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<b>These are the views of:</b>	<i>Welsh Women's Aid (Third Sector) - the national charity in Wales working to end domestic abuse and all forms of violence against women.</i>

### 1. Before care: Safely reducing the number of children in the care system

Please outline a **maximum of three** top priorities for radical reform of services for safely reducing the number of children in the care system:

Priority 1: *A commitment to focus on early intervention and prevention, to identify the needs of the child at the earliest opportunity.*

Welsh Women's Aid believe that there should be a commitment to a strong focus on early intervention and prevention, to support survivors of VAWDASV either who have children or who are children themselves. There are endless benefits to this, one being a possible reduction in the number of children who enter the care system. It is important that we all recognise the scale of the impact that entering the care system can have on children and young people, and that we always collaboratively work towards mitigating and limiting any trauma. There are many different stages in a child's life where there are opportunities for intervention, and there must be an embedded whole society recognition that there are different institutions- varying from health, education, community-based- , who have the collective access and resource to support children.

**Senedd Research** on Care Experienced Children found that there are over 7,080 children looked after in Wales, which is an increase of over 20% from 2013. The **NSPCC** have also highlighted that that there had been over 245,000 referrals to social services for domestic abuse in 2020/2021. The Social Services and Well-being (Wales) Act 2014 is underpinned by the importance of prevention and early intervention; however, some specialist services believe that not enough is being done for

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interventions to occur as early as possible, when it comes to children being witnesses and survivors of domestic abuse and and/other violence. Specialist services provide different levels of support to women and their children, who are survivors of domestic abuse, sexual abuse or violence. On average around 35 children living in refuge, within our member services, during 2021/22 were on a child protection register, meaning that they have had to flee their home due to the serious risk of violence and harm.

WWA believe that there needs to be a focus on even earlier intervention, so that children are being supported prior to reaching a specialist VAWDASV service and social services intervention. Early intervention and prevention are crucial in order to identify a harmful situation a child may be in, as promptly as possible. The best solution for the child should be prioritised and where possible and safe, the child continuing to reside with the non-abusive parental figure. Some specialist services have also identified that interventions, such as Families First, are often referred to by social services. This further highlights that interventions are happening too late when a situation has already escalated.

The Welsh Government Programme for Government 2021-2025 made a commitment to protect the interest of future generations and specifically to develop services for vulnerable people. In order to do this, there needs to be a commitment to identify areas for earlier intervention, such as through the education system or through GPs and wider healthcare. There must be appropriate funding and committed cross-sector working for this to be effective. Acknowledging and supporting the specific needs of an individual child at the earliest opportunity, sets an important precedent of the child's safety and wellbeing being centralised in decisions. Domestic abuse is a common reason why children enter the care system, and it is vital that intervention and prevention can happen at the earliest opportunity before a crisis point is reached.

Priority 2: A greater awareness, understanding and training on VAWDASV by all professionals who work with children, young people and their families; as well as developing the awareness and understanding of VAWDASV within children and young people, in an age-appropriate way.

This priority focuses on the knowledge of professionals who work with children, young people and their families and reflects the essence of the priority above. WWA believe that a greater

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understanding of VAWDASV will help professionals identify earlier when there is need for intervention and support. For early intervention and prevention to be successful in safely reducing the number of children in care, there needs to be societal and sector wide understanding of VAWDASV and the various ways in which it may present. In a report, [AVA](#) highlighted that there is a system wide lack of knowledge when it comes to domestic abuse and trauma between professionals. This has subsequently led to missed opportunities where early intervention would have provided children and young person with the support required.

Identification and Referral to Increase Safety (IRIS) is a GP based domestic violence and abuse training, support and referral programme which allows for early identification and referral to appropriate support. These are funded by either local health boards or Police and Crime Commissioners. A report published in 2022, highlighted that [96%](#) of IRIS service users felt safer after engaging with the service than before. This level of awareness and training across all professionals who meet children, young people and their families would help enhance identification of VAWDASV and when intervention may be necessary, at the earliest opportunity. We believe that the awareness of VAWDASV and early intervention is everyone's responsibility, and the only way to truly eliminate VAWDASV is through a whole society approach. To that end, all sectors must work together to keep survivors safe and supported.

When a child and their mother present at refuge, due to fleeing immediate risk of harm, they are already at crisis point, to reiterate our above point, early intervention and prevention may help to mitigate this. Therefore, we believe that it is essential that professionals who will meet a child and their family throughout their lives are able to identify signs of concern or where the family may need further support and guidance. [Evidence](#) submitted to the Welsh Government Children, Young People and Education committee provided by Voices from Care Cymru highlighted that many children and young people feel like if they had more help and support then they could have been able to stay with their family.

WWA also believe that children and young people should have an awareness and understanding of VAWDASV and the gender inequality that leads to it, in an age-appropriate way, and we have supported the development of Welsh Government's RSE curriculum to embed this into Welsh education. In our '[I trust Them](#)' report, our survey highlighted that the perception that abuse being experienced was normal was a common barrier for children and young people seeking support. This

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demonstrates how ingrained and normalised VAWDASV is within our society. This must be tackled throughout at all levels, and institutions- such as education- have a real opportunity to challenge harmful gender stereotypes, misogyny, and sexism in young minds and the upcoming generation, while also providing signposting and routes to specialist support for children when needed.

This need was further echoed in discussions with The National Youth Advocacy Service (NYAS), who highlighted that for children and young people who have grown up in an environment where there is domestic abuse, they may not realise that this was problematic or may not have the language to explain what was happening at home. NYAS also highlighted that alongside awareness of what a healthy intimate relationship is, they believe that it is important for children to understand what a healthy parental relationship looks like.

Welsh Women's Aid believe that it is vital for children to understand the foundational principles of all healthy relationships- such as respect, compassion and boundaries- whether these relationships are romantic, platonic, familial etc. This will help to empower children and young people to identify behaviours within their own relationships that feel unhealthy or are abusive.

Priority 3: **Commitment to reduce the post code lottery of service provision for Children and Young People by commissioning sustainable services.**

Welsh Women's Aid have campaigned for sustainable funding for specialist services, for many years. It is well evidenced that specialist VAWDASV services are struggling to meet increased demand that have arisen as a result of years of intersecting socio-economic factors such as austerity, Brexit, the Covid-19 pandemic and cost-of-living crisis. Welsh Women's Aid 'A Duty to Support', commissioned by Joyce Watson MS, identified a 'postcode lottery' across local authorities around how funding is categorised and spent on Children and Young People Services, leading to some children and young people in Wales reporting a significant impact on their ability to recover from abuse.

The report calls for an enquiry into the adequate commissioning and provision of specialist services for children and young people affected by violence against women, domestic abuse, and sexual violence (VAWDASV) across Wales.

The report found that only three out of 20 local authorities in Wales that responded to a Freedom of Information (FOI) request have a designated Children and Young People's Scrutiny Committee to examine the need for specialist support to children and young people.

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'A Duty to Support' highlighted that within services, only a small number of children and young people are accessing support even though around one in five children are exposed to domestic abuse. This indicates that not all children and young people are getting the support that they so crucially need. We welcome that the Welsh Government have included the objective that all victims have equal access to adequately resourced services in the VAWDASV Strategy 2022-25, however it is crucial that this objective is actualised for children and young people, and not simply remain an ambition to be worked towards.

There is currently a post-code lottery of service provision where different local authorities have different priorities, and consequently, the funding of children and young people specialist services is not given a consistent level of priority across Wales. The reality of this is that many children and young people may not be able to be supported by specialist services in a timely way, or may have fewer options, due to their geographical location. Our 'I trust them' report tells us that children and young people are also not accessing support due to a lack of signposting and gaps in provision, which subsequently leads to a lack of continuity and structure to support. It is unclear how the number of children in the care system can be safely reduce when there is not enough support provision available for those who have experienced violence and/or abuse. This intersects with many issues and sectors- a recent report approximated that around **5 children** in every class room suffer from a mental health problem, however **data** shows that in July 2022, over half of CAMHS patients waited over 4 weeks for their first appointment.

We believe that the reform of current services needs to focus on ensuring that specialist services are sustainably funded, to provide the important, consistent support children and young people require and deserve. Services current navigation of year-to-year short term funding, does not allow children and young people to access the end-to-end support they need. Providing specific, person-centred, trauma-informed support to children and young people, as early as possible, allows for the specialist services to work with their needs.

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## 2. In care: Quality services and support for children in care

Please outline a **maximum of three** top priorities for radical reform of services for children in care:

Priority 1: To ensure a greater understanding of VAWDASV and the impact this has on children and young people, and the recognition that children are survivors in their own right.

We believe that whilst children and young people are in care, professionals that work with them need to understand the different dynamics of VAWDASV. Children in care may have experienced, lived with or witnessed a myriad of different abuse, including but not limited to domestic abuse, sexual abuse or coercive control. It should also be noted that alongside domestic abuse, a large number of children may be living with parents who are also facing mental ill health or substance misuse. Children respond differently to living with domestic abuse, and trauma can present in a vast array of ways, [CAFCASS Cymru](#) found that some children may experience bed wetting and sleep disturbances whilst others may self-harm and engage in anti-social behaviour. It is important for those working with children in care to recognise that trauma from experiencing, living with or witnessing abuse can manifest in a number of different ways, at different stages of a child's life. This trauma must be approached in a way that does not further exacerbate it, which includes not stigmatising or stereotyping children and their experiences.

It is essential that there is recognition by all professionals that children are survivors in their own right. The [VAWDASV \(Wales\) Act 2015](#) clarified that children can be subject to VAWDASV, whilst [The Domestic Abuse Act 2021](#) further identifies that children are victims of domestic abuse in their own right. It is crucial that professionals have this understanding and inherently view children as survivors, in order to shift the narrative that they are not just a bystander in the situation but are significantly adversely impacted by the experience of living with abuse.

As the impact of VAWDASV can manifest at any time in any form, it is vital that children are not branded as 'acting out' or unmanageable. When consulting with NYAS, it was highlighted that all children who are in care will be dealing with trauma to some degree. Being removed from family and being placed within the care system is a traumatic process, but moving schools, finding new peers and attending meetings can further exacerbate trauma. It is essential that professionals understand

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that although the child is removed from the home and is subsequently seen as safe, it does not mean that they cannot be re-traumatised or further traumatised. Support must be provided for children and young people with the recognition that trauma is different for everyone.

Recognising that a child is a survivor in their own right, should come with the understanding that they can be vulnerable, and their levels of resilience may differ. [Care Inspectorate Wales](#) found that an increasing number of children are going missing from care and that there is a heightened risk of sexual exploitation. Our specialist services have further identified that those who have been in care, or are in care are at risk of sexual exploitation in childhood. If this is not appropriately recognised and individuals are not given the correct support, there are concerns that the child could continue to be exploited throughout adulthood. It is essential that there is an understanding that vulnerabilities can stay with the child into their adult years. We believe that it is fundamental that when a child enters the care system, their experiences of abuse and the complexities of their trauma are understood by all professionals in order to prevent further harm.

Priority 2: *A greater understanding of the importance of being trauma-informed, needs-led and strengths based by all professionals and foster carers who work with children and young people.*

[The Rights of Children and Young Person \(Wales\) Measure 2011](#) gives duties to Welsh Ministers to have due regard to the United Nations Conventions on the Rights of the Child (UNCRC). [Article 3](#) of the convention states everyone who works with children should always do what is best for each child and [Article 20](#) states that you should be looked after properly if you can't live with your own family. It is essential that what is best for each child should account for appropriate support to recover from trauma. Findings from a focus group conducted by WWA by those with lived experience of the care system, highlighted that there was a significant absence of trauma informed practice among professionals, which led to the exacerbation of further trauma. As we were told within the focus group; *"the trauma is just forgotten about we aren't given any sort of intervention"*.

When children are in care, they need to be supported to thrive and to heal from the trauma they have experienced. As evidenced by [Voices From Care Cymru](#), there is a need to understand that being taken into care is traumatic. It is therefore vital that the time in care is spent building relationships with professionals, accessing person-centred support and focusing on the removal of any barriers to

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recovering and thriving that the child may face. It has also been identified by specialist member services that, as addressed in priorities above the process of entering into care can increase children's vulnerabilities and the care system often leaves children vulnerable to further trauma; this may include engaging in substance misuse or risk of sexual exploitation. Any intervention or support provided for the child, must be based on their needs and not just what is available at the time. It is essential that the support provided does not disadvantage them any further, but works with their personal strengths to increase resilience.

It is therefore essential that all professionals working with children and young people understand the importance of being trauma informed, needs-led and strength based. The understanding that trauma is not linear and that it affects every child differently is essential. There must be specific awareness of working with children in an intersectional way. Children, as all individuals, are three dimensional and will have many needs, professionals must understand the complexity of each child. In discussion with NYAS, it was highlighted that services supporting mental health was of high priority for those who are within the care system. Those we consulted with believe that mental health support should be available for all children entering the care system and that this support is available for the duration of the time that they are in care and after care.

NYAS also highlighted that many children are often moved between placements, due to being labelled as unmanageable or difficult, but little is often done to understand the route of the child's discomfort and behaviour. Senedd Research [Statistics](#) show that around 26% of care-experienced children had two or more placements in the previous 12 months. The unsettled and insecure nature of these multiple placements could further exacerbate a child's trauma. If children are not given the support they need or a consistent environment, they face additional barriers to recovery and potential long-term impact on their health and wellbeing.

It is vital that all professionals and foster carers engaging with children have specific and regular training on trauma, and what a trauma informed approach looks like. It is fundamental that this is intersectional and addresses working with children who experience multiple disadvantages.

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Priority 3: Giving children and young people in care and adults with care experience a voice, to ensure that systems are led by them as experts by their own experience.

It is important that those individuals in care can guide and have ownership over their time spent within the system, including meaningful involvement in how much and what type of support they receive. Children within the care system are experts by experience and their contribution to how they are supported should be treated with the highest respect. It is crucial that Welsh Government commit to working with children in the care system to ensure their voices are heard in developing quality services and support, and in order to identify those systems and practices which are lacking and in need of improvement.

Care experienced adults should also be consulted continuously during and after the reform of care services. It is essential that they can impact the delivery of care provision with their valuable lived experience.

### 3. After care: On-going support when young people leave care

Please outline a **maximum of three** top priorities for radical reform of the on-going support provided when young people leave care:

Priority 1: Continuity and stability between the transition of child to adult support and services.

As the Welsh Government's commitment to developing services for vulnerable people, it is essential that support and access to services does not end when a young person leaves the care system. Although a young person is transitioning and then entering a new period of their life, this does not equate to a full recovery from trauma or a suddenly diminished need to access support that was building resilience and empowerment.

Trauma is not linear and can manifest in different ways and at different points in life. Children and young people are already facing a post-code lottery of service provision; therefore, it is essential that

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support they are receiving under children and young people services, smoothly transitions into adult services.

To reiterate earlier points, children who enter the care system are often vulnerable and the system in itself can exacerbate those vulnerabilities. It has been identified by specialist VAWDASV services that children who have been in the care system, are of increased vulnerability of sexual exploitation. WWA are the secretariat for the All-Wales Operational Group on Sexually Exploited Women, and the group has repeatedly emphasised the importance of transitional support plans for those who have been subjected to child sexual exploitation. It is crucial that their support continues into adulthood to prevent sexual exploitation, or any other form of VAWDASV.

Priority 2: A strengths-based approach, where care leavers are supported and empowered to take charge of their life.

There is very little data published on the lives of care-experienced children, once they have left the care system. It has been suggested that **Children in care** are more at risk of interacting with the criminal justice system in their early adulthood, and have lower rates of educational attainment at key stage 2 and 4. There are concerns that children in care are not being taught the skills in order to thrive and take charge of their life, when they leave care. **Evidence from Voices From Care Cymru** further highlights that children are not supported enough when they leave care, which can lead to involvement in unlawful activities in order to feel a part of a 'community'.

Some young people who have navigated the care system, may be experiencing trauma for a long time. We know that the trauma of any person who has survived VAWDASV can be complex and extensive, and can be triggered throughout their lifetime. When these challenging points in life occur, it is crucial that individuals have an understanding on what support services are available to them and how to access them, or, that they are able to continue with the similar support services to when they were in care.

This strengths-based approach of ensuring young people feel equipped to navigate life, can enable independence and ownership of life's direction.

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Priority 3:

N/A

#### 4. Anything else

Do you have anything else you would like to tell us?

N/A

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