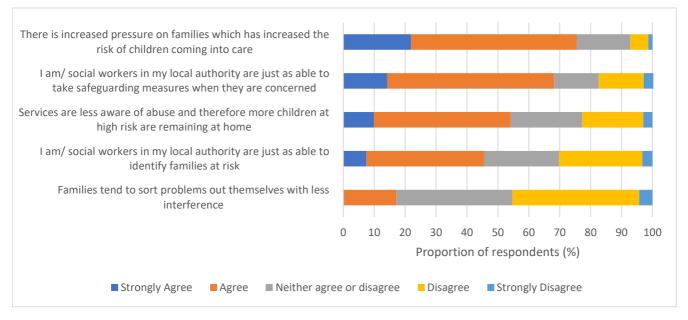
The Coronavirus pandemic and children's social care practice

The Coronavirus pandemic has severely disrupted how children's social services operate and the way social workers work with families, but it is still unknown what impact this is having on social workers' ability to keep vulnerable children safe.

This briefing is concerned with how the pandemic has impacted children's social care practice in Wales. It originated from a larger piece of work funded by the Welsh Government, which surveyed leaders and social workers in children's social care to understand why there is variation in rates of children looked after among local authorities (Forrester et al., 2021). The research was conducted as a collaboration between the Wales Centre for Public Policy (WCPP) and the Children's Social Care Research and Development Centre (CASCADE) at Cardiff University.

Respondents (n=792)¹ were asked five Likert scale questions and one open-ended question about how the pandemic has affected their practice, with a particular focus on perceived impact on care rates but not confined to this. Both sets of data are reported on here, with responses to the closed question marked as such and all other responses referring to the open question. Three key themes emerged from the responses: increased pressure on families, challenges in responding to this, and problems for children in care.

Figure 1. Proportion of response to the question "Compared to before the pandemic, I/ social workers in my local authority* now feel that..."



^{*}Leaders were asked what social workers in their local authority would do, instead of what they would do.

¹ This figure excludes respondents who identified their role as "administrative, other".

Increased pressure on families

Three-quarters (76%, n= 506) of respondents agreed or strongly agreed in the closed question that the pandemic has increased pressure on families, which, in turn, has increased the risk of children coming into care (Fig.1). Respondents highlighted various challenges leading to increased pressure on families; these related to financial problems (such as unemployment) (n=50), parenting in isolation (n=74), lack of access to universal services (n=72), mental health and wellbeing difficulties (n=44), and existing family problems being exacerbated (n=78).

The impact of parenting in isolation

The impact of parenting in isolation and in difficult circumstances was clear. Respondents pointed to a lack of breaks influencing parents' and carers' abilities to keep children at home. Some reported that the increased time spent at home and in isolation had strained relationships, contributing to family breakdown in some cases. Respondents commonly mentioned relationship breakdowns, as well as conflict between teenagers and parents. Several respondents indicated tensions between teenagers and their parents/carers owing to breaking lockdown guidance and engaging in risk-taking behaviour as a result of boredom and frustration:

"We had examples of young people assaulting parents and other members of the family unit, which resulted in [young people] being accommodated due to family stress and inability to cope."

Lack of access to universal services

Many participants highlighted the impact of reduced universal services, such as midwifery, health visitor visits, and school closures. This made vulnerable children less visible, with social services less able to monitor children and detect concerns about their welfare. By the time concerns were identified, they were more likely to have escalated beyond a point where children could stay at home. Although attempts were made to keep in touch with vulnerable children, one respondent noted that the disruption to children's relationships with professionals whom they trust made it more difficult for abuse to be identified.

Mental health and wellbeing

The impact of the pandemic on mental health was a key concern. Respondents described deteriorating mental wellbeing within families in relation to being isolated from friends and extended family. Parental mental health was mentioned relatively frequently; children's mental health issues less so, although some described the impact on children caused by the disruption of normal family routines and isolation from friends. It is worth noting the interplay between children and parents' mental wellbeing. For example, deteriorating behavioural problems among teenagers was thought to have led to a knock-on effect on parental mental health.

Existing family problems exacerbated

Families were felt to be struggling with existing issues that had been exacerbated by the pandemic. These were commonly described as new stressors aggravating an already precarious situation at home. This escalation was described in terms of a perceived increased in the number of referrals.

Challenges in responding

Respondents highlighted challenges in responding to the increased pressure placed on families. Challenges included identifying families at risk, working with families (n=125) and providing support services (n=93).

Identifying families at risk

Over half of respondents (54%, n=362) were less confident that services were aware of abuse now, compared to before the pandemic. Almost half (46%, n=305) felt less confident about identifying families at risk in response to the closed question. However, if respondents were concerned about a family, most (68%, n=456) felt just as able to take safeguarding measures (Fig.1). T-tests found significant differences in the mean responses between leaders and workers. Leaders were more confident than workers that risks are being identified and responded to² and that workers are just as able to take safeguarding measures when concerned about a family.3 Leaders were less likely than workers to believe that services are less aware of abuse than before the pandemic.4

Working with families

Many respondents highlighted the impact of pandemic restrictions on social workers' ability to provide high-quality services to families. They highlighted two key areas: the reduced opportunity to do "direct work" with families, and a negative impact on assessment and decision-making.

These challenges resulted in delays to working with families and a sense that progress was slower. Other respondents outlined the difficulties of using virtual methods to assess risks, parenting capacity and change over time. This meant that social workers felt they were

operating with less information than they would under normal circumstances. A few felt this led to an increase in risk-averse approaches:

"Less ability to properly assess and spend time with families, which means that when there is an incident we are more likely to make a risk-averse decision."

Providing support services

Many respondents were concerned about a reduction in the support services usually available to families resulting in "late intervention". This means risks not being identified early enough for professionals to work with families and de-escalate crises before situations become so unsafe that children are taken into care.

Problems for children in care

Responses indicated that as well as the perceived increase in the numbers of children entering care because of the pressures outlined above, they felt fewer children are likely to have left care during the pandemic and their experience while in care may have changed.

Respondents described delays to permanence, including plans for reunification and rehabilitation being postponed (n=38), and court timelines (n=18), as well as reduced or disrupted contact between children and their birth families (n=75), increased placement instability (n=13), and placement shortages (n=29).

 $^{^{2}}$ (t(667)= 2.3, p= .020)

 $^{^{3}}$ (t(667)= 3.0, p= .002)

 $^{^{4}}$ (t(667)= -3.4, p= .001)

Delays to reunification and court proceedings

Plans to reunite children with their birth families, and/or to revoke care orders were found to have been put on hold or deprioritised. Some delays in children moving on to permanent alternatives were also reported. Reasons for this included: constraints on home visiting preventing work with parents, and restrictions on families mixing with other households. Some respondents commented on delays to court proceedings, attributed to the courts prioritising higher-risk cases, lack of court time available, Cafcass guardians not carrying out visits, and discharge applications not being prioritised.

Disrupted contact with family

A major impact of the pandemic for children in care was contact with their families being suspended or disrupted. Respondents described the limitations of contact being conducted by video call instead of face-to-face.

Several respondents suggested that the reduction in contact had a negative impact on the mental health and wellbeing of children and parents, with one respondent recounting that a child had told them "mummy lives in the phone now".

Issues of stability and reduced placements

Some respondents felt rates of placement breakdown had risen, along with increased instability in placements that were ongoing. Reasons for this included the increased pressures on families outlined above also affecting carers; and foster carers and residential placement providers being unable to cope with teenagers' behavioural issues and mental health problems, which were believed to have worsened since the pandemic.

Respondents highlighted a general shortage of placements exacerbated by the pandemic. Some respondents specifically mentioned a

shortage of foster carers, because some foster carers have needed to shield or self-isolate owing to health concerns. Respondents indicated that placement shortages have resulted in a lack of choice over placements and less appropriate placements being used.

It is worth noting that recent statistics published by the Welsh Government do not support these suggestions. The number of children with three or more placements within a year decreased slightly in 2020, compared to the previous four years (Welsh Government, 2021).

Reflections

These findings suggest that children's social care workers are trying their best to adapt to and work under very difficult circumstances.

Nonetheless, children's social care practice in Wales has been profoundly impacted by the pandemic. This has implications for families, children, and the children's social care workforce. In particular:

- Families, especially those already considered vulnerable, are thought to be under increased pressure as a result of the pandemic.
- There are grounds to suspect that there is a backlog of problems and that there will be a surge in demand for children's social services over the next few months. This may lead to an increase in rates of children in care in the longer term.
- As we move from dealing with the acute challenge of public health and the lockdown in Wales, children's social services will be dealing with the longer-term social harms caused by the pandemic.

References

Forrester, D., Wood, S., Waits, C., Jones, R., Bristow, D., and Taylor-Collins, E. (2021). Children's social services and care rates in Wales: A survey of the sector. Wales Centre for Public Policy.

Welsh Government (2021a). Ad-hoc statistical requests: 15 to 26 February 2021. Retrieved from: https://gov.wales/ad-hoc-statisticalrequests-15-26-february-2021

Find out more

Forrester, D., Wood, S., Waits, C., Jones, R., Bristow, D., and Taylor-Collins, E. (2021). Children's social services and care rates in Wales: A survey of the sector. Wales Centre for Public Policy.

About the Wales Centre for Public Policy and CASCADE

The Wales Centre for Public Policy collaborates with leading policy experts to provide ministers, the civil service and Welsh public services with high quality evidence and independent advice that helps them to improve policy decisions and outcomes.

Funded by the Economic and Social Research Council and Welsh Government, the Centre is based at Cardiff University and a member of the UK's What Works Network.

CASCADE's mission is to improve the wellbeing, safety and rights of children and their families.

They do this by generating new knowledge about children's social care and sharing new and existing knowledge in ways that help services.

For further information contact:

Emma Taylor-Collins

+44 (0)29 2087 5345

UNIVERSITY

emma.taylor-collins@wcpp.org.uk

Wales Centre for Public Policy

Cardiff University, 10/12 Museum Place, Cardiff CF10 3BG



www.wcpp.org.uk



029 2087 5345



@WCfPP





