,000 for the cost of being transported from Vietnam.

Linh was then illegally transported to the UK in the back of a truck. She was sexually abused by two men en-route, and contracted a sexually transmitted infection as a result. When she arrived in England she was taken to a house and told she had to work as a prostitute to pay back her step-mother. Linh managed to escape by stealing some money and getting on a bus. She was eventually noticed looking very distressed in a bus shelter, and was taken to social services.
Lizzie was sexually abused from an early age by a schedule one offender who was a friend of her Mum’s and often stayed in the home. She was introduced to cannabis by a boyfriend when she was 11 and was soon drawn into dealing, and using harder drugs. By the time she was 12 she was regularly missing from school and from home. She was taken into care and continued to go missing for four or five days at a time. After some time she explained to her social worker that she survived when missing by swapping sex for somewhere to stay and the drugs she was given by older men. On one occasion she was found dressed in only a long T-shirt and boots by the police, with no recollection of where she had been the night before. When she was 13 it became known that naked images of Lizzie were circulating on the internet without her knowledge. At around the same time her foster carer had walked into her room to find an indecent image of a man live on her webcam. This male was later found to have sent Lizzie 455 text messages in the space of two days.

As a result of her ongoing missing episodes and constant involvement with the police, Lizzie was placed into a residential unit thirty miles from her home. She went to visit her Mum and found that her bed had been removed from the house. Her mum did not make contact with Lizzie for some months after this visit. Lizzie went missing for eight days from the residential unit, and was only found when she arrived at the local hospital having been beaten up by her boyfriend. She was 14 at this point, and her social worker began filling out paperwork to refer her to secure accommodation.
<table>
<thead>
<tr>
<th>Placement</th>
<th>Male or Female</th>
<th>Trafficking or CSE</th>
<th>Looked After Status</th>
<th>Risk level at time of placement</th>
<th>Age at start of specialist placement</th>
<th>Length of placement</th>
<th>Reason for placement end</th>
<th>New or transferred placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>F</td>
<td>Trafficking</td>
<td>S20</td>
<td>Medium</td>
<td>16</td>
<td>16 months</td>
<td>Post 18 move to independent living</td>
<td>Transfer (11 months in placement previously)</td>
</tr>
<tr>
<td>2</td>
<td>F</td>
<td>Trafficking</td>
<td>S20</td>
<td>Medium</td>
<td>16</td>
<td>17 months</td>
<td>Post 18 move to independent living</td>
<td>Transfer (15 months in placement previously)</td>
</tr>
<tr>
<td>3</td>
<td>F</td>
<td>CSE</td>
<td>S20</td>
<td>High</td>
<td>15</td>
<td>4 days</td>
<td>Carers ended placement because they struggled to cope with anxieties about CSE</td>
<td>New</td>
</tr>
<tr>
<td>4</td>
<td>F</td>
<td>CSE</td>
<td>S31</td>
<td>High</td>
<td>15</td>
<td>13 months</td>
<td>LA ended placement due to young person’s persistent missing incidences</td>
<td>Transfer (14 months in placement previously)</td>
</tr>
<tr>
<td>5</td>
<td>F</td>
<td>CSE</td>
<td>S20</td>
<td>High</td>
<td>17</td>
<td>3 weeks</td>
<td>Young person returned to mother</td>
<td>New</td>
</tr>
<tr>
<td>6</td>
<td>F</td>
<td>CSE</td>
<td>S20</td>
<td>High</td>
<td>15</td>
<td>6 weeks</td>
<td>LA ended placement, young person refusing to return after multiple missing incidences</td>
<td>New</td>
</tr>
<tr>
<td>7</td>
<td>F</td>
<td>Trafficking</td>
<td>S20</td>
<td>High</td>
<td>16</td>
<td>10 months</td>
<td>Still placed at project end</td>
<td>New</td>
</tr>
<tr>
<td>8</td>
<td>F</td>
<td>CSE</td>
<td>S20</td>
<td>High</td>
<td>14</td>
<td>8 months</td>
<td>Still placed at project end</td>
<td>New</td>
</tr>
<tr>
<td>9</td>
<td>F</td>
<td>CSE</td>
<td>S20</td>
<td>Medium – High</td>
<td>15</td>
<td>11 weeks</td>
<td>Carers ended placement. Lack of information sharing about young person's challenging behaviour.</td>
<td>New</td>
</tr>
<tr>
<td>10</td>
<td>F</td>
<td>CSE</td>
<td>S20</td>
<td>High</td>
<td>14</td>
<td>4 months</td>
<td>Still placed at project end</td>
<td>New</td>
</tr>
<tr>
<td>11</td>
<td>F</td>
<td>CSE</td>
<td>S31</td>
<td>Medium – High</td>
<td>13</td>
<td>4 months</td>
<td>Still placed at project end</td>
<td>Transfer (6 months in placement previously)</td>
</tr>
<tr>
<td>12</td>
<td>M</td>
<td>Trafficking</td>
<td>S20</td>
<td>High</td>
<td>15</td>
<td>3 months</td>
<td>Still placed at project end</td>
<td>New</td>
</tr>
<tr>
<td>13</td>
<td>F</td>
<td>CSE</td>
<td>S20</td>
<td>High</td>
<td>17</td>
<td>3 months</td>
<td>Still placed at project end</td>
<td>New</td>
</tr>
</tbody>
</table>
Chapter 7: Outcomes Achieved Across Specialist Placements

7.1 Summary of key findings

1 Specialist foster carers learned about and employed a range of safety strategies as a result of the training they received, and ongoing support and advice from Barnardo’s.

2 Six placements were stable, three had the potential to offer longer term stability beyond the project, and four broke down within three months.

3 Nine placements kept young people safe from exploitation, and made them feel safe. Three placements were unable to keep young people safe because they broke down too quickly to make an impact, and one placement saw no reduction in the young person’s level of risk.

4 In seven placements young people either reduced their risk of going missing or went missing very rarely. In five placements young people continued to go missing frequently and in one placement missing episodes increased.

5 In the six medium to long-term placements young people’s awareness of the difference between exploitative and healthy relationships increased. In the four placements that broke down within three months there was no evidence of improved awareness, and in the three placements with potential for longer term stability there were indications of improved awareness.

6 Evidence of protective factors in a young person’s life reflected the length of time they were in placement, their own interests, and the efforts of specialist foster carers to support positive activities and friends.

7 Medium to long-term placements saw improvements to young people’s physical, emotional and psychological well-being, although trafficked young people sometimes struggled to cope with their lack of freedom.

8 One of the strongest outcomes achieved by specialist placements was the development of warm and trusting relationships between young people and their foster carers, which contributed to their wider safety and well-being.

7.2 Rationale for outcomes evaluated

The specialist placements aimed to achieve a range of different outcomes for young people. Some were common to all placements (e.g. safe and stable accommodation), while others were tailored to each individual’s particular set of needs (e.g. access to peers from a particular ethnic background for young people who had been trafficked). The outcomes reported in this section and listed below were agreed by the research board after a process of discussion and consultation. This process involved taking those outcomes that were identified in Barnardo’s original bid to the Department for Education (DfE), and identifying any additional outcomes from a) a literature review and b) consultation with a group of Barnardo’s managers of fostering, sexual exploitation and trafficking services for young
Outcomes were then framed as those that were achievable in the short, medium and long-term, and this process contributed to the development of a ‘logic model’ to show how the activities of the project were expected to produce these outcomes. The final outcome – ‘Positive relationship built with specialist foster carer(s)’ – was added during analysis. This was one of the strongest outcomes to emerge in analysis, and one of the most significant (see section 7.9) but was not one of the original outcomes identified by Barnardo’s.

The final list of outcomes discussed is as follows:

- Carers aware of safety strategies
- Stable, safe accommodation
- Reduced risk of going missing
- Increased awareness of the difference between healthy and exploitative relationships
- Increased protective factors in young person’s life
- Recovery from abuse/exploitation and improved well-being
- Positive relationship built with specialist foster carer(s)

In each of the following sections, a description of the outcome is provided, along with the limitations of attempts to chart these outcomes within each placement. Such limitations include: the problem of comparing outcomes achieved in new versus established/transferred placements; the implications of comparing placements of different lengths (e.g. four days versus 18 months); and uncertainty around whether short-term outcomes will necessarily translate into medium or long-term change.

### Summary of outcomes

Table 9 provides a summary of whether each outcome was ‘achieved’ (A), ‘partially achieved’ (PA), or ‘not achieved’ (NA). These descriptions are assigned on the basis of evidence that is presented in the following chapter but can only present a crude snapshot of outcomes within and across placements. The placements are listed in order of how long they lasted to demonstrate the relationship of outcomes achieved to placement length, as well as the inter-connectedness of many of these outcomes.

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29 As a result ‘Increased protective factors in young person’s life’ was added to the list, and young people’s ‘Contribution to planning and decision making’ and ‘Access to information on housing, health, benefits, rights or support needs’ were both subsumed as ‘Involvement in meaningful participation’ and considered as a protective factor within the new category.
<table>
<thead>
<tr>
<th>Placement</th>
<th>Carers aware of safety strategies</th>
<th>Stable, safe accommodation</th>
<th>Reduced risk of going missing</th>
<th>Increased awareness of healthy/exploitative relationships in young person’s life</th>
<th>Increased protective factors in young person’s life</th>
<th>Recovery from abuse/improved well-being</th>
<th>Positive relationship built with specialist foster carer(s)</th>
<th>Length of placement</th>
<th>Trafficking or CSE placement</th>
<th>Risk level at placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>17 months</td>
<td>Trafficking</td>
<td>Medium</td>
</tr>
<tr>
<td>3</td>
<td>A</td>
<td>A</td>
<td>NA</td>
<td>PA</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>16 months</td>
<td>Trafficking</td>
<td>Medium</td>
</tr>
<tr>
<td>4</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>PA</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>13 months</td>
<td>CSE</td>
<td>High</td>
</tr>
<tr>
<td>5</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>PA</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>10 months</td>
<td>Trafficking</td>
<td>High</td>
</tr>
<tr>
<td>6</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>PA</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>8 months</td>
<td>CSE</td>
<td>Medium – High</td>
</tr>
<tr>
<td>7</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>PA</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>4 months</td>
<td>Trafficking</td>
<td>High</td>
</tr>
<tr>
<td>8</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>PA</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>4 months</td>
<td>CSE</td>
<td>High</td>
</tr>
<tr>
<td>9</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>PA</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>11 weeks</td>
<td>Trafficking</td>
<td>Medium – High</td>
</tr>
<tr>
<td>10</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>PA</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>6 weeks</td>
<td>CSE</td>
<td>High</td>
</tr>
<tr>
<td>11</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>PA</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>3 weeks</td>
<td>CSE</td>
<td>High</td>
</tr>
<tr>
<td>12</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>PA</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>3 months</td>
<td>CSE</td>
<td>High</td>
</tr>
<tr>
<td>13</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>PA</td>
<td>A</td>
<td>A</td>
<td>A</td>
<td>4 days</td>
<td>CSE</td>
<td>High</td>
</tr>
</tbody>
</table>

Table 9: Summary of outcomes achieved in specialist foster placements
7.3 Were specialist foster carers aware of safety strategies?

Finding 1: Specialist foster carers learned about and employed a range of safety strategies as a result of the training they received, and ongoing support and advice from Barnardo’s.

Safety strategies

Safety strategies are defined as any measures taken by foster carers to protect young people in their care from those who present a risk to them in terms of sexual exploitation and trafficking. While some strategies were presented as part of the awareness-raising training, there is no standard list of measures that will be appropriate for all cases. As such strategies were usually negotiated and trialled in the context of each placement.

Training

Eleven primary carers and three of their partners had attended training on the sexual exploitation and trafficking of young people. The remaining two placements were made quickly, before carers had been able to attend a training course, and both ended within three months. In both situations, it was a poor match that was perceived to be the reason for placement breakdown, rather than a lack of training, but this may have been identified earlier had the carers been able to consider more fully what was involved in the project.

Foster carers who had attended the training reported being more confident in the skills and knowledge they already had, being more aware of the risks facing young people, as well as gaining specific skills around internet safety, reporting young people missing, and monitoring and recording who young people saw/cars they got in and out of.

*The training we have received has covered all aspects of e-safety, sexual health, risk taking activities, alcohol and drug abuse and is far more in depth than the usual training (Email from specialist foster carers).*

*They recognise all the indicators themselves. They knew better how the police system works with children missing from home and it might have taken me 45 minutes in a supervision to get that over (Barnardo’s fostering social worker).*

The role of ongoing support

Interviewees recognised that while the training was necessary, it was only one part of an overall package that could equip foster carers to provide safe accommodation.30 Safety strategies needed to be negotiated, reviewed and updated in Looked After Children (LAC) reviews, and carers then needed

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30 The two-day training course was focused on raising awareness of the issues of child sexual exploitation and child trafficking. Barnardo’s are therefore exploring the development of the next tier of training modules/courses that would equip carers to provide safe accommodation and might include separate courses on sexual exploitation and trafficking.
support from local authority (LA) social workers, Barnardo’s fostering social workers, and project workers for the many safeguarding and caring decisions that presented on a day-to-day basis.

I speak to her (Barnardo’s fostering social worker) once or twice a week when Rhiannon is missing. Sometimes it’s just dilemmas and I just call up to check I’m doing the right thing. Issues with money, boundaries, things like that (Specialist foster carer).

Carers were extremely positive about the support they had received from Barnardo’s fostering services. They particularly valued the 24-7 nature of the support, and the fact that they could always speak promptly to someone who knew and understood their case, even if their assigned fostering social worker was not on call.

Because Barnardo’s have weekly meetings they all know your case. They let you vent, they give you ideas (Specialist foster carer).

I send a text to my social worker, within five minutes she phones me back and I have lots of support. If I ask for anything, I’ve got it, you know? So they’re there for us and that’s good. So it feels safe (Specialist foster carer).

Safety strategies

There was evidence of a range of safety strategies being used within the specialist placements that acknowledged the risks to young people of exploitative contexts and relationships. The strategies adopted depended on both the particular young person’s level of risk and need, and the professional opinions/policies of those supporting the placements. For example some carers would not lock the front door at night or during the day, even if there was a high risk of the young person going missing, while others would. Some judged that it was safer to make sure the young person always had credit on their phone in case they were in trouble, while in a number of placements young people had no access to a phone in case they used it to contact those who posed a risk to them. In some placements young people had no access to the internet, no direct access to money, and were accompanied everywhere they went. The length of time such measures were applied varied, but they were often relaxed within a few weeks or months if it was felt that the young person was now at lower risk of harm, and to allow the young person the opportunity to show they had understood the risks and could manage their own behaviour. For further discussion of safety strategies see section 9.4.

7.4 Did the specialist placements provide stable, safe accommodation?

Finding 2: Six placements were stable, three had the potential to offer longer term stability beyond the project, and four broke down within three months.

Finding 3: Nine placements kept young people safe from exploitation, and made them feel safe. Three placements were unable to keep young people safe because they broke down too quickly to make an impact, and one placement saw no reduction in the young person’s level of risk.
Stability

Stability in and across placements is recognised as a crucial element of resilience and well-being for young people in care (Munro and Hardy, 2006), and those who have been sexually exploited may be at risk of greater instability while in care (Coy, 2008). Perceptions of what is considered stable will vary depending on knowledge of a young person’s previous care history, and of what happens to them after they transition from a placement. Arguably referral to a two-year pilot project carries the inherent risk of instability when the scheme ends. Successive governments have defined placement instability as three or more placements in the same year. However this is not an empirically based measure (Unrau, 2007) and cannot account for the unique impact of placement moves on children in different circumstances (Cashmore and Paxman, 2006). The stability of each specialist placement was therefore judged firstly in comparison to the number and length of placements the young person experienced in the previous 12 months and secondly according to the likelihood of the placement being sustained beyond the project.

Safety

Young people at risk, or victims of, sexual exploitation and/or trafficking need to be protected from exploitative and abusive adults and peers. However safety is also subjectively experienced and should be recognised as comprising both immediate protection from harm, and the creation of relational and psychological security (Shuker, 2013 forthcoming). As such it is closely related to other factors reported including going missing, contact with exploitative others, and the increase of protective factors in a young person’s life. In this section safety has been interpreted in three ways. Firstly, in terms of whether young people were judged by professionals to be protected from exploitation while in placement. Secondly, whether they were judged to be safer than they had been in the previous six months and thirdly in terms of whether young people themselves reported feeling safe.

Placement stability

Six specialist placements achieved clear stability

Stability had been clearly achieved in six specialist foster placements where young people had been in placement between six and 18 months in total and where most experienced better stability than in the previous six to 12 months. Four of these placements had ended when young people transitioned into independent accommodation, and two were expected to continue beyond the end of the project, either as specialist or standard foster placements. It should be noted that four of these six placements were already stable when they transferred into the project, so their stability cannot necessarily be attributed to the Safe Accommodation Project.

Three short specialist placements promised to offer ongoing stability

Three specialist placements had only existed for a few months when the project ended, but all had achieved positive short-term outcomes. All of the young people had settled well, and two explicitly wished to stay in their foster home long-term. A number of specialist placements had been funded by Barnardo’s for an extra month to increase the chances of young people making a positive transition to their next home. At the time of writing, two of these placements were to continue for four and seven months beyond the end of the project, and one was still ongoing while a decision was being made about next steps.
Four specialist placements broke down and did not achieve stability for the young people

The remaining four specialist placements ended within three months as a result of carers withdrawing from the project or the young person going missing and refusing to return to the placement. One of these placements illustrates the importance of having the right foster carers in achieving placement stability. Megan was committed to making her placement work and displayed no challenging behaviour. However her foster carers felt very anxious about the potential risks of a CSE placement, and withdrew from the project abruptly after four days. Megan’s project worker believed that this experience was a contributing factor to the instability that followed (Megan then lived in six places over the following year – see placement 3, Table 10). Megan’s foster carers had not attended the CSE/trafficking training course before she was placed, which may have contributed to the final outcome. See section 9.2 for further discussion.

Table 10: Placement stability

<table>
<thead>
<tr>
<th>Placement</th>
<th>Placement history in 12 months prior to being placed with the Safe Accommodation Project</th>
<th>Length of specialist placement</th>
<th>Post placement pattern up to one year after placement</th>
<th>Placement stability achieved?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>• 2 foster care placements in 4 months after entering care</td>
<td>16 months</td>
<td>• Independent living</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>• 1 previous foster care placement of 1 month after entering care</td>
<td>17 months</td>
<td>• Independent living</td>
<td>Yes</td>
</tr>
<tr>
<td>3</td>
<td>• Family home for 10 months • 2 nights a week at a respite children’s home over 2 months</td>
<td>1 week</td>
<td>• Foster placement for 3 days • Foster placement for 4 weeks • Family home • Caravan site • Grandparents home • Family home</td>
<td>No</td>
</tr>
<tr>
<td>4</td>
<td>• Family home • 2 foster care placements over 6 weeks</td>
<td>13 months</td>
<td>• Independent living</td>
<td>Yes</td>
</tr>
<tr>
<td>5</td>
<td>• 3 months in residential unit • 7 months in residential unit • 2 months in family home</td>
<td>3 weeks</td>
<td>• Family home</td>
<td>No</td>
</tr>
<tr>
<td>6</td>
<td>• Family home • Residential girl’s unit • Family home for 2 months • Foster care under 1 month</td>
<td>6 weeks</td>
<td>• Unknown</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>• No previous placements</td>
<td>9 months</td>
<td>• Independent living</td>
<td>Yes</td>
</tr>
<tr>
<td>8</td>
<td>• Family home • Foster placement for 6 months • Residential unit for 6 weeks</td>
<td>8 months</td>
<td>• In placement at project end • Placement agreed for a further 3 months at least</td>
<td>Yes</td>
</tr>
<tr>
<td>9</td>
<td>• Foster care for 4 months • 2 residential units over 6 months</td>
<td>11 weeks</td>
<td>• Residential unit</td>
<td>No</td>
</tr>
</tbody>
</table>
### Safety

Nine specialist placements protected young people from exploitation and represented greater safety than their previous accommodation.

Nine specialist foster placements had clearly kept young people safe. By the end of the project the four trafficked young people had remained in placement for three, nine, 16 and 17 months without having gone missing or being re-trafficked. Given the very high risk of these young people going missing (see section 1.2) this is both positive and promising. It should be noted that in two of the four specialist placements young people were safe and stable for a number of months before the placement transferred to became specialist (see Table 8). Nevertheless these young people had not gone missing.

> We’ve been told that we’re a success story because the kids haven’t run, haven’t wanted to, and haven’t been taken. When new Vietnamese kids arrive, they want them to be able to come here (Specialist foster carer).

The use of intensive risk management strategies in the early days and weeks of the placement was seen as crucial, when the risk of a young person going missing is known to be much higher. For more information on mechanisms of safeguarding for trafficked young people see section 9.4.

In five of the CSE specialist placements LA social workers reported that placements were safe and able to protect young people from harm, primarily through the use of appropriate safety measures, and foster homes being in a safe location. Emily had only been in placement for four months when the project ended, but her social worker felt that she was safer purely because she was no longer around peers who put her at risk.

> The risk has certainly reduced by virtue of not being around other young people in a social
Interviewees felt that while placements could achieve such safety in the short-term, truly reducing risk would always require the active engagement of the young person themselves. Despite evidence that young people in short-term placements were more aware of risk, and of small signs of behavioural change, there was recognition that it would take longer than a few months to achieve this.

We haven’t managed to make Emily realise what risk is and how to keep herself out of risk. Does that make sense? I feel as if that’s a bit of a contradiction, because Alison (specialist foster carer) has kept her safe, but I don’t think we’ve got through to Emily (Barnardo’s fostering social worker).

She is able to tell you about the risk and how she should manage those risks in terms of CSE and about men, these ‘bad men’. She is able to reflect that to you if you ask her about it, so that’s knowledge that she’s gained. However, we’ve not got to the bit where she’s putting that into practice yet (LA social worker for Shauna).

For those who had been in specialist placements for longer, there was generally evidence that risk had reduced more substantially. For example, on the basis of a police report from the area Briony previously lived in, a high risk meeting was convened in anticipation of her frequent missing episodes, drug use and stealing. However the police had no cause to see Briony in the eight months she was in placement until the project ended. Neither had she been in contact with exploitative peers and adults who she associated with in her previous location.

Yes, I think location, taking her away from everything that she knew allowed her to step back and reflect on what her behaviours were, what was happening and what it was leading to…She’s not displayed any periods where she’s gone missing, she’s not decided to seek out the Facebook or internet. Helena’s (specialist foster carer) been working with her on relationships and all around the issues and things, to give her an understanding of it all, which I think has given her an insight into why we were all worried (LA social worker for Briony).

In these nine specialist placements young people reported feeling safe, and positive trusting relationships with specialist foster carers appeared to be key to this safety.

Every day she talk to me (specialist foster carer), she really interested in me, and what can I eat. She take me to Vietnamese food, and she buy for me. And I feel different. I feel safe. I feel – um, not scared before (Linh).

I feel really safe. I’m protected by three boys and Sally! And the dog! Well I’ll know that, like, they’ll protect me and keep me safe and everything and nothing’ll happen to me (Shauna).

It’s more safety. Like back then I’d walk out, be gone for about four days, so now it’s more safety, people ask me where I’m going (Briony).

It’s very peaceful because we live in the middle of nowhere. It’s safe. and again because I’ve got Tina here with me, and we’ve got the dogs and the donkeys (Hayley).

Feeling safe is still complex however, and Danielle explained that although she did feel safe in her new placement, her brother had just had a baby and she wanted to live in the same area as her family, so moving closer to them would make her feel even safer.

Subjective judgements of safety such as those described above are also reflective of levels of understanding about CSE and trafficking. One specialist placement demonstrated the particular challenges when professionals view safety and risk in different ways (see case study 3 below).
Case study 3: Different perspectives on safety

Emily had only been in a specialist placement for four months when the project ended, and concerns persisted about her constant attempts to contact and arrange to meet adult men on the internet. This created some disagreement about whether or not the specialist placement was keeping her safe. Her LA social worker felt that progress was being made and that she was safer than she had been in her previous placement. This was not because Emily's behaviours had greatly changed yet, but because of her relationship with Alison, her foster carer.

Yeah, I do think it is a safe and stable placement and that’s because the foster carer is very experienced, she’s done the sexual exploitation training, she’s able to open dialogue with Emily about these issues, which is something that’s been absent before, because it’s ‘shameful’ (LA social worker).

However the project worker disagreed in light of the heavily urban location of Emily’s placement and her contact with risky adults.

She’s been placed from quite a remote area into a placement that is down the road from a train station and she’s straightaway told people where she is and where she lives, so it’s no longer a safe placement (Barnardo’s project worker).

Emily’s placement has been agreed for at least one month beyond the project when it was to be reviewed.

In four specialist placements young people were not kept safe, primarily because placements broke down so quickly

Three of the CSE specialist placements ended very quickly. Two young people continued to go missing, and one placement ended after four days, so none could be said to have kept the young person safe. The last of the four was a long-term stable placement where the young person trusted and respected her specialist foster carers.

She’s got the trust and the loving relationship at the foster carers’… they’ve supported her through thick and thin, she knows that, she knows they’re there for her (LA social worker).

However concerns remained about the young woman’s level of risk and the capacity of the placement to safeguard her. During her time in placement there were a number of indicators of her continued high risk of sexual exploitation, including frequent missing episodes, being arrested by the police, being attacked, and risky sexual behaviour. Her vulnerabilities were such, and her missing episodes so frequent, that she remained consistently at high risk of harm and eventually the LA ended the placement because she was so rarely at home.

She remains incredibly high risk, and she is so vulnerable… I can’t sit here and say things have got better in any way for her or she’s safer than she was, because she’s not (Barnardo’s fostering social worker).

For further information on the context of this placement see case study 5.
7.5 Were young people at reduced risk of going missing?

Finding 4: In seven placements young people either reduced their risk of going missing or went missing very rarely. In five placements young people continued to go missing frequently and in one placement missing episodes increased.

Going missing

There is no standard measure of a young person being absent from their home or care placement, and going missing is measured differently by the police and by local and central government as mentioned in section 1.8 (OCC, 2012). The evaluation was therefore limited by these inconsistencies in data recording across different services and regions. Professionals and young people also had different interpretations of what it meant to be missing. For some a missing episode meant being absent overnight, or permanently. For others it was any period beyond an hour or so when the young person’s whereabouts were unaccounted for. In high-risk placements with trafficked young people, an hour of the young person not answering their phone could trigger a missing report to the police, while in another placement this would not be the case. This presented a challenge in comparing placements, as well as in identifying change. To manage this, foster carers recorded missing episodes and provided an accompanying narrative in their weekly logs. This was then compared with the LA social worker’s account of how frequently the young person had gone missing in the previous six months. A simple account of whether missing had reduced would obscure the importance of trafficked children (who have no case history) not going missing. In this section judgements about missing episodes are therefore contextualised by other factors including the risk of being trafficked, and number of previous missing episodes.

Overview of missing episodes in specialist placements

- Seven placements saw a reduction in the risk of young people going missing
  - Four trafficking placements saw no young person re-trafficked and only two missing episodes, which involved young people returning home late
  - Two CSE placements saw a reduction in the number of missing episodes compared to the previous six months
  - One CSE placement saw a young person go missing once in six months, and only for a few hours
- Six CSE placements saw no real change in patterns of going missing that put young people at risk
  - Three placements saw no change, where young people had previously gone missing frequently. These were all short-term placements, two of which broke down because of persistent missing episodes
  - One placement saw a young woman continue to go missing frequently, despite her placement
being positive and stable

- One placement saw an increase in missing episodes over a long period of time, and ultimately ended because of the young person's absence from her foster home.

Reduced or no missing

Two specialist CSE placements saw missing episodes reduce, and this marked a substantial reduction in risk.

Danielle was a young person that went missing very, very frequently and she was only reported missing I think once in the whole placement and that's quite a big thing (LA social worker).

Similarly, Briony had frequently gone missing in her previous placements, while in contrast she had only been missing twice in the eight months she was in a specialist placement.

She wasn't in the (previous) placement at all in the eight days, she went home for a little bit and then disclosed to the carer, whilst missing she'd taken drugs, stolen and she'd had sex with people in return for accommodation and drugs (LA social worker).

I used to be on the run like every day. I used to think 'Just do it, you only live once'. Now I'd think 'I've got a bed in there! I 'aint got a bed out there!' Or 'It's warm in here, and I got dinner sitting on the side', something like that (Briony).

In the four trafficking placements, two young people had no missing incidences, and the other two returned home late on one occasion each, triggering a missing report. Three of these young people had been in previous care placements for a few weeks or months before transferring to their Barnardo's specialist foster home. While missing cannot therefore be said to have reduced in comparison to previous placements, it is nevertheless significantly positive that each was safe and protected from being re-trafficked for the time they were in a specialist placement. See case study 4 below.

Case study 4: Risk of re-trafficking

Linh had two Vietnamese friends who both went missing from care while she was in a Barnardo's specialist foster placement, and were later picked up in raids on cannabis factories. One had been beaten up by two other young men and then told on the phone that someone was coming to get him from the reception centre for unaccompanied asylum seeking children he was staying at. He was too scared to resist, and went with them when they came to take him. The other young man was picked up by traffickers when he left his foster home to go and visit a friend across the road.

Linh’s specialist foster carers successfully managed the increased risk by discussing the situation frankly with Linh, changing her phone number, informing the foster families of other trafficked young people in the area, and liaising with Barnardo’s and social services. The specialist foster carer explained:

We really had to persuade her (Linh) that he (the friend) hadn’t run away – he didn’t take his phone charger! The kids have to be told so many times to be careful, watch for the cars coming alongside.
Unchanged patterns of going missing

In five CSE placements young women were missing frequently, and this was no different to their patterns of behaviour in the six months prior to being placed with Barnardo’s. Two of these placements were seen to be stable and positive for the young women, while the other three broke down within a few months. In two of the placements that broke down this was the direct result of young people’s absence. In the other placement the young woman did not go missing, but was only in the specialist foster home for four days before the carers ended the placement.

Increased missing episodes

Only one placement saw an increase in missing episodes. See case study 5 below.

Case study 5: Holding risk

Rhiannon was in a Barnardo’s placement for 14 months before it became specialist in response to an increased level of risk. There were only eight out of 49 weeks when no missing episodes were recorded in the monitoring logs submitted, and the logs showed Rhiannon to have been missing for 165 nights over this period. There was agreement among all professionals that this was unacceptable and that Rhiannon was at risk of harm when she was missing. She regularly returned home hungry, dishevelled, and in a low mood, and on a few occasions came home with bruises and new clothes, which raised concerns about her risk of CSE. Strategy meetings were regularly held in response to these patterns, but the perception of her risk of CSE fluctuated within the multi-agency team.

The specialist foster carer consistently reported Rhiannon missing and advised the police of where she suspected her to be. However Rhiannon refused to give the addresses of the homes she stayed at, because a visit from social services or the police would not have been welcome, and insisted she would continue to go missing and would not change her behaviour. Some short-term disruption was achieved when Rhiannon’s friends made it clear she wasn’t welcome if she brought the police to their doors. However this only lasted for a few weeks before Rhiannon found new places to go to.

Rhiannon treated the foster home as a ‘safe base’ to return to, and maintained a positive relationship with her carers throughout her placement. Both her parents had died in recent years but Rhiannon did not want to accept any bereavement counselling. As a result, the relational stability of the placement was felt to be beneficial enough to outweigh the risks of her going missing so often.

I do worry about her a lot and her persistent missing; I feel it’s only a matter of time before something really serious happens to her. But then on the other hand, it has been a very stabilising factor in her chaotic life and in her mind, she knows that John and Anne will be there no matter what. You can’t buy that, you can’t bottle that and that’s one thing that a lot of CSE and trafficked children never have (Barnardo’s project worker).

Recognising the value of this stable foster home to Rhiannon was not without challenge, and the situation created a lot of uncertainty for professionals involved. While the police advocated for a secure accommodation placement, social services felt that Rhiannon would only revert to the
same behaviour when she left such a placement. Likewise the LA social worker was convinced that any other foster placement would have broken down, and Rhiannon would then have gone into semi-independent accommodation which would have been ‘disastrous’ in her words.

> And I mean disastrous. ‘Cause she would meet other young people like herself, and she’d go from bad to worse, 100%, if she went to a semi-independent. She would be in their control. She’d deteriorate. She definitely would (LA social worker).

Ultimately Rhiannon was returning to her foster home so rarely that the LA ended the placement. At the time of writing she was living in her own flat and was still being supported by the Barnardo’s project worker.

Rhiannon’s experience highlights some of the challenges for professionals in responding to the risks of CSE. It is not possible to know whether Rhiannon’s situation would have improved or deteriorated if she had been placed in secure accommodation. However, given her family background, there was a clear value for her in having stable consistent relationships with her specialist foster carers over the two years she had been with them since coming into care. Research also suggests that disrupted relationships and placement instability can be a risk factor for CSE in itself (Coy, 2008; 2009). Nevertheless, recognising the value of relational security may require professionals to hold back from pursuing short term tactics to disrupt young people’s environments, which is not always easy to justify when there are immediate safeguarding concerns.

For further information on missing episodes and the cost effectiveness of specialist placements see chapter 10.

### 7.6 Did young people improve their awareness of the difference between healthy and exploitative relationships?

**Finding 5:** In the six medium to long-term placements young people’s awareness of the difference between healthy and exploitative relationships increased. In the four placements that broke down within three months there was no evidence of improved awareness, and in the three placements with potential for longer term stability there were indications of improved awareness.
Awareness of the difference between healthy and exploitative relationships

Many sexually exploited and/or trafficked young people experience abuse at the hands of people who may have initially appeared to be safe and caring. The ‘grooming’ model of exploitation involves an adult or peer winning a young person’s trust over time to prepare them for abuse. In some examples this is through the young person believing an older person to be their boyfriend/girlfriend. Beyond the ‘boyfriend’ model, young people often do not share the same understanding as adults about the risks posed by certain behaviours, locations, people or relationships and may be vulnerable to abuse as a result. Understanding the signs of a healthy or exploitative relationship is therefore a key outcome in reducing the ongoing risk of sexual exploitation and trafficking in a young person’s life. This outcome was analysed on the basis of reports from young people, carers and other professionals about how they perceived understanding to have developed in placement, and any evidence that might support these judgements.

Improved awareness

Young people’s awareness of exploitative and healthy relationships clearly improved in the six medium to long-term placements, three of which were CSE and three trafficking placements.

\[\text{I think she understands now that there’s a difference between close friends and people you just talk to who you wouldn’t really go anywhere with (Specialist foster carer).}\]

\[\text{I think if I got internet back now, yeah I have changed, but I probably would go and text a boy, ‘How you doing sunshine? You’re fit’ – like you do – ‘Do you wanna meet up?’ I wouldn’t say ‘Do you wanna meet up’, but it would increase to that wouldn’t it? Then you do the wrong stuff, have a snog, do little doings of stuff, and it’s like if Helena (foster carer) weren’t here, I would have done that (Briony).}\]

\[\text{There were some very clear examples of times when Shauna had responded in really positive ways to keep herself safe. So as an example, somebody had contacted Shauna via the internet, and the carer had found the chat log and Shauna had responded to that person, ‘I’m 13, you know that I’m younger and you know you shouldn’t be contacting me’ and then she’d ended that conversation (Barnardo’s project worker).}\]

\[\text{I always used to think it was my fault; I wasn’t good enough and stuff like that. I used to, like, stick up for the person. Now I don’t (Mohammed).}\]

The importance of time and trust

This growing awareness was primarily a reflection of the time these young people were in placement, which enabled trusting relationships to be built with specialist foster carers and Barnardo’s project workers. Trust was seen as a crucial condition for awareness raising in light of the different ways that young people were likely to view their experiences (see section 11.3 for further discussion). Depending on the young person’s willingness to discuss the issue of exploitation, trust took longer to achieve for some than others.

\[\text{It’s just so individual. I’ve been working with some young people for over a year now, we’ve still not covered some really important key work because it’s just taking it at their pace and looking}\]
at their retention and processing and exploring all the peripheral issues around relationships in a third person kind of way, before they’re able to share maybe some of their own experiences and victimisation (Barnardo’s project worker).

In the case of trafficked young people, specialist foster carers and professionals also had to be sensitive to the different interpretations of healthy and exploitative relationships that young people carried, while recognising that each young person was unique. In one placement, Thien was very reluctant to discuss sex and relationships, and her carer felt that this was because of her perception of stigma associated with sexual abuse. However Linh, who was from the same country as Thien, asked her carers Pat and Steve lots of questions about sex and relationships and Pat was then able to challenge certain ideas of gender inequality.

I try to remind her that, here, everyone is equal. She says at home the boys are in charge, and the girls are in the home and she was not born in the city, she was born by the river, she is poor. So she thinks she’s no one. I say, ‘No, you’ve been here long enough now to know – it doesn’t matter where you were born. You don’t let anybody make you feel like you’re worthless’. A few weeks ago a Vietnamese boy asked her out and she said no, and he asked to speak to me, and I heard her telling him ‘No, Mum says I’m equal and I’ve said no’ and I was cheering when she got off the phone. If she can do that with him, she can do it with someone else. So she is turning the corner on that one (Linh’s specialist foster carer).

The difference between increased awareness and changed behaviour

Interviewees identified the difference between increased awareness in the short-term and a young person’s capacity and willingness to put that into practice, which may be a more medium-term outcome.

The work that’s been done by (the project worker) isn’t going to have an impact in a couple of months. It needs to have a longer time really, that’s my view about it. Shauna is continuing to engage in what we consider risky relationships and although she can give the right responses to people about what are healthy relationships, she doesn’t follow through with her actions (LA social worker).

Even though Rhiannon’s placement ultimately broke down, she did develop a positive relationship with her project worker over many months and a greater understanding of risk and sexual exploitation as a result of this work. However her project worker remarked that ‘I don’t feel she has the ability and capacity to put some of the keeping yourself safe strategies in place’. Similarly in a few placements it was felt that, despite progress being made, more work on safety and risk would be beneficial to a young person. Project workers acknowledged that risk may increase again when a young person makes significant transition (e.g. into mainstream school, back to their original community, into independent living) and it was at these moments that continued support would be most valuable.

Some improved awareness in short-term placements

The three newer placements that were still ongoing at the project end had also achieved some positive short-term outcomes in this area. The young man in a trafficking placement was naturally still very guarded a few months into his placement and his lack of English presented a barrier to conversation. Nevertheless he accepted his need to be kept safe, and his project worker recognised substantial change in his ability to trust his carers and other supportive adults. Similarly Hayley had been in placement less than a month, but was showing evidence of identifying that some relationships could present a risk to her.
Hayley opened up to Tina; she’s disclosed things that happened to her when she was younger and while she’s been part of this gang. She said to Tina she’s over the moon that her boyfriend put her in hospital because she wouldn’t be where she is now. She’s kind of separating the old Hayley and saying this is the new Hayley. She had a phone and there were thousands of people on Facebook, she’s got rid of that and she’s only accepting people that she knows now and trusts (Barnardo’s fostering social worker).

No improvement in placements that broke down quickly

There was no evidence of improved awareness in the four placements that ended within a few weeks/months, primarily because there was too little time for any trusting relationships to be built.

7.7 Was there evidence of increased protective factors in young people’s lives?

Finding 6: Evidence of protective factors in a young person’s life reflected the length of time they were in placement, their own interests, and the efforts of specialist foster carers to facilitate positive activities and friendships.

Protective factors

There are various experiences that can increase young people’s resilience and well-being in the face of harmful experiences like exploitation and instability in care (Gilligan, 2006; Coy, 2008). ‘Protective activities’ can reduce risk by building self-esteem, introducing young people to alternative social networks, giving them the opportunity to learn new skills, and helping them avoid risky situations. This section therefore considers whether the specialist placements facilitated young people’s participation in education, hobbies and skills, positive peer groups, and having their voice heard.

Education

In eight placements young people had engaged positively with education or training.

In six cases this primarily reflected the young people’s desire to be in school or college, including in the four trafficking placements. Nevertheless specialist foster carers played a clear role in supporting all of these young people to attend and achieve educationally. Linh explained that in her country of origin ‘I never went to school. I was excited to learn’. However she had to overcome a series of obstacles in adapting to school and college. Her very low self-esteem meant she often wanted to withdraw from more challenging choices, and her carers persistently countered her negative self-perceptions with praise and encouragement. Carers described other supportive roles they played in young people’s education including advocating for places in particular schools, supporting their homework, liaising with
the school about their safety, and escorting them to and from different elements of their alternative education provision.

Briony was the only young person whose engagement with education significantly improved while in her specialist foster placement. She had been regularly absent from education in her previous location but her attendance record was now 100 per cent.

She’s engaging well with everything. Her levels have come up for her English and reading, they’ve noticed a significant improvement, it’s like two years for her reading that’s increased with the support put in by the school and the carer (LA social worker).

In the four placements that ended within weeks/months young people were not positively engaged in education in their new location. This was either because they refused to attend, because their attendance was infrequent, or because no education placement was arranged before the placement broke down. As an exception, Rhiannon was in a longer-term placement but her life was consistently chaotic, and she was missing frequently. Various education and training courses were offered to her, including an apprenticeship with a hotel chain. Despite engaging very well with her education worker, she was unable to take advantage of these offers.

**Hobbies and skills**

Where young people were in stable, medium to long-term placements they often engaged in regular hobbies and learned new skills. These included going swimming, attending exercise classes, going to a gym, having keyboard lessons, volunteering in a charity shop, and going horse-riding. Young people had learned a variety of skills, from household tasks that would prepare them for independence, to safety skills to ensure they were risk-aware, to basic skills that enabled them to acclimatise to a new culture or attend school.

The first time I came here I had not used a computer. I didn’t know how to do cook, how to do make up…Everything I have learned here. I didn’t know how to write, how to count – nothing (Linh).

These skills were also seen as part of the safeguarding process, as a Barnardo’s counsellor explained about her work with Thien.

I worked with her through storytelling and narratives and how you can save up and then get something and not get into debt or if you buy things out of catalogues, that you end up paying a lot more and that kind of stuff. I think if she gets into debt that will make her more vulnerable for exploitation (Barnardo’s counsellor).

Those placed toward the end of the project had also been given opportunities to do various activities in the short time they were part of the evaluation. Xuan’s carers signed him up to the gym in the first week he arrived, and he regularly went swimming with his foster father. Hayley’s foster home was also a farm, and her carer quickly got her involved in caring for the animals, which she enjoyed.

Unsurprisingly, those in placements that broke down quickly did not get involved with such activities or learn new skills, despite some carers’ efforts. Jessica’s placement broke down after 11 weeks, but her carers had helped her attend a youth club and had attempted to find activities for her to do at times when she would typically go missing from home, although Jessica refused to engage with these. Likewise despite having been in placement for a number of years, Rhiannon was missing so frequently that she rarely took advantage of offers and opportunities to do positive activities, despite various attempts to support her natural creative and artistic talents.
Building positive peer relationships

Across all placements it was recognised that a young person’s peer group could increase or decrease their vulnerability to exploitation, and specialist foster carers often worked hard to facilitate positive friendships.

In all of the trafficking placements young people had formed, or begun to form, positive friendships with those either from the same, and/or other ethnic backgrounds. This was often through attending school or college, as Clarisse expressed.

> I feel a lot of love in class. I get on well with a lot of people, and they are close to me. They make things for me from their country, prepare and bring things for me, and even sometimes buy things (Clarisse).

Barnardo’s and the specialist foster carers also supported this process. Within the first few weeks of his placement Xuan was introduced to Linh and her foster family to increase the safe support network available to both the foster carers and young people. As a result Xuan was allowed to speak in his own language to Linh two to three times a week, and often for a number of hours. Xuan’s specialist foster carer had to supervise his phone use in this time, demonstrating her commitment to him, and her recognition of his need to have friends. Given the potential risks to young people of making friends within their ethnic community who may have links with traffickers, specialist foster carers had an important role in supporting safe friendships. Linh and Clarisse’s carers had always made an effort to create safe ways for them to socialise with other young people by getting to know any new friends they were making so they could monitor their safety.

> We’ve got to know them personally, we know their homes, know their carers, picked her up, taken her places (Clarisse’s specialist foster carer).

Similarly nearly all the carers in CSE placements had suggested that young people had friends to stay over, since they were not always able to stay out themselves, and had thought about how they could help young people build positive peer networks.

> She’s kind of out of the area, which is a bit lonely, that’s how I let her friends come from school and have overnight stays (Specialist foster carer).

> Tina (foster carer) has more positive influences in the village so she’s got Hayley some friends and what have you, because she’s a 17 year old and she didn’t want her feeling totally cut off (Barnardo’s fostering social worker).

Nevertheless these young people could still feel isolated as a result of the location of their foster home, or the measures put in place to keep them safe.

> I need more friends. They live really far from me, and if I go there I have to come back home. I can’t sleep there, so really sad about that (Linh).

> I can’t speak to me mam ‘cause I don’t have a phone so I just feel, like, on my own. Like if I need to speak to someone, I can’t speak to her, I can’t speak to anybody (Emily).

For some young people, the pull to existing friendships was a risk factor: either because of the activities they were likely to engage in, or because of the distance they would travel to see them. For example, most of the young people in placements that broke down went missing to see friends, or a boyfriend. A pre-existing attachment to risky peers, adults or locations was a common factor in these placements.
When she goes down there, – because a lot of her friends live there and it’s only down the road from where she’s living now – that’s when we get a lot of these behaviours like going and smoking cannabis, getting drunk, misbehaving, meeting up with people off the internet, that’s where those sorts of behaviours are happening (Barnardo’s fostering social worker for Shauna).

Rhiannon goes back to that area, that’s her roots, her home, you’re never going to cut ties with that area. But within that area there’s a whole network of people that are quite dangerous, that she’s known all her life. Some of those girls who are known to be involved (with CSE), she sees them almost more like sisters than friends (Barnardo’s fostering social worker).

For these young people there was potentially a real cost in heeding messages about risk. Briony, for example, anticipated feeling lonely when she returned to the area she was originally from.

‘Cause most of my friends then were all weed addicts ‘cause that’s what I was into. And when I go back there, I think ‘I’m not going to have any friends’. But I’d rather have no friends and family, than have weed friends and no family (Briony).

Participation

Being listened to and having control was complex for many of these young people whose freedom was limited in order to keep them safe. Nevertheless Barnardo’s aimed to ensure that young people in placements participated in the decisions that affected them, and were given opportunities to have their opinions heard and acted upon. This was primarily in the form of LAC reviews and pathway planning, where there were clear opportunities for young people to provide their own perspectives on their care. Danielle had previously chosen not to attend meetings or LAC reviews, so her involvement in discussing safety planning at the start of her specialist placement was interpreted very positively by her LA social worker. Similarly Rhiannon’s project worker advocated for her to be present at a CSE conference about her case, despite young people not normally being invited to participate.

From talking to Rhiannon she felt very much like professionals were doing things to her, asking things of her and that she had no control over anything. So I wanted to give her a little bit of control back and enable her to maybe pick and choose who she wanted to work with really (Barnardo’s project worker).

Similarly, Hayley was asked if she would like to chair her own LAC review at the start of her specialist placement.

I think it gave her the control. She’s had people that have taken control over her life for so many years and it gave her the control, and it just shows where her confidence levels were as well because there were a few of us there (Barnardo’s fostering social worker).

Overall, Linh felt that she had far more control of her life than she had ever had previously.

I feel I have freedom in here. I can speak what I am thinking. Yeah, and I can do what I want, but in Vietnam not like that (Linh).

However she and a number of other young people were often frustrated by the lack of contact they had with their LA social workers, the length of time it took for action to be taken, and decisions that were made for their safety that they disagreed with. Two young people had therefore requested and been given new LA social workers, and spoke positively about those who enabled them to make these requests, including Independent Reviewing Officers (IROs), specialist foster carers, and Barnardo’s
project workers. Poor relationships with social workers also appeared to be related to trafficked young people’s access to an appropriate interpreter, which was crucial to their participation in meetings. In Clarisse’s placement there were ongoing issues with the LA not booking interpreters. This often meant meetings were cancelled that Clarisse had been waiting anxiously for in order to discuss whether safety measures could be relaxed, and to have the chance to share her feelings about her placement. Her project worker also noticed a real difference in Clarisse when an interpreter was present.

*When she was able to speak in her own language she was very talkative and quite excitable and so on, and normally she’s very quiet and very dignified, and it really made me realise how important it is for her to be able to speak in her first language* (Barnardo’s project worker).

Despite the efforts made to elicit young people’s opinions, it was inevitable that for some, their wishes could not be met because of wider concerns about their ongoing safety.

*Sometimes it’s not very easy if you ask them for things, you don’t get it all the time. It’s at their discretion really. It’s very hard to get anything from them. Like security and a lot of meetings, that troubles my life. When you ask for more freedom you don’t get it easily, you don’t get it at all* (Clarisse).

*I wouldn’t be here if they respected my choices, I would be in (home town) nonstop* (Danielle).

### 7.8 Did young people’s health and well-being improve, and was there evidence of recovery from abuse?

**Finding 7:** Medium to long-term placements saw improvements to young people’s physical, emotional and psychological well-being, although trafficked young people sometimes struggled to cope with safeguarding measures that restricted their freedom.

**Recovery and improved well-being**

Recovery from abuse is a process, and a long-term rather than short or medium-term outcome. For this reason specialist placements that lasted months rather than years could only be expected to play a part in facilitating recovery. This included providing access to appropriate therapeutic support if the young person was ready to engage with it. In a wider sense, however, the evaluation was able to judge whether placements had a positive impact on young people’s physical, emotional and psychological well-being.

**Access to therapeutic support**

Counselling was offered to the three young trafficked women who were in medium to long-term placements. One accepted the offer; one began to meet with a counsellor after initially declining; and one continued to decline. Previous research has suggested that western concepts of mental health and
counselling may be unfamiliar to separated and trafficked young people (Chase et al., 2008), and this was borne out in interviews.

Now I think I a bit more grown up, so I need think about life in here, not about before, because it not help me. They push me to go to the doctors to sort out, to talk to them about it. The social worker said that as well. I said I don’t want to. A little bit freedom, give me friends, that’s what I need (Linh).

Thien didn’t like me asking questions, which was fine. She said ‘I don’t like anyone who asks lots of questions’, that was something she made quite clear from the outset. It was difficult initially; she didn’t greet me with open arms. But on the other hand she didn’t say she didn’t want to see me, so it was treading eggshells to start with whilst I was trying to build this trusting relationship with her (Barnardo’s counsellor).

Bereavement counselling was also offered to Rhiannon who consistently decided she did not want to meet with a counsellor. The Barnardo’s project worker and educational psychologist designed life-story work that could be conducted in the community instead, which Rhiannon agreed to, although her missing episodes then increased to the point where the work was untenable (see section 9.5 for further discussion).

In short-term placements that broke down, or were still ongoing at the end of the project no formal counselling was begun. However an educational psychologist was working with Shauna and psychological support was being considered for Emily if the placement was to become longer-term.

We had referred Emily to CAMHS because we could see there were psychological issues. She wasn’t externalising her behaviour but we could see the indicators that she felt different. She needed some intervention really and there was a long waiting list and unfortunately by the time the referral became active, which is only recently, her behaviour had already started to deteriorate (LA social worker).

Key contexts for therapeutic support therefore included the young person’s willingness and readiness to accept support, and the availability of both formal counselling, and forms of therapeutic support that were suitable for young people who rejected this.

Improvements to physical health

As discussed in section 1.2 sexually exploited and/or trafficked young people may experience a range of problems with their physical health, and there was evidence of specialist foster carers addressing a range of issues in the placements. For example, four young people needed treatment for sexually transmitted infections while in placement. Pat explained that in the four months Linh had spent with other foster carers before coming to her, no one had thought to take her to the sexual health clinic – despite knowing that she had been sexually abused.

Considering where she came from, and everyone knew where she came from – no one checked her out. She could have been pregnant. She’d picked up Chlamydia. If we hadn’t picked that up, she could have ended up not being able to have kids (Linh’s specialist foster carer).

For other young people their foster home meant being well-fed. Shauna explained that breakfast was now ‘the most important meal of the day’, whereas she had never eaten breakfast in the previous seven years living with her Mum. Hayley was similarly malnourished when she arrived to her specialist foster placement, but had gone from six to eight stone in the two months she had been in placement.
In contrast where young people were regularly missing, many indicators of poor physical and emotional health continued. Rhiannon often appeared to be hungry when she returned from going missing, and had poor dental health as a result.

When completing a collage about her life in the year before being placed with Barnardo’s (see Figure 12) Briony picked an image of a running man and explained that when she was using cannabis she struggled to run from the police, but now she had given up cannabis and smoking, and regularly exercised with her carer, she was confident that she could run if she had to!

*I’m not gonna say I’ll get caught by police but I think I could do it now, do you get what I mean? I think it’s just because I’m off it, I’m not putting it in me body anymore* (Briony).

**Improvements to emotional and psychological well-being**

Interviewees in medium to long-term placements provided many examples of how young people’s emotional or psychological well-being had improved while in placement, including improvements to behaviour where young people had previously been aggressive and angry. Specialist foster carers of trafficked young people in particular described a trajectory of growing confidence, as young people recovered from the impact of their experiences. Thien’s specialist foster carer and LA social worker both described how she had gone from being very nervous and upset to a happy and self-confident young person.

*If I look at Thien now and what she was like when she first came, she was very, very shy, very timid, very fearful, emotionally she was crying all the time and just wanted to, she’d lock herself, not physically lock but she’d spend most of her time in her bedroom and things like that. I look at her now – we went to a party we got invited to and she’s singing on the karaoke and she’s the centre of attention and she’s just so confident and outgoing* (Specialist foster carer).

Similarly as Linh’s specialist foster carers praised her efforts with school work and encouraged her to take control rather than give up, she had become much more resilient to challenges.

*She would be in tears over 96 per cent. It was the end of the world, but that’s changed in the last few months. She gets that things are harder for her, and that it’s good to improve* (Specialist foster carer).

Linh described a sense of recovery from having been overwhelmed by traumatic memories. She had produced a collage of images and words that captured something of her life in the year before she came into the Barnardo’s placement. In talking about the images she remarked:

*I think it’s something horrible, I can’t remember now, because my life really happy now! Before I think never I could forget something really bad, but it gone a little bit* (Linh).
However for at least two of the trafficked young people the experience of specialist foster care was also part of their sense of emotional and psychological struggle and was primarily related to their perceived lack of freedom. Linh and Clarisse were interviewed at times when they felt both very positive about their specialist foster homes, and very negative. These negative feelings sprang from their frustrations at not being able to go where they wanted and do what they wanted, because they had been trafficked.

In the end you feel like you are really tight. Things tighten on me. You feel worse than that. Being directed in everything, there is a reason you can’t do it that way, and a reason you should do it this way (Clarisse).

I know I’m trafficked, everywhere go I look carefully. Why you tie me too tight? I’m more crazy now than I was before (Linh).

They both expressed finding it very difficult to be faced with a lot of meetings and different professionals when they first arrived, and that this was a real source of anxiety and stress.

At first it’s hard, very very big change from where I’ve come from. I never thought such a change would happen in my life. To have to be confronted with all this, the police, the security services, authorities, social services. Maybe, I can understand they are trying to do their job, it’s their job to come in and help you and everything, and it’s appreciated. But I think it would be even better
Dead end – that’s what I thought my life was till I came to Helena’s. ‘Cause I was in the dealing business and all that.

I did stuff like go and meet people that I shouldn’t of… that’s what I did with my phone.

I was free to an extent but sometimes it was too much free if you get what I mean? The door would be open; I could walk out of it. And even if I did walk out of it I didn’t get punishment.

In my past life I was too busy doing weed and all of that, and I didn’t care about my birthday.

Despite these very real challenges, both young women had warm and positive relationships with their foster carers, who worked hard to manage these safety strategies, meetings, and the young women’s emotional well-being.

Figure 12: Briony’s collages of life before and during her specialist foster placement
I hated nerds and now I think ‘Oh, I’m a nerd’. You know the holiday we just had? I sort of missed school a bit. Don’t tell anyone, but I did!

I’m not as nervous like I used to be, like when you get that knock on the door and you think ‘Oh shit, is that police? Let’s just hide that ounce of weed’.

I think I’m heading in the right direction.

Saying ‘No’ to like, let’s say you met someone off the internet, you never met them, they go ‘Let’s meet in a pub’ and it’s like nine o’clock at night. Like back then I would have been ‘Yeah all right’ but now I’d be like, ‘Mate it’s nine o’clock at night, I don’t know who you are’.
7.9 Did young people develop positive relationships with their specialist foster carers?

Finding 8: One of the strongest outcomes achieved by specialist placements was the development of warm and trusting relationships between young people and their carers, which contributed to their wider safety and well-being.

Positive relationship with foster carer(s)

While not identified as a key outcome within the original placement model, a positive relationship with foster carers could be described as a mediating outcome: that is, it creates the conditions in which other outcomes are more likely to be achieved. This outcome was measured through interviews with those involved in placements on the quality of the relationship between specialist foster carers and young people.

In ten placements young people reported warm and positive relationships with their specialist foster carers

The most often reported outcome across all placements was that the young person had developed a positive relationship with their specialist foster carer(s) and felt supported and cared for. In nearly all these placements a range of other positive outcomes had also been reported, suggesting that a trusting relationship at the heart of a care placement is crucial to wider improvements in well-being.

In some placements this relationship was established very quickly, where young people found that they almost instantly ‘got on’ with their carers. This was true of Hayley, who said that Tina was ‘just a lovely woman and I respect her’. She explained that if she was ever told she had to leave Tina’s house she would live locally ‘just in case Tina needs any support when she’s older and I can help her with anything’. Similarly, both Shauna and Briony had felt comfortable with their carers very quickly.

She’s very, very happy, she’s expressed how happy she is living with Sally and James and their family. She scored it a six, being the highest that it could be, comparing it to her previous placement as zero where she felt that the carer and her, they just didn’t fit together, they didn’t understand each other (Barnardo's project worker for Shauna).

Helena’s a part of my life now, like I feel I love her! Do you get how that is? Not as a mum but as a second mum (Briony).

However such instant chemistry wasn’t necessary for quality relationships, and many carers won young people’s trust through their consistent expressions of care and concern. For trafficked young people in specialist foster placements, positive relationships were built over time as foster carers proved themselves, and many had to overcome young people’s fear and mistrust. When Linh first arrived to
her foster placement she was anxious and scared because her foster father reminded her of men she had encountered when being transported across Europe.

The first time I came I really worry ‘Is this family the same as before?’ I remember I sat here and I looked around and felt really nervous, worried. And my social worker says ‘Are you ok?’ and I say, ‘I ok’ but in my mind I never say that. Yes, I worry, I scared. When my Dad come home I worry as well. I say ‘Oh! Big Boy!’ Because my Dad really big and tall. Make me remember some bad boy. Yes I fear, but I don’t tell anyone. I nearly cry, but I tell myself ‘Don’t cry’. So I just sit here...At first I scared because my Dad doesn’t say anything and I not talk to him because my English not enough to talk anything. So I really scared. But when I stay for a few days I feel he really gentle – different. Same body but different, um, different feeling or something. Not the same. He acts gentle, like a baby, not like a man. He understands, and explain something really gentle not like a man, some horrible man in Russia (Linh).

By the time she left her placement, Linh had a very close and trusting relationship with her foster carers. Her LA social worker captured this when reflecting that Linh saw them very much as second parents.

She is still wanting to visit, contact them, rely on them even though she’s moving out. So it speaks volumes when a young person is still willing to call you Mum, and pick up the phone and stay in contact with you (Linh’s LA social worker).

In another placement, Xuan expressed quite early on that he felt safe with his specialist foster carers and wanted to stay with them. When his foster father Andy was out shopping for a birthday card for his wife Lorna he stood with Xuan at the generic birthday card section and asked him if he wanted a card to sign as well. Xuan went straight over to the ‘Mum’ section, and picked one of those instead.

Even in Rhiannon’s placement where concerns remained high about her vulnerability, there was evidence of a strong and trusting relationship that was seen to function as a protective factor in her life.

I think she does, overall, have a very good relationship with Anne and John. She has shared with me in the past that she sees Anne as a mum, and you can see that Anne has a real strong attachment and bond to Rhiannon as well, and I think that’s why neither of them will give up. They’re gonna be there. It’s like unconditional love in terms of being there for her, and not giving up with all the missings really (Barnardo’s project worker).

In three short-term placements there was no evidence of these positive relationships

In placements that broke down there was less evidence of a positive relationship having been established because placements ended quickly and young people were missing more often. Megan’s placement only lasted four days, and did not provide her with a warm and positive relationship. However both Ashleigh and Jessica appeared to like their carers and Jessica attributed the placement breakdown to the placement being too far from her friends, rather than any issues she had with the foster carers.
### Chapter 8: Mechanisms of Change

#### 8.1 Summary of key findings

The following were identified as the key mechanisms driving positive outcomes in the specialist placements.

**Table 11: Mechanisms of change**

<table>
<thead>
<tr>
<th>Mechanism type</th>
<th>Mechanism</th>
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<tbody>
<tr>
<td><strong>Caring mechanisms</strong></td>
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<tr>
<td>Seeing past challenges to the need</td>
<td>Providing positive attention</td>
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<tr>
<td>for compassion and unconditional</td>
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<tr>
<td>acceptance</td>
<td>Persisting without evidence of change</td>
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<td></td>
<td>Avoiding escalation</td>
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<td></td>
<td>Helping the young person to communicate</td>
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<td></td>
<td>Meeting practical needs</td>
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<td></td>
<td>Noticing and responding to emotional needs</td>
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<td><strong>Safeguarding mechanisms</strong></td>
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<tr>
<td>Appropriate sensitivity to risk</td>
<td>Applying boundaries consistently</td>
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<td></td>
<td>Disrupting exploitation</td>
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<td></td>
<td>Making it harder to run away</td>
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<td></td>
<td>Monitoring risk</td>
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<td>Trusting the young person to manage risk</td>
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<td></td>
<td>Ongoing vigilance</td>
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<td><strong>Child-centred mechanisms</strong></td>
<td></td>
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<tr>
<td>Working from the young person's</td>
<td>Therapeutic outreach</td>
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<td>perspective</td>
<td>Making sense of the young person's world</td>
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<td></td>
<td>Persistently reaching out to the young person</td>
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<td></td>
<td>Giving the young person control</td>
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<td></td>
<td>Valuing cultural identities</td>
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<tr>
<td><strong>Communication mechanisms</strong></td>
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<tr>
<td>Sensitive communication</td>
<td>Taking opportunities to discuss risk in everyday life</td>
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<tr>
<td></td>
<td>Challenging oppressive assumptions</td>
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<td></td>
<td>Talking frankly and openly</td>
</tr>
<tr>
<td><strong>Relational/family mechanisms</strong></td>
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<tr>
<td>A non abusive environment</td>
<td>Being included in everyday family life</td>
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<td></td>
<td>Modelling healthy relationships</td>
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<td></td>
<td>Facilitating safe friendships</td>
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<tr>
<td><strong>Activity mechanisms</strong></td>
<td></td>
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<tr>
<td>Offering viable alternative activity</td>
<td>Offering activities to promote positive self-esteem</td>
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<tr>
<td></td>
<td>Occupying spare time in the early days of a placement</td>
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<tr>
<td></td>
<td>Relieving the pressure and intensity of a placement</td>
</tr>
<tr>
<td></td>
<td>Building relationship through doing things together</td>
</tr>
<tr>
<td><strong>Advocacy mechanisms</strong></td>
<td></td>
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<tr>
<td>Representing young people</td>
<td>Gate-keeping and brokering</td>
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8.2 Mechanisms of change and realist evaluation

This chapter identifies the key mechanisms of change by which positive outcomes were achieved in the specialist placements. Mechanisms capture *what it really is* about programs and interventions that cause change, and are often hidden processes, much like the internal workings of a clock (Pawson and Tilley, 1997). Mechanisms are not, therefore, the same as measures, which can be much easier to identify. For example, the Barnardo’s specialist placement model comprised various different intervention measures, including training sessions for specialist foster carers, and producing a specialist intervention plan at the start of each placement.

While a list of measures can tell us what was done within a program, mechanisms show us how people actually responded to these interventions within the day-to-day realities of a specialist foster care placement. An example of a measure would be a young person having 1-1 sessions with a project worker. Various mechanisms might then be at work as a result, including ‘building a trusting relationship’, ‘becoming aware of risk’, or perhaps ‘young person taking advantage of an opportunity to skip lessons’.

A key limitation of this approach is that mechanisms are generally identified and described in ways that are about changing the attitudes and behaviour of program participants. In the case of child sexual exploitation (CSE) and trafficking this could perpetuate a deficit model that focuses attention and responsibility on young people rather than on those who exploit and abuse them. While young people may have complex relationships to exploitative peers and adults, it is important that they are not blamed for these relationships. Specialist placements did attempt to break or monitor contact with those who posed a risk, but generally involved mechanisms that helped young people perceive and manage risk, rather than focusing attention and resources on those who exploit them. While this is to be expected of the role of specialist foster care relative to the role of the police, for example, it also reflects a wider issue of the visibility of victims compared with perpetrators, and of the low numbers of convictions for CSE and trafficking.

The rest of the chapter reports on the mechanisms of change that were most often identified within the specialist foster placements. They are presented in order of how often they were identified by interviewees as the drivers of change, with the most significant mechanisms first. It should be noted that there may be other important mechanisms that are missing because the sample was relatively small, or because they were not identified in the course of the evaluation.

8.3 Care mechanisms

The primary type of change mechanism in specialist placements was the care shown to a young person by specialist foster carer(s) and others around them. The core expression of this was foster carers ‘seeing past challenges to the need for compassion and unconditional acceptance’. However the expression of this care was often different for sexually exploited or trafficked young people. Although there was overlap, these mechanisms have therefore been separated out to illuminate each groups’ different needs.

**Mechanisms of care for sexually exploited young people**

Effective carers for sexually exploited young people were able to look beyond behaviours that are usually seen as problematic, whether this was smoking, drinking, or not returning home on time. Rather than
focusing on these, they were able to hold the young person’s need for acceptance, affirmation, compassion and care at the forefront of their relationship with them. This was seen as the basis of a warm and trusting relationship between a carer and young person, which in turn created a safe environment. These caring mechanisms are summarised below.

1 **Providing positive attention** that countered some of the negative self-perceptions created by young people’s prior experiences in care and at home. This often came in the form of encouragement and consistently positive messages to young people about their value and worth. Wider research suggests that over time such attention can contribute to breaking cycles of young people responding to offers of attention and self-worth in environments that are ultimately harmful and abusive (Scott and Skidmore, 2006). When asked what it was like to live in this foster placement Mohammed answered:

> It’s like, I feel like - this is going to sound so stupid - but like, loved, like… Two strangers were being very nice to me, and I was still trying to be a little shit to them, but they were still trying to be nice, and it was just weird (Mohammed).

2 **Persisting without evidence of change.** Interviewees agreed that one of the most helpful qualities for specialist carers was the ability to accept the young person as they were and not give up on them when nothing appeared to be changing. This could otherwise be described as unconditional care and positive regard. However it was also described as carers having appropriate expectations of young people who may have a range of challenging behaviours.

> The foster carers are really good with Shauna, they support her really well. I think they manage the risk quite well because they’ve got to the point of accepting that she’s going to put herself at risk and each time that we find something out we deal with it and then we move on. I think Shauna needs that because a lot of foster carers might get a bit worn down by it, the fact that Shauna isn’t changing, she’s still carrying on with the same behaviours. But Sally and James are very good at just going, ‘Okay, let’s move on’ (LA social worker).

3 **Avoiding escalation.** Carers who didn’t judge young people on the basis of their behaviour were able to offer support and show concern even when young people disregarded their rules. They avoided ongoing and escalating conflict by not holding negative behaviour against young people, but allowing them to start again with a clean slate. This was a powerful counter-mechanism when young people appeared to be trying to provoke a negative reaction from their foster carers so that they could be in control of when a placement might end. It was also crucial in how specialist foster carers responded to young people who returned home after going missing. Rather than criticising young people for having gone missing, they showed concern for young people’s welfare first, and discussed the consequences of their behaviour second, often the next day.

> The child will come in – it might be two in the morning, it might be nine in the morning – but the carers are there saying, ’Are you alright? Do you need to get a shower? Do you need something to eat?’ In a different placement, you might get carers freaking out about what time they come back (Barnardo’s fostering social worker).

**Mechanisms of care for trafficked young people**

The trafficked young people in placements did not all have the same patterns of behaviour as those in CSE placements, and therefore did not need the same kind of response from specialist foster carers. Here, then, are some of the slightly different mechanisms of care that were relevant in trafficking placements.
4 Helping young people to communicate. Language barriers presented a challenge within trafficking placements, and young people appreciated the efforts carers made to both understand them and to help them communicate. This involved specialist foster carers helping young people to learn English, using tools like Google Translate for day-to-day conversation, and advocating for the use of interpreters.

People think ‘Can’t speak English’. You have to talk to them, how are they going to learn? We used Google translator first for a lot of things, we put that on for an hour every night…It was finding a balance between her being able to talk to us in her own language and being able to learn our language as well (Thien’s specialist foster carer).

5 Meeting practical needs. Specialist foster carers spent a great deal of time supporting and providing for young people’s practical needs. This involved buying clothing, providing culturally appropriate food, and taking them to numerous appointments. While communication was a challenge, young people saw this support as evidence that they were cared for. For example, Thien explained that Rachel had bought her more clothes than her previous carer. When asked why this was important she replied ‘Because, you know, I never like wears nice clothes like that…My foster mum before she not buy me anything like that. I just thinking she (Rachel) like my mother’. Similarly, Linh was very distressed on arrival at her foster placement, and practical gestures like the provision of a meal and toiletries made her feel safe. One of Linh’s clearest memories of these early days was how her foster carers behaved when she was unwell.

I remember, I really remember last year I had a stomach ache. I don’t know exactly. So she (specialist foster carer) take me to hospital and she not sleep all night, look at me and she cry. I can’t believe that – that’s a big thing I remember! And last week I banged my head really hard, so my Dad take me to hospital and wait for three hour, four hour! But he doesn’t angry, he didn’t angry. He go to work every five o’clock, but he didn’t angry! (Linh).

6 Noticing and responding to emotional needs. Specialist foster carers noticed, anticipated and tried to meet young people’s emotional needs. This involved observing their moods, being aware of dates and anniversaries that were important to young people, and being sensitive to possible triggers that caused young people emotional distress. Linh’s carers were sensitive to her mood swings and how they related to difficult memories, whether of her parents, who had died when she was a child or her experiences of being trafficked through Europe. For example Linh’s carer, Pat, knew that she had been made to clean the toilet every day in a previous placement where she had not been well-cared for.

So when she came I wouldn’t let her do anything. I stopped everything. And we did it. And I still don’t make her clean. If she wants to, I let her, but I don’t make her (Specialist foster carer).

8.4 Safeguarding mechanisms

These mechanisms could be summarised as ‘Appropriate sensitivity to risk’. This meant specialist foster carers neither under-estimating risk so that young people were unprotected nor over-estimating risk so that young people were unnecessarily suffocated by restrictions. Again, this can be broken down into a series of mechanisms that played a significant role in most placements by their presence, or their absence.

31 From this point onwards all mechanisms are relevant to both trafficked and sexually exploited young people.
Applying boundaries consistently. Boundaries were recognised to be crucial to the protection of young people, and needed to be consistently applied, and followed through with expected consequences when broken. They included curfews, expectations about when and how a young person would stay in contact when out of the home, and limits on when a phone could be used.

I was going to lose complete control if I gave in to anything and I just stuck to my rules and I didn’t change. So I think she was just testing me there but she’s fine now, when she’s done something wrong I ground her and she’s okay (Shauna’s specialist foster carer).

Briony reflected that a lack of more intensive boundaries in her previous foster placement may have contributed to her increased missing episodes and risk of CSE.

I did, like I used to think ‘Why ‘ain’t there no rules?’ It’s just like you’re gonna get walked over when you ‘ain’t put no rules in place. Like there was, don’t bring friends in the house and all that, that’s basic rules. But it was just like there was no like bed times, like there was a coming in time but she knew I wouldn’t have been in by then. But, like, I think if I did have rules, I don’t think it would have came to this (Briony).

Disrupting exploitation. Various safety measures were in place to break a young person’s contact with those who might pose a risk to them. Most commonly: the location of the specialist foster home being at some distance from the young person’s relational network (disruption by distance); and removing or heavily monitoring the use of a mobile phone and/or the internet. For example, when Emily was placed she had no access to the phone or internet. However her mother, who still held parental responsibility for Emily, then gave her a phone. Very quickly she was engaging in heavily sexual conversation with adult men who were abusive in their language, and who wanted to meet her. In contrast Briony had no phone for the first six months of her placement.

She’s had no mobile since being with Helena which has worked incredibly well. It seems to be when she has a mobile, that’s when she absconds and goes missing (LA social worker for Briony).

Making it harder to run away. Barriers were put in place that effectively made it harder for the young person to run from the placement, and more likely they would be found and brought home if they did. For example: doors being locked at night; the young person having no, or limited access to money; the carer’s address/young person being marked on police systems so that if missing they would be identified as high-risk. For example, in the first few weeks and months of his specialist foster placement Xuan was accompanied everywhere. This involved the school arranging for someone to meet him at the school gates and take him to classes, and Xuan having to wait for the male foster carer to take him to the gym so that he wasn’t left unattended in the changing room, or in the pool. This level of safeguarding could leave young people frustrated (see section 7.8), and made it important such mechanisms were accompanied by others that centered on practical and emotional support, and good communication.

Monitoring risk. The consistent application of boundaries was balanced against specialist foster carers ongoing and attentive monitoring of young people, their behaviour, and their relationships. For example, Rhiannon’s foster carer took down the number plates of cars she got into when she left the house, and Mohammed’s carers monitored his friendships quite closely.

Javad and Molly want to know my friends. They want the house number, they want their names. And that was the main rule I just thought ‘That’s embarrassing!’ For the first month I didn’t like it ‘cause when I’d say ‘I’m coming at one’ when really I’m coming at three, my friend’s phone used to ring – ‘hello?’ (he laughs). So at first I used to hate it. Oh my God. But now it’s good, like.
If my battery runs out they’ll call one of my friends, and my friends come round here (Mohammed).

Risk is a dynamic and fluid concept, and effective carers took steps to review boundaries and safety measures when contexts and circumstance changed. For example, Linh’s specialist foster carers changing Linh’s phone number when her friends went missing and were picked up by traffickers (see case study 4).

11 Trusting the young person to manage risk. As risk levels reduced, specialist foster carers responded by relaxing rules and boundaries over time. This was seen to be important in order to deepen trust with adults, to allow young people increasing autonomy and freedom, and to prepare them to manage risk independently when they left the care system.

We’ve got to show trust towards this young man… If we don’t display some trust towards him he’s not going to start to trust us and we’re not going to get probably the deeper story that’s inside him. (Xuan’s LA social worker).

I feel that we can isolate young people very much from what’s going on and it’s not helpful sometimes, because when she does come out of this foster placement and she goes back home she’s got to be able to deal with keeping herself safe (Barnardo’s project worker for Emily).

12 Ongoing vigilance. While allowing young people more freedom, specialist foster carers needed to maintain vigilance in their monitoring. This was particularly the case with trafficked young people, where traffickers remained hidden and were easy to forget about.

I’m not complacent but it’s not a high risk case. It’s fairly straightforward, but that’s the difficulty. You don’t want to let your guard down. We often talk about that, that just because she’s quite compliant day-to-day doesn’t mean she might not be at risk outside the foster home (Barnardo’s fostering social worker for Thien).

8.5 Child-centred mechanisms

These mechanisms are child-centred because they describe the way that project workers and specialist foster carers made the young person’s life world the starting point for communication, support and change. Together they could be described as ‘Working from the young person’s perspective’.

13 Therapeutic outreach. In research literature this describes the need to persist in finding creative ways to reach out and support sexually exploited young people when they are absent, rather than closing down support (Pearce et al., 2002). In this context it has been broadened to describe taking supportive, therapeutic work and tools into a young person’s life world. It means working at their pace; working within their understanding; working on what concerns them; and working in environments of their own choosing. For example, Shauna’s project worker described always looking for a ‘starting point’ that made sense to Shauna for work on risk and exploitation. If young people were often missing, project workers described the need to work flexibly, and to go to see them as soon as they were home, rather than making appointments that young people were unlikely to be able to keep. Project work sessions happened in foster homes, schools, en-route to ice-skating, in coffee shops, shopping centres, and very often in McDonalds.

Therapeutic outreach was particularly powerful in contexts where young people could not access or didn’t want counselling. For example, Thien had declined the offer of counselling a number of times before finally agreeing, and did not engage well with the first face-to-face session. For the next
session the counsellor took Thien to the park, and after that let her choose where they would go, and how long their sessions would last. They often had counselling sessions outdoors, and in shopping centres as a result.

I had to work very, very flexibly with her because she’s got different needs. I think had I just sat her in a room with two chairs, I don’t think she would have come back to be honest. It was trying to engage her in different settings, different ways (Barnardo’s counsellor).

14 Making sense of the young person’s world. Within a therapeutic outreach approach, project workers also described doing ‘identity work’ with young people that aimed to help them make sense of the choices they made and who they saw themselves to be. In this way, they hoped to address some of the underlying causes of behaviour that made them more vulnerable to exploitation.

Rhiannon’s project worker recognised that her strong attachment to a particular ‘risky area’ was related to having lost both her parents in quick succession and refusing support to process her grief. Rhiannon consistently turned down bereavement counselling and, when missing, always gravitated to this particular area, even to the point of breaking into her old familial home which had since been boarded up. In response, her project worker designed some community based life story work, with support from an educational psychologist.

We’re going to be very much led by Rhiannon and have her take us places and take pictures of places that have meaning to her. We didn’t think she might do it but she wants to do that kind of work, and we want to connect with her creativity…I thought, the only way to embrace and positively work with Rhiannon is to go into her environment (Barnardo’s project worker).

This was, in part, triggered by Rhiannon choosing to sit in a particular seat at a particular table in McDonald’s where she and her siblings used to have contact with their Mum.

She said nobody knew that and I just thought that particular table at McDonalds has a lot of value and meaning and memories to her. She talked a lot about the three of them sitting one side and Mum sitting the other, so she would always sit at the back because it was facing the door, so she could see when Mum was coming in (Barnardo’s project worker).

15 Persistently reaching out to young people. Project workers and specialist foster carers demonstrated their commitment to young people through persistently reaching out to them even when barriers were put in their way. This often involved thinking creatively, and being flexible in their attempts to build relationships and see the world from young people’s perspectives. Young people recognized and respected this effort.

Natasha’s not going to go anywhere (project worker). Quite often when Rhiannon doesn’t engage with a service they close it and move onto the next person on the waiting list. But Natasha is there every single week even if Rhiannon cancels, she rearranges for the following week. So that in itself gives Rhiannon a really important message (Barnardo’s fostering social worker).

16 Giving young people control. Giving young people (particularly trafficked young people) control and freedom over the food they ate, and when they ate it was a theme across a number of placements, and sometimes seen as a positive balance to safeguarding boundaries that might be in place. For example, in evaluating her happiness with her specialist foster carers Thien had rated her placement ten out of ten, but explained that it had been four out of ten when she first arrived because she couldn’t eat much English food and lost weight. When her carer took her to a Chinese supermarket, she was able to choose and cook food for herself which meant she could then ‘eat lots’.
Similarly Clarisse’s carers drove her to specialist shops to find food she wanted, and she often spent hours in the kitchen cooking for herself.

Alongside this was the importance of finding ways to give young people some control in meetings with professionals, including hearing their perspective on their own situation (see section 7.7 on young people’s participation in meetings).

17 Valuing cultural identities. In trafficking placements in particular, specialist foster carers made a lot of effort to help young people remain connected to their cultural heritage through researching and understanding their cultural background, giving them opportunities to eat familiar foods, and ensuring they could speak in their own language through interpreters. When Xuan arrived to his foster placement, for example, his carers had a sign in his own language welcoming him to their home, and played music from a radio station from his own country. Valuing young people’s cultural and ethnic identity was a form of child-centred practice. At the same time specialist foster carers helped young people to adapt to British culture, through explaining various aspects of the new environment they found themselves in.

8.6 Communication mechanisms

‘Sensitive communication’ was one of the primary ways that specialist foster carers both built trust, and capitalized on that trust to increase young people’s awareness of healthy and exploitative relationships.

18 Taking opportunities to discuss risk in everyday life. Specialist foster carers were in a unique position to slowly present a different perspective to young people of why they might need protection and care, in the context of day-to-day life in the home. This involved being sensitive to opportunities as they arose and respecting young people’s desire not to discuss things.

Every day, when the opportunity arises, Helena talks about self preservation, how Briony can protect herself. She doesn’t pull it out of the sky; it’s very, very casual, very light-hearted and very sensitive as well. She doesn’t push it but she’s got a way about her, Helena has (Barnardo’s fostering social worker).

On quite a few occasions this elicited ‘domestic disclosures’ in which young people felt safe enough to share things that had happened to them, in the context of everyday life. While Helena and Briony watched a documentary about BlackBerry messaging, Briony explained that she used to have a BlackBerry and shared her details with an older man who then got in touch with her.

He had a nice car and a nice flat and from her friend’s home she went off and spent the night with him. He gave her drugs, alcohol and slept with her, and in the morning he was a totally different person, he was really nasty, abusive and she said ‘I don’t want this to happen to anybody else’. So in little dribs and drabs, there’s lots of realisation on Briony’s part, and she must have felt safe to be able to disclose that (Barnardo’s fostering social worker).

Mohammed began asking his foster carer for bedtime stories, which she realized was his way of creating an opportunity to then tell her a story about his own life in the third person. She felt it was important to ‘Let them download if they need to, as painful as it may be for them or for you’.

Day-to-day experiences could also trigger memories and disclosure about traumatic events. Being picked up in a van triggered memories for Linh of being tied up and blindfolded in a lorry she was transported in. On another occasion her lip was accidentally cut when she visited the dentist, and she recalled being bitten by men trying to kiss her. By creating a trusting environment, specialist
foster carers were able to discuss these disclosures sensitively with young people, and they often contributed to a growing understanding of risk and abuse.

19 **Challenging oppressive assumptions.** In some placements specialist foster carers and project workers confidently challenged normative assumptions about gender and ethnicity that contributed to exploitative behaviour in young people’s own situations and in society more generally. Linh’s carer explained ‘I spend a lot of time teaching Linh to be equal with boys’ and Thien’s counsellor described the importance of reflecting on different expectations of ‘normal’ behaviour.

> She’s talked about how in her culture, you don’t answer back anybody who’s older than you or anybody who’s in a more senior position, so we had to talk about that, explore that, not to respect everybody who’s older than you. If you feel that the other person’s putting you at risk or giving you wrong information, then it’s okay to challenge them (Barnardo’s counsellor).

20 **Talking frankly and openly.** A number of young people valued honest, open and frank discussion about exploitation and risk, especially when it was contextualized by the caring mechanisms already described. This way of communicating demonstrated respect for young people’s capacity to engage with the reasons certain boundaries were in place.

> Hayley had opened up quite a lot to Tina and said, ‘I’m sick of people saying to us I’m at risk or I’m vulnerable. Tell us why? Why am I? You’re saying these people are not good for us but why are they not?’ (Barnardo’s fostering social worker).

> You have to be very blunt with her (Linh), and very open. She won’t take it all in. She was going around wandering around in the dark for a while and we had to tell her ‘Just ‘cause you’re here, doesn’t mean you’re safe, someone could still come and find you’ (Specialist foster carer for Linh).

However terms such as ‘sexual exploitation’ were not suitable for all young people. Shauna described her sessions with the project worker as ‘thinking about the right and the wrong paths, so that’s her understanding of it and that’s very appropriate for Shauna, you can’t go in all guns blazing because she’d just shut down’ (Specialist foster carer).

8.7 **Relational/family mechanisms**

The significance of positive relationships was an implicit, rather than explicit, part of the placement model. Many interviewees attributed change in young people’s lives to their inclusion in, and exposure to, a positive family environment.

21 **Being included in everyday family life.** Specialist foster carers described the positive impact for young people of becoming part of an immediate family and a network of wider family and friends. This involved being treated as ‘one of the family’, and feeling that you belonged. In a number of specialist foster homes it was evident in the physical affection shown to young people, in their inclusion in family activities and humour, and in the freedom they were given in relation to food and space within the home.

> Be as normal as possible, no airs and graces. We’re not quiet, we have a laugh and a joke with each other, and we share the household tasks to show them that. She’s got carte blanche to do what she wants to in the house. Other carers tell us the kids have to ask if they want something from the fridge. We don’t ask them to do that, we treat them as our family. Let them help themselves (Specialist foster carer for Clarisse).
We got a late Christmas card from one of my friends and they’d written inside, ‘So glad that you’re with us and part of our lives’. For Briony to hear that, it’s real life, it’s not just someone saying, ‘You’re one of us now’ – people really mean it (Specialist foster carer).

22 Modelling healthy relationships. Being in a positive family environment gave young people the opportunity to see first-hand what healthy, rather than exploitative or abusive relationships looked like on a day-to-day basis. Foster carers described this in terms of being role models, and equipping young people to recognise alternative possibilities for their relationships.

She flits between being a 14 year old with that kind of mentality and being what you would expect from a teenager but then every now and then, she’s such a child, like not in a negative way but she’ll come and sit on my lap. You’ve met her, she’s 5ft 10 but she fell asleep on my lap, all snuggled in, she’s like a little kid with her toys, with her Toy Story stuff. I just feel like she never really had the chance to be that little kid with an adult that will play along and be silly (Briony’s specialist foster carer).

One of the positives about it was they are a lovely family, very, very close-knit, lots of family celebrations, lots of closeness and I thought that would be good for Danielle to experience that because her family has been so fragmented (LA social worker).

In another example, Linh’s carers shared the household tasks, which elicited lots of reflection on gender roles and culture, which they believed were helpful for reinforcing messages about Linh’s equality and rights compared to young men.

23 Facilitating safe friendships. Specialist foster carers across most placements actively looked for ways to enable young people to spend time socializing safely, especially where some of their relationships were seen as risky. To this end they often encouraged young people who had strict curfews to invite friends to stay the night (see section 7.7).

8.8 Activity mechanisms

In a number of placements specialist foster carers went to some lengths to provide opportunities for young people to do various positive activities. The mechanisms these activities triggered differed depending on the phase of the placement, but nearly all were about ‘Offering viable alternative activity’.

24 Offering activities to promote positive self-esteem. This involved finding out about young people’s interests and providing opportunities for them to take up a new hobby, learn a new skill, and/or achieve in school. It was most evident in stable placements where such activity became part of weekly routine. Specialist foster carers had a key role in encouraging and facilitating young people’s achievements, and in supporting them to gain independence and new skills.

She’s maintained a number of hobbies like the horse riding, being really positive, I think that’s her escape. Some people have different things but that is her place, that she can just be herself (Barnardo’s project worker for Shauna).

He does a lot of Art and he’s the only pupil in the school who can use the printer. They’ve got a university lecturer going in every Wednesday and he asked that Xuan would be his assistant, and he’s taught Xuan how to use it because of how observant he is. He’s great at it, and that’s something we’ve been able to affirm (Specialist foster carer).
25 Occupying spare time in the early days of the placement. The early days of a specialist foster placement were recognised to be important in setting a pattern of behaviour. If young people were placed out-of-area they could also be waiting at home for an education placement. Specialist foster carers therefore described ‘front-loading’ a placement with different kinds of activity, at times when they felt young people might get bored and otherwise engage in risky behaviour. These activities had to be attractive enough to engage young people, so often involved treats such as getting hair and nails done, joining a gym, visiting new places, or going out for meals.

We didn’t give him time for the dust to settle under his feet. Two days he was here he was enrolled in college (Specialist foster carer for Mohammed).

There was a time when Molly thought Mohammed might do a runner and she kept him with her. She took him down to the daughter’s flat who was moving out and kept him busy, like helping her sort the flat out and going shopping and going for lunch, and gave him an alternative. (Barnardo’s fostering social worker).

The female carer would take Jessica out to get her nails done, or to go to Zumba, anything she wanted to do to try and engage her, they would do. They tried to find activities for Jessica at times when she typically went missing from home in the hope that this would act as a deterrent (Barnardo’s fostering social worker).

Helena has tried to make the placement as fun, as satisfying as possible. She hasn’t got her own children but she has family and friends so they did lots of outings. She got Briony involved in keep fit classes and she really pushed for, we all pushed for the education to start soon (Barnardo’s fostering social worker).

26 Relieving the pressure and intensity of a placement. Where safeguarding measures were particularly intense, there was a need for both specialist foster carers and young people to experience some freedom from the home environment. For foster carers, respite care was important in giving them a break, while for a number of young people education provided a release valve for some of the pressure of being closely monitored in a family environment. Clarisse explained in her second interview, that she was feeling less trapped, than she had during the first few months of her placement.

Evaluator: What has helped you feel less trapped?

Clarisse: I go out sometimes and I see my friends. I visit, and get out and move. Then I feel more contented, more happy. Now I got to school, and I like that. It takes my mind away, I can see others, and talk to others and just watch them talk.

A relationship with a Barnardo’s project worker could also trigger this mechanism by the worker confidentially absorbing some of the young person’s frustrations with their lack of freedom.

The counsellor can act as a buffer between the child and foster placement. There have been ripples in that placement and I’ve talked to Thien about looking at things from the other person’s perspective, sort of dealing and smoothing those ripples. I think it’s very important because otherwise where else can she go to have that moan? I know that specialist placements are like gold dust. I’ve done this in my work before, where it’s better to try and sort the issues out in that placement rather than keep the child moving to different placements (Barnardo’s counsellor).

27 Building relationship through doing things together. As well as occupying time, shared activity was a key mechanism of building a positive relationship with specialist foster carers. Carers would involve young people in their lives and activities, ask them for their help with tasks, and find excuses
to spend time with them.

*Rhiannon is going on a holiday to Cyprus so Anne is breaking her shopping down, buying a bikini one week and shoes the next so there’s a reason to have some 1-1 time every week (Barnardo’s fostering social worker).*

### 8.9 Advocacy mechanisms

Finally, a number of specialist foster carers and project workers played a key role in ‘Representing the young person’ by advocating for services on the young person’s behalf, and making sure they had access to the support they needed.

#### 28 Advocating and gate-keeping.

Specialist foster carers advocated for access to school or college places, changes of LA social workers, interpreters, and made sure that other professionals followed through on actions they were meant to be taking on young people’s behalf.

*No college would take me on ‘cause when they get your school report and they put them all together they’re like ‘Aint taking him’. Javad and Molly went to college meetings, and said ‘Oh yeah, he deserves a second chance’ and stuff like that (Mohammed).*

*When I first took him (Xuan) down there I said, ‘We really ought to start looking at trying to get him some sort of college placement because he’s Year 11. We’re never going to get him into a school’ but she did (specialist carer). Very good. She followed the advice and went to the Children’s Legal Centre to get the best legal representatives she could for him and they directed her to a proper legal rep, because if you mess up on that, on his immigration, the rest of it is just a waste of time really (LA social worker).*

Some project workers also acted as advocates for young people, particularly in multi-agency teams. Rhiannon’s project worker, for example, was concerned that strategy meetings had stopped for Rhiannon, that there was an element of resignation about her risks, and that her wider needs were not being properly met. As a result, she escalated her concerns within Barnardo’s, a report was written, and she and a manager attended a meeting with the LA to explain their concerns. This resulted in various professionals being tasked with fresh actions to address Rhiannon’s needs.

This mechanism also entailed an element of ‘gate-keeping’ and liaising with services to manage the meetings and offers of support young people were expected to respond to. Rhiannon’s carer Anne explained that because of Rhiannon’s vulnerabilities, *‘They’re always trying to throw people at us. The missing from home people, the psychologists, everyone wants to help’.* However Anne felt that many of these services were *‘all talk and no action’*, and argued that it was better for Rhiannon to be supported by the two professionals she already trusted.

For trafficked young people who could feel overwhelmed by these various services and processes, gate-keeping was a particularly important mechanism of support. It involved explaining what was going to happen, who different professionals were, and de-briefing with young people after meetings as well.
Chapter 9: Contexts of Change

As chapter 7 showed, not all placements achieved positive outcomes. Their success or failure was often the result of various contextual factors that could hinder or enable the support Barnardo’s were attempting to provide. These key contexts are crucial to understand if specialist foster care is to be effectively used as an intervention in the future.

9.1 Summary of most significant contexts

The following is a summary of the most significant contextual factors affecting the efficacy of the specialist placements. For a full list of all of the most significant contexts that were coded from interviews and other data, see appendix 5.

1. Specialist foster carer capacity to provide appropriate care to high risk young people
2. Level of understanding of child sexual exploitation (CSE)/trafficking within children’s services, education, police and other relevant agencies
3. Length of placement/commissioned support for young person
4. Location of placement relative to risky areas/people
5. Young person’s willingness and capacity to engage in a placement
6. Young person’s strength of attachment to friends/family/communities that present a risk

9.2 Specialist foster carer capacity to provide appropriate care to high risk young people

Interviewees were clear that not all foster carers would be able to provide the kind of care that sexually exploited and trafficked young people need. There were five areas that were identified as being relevant to the role of a specialist carer: personality, support, experience, training and availability.

1. Parenting personality
   The most important quality of those who provided successful placements was their personality and approach to parenting. Interview data suggested that this approach could be summarised in four Cs: confidence, commitment, compassion, and the ability to cope. In the placement that lasted only four days, the carers lacked confidence and were unable to cope with their fears about the young person’s behaviour. Consequently they were unable to create clear boundaries. All 13 placements suggested that any carer who lacked commitment and compassion would be unable to provide the level of intensive support that these young people required.

2. Level of support
   The amount, and quality, of support that carers received was perceived to be very important to their capacity to cope with the potential challenges of a specialist placement. Barnardo’s fostering social workers described needing to offer intensive support in the early stages of a placement when safety

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measures were being negotiated, and carers often needed quick answers and advice when they were unsure of how to manage certain situations. The lower caseloads of Barnardo’s staff relative to local authority (LA) fostering teams are also therefore likely to be a relevant contextual factor.

3 Experience
Experience appeared to be important, but not necessary or sufficient to enable someone to provide effective care in such placements. All specialist foster carers but two had previous experience fostering, raising, or working with teenagers when they took on a specialist placement. However for these two carers, lack of experience was not necessarily responsible for the outcomes of their placements. One broke down after days, while the other had achieved extremely good outcomes for the young woman placed. Neither was it necessary to have worked professionally with vulnerable young people to achieve positive outcomes, since only three carers had previously had such a role. 

4 Training
As described in section 7.3, carers felt that the training had been helpful in preparing them to take on a specialist placement, or in expanding their knowledge if they already had a young person placed with them. The two placements where carers had not attended the two-day training course broke down fairly quickly, and in both, questions were raised about the carers’ suitability for the role. This suggests that training is a useful part of the assessment process, as well as preparing carers to take a specialist placement.

5 Availability
Finally it was important that at least one carer was available full-time, particularly in the early days of a placement, when the risk of a young person going missing was higher. Carers described their role as ‘intensive’, and suggested that it required both energy and availability. In Jessica’s placement the carers both worked full-time and Jessica began to refuse to go to school. Other carers had to be found to look after her during the day, and this was identified as one of the contributing factors to the placement breaking down.

9.3 Level of understanding of sexual exploitation/trafficking within children’s services, education, police and other relevant agencies

Levels of professional understanding of CSE and trafficking clearly contributed to the success or failure of a placement. Awareness of the issues is linked directly to perception of risk, and it was evident that a lack of agreement about risk was problematic in some placements.

For example, there were a number of indicators that Jessica was at risk of sexual exploitation, and she was initially placed on the local CSE register. However at her Looked After Child (LAC) review a week later it was decided that there was not enough evidence to keep her on a CSE plan. Had she remained on the register she would have shown up as a ‘young woman at risk’ if found by the police when missing. As it happened she was recorded as a frequent absconder, and was treated as a time-waster by the police, who also accused the foster carers of using them as a babysitting service. Her placement

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32 These roles were: personal advisor for a leaving care team, drug and alcohol counsellor, and manager of a safe house for trafficked young women.
broke down after a month during which Jessica had been missing for seven nights.

In contrast, when agencies and services shared some understanding of exploitation, they were able to establish a common approach to safeguarding, and offer a consistently protective environment to young people as a result. For example, Shauna’s placement existed within a multi-agency team where there was a positive understanding of her risk of CSE. The school became a key safeguarding partner and worked with the specialist foster carer to monitor Shauna’s access to Facebook when she was with friends at school. Likewise the LA social worker’s awareness of CSE led to her commissioning further 1-1 sessions from Barnardo’s to ensure that Shauna would be able to put what she had learned into practice, and that her reduced risk would be sustained.

Coming to a shared understanding of risk also required good information sharing prior to a placement starting, or as early on as possible. In a number of placements project workers and foster carers were not fully aware of aspects of a young person’s case that were relevant to their need for a specialist placement. For Danielle, this directly contributed to her placement ending after three months because her specialist foster carers had not been told about some of the challenging behaviour they would be having to manage.

Interviews revealed various other contextual factors related to poor shared understanding that could undermine a specialist placement. These included the following.

- High turnover of LA social workers, which increased the chances a young person would hear inconsistent messages about their level of risk
- Young people being voluntarily accommodated under section 20 of the Children’s Act (1989) and therefore being more able to exploit differences of opinion between their parents and specialist foster carers about their levels of risk
- Emergency rather than planned placements, which made it harder to agree a shared approach from the outset

### 9.4 Length of placement/commissioned support for young person

The evaluation clearly demonstrated a positive relationship between the length of time a young person was in a specialist placement, and their safety and well-being. This reflected the time it takes to build a trusting relationship with a young person who may have good reasons to be mistrustful of adults. There was overwhelming consensus among interviewees that short term interventions were generally not appropriate for such young people. While some interventions (such as placement in a secure unit) could achieve short-term safety, many interviewees maintained that it was positive relationships through which long-term outcomes were achieved. The Barnardo’s fostering social worker for Jessica’s placement argued that secure accommodation “…would have made her safer but she would never have got to a place where she could have talked about what was going on”.

CSE project workers described working with young people for months if not longer before they had built sufficient trust to a) discuss sexual exploitation explicitly and b) achieve change in young people’s awareness and behaviour. For example, Mohammed’s project worker had been working with him for
over a year when Mohammed told him that it was only in recent months he had realised he had been groomed and abused.

_He said to me, up until that point he still loved him (the perpetrator), so I think it’s taken that length of time and not just from me, but all of the support that he gets from everybody, for him to realise that actually it was abusive (Barnardo’s project worker)._ 

Project workers acknowledged that where young people were ready to engage with the idea of sexual exploitation, they were able to achieve positive outcomes through a limited number of weekly 1-1 sessions. However this was often not the case, and so interviewees argued that placements were likely to need to continue for at least a year if they were to achieve the trust and openness necessary to address the reasons young people were vulnerable to being exploited.

This suggests that openness and flexibility in commissioning and purchasing support services is an enabling context for supporting sexually exploited and/or trafficked young people, and that short and fixed-term support packages will not always be suitable. Rhiannon’s case provides a good example here. When her missing patterns worsened, Rhiannon was offered a six-week intervention from the missing team within the LA, but she was missing so often it was very likely she would only be seen once in that period. In contrast, her CSE project worker persisted over many months, including long stretches when Rhiannon would not respond to text messages and phone calls.

_It’s like ‘Oh she’s not met with the project worker, oh’ and we’re like, ‘But that doesn’t matter, because she will again in a few weeks’. The project worker has to be there all the time in the background, not disappearing, texting Rhiannon even though she doesn’t get a response and offering to meet her even though she doesn’t turn up. And that’s what it about, isn’t it? Chipping away slowly. It doesn’t work like that – they want quicker results really (Barnardo’s fostering social worker)._ 

### 9.5 Location of placement relative to risky areas/people

In a number of placements, the location of the specialist foster home was a key context in enabling or undermining effective support. It was also closely related to the strength of a young person’s attachment to family, friends or adults who posed a risk to them (section 9.7), and their willingness to ‘buy in’ to their placement (section 9.6). For young people with strong attachments to, and placed not too far from, ‘risky’ areas, there was a strong chance they would be regularly missing. This was true for Jessica, Rhiannon, Ashleigh, Danielle, and Emily to different degrees.

_In that area where she lived, there were too many provocations from her friends, from the group of friends she was with, the locality she knew too well. So the geographical aspect of it was a problem, in terms of her risk factors (Barnardo’s fostering social worker for Danielle’s placement)._ 

Being placed ‘out of borough’ did not necessarily mitigate those risks. The Barnardo’s fostering social worker for Jessica’s placement explained that such attempts to disrupt contact with perpetrators did not always work: _‘In this case and many more the young person was so drawn to a particular area/ people that she continued to get there by any means necessary’. However for others who were placed at much greater distance, the barriers to returning home were often prohibitive. For example Briony admitted that because she didn’t know anyone in her new area she had no friends to go missing with,
and knew that it would be very difficult to get back home without any money. Hayley was placed on a farm in a rural village, at quite some distance from her previous home. It appeared that her choice to engage positively with the placement meant that this remote location made her feel safe, rather than triggering a felt need to run back.

While concern has been raised about young people placed out of borough being ‘out of sight and out of mind’, the evaluation suggests that it is particular experiences of being far from home, rather than the distance per se, that can be positive for some young people and harmful for others. At the time of writing, the Department for Education was consulting on a responsibility for LAs to only place a young person in care far from their home if that decision is made by a senior official who is satisfied that the placement is in the young person’s best interest and will meet their needs (DfE, 2012). The evaluation would support the view that a decision to place a young person out of borough should be taken in full considerations of their individual needs and contexts.

## 9.6 Young person’s willingness and capacity to engage in a placement

It should be no surprise that a young person’s willingness to stay in a specialist foster placement and get to know new carers will be one of the most significant contexts affecting the success of that placement. Both Briony and Rhiannon were very high-risk cases, going missing regularly, and causing huge concern for professionals. However Rhiannon consistently told her carers and LA social worker that she was not going to change and she would continue to go missing. In contrast Briony explained ‘Yeah, I think I did want to change, I didn’t like the life I was living’. The Barnardo’s fostering social worker for Briony’s placement suggested that underlying this positive engagement was Briony’s desire for a close 1-1 relationship with a foster carer like Helena.

> Helena feels that Briony values that kindness and I think that’s what she missed out from her mother. That’s what we’re gauging now, that she missed out on that attention and that TLC and unconditional love. She missed out on that so she’s really, she’s thirsty for it and she’s really taking it all in (Barnardo’s fostering social worker).

In contrast Rhiannon struggled to accept and adapt to a family environment.

> I know Anne and John very much include her and see her as part of the family and one of their daughters but Rhiannon can’t and she won’t allow herself to accept that. I think it’s too raw for her. It reminds her constantly of what she’s not got, I think (Barnardo’s project worker).

This was a recurring theme within contexts that were supportive, or not, of the specialist placements. Both Emily and Clarisse struggled to some extent within a specialist foster care environment. Clarisse wanted to live independently, and Emily explained that living with one female carer ‘felt like they were trying to make us like, fit in, like it’s my family and it’s not’. In contrast Linh’s carers remarked that on arrival Linh had explained to them, ‘I want a family, I haven’t had one, been on my own a long time, I need a Mum and Dad’.
9.7 Young person’s strength of attachment to friends/family/communities that present a risk

A young person’s attachment to family, friends and communities that were deemed risky could be particularly challenging in light of the location of their specialist foster home, and their willingness to engage with a placement more generally. This context was only applicable to young people at risk of sexual exploitation within the evaluation. Moving between care placements can be very destabilising, and for some young people the people and places they felt anchored to were considered to be problematic by professionals in their lives.

That’s what she knows; going to that area and getting involved with those people is what she’s comfortable with, whether it’s right or wrong. That’s what her life has been and that’s where she gravitates to (Barnardo’s fostering social worker for Shauna).

What Danielle was clearly saying to me is that she felt like she didn’t have a sense of belonging anywhere. She felt she belonged in (home town), and she struggled with being out of borough (LA social worker).

Such strong attachments presented a challenge to specialist foster carers, especially when young people were placed close enough to go back those areas when they went missing. As discussed in case study 5, the Barnardo’s team supporting Rhiannon’s placement felt that her gravitation to a particular area of the city was strongly associated with the death of her parents, and a need to feel connected to the culture of her family and the community she grew up in. Although only ten minutes away from her foster home, the culture of this community was significantly different and the fostering social worker remarked that ‘She does feel a bit like a fish out of water probably in some ways. So to her, she might as well be placed in a different city’. Her description of this attachment suggested it was going to be a deep challenge for any care placement to compete for Rhiannon’s attention.

That is where she’s from, it’s who she is. And as I say she’s lost both her parents. So the people she goes back to in those areas are – they’re just her – they’re everything about her. And she’s 16 years old – you can’t just cut it off (Barnardo’s fostering social worker).

9.8 Context, mechanism, outcome patterns

In Table 12 a summary is provided of the key contexts that enabled the transformative mechanisms described in chapter 8. It includes the contextual factors related to a young person’s needs and ‘supportive contexts’. In most cases the absence or opposite of these supportive contexts therefore made it much less likely this mechanism of change would be present and effective.33 This analysis suggests that combinations of certain contexts are likely to be conducive to particular mechanisms, and then produce certain outcomes.34 As such each of the rows in Table 12 can be seen as a crude theory

33 Some contexts are included that have not been referred to in this chapter. For a full list of all the most significant contexts affecting the specialist placements, see appendix 5.

34 A challenge in this approach is the differentiation between mechanisms and contexts. Certainly some outcomes (a trusting relationship with a foster carer) are clearly also supportive contexts for other mechanisms (e.g. talking about risk) and then outcomes (improved awareness of exploitative relationships). Decisions about whether to code a piece of data as a context or mechanism were directed by interviewees’ opinions on how directly something caused change in the placement, and by reflections on whether data described people’s active responses within the placement (mechanisms), rather than wider, and pre-existing circumstances (contexts).
of change. For example:

<table>
<thead>
<tr>
<th>Contexts</th>
<th>Mechanism</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young person poor previous experience of care</td>
<td>Building relationship through doing things together</td>
<td>Positive relationship built with carer(s)</td>
</tr>
<tr>
<td>Young person complex emotional needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carer experienced with young people</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carer confidence, commitment, compassion, and ability to cope</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Chapter 11 concludes by presenting some key ‘theories of change’ that are based on these context, mechanism, outcome patterns.
Table 12: Context, mechanism and outcome patterns

<table>
<thead>
<tr>
<th>Background context of young person</th>
<th>Type of mechanism</th>
<th>=  Outcomes</th>
<th>+ Supportive Contexts</th>
<th>+ Mechanisms of change</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Caring mechanisms</strong></td>
<td></td>
<td>Positive relationship built with care(s)</td>
<td>Avoiding escalation</td>
<td>Carer trained and understands CSE/trafficking, Carer experienced with young people, Carer availability, LA social worker capacity to provide consistent responsive support, Carer confidence, commitment, compassion, and ability to cope</td>
</tr>
<tr>
<td><strong>Safeguarding mechanisms</strong></td>
<td></td>
<td>Reduced risk of going missing, Stable, safe accommodation</td>
<td>Consistently applying boundaries, Disrupting exploitation, Making it harder to run away, Monitoring the young person to manage risk, Ongoing vigilance</td>
<td>Carer trained and understands CSE/trafficking, Carer experienced with young people, Carer availability/1-1 environment, High level of support for carer, Professionals understand CSE/trafficking, Shared view/approach/assessment of risk, Information sharing, Appropriate local safeguarding processes, Location of placement relative to exploitative others</td>
</tr>
<tr>
<td><strong>High risk CSE, High risk of going missing</strong></td>
<td><strong>Caring mechanisms</strong></td>
<td>Positive relationship built with carer(s)</td>
<td>Avoiding escalation</td>
<td>Carer trained and understands CSE/trafficking, Carer experienced with young people, Carer availability, LA social worker capacity to provide consistent responsive support, Carer confidence, commitment, compassion, and ability to cope</td>
</tr>
<tr>
<td><strong>Caring mechanisms</strong></td>
<td></td>
<td>Reduced risk of going missing, Stable, safe accommodation</td>
<td>Consistently applying boundaries, Disrupting exploitation, Making it harder to run away, Monitoring the young person to manage risk, Ongoing vigilance</td>
<td>Carer trained and understands CSE/trafficking, Carer experienced with young people, Carer availability/1-1 environment, High level of support for carer, Professionals understand CSE/trafficking, Shared view/approach/assessment of risk, Information sharing, Appropriate local safeguarding processes, Location of placement relative to exploitative others</td>
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<td></td>
<td>Reduced risk of going missing, Stable, safe accommodation</td>
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<td></td>
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<td></td>
<td>Reduced risk of going missing, Stable, safe accommodation</td>
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<tr>
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<td></td>
<td>Reduced risk of going missing, Stable, safe accommodation</td>
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<td>Carer trained and understands CSE/trafficking, Carer experienced with young people, Carer availability/1-1 environment, High level of support for carer, Professionals understand CSE/trafficking, Shared view/approach/assessment of risk, Information sharing, Appropriate local safeguarding processes, Location of placement relative to exploitative others</td>
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<td></td>
<td>Reduced risk of going missing, Stable, safe accommodation</td>
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</tr>
<tr>
<td>Background context of young person</td>
<td>Type of mechanism</td>
<td>Child-centred mechanisms</td>
<td>Communication mechanisms</td>
<td>Relational/family mechanisms</td>
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<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Therapeutic outreach and engagement</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td></td>
<td>Making sense of the young person's world</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Positive relationship built with project worker/carer(s)</td>
</tr>
<tr>
<td></td>
<td>Persistence reaching out to the young person</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td></td>
<td>Giving the young person control</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Positive relationship built with project worker/carer(s)</td>
</tr>
<tr>
<td></td>
<td>Valuing cultural identities</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
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<tr>
<td></td>
<td>Cater trained and understands CSE/trafficking</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td></td>
<td>Project worker capacity to respond quickly (local)</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Positive relationship built with project worker/carer(s)</td>
</tr>
<tr>
<td></td>
<td>Project worker background and experience time to build trusting relationship</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Trafficked young person</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Positive relationship built with project worker/carer(s)</td>
</tr>
<tr>
<td></td>
<td>Complex emotional needs</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
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<tr>
<td></td>
<td>Trafficked young person</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td></td>
<td>Complex emotional needs</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Positive relationship built with project worker/carer(s)</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Little or no English</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Culturally isolated</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Low risk of CSE/trafficking</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Positive relationship built with project worker/carer(s)</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>High risk of CSE/trafficking</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Positive relationship built with project worker/carer(s)</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Poor previous experience of care</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Complex emotional needs</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Desired for independence and freedom</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Does not share professional view of risk-taking behaviour</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Does not share professional view of risk-taking behaviour</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>High risk of CSE/trafficking</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Poor previous experience of care</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>High risk of CSE/trafficking</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Complex emotional needs</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Desired for family/non-family placement</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>No accessible family environment</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Poor previous experience of care</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Complex emotional needs</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>High risk CSE/contact with exploiters</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Friends and family present risk to young person</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>Strong attachment to risky area/culture</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>+ Supportive Contexts</td>
<td>+ Mechanisms of change</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
<td>+ Outcomes</td>
</tr>
<tr>
<td></td>
<td>No accessible family</td>
<td>Positive relationship built with project worker/carer(s)</td>
<td>Increased awareness of healthy/exploitative relationships</td>
<td>Improved well-being factors in young person's life</td>
</tr>
<tr>
<td>Background context of young person</td>
<td>Activity mechanisms</td>
<td>Advocacy mechanisms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>---------------------</td>
<td>---------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Complex emotional needs</td>
<td>• Social worker: poor capacity to provide consistent support</td>
<td>• No availability of post-18 support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• High risk CSE/contact with exploitors</td>
<td>• High risk of going missing</td>
<td>• Complex emotional needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Little or no English</td>
<td>• Does not share professional view of risk-taking behaviour/safety</td>
<td>• Poor previous experience of care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Complex emotional needs</td>
<td>• Does not share professional view of risk-taking behaviour/safety</td>
<td>• Complex emotional needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• High risk of going missing</td>
<td>• Does not share professional view of risk-taking behaviour/safety</td>
<td>• Complex emotional needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Disengaged from education</td>
<td>• Does not share professional view of risk-taking behaviour/safety</td>
<td>• Complex emotional needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Friend availability</td>
<td>• Does not share professional view of risk-taking behaviour/safety</td>
<td>• Complex emotional needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Carer availability</td>
<td>• High risk of going missing</td>
<td>• Complex emotional needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Appropriate educational placement available</td>
<td>• High risk of going missing</td>
<td>• Complex emotional needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Reducing the pressure and intensity of a placement</td>
<td>• Complex emotional needs</td>
<td>• Complex emotional needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Occupying time in the early days of the placement</td>
<td>• Complex emotional needs</td>
<td>• Complex emotional needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Relieving the pressure and intensity of a placement</td>
<td>• Complex emotional needs</td>
<td>• Complex emotional needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Billowing the pressure and intensity of a placement</td>
<td>• Complex emotional needs</td>
<td>• Complex emotional needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Positive relationship built with carer(s)</td>
<td>• Complex emotional needs</td>
<td>• Complex emotional needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Improved well-being</td>
<td>• Complex emotional needs</td>
<td>• Complex emotional needs</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>= Mechanisms of change</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Increased protective factors in young person’s life</td>
<td>• Offering activities to promote positive self-esteem</td>
</tr>
<tr>
<td>• Reduced risk of going missing</td>
<td>• Occupying time in the early days of the placement</td>
</tr>
<tr>
<td>• Reduced risk of going missing</td>
<td>• Relieving the pressure and intensity of a placement</td>
</tr>
<tr>
<td>• Positive relationship built with carer(s)</td>
<td>• Carer availability</td>
</tr>
<tr>
<td>• Improved well-being</td>
<td>• Appropriate educational placement available</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Type of mechanism</th>
<th>+ Supportive Contexts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activity mechanisms</td>
<td>+ Mechanisms of change</td>
</tr>
<tr>
<td>Advocacy mechanisms</td>
<td>+ Supportive Contexts</td>
</tr>
</tbody>
</table>

- Activity mechanisms:
  - Increased protective factors in young person’s life
  - Reducing the pressure and intensity of a placement
  - Positive relationship built with carer(s)
  - Improved well-being

- Advocacy mechanisms:
  - Social worker: poor capacity to provide consistent support
  - No availability of post-18 support

- Supportive Contexts:
  - Increased protective factors in young person’s life
  - Positive relationship built with carer(s)
  - Improved well-being
Chapter 10: Cost Effectiveness of the Specialist Placements

10.1 Summary

A key rationale for the specialist placement aspect of the Safe Accommodation Project was that, without an intensive intervention, victims of child sexual exploitation (CSE) or trafficking would often end up generating large costs to The State as a result of risky behaviour and poor outcomes. In particular, lack of engagement with education, contact with the criminal justice system, incidences of going missing and multiple placement breakdowns, are all factors which can potentially generate substantial costs in both the short and longer term. This chapter aims to quantify the potential savings arising from avoiding those negative outcomes, as well as examining the potential cost effectiveness of specialist placements in delivering these savings.

The evidence presented in this chapter demonstrates that the potential savings arising from improving the outcomes of the highest risk young people are large, and it would only take a small number of those with the highest risk to see an improvement in their outcomes in order for the overall costs associated with specialist placements to be justified. There is tentative evidence to suggest that the specialist placement aspect of the Safe Accommodation Project will break even in terms of generating returns to The State. However, there are also a number of important caveats to keep in mind. The most important of these is that the small number of placements undertaken means it is not possible to be fully confident of how outcomes would have changed for these young people if they had not been selected to be part of the project. A key selection criterion for the project was the likelihood of future poor outcomes. However, quantifying the likely future path of outcomes, and therefore the potential improvements as a result of the intervention, has not been possible. Secondly, there were four placements that broke down relatively quickly, generating costs without any clear improvement in outcomes. In these cases specialist placements are unlikely to represent value for money. This reinforces findings regarding the appropriate targeting of placements (see chapter 7 for further discussion of outcomes).

10.2 Methodology

Problems associated with assessing the cost-effectiveness of specialist placements

Lack of a clear counterfactual

A first step for economic cost-effectiveness analysis of any intervention is being able to quantify the impact of the intervention on key outcomes. This requires a clear counterfactual to demonstrate what would have happened in the absence of a specialist placement. It is only then that we can be confident that the outcomes observed from the project are over and above what would have occurred without an intervention. However, ascertaining a counterfactual robust enough to conduct statistical analysis for this project was not possible for three main reasons.
The total number of placements undertaken was very low, meaning that even if we could establish a suitable counterfactual, it is unlikely we could be confident that observed results would be statistically significant.

Young people were referred into the project on a self-selecting basis, meaning that the risk profile of those referred into the project is likely to be fundamentally different to those not referred in. This adds to the difficulty of establishing a counterfactual, as a direct comparison of outcomes between project participants and CSE/trafficking victims not receiving a specialist placement is not possible.35

The small sample is again subdivided into trafficked and CSE referrals, each of which is likely to have a different underlying risk profile.

The problems associated with a lack of clear counterfactual are particularly evident when examining cases involving trafficked young people referred into a specialist placement on the basis of potential future risk, not pre-existing risk. Based on the outcomes data collected these cases would often exhibit signs of good outcomes initially, and so a straightforward before and after comparison of outcomes would not demonstrate any benefits. However, if their underlying risk of poor outcomes would have deteriorated in the absence of a specialist placement (e.g. being re-trafficked), then benefits would clearly exist.

Length of placements

A further complication was caused by the fact that placements were not of a uniform duration. Eight of the 13 placements were only in place for four months or less at the end of the project period. This includes four placements which broke down within three months and a further four placements which had only been in place for less than four months at the end of the project. Making judgments on outcomes based on relatively short periods in specialist placements is problematic. Where placements have broken down it is assumed that there had been no change in underlying risk factors, unless there was a reason to believe otherwise, for example where local authority (LA) social workers had stated that outcomes had definitely improved as a result of the placement. Where placements were only in place for a short length of time we have examined outcomes both prior to the placement starting, and at the end of the project. This does, however, ignore the fact that outcomes may change as the duration of placements increases.

Breakeven analysis

In the absence of quantifiable information regarding the impact of specialist placements, breakeven analysis was employed to understand the potential cost savings that could be attributed to placements. This approach circumnavigates the lack of clear information on project outcomes by attempting to define what changes in outcomes would be needed in order for the project to justify its cost. This is then supplemented with an examination of how outcomes changed from the project baseline to help give some context. However, it should be noted that this approach cannot definitively prove cost effectiveness.

The key steps to the breakeven approach are as follows.

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35 There are a number of methodologies which can overcome this problem, for example in work conducted for Barnardo’s by Pro Bono Economics where an instrumental variable approach was used to overcome selection issues. However due to the small sample of this study this approach was not appropriate.
The financial value of all costs and benefits were converted to end-2012 prices using the Retail Price Index to allow for appropriate comparison. Costs and benefits which occur beyond the first year of the project were discounted at a rate of 3.5 per cent, in line with the standard discount rate outlined in the Treasury Green Book.\(^{36}\)

**Outcomes considered as part of breakeven analysis**

Early in the evaluation the range of outcome measures captured for the evaluation was narrowed down to four key indicators which may generate savings to The State. In keeping with previous costs work associated with CSE we have adopted an approach focused on savings to The State rather than savings to the individual (Thwaites et al., 2011).

The four outcome measures chosen to assess potential savings were as follows.

- **Missing episodes**: reducing missing episodes that require police contact is expected to generate savings predominantly accruing to the police service
- **Education**: reducing disengagement and truancy from education is expected to generate savings accruing mainly to the tax and benefit system, as well as some other smaller savings to social services
- **Youth justice**: reducing contact with the youth justice system will generate savings accruing to youth justice agencies including the police, the court service, offender management teams and prisons
- **Placement stability**: more stable care pathways that break down less frequently and are less likely to result in higher cost placements are likely to generate savings which accrue to social services

There are potentially a wide range of other outcomes that may arise which could have value either to The State, to the individual, or to wider society. For example increasing the wellbeing of young people receiving a specialist placement is a key outcome that would have an implicit value. However, in keeping with previous costs work conducted for Barnardo’s the decision was taken to limit the analysis to benefits accruing to The State, as these outcomes are easier to collect and quantify.

Categorising outcomes after the intervention was complicated by the fact that some placements broke down, and collecting information on their outcomes after breakdown was less reliable. For the purposes of the analysis, outcomes for these placements were assumed to remain unchanged from their baseline outcomes.

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36 Discounting adjusts costs and benefits that occur in a future time period to take account of the fact that generally people prefer to receive goods and services immediately, rather than in the future, meaning that the economic value of those costs and benefits that occur in the future is lower. For further information on discounting see HM Treasury (2003).
10.3 Missing episodes

Missing episodes: indicator information and valuing outcomes

Table 13 summarises how data on missing episodes was categorised, and the monetary values attached to each category. Establishing progress on missing episodes as a result of the project was complicated by the fact that LA social workers often had limited knowledge of the pattern of missing episodes prior to taking up a specialist placement. Consequently, LA social workers were asked to broadly assess a young person’s pattern of missing episodes prior to the specialist placement in one of four categories (never/very rarely/occasionally/frequently missing), and were given an indication of the types of patterns that these could relate to.

During the course of the specialist placements more robust information was collected about the frequency of missing episodes. Given the varying lengths of the specialist placements it was necessary to convert the information collected into something that was broadly comparable with the baseline data. There are two important qualifications to flag regarding this process.

Firstly, LA social workers’ lack of knowledge of exact numbers of previous missing episodes coupled with the generally qualitative approach taken by the evaluation means that the categorisation of missing episodes at the baseline is broad and open to some interpretation. This created difficulty in matching it to the more quantitative data collected during the project. For example, it is unclear whether LA social workers would have categorised someone who went missing once a month on average as ‘frequently’ or ‘occasionally’ missing at the baseline interview. As a result judgments had to be made in order to match baseline with outcome data. The decision was taken to class cases with between two and five missing episodes per six month period in the ‘occasionally missing’ category and any cases that averaged more than one missing episode per month in the ‘frequently missing’ category. The clear problem with this approach is that an LA social worker may have categorised someone with one missing episode per month as ‘occasionally missing’ at baseline but they would subsequently be classed as ‘frequently missing’ during the project. This would then imply additional costs where none may exist. In the absence of more detailed baseline information this approach was nevertheless judged to be the best compromise.

Secondly, because of the qualitative nature of data collection at the baseline, and the lack of knowledge of LA social workers with regard to previous missing episodes, it is not possible to be entirely confident that missing episodes were defined in the same way at the baseline as during the course of the project. Quantitative data on missing episodes once a specialist placement had been established focused on episodes that resulted in police contact, in order to align with evidence which shows the high cost of missing episodes which result in police activity. Whilst in theory safeguarding procedures should mean that missing episodes at the baseline should have resulted in police contact, due to the lack of complete information it is not possible to be confident that in all cases they did. If the missing episodes estimated by LA social workers prior to the baseline did not result in police contact, then any cost savings estimated from reducing missing episodes through specialist placements may be overstated.
Table 13: Categorisation and valuation of missing incidences indicator

<table>
<thead>
<tr>
<th>Missing episode category</th>
<th>Definition used at baseline interview with LA social worker</th>
<th>Definition taken from project outcomes data</th>
<th>Definition used for assessing costs</th>
<th>Estimated monetary value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>They have not been missing in the previous 6 months</td>
<td>They have had no missing episodes</td>
<td>No missing episodes</td>
<td>£0</td>
</tr>
<tr>
<td>Very Rarely</td>
<td>They have had only 1 missing episode in the previous 6 months</td>
<td>They had an average of less than 2 missing episodes per 6 month period or less</td>
<td>1 missing episode per 6 month period</td>
<td>£6,200</td>
</tr>
<tr>
<td>Occasionally</td>
<td>They go missing occasionally – once every 2-3 months</td>
<td>They had between 2 and 5 missing episodes per 6 month period</td>
<td>3 missing episodes per 6 month period</td>
<td>£18,600</td>
</tr>
<tr>
<td>Frequently</td>
<td>They go missing frequently – twice a month or more</td>
<td>They had more than 5 missing episodes per 6 month period</td>
<td>2 missing episodes per month</td>
<td>£74,500</td>
</tr>
</tbody>
</table>

To establish the value of missing episodes we took a similar approach to that employed in previous costs work in this area (Thwaites et al., 2011). To establish the potential value of reducing missing episodes we used the average age of entry to specialist placements (15.2) as a baseline and assumed that missing episodes would continue at a similar rate until the age of 18. The average cost of a missing episode was assumed to be £1,108, as set out in a report by Lancashire constabulary and uprated to 2012 prices (Lancashire Police, 2005). To ensure consistency with previous costs work, figures from the Lancashire Police report were used. However, it should be noted that a more recent report has suggested that the automatic costs of a medium risk missing person investigation were closer to £1,325 and that a comprehensive missing person investigation could cost as much as £2,416. The cost estimates used may therefore potentially be an underestimate (Shalev-Greene and Pakes, 2012).

Missing episodes: outcomes data and discussion

Table 14: Outcomes associated with missing incidences indicator

<table>
<thead>
<tr>
<th>Outcomes at baseline</th>
<th>Never</th>
<th>Very Rarely</th>
<th>Occasionally</th>
<th>Frequently</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>2</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Very Rarely</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Occasionally</td>
<td></td>
<td></td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Frequently</td>
<td>2</td>
<td></td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>
The first noticeable finding is that the sample generally either fell into the ‘never missing’ group or the ‘frequently missing’ group at baseline. Only two cases out of 13 were not in either of these categories. Comparing outcomes at the baseline with outcomes data collected throughout the specialist placements shows two distinct groups. The first are those where LA social workers identified no missing episodes at the baseline, and who continued to have a low incidence of missing episodes throughout the placement. This constituted four cases, all of which were young people who were referred into a specialist placement as a result of trafficking. The second group were those where LA social workers identified frequent or occasional missing episodes in the six months prior to the specialist placement, and who continued to have similar incidences of missing episodes during their placement. This constituted six placements, including three placements which broke down relatively quickly. Of the remaining three cases, two cases showed strong signs of improving on this indicator, moving from the frequently missing category to the very rarely missing category, whilst the final case seemed to move in the opposite direction from occasionally to frequently missing.

Placements which broke down were generally assumed to have experienced no change in outcomes. However in one case the LA social worker strongly indicated that missing incidences had reduced as a direct result of the placement, despite it only lasting a relatively short amount of time. This case was therefore categorised in line with the number of missing episodes experienced during the placement, rather than according to baseline outcomes.

10.4 Educational achievement

Educational achievement: indicator information and valuing outcomes

Comparable information on educational engagement was collected at the baseline and during the project. Young people’s engagement with the education system was placed into one of seven categories, which were then aggregated further into three categories of engagement with the education system; high attendance, regular truancy and disengaged from education. These classifications are the same as those used in a previous costs study undertaken for Barnardo’s by Pro Bono Economics (Thwaites et al. 2011). 37 The complete classifications are shown in Table 15.

37 Young people attending pupil referral units on a part-time basis were categorised as being in the regular truancy group, by virtue of attending fewer hours of education than statutory requirements. However, it should be noted that the young people receiving a placement and falling into this category were generally not truanting, but conforming to a predefined educational plan which specified part-time hours.
Table 15: Categorisation and valuation of educational engagement indicator

<table>
<thead>
<tr>
<th>Education category</th>
<th>Indicators used at baseline and during project</th>
<th>Estimated monetary value</th>
</tr>
</thead>
</table>
| In employment, education or training    | • Engaged in full-time education, employment or training  
  • Registered in full-time education: irregular attendance (i.e. often absent but have not missed 5 weeks in school year)  
  • Attending a pupil referral unit or receiving private tuition (full-time)  
  • Attending college, or a training scheme (part-time or irregular attendance) or employed on a part-time basis                                                                                                                             | £0                       |
| Regular truancy                         | • Young person excluded from school, no provision has been made, or undertaking some education/training (part-time). Irregular attendance  
  • Young person is attending a pupil referral unit/receiving private tuition (part-time)                                                                                                                                                   | £18,100                  |
| Disengaged from education               | • Not engaged in education, employment or training – may have shown some interest in accessing opportunities or no interest at all                                                                                                                        | £60,700                  |
| Unknown                                 | • In one case the educational status at baseline and after the project was not known                                                                                                                                                       | Excluded from analysis   |

Again, cost estimates were based on those previously used in costs analysis (Thwaites et al. 2011). For the regular truancy group information from a previous report which estimated the total cost of truancy to be £44,468 was used (Brookes et al., 2007). Stripping out costs that accrue to the individual and wider societal costs (such as savings arising from health and crime improvements) gives an estimate of costs accruing to the tax and benefit system, and social services. This was then uprated to end-2012 prices to give an estimate of £18,100 extra lifetime costs associated with being in the persistent truancy group. The costs of being disengaged from education were based on a 2009 study from the University of York which estimated the lifetime costs to public finances of not being in education, employment or training at ages 16-18 to be £56,300 (Coles et al., 2010). Again, only costs accruing to the tax and benefit system and social services were considered and this figure was adjusted both to increase it to 2012 prices, and to remove cost savings arising to the education system from these young people not being in school. This gave a final estimate of £60,700 lifetime cost savings associated with being disengaged from education.

**Education: outcomes data and discussion**

Thirty one per cent (n=4) of the sample were in employment, education or training at the baseline, 38 per cent (n=5) were classed as regularly truanting, and 23 per cent (n=3) were disengaged from education, employment or training. In one case educational status at the baseline was unknown as a result of the placement breaking down relatively quickly.

In terms of how outcomes changed during the specialist placements the picture was more mixed than for the missing incidences indicator. By the end of the project eight of the 13 young people were classified as in education, employment or training, compared to only four at the start. The four cases which were initially in education, employment or training continued to be in this category during their
placement. A further four cases demonstrated an improvement in outcomes by moving from the regular truancy, or disengaged category at baseline to the education, employment or training category. Three cases were initially disengaged from education, all of which were trafficked cases, and it is not clear how long they were in the country before they became known to social services.

Of the remaining five cases that were initially in the regular truancy, disengaged or unknown groups, outcomes for four remained broadly similar to their initial outcomes, whilst one case moved from the regular truant group to being disengaged.

Table 16: Outcomes associated with educational engagement indicator

<table>
<thead>
<tr>
<th>Outcomes at baseline</th>
<th>In employment, education or training</th>
<th>Regular truancy</th>
<th>Disengaged from education</th>
<th>Unknown</th>
</tr>
</thead>
<tbody>
<tr>
<td>In employment, education or training</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Regular truancy</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Disengaged from education</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unknown</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

10.5 Youth Justice

Youth justice: indicator information and valuing outcomes

For the youth justice indicator information was collected on both the number of offences committed in the 12 months leading up to, and then during, the specialist placement. Similar information was collected at the baseline and during the project meaning that the figures from both can be compared reliably. The data was aggregated into two groups; those who were, and who were not, engaged with the criminal justice system. A more comprehensive approach would have created more nuanced groups than this, as a range of evidence shows that costs associated with offenders are highly dependent on both the number and type of offences they commit, and their future criminal profile (Home Office, 2008; National Audit Office, 2011). However, because data was limited to the 12 month period prior to, and the duration, of specialist placements, insufficient information was available to construct more nuanced categories.

Potential cost savings associated with reducing contact with the youth justice system were based on a report which demonstrated that in 2009 the average yearly cost of proven offending per youth offender was £7,860 (National Audit Office, 2011). We assumed that these costs applied from the average age of entry onto a specialist placement (15.2) to the age of 18. This decision was based on evidence which

Proven offences include offences that result in a caution, warning, final warning, or a court case, which in turn can result in a conditional discharge, a community or custody sentence, or a fine.
has demonstrated that victims of CSE who also have contact with the youth justice system have high rates of recidivism in subsequent years (UCL, 2011). Taking the figure from the NAO and uprating to 2012 prices, the discounted value of future savings to the criminal justice system was estimated to be £24,200.

Table 17: Categorisation and valuation of youth justice indicator

<table>
<thead>
<tr>
<th>Youth Justice category</th>
<th>Indicators used at baseline and during project</th>
<th>Estimated monetary value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not engaged with the criminal justice system</td>
<td>No proven offences during the baseline/project period</td>
<td>£0</td>
</tr>
<tr>
<td>Engaged with the criminal justice system</td>
<td>1 or more proven offences during the baseline/project period</td>
<td>£24,200</td>
</tr>
</tbody>
</table>

Youth justice: outcomes data and discussion

The majority of cases (n=8) were not previously engaged with the criminal justice system at the baseline period, and continued to show no such engagement over the course of the project. Outcomes were mixed for the remaining five cases. One case had previous engagement with the criminal justice system, but showed no signs of engagement during their placement. One case had demonstrated no signs of previous engagement but did have contact with the criminal justice system during their placement, whilst the offending status of two cases, both of which broke down relatively quickly, was unknown. The final case demonstrated no engagement with the justice system during the placement but was categorised as showing no change from their baseline offending pattern as a result of their placement breaking down relatively quickly. Over the course of the specialist placements only one young person had committed a proven offence.

One key consideration is that cost savings may clearly accrue beyond the age of 18 if a potentially costly criminal career is successfully prevented by interventions in youth. The decision to only consider cost savings until age 18 is based on taking a conservative approach given the high uncertainty of estimates after this point. Firstly, estimates of cost savings associated with entire criminal careers are highly variable. For example Brookes et al (2007) estimated that the lifetime costs of avoided crime for an excluded young person were around £15,500 and for a truanting young person £6,800 (these figures were based on estimates from a previous study of young people with conduct disorders). However, the Audit Commission (2004) estimated costs associated with a case study criminal career at around £150,000 and the Home Office (2008) estimated that costs were as high as £300,000 for the most serious, prolific offenders. The lack of clear information on potential criminal careers of those receiving a specialist placement means being confident of cost savings associated with future criminal careers is not possible. Nonetheless, if cases are diverted from a prolific criminal career, cost savings could be underestimated.
### Table 18: Outcomes associated with youth justice indicator

<table>
<thead>
<tr>
<th>Outcomes at baseline</th>
<th>Not engaged with the criminal justice system</th>
<th>Engaged with the criminal justice system</th>
<th>Unknown</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not engaged with the criminal justice system</td>
<td>8</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Engaged with the criminal justice system</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Unknown</td>
<td></td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

#### 10.6 Placement stability

### Placement stability: indicator information and valuing outcomes

Categorising placement stability at the baseline was complicated by the fact that some cases did not have a long history in the care system which made it difficult to establish their risk of placement instability (this was particularly the case for placements arising as a result of trafficking). For the purpose of the analysis where there was no clear indication of previous placement instability, cases were categorised as high stability at the baseline. Individuals who exhibited signs of low placement stability were classed as those who had experienced placement breakdown in the 12 months prior to their specialist placement. The average number of placements experienced by those in the low stability group was 2.75. Those who had not experienced placement breakdown in the 12 months prior to their specialist placement were considered to have high levels of stability. Where a specialist placement broke down the case was categorised in the same stability category as at baseline.

Unlike the previous outcome indicators, existing evidence on the potential value of increased placement stability was more limited. In order to derive a figure for potential cost savings arising from greater stability it was first necessary to understand what a typical unstable care pathway might look like. Establishing the cost of a high cost pathway compared to a relatively more stable one would then give an indication of the value of savings arising from greater stability.

Unfortunately, the notion of a representative high cost pathway was complicated to establish due to a lack of clearly available quantitative evidence on care pathways in adolescence, making it difficult to prove the representativeness of any particular pathway. To establish potential cost savings we therefore developed a hypothetical example of what a high cost pathway might look like. To give context to this hypothetical example, a review of available evidence on placement pathways and stability was undertaken, and some bespoke analysis was commissioned from the Department for Education (DfE).
Two key steps were necessary in order to establish what a high cost pathway might look like.

- Firstly, it was necessary to understand the number of placements that children in touch with the care system have in adolescence and what could constitute a high risk pathway.
- Secondly, it was necessary to know what form these placements take, as certain types of care have been shown to be more expensive than others.

**Information on placement numbers**

Using administrative data, DfE examined the cohort of children who were aged 19 on 31\textsuperscript{st} March 2012 and all the interactions they had with the care system over time. Overall, 20,030 children had contact with the care system over this time, with nearly half (9,550) having some contact with the care system after the age of 14. Figure 13 shows that of the 9,550 children with placements after the age of 14, 39 per cent only had one placement and 23 per cent had two placements. Around four percent had more than 11 placements in the care system.

**Figure 13:** Total number of placements for those experiencing a placement after the age of 14

![Figure 13: Total number of placements for those experiencing a placement after the age of 14](image)

**Table 19:** Total number of placements after the age of 14 by 10\textsuperscript{th}, 50\textsuperscript{th}, and 90\textsuperscript{th} percentile

<table>
<thead>
<tr>
<th>Percentile</th>
<th>Total number of placements</th>
</tr>
</thead>
<tbody>
<tr>
<td>10\textsuperscript{th} percentile</td>
<td>1</td>
</tr>
<tr>
<td>Median</td>
<td>2</td>
</tr>
<tr>
<td>90\textsuperscript{th} percentile</td>
<td>6</td>
</tr>
</tbody>
</table>

\(N=9,550\). Based on DfE analysis of the cohort of young people aged 19 on 31\textsuperscript{st} March 2012 that had contact with the care system after the age of 14. Figures may not sum due to rounding.
Establishing the form of troubled care pathways in adolescence

We did not have similar direct quantitative information on the types of placements that those on the highest risk pathways had experienced in adolescence. Instead information from a number of sources was drawn upon to help inform a hypothetical care pathway for a young person experiencing instability. The key findings from this evidence review were as follows.

1 Residential care is more expensive than foster care, and placements in secure residential care (secure units) are more expensive still. According to the most recent PSSRU unit costs of social care the monthly cost of maintaining an agency organised residential care placement was £10,270, as set against £5,481 for within area agency foster care and £2,980 for within area LA foster care (PSSRU, 2012). According to Ward and Holmes (2007) the cost of maintaining a placement in a residential secure unit could be around 20 times the cost of a placement with the young person’s own parents – substantially more than any other type of placement.

2 Foster care was the most common type of placement in adolescence, closely followed by residential care. Table 20 shows analysis from the DfE which shows all placements for those who had a spell in care after the age of 14. The most common form of care experienced for this cohort was a placement with a foster carer within the LA boundary (four in every ten children). This was closely followed by placements in residential children’s homes (one in three children). Around five per cent of those with a post-14 placement had experienced a spell in a secure unit. The relative importance of residential care in adolescent care pathways was reflected in research by Berridge et al (2010) who found that residential care has increasingly been used to accommodate older young people with more serious difficulties who may have had difficulty settling in foster placements.

3 Evidence suggests that children experiencing a higher number of placements over the course of their life are more likely to experience a placement in a more expensive type of care. Table 21, compiled from data provided by the DfE, shows the proportion of children experiencing a spell in a particular care setting, broken down by the number of placements they had experienced overall. As would be expected, the probability of experiencing any type of care setting increases in line with the total number of placements experienced. Those with only one placement were more frequently placed in foster care than in more expensive settings. Only nine per cent of those with one lifetime placement were placed in residential children’s homes, and only one per cent in secure accommodation. However, of those with six lifetime placements, around one in three had experienced a spell in a residential children’s home, around one in five a spell in another form of residential setting, and around four percent in a secure unit.

4 This is further backed up by evidence suggesting that those in more expensive care settings in adolescence are more likely to have multiple previous placements. DfE (2011d) showed that of all children who were placed in residential children’s homes around 46 per cent had experienced four or more previous placements. This compared with only 31 per cent of children aged 10+ overall, and only around 26 per cent of children in foster care. Furthermore, on average a child’s first placement in residential care is their third placement overall. These findings are further supported by Ward and Holmes (2007) who examined a sample of children’s care pathways and found that those with the most complicated needs often moved through a number of cheaper placements before their needs were recognised and they were moved to specialist, more expensive accommodation.

5 The average (mean) length of placement in a residential children’s home for those aged over 14 was similar to the length of a placement in within LA foster care with a foster carer. Table 19, based on analysis provided by DfE, shows that the average length of a placement was 177 days
in both children’s homes and within LA foster care. Typically placements in foster care outside the LA boundary lasted longer (265 days) whilst placements in secure units were substantially shorter (93 days). However, it should be noted that these averages may disguise considerable variation between those on different care pathways.

6 **The likely next step for most placements in the absence of a specialist placement would have been a foster placement.** When LA social workers were interviewed as part of the evaluation it was suggested that 11 of the 13 cases would likely have ended up in a foster placement if the specialist placement had been unavailable, with the majority of these likely to have been placed out of area. In one case it was suggested that the immediate next step would have been a secure unit, whilst one other LA social worker suggested that the likely long-term path would have been into residential care, given the likelihood of foster placement breakdown. Whilst this information gives a sense of the potential next steps, it gives less of an idea about the likely longer term pathways of these young people.

**Table 20:** Types of placements experienced by children in the care system post-14 and average length of time in placements

<table>
<thead>
<tr>
<th>Type of Care</th>
<th>Percentage of post-14 sample experiencing this type of care</th>
<th>Mean length of placement (days) by placement type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster care within LA boundary with relative or friend</td>
<td>6.1</td>
<td>237.3</td>
</tr>
<tr>
<td>Foster care within LA boundary with foster carer</td>
<td>41.2</td>
<td>176.5</td>
</tr>
<tr>
<td>Foster care outside of LA boundary with relative or friend</td>
<td>2.3</td>
<td>265.3</td>
</tr>
<tr>
<td>Foster care outside of LA boundary with foster carer</td>
<td>23.9</td>
<td>225.9</td>
</tr>
<tr>
<td>Placed for adoption</td>
<td>0.2</td>
<td>265.8</td>
</tr>
<tr>
<td>Placed with parents</td>
<td>9.4</td>
<td>241.4</td>
</tr>
<tr>
<td>Other placements within the community</td>
<td>28.7</td>
<td>167.2</td>
</tr>
<tr>
<td>Placements in secure units</td>
<td>5.1</td>
<td>92.5</td>
</tr>
<tr>
<td>Placements in children’s homes</td>
<td>33.5</td>
<td>176.5</td>
</tr>
<tr>
<td>Placements in residential schools</td>
<td>2.1</td>
<td>409.5</td>
</tr>
<tr>
<td>Other residential settings</td>
<td>18.2</td>
<td>171.8</td>
</tr>
<tr>
<td>Missing for 24 hours or more from agreed placement</td>
<td>7.1</td>
<td>24.1</td>
</tr>
<tr>
<td>Other placements</td>
<td>1.8</td>
<td>105.2</td>
</tr>
</tbody>
</table>

*N=9,550. Based on DfE analysis of the cohort of young people aged 19 on 31st March 2012 that had contact with the care system after the age of 14.*
Table 21: Proportion of children experiencing different care settings by total number of lifetime placements

<table>
<thead>
<tr>
<th>Total number of lifetime placements</th>
<th>N</th>
<th>% Foster Care within LA boundary with foster carer</th>
<th>% Foster care outside LA boundary with foster carer</th>
<th>% Residential Children's Homes</th>
<th>% Other Residential Settings</th>
<th>% Secure Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>7,270</td>
<td>21</td>
<td>7</td>
<td>9</td>
<td>6</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>4,410</td>
<td>27</td>
<td>15</td>
<td>15</td>
<td>9</td>
<td>1</td>
</tr>
<tr>
<td>3</td>
<td>2,460</td>
<td>38</td>
<td>22</td>
<td>21</td>
<td>13</td>
<td>2</td>
</tr>
<tr>
<td>4</td>
<td>1,520</td>
<td>44</td>
<td>26</td>
<td>22</td>
<td>15</td>
<td>2</td>
</tr>
<tr>
<td>5</td>
<td>1,030</td>
<td>52</td>
<td>32</td>
<td>29</td>
<td>17</td>
<td>2</td>
</tr>
<tr>
<td>6</td>
<td>720</td>
<td>49</td>
<td>31</td>
<td>33</td>
<td>18</td>
<td>4</td>
</tr>
<tr>
<td>7</td>
<td>550</td>
<td>58</td>
<td>38</td>
<td>38</td>
<td>19</td>
<td>3</td>
</tr>
<tr>
<td>8</td>
<td>440</td>
<td>63</td>
<td>43</td>
<td>46</td>
<td>27</td>
<td>3</td>
</tr>
<tr>
<td>9</td>
<td>280</td>
<td>62</td>
<td>38</td>
<td>55</td>
<td>27</td>
<td>7</td>
</tr>
<tr>
<td>10</td>
<td>230</td>
<td>67</td>
<td>49</td>
<td>58</td>
<td>26</td>
<td>11</td>
</tr>
</tbody>
</table>

Note: Only selected settings included. Placements beyond ten not shown in this table due to small numbers. Based on DfE analysis of the cohort of young people aged 19 on 31st March 2012 that had contact with the care system at any point during their life.

Establishing a hypothetical high risk pathway

Based on this information a hypothetical pathway was established for the purpose of assessing cost savings from greater stability. A pathway with six placements was chosen for the purpose of a hypothetical example of a high cost pathway, representing a case at the 90th percentile of placements after the age of 14 based on the DfE data on the cohort of care leavers in 2012. A pathway ultimately ending in residential care was chosen, given its relative frequency as a high cost pathway in adolescence. It was assumed that the case began in foster care, in line with the likely next destination of the majority of cases in the project according to LA social worker interviews, before moving into residential placements after two foster placements. This pathway aligns with the average number of placements prior to residential care. These placements were spread equally over 2.8 years (in line with the average age on entry to a specialist placement), and compared against the cost of a pathway with no placement breakdowns in foster care. Combining these assumptions with the unit costs of placement pathways taken from the PSSRU unit costs (PSSRU, 2012) allows a costing of these hypothetical pathways to be made. Based on these assumptions, the extra cost of a pathway that has six placements in total over 2.8 years, and transitions to costly residential care after two foster placements, compared to a stable pathway spent in LA foster care is calculated to be around £145,600. This is taken to represent the additional cost of placement instability. The final categorisation and valuation of outcomes related to placement stability are shown in Table 22 which uses the unit costs of eight care processes, taken from
PSSRU to establish the cost of each hypothetical pathway. The final categorisation and financial values attached to each category are shown in Table 23.

**Table 22:** Establishing hypothetical high risk and low risk care pathways to assess cost savings

<table>
<thead>
<tr>
<th>Unstable pathway</th>
<th>Stable Pathway</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Activity</strong></td>
<td><strong>Activity</strong></td>
</tr>
<tr>
<td><strong>Cost</strong></td>
<td><strong>Cost</strong></td>
</tr>
<tr>
<td>(2011/12 prices)</td>
<td>(2011/12 prices)</td>
</tr>
<tr>
<td><strong>Process six: review</strong></td>
<td>£815</td>
</tr>
<tr>
<td><strong>Process two: new care plan</strong></td>
<td>£240</td>
</tr>
<tr>
<td><strong>Process three: maintain placement – within LA foster care with foster carer</strong></td>
<td>£22,560</td>
</tr>
<tr>
<td><strong>Process five: find a subsequent placement</strong></td>
<td>£538</td>
</tr>
<tr>
<td><strong>Process three: maintain placement – within LA foster care with foster carer</strong></td>
<td>£18,000</td>
</tr>
<tr>
<td><strong>Process six: review</strong></td>
<td>£815</td>
</tr>
<tr>
<td><strong>Process five: find a subsequent placement</strong></td>
<td>£538</td>
</tr>
<tr>
<td><strong>Process three: maintain placement – agency residential care</strong></td>
<td>£62,556</td>
</tr>
<tr>
<td><strong>Process five: find a subsequent placement</strong></td>
<td>£1,094</td>
</tr>
<tr>
<td><strong>Process three: maintain placement – agency residential care</strong></td>
<td>£62,556</td>
</tr>
<tr>
<td><strong>Process five: find a subsequent placement</strong></td>
<td>£1,094</td>
</tr>
<tr>
<td><strong>Process three: maintain placement – agency residential care</strong></td>
<td>£62,556</td>
</tr>
<tr>
<td><strong>Process five: find a subsequent placement</strong></td>
<td>£1,094</td>
</tr>
<tr>
<td><strong>Process three: maintain placement – agency residential care</strong></td>
<td>£47,960</td>
</tr>
</tbody>
</table>
Table 23: Categorisation and valuation of placement stability indicator

| Stability category | Indicator of placement stability in previous 12 months | Indicator of placement stability related to project outcomes | 
|--------------------|--------------------------------------------------------|---------------------------------------------------------------|---|
| Low stability      | More than one placement in 12 months prior to specialist placement | • Specialist placement has broken down | £145,600 |
| High stability     | One placement in 12 months prior to specialist placement being undertaken | • Specialist placement is still in place  
• Specialist placement ended with transition to post-18 independent living | £0 |
| Unplaced           | These were young people who had not been in a placement in the 12 months prior to their specialist placement. This typically applied to trafficked young people who had only recently become known to social services |  | £0 |

Limitations to this approach

The lack of clear quantitative information on care pathways creates some limitations for this approach.

1 Cost savings arising from greater stability may be overstated as young people in more costly settings are also more likely to leave the care system earlier. Whilst evidence suggests that the most common age of leaving care for those in residential settings is 18, over half (56 per cent) of young people who end up in residential settings leave care before the age of 18. This compares to only 37 per cent of young people in foster care who leave care before the age of 18. For the purpose of our calculations we assumed that care journeys lasted until the age of 18. However if those on the
most costly pathways are likely to leave the care system earlier, then this approach would exaggerate the cost savings associated with placement stability. In the breakeven analysis that follows an alternative care pathway that ends at 17 is considered by way of providing some sensitivity analysis. However, it should also be noted that other costs to The State may arise as a result of leaving care earlier, such as additional housing support costs, which may somewhat offset this.

2 Sensitivity of results to alternative pathways. Residential care was chosen to represent a high cost pathway given its relative frequency in care pathways in adolescence, and the body of evidence which suggests its frequency of use after other options have failed. However, as Table 20 shows, of the cohort of care leavers aged 19 in 2012, around one in 20 of those who were looked after past the age of 14 has spent time in a secure unit, and in one case in the project it was felt that secure accommodation was a likelihood in the absence of specialist provision. Given the substantially higher cost of these placements, successfully diverting looked after young people away from this type of care would lead to substantially higher savings than outlined here. Furthermore, the hypothetical high cost pathway was assumed to have six placements, in line with information which suggested this was the number of placements which represented the 90th percentile in the data for placements post-14. However, this implies that around one in ten placements had a greater number of placements than this. Again if, in the absence of a specialist placement, cases referred to the project would have experienced more than six placements, potential cost savings are underestimated.

Placement stability: outcomes data and discussion

In the baseline data collection over half (n=8) of the cases were exhibiting signs of low placement stability. Placements which exhibited high stability leading up to the specialist placement all continued to report high stability after the intervention. Of those which were initially in the low stability group, half experienced a placement breakdown and so continued to be classed as low stability, whilst half maintained their specialist placement and were classed as high stability. It should be noted that of the cases that moved from the low stability to high stability group two cases had only been in place for four months or less by the end of the placement. Whilst interviews at the end of the placement suggested that these placements were likely to remain stable and in place, it should nonetheless be noted that for these placements four months only represents a relatively small window to assess longer term stability. Of the nine cases that reported high stability, four were existing Barnardo’s foster placements which subsequently converted into specialist placements.

Table 24: Outcomes associated with placement stability indicator

<table>
<thead>
<tr>
<th>Outcomes at baseline</th>
<th>Outcomes during specialist placement</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low stability</td>
</tr>
<tr>
<td>Low stability</td>
<td>4</td>
</tr>
<tr>
<td>High stability</td>
<td>3</td>
</tr>
<tr>
<td>Unplaced</td>
<td></td>
</tr>
</tbody>
</table>
10.7 Cost of the Safe Accommodation Project

Costs which fell within the project budget

The project budget was taken as the starting point for assessing the cost of the project. From this costs were stripped out that were not directly attributable to the running of specialist placements, including the costs of direct work, training (unrelated to specialist placement delivery) and evaluation costs.

From discussions with staff administrating the project it became clear that some costs which were incurred were not directly charged to the project budget. For example, some management costs and administration overheads were absorbed by Barnardo’s over the course of the project. Whilst understandable for projects of this nature, it is important to take into account, because it implies the true economic cost of the project may have been higher than this accounting information suggests. Unfortunately, it was not possible to systematically record these additional costs and they therefore cannot be included in this final analysis. The presented costs are therefore the best estimate of the cost of the specialist placement element of the project, but may underestimate their true economic cost. It should also be noted that these do not represent a unit cost, or indication of how much specialist placements would cost to deliver in the future. This would require a more detailed understanding of how the costs of placements could reduce with increased scale, which was outside the scope of this costs work.

Table 25: Discounted costs of the specialist placement strand of the Safe Accommodation Project

<table>
<thead>
<tr>
<th>Time period</th>
<th>Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 1</td>
<td>£294,151</td>
</tr>
<tr>
<td>Year 2</td>
<td>£368,436</td>
</tr>
<tr>
<td>Total</td>
<td>£662,587</td>
</tr>
</tbody>
</table>

10.8 Breakeven analysis

The number of young people who would have needed to experience an improvement in each outcome category in order for the potential savings to justify the costs of the specialist placements has been calculated, and is reported below. The breakeven point associated with an improvement in all outcomes is also considered.
The high costs of negative outcomes means that, based on the outcome valuations set out previously, the project would have needed just over two out of 13 cases to improve on all outcomes in order for the savings to justify the outlay on placements. Furthermore, the participation of just one case with extremely high potential future costs (for example, a young person who would spend substantial amounts of time in secure accommodation) would lower this ratio further. As previously discussed, in one case LA social workers suggested that the next steps would likely have been such a placement in secure accommodation.

The highest cost savings are estimated to arise from higher placement stability, and the bulk of these cost savings relate to the ongoing costs of maintaining placements. However, as highlighted previously, evidence suggests that those on troubled care pathways are more likely to leave the care system at an earlier age than those on more stable pathways. If this is the case the cost savings arising through the placement stability indicator may be overestimated. To understand better the potential impact of this issue an alternative high cost care pathway was constructed which had an identical number of placements (six), but ended at 17 rather than at 18.\(^\text{39}\)

The discounted cost savings associated with this pathway were estimated to be substantially less than a pathway lasting until age 18, coming in at £53,465 (compared to £145,600). This reflects the high cost of maintaining a placement for an additional year in a residential setting. Based on this alternative pathway all of the project cases would have had to experience greater placement stability in order for the costs of the project to be recouped. Alternatively, just over three cases would need to experience improvements across all indicators in order for the costs of the project to breakeven.

\(^\text{39}\) Seventeen reflects the estimated mean age of leaving children’s homes based on the weighted average taken from the DfE residential care data pack (2011).
Breakeven analysis assuming constant risk profile

To give some context to these figures, cost savings assuming a constant risk profile over the course of specialist placements are calculated. This method implies that, without a specialist placement, outcomes would remain unchanged from the baseline, and therefore that the observed change in outcomes is entirely attributable to the intervention. There are clear reasons to doubt that this is the case.

For example, previous Pro Bono Economics work for Barnardo’s was able to establish a counterfactual and show that the underlying risk profile of young people using CSE services would have, on average, worsened over time and that therefore the savings attributable to CSE interventions were higher than would have been estimated assuming a constant risk profile (Thwaites, et al. 2011). Furthermore, cases were specifically referred into the project because it was thought their risk of poor outcomes may increase in the future. However, because it is not possible to quantify these effects for this project, analysis is limited to assuming a constant risk profile. Equally, without a counterfactual we are not able to definitively say that the risk profile would not have demonstrated some improvement in the absence of a placement.

Furthermore, it has been found that trafficked young people face a high risk of disappearing from the care system without a trace (ECPAT, 2008), potentially leading to lower costs to social services in the longer term. If this were the case for those referred for a specialist placement then the savings estimated through the placement stability indicator would also be overestimated. However, in this case outcomes across a range of indicators not considered as part of this costs work (e.g. well-being and safety) are likely to be substantially worse.

Table 27 shows that, based on a constant risk profile in each case, the estimated savings are £851,490, and on this basis the specialist placements would breakeven relative to their estimated costs within the project. However, it is important to note that the majority (68 per cent) of these cost savings arise through the placement stability route, and as previously discussed, the estimates of savings arising from greater stability are sensitive to the assumptions employed in estimating the hypothetical care pathway. Analysis was again conducted with a shorter hypothetical high risk care pathway to highlight the sensitivity of this analysis to this indicator. Under this scenario cost savings were estimated to reduce to £482,990, implying that the breakeven point would not have been reached.
10.9 Conclusions

The conclusions of the cost-effectiveness analysis are as follows.

1. The costs to The State of the negative outcomes targeted by the specialist placements within the Safe Accommodation Project are large. Even taking into account potential uncertainties around the valuation of outcomes indicators, the cost savings associated with greater stability, reduced missing incidences, reduced contact with the criminal justice system, and greater educational attainment are substantial.

2. The high cost savings associated with negative outcomes imply that any individual placement which experiences improvements across each of the four indicators is likely to recoup its costs, and therefore generate net savings for The State. There is clear potential for these placements to be cost-effective. However, there are also clear challenges associated with ensuring that placements are effectively targeted to begin with.
   a. Early in the project three placements that were already stable converted to become specialist placements. This limits the scope for savings through the placement stability indicator, and therefore overall cost-effectiveness.
   b. Four cases broke down completely, increasing the costs associated with the project, but in likelihood leading to no discernable change in outcomes. A better understanding of where specialist placements are likely to succeed and where a young person would not be suitable for a placement would therefore improve overall cost-effectiveness.

3. Assuming the underlying risk profile of young people in specialist placements would not have changed in the absence of a placement there are tentative signs that this element of the Safe

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**Table 27: Estimated project benefits assuming constant risk profile during specialist placements**

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Savings assuming constant risk profile</th>
<th>Savings assuming young people leave care at 17 for unstable care pathway</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing episodes</td>
<td>£111,690</td>
<td>£111,690</td>
</tr>
<tr>
<td>Contact with the education system</td>
<td>£157,400</td>
<td>£157,400</td>
</tr>
<tr>
<td>Contact with the criminal justice system</td>
<td>£0</td>
<td>£0</td>
</tr>
<tr>
<td>Placement stability</td>
<td>£582,400</td>
<td>£213,900</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>£851,490</strong></td>
<td><strong>£482,990</strong></td>
</tr>
<tr>
<td>Total cost of placements</td>
<td>£662,587</td>
<td>£662,587</td>
</tr>
<tr>
<td>Net Benefit</td>
<td>£188,903</td>
<td>-£179,597</td>
</tr>
</tbody>
</table>
Accommodation Project may have broken even in terms of returns delivered to The State. However, this finding should be treated with caution as:

- it is impossible to say this for certain without a clear counterfactual; and
- estimates of cost savings, especially those associated with placement stability are subject to uncertainties. Sensitivity analysis demonstrates that varying the assumptions employed for calculating cost savings associated with placement stability would reduce the validity of this claim.

Finally, it is important to note that there are a wide range of outcomes that have not been costed as part of this exercise which, if factored in, could further lower the number of successful interventions required for the project to break even. Benefits accruing to the individual, such as improved earning potential and increased wellbeing, would potentially increase the net benefits associated with specialist placements if included in the analysis.
Chapter 11: Theories of Change

Recurring patterns of key contexts, mechanisms and outcomes can help identify theories of change about how effective safeguarding happens in the context of specialist foster care. There are many theories of change embedded in the evaluation, but below is a summary of those judged to be the most significant for refining the model of specialist foster care for sexually exploited and trafficked young people.

1 Specialist placements are likely to be most successful and cost effective when young people are ready, willing and able to engage in them, regardless of their level of risk.

2 In light of ‘pull factors’ drawing them away from safe environments, specialist foster care must give sexually exploited and/or trafficked young people a reason to stay and invest in a placement.

3 Positive, trusting relationships within a specialist foster placement underpin all wider attempts and strategies to improve a sexually exploited and/or trafficked young person’s safety and well-being.

4 Safety is multi-faceted. It takes time to progress from short-term physical safety to medium term relational safety, and then long-term recovery.

5 A shared, multi-agency approach is crucial to the effective use of safeguarding measures to protect sexually exploited and/or trafficked young people from exploitation.

6 Where effective multi-agency partnerships are not present, the model of specialist carers and project workers can act as a buffer against poor practice and continue to create a safe environment.

11.1 Specialist placements are likely to be most successful and cost effective when young people are ready, willing and able to engage in them, regardless of their level of risk

Specialist foster care will not be appropriate for all young people. The findings from the evaluation suggest that it is most effective where young people want to be placed in a family or 1-1 environment. In many high-risk cases of child sexual exploitation (CSE), young people in care may have strong attachments to areas that they are drawn to run away to, and which present risk. If, in addition, they are resistant to being in a family environment, they are unlikely to accept the support being offered by specialist foster carers. A number of Barnardo’s project workers described working with young people who would travel very large distances if they were determined enough to ‘get back’ home. In these cases, being placed at great distance may not ultimately prevent young people going missing and being placed at further risk. Where such placements break down and generate costs without any subsequent improvement in outcomes, the cost effectiveness of specialist foster care is clearly reduced.

This underlines the importance of a young person’s readiness to be placed in specialist foster care, and of the need for their local authority (LA) social workers to be sensitive to their dispositions and desires when referring them to the most appropriate placement. Of course a general lack of placement choice
only contributes to the difficult decisions LA social workers face when considering where to place a young person in care. Nevertheless the cumulative effect of placement breakdowns can have a very negative effect on young people (Munro and Hardy, 2005; Coy, 2008), and therefore LA social workers need as much information as possible when making such decisions (DfE, 2012).

11.2 In light of ‘pull factors’ drawing them away from safe environments, specialist foster care must give sexually exploited and/or trafficked young people a reason to stay and invest in a placement

Many of the young people participating in the evaluation had reasons not to invest in a new specialist foster placement. They could lose contact with friends, family and communities that mattered to them, as well as having to ‘start again’ with new carers, and potentially new schools and communities. They may also be experiencing the ‘pull’ toward exploitative contexts that is referred to in literature on CSE and trafficking (Scott and Skidmore, 2006). Those working to support specialist placements therefore need to recognise what a young person may be losing when they move into a new specialist foster home, and what that home can offer in response. Young people were being asked to trust and believe that specialist foster carers and professionals had a valid perspective on their safety and well-being. Over time, this meant young people having to let go and lose some degree of control of their own understanding of their situations. When disclosing their experiences, trafficked young people in particular could be taking risks that they might be deported, misunderstood, left un-protected, and lose the capacity to protect family and friends who were threatened with harm if young people broke their silence (Pearce et al, 2009).

Safeguarding measures could also be experienced as a loss of freedom and control. To take the metaphor of scales, effective placements need to outweigh such restrictions with active demonstrations of care and concern in order to build positive relationships. At various stages of a placement, the ‘reason to stay and invest’ could be different. In the early days this could be involving the young person in fun and engaging activities. In the medium to long-term it was more likely to be a warm environment where they were well supported and cared for, and had opportunities to belong and succeed (Kohli, 2011).

11.3 Positive, trusting relationships within a specialist foster placement underpin all wider attempts and strategies to improve a sexually exploited and/or trafficked young person’s safety and well-being.
Relationships are recognised to be at the heart of effective social and youth work (Munro, 2011). The relationship between a specialist foster carer and a young person was implicit within the original model of the specialist placements, but could, arguably, be more prominent. Where young people had good quality relationships in the specialist foster home, a series of other positive outcomes tended to follow, including awareness of risk increasing, missing episodes reducing, and improved well-being. Perhaps most importantly it was these relationships that made it possible for young people to respond positively to the various safeguarding mechanisms described in chapter 8.

Findings from the evaluation consistently support the idea that trust within relationships is the key that unlocks better care and safeguarding. Some relationships become trusting very quickly, however there is plenty of evidence to suggest that trafficked and sexually exploited young people may be wary of professionals who are trying to support them. Where this is the case, trust can take many months if not years to establish. Without such trust it is highly unlikely that young people will feel safe enough to talk about exploitation and its effects, which very much limits the support that can be offered to aid their recovery.

### 11.4 Safety is multi-faceted. It takes time to progress from short-term physical safety to medium-term relational safety, and then long-term recovery

The evaluation has shown that positive trusting relationships with specialist foster carers are a key that unlocks wider outcomes. However there can be a tension between investment in relational stability and the use of strategies that disrupt young people’s relational environments for the sake of safeguarding. Findings reported so far suggest that particular safeguarding strategies are needed in the early stages of a placement to protect young people and secure their physical safety. However these should not be achieved at the expense of relational security. Consequently professionals need to consider a trusting relationship as an outcome in itself and a form of increased safety and security that is only likely to be achieved in the medium to long-term. Research, and evidence from serious case reviews, suggests that it takes time, empathy and perseverance to successfully engage vulnerable young people (Scott and Skidmore, 2006; Derby Safeguarding Children’s Board, 2010). This requires a longer term view of commissioning and purchasing support services, which can recognise the importance of persistently reaching out to young people, even when they appear unresponsive in the short-term.

Kohli (2011) describes unaccompanied asylum seeking children as on a journey from safety, to belonging, to success. Here, safety is predicated on achieving asylum, belonging on having a stable foundation to find communities to be part of, and success on environments in which to achieve. In the same way it may be helpful to see care placements for these young people as having phases of safety and security. Physical safety makes it possible to build positive relationships, which in turn aid long-term recovery and a sense of psychological well-being. Therapeutic interventions, for example, are likely to be most effective when a young person is in a stable environment.
11.5 A shared, informed, multi-agency approach is crucial to the effective use of safeguarding measures to protect sexually exploited and/or trafficked young people from exploitation

Informed, partnership working within multi-agency teams makes it far more likely that the use of various safeguarding strategies will be effective in protecting sexually exploited and/or trafficked young people. In the first instance awareness of CSE/trafficking will aid the identification of victims, and their referral to appropriate services like the Safe Accommodation Project. There is then a need to build agreement as early on as possible about the young person’s level of risk/need, and an appropriate safeguarding approach. This will involve ensuring that all relevant information on the young person's background and needs is shared with the specialist placement team (specialist foster carer, fostering social worker and project worker) to create an initial safety plan. The young person should be seen as part of this team, and given the opportunity to contribute to discussions about their safety.

Partnership working can then sustain a placement by providing consistent messages to the young person about their need for safeguarding. Here, schools, colleges and other education providers have an important role in working alongside the specialist foster care team to implement safety strategies. Other key agencies that should be seen as partners include social services, the police, interpreters, and any support workers closely involved with a young person.

Finally, a well-informed ‘team around the child’ enhances the likelihood of a young person experiencing positive transitions out of specialist foster care. Where professionals recognise the ongoing risks to sexually exploited and/or trafficked young people they are more likely to advocate for safeguarding resources that support transitions to independence. For example, further 1-1 sessions might be commissioned for young people who are due to leave care and have only been in a specialist placement for a few months. Similarly, where specialist placements break down, project workers could potentially be commissioned to continue their work with a young person as they transition into a new placement.

11.6 Where effective multi-agency partnerships are not present, the model of specialist carers and project workers can act as a buffer against poor practice and continue to create a safe environment

While a shared, multi-agency approach is ideal, the reality is that understanding of CSE and trafficking among professionals remains poor (see chapter 5). Such partnerships are most effective if they are in place before a placement begins. However the evaluation suggests that this approach can develop through the advocacy and influence of a specialist foster care team itself. In a number of placements the Barnardo’s team supported multi-agency working by advocating for appropriate interpreters, changes
of LA social worker, improved recording, and the need to ensure young people continued to be identified as at risk, or victims, of sexual exploitation and/or trafficking.

There will continue to be local contexts that are not supportive to specialist foster care. These include inconsistent support from LA social workers where there is high turnover in children’s services departments, as well as high thresholds for intervention and long waiting lists for certain services, such as Child and Adolescent Mental Health Services (CAMHS). In these situations the supportive presence of both a specialist foster carer and project worker can act as a buffer against the impact of inconsistent care and poor access to support.

Project workers can enhance safeguarding through focused 1-1 work on safety and risk delivered on a week-by-week basis where young people are willing to engage, or by persistently reaching out to young people who are missing and finding creative ways to take therapeutic work into their environments. Meanwhile specialist foster carers can create a safe environment on a day-to-day basis through the provision of practical and emotional support, including young people in a family environment, and continuing to provide acceptance and warmth when risky behaviour continues. In such a partnership, positive messages about safety and well-being are ‘drip-fed’ to the young person and reinforced by different people in their lives. Where multi-agency work is not ‘working’, this approach can, therefore, still help to create a safer environment for sexually exploited and trafficked young people.

11.7 Refining the placement model

A realist evaluation approach aims to refine our understanding of programs and interventions by learning what works for whom, and in what circumstances. This evaluation has presented findings about the contexts in which specialist care is likely to be most effective, and described the mechanisms of support that are triggered in these contexts. Finally then, we can return to, and amend, the original model of specialist foster care in light of these findings.

Figure 14: Original placement model

- Working in partnership
- Planning and reviewing
- Advocacy and brokering other services
In this revised model the young person is at the centre, as is recognition of the importance of their autonomy, perspectives and choices.

The specialist placement team (specialist foster carer, project worker, fostering social worker) then create a safe environment around the young person that can ‘hold’ them in to the placement. This centres on creating the right balance between safeguarding mechanisms and demonstrations of care, through which trusting relationships with the young person are built. This environment can be more or less restrictive/protective depending on the young person’s needs.

Finally the specialist placement team is supported by a wider team around the child, who are informed about CSE and trafficking, and who reinforce the safeguarding approach within the placement. This team is likely to include representatives from children’s services, education, health, and the police, among others.\(^{40}\)

In this way the young person should have a sense of being well supported and protected, as well as the freedom and autonomy to make choices about their own life.

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\(^{40}\) The young person may of course have close trusting relationships with other professionals in a multi-agency team, but the model aims to suggest that the specialist placement can have a particularly powerful role in safeguarding on a day-to-day basis.
Chapter 12: Conclusion

Trafficked and sexually exploited young people can be under enormous pressure and control from those who abuse them, and are also likely to be managing the negative effects of these experiences on their physical, emotional and psychological health. In response to growing concern about the safety and well-being of these young people in care placements, calls have been made for the development of specialist foster care to address their particular safeguarding needs (Pearce et al., 2009; ECPAT, 2011). As a national organisation, Barnardo’s was able to draw on its experience in providing fostering, and sexual exploitation and trafficking services to pilot the use of such specialist foster care for the first time.

Interviews conducted with local authority (LA) social workers at the end of the project demonstrated enthusiasm for these kinds of specialist placements, and a desire to see such provision extended.

I think these placements are valuable because there are only certain carers that have the ability to deal with these kinds of behaviours, so the training is integral to their attitudes really (LA social worker).

I thought it (the project) was excellent, because I’d never heard of it before. And I just thought ‘Well this is what we need’ basically. It’s just a pity there wasn’t more of them, even more Carrie’s (project worker). She knows more than me, because she’s trained (LA social worker).

Five years working in a safe house – she (the foster carer) knows the immigration system; she knows how the Home Office operates, she knows how the police operate. She did all the right things. She even put the marker on her own home. It wasn’t me that was doing all that. It saved me a lot of leg work, basically. I didn’t have to do all the bits which I did in our internal placement and I also didn’t have to reinforce the message about how we’re going to keep this young person safe (LA social worker).

Chapter 10 suggests that specialist placements also have the potential to be cost effective, particularly where young people are diverted from unstable to stable care pathways and are deterred from placements in residential and secure accommodation. Finally, the success of any future extension of this sort of provision will be influenced by the level of awareness of CSE and trafficking among LA, and other relevant, professionals, as shown in chapter 9.

12.1 Did the project achieve its core aims?

The Safe Accommodation Project had three core aims:

1 to improve front-line practice through flexible, sensitive intervention with children at high risk;
2 to build capacity/expertise within the sector so that responses are better informed and sustainably improved; and
3 to keep children safe from harm.

The evidence from the evaluation suggests that, between the outcomes achieved by the training and the specialist placement strands of the project, all three aims were met.
1 Front-line practice was improved through flexible, sensitive intervention with children at high risk

- Many young people reported negative experiences in previous care placements, compared with the positive and warm relationships they had built with Barnardo’s specialist foster carers.
- Specialist foster carers and project workers employed a wide variety of supportive mechanisms that improved the safety and well-being of young people in the placements.
- Nearly all specialist foster carers and project workers worked flexibly and sensitively with young people who presented with complex emotional needs and with some challenging behaviour. This generally remained the case even in placements that broke down more quickly than anticipated.

2 Capacity and expertise was built within the sector so that responses are better informed and sustainably improved

- Six hundred and sixty-three LA foster carers and associated professionals received awareness raising training on CSE and trafficking through the Safe Accommodation Project.
  - Participants reported substantial improvements in their confidence to support young people, and confidence in their knowledge and understanding of the issues.
  - Those responding to the online survey six months later reported that the training had improved their awareness of the signs that a young person is at risk.
  - Nearly half of the foster carers surveyed reported that attending the training made them more likely to consider caring for a sexually exploited or trafficked young person in the future.
- Within some specialist placements, Barnardo’s advocated for improvements to multi-agency work and professional responses to young people, by equipping LA social workers and other professionals to better recognise risks associated with sexual exploitation and trafficking.
- The evaluation is expected to contribute to increased expertise in the sector as findings are disseminated and used to improve awareness of how safe accommodation is achieved.

3 Most young people were kept safe from harm

- In the majority of specialist placements LA social workers believed that young people were safer as a result of being placed with Barnardo’s.
- Most young people reported feeling safe in their placements, and interpreted safety in the context of the positive relationships they had with specialist foster carers.
- In 12 placements patterns of going missing either reduced or remained stable, and in one placement missing episodes increased.
- The best outcomes were achieved in placements that lasted beyond six months, where short-term safety matured into young people developing a deeper awareness of risk and exploitation and a greater ability to keep themselves safe.

The evaluation has shown that where placements are offered in line with the model in Figure 15, sexually exploited and trafficked young people can be effectively protected and can continue to go on to recover from abuse. As such it is recommended that this model of specialist foster care should continue to be provided, drawing on the learning generated from the evaluation, in order to ensure that more young people can benefit from such specialist provision.
12.2 Key messages for practice

- Specialist foster placements should be in place for at least a year to enable trusting relationships to be built, which are crucial to achieving further positive outcomes.

- Given the importance of consistent, trusting relationships, consideration should be given to employing project workers to provide 1-1 support to young people to support their transitions between specialist foster placements, into other placements, or independent living post-18.

- Specialist placements are at highest risk of breakdown where a young person does not want to be in a foster family environment and has a strong attachment to people/communities they are likely to run back to. Specialist care plans therefore need to consider how to ‘hold young people in’ to their specialist foster placements by giving them viable reasons to stay and invest, particularly in the short-term.

- All relevant information should be shared within the multi-agency team as early on as possible so that all agencies and partners can agree on a young person’s level of risk and appropriate safeguarding strategies. This includes agreement between police and other services about responses to young people going missing.

- All those in a team around the child supporting a young person at risk, or a victim, of sexual exploitation and/or trafficking should receive appropriate training to ensure they are working from similar perspectives on the risks to young people.

- A range of therapeutic interventions should be available to young people in specialist placements who are in need of support, including both formal counselling and informal outreach-based project work.

- In the case of trafficked young people who are new to the United Kingdom, the specialist placement team should consider how to ensure young people are able to participate in decision making, without over-burdening them in the early days of a placement. This could include providing explanations in a young person’s language of who various professionals are and the role they play, as well as limiting the number of meetings young people are expected to attend in a week.

- A framework/tool should be developed to support reflection on trafficked young people’s changing levels of risk and resilience in foster/other care placements. This would draw on the perspectives of the young person and wider team around the child to enable safeguarding measures to be responsive to changes in the placement.

- An ability to build positive trusting relationships with young people should be the primary quality that fostering teams look for in their recruitment of specialist foster carers. This is likely to be characterised by confidence, commitment, compassion and the ability to cope with challenging situations. At least one carer in a placement should be available to provide full-time support – especially in the early days of a placement.

- Ongoing support should be available to carers in the form of respite and opportunities for peer-support with other specialist carers.

- Advanced or more specialist ongoing training should be available to specialist carers. This could include knowledge of the immigration system in order to support trafficked young people, the use of specific safety measures, and challenging societal assumptions that increase young people’s vulnerability to exploitation, including inequality and discrimination. See section 1.1 on the need for training to explore gender inequality.
Once you get a kid through that door, you know their past on a piece of paper, but you don’t know about their rules, like their view. So, like, you’ve got to talk to them, you’ve got to sit down and think ‘Mate, I’m gonna put time into this’ and after a couple of months, like they’re open to you, they’d think ‘All right, she’s gonna stick around’. Because how many times I thought, ‘Mate, you ain’t gonna stick around, see you later, I ain’t gonna talk to you’. It’s like, ‘Oh she was this, she was that’. Why was she this? Why was she that? It’s just like, you sit there and think, ‘Hold on, hold on, you’re calling me these names, you ain’t made no effort’. If you ask a lot of foster kids, that’s what they say.

You’ve got to make effort for them to make effort.

Briony
### Appendix 1: Data collected for evaluation of specialist placements

<table>
<thead>
<tr>
<th>Placement Length</th>
<th>Number of weekly logs submitted</th>
<th>Total no. interviews conducted</th>
<th>Interviews with young person</th>
<th>Interviews with Barnardo’s specialist foster carer</th>
<th>Interviews with Barnardo’s fostering social worker</th>
<th>Interviews with local authority social worker</th>
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<td>17</td>
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<td>17</td>
<td>17</td>
<td>30</td>
</tr>
<tr>
<td>13 months</td>
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<td>18</td>
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<td>19</td>
<td>19</td>
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</tr>
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<td>20 months</td>
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<td>20</td>
<td>20</td>
<td>20</td>
<td>20</td>
<td>20</td>
<td>30</td>
</tr>
<tr>
<td>22 months</td>
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<td>21</td>
<td>21</td>
<td>21</td>
<td>21</td>
<td>21</td>
<td>30</td>
</tr>
<tr>
<td>Total</td>
<td>224</td>
<td>224</td>
<td>224</td>
<td>224</td>
<td>224</td>
<td>224</td>
<td>224</td>
<td>300</td>
</tr>
</tbody>
</table>

41 Summarising reports were produced for the weeks when no monitoring log was submitted.
## Appendix 2: Pseudonyms used in the evaluation

<table>
<thead>
<tr>
<th>Placement</th>
<th>Young people’s pseudonyms</th>
<th>Specialist foster carers’ pseudonyms</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Linh</td>
<td>Pat and Steve</td>
</tr>
<tr>
<td>2</td>
<td>Thien</td>
<td>Rachel and Brian</td>
</tr>
<tr>
<td>3</td>
<td>Megan</td>
<td>Jill and Richard</td>
</tr>
<tr>
<td>4</td>
<td>Rhiannon</td>
<td>Anne and John</td>
</tr>
<tr>
<td>5</td>
<td>Ashleigh</td>
<td>Donna</td>
</tr>
<tr>
<td>6</td>
<td>Jessica</td>
<td>Alisha and Cameron</td>
</tr>
<tr>
<td>7</td>
<td>Clarisse</td>
<td>Pat and Steve</td>
</tr>
<tr>
<td>8</td>
<td>Briony</td>
<td>Helena</td>
</tr>
<tr>
<td>9</td>
<td>Danielle</td>
<td>Malika and Sahil</td>
</tr>
<tr>
<td>10</td>
<td>Emily</td>
<td>Alison</td>
</tr>
<tr>
<td>11</td>
<td>Shauna</td>
<td>Sally and James</td>
</tr>
<tr>
<td>12</td>
<td>Xuan</td>
<td>Lorna and Andy</td>
</tr>
<tr>
<td>13</td>
<td>Hayley</td>
<td>Tina</td>
</tr>
<tr>
<td></td>
<td>Mohammed(^{42})</td>
<td>Javad and Molly</td>
</tr>
</tbody>
</table>

\(^{42}\) This placement was not officially part of the Safe Accommodation Project, and not formally evaluated. However interviews with those involved were analysed and used to explore key themes.
Appendix 3: Barnardo’s marketing campaign to recruit specialist foster carers

Background

During Year 1 of the Safe Accommodation Project the majority of marketing recruitment activity was carried out by Barnardo’s regional offices as part of ongoing activity to recruit foster carers. The approach taken was to utilise activities and communications (local adverts, enquiry packs, information events etc) set up to recruit non-specialist foster carers by incorporating messages about the need for child sexual exploitation (CSE) and trafficking carers.

During Year 2, however, recruitment was delivered on an England wide basis using national marketing channels to reach the target audience. In planning a marketing approach for Year 2 a number of challenges had to be addressed.

- As a relatively new area of recruitment for Barnardo’s and the sector in general, little recruitment insight was available to draw on
- Results from Year 1 showed that a more direct approach using stand alone communications was required to generate quality enquiries
- Results from Year 1 also highlighted that the content of the role was challenging for many people, especially those with no previous experience of working with young people with complex needs

Approach

In recognition of these challenges the recruitment strategy for 2012-13 involved the following.

- Targeting people with experience of working with vulnerable young people (existing foster carers, youth workers, teachers) and professionals from similar backgrounds (education professionals, social workers, health care professionals, care workers, probation services etc)
- Using specific messaging treating the role as a professional/career development opportunity and using marketing channels that reached the target audience at a time when they might be thinking of applying for a new job or taking on a new challenge (specialist recruitment advertising) and targeting relevant online communities (Community Care, Children & Young People Now)
- Emphasising that the role offered a chance to use relevant skills and experience to make a real difference to a vulnerable young person’s life
- Ensuring all communications were upfront about the content of the role and its potential challenges while emphasising the benefits (being part of professional team, specialised training and support, the chance to draw on Barnardo’s years of experience working with children and families, opportunities for professional development, the chance to make a difference)
- Reinforcing messaging by utilising images and messages from the Barnardo’s ‘Cut them Free’ campaign to end CSE and trafficking and using it across all recruitment activity
Recruitment activities

The following activity was delivered between June and September 2012.

<table>
<thead>
<tr>
<th>News &amp; media</th>
<th>Campaign media launch (coverage included The Guardian, Society Guardian and Fostering Network’s regular publication for foster carers)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Online recruitment advertising</td>
<td>Guardian Jobs</td>
</tr>
<tr>
<td></td>
<td>Jobs Go Public</td>
</tr>
<tr>
<td></td>
<td>Fish for Jobs (North East England)</td>
</tr>
<tr>
<td>Print recruitment advertising</td>
<td>Shropshire Star (Midlands) – jobs section</td>
</tr>
<tr>
<td></td>
<td>Express &amp; Star (Midlands) – jobs section</td>
</tr>
<tr>
<td></td>
<td>Guardian Jobs</td>
</tr>
<tr>
<td>Email marketing (via third party databases)</td>
<td>Community Care</td>
</tr>
<tr>
<td></td>
<td>Children &amp; Young People Now (CYPN)</td>
</tr>
<tr>
<td></td>
<td>Royal Collage of Nursing (RCN)</td>
</tr>
<tr>
<td></td>
<td>Jobs Go Public</td>
</tr>
<tr>
<td>Online advertising</td>
<td>Facebook advertising</td>
</tr>
<tr>
<td></td>
<td>Digital display advertising</td>
</tr>
</tbody>
</table>

Results

| Web hits                                           | 6,121                                                                 |
| Enquiries                                         | 422 \(^{43}\)                                                                 |
| New carers approved for specialist care            | 3 (2 at assessment; 1 approved with placement at time of writing)                                                        |
| Existing Barnardo’s carers approved for specialist care | 19 (11 provided a placement during the project)                                                                                 |

\(^{43}\) The number of enquiries includes those who may have enquired about generic rather than specialist foster care.
Key learning

• The profiles of enquirers and approvals included individuals with backgrounds in rape counselling, probation services, the prison service, an ex-nun and a qualified counsellor. This matches the targeting strategy and therefore demonstrates that there is a definite interest in specialist foster care in the area of CSE and trafficking from people with a professional background/interest in the social and care sector.

• Recruitment activities that involved targeting people in relevant communities of interest – i.e. Guardian Job listing in ‘jobs with children’ section, Facebook advertising targeting people with fostering or youth/social work information on their profiles – were most effective at driving site traffic and enquiries. Conversely, activities such as digital display advertising where audiences may only have had some familiarity with issues generated a poorer response. Any further recruitment activity in this area should focus very specifically on targeting people with relevant experience and go for greater depth of engagement with these communities.

• While there was a significant level of interest in the role, one of the reasons for drop off in interest was the length of pilot funding arrangements. This was a concern especially for people in full-time employment who were considering the role as a career change. Similarly, some people ended their enquiry when they realised it wasn’t a full-time, salaried role. Where recruitment advertising is being undertaken in the future, clearer messaging is required around the conditions of the role (working from home, non-salaried, part-time, actual income, length of contract) to ensure applicants fully understand the package on offer.

• Although marketing messages were upfront about the content of the role and its potential challenges, this continued to be a reason for drop off in interest. Some applicants were reluctant to go any further as they learned more about the issues they may have to confront on a day-to-day basis, and others decided that a non-specialised foster care role would be their preferred option, after finding out more about the role.

• Conversion of existing Barnardo’s foster carers over to the scheme was more successful than cold contacts, highlighting that people who are already professional foster carers with the skills and experience of looking after young people with complex needs and the experience of working flexibly are a warm audience for this kind of work. Any additional work in this area should look at what is required to ensure more foster carers are able to take on such specialist roles.
### Role, where given, on training evaluation forms

*Where foster carers also stated a professional role they are counted twice*

*Categorised from free text written by respondents*

<table>
<thead>
<tr>
<th>Role</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster carer</td>
<td>352</td>
</tr>
<tr>
<td>Social worker</td>
<td>73</td>
</tr>
<tr>
<td>Senior practitioner/senior social worker/fostering social worker</td>
<td>41</td>
</tr>
<tr>
<td>Senior/residential childcare worker</td>
<td>34</td>
</tr>
<tr>
<td>Young person/family support worker</td>
<td>15</td>
</tr>
<tr>
<td>Student social worker</td>
<td>13</td>
</tr>
<tr>
<td>Residential homes manager/deputy</td>
<td>12</td>
</tr>
<tr>
<td>Foster carer assessment, recruitment, training</td>
<td>11</td>
</tr>
<tr>
<td>Team manager/assistant team manager</td>
<td>8</td>
</tr>
<tr>
<td>Personal advisor/leaving care worker</td>
<td>10</td>
</tr>
<tr>
<td>Administrator</td>
<td>6</td>
</tr>
<tr>
<td>Children’s services manager</td>
<td>5</td>
</tr>
<tr>
<td>Reviewing officer</td>
<td>4</td>
</tr>
<tr>
<td>SRCCW</td>
<td>4</td>
</tr>
<tr>
<td>Volunteer</td>
<td>4</td>
</tr>
<tr>
<td>CAF lead</td>
<td>2</td>
</tr>
<tr>
<td>Child care officer</td>
<td>2</td>
</tr>
<tr>
<td>Foster carer family member</td>
<td>2</td>
</tr>
<tr>
<td>Strategy/development</td>
<td>2</td>
</tr>
<tr>
<td>Others (each recorded once): Apprentice, Children’s placement manager, Clinical psychologist, CP chair, CYPF worker, Duty caseworker Youth support team, Duty placement officer, Education support officer, Family link worker, IASC worker, IYSS manager, Kinship carer, Missing persons coordinator, Night duty officer, NQ social worker, Operations manager, Practice manager, RCN, Recruitment officer, SSA, Supported lodgings provider</td>
<td>21</td>
</tr>
</tbody>
</table>
Appendix 5: Key contexts affecting the outcomes of specialist foster placements

The following is a list of the most significant contexts affecting the outcomes associated with the specialist placements.

Carer

- Carer trained and understands CSE/trafficking
- Carer experienced with young people
- Carer confidence, commitment, compassion, and ability to cope
- Carer feels supported
- Carer availability

Young person (YP) strengths, vulnerabilities and experiences

- YP high risk of CSE/trafficking/in contact with risky adults
- YP poor previous experience of care
- YP high risk of going missing
- YP little or no English
- YP age/proximity to 18
- Uncertainty about YP’s age, experiences, needs
- YP presents challenging behaviour (stealing, manipulation, drug or alcohol misuse, offending behaviour)
- YP with complex emotional needs (bereavement, low self-esteem, sexual abuse, neglect, domestic violence, difficult relationship with family, rape, post-traumatic stress disorder, poor mental health, difficulty sleeping, anxiety about immigration status)
- YP potential debt bondage/need to make money
- YP disengaged from education
- YP resilient
- YP pro-education/ambitious
- YP presents no challenging behaviour

Young person’s desires

- YP does not share professional view of risk-taking behaviour/safety/YP readiness and desire for change
- YP accepting/rejecting of professional support (doesn’t understand/want counselling)
- YP desire for family/non-family placement
- YP desire for independence and freedom

Family, friends and community

- Friends and family present risk to young person/YP strong attachment to risky friends/family
- Friends and family undermine/are supportive of placement
- YP has strong attachment to risky area/community
- No accessible family
Other agencies
- Professionals’ level of understanding of CSE/trafficking
- Appropriate educational placement available
- Systems of support are overwhelming to YP
- Lack of a shared view/approach/assessment of risk
- Social worker capacity to provide consistent responsive support
- Information sharing (or lack of)
- Appropriate local safeguarding processes (or lack of)
- Appropriate interpreter available
- Appropriate Independent Reviewing Officer
- Availability of counselling/CAMHS support
- Availability of post-18 support

Placement
- Location of placement relative to exploitative others
- Planned/emergency placement
- Other siblings in home/1-1 environment
- Location presents new risks/opportunities
- Uncertainty about future of placement
- YP care status

Barnardo’s
- High level of support for carer
- Time needed to build trusting relationship
- Project worker capacity to respond quickly (local)
- Project worker background and experience
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