

Introduction

This is the seventh edition of the Children Order Advisory Committee's Multi-Disciplinary Newsletter. The committee are keen to ensure that the newsletter is distributed widely to professionals with roles and responsibilities under the Order. As such, if you know of any individuals or groups that would appreciate being included on the circulation list please send their email address to informationcentre@courtsni.gov.uk.

This edition of the newsletter has been expanded to include a new section providing the opportunity to exchange information and to share new developments within the work of agencies and disciplines associated with the Children Order Advisory Committee. As usual the newsletter continues to provide details of recent judgements and new publications of relevance and interest to child care professionals in Northern Ireland.

The newsletter is divided into three sections. The **first section** lists the content with links to the more detailed summaries contained in the next two sections. The **second section** contains the information exchange whilst the **third section** contains the summaries of key literature. The material in this section is arranged under four subject headings: Law reports; Child welfare; Medicine and psychology; and, Youth justice

Where possible the summaries contain hyperlinks to the original material. In other instances professionals will need to make arrangements within their own organisation to access full copies of the material listed. For example, professionals working within the Health & Personal Social Services can access journal articles and books through the Health on the Net Northern Ireland (<http://www.honni.qub.ac.uk/>) and the Medical Library at Queen's University.

We welcome all comments about how the newsletter could be improved and any recommendations from readers of material to include in future editions. Please send these to alicebeggs@courtsni.gov.uk.

Previous editions of the newsletter are also available to download or view at: http://www.courtsni.gov.uk/en-GB/Publications/Family_Law_and_Childcare_Literature/

His Honour Judge Derek Rodgers
Chair of the Multi-Disciplinary Literature Sub-Committee

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SECTION ONE



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Child Welfare


(Compiled by Greg Kelly, Robyn McCready and John Devaney)




Peer Reviewed Journal Articles




Andersson, G. and Bangura Arvidsson, M. (2008) Contact person as a court-ordered solution in child visitation disputes in Sweden. *Child & Family Social Work* 13(2): 197-206.




Baker, C. (2007) Disabled Children's Experience of Permanency in the Looked After System. *British Journal of Social Work* 37(7): 1173-1188.




Beckett, C., Castle, J., Groothues, C., Hawkins, A., Sonuga-Barke, E., Colvert, E., Kreppner, J., Stevens, S. and Rutter, M. (2008) The experience of adoption: The association between communicative openness and self-esteem in adoption. *Adoption & Fostering* 32(1): 29-39.




Buckley, H., Holt, S. and Whelan, S. (2007) Listen to Me! Children's experiences of domestic violence. *Child Abuse Review* 16(5): 296-310.




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McCrystal, P., Percy, A. and Higgins, K.M. (2008) Substance Use among Young People Living in Residential State Care. *Child Care in Practice* 14(2): 181-192.




Munro, E. R. and Ward, H. (2008) Balancing parents' and very young children's rights in care proceedings: decision-making in the context of the Human Rights Act 1998. *Child & Family Social Work* 13(2): 227-234.




Odell, T. (2008) Promoting foster carer strengths: Suggestions for strengths-based practice. *Adoption & Fostering* 32(1): 19-28.




Philip, K. (2008) She's My Second Mum: Young People Building Relationships in Uncertain Circumstances. *Child Care in Practice* 14(1): 19-33.




Scaife, V.H. (2008) Maternal and Paternal Drug Misuse and Outcomes for Children: Identifying Risk and Protective Factors. *Children & Society* 22(1): 53-62.




Sellick, C. (2007) An Examination of Adoption Support Services for Birth Relatives and for Post-Adoption Contact in England and Wales. *Adoption & Fostering* 31(4): 17-26.




Simon, A. (2008) Early access and use of housing: care leavers and other young people in difficulty. *Child & Family Social Work* 13(1): 91-100.



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Taylor, A., Swann, R. and Warren, F. (2008) Foster Carers' Beliefs Regarding the Causes of Foster Children's Emotional and Behavioural Difficulties: A preliminary model. *Adoption & Fostering* 32(1): 6-18.




Taylor, H., Beckett, C. and McKeigue, B. (2008) Judgements of Solomon: anxieties and defences of social workers involved in care proceedings. *Child & Family Social Work* 13(1): 23-31.




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Vinnerljung, B. and Sallnäs, M. (2008) Into adulthood: a follow-up study of 718 young people who were placed in out-of-home care during their teens. *Child & Family Social Work* 13(2): 144-155.



Wade, J. (2008) The Ties that Bind: Support from Birth Families and Substitute Families for Young People Leaving Care. *British Journal of Social Work* 37(8): 39-54.




Walker, J. (2008) The Use of Attachment Theory in Adoption and Fostering. *Adoption & Fostering*. 32(1): 49-57.




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Whyte, S. and Campbell, A. (2008) The Strengths and Difficulties Questionnaire: A Useful Screening Tool to Identify Mental Health Strengths and Needs in Looked After Children and Inform Care Plans at Looked After Children Reviews? *Child Care in Practice* 14(2): 193-206.

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Cohen Herlem, F. (2008) *Great Answers to Difficult Questions about Adoption - What Children Need to Know*. Jessica Kingsley Publishers, London.




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Farmer, E. and Moyers, S. (2008) *Kinship Care - Fostering Effective Family and Friends Placements*. Jessica Kingsley Publishers, London.




Oliver, C. M. and Dalrymple, J. (2008) *Developing Advocacy for Children and Young People: Current Issues in Research, Policy and Practice*. Jessica Kingsley Publishers, London.




Pallett, C., Blackeby, K., Yule, W., Weissman, R. Scott, S. and Fursland, E. (2008) *Managing Difficult Behaviour*. BAAF, London.



Sinclair, I., Baker, C., Lee, J. and Gibbs, I. (2007) *The Pursuit of Permanence: A Study of the English Care System*. Jessica Kingsley, London.



Stein, M. and Munro, E.R. (2008) *Young People's Transitions from Care to Adulthood: International Research and Practice*. Jessica Kingsley Publishers, London.




Ward, H., Holmes, L. and Soper, J. (2008) *Costs and Consequences of Placing Children in Care*. Jessica Kingsley Publishers, London.

BAAF Practice Notes

Government and Agency Publications



Children, Schools and Families Select Committee Debate




Department of Finance and Personnel (2008) *Budget 2008-11*. Central Expenditure Division, DFP, Bangor.




OFMDFM Committee (2008) *Interim Report on the Committee's Inquiry into Child Poverty in Northern Ireland*. NI Assembly, Belfast.




Bills of Rights Forum (2008) *Bill of Rights Forum Final Report*. Belfast



Department for Children, Schools and Families (2007) *The Pursuit of Permanence: A study of the English care system*. DCSF, London.




Department for Children, Schools and Families (2008) *Staying Safe Action Plan*. DCSF, London




End Violence Against Women (2008) *Making the Grade 2007 Report*. Amnesty, London.



Ministry of Justice (2008) *Care Profiling Study. Research Series Report 4/08*. Ministry of Justice, London.




NICCY (2008) *Who Speaks for Us? Review of Advocacy Arrangements for Disabled Children and Young People with Complex Needs*. NICCY, Belfast.



Northern Ireland Court Services (2008) *The Children Order Advisory Committee. Eighth Report*. Court Services NI, Belfast.

DHSSPS (2008) *The adoption of looked after children in Northern Ireland 2005-06*. DHSSPS, Belfast.




Northern Ireland Courts Service (2008) *Children's Order Bulletin October 2007 - December 2007*. Courts NI and NISRA. Belfast.


Medicine and Psychology

(Compiled by Catherine Macpherson and Fionnuala Leddy)

Peer Reviewed Journal Articles




Ariga, M., Uehara, T., Takeuchi, K., Ishige, Y., Nakano, R. and Mikuni, M. (2008) Trauma exposure and posttraumatic stress disorder in delinquent female adolescents. *Journal of Child Psychology and Psychiatry* 49(1): 79–87.



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Eisenberg, M.E., Ackard, D.M., Resnick, M.D. (2007) Protective factors and suicide risk in adolescents with a history of sexual abuse. *Journal of Pediatrics*; 151(5): 482-7.




Gornall J. (2008) Does cot death still exist? *BMJ*; 336:302-304



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Klonsky, E.D. and Moyer, A. (2008) Childhood sexual abuse and non-suicidal self-injury: meta-analysis. *The British Journal of Psychiatry*. 192: 166-170.




McIntosh, N., Mok, J.Y.Q., Margerison, A. (2007) Epidemiology of Oronasal Haemorrhage in the First 2 Years of Life: Implications for Child Protection. *Pediatrics* 120(5): 1074 – 1078.



Rutter, M., Kreppner, J., Croft, C., Murin, M., Colvert, E., Beckett, C., Castle, J. and Sonuga-Barke, E. (2007) Early adolescent outcomes of institutionally deprived and non-deprived adoptees. III. Quasi-autism. *Journal of Child Psychology and Psychiatry* 48(12): 1200–1207



Squier, W. (2008) Shaken baby syndrome: the quest for evidence. *Developmental Medicine and Child Neurology* 50(1):10 - 4.



Waterson, T., Mok, J. (2008) Violence against children: the UN report. *Archives of Disease in Childhood* 93(1): 85 – 88

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Barker, J, Hodes, D. (2008) *The Child in Mind: A Child Protection Handbook (Revised edition)*. Taylor & Francis Ltd




Lindon, Jennie (2008) *Safeguarding Children and Young People: Child Protection 0-18 Years*. Hodder Education






Mitchels, B. (2008) *Practice Notes on Child Care and Protection (3rd Revised edition)*. Taylor & Francis Ltd



Sidebotham P, Fleming P. (2007) *Unexpected Death in Childhood: A Handbook for Practitioners*. Series: Wiley Child Protection & Policy S. John Wiley and Sons Ltd




Youth Justice

(Compiled by Dave Weir)



Peer Reviewed Journal Articles



Snow, P.C. and Powell, M.B. (2008) Oral Language Competence, Social Skills and High-risk Boys: What are Juvenile Offenders Trying to Tell us? *Children & Society* 22(1): 16-28.

Books



Goldson, B.(Ed) (2008) *Dictionary of Youth Justice*. Willan Publishing, Uffculme. www.willanpublishing.com


Ward. T. and Maruna S. (2007) *Rehabilitation*. Routledge, Abingdon.

Government and Agency Publications




Criminal Justice Inspection Northern Ireland (2008) *Inspection of the Youth Conference Service in Northern Ireland*. CJINI, Belfast.


Criminal Justice Inspection Northern Ireland (2008) *Inspection of the Juvenile Justice Centre*. CJINI, Belfast.



NIO (2008) *Evaluation of the Attendance Centre Order conducted by Independent Research Solution (IRS)*. NIO, Belfast.



Irish Youth Justice Service (2008) *National Youth Justice Strategy 2008-2010*. IYJS, Dublin.



SECTION TWO

New Developments

Care – but not as we know it

VOYPIC, the Voice of Young People in Care, has launched a series of ground breaking guides to help young people in care in Northern Ireland deal with the challenges of living in care. The user friendly and colourful guides were developed through a year long consultation with young people currently in care in Northern Ireland and provide dedicated resources for younger children (under 10 years) coming into care, 11-15 year olds living in care for and leaving care for 15+ year olds.

Vivian McConvey, Director at VOYPIC explains the importance of the guides:


“Most of the children and young people we deal with would say that they don't understand why they have come into care. It is often the most traumatic event in their life.”

“Young people in care are just like any other child or young person growing up in Northern Ireland but they do need some extra support to achieve their full potential. Imagine how difficult it is for a seven year old child to suddenly be living away from their family. In such difficult circumstances, clear, accessible and age appropriate information is vital to help make sense of the care system, which can at any age be confusing and stressful.”

“Our new guides aim to help young people understand their rights, answer questions and generally help them to cope with change and feelings of isolation at each stage.”



VOYPIC's guide series includes:

- **'My coming into care guide'**: developed for under 10s, this workbook aims to help younger children answer some of the questions they have about their new circumstances. Making strong use of cartoon strips and colouring in sections, this guide offers young children a chance to work out exactly how they feel about their situation in a very constructive way. Information for this age group is particularly limited and this guide is therefore truly ground breaking.
- **'Care...but not as we know it'**: designed for 11-15 year olds, this guide aims to answer questions about being in care, the role of social workers, contact with family and friends, education, health, forms and meetings,





transitions through care and help if things go wrong. This guide particularly aims to help young people in care understand their rights.

- **'The A-Z of leaving care'**: moving through care and into adulthood can be a scary time. This guide aims to provide an accessible guide to some of the biggest issues for example; accommodation, food, grants, independence training and rights.



The guides are available now to children and young people from VOYPIC and will be distributed through Health Trusts in the coming weeks. VOYPIC will launch an online version of the guides in early summer 2008, allowing children and young people to access up to date information in a more attractive and accessible format.



Funded by the Children and Young People's Funding Package, the VOYPIC guides were developed in response to the 'Care Matters in Northern Ireland – a Bridge to a Better Future' report launched in March 2007 by the Department of Health, Social Services and Public Safety. The report sets out the Government's vision to improve outcomes for care experienced children and young people through improving health, education, career opportunities and recreational opportunities.



Copies of the guides are available from:

Voice of Young People in Care

9 - 11 Botanic Ave

Belfast

BT7 1JG

Tel.: 02890244888



www.voypic.org




Interdisciplinary Education in Court Work Skills at Queen's University Belfast




(Aine Maxwell, Institute of Professional Legal Studies and John Devaney, School of Sociology, Social Policy & Social Work, Queen's University Belfast)




Within higher education there is a need to ensure that interdisciplinary education for students from different disciplinary backgrounds amounts to more than just sitting in the same room whilst being taught about an area of mutual interest. For professionals who will meet regularly in practice interdisciplinary education is a potent learning mechanism and is of particular relevance and importance. As social workers and lawyers meet on a daily basis in the court room and other legal fora, an opportunity for a shared learning experience was greatly welcomed by staff in the School of Sociology,




Social Policy and Social Work, and the Institute of Professional Legal Studies at Queen's University Belfast.




In its fifth annual report, the Children Order Advisory Committee (2005:38) highlighted the importance of interdisciplinary education in underpinning the successful operation of a family justice system in Northern Ireland:




"It is only by an exchange of views, a sharing of mutual experiences and a realisation of the problems facing the disparate branches of the family justice system that we can all benefit from our shared experience."




With the introduction of the new degree in social work in 2004 the opportunity arose to provide student social workers with an introduction to the knowledge and skills required to work in the court system in Northern Ireland. Within Queen's University Belfast this module is designed to develop students:


- 
- understanding of the social work role in legal proceedings
 - knowledge about the structure and operation of the court system in Northern Ireland
 - knowledge of the roles of different professionals involved in legal proceedings
 - skills in presenting written evidence in the form of a report
 - skills in presenting oral evidence and dealing with cross examination in court




During the module students also have the opportunity to avail of a visit to Laganside Courts. They receive a half day introduction to the structure and operation of courts in Northern Ireland, delivered by Court Services NI in conjunction with one of the Resident Magistrates, and another half day observing the operation of a family court and a criminal court. Some of the teaching to the students is delivered by professionals currently practicing in the family courts, including a Lay Magistrate, a Guardian ad Litem and a Barrister.



The Institute of Professional Legal Studies is the graduate provider of the legal vocational training ultimately leading to qualification as a barrister in Northern Ireland. The Institute undertakes extensive substantive and procedural legal training for Trainee Barristers. This training includes the areas of Family Law and Criminal Law. They also undertake extensive skills training which includes legal analysis and advocacy training.



As such the benefits of providing a shared learning experience for students who will one day practice together was thought to be very important. For both sets of students a shared learning experience would inject an additional element of realism into the education programme of both courses, helping to



integrate the theory – practice divide and facilitating the development of knowledge and skills that will be required in their future roles.

Dr John Devaney and Ms Catherine Maguire from the School of Sociology, Social Policy and Social Work and Mrs Aine Maxwell from the Institute of Professional Legal Studies formulated a template for this shared learning experience. This involved:

- (a) briefings for students by staff from both departments
- (b) preparation of professional reports by student Social Workers based on an analysis of a real life case study
- (c) analysis of these reports, eliciting relevant information and construction of examination in chief and cross examination by Trainee Barristers
- (d) preparation for court appearance by all
- (e) court appearance by all

Social Work Students Perspective

The shared learning experience involved 118 student Social Workers presenting written and oral evidence to a mock court based on the case studies. The reports written by the students and their performance whilst giving oral evidence and being cross examined by the Trainee Barristers was assessed by experienced social work staff.


From the perspective of the student Social Workers the shared learning experience provided the opportunity to:

1. better understand the importance of producing a high quality report for court
2. practice skills in giving oral evidence in chief and dealing with cross examination in a legal context
3. develop confidence in working with legal professionals
4. be assessed under more realistic conditions


At the module review, an internal university quality assurance mechanism, the students commented that whilst the prospect of being cross examined by the Trainee Barristers made them anxious, they appreciated the opportunity to experience this process before “doing it for real”. They also noted that, as a result, they had fewer misconceptions about the role of Barristers, and that the assessment was clearly related to the learning outcomes for this module.

Bar Trainees' Perspective



The twenty five Bar trainees received the reports from the Social Work students. They each prepared questions for examination in chief and cross examination in relation to five reports. A preparatory session was timetabled. Over a two day period the Bar trainees were required to undertake examination in chief and cross examination of the Social Work




students under supervision with the added responsibility that this session formed part of the assessment process for the Social Work students.




From the perspective of the Institute of Professional Legal Studies, joint training offered the Bar trainees the opportunity to

- 
1. have a better understanding of the role of the expert witness
 2. analyse the significance and effect of an expert's report
 3. elicit favourable evidence and advance own case and also construct examination which undermines opponent's case
 4. undertake clear and coherent examination in chief and cross examination
- 




The Bar trainees welcomed the opportunity to meet with fellow professionals. They welcomed the opportunity to analyse experts' reports and then to examine in chief and cross examine on the basis of those reports. The trainees thought the session added realism to the advocacy training process.

Next Steps



Based on the successful completion of this pilot consideration is now being given to how this shared learning experience could be developed and enhanced for both sets of students in future years. In addition the module outline has been shared with the Eastern Health & Social Services Board to ensure that post qualifying court skills training commissioned by the Board builds on this foundation. It is planned that similar discussions with staff in the other Board areas will shortly take place.



SECTION THREE

Law Reports

(Compiled by Siobhan Keegan)

There are a number of important decisions in Northern Ireland in this issue. Morgan J deals with jurisdiction intra UK and the applicability of the Brussels 11A Regulation. He also deals with a long standing private law dispute. Gillen J provides an important decision in relation to non accidental injury in which he took the unusual step of allowing for publicity.

CASES:


RE ESJ A Minor (Residence Order Application: Jurisdiction within UK; Applicability of Council Regulation (EC) No 2201/2203)

This case involved a child born in 2000 to unmarried parents. They separated in 2003. The child lived in Wales with both parents until 2003 and then with her mother until October 2005. On the 4th of October 2005 a Welsh court made a residence order in favour of the mother and a parental responsibility and contact order for the father. Further orders were made in Wales dealing with contact and registration in January and April 2006. The contact arrangements then progressed for a number of years. During Christmas 2007, the father did not return the child after Christmas contact and she stayed in Wales. The mother objected. The mother obtained an ex parte residence order on the 7th of January 2008 at Larne Family Proceedings Court. The father applied to Wales on the 11th of January 2008 and orders were made in his favour. On the 4th of February the Welsh court asked the Northern Ireland Court to give up jurisdiction to Wales. The case was heard by Morgan J and the Official Solicitor was appointed to represent the child.



The question was whether the EC Regulation applied intra UK and if not should jurisdiction be declined on the basis of the Family Law Act. The Judge decided that the Council Regulation did not apply intra UK. He also refused to stay the proceedings in Northern Ireland and he went on to hear the substance of the case.

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In this case Morgan J deals with a long running residence and contact dispute. The case concerned the two youngest children of the family aged 12 and 6. The elder children were 17 and 15. Both parents were able and intelligent. They had separated in 2002 and at that stage allegations of abuse were made against the father which resulted in contact between him and the three eldest children stopping. In the course of a hearing before Morgan J, a






large number of allegations were made by both parents. The Judge expressed his reservations about the court process being able to determine these issues after 6 years of separation. He referred to the catastrophic consequences of disputes persist over years.







He decided that none of the allegations had been established to the standard needed to prevent the father from having a relationship with his children. He said that the exclusion of a parent from a child's life was very serious and that to rely on the wishes of the child was to abdicate the responsibility to inform, guide and assist children in proper decision making.



In the matter of LM1, LM2 and SM 2008 NI Fam 5



This was a care order case in relation to three children. It was heard before Mr Justice Gillen. The first care order hearing largely dealt with an allegation of non accidental injury against the mother. The 4 week child had suffered a neuroblastoma and various medical evidence pointed to this being non accidental. After a contested hearing this was proven. The first two children had been removed into foster care and the care plan was adoption. After the care hearing there was a criminal trial at which the mother was acquitted. Then the Trust issued freeing proceedings. At this stage a doctor who had treated the child on first admission came forward to query the medical evidence of non accidental injury. Further medical evidence was obtained which could not conclusively point to non accidental injury. The mother appealed to the Court of Appeal who quashed the care orders and ordered a re trial. In the meantime a third child had been born who was removed into care on the basis of the original findings. The freeing was adjourned and at a new care order hearing non accidental injury was not relied upon. The care plan was reunification however only the youngest child returned due to bonding issues. The Judge referred to a hope that the second child would return but difficulties regarding the eldest child. The Judge also allowed for publicity in this case given the issues involved.





Child Welfare


(Compiled by Greg Kelly, Robyn McCready and John Devaney)






Peer Reviewed Journal Articles




Andersson, G. and Bangura Arvidsson, M. (2008) Contact person as a court-ordered solution in child visitation disputes in Sweden. *Child & Family Social Work* 13(2): 197-206.





Separated parents have the joint responsibility to give their children access to the other parent. If they fail to reach a visitation agreement, the District Court will decide on one for them. In Sweden one demand can be supervision by a contact person. This paper is about court-ordered visitations including supervision by a contact person. Different public systems, with different interpretations of the best interest of the child, have to interact in these cases: the District Court makes the decision on supervised visitation and the Social Services appoint a contact person and follow the intervention up. There is a shortage of research on this use of a contact person, and an exploratory research project is carried through: Three small-scale studies, based on group-interviews with family law social workers, social files and individual interviews with contact persons, supplement each other and form together a Social Services perspective on the intervention. The results are presented according to five themes: Social Services and the court; the families and children concerned; contact arrangements; termination of the intervention; Social Services' perceptions of the intervention. The conclusion is that contact person is perceived as a positive solution for children in visitation disputes involving risk. However, the intervention brings up some contradictory interests important to be conscious of.




Baker, C. (2007) Disabled Children's Experience of Permanency in the Looked After System. *British Journal of Social Work* 37(7): 1173-1188.



Research with seven local authorities in England provided data on the 'care careers' of 596 foster-children over three years (Sinclair *et al.*, 2005). One part of this study looked at the experiences of disabled foster-children compared to non-disabled foster-children. The research aimed to identify if there were any particular difficulties in pursuing permanency for disabled looked after children. This article introduces a concept developed by the author from this work: the idea that disabled children may be at risk of experiencing a 'reverse ladder of permanency'; being less likely than their peers to receive permanent placements such as adoption and return home. The results of the study partially supported this hypothesis, reinforcing existing findings and highlighting some new ones. Foster-children with learning but not other impairments were less likely to be adopted. All disabled children were less





likely to return home and therefore remained in foster-care for longer. Disabled children who were adopted, or who returned home, did so after a greater delay compared to non-disabled children. By contrast, children who were 'clearly disabled' achieved a greater degree of permanence within the care system. The article concludes by considering the implications of such findings for policy and practice.

Beckett, C., Castle, J., Groothues, C., Hawkins, A., Sonuga-Barke, E., Colvert, E., Kreppner, J., Stevens, S. and Rutter, M. (2008) The experience of adoption: The association between communicative openness and self-esteem in adoption. *Adoption & Fostering* 32(1): 29-39.




A study of the views of two groups of 11-year-old adopted children (one adopted as babies within the UK, $n = 47$, the other adopted from Romania, aged between two and 43 months, $n = 133$) indicates that parents underestimate the difficulty that their children have in talking about adoption. Children who found this harder experienced lower self-esteem at age 11 and were also more likely to feel different from their adoptive families, and both these factors were related to the individual child's level of behavioural or cognitive difficulties. Children in the Romanian sample who had another adopted sibling found it easier to talk about their adoption. In summary, the ease with which children can talk about adoption does appear to be associated with higher self-esteem and the individual child's difficulties, as well as family composition.

Buckley, H., Holt, S. and Whelan, S. (2007) Listen to Me! Children's experiences of domestic violence. *Child Abuse Review* 16(5): 296-310.


This paper reports on a study undertaken in the Republic of Ireland during 2005 and is based on the experiences of children and young people who have lived with domestic violence. The objectives of the study were to explore the impact of domestic violence on children, identify their needs and recommend appropriate interventions to be brokered through a centrally based women's support service. Data were gathered from 70 participants, including 37 service providers/volunteers, 11 mothers and 22 children and young people who had lived in violent environments. The data indicated that children respond in unique ways to living with domestic violence, and that services to meet their needs must be tailored to suit their individual situations. The impact of domestic violence on their lives manifested itself with regard to their sense of fear and anxiety in relation to themselves, their siblings and their mothers; their self-esteem and sense of being 'different', their relationships (including ambivalent relationships with their fathers); their experiences of education and their sense of a lost childhood. The final report for the study was based on the total data collection, but this paper will concentrate primarily on the material elicited from the children and young people.





Chou, S. and Browne, K. (2008) The relationship between institutional care and the international adoption of children in Europe . *Adoption & Fostering* 32(1): 40-48.



The study explored the link between institutional care for young children and international adoption, using a survey of 33 European countries. Official figures were available from 25 countries on the proportions of national versus international adoption within their own countries, together with the number of children under three in institutional care. Results indicate an association between international adoption (both incoming and outgoing) and a high number of young children in institutional care. The evidence suggests that, rather than reduce the number of children in institutions, international adoption may contribute to the continuation of this harmful practice. A child rights-based approach to providing alternative care for children separated from their parents is proposed.





Coakley, J.F. and Berrick, J.D. (2008) Research Review: In a rush to permanency: preventing adoption disruption. *Child & Family Social Work* 13(1): 101-112.




Since the late 1990s, US, UK and Canadian policy have increasingly focused on improving permanency outcomes for looked-after children. Although the ideal permanency outcome of reunification is attained for about half of the children entering out-of-home care, an increasing number of children are adopted each year. The vast majority of adoptions are stable and secure, but concerns about adoption disruption haunt child welfare workers when making this important permanency decision. Despite a variety of definitions employed in the literature, adoption disruption is a general term used to describe the failure or breakdown of an adoptive child's placement. Studies dating back to the 1970s have reported adoption disruption rates and the characteristics associated with those involved in such cases. This paper reviews available research, principally from the United States, and offers possible explanations for the wide range of reported disruption rates in the literature. After reviewing the research, practice implications for improving adoption outcomes and suggestions for future research are presented.



Dixon, J. (2008) Young people leaving care: health, well-being and outcomes. *Child & Family Social Work* 13(2): 207-217.



This paper focuses on the health and well-being of young people making the transition from care to independent adulthood. It draws on findings from a wider study of outcomes for young people leaving care in England. Notably, the study used, as its key outcome indicators, measures of general and mental well-being. In doing so, it was able to explore the interrelationship between these areas and young people's overall progress after care. The paper explores the extent to which young people experience difficulties



related to physical and mental health, disability and emotional and behavioural problems. It will show that such difficulties can impact upon and be influenced by overall well-being and post-care progress in more traditional outcome areas such as accommodation and career, and will suggest that the transition from care itself can adversely affect health and well-being. The paper considers these issues within the context of a changing policy framework which has given increased priority to the health and well-being of young people in and leaving care, particularly in light of the Children (Leaving Care) Act 2000. It considers the ways that young people are supported to address health and well-being and the implications for and impact on leaving care services.

Gilkes, L. and Capstick, L. (2008) Parent-to-Parent Mentoring: Oxfordshire's pioneering buddy scheme for adopters. *Adoption & Fostering*. 32(1): 69-72.

Parent mentoring schemes have been found to be successful in providing peer support for families with young children in times of need. Parent mentors can often be a more acceptable form of help to fellow parents than professionals. In response to a request from local adoptive parents and following the establishment of a parenting skills training programme for all its adopters, Oxfordshire County Council, in partnership with Parentline Plus, have pioneered a parent mentoring scheme that has been tailor-made for adopters and uses trained adoptive parents as 'buddies' to newer adopters. This paper reports on how the scheme was set up and run as a partnership between an adoption agency and a local service provider. The buddy scheme was evaluated by means of a questionnaire and was found to be effective in providing the type of support requested by new adopters. It has now become an established part of the county's adoption support services and is highly valued by those who use it.

Greene, S., Kelly, R., Nixon, E., Kelly, G., Borska, Z., Murphy, S. and Daly, A. (2008) Children's Recovery after Early Adversity: Lessons from Intercountry Adoption. *Child Care in Practice* 14(1): 75-81.

Research on children who have been internationally adopted provides many strong examples of resilience. This paper discusses what counts as resilience in intercountry adoption and includes new data from the first study in this area conducted in Ireland. As with studies conducted in other jurisdictions, the Irish data indicate a remarkable capacity for recovery from adversity in most, but not all, children after adoption and exposure to pervasive and permanent environmental change.


Hawkins, A., Beckett, C., Castle, J., Groothues, C., Sonuga-Barke, E., Colvert, E., Kreppner, J., Stevens, S. and Rutter, M. (2007) A study of

**intercountry and domestic adoption from the child's point of view.
Adoption & Fostering 31(4): 5-16.**

This study compared views about adoption for two groups of 11-year-old children (n = 180). The team's analyses compared the views of children according to their pre-adoption background: UK domestic adoptees placed before the age of six months versus intercountry adoptees who had experienced extreme deprivation for up to three-and-a-half years in Romania prior to placement (the Romanian group was further broken down by age at placement). Remarkably few differences were found between these groups, with the exception of two areas. Older-placed adopted children from Romania were significantly more likely to find it difficult to talk about adoption than domestic adoptees, and to feel different from their adoptive families. However, supplementary analyses suggested that these differences were due to increased levels of difficulties within the older-placed Romanian group, rather than whether they were adopted internationally or domestically. The implications of the similarities and differences between these groups for policy and practice are discussed.

James, A.L. (2008) Children, The UNCRC, and Family Law in England and Wales. *Family Court Review* 46(1): 53-64.


There is no doubt that, overall, there has been a great deal of activity in relation to children's rights under the United Nations Convention on the Rights of the Child (UNCRC) since it was ratified by the UK government in 1991. Of particular significance in the context of family law, however, are the provisions of Article 12, which have in many ways proved to be more problematic than other provisions, not least because, in the context of family law, children's participation rights are necessarily juxtaposed with the long-standing and hitherto unchallenged rights of parents to make important decisions about family life. The reorganisation in 2001 of the family court welfare services in England and Wales with the creation of the Children and Family Courts Advisory and Support Service (CAFCASS), generated a new impetus for the consideration of children's participation rights and, at an organizational level, considerable progress has been made in embracing the provisions of the UNCRC. More problematic, however, is the acceptance of children's participation in making decisions about their futures by adults using and working in the family justice system. At the level of the courts, judicial attitudes are slow to change and in England, as court judgments often demonstrate, these are firmly rooted in a view of children as being incompetent in such issues; at the level of parents using the system, it is arguable that new discourses about the best interests of the child serve as a proxy for continuing discourses about parents' rights that have become evident, most recently, in the context of an increasingly influential fathers' rights lobby; and at the level of welfare practitioners, recent research also demonstrates that, although the rhetoric of children's rights is widely accepted, the willingness and ability to






make these real in the context of family proceedings is, for a variety of reasons, less in evidence.




Kirton, D., Beecham, J. and Ogilvie, K. (2007) Gaining Satisfaction? An Exploration of Foster-Carers' Attitudes to Payment. *British Journal of Social Work* 37(7): 1205-1224.






The payment of foster-carers has long been controversial, reflecting both philosophical debates as to whether fostering should be a voluntaristic or professional activity and concerns about placement provision and service delivery for children. Although many research studies have touched upon the question of foster-carers' satisfaction with payments, this has not been explored in any depth. Drawing on findings from a study involving 1,181 foster-carers in twenty-one agencies, this article attempts to provide such an analysis with four main objectives. These comprised: examining associations between attitudes towards payment and demographic, socio-economic and fostering career variables; comparing responses between carers based in local authorities (grouped according to levels of payment and performance criteria) and independent agencies (IFAs); gauging the influence of carers' 'orientations' towards foster-care as a 'professional' task; and analysing payments in terms of their different components, such as fees, maintenance and certain designated expenses. Among many detailed findings to emerge were the generally low level of satisfaction among local authority carers, especially in comparison with their IFA counterparts and the growing support among carers for salaried status. There was mixed evidence on links between attitudes towards remuneration and the performance of agencies.



McCrystal, P., Percy, A. and Higgins, K.M. (2008) Substance Use among Young People Living in Residential State Care. *Child Care in Practice* 14(2): 181-192.






Existing empirical evidence on substance use among young people living in residential state care during adolescence is comparatively limited. This paper reports on substance use trends of young people living in residential state care during three annual data-sweeps when aged 14, 15 and 16 years. A repeated cross-sectional research design was utilised in the research. The findings suggest some similarities for lifetime prevalence rates for tobacco and alcohol use for those living in residential state care with a group of same-age young people not living in residential state care who participated in the research. However, solvent abuse and cannabis use was higher among those living in care. More frequent substance use was reported by the residential care sample for all substances at each stage of the study. These findings suggest that young people living in state care continue to merit higher levels of vigilance from researchers and policy-makers in order to fully understand this behaviour and develop appropriate prevention initiatives to meet their needs regarding potential drug problems.








Munro, E. R. and Ward, H. (2008) Balancing parents' and very young children's rights in care proceedings: decision-making in the context of the Human Rights Act 1998. *Child & Family Social Work* 13(2): 227-234.



This paper explores whether the Human Rights Act 1998 has influenced the approach a range of professionals, including social workers, managers and children's guardians adopt when they examine and seek to balance the potentially competing rights of parents and children involved in care proceedings. Drawing on findings from an empirical study of the decision-making process that influences the life pathways of very young children in care, it also explores some of the dilemmas professionals face in their day-to-day practice and examines whether parental rights are prioritized over children's rights in certain instances.





Odell, T. (2008) Promoting foster carer strengths: Suggestions for strengths-based practice. *Adoption & Fostering* 32(1): 19-28.




Sixty-eight per cent of looked after children in the UK are in foster care. Children in foster care benefit from continuity. Sometimes, due to worker turnover and workloads, that continuity comes not from a social worker but from a foster carer. Thus, children in foster care can develop significant attachments to their carers, who are likely to have a valuable role to play in long-term planning for a child. A strengths approach to fostering social work places value on the input of carers as experts on a child, but the social work research literature reveals limited information about the use of such an approach in supervising foster carers. This article builds on recent writing and suggests that the strengths perspective could be of value in working with foster carers, just as it has been in other settings. A case study examines the process of moving on for one child and how social workers and carers worked together to take a creative approach for a child with a history of multiple placements. This case study illustrates elements of a strengths-based approach. Suggestions for further application of such a model with foster carers are made, and areas for further practice research identified.



Philip, K. (2008) She's My Second Mum: Young People Building Relationships in Uncertain Circumstances. *Child Care in Practice* 14(1): 19-33.



Youth mentoring has become a key element of UK youth policy in recent years and is now integrated into a range of policy initiatives aiming to tackle social exclusion. It is claimed by proponents of planned mentoring that the introduction of a mentor enhances resilience through the provision of a consistent, caring relationship that transcends professional boundaries. It has also been suggested that successful mentoring has the potential to enhance the social capital of disadvantaged young people by acting as a lever into




education and training. However, despite the popularity of the concept, research findings consistently demonstrate that the theoretical base and empirical evidence of the value of the concept remain weak. This paper explores young people's perceptions of successful mentoring in relation to their social networks. It draws on findings from a recent Scottish study of planned mentoring interventions, and raises questions about the role of mentoring in assisting young people to renegotiate difficult family relationships. The paper uses the framework of social capital to explore these dimensions. It suggests that, in some circumstances, successful mentoring can assist in building up skills in dealing with relationships but that this is a fragile and uneven process.

Scaife, V.H. (2008) Maternal and Paternal Drug Misuse and Outcomes for Children: Identifying Risk and Protective Factors. *Children & Society* 22(1): 53-62.

There are estimated to be 250 000–350 000 children of problem drug users in the UK. The Government's Every Child Matters Programme seeks to ensure that vulnerable children affected by parental drug misuse are enabled to achieve their full potential in life. This article critically reviews recent national and international research examining the impact of parental drug misuse on children; focusing on the extent to which within-family risk and protective factors are related to parental gender. The article calls for greater research focus on paternal drug-misusers parenting strategies and makes recommendations.

Sellick, C. (2007) An Examination of Adoption Support Services for Birth Relatives and for Post-Adoption Contact in England and Wales. *Adoption & Fostering* 31(4): 17-26.

Support services for the birth relatives of adopted children have received far less research scrutiny than those for adopters and the children themselves. This paper reports the first stage 'mapping' survey of a government-commissioned study into birth relative support services and services supporting contact following changes in policy and legislation. The type, range and delivery of such services, commissioned or provided by local authority and voluntary adoption agencies and adoption support agencies in England and Wales, are examined. The survey found that good opportunities exist for linking birth relative and contact support services. However, real challenges remain in promoting support services and reaching birth relatives and in funding and commissioning such services, particularly from the non-governmental sector.



Simon, A. (2008) Early access and use of housing: care leavers and other young people in difficulty. *Child & Family Social Work* 13(1): 91-100.


This paper presents findings from a study of how care leavers access and use housing services, and what they said had helped them to do so. The sample comprised 80 care leavers, and, for comparison, a group of 59 young people (termed 'in difficulty') who met certain criteria of disadvantage. Care leavers were found to have fewer crisis transitions and less experience of homelessness, together with a much higher level of autonomy and support in their first accommodation, relative to other young people in difficulty. Several factors are identified that, from the care leavers' point of view, contributed to their better access and use of housing services, including having family and friends to turn to, and leaving care teams that negotiated on their behalf with housing services. The paper concludes that care leavers had more positive housing experiences than other young people in difficulty, helped by the improved preparation for independence and ongoing support available to them from leaving care teams.

Stein, M. (2008) Resilience and Young People Leaving Care. *Child Care in Practice* 14(1): 35-44.

How do we promote the resilience of young people leaving care? This article explores this question by bringing together research findings on the resilience of young people from disadvantaged family backgrounds with research studies on young people leaving care. These findings are applied to young people during their journey to adulthood: their lives in care, their transitions from care, and their lives after care. It is suggested that three main groups of young people can be identified from leaving care research studies: young people "moving on", "survivors" and "victims". It is argued that promoting the resilience of young people leaving care will require more comprehensive services across their life course. This will include, first, better quality care, providing more stability, holistic preparation, a positive sense of identity and assistance with education; second, opportunities for more gradual transitions from care, less accelerated and compressed, and more akin to normative transitions; and third, the provision of better quality and more extended support.

Taylor, A., Swann, R. and Warren, F. (2008) Foster Carers' Beliefs Regarding the Causes of Foster Children's Emotional and Behavioural Difficulties: A preliminary model. *Adoption & Fostering* 32(1): 6-18.

This study aimed to explore foster carers' beliefs about the causes of foster children's emotional and behavioural difficulties (EBD), with a view to creating a theory to explain how this particular group of people make sense of these problems. Fourteen foster carers, with either past or present experience of




caring for foster children with EBD, volunteered to take part in an interview to discuss their views. The interviews were transcribed and the data analysed using Grounded Theory methodology (Glaser and Strauss, 1967). Nine major causal categories emerged from the data and a theoretical model was constructed to help explicate these categories and the links between them. The results demonstrated that foster carers believed that much of foster children's difficulties were caused by early experiences of adversity (eg abuse) or inadequate care (eg neglect) prior to being fostered. However, there seemed to be a sense that these difficulties could be exacerbated by subsequent experiences within the care system itself. The clinical implications of these findings and future research directions are discussed.

Taylor, H., Beckett, C. and McKeigue, B. (2008) Judgements of Solomon: anxieties and defences of social workers involved in care proceedings. *Child & Family Social Work* 13(1): 23-31.

Evidence from focus group discussions with social workers in child care and child protection was collected for a research project exploring decision-making in care proceedings and seeking a better understanding of the causes of delay in the process. Here this material is used to examine social workers' feelings about their work and to explore the anxieties they expressed. Isabel Menzies's work on containing anxiety in institutions is used to provide a conceptual framework for thinking about the ways in which individuals' unconscious defences against anxiety may affect the structure, policies and practices of the organization in which they work. It is suggested that this dimension needs to be taken into account in understanding difficulties which arise in putting policy into practice.

Twigg, R. and Swan, T. (2007) What Research Tells Us About the Experience of Foster Carers' Children. *Adoption & Fostering* 31(4): 49-61.

Although foster care is the main source of out-of-home care for children and young people, little is known about the dynamics of the foster family. This article focuses on one subsystem of the foster family system, the foster parents' own children. Fourteen research studies (nine published, five unpublished) were reviewed. These involved approximately 232 respondents, ranging in age from seven to 32 when interviewed, nearly equal numbers of males and females. Findings include benefits of fostering, impact of fostering on foster carers' children, responses to loss of role and parental attention, and the impact of the child welfare or foster care system. The authors conclude with several recommendations designed to make fostering a more positive experience.



Vinnerljung, B. and Sallnäs, M. (2008) Into adulthood: a follow-up study of 718 young people who were placed in out-of-home care during their teens. *Child & Family Social Work* 13(2): 144-155.


In this study, national register data were used to analyse long-term outcomes at age 25 for around 700 Swedish young people placed in out-of-home care during their teens. The sample consisted of 70% of all 13- to 16-year olds who entered out-of-home care in 1991. Results revealed a dividing line between young people placed in care for behavioural problems and those placed for other reasons. Young woman and men from the first group had – in comparison with peers who did not enter care – very high rates of premature death, serious involvement in crime, hospitalizations for mental-health problems, teenage parenthood, self-support problems and low educational attainment. Young people who were placed for other reasons had better outcomes, but still considerably worse than non-care peers. Young women tended to do better than young men, regardless of reasons for placement. Very high rates of hospitalizations for mental health problems were found among young people placed for behavioural problems. Breakdown of placement was found to be a robust indicator of poor long-term prognosis.

Wade, J. (2008) The Ties that Bind: Support from Birth Families and Substitute Families for Young People Leaving Care. *British Journal of Social Work* 37(8): 39-54.

This paper draws on findings from a study of outcomes for young people leaving care funded by the Department for Education and Skills. It explores the informal support networks available to a sample of 106 young people over a period of 12–15 months after leaving care. It examines patterns of contact with birth families and caregivers, the support that emanated from these links and the strategies of leaving care professionals to strengthen these connections. It also considers the new families created by many young people through relationships with partners and the onset of parenthood and discusses the continuing support needs of young parents. The paper situates the needs and experiences of care leavers in a wider youth transitions framework and highlights the need for continuing professional attention to be given to strengthening family links as one strategy for helping care leavers to negotiate the transition to adulthood.

Walker, J. (2008) The Use of Attachment Theory in Adoption and Fostering. *Adoption & Fostering*. 32(1): 49-57.

The relevance of attachment theory to fostering and adoption is explored in this paper. The author begins by focusing on three important qualities for




substitute carers: the ability to manage a wide range of feelings, both in oneself and in others; the resolution of past losses and traumas; and the acquisition of reflective function. Emphasis is then paid to gaining an understanding of the attachment patterns of both children and potential substitute carers. Current ideas from attachment theory can help to inform both the selection of substitute carers and the needs and vulnerabilities of looked after children. Ways of matching the child with the carers are discussed, including an analysis of particular areas of vulnerability. Further discussion highlights some of the dilemmas which these ideas might create for current social work practice.

Ward, H. and Holmes, L. (2008) Calculating the costs of local authority care for children with contrasting needs. *Child & Family Social Work* 13(1): 80-90.

Activity data from practitioners can be combined with financial data to develop unit costs for the eight processes that underpin social work activity for children looked after away from home. The frequency and duration of processes can then be calculated, and the data are used to cost different pathways through care. Costs vary according to children's needs, types of placements and local policies and practices. Combinations of need add to costs. This paper compares the costs accrued by children who show no evidence of additional support needs with a group of troubled children with emotional or behavioural difficulties who also commit offences. The latter show the most costly care pathways and also appear to experience the least positive outcomes, leading us to question whether different configurations of services might better meet their needs.

Whyte, S. and Campbell, A. (2008) The Strengths and Difficulties Questionnaire: A Useful Screening Tool to Identify Mental Health Strengths and Needs in Looked After Children and Inform Care Plans at Looked After Children Reviews? *Child Care in Practice* 14(2): 193-206.

The mental health of Looked After Children is not routinely assessed either upon entering the care system or during their period in care. Many children only receive help when difficulties become entrenched and more intensive treatment is required. Often this occurs when placements are fragile or have broken down. The Department of Health, Social Services and Public Safety (DHSSPS) 2007 Consultation Paper "Care Matters in Northern Ireland - A Bridge to a Better Future" has recommended "systematic assessment of the psychological and emotional needs of children on the edge and LAC". Prior to the focus group study outlined below, Strengths and Difficulties Questionnaire (SDQ) screening was undertaken with a sample of Looked After Children (n=76), 37 males and 39 females, in Homefirst Community Trust, aged 3-17 years (standard deviation=4.3), living with relatives or foster carers. Confirmed Neglect was recorded as the primary reason for becoming looked after in 75%



(n=57) of the children screened. SDQ screening was undertaken with 76 (78%) carers, 64 (76%) teachers and 32 (87%) children aged 11+, and the findings provided to the child's social worker for consideration at the child's statutory review. Fifty-six per cent of carers, 39% of teachers and 30% of children identified significant difficulties, with 63% of carers, 35% of teachers and 45% of children stating that the difficulties had been present for over a year. Pre-test and post-test file audits were undertaken to ascertain whether SDQ screening had informed the child's care planning process. While care plans reflected an increase in referrals for further assessment and treatment in 42%, a number assessed with significant difficulties were not referred due to uncertainty about accessing appropriate services or concerns about swamping existing services. This paper outlines the findings of three focus groups with social workers and managers following SDQ screening of a sample of Looked After Children within four generic childcare teams and a team for children with special needs in Homefirst Community Trust. Participants reflected on the usefulness of the SDQ in identifying mental health strengths and difficulties to inform decision-making at Looked After Children Reviews. Participants recommended that routine SDQ screening is undertaken with all Looked After Children, with early intervention provided to children identified with some mental health difficulties and prioritisation of children with significant need. The usefulness of SDQ identification of child strengths as a foundation for promoting resilience in Looked After Children was also recognised. Recommendations were also made regarding specific service provision for Looked After Children and training for field social workers, link social workers and carers.

Books

Cohen Herlem, F. (2008) *Great Answers to Difficult Questions about Adoption - What Children Need to Know*. Jessica Kingsley Publishers, London.

<http://www.jkp.com/catalogue/book.php/isbn/9781843106715>

Children who find out they are adopted have many questions that are difficult for a parent to answer. This book explores children's thoughts and feelings and provides parents with guidance on how to respond to difficult questions. The author covers all the common questions that children ask and provides sensitive, candid answers in a way that children will be able to understand and relate to. Each chapter is devoted to a particular issue, such as why a child is adopted, who chose the child's first name and what happens when the child grows up. The book recognizes the emotions and reactions of everyone in the family and includes separate conclusions for parents and children. This handy guide offers useful advice for parents and will also be of interest to counsellors and other professionals working with children.



Cohen Herlem, F. (2008) *Great Answers to Difficult Questions about Divorce - What Children Need to Know*. Jessica Kingsley Publishers, London.

<http://www.jkp.com/catalogue/book.php/isbn/9781843106722>

When faced with their parents' divorce, children have many concerns and questions that are difficult for a parent to answer. This book explores children's thoughts and feelings and provides parents with guidance on how to respond to difficult questions. The author covers all the common questions that children ask and provides sensitive, candid answers in a way that children will be able to understand and relate to. Each chapter is devoted to a particular issue, such as why parents separate, what will happen during and after the divorce, and who the child is going to live with. The book recognizes the emotions and reactions of everyone in the family and includes separate conclusions for parents and children. This handy guide offers useful advice for parents and will also be of interest to counsellors and other professionals working with children.

Farmer, E. and Moyers, S. (2008) *Kinship Care - Fostering Effective Family and Friends Placements*. Jessica Kingsley Publishers, London.


<http://www.jkp.com/catalogue/book.php/isbn/9781843106319>

Children are frequently cared for by relatives and friends when parents, for whatever reason, are unable to care for their children themselves. Yet there has been very little information about how well children do when placed with kin or how safe they are in these placements. This book compares formal kinship care to traditional foster placements in order to ascertain which children are placed with kin, in what circumstances, how well such children progress, and how often these placements disrupt. The authors explore whether children placed with family and friends fare better or worse than other foster children, what services are provided and needed, and how kin care is experienced by carers, children and social workers. This book will be essential reading for social workers, policy makers, students and all those working with looked-after children, and will enable local authorities to make informed decisions about where best to place children and the support needed by family and friend carers.

Oliver, C. M. and Dalrymple, J. (2008) *Developing Advocacy for Children and Young People: Current Issues in Research, Policy and Practice*. Jessica Kingsley Publishers, London.

<http://www.jkp.com/catalogue/book.php/isbn/9781843105961>


Advocacy for vulnerable people is increasingly becoming a part of health and social care practice, and over the past decade policy developments have contributed to a rapid development of advocacy services for children and




young people. This book explores the latest debates and findings relating to research and practice in the field of children and young people's advocacy. Contributors present the key issues and dynamics of current advocacy practice and examine its role within health, education and social care services, including its impact on inter-professional collaboration, the development of personalised services and the barriers and facilitators to children's participation in children's services.



Pallett, C., Blackeby, K., Yule, W., Weissman, R. Scott, S. and Fursland, E. (2008) *Managing Difficult Behaviour*. BAAF, London.





This handbook aims to provide foster carers of the under 12s with new skills to help them improve a child's behaviour. Includes useful tips, case examples and exercises to help improve relationships and make every day seem easier and more manageable.




Sinclair, I., Baker, C., Lee, J. and Gibbs, I. (2007) *The Pursuit of Permanence: A study of the English care system*. Jessica Kingsley, London.

<http://www.jkp.com/catalogue/book.php/isbn/9781843105954>





Children in public care complain that they have too many placements. Professionals agree but little is known about the reasons for this instability or how it affects different groups of children. The Pursuit of Permanence explores this core issue for children's services in research commissioned by the Department of Children, Schools and Families. . Based on the largest study of the English care system in recent years, the book examines the children (what they need and what they want), their movements into, out of and within the care system, the nature and quality of their placements and the outcomes (whether the children are settled or happy). It analyses the reasons for movements and outcomes in different groups of children, and the relative impacts of the departments, social work teams and placements. It concludes with suggestions about how the care system should work, what it should offer and how it should be managed and inspected.




Stein, M. and Munro, E.R. (2008) *Young People's Transitions from Care to Adulthood: International Research and Practice*. Jessica Kingsley Publishers, London.

<http://www.jkp.com/catalogue/book.php/contents/9781843106104>



The transition from care into adulthood is a difficult step for any young person, but young people leaving care have a high risk of social exclusion, both in terms of material disadvantage and marginalisation. In *Young People's Transitions from Care to Adulthood* leading academics gather together the latest international research relating to the transition of young people leaving




care, outlining and comparing the range of legal and policy frameworks, welfare regimes and innovative practice across 16 countries. The book also highlights the variations that exist between different groups leaving care. Featuring key messages for policy and practice, this book will give academics, practitioners and policymakers valuable insights into how to encourage resilience and improve outcomes for care leavers.




Ward, H., Holmes, L. and Soper, J. (2008) *Costs and Consequences of Placing Children in Care*. Jessica Kingsley Publishers, London.

<http://www.jkp.com/catalogue/book.php/isbn/9781843102731>




It costs more to place a child in the care of a local authority than it does to send a child to a top boarding school, and there are substantial variations in costs both between and within authorities. This book gets to the bottom of the costs of care and provides an insight into how these variations in cost relate to differences in children's needs, and most importantly, whether higher costs reflect better services and better outcomes for children.



Costs and Consequences for Children Placed Away from Home draws from new original research, and considers the implications for best practice and future policy. It also features information about a newly pioneered resource: a fully workable decision analysis model designed for use in local authorities which uses historical data for each child to calculate the probable cost consequences of difference placement choices. This book sheds light on how to calculate the financial and social costs of care, and will be invaluable to both social work managers and policy makers working in children's services.



BAAF Practice Notes



These information pamphlets are designed to give up to date information to practitioners in fields of adoption and fostering on particular issues. Below is a list of the most recent. All are freely available to BAAF member organisations (all HSC Trusts are members) or for a small fee from the BAAF Office (Tel.: 9031 5494).




52 [Adoption from abroad of a relative child](#)

Aimed at kinship carers, this practice note describes the process involved in adopting the child of a family member from overseas. It also addresses many of the questions and challenges that may arise during this process.



51 [Reducing the risks of environmental tobacco smoke for looked after children and their carers](#)



Updated guidance and recommendations for agencies that considers the significant health disadvantages of placing a child in a smoking household against the positive elements of any such placement.



50 [Genetic testing and adoption](#)

This short Practice Note is intended as a guide for all parties concerned in the adoption process where a decision needs to be made about the genetic testing of a child.



49 [The role of male carers in adoption and fostering](#)

This highlights the role of male carers in meeting the needs of fostered children. It includes discussion about gender in the family placement environment, the needs of children, the experiences and perspectives of male carers, and the impact of abuse.



48 [Featuring children in the mainstream media](#)

This focuses on the key matters for consideration by child placement practitioners involved in profiling children for permanence in the wider – local and national – mainstream media.



47 [Using the BAAF health assessment forms](#)

This Practice Note accompanies a restructuring and revision of BAAF's health forms for looked after children.



46 [Health screening of children adopted from abroad](#)

The health of children newly adopted from abroad is easily overlooked, yet we know that many children arrive from abroad with unrecognised health problems.



44 [Assessing lesbian and gay foster carers and adopters](#)

This practice note is intended to inform assessments of gay and lesbian prospective foster carers and adopters by examining research evidence and the implications for practice.



Government and Agency Publications




PARLIAMENT



Children, Schools and Families Select Committee

<http://www.publications.parliament.uk/pa/cm/cmchilsch.htm>



The Select Committee are currently undertaking an inquiry into Looked After Children. The evidence and future report on the Committee will be available at this weblink.

ASSEMBLY

Department of Finance and Personnel (2008) Budget 2008-11. Central Expenditure Division, DFP, Bangor.

<http://www.pfgbudgetni.gov.uk/finalbudgetdocument.pdf>

The Budget sets out in detail the spending plans for Northern Ireland departments over the years 2008-09 to 2010-11 which have been agreed by the Executive to deliver the priorities and actions in the Programme for Government and the Investment Strategy for Northern Ireland.


Key Areas to be funded:

- Special Education Needs Review
- Enhanced services to children in complex needs
- Improvements in child protection will be funded
- Mainstreaming the children's and young people's package.
- Reduction in numbers of learning disabled and mental health long stay patients, as well as a 10% reduction in admissions to mental health hospitals
- Extra investment in family support, foster care will, by 2011, help reduce by 12% the number of children in care, increase by 25% the numbers of care leavers aged 18-20 living with their former foster carers or supported family, and increase by 50% the proportion of care leavers in education, training or employment.
- Reduce by 12% the number of children needing to be placed in the child protection register.
- Take forward recommendations of the Homeless Strategy to promote the social inclusion of homeless people and those at risk of becoming homeless in Northern Ireland and develop housing support services for vulnerable people to help them remain in their own homes.
- Support will be provided to a number of exemplar projects of area-based interventions for children and young people.
- Implementation of the play policy for 0-18 year olds
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OFMDFM Committee (2008) Interim Report on the Committee's Inquiry into Child Poverty in Northern Ireland. NI Assembly, Belfast.

http://www.niassembly.gov.uk/centre/2007mandate/reports/Report07_07_08r.htm

The Committee for the Office of the First Minister and Deputy First Minister published its interim report on Child Poverty in Northern Ireland. According to the report, more than 40,000 Northern Ireland children are living in severe poverty and this is part of an overall figure 100,000 living in poverty.






The inquiry was formally launched on 17 October 2007. The Committee agreed to produce an interim report on its inquiry for the purpose of influencing the draft Programme for Government, Budget and Investment Strategy for Northern Ireland. The interim report takes account of the written submissions received by the Committee,




The focus of the interim report is on two key issues:

- levels of child poverty in Northern Ireland, including the measurement and monitoring of child poverty; and
- the response of the draft Programme for Government, Budget and Investment Strategy to the challenge of child poverty.

Conclusions



The Committee for the Office of the First Minister and Deputy First Minister agreed to undertake the inquiry because of Members' concerns about the level, intensity and impact of child poverty. The evidence considered by the Committee in developing the interim report has confirmed the Committee's initial concerns and highlighted the need for early action by OFMDFM and the Executive.




The Committee is concerned that insufficient information is available within the Programme for Government, Budget and the accompanying Public Service Agreements on how these very challenging targets are to be delivered and calls on OFMDFM to ensure that more detailed information, including specific timescales for the delivery of relevant actions, are included in the Programme for Government and the forthcoming investment and delivery plans.

DOCUMENTS





Bills of Rights Forum (2008) *Bill of Rights Forum Final Report*. Belfast
http://www.billofrightsforum.org/bill_of_rights_final.pdf




The Bill of Rights Forum have presented their final report containing their advice and recommendations to the Northern Ireland Human Rights Commission on a Bill of Rights for Northern Ireland.

The Forum was required:



“To produce agreed recommendations to inform the Northern Ireland Human Rights Commission’s advice to Government on the scope for defining, in Westminster legislation, rights supplementary to those in the European Convention on Human Rights, to reflect the particular circumstances of Northern Ireland, drawing as appropriate on international human rights instruments and experience. These additional rights to reflect the principles of mutual respect for the identity and ethos of both communities and parity of esteem, and – taken together with the ECHR – to constitute a Bill Rights for Northern Ireland.”




The report contains 41 proposals in relation to substantive rights to be considered for inclusion in the Bill of Rights.




Department for Children, Schools and Families (2007) *The Pursuit of Permanence: A study of the English care system.* DCSF, London.

<http://www.dfes.gov.uk/research/data/uploadfiles/DCSF-RBX-02-07.pdf>




This briefing summarises the key messages arising from a study tracing the care careers of over 7,000 children looked after by thirteen local authorities in England. It analysed why the children entered and left the care system, the reasons for movement and changes of placement within it, and the outcomes for different groups of children. It concludes with recommendations for how the care system should work and what it can offer.




Department for Children, Schools and Families (2008) *Staying Safe Action Plan.* DCSF, London

<http://www.everychildmatters.gov.uk/stayingsafe/>



Staying Safe was launched for consultation in July 2007, and during that period, parents, children and young people, members of the general public and practitioners were consulted about their concerns in relation to children's safety. This action plan sets out the work which the Government will take forward over the next three years to drive improvements in children and young people's safety, which will be measured by the new Public Service Agreement to improve children and young people's safety.




The Staying Safe Action Plan covers three main areas: universal safeguarding, involving work to keep all children safe and to create safe environments for them; targeted safeguarding to reduce the risks of harm for vulnerable groups of children and young people; and responsive safeguarding, involving responding effectively when children are harmed.



End Violence Against Women (2008) *Making the Grade 2007 Report.* Amnesty, London.


http://www.amnesty.org.uk/uploads/documents/doc_18298.pdf




Making the Grade? 2007 Northern Ireland is the first report to examine the work of each of the eleven Northern Ireland departments in relation to violence against women (VAW).




The Report recommends that:




1. A single Inter-Ministerial Group on violence against women should be set up to develop and oversee an integrated violence against women strategy with a coherent set of targets. It should be established by OFMDFM in its capacity as the lead department on equality issues, and be supported by a cross-departmental group of officials to ensure that work is mainstreamed




throughout departments. Its remit must extend beyond current work on specific forms of violence and attract additional personnel and resources.




2. The aim of this integrated strategy should be “to create a safer environment for women at home and in public by progressively eliminating all forms of violence against women and empowering women to challenge abusive behaviour.” This aim, originally drafted by the Department for Economic Development in 1999, is commended to all departments for their active consideration.




3. Violence against women should be integrated into relevant policy initiatives, and local agencies and inter-agency forums should be encouraged to develop area based plans to implement the integrated violence against women strategy.




4. Northern Ireland specific research to identify the human and financial costs of all forms of violence against women needs to be commissioned.



5. Current support for women who are victims of all forms of violence against women should be mapped and additional resources made available to ensure appropriate levels of support across Northern Ireland.



6. All departments should work to an agreed gendered definition of violence against women and take forward their work within the framework of international human rights law, the requirements of CEDAW and the UN Global Platform for Action, as well as UK law.




7. The gender-neutral approach to Section 75 of the Northern Ireland Act applied to violence against women should be ended to ensure that all departments and public bodies address violence against women in a gender positive manner in carrying out their obligations under Section 75. The EAVW Coalition urges all government departments to enter into dialogue with it in order to progress the work of creating a safer society for women and girls.



Ministry of Justice (2008) *Care profiling Study. Research Series Report 4/08* Ministry of Justice, London.

<http://www.justice.gov.uk/publications/research030308.htm>



The aim of the project was to provide baseline data on court proceedings for the protection of children brought under the Children Act 1989, s.31. Data were collected through a detailed examination of a random sample of court files relating to applications made in 2004, in 15 Family Proceedings Courts (FPCs) and 8 county courts (Care Centres). The sample consisted of 386 cases involving 682 children, initiated by 15 local authorities.

Key Findings

- There is no evidence that the local authorities brought care proceedings without good reason. Many families had lost the care of children in previous proceedings.
- Almost 60% of cases relate to one child. Over a quarter of care proceedings involve babies.
- Neglect was the basis for concern in three-quarters of cases; fewer than 10% involved major injuries to children but 40% of cases resulted from a crisis.
- Half the children were living with a lone parent; fathers were only involved in the care of a third of the children.
- Children's Services Departments were working with 85% of families but court applications included a Core Assessment for only a minority of children.
- Courts managed these cases very differently; the average duration in county courts ranged from 37 to 72 weeks.
- 60% of cases resulted in Care Orders and 23% in Residence Orders.
- The management information collected and published by the Ministry of Justice does not accurately reflect the work of the courts in care proceedings and is inadequate for monitoring policies relating to the transfer between FPCs and Care Centres.

NICCY (2008) *Who Speaks for Us? Review of Advocacy Arrangements for Disabled Children and Young People with Complex Needs*. NICCY, Belfast.

<http://www.niccy.org/downloads.aspx?file=%20Final%20NICCY%20report.pdf>

NICCY appointed KPMG to undertake a review of the arrangements for advocacy services for disabled children and young people with complex needs in Northern Ireland. This review focused on advocacy arrangements that provide support and advice in everyday settings.

Recommendations

Co-ordination of Services

1. DHSSPS should ensure that the delivery of advocacy services for disabled children is coordinated at a strategic level. NICCY has already written to the DHSSPS seeking its support for the development of an advocacy network in Northern Ireland and suggesting it would be beneficial to better co-ordinate existing provision and to ensure standards are maintained and developed across the sectors and agencies involved. This network should be inter-departmental to ensure that all aspects of services for disabled children are included.

2. The introduction of the new regional Health and Social Services Board in April 2009 means services will be coordinated and delivered at a strategic

level. The new Board should review how advocacy services could be co-ordinated, funded and delivered at a strategic level.

3. The DHSSPS should undertake an awareness campaign to raise the profile of advocacy and its uses, emphasising the need for advocates to be independent and free of conflicts of interest.

By way of example this could include providing those who work with disabled children and young people with literature regarding advocacy guidelines or, someone from the DHSSPS acting as an information officer, being responsible for the provision of information and advice relating to advocacy for those in working statutory and voluntary services.

4. Where good practice is identified, DHSSPS should ensure that information is made available that would allow others to replicate or use the model to develop effective advocacy services. This could be good practice within Northern Ireland (such as the Sixth Sense project) and further a field such as the publication of the DoH advocacy guidelines.

5. All statutory organisations with a remit to protect the rights of disabled children should ensure that their services are publicised and promotional material is accessible.

Service Planning

6. An accurate and complete register of all disabled children in Northern Ireland should be compiled and maintained by the new HSSB, in line with the Children Order (Northern Ireland) 1995.


7. All relevant government departments (i.e. DHSSPS, DE and DEL) should ensure that existing services are appropriately funded in order to meet the needs of all children within their remit and to allow organisations to publicise their services.

8. Those responsible for funding advocacy services need to be aware of the resource implications of long term advocacy in order to maintain it effectively and to meet the needs of disabled children with complex needs.

Equity of Access

9. In order to achieve equitable access to advocacy, services should be made available to all children with complex needs at the point when they enter either educational or health and social services.

10. The establishment of the new Health and Social Services Board should ensure that advocacy services are strategically planned and delivered to achieve a regional service and not a series of localised and varied services. Evidence from the review of literature, the responses to the survey and




interviews with disabled children and young people with complex needs indicate that all disabled children and young people with complex needs would benefit from statutory funded advocacy services.



Northern Ireland Court Services (2008) *The Children Order Advisory Committee. Eighth Report. Court Services NI, Belfast.*



http://www.courtsni.gov.uk/NR/rdonlyres/874CD5E0-DE1F-4686-926F-1AB2F848C55C/0/p_flc_coac_8th_Report.pdf



The eighth report of the Children Order Advisory Committee on the business of the committee and the operation of the courts in relation to private and public law proceedings relating to children and families under The Children (Northern Ireland) Order 1995.


STATISTICS



DHSSPS (2008) *The adoption of looked after children in Northern Ireland 2005-06. DHSSPS, Belfast.*




http://www.dhsspsni.gov.uk/bulletin_-_the_adoption_of_looked_after_children_2005-06.pdf




This DHSSPS Statistical Bulletin summarises information on children adopted from care in Northern Ireland during 2005-06. The main findings from the latest survey indicate an increase of 9 months in the average duration from last entry into care to final adoption, from 3 years 4 months in 2003, to 4 years 1 month in 2006, and a decrease in the number of children adopted from care, which fell from 109 in 2003, to 79 in 2004, to 56 in 2006.



Northern Ireland Courts Service (2008) *Children's Order Bulletin October 2007 - December 2007. Courts NI and NISRA. Belfast.*



http://www.courtsni.gov.uk/NR/rdonlyres/586B41CE-B497-4721-AEF0-4C26A08158EA/0/p_tp_ChildrenOrderReportOctDec2007.pdf



This report details the volume of Children's Order business received and dealt with during the quarter, as well as looking at waiting times and numbers of children involved.

Medicine and Psychology

(Compiled by Catherine Macpherson and Fionnuala Leddy)

Peer Reviewed Journal Articles

Ariga, M., Uehara, T., Takeuchi, K., Ishige, Y., Nakano, R. and Mikuni, M. (2008) Trauma exposure and posttraumatic stress disorder in delinquent female adolescents. *Journal of Child Psychology and Psychiatry* 49(1): 79–87.

Background: Although juveniles within the justice system have high psychiatric morbidity, few comprehensive investigations have shown posttraumatic stress disorder (PTSD) in female delinquents. Here, we aim to describe the nature and extent of PTSD and trauma exposure and to clarify the relationships among comorbidity and psychosocial factors in juvenile female offenders.


Method: Sixty-four girls were randomly interviewed using structured tools. Self-report measures were used to assess depression, eating behaviour, impulsivity and parental attitude.

Results: The PTSD prevalence was 33%, and 77% of the female juvenile offenders had been exposed to trauma. The offenders with PTSD showed a significantly high psychiatric comorbidity. Depression and adverse parenting were associated with PTSD development, and abnormal eating was also correlated with PTSD symptoms. Marked differences in the frequency and intensity of PTSD evaluation depending on the type of comorbidity and trauma were observed.

Conclusions: Incarcerated young females in Japan have serious trauma-related problems, and the degree of depression is a strong predictor of PTSD development and symptoms. This study highlights the importance of adequate diagnosis and treatment of PTSD in delinquent female adolescents.

Bacon, C.J., Hall, D.B.M., Stephenson, T.J., Campbell, M.J. (2008) How common is repeat sudden infant death syndrome? *Archives of Disease in Childhood* 93(4): 323 -326.

This is a review article that attempts to ascertain the risk of recurrence of sudden infant death syndrome (SIDS), by examining eight studies of recurrent SIDS published in English since 1970. The authors acknowledge that the recurrence of SIDS is rare but may give rise to confusion and controversy because of the differential diagnosis of familial disease or covert homicide. The studies examined were population-based or similar studies. They



included the work carried out by Froggatt and colleagues who identified SIDS victims from public records in Northern Ireland in the late 1960s and looked for SIDS deaths among previous siblings. The other studies selected reflected findings from the USA, Norway, Australia and most recently the UK. Each of the studies was assessed with regard to specific criteria; was ascertainment of index cases and siblings complete and accurate, were investigations thorough enough to ensure diagnosis was as accurate as possible and were the cases compared with controls matched for risk of SIDS.


Flaws were identified in all the studies considered and in the opinion of Bacon et al the flaws caused overestimation of the risk of SIDS recurrence. The theoretical argument is raised that a family who has lost one baby by SIDS is likely to be more at risk than other families because many of the same genetic and environmental influences will apply for subsequent children. The authors therefore conclude that a family's risk for a second SIDS death is probably greater than the risk for a first death for their subgroup, but that the increase cannot be quantified and is almost certainly less than that suggested by most of the studies. In the absence of good evidence, great caution is needed in expressing opinions about repeat SIDS, especially in the courts. They highlight that it is essential that every unexpected infant death, first as well as recurrent, is fully investigated in the manner recently recommended ⁽¹⁾. The article closes by considering the information and advice that should be shared with parents who have lost a baby to SIDS and who are anxious about the chance of recurrence.

1. Kennedy H. Sudden unexpected death in infancy: the report of the working party convened by the Royal College of Pathologists and The Royal College of Paediatrics and Child Health. London: Royal College of Pathologists, 2004 (<http://www.rcpath.org>)


Blair, P.S., Fleming, P.J. (2008) Recurrence risk of sudden infant death syndrome. *Archives of Disease in Childhood* 93(4): 269 - 270.

This article briefly explores the hypotheses surrounding the complex pathophysiology found in many SIDS deaths and comments that after almost 40 years of intensive study it is unlikely that one single causal mechanism will be identified. The authors draw upon the known demographic characteristics of SIDS families to highlight similarities across geographical and cultural boundaries. They reflect on the evidence gathered from their longitudinal study in Avon ⁽¹⁾ which suggests that among SIDS families, social deprivation has become more marked during a time period when affluence in society overall has increased.

Commenting on the paper by Bacon et al ⁽²⁾ Blair and Fleming concur that the ability to answer questions with regard to the chances of a second SIDS death in a family, will largely be determined by the quality of the investigations that are conducted after the initial infant death. Detail in relation to some of the




rare gene mutations that have been identified in small numbers of infants who have died suddenly and unexpectedly is provided. The 'triple risk' model, which considers factors and interactions between the immune, nervous and thermal systems as possibly predisposing some infants to SIDS is discussed, in addition to modifiable environmental risk factors.


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1. Blair PS, Ward Platt MP, Smith I et al. Major changes in the epidemiology of sudden infant death syndrome: a 20 year population based study of all unexpected deaths in infancy. *Lancet* 2006; 367(9507):314 – 19.
 2. Bacon CJ, Hall DBM, Stephenson TJ, Campbell MJ. (2008) How common is repeat sudden infant death syndrome? *Archives of Disease in Childhood* 93 (4) 323 -326.




Bosijoli, R., Vitaro, F., Lacourse, E. Barker, E.D. and Tremblay, R.E. (2007) Impact and clinical significance of a preventive intervention for disruptive boys. *The British Journal of Psychiatry*. 191: 415-419.




Background Many intervention programmes have attempted to reduce disruptive behaviour problems during early childhood to prevent maladjustment during adolescence and adulthood.




Aims To assess the long-term impact and clinical significance of a 2-year multicomponent preventive intervention on criminal behaviour and academic achievement, using intention-to-treat analyses.




Method Targeted disruptive–aggressive boys considered to be at risk of later criminality and low school achievement ($n=250$), identified from a community sample ($n=895$), were randomly allocated to an intervention or a control group. The rest of the sample ($n=645$) served as the low-risk group. The intervention was multimodal and aimed at boys, parents and teachers. Official data measured both outcomes.




Results Significantly more boys in the intervention group (13%; $P<0.05$) completed high-school graduation and generally fewer (11%; $P=0.06$) had a criminal record compared with those allocated to the control group.




Conclusions The results suggest that early preventive intervention for those at high risk of antisocial behaviour is likely to benefit both the individuals concerned and society.



Drapeau, S., Saint-Jacques, M.-C., Lépine, R., Bégin, G. and Bernard, M. (2007) Processes that contribute to resilience among youth in foster care. *Journal of Adolescence* 30(6): 977-999



The objective of this qualitative research was to better understand the processes that contribute to resilience among adolescents in foster care. The results point to three types of turning points: action, relation and reflection. Four processes, directly, or indirectly linked to the turning point, have also



been identified: increase in perceived self-efficacy, distancing oneself from risks, new opportunities and the multiplication of benefits.

Eisenberg, M.E., Ackard, D.M., Resnick, M.D. (2007) Protective factors and suicide risk in adolescents with a history of sexual abuse. *Journal of Pediatrics*; 151(5): 482-7.

This study was designed to test the hypothesis that certain protective factors will reduce the risk of suicide behaviours in youth who are sexually abused. Survey data were collated from 83,731 students in the 6th, 9th, and 12th grades in Minnesota. Four childhood sexual abuse groups were created: a) no history of sexual abuse; b) abuse by non-family member; c) abuse by family member; and d) abuse by both. Dependent variables included suicidal ideation and attempts. Four protective factors included: family connectedness, teacher caring, other adult caring, and school safety. Logistic regression was used in detecting differences in suicide behaviours across the 4 childhood sexual abuse categories.

The results indicated that four percent of students reported sexual abuse by a non-family member, 1.3% by a family member, and 1.4% by both. Although youth with a history of childhood sexual abuse were at increased risk for suicide behaviours compared with other youth, when protective factors were accounted for, the predicted probabilities of suicide behaviours for childhood sexual abuse youth were substantially reduced. Family connectedness was the strongest of the 4 protective factors. In conclusion the authors of this study found that modifying select protective factors, particularly family connectedness, may reduce suicide risk in adolescents with childhood sexual abuse.

Gornall J. (2008) Does cot death still exist? *BMJ*; 336:302-304

A feature article which opens with the controversial statement "I simply don't believe in SIDS deaths...if you do a complete investigation you will find a cause of death" said by the chief deputy coroner of Vanderburgh County, Indiana, USA. This report comments on current opinion particularly with regard to modifiable parental behaviours and factors such as smoking, sleep position and co-sleeping. From April 2008 all sudden unexpected infant deaths in the UK will be investigated according to a new national multiagency protocol that is expected to reduce by half the number of deaths registered as SIDS.

Haines, L., Turton, J. (2008) Complaints in child protection. *Archives of Disease in Childhood* 93(1): 4 - 6.


This paper summarises the findings of the Royal College of Paediatrics and Child Health (RCPCH) investigation, commissioned in 2005, into the nature and impact of complaints made against paediatricians involved in child protection work.

Qualitative interviews were held with 72 consultant paediatricians who had been the subject of a child protection complaint between 1999 and 2003. The authors reported that the overwhelming message expressed was that paediatricians were well aware of the risk of a complaint, particularly when they initiated a referral to social services and that this was accepted when undertaking child protection responsibilities. However it was highlighted that for a small number of individuals the complaint was accompanied by threats, personal attacks, threatening mail, accusations of child abuse and even child murder. Complaints were noted to be associated with particular dilemmas encountered by paediatricians involved in child protection work. These dilemmas included; the clinical uncertainty and limited evidence base that can exist when making a diagnosis of non-accidental injury, the difficulty in communicating concerns to parents and shifting the balance between the parents' and child's rights and a sense of insufficient time for effective child protection work.

In considering the way forward for paediatricians involved in child protection the authors highlighted the need for professional support and decision making informed by the best research evidence. The work carried out by the RCPCH to support those involved in child protection was outlined and the hope expressed that increased training, support, research and developing partnerships with families emergent from this work will minimise the number of complaints and restore public and professional confidence.

Hall, D., Williams, J. (2008) Safeguarding, child protection and mental health. *Archives of Disease in Childhood* 93(1): 11-13.

This leading article reflects on the term 'safeguarding' as defined in the government guidance in England *Working Together to Safeguard Children* and examines its relationship to child protection. Safeguarding is recognised as a more inclusive concept than child protection and emphasises not only the diagnosis and management of child abuse as conventionally understood but also the importance of recognising children in distress and intervening where possible to prevent a range of adverse outcomes. This approach challenges professionals to gather detailed and comprehensive information with regard to physical and mental health issues, family situation and adverse socioeconomic circumstances and to recognise that safeguarding, child protection and the mental health of children are inextricably intertwined. The




authors remind readers that around 10% of 5 to 15 year old children have some form of mental disorder and that depression affects a growing number of children and young people. Statistics relating to the prevalence of parental mental health problems and domestic violence are also provided and should act as a catalyst for professionals to enquire about parental and home issues. This broader emphasis will require child health professionals to embrace a more holistic approach in terms of child health. Joint working with Child and Adolescent Mental Health Services is advocated. The support provided by the Royal College of Paediatrics and Child Health is highlighted in terms of child protection training and the "Child in Mind" programme.

Harold, G.T., Aitken, J.J. and Shelton, K.H. (2007) Inter-parental conflict and children's academic attainment: a longitudinal analysis. *Journal of Child Psychology and Psychiatry* 48(12): 1223–1232.


Background: Previous research suggests a link between inter-parental conflict and children's psychological development. Most studies, however, have tended to focus on two broad indices of children's psychological adaptation (internalizing symptoms and externalizing problems) in considering the effects of inter-parental conflict on children's development. The present longitudinal study extends this body of research by considering the impact of inter-parental conflict on children's low academic attainment among a sample of 230 schoolchildren (age 11–13 years) living in the United Kingdom. **Method:** Controlling for teacher reports of children's initial levels of aggression (Time 1), the proposed theoretical model linked parent and child reports of inter-parental conflict at Time 1 (1999) to children's perceptions of negative parent–child relations, appraisals of self-blame for marital conflict and teacher reports of children's aggressive behavior at Time 2 (2000), which in turn were linked to children's performance on standardized academic tests (English, Math, Science) at Time 3 (2001). Structural equation modeling was used to test all hypothesized relations in the proposed theoretical model.

Results: Support was found for the role of children's self-blaming attributions for parents' marital arguments, not negative parenting behavior, as a mechanism through which variation in their academic attainment is explained.


Conclusions: Contrary to the focus emphasized in most current family and school-based intervention programs, findings suggest that the attributional processes engendered in children who live in households marked by high levels of inter-parental conflict and hostility have important implications for their long-term academic success.




Klonsky, E.D. and Moyer, A. (2008) Childhood sexual abuse and non-suicidal self-injury: meta-analysis. *The British Journal of Psychiatry*. 192: 166-170.




Background: Many theorists posit that childhood sexual abuse has a central role in the aetiology of self-injurious behaviour. Studies that report statistically significant associations between a history of such abuse and self-injury are cited to support this view.




Aims: A meta-analysis was conducted to determine systematically the magnitude of the association between childhood sexual abuse and self-injurious behaviour.




Method: Forty-five analyses of the association were identified. Effect sizes were converted to a standard metric and aggregated.




Results: The relationship between childhood sexual abuse and self-injurious behaviour is relatively small (mean weighted aggregate $r=0.23$). This figure may be inflated owing to publication bias. In studies that statistically controlled for psychiatric risk factors, childhood sexual abuse explained little or no unique variance in self-injurious behaviour.




Conclusions: Theories that childhood sexual abuse has a central or causal role in the development of self-injurious behaviour are not supported by the available empirical evidence. Instead, it appears that the two are modestly related because they are correlated with the same psychiatric risk factors.




McIntosh, N., Mok, J.Y.Q., Margerison, A. (2007) Epidemiology of Oronasal Hemorrhage in the First 2 Years of Life: Implications for Child Protection. *Pediatrics* 120(5): 1074 – 1078.





Epistaxis in childhood is common but unusual in the first years of life. Oronasal blood has been proposed as a marker of child abuse.




This study is a retrospective review of all hospital notes of children in the Lothian region of Scotland who were <2 years of age and in whom facial blood had been recorded over a 10-year period.




The results indicated that there were 77,173 accident and emergency department attendances with 58,059 admissions during the 10-year study period in children <2 years of age; 16 cases of nose bleed and 3 cases of haemoptysis were recorded. All cases of haemoptysis were associated with significant bouts of coughing and respiratory infections. Epistaxis in 8 cases was associated with visible trauma and in 4 cases with thrombocytopenia (secondary to malignancy in 3). In 2 cases, an associated apparent life-threatening event was described, and in 2 cases there was a coincident upper respiratory tract infection. Review of previous and subsequent history







suggested 7 cases of "accidental" injury that might have been caused by abuse. These cases are described here. All children who presented with this problem to the accident and emergency department had been admitted for observation or management.




The authors concluded that epistaxis is rare in the accident and emergency department and hospital in the first 2 years of life and is often associated with injury or serious illness. The investigation of all cases should involve a pediatrician with expertise in child protection.




Rutter, M., Kreppner, J., Croft, C., Murin, M., Colvert, E., Beckett, C., Castle, J. and Sonuga-Barke, E. (2007) Early adolescent outcomes of institutionally deprived and non-deprived adoptees. III. Quasi-autism. Journal of Child Psychology and Psychiatry 48(12): 1200–1207




Background: Some young children reared in profoundly depriving institutions have been found to show autistic-like patterns, but the developmental significance of these features is unknown.



Methods: A randomly selected, age-stratified, sample of 144 children who had experienced an institutional upbringing in Romania and who were adopted by UK families was studied at 4, 6, and 11 years, and compared with a non-institutionalised sample of 52 domestic adoptees. Twenty-eight children, all from Romanian institutions, for whom the possibility of quasi-autism had been raised, were assessed using the Autism Diagnostic Interview-Revised (ADI-R) and the Autism Diagnostic Observation Schedule (ADOS) at the age of 12 years.



Results: Sixteen children were found to have a quasi-autistic pattern; a rate of 9.2% in the Romanian institution-reared adoptees with an IQ of at least 50 as compared with 0% in the domestic adoptees. There were a further 12 children with some autistic-like features, but for whom the quasi-autism designation was not confirmed. The follow-up of the children showed that a quarter of the children lost their autistic-like features by 11. Disinhibited attachment and poor peer relationships were also present in over half of the children with quasi-autism.



Conclusions: The findings at age 11/12 years confirmed the reality and clinical significance of the quasi-autistic patterns seen in over 1 in 10 of the children who experienced profound institutional deprivation. Although there were important similarities with 'ordinary' autism, the dissimilarities suggest a different meaning.

Squier, W. (2008) Shaken baby syndrome: the quest for evidence. *Developmental Medicine and Child Neurology* 50(1):10 - 4.

Shaken baby syndrome has been defined as a form of physical non-accidental injury to infants, characterised by acute encephalopathy with subdural and retinal haemorrhages, occurring in a context of inappropriate or inconsistent history and commonly accompanied by other apparently inflicted injuries ^(1, 2).

In this review from the Department of Neuropathology, John Radcliffe Hospital, Oxford, UK, Squier examines recent neuropathological findings in relation to shaken baby syndrome.








The findings of subdural haemorrhage, retinal haemorrhage, and encephalopathy, seen in SBS were initially thought to result from the hypothesis that shaking causes tearing of bridging veins and bilateral subdural bleeding. It remains controversial. New evidence since SBS was first defined three decades ago needs to be reviewed. Neuropathology shows that most cases do not have traumatic axonal injury, but hypoxic-ischaemic injury and brain swelling. This may allow a lucid interval, which traumatic axonal injury will not. Further, the thin subdural haemorrhages in SBS are unlike the thick unilateral space-occupying clots of trauma. They may not originate from traumatic rupture of bridging veins but from vessels injured by hypoxia and haemodynamic disturbances, as originally proposed by Cushing in 1905. Biomechanical studies have repeatedly failed to show that shaking alone can generate the triad in the absence of significant neck injury. Impact is needed and, indeed, seems to be the cause of the majority of cases of so-called SBS. Birth-related subdural bleeds are much more frequent than previously thought and their potential to cause chronic subdural collections and mimic SBS remains to be established.

This is an active area of research and further publications in relation to the neuropathology of SBS are anticipated.






1. Case ME, Graham MA, Handy TC, Jentzen JM, Monteleone JA. Position paper on fatal abusive head injuries in infants and young children. *Am J Forensic Med Pathol* 2001;22: 12-122.
2. American Academy of Pediatrics Committee on Child Abuse and Neglect. Shaken baby syndrome: inflicted cerebral trauma. *Pediatrics* 1993;92: 872-875.

Waterson, T., Mok, J. (2008) Violence against children: the UN report. *Archives of Disease in Childhood* 93(1): 85 – 88

The UN issued the Secretary-General's Report ⁽¹⁾ on violence against children in November 2006 and it is reviewed by Waterson and Mok to highlight its implications for UK paediatricians. The report is a joint initiative between the



Office of the High Commissioner on Human Rights (OHCHR), THE United Nation's Children's Fund (UNICEF) and the World Health Organisation (WHO) and is the first global attempt to describe the scale and impact of all forms of violence against children. The research covers the magnitude of violence, the causes both locally and nationally and strategies for prevention. The methods used included information obtained from international and national organisations, regional consultations, field visits and wide discussion with children and young people. General issues discussed include the universal societal acceptance and normalisation of violence particularly when no 'visible' or lasting physical injury results and the lack of an explicit legal prohibition of corporal punishment. This particular issue is particularly relevant in the UK setting, where debate continues on whether chastisement of children by parents is justifiable and Section 58 of the Children Act (2004) allows the common assault of children to continue to be justified as 'reasonable punishment'.



The review examines the extent of violence in several settings described in the report. It makes harrowing reading. Studies from many countries in all regions of the world suggest that between 80% and 98% of children suffer physical punishment in their homes, with a third or more experiencing severe physical punishment resulting from the use of implements. It is estimated that between 133 and 275 million children witness domestic violence annually. Violence against children is also recognised as happening in educational settings, places of work and care and justice institutions.

The report presents a broad range of actions and presented 12 overarching recommendations including; strengthening national and local commitment and action, prohibiting all violence against children, prioritising prevention, actively engaging with children and respecting their views and strengthening international commitment.

The authors of this review conclude by focusing on UK issues and national shortfalls in child protection services. Paediatricians are required to play an active role in ending violence against children and *"all sectors of society must share the responsibility to condemn and prevent violence against children and to respond to the predicament of child victims"*.

1. Pinheiro PS. Report of the independent expert for the United Nations Study on Violence against Children. New York: WHO, November 2006. <http://www.violencestudy.org>

Books

Barker, J, Hodes, D. (2008) *The Child in Mind: A Child Protection Handbook (Revised edition)*. Taylor & Francis Ltd




All public sector workers in contact with children and families, both in health care and allied services, need access to clearly written information about what to do if they are concerned about the safety and welfare of a child. Ensuring the safety and promoting the welfare of children who are at risk of harm is not an easy undertaking. It is sometimes difficult to assess the significance of information about a child, to gauge its seriousness or decide what to do next. *The Child in Mind* will help health service workers negotiate the complexities of child protection practice, with the aim of preventing abuse and neglect and protecting children from further harm once it has occurred. This concise handbook covers all the key aspects of abuse, including: risk assessment, physical, sexual and emotional abuse, neglect, the child protection conference and the legal framework of child protection work. *The Child in Mind* clarifies a complex area of work and gives sound advice aimed at improving individual practice. It is unique in that although it is directed to all health care workers, it can be used as part of in-service training, as a handy reference for students and indeed by anyone who works with children.

Lindon, Jennie (2008) *Safeguarding Children and Young People: Child Protection 0-18 Years*. Hodder Education


Safeguarding Children and Young People is essential reading for all practitioners involved with 0-18s anywhere within the UK and for students learning about this crucial area of good practice. This fully revised third edition of Jennie Lindon's best-selling Child Protection book covers recent developments in legislation and guidance. The book takes a well-considered approach to daily practice for professionals taking responsibility for children and young people in early years provision, schools, out-of-school settings, play and leisure facilities. Topics covered include: legislation and key guidance that affect England and Wales, Scotland and Northern Ireland; continuity for good practice in safeguarding across the UK, including working well with other professionals and partnership with families; the role and responsibilities for practitioners who spend time with children and young people in the wide range of provision; important developments for safeguarding, such as safety on the internet and increased awareness of the impact of domestic violence; a balanced approach to dilemmas, such as practitioners' anxiety over physical contact with children and young people; and how equality practice needs to work alongside effective child protection. *Safeguarding Children and Young People* provides exploration of these complex issues in the context of a full 0-18 years age range, supporting recent developments in National Occupational Standards.






Mitchels, B. (2008) *Practice Notes on Child Care and Protection (3rd Revised edition)*. Taylor & Francis Ltd






Child care and protection law constantly changes and develops. This book provides a practical guide to the Children Act 1989, its subordinate legislation, case law, and social work practice, including equal opportunities. The European Convention on Human Rights and the UN Convention on the Rights of the Child are discussed, and this third edition has been fully updated to cover the consequences of the Human Rights Act 1998 on child law in the UK. The Law Society's new Children Panel will cover representation of children, adults and local authorities and has extended the qualifying course to include a wider range of relevant sociological, psychological and practice issues. This book is written with the Children Panel provisions in mind, and will prove useful as a basic reference for new applicants and members.



Sidebotham P, Fleming P. (2007) *Unexpected Death in Childhood: A Handbook for Practitioners*. Series: Wiley Child Protection & Policy S. John Wiley and Sons Ltd



For families who have experienced the death of a child, their private tragedy is all too often exacerbated by an inappropriate or incompetent professional response. For the professional charged with the responsibility of having to deal with unexpected child deaths, such as a paediatrician, a police officer, or social worker, this title not only offers guidance on how to respond adequately to this tragic event but also places the subject in a larger social context, examining the history, epidemiology, causes, and contributory factors surrounding the death of a child. The book also covers the prevalence and types of death, the role of the police in an unexpected child death, how to support families, how to undertake a serious case review, and how to prevent child deaths in the future. It is part of the prestigious NSPCC Wiley Series in Safeguarding Children The Multi Professional Approach.






Youth Justice


(Compiled by Dave Weir)




Peer Reviewed Journal Articles



Snow, P.C. and Powell, M.B. (2008) Oral Language Competence, Social Skills and High-risk Boys: What are Juvenile Offenders Trying to Tell us? *Children & Society* 22(1): 16-28.




A cross-sectional study examining the oral language abilities and social skills of male juvenile offenders is described. Fifty juvenile offenders and 50 non-offending controls completed measures of language processing and production, and measures of social skill and IQ. Information about type of offending, substance use histories and learning/literacy problems was also gathered. Young offenders performed significantly worse on all language and social skill measures, but these differences could not be accounted for on the basis of IQ. Just over half of the young offenders were identified as language impaired. This subgroup was compared with non-language impaired offending peers on a range of variables. The findings have particular implications in the areas of early intervention for high-risk boys and investigative interviewing of juvenile offenders.



Books




Goldson, B.(Ed) (2008) *Dictionary of Youth Justice*. Willan Publishing, Uffculme. www.willanpublishing.com




This dictionary provides a comprehensive guide to contemporary youth justice issues, embracing legislation for the three youth justice systems within the United Kingdom and giving detailed definitions of the youth justice vocabulary. Contributors include academics and practitioners from both statutory and voluntary bodies giving a unique and accessible perspective on a complex and changing arena.




Ward. T. and Maruna S. (2007) *Rehabilitation*. Routledge, Abingdon.



This book provides a useful counterpoint to the pure punishment model of criminal justice by providing an understanding of the 'Good Lives Model'. Most practitioners in the youth justice system will be familiar with the risk-based approach to prevention of offending by children. The use of vulnerability factors can be helpful in identifying children at risk of involvement, however it is less certain that addressing risk factors reduces the risk of re-offending for those already involved. This volume provides an step forward in promoting a






model of intervention that is designed to better equip the individual to achieve appropriate and desirable life goals.



Government and Agency Publications



Criminal Justice Inspection Northern Ireland (2008) *Inspection of the Youth Conference Service in Northern Ireland.* CJINI, Belfast.




The work of the Youth Conference Service was evaluated in 2003 by a research team from Queens University. It was then in the relatively early stages of its development. This inspection report, of a now more mature organisation, comments on the continued commitment to the value of restorative principles in criminal justice though arguing that the that the case for its effectiveness in reducing re-offending has not yet been proven




The full report is available at www.youthjusticeagencyni.gov.uk




Criminal Justice Inspection Northern Ireland (2008) *Inspection of the Juvenile Justice Centre.* CJINI, Belfast.



This reports provides the findings of an inspection of Woodlands Juvenile Justice Centre. The centre opened in January 2007, and found many examples of positive practice. A good balance was struck between caring for young people and addressing their offending behaviour, some of which was dangerous.



The education and healthcare of the young people were given a high priority, with the majority of young people improving their standard of numeracy, literacy, physical and mental health while in the centre.




Of concern to the inspectors was the high turnover rate of young people placed in Woodlands, and the disproportionate amount of young people who came direct to the centre from residential care placements.

The full report is available at www.youthjusticeagencyni.gov.uk



NIO (2008) *Evaluation of the Attendance Centre Order conducted by Independent Research Solution (IRS).* NIO, Belfast.



It is anticipated that this report will be published in June 2008. It will be available at www.youthjusticeagencyni.gov.uk

Irish Youth Justice Service (2008) National Youth Justice Strategy 2008-2010. IYJS, Dublin.

In 2005 the Government of the Republic of Ireland set out to reform youth justice. Following a review of national and international practice the Irish Youth Justice Service was created, bringing together within one agency responsibility for diverting children from crime, promoting restorative justice, enforcing community sanctions, facilitating rehabilitation and providing for detention, thus giving effect to provisions of the Children Act 2001 and taking responsibility for detention (formerly provided by the Department of Education and Science).

The strategy provides an insight to concurrent developments within youth justice. The strategy is available from Government Publications, Postal Sales Office, 51 St Steven's Green, Dublin 2.

The Irish Youth Justice Website is at www.iyjs.ie