

Young people | August 2022

# What do we know about children from England and Wales in secure care in Scotland?

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Report

**Debate over the use of cross-border placements of children in secure accommodation has grown in recent years as English and Welsh local authorities continue to place children in secure care centres in Scotland. However, the circumstances of the children who enter secure care on this basis have received little attention. This study addresses this gap by exploring the prevalence of various adversities and challenges during these children's lives and during the year prior to their admission into secure care.**

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#### **Recommended citation**

Gibson, R. (2022). *What do we know about children from England and Wales in secure care in Scotland?* Nuffield Family Justice Observatory. <https://www.nuffieldfjo.org.uk/resource/what-do-we-know-about-children-from-england-and-wales-in-secure-care-in-scotland>

A summary of the report is also available from the above link.

#### **Disclaimer**

Nuffield FJO has funded this project, but the views expressed are those of the authors and not necessarily those of Nuffield FJO or the Foundation.

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Part of Nuffield Foundation: Registered charity 206601  
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**Children and Young People's  
Centre for Justice**

# Foreword

When a young person is placed in secure accommodation because of concerns about their welfare it is indicative of their severe needs and the inability of those around them to meet them.

That some children are placed in secure accommodation many miles away from their communities is doubly troubling. It smacks of a society unwilling to come to grips with its responsibility to meet the needs of its most vulnerable children.

We have known for some time that shortages of secure accommodation in England and Wales have led to children being placed in provision in Scotland. This report provides the first evidence of who these children are and their previous adverse life experiences. It indicates that the most vulnerable children are being placed in Scotland. It also shows that these are young people who have been well known to children's social care; many have been let down throughout their childhoods.

The evidence makes sobering reading. We are failing these children badly and a future system needs to be rebuilt around meeting their needs.

Lisa Harker  
Director

# Executive summary

This report by the Children and Young People's Centre for Justice (CYCJ) sets out to help provide a better understanding of the profile and experiences of children placed in Scottish secure care centres by English and Welsh local authorities. It draws on data gathered by CYCJ in 2018 and 2019.

## About the data

In 2018 and 2019, CYCJ undertook a census of every child residing in secure care in Scotland on a set day with the aim of understanding their characteristics, risk factors and life experiences. Findings relating to these children were published in: ACEs, Places and Status: Results from the 2018 Scottish Secure Care Census (Gibson 2020); and ACEs, Distance and Sources of Resilience (Gibson 2021).

The current study focuses on 59 of the 165 children – 32 in 2018 (37% of the 2018 sample) and 27 in 2019 (37% of the 2019 sample) – who had been placed in the five secure centres in Scotland by local authorities in England and Wales.

As the sample size is relatively small, and as data was gathered through the gateway of staff completing an online survey rather than interviews with children, caution must be exercised in the interpretation of data.

## Key findings

- Most of the 59 children (64%) in secure homes in Scotland who had been placed there by English and Welsh local authorities were aged 15 years or older – this is similar to the proportion of children in this age bracket in secure homes in England and Wales.
- Most of the children in the cohort group (66%, 39) were girls, 32% (19) were boys and 2% (1) were transgender.
- Most children (75%, 44) were White British – however, children of mixed and multiple ethnicities, and Black, African, Caribbean or Black British children were overrepresented in the cohort compared to the general population.<sup>1</sup> In the study, 17% of children were of mixed ethnicity, compared to 5% of children in the general population; and 7% of children in the study were Black, African, Caribbean or Black British compared to 5% in the general population. This ethnicity profile reflects the overrepresentation of children from these groups who are referred for a place in secure children's homes in England and Wales (Roe 2022).

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<sup>1</sup> Ethnicity categories are based on Office for National Statistics categories.

- The three most commonly cited primary reasons for admission to the secure unit were the children's risk to themselves (53%), absconding (49%), and risk to others (34%). Other reasons included sexual exploitation (23%) and self-harm (21%).
- The children placed in Scottish secure care by English and Welsh local authorities came from families experiencing relative poverty and living in the most deprived areas of the country.
- Children's experiences of a range of adverse childhood experiences, from birth and in the year prior to admission to secure care, was striking.<sup>2</sup> Over 70% had experienced emotional neglect, parental separation, physical neglect, emotional abuse, physical abuse, parental mental ill-health, parental substance abuse or exposure to domestic violence at some point in their lives. Exposure to each of the adverse childhood experiences in the 12 months prior to admission surpasses what some research would expect to find through the entirety of someone's childhood (Bellis et al. 2014, 2015; Ford et al. 2019).
  - The children had experienced an average of 5.8 adverse childhood experiences and 77% of children had experienced 4 or more of these experiences.
  - Children in this study had experienced more adverse childhood experiences than children in a comparable study who were living in a secure children's home in England (Martin et al. 2021), suggesting that the most vulnerable children are being sent to Scotland.
- This cohort are not children who experienced significant difficulties in their early years only to experience a more stable environment later in life. Rather, the data suggests that they are children for whom intra-familial abuse and risk feature regularly. Their situation in secure accommodation is likely to have been caused by the incremental and persistent effects of year-on-year exposure to adversity and risk.
- Children had also experienced a range of other adversities and risks including mental ill-health, emotional difficulties, substance misuse problems, violence to parents and staff, school exclusion, youth justice involvement and sexual exploitation. Again, the high prevalence of these experiences in the year prior to children being admitted to the secure unit was particularly striking.
- Over a third of the children (34%, 10) were known to social services before the age of 3 – and half of these children were known from or before birth.<sup>3</sup> A further 34% of children came to the attention of social services aged between 12 and 15. Instances of first contact were slightly less common in children aged between 4 and 11 (31%, 9). Despite the involvement of children's services in their lives, it was

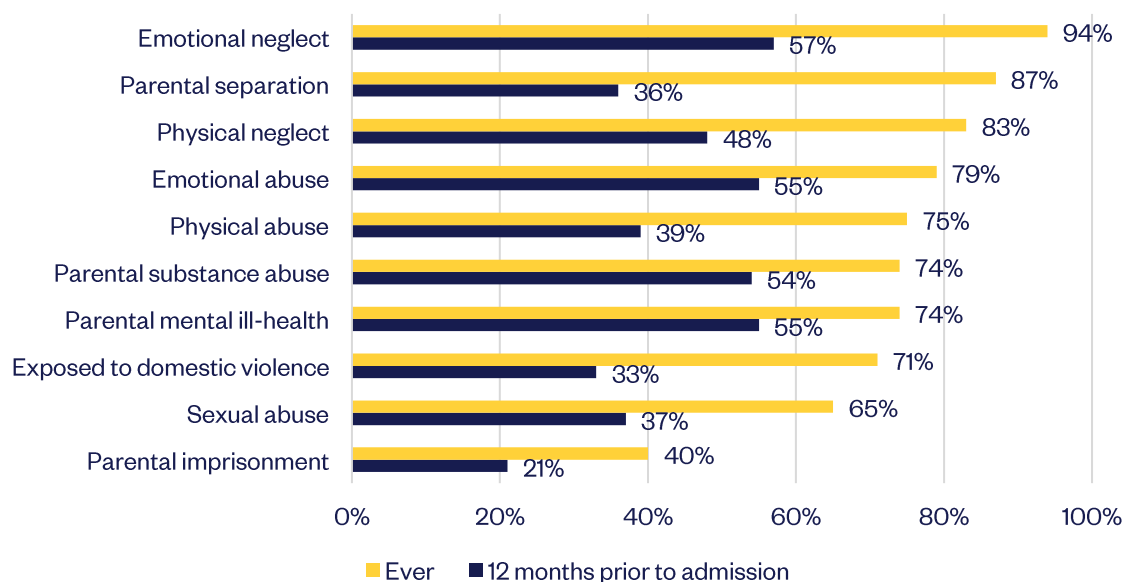
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<sup>2</sup> The adverse childhood experiences approach seeks to measure an individual's exposure to 10 life circumstances that are known to correlate with adverse outcomes in later life: emotional neglect; parental separation; physical neglect; emotional abuse; physical abuse; parental substance abuse; parental mental ill-health; exposure to domestic violence; sexual abuse; and parental imprisonment.

<sup>3</sup> The term 'social services' has been used here but the term used in Scotland, and in the survey, was 'social work'.

notable that children's exposure to risks and adverse childhood experiences persisted.

**Figure 1: Prevalence of adverse childhood experiences**



- Prior to entering secure care, children had experienced significant instability in arrangements made for their care, including multiple placement breakdowns and placement moves. In the year prior to admission, 95% of children had experienced a placement breakdown, with an average of 2.8 placement moves during that period.
- Almost half (45%) had moved at least 6 times and over a quarter (26%) had moved more than 10 times since birth. One child had experienced 36 different placements.
- Prior to admission into secure care, most children (71%) had been living in a residential home.
- A quarter (25%) of the children had had a previous placement in a secure children's home.
- Our study found that children from local authorities in England and Wales residing in secure care in Scotland in 2018 and 2019 were an average of 353 miles away from their homes. This is considerably further than the average 141 mile distance in England and Wales reported by Downie and Twomey 2021 (based on distance from prior placement).

## Reflections

- This study highlights the range and complex dynamic of adversities and risk factors experienced by children from England and Wales who are placed in secure care in Scotland. Most of the children in this study had experienced emotional and physical neglect and abuse, sexual abuse, exposure to parental

What do we know about the children from England and Wales in secure care in Scotland?

substance misuse and domestic abuse – with these issues often overlapping. Alongside this, children displayed complex mental health problems, including self-harm, and behaviours that are difficult to manage such as violence and aggression. In addition, they were at risk from a range of factors outside the home, including bullying, school exclusion, and criminal and sexual exploitation. These are some of the most vulnerable children in society, who had experienced more adversity in one year than most children will experience in their entire childhood.

- It is clear that the systems in England and Wales are struggling to respond to this group of children's needs. Children sent to secure care in Scotland are often living hundreds of miles from their homes, and from their family and friends, most likely because an alternative placement that can keep them safe or meet their needs cannot be found any closer to home. In addition, almost all the children had experienced significant disruption and breakdowns in previous arrangements made for their care.
- Within Scotland, it is possible that new legislation will come into place – potentially as soon as 2023 – that will ban or significantly reduce the number of placements that are available in Scottish secure care centres to English and Welsh local authorities. This will mean the 25+ children placed in secure care in Scotland at any one time need to be accommodated elsewhere. Given existing pressure on secure children's homes in England and Wales, there is an urgent need to consider alternative types of local provision for this group of children that can meet their needs identified in the report.



## **What is secure accommodation?**

Children from England and Wales can be placed in a secure children's home under section 25 of the Children Act 1989 and section 119 of the Social Services and Well-being (Wales) Act 2014. Secure children's homes are specialist residential homes that are authorised to restrict children's liberty.

The acts set out the 'welfare' criteria that must be met before a child can be placed in secure accommodation:

- the child has a history of absconding and is likely to abscond from any other description of accommodation
- the child is likely to suffer significant harm if they abscond
- the child is likely to injure themselves or others if they are kept in any other type of accommodation.

Section 10 of the Children and Social Work Act 2017 authorises local authorities in England and Wales to place children in secure accommodation in Scotland.

## **Secure accommodation in Scotland**

There are 5 secure care centres in Scotland that accommodate 84 children at any one time, with an additional 6 emergency placements available. Children can be placed in secure accommodation for welfare or youth justice reasons.

Secure care in Scotland is provided by four independent charities and one local authority.

# Introduction

Over recent years concern has been raised about the increasing number of children in England and Wales for whom a placement in a secure children's home is sought but cannot be found. As a result, a number of children from England and Wales are placed in secure care in Scotland instead. The report by the Children and Young People's Centre for Justice (CYCJ) sets out to help provide a better understanding of the profile and experiences of children placed in Scottish secure care centres by English and Welsh local authorities. It aims to provide an overview of:

- the children's characteristics – age, gender and ethnicity
- why they were admitted to secure accommodation
- the prevalence and types of adversity they had faced since they were born and in the year prior to admission
- the support and services they had received in the year prior to admission
- their social care histories.

## Rising need, reduced capacity

In 2020, half of all children referred to the Secure Welfare Coordination Unit (SWCU) – the unit responsible for allocating places in secure children's homes in England and Wales – were not found a place (Downie and Twomey 2021; Williams et al. 2020). In part this is due to the difficulty experienced by secure children's homes to meet the needs of children who are referred. Williams et al. (2020) found that children who are older and have come into conflict with the law, or display challenging behaviours, are less likely to be successfully placed in a secure children's home than other children, often because secure care providers refuse to accept the referral. There has also been a reduction in the number of placements available due to the closure of 16 secure children's homes since 2002 (Roe 2022; Roe et al. 2022). Some scholars estimate a reduction in capacity of close to one quarter, contributing to 45% fewer children accessing secure children's homes in England and Wales (Bach-Mortensen et al. 2022).

As capacity within secure children's homes has fallen, so the number of children who are referred to secure care has increased (Williams et al. 2022). A large proportion of these children have been denied placements within secure children's homes following referral to the Secure Welfare Coordination Unit (SWCU) (Roe 2022). Having examined data from SWCU, Williams et al. (2020) found that 39% of referrals did not result in a placement being made available. A later study by Hart and La Valle (2021) found this figure to be even higher at 56%. This is surprising given that Bach-Mortensen et al. (2022) allude to the unfilled capacity within secure children's homes, including an occupancy rate of around 60% during the height of the

COVID-19 restrictions and health crisis. Additional factors contribute to this apparent gap in provision – including staffing, appropriate matching and cohabitation of children within secure homes and placement management systems – which appear both opaque and Byzantine. Despite these circumstances, progress in reshaping and reforming the secure estate has been pedestrian, compounded by – or perhaps leading to – the National Audit Office (2022) predicting an increase in demand for secure care placements in England and Wales.

As a result of growing difficulty in securing placements within secure children’s homes in England and Wales, an increasing number of children are placed in secure accommodation in Scotland each year. While figures fluctuate, official data has shown that in the last three years, approximately one third of children in Scottish secure care centres are placed by English and Welsh local authorities (Scottish Government 2022). In 2021, approximately 29 children from England or Wales were resident in Scottish secure care centres at any one time (Scottish Government 2022). Despite this increase there is very limited research about this group of children, their prior experiences and needs, and their outcomes (Roe 2022). This study aims to fill this gap by building a profile of the characteristics and needs of children who are placed in Scottish secure accommodation, including highlighting features of children’s lives that may have precipitated their admission into secure care and which may have adversely affected their well-being.

## Using placements in Scotland

In Scotland, cross-border placements have received greater attention in recent years, with Scotland’s Independent Care Review concluding that:

Scotland must stop selling care placements to Local Authorities outside of Scotland ... there must be acknowledgement that accepting children from outside Scotland is a breach of their fundamental human rights. It denies those children access to their family support networks and services. It also skews the landscape for Scotland so that there is a lack of strategic planning for children, meaning that children can be put in inappropriate settings if demand has spiked’ (Independent Care Review 2020, p. 110).

This was followed in 2021 by the decision that the selling of placements to local authorities outside Scotland would come to an end by 2024 (The Promise 2021). While the Scottish government accepted the Independent Care Review conclusions in their entirety, recent language regarding cross-border placements has alluded to continued provision if it is in the child’s ‘best interest’. Debate over the forthcoming children’s care and justice bill may go some way towards ending this practice, with a recently concluded public consultation garnering views on the subject prior to a possible submission to the Scottish parliament in autumn 2022. More recently Scotland’s Care Inspectorate has raised concerns regarding violation of children’s human rights when placed in settings many miles from their families. Limited opportunity to spend time with family, a lack of advocacy, separation from communities and poor planning for transitions were all highlighted as detrimental to the rights of those experiencing cross-border placements (Care Inspectorate 2022). Similarly, the Children and Young People’s Commissioner for Scotland (2022) has

criticised new regulations, which came into force in July 2022, on the grounds that it makes it easier for English and Welsh authorities to place children in Scotland under deprivation of liberty orders. It seems that access to Scottish care placements – both residential and secure – could be reduced fairly significantly in the coming years. This would place further strain on the existing provision within England and Wales. The need for relevant bodies in these nations – and the constituent local authorities – to develop appropriate provision is therefore stark and urgent.

Placed several hundred miles from their families, understanding the particular needs and vulnerabilities of this group of children is of paramount importance in order to guide those providing care to the models of care and support required. It also poses questions for local authorities who are morally and duty bound to consider how best to support children without the need to place them outside their local surroundings.

## Study gaps and limitations

This study draws on data gathered by CYCJ as part of a census of children in Scotland's five secure accommodation centres in Scotland in 2018 and 2019. Findings relating to all 165 children concerned were published in: ACEs, Places and Status: Results from the 2018 Scottish Secure Care Census (Gibson 2020); and ACEs, Distance and Sources of Resilience (Gibson 2021). The current study focuses on 59 children who had been placed there by a local authority in England and Wales.

- The data presented in this report is descriptive rather than definitive, providing a snapshot of aspects of children's lives at two distinct points in time. It may not be consistent with life experiences of children over a longer period of time. Caution must be exercised in the interpretation of data given the relatively small sample size. In instances where the answer to a particular query was not known, the data relating to that question was omitted from the analysis. As such, responses were not always available for all 59 children.
- Data was gathered through the gateway of secure centre staff rather than through direct interviews with the children. The data therefore relies on the information, perspectives and opinions of those completing the census and their knowledge of the child in question. While a briefing and guide were provided to each secure care centre to assist in their recording – and to achieve a greater degree of consistency – subjectivity will play a role in their submissions. In addition, data relating to adversity is likely to underestimate the form and extent of abuse experienced given likely issues.
- Information regarding the frequency of each behaviour was not recorded, meaning that a single episode of harm would be recorded in a similar manner to a pattern. This study is therefore unable to fully describe a pattern of escalating concerns.

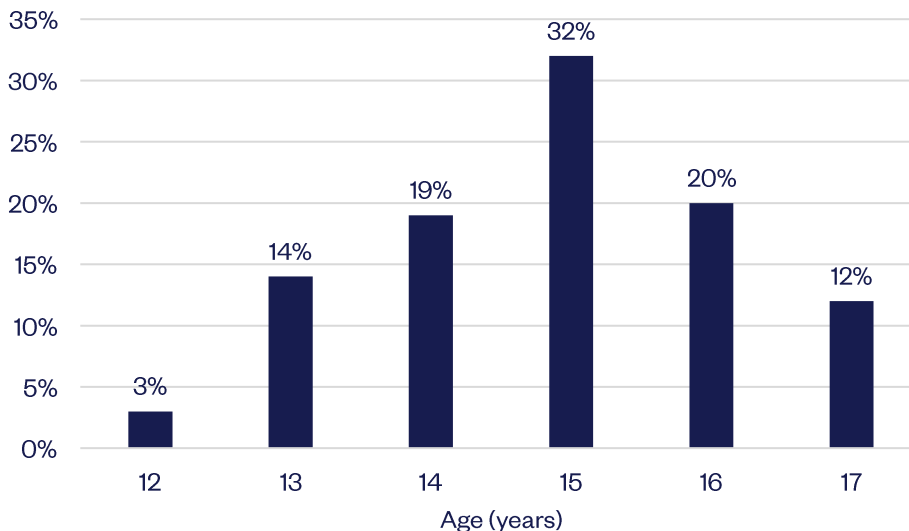
See Appendix A for further methodology details.

# What do we know about the children?

## How old were they?

Almost two-thirds (64%) of the children in secure care in Scotland from local authorities in England and Wales were aged 15 or over. The largest proportion of children (32%) were aged 15. This is a higher proportion than among children placed in secure accommodation in England, where just under 61% were aged 15 or above (Roe et al. 2022). Within Scotland, Scottish Government (2022) reported a figure of 72%, while Gibson (2020) reported 65% of girls and 67% of boys being 15 years old or more.

**Figure 2: Age of children**



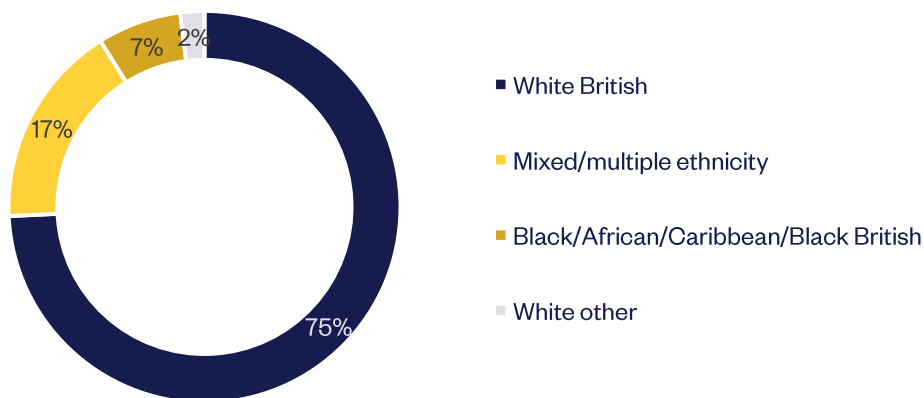
## What gender were they?

A significant majority (39, 66%) of children within the study cohort were girls. Boys accounted for 32% (19), while 2% of children (1) were transgender. The gender balance differs from both the Scottish secure care population, where boys represented a majority on both occasions the census was undertaken (Gibson 2020, 2021), and general trends across recent years (Scottish Government 2022). The tendency for girls to constitute the majority of residents in welfare-oriented secure children's homes in England was reported by Hales et al. (2018), who found that 64% of that population were girls.

## What is their ethnicity?

The vast majority of children in the study cohort (44, 75%) were White British, with a further 2% (1) described as 'White other'. In comparison some 67% of children referred to secure care in England were of White British ethnicity (Secure Welfare Coordination Unit 2022). As a proportion of their respective cohorts, White British children constituted a slightly larger group with in Scottish secure care compared to secure children's homes in England and Wales.

**Figure 3: Ethnicity of children**



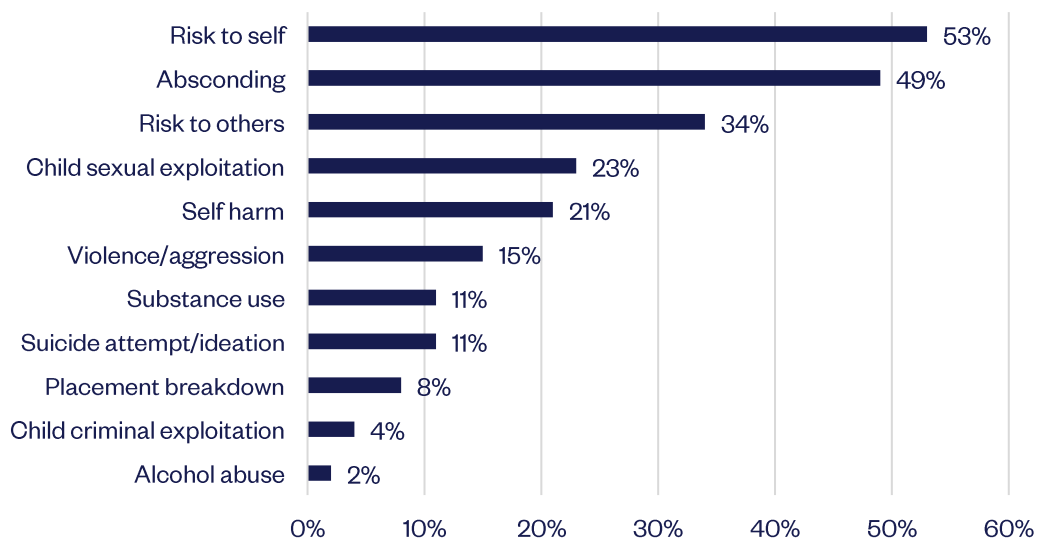
Children of mixed or multiple ethnicity accounted for 17% (10) of this cohort, with the remaining 7% of children (4) described as Black, African, Caribbean or Black British. These groups appear to be overrepresented compared to the general populations of England and Wales; the 2011 census reports that 5% of children have mixed or multiple ethnicity, and 5% of children are Black, African, Caribbean or Black British (Office for National Statistics 2011).

# Why were the children in secure care?

Secure care staff were asked to identify the primary reason or reasons for a child being placed in secure care.

As shown in Figure 4, 'risk to self' was recorded as the primary reason for admission of more than half of the children (28, 53%), with 'absconding' listed in 26 (49%) instances. The overlap between these two issues – and indeed many others – is likely to be substantial, with 'risk to self' occurring due to or while the child had absconded from their place of residence.

**Figure 4: Primary reason(s) for admission into secure care. Note: Staff completing the survey were able to give multiple reasons for each child.**



Placement breakdown was recorded as a primary reason for admission in 8% (4) of cases (although it is of note that 95% of children had experienced a placement breakdown in the year prior to admission – see below). This perhaps alludes to the difficulty that local authorities face in finding a stable placement for this group of children.

Violence or aggression were noted in 15% (8) of cases. More broadly, risk to others was cited as a primary reason in over a third (18, 34%) of responses.

These findings underline the poor mental health within this cohort, with over one in five children (11, 21%) placed in secure care due to self-harming behaviour, and 11% (6) due to attempts or ideation to end their own life. Substance use (6, 11%) and alcohol abuse (1, 2%) were noted in a smaller number of cases.

Children in this study had also been placed within secure care due to the risk that others posed to them. Child sexual exploitation was cited as a primary reason in almost a quarter (12, 23%) of cases. The figure was 4% (2) with regards to child criminal exploitation.

It is important to note that these figures merely reflect the primary reason(s) cited for admission; other reasons may be present but not necessarily have manifested in behaviours that precipitated admission to the secure environment. For example, in the year prior to admission alone, 95% (56) of children had encountered placement breakdown, 93% (54) had absconded, 81% (46) had engaged in violence towards staff members, 80% (43) had displayed self-harming behaviour, 66% (37) had used drugs and 45% (25) had attempted to end their lives through suicide. In addition, 58% (31) of children had experienced sexual exploitation and 37% (16) had been sexually abused.

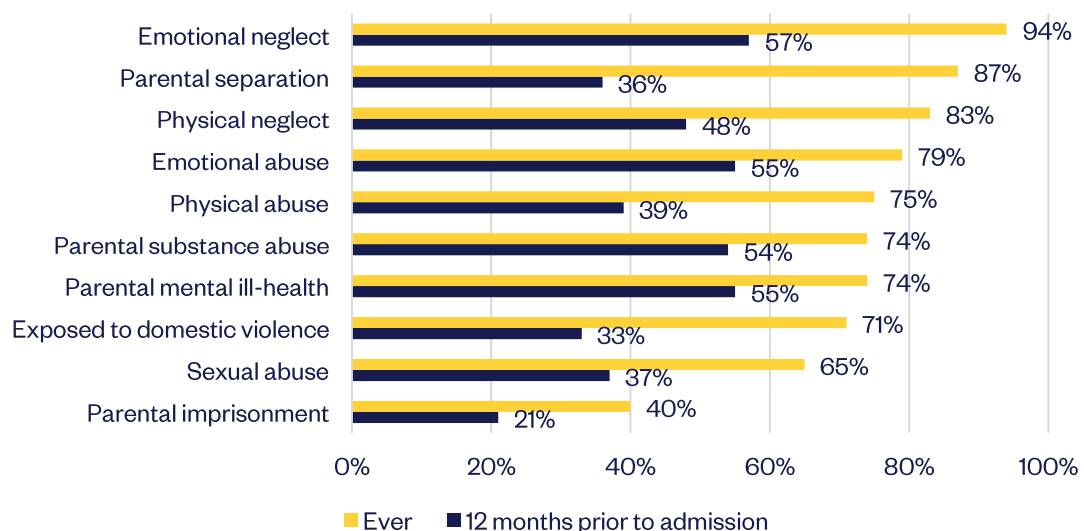


# What type and level of adversity and risks had they faced?

## Individual exposure to adverse childhood experiences

According to the staff who completed the census in 2018 and 2019, over half of the children from England and Wales in Scotland's five secure centres had experienced 9 of 10 adverse childhood experiences at some point in their lives.<sup>4</sup> Emotional neglect was the most frequently cited experience (48, 94% of children had experienced it at some point in their lives). Parental separation (47, 87%), physical neglect (39, 83%) and emotional abuse (38, 79%) were similarly prevalent. Around three-quarters of children had experienced physical abuse (33, 75%), parental substance abuse (34, 74%) and parental mental ill-health (35, 74%). Children had witnessed domestic violence in 71% of cases (35), 65% (26) had been sexually abused and 40% (18) had seen a parent imprisoned.

**Figure 5: Prevalence of adverse childhood experiences**



<sup>4</sup> Literature regarding adverse childhood experiences has proliferated since the concept was first reported by Felitti et al. (1998), and now plays a prominent role in policy-making decisions (Asmussen et al. 2020; White et al. 2019). The approach seeks to measure an individual's exposure to 10 life circumstances that are known to correlate with adverse outcomes in later life (listed in Figure 5).

A recent study of 58 children living in a secure children's home in England by Martin et al. (2021) allows for a comparison to those children who are placed within English secure care.<sup>5</sup>

Exposure to each of the individual adverse childhood experiences was found to be greater among the cohort of children placed within Scottish secure care than in Martin et al.'s study. Emotional neglect was experienced by 94% of children in the Scottish study, compared to 69% found by Martin et al. A substantial difference was also found in rates of parental mental ill-health, with 74% found in the Scottish secure care cohort compared to 26% within English secure care. Physical abuse (75% compared to 45%), parental substance abuse (74% compared to 59%), domestic violence (71% to 55) and sexual abuse (65% compared to 43%) similarly saw large differences in levels of exposure.

Exposure to emotional abuse, physical neglect and parental separation were fairly similar in each of the two groups, with differences of less than ten percentage points. The least prevalent issue among children placed in Scotland – parental imprisonment – accounted for 40% of children. This compares to 35% within Martin et al.'s sample who had been exposed to 'parental criminality'.<sup>6</sup>

While it is evident that both groups of children experienced multiple adversities in childhood, it appears that these are found at even greater frequency among the cohort of children placed in Scottish secure care. This poses the question whether the most vulnerable children in England and Wales are more likely to be placed in Scotland than in their home nations, and whether increased levels of adversity and trauma affect children's chances of being 'accepted' into secure accommodation closer to home or if they played a part in the decision to place children hundreds of miles away from their families. Future studies may wish to consider the impact such extensive rates of neglect, abuse and adversity have on access to placements.

Analysis also shows that, in the year prior to admission, exposure to each of the adverse childhood experiences surpasses what some research would expect to find through the entirety of someone's childhood (Bellis et al. 2014, 2015; Ford et al. 2019). This suggests that the children in question not only face a high degree of adversity throughout their lives but also that they face significant adversities (as measured through adverse childhood experiences) in the year prior to admission too. These are not children who had experienced significant difficulties in their earliest years only to go on to a far more stable environment some years later. Rather, the data suggests that they are children for whom intra-familial abuse and risk feature regularly. Their current situation within secure accommodation is likely to have been caused by the incremental, persistent and corrosive effects of year-on-year exposure to adversity and risk.

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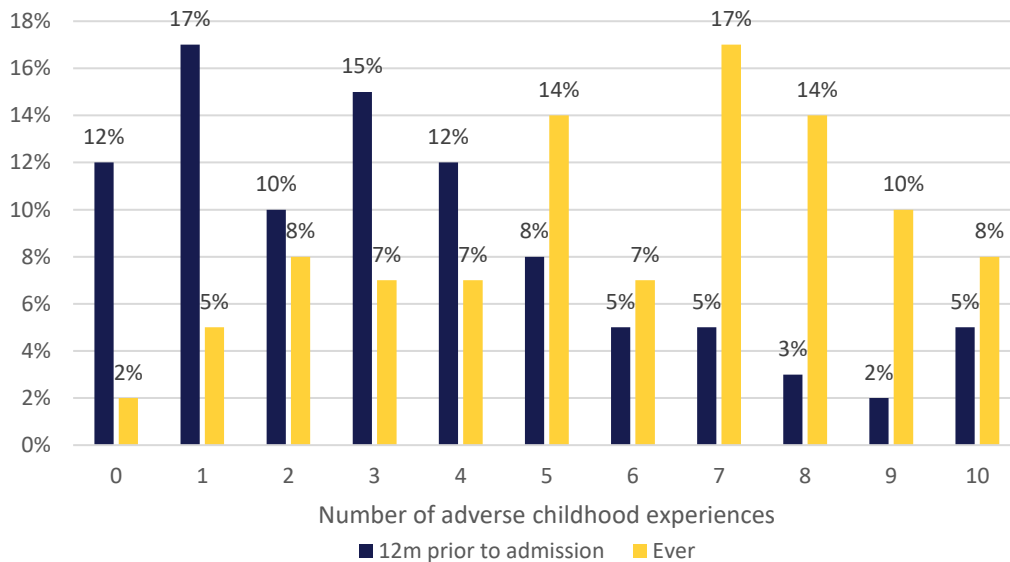
<sup>5</sup> All 58 children in the Martin et al. study had been placed in the home for 'welfare reasons' (i.e. under s.25 of the Children Act 1989 as opposed to via youth justice legislation), and thus provide an appropriate comparison to this cohort.

<sup>6</sup> It is important to highlight this difference in terminology. The figure for parental imprisonment in Martin et al.'s sample is likely to be somewhat lower than 35%.

## Aggregated exposure to adverse childhood experiences

Analysis of the data demonstrates the high levels of aggregated exposure to adverse childhood experiences among the 59 children in our study (see Figure 6).

**Figure 6: Aggregated exposure to adverse childhood experiences**



Children had experienced an average of 5.8 adverse childhood experiences at some point since birth and 3.6 in the year prior to entering secure care. Some 77% of children (46) had experienced four or more adverse childhood experiences over the course of their lives, compared to 40% (29) in the year prior to admission.

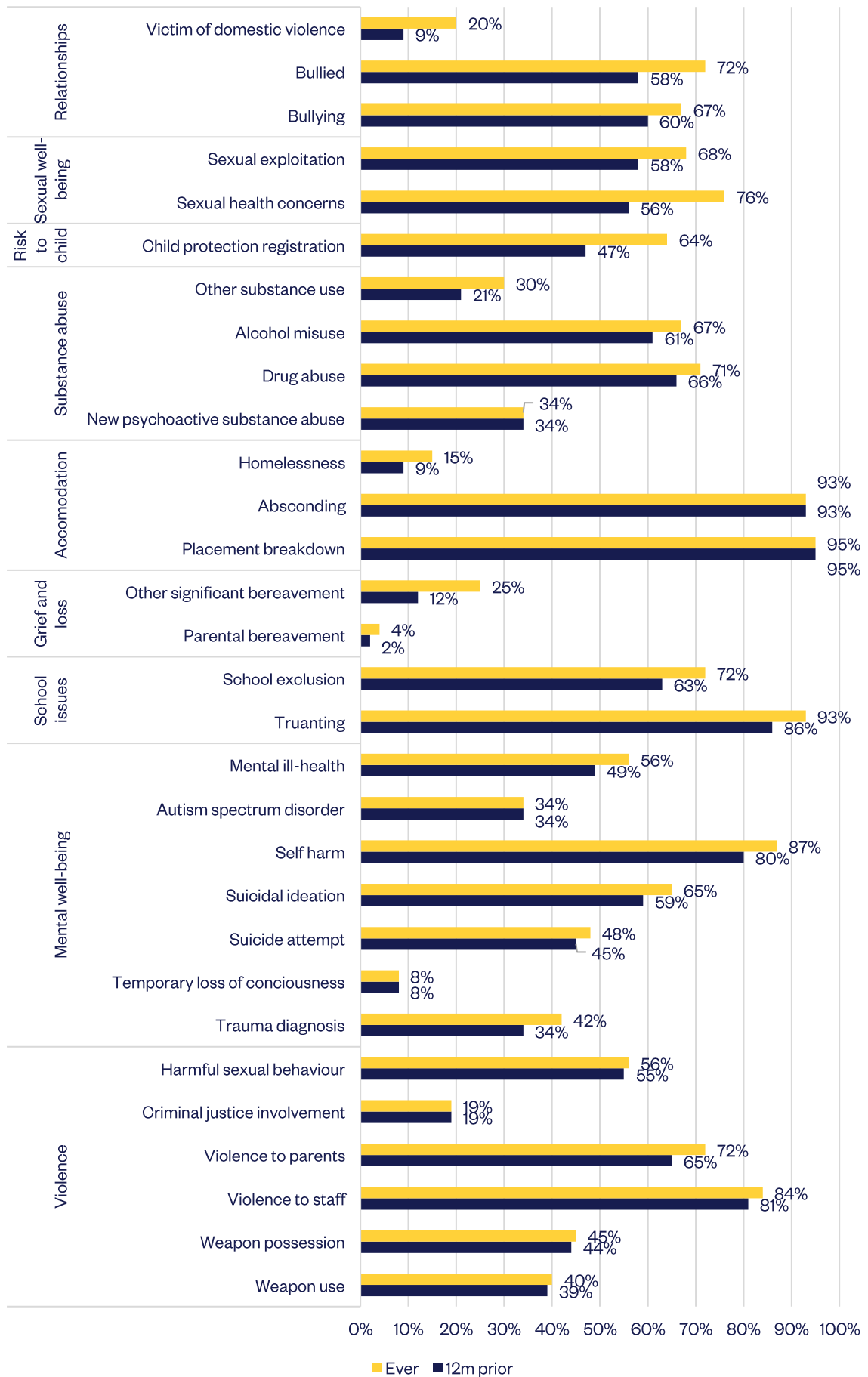
Despite the caution and concern using this measure noted by many scholars (Briggs et al. 2021; Spratt and Kennedy 2020), it is useful in demonstrating the complex and diverse range of adversities encountered by this group of children. Exposure to this level of adverse childhood experiences is of particular concern given its correlation with a range of adverse outcomes.

## Multiple adversities

Figure 7 illustrates the prevalence of a wide spectrum of adversities that may have played a role in the circumstances that resulted in a child being placed in secure accommodation, as well as a factor in the children's previous care histories.

The data collected for this study did not measure how often these issues arose – for example a child who displayed acts of harmful sexual behaviour once is recorded in the same manner as a child who did so on multiple occasions.

Figure 7: Exposure to multiple adversities



Of note is the fairly consistent level of exposure to each of these adversities during the year prior to admission and the child's life to date, with differences between the two measurements tending to be around 10 percentage points at most – and frequently much less. For example, 95% of children (56) had experienced a placement breakdown at some point in their lives and 95% (56) had also experienced this in the year prior to admission. In addition, 93% (53) had truanted from school at some point in their lives, and 86% (48) had truanted in the year prior to admission. Again, this emphasises that children who enter secure care have faced wide ranging, persistent and significant risks over a period of time.

Placement breakdown (95% at any time and 95% in the year prior to admission), truancing (93% and 86% respectively) and absconding (93% and 93%) all appear within the three most commonly experienced issues, albeit that their relative positioning slightly alters. A similar trend can be found for almost all of the issues. Only sexual health concerns differs in this regard. While it is cited as the sixth most common issue over the course of the child's life (76%, 35), it is only the 14<sup>th</sup> most prevalent concern in the year prior to admission (56%, 31).

The risk of harm posed by this cohort in the year prior to admission is of particular note. Rates of violence to staff (81%, 46), violence to a parent (65%, 34), harmful sexual behaviour (55%, 28), weapon possession (44%, 22) and weapon use (39%, 19) were noted in this study. While 'risk to others' was recorded as a primary reason for admission in only 34% of cases, this group of children pose a level of risk, even where this has not reached the stage where it was identified as the primary reason(s) for the use of secure care.

Mindful that the children in this study were placed in secure care on welfare grounds, this perhaps serves as further evidence of the commonalities between children deprived of their liberty in the justice system, and those who find themselves placed there due to concerns over their welfare. As Andow and Byrne (2018) suggest, the distinction between these groups is marginal and the divergent pathways unjust.

It is of concern that, despite the myriad adversities that this cohort of children had experienced – including issues captured within the adverse childhood experience questions – only 64% of children had ever been placed on the child protection register, with that figure falling to less than half (47%) over the course of the year prior to admission. Although we do not have a complete overview of the children's social care histories – including when children became looked after – it is concerning that child protection registration appears to be absent in the lives of many children in this cohort.

Substance use was high in this group of children. In the year prior to admission alone 66% (37) of children had engaged in drug abuse, 61% (33) in alcohol misuse, 34% (15) used new psychoactive substances and 21% (10) 'other' substances. These substances involve a degree of risk of harm – and the potential for harm is compounded when multiple substances are used (Adger 1992/2021).

The mental health of children in English secure estate is poor (Bartlett et al. 2021). This study supports that position with a significant volume of mental health concerns noted in the year prior to admission. Eight out of ten (43) children engaged in self-harm during the year prior to admission, 59% (33) had experienced suicidal ideation and almost half (49%, 24) had experienced mental ill-health. These figures may well

contribute to the high percentage of children within this study attempting to take their own lives (45%, 25) in the previous year. In the year prior to admission children had been diagnosed with trauma in 34% (18) of cases, with a further 34% (15) being diagnosed as having autism spectrum disorder.

## Poverty and deprivation

There are different ways of measuring poverty and deprivation – and the relationship between them and children’s admission into secure care is difficult to untangle. However, this study looked at two measures – relative poverty (based on the judgement of staff completing the survey) and multiple deprivation index (based on the children’s family postcodes prior to entering secure accommodation).

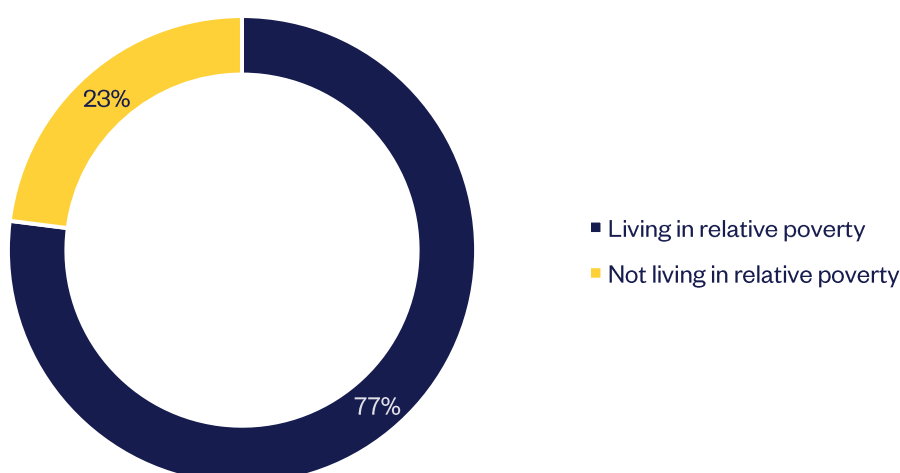
### Definitions

**Relative poverty** – those completing the census were asked to gauge – based on their knowledge of the child’s life – whether the family was living in relative poverty based on the UN definition, which ‘defines poverty in relation to the economic status of other members of the society: people are poor if they fall below prevailing standards of living in a given societal context’ (UN cited in Habitat for Humanity n.d.).

**Index of multiple deprivation** – an aggregated measure of multiple issues within the postcode in question, namely: income, employment, education, health, crime, barriers to housing and services, and living environment.

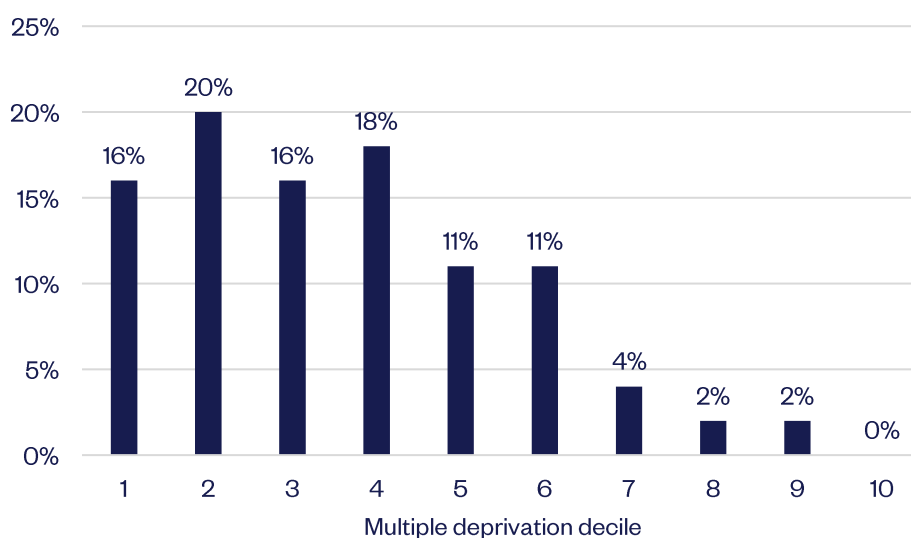
The vast majority of children from England and Wales in secure accommodation in Scotland (77%, 33) were recorded as coming from a birth family believed to reside in relative poverty.

**Figure 8: Proportion of children living in relative poverty**



Analysis of multiple deprivation data in England demonstrated that most children (52%) were from homes within the 30% most deprived areas and some 81% within the 50% most deprived postcodes.<sup>7</sup> Only 4% of children were from homes in the 30% least deprived areas. This finding echoes Gibson 2020 and Gibson 2021, which found a similar trend.

**Figure 9: Proportion of children living in each index of multiple deprivation decile (England)**



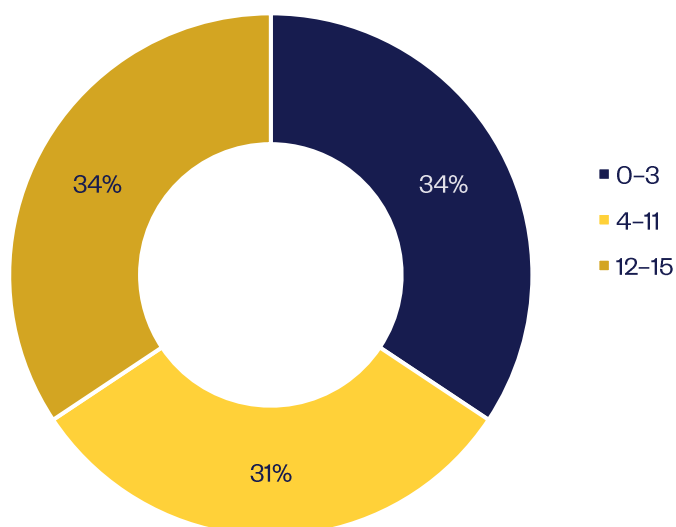
<sup>7</sup> Official measures of deprivation differ in England and Wales. Due to the small sample size, data is reported for England only.

# What support and services had children received beforehand?

## How old were the children when they were first in contact with social services?

Over a third of the children (34%, 10) from England and Wales in secure accommodation in Scotland had contact with social services before they were 3 years old. Half of these children (5) were known to social services from or before birth, with a further 7% (2) being referred before they were a year old.

Figure 10: Age at first contact with social services



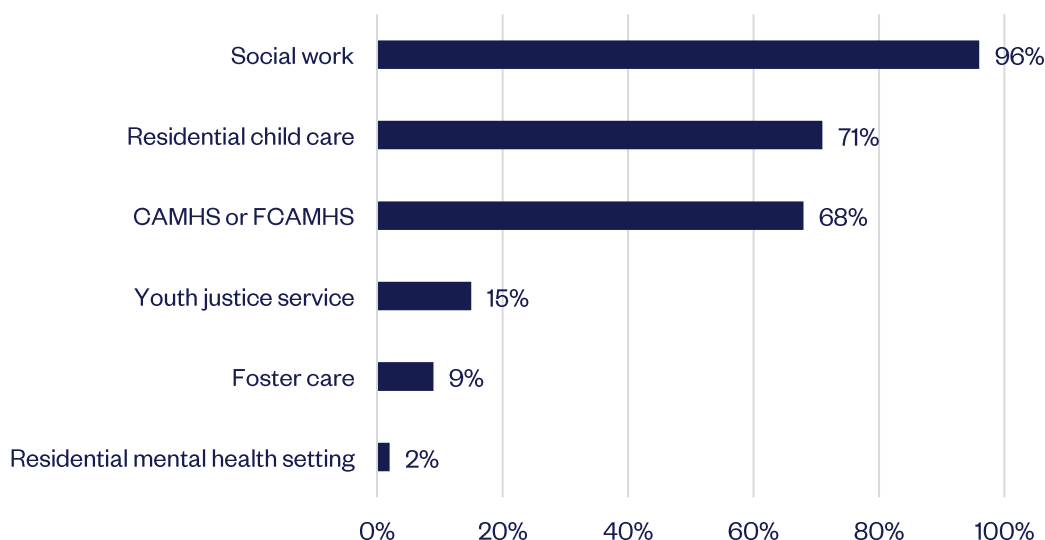
A further 34% first received social services attention between the ages of 12 and 15. Instances of first contact with social services were slightly less common in children aged between 4 and 11 (31%, 9).



## What support was being provided prior to admission?

Respondents were asked to outline what services or resources were in place in the year prior to the children's admission into secure care.

**Figure 11: Support provided prior to admission into secure care. Note: More than one response was possible per child, so the totals shown will not add up to 100%.**



Almost every child (96%, 55) had been in contact with social services in the year prior to admission, with 15% (7) receiving support from a youth justice service (either a youth offending team or service). Access to child and adolescent mental health services (CAMHS) or forensic child and adolescent mental health services (FCAMHS) was cited within 68% (32) of responses.

A majority of children (71%, 40) also spent time in residential care in the year prior to admission, with a much smaller proportion in foster care (9%, 2) or residential inpatient mental health settings (2%, 1).

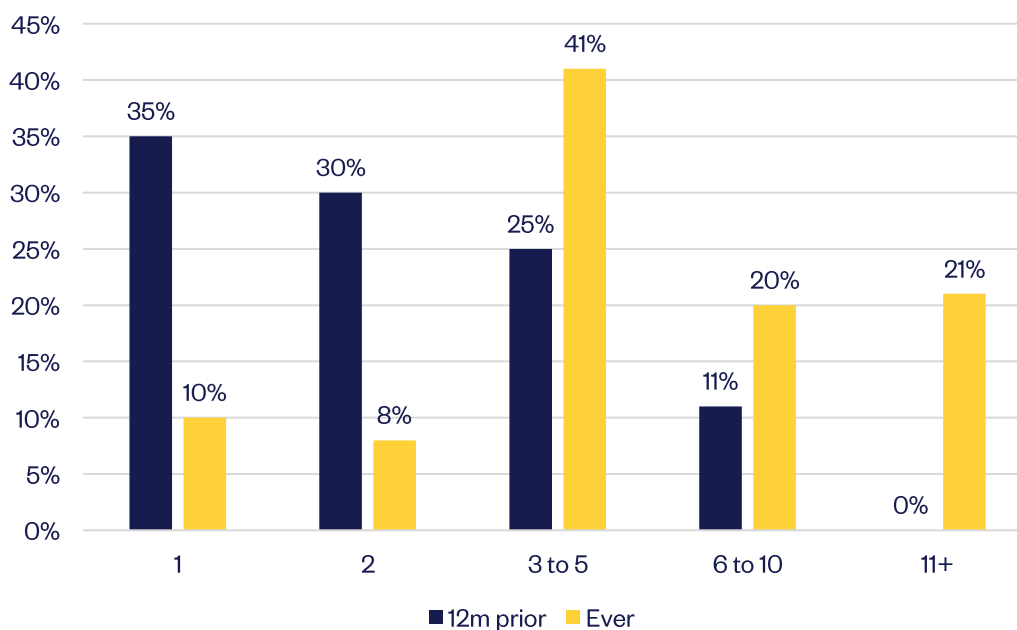
Given the high rates of substance use noted previously, it is of concern that alcohol and drugs counselling was not provided. While this intervention may have been incorporated in the work of other actors, the scale of this issue and its correlation with exposure to risk may have warranted the specialist support that such services provide.

## How many placement moves had children experienced?

Children in this study had experienced an average of 2.8 placement moves in the year prior to admission. Just under two-thirds (65%, 37) had moved placement once or twice during that time. Some children (9%, 5) had moved placement 8, 9 or 10 times and each child had experienced an average of 6.8 moves. Over the course of

the child's life to date, over half (55%, 32) had moved at least 5 times, and over a fifth (21%, 12) had moved over 11 times, including one child who had moved on 36 occasions.

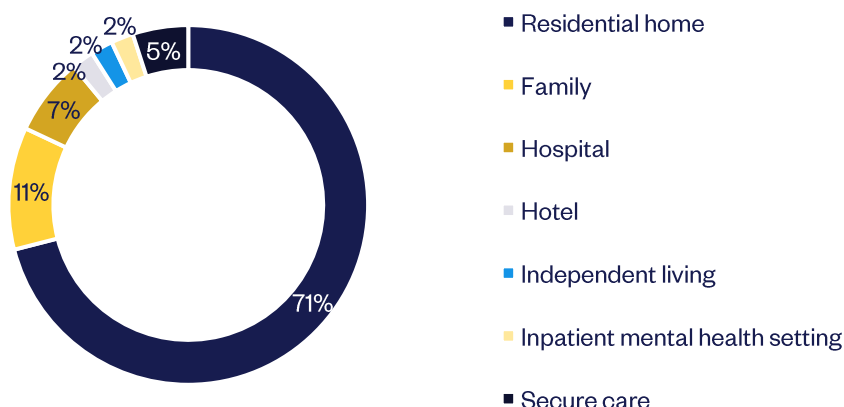
**Figure 12: Number of placement moves**



## Where were children living immediately prior to the secure setting in Scotland?

Just 11% (6) of the children in this study had been living with their families immediately prior to entering secure care. The vast majority (71%, 40) had moved into secure care from a residential home. In 5% (3) of cases the child had been placed in another secure care setting. Hospital (7%, 4) and inpatient mental health settings (2%, 1) were also recorded as prior placements. Smaller numbers of children had been living independently, with a total of 4% (2) having been living independently or residing in a hotel.

**Figure 13: Placement prior to admission into secure care**



## Had the children lived in secure accommodation before?

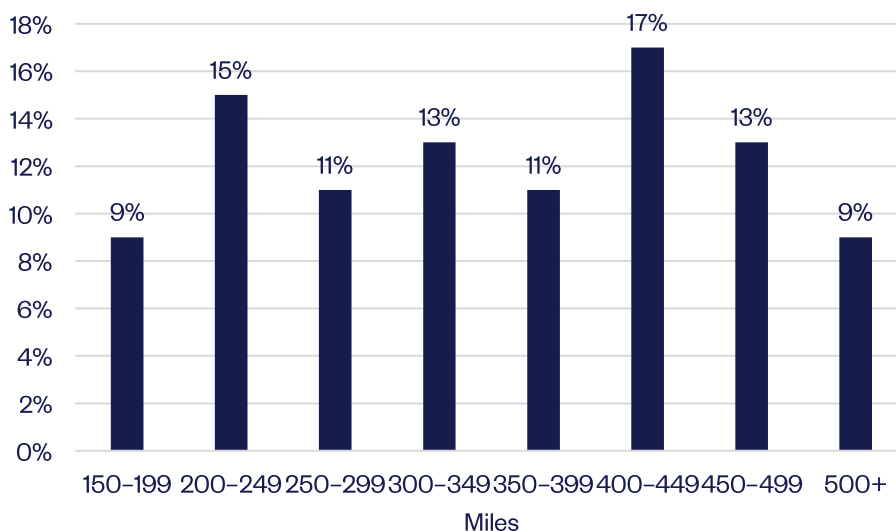
The study found that 25% (15) of children in the study had already been in secure care at some point in their lives. A small number of children had been placed in secure care on multiple occasions. This finding echoes that of et al. (2022) who reported that just over a quarter (27%) of children in secure welfare placements had previous experience of secure care. Roe et al. (2022) reported that repeat placements into secure care are common in both England (34%) and Wales (20%), with multiple repeat admissions occurring in both nations. As a consequence of these heightened figures, these authors go on to question the efficacy of secure admission in addressing the underlying risk factors and causes that precipitated admission.

Among the children placed in Scotland the total, aggregated length of previous stays for each child ranged from 3 weeks to 69 months, resulting in an average stay of 50 weeks.

# How far were children from their homes?

The children from English and Welsh authorities in secure accommodation in Scotland were on average 353 miles away from their homes. As shown in Figure 14, nearly 4 in 10 children were at least 400 miles away. Smith et al. (2022) demonstrate the significant use of out-of-authority secure placements by English local authorities, equating to 84% of children placed in secure settings on welfare grounds, and with 74% of children being placed more than 100 miles from their homes. Downie and Twomey (2021) make a similar point, reporting that children in England were placed 141 miles away from their local authority areas on average – and over 30% of them were over 200 miles away. In our study, even the closest placement (150–199 miles) is greater than this average.

**Figure 14: Distance from home**



As Smith et al. (2022) point out, this degree of separation is likely to have an impact upon the quality of attachment between child and caregiver, and indeed will have an impact on the ability – or otherwise – of CAMHS, youth offending teams or addiction services to deliver the care that is required.

# Conclusions

This study highlights the diverse and multiple adversities experienced by the children from England and Wales placed in secure care in Scotland.

It is clear from the data presented that this cohort of children experienced multiple adversities, relating to a wide variety of concerns, and resulting in a broad range of risks to themselves, and to others. The exposure to adverse childhood experiences – throughout children’s lives and in the 12 months prior to admission to secure care – far surpasses that found in the general population, and highlights the long-term risks of adverse outcomes that secure care-experienced children, young people and adults face. This includes experiences of neglect and abuse, trauma, high prevalence of mental health problems and self-harming behaviours, substance use problems, school exclusion, vulnerability to sexual and criminal exploitation, and displaying violent or aggressive behaviours.

In addition, children had experienced multiple placement breakdowns and instability in the arrangements made for their care. Such experiences are likely to compound the issues and risks faced by these children, including their ability to settle and maintain stable relationships, as well as their sense of belonging, and may lead to children absconding in order to run away from – or back to – a situation. This also highlights the difficulty local authorities experience finding appropriate community-based placements for children with complex needs.

Questions remain as to why the children from England and Wales placed in Scotland appear to have encountered a greater degree of adversity than those accommodated in England and Wales. It may be that English and Welsh secure children’s homes are unable to provide the level of care required to meet their specific needs. A more comprehensive study, building on the work of Martin et al. (2021) and Smith et al. (2022) may well be worthwhile.

This study has found that in addition to having faced such elevated rates of adversity, children from England and Wales are placed in secure accommodation several hundred miles from home. While such a distance separates them from those who have caused them harm, it also results in them being separated from those who know them best, have cared for them throughout their lives, and who have parental or corporate responsibilities to care for them. The ability to provide the intensive support these children require is questionable, as is the likely efficacy of transition plans, which are made more challenging over such a distance.

Relying on statistical data and analyses, this research lacks the insights and opinions of those who have experienced secure care. It provides cold, dispassionate accounts of events but lacks the ability to form a narrative of the experiential process of a child’s journey into secure care nor to reflect on being placed far from home. Future research should address this and ensure that the voices of children feature more heavily in this discourse. Further research is also needed to explore children’s experiences of being placed in secure care in Scotland and their short-

and long-term outcomes, including the extent to which a placement in secure care is able to address the underlying emotional, behavioural or contextual issues that led to the placement.

Given Scotland's Independent Care Review's conclusion that cross-border placements must end, and the Scottish Government's acceptance of that report in its entirety – and the difficulty in securing suitable placements previously highlighted in other research – local authorities in England and Wales face a looming challenge in creating sufficient provision for children who require secure care. To that end, the Independent Review of Children's Social Care's call for the creation of regional care cooperatives to oversee the provision of residential and secure care across England may be timely. It is not clear how effective this approach will be in addressing the logistical complexities and lack of capacity currently experienced however. Delay in addressing this matter is likely to result in the most vulnerable children in England and Wales being left without the comprehensive support they drastically need.

This report aims to provide a better understanding of the characteristics, experiences and needs of children who are placed in secure care. Future planning of secure care, or alternative forms of provision, must be designed to meet these needs, and promote children's safety, resilience and sense of self.

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# Appendix A: Methodology

In both 2018 and 2019, the Children and Young People’s Centre for Justice undertook a study of every child residing in Scotland’s five secure care centres on a set day with the aim of finding out:

- the children’s characteristics – age, gender, ethnicity and why they were admitted to secure accommodation
- the prevalence and types of adversity they had faced since they were born and in the year prior to admission
- the support and services they had received in the year prior to admission
- the children’s social care histories.

Ethical approval was granted from the University of Strathclyde’s School of Social Work & Social Policy and the five secure care centres.

Staff at the centres were asked to complete an online survey in respect of each child in their care – 87 in 2018 and 78 in 2019. Data was transferred from Qualtrics to SPSS Version 25 – a quantitative data processing system – before a number of analyses were undertaken.

Of these 165 children, 59 had been placed there by a Welsh or English local authority: 32 in 2018 (37% of the 2018 sample) and 27 in 2019 (37% of the 2019 sample).

Attempts were made to assess whether any child from the 2018 census was subsequently included in the 2019 by enquiring whether the child had previously spent time within secure care, and for what duration. While the measure may have had limitations, to the best of the author’s knowledge none of the 2019 cohort had been accommodated within Scottish secure care on the day of the 2018 census, and thus the data set relates to 59 unique individuals.

Data relating to index of multiple deprivation was calculated by identifying the child’s home postcode, and asking the respondent to note which decile that postcode was found within using online, government resources. Similarly, the distance from the child’s home to the secure accommodation was measured using their family’s postcode. Using an online resource, respondents were asked to record the distance – by road – between the two locations.

Ethnicity was recorded through the use of multiple choice responses, using categories that aligned closely with those used in Office for National Statistics data.

Gibson (2020, 2021) has reported on selected data pertaining to this cohort previously, having produced two reports relating to the overall secure care population in Scotland, leading to comparisons being made between those children

for whom Scotland was their home, and those who had been placed by an English or Welsh local authority. However this report differs from those in that it exclusively focuses on those children from England and Wales who were resident within the Scottish secure centres on the day of the census. It has the added benefit of examining data relating to two distinct time periods –experiences that had occurred at any time in the child’s life, as well as those that had occurred in the year prior to the child entering secure care. The latter had not been examined in existing literature up to this point. It allows for a picture to be formed of the activities and events that are most often found in the months leading to admission, as well as providing context as to the lives of those children who ultimately enter the most restrictive form of residential childcare.

# Nuffield Family Justice Observatory

Nuffield Family Justice Observatory (Nuffield FJO) aims to support the best possible decisions for children by improving the use of data and research evidence in the family justice system in England and Wales. Covering both public and private law, Nuffield FJO provides accessible analysis and research for professionals working in the family courts.

Nuffield FJO was established by the Nuffield Foundation, an independent charitable trust with a mission to advance social well-being. The Foundation funds research that informs social policy, primarily in education, welfare, and justice. It also funds student programmes for young people to develop skills and confidence in quantitative and scientific methods. The Nuffield Foundation is the founder and co-funder of the Ada Lovelace Institute and the Nuffield Council on Bioethics.

## Children and Young People's Centre for Justice

The Children and Young People's Centre for Justice (CYCJ) works towards ensuring that Scotland's approach to children and young people in conflict with the law is rights-respecting, contributing to better outcomes for our children, young people and communities.

CYCJ produces robust internationally ground-breaking work, bringing together children and young people's contributions through participation and engagement, research evidence, practice wisdom and system know-how to operate as a leader for child and youth justice thinking in Scotland and beyond. CYCJ works closely with other organisations and individuals to ensure that children's rights are upheld and respected throughout the justice process, and that children are deprived of their liberty only when this cannot be avoided, and for the shortest time possible.

CYCJ is primarily funded by the Scottish government and based at the University of Strathclyde.

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