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What are the routes into care for young people in Wales?



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Briefing

This briefing highlights some of the key findings from a recent study from the Family Justice Data Partnership – a collaboration between Lancaster University and Swansea University – which investigates the routes into care for young people in Wales.

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Disclaimer

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Introduction

In 2022/23, children aged 10–17 made up 64% of all looked after children in England and 58% in Wales (Department for Education 2024; StatWales 2024). Their experiences and needs are often much different to their younger counterparts. They are more at risk of extra-familial harms such as criminal and sexual exploitation and have complex needs including mental health difficulties, frequently the result of past trauma.

Previous research used data from the Children and Family Court Advisory Support Service (Cafcass and Cafcass Cymru) to document an increase in the number of young people subject to section 31 care proceedings in England and Wales over time (Roe et al. 2021). This does not give the full picture though. Not all children who become looked after will appear in Cafcass data due to the use of out-of-court section 20/76 voluntary arrangements. Sometimes voluntary arrangements may negate the use of court proceedings altogether or may act as a precursor to proceedings. There has, so far, been little quantitative analysis using population-level administrative data on the use of voluntary arrangements. One of the main sources of information is based on published judgments which had an important impact on the way section 20/76 was used. This is evident in the number of young people coming before the family court.

A new report from the Family Justice Data Partnership – a collaboration between Lancaster University and Swansea University – investigates trends in young people entering care and their entry routes into care in Wales (North, L. et al. 2024).¹ It is the first study to examine the pathways of young people going through the system using the Welsh Children Looked After (CLA) data, which is available through the SAIL (Secure Anonymised Information Linkage) Databank.²

The report shows that although the overall rate of children looked after in Wales has been relatively stable over time, the rate of young people entering care under section 76 has fallen over time and is coupled with an increase in the use of interim care orders. This has led to more young people appearing in the family courts. We discuss the most salient findings and implications.

1 See: https://popdatasci.swan.ac.uk/wp-content/uploads/2024/05/Adols_care_pathways.pdf

2 See: <https://saildatabank.com/>; <https://web.www.healthdatagateway.org/dataset/cfdafacb-48f0-4ad8-9f20-193a5eec2da4>

Care entry: the legal context in Wales

There are two primary routes into the care system in Wales: care proceedings and voluntary arrangements. Young people may also become looked after under other legal routes, including emergency protection orders, police protection, the youth justice system or short-term breaks.

Care proceedings

When a child is identified as having suffered – or is at risk of suffering – significant harm attributable to a parent or caregiver, the local authority may apply to initiate care proceedings under section 31 of the Children Act 1989. At the beginning of proceedings, the court can consider whether to make an interim care order which places the child temporarily under the care or supervision of the local authority while care proceedings are ongoing. A care order places a child in the care of a designated local authority, with parental responsibility being shared between the parents and the local authority. Children subject to a care order may be placed with a foster carer, with wider family, in residential care and with a placement order, with potential adoptive parents, or may remain in (or return to) the parents' home.

Voluntary accommodation

Children can also enter the care system on a voluntary basis, whereby those with parental responsibility agree that the child can be accommodated by the local authority under s.76 of the Social Services and Well-being (Wales) Act 2014. The act places a duty on local authorities to provide accommodation to children who have no-one to look after them, or where their carer is prevented from providing them with suitable accommodation or care. The duty is dependent on those with parental responsibility agreeing to the arrangement and does not involve the courts. In order to capture the total population of children entering care, research needs to capture those removed from parents care under section 31 of the Children Act 1989, but also those who enter care with parental agreement under section 76 of the Social Services and Well-being (Wales) Act 2014. The equivalent legislation in England is section 20 of the Children Act 1989.

Data and methodology

The study used anonymised, population-level and individual-level administrative data, namely the children looked after (CLA) census which is routinely collected by local authorities and maintained by the Welsh government. It was accessed through the SAIL Databank. The data was linked to the Welsh Index of Multiple Deprivation 2019 dataset (Ford et al. 2009; Lyons et al. 2009; Jones et al. 2014; Jones et al. 2019; Allnatt et al. 2022).

Accessing the data allowed researchers to examine, for each child, the start and end dates of every episode of care, the legal status under which they entered care, the category of need (as recorded by the social worker), the placement type, and the reason the episode started and finished.

The data also contains information on the demographic characteristics of young people entering care including their age, gender, ethnicity, and location (which is captured by the lower super output area they live in on entry to care). The data also contained a flag for whether the young person was an unaccompanied asylum-seeking child.

The study population included all children aged 10–17 who entered care for the first time between 1 April 2007 and 31 March 2021 – a total of 8,739 people.

There were two strands to the research. The first involved investigating trends in the number of young people entering care over time. Within this, the research examined how trends differed by region, legal status on entry to care, designated family judge (DFJ) area, and local authority. The second strand explored pathways of young people and compared outcomes based on the route in care and if any subsequent legal action was taken. Outcomes included the type of placements, age upon leaving care, and stability of placements. The research identified differences between cohorts of ‘older’ (aged 15–17) and ‘younger’ (aged 10–14) children where numbers allowed.

Key points

The rate of young people (aged 10–17) entering care has remained stable over time – but there is variation by age and geographic location

To facilitate comparisons between years, the number of young people entering care has been scaled by population changes over time to give an ‘incidence’ rate. The rate of young people entering care for the first time has remained relatively stable over time in Wales. But this overall figure masks differences between younger and older age groups. The older group is defined as children aged between 15 and 17, while the younger group are aged between 10 and 14. Figure 1 shows there has been a rise in the rate of older children entering care over time, from 15 per 10,000 population in 2007/8 to almost 25 per 10,000 population in 2020/21. The rate of children aged between 10 and 14 entering care for the first time has remained relatively stable. In 2010/11 the proportion of young people aged 15-17 entering care for the first time was 34% rising to 45% of all young people by 2020/21.

Figure 1: Incidence rates of young people aged 15–17 entering care

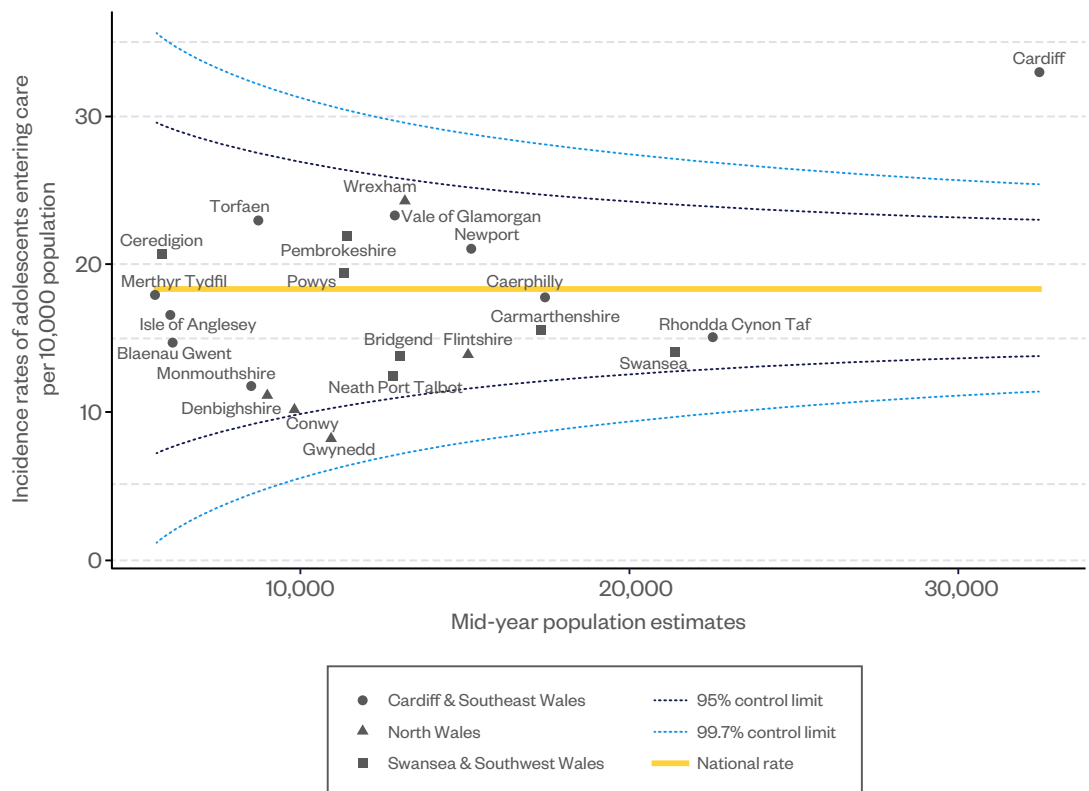


Source: North et al. 2024

The national picture also hides geographic variation between DFJ areas and local authorities. Cardiff and South East Wales is the DFJ area with the highest rate of young people entering care for the first time. Figure 2 shows that this appears to be driven by the local authority of Cardiff, which is an outlier in both 2014 and 2020 – the rate of young people entering care is significantly above average. It was not possible for the researchers to explore the reasons behind this variation using the data.

Overall, the research shows 6% of young people entering care were unaccompanied asylum-seeking children. We know, in general, they are a distinct cohort with specific characteristics, they are more likely to be aged over 16 and male. This holds up in the study, 12% of the older group and just 1% of the younger group were unaccompanied asylum-seeking children. They enter care only under a section 76 voluntary arrangement – so these large numbers, coupled with being older, may impact comparisons between older and younger groups as well as comparisons between entry routes into care.

Figure 2: Incidence rates of young people aged 10–17 entering care, by local authority (2020)



Source: North et al. 2024

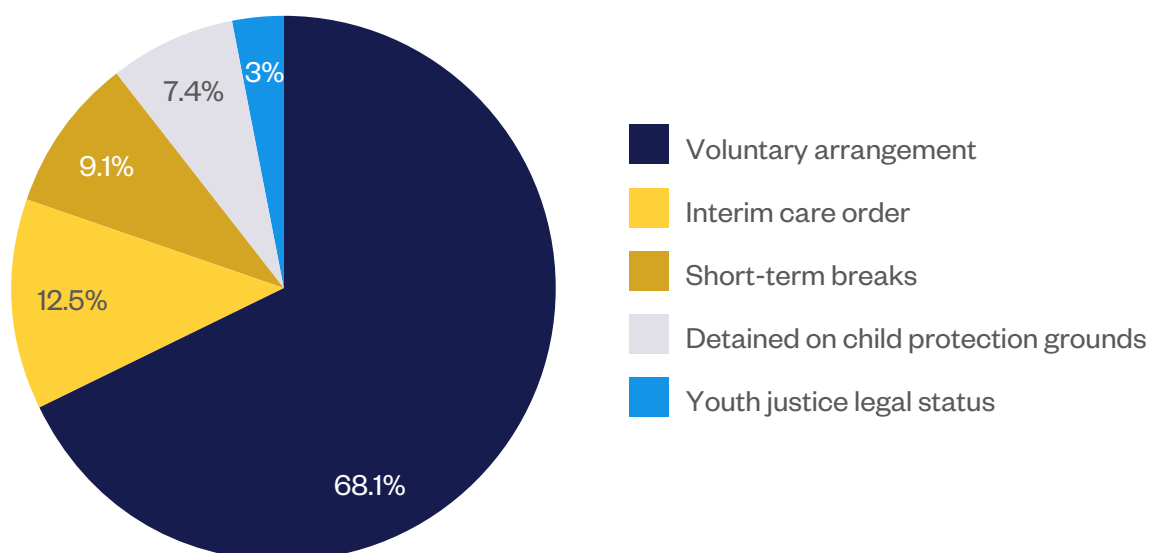
What are the routes into care for young people in Wales?

The research shows the ethnic diversity of young people entering care is similar to that of the population of Wales. Young people entering care were most likely to be White (84%) compared to other ethnic backgrounds. There is a slight underrepresentation of White young people looked after compared to the general population in Wales (90%).

Just over two-thirds of young people entered care for the first time under a section 76 voluntary arrangement

Around two-thirds (68%) of young people entered care for the first time under a section 76 voluntary arrangement. The use of interim care orders was less common – 12.5% of young people entered through this route. Around 9% of young people entered under a short-term break, 7% entered on child protection grounds (emergency protection or police protection order), and 3% entered on a youth justice legal status (see Figure 3).

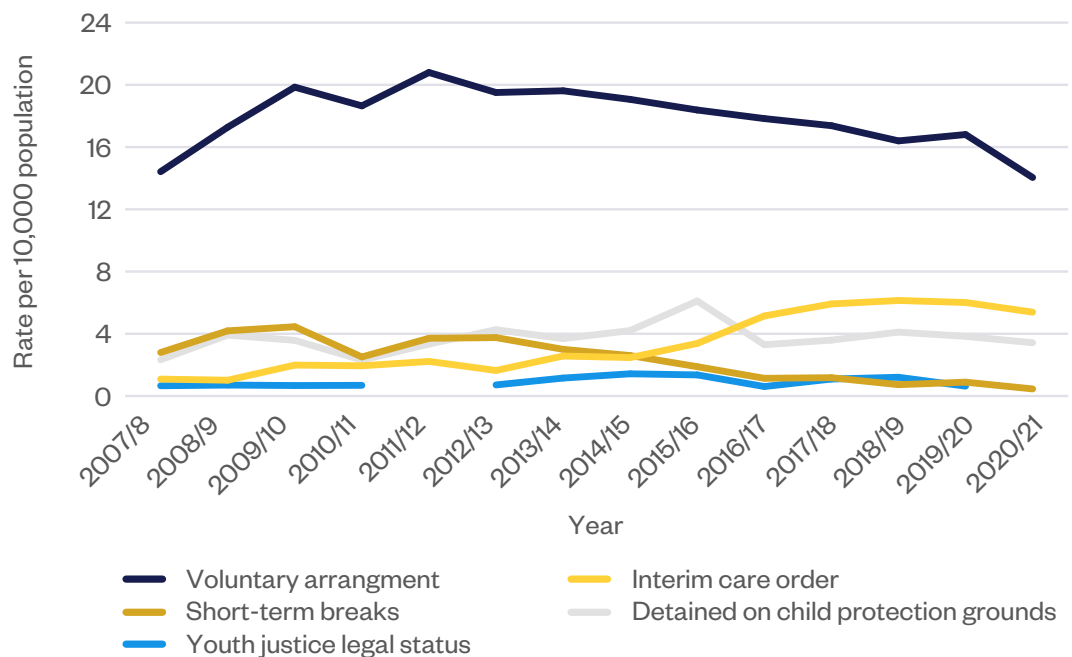
Figure 3: Routes by which young people aged 10–17 entered care for the first time, 2007/08 to 2020/21



Source: North et al. 2024

Figure 4 shows how the entry routes into care have changed over time. The rate of young people entering under a section 76 voluntary arrangement peaked in 2011/12 at 17 per 10,000 population and has been gradually falling over the decade to 12 per 10,000 population in 2021/22. Conversely, the use of interim care orders has been increasing since 2014/15. This is thought to relate to several high-profile judgments which were critical of the use of section 76 by local authorities (section 20 in England) (Public Law Working Group 2021).

Figure 4: Incidence rates of young people aged 10–17 entering care, by legal status



Source: North et al. 2024

This trend differs by age. There has been more stable local authority use of voluntary arrangements among children aged 15–17, which slowly increased over time. In the younger group, there has been a steady decrease in the use of voluntary arrangements and an increase in the use of interim care orders.

The use of voluntary arrangements was more varied across local authorities than the use of interim care orders. Cardiff and the South East were outliers in the use of voluntary arrangements using them more frequently than other regions.

Just over a fifth of young people who entered care under section 76 voluntary arrangements subsequently had compulsory legal action

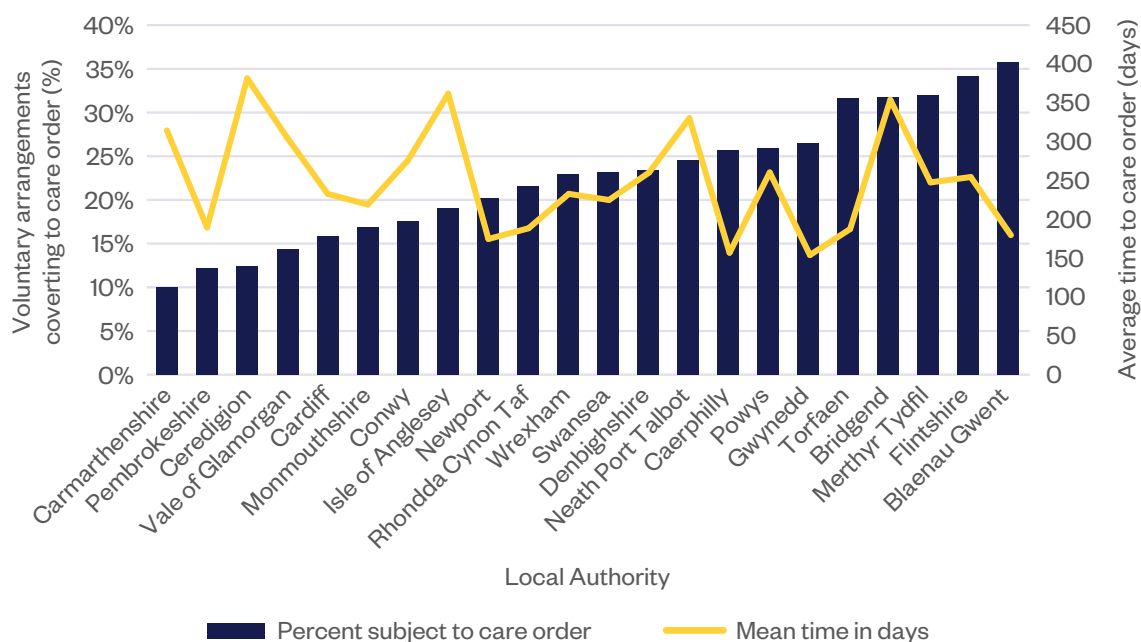
Just over a fifth of young people (22%) were subject to compulsory action (i.e. had either an interim care order, full care order or placement order) following their entry to care under a voluntary arrangement. If you remove unaccompanied asylum seekers from the calculation, because they do not become subject to compulsory action in any circumstance, this figure rises to 24%.

The younger group (aged 10-14) accounted for the vast majority of young people who converted to a legal order (89%). This finding could also be due to the fact that the older group (aged 15-17) includes unaccompanied asylum seekers who will stay on a voluntary arrangement until they turn 18. But it also highlights how we need more evidence on the impacts on young people of entering care under section 76 and remaining on them until they age out of care.

The median length of time between entering care under a voluntary arrangement and compulsory action was 133 days but there was considerable variation in this. For the younger group (aged 10–15) this was a median of 143 days compared to the older group (aged 15–17) where it was 81 days. This may relate to the time pressure of older children ‘ageing out’ of care (i.e. turning 18), or it may reflect more urgent circumstances in need of court intervention.

The researchers found local authority variation in compulsory action and the time between entering under a section 76 voluntary arrangement and the compulsory action being taken. In Carmarthenshire, 10% of young people entering under a voluntary arrangement went on to have further safeguarding through compulsory action, compared with 35% of young people in Blaenau Gwent (see Figure 5). The reasons behind this cannot be explored in the administrative data but they may relate to court capacity, differing local authority practices, or court practices. There did not appear to be any correlation between the length of time to convert and the percentage of cases that did convert.

Figure 5: Young people aged 10–17 entering care via voluntary arrangements who became the subject of compulsory action



Source: North et al. 2024

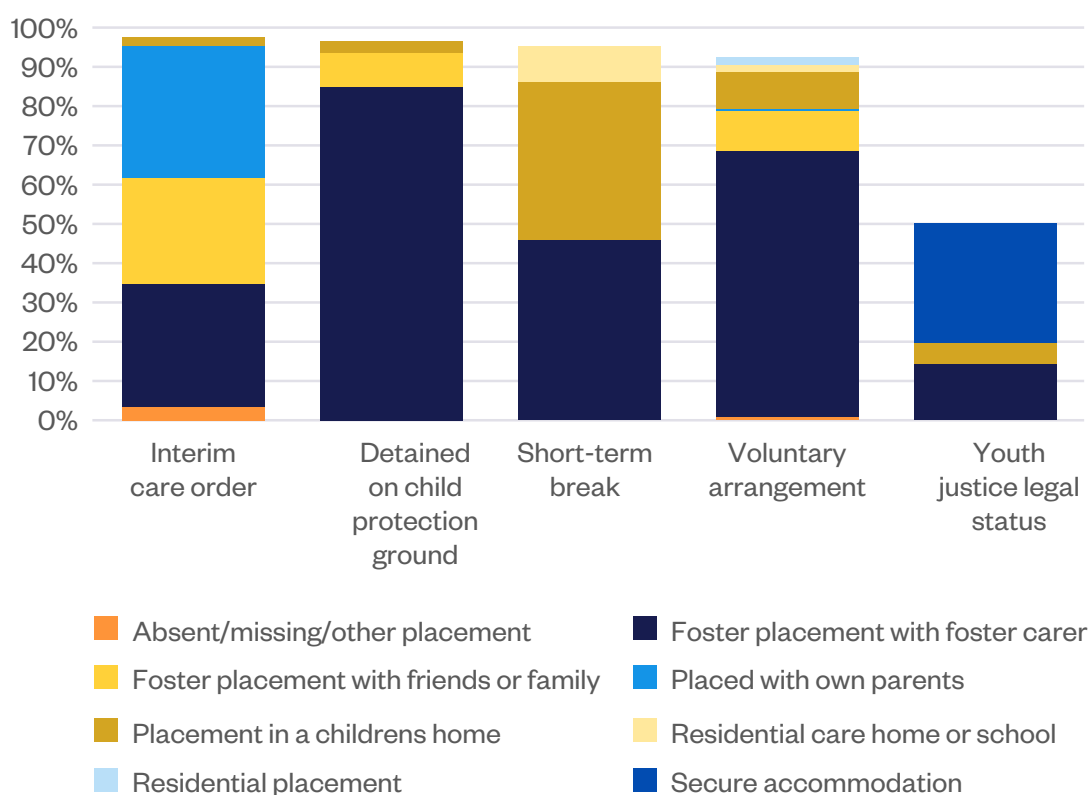
One third of young people who entered care under an interim care order were placed with parents

The placements of young people were different depending on how they entered care (see Figure 6). There was greater use of foster placements with foster carers for young people entering under a voluntary arrangement. Just over two thirds of young people who entered care under a voluntary arrangement were placed with foster carers (68%), 10% were placed in foster care with friends or family, and 10% were placed in a children's home.

For young people entering under an interim care order, one third were placed with parents, almost one third with foster care friends and family and around one third in foster care with foster carers. This signifies the use of care orders at home.

Young people detained on child protection grounds were almost exclusively placed in foster care with a foster carer as opposed to family and friends – this may signify the speed at which these young people are placed. There are a variety of complex factors that may be at play.

Figure 6: Placement types for young people aged 10–17 on entry to care, by legal status³



Source: North et al. 2024

The stability of placements was examined. The researchers highlighted 41% of young people who entered care had only one placement. However, over half of young people (60%) had 2 or more placements. The older group (aged 15–17) typically had 1 placement (48%) whereas the younger group (aged 10–14) were more likely to have 3 or more placements (45%). This was similar regardless of the entry route into care. Naturally, the older young people are, the smaller the chance of having multiple placements given their age on entry to care.

3 The authors note “Due to small numbers and statistical disclosure reasons, some legal statuses at entry have been masked and therefore percentages may not equal 100%. It should be noted that individuals who enter care on voluntary arrangements cannot be placed with their own parents. This is likely to be an error in the data but we have kept them in for completeness.”

6 in 10 young people left care before their 18th birthday

The research identified children who left care. Just under one third (29%) of young people left care as a result of ageing out. The remaining 61% of young people left care before their 18th birthday.

Overall, 43% of young people who left care fell into the 'returned home to live with parents, relatives, or other person with parental responsibility' group. The second largest group comprised 23% of young people who left care to independent living arrangements. In the sub-sample of young people who turned 18 and left care, around one quarter went into independent living and less than 10% returned to live with parents.

One fifth of young people were recorded as 'period of being looked after ceased for any other reason' and so it is not possible to determine what they did when leaving care. Further work exploring the characteristics of young people recorded in this category would be helpful.

There were some differences depending on the legal entry route. Unsurprisingly, higher proportions of young people who entered under a section 76 voluntary arrangement returned home to parents, relatives or other person with parental responsibility. Of young people who entered care on child protection grounds, 77% returned home to live with parents.

Reflections

The report shows how there has been an increasing rate of young people aged 15–17 entering care for the first time. The rate of young people aged 10–14 entering care for the first time has remained stable but there have been changes in the route into care among this group with an increased use of interim care orders and a decline in the use of section 76 voluntary arrangements.

There is regional variation across many of the outcomes studied, in the overall rates of young people aged 10–17 looked after, the different entry routes and the use of the court following a section 76 voluntary arrangement. More work could be done to investigate this and understand why these differences persist.

The use of section 76 is slightly higher among young people in comparison to the use for babies (68% for young people compared to 54% for babies) (Cowley et al. 2023). This means that the court actually sees a small portion of children aged 10–17 who become looked after. Indeed, even the percentage of young people who enter care under a section 76 voluntary arrangement and go to court later is less than half of the total cohort of young people looked after.

There are duties placed on local authorities when they use section 76. These include accounting for the wishes and feelings of children and their families, being responsible for finding accommodation for the child, promoting contact between children and their families, developing a care plan and reviewing it, and providing the appropriate level of support for children who are leaving care. It is vital that we have research to help us to understand to what extent this is happening in practice, and what the barriers to providing the right support are.

Unfortunately there was no separate analysis of unaccompanied asylum seeking children. In addition, including this group in the total sample may have implications for the findings. This is because they are a distinct group. They always enter care under a section 76 voluntary arrangement, account for 12% of older young people, and will only leave care once they age out at 18. Despite this limitation, the number of unaccompanied asylum seekers as a proportion of young people is not regularly

reported in Wales (on StatWales) and constitutes a surprisingly large number (and proportion) of older young people. Once they reach 18, some unaccompanied asylum seeking children may remain with foster families while others may go into supported accommodation. But given their status, there are going to be few who return to live with parents (or who are recorded as such). We believe that this group warrants an additional analysis and a distinct policy approach to their needs.

Further research would be welcomed that explores the characteristics and pathways of young people who leave care before they turn 18. Being able to better capture the placement when they leave care in the data collection would aid this. In addition, it is not clear whether a child returns to live with parents due to changes in the family circumstances, or whether the parent has withdrawn consent for the section 76 voluntary arrangement. This is an important distinction and an evidence gap in understanding the pathways of young people who leave care.

References

Allnatt, G., Lee, A., Scourfield, J., Elliott, M., Broadhurst, K. and Griffiths, L. (2022). Data resource profile: children looked after administrative records in Wales. *International Journal of Population Data Science*, 7(1), 1752. <https://doi.org/10.23889/ijpds.v7i1.1752>

Cowley L., North L., Broadhurst K., Doeblar S., Alrouh B., Cusworth L., Abouelenin M., Griffiths L. (2023). *Born into Care: Understanding care pathways and placement stability for infants in Wales*: Family Justice Data Partnership. https://www.cfj-lancaster.org.uk/files/documents/Infant_care_pathways_PopDataSci_01112023.pdf

Department for Education. (2024). *Statistics: looked-after children*. Retrieved 21 May 2024 from <https://www.gov.uk/government/collections/statistics-looked-after-children>

Ford, D. V, Jones, K. H., Verplancke, J. P., Lyons, R. A., John, G., Brown, G., Brooks, C. J., Thompson, S., Bodger, O., Couch, T. and Leake, K. (2009). The SAIL Databank: Building a national architecture for e-health research and evaluation. *BMC Health Services Research*, 9, 157. <https://doi.org/10.1186/1472-6963-9-157>

Lyons, R. A., Jones, K.H., John, G., Brooks, C. J., Verplancke, P., Ford, D. V., Brown, G. and Leake, K. (2009). The SAIL Databank: linking multiple health and social care datasets. *BMC Medical Informatics and Decision Making*, 9:3. <https://doi.org/10.1186/1472-6947-9-3>.

North, L., Bailey G., Cowley L., Broadhurst K., Doeblar S., Alrouh B., Cusworth L., Abouelenin M., Hargreaves C., Griffiths L. (2024). *Understanding care pathways and placement stability for adolescents in Wales*. Swansea/Lancaster: Family Justice Data Partnership. See: https://popdatasci.swan.ac.uk/wp-content/uploads/2024/05/Adols_care_pathways.pdf

Roe, A., Alrouh, B., and Cusworth, L. (2021). *Older children and young people in care proceedings in England and Wales*. London: Nuffield Family Justice Observatory. https://www.nuffieldfjo.org.uk/wp-content/uploads/2021/10/older_children_and_young_people_in_care_proceedings_in_england_wales_report_1021..pdf

Public Law Working Group (2021). *Recommendations to achieve best practice in the child protection and family justice systems. Final Report*. www.judiciary.uk/wp-content/uploads/2021/03/March-2021-report-final_clickable.pdf

StatWales (2024). *Children looked after at 31 March by local authority, gender and age*. Retrieved 21 May 2024 from <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/Social-Services/Childrens-Services/Children-Looked-After/childrenlookedafterat31march-by-localauthority-gender-age>

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. Nuffield FJO funded the development of this briefing paper. Any views expressed are not necessarily those of Nuffield FJO or the Nuffield Foundation.

Family Justice Data Partnership

The Family Justice Data Partnership is a collaboration between Lancaster University and Swansea University, with Cafcass and Cafcass Cymru as integral stakeholders. It is funded by Nuffield Family Justice Observatory.

SAIL Databank

Children Looked After data used in this study is available from the Secure Anonymised Information Linkage (SAIL) Databank at Swansea University, Swansea, UK, which is part of the national e-health records research infrastructure for Wales. All proposals to use this data are subject to review and approval by the SAIL Information Governance Review Panel (IGRP). When access has been granted, it is gained through a privacy-protecting safe-haven and remote access system, referred to as the SAIL Gateway. Anyone wishing to access data should follow the application process guidelines available at: www.saildatabank.com/application-process



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