

# Evaluation of Family Rights Group Advocacy Service 2006 – 2009

## Executive Summary



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## 1. Introduction

**1.1** There are different types of advocacy ranging from citizen advocates to professional advocates. Citizen advocacy is based upon a one-to-one, often long term, relationship between an 'ordinary' person or citizen who is unpaid and his or her advocacy partner<sup>1</sup>. By contrast, the professional advocates, employed on the scheme evaluated in this report, are paid, highly trained professionals. They are also independent of the local authority which is a crucial feature in how they are perceived in many cases as explored below.

**1.2** There is considerable diversity in terms of the types of advocacy schemes in existence. For example, a variety of service providers offer advocacy schemes to support those who are experiencing mental health difficulties, have learning difficulties or dementia whilst others provide advocates for the carers of those with such difficulties.

**1.3** Advocates for children and young people, who are subject to a variety of local authority processes under the Children Act 1989, have become an established feature of the social care landscape and there has been a growth in the research literature in this area<sup>2</sup> and in government support for advocacy for children and young people<sup>3</sup>.

**1.4** The current legal position is that parents do not have a **statutory** right to involve an advocate on their behalf when local authorities invite them to internal meetings. However, government guidance in *Working Together*<sup>4</sup> emphasises the importance of the local authority working in partnership with parents as one of the fundamental principles underpinning the successful protection of children; *Working Together* (para 5.84) states that parents should routinely be given information about how they can access local advice and advocacy services, and that they can bring an advocate, friend, or supporter to the child protection conference. Local Safeguarding Children Boards are expected to monitor agency protocols covering the involvement of [children and] family members in child protection conferences, and the role of advocates. Case law has also confirmed that parents should be allowed to involve an advocate on their behalf provided the advocate is not too adversarial<sup>5</sup>. Moreover, in cases of child protection, the Human Rights Act (1998) could be interpreted to support the right of parents to independent legal advice and support.

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<sup>1</sup> L.Forbat and D.Atkinson (2005) Advocacy in Practice: The troubled position of advocates in adult services, *British Journal of Social Work*, 35: 321-335

<sup>2</sup> J. Darymple (2004) Developing the concept of professional advocacy: an examination of the role of child and youth advocates in England and Wales', *Journal of Social Work*, 4(2):181-199

<sup>3</sup> DfES (2003) Get it sorted: Providing effective advocacy services for children and young people making a complaint under the Children Act 1989, Nottingham, DfES publications

<sup>4</sup> HM Government (2006) *Working Together to safeguard children: A guide to inter-agency working to safeguard and promote the welfare of children*, London, The Stationery Office

<sup>5</sup> R-v-Cornwall CC ex parte LH (1999)1 FLR 236

**1.5** In the research which underpinned the establishment of the FRG advocacy service, Lindley and Richards,<sup>7</sup> found few schemes for parents, no coherence or national direction and little evaluation of advocacy schemes. A literature search was carried out for this evaluation to update their review. Searches were completed in March 2009 using electronic academic databases (PsycInfo; Social Services Abstracts; Sociological Abstracts) on a range of terms. It was found that there had been little new research on parental advocacy in child protection since Lindley and Richard's work. However, research with parents with learning difficulties is of relevance here<sup>8</sup>. Specialist advocacy services have noted that when people with learning difficulties have children they may receive no support at all or be overwhelmed by professionals and that high numbers of parents are involved in proceedings which result in their children being removed from their care.

**1.6** In relation to advocacy more generally, the literature review found that no universally agreed means of conducting an independent evaluation of advocacy exists and there is a lack of research evidence on outcomes<sup>9</sup>. To be really meaningful, evaluation should engage with process and outcomes but it is the former that is most often reported upon in the literature. One review of diverse schemes engaging with process and outcomes found that advocacy works and does make a difference. There is considerable unmet need and advocates may be working in hostile environments and need continuing support to be effective<sup>10</sup>.

**1.7** As part of the literature review conducted for this evaluation, the authors also documented the range of legal, organisational and policy developments that had ensued since 2002. It was, therefore, considered important to ask those commissioning services about the role of parental advocacy in a context where services were dealing with a range of demands arising from such developments.

## **2. Family Rights Group Parental Advocacy Scheme**

Since 2003 Family Rights Group has delivered family advocacy projects underpinned and informed by the Protocol devised by Lindley and Richards<sup>11</sup>. Initially they ran a three year small scale family advocacy project, subsequently they secured three year funding (from July 2006 – June 2009) from the Big Lottery, City Parochial and the Diana Memorial Fund to further develop the service.

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<sup>7</sup> B.Lindley and M.Richards (2001) Advice and Advocacy for Parents in Child Protection Cases-What is happening in current practice? *Child and Family Law Quarterly*, June:23-51

<sup>8</sup> B. Tarleton (2007) Specialist Advocacy Services for parents with learning disabilities, *British Journal of Learning Disabilities*, 36:134-139

<sup>9</sup> Forbat and Atkinson *op cit*

<sup>10</sup> Forbat and Atkinson *op cit*

<sup>11</sup> B. Lindley and M. Richards (2002) *Protocol on Advice and Advocacy for Parents (Child Protection)*, Cambridge, Centre for Family Research

Using highly qualified lawyers, social workers or advocates with comparable experience, their pioneering professional family advocacy service provided three types of advocacy:

**2.1 Direct (face to face) Advocacy** for parents whose children are the subject of s47 enquiries in the London area when the plan is to convene an initial child protection conference. Cases are either referred by partner local authorities, (Enfield and Tower Hamlets – from April 2007; Westminster – from May 2008; Barnet – from June 2008), or the FRG telephone advice service.

FRG provides a professional advocacy service which targets parents whose children are particularly at risk of suffering significant harm, and being removed from their parental home. Advocacy is provided from the point of initial investigation to the first child protection review conference and the following groups can be offered a service:

- Parents who are seeking asylum, have been refused asylum or have been granted refugee status
- Young parents (under 25 years), including young care leavers
- Parents who have had children removed previously, where a decision has not been made to date to instigate care proceedings
- Parents with a learning disability
- Parents who are misusing drugs or alcohol.

In addition to the generic categories specified above, further agreements have been made during the course of the evaluation with individual local authorities to include other case types in the referral criteria to increase the numbers of referrals being made.

**2.2 Indirect Advocacy** for parents, carers or other relevant family members (e.g., grandparents) throughout England and Wales to elicit the services their children need. This is the practice of professional advocates negotiating by letter, email or telephone on the service user's behalf, or with the service user on an ongoing basis in the name of FRG. Referrals for this type of service include: family and friends (kinship) care; looked after children and contact arrangements.

**2.3 Self Advocacy** for parents, carers or other relevant family members throughout England and Wales to elicit the services their children need. This is the practice of professional advocates drafting a letter or using a pro-forma which can then be used by the service user (in their own name) to contact the local authority. The types of issues covered are the same as indirect advocacy.

### 3. Evaluation

**3.1** Family Rights Group commissioned an evaluation of the advocacy service from July 2006 – June 2009. The evaluation has been completed by Professor Brid Featherstone, Department of Social Sciences and Humanities, University of Bradford and Claire Fraser, a freelance Research Consultant

**3.2** The evaluation explored the following:

- The views of service users, advocates, social workers, case conference chairpersons and senior managers about the effectiveness of the service including the impact of advocacy on parental and practitioner satisfaction and parental contribution to decision making.

### 3.3 Service users

**106** service users contributed their views (25 direct, 33 indirect and 48 self). Service users across **all these** types of advocacy valued the service highly. The differing types of advocacy reflected parents' varying needs and the support they required to meet their needs, as well as limited resources. For example, advocates worked with a range of situations, such as:

- where parents needed support to care for a child
- enabling understanding of local authority processes and
- supporting increased participation in child protection processes.

Direct advocates were trusted as **independent** 'experts' who provided a voice for often vulnerable service users who might otherwise have struggled to fully engage. It is important to note here that the advocates work to a protocol which stresses how crucial independence from the local authority is in order to engender trust.<sup>12</sup>

Half of the service user sample felt that advocacy support had enabled their fuller participation in the local authority process.

Advocacy support had sometimes enabled parents/carers to see that local authority concerns in relation to a child were legitimate and this had encouraged the parent/carer to take appropriate action.

In making suggestions for developments to the service, service users wanted longer term support available to parents/carers and an extension of the direct advocacy service so that it is available to those living outside of the partner local authority areas.

### **3.4 Advocates**

**26** advocates (involved in 194 cases in total) contributed their views to the evaluation. They had supported service users across all three types of advocacy, but the views, outlined below, relate mainly to direct advocacy. The case descriptions described a range of issues affecting the families concerned including domestic violence; homelessness drug/alcohol misuse; disability (physical/learning); mental health issues; asylum seeker/refugee status; homelessness; teenage parents; young care leavers; looked after children, s20 and contact arrangements; s31 care orders; s25 secure accommodation; allegations of sexual, physical and emotional abuse and possession of indecent images; child neglect; inappropriate sexual behaviour; child behavioural issues; teenage pregnancy and kinship care.

A range of support services were provided including:

- i) telephone and email advice;
- ii) drafting letters;
- iii) providing information and advice on legal rights and child protection procedures;
- iv) contacting local authorities on behalf of the service user;
- v) reading social work reports and explaining contents to parents/carers;
- vi) attending conference, core group and review meetings and helping service users to present their views at these meetings;
- vii) home visits to explain the outcome of meetings where parents had failed to attend meetings/ follow up visits to ensure understanding of child protection plans; and
- viii) assisting families with accessing financial support.

Advocates clearly described their role in supporting and empowering service users to enable their full participation. Their knowledge of child protection law and procedures, due to their professional status and their independence from the local authority, were important underpinning factors. Factors which could hinder the advocacy role included communication difficulties (with both service users and the local authority), role confusion, inflexibility around meeting arrangements, social work staff changes and insufficient preparation time for meetings due to late documentation

### **3.5 Social Workers**

**18** social workers contributed their views on direct advocacy via the questionnaire. One additional in-depth telephone interview was also completed with a social worker in Year 2. The cases related to allegations of physical and emotional abuse; child neglect; domestic violence; drug/alcohol misuse concerns about parenting ability; children's behavioural issues; mental health and teenage pregnancy.

They perceived advocates as having provided guidance, support and advice; attending pre-conference meetings and the child protection conference and generally assisting the parent to understand local authority procedures and to present their views at meetings.

All but one social worker valued the advocacy service and could describe many benefits for the local authority as well as parent/carer service users. Half of those consulted believed that advocacy had influenced the outcome in the cases reviewed.

### **3.6 Conference Chairpersons**

**15** completed postal questionnaires in relation to **30** cases of direct advocacy during the three-year evaluation period. Four additional telephone interviews were also completed with Conference Chairs during October 2008. The cases reviewed concerned domestic violence; drug/alcohol misuse; sexual, physical and emotional abuse; child neglect; children's emotional well-being; parental mental and physical health and teenage pregnancy.

Conference Chairs welcomed the involvement of advocates in the child protection process, highlighting benefits similar to those raised by social workers in that advocates were able to help families understand the child protection process. The independent and professional nature of the advocates and the perceived success of the advocates' role during the conference process were key factors. In 40% of the cases reviewed, advocacy was felt to have influenced the outcome; this was less likely to be so when the severity of the case warranted urgent local authority intervention

### **3.7 Local Authority Lead Partners**

Telephone interviews were carried out with three local authority partner leads in Year 2. These three were also interviewed in Year 3 as well as a further partner lead. Local authority leads described considerable satisfaction with the service although referral criteria had sometimes limited the number of cases supported. The developments in relation to more flexible referral criteria and work with families where there were entrenched poor relationships were, thus, considered very important. For parental advocacy to be fully successful, it needed to become embedded in local authority procedures and to be 'owned' by front-line managers. It was clearly recognised as having an important contribution to make towards developing successful partnership working. The impact of advocacy support was felt to be difficult to quantify but it could be observed. For example, the support of an advocate led to calmer meetings in some instances and generally fostered a better climate for service user engagement. A key finding was that parental advocacy was being introduced in contexts which were often overstretched as a result of legislative, organisational and policy developments, but those interviewed, in the main, saw it as an aid to better practice rather than another demand.

### **3.8 Conclusion**

Advocacy schemes are an increasingly important part of the social care landscape. Whilst most of the evidence relates to the impact of advocacy on process, a literature is emerging to suggest that it has an impact on outcomes in that it makes a difference to decisions made. Whilst a range of advocacy schemes support parents in their differing capacities, the scheme run by Family Rights Group is the only national professional scheme for parents and carers who become involved with local authority processes in relation to their children. As this evaluation has shown advocacy can encompass a range of activities such as advice giving or help with writing a letter in order to access financial support as a family carer. Such services are available through accessing the FRG advice line by those who find out about it. Direct advocacy services are restricted to those living in the partner local authority areas.

This evaluation found that the advocates' role was highly valued by service users. Their independence and expertise were of crucial importance in ensuring confidence. The overwhelming majority of social workers, conference chairpersons and senior managers expressed a high degree of satisfaction with the way in which advocates performed and felt that the scheme had an impact upon process and outcome. A key finding was that advocates enabled partnership working and played an important role in aiding communication between service users and local authorities. There were clear examples of advocates being successful in helping service users to understand and act upon child protection concerns.

### **4. Recommendations**

National developments:

- That Government introduces a statutory right to professional family advocacy for parents whose children are subject to child protection enquiries .
- A national network of family advocacy services is required to support best practice and promote standards. External funding is required to support the initial setting up and development of such as a network.
- An independent evaluation of future professional family advocacy developments is commissioned, which includes exploring how professional advocacy (direct, indirect and self) impacts upon children and families' outcomes.
- That, in recognition of how marginal a service professional family advocacy is, funders are sympathetic to supporting the continued innovative development of professional family advocacy services, particularly in respect of working with families regarded as 'highly resistant' to local authority intervention.



Local developments:

- Support for the development of professional family advocacy services and the commissioning by local authorities across England and Wales of such professional family advocacy services for families involved with social care services.

Continued developments of FRG's professional family advocacy service

- FRG's service should continue to be funded and expanded further :
  - So that more families are able to receive assistance through self-or indirect advocacy – the numbers of calls answered on the advice service has more than doubled in the last two years, thus demand from families has significantly increased;
  - The criteria for the direct advocacy service should also include parents/carers whose children are subject to child protection enquiries in part because of domestic violence and/or parents' mental health problems;
  - Advocates should be offered to families regarded as 'highly resistant' to local authority engagement, including those whose children have had a child protection plan for over a year, in part because of a poor working relationship between the family and local authority; and those whose children are in care but unification is hindered again in part because of poor working relationships.
  - Advice materials on legal and administrative processes in child welfare should continue to be updated and extended, and made available in accessible formats e.g. DVDs and podcasts designed for all parents including those with literacy difficulties.