SHAPING STRONGER FAMILIES IN ENGLAND AND KENYA

Jane Thompson



RAILWAY CHILDREN FIGHT FOR VULNERABLE CHILDREN WHO LIVE ALONE AND AT RISK ON THE STREETS, WHERE THEY SUFFER ABUSE AND EXPLOITATION. WE PROVIDE PROTECTION AND OPPORTUNITY FOR CHILDREN WITH NOWHERE ELSE TO GO AND NOBODY TO TURN TO. EVERY DAY WE FIGHT TO CHANGE THEIR STORY.

Acknowledgements

Thanks to the families who agreed to be featured in this report and to the teams at SAFE@LAST and Undugu Society of Kenya who worked with them. Images are not of families featured in this report. All names and some details have been changed to maintain confidentiality. Special thanks to Michelle Hellewell from SAFE@LAST, Mary Gatama from Railway Children Africa, Dr Sarah Thomas de Benitez, and Sylvia Reyes from JUCONI Ecuador.





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Registered charity no: 1058991 October 2016 ©Railway Children 2016 ISBN: 978-0-9563998-8-5

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1. INTRODUCTION

Railway Children works in India, East Africa and the UK with children alone and at risk on the streets. These children are among the most vulnerable in any society, and are often not reached by services designed to protect them (Off the Radar, 2009). Even though the cultures they live in are very different, their reasons for leaving the family home are similar. Our accumulated work over 20 years, engaging with street-involved children and documenting their lives and experiences,¹ has shown convincingly both that family conflict is a key driver and that families have a vital role to play in achieving lasting change.

Railway Children was part of the 'Safe Families, Safe Children' coalition, a group of non-governmental organisations (NGOs)² that produced 'Breaking the Cycle', a toolkit for working with the most excluded and violent families. The Safe Families, Safe Children approach is based on a model developed by JUCONI: a model found through interventions in Mexico and Ecuador to be consistently successful in repairing relationships and reintegrating families whose children are living on the streets.³ In 2010 Railway Children funded our partner, Undugu Society of Kenya, to adopt elements of this model, supported by JUCONI staff. In 2015 this was rolled out to another partner, SAFE@LAST in England. The model contends that the consequences of insecure attachment and trauma can be overcome if the child and parent have the opportunity to experience a reliable attachment which provides them with the experience of being thought about and being able to depend on someone else no matter what happens. This provides the foundation that enables them to process past experiences, and to apply that learning both individually and as a family unit.

This report examines the learning from a total of six interventions, with three families in Nairobi (Kenya) and three in South Yorkshire (England), using the Safe Families Safe Children approach. The families had all had substantial levels of support and consented to their stories being used.

ALTHOUGH NAIROBI AND SOUTH YORKSHIRE ARE VERY DIFFERENT PHYSICAL ENVIRONMENTS, FAMILY DYNAMICS WERE SIMILAR IN THAT CONFLICT AND POOR COMMUNICATION LED TO CHILDREN LEAVING THE FAMILY HOME, EITHER REPEATEDLY OR FOR LONG PERIODS.

The intensity of poverty and violence in Nairobi was far greater, but the risks that children and young people were exposed to outside the family home were similar: physical and sexual abuse and drugs.

The concluding section discusses potential policy implications of applying the Safe Families Safe Children approach more widely — beyond families whose children have become street-involved, to families experiencing other kinds of multiple disadvantage that are not reached by or not responsive to current service provision.

- ² The coalition was a group of internationally renowned organisations working globally with the most excluded children. For a full list of members, see Safe Families Safe Children (2011), p9.
- ³ For more details about JUCONI's award-winning work, visit www.juconi.org.mx and www.juconi.org.ec Awards include UNICEF Family Award 2008 and International Service Award for the Defence of Children's Rights 2010.

¹ Struggling to Survive (2012), Reaching Safe Places (2014)



2. THE CONTEXT FOR FAMILIES IN ENGLAND AND KENYA

2.1 INEQUALITY AND WELLBEING

Kenya is a very unequal country:⁴ 42% of the population live below the poverty line, and children in urban informal settlements are particularly badly affected. Children under 18 make up nearly half of the population. Violence is prevalent in their communities and homes: 48% of 13-17 year olds experience violence at the hands of relatives, authority figures or intimate partners (VAC survey, 2012). Those who take to the streets to escape find further violence there, and brutal murders of street children are not uncommon. There is no reliable data on the numbers of children living and working on the streets in Kenya, but estimates have suggested more than 60,000 in Nairobi alone, and 250,000 across the country (IRIN, 2007).

Famine, drought and poor sanitation are not issues that affect families in England, but the UK, like Kenya, is an unequal society:⁵ it has one of the highest child poverty rates in the industrialised world, and widening gaps in child wellbeing (UNICEF, Report card 13, 2016). 100,000 children under 16 are estimated to run away from home or care each year, with 18,000 sleeping rough or with someone they have just met (Rees, 2011). Recent high-profile prosecutions and serious case reviews in Rochdale and Oxford have demonstrated a link between going missing from home or care and becoming a victim of child sexual exploitation. Children may be less visibly 'on the streets' in England than in Kenya, but those children who run away, are homeless or are sleeping rough in England and the UK are similarly at high risk of abuse. In the 16-24 age range, an estimated 1.3 million young people have slept rough or somewhere unsafe (Clarke et al, 2015) and frontline providers of services consistently report far higher levels of need than are captured in government homelessness statistics (Homeless Link, 2015). Numbers of children looked after by the local authority have been rising steadily (69,540 in 2014/15) and are at their highest levels since 1985 (Children in Care in England: Statistics, 2015). The same report notes that although abuse and neglect are the most common reasons for children coming to the attention of social care services, numbers of children becoming looked after because of family dysfunction has increased.



2.2 SERVICES AVAILABLE TO CHILDREN AND FAMILIES

In recent times there have been many initiatives to support disadvantaged families in England and the UK, the latest of which is the Troubled Families Programme (TFP), launched by David Cameron, the then Prime Minister, in 2011, in the wake of summer riots that year:

'Whatever you call them, we've known for years that a relatively small number of families are the source of a large proportion of the problems in society. Drug addiction. Alcohol abuse. Crime. A culture of disruption and irresponsibility that cascades through generations. We've always known that these families cost an extraordinary amount of money but now we've come up the actual figures. Last year the state spent an estimated £9 billion on just 120,000 families...that is around £75,000 per family.'

The rhetoric of the Troubled Families Programme (TFP) is economic and accusatory rather than therapeutic and inclusive.

TROUBLED FAMILIES PROGRAMME SUGGESTS THAT FAMILIES' PROBLEMS ARE OF THEIR OWN MAKING AND CAN BE SOLVED BY EDUCATION AND WORK. CRITICS OF TFP DISPUTE THIS, POINTING TO CONSISTENT EVIDENCE OF NEGATIVE EFFECTS ON CHILD WELL-BEING OF STRUCTURAL FACTORS SUCH AS INEQUALITIES AND POVERTY (CROSSLEY, 2015), AS WELL AS TO CIRCUMSTANCES OVER WHICH PARENTS HAVE LITTLE CONTROL, SUCH AS RISING UNEMPLOYMENT (LEVITAS, 2012).

In practice, many service providers have rejected the stigmatising 'troubled' tag, using instead positive terms such as 'Think Family' or 'Families First'. Giving families a dedicated key worker was found to be positive in evaluations of earlier family initiatives (Scott, 2006; White et al, 2008) and it is this that is most often highlighted when providers report achieving positive outcomes for families,⁶ though the outcomes for which providers are paid are rather rigid: getting adults into work, children into education and reducing anti-social behaviour.

In Kenya, government initiatives to support families are mainly economic alleviations that do not address the conflict and violence that can be happening within those families. These are delivered in partnership with NGOs and include Cash Transfer programmes and Micro Credit schemes. There is a heavy reliance on charitable initiatives, which are often run by churches, and self-help groups within communities, meaning that provision is variable.

The government employs Children Officers but their role is largely administrative:

- warning parents whose children have been in trouble in the community to supervise them better
- putting families forward for economic support if needed
- trying to find local groups or charities to take in abandoned children

⁴ The Gini coefficient measures income inequality across a country's population, where 0 is perfect equality and 1 is maximum inequality. Kenya's Gini coefficient is high, estimated at 0.445 (Kenya National Bureau of Statistics, 2013)

⁵ The UK's Gini coefficient is high among OECD countries, at 0.351. OECD (2016), Income inequality (indicator). For further discussion of negative social impacts of inequality in OECD countries, see Wilkinson and Pickett (2009) The Spirit Level.

⁶ Holmes (2015) in Social Work with Troubled Families, ed Keith Davies



In each locality there are Area Advisory Councils that are linked with the Children Officer. Area Advisory Councils (AACs) compromise Children Officers, representatives from NGOs and the private sector, and children themselves. The Council's mandate is to identify and link children in need to agencies and structures, as well as respond to child abuse and violation of children's rights in the location. However, there is a lack of resources to support the work of the AACs.

In 2014, Kenya's government launched Alternative Care Guidelines for children in Kenya,⁷ to support children outside of parental care. The alternative care system is largely offered by Charitable Children's Institutions (CCIs), whose efforts to reintegrate children with their families are limited. CCIs are the first resort for children rescued from family poverty, family disintegration and/or displacement, and although the Alternative Care Guidelines recognise the need for reintegration of children, there are no mechanisms in place to achieve this other than one visit to the family to take the child home. Many children remain in institutions despite having a parent or extended family,⁸ and little or no follow-up support is provided to ensure that children who are returned stay at home with their family. The services provided to families are disjointed, and mostly focus on the physical and economic aspects: little is offered to support families' relational strengthening and emotional wellbeing.

Children who go missing and/or end up on the streets need the most effective interventions to protect them and prevent the cycle being repeated, and rebuilding relationships within families is key to this. Family initiatives in Kenya are largely economic; initiatives in England conflate 'troubled' and 'troublesome' and their effectiveness is unclear.

BY USING A STRONG AND EXPLICIT THEORETICAL FRAMEWORK AS THE BASIS FOR OUR FAMILY WORK, AND IMPLEMENTING IT IN TWO VERY DIFFERENT COUNTRIES AND CULTURES, WE AIM TO SHOW THAT, WHILE POVERTY IS RELEVANT, POVERTY ALONE CANNOT EXPLAIN WHY SOME CHILDREN END UP ON THE STREETS AND OTHERS STAY WITHIN THE FAMILY HOME. OUR HYPOTHESIS IS THAT PAST TRAUMA, VIOLENCE AND FAMILY DYSFUNCTION ARE KEY DRIVERS AND THAT THE MOST EFFECTIVE APPROACHES ARE THOSE, LIKE SAFE FAMILIES SAFE CHILDREN, THAT SEEK TO IDENTIFY AND ADDRESS THAT UNDERLYING TRAUMA.

8 http://www.unicef.org/about/annualreport/files/Kenya_COAR_2013.pdf

⁷ http://www.bettercarenetwork.org/sites/default/files/Guidelines%20for%20the%20Alternative%20Family%20 Care%20of%20Children%20in%20Kenya.pdf

3. THE 'SAFE FAMILIES, SAFE CHILDREN' (SFSC) APPROACH

SFSC's approach is based on the JUCONI model, which in turn draws heavily on attachment theory and trauma theory. Attachment theory was first posited by Bowlby in 1958, and with research has continued to be refined and developed.⁹ It posits that infants must form an attachment with their caregiver to ensure their survival and are therefore biologically driven to do so. The quality of this attachment can be secure and comfortable or can require the child to develop a self-protection strategy to ensure their parents provide them with basic care. For example to be unnoticed (in a dangerous relationship) or to be noticed (in a situation where they face neglect).

THE TYPE OF RELATIONSHIP DEVELOPED WITH THE PRIMARY CARE GIVER INFORMS THE WAY THAT EACH PERSON EXPECTS THEIR OTHER RELATIONSHIPS TO DEVELOP AND CAN SOMETIMES LEAD TO REPEATED PATTERNS OF VIOLENCE AND NEGLECT WHERE THIS WAS THE EXPERIENCE OF THE PARENT IN THEIR OWN CHILDHOOD.

When a child is emotionally contained and thought about by their parent in a 'good enough'¹⁰ way they are able to develop a secure attachment with their parent. Secure attachments are associated with resilience and good social functioning.

Parents who experienced insecure attachment as children are at risk of repeating this with their own children which can cause intergenerational cycles of difficulty. If they did not have their own needs met, they may find it very difficult to respond positively to their children's needs or even to perceive their needs (Baumrind, 1994).

Trauma theory seeks to explain the effect of ongoing and persistent negative attachment responses, coupled with the effect of violence or abuse:

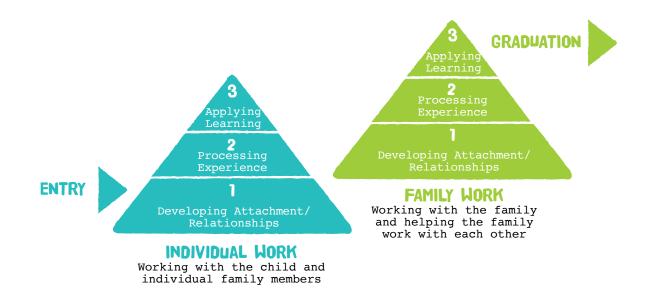
''Trauma' has a specific meaning which should not be confused with other uses of the term: it refers to the effect of chronic violence and transgenerational failures of attachment on children's physical, psychological and social functioning.' (Schrader McMillan & Herrera, 2014, p8)

WE KNOW THAT REPEATED EXPOSURE TO VIOLENCE AFFECTS BRAIN DEVELOPMENT AS WELL AS SOCIAL AND EMOTIONAL DEVELOPMENT (EDWARDS ET AL, 2005) SO THAT THERE ARE NOT ONLY SOCIAL, BUT ALSO WIDELY RESEARCHED NEUROBIOLOGICAL EXPLANATIONS, FOR THE ONGOING DIFFICULTIES THAT CHILDREN EXPOSED TO VIOLENCE CAN EXPERIENCE.

JUCONI's therapeutic responses to this draws on their model using trauma theory and attachment theories as their basis. A premise of this is that 'to attend and resolve the effects of trauma, a person first needs to experience safety in the form of a positive, enduring relationship with a reliable, responsive and caring person' (Schrader McMillan and Herrera, 2014, p9).

⁹ For more detail on the different forms of insecure attachment, disorganised attachment and its consequences into adulthood see Ainsworth and Bell (1970) and Main et al (1985). ¹⁰ The concept of 'good enough' is defined by Winnicott (1973). Key workers provide a transitional attachment for each parent and for each child until such time as parents and child are able to begin to shift their own attachments with each other to become more positive and secure.

The model has three parts: creating and modelling the secure attachment that the person has never had; using appropriate tools and techniques to enable the person to process their painful experiences; and applying the learning from the first two stages to achieve lasting change. This is done both with each individual and then, once people have had their own emotional needs met, as a family group, in accordance with family systems theory, which sees the family as an emotional unit where individual actions affect other members. JUCONI have found that to enable sustainable change to occur with the most excluded and violent families, it is necessary to work carefully through all stages with the bottom parts of the model remaining important throughout the work with a family as this supports later work.



This diagram was developed by JUCONI Ecuador based on their experiences of working with street-involved families and children, was used by the Safe Families Safe Children coalition, and is reproduced with the permission of JUCONI Ecuador.¹¹

Railway Children's analysis is that the focus on addressing underlying trauma and rebuilding family relationships makes this approach particularly suitable for the children and families we work with who are not reached by existing services. Our partners Undugu Society of Kenya and SAFE@LAST have been using elements of the model since 2010 and 2015 respectively. Undugu's family work has been evaluated using Social Return on Investment methods and found to generate a social value of 5.13 Kenyan shillings for every shilling spent.¹²

¹¹ JUCONI Ecuador's latest model of practice can be viewed at http://www.juconi.org.ec/?page_id=11
¹² Intensive Family Work to Support Street Connected Children in Nairobi, Kenya: A Social Return on Investment Evaluation (2015)

About our partners

SAFE@LAST is a charity in South Yorkshire, founded in 1998 to help young people who run away from home or care. They provide a helpline, ongoing one-to-one support for young people and their families and an education and prevention programme.

Undugu Society of Kenya (USK) is a non-governmental organisation that works to empower children living and working on the streets, vulnerable youths and marginalised rural and urban communities. It delivers education and training, as well as economic empowerment initiatives to support marginalised families and communities and prevent their children from going to work or live on the streets.

This report focuses on the family work carried out in each organisation. In Nairobi, a two year programme was carried out, while interventions in South Yorkshire were a minimum of nine and a maximum of 18 months. Descriptions and analysis are based on case files, outcome measures and interviews and feedback from staff working directly with the families. Throughout, all names and some details have been changed to protect confidentiality. These cases are purely opportunity samples (ie using families who consented) but workers have indicated that the issues discussed reflect issues they come across regularly.

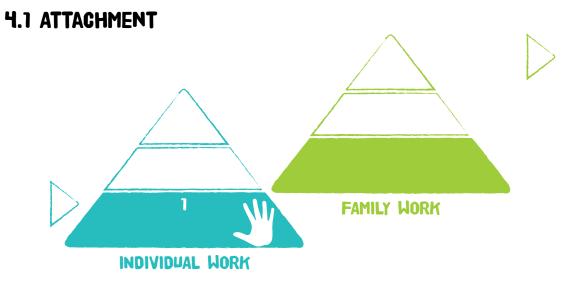
THIS REPORT HIGHLIGHTS THE SPECIFIC ACTIONS THAT WORKERS TOOK, AND THE CHANGES THEY OBSERVED, AS THEY CONSCIOUSLY APPLIED THE SAFE FAMILIES SAFE CHILDREN APPROACH OF CREATING ATTACHMENT, PROCESSING PAST TRAUMA, AND APPLYING LEARNING.



4. APPLYING THE SFSC Approach in England and Kenya

There are very obvious differences in the contexts within which workers from Undugu Society of Kenya and SAFE@LAST engaged with children and families. In Kenya, some of the families lived in informal settlements near open sewage, and were struggling to provide meals for the family. The children featured in this report were already working and/or living on the streets when they were taken to a place of safety, and almost all had experienced physical or sexual abuse. In the UK, the material circumstances of families were better, but the children featured were all going missing from home, sometimes for several days at a time. Two were on the brink of entering the care system, and one was considered by police to be at very high risk of sexual exploitation.

Undugu applied the framework in the recommended three stages: separately with the child and parent, and then with the family. As there were no other services for families in the area, there was no-one else to provide any of these stages. In England, SAFE@LAST used the three stages with parents but were operating in an environment where some of the young people in families were already receiving other services that were not using this approach. When referencing SAFE@LAST work, this report concentrates on this parental aspect.



Objective: 'to provide each member of the family – children and parents – with a reliable, positive relationship which mirrors that of a positive parent-child relationship, and which can then begin to inform the quality of other relationships in their lives'.¹³

Methods of creating and modelling attachment were common to all the work with children and parents. These were:

- having the same worker visit regularly
- giving individual attention
- actively listening and remembering what the person has said: 'holding them in mind'

In Nairobi, workers visited at the same time and day every week. The children had been living or working on the streets for many months, and building up the relationship took time. Workers were reliable, found out about their favourite things and remarked on things they were good at.

Peter (12) and David (13) were visited once a week. At first, Peter refused to say anything about his experiences. He was very quiet, while his brother David was often aggressive with other children in the centre. Neither child wanted to talk about their family, but they both loved playing games with the worker who visited. By listening carefully to them and finding out about their likes and dislikes, the worker was able to understand their world and model a caring relationship. It was three months before they started to talk about their family, using miniatures that the worker had brought.

This pattern repeated with other children the teams worked with in the Undugu centre. In time, Priscilla (11) revealed to a worker that she and her sister had been sexually abused by a man in their neighbourhood, but hadn't told their mother as the man had threatened them. Jared (14) told a worker about sniffing glue and smoking bhang (marijuana) while he and his 13 year old brother were living on the streets.

With parents in Nairobi, this relationship-building stage was usually accompanied by an offer of practical help. As detailed in section 2, poverty is a major problem in Kenya, services to help families are poorly resourced, and many families are unable to access the limited economic support that is available. Some families were only managing to provide one meal a day. They received a food basket and, where appropriate, help with school fees and uniform. Responses to this contact varied. One mother, who was bringing up four children on her own, said she was glad to have someone who would understand her situation. Others, like Joseph, were harder to engage.

Jared's father, Joseph, was proud of being feared at home and in the community and would beat his wife and children for minor transgressions. This had driven the older boys onto the streets. When the team first approached him, he denied that the boys were his, and in subsequent visits told workers many things about himself which proved not to be true. The workers persevered and visited on the same day at the same time for six months. Joseph then told them that he had been born outside marriage and had gone to the streets at a similar age to his sons.

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SAFE@LAST applied the same principles of creating and modelling attachment in South Yorkshire. Responses were tailored to the parent's needs and the circumstances that arose, for example:

- providing support at short notice
- continuing to offer non-judgmental support when a parent physically assaulted her daughter (whilst reporting, and not condoning, the incident)

Carol's daughter, Sophie, (15) was going missing regularly, sometimes

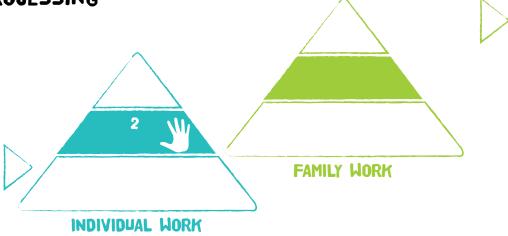
• supporting a parent to look after her own physical and mental health better by seeing her GP

staying away for days at a time with friends and older boyfriends. Both Carol and the extended family were very vocal that the problem was Sophie's behaviour, and there were high levels of blame and anger. The worker was alongside Carol as she went through this time, often changing her schedule at short notice to visit her when Sophie went missing, or phoning or texting her when a visit wasn't necessary. On one occasion, she and a colleague persuaded Sophie to come home and then managed that return together, staying with the family and modelling a calmer way to resolve conflict. Over time, Carol used the support from the worker to manage and lessen her stress and her language changed from 'I'm going to kill her' to 'I'm worried about her'.

Throughout, parents were encouraged to recognise their own strengths and to model a different way to respond and communicate in stressful situations.



4.2 PROCESSING



Objective: 'To help each family member process past experiences to gain insight into their current situation and develop a sense of hope'.¹⁴

Effective processing of past experiences can only happen when the child or parent has experienced safety and a strong attachment has formed. There are a variety of tools and techniques that can be used, many of which are very simple and yet very effective. The emotional thermometer is a visual way of identifying how in control you are feeling and indicating that to others using traffic light colours. If you are at green then you are easily maintaining control of your emotions; at red you are losing control. Just being able to recognise and express this can be useful in preventing conflict.

Workers introduced the emotional thermometer to Peter and David and their mother, Miriam, separately, so each could get used to recognising and expressing how calm or angry they were feeling. In the past many hurtful things had been said, which had often escalated into physical violence. Using the thermometer helped them to identify how they and other people were feeling and know when it was a good or bad time to communicate. Alongside this, the children talked about the family using miniatures to represent the different members and used a scoring scale (0-10) to identify and discuss their best and worst experiences.

The genogram was also used extensively in both countries, and provided valuable insight into families within a relatively simple framework. A genogram is similar to a family tree, and also depicts the quality of relationships between family members. Being able to stand back and map out a family history provided key moments of insight for families and workers alike in a practical and non-invasive way.

In each country, it was unusual for parents to have reflected on their own childhood experiences and wider family before the genogram. The prevailing view was usually that their child's behaviour was the problem and needed to be fixed. Use of the genogram created a visual map of networks and relationships that seemed to help parents locate themselves within that framework, and see generational patterns, rather than projecting everything onto the child.

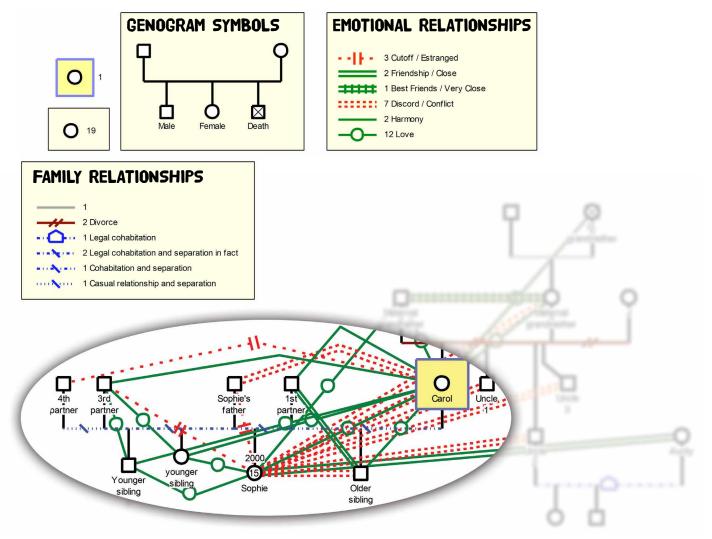
¹⁴ Safe Families, Safe Children (2011), p34

The worker at SAFE@LAST believed that the genogram could accelerate disclosure and understanding, and observed a difference in cases she had worked on before starting to use these tools and those she worked on after. Debbie is a good example of this, as her genogram triggered a significant disclosure after four months of visits.

Debbie's genogram showed a fractured relationship with her mother. She explained that she had spent much of her childhood with relatives because of her mother's mental health issues. She then disclosed that she had been raped when she was 13 and had not got the support she needed from her mother at the time. Debbie had tried to commit suicide soon after, and had suffered with mental health issues ever since. In adulthood, she was drug dependent for many years. Her daughter Zoe was now 13, and their relationship was tense and fractious, partly because of restrictions Debbie was trying to apply.

Through guided exploration, with the genogram as the starting point, Debbie began to realise how much the sexual abuse underpinned her current feelings and reactions. The worker modelled the care and reassurance that she should have received from her mother after the attack, supporting her to name it as rape, a word she had never used, and confirming that it should not have happened. Debbie realised that her anxiety about Zoe going out was rooted in the abuse she had suffered and although she still felt fearful for her, she was able to manage these feelings and situations better. ENGLAND

CAROL'S GENOGRAM AT THE START OF THE WORK

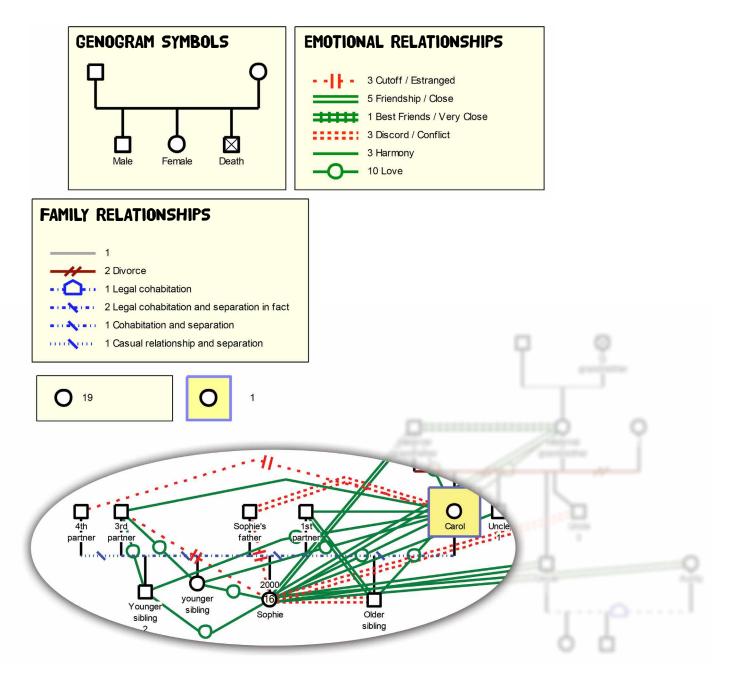


Some ages and dates have been removed for reasons of confidentiality.

What is striking about this genogram is the number of red lines (indicating conflict) that emanate from Sophie. This highlights the levels of anger on both sides and the lack of positive regard towards her within the extended family. As her isolation increases, she goes missing for longer periods. Carol had already told the worker that Sophie said that she felt isolated and different from the rest of the family. Carol put this down to her unsatisfactory relationship with her birth father, who had an alcohol problem. While there is conflict between Carol and Sophie's father and the 4th partner, the relationship with the two other fathers is harmonious, and they both have relationships with their children. Completing the genogram made Carol realise that Sophie had in fact lost two father-figures - her birth father, and the father of her younger siblings, who had been a positive presence in her life between the ages of 4 and 8. While he maintained a relationship with his biological children, no-one had thought that he should maintain a relationship with Sophie. With this insight, Carol was able to empathise more with some of Sophie's actions and see them as reactions to the losses she had suffered.

When the genogram was done again, 18 months later, the only conflict that remained for Sophie was with her older brother and an uncle, signifying significant change. Although Sophie's relationships with her birth father and the father of her younger siblings were not repaired, the insight and empathy that the first genogram had given Carol was a factor in her relationship with Sophie becoming more harmonious, which in turn restored key relationships with other family members.

CAROL'S GENOGRAM AFTER 18 MONTHS



Genograms also helped families in Nairobi gain insight into their situation.

Miriam seemed unaware that her actions had contributed to Peter and David living on the streets. Her focus had been on working to provide for the family, and they had been left to fend for themselves. There were frequent arguments and beatings.

KENYA

However, after doing a genogram with workers, she noticed a pattern: she and her siblings had all dropped out of education and the same thing was now happening to her sons. One of her brothers had a learning difficulty and Peter, who was still sometimes going to the streets, seemed to have similar difficulties. She could see things that had happened in the past in her own family being repeated, and started to think about things she could do to prevent that.



Joseph was convinced his eldest boys, Jared and Daniel, were bad and could not be changed. Initially he denied they were his and described himself as their uncle. Once the workers had gained his trust, and he had told them about his own childhood, he began to make connections between his own experiences and the way he responded to the boys. Sometimes he would ask the workers for advice. As he had been very resistant and unwilling to confide in them at first, workers assessed that it was their persistence and the methods they used that began to change his attitude. Joseph went from believing that it was impossible to change the boys, to enquiring and obtaining school places for them



Family workers also facilitated the processing stage through creative expression (art or drama) life story work and guided exploration. These activities are not ends in themselves, but a tool to enable the processing of past and usually painful experiences. The worker is there as children and adults begin to realise the things that have adversely affected them, and stays alongside them, sharing the experience without judging or reacting. In this sense, the worker themselves are a very powerful tool.

In SAFE@LAST, the ways in which processing tools were used effectively included:

- guided exploration of the parenting mothers had received from their own mothers
- a quiz on authoritative versus authoritarian parenting styles (one parent realised that she was unintentionally repeating controlling behaviour that an abusive ex-partner had used on her)
- lifeline and life story work to help parents reflect on key experiences and relationships in their own lives, especially when they were similar ages to their children

Once the members of the family have had a chance to process individually some of the difficult past experiences that are affecting their current responses, they can go on to process some of these as a group. The examples below show how this works in practice.

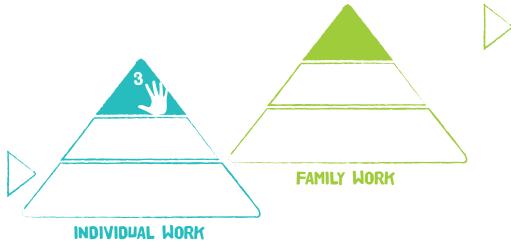
Workers carried out an exercise with Peter and David's family, asking each person to identify who can help them to stay safe. All of the children chose their mother Miriam first, despite significant problems with their relationship in the past. She was visibly surprised that the eldest boys had chosen her and workers observed a change in her attitude towards them.

Priscilla, her sister Rita and their mother Happy had all suffered extreme violence from the children's father. While playing family games facilitated by the worker, the family began to talk together about what it was like to live with such a violent man, and share experiences they had never talked about before. During these sessions, the girls were also able to tell their mother that they thought she favoured their brother over them, and she was able to reflect and talk to them about it.

Individual processing work had helped Paula to recognise the strength that both she and her daughter Olivia had shown while living with a violent and abusive partner. Although she felt guilty about bringing him into the household, she had ultimately protected herself and her daughter by ending the relationship. She realised also how well Olivia had done in maintaining high levels of achievement at school during that time. Paula and Olivia began to talk about that period in their lives and shared feelings and experiences that they had not previously discussed. Shortly after, they sorted and threw out the ex-partner's last few remaining belongings together. KENYA

ENGLAND

4.3 APPLYING LEARNING



Objective: 'To help each child/parent find ways to use the healing process and the insights which came from this to guide their behaviour, decisions and practical life style.'¹⁵

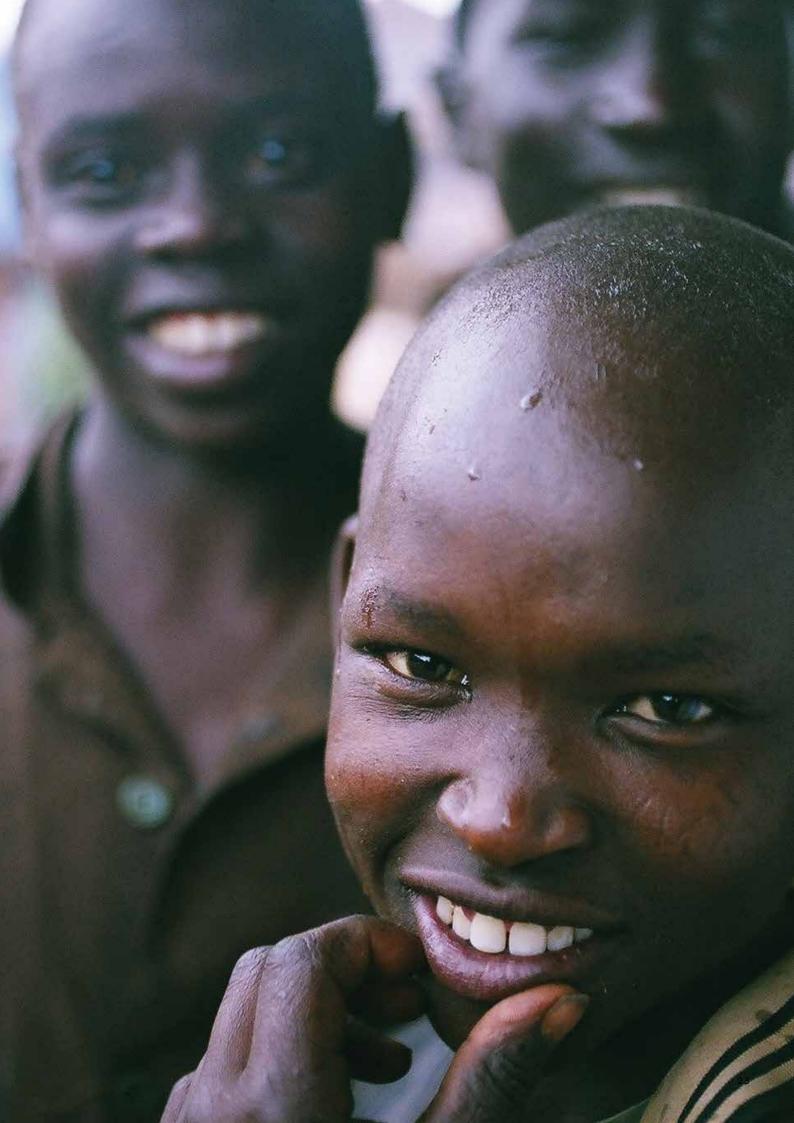
Although workers tailored activities to each family's needs, there were some clearly observable changes that were common to all families in this report. These included better communication, strategies to understand and manage emotional responses, and recognising and expressing the positives in other family members. The fact that family members are having more positive interactions and supporting each other is an indicator that the modelling of attachment has been effective, and has started to create change. These changes reduce the likelihood of conflict and therefore of children going missing or taking to the streets in response.

There were three distinct areas where workers in both countries observed that families and individuals were applying what they had learnt to change the family dynamics:

- methods of conflict resolution and discipline
- awareness of other family members' needs
- establishment of family routines and family time together

Conflict resolution and effective discipline

When workers first engaged with families, many of them used harsh forms of discipline, which was a factor in their children leaving home. In Nairobi it was common for children to be beaten with sticks, and in South Yorkshire there were frequent angry and occasionally violent exchanges. By the end, all of the families had adopted different strategies, communicated better and used sanctions that were not violent. In the three Kenyan families, the children were off the streets and back at home; in the English families, the children were all still at home and not going missing despite two of them wanting to go into care at the start of the process.



In the past, Peter and David would be beaten for any wrongdoing, but now Miriam stops them doing something they like instead, like visiting their aunt, or choosing an item to add to the food basket list. She removed them from a school where they were being beaten and arranged for them to go to a different one.

ENGLAND

Paula found it hard to control her frustration when Olivia behaved badly or stayed out beyond the agreed time. Her angry reactions contributed to Olivia going missing, because she stayed out even longer to avoid going home to face that response. By the end of the work, Paula and Olivia were communicating much better, talking about problems, and any sanctions were applied calmly.

Meeting family members' practical and emotional needs

The high levels of poverty in Kenya, and limited local responses, meant that practical support to families via the food basket was an important part of the process, as it alleviated some of the immediate material deprivation while working through the SFSC stages. In England, the SAFE@LAST worker made sure that parents addressed their own health needs at the start of the work, especially where this related to low mood and poor mental health, so that they had the resilience to cope with the process. Having stabilised families as far as possible, and worked through the attachment and processing stages, it was time for them to find ways to support each other, to stay safe and to function as a family unit. These were all protective factors that prevented children going missing or becoming street-involved.

KENYA

When the workers first met Miriam she was exhausted from providing for the family on her own, and Peter and David were often left to fend for themselves. Sometimes she did not save food for them, and became angry when they complained. By the end of the process, everyone was remembered, and food was put aside to give later to anyone who was absent.

ENGLAND

Olivia wanted to meet her birth father. This was difficult for Paula as she had left him because of his drug use, and felt that she had done a good job in protecting Olivia. However, she recognised how important this was to Olivia and managed to find him. Olivia met her father, who was on a methadone programme, but after two visits decided that she did not want to continue the contact.

Family routines and family time

In Nairobi, all parents were working long hours and two mothers were providing for their families on their own, meaning they had little positive time together. In South Yorkshire, two of the three families were working, and one single parent was also bringing work home, leading her daughter to feel that her mother had no time for her, and to look for affection outside the family home in a far riskier way. At the end of the process, all parents had recognised the importance of family celebrations and family time together and, even in the face of great poverty, were managing to make home feel a positive place to be. This increased the chances of their children feeling part of the family and staying safe, rather than going missing or going to the streets.

Peter's family have a meeting before and after school and they have a rota for chores. They have an album where they keep information about the good things they have done as a family. David is good at dancing and they use that to have fun as a family. Their mother is helping them to keep chickens, hens, and rabbits. On birthdays, they try to have a favourite meal and to name the strengths of the person whose birthday it is.

Paula and Olivia were communicating much better, and had been talking about positive memories they both had of times when Olivia was younger and it was just the two of them. Paula wanted them to have a day out together at a nearby attraction but Olivia was reluctant. Paula felt frustrated but instead of getting angry talked to her daughter about it and discovered that she had memories of going there with Paula's abusive ex-partner. With this understood, they were able to agree on a different venue and enjoy a day out together.





4.4 GRADUATING FROM THE PROGRAMME

'A family's participation in the programme finishes once anticipated changes have been achieved and seem to be sustainable.'¹⁶ This is shown by:

- Positive changes in relationships
- Positive changes in behaviour
- Positive changes in life results (eg access to education, work and/or social activities)
- Evidence that positive changes can be sustained by the family themselves

One of the families in this report was still receiving some ongoing support, the other five families were deemed to have 'graduated' and families in Kenya had a graduation ceremony to mark the occasion. The evidence for assessing that families had achieved the necessary changes and that they were sustainable is summarised below.

POSITIVE CHANGES IN RELATIONSHIPS

It was recorded in case notes that families were apologising to each other, talking instead of shouting or beating, discussing past painful experiences and recognising and praising each other's strengths. A good example is the improvement recorded between Carol and Sophie, which is also reflected in the genograms on pages 18 and 19.

ENGLAND

At the outset, Sophie was very much seen as 'the problem' by her mother Carol and the extended family. Relationships were highly charged and characterised by angry outbursts, and Sophie was going missing for days at a time. A year on, Carol was more likely to explore both sides when there was conflict, to use less emotive language herself, and to not assume that Sophie was the cause of any trouble. The improvement in their relationship changed the way that extended family members viewed Sophie, and repaired some of these relationships too.

POSITIVE CHANGES IN BEHAVIOUR

None of the children were on the streets or going missing at the end of the programme, and none of the families were using violence as a form of discipline. When problems arose, parental responses were quite different than they had been at the start of the programme, as this example shows.

David says he will never return to the streets, but Peter struggles at school and sometimes he goes back to see people there. Their mother, Miriam, and the children role-play with a worker how to welcome Peter back from the streets. In the past Miriam would have been angry and this would have driven him away again. Next time Peter goes to the street the whole family welcomes him back and talks about how sad they feel when he goes there. He stays away from the streets for several weeks and his visits become far less frequent.

 16 Safe Families Safe Children (2011), p46. A list of indicators follows on p47.



POSITIVE CHANGES IN LIFE RESULTS

An important part of the SFSC approach is building up a family's resources by developing new skills and creating good community networks. In Nairobi, all families had accessed business training and improved their income, reducing the levels of poverty they were experiencing. In a very practical way, this helped to keep their children safe because they did not need to go to the streets to earn money or seek food. It also enabled single parents to work more flexibly and check on their children. Most families were involved in the church, and one had become a Church Elder. One was in a Chama (a co-operative similar to a credit union) and was respected by others in the community because of the change they could see in her family. In all three cases, the children were back in education instead of working on the streets, even though one family had doubted this was possible.

KENYA

Happy was in ill health and Priscilla and Rita were going to the streets to make money. She was not able to keep them safe and they were at risk on the streets and in the neighbourhood, where they were sexually abused by an older man. After business training, Happy earns more money and is able to check on the children during her break. She still works long hours, but the girls are back in education and she protects them by making sure the gate is locked when she is out.

In England there were clear indicators of positive change, for example children attending school regularly and achieving well, and parents feeling more resilient and positive about the future. However, in these families the change was not reliant on an improvement in material circumstances or increased engagement with the wider community. Low income did not trigger children going missing as it did in Kenya¹⁷ (when some went to the streets to earn money) and families were generally less engaged in their communities, though in most cases they got some support from extended family. With such a small sample, it is difficult to draw firm conclusions, or to know whether these factors influenced earlier difficulties, but these cultural differences would be interesting to track and explore further.

Evidence of a family's ability to sustain the changes

The SFSC approach makes explicit that there will be setbacks, and times when families revert to previous patterns during the process. The way that workers respond to and reframe these stressful situations can provide the basis from which families manage difficult situations in the future. Case records show that families were effectively managing incidents that would have been triggers for conflict in the past.

Carol was upset and angry when her daughter Sophie came home very drunk. Despite this, she looked after her while she was being sick and made sure she got safely to bed. The worker helped her to reframe this incident: Sophie had chosen to come home and was now seeing home as a safe place. Previously she had had similar experiences but had stayed out all night in far riskier situations. Carol recognised that Sophie coming home was positive, and showed how much the relationship between them had improved.

 1^{7} This is not to suggest that low income does not adversely affect families in the UK, simply to say that in this sample it was not the reason that children were leaving the family home.

APPLYING LEARNING

Miriam can name the things she does that sends the boys to the streets. She has stopped beating them. She wants the boys to be educated and they go back to school.

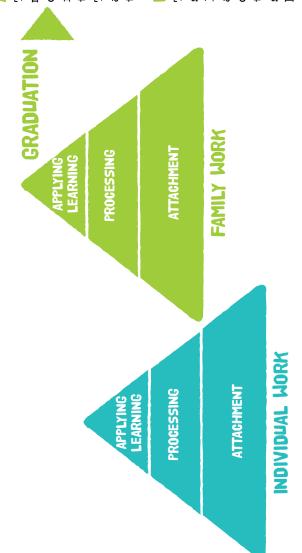
PROCESSING

The boys talk about their family using miniatures and artwork They explore their best and worst experiences. Miriam completes a genogram and sees the way family patterns are being repeated.

ATTACHMENT

Workers visit Peter and David at the same time every week. They enjoy playing but don't want to talk about their family. Workers get to know them as people. Miriam gets separate visits every week and talks about her previous violent relationship. She gets a food basket. On entry Peter (12) and David (13) are on the streets. Their mother Miriam works hard but they are left to fend for themselves. There are frequent arguments and beatings and there is often only one meal per day. Miriam does not think her behaviour is a factor in the boys being on the streets.

On graduation: the family spend some time talking about their day. They have fun as a family and there is no violence in the household. Miriam is involved in the Church and in a Chama. Other members of the community can see and respect the change. Before Miriam was known as Mama Chokora (mother of street children) but is now known as Mama Watato (mother of children).



APPLYING LEARNING

The family have family meetings and a rota for chores. The children keep rabbits and Miriam helped them build the hutch. They celebrate birthdays and name the strengths of the person.

PROCESSING

The boys tell Miriam she does not always listen. She agrees and apologises. When the children are sad, Miriam tries to help them and speaks to them in a kinder tone. Everybody practises welcoming Peter back from the streets so he doesn't keep going back.

ATTACHMENT

The family communicate differently - they use the emotional thermometer to avoid conflict. They keep each other in mind and make sure there is food saved if one person is not there.

5. CONCLUSION AND RECOMMENDATIONS

Children who go missing and/or end up on the streets are at high risk of abuse, violence and exploitation. Without effective intervention, the effects of that trauma can last a lifetime, and go on to blight the lives of their own children. Initiatives to find children who are missing or on the streets are hugely important, but are of limited use without a coherent response to their reasons for being away from home.

IF INTERVENTIONS ARE TO WORK, THEY NEED A METHOD FOR ADDRESSING THE ATTACHMENT DIFFICULTIES AND TRAUMA CHILDREN HAVE SUFFERED, BOTH BEFORE GOING MISSING AND WHILE ON THE STREETS, AND THE KEY TO THIS OFTEN LIES WITHIN FAMILIES, AND WITHIN PARENTS' OWN PAINFUL PAST EXPERIENCES.

The JUCONI model, on which the Safe Families Safe Children approach is based, has been successfully reintegrating some of the most violent and excluded families in Latin America for over 25 years. Our experience in Kenya and England demonstrates that this approach can be successfully transferred to other countries, because we were able to identify and track the changes that happened in families as a result. Having a clear framework makes monitoring of outcomes more straightforward and transparent because family workers are clear what they are trying to achieve and what kind of change they are looking for.

Using the SFSC approach in Kenya and England has enabled workers to engage families in a process of sustainable change, because the approach addresses underlying causes. This has prevented children going back to the streets in Kenya, and from going into care in England.

5.1 IMPLICATIONS AND RECOMMENDATIONS FOR POLICY

Railway Children believes that effective interventions are those that are based on tested models, have a clear framework, and achieve sustainable change. While there is no doubt much social work practice within the UK that meets these criteria, the government's flagship for 'turning around' families — potentially the same families whose children may go missing clearly does not.

The Troubled Families Programme (TFP) casts families as creators of their own misfortune: a paradigm that can be reversed by getting children into school and parents into work. While the key worker approach can be positive, there is no common framework for its delivery.¹⁸ This makes measuring successful outcomes problematic. At the time of writing, the independent evaluation of TFP by Ecorys has not been published, and there have been news reports that it has been suppressed because it shows the programme is not achieving its aims. The Department for Communities and Local Government's claim of a 99% success rate at a time of austerity has been met with incredulity (Crossley, 2015). Many other respected commentators have challenged both the original identification of numbers of families and claims made of cost saving so far, with Ruth Levitas stating that 'the most charitable explanation is that their research is statistically incompetent'.¹⁹

PARENTS BEING IN WORK AND CHILDREN BEING IN SCHOOL DOES NOT MEAN THAT UNDERLYING ISSUES WITHIN THE FAMILY THAT CONTRIBUTED TO THEIR ORIGINAL DIFFICULTIES HAVE BEEN ADDRESSED.

In the small opportunity sample of English families we used for this report, the parents had between them experienced sexual abuse in childhood, poor mental and physical health, domestic violence and long-term drug dependency. While a rewarding job may offer structure and self-esteem, work is not in itself capable of addressing these issues and the damage they cause within families. Having paid work was crucial to Kenyan families, but that, and the economic support provided in the form of the food basket, was not an end in itself, but a way of stabilising a family's living situation so that meaningful work could begin. A parent in England who finds work through the Troubled Families Programme may not sustain this if they have, for example, volatile relationships and difficulties regulating their emotions because of past trauma. Their child may not stay in school for the same reasons.

England has a families programme to which significant resource has been allocated, which has recently been expanded, yet has no theoretical framework, no consistency or agreed intentionality in the way the key worker role is carried out, and has not yet reported any independently evaluated results. It is difficult in that context to assess outcomes for families in a meaningful way, and to go beyond the rhetoric about cost saving to identify sustainable change.

5.2 NEXT STEPS

At the end of this year, JUCONI Ecuador and Mexico will complete a two year randomised control trial that will provide clear evidence about the extent to which their model is effective. The elements of the model that were used with families featured in this report were observed by workers to make a significant difference to a family's ability to relate to one another, to deal with painful past experiences and to find a way to implement change. We look forward to the results of the randomised control trial, due in December 2016.

Breaking intergenerational cycles of abuse and trauma requires a response that has fully engaged families in the processing and management of the issues they face. This may sometimes happen within the Troubled Families Programme, given the autonomy that providers are given, but the lack of a consistent and clear theoretical framework makes it impossible to know, and the introduction of one could significantly improve our ability to create and measure sustainable change.

¹⁸ The approach taken varied widely within its predecessor, Family Intervention Projects (FIPs). FIPs located within social work teams generally took a therapeutic approach, while those located within housing teams were more focused on enforcement (Parr, 2015).

¹⁹ Ruth Levitas blog http://blogs.lse.ac.uk/politicsandpolicy/troubled-families-misrepresentation-levitas/ See also Jonathan Portes blog http://www.niesr.ac.uk/blog/troubling-attitude-statistics#.V6Bx8m9TH4g

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