



**WHO
CARES?**
SCOTLAND

EQUALITY | RESPECT | LOVE



Moving On

Who Cares? Scotland's response to
the Scottish Government Moving On
from Care into Adulthood
Consultation.

October 2024

www.whocaresScotland.org

Table of Contents

Planning and preparation for moving on from care into adulthood	3
Accessing information, services and support	8
Continuing Care	14
Aftercare	17
Lifelong Care	21
Support for young people leaving secure care	24
Support for young people leaving Young Offenders Institutions and prisons	26
Support for unaccompanied asylum-seeking young people leaving care	28
Support for disabled young people leaving care	31
Support for people leaving care who are parents	34
Peer support and maintaining lifelong links	39
Out of Hours services providing support and advice	44
Health and wellbeing	48
Housing	55
Further and Higher education	63
Employment	69

Planning and preparation for moving on from care into adulthood.

1. How can we ensure that young people, and those who support them, are given enough time, advice and resources to effectively prepare them for moving on from care?

Who Cares? Scotland believes that all young people should have the right to remain in their home until they feel ready to move on and live independently, regardless of their status as care experienced or not.

Scotland has strong Continuing Care rights in legislation to allow young people to stay with their carers up to the age of 21, regardless of whether there is a compulsory supervision order in place. Guidance for young people by CELCIS states that *“Before your 18th birthday, you should be under no pressure or expectation to ‘leave care’ (for example when someone under 18 stops being legally looked after under a Supervision Order) if you don’t want to or you don’t feel ready to And you should be under no pressure or expectation to leave where you are living if you are under 21, even when there is no Supervision Order or Permanence Order in place anymore. You don’t have to apply for continuing care, or be assessed for this, or to sign an agreement. If you are happy and settled where you are, with people you trust and who care for you, and you want to stay, then your local authority has a legal duty to support that and make it happen.”*

However, the 2022-2023 Annual Social Work Statistics show that only 29% took up this right that year, and just 17% of all eligible young people were in Continuing Care. We believe that full implementation of continuing care legislation should be prioritised and adopted as the norm for young people in care turning 16. Continuing in care until they feel ready to leave is the best method of preventing young people from experiencing homelessness and other poor outcomes after leaving care. We have heard from some Care Experienced people who have left care that they were not aware this was an option they had.

“My experience has been awful, I felt like I was just booted out the door. I was told on my 18th birthday, “that’s you, we don’t need to see you anymore, bye.” – Care Experienced person, Summer of Participation, 2023.

Many young people during our Summer of Participation, 2023 told us in response to our question on moving on from care that too many changes happened too fast, in some cases literally overnight. Many also described a perceived cliff edge of support, particularly in terms of social work provision. The 2022-23 Children's Social Work Statistics revealed that only 71% of children who were 16 years or over on the date they ceased to be looked after had a pathway plan upon discharge and just over half (52%) had a pathway coordinator (Table 1.6). Children whose final placement was at home were less likely to have a pathway plan (64%) than those who had been placed away from home (73%). Further work must be done to understand the reasons behind the significant numbers of young people who are not benefiting from this policy.

"It was difficult at the start as it happened so very quickly following a breakdown with my foster carers, it was quite overwhelming. I ended up in a place (homeless accommodation) where I didn't want to be. I didn't have much money or a regular income as I wasn't working so this put added stress on me." – Care Experienced person, Summer of Participation 2023.

We want to highlight the pressures on social work and other professionals and the recruitment emergency in this sector. Late 2023, we asked each local authority about their social work absence rates, published in our 'Is Scotland Keeping the Promise? Research Report', 2024. The highest rates of social work sickness absence in a local authority in 2023 was 83.3%. This is an increase from 77.9% in 2022 and 65.2% in 2021. The problem is worsening and remains staggeringly higher than the national average. The Office for National Statistics reported the UK market average sickness rate in 2022 as just 2.6%.

"I do not believe that my throughcare worker has been as present as they should have been, particularly as they were aware of my mental health challenges, I can still go in excess of a year without any contact from my throughcare worker." – Care Experienced person, Summer of Participation 2023.

As a result, child protection and emergencies will understandably be prioritised by stretched social work teams under immense pressure. However, this means that our advocacy workers have reported some young people going months without being able to see their social worker. Young people who are more settled and preparing to move on from care are not getting the support and time with professionals that they should expect to. Other young people are being moved around to different professionals frequently due to staff sicknesses and are struggling to build a consistent relationship they can trust and rely on. Recruitment of social workers and professionals and support to the current workforce must be a priority for Scottish Government to ensure all our young people can receive high quality support and the Promise can be

delivered by frontline services. Young people should also receive accessible information about their rights in care and how often they should expect to see their social worker.

Thirdly, respondents to our Summer of Participation 2023 highlighted a need for a safety net of support to catch those who fall or slip, including alternative housing placements. We have seen the success of transitional type placements, such as the National House Projects, which offer young people a stepping stone between leaving care and living independently. These type of gradual transitions with wrap around support from professionals and connection with peers has been invaluable to many young people, but we are aware are not available in most local authorities. Local authorities that do operate National House Projects can also only offer a limited number of young people this opportunity each year. We would like this option to be available to any young person who feels that this is what they would prefer.

“It is difficult to leave care and be in your own tenancy with no support around you or the support you have is not daily. It can be lonely and difficult to manage. There should be more supported tenancies for young people leaving care and also the option to go into supported tenancies if you find you can’t manage on your own.” – Care Experienced person, Summer of Participation, 2023.

Fourth, Care Experienced people told us that once someone in care had transitioned to adult services, it can feel like nobody cares and nobody listens, resulting in social isolation, feelings of loneliness and abandonment.

“I was never truly prepared for everything that comes with having to deal with my own house and sadly after a while you feel left alone because once you reach a certain age which was 25 in my case it’s just assumed that you no longer need any help and it feels like this system is now done with us and you have to just suck it up and deal with it.” – Care Experienced person, Summer of Participation, 2023.

Lastly, when people did leave care, we heard there was a distinct lack of practical support for independent living and developing life skills. When support was provided, it was inadequate.

“I had no support on how to actually run a house. I ended up claiming the wrong benefits which led me to get into rent and council tax arrears, which I’m still trying to catch up from.” – Care Experienced person, Summer of Participation, 2023.

2. Are there any barriers to starting the process of planning and preparing for young people leaving care at an early stage?

Under the Children and Young People (Scotland) Act 2014, young people in care have the right to remain in care until they are 21. Therefore, many young people may not want to begin planning for independent living at the young age of 14. An expectation on professionals to have begun a pathway plan with them at around this age may cause young people to feel pressured to move on and stressed about their future at a time when they are likely to be in need of stability, reassurance, nurturing, and consistency. However, for young people hoping to move into student accommodation after school, then leaving care earlier may be the right choice for them. The decision to start planning and preparing a young person for leaving care should be young-person-led, and specific to their circumstances and wishes.

“At the time of transition, I was in further education and focusing on that and family issues. I may not have been able to fully focus on my transition but had social work guidance through the most important parts.” – Care Experienced person, Summer of Participation, 2023

There are also ways of ‘preparing’ a young person to live independently, for example supporting them to learn to cook meals, do laundry, self-travel and make their own appointments, that do not increase anxiety for young people and begin a formal process with paperwork for pathway plans.

“I think you need to make sure everyone leaving care has an understanding of housing, budgeting, how to run a house, like gas, electric, paying your bills. How to use an electric and gas meter, how to talk to companies, how to talk to people in general, how to get support with things, where do you go, who can you trust, rather than leaving you to get it, because you might struggle, or have the capability to do those things or ask those things, you might just shut yourself away really struggle.” – Care Experienced person, Summer of Participation, 2023

The type of preparation a young person receives should also understandably be informed by them and the skills they feel they need to develop. We have seen some instances of highly independent young people being given booklets to teach them how to do things they are already competent at, or contrastingly, young people leaving care and realising that they never had the opportunity with their carers to budget and learn about managing money. Preparation

must also go beyond information, for example a young person doing a food shop or making a GP appointment may need a supportive adult with them until they feel confident to do it alone.

“I hated doing the pathways as I felt singled out because I was care experience[d]. My friends didn’t need to do it - so I’m not going to.” – Care Experienced person, Summer of Participation, 2023

Care Experienced people have often shared with Who Cares? Scotland about the impact moving on from care and the associated stress of this transition had on their exam results and pathway to further or higher education or employment. If Scotland is to close the attainment gap for Care Experienced pupils, it is unhelpful to be encouraging young people to prepare to move out of their care placement during such a critical time in their education.

“The lack of support after transitioning to adult services is also the reason I could not continue school, without support it took years to achieve the stability on my own to resume my education. As the transition to adult services takes place before age 18 I think support is even more vital to ensure opportunity for education is not jeopardised however this isn’t happening often enough.” – Care Experienced person, Summer of Participation, 2023.

CELICS report that the average age the general population begins to live independently in the UK is around 25 and that most make this transition gradually. This is due to a whole host of factors including high living costs, poor quality of affordable housing, unemployment, social isolation and poor mental health. We would actively discourage young people in care from moving on earlier and facing the challenges that come with running a house earlier than they need to. We need to regularly challenge situations where a young person is feeling pressured to move on by professionals due to a shortage of placements, the young person being seen to be ‘doing well’, or not being informed about their rights to Continuing Care.

“An 18 year old wants to remain on their CSO as ‘extra security’. They are concerned that social work want them off the CSO and are trying to remove them from placement.” – entry to our advocacy database.

“I didn’t want to move at the beginning, but now I’m more independent. There was a big contrast between where I was living. They should do better at bridging that gap and preparing you for the move. I used to have lots of things done for me or had lots of help, then overnight it just changed. I had to do it. I agree that I should be able to do more things myself but unless the previous place is better at supporting you to be independent you’re not going to learn anything, and then it can suddenly hit you.” – Care Experienced person, Summer of Participation 2023.

Accessing information, services and support

3. How can we ensure young people receive the right support and guidance to build the life skills they need for adulthood before they move on from care? Please provide suggestions.

We encourage local authorities to publish all the support, guidance and entitlements available to Care Experienced young people in one place, on their website and in paper copy. Our advocacy workers regularly support young people who are being offered different support to another young person in their area, for example with financial support when going to university. We would welcome increased transparency and consistency from councils for Care Experienced people about the support they can expect to receive.

“Not everyone who uses services will have a thorough understanding of their options or decisions that are made for them. It is so important that individuals are given the opportunity to make informed decisions or to have consolidated understanding of decisions that are made for them.” - Care Experienced person, Summer of Participation, 2023.

We are also aware that staff at universal services, such as at job centres or health services, are not aware of the particular entitlements a Care Experienced person might be eligible for, such as the job seekers grant or council tax exemption.

We know that the strongest protection against and remedy for rights infringements is independent advocacy. Independent advocacy must be promoted to groups whose rights are most at risk, it must be available to all who request it, and specialist advocates must be able to groups with particular needs, such as Care Experienced people, unaccompanied asylum-seeking young people, mental health inpatients and victims of crime.

“It is extremely important that an advocate is made available and is completely impartial with no agenda dependent on the outcome. An advocate is there for the individual and their benefits regardless of age. A social worker will have the values and training and ethos of that social work department/authority or just feel like they do which creates mistrust and a disconnect. This applies to other services and panel members etc. It is important to have that person in the middle that is only for you to make you feel comfortable throughout the process

and explain things in terms that you understand.” – Care Experienced person, Summer of Participation, 2023.

We are concerned by policy which assumes that a young person will have a ‘trusted adult’ who is fully informed of their rights and entitlements and is able to explain them clearly and advocate for them without any conflicts of interest or their own personal views clouding the information or opinions that they share with a young person. If we were to rely on a ‘trusted adult’ to communicate and uphold rights for a young person, we would need to ensure they had quality controlled training, support and guidance to be able to do this well. However a ‘trusted adult’ could include a wide range of roles such as a teacher, counsellor, family member, religious leader or parents of friends.

“I know my advocate is there for me not SW [social work] or school etc. And my advocate says what I want her to say.” Care Experienced person, Summer of Participation, 2023.

The Scottish Independent Advocacy Alliance (SIAA) describes independent advocacy as *“speaking up for, and standing alongside individuals or groups, and not being influenced by the views of others. Fundamentally it is about everyone having the right to a voice: addressing barriers and imbalances of power, and ensuring that an individual’s human rights are recognised, respected, and secured. Independent advocacy supports people to navigate systems and acts as a catalyst for change in a situation. Independent advocacy can have a preventative role and stop situations from escalating, and it can help individuals and groups being supported to develop the skills, confidence and understanding to advocate for themselves.”* This is a particular job and skillset, and it is imperative that anyone taking up this role truly understands that their work must not be influenced by their own or other’s view of a situation.

“We should always have our voice heard! And not just from social workers, they don’t always know us well enough. It’s good to be someone independent.” – Care Experienced person, Summer of Participation 2023.

The SIAA explains that *“independent advocacy is especially important when individuals or groups are not heard, are vulnerable or are discriminated against. This can happen where support networks are limited or if there are barriers to communication. Independent advocacy also enables people to stay engaged with services that are struggling to meet their needs”*. It is well evidenced that Care Experienced young people consistently face these challenges. Their right to have this specialist type of support must not be watered down.

“[When I left care] I felt there was no one there to listen to me or advocate for my rights, I was overwhelmed already trying to manage independent life in lieu of any support and I simply didn’t have the time, strength or experience to articulate myself in a way that would be listened to.” – Care Experienced person, Summer of Participation, 2023.

Who Cares? Scotland operates a National Advocacy Helpline for Care Experienced people of all ages and placement backgrounds, and any professionals or carers supporting them looking for specialist advice. This wide criteria provides a safety net for Care Experienced people across Scotland who have found themselves excluded from other services but are still struggling with the lifelong impact of their time in care. The helpline provides specialist support from advocacy workers who have a deep understanding of the types of challenges Care Experienced people face, and the particular supports and entitlements available to them. We would like to be able to increase awareness of this service to reach more Care Experienced people and be able to offer wider opening hours.

We believe a range of opportunities and supports must be available for young people to take up to ensure they receive the right support, guidance and life skills before they move on from care and after they have left care, for as long as is needed. These supports must also be available across all local authorities, ensuring that young people in rural areas have the same opportunities as those in more connected locations.

“Every residential house should have an advocate to explain their rights.” – Care Experienced person, Summer of Participation, 2023.

4. What services and support should be considered and provided to a care leaver who returns home to live with their birth family?

The young person’s voice must be at the centre of this decision, and any child or young person who does not feel comfortable and safe with being returned home must not be forced to do so. Independent advocacy is key to ensuring a young person feels able to voice their views, particularly in a decision such as this where they may feel pressured by family to return home, or by services who have alluded to ‘needing the room for other young people, which we are aware happens. Independent advocacy is also essential to ensure that a young person

understands their rights and the rights they will currently lose out on if they choose to return home and be taken off their supervision order before their 16th birthday.

“I never felt listened to until I got an advocate. Social work were making plans for me to return home which I did not want. I was listened to now social work are going for permanence and I have been told I can stay with my carer and this is my forever home.” – Care Experienced person, Summer of Participation, 2023.

We know that unfortunately for many young people who do return home, the relationship can break down later. Young people who returned before their 16th birthday then find themselves ineligible for social work support and at high risk of becoming homeless and particularly vulnerable to exploitation and harm, as well as potentially ending education or employment they were pursuing and negatively impacting on their mental health and wellbeing. This is why, as set out in our answer to question 11, Who Cares? Scotland calls for aftercare to be available for all Care Experienced people as needed, rather than limited to the current legal definition of care leaver. It is also essential that independent advocacy is offered to young people in these circumstances as they may have views on returning home that are difficult to share with family.

“Going to meetings or any other appointments make you feel scared and intimidated, if I had an advocate I would have felt so much safer and not been as scared to talk about what was going on at home.” – Care Experienced person, Summer of Participation, 2023.

Young people who are receiving specialist support while in care, for example from their school, mental health services or youth work teams, must be able to continue this once they return home and cease to be looked after. Services must put the child first and continue support in place if it is needed and wanted by the child, rather than attaching eligibility to their looked after status.

“Leaving care has been traumatic, I have been having someone weekly to having nothing at all.” – Care Experienced person, Summer of Participation 2023.

We are also aware of some councils investing in charities and services that offer family mediation work and support families to be able to function in a healthier way. Ongoing support and monitoring from social work once a young person has returned home and referral to such services may help to prevent as many young people as possible from being put in such a tricky situation later on.


“I’m old now in terms of care experience, I think yeah, I want to still be included. Your parents don’t just say you’re too old, goodbye, it doesn’t happen to other people why should it happen to me? You don’t stop experiencing care, trauma, financial support, parenting in general. It would be nice to know if I fall on hard times, or I feel lonely, then that door is open.” – Care Experienced person, Navigating the World of Rights, 2020.

“Advocacy should always be independent of the authority offering it. In failing to do so it’ll always have a bias toward the service it’s offered through.” - Care Experienced person, Summer of Participation 2023.

With the Children (Care and Justice) (Scotland) Act 2024 also raising the age of referral to the reporter, we also hope to see social work reopening cases and offering placements to young people over the age of 16 who returned home before they were 16 but now find themselves unable to live with their family.

5. Can you provide examples of good practice where services have worked together in a holistic way to support birth families and young people moving on from care when the young person returns to live with their birth family?

Good practice will exist that we are not aware of however we would like to highlight the Aberlour Intensive Family Support team in Falkirk as one great example that our advocacy workers have shared. These practitioners work with the council to provide intense and tailored support to families with a child in care or at risk of entering care. This can include help to learn how to cook meals, make appointments, create a routine etc to enable a child to return home to their family. Perhaps in the past without this service, a parent would have been required to evidence that they can do these tasks first in order for returning a child to be considered. Importantly, this support continues once the child is home. We would encourage other councils to explore this service with Aberlour.



6. How do we ensure that young people with care experience, and those who provide them with care, can easily access information about entitlements and support? Please provide any examples of good practice you are aware of.

Please refer to our answer to questions 3 and 9.

Continuing Care

7. Are there any changes you would like to see as part of the eligibility criteria for Continuing Care?

The aim of Continuing Care is to ensure that young people who have had need of the child social care system can stay in a safe and settled placement for as long as they need, to increase stability in their lives, improve their outcomes and opportunity to heal.

The opportunity for these outcomes are equally as important for our young Care Experienced people who left care before they were 16 but have then later found themselves in difficult circumstances, for example a relationship breakdown with family and potentially finding themselves homeless. We would like to see a right for Care Experienced young people aged 16-21 in need to be able to return to care and benefit from the stability and support of a Continuing Care placement and have the best start at adulthood.

“an 18 year old in residential care, doesn’t get the same birthday or Christmas money as others “because they are not on the order they once were on and payments are discretionary.” – entry to our advocacy database.

“18 yr old is homeless and struggling to find support as was removed from CSO just before their 16th birthday.” - entry to our advocacy database.

It is highly unlikely that for most people leaving home, that they could not return to a parent’s home in a time of need or if their plan has not worked out. Care Experienced young people deserve to know this safety net is there for them too.

“18 year old was on a CSO and Child Protection Order until just before they turned 16. Allocated a discretionary Through Care Worker. Through Care have said that they weren’t entitled to any financial support/section 29 monies to help furnish their flat. Through Care have said as they were not looked after until after their 16th birthday, they will not support them financially.” - entry to our advocacy database.

“Once I left care, I felt like I had nobody to help me when I fell, nobody to celebrate with when I succeeded. The only people I’ve had is toxic relationships because I think that’s what I deserve.” – Care Experienced person, Tend Our Light, 2022.

8. What additional support do you think is required for families, professionals and practitioners who are responsible for providing Continuing Care arrangements?

As Who Cares? Scotland represents the views of Care Experienced people and not families, professionals or service providers, this question is largely not for us to answer.

However, we have supported some young people who wanted to access their right to continuing care but were not able to due to their carers being unwilling to accept a lower amount of financial remuneration for a continuing care placement than if they had their child move on and took in another foster care placement. If continuing care is not financially affordable for some families then the levels of remuneration must be looked at. It is disappointing and at odds with the aims of the Promise that the Scottish Recommended Allowance for Foster Carers is only eligible for carers with young people up to the age of 17.

We also work with young people who were not informed of their rights to continuing care, and would like to see better awareness and understanding of these rights among professionals and carers.

9. How do we ensure that young people, and their views, are heard during discussions on Continuing Care which impact them?

As referred to in our answer to question 3, independent advocacy is the strongest protection against and remedy for rights infringements.

We believe that independent advocacy must be promoted regularly to groups whose rights are most at risk, must be available to all who request it, and advocates with specialist knowledge are available to groups with particular needs such as care experience.

“People need to remember that some things are too hard to talk about and when in care we are not comfortable talking about or bringing up in meetings and the Advocate can do this for us. Sometimes it’s just too hard to be part of things or even be there and the Advocate can do this.” – Care Experienced person, Summer of Participation, 2023.

Who Cares? Scotland is funded to provide some level of independent advocacy in all 32 local authorities. The conditions of the contract vary by each local authority, for example in some we are restricted to only work with young people in residential or foster care. The age caps on who we can work with vary across the country, ranging from 18 to 26, and the hours funded for this work vary drastically too.

Several of our teams are operating waiting lists for independent advocacy, despite the importance of a child's voice being heard in decisions affecting their care being a key pillar of the Promise and enshrined in Scot's law by Article 12 of the UNCRC (Scotland) Act 2024. We would welcome a national minimum level of independent advocacy funding being set by Scottish Government, calculated based on the number of Care Experienced young people in each local authority to ensure there is provision for anyone to access support to enjoy their rights.

“Things like having an advocate can be a lifeline to young people and adults... you might not be prepared as an adult to deal with issues in life, you might not have been taught because you are care experienced. Who would you turn to? There is a lot of things I needed help with and without advocacy support I wouldn't have what I have now. I wouldn't have been able to have half of the stuff I have without advocacy that's why it's important.” – Care Experienced person, Summer of Participation, 2023.

Who Cares? Scotland operates a National Advocacy Helpline for Care Experienced people of all ages and placement backgrounds, and any professionals or carers supporting them looking for specialist advice. This wide criteria provides a safety net for Care Experienced people across Scotland who have found themselves excluded from other services but are still struggling with the lifelong impact of their time in care. The helpline provides specialist support from advocacy workers who have a deep understanding of the types of challenges Care Experienced people face, and the particular supports and entitlements available to them. We would like to be able to increase awareness of this service to reach more Care Experienced people and be able to offer wider opening hours.

“When we leave care we won't have as many people around to help us so we need our advocates.” – Care Experienced person, Summer of Participation, 2023.

Aftercare

10. How can we make sure young people can access the range of support they need when they leave care through the provision of Aftercare?

Please refer to our answer to questions 3 and 9. Aftercare needs to be properly resourced and promoted to young people, be flexible to meet their individual needs, and young people must also have access to independent advocacy if they are not receiving the support they need.

We are concerned that ten years on from aftercare being included in the 2014 Children and Young People Scotland (Act), on 31 July 2023, only 49% of those eligible were receiving the aftercare services. Scotland's Annual Social Work Statistics 2022-23 further highlight that this is alarmingly 20 percentage points lower than the 69% of eligible people receiving aftercare in 2013. This appears to be a staggering high drop-in support for our young people moving on from care that must be properly investigated and rectified. We believe increasing resources to local authorities to deliver on these duties must be a priority.

11. Are there any changes you would like to see as part of the eligibility criteria for Aftercare?

Who Cares? Scotland uses the inclusive term 'Care Experienced people'. When it comes to care, there are many different phrases and terms used with different definitions. These often do not recognise the lifelong impact that care can have and create further inequality.

There are many reasons why children and young people are taken into care. Through no fault of their own, their families may be struggling to be the best parents they can be due to a number of factors such as the rising tides of poverty and the state has made the decision to intervene. The state then has a responsibility to ensure these young people have all they need to thrive. This means anyone who is, or has been, in care for any period of time. This can be in a range of settings – residential care, foster care, adoption, looked after at home, kinship care and secure care. This also extends to those who come into the country as unaccompanied minors seeking asylum, and those who discover that they do not have British citizenship after their supervision order is removed.

“I was in Care for eleven years, in both Looked After at Home and Kinship care placements. My household was a very toxic and neglectful environment, so moving into my own flat was very important for me. Throughout and after the moving process, I was unfortunately denied a lot of support that I considered to be crucial. I was not entitled to a grant for household goods, I had to move all of my belongings myself, and I had to set up the gas and electricity by myself too. I was denied this support because I was not in ‘accommodative care’. I felt ashamed. I felt like my Care Experience was not valid enough.” – Care Experienced person, Somewhere to Call Home Report, 2019.

We believe that in order to fulfil the aims of The Promise, GIRFEC, and reduce the number of adults experiencing severe and multiple disadvantage, that aftercare must be extended beyond the limited legal definition of ‘care leaver’ to a much wider group of young people with care experience, and without a strict age cap at which this must end, regardless of a person’s needs.

“I’m now seen as an ‘adult’ when I was seen as a ‘child’ only a few days before.” – Care Experienced person, Summer of Participation 2023.

“Parenting does not stop at 18. Throughout The Plan, Scotland must continue to consider how to create greater equity and opportunity for care experienced young adults. That consideration must include how to increase opportunity for care experienced people to access employment, training, stable housing and support.” – The Promise, 2020, p93.

Our advocacy workers are consistently working with young people who are finding their support limited or inaccessible altogether due to living in a different council area to their parent council. When support was provided, some people we spoke to during our Summer of Participation talked about the inconsistency in provision and quality of support feeling uneven and unfair across areas, ages and placement types.

“Might have been better if I hadn’t left my area but once I did the council just forgot about me.” – Care Experienced person, Summer of Participation, 2023.

We are also aware of some Councils interpreting the Promise’s statements on young people remaining in the local area as a need to bring young people who have left the area back, regardless of whether the young person wishes to return or not. We have been contacted for advocacy by several young people who have been encouraged or forced by their local authorities to give up their current tenancies, education or employment to move back to their parent local authority area in order to continue receiving support. This practice is not acceptable.

“An advocacy worker supported a young person whose Local Authority wanted to move them back home to another Local Authority. The young person wished to stay in their current place of residence as that is where their friends, some family members and other connections are. Despite the advocacy worker raising and sharing these views in several meetings, it was decided that they would move back to their home Local Authority. When this decision was relayed to the young person, they were very quiet and did not want to challenge this decision as “nobody listens anyway”. – entry to our advocacy database.

We believe young people would be better supported if they could choose to access aftercare support from either their parent local authority where they may have relationships with staff, or from the local authority they live in which might offer them much more tangible support. This type of support better delivered by the council they live in could include drop-in style support and peer connection, housing priority points and help moving and setting up a home, support to complete forms together for social security or education enrolment, as well as face-to-face crisis support.

“I had support when I was in care but didn’t have a lot of support from social work for a while until I came back to my home local authority area. When I came back to my home area I got more support from social work.” – Care Experienced person, Summer of Participation, 2023.

We are aware of the pressures on local authorities in the current financial climate and would also welcome neighbouring councils collaborating to offer a larger range of specialist aftercare support, such as a service for all Care Experienced parents in the surrounding area.

12. What do you think the challenges would be in changing the eligibility criteria for Aftercare?

When everyone has what they need to thrive, society benefits. We recognise that adopting a flexible age limit would require change from many services and would raise concerns about resources for younger people in need. However, we would like to highlight the findings of the Independent Care Review’s The Money report, which demonstrated the vast economic benefit of investing upstream in measures that prevented people from reaching crisis and requiring costly universal services such as homelessness accommodation, prison or mental health inpatient treatment at a later point.

“My experience of transitioning to adult services was very poor. It felt as though accessing support was made purposely difficult, I witnessed a lot of people fall through the cracks in this

transition. I don't know if this can be attributed to poor individual attitudes in services or whether there were wider causes for that dynamic but I, and others, largely went without any support.” – Care Experienced person, Summer of Participation, 2023.

We would also like to highlight that we are starting to see a change in trend in our advocacy data. While historically we had more often supported young people who wanted to move away from their current home, we now record a much higher number of young people requesting advocacy because they want to stay where they are settled but are being encouraged to move. In response to the survey for our Housing Issue Paper, May 2024, 38% of respondents told us that they had wanted to live in a different local authority area from the one which 'looked after' them as a child. Resources should be reallocated by national and local governments as necessary to ensure we truly get it right for every child and adult and respect Care Experienced people's choice to live where they believe is best for them.

“I didn't like the options with the LA to live. I have experienced lots of trauma in the town I was placed in and surrounding areas were too expensive.” - Care Experienced person, Housing Issue Paper, 2024.

Lifelong Care

13. What do you think would be the best way to provide long term support and services to adults with care experience?

“You get to a certain age and it feels like there isn’t anyone that truly cares anymore. When you turn a certain age it feels like all the support has stopped.” – Care Experienced person, Lifelong Rights Report, 2023.

Care Experienced people have told us for over forty years that when they leave care, the impact of care does not leave them. The impact of care on a person’s education, finances, self-esteem and health coupled with strong prejudicial attitudes in society regularly impacts on people’s ability to realise their true potential and aspirations.

“I feel like I’m marked as poor forever because of visible repairs, black showing through veneers, gaps [regarding teeth after neglect in care]. It damages my confidence every day. I think I’ll never have a decent career because of my teeth.” – Care Experienced person, Dental Health in Care Survey, 2019.

This is why Who Cares? Scotland have launched our lifelong rights campaign, which calls for Care Experienced people of all ages to be seen and heard as a distinct group of rights holders. Care Experienced adults must be given the right scaffolding of support and legal protection, throughout their lifetime, if we are to reduce the inequalities they face. Read our Lifelong Reports Report on our website for more insight - www.whocaresscotland.org/wp-content/uploads/2023/10/LRC-Report.pdf.

“I was working as a cleaner and was doing lots of jobs with no issue. A cleaner job came up in the local social work office, however I was advised that I couldn’t work there as I was care experienced i.e. I might access files/info. This happened a few times where I wasn’t allowed/trusted to lock up or have keys to the offices I was cleaning.” – Care Experienced person, Summer of Participation, 2023.

Who Cares? Scotland’s National Advocacy Helpline receives the most calls from Care Experienced people over the age of 26, and the second most popular group are those aged 16-26 who are not eligible for support as care leavers but face the same immense challenges. From 1st July 2022 to 30th June 2024, the top five issues the Helpline was contacted for support

with are, in order: finance, housing, education and training, dissatisfaction with services and health and wellbeing. Our lifelong advocates most commonly recorded taking action to uphold Care Experienced people's rights to: knowledge of rights, to an adequate standard of living, to respect for views, to social security, and to recovery from trauma.

“The impact of the state intervening in your life as a child or young person has consequences, some positive and some negative, too often negative! A shift is required to move from surviving care and its impact and creating increased opportunity to thrive post care and throughout life.”
– Care Experienced person, *Navigating the World of Rights Report, 2020.*

The Scottish Child Abuse Inquiry, which has cost over £85 million so far, was set up to run from 2014-2018 but has been unable to wind down due to the number of survivors coming forward. The human costs borne by Care Experienced people themselves are the most significant costs of all. It is clear that there is a lifelong impact of care, but we are not recognising and treating it as such.

“Older members rights were not upheld when they were in local authority care, and this has had a knock-on effect, and so the LA is still responsible for the legacy they have to live with – poor mental health, poor education and employment opportunities that affects them throughout their life.” – Care Experienced person, *Navigating the World of Rights, 2020.*

Our Lifelong Rights Campaign also calls for the right to independent, relationship-based, lifelong advocacy for every Care Experienced person in Scotland who needs it. This is particularly important in the context of an ageing population who experienced severe child abuse in institutional care. For this group now facing entering the adult social care system, the impact of this will need to be carefully understood and supported.

The Promise says that ‘Scotland’s parenting responsibilities are lifelong and holistic for the young people that Scotland has cared for’. It further states that ‘older Care Experienced people must have a right to access supportive, caring services for as long as they require them.’

Realising this in practice could include but is not limited to:

- Provision of lifelong independent advocacy accessible to any Care Experienced adults
- Protection for Care Experienced people written into the face of the upcoming Human Rights Bill to protect against direct discrimination and indirect discriminatory actions and policies.

- Voluntary inclusion of Care Experience by organisations in their Equality Impact Assessments and other strategies aimed at reducing socioeconomic disadvantage
- Trauma informed and care-aware universal services aware of specific entitlements for Care Experienced people,
- Ringfenced mental health services
- Support from services for as long as is necessary, and transitions from young people's services at a pace that suits the Care Experienced person
- Specific social security measures to reduce economic impact, such as ringfenced Discretionary Housing Payments and Scottish Child Payment enhancement for Care Experienced parents
- Expansion of the Redress Scheme to compensate victims of abuse in care which occurred after 1 December 2004
- Increasing or ideally removal of age caps from services, support and opportunities wherever possible, such as the Care Experienced Bursary and internship schemes.
- Action to address the top issues facing our members over the age of sixteen.
- Particular support and creative approaches for older Care Experienced people with a history of institutional abuse to have their rights upheld and their mental wellbeing protected as they become more reliant on the adult social care system.
- A public education campaign to address prejudicial attitudes and stigma.

“I never told anyone or talked about it until around 40 years after I left care. I was very aware of the dangers, restrictions and prejudices that the care experienced “label” would carry”. – Care Experienced person, Summer of Participation, 2023.

14. What do you think the challenges would be in providing support and services to adults with care experience?

Please refer to our answer to question 12.

Support for young people leaving secure care

15. What improvements do you think could be made to the support given to those leaving secure care accommodation?

Who Cares? Scotland supports the points raised by the Children and Young People's Centre for Justice (CYCJ):

"A secure care accommodation order is reviewed regularly in keeping with the child not being deprived of their liberty for longer than is necessary. On occasion, this authorization may be terminated unexpectedly by the Children's Hearing when it is deemed that the child no longer meets secure care criteria. This creates a level of unpredictability and can mean that agencies are not fully prepared for a child moving on despite the Secure Care Pathway and Standards (2020) highlighting the importance of the before, during and after journeys. For children placed within secure care on remand there is no indication of when the child is likely to be released so from arrival for all children it is important that exit strategies are developed within the care plan so that steps for preparation can be put into place.

We know from secure care practitioner forums that access to resources post secure care can be problematic by way of identifying an appropriate step down for children to move on to. Given research has indicated that children may benefit from supported accommodation or supported carers by way of preparation for adulthood (Whitelaw, 2023; Scottish Government, 2013), this is problematic. The Scottish Government (2013) Staying Put guidance for local authorities and corporate parents highlights that the transition towards interdependence is when children and young people are at their most vulnerable but examples of good practice are cited when children and young people are able "to return to previous care settings (either on a planned or ad-hoc basis)" (Scottish Government, 2013, p. 17). For children who are on remand or sentenced and may not previously have been considered looked after children, creative resources may need to be identified."

16. How do we ensure all young people in Scotland get equal access to the support services they need during the transition from and after leaving secure accommodation? Please provide examples or suggestions.

Who Cares? Scotland supports the points raised by CYCJ:

“Secure care practitioner forums chaired by CYCJ have shown that provision nationally can be patchy. This is of concern given that secure care census information from 2018 and 2019 highlighted that there is an increasingly aged child population, aged 16 or 17 years old, within secure care (Gibson: [2020](#), [2021](#)) and this is likely to increase with U18s being placed in secure care rather than Young Offenders Institutions. Gibson (2020, 2021) also highlighted the relative poverty experienced by 80% of children in the census, with children coming from the most deprived areas of Scotland. Additionally, 64% of children were exposed to 4 or more ACEs and the link between increased exposure to ACEs and subsequent substance or alcohol abuse, mental ill health, victimization and offending behaviour and other negative consequences is well documented (Gibson, 2020, 2021).

GIRFEC and the national SHANARRI indicators being embedded within child plans is critical to ensure that the needs of children are identified and a holistic and robust assessment and intervention strategy is put in place for when the child is looked after, prepared for when they are no longer looked after and for the transition from secure care. While pathways planning is a national approach to the assessment process that is age and stage appropriate for this transition, it was highlighted elsewhere that the consistency of these plans being completed is lacking across Scotland. This being integrated into the wider care plan is crucial so that appropriate supports and resources can be identified.”

Support for young people leaving young offenders institutions and prisons

17. What improvements could be made to the support given to people with care experience at the transition point from leaving young offenders institutions or prison?

Care Experienced young people who enter the justice system do not cease to be Care Experienced. However, we are aware that often once a justice social worker is involved or the young person is incarcerated, children and families teams step back from the young person and their support is often not restarted once the young person is back in the community.

We have supported some cases where the continuing care or aftercare team have continued to hold pathways meetings for the young person, stay connected with them throughout short sentences, and ensure they have a high level of support on leaving YOIs or prison. Anecdotally, we are aware that relationship-based support from aftercare teams and 'sticky' services have been what broke a cycle of offending for some young people. We believe this collaborative approach works best and would encourage children and families teams not to step back from a young person who finds themselves in such a difficult situation.

We would also like to echo the calls of CYCJ:

"CYCJ chair and oversee a Whole System Approach group that works with two of Scotland's YOIs to ensure that reintegration and transitions support is in place for young people up to the age of 21, and 26 if care experienced. There is a protocol in place and [information sheet](#) setting out roles and responsibilities and the review process for these young people. The WSA SPS partners meet twice yearly and good practice is shared and developed and one example would reflect local authorities ensuring that they have a starter pack for a young person who has been released and they ensure that a staff member meets and greets the young person on their release from the YOI. Their ongoing care and support is reviewed as part of this process with personal and structural supports identified and forming part of their ongoing and pre-release plan. [Guidance](#) on this process is updated annually by CYCJ.

Despite this regionally there is a diverse approach to this work with some localities addressing this as part of their youth justice work in partnership with through care and aftercare teams and others playing a less prominent role as this work is picked up within

adult services. Ensuring that there is a national strategy to this work will enable different teams and third sector partners to work in partnership.”

18. How do we ensure all young people get access to the same support services when they are leaving young offenders institutions or prison, regardless of where they are located in Scotland?

We would like to echo the calls of CYCJ:

“Early identification of care experience is crucial to this being effective and at present this can be reliant on self-reporting. Unless a mechanism is identified nationally for young people with care experience to seek advice, guidance and support while in prison they may miss out on much needed support.

As has been identified in Q17 approaches to the delivery of services are dictated by local arrangements which may result in some young people falling through the cracks. Good practice should include integrated provision while a young person is in custody which includes personal and structural supports that are linked into community resources ahead of the pre-release meeting which takes place a minimum of ten days before the young person is released. Standards of practice could help to promote consistency across different local authority areas.”

Support for unaccompanied asylum-seeking young people leaving care

19. Can you share details of any services that are already working well to support unaccompanied asylum seeking young people transitioning out of care?

While we do provide advocacy and participation and belonging opportunities to many unaccompanied asylum-seeking young people, we have referred to the Scottish Guardianship Service to echo their calls here:

Guardianship Scotland support young people from the time of their arrival in Scotland until three months after they are granted leave to remain or their immigration status is otherwise resolved. This period can include transitions from support under Section 25 to moving into throughcare and after care.

Local authorities vary in their interpretation of their obligations to unaccompanied asylum-seeking young people. Some will move young people aged over 16 into through care and after care services (Section 29) even before their immigration cases have been resolved; others retain young people in care until such time as they have a decision on their immigration case.


In some local authorities e.g. Highland a coalition of third sector partners (Comraich Service) offer support at every stage. This model is one way to ensure continuity of care and connection for young people. The people who support them work closely together and can ensure that additional needs and abilities are recognised and brought into a holistic care plan that makes the transition smoother to navigate.

20. What supports and/or improvements do you think could be implemented to ensure we meet the particular needs of unaccompanied asylum seeking young people transitioning out of care in Scotland?

We support the calls of the Scottish Guardianship Service:

If unaccompanied young people transition out of care having secured leave to remain following a successful asylum claim, they will have a secure basis on which to build their lives in Scotland. Many will be strongly motivated to find paid work and begin living more independent lives. However, in our experience, unaccompanied young people will require support in the following areas, some of which are specific to their past experiences.

- Family reunion – young people often come to Scotland having left behind family members (siblings, parents) who are living in precarious situations in third countries. They may wish to pursue family reunion applications and will require access to specialist legal advice, support to gather evidence for applications and – as applications are often refused at first instance – support to appeal decisions. This can be time intensive and requires workers to understand the legal processes involved and the emotional impact this can have on young people.
- Understanding systems and processes – most unaccompanied young people will not have previous experience of basic systems in the UK e.g. paying tax, registering for benefits, applying for jobs, paying utilities bills. They may require intensive support to ensure they can successfully navigate systems. The earlier some of these systems can be explained to young people, the more likely they are to be able to independently manage these when transitioning out of care.
- Avoiding exploitation – young people may be vulnerable to labour or other forms of exploitation. Many young people will hope to send money home to family overseas and may be willing to accept irregular working conditions and low pay. Where young people are not fluent in English the risk is increased. Intensive support at the point of transitioning out of care can reduce the risk that they are targeted for exploitation. Training for staff in identifying indicators of exploitation and responding appropriately is also vital.
- Supporting ambition – although unaccompanied young people can be vulnerable as outlined above, they often are highly motivated in terms of education and employment



in future. Workers could use existing integration planning tools to help young people identify their strengths and work towards longer term goals rather than remaining solely focused on immediate needs. These tools are widely available (<https://scottishrefugeecouncil.org.uk/new-toolkits-to-support-refugee-integration-in-scotland-and-beyond/>) and can be adapted to young people's own circumstances.

Young people who do not yet have leave to remain may transition into throughcare and after care but will still be unable to work and will have only limited education options. Support will continue from Guardianship Scotland, but young people may need additional emotional support from workers to address concerns about their futures and the stress of waiting for a final decision on their asylum claims. Discussions of these topics should be built into existing care planning processes. Young people who are waiting for decisions may present as disinterested or disengaged as regards other activities or processes. Professionals may need to provide additional support and consider referrals to specialist organisations where young people's mental health and wellbeing is affected.

Given the particular legal complexities for these young people and often having a language barrier, Who Cares? Scotland would also call for the need for independent advocacy workers with specialist training and translation services to be available to these young people in order to participate in decisions about their care, share their views and fully understand their rights and support available.

Support for disabled young people leaving care

21. Can you tell us about any specific services or supports that already work well for disabled young people or people with complex health needs leaving care?

We are unaware of any specific services or supports for disabled young people or people with complex health needs leaving care to highlight as good practice, although these may exist.

Collaborative working between an allocated and consistent social worker and housing officer is valuable for all Care Experienced young people but particularly so for those with complex health conditions or disabilities.

Funding available for Self Directed Support is particularly valuable to this group in supporting them to have choice, flexibility and control over their care when they are less likely to have family members to rely on.

Finally, we are also aware of the benefit supported accommodation placements can offer in particular for this group of young people as they transition to independent living, and would highlight the National House Projects or similar schemes with wraparound and relational support as a service to anyone looking to improve their offer for young people with particular needs. However, we believe that supported accommodation placements should be resourced adequately to be a viable option for any young person to choose when moving on from care.

22. What improvements do you think could be made to ensure disabled young people leaving care have the support they need when they make the transition to adulthood?


As set out in response to earlier questions, access to independent advocacy is a fundamental aspect of promoting and protecting the rights of children and young people. For those who are unable to express their wishes due to complex communication difficulties, lack of understanding or an assessed lack of capacity (where no instruction or views can be obtained), these children and young people should be able to access a model of non-instructed advocacy to ensure their rights are promoted and protected throughout their time in care and aftercare.

Non-instructed advocacy aims to support young people who are not able to request an advocate or to say what they want for reasons of communication difficulties, lack of understanding or severe learning disability. A non-instructed independent advocacy worker seeks to uphold the young person's rights, ensure fair and equal access to support/services, and ensure that decisions are taken with due consideration for all relevant factors, including the young person's preferences and perspectives. A non-instructed advocacy approach should be based on the presenting issue, the person's rights, observations of them in a range of settings where possible, trialling methods of nonverbal communication with the person, and discussions with those who know them best. The Principles and Standards for Independent Advocacy apply to non-instructed advocacy in the same way as they do to instructed advocacy.

Advocacy workers with a particular expertise in supporting this group of young people have raised that transition meetings need to be timely and productive. There can be lots of meetings but there is no clear indication on who should do what in relation to the transition plan and timeframes. There is clear legislation and policy for this area however planning for processes such as drafting a power of attorney or appointing guardianship frequently start too late, or feel rushed. Pathway planning for these young people must start earlier in order to account for the barriers many will have in sharing their views, and professionals given additional protected time for this work. Improved work with housing teams would also help to ensure that planning can take place early and support a smooth transition.

Advocates have also raised that some social workers are more informed on this area of legislation than others, and the support available for their young people. Ensuring that social work have correct information regarding Self Directed Support budgets and other opportunities would improve the transition for young people. An increase in opportunities for education would also be welcome as college is not suitable for all young people with additional support needs who leave Children and Families teams. However, there is a lack of alternatives for them if work is not possible and training or education opportunities for adults is not bespoke enough, compared to services for children.

“Age doesn’t mean at one point there’s a fairy wand waved that fixes my issues and concerns brought about by my disability and care experience. I think no matter the age, this burden can follow you so the appropriate supports should be along side you. My advocate helps make clear my rights to supports as well as helping me with day to day things like applying for college care experienced bursaries.” – Care Experienced person, Summer of Participation, 2023.



When young people are under children's services, they are able to receive a lot more support at this stage but then receive significantly less, often overnight, when they transition to adult services. Access to some supports are reduced or can be non-existent within adult services. This can have a really detrimental impact on a young adult's sense of self, fulfilment, social connection and opportunities to grow and pursue their aspirations. Transitions must be led by the needs of the young adult and their human rights.

“I think it's really important that support is offered to Care Experienced people until they feel they are able to cope on their own. It can be difficult to move on without support of family and to lose relationships with carers because you are a certain age seems unfair.” – Care Experienced person, Summer of Participation, 2023.

A significant proportion of the young people we work with have mental health challenges, and we have heard from Care Experienced people how leaving care and a busy environment to live alone can exacerbate feelings of loneliness and depression. We would refer to our answer to Q29 about out of hours support as a service many young people with a mental health disability would value.

Support for people leaving care who are parents

23. What improvements can you suggest in the support provided to young people with care experience as they prepare to give birth or become parents?

Every Care Experienced parent should have the right to good quality support, as and when they need it. We recognise the power of positive, supportive professionals and know this is something already experienced by many Care Experienced parents across Scotland. We want this to be a consistent experience for parents across all of our communities. In 2022 Who Cares? Scotland carried out participatory research with 47 Care Experienced parents from across the country. The findings are published in a report 'Believe in Us' on our website - www.whocaresscotland.org/wp-content/uploads/2022/08/APP-Believe-in-Us-Report.pdf.

The key findings from the research were:

- Many Care Experienced parents have felt the impact of stigma and discrimination.
- Only 1/3 had felt comfortable to ask for help from services/professionals
- Only 37% had felt able to get the support they needed
- Care Experienced parents need spaces where they can connect with each other and provide support.
- Universal support services need a judgement-free process to identify Care Experienced parents and provide suitable professional support to ensure positive parenting journeys.

"I haven't felt comfortable (asking for help) because of the risk of being thrown under the bus. I think if I say I'm struggling to cope or get up in the morning, it will be used against me." - Care Experienced person, Believe in Us, 2022.

Our concluding recommendations from this research were:

1. The Scottish Government should explicitly name Care Experienced parents in the work of the Perinatal and Infant Mental Health Programme Board, and create specific pathways to proactively offer access to these services. The Perinatal and Infant Mental Health fund run by Inspiring Scotland should include funding specific work with Care Experienced parents.

2. The Promise's Whole Family Support work in 'Change Programme One' should recognise the specific needs of Care Experienced parents and support creating funding streams for Care Experienced parent-focused projects from the Scottish Government's £500 million Whole Family Wellbeing Fund.
3. As 'Corporate Grandparents', 2 local authorities and COSLA must recognise the needs of Care Experienced parents as a strategic priority when implementing The Promise. They should work with Care Experienced parents to develop specific pathways to proactively offer support, including a sensitive and judgement-free process for parents to share they have experience of care. This should build on learning from the Early Learning and Childcare support offer for 2-year-olds of Care Experienced parents.
4. The lifelong impact of Care Experience must be recognised in the provision of any support for Care Experienced parents, by ensuring no age cut-offs. This reinforces existing calls from Care Experienced people to have better rights protections throughout their lifetime. We have included this terminology as some parents who spoke to us felt this was helpful framing for how they want support to be offered, while recognising that some Care Experienced people found this language unhelpful during the Independent Care Review.
5. The Scottish Government must recognise Care Experienced parents by including specific actions in their 'Best start: five-year plan for maternity and neonatal care.' Care Experienced people should co-design practice guidance for relevant Corporate Parents working in maternity and neonatal care, promoting understanding of Care Experience and how practitioners can sensitively offer additional support.

'(Know) that Care Experienced young people have been judged and discriminated their whole life. Don't put them through that as a parent as it can be mentally damaging and just because a person is a single parent or doesn't have any family support doesn't mean they can't be a parent.' – Care Experienced person, *Believe in Us*, 2022.

6. Training must be co-designed with Care Experienced people about how to best support Care Experienced parents of all ages. This should be tailored for providers who deliver universal and specialist support to parents, including services in the NHS such as Health Visitors and Midwives. Training should also be available for Social Workers, with a specific focus on young parents who are receiving social work support

and become parents while living in care or when 'leaving care'. Core to this training is the need to challenge stigma and assumptions about parenting capacity due to experiences of care.

7. All training and practice improvement work to better support Care Experienced parents must explicitly link with training on trauma-informed practice by NHS Education for Scotland. This is especially important to embed in universal healthcare approaches during pregnancy, birth and early childhood. For example, trauma-informed practice must be acknowledged explicitly in the 'Best start: five-year plan for maternity and neonatal care.'
8. Local authorities and the Scottish Government should sustainably fund specific peer groups and parenting support spaces for Care Experienced parents in each local authority area. This offer should be designed with Care Experienced people in local areas and a variety of options should be considered, such as groups for younger mums and dads to connect. Delivery should be community-based and collaborative with third sector and trusted community organisations. Funding could also lead to specific independent organisations specialising in support for Care Experienced parents. We would like to point to the examples of 'Project Unity' in Wales, which offers intensive support, opportunities, education and training to care-experienced pregnant women and young mums up to the age of 25 across Wales, and the specialist Glasgow charity Amma Birth Companions that provides care information and advocacy for birthing people facing barriers to support, which recognises that birthing people from marginalised or racialised groups experience disparities in perinatal care.

'I think ongoing support would be good but maybe in an informal network that held social events would be nice - takes some of the stigma out of having 'official' support.' – Care Experienced parent, *Believe in Us*, 2022

9. Social Security Scotland and the Scottish Government must make sure all Care Experienced parents have the financial and practical support they need. This should include access to the various Best Start Grants and Food payments and additional funds should be explored further. This should be delivered as part of the Scottish Government's Tackling Child Poverty Delivery Plan 2022-26, and in the implementation of The Promise, which recognises the increased likelihood of families being separated due to poverty.

10. Focused work must take place to prevent children from being separated from Care Experienced parents, as part of realising The Promise's 'Change Programme One' focus on 'Whole Family Support'. As detailed in the recommendations from our National Care Service consultation, this includes ensuring the workforce is trauma-informed in all areas of practice. There must be time and resource to connect with families, listen to and include them in decision-making, and tailor support to help families stay together. This should include ensuring parents who are living in care at the time of becoming pregnant are supported to stay with carers and in care placements where they feel safe and secure.

11. Further research must take place to understand the frequency of children being removed from Care Experienced parents in Scotland, as has been undertaken by researchers in Wales. This should build on the recent 'Born into care in Scotland' study commissioned by the Scottish Government, to understand the scale of the issue and if systemic discrimination is taking place. Any research taking place must be trauma-informed and supportive and sensitive to the needs of parents who have had their children removed.

These recommendations are echoed by the NSPCC's Together for Childhood project, a place-based project aimed at preventing child abuse and neglect in families facing adversity. In June 2024 they published the findings of research carried out with new and expecting parents and local professionals in Govan.

The key findings were that:

1. Almost all participants felt they had no support during the earliest stages of pregnancy

Feeling that there was no support brought a heightened sense of anxiety and isolation, particularly for those new to the country without family help. Participants felt that medical appointments were few and far between during early pregnancy and that this was another challenge faced by expectant parents and carers in accessing information and further support.

2. Timely, consistent and compassionate medical care is essential

All participants stressed the importance of having supportive and accessible medical care during the early days of pregnancy for parents to stay healthy, feel reassured, and manage changes during pregnancy.

3. Reliable medical information needs to be accessible

Participants highlighted the importance of receiving reliable information around what to expect and what was normal during pregnancy to fill the gaps between healthcare appointments. However, participants reported finding it difficult to access reliable information in a format that suited their needs.

4. Community-based family and peer support from the very early stages of pregnancy is key

All families would benefit from wrap-around support during the early days of pregnancy. This could include local spaces for connecting with peers and opportunities to speak to other parents with shared experiences.

5. Social and economic inclusion and exclusion need to be considered

All participants spoke of financial hardship and anxieties around financial stability and the affordability of a growing family. For some, what was being experienced during pregnancy also connected to inequalities they faced due to experiences of cultural and ethnic diversity, economic hardship and uncertain immigration status.

24. How can the workforce be better supported to help Care Experienced people as they become parents?

Please refer to our answer to question 23.

25. How can children's and adult's services better work together to provide whole family support for parents who are Care Experienced?

Please refer to our answer to question 23.

Peer support and maintaining lifelong links

26. In what ways would you like to see peer support used by people leaving care and/or caregivers during a young person's transition from care into adulthood?

We would describe peer support as support, formal or informal, that a Care Experienced person receives from another person with Care Experience.

We welcome the value of mentoring, programmes such as Lifelong Links connecting young people with relatives they may not know well, and funded access to general youth groups, sports and arts clubs, music opportunities, and other networks such as Scouts and Guides for Care Experienced young people, to increase the number of positive relationships, trusted adults and opportunities in their life.

However, we see peer support as something invaluable which can only be offered by peers. Care Experienced people make up a very small proportion of the population. For young people in foster or kinship care, it is possible that they may grow up not knowing anyone else in care except characters in books and films, which are often portrayed in stigmatising and inaccurate ways. We have heard from some Care Experienced people that this feeling of 'being different' has impacted on their self-esteem and aspirations, compounded by stigma in society and untrue beliefs that many children in care are 'bad' or 'unwanted'.

After camp, I felt different, I felt better about who I was, and I felt able to share that part of my identity. I owned it.' – Care Experienced person, feedback on Summer Camp, 2023.

Peer support for Care Experienced people is creating safe spaces for those with similar ages and experiences to be able to spend time with other people who share this part of their identity. A space to be somewhere where they are not alone in their experiences or feelings, and don't feel like the 'odd one out' from other children, young people or adults. A space to escape from conversations that discuss parents, family, holidays or other common topics of conversation so commonly discussed among the general population that can often leave Care Experienced people feeling uncomfortable, telling white lies about family rather than sharing personal circumstances, or being honest and then feeling judged or ashamed.

“I have a deep sense of belonging here and from the very beginning to end of the event I felt so much love, care and inspiration”. – Care Experienced person, feedback on a participation event, 2023.

Care may or may not be discussed in these spaces - the aim is not to discuss care but to create a space for belonging and connection in the widest sense. Who Cares? Scotland operates groups across the country that range from strictly fun and relaxing activities such as arts and crafts or football, to groups for young people keen to use their voice to make a change in their area and campaign on issues relating to care that have affected them and others they know. The function of such spaces should be up to the attendees to decide, the priority is that they have a dedicated time and space to come together with others and not feel like they are alone with their experiences.

“At first everything you’re going through might not seem like... it might seem like it’s just you going through it yourself, and Who Cares? Scotland basically helps you realise that everybody’s in it together.” – Care Experienced person, feedback on Summer Camp, 2024.

As set out in our answer to question 23, peer support for Care Experienced parents and expectant parents would be particularly beneficial to this group due to the increased stigma and scrutiny this group feel which prevents many from asking for help from formal services.

As set out in our answer to question 29, we hope that peer groups aimed at increasing a sense of belonging and connection can be available to all Care Experienced people across the country to reduce loneliness and isolation.

27. Do you know of any examples where peer support networks have had a positive impact on the experience of leaving care, either for care leavers or those who supported them?

Who Cares? Scotland runs numerous participation groups across the country for Care Experienced people of all ages and types of care, alongside national belonging and connection events throughout the year. As set out in our answer to Q26, these groups are tailored to the wants and needs of those who attend, and we create multiple groups in areas where we have a wide age-range of members and range in interests.

We have highlighted just two examples below, of our Glasgow Drop In and Wee Diamonds groups, to highlight the impact these spaces can have. These are peer support groups aimed at Care Experienced adults who have left care and children living in kinship care, respectively.

The Glasgow Drop-In group runs every Thursday evening, and is open to all Care Experienced people over the age of 16, from any local authority or type of care. The group is always busy, and offers members the opportunity to connect with others, play games together, talk privately to our lifelong advocacy worker about any issues they need support with, have some food and celebrate each other's achievements. For some attendees who have left care and live alone, the Glasgow Drop In is the only reliable point in their week where they will have company or leave the house.

“The thing about being care experienced is that even after you’ve left the system, the system never fully leaves you so you have this strange void that can’t be filled and you can’t go back. You find yourself in situations where people are chatting about their childhood or their school days and you can’t join in, or maybe you do join in and then they ask a lot of questions but they still don’t understand – it can be tedious and lonely. The drop in has really filled that void for me because it’s somewhere familiar I can go to and although we don’t often talk about our experiences of care we all know how it is. I always feel welcome and accepted and although I struggle to make friends, I still have a laugh. There are times when I feel too overwhelmed or anxious to converse much but I still go and read my book or draw and just bask in amongst the vibe of Who Cares with friendly faces and laughter and banter. There isn’t much support for care experienced adults so I really appreciate Who Cares? And all the people who put their time and energy into making it a much needed organisation.” – Care Experienced person, feedback on Glasgow Drop In Group, 2024.

Our Wee Diamonds group in Renfrewshire meets fortnightly and has now been running for 8 years. An average of 8 to 10 primary school age children attend regularly, mostly from kinship care placements although there are currently two attendees in foster care and one who is looked after at home. Secondary school age young people have a gentle transition to the Renfrewshire Chill Out group when they feel ready, and can attend both groups for a couple weeks until they feel comfortable. Both groups are for fun and connection, trying new activities, food and friendships.

“A young person in kinship care was referred to our Diamonds group by his teacher. He was facing real challenges on understanding why he was not able to live with his Mum and felt

protective towards her despite Mum being unable to care for him and keep him safe. His behaviour and presentation had become quite difficult to manage as he tried to process his situation. He had witnessed some significant trauma and neglect which he was getting help to process.

He did not attend any clubs or have any out of school activities and the school were keen for him to have some hobby or activity where he could spend time with peers and socialise. He came along to the group and was helped to become aware that the other young people at the Diamonds did not live with their Mums and Dads either.

The first night he came along, he was welcomed by the group and quickly struck up friendships and after initially being a bit reluctant, managed to play the games on offer and thoroughly enjoyed himself. The following day his teacher asked how he got on at the group and she relayed that he shared with her and the class that 'he had the best day of his life'.

The young person now attends every session and has made use of everything on offer, attending summer trips, national events and Gran shared that she too has benefitted from support and friendship from other carers too which is an unintended outcome. Last week he shared to the whole group that he was going to be able to see his Dad and the young people all cheered and clapped for him. There wasn't a dry eye in the house."

– anonymised case study of a regular attendee of our Wee Diamonds group.

More spaces for Care Experienced people to be able to connect with peers and combat loneliness is needed to support sustained mental wellbeing and self esteem, as well as success in living alone. We would welcome funding to Who Cares? Scotland or other organisations across the country to be able to offer similar connection spaces outside of working hours.

28. How can we better enable young people and the supportive adults in their lives to maintain healthy relationships once the young person has moved on from care? Please provide any suggestions or examples you may have.

The Promise (p15,16) explained that the care system and welfare services had developed an image of being primarily focussed on risk assessment, risk management, and reducing risk, at the detriment to enabling stable, long term and loving relationships. It recognised that the rules and structures were preventing young people from being able to have these types of meaningful relationships all humans need, and were creating further harm to young people that the welfare system was seeking to prevent.

The Promise recommended that Scotland reframes how we think about risk and revises a system of policies and safeguards that prevent safe and loving relationships from flourishing. To do this, it recognises that 'strong leadership throughout the entire 'care system' will be necessary to make the shifts needed'.

Our National Advocacy Helpline has been contacted several times by professionals wanting to stay in touch with a young person they are due to stop working with, but fearful that they are not permitted to do this by their employer.

Clarity from organisations such as care providers and social work and education management to front line staff that this is allowed and encouraged that this is allowed and encouraged, and support to do this safely and with reasonable boundaries would likely increase the number of supportive adults willing to maintain a good relationship they have with a young person.

Leadership from management continuing relationships in their own personal time would also likely help to reassure frontline staff that this is permitted practice.

Out-of-hours services providing support and advice

29. What types of support and advice do you think should be available to care leavers as part of an out-of-hours service?

We know from our advocacy work that most help required out of hours relates to mental health needs and emotional distress. It is widely known that services are generally open Monday to Friday 9 to 5, and if for example, a young person is running out of money and needs to top up electric for the weekend, they know they need to get in touch with someone before Friday at 5pm.

Care Experienced people who need to pick up the phone and be able to call someone in the evenings or weekends are most likely to be calling for something most people would rely on a parent or relatives for. This could be a chat when they're feeling a bit lonely or anxious about an upcoming test or job interview etc., or most likely help with a practical emergency such as a broken boiler, DIY problem or car issue. Most people are aware of crisis services such as NHS 111 or Samaritans, but there is a huge gap for Care Experienced people with smaller needs that most people would not think twice to text a parent about.

"I spent a whole weekend in the dark because the lightbulb blew Friday afternoon and I didn't know how to buy the right one or change it and I didn't have anyone to ask until I could go to school on Monday and ask my teacher." – Care Experienced person, Somewhere to Call Home, 2019.

Many local authority aftercare teams already operate an out of hours phonenumber which we find usually supports with young people in financial crisis with a small amount of money or a voucher, or giving advice where emergencies happen. We find that often young people are unaware that this service exists though or are unsure what they can contact it for support with. Many young people feel that this is only for crises and are not encouraged to call unless it is urgent. Given that these challenges affect many Care Experienced people long after they have turned 26, we recommend that these offers are open to all, regardless of age, and are better promoted to increase awareness of the service and what they can offer.

We would recommend that these staff are given appropriate training to also be able to support people calling in emotional distress or feeling quite low and isolated. We are aware that young people calling for mental health distress will often be signposted to crisis health services such

as NHS 111 or their local A&E. We have heard frustrations from young people via our National Advocacy Helpline about the length of time these services take to be able to offer them someone to speak to about their feelings and can often offer suggestions such as taking a bath or going a walk that young people find unhelpful if they are looking to speak to somebody, escalating them to police and mandatory trips to hospital which can cause more distress for someone, or considering them to not be in great enough distress that they are turned away when they are feeling really isolated.

'I'm a care leaver and there's not much support... Young people should be supported to look after their own mental health too. It would be good to have someone I trust (not a stranger) to help keep my mind steady, to know where my own mind is at and what works.' – Care Experienced person, *Tend Our Light*, 2022.

Care Experienced people have told us that often services such as Samaritans and Breathing Space which offer a conversation that can take as much time as they need, or Shout which they are able to text, are more helpful. Being able to offer that listening ear from someone in their aftercare team who they know and is better informed of the challenges facing them would likely be even more helpful to many facing isolation, loneliness and low mood.

'We aren't trying to waste your time when phoning to explain our thoughts and feelings. We don't have families to talk to, so you are our first point of contact. Please be kind and don't push us away, because that is more rejection and then we have nobody else.' – Care Experienced person, *Tend our Light*, 2022.

Holidays like Christmas can really affect a Care Experienced person's mental wellbeing. There is an increased need for opportunities for them to connect with others, and know where to get support during extended periods when regular services are closed. We hold our Christmas Dinner on 25th December, despite the difficulties this can pose with arranging transport, staffing and other logistics, out of the recognition of the impact that being alone would have on many of our attendees who join us every year. We would encourage other services to consider what they can offer around dates such as Christmas, Mother's Day and Father's Day.

Finally, we would welcome funding for an out of hours emergency independent advocacy service as we are aware that rights are threatened every day and every hour. It is important that young people in care are not only able to access support to enjoy their rights during normal working hours, but in cases of emergencies such as unplanned or unagreed placement moves the young person does not consent to.


As one example, we are concerned about rights abuses taking place in the provision of secure transport, engaging Article 3 of the ECHR, on freedom from torture and inhuman or degrading treatment or punishment, and contrary to the procedural safeguards in Article 37 UNCRC, expanded by General Comment 24. In 2022, we worked with Kibble Education and Care to hold a consultation with young people living in the Kibble Safe Centre on how they arrived at Kibble. From the views gathered, it is clear that current transport arrangements are not always trauma-informed or rights respecting for children who enter and then live in secure care. Current practice does not Keep the Promise or uphold Secure Care Standards.

The majority of young people said either the police, or existing secure care transport organisations (Wrixon Care, GEOAmev) took them to the Safe Centre. Several young people said they were handcuffed throughout the journey. Journey times varied as some young people were being transported from the main campus at Kibble, others spoke of journeys lasting up to 8 hours to get there.

The young people were asked to explain what they knew about where they were going and why, when being transported to secure care. Eight of the young people felt they had been lied to about where they were going or the nature of why they were going to secure care. The theme of deception ran through more than half of the young people's stories about what they knew about their destination.

Another young person described their experience of being transported to the Safe Centre on Christmas Eve: *'I woke up and (staff member) came into my room. He said do you want to go to McDonalds? I said, "Sound man, let's go". I put my best tracksuit on. On the journey there, he asked me "what are you getting?". I said, "A Big Mac mate". We were on the M8, then he passed by McDonalds. I said to him, "McDonalds is that way". He said, "You're going to secure mate."*

Young people described various issues with their journeys to secure care, including not being given adequate toilet breaks, not receiving anything to eat for long periods of time and being too hot or uncomfortable during the journey: *'I hadn't had anything to eat that day. My mum told the police that. So, when we stopped at McDonalds, I thought I would get something to eat. But I didn't. It was just to change over. It wasn't until the next morning that I got something to eat.'* They also described drivers speeding at high speeds on the journey or being unsafe in the way roads were being navigated. A couple of young people also described feeling fearful.



When asked what would make the experience better, some young people would have liked to have gotten some food for the journey or a drink. Some wished they hadn't been handcuffed; others wished there had been a USB port for their phone. Others made observations about who they felt should have brought them to secure care and were clear about the reasons why. One person shared that their previous experience with the police meant it was difficult when they were the ones to take them to secure care and would have preferred their social worker to be with them instead. The majority of the young people living at the Kibble Safe Centre feel they were deceived and brought there under false pretences. From their testimonies, it appears there was a lack of clarity on behalf of the young people and what they knew about where they were going and in some cases, why they were going there.

Young people should be able to ask for and have access to an independent advocacy worker at any point they feel their rights are being breached or they are unclear about their rights and decisions being made about their care.

Health and wellbeing

30. What improvements do you think could be made to ensure care leavers have access to services which support their physical health, and mental health and wellbeing?

Mental Health

We all want to lead happy, healthy lives and to have the support we need for our mental health whenever we need it. This is the world our members want to see for all Care Experienced people, who can face greater need for mental health support.

‘Support needs to be there continuously throughout life, I have just turned 26 and lost all my support. Being Care Experienced doesn’t leave you and won’t just go away after a few months of support.’ – Care Experienced person, Tend our Light, 2022.

In 2022 Who Cares? Scotland published a participatory research report about mental health, following consultation with 61 Care Experienced people from across the country. The report, called Tend Our Light, is available on our website here www.whocaresscotland.org/wp-content/uploads/2022/08/APP-Mental-Health-Report-1.pdf.

The key findings of this report are:

1. 70% of participants had been unable to access mental health support
2. 100% of participants felt their care experience had impacted upon their mental health
3. Trauma can affect Care Experienced people throughout life and manifest in different ways as people grow older.

‘There’s not just the trauma before care, there’s also trauma within care, in different care settings. Like for example, living in residential care....Like for me, school was an escape. Then you get back. The other people around you are traumatised. It’s triggering.’ – Care Experienced person, Tend Our Light, 2022.

The report made seven tangible recommendations to improve the way mental health is supported for Care Experienced people of all ages:

1. Dedicated mental health services for Care Experienced people

The Scottish Government, local authorities and NHS health boards must create targeted, trauma-responsive mental health services with dedicated resources and services available for Care Experienced people. These should have been available by at least by 2024, as part of realising Change Programme ONE of The Promise (p.26) that: 'Every child that is "in care" in Scotland will have access to intensive support that ensures their educational and health needs are fully met.'

2. Lifelong mental health support for Care Experienced people

Mental health support for Care Experienced people should be available throughout their lifetime, without automatic end dates. The length of time support is in place should be based on need. Development of clear pathways and services for Care Experienced adults should be visible by the end of this Parliamentary term, by 2026.

3. Every child in care proactively offered mental health support

Investment in early intervention approaches must be prioritised, with specialist mental health support offered as soon as a child enters care and remaining available throughout their care journey. This targeted approach should be implemented by the Scottish Government as part of their Programme for Government 2021-22 (p.25) commitment to increase mental health spending by 25% over this Parliament, to shift the focus to prevention and early intervention and to Keep The Promise.

4. Supporting loving relationships for Care Experienced people

Relationships are powerful in supporting positive mental health for Care Experienced people. We need to support Care Experienced people to keep the loving relationships already in their lives and to form new support networks throughout life. This aligns with the Promise Change Programme ONE focus on Relationships as part of creating 'A Good Childhood' and the 'One Good Adult' model, which shows positive social relationships are a strong predictor of good mental health.

5. Tailored and specialist mental health training about care experience

Adults and professionals in Care Experienced people's lives need to be supported to understand how to best support mental health needs. NHS Education for Scotland should work with Who Cares? Scotland and Care Experienced people to create training for mental health professionals about the potential impact of care experience. Mandatory mental health training should also be available for carers, frontline social care staff and Corporate Parents. This should be delivered as part of Public Health Scotland and NHS Education for Scotland's mental health training already underway. This should be supported by the Scottish Government as part of the Mental Health Strategy 2017-27 refresh and the new Suicide Prevention Strategy.

6. Mental health education for Care Experienced people

Local authorities must create specific opportunities for Care Experienced people of all ages to learn about mental health and raise awareness of support available. This should be delivered as part of existing work to build community-based mental wellbeing services for children and young people, which the Scottish Government committed £30 million to in the Programme for Government 2021-22 (p.26). This could also be delivered through the Suicide Prevention Strategy.

7. The right to choose mental health support and access it quickly

In the next four years, the Scottish Government must support NHS Health boards to provide rights-based and person-centred approaches to mental health support, which empower Care Experienced people to choose from a greater range of support and therapies that work for them. This must include reducing waiting times for mental health support and services.

'I still feel shame from being in care, even though it was not my fault. I still feel I'm not good enough, as my family abandoned me and my sister when we needed them most. I've tried to work through those feelings but they are deep and I still feel raw.' – Care Experienced person, *Tend Our Light, 2022.*

Physical Health

The 2016 ACEs research by Public Health Wales has made the link between trauma and physical health widely known. Key findings include that adults with four or more adverse childhood experiences are more likely to adopt health-harming behaviours during adolescence which can lead to diseases such as cancer, heart disease and diabetes later in life. It is

imperative that the recommendations above regarding mental health support are implemented to support Care Experienced people to enjoy their right to the highest attainable standard of physical and mental health.

The role of poverty in creating health inequalities for Care Experienced people must also not be understated. June 2023, the Hunger in Scotland report, published by the Joseph Rowntree Foundation and Ipsos, found that Care Experienced people made up 1 in 5 of the people referred to their foodbank networks in Scotland. Public health campaigns encouraging people to eat healthily and take regular exercise does not recognise the significant financial and logistical barriers households on the lowest incomes, and single parent households without support networks face in having the time and money available to always do this.

Being able to shop for fresh and often more expensive ingredients, travel to supermarkets that offer this choice rarely located within deprived neighbourhoods, have the time, equipment and knowledge to cook healthy meals from scratch, take time for themselves every day to dedicate to exercise and have disposable income to spend on gym fees or sports equipment has become a luxury in our society that many without these challenges are unaware of. Research from Loughborough University in 2020 highlighted that of those asked only 40% of Care Experienced young people felt they had the same opportunities to take part in sport compared to their non-Care Experienced friends, with money being highlighted as one of the main barriers.

Furthermore, in 2019, 105 Care Experienced people told us about the challenges they face in accessing dental treatment. 73% disagreed with the statement 'whilst in care, the importance of dental care/hygiene was explained to me', 67% disagreed with 'whilst in care, I attended the dentist regularly', and 51% said that they do not have good dental health/hygiene today.

"I was moved about a lot and really scared of the dentist so never built up enough trust with a dentist or staff to manage going. But nobody ever supported me to go or took time to explain why it was important. It just wasn't mentioned." – Care Experienced person, Dental Health Survey, 2019.

Many Care Experienced people spoke about the impact poor dental health care has had on them later on in life. Key themes were feeling shame about how their teeth look, impacting on their confidence and self-esteem, fear of the dentist, struggling now to implement good dental hygiene practices, and anxieties about the cost to rectify issues due to the lack of treatment when they were young.

“I have been caring for my teeth obsessively since several fell out when I was 18. Trying to keep them has been horrifically expensive. 9 root canals, 7 extractions.” – Care Experienced person, Dental Health Survey, 2019.

“I love talking, but I cant speak or meet new people because I cant smile or talk properly in case they see my teeth. It has really affected my mental health and confidence. My teeth are well looked after now but no amount of cleaning will repair the damage done.” – Care Experienced person, Dental Health Survey, 2019.

Action to empower Care Experienced people to be able to improve their physical health could include:

- Free access to local authority leisure centres and classes
- Creches at local authority leisure centres
- Expansion of free childcare hours for Care Experienced parents
- Expansion of the Best Starts Food Grant
- Mitigation of the young parent penalty for Care Experienced people through the Scottish Child Payment
- Protection of bus routes in deprived neighbourhoods to protect against food deserts (areas where people have limited access to healthy food)
- Expansion of free dental care for Care Experienced people who suffered dental neglect whilst in care

Who Cares? Scotland has recently partnered with PureGym to offer our members of all ages a 50% discount on monthly memberships with no joining fee. Local authorities as corporate parents should be aspiring to at least match this corporation’s offer to improve Care Experienced people’s health.

“I just moved out recently and I basically spend all my money the day I get it. I don’t have much room to move in terms of budget, I no longer am able to buy things for enjoyment and I’ve had to really keep my food shopping low which I have a lot[sic] of food sensitivities.” – Care Experienced person, Finance Issue Paper, 2024.

We also want to highlight the issues Care Experienced people have told us about regarding sexual health and healthy relationships. In 2021, 55 Care Experienced people shared their views with us regarding sexual and reproductive health, alongside our National

Representative Body who helped develop recommendations for change. The key findings were:

1. Care Experienced people often receive inconsistent and patchy sexual and reproductive health education from different schools, carers and professionals. Those in kinship care highlighted particular difficulties with receiving education from grandparents.
2. A majority told us that they felt well-informed about sexual health but less empowered to make choices for themselves. This improved when they had a trusted adult alongside them however others described not feeling listened to by the adults and professionals in their lives.
3. The most common service accessed was for contraception, although 1 in 5 had not accessed any of the services listed. Having choices and information available was seen as the biggest factors in those who found services supportive. Those who had had negative experiences described services being awkward, not trauma-informed or not being transparent due to professionals or carers being involved.
4. The biggest theme was a feeling of being judged, stigmatised or 'othered' by professionals when accessing services – over half felt their care experience had impacted their experience. Care Experienced people also shared feeling stigmatised due to other parts of their identity, such as their young age or being a part of the LGBTQ+ community.

'I felt like I was slightly forced into being on birth control by my foster carer, felt like my relationships were constantly over scrutinised and expected to be perfect in the eyes of my social workers and foster carers.' – Care Experienced person, *Sexual and Reproductive Health Report, 2021*.

Our recommendations to improve sexual and reproductive health services for Care Experienced people relate to:

1. Empowerment through learning in schools
2. Upholding the right to inclusive education
3. Supporting carers and families
4. Bridging the generational gap in kinship care
5. Training the workforce
6. Honest and open conversations with carers and families
7. Access to period products

8. Questioning sexual experience as a learning method
9. Trauma-informed services
10. Accessibility of confidential resources and services
11. LGBTQ+ inclusivity
12. Understanding care experience and harmful prejudices

'[What I was told] wasnae accurate - I was raised by my grandmother...I grew up with really warped - not warped but not healthy views. So when I had sex, it led to underage pregnancy.'
– Care Experienced person, *Sexual and Reproductive Health Report, 2021.*

For more detail please visit our Sexual Health and Healthy Relationships report and resources on our website - www.whocaresscotland.org/?s=sexual+health.

31. What improvements do you think could be made to ensure a smooth transition is made between children and adult physical health services, mental health services and wellbeing services?

Please refer to our answers to Q14 and Q30.

Housing

32. Please tell us about any good practice you are aware of that supports young people leaving care to find a home that meets their needs.

In some local authorities our advocacy workers report the benefits of strong partnership working between social work and housing teams. This ensures that housing has a good understanding of what the young person needs and the timelines to work to.

We would also like to highlight the National House Project model, operating currently in Fife, Midlothian and East Dunbartonshire Councils. These projects bring young people leaving care together and this peer community supports them to develop the practical and emotional skills that they need to live interdependently. The House Project Programme provides young people with a peer network and a range of opportunities and support as they take on their first home and follow a pathway in education, employment or training. They work on houses which become their homes to live in for as long as they want, and often help others in their cohort with cleaning, sharing recipes and other household tasks.

The tenancy success rate of this project is high and the project has a positive evaluation by STAF. We hope this project can be set up in other councils who do not have a similar inhouse offer like South Lanarkshire Council does and grow to be able to accommodate all young people each year who feel that this would be the best option for them.

South Lanarkshire Council is one local authority in which we are aware of a high focus on utilising continuing care rights and delivering high quality aftercare, to the benefit of the young people themselves and other universal services that are subsequently required less. This council has chosen to strategically prioritise resources here and is having great results consequently. We encourage other Corporate Parents to make this type of investment in giving young people a strong base for success in adult life.

33. What do you think are the main barriers in securing appropriate housing for a young person with care experience?

In July 2024, Who Cares? Scotland published our Housing Issue Paper, the first in a series of short papers as part of our Lifelong Rights Campaign. The full paper is available on our website and at www.whocaresscotland.org/wp-content/uploads/2024/06/Housing-Issue-Paper_Final_19.06.24.pdf.

The paper reflects evidence from our advocacy database alongside responses from 56 respondents to a survey on housing. The key themes reported in the paper were a lack of support, inadequate housing, lack of choice and financial issues.

From first tenancies to temporary accommodation and experiencing homelessness, a lack of support appears to be widespread. People reported feeling unprepared, often lacking in independent living skills or that they were living in an inappropriate or unsafe situation that they could not leave.

“I had very little knowledge of how to access support with deposits for private lets and had no idea how to access council housing. I had a job and was also at university, so it seemed like I was left to fend for myself because I was standing on my own two feet. Something which was out of necessity for survival, not because I essentially wanted to do it alone.” – Care Experienced person, Housing Issue Paper, 2024.

Many of those answering the survey had been placed in accommodation that was unsafe, inadequate for their situation or in a poor condition. Issues cited include: being placed in an area with anti-social behaviour from neighbours; not having enough space for the number of people; disrepair; unsanitary conditions e.g., mould; and not having essential facilities.

“I was not given any choice on my first accommodation; I was told I need to take the flat. The flat subsequently was a two-minute walk from where my father was murdered. The care and consideration from anyone involved was minimal. Upon moving in I was given basic dishes, cutlery and information for when and where to pay rent. I was taken to Argos to choose basic furniture and told what I needed. After one week I never heard from Throughcare again.” – Care Experienced person, Housing Issue Paper, 2024.

Lack of choice over housing characterised the experience of many people answering the survey. This was often accompanied by a lack of support from service providers and led to people being placed in poor quality housing or in an area that was unsuitable for them.

“I was forced to move into my flat at the time when my Supported Carer decided she no longer wanted me there and Social Work took her side. I struggled to adapt to taking on the responsibility at first particularly when it came to paying the bills and I wasn't given much support with that at the time.” - Care Experienced person, Housing Issue Paper, 2024.

From our survey, 38% of respondents told us that they had wanted to live in a different area to the one that had 'looked after' them as a child. When asked why, wanting to move closer to family, friends, carers or other connections in the area was a common motivation. Some also mentioned wanting to move away from the area where they had experienced trauma, or where their family or carers live. It is important Care Experienced people have the autonomy to make these decisions for themselves and are not tied to an area in order to receive support that is detrimental to their wellbeing.

“I didn’t like the options with the LA to live. I have experienced lots of trauma in the town I was placed in and surrounding areas were too expensive.” - Care Experienced person, Housing Issue Paper, 2024.

Throughout the survey we heard financial issues heavily influenced people’s experience of housing. This included having to live further from friends and family due to higher living costs in the area, or being made homeless, or having to move into temporary accommodation due to being unable to afford housing.

“I had to go to homeless accommodation at 15 while I was still in school. I had to go to citizens advice to get help to secure benefits as this was not the norm. Lucky I was able to get support. It was a difficult time and social work help was extremely limited. I felt like I was let down a lot.” - Care Experienced person, Housing Issue Paper, 2024.

Analysis of survey responses showed that approximately 57% of respondents had experienced homelessness. This number is much higher than should be the case when these young people have been under the care of local authorities with direct control over social housing stock.

34. How can we ensure there is sufficient support, planning and preparation provided to care leavers moving into their own accommodation for the first time?

As set out in answers to previous questions, local authorities need more resources to be able to deliver high quality support to each and every young person. The support must be led by the young person’s needs and wishes, and they must have choice over when they transition from care and where to. We believe aftercare must be available to all who needs it and particularly welcome services with a physical base and drop in/open door policy, such as the National House Projects and South Lanarkshire Council. Support must continue, if not intensify, for young people once they begin living alone and the option to return must be there, alongside independent advocacy.

35. What forms of support do you think would help someone leaving care and entering their first tenancy to stay in that property for as long as they want to?

We believe that the support outlined in our response to question 34 must be flexible and continue for as long as a young person needs it. They should also be able to return to a service once they have stopped receiving support if they are in need of it to be able to sustain their tenancy.

Everyone has the right to a home that meets their needs. Who Cares? Scotland's Housing Issue Paper also makes ten recommendations we believe are necessary and realistic for duty bearers to take to uphold this right and the Principles of the Promise:

1. Full implementation and prioritisation of Continuing Care.

During 2022-23, Annual Social Work Statistics show that only 29% of young people eligible entered Continuing Care. The Scottish Government should work in partnership with local authorities and COSLA to publish a route map that shows how they will ensure the number of Care Experienced young people accessing their right to Continuing Care increases. It should be assumed practice that young people will remain in Continuing Care and be able to opt out, rather than frequently requiring advocacy to access their right to this.

2. Priority Housing Points and Through Care and After Care support should be available to all Care Experienced young people in any local authority.

Care Experienced people should be able to choose to live in the area that is best for them, without compromising their right to support. Local Connection tests were abolished for the general population applying for housing in Scotland in 2022. To continue to apply a form of 'local connection test' to Care Experienced people only could be discriminatory. Priority Housing Points should be awarded to Care Experienced people, regardless of which local authority was responsible for their care. Those with experience of care must also have the choice to receive practical and emotional aftercare support from the team local to them, rather than in a local authority potentially across the country from where they are living, working or studying. Local authorities must continue support for as long as required, on an individual basis over the age of 26. The Independent Care Review made a strong case for

investing upstream to get it right for every Care Experienced child and adult, at the economic benefit to other services (The Money, 2020; 19).

3. Implementation across Scotland of National House Projects or similar programmes.

All local authorities that don't already fund a National House Project (NHP) or similar inhouse programme should engage with NHP or create a comparable local offer for young people leaving care. This should utilise the principles of the NHP, offering relationship-based and tailored support to Care Experienced people, on a timescale that suits the individual's development needs. Existing House Projects should have adequate funding to offer places to all young people in an area who would benefit from the programme.

4. Publication by each local authority of all support available for Care Experienced people.

Each local authority should publish, in one place, all the support a Care Experienced young person can expect to get when leaving care and, in the future, if they need support. This should include their policy for financially supporting students, details of grants and practical support available, as well as signposting to the Who Cares? Scotland Lifelong National Advocacy Helpline.

5. A Dedicated Housing Officer for Care Experienced People.

Each local authority should have a dedicated Housing Officer for Care Experienced people. They should have a relationship-based practice with those they support, have high awareness of the impact of trauma and the unique challenges facing Care Experienced people, and work closely with Social Work. This is something some local authorities already offer and should allow for replication where possible.

6. Enhanced right to refuse tenancies offered.

Care Experienced people should be eligible to receive an increased number of property offers. This is in recognition of their potentially smaller support network and history of trauma, which might limit areas that they feel comfortable living and working in. This should consider any triggers which impact on their mental health.

7. Priority housing points for potential and current kinship carers.

Who Cares? Scotland has advocated for Care Experienced people who are part of families which have been prevented from formalising kinship care due to overcrowding. The issues

they've faced has included a lack of bedrooms or siblings facing separation due to rules about sharing of bedrooms at key stages. We believe this policy change would affect a small number of households but have a significant benefit to children who could be supported to remain with their family. Families upsizing to accommodate children in care could also be financially supported to meet this difference in rent costs.

8. Reintroduce ringfenced Discretionary Housing Payments for Care Experienced People of all ages.

The Scottish Government trialled ringfenced Discretionary Housing Payments for 'Care Leavers' in 2019. Uptake was low but with wider awareness of the scheme and its ability to support those struggling to meet rent costs, this could be a lifeline for Care Experienced people without family to fall back on. If this must be age-capped, then it should be at least expanded to include Care Experienced parents.

9. Standardised grants for leaving care and setting up a home.

Money given to young people under section 29 of the Children (Scotland) Act 1995 should be set at a standard rate across all local authorities and rise in line with inflation. It should be non-means tested and available to all young people leaving and moving on from all types of care including informal kinship care, looked after at home with social work supervision and unaccompanied asylum-seeking young people.

10. Support to own a home through a Shared Ownership Scheme and financial advice.

Many people with experience of care will aspire to own their home for an enhanced sense of security and belonging. This will likely be without financial support from family or inheritance. Care Experienced people should become a priority group eligible for the existing Scottish Government Shared Ownership scheme and have access to financial literacy and advice beyond basic budgeting skills. This training should cover mortgages, understanding credit, and the various savings account which support first time buyers. This advice is something which many of those from traditional backgrounds receive support from parents with.

36. How can we ensure the views and needs of people leaving care are taken into account when decisions are made about where they should live when they leave care?

Independent advocacy is the best protective factor to ensure young people are able to have their views heard and taken into consideration during decisions about their lives, and are able to ask for clarifying information or decisions to be looked at again. Some young people we support do not feel able to even attend their meetings without their advocacy worker present, and do not understand the full range of options and entitlements available to them without an advocacy worker to explain this.

With the current housing crisis in Scotland putting so much pressure on local services, we are aware of numerous cases of young people being denied their legal right to accommodation when presenting as homeless until they requested support of an advocacy worker or lawyer. This should not be necessary but is the reality of young people's housing experiences at the moment and needs safeguarded against.

Unfortunately, we know from the demand on our teams that the level of provision currently funded is far below the need. We would like independent advocacy to be funded to meet demand, and have contracts which restrict us and other providers from only working with young people in certain placement types or up to the age of 18 or 21 revised. Rights are inalienable and everyone must be able to access and enjoy them.

Further and Higher Education

37. In what areas would you like to see improvements to the service, support and funding for students who are Care Experienced?

Care Experienced people tell us that they face a number of issues accessing their student funding. Both the Scottish Funding Council (SFC) and the Student Awards Agency Scotland (SAAS) recommend that Care Experienced students evidence their status via a confirmation letter from their local authority, or local Social Work department. However, this can be an extremely difficult, and sometimes impossible, process. Many Care Experienced people may not remember the exact details of their care arrangements, and can therefore feel unsure of who to contact. Furthermore, a number of Care Experienced people have been unable to obtain proof from their Local Authority, despite contacting them multiple times.

“Care Experienced person is looking to get support in gaining confirmation that he is Care Experienced from his Local Authority but is unable to get a hold of anyone either by email or calling.” – entry to our advocacy database.

Those with historical care experience face complications about record management – some files may have been lost, or may no longer be stored due to the length of time it has been since they were in care. Furthermore, with local authority boundary changes, Care Experienced people can be left feeling lost and confused as to who they are supposed to contact, and feel overwhelmed having to continue re-telling their story to each person they speak with.

“A 25 yr old is trying to apply for Care Experienced Bursary for college but needs a letter stating they were previously on a CSO. They believe they were on a CSO, but LA is saying they were not. They are “so tired of trying to get answers from people”.” – entry to our advocacy database.

Both the SFC and SAAS have created a form which can be used as an alternative. The majority of this form should be completed by the Care Experienced student, and a ‘professional person’ should complete the final section of the form, which asks them to confirm and verify the nature of the Care Experienced students care arrangements. This form can be completed by a wide array of professionals, including teachers, advocates, and doctors. The form creates a great alternative for Care Experienced people who are unable to obtain evidence from their Local Authority. However, many Care Experienced people in further

education are reporting that they are not aware that this form exists, as they apply for their student funding directly at college. When struggling to obtain evidence of their care arrangements, some colleges are not telling Care Experienced people that they can complete this form as an alternative. This has led to some Care Experienced people going months without their bursary. This process is unfair, and leads to disparities between the support available for Care Experienced people, dependent upon which college they apply to.

This process can become even more confusing for Care Experienced students on an articulation path. Many students will remain at college to study their HNC/HND. However, because this is now higher education, they will no longer apply to their college for funding, and must now apply to SAAS. This is a whole new system for students to contend with, and particularly difficult for Care Experienced people, as SAAS use a different definition of Care Experienced than SFC/colleges do.

To improve this, we would recommend that all students, regardless of their level of study, apply for their student funding directly through one, independent body. If all students were applying to the same body, some of the disparities that Care Experienced people face in relation to their funding could be mitigated. It would ensure that all Care Experienced people are receiving the same information, and the same level of support when required.

At Who Cares? Scotland, we often hear from Care Experienced learners that their bursary has been stopped due to their attendance. The majority of these learners are in further education, and receive their student support funding via their college. Care Experienced students report having different experiences on both applying and receiving their bursary, dependent upon which college they attend, as each institution approaches this differently.

We have heard from Care Experienced learners about a number of challenges they have faced which has led to them being unable to attend college; challenges that can be exacerbated by the financial difficulty created by their bursary being cut. This includes challenges with their mental health, housing, childcare, and having to attend meetings related to their care. Some Care Experienced learners report that despite making their college aware about the circumstances leading to their absence from college, they still have their bursary cut. It is important to note that colleges are not expected to operate a 100% attendance requirement. Bursary awards should be made based on students 'engaging appropriately in their studies'. This is made clear in the National Policy for FE Bursaries – Fund Management and Audit Information.

FEHE institutions should be especially mindful of their Corporate Parenting duties when considering whether to withhold any bursary payment. In particular, whether the non-payment of the bursary could directly contravene the duty to 'be alert to matters which, or which might,

adversely affect the wellbeing of Care Experienced people'. Guidance from SFC aligns with ambitions within The Promise - colleges should work to the principle that students who are having difficulties in meeting attendance criteria should be offered pastoral care and support before punitive and/or disciplinary measures (including reductions in student support) are put in place.

Another area which Who Cares? Scotland would like to see improved is student accommodation. Whilst some FEHE institutions offer 365 accommodation for Care Experienced students, this is not consistent throughout Scotland - there are some FEHE institutions which do not offer student accommodation at all. Furthermore, the need for a guarantor for student accommodation can be a huge stress on Care Experienced students. Some which do offer 365 accommodation can not guarantee the student that this will be in the same room or building, requiring them to arrange to move multiple times over term holidays.

“Care Experienced person was very anxious about the guarantor for their college accommodation setup. I messaged them with alternatives that they could try.” – entry to our advocacy database.

FEHE institutions should consider their Corporate Parenting duties, in particular duties two and three, which states that Corporate Parents should access the needs and promote the interests of Care Experienced people. FEHE institutions should consider what steps can be taken to support Care Experienced students to enter and sustain student accommodation.

Lastly, every FEHE institution should have a named contact for care experience. This allows Care Experienced students to reach out for support, and ask any questions they may have about coming to college or university. We would like to see better promotion and awareness of the support available, including adjusted entry offers, to Care Experienced learners among Care Experienced school pupils and professionals who support them. We believe that some Care Experienced people may still not apply due to incorrect assumptions that they will not have the necessary grades or be able to afford accommodation.

“Care Experienced person called the helpline looking for advice and guidance in regards to what supports are available to them when they start college in January. I have linked them in directly with the Care Experienced lead at their college, and they have planned a meeting to discuss what support is available and apply for their funding.” – entry to our advocacy database.

Furthermore, the named contact should continue to reach out to Care Experienced students throughout the year to check-in with them and offer support.

38. How can we better support Care Experienced students to complete their studies? It is important we support young people in any way we can to help them stay in education and complete their course of study, if that is their preference.

Who Cares? Scotland's 2024 Corporate Parenting Awards included a category for Outstanding Educational Practice in Further and Higher Education Institutions. Nominations with excellent practice and shortlisted for the award were:

Inverness College UHI

Inverness College offer support to Care Experienced learners, no matter what stage they are at. The college offers support to identify routes of study, write personal statements/complete application forms, prepare for interviews, and offers a tour of the college campus and student accommodation. UHI Inverness College also creates a person-centred support plan with each Care Experienced student, assessing their academic, emotional, wellbeing, social and financial needs, and offering both internal and external support to ensure these are met. 365 days accommodation is offered, with flexible payment arrangements for Care Experienced students.

Furthermore, UHI Inverness offer free emergency accommodation to Care Experienced students who require it. As a result of this enhanced support, UHI Inverness College has successfully improved outcomes for Care Experienced learners. In 2022/2023, 60.65% of Care Experienced learners completed their course, which is 8.1% higher than the Scottish national average.

West Lothian College

West Lothian College's 'The TRUST (Trauma Responsive Unique Support Tailor-made)', is a wraparound service which supports Care Experienced students, and those who have experienced trauma. The service does not have an age cap and can support any Care Experienced person aged 16+. The TRUST work collaboratively with many different agencies and partnerships including Throughcare and Aftercare teams, Social Workers, addiction services and homeless organisations. The TRUST aims to remove barriers to education and ensure that Care Experienced students have the support they need to sustain their course.

The TRUST has a flexible approach to meet the needs of their Care Experienced students, meeting them off campus if necessary and referring them for counselling if they want to engage in this support. Furthermore, The TRUST has employed a referral system which means that staff will meet with the referrer before meeting with the Care Experienced person, to ensure that they do not have to retell their story and/or explain their circumstances if they do not want to.

University of St. Andrews


The University of St. Andrews offer a wide range of support to Care Experienced students to support them on their education journey, from application to graduation and beyond. Staff offer personalised guidance, financial assistance, and academic support to ensure that Care Experienced students have the resources they need to succeed and progress to positive destinations upon graduation.

The University of St. Andrews offer a guaranteed Care Experience Access Award to support with living costs. Every Care Experienced student is also offered a personalised support plan that includes academic advice, career support, wellbeing, coaching counselling, and mental health support.

University of Strathclyde

The University of Strathclyde offer support to Care Experienced students from pre-entry to post-graduation, with no age caps. Care Experienced applicants who meet the minimum entry requirements are guaranteed an offer at the university. Furthermore, Care Experienced students receive priority for the Discretionary Fund, and are guaranteed 365 days accommodation in halls with their deposit waived. The University of Strathclyde also offered a £200 voucher for 'Uni Kit Out' to every Care Experienced student.

All Care Experienced students are offered a staff mentor through the 'Strathclyde Cares' programme, which involves 1:1 support for the duration of their degree. The programme has been key to retention, providing a 'go-to' person if students are experiencing challenges. Care Experienced students are invited to join the Strathclyde Cares committee, which meets 4 times per year and includes academic and professional services representation. The committee provides a platform for staff and students alike to implement change and has shaped policy and practice across the University. Care Experienced students are prioritised for residential and education trips at the University, and are offered an annual, free Christmas dinner party.



The University of Strathclyde support Care Experienced students to graduate, with students receiving £195 towards their graduation costs and an invitation to a fully-funded graduation dinner to celebrate their achievements. Support is also offered to Care Experienced students for five years following their graduation via the Careers Service, to support with job hunting, CV writing, and interview skills.

We would also call for colleges and universities to consider dedicated study spaces for Care Experienced learners with long opening hours. For a student still living in residential care or at home with family facing difficulties, it can be very difficult to have the space and quiet to study at home as much as another student may be able to.

We would encourage any FEHE body to adopt these practices where suitable to ensure that Care Experienced learners at any institution across Scotland can benefit from these innovative policies and support packages.

Employment

39. What would help young people with care experience find secure and fulfilling work, develop their skills or build their confidence?

As with any diverse community, Care Experienced people have an abundance of talent, skill and motivation to benefit any organisation. Yet we know that many Care Experienced people face significant barriers in securing and sustaining secure, meaningful employment opportunities. A lack of support in the form of traditional family safety nets combined with the general public's lack of understanding about care has led to Care Experienced people being underrepresented in stable, long-term employment.

Therefore, the question may not be what can Care Experienced young people do to develop their skills and build their confidence but rather, how can organisations/employers ensure they are safe and supportive environments for Care Experienced people to thrive in? A key pillar of this must be building a workforce that understands care and is able to challenge stigma and champion Care Experienced individuals.

If employers are considering creating a mechanism for applicants to disclose that they are Care Experienced at the application stage then they need to do two things:

1. Provide a clear definition of 'Care Experienced' which should be as inclusive and broad as possible.
2. Explain why they are asking – i.e. what supports will be provided if someone ticks this box, and who this information will be shared with.

Who Cares? Scotland has been delivering training and support to Corporate Parents since 2010, which has included to improve their support and offer as an employer of Care Experienced people, setting up apprenticeships and advertising posts to the Care Experienced community. For any potential organisations who would like to know more about supporting Care Experienced employees, please contact policy@whocaresscotland.org.

40. Can you share any examples of good practice, in the private and public sector, where young people leaving care have been supported into employment or training, or have been supported to build their confidence?

The John Lewis Partnership (JLP) has made a bold and long-term commitment to Care Experienced people, including the ambition to be the Employer of Choice for those with experience of care. But they recognised that to do this meaningfully, they'd need buy-in from their entire workforce – and that they'd need support and guidance from specialist partners in order to achieve this goal.

Who Cares? Scotland have been involved in this via the roll-out of Care Aware workforce training to over 500 JLP employees over the last 2 years, and the development of an eLearning module which is accessible to over 75,000 members of the workforce. Alongside this, JLP offer a specific work experience programme for Care Experienced people; opportunities for Care Experienced people to design products to be sold in their stores; and try to influence change for Care Experienced people at a policy/political level.

We have also heard some great examples of practice from Corporate Parents such as ring-fencing Modern Apprenticeships for Care Experienced people, setting up Care Experienced Colleagues Groups and treating care experience as a protected characteristic, through our work supporting Corporate Parents to fulfil their duties.

We have compiled a series of examples of positive practice in the awards programme for the 2024 Corporate Parenting Awards, which is publicly available on our website here www.whocaresscotland.org/wp-content/uploads/2024/08/A4-Prog-CP-Awards-2024-with-all-PP-examples.pdf. The awards included a category for 'Care Conscious Employer'. Those shortlisted for the 2024 award were:

Scottish Police Authority

The Scottish Police Authority (SPA) recently ring-fenced a Modern Apprenticeship opportunity for a Care Experienced person. SPA sought guidance from experts throughout this recruitment to ensure the process was inclusive. SPA adhered to a broad definition of care experience, and provided support to candidates throughout the application and vetting process. SPA also

provided training to the whole of the Authority to ensure that all staff understand care experience. The successful candidate is now in post, and SPA are committed to providing them with all of the support they need to ensure they are able to maintain and sustain their employment.


Scottish Children's Reporter Administration

The Scottish Children's Reporter Administration (SCRA) has been ringfencing its flagship Modern Apprenticeship programme for Care Experienced people since 2010. These vacancies are open to Care Experienced people of any age, in recognition of the lifelong impact of care. Support is offered from the start of the recruitment process, with applicants invited for an informal chat and offered support with their application and/or interview. SCRA's interviews for Modern Apprenticeships take place in a relaxed environment, and have been described as more of a 'supportive discussion' than formal interview. Once in post, SCRA support successful candidates to develop their individual skills and experiences. SCRA treat care experience as if it were a protected characteristic, and have adjusted their practices and policies in line with the Equality Act 2010. After completing the programme, Modern Apprentices are offered a full-time traineeship for two years at SCRA, where they will complete their SVQ and apprenticeship, and after this are offered full-time, permanent employment at SCRA.

Social Security Scotland

Social Security Scotland has established a Corporate Parenting Champions Group which has brought positive change for Care Experienced people within the agency. One of the first pieces of change the group introduced was recognising care experience as a protected characteristic. Based on feedback from Care Experienced colleagues around re-traumatisation and retelling of stories, the group introduced an 'employee passport'. This means that Care Experienced colleagues can have a sensitive discussion with their line manager about the support they need to sustain their employment, and do not have to repeat these conversations if they do not want to when progressing throughout the organisation.

41. How do you think employers can be better supported or encouraged to recruit, train, support and retain young people who are Care Experienced?



The first step is ensuring that the workforce understands care. Targeted recruitment, positive discrimination, treating care experience as a protected characteristic, and offering guaranteed interviews, as some suggestions, increase Care Experienced people's confidence to apply among other measures are all very welcome, but if Care Experienced people are then onboarding into an organisation that doesn't understand care, this may not result in long-term success or retention.

When an organisation has buy-in at all levels for why the recruitment, training, support and retention of Care Experienced people matters, then can they understand how to be part of the solution, and provide a scaffold of support around the whole workforce. It's not about treating any individual member of staff or trainee differently – but if we can create the conditions for Care Experienced people to feel safe and supported, this will benefit the entire workforce.

**If you have any questions about this paper or would like to discuss the contents,
please contact policy@whocaresscotland.org.**