



Response

DHSSPS

**Service Framework for Children & Young
People**

January 2015

INTRODUCTION

Children in Northern Ireland (CiNI) are the regional umbrella body for the children's sector in Northern Ireland. CiNI represents the interests of its 160 member organisations providing policy, information, training and participation support services to members in their direct work with and for children and young people. CiNI membership also includes colleagues in the children's statutory sector recognising that the best outcomes for children and young people are increasingly achieved working in partnership with all those who are committed to improving the lives of children and young people in NI.

CiNI welcomes this opportunity to provide some feedback and commentary on the draft Service Framework for Children and Young People. We trust that our comments will be positively used to inform the next step in the process.

GENERAL COMMENTS

Working in Partnership

CiNI warmly welcomes the premise behind the Service Framework for Children and Young People particularly to work in partnership by 'enhancing multidisciplinary and intersectoral working.' It is our view that the best outcomes for children and young people can only be achieved through partnership working and co-operation, not just within DHSSPS but also between government departments.

In this regard, CiNI would highlight there is now a broad based and growing consensus emerging on the need for a statutory duty on Government departments to co-operate, a duty which must transcend all levels and layers of Government. This has been evidenced in research commissioned by NICCY and conducted by QUB on Barriers to Effective Government Delivery for Children¹. The views expressed by NGOs, statutory agencies, government representatives and MLAs are worth noting. The research noted

¹ Byrne, B. and Lundy, L. (2011) Barriers to Effective Government Delivery for Children in Northern Ireland 2011, NICCY.

that while there was some evidence of good practice on collaboration at intra-agency level through the work of Children's Services Planning, this was not always replicated at central government level.

'For the majority of interviewees, the problems associated with joined up working at central government level were viewed as the main barrier to effective government delivery for children' [own underlining].

It is interesting to note how joined up working is currently perceived as operating:

'... joined up working between departments was perceived to be based primarily upon goodwill, and the prior existence of good working relationships between individuals in respective departments was viewed as a particular issue resulting in inconsistency of practice across the Ten Year Strategy areas (NGO and Statutory Agency representatives).'

As we have highlighted above the key point is that collaboration and joined up working is not a mainstream experience or indeed the requirement or expectation in relation to the functioning of departments. In other words, some children will be the beneficiaries of the 'goodwill' and 'good working relationships' where there is joined up working on policy areas that impact upon them; but, worryingly, the inconsistency means that the majority of children will not experience the impact of the joining up of policy areas which ultimately aligns with a holistic approach to service design and delivery and which supports better outcomes for children and young people. This differential and discriminatory treatment of children and young people in respect of policy development which impacts on their lives can no longer be justified particularly when there are constraints on budgets. It is imperative therefore that legislation is strengthened so that relevant departments, agencies and organisations are required to co-operate, rather than participate, in children's service planning and delivery.

Child Rights Centred Approach

CiNI welcomes the work that is being done within the Children and Young People's Strategic Partnership to integrate a child rights focus into the outcomes framework in line with the UNCRC and UNCRPD.

This framework presents a unique opportunity to build on this commitment to children's rights; the Department must therefore robustly integrate children's rights principles within the actual foundation of the service framework process. We are disappointed this has not been included within this Framework. Therefore CiNI would strongly recommend that the service framework for children and young people is firmly grounded in children's rights which the DHSSPS and its agencies have signed up to through the cross government 10 Year Children and Young People's Strategy. The framework must integrate the over-arching guiding principles of the United Nations Convention on the Rights of the Child (UNCRC) which is to inform and guide the Department's delivery of the strategic outcomes of the 10 Year Strategy. Ultimately statutory children's services planning must be child-centred and responsive to the rights and needs of all children and young people, promoting their best interests (UNCRC Article 3) in a non-discriminatory manner (UNCRC article 2). Fundamentally children and young people must be given the opportunity to be heard and have their views given due weight and consideration (UNCRC article 12) at all levels in the planning and commissioning of children's services.

Moreover, the UN Convention on the Rights of Persons with Disabilities (UNCRPD) took effect on 3rd May 2008, and ratified by some 25 countries including the United Kingdom. This international human rights instrument includes an important and specific focus on children with disabilities. Article 7 provides that in all actions concerning children with disabilities, the best interests of the child shall be a primary consideration. States Parties shall ensure that children with disabilities have the right to express their views freely on all matters affecting them, their views being given due weight in accordance with their age and maturity, on an equal basis with other children, and to be provided with disability and age-appropriate assistance to realise that right. Article 1 promotes a social model of disability. Article 4 (f) promotes the concept of Universal Design in the development of services noting State Parties:

“To undertake or promote research and development of universally designed goods, services, equipment and facilities, as defined in article 2 of the present Convention, which should require the minimum possible adaptation and the least cost to meet the specific needs of a person with disabilities, to promote their availability and use, and to promote universal design in the development of standards and guidelines.”

We see little evidence of the ‘whole child’ model within this framework for children with disabilities and a lack of recognition of the diverse factors that impact on the lives of children with disabilities in relation to child development, well-being and family circumstances. While it is important to note the central role of the whole family in the lives of children with disabilities, the best interests of the child must also be emphasized as family may not always be the best option for some children.

A serious flaw throughout this document is the lack of acknowledgment that services for children with disabilities must be child centered as this is the only way to improve outcomes for children with disabilities.

Providing the ‘same’ service to children with disabilities as those without is not reasonable nor is it feasible. A ‘same’ service will not achieve equal outcomes for children with disabilities. This framework needs to reflect the additional supports and services needed for each disabled child, taking account of their own abilities and potential and put in place a full range of services including an increase in economic contributions to improve outcomes. Without additional resources, there is potential for adverse impact upon children with disabilities and their families. A failure to address the need for additional resources and specific services for children with disabilities within this legislation will perpetuate some of the barriers currently being faced by children with disabilities.

The *“Human Rights and Equality of Opportunity”* Report of the Bamford Review states that,

“Section 75 is, in fact, a positive and proactive requirement, which requires public authorities to address any identified adverse impact by considering any mitigating measures, or alternative policies which might better achieve equality of opportunity.”²

It is important that all aspects of UNCRPD, UNCRC and equality legislation are incorporated within this Framework to ensure provision meets the needs of disabled children to overcome barriers that currently restrict their participation in society and from receiving the services to meet their specific needs. This is of particular concern for Children in Northern Ireland as there appears to be a lack of attention given to children with disabilities within this Framework, they are largely subsumed within a broader focus for all children generally which means that their sometimes complex needs have been overlooked resulting in a lack of specific actions.

The Participation of Children and Young People

It is extremely welcome and important that the participation of children and young people is regarded as a foundation to planning and commissioning and therefore central to this framework. We all need to pay better attention to the views of children and young people, their needs and their aspirations. This Framework will not be successful if the views of children with disabilities are not an inclusive process.

There should be a commitment to ensure the involvement of children and young people. We would highlight the obligations which exist both internationally and domestically and the imperative for compliance with section 75 of the Northern Ireland Act 1998, article 12 of the United Nations Convention on the Rights of the Child (UNCRC) on Respect for the Views of the Child, and article 7 of the United Nations Convention on the Rights of People with Disabilities on Children with Disabilities.

We welcome the commitment to the Ask First principles which have been endorsed by Government departments. The principles are underpinned and informed by the UNCRC and Section 75 of the Northern Ireland Act (1998). Ask First principles are the Northern Ireland standards for children and young people’s participation in public decision

² Para 3.6, Page 12, “Human Rights and Equality of Opportunity” Report, October 2006

making. The standards were developed by the Participation Network to assist public authorities to establish effective direct engagement with children and young people. The standards set out the various elements, which together, ensure that the involvement of children and young people in public decision making is both meaningful for them, and effective for the public authority with whom they are engaged.

Such consultation is essential not only in ensuring compliance with Section 75, but also in ensuring the Government's compliance with Article 12 of the UNCRC, one of the principles of the UNCRC - Respect for the views of the Child. In examining the government's compliance with Article 12, the UNCRC Committee recommended that the government,

*"...take further steps to promote, facilitate and monitor systematic, meaningful and effective participation of all groups of children in society."*³

Also, the Equality Commission's, "*Guidance for Implementing Section 75 of the Northern Ireland Act 1998*" states that consultation should take place in accordance with its stated Guiding Principles on Consultation,

"...specific consideration is given to how best to communicate information to children and young people..."^[3]

We advocate strongly that any legislation puts a strong emphasis on ensuring the voice of children and young people are heard at every stage.

The views of children and young people must be given due weight in accordance with their age and maturity. We would welcome information on the engagement the Department has undertaken with children and young people (particularly those with a disability) in the design, development and consultation of this Framework. We would emphasise that children and young people should be actively involved in the ongoing process of developing this Framework, this involvement potentially

³ Para 30 CRC/C/15/Add.188

can deliver child-centred perspectives on the outcomes and indicators which adults could not capture and reflect.

Outcomes, Performance Indicators and Data

CiNI acknowledges the work that is ongoing within the Children and Young People's Strategic Partnership (CYPSP) on the development of outcomes and indicators for all children and young people. It is important that this Service Framework is clearly aligned with the work ongoing by the CYPSP.

However CiNI does wish to highlight that we have concerns regarding the extent to which the performance indicators and data source actually does inform and underpin the overarching standards within the Framework. We believe that each of the performance indicators and data sources must be expanded upon, so that each specifically details the context of how it will improve the lives of children and young people in Northern Ireland. At present it is not clear. The performance indicators must be translated into greater specific actions that are outcome driven and must be clearly and explicitly incorporated into cross cutting themes.

We remind the Department of obligations under Article 31 of the UNCRPD (Statistics and data collection) which states that countries must collect information about people with disabilities, with the active involvement of people with disabilities; so that they can better understand the barriers they experience and ensure full implementation of the UNCRPD. The UN Committee in General Comment No 9 (2006) The Rights of Children with Disabilities indicated that it is necessary for State parties to "set up and develop data gathering mechanisms, which are accurate, standardized and allow disaggregation, and which reflect the actual situation of children with disabilities." (para 19)

The UN Committee on the Rights of the Child has commented on data collection in relation to children and expressed concern at the absence of a nationwide mechanism to collect and analyse data on the areas covered by the UNCRC.

In its 2002 Concluding Observations and Recommendations relating to GB and NI implementation of the Convention, the Committee recommended that Government "*establish a nationwide system whereby data on all persons under 18 years for all areas*

covered by the Convention, including the most vulnerable groups, and that these data are used to assess progress and design policies to implement the Convention. The Committee encourages development of regular reports in England, Northern Ireland, Scotland and Wales and for the whole State Party and the promotion of wide public and parliamentary debate on them in the UK and Scottish Parliaments and in the National Assemblies for Northern Ireland and Wales.⁴

The Committee on the Rights of the Child commenting on implementation of the Convention has made specific reference to data collection and analysis and development of indicators stating:

“Collection of sufficient and reliable data on children, disaggregated to enable identification of discrimination and/or disparities in the realisation of rights, is an essential part of implementation. The Committee reminds State parties that data collection needs to extend over the whole period of childhood, up to the age of 18 years. It also needs to be co-ordinated throughout the jurisdiction, ensuring nationally applicable indicators ... it is essential not merely to establish effective systems for data collection, but to ensure that the data collected are evaluated and used to assess progress in implementation, to identify problems and to inform all policy development for children. Evaluation requires development of indicators related to all rights guaranteed by the Convention”⁵.

The Equality Commission highlighted the need for robust data;

“The availability of robust data, information and statistics to the State, the independent monitoring body, society and crucially disabled people and their representatives is central to evidence-based policy making and to an effective monitoring process under Article 33 UNCRPD. However currently these statistics rarely provide the range of information required by the UNCRPD and/or are not generally accessible to disabled people and their representatives.”⁶

⁴ UN Committee on the Rights of the Child (2002) Concluding Observations: UK GB and NI CRC/C/15/Add.188

⁵ UN Committee on the Rights of the Child General Comment No. 5 (2003) General measures of implementation of the Convention on the Rights of the Child, CRC/GC/2003/5

⁶ <http://www.equalityni.org/archive/pdf/UNCRPDFullReportFINAL260112.pdf>

It further describes existing data as being unsuitable for policy development and monitoring:

*“Article 31 is clear in that it is the responsibility of the State to undertake to collect appropriate information and to ensure the dissemination of statistics in a format that is accessible to persons with disabilities and others. Some studies do exist and further data continues to be gathered from sources such as the 2011 Census. This data clarifies the background in which the UNCRPD will operate, but it does not specifically support policy development and monitoring in a form required for the implementation of the UNCRPD.”*⁷

In its report, ‘Barriers to Effective Government Delivery for Children,’⁸ NICCY stated that

“Existing data is not always sufficiently disaggregated and insufficient data exists in respect of vulnerable and marginalised groups of children. There is a limited amount of qualitative research conducted on the experiences of children and young people. The lack of good quality baseline data in some instances can make meaningful assessment of progress against the strategies, policies and action plans particularly problematic.”

CiNI recognises that some work has been undertaken in relation to disaggregating data to consider specific groups of vulnerable children and young people. However we believe that there remains considerable work to be done to develop a comprehensive, holistic set of data. Clearly an extensive range of data sets will enable the collation of much important and valuable information. They would also provide a complete picture of children and young people’s progress toward realisation of the overarching standards. Again more work is required in terms of incorporating the views of children and young people within the performance indicators.

⁷<http://www.equalityni.org/archive/pdf/UNCRPDFullReportFINAL260112.pdf>

⁸ [http://www.niccy.org/uploaded_docs/2011/Publications/QUB%20Barriers%20Report%20-%203%20Nov%2011%20\(body%20pages\).pdf](http://www.niccy.org/uploaded_docs/2011/Publications/QUB%20Barriers%20Report%20-%203%20Nov%2011%20(body%20pages).pdf)

The Workforce

It is disappointing the Framework fails to recognise the importance of improving practice among practitioners by making them aware of a child's rights under both the UNCRC and UNCRPD. It is important for children with disabilities that their experiences and feelings are taken on board. A report commissioned by the Scottish Parliament⁹ noted that many practitioners lack experience and confidence in communicating with disabled children. CiNI would therefore like to see the inclusion of both up-skilling of staff in relation to UNCRC and UNCRPD as well as guidance on ensuring practitioners are skilled at communication. Some children with disabilities, particularly those with learning disabilities, autism, communication impairments or who are deaf, may need support to communicate. It cannot be assumed that practitioners have the skills necessary to seek the views of children with disabilities. Greater understanding of and commitment to the ethos of UNCRC and UNCRPD is needed within the Framework, which is focussed on professionals.

CiNI recommend that training and development of professionals is outlined within the Framework together with simpler communication methods that support information sharing especially between children and adult services.

Specific Comments

Overarching Standard 19

Not all children experience equal access to early years, childcare and family support provision. There is a large volume of evidence to illustrate the positive outcomes for children when investment is targeted during the very early years, it is also important to note that some children and families will need additional supports and interventions at different points in a child's life. The Department must have a sense of clarity and an agreed understanding of the concept of early intervention which must embrace early age and early stage intervention (irrespective of age).

⁹ Stalker, K. And Moscardini, L (2012) A critical review and analysis of current research and policy relating to disabled children and young people in Scotland.

The Young People's Strategic Partnership's commitment to early intervention has had real gains through aligning efforts and resources to direct and target early intervention initiatives where these can have optimal impact for children, young people and families.

The Bamford Review¹⁰ emphasized that outcomes could be improved through early identification and early intervention. We are disappointed at the lack of detail or recognition of the specific needs of children with disabilities and their families, particularly in relation to emotional wellbeing. Children with disabilities are particularly vulnerable to violence, abuse, bullying and exploitation. Contributory factors include physical vulnerability, communication difficulties, denial and lack of respect for their human rights.

One in 6 children and young people (45,000) have a mental health need at any one time, children and adolescents with learning disabilities are over six times more likely to have a diagnosable psychiatric disorder.¹¹ Moreover, the National Deaf Children's Society has identified significant unmet need in relation to Child and Adolescent Mental Health Services for deaf children¹²; there is a higher incidence of mental ill health in children with physical disability and learning disability; some children and young people with learning disabilities are placed in hospitals for people with learning disabilities, often in adult wards¹³; the incidence of mental health problems among other vulnerable groups of children and young people is disproportionately higher again - including children and young people living in poverty¹⁴ as well as children in conflict with the law¹⁵ and care experienced children¹⁶ or those in need of safe and secure accommodation; according to

¹⁰ Bamford Review (2006) *The Bamford Review of Mental Health and Learning Disability (NI): Equal Lives: Review of Policy and Services for People with a Learning Disability in NI*. Belfast: DHSSPSNI.

¹¹ <http://www.refinene.com/mental-health-stats/4578563576> (accessed 28/01/15)

¹² "Developing Mental Health Services for Deaf Children and Young People in Northern Ireland", NDCS, (2005). A cross border facility has now been opened for deaf young people with mental health difficulties.

¹³ See Care At Its Best, SSI/DHSS PS, Oct 2005, paragraphs 3.7-3.10.

¹⁴ GCCNI, 2002

¹⁵ Page 91, "In Our Care", NIHRC, (March 2002), pages 115-117, "Inspection of the Juvenile Justice Centre", Oct 2004 (Criminal Justice Inspectorate, NI), p.24, "Young People in Regional Care Centres and Youth Justice", (DHSSPS, Oct 2004), Mc Masters.

¹⁶ "Secure Care Report", (SSI, June 2002), NICCY/QUB research, page 89, "Children Matter", (SSI, 1998), Teggart, T and Menary, J (2005) "An Investigation of the Mental

research approximately two thirds of children in state care suffer from mental health problems¹⁷ ; young people who identify as lesbian, gay, bisexual or transgendered (LGBT) also experience high levels of mental health problems and high numbers have attempted suicide. Research commissioned by the Department of Education published in 2004 found that young LGBT people were at least three times more likely to attempt suicide, two and a half times more likely to self- harm and five times more likely to be medicated for depression than their heterosexual counterparts.¹⁸

There are a number of children and young people with disabilities who are often neglected within policies and frameworks, including children with a disability and a mental health issue. Essentially these children are invisible within this Framework. The impact of multiple or complex situations must be taken into account as children can often be engaged with multiple services at any one time. We wish to see further information contained within the Framework that includes children with disabilities who also have mental health issues. This approach would ensure that outcomes are improved for disabled children.

Co-ordinated actions are required to identify and manage cases of violence or abuse according to the specific and individual needs of children with disabilities. In particular children with disabilities must have full and equal access to therapeutic interventions to aid recovery as well as disability-specific measures to address any communication barriers that children with disabilities may have that would hinder communication with a child who may have been a victim of violence, abuse or exploitation.

CiNI supports a Framework that integrates and development partnership working to improve outcomes for all children and young people. However we would advocate for more fluidity across the Framework recognising that at any point in time a child could have needs across a number of the standards outlined. We therefore believe that more work is needed on the Framework to ensure there are clear and explicit linkages

Health Needs of Children Looked After by Craigavon and Banbridge Trust”, Childcare in Practice, Vol.11 (1) p.39.

¹⁷ Mental Health Foundation website 2004 <http://www.mentalhealth.org.uk> cited in Kilkelly et al page

¹⁸ ShOUt: Research into the needs of young people in Northern Ireland who identify as lesbian, gay, bisexual or transgendered. Belfast. Youthnet. 2003.

between regional and local provision so that each child receives the services required to meet their individual needs and circumstances.

Overarching Standard 20

Evidence clearly highlights that children with disabilities suffer from poor transition planning. All too often the transition of disabled young people from children's to adult services causes stress, upset and disruption to their care package. Moreover, confusion for families in the transfer process can lead to ambiguity around the process as well as an increase in feelings of isolation within the family unit.

Transition difficulties for disabled young people can appear magnified; there is an urgent need for an interdepartmental approach to transitional planning with a strategic view. While we welcome the commitment to a person centred and co-ordinated approach between all agencies involved with a young person and their family, omissions remain in relation to post-school transition which can also contribute to further exclusion for a young person with disabilities.

In addition, families with a disabled child have an increased likelihood of being in poverty which is linked to the increased costs of raising a child with disabilities and the loss of income as parents choose to look after their child. Findings indicate that the cost of raising a disabled child is approximately three times the cost of raising a non-disabled child.¹⁹

The Bamford Review noted that often people with learning disabilities are particularly vulnerable to human rights violations. The Review also highlighted the increasing demand for advocacy services in Northern Ireland and that "advocacy services are unevenly and poorly developed in Northern Ireland."²⁰ It is important therefore that the framework includes recommendations on advocacy support. An advocate can support a young disabled person to express themselves and have their voice heard, this can be very empowering for the young person. We recommend an advocate is identified to act

¹⁹ Child Poverty Alliance (2014) *Beneath the Surface: Child Poverty in Northern Ireland*. Belfast: CPA.

²⁰ The Bamford Review of Mental Health and Learning Disability (Northern Ireland) 2006

on behalf of the child and is fully aware of the young person's personal and medical needs who will then act on the wishes of the young person.

The current lack of an advocate with overall co-ordination, particularly in relation to health services, housing, allocation of direct payments, access to education etc, remains a problem. A report by the Northern Ireland Commissioner for Children and Young People highlighted that children and young people required access to an advocacy service at key life stages.²¹

CiNI would like to see further information on this Standard including information on the agencies that will be involved in supporting the child, the protocol and clear pathways in to adult services and how the implementation will be effective. We also welcome further information on the transition workers, it is important that the transition worker stays with the young person to ensure they are supported fully in to adult services.

Overarching Standard 21

It is extremely welcome that short breaks are contained within this Framework. Families of disabled children are more likely to experience family breakup. But short breaks can reduce family stress and prevent families from reaching crisis point. It's about enhancing emotional wellbeing, building resilience, and improving life chances. With short breaks, disabled children and their families are doing things that they never before thought possible.

The report by the Bamford Monitoring Group on short breaks identified the need to develop commission and expand the provision of flexible breaks across Northern Ireland. However, Mencap's Breaking Point Survey²² found that 8 out of 10 families have reached or come close to breaking point because of a lack of short break services.

²¹ Northern Ireland Commissioner for Children and Young People: Who Speaks for Us? Review of Advocacy Arrangements for Disabled Children and Young People with Complex Needs. Belfast NICCY

²²Mencap (2013) *Short Break Support is failing family carers*. England: Mencap.

In Northern Ireland, the Government's target of providing 200 new or enhanced respite packages in the Bamford Action Plan 2009-11 to benefit people with a learning disability was reduced to 125 additional respite packages in the DHSSPS Priorities for Action (2010-11). The allocation was only for specific disabilities and not inclusive of others which can be over 800 conditions. Each child is unique - any service has to reflect this.

Family break provision for carers within Northern Ireland has suffered due to budget cuts and continues to see a reduction in what is offered. It is important to note that short breaks should be viewed as part of ordinary family life and relationships.

We do acknowledge that there is simply a shortage of funding within the Health Department, however research carried out by Action for Children concluded that investment in short breaks could have potential savings of £174 million per annum to government. It will be essential that in terms of ensuring a coherent and consistent approach to delivering short breaks that delivery on the Bamford recommendations is essential to saving money in the longer term.

CONCLUSION

We wish to reiterate our support for a framework that has the potential to improve outcomes for children and young people; however it is somewhat disappointing that we have yet another framework, when we can find little evidence of how well previous frameworks impacted positively on the lives of children with disabilities. The Department must minimise the degree to which frameworks are applied to children with disabilities. Consideration must be given to all regulatory frameworks and policies which could potentially hamper the needs and outcomes for children with disabilities. Any new Framework should not 'reinvent the wheel' rather it should work with all components of previous frameworks and the outcome of the Ten Year Children's Strategy as far as possible. Given the work that has gone in to the UNOCINI Guidance, this Framework should be built around it to ensure how best each feed together and separately to achieve the best outcomes for children with disabilities.

Finally, CiNI trusts that this feedback on the Service Framework for Children and Young People will be useful and beneficial to the Department as it takes forward work to finalise the framework. We would welcome some information on the system which you intend to use to analyse responses to this consultation process including the degree of weight which will be attributed to both individual and organisational responses. This is a vital element to drawing conclusions from responses and progressing with identified areas for immediate action. For this reason, we would appreciate information both on the system itself and on its operation for the purposes of analysis.

Ellen Finlay, Policy Officer

Children in Northern Ireland (CiNI)

Unit 9, 40 Montgomery Road

Belfast BT6 9HL

Tel: 028 9040 1290

Fax: 028 9070 9418

Email: ellen@ci-ni.org.uk