

#KeepThePromise



Alcohol and Drugs

Autumn 2020

Between 2017 and 2020, the Care Review heard the experiences over 5,500 care experienced infants, children, young people, adults and members of the paid and unpaid workforce had of Scotland's 'care system', and their vision for what needed to change. This vision was set out in '[the promise](#)' which reflected what was heard and detailed the foundations that Scotland's care for its children and families must be built on:



Voice: Children must be listened to and meaningfully and appropriately involved in decision-making about their care, with all those involved properly listening and responding to what children want and need. There must be a compassionate, caring, decision-making culture focussed on children and those they trust.



Scaffolding: Children, families and the workforce must be supported by a system that is there when it is needed. The scaffolding of help, support and accountability must be ready and responsive when it is required.



Family: Where children are safe in their families and feel loved they must stay – and families must be given support together to nurture that love and overcome the difficulties which get in the way.



Care: Where living with their family is not possible, children must stay with their brothers and sisters where safe to do so and belong to a loving home, staying there for as long as needed.



People: The children that Scotland cares for must be actively supported to develop relationships with people in supported to listen and be compassionate in their decision-making and care.

This series of briefings is intended to help Scotland **#KeepThePromise**, highlighting key areas of alignment between what was heard during the Care Review and mapping those to different sectors, in order to guide and inform planning and implementation. They will also bring into focus the substantial amount of overlap between these areas across all parts of the country's workforce. It is hoped that in doing so, the briefings will support inter-sector, partnership discussions on how to take forward Scotland's Ambition, to make it the best place in the world to grow up.

Each briefing begins with a bullet point summary of the 'headline' themes for the sector. The remainder of the document highlights key sector-relevant themes and sections from The Promise giving the relevant page numbers to help signpost readers.

Briefing Summary

- Scotland must take a more flexible, whole family approach to supporting children living with parents with problematic substance use.
- There must be more universal and intensive support for families who are struggling, whatever issues they face. There must be access to that support in the communities where they live.
- There must be a significant, ongoing and persistent commitment to ending poverty and mitigating its impacts for Scotland's children, families and communities.
- The importance of relationships cannot be overstated- every effort must be made to nurture and sustain positive and important relationships for care experienced children.
- Transitions must be limited, relational, planned and informed. Parenting does not stop at 18. Scotland must continue to consider how to create greater equity and opportunity for care experienced young adults, including how to increase opportunity for care experienced people to access employment, training, stable housing and support.
- Scotland must ensure that the way support is delivered does not stigmatise people-the 'Language of Care' must also change to be easily understood, be positive and not create or compound stigma.

Scotland must take a more flexible, whole family approach to supporting children living with parents with problematic substance use

- p.54** The Care Review has heard that children living with parents with problematic substance use have complex, conflicting feelings about their parents difficulties. With more flexibility in how services are provided including a flexible, whole family approach to support and management of problematic substance use, there is the potential for families to stay safely together.
- p.54** Access to rehabilitation and support must be more readily available.
- p.54** Recovery models for addictions reflect that the recovery cycle can include a relapse. The Care Review has heard that when parents relapse, this can evoke a risk adverse and punitive response from statutory children's services.
- p.54** The status quo results in children being subject to care plans that focus on the management of risk as opposed to supporting parents in addressing need. It can also unintentionally encourage parents to disguise the challenges they are facing due to fear of how this could be perceived.
- p.54** Services supporting parental substance use and statutory children's services need to compassionately collaborate with each other to ensure supports are in place that holistically assesses children within their families and support them to stay with families whenever this is safe to do so.

- p.54** There is significant research on the pervasive impact and relationship between substance use, mental health difficulties, domestic abuse and likelihood of children being removed from the care of their parents. Families experiencing these issues must be supported with flexible, creative services and relationships.
- p.54** Failures in adult services have a profound impact on the ability of children to have fulfilling childhoods. Fundamentally there must be a shared language of care and approach between services and professionals so that families are not navigating between competing standards and expectations.

There must be more support for families, based in the communities where they live

- p.15** Nurturing and supporting families to stay together will take far more than what Scotland currently provides.
- p.46** Scotland's commitment to early intervention and prevention must be realised through proper, holistic support for families. There must be a significant upscale in universal family support services.
- p.48** Scotland must support a broad understanding of the importance of the early years of parenting.
- p.49** Scotland must ensure that there are places in every community for parents of young children to go for support and advice, to meet other local parents and to stay and play with their children.

- p.52** Scotland must support all families caring for disabled children and those with additional support needs. If families require intensive support they must get it and not be required to fight for it.
- p.52** Scotland must recognise that there are some families experiencing particular issues who are much more likely to come into contact with the 'care system'.
- p.55** Whatever issues families face, Scotland must ensure that intensive family support is available, proactive and characterised by the **10 family support principles** of intensive family support.
- p.57** Intensive family support must be geographically located in local communities, with the explicit intention of maximising the assets of the community and community-based relationships. Support must be explicitly connected to, or even housed in, locations that work for local families and the community, such as schools, health centres, village halls and sports centres. Scotland knows where this support is most needed. Communities must have a say in where support is located.
- p.63** Support for families who have had their children removed – If children are removed from the care of their parents, Scotland must not abandon those families. Families must continue to be provided with therapeutic support, advocacy and engagement in line with **10 family support principles** of intensive family support.
- p.51** Mental Health Services- Many care experienced children and young adults told the Care Review that they were unable to access mental health support at the point it was needed. They were often required to be 'stable' before

receiving a service, with long waiting times and limited services not providing what they needed.

- p.51** Children and young adults must not require a significant mental health diagnosis before they can access support. Mental health diagnosis is important and must be a supportive process, but diagnosis is not always a requirement to promote healing from distressing experiences. Barriers to accessing support can lead to people requiring a diagnosis before they access a service.
- p.51** Scotland must ensure that timely, trauma informed and thoughtful support therapies act as a cushion to all those that require it, regardless of diagnosis.
- p.51** There must be criteria free, community based access to therapies that do not stigmatise, but help and support children and young adults to work through difficulties they are facing.

Poverty must be addressed

- p. 18** Poverty - There must be significant, ongoing and persistent commitment to ending poverty and mitigating its impacts for Scotland's children, families and communities.
- p.47** The Care Review has not been able to ignore the impact of poverty on families and communities across Scotland. There is significant evidence that social and economic inequalities, particularly poverty and debt, increase the stressors in families and communities. Poverty can make parenting more difficult.
- p.17** Beyond the material aspect, poverty also takes a toll on children and adult's hearts and minds that can, in some

cases, increase the risk of interaction with the 'care system'. The stress of living in poverty can make family life harder – increasing anxiety and depression, damaging both mental and physical health.

- p.17** Socioeconomic disadvantage and stressful life conditions can drive parents to reach for perceived coping mechanisms that do more harm than good – problematic substance use, for example. Stress can raise the risk of abuse and neglect. Evidence shows that poverty generates stress which in turn has impacts on biological, physical and mental health.
- p.47** When poverty is combined with other issues such as mental health problems, domestic abuse or substance use, the challenges of parenting can be magnified. Families struggling to cope with poverty, poor housing, substance use and health difficulties may have little capacity to engage with services in order to make changes.

Safe and caring relationships must be prioritised

- p. 16** Scotland must broaden its understanding of risk. This is not about tolerating more risk, or becoming more risk enabling. It means ensuring Scotland has a more holistic understanding of risk that includes the risk to the child of removing them from the family. There must be a shift in focus from the risk of possible harm to the risk of not having stable, long term loving relationships.
- p. 17:** When children talk about wanting to be safe, they talk about having relationships that are real, loving and consistent. That must be the starting point. Scotland must

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- p.17** The Care Review does not underestimate the scale of the challenge or the natural instinct to protect, but Scotland must acknowledge that the current system of rules and safeguards has not served its children well. It will require strong leadership across and throughout the entire 'care system' to make the shifts needed.

Care experienced young people must be supported through transitions and onward into adulthood

- p.68** Any transition in a care experience child's life must be limited, relational, planned and informed.
- p.92** Young adults for whom Scotland has taken on parenting responsibility must have a right to return to care and have access to services and supportive people to nurture them.
- p.92** Older care experienced people must have a right to access to supportive, caring services for as long as they require them. Those services and the people who work in them must have a primary focus on the development and maintenance of supportive relationships that help people to access what they need to thrive.

- p.92** These rights recognise the pain and trauma that have often accompanied the circumstances of care experienced people's lives and mirrors the type of support that many families provide for their children. When young adults move on to independent living or need to return to a caring environment, all decisions must be made in their best interests and not on the strict application of age criteria.
- p.92** Aftercare must take a person-centred approach, with thoughtful planning so that there are no cliff edges out of care and support
- p.93** 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.
- p.93** There must be comprehensive thematic reviews of 'transition services,' and all those with ongoing parenting responsibility must be required to explain how they plan to deliver integrated services for care leavers to adulthood

Scotland must ensure that the way support is delivered does not stigmatise- the 'Language of Care' must change

- p.58** The way in which support is delivered must not stigmatise the family. That means there must be no uniforms, lanyards or branded vehicles appearing outside houses or schools to provide support. The basis of all support must be the

quality of relationships, not the professionalisation of the workforce.

- p.58** The language of family support must reflect normal discourse, and not be hidden behind professional language such as 'looked after child' ("LAC"), reviews and risk assessment. Overly professionalised language stigmatises families and acts as a barrier to engaging and supportive work.
- p.51** Access to timely, appropriate therapies must be available to, but not limited to, those who have experience of care. Limiting services to certain population groups not only stigmatises those people but creates a barrier to support that can have significant and unintended consequences.
- p. 69** Life Stories – Scotland must understand that 'language creates realities'. Those with care experience must hold and own the narrative of their stories and lives; simple, caring language must be used in the writing of care files.
- p.97** Language of Care – Scotland must change the language of care. Language must be easily understood, be positive and must not create or compound stigma.

#KeepThePromise

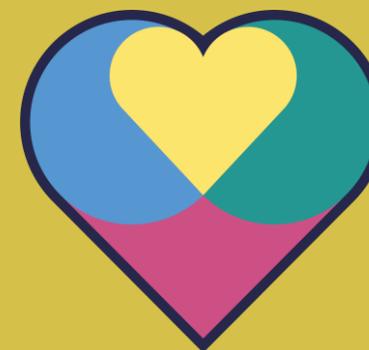
'The Promise' outlines an approach to family and to care that will mean that Scotland can truly be 'the best place in the world to grow up.' To achieve that, there is considerable work to be done.

This series of briefings is intended to support your organisation in thinking about what it means to #KeepThePromise. It should be used to help you to align organisational policies, strategies and practices with what the Care Review heard, and to identify what changes can be made to those, both now and in the future. The Care Review made clear that it is simply not possible to isolate any one aspect of the system. Therefore, these sector briefings should also help organisations understand who else they need to work with in order to make change happen.

To realise the ambitious scale and extent of change, The Promise Team will need the ongoing input and views of all those with responsibility. Please look at the #KeepThePromise **engagement document** to help you think about the work of change.

The Promise website will be regularly updated with information and resources.

For more information about what the Care Review heard about alcohol and drugs see the **Evidence Framework**.



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