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The See it, Say it, Change it project

The See it, Say it, Change it project aims to support children and young people in England to tell their side of the story to the UN Committee on the Rights of the Child as part of the forthcoming examination of the UK Government. It also aims to support them to campaign for change. The project is part of the Children's Rights Alliance for England (CRAE) and is funded by the Paul Hamlyn Foundation.

See it, Say it, Change it is led by a steering group of 22 children aged seven to 18 years-old from across England. This is a diverse group which includes children whose rights are most at risk. With the support of CRAE the steering group has carried out research with children and young people from across England to find out how well their rights are being met. This report is their submission to the UN Committee.

Some important information about this report:

The See it, Say it, Change it steering group has written the introduction and methodology sections of this report. The themed chapters were written by CRAE staff. The themes in the chapters reflect the concerns and experiences of the steering group and the key findings from our research. The steering group reviewed all the text, including quotes, and edited and approved the chapters. The recommendations were written by the steering group.

In the report "children" refers to anyone under the age of 18 while "young person" refers to those over 18.

We have tried to include the age and gender identity of all children who participated in the research when they are quoted in the report. However some children chose not to share this with us and their comments are marked as "anonymous".

The UN Convention on the Rights of the Child is referred to as the CRC throughout this report.

The UN Committee on the Rights of the Child is referred to as the UN Committee throughout this report.

Introduction by the steering group

In February 2015, a group of 22 children – aged seven to 18 from different backgrounds – joined together to work with staff from CRAE. There are nine boys and 13 girls in the group. The group is made up of children from different religions, ethnicities and sexualities from the North, South, East, and West of England. The group also includes disabled children, children who have faced homelessness, those who have grown up in care and children who face discrimination for many other reasons. We are the steering group for the See it, Say it, Change it project!

The aim of the project is to review the state of children's human rights in England. As part of this we wanted to find out what life is like for children and raise awareness about rights at the same time. Most importantly we wanted to highlight the ways in which children's rights are not being met and recommend changes that need to be made to the UN Committee and the UK Government. We think a child being able to have a say on how well their rights are being respected is an integral factor contributing to how well a child can live their life.

We have used our diverse range of skills and experiences combined with our determination and enthusiasm to create this report. After we submit this report to the UN Committee on the Rights of the Child in July 2015, we will begin to campaign for change on the issues highlighted in this report. We believe we can make a phenomenal difference for the lives of children in England!

Steering group members

Aaron	.age	16	L
Anmol	.age	18	Ν
Emma	.age	11	١
Gee	.age	14	F
George	.age	13	F
Hamza	.age	15	9
Jade	.age	11	9
Jamie-Lea	.age	14	9
Kishanna	.age	14	٦
Laila	.age	9	١
Leah	.age	10	Z

Liam	age 15
Mark	age 17
Meryem	age 15
Renee	
Rozita	_
Shailan	_
Siham	age 7
Sivitha	age 13
Tufa	age 8
William	age 8
Zakya	age 14

How have steering group members worked on this report?

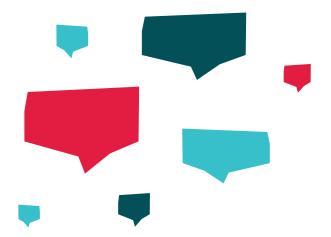
Our first meeting in London was an introduction to the *See it, Say it, Change it* project where we learnt more about each other and started to develop our campaigning and communication skills. We talked about some of the big children's rights issues that we are worried about and want to highlight to the UN Committee.

Our second meeting (a one night residential trip to a farm) involved us planning our research. The research had two parts: an online survey and focus groups. We worked with CRAE staff on the content of the survey and the focus group questions. We changed the wording of questions and made suggestions for extra ones. We also received training from CRAE staff and with their support we were able to develop our interview skills (predominantly for use during focus groups). Here we also separated into a few smaller groups such as the writing and editing group, the networking group and the social media team.

Once home we worked in our schools, (for example through assemblies and notices to pupils), and with our friends in order to raise awareness about the project, the online survey and focus groups. All of us were involved in promoting the online survey and many of us led focus groups.

We were really pleased that nearly 1,000 children and young people from all over England took part in the research. 137 children and young people took part in focus groups and amazingly 840 children completed our online survey! It was only set up for a limited time and we had a goal of 600 responses, however going over target meant we had more stories and opinions to hear and that our research was more accurate and reliable.

After the research was completed the steering group came together to look at the findings. We talked about what issues we wanted to highlight in the report. We looked at quotes and decided which ones to include and started writing our recommendations.



Methodology by the steering group

In order to come up with the findings and recommendations in this report we had to do a lot of research. We ran 16 focus groups and an online survey for one month.

Online survey

The online survey combined surveys on the topics of:

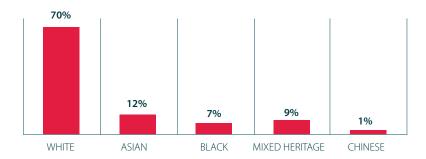
- respect
- freedoms
- family life and living in care
- education
- · health and wellbeing
- play and leisure.

840 children aged 5-17 completed the survey. Responses were received from across England from children from varied backgrounds and age groups. 12.5% of children said they were disabled or had special needs. Children did not have to answer every question on the survey. They were able to focus on the things most important to their lives.

REGIONS WHERE SURVEY RESPONDENTS ARE FROM



ETHNICITY OF SURVEY RESPONDENTS

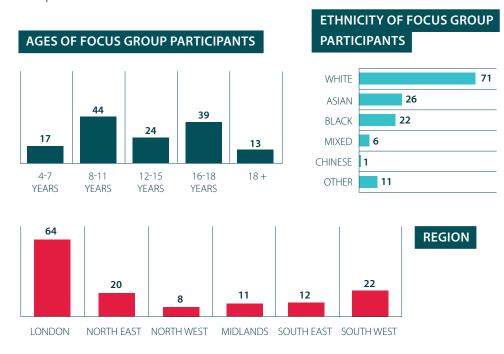


Focus groups

In our focus groups we targeted certain groups of vulnerable and marginalised children who do not often get their voices heard and for whom children's rights are particularly important. This included disabled children, children who have had contact with the police, have lived in care or in poverty or who are from minority groups including travellers. The discussions allowed children the opportunity to highlight what they felt was most important. We made sure that the questions in the survey and focus groups related to each other. We asked the same basic questions in each focus group. We also asked some specific questions in focus groups depending on the children we were talking to. At the end of the focus groups we had a chance to reflect on the discussions and think about what we wanted to highlight in the report.

137 children and young people participated:

- There were almost an equal number of males (69) and females (68) in the focus groups;
- 124 children were aged four 18;
- 13 young people aged 18+ who are disabled or have special educational needs (SEN) or who had been in contact with the youth justice system spoke about their experiences as children.



GROUPS OF CHILDREN WE SPOKE TO

- · Children with mental health issues;
- Children who are young carers;
- Children in contact with the family justice system;
- Children in contact with the criminal justice system;
- Children facing housing crisis;
- LGB and T children;
- Children excluded from school;
- Children living in poverty;
- Gypsy traveller children;
- Disabled children / with SEN;
- Separated children;
- · Children living in care.

Chapter 1: Respect

This chapter explores children's knowledge of their rights; children's experiences of discrimination – and the role the media plays in exacerbating discrimination and intolerance towards children through stereotyping; and whether their rights to be listened to and taken seriously are being met in a range of settings.

Our findings show that the CRC is not widely known (article 42). Discrimination is a common theme running through this report and comes up in many of the other chapters. Our research finds that a child's right not to be discriminated against (article 2) is not being met. This was a major issue when the UK was last examined by the UN Committee – clearly much more needs to be done to make sure this issue is addressed.

This chapter also illustrates a child's right to be listened to and taken seriously set out in article 12 is not being realised.

Knowledge of rights

Whilst some children we heard from in focus groups and through our online survey had some awareness of rights, knowledge varied a lot.

Of 819 children who answered the question "have you heard of the CRC?" 46% told us they had not heard of it and a further 10% were not sure. When asked "how much do you know about the CRC?", only 1 in 5 said "a lot". The majority of children (56%) said they only knew "a little".

When asked where they had learned about the CRC:

- 73% of children said they had learned about it at school;
- 16% of children said they had learned about the CRC somewhere else this included through charities, advocacy groups and youth projects they are involved with, through friends and from information on the Internet.

Whilst just over half of the children who completed the survey said they had heard at least something about children's rights and the CRC, the picture was more mixed in the focus groups. Some children said they did not know anything about children's rights and didn't think others did either: 'Nobody really knows about rights.' (Female, 17)

Certain groups of children in difficult circumstances felt that at key times they did not have the necessary knowledge about rights that they needed. One separated child said:

'When I first came to care I don't really know what I... if I had the right to say something or not. Sometimes I want to say something but I don't know that if I... I don't have the confidence to know if I have the right to say it or just keep it inside me, and I was not really happy... I didn't know I could make my decision because I was new in the area and I was new in the state...' (Female, 15)

^{1.} Separated children refers to children under 18 years of age who are outside their country of origin and separated from both parents, or their previous legal/customary primary caregiver

Another child commented:

I used to see my Dad, he used to force me to say bad things about my Mum, and, not see her as much as him, and fight against it. And if I knew that I had rights, then I would have stopped seeing him, but then my Mum explained what I did have and that I could say no. So...and then I stopped.' (Female, 9)

Even when children reported that they had been taught about rights they were still unclear about what they really mean, and didn't have full and detailed information. One boy said: '[I'm] unsure what they actually are.' (Male, 15). A 10 year-old girl told us:

'I don't think it gets advertised that much or properly. When it does get mentioned to kids, it's only little drops of rights, but not the whole thing.' (Female, 10)

Discrimination

Children told us that they are often treated differently because of who they are. This was one of the major issues that came up repeatedly in our research.

In the survey 54% of children said they thought a child's background and circumstances affect how respectfully they are treated and a number of factors were identified, which we explore further below. When asked "do any of the following things change the way children and young people are treated?":

- 60% identified disability;
- 52% identified religion;
- 49% identified ethnicity;
- 52% said the amount of money your family has;
- 49% said a child's sexuality;
- 47% said being in care.

'It shouldn't be this way but adults are too quick to judge and sometimes base the way they treat others on their own beliefs which is entirely wrong because nobody can be categorised with just one thing about them; they are much more than that.' (Female, 13)

Many children are often bullied because of these things - they may be discriminated against because of their race or sexuality and if they are disabled. Children from poorer families may be treated with less respect, as are disabled children. They are not treated as a person should be as they are not made to feel like people which is disgraceful.' (Female, 13)

In the focus groups discrimination against children in care was an issue that came up frequently. This is explored in detail in Chapter 4.

Age discrimination and discrimination in the media

Children told us that age is a factor in how they are treated. Nearly half the children in the survey said that 10-17 year-olds were most likely to be treated unfairly in comparison to younger children.

Children in focus groups said they had experienced being banned from shops. They described signs saying 'no more than two kids, two school children or two young people at a time' (Female, 16), and being watched with suspicion as well as being told to move on from public spaces. This issue is explored more in Chapter 2.

Children felt the media has a major role in age discrimination. In a focus group one child commented:

'Young people are portrayed like scum'. (Male, 14)

Only 20% of children in the survey said the media portrayed children fairly and they commented:

'Media stereotypes teenagers especially as badly behaving troublemakers which makes a lot of people look at us like we're dirt.' (Female, 16)

'The media often portrays teenagers as the "villains" and "menaces" of society. Teenagers struggle enough as it is and this massive amount of disrespect does nothing to raise selfesteem or help them thrive to be the best person they can be. It is downright rude to limit and ridicule a person just because of their age.' (Female, 14)

'Because they say that children are horrid vicious things when we are not.' (Female, 12)

Because sometimes they can be disrespectful about age and sometimes they don't listen to children as well as they do to adults.' (Male, 10)

In the survey children said that negative stereotypes of children meant that they were seen to be 'more likely to lie, or bend the truth' (Female, 14), which in turn meant they were less likely to be believed even in serious situations:

I think many people wrongly associate youth with naivety or social disturbances which is why many people often dismiss younger people and our opinions, including the police. I think this is due to the media's portrayal of young people.' (Female, 17)

'I know someone who reported a physical attack from their parent, and because of their age (13/14) it was dismissed. They didn't even bother to check for bruises (which were there) and simply picked them up off the street, where they had run to escape the parent, and sent them back home. This was only a few years ago. I believe this shows how the police don't take young people's reports seriously, and dismiss them as time wasters or immature liars.' (Female, 17)

Children also said they had experienced being discriminated against because of their appearance, reporting being accused of stealing or asked to move out of particular areas 'because I've got piercings' (Female, 17) or for wearing hoodies and trainers. This was identified as linking back to, and reinforcing, the role the media plays in portraying negative images of children.

Discrimination and mental health

Children who had experienced mental health issues felt they were often judged unfairly by others and blamed for their behaviour. Children told us that having a mental health issue sometimes affected other parts of their lives. One child we spoke to said she had not been granted a provisional driving licence due to her mental health condition while another child told us finding work was made more difficult because section 1362 showed up on Disclosure and Barring Service³ checks.

Children felt that there needed to be an increase in education about mental health to reduce stigma:

'I think raising more awareness of mental health and getting mental health out there a bit more...Just to make mental health something normal to talk about, Just make it something less alien.' (Male, 17)

Younger children (aged seven to 11) said sometimes it was hard to be understanding of children with anger issues or Attention Deficit Hyperactivity Disorder (ADHD) in school as they just seemed to be being naughty. However, they thought that if they learned about these issues in school it would help them to be supportive and understanding.

^{2.} Under Section 136 of the Mental Health Act a person of any age can be detained by police and taken to a

^{3.} Disclosure and Barring Service Checks are required for particular types of paid work or volunteering including working with children and working in healthcare

Discrimination due to ethnicity and religion

Race and religion were repeatedly highlighted by children in the survey as reasons why children are discriminated against. They told us they felt ethnicity and religion affected the opportunities they were given and the amount of respect they were treated with:

'If you are from an ethnic minority you get treated rudely and get disrespected.' (Male, no age given)

'Because I am Muslim I don't get the same opportunities as other people.' (Female, 14)

'I think if you're white and wealthy and Christian you're likely to be more respected.' (Male, 15)

Children said the media exacerbated this type of discrimination:

'Currently with the Islamophobia present in our media today people are not being treated with respect and dignity that they deserve.' (Female, 17)

Discrimination against children from poorer backgrounds

In focus groups children said bullying in school is often based on how much money your family has:

'To be completely honest it seems like the poorer people don't get treated as fairly.' (Male, 16)

This was also the case in the survey:

'You're bullied for being poor.' (Female, 13)

'Coming from a deprived area in London and growing up in poverty, I feel like I am not treated with respect and equality but instead I am dismissed and pushed aside due to my class background. I feel this in all aspects of my life. I feel like the current political system is apathetic towards my views and needs based purely upon my place in society.' (Female, 17)

Survey respondents identified factors associated with income such as where you live and 'buying your clothes from a really cheap place' (Female, 11), as factors affecting how fairly children are treated. Poverty is explored in more detail in Chapter 5.

Discrimination against disabled children and young people and those with SEN 60% of survey respondents said that being disabled changed how you are treated by others:

"...I have met a lot of disabled people inside school and outside school, I listen to their views and comments about their life in school and outside school. They say to me that they are being treated very differently because they are different." (Male, 16)

Disabled children and young people we spoke to in focus groups talked about being treated differently by others. They highlighted a lack of understanding and knowledge around disabilities and suggested this reinforced the discrimination they experienced.

Disabled children told us that they often feared abuse in public places from other children, including parks, round alleyways, and on buses. One 17 year-old disabled girl said this meant she did not feel safe in her local area.

Being listened to and taken seriously

Being listened to and taken seriously by adults was a major theme in the research.

Lots of the children who responded to the survey said some adults listened to them and took them seriously but this varied depending on who they are:

- 88% felt that parents did;
- 80% felt that doctors/dentists and health workers did:
- 69% felt that teachers/lecturers did:
- 39% felt that librarians did;
- 20% felt that MPs did.

Of the children who had a social worker, only 40% thought they were listened to and taken seriously.

Of the children who have a Reviewing Officer, only 25% thought they were listened to and taken seriously.

Of the children with a paid carer, only 24% thought they were listened to and taken seriously.

Of the children in contact with Youth Offending Services, only 22% thought they were listened to and taken seriously.

The survey also showed that nearly a third of children had hardly ever or never had a say in decisions that affect their lives. Children told us they were more likely to have been involved in some kinds of decisions than others:

	% of children who said "yes" they had been involved in decisions about
Changes to your doctor/dentist's surgery	19%
Changes in your local youth club	20%
Changes to the play/leisure facilities in your area	28%
Decisions about where you live and who you live with	43%
Decisions regarding your education	55%
What you need to make sure you have the best possible childhood	58%
Which school you should attend	64%
Changes in your school	61%

Children in the focus groups also talked a lot about not being listened to properly and feeling like they were unable to participate in decisions about their lives. This was a particular issue with schools and teachers, social workers and social services, and the police.

Further exploration of participation rights in particular circumstances takes place in subsequent chapters.

Chapter 2: Freedoms

This chapter explores issues around children's identity and freedom of expression; freedom of association; availability of accessible information so that children can make informed decisions about their lives; and privacy.

The findings show that many children do not have their rights to freedom of expression and religion respected (articles 13 and 14), especially children in foster care placements; and transgender children who report a lack of support around gender identity issues.

Children also report being treated with suspicion and regularly asked to move on from public spaces, in breach of the right of freedom of association (article 15).

Many children find it difficult to access information that is easy to understand in a wide variety of circumstances, especially children with SEN, in breach of the right to access information (articles 13 and 17).

Children also reported that their privacy rights (article 16) were not always respected and they were asked to discuss personal matters with other family members present, making them feel uncomfortable.

Right to identity

Foster care

A key issue for children we spoke to was being put into foster care placements that denied them the right to express their own identity. We found evidence of children being denied expression of their sexuality, culture, language and religion in such placements.

A 15 year-old boy described how when he was 13 years-old he was put into a placement with Christian foster parents who he described as 'strongly religious'. He explained that he was extremely unhappy in his placement as he didn't get on well with the people there:

It's because of my sexuality. They didn't really agree with, about who I was and what I believed in...I was getting bullied so much where I was you know, always staying in my room. I never went downstairs. I told my social worker. He said, yes, he'd talk to them about that. And he never did and I mentioned it to him so many times.' (Male, 15)

He was unsupported by his social worker over an extended period. He felt that his sexuality:

'Was constantly an issue. That's all they talked about when I went down, I didn't even eat tea with them anymore because they just constantly brought it up as an issue... And they even tried making me go to church and everything. I said no, because you're not allowed to do that. But it was a constant thing. My social worker just did nothing about it.' (Male, 15)

This raises concerns regarding appropriate placement of children and levels of support and response from social workers. Children we spoke to expressed frustration that they were placed in a foster care setting where they felt afraid of being themselves:

'But you shouldn't be put in those situations...And you shouldn't have to be scared to say... who you are.' (Male, 11)

Separated children who are refugees or seeking asylum told us about difficulties they encountered in foster care including being told they were not allowed to speak their home language in the house and criticised for practicing their own religion:

'My old foster carer was Muslim. I respect people's religion and I want people to respect my religion as well. I'm a Christian and she's Muslim. You can't make me do what Muslims do. Its two different people, but I respect that, and when it's... sometimes you want to give a complaint because you might give a complaint to your social worker. Your social worker is going to go home, but you'll be the one to deal with it inside.' (Female, 16)

'You know, I speak to him [his foster brother who is also Albanian] in Albanian or something in the house, and she starts complaining about this: (Male, 15)

'At the beginning I was new and I thought, this is London and I can be heard and I could say my opinion, and when I decided to say my opinion and to say what I think... my relationship with my foster carer was going down and down very low, and I understood that that's not a good thing...And then I decided to keep things inside of me.' (Male, 15)

Transgender children

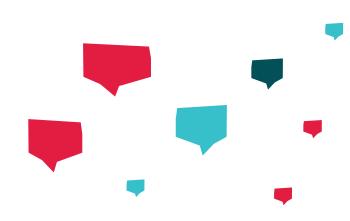
Transgender children talked about hidden costs associated with choosing a different gender identity. In addition to costs such as new clothing there are specific costs such as a "binder" (for trans-male) and bras (trans-female). They also explained there are significant costs to change essential identity-related documents such as passports, birth certificates and bank details. One young person said 'the cheapest you can get it [official name change] done is £40, and your driver's license is £60, your passport £80' (Male, 18). Other children told us they had been forced to go to the bank to change their details after running up large telephone bills trying to explain what they needed to do. In some cases staff at banks were not sensitive often repeatedly asking them why they wanted make changes:

"... So they ask you why are you changing your name... and there's a queue behind you and you are right in front [of everyone]...' (Male, 15)

Other difficulties experienced by transgender children are examination boards not allowing children to change their gender or name on exam certificates. One young person said there should be better support to help transgender children deal with these things:

'A leeway package you know you talk to one person who deals with your case and you sort it out?... each piece of ID with you so you know it's all...taken care of in one cost... if one person was doing it you know with you or for you.' (Male, 20)

Transgender children we spoke to also suggested that the lack of support and guidance for parents and carers put further pressure on family relationships.



Freedom of association

Intolerance of children in public spaces

Over a quarter of children (27%) who responded to the survey said they had been asked by an adult to move away from a public place when hanging out with friends. Children in the survey commented:

'My friends and I were standing by the promenade... and we were rudely told to "get out of the way" as we were disrupting the peace. It made me feel extremely invalid and as if nobody cared about me. I also felt very, very angry. Why should I have to move when I was only having a polite and dignified conversation with my friends?' (Female, 14)

'Was stood under an underpass that had someone's flat above because it was raining. We got asked to move and called a gang!' (Female, 16)

'... Made me feel as if I was up to no good although we were just standing aimlessly not causing trouble.' (Male, 13)

'I have been moved along [by the police] for waiting for a friend on a corner because we looked to be a danger to the public or could cause issues for the general public when we weren't doing anything wrong.' (Male, 16)

10% of children who completed the survey had been affected by a Mosquito device and described what this was like:

'Borderline painful high pitched sound coming from a house on my street. Have to walk past there to get the bus.' (Female, 14)

'I was trying to get into a shop but there was a horrible high pitched noise.' (Male, 13)

'A house in an elderly residential area, it irritates my hearing and thought process as it is so high pitched but adults are not aware of the horrific feeling it makes you have.' (Female, 17)

Contact with the police

When asked "have you ever had any contact with the police?" 40% of survey respondents said "yes". For the majority of these children, contact had been through a visit by a police officer to their school. Smaller numbers of children had been in contact with the police in other ways:

- 4% had been in court;
- 6% had experienced stop and search;
- 9% had been moved on by the police;
- 9% had been in trouble with the police.

Many children who responded to the survey were positive about relationships with police - 45% of children said they felt the police have a good relationship with young people and 47% said the police do a good job of dealing with crime committed by young people. However, 8% of children who responded to our survey felt that the police harassed children.

Children we spoke to in focus groups who had had contact with the police felt they were regularly harassed by the police because of their age. This seemed to be a particular problem in urban areas. One boy described being stopped all the time 'for no reason.' (Male, 15)

A 15 year-old boy with SEN said he had been stopped and searched 14 times in the last year while another child said he was stopped on average every three days:

'They would stop me and say can you empty your pockets.... And then they'll stop and search me...I haven't done anything wrong. It happens constantly. They just don't give me a chance, they're just expecting I'm doing something.' (Male, 17)

'I would never be like no you can't search me because I know what they're like, you get searched anyway. They would find a way to detain you, if you argue back.' (Male, 16)

Children described being stopped by the police as frightening:

'They have a look on their face and you just can't stop them. It's just really scary.' (Male, 16)

They also think the police stop them unfairly:

'They are liars all of them...They say something happened and they [the suspect] were wearing what you're wearing and then you hear on the radio when someone is ringing in and they say have you found the suspect wearing a grey top or something like that and black cap. And I'm wearing a red top with no hat and they still stopping me.' (Male, 15)

Children said they are likely to be targeted by police if they are wearing particular clothes – in particular hoodies, tracksuits and sportswear. Children told us that they are sometimes stopped and threatened with arrest and forced to give information to the police even if they had done nothing wrong. They also felt they were not taken seriously by the police:

'My Dad was married to...a person...she used to hit us a lot and abuse us a lot. When I got home the police were there... She started saying stuff so I went for her. Police arrested me for assault and breach of the peace. I was 13. They didn't really listen when I tried to explain and I stayed in [a police cell] overnight.' (Male, 15)

Gypsy and traveller children said their experiences of the police were largely negative and associated the police with having to move to another site.

... We have to move every time if we see the police.' (Female, 9)

Moving was described as always a "surprise" and often happened very late at night, or early in the morning. Some children described being forced to move sites several times over a series of nights:

'All of us were getting ready to go to bed and then the police came down, and then we had to go that night. It happened nearly every day.' (Female, 8)

Children in both the focus groups and the survey said they hadn't been asked how to improve relationships between children and the police. Only 8% of children in the survey had been asked about this. Children in the focus groups had various suggestions about how to develop trust between children and the police, including more opportunities for police and children to meet and talk, and specific education and training for police officers:

'I think there should be a lot of education on how police should treat children and young people, and not automatically think they are criminals...' (Male, 15)

Access to information

Many children we spoke to described difficulties getting the right information in order to make informed decisions. Information was often inaccessible and explanations difficult to comprehend.

Children whose families did not speak English as a first language described difficulties in getting information that could be understood by their families especially around health care and court proceedings. One child who had experienced mental health issues told us:

'My mum didn't believe in mental health issues or know anything about them...especially not for children. She couldn't read any of the information or talk to anyone. It was hard because I was ill and didn't really understand what was happening either.' (Female, 16)

One young person who had had contact with the family justice system told us that some parents or carers don't understand how court proceedings work due to language barriers. This often put pressure on children to have to explain complex and potentially upsetting information to their families.

Disabled children were critical of hospitals for not being child-friendly and felt they were particularly bad at meeting the needs of children with SEN in relation to accessible information. Medical information was often hard to decipher and writing too small and confusing. Some disabled children said understanding such information is especially difficult if you did not have a parent to support you or if your family did not speak English as a first language.

Children living in residential care said they are not always given access to their file when requested. This led to a feeling that 'everyone knows you except you.' (Male, 15)

Children described how some issues that had affected their lives were never properly explained to them. Children with family members in prison reported this as a key issue. One child explained he had not been informed about what was going on and could not understand what had happened to his cousin who was in prison:

'I hear my family talk about him [his cousin], but I just don't get involved, but I listen. Sometimes I just make a sad face, because everyday I think about him, and I miss him.' (Male, 11)

Children in care said they failed to get access to information regarding key decisions in their lives. One child described an incident in hospital where he woke up to find two adults he did not know next to his bed:

It was actually a bit of a shock because I didn't even know who it was, I saw they were strangers right next to me. And I didn't really get to say much because I was still quite shocked. And they were like "And we are going to be your carers now and we're going to look after you". And I was thinking I didn't want to go and they came and picked me up.' (Male, 13)

Children in care also felt that their social workers sometimes gave them incorrect information. Examples included a child being told that a parent could not attend a contact session because she had "car problems". The child subsequently found out that from a sibling who lived in a different care placement that they parent had not been having "car trouble" and had attended the contact session as planned. Another child was told that he could not see his father as he was ill but later found out that he was actually drunk. Children in care said they would rather be told the truth so that they can learn to deal with the situation.

Children reported not being given information about what was happening when they had mental health issues or about medical care they were to receive. For example:

'I was 11 years-old, spending two years away from home, away from family, not knowing... But I didn't even know what mental health was...I had no idea about mental health services. I had no idea about what I was going through... I thought I was going to be away for two weeks and then it turned out to take away two years of my life.' (Female, 16)

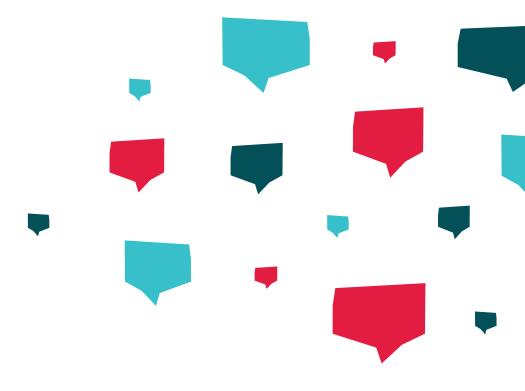
Children also said that medical staff sometimes did not communicate clearly with their families, particularly where families had English as an additional language, or had little knowledge or understanding of mental health conditions. There were few resources or methods of support to address this.

Invasions of privacy

Privacy was identified as an issue for children in care during health-care assessments and in placement reviews. Children told us that these were sometimes carried out with siblings and foster carers present. In this example an 18 year-old girl told us about a health assessment she experienced whilst under 16:

'Well we had them in the same room. Me and him. They're asking me questions like are you pregnant? What if I was? I'm not going to admit that in front of my foster carer and my brother.' (Female, 18)

A lack of respect for privacy was also an issue at placement reviews because foster carers were present making it hard to speak openly about any issues of concern: 'So they'd ask if you're happy in your placement and I couldn't say "I hate it here", when your foster carer is sat there.' (Male, 16)



Chapter 3: Violence against children

This chapter explores violence and neglect against children. It also looks at the use of force on children in school exclusion settings, during arrest and whilst being sectioned under the Mental Health Act.

The findings show worrying infringements of a child's right to be protected from all forms of violence (article 19) and failures to provide extra protection for children who do not live with their families (article 20). It also finds evidence of a child's right not to be subject to degrading treatment and punishments being breached (articles 37 (a) and 28.2).

Neglect, harm and abuse in foster care

Our research highlights particularly concerning issues for children living in foster care. As well as being denied rights to their own identity (Chapter 2) children are vulnerable to neglect and physical harm.

Children told us in foster placements where they didn't feel safe they felt the need to try and protect themselves, for example one child told us he 'always used to sleep with a knife near me.' (Male, 16)

One 16 year-old boy described his experience of neglect in foster care:

'With the carer as well as the social worker I was let down. I was left out. It was last winter I was there. I was left out in the snow for almost two hours, two and a half hours. I rung my social worker. Can't answer. I ring him in half an hour and 45 minutes. Then an hour. Then he still said "I'm not a taxi service, I'm not coming to pick you up." And I was standing there for two and a half hours. Wouldn't give us a key. Wouldn't give us a key to the house even though it was meant to be our home... For three years me and my sister stood outside the house till half five. My school was literally across the road. I was home by 3.25...Two hours I stood outside the house. No coat. Middle of winter. Snowing. Me and my sister.' (Male, 16)

A 13 year-old boy described to us how his foster carer became angry and locked him out of the house at night in his pyjamas and without shoes:

'He locked the gate so I ran away. And he didn't even notice for about two hours I was gone...He was just on the sofa, wasn't even looking for me or anything...And it was really cold...I was in my pyjamas... And I saw one of my friend's mum... And it was two o'clock at night and she actually rung the police. And they just said "Oh, you locked yourself out kid." (Male, 13)

In many examples children reported issues to social workers but were not believed, leaving them in situations where abuse continued to happen: 'They didn't even believe me, they believed my carer. And he did it again the next day. And he just kept doing it.' (Male, 13)

This left children in foster care living in situations of risk and fear: 'You shouldn't be put in them situations...You shouldn't have to be scared.' (Male, 16)

Another child described how when he was eight he was subjected to regular physical abuse in his foster home from a child the family had adopted previously:

'They had him from...at four months old I think adopted, he used to beat me up well bad all the time. And obviously because they were so protective over him that whenever social workers and that came round, it's "oh, he does it to himself"... I started to run away loads, trying to run away back to the city where I grew up...' (Male, 15)

Children in foster care placements told us their foster carers did not pass on pocket money, or allow them money for clothing or basic necessities:

'She never bought us clothes. Never bought us food. Never gave us money for buses or transport to do anything.' (Female, 18)

Other children said that after complaining they did get money but only £200 to cover four years of their life with foster carers.

Separated refugee children and children seeking asylum living in foster care also raised this issue:

'She told me, what do you do with the rest [of the money]?... and I told her, I'm just saving them up and I want to buy a phone. My birthday is coming and I want to buy a phone.' (Male, 15)

In this case when the child came to access the money he had saved he was told: 'that money is just for saving now' (Male,15) and never received it.

Some separated children told us they were unaware that they should be getting money and that their foster carers were taking it:

'... My weekly allowance, my money, she was not giving me. Because, I didn't know...she would just take everything and I didn't know anything, she was just taking everything. (Female, 16)

Violence in school exclusions, arrest and custody

School exclusion

Children we spoke to suggested that restraint is often used inappropriately in Pupil Referral Units and as a way to implement further punishments:

'I got put into a behaviour school and they used to put you in restraints like that and then if you used to struggle it used to leave burns on your arms and that and then if you struggled you went into a... a... isolation room.' (Male, 15)

The use of isolation rooms is explored further in Chapter 7.

Children in the focus groups talked about their experiences of being arrested and sometimes being subjected to intimidation. This included being driven around for unnecessarily long periods whilst handcuffed, and the police officers driving the vehicle discussing how the police station could be "rough". Children who had been arrested reported that force was often used unnecessarily even when they had been cooperating with the police:

'I didn't do anything, I was walking with them and they were dragging me.' (Male, 16)

'I've been in my house before and pushed onto the sofa and both my arms behind my back and cuffed for no reason. ...if you'd just ask me I would have given you my hands myself but you've genuinely used force on me and there's no point. Look at me I'm tiny, why would you need to use force?' (Male, 16)

Children described experiencing pain when handcuffed. A 14 year-old boy told us how his hands were tightly bound behind his back one on top of the other causing him pain. Some children told us that the police tried to humiliate them when they were being arrested by commenting on their personal appearance: 'you've got a big arse and stuff... you're short.' (Male, 15)

The children we spoke to also described the threat of violence from police carrying Tasers as 'really frightening' (Male, 17). A 17 year-old boy described the experience of having a Taser drawn on him and used on another child he was with:

'I just saw the little dot there and... I just went all warm, scared, I thought I'm going to get hurt now, I'm going to get a shock in a minute. They just stunned him and he was flopped on the floor. But the noise is mad, I don't like it, it scares me the noise' (Male, 17)

Children feel the police need to change the way children are arrested. One 17 year-old boy said at age 14 he was held for three days without charge: 'I was sitting there for three days in a sweat box'. (Male, 14).

Police detention and custodial settings

There are different types of custodial settings for children – Secure Children's Homes, Secure Training Centres (STCs) and Young Offender Institutes.

We spoke to children who had experienced these settings both for short periods of time whilst awaiting a court hearing and for longer periods after being sentenced. Children specifically highlighted issues relating to violence and abuse from staff in STCs housing children from 12-17:

'But yes, it's not a very nice environment, it's very corrupt. Staff bringing stuff in, it's not very nice. Even when you're getting restrained or something, staff always get cheap punches in and stuff like that, it's just what it's like... There's always someone there trying to put you down.' (Male, 17)

Children who had been detained also identified physical abuse from other children as a big issue: 'If you go in and you're very quiet you get beaten up, if you go in there and you're too loud you're going to get beaten up.' (Male, 17)

These issues were identified as leading to self-harm, depression, anxiety and in an extreme circumstance, attempted suicide:

There was a kid that tried pegging himself when he was in there. He did hang himself but he didn't die. And another kid in the part I was in that was always cutting himself, punching walls with hands... it was just not nice.' (Male, 17)

Children who had been locked up felt there was a lack of support for their wellbeing, describing teachers who were present during school hours as the 'only people you can speak to and even when you speak to them they're not going to listen too much.' (Male, 17)

There were concerning findings relating to a lack of support for younger children both during arrest and in detention. An 11 year-old boy described how the police did not give him a chance to make a statement but sent him to 'prison' calling him 'a little robber'. No one explained where he was going, why, or for how long he would be held. Arrival at the secure unit was distressing:

'I just heard lots of shouting of children....and the one of them was crying and one of them was kicking the wall or banging their head on the wall...' (Male, 11)

Those who had experienced detention told us there is an urgent need for better staff and more accountability to reduce a sense of isolation for children inside:

... More professional people that need to watch what goes on... Potentially it's that feeling there's someone there that could be approached... There's a massive sense of isolation.' (Male, 17)

Violence used in sectioning under the Mental Health Act

Children who had been compulsorily treated under legal "section" or had had contact with the police because of their mental health told us that sometimes their rights were not respected:

The police, God, they can come and detain you whenever they want…I'm sure they can't but they do...'(Female, 17)

'I would love for the police to have more training, I would absolutely love it, it doesn't always come down to training, it comes down to the person and them not treating you like shit. And that's ... you don't have to have training to do that, you can just be a nice person...' (Female, 17)

Children reported being held in handcuffs for up to two hours and being left in cells overnight without charge or referral to hospital. Some children also believed they had sometimes been placed under section in order to justify the use of restraint by the police who otherwise would not have had grounds for this to be used. Others told us they had not been given access to food or water:

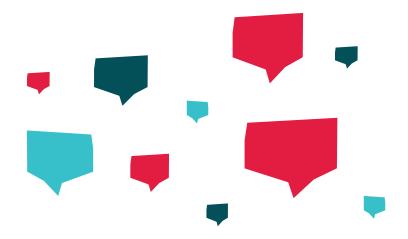
'I was in a police car for six hours, they didn't feed me' (Male, 17)

Children said they felt the police often used an unreasonable amount of force when placing them under arrest or section and said that the approach of police must be improved:

I totally understand why the Mental Health Act is there I just think that sometimes they should weigh up whether it's detrimental to the patient before they go in all guns blazing.' (Male, 17)

'Get young people to train police officers more around mental health. I don't expect police officers that are going to arrest you to give you a therapy session but they need to learn to respect boundaries'. (Male, 17)

'I think that the police need to realise that underneath, when they're not in uniforms, they're human beings too. I think that they get a bit too authority...it's not like we've committed a crime or anything...it's not like you're a criminal and its not like you're a victim of crime; you *just need someone there...*' (Female, 17)



Chapter 4: Family life - living in care

This chapter focusses on life in the care system. Issues addressed in this chapter include children's voices in the care system; relationships with social workers; and lack of support for young people leaving care.

Other issues relating to family life, mainly in relation to welfare, social security, social welfare and housing, are addressed in the next chapter. The experiences of children in care in the education system are addressed in Chapter 7.

The findings show that children in care do not always have their participation rights respected (article 12) both in relation to their care plans or when raising issues of concern. The research also indicates that some children do not have their care and placements reviewed adequately (article 25) and many children report their right not to be discriminated against not being realised (article 2).

Children's voices in the care system

Through the focus groups we spoke to children in foster care, residential care and supported accommodation living in different regions of England. The children had been in care for different periods of time – from eight months to 11 years.

In England all children living in care should have a care plan, a document outlining who they should live with and how they should be cared for. It is good practice to involve children in the writing and make them aware of what is written in the document. Yet 16% of children who responded to the survey on life in care said they did not have a care plan while a further 53% didn't know if they had one. Of those who did have a care plan, only 19% said they were involved in writing it. A quarter of children said they had not been involved in writing their care plan, and 54% were not sure if they had or not.

Many children living in care said that they had been asked their views on having contact with parents (62%), siblings (56%) and grandparents (56%). However fewer children had been asked their views on where they would be living (41%) and who they would be living with (43%). A third of children said they were not happy with decisions made about where and with whom they live.

65% of children in care who responded to the survey said they wouldn't know or weren't sure how to make a complaint about any aspect of their care.

Relationships with social workers

Many of those in care said they are not listened to by social workers, it was very dependent on if you 'got a good one' (Female, 18). This was a particular issue for children who were not living with their families or were living in abusive situations. Children expressed frustration and disappointment at not being listened to:

'We just didn't see eye to eye... she never listened to what I said. I would be half way through a conversation with her, she wouldn't listen...put the phone down. Before you even said bye. It's wrong it shouldn't be like that, it should be spoken both ways, they need to hear our voice as well as us hearing their voice, do you know what I mean? They need to put stuff in place for us, they need to listen to what we want as well as for us to listen to what they want for us and what they think is best for us.' (Female, 17)

Children felt social workers were not there when they needed them most and not around to listen to and support them when they were going through difficult times. They described feeling abandoned by social workers and that social workers did not support them in the ways they needed:

'She's telling me on Monday and went on leave the day I moved and was away for two weeks. So I think I can tell you social workers don't really think about things. And they go off too often.' (Male, 16)

'They never answer the phone.' (Female, 17)

'My social worker wasn't there when I needed them most.' (Female, 14)

'Going into care can be for traumatic reasons and I honestly don't think I've gotten enough support for that.' (Female, 14)

Many children described feeling frustrated at having to retell painful experiences because their social workers changed on a regular basis. One child said:

'You start building bridges with your social worker, they just switch them...they switched my social worker like there's no tomorrow.' (Male, 13)

Children said retelling their story on multiple occasions makes them feel traumatized and like they couldn't be bothered to tell their social workers what was happening in their lives.

Children reported difficulty in building trusting, respectful relationships with social workers due to high turnover. One child told us that she had had 'a consistent train of really awful social workers' (Female, 17). Among the worst examples we came across was a child who had had seven different social workers in 21 months and another who had 20 social workers over 11 years. Some children specifically attributed high turnover of social workers to use of agency staff.

High turnover often led to disillusionment and disengagement with support services as well as feelings of abandonment:

'And it's wrong, because then it means, yes, every time you get a new social worker, every time you get a new worker... you have to build it all up all over again. And I'm actually sick and tired of building and building and building...' (Male, 13)

Children with experience of care were also very critical about the regularity of placement changes and the way such changes were handled by social workers. Children often moved with great regularity. One 12 year-old girl had changed placement four times in just eight months of being in care.

Some children were particularly concerned that when issues arose in foster care the response was to move them as quickly as possible, rather than giving the child and foster carer an opportunity to resolve the matter – as might happen with a "birth" parent. They found this frustrating and upsetting.

'You know before you go into care they make you work it out with parents and they'll come in and give you interventions and stuff... Why can't they do that with foster care?' (Male, 13)

Children felt that no one would remove their own children so quickly: 'They wouldn't do it with their own kids' (Male, 12). This exacerbated a sense of not being with a "birth" parent and disappointment at differential treatment. Children said it would be good if social workers supported them to 'work through it with foster parents'. (Female, 16)

Some children therefore expressed a preference for residential care as they felt more secure in this setting:

I could say, literally me and a member of staff could have the biggest argument ever.... I could say some horrible things, nasty things and, you wake up in the morning, everything is fine...people don't ever carry anything on and you obviously know you've still done wrong but they would never carry on and come back and hold a grudge against you or anything.' (Male, 15)

Children reported changing foster care placements is not always handled sensitively by social workers. One young person described how it felt like they had 'dropped a bombshell on me' (Male, 16) when he was told he was moving suddenly. Another example was given from two siblings who had been in a foster care placement for over five years. They had requested to move but still wanted to maintain a good relationship with their foster family. However the way their social worker communicated with their family resulted in them being 'kicked out two days before Christmas'. (Male, 16)

'It isn't fair telling a child that you are going to be moved to another placement on two days before Christmas. You know 23rd December, 7 oʻclock at night.' (Male, 16)

Another issue was the use of adult temporary accommodation when a foster placement or residential care is not available. Such accommodation is sometimes also used to house adults recently released from prison. One 17 year-old girl told us: 'I was in a B&B for 17 weeks – with smack heads...adult smack heads. Paedophiles, murderers, everything.' After this period the girl was re-housed in a residential care home for children.

Hierarchy of care placements

Children living in residential care described feeling stigmatized in relation to all children including those in other forms of care. They describe a hierarchy of care placements - adoption being the best followed by foster care and lastly residential care, which was seen as 'a last resort' (Male, 15), despite being a preferred alternative for many children we spoke to.

Children we spoke to felt that the media played a role in the stigmatization of children in residential care, especially popular children's programmes such as "Tracy Beaker", which depicts life in a care home referred to as "The Dumping Ground".

Children we spoke to who live in residential care felt that the amount of paperwork that is required to enable simple recreational trips to take place could be a reminder that they were not in a usual family setting, although they were sympathetic for the need to safeguard through risk assessments. They also identified the volume of paper that needed to be kept in residential care settings as a further reminder that they were not in a "normal" family setting: 'Everywhere you look there is a folder that thick full of paper.' (Male, 14)

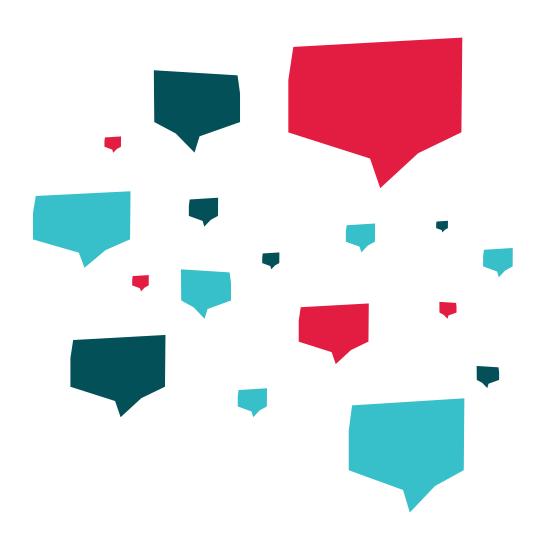
Support leaving care

Only 19% of children who responded to the survey feel that enough is done to support children leaving care. A third of children said that there is not enough support for children leaving care. Children who completed the survey told us that 'they don't give you enough support to leave care until it's too late' (Female, 17), and that 'many people hit rock bottom after leaving care' (Male, 16), because they are not properly prepared.

In focus groups we spoke to children who had recently exited foster or residential care and were living in supported lodgings. Many of those we spoke to felt that they were often pushed to leave care before they were ready.

'I've had social workers for about going on five years, six years, and when they sign you off, and you tell them it's not a good time to sign you off... But afterwards they've signed me off, I've fallen back straight flat on my face... but they think they know the best, which they don't.' (Female, 17)

Children we spoke to who were leaving care had sometimes been offered inappropriate accommodation. Examples included being offered a flat share with three young people who were all drug users and being housed in adult sections of hostels despite being only 17. Children who responded to the survey highlighted a link between poor accommodation and crime for care leavers: 'Its hostel and crime if it all goes wrong.' (Anonymous)



Chapter 5: Family life - standard of living and support for families

This chapter explores issues affecting families – in particular poor living conditions; housing costs and overcrowding; children housed in temporary accommodation; food poverty; a deficit in support for young carers; and the importance of support services for children and families.

These findings describe failures to meet children's rights to an adequate standard of living (articles 4 and 27). The children we have spoken to report growing up without the basic things they need to have a decent life including appropriate housing, warm clothes, and enough food to eat.

Additionally children raise concerns that important support services they use may be under threat (article 18).

Living conditions

Housing costs and overcrowding

70% of children who responded to our survey felt that how much money a family has had a big impact on where they live.

Some children we spoke to said recent changes in the benefits system had impacted negatively on their living conditions. Primarily this was highlighted to be an issue around the spare room subsidy or "bedroom tax". Children told us this policy put pressure on them and their families. One 14 year-old boy from a low income background told us that his family had to find extra money to lend to relatives:

"I've got relatives that are on the "bedroom tax" and my aunty... her and her son live in a house with my Nana, it's got three bedrooms, but my Nana she's never out of hospital.... but whenever she gets out of hospital she's got to live there... They've got to pay 15 odd pounds more.' (Male, 15)

Children told us that they were often living in overcrowded conditions. Examples included nine people in a two-bedroom house and an eight year-old girl who lived with eight other people in a two bedroom house. She told us 'there's not enough room' (Female, 8), and said that she didn't have anywhere to play in the house. Children also talked about having to share beds as well as bedrooms due to overcrowding:

'I share with my aunty, my big sister, and my other sister. And my Mum sleeps with my dad and my sister.' (Male, 8)

^{4.} The spare room subsidy or "bedroom tax" is a change in the payment of housing benefit that reduces payments in order to encourage families to move to smaller properties unless they fit specific criteria that justifies the size of their current accommodation.

"... We had five children, because my mum has her own children, but my mum's sister had two babies, but she couldn't afford to raise them, because she was too young, so she gave them to my mum for a little bit. So she had five children in a two bedroomed house, and we...my dad and all the boys had to sleep on one bed, and then all the girls and my mum had to sleep in another bed.' (Female, 9)

Other children explained that cramped accommodation and having to share rooms with several siblings has an impact on their education by making it hard to do homework. One eight year-old girl talked about living with seven family members in a two-bedroom flat:

'In my room, I don't have much space to work, because there's two bunk beds in only one room. And there's two big cupboards, so I don't get that much time to work because it's really squashy.' (Female, 8)

Temporary accommodation

We spoke to children who had been housed in temporary accommodation and had experienced several moves – some of which were over long distances. Some children had been moved so regularly they could no longer remember how many times. Many of the children we spoke to described the conditions in temporary accommodation as dirty:

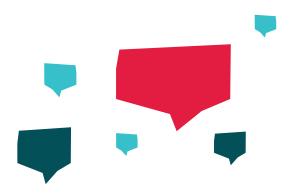
Before, I used to live in a bedsit, in a temporary house. It was big and nice, but it had rats and stuff, and so it was dirty and it had rats everywhere, and then now, we've moved and then now we've moved house again into a temporary house without rats, and the house is cleaner.' (Female, 9)

'I've been in many houses, I can't remember. The first one, that was a bed and breakfast, and then I went to Stratford, then I went to Bellingham, then I went to Wembley, then I went to Manchester...then some place in the Old Kent Road, in a hostel, then I went to some bed and breakfast place, had to share a toilet, and the person didn't flush the toilet, so that was horrible, so now I stay with people, with a nice set of people that I live with, and I play with, but I'm going to move again.' (Male, 11)

Many of the children we spoke to who had moved regularly and lived in Bed and Breakfasts and temporary housing reported having mental health issues.

Children also told us that lack of secure housing has an impact on their education. Some children had been forced to move and offered accommodation far away from their schools. One seven year-old girl told us she had been forced to go and live with her Grandma after she and her mum had been moved by the council. The move had made the journey to her school too long for her mum to make before work. Children said that being moved far away from their schools is upsetting and disruptive:

'My Mum was going to move me to a school near where we lived... she keeps on sending messages or writing letters to the council, saying...we need a house nearer my school, but still we don't have it... I'm always upset, because I have to go to bed early, because now, every day, I have to wake up at 6.30am. It takes me one hour to go to school, which takes very long.' (Female, 9)



Food poverty and basic necessities

Children from low income families or families dependent on benefits told us that their families often struggle to meet the costs of basic necessities including food, clothing and items needed for education.

49% of children who responded to our survey question said the Government should offer more financial support to families. Children told us that the most pressing cost for their families was food: 'We need most money for food' (Female, 7). Some children said that their families were dependent on food banks for survival:

'We wouldn't have any...that much food. We would never have money to actually get food that much and the food bank actually helps a lot because we get food." (Female, 12)

As well as food such as eggs, cereal, fruit, noodles and jam, children told us that they also got basic necessities such as toothpaste and tooth brushes, toiletries and sometimes warm clothing from food banks. They also reported that it could sometimes be difficult to get enough food from the food bank as it was so overcrowded:

'Sometimes it's really packed up with people...sometimes there's not enough food on the table that you can pick.' (Female, 7)

Another group of children who particularly struggled to meet the costs of living were young carers. Some of the young carers we spoke to, including children as young as seven, said they were struggling in terms of finance and support services. They identified money, more support for parents and more support from schools as the top three things that would improve their lives and help them to deal with the stress of caring for a parent or other family member.

Other difficulties included having difficulties with getting out of the house to buy basic necessities such as food and having to walk long distances to get to hospitals and collect medication. This was a particular struggle when 'you can't come out of the house because the person you are caring for is so ill.' (Female, 9)

Many children we spoke to told us their families struggle to meet the costs associated with education, including uniform and basic learning resources. Children said school uniform could be expensive:

'A blazer costs over like, quite a lot of money and altogether my mum had to pay over £100 just for the blazer, jumper, t-shirt I think it was...' (Female, 12)

Some children describe having to wear school uniform that was too small, and not having enough money for winter clothes:

'It's when you go to school and the clothes, they are too small for you and sometimes when you have less money you have old ones... they can't fit around your head and you have to cut around it so that you can fit in it.' (Female, 7)

When winter comes... you wouldn't have the money to buy clothes. Because when its winter there are things like coats and warm stuff to keep you warm but then you won't have enough money.' (Female, 7)

The costs of school materials were highlighted as a potential barrier to getting a good education:

'It's hard to get everything you need because it's all so expensive. They want you to have an education but then they make you pay loads to get all the school uniforms and books that you need. Pens, pencils, rulers, sharpeners, rubbers...' (Male, 15)

Children who responded to our survey also gave examples of their parents going without necessities in order to pay for school materials:

'I would like my mum to be able to spend money on a coat but she spends it on me and making sure I get clothes and books to learn, I know she has none spare trying to help me learn.' (Male, 12)

Children told us that high costs often mean children from poorer backgrounds are unable to take part in certain school activities like trips and after school clubs (see Chapter 8).

Support services for families

Many of the children we spoke to from low income backgrounds told us about the importance of support services in helping them deal with the stress and pressures on them and their families. These services helped with practical advice, guidance and resources such as food and other basic necessities.

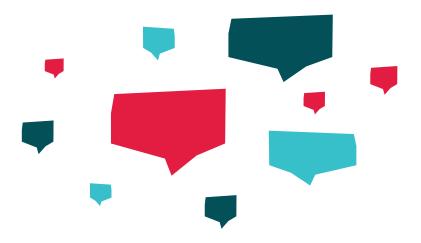
Young carers highlighted the importance of special support services and after school clubs to assist them in coping with the responsibilities associated with caring:

'When I started caring when I was younger, I think it was eight or nine, when I used to look after my mum, even though I was a young age, because I was still at school and I was only young, I didn't know what was going on. But now I do when I actually have support.' (Male, 14)

Other suggestions to improve things were having a person who could help collect medication, so they did not have to walk to hospitals or get taxis if they could not leave the house for long, and payments that could be made directly to them, rather than to their parents:

'I think we should have a little card, sort of like a credit card, or say, I don't know what it's called, but like an Oyster card,5...but you should put money on there and like when you go to the shops you're only allowed to buy stuff that you desperately need.' (Male, 14)

In focus groups we spoke to disabled children and children living in foster care aged four - 11 who highlighted the importance of support services to them and their families. These services gave them 'a fun place to go' where there was 'always something to do'. In one focus group children said that important support services in their region are provided by a children's charity. These services are currently under threat due to public spending cuts.



^{5.} A card which can hold pre-paid credit

Chapter 6: Health

This chapter explores issues around health, including services for transgender children, children with mental health issues and children in care. It explores the risks to children when placed on adult psychiatric wards and children's experiences of being listened to and taken seriously in healthcare settings.

The findings include issues in relation to the realisation of the right to access health services (articles 23 and 24) due to the way services are structured and commissioned, especially for transgender children and children with mental health issues.

Children, especially disabled children and those with SEN, report not having their participation rights respected in relation to their own healthcare and the provision of local healthcare services (article 12).

Health and transgender children

Transgender children that we spoke to highlighted many concerning issues in relation to healthcare. These included waiting times of up to 12 months for a first appointment with a specialist service and lack of knowledge or sensitivity from medical professionals. There were also issues around medial care being available at the discretion of medical professionals. One young person talked about his experiences with his doctors while he was under 18:

I was lucky with my doctor, at least he had the right attitude, he said "I've never dealt with anyone like you before but you're still my patient and I still need to help you find the help you need you know I am going to find... who to put you through to, to get the support you need." And a lot of doctors aren't like that. A lot of them have the attitude of... you know... this is wrong...this is wrong, I'm not going to help you with it. Especially if they are religious kind of doctors you know.' (Male, 20)

Other issues around medical staff included assumptions made about sexuality of children choosing a different gender identity that they would be "gay" and about the use of inappropriate language:

"I've had a nurse practitioner, lovely woman very supportive just not very educated on transissues, been asking how my "transgression" is going." (Male, 18)

A lack of support services for transgender children was highlighted. Children commented that services are provided unevenly across the country, and are often delivered by charities rather than funded by the Government. Some children had looked for up to three years before finding a group that could offer support locally.

Children told us they often struggled with depression, self-harm and self-destructive behaviours and had nowhere to turn for support. One transgender child responding to the survey commented:

'I had to wait for months on a waiting list to see the Child and Adolescent Mental Health Service (CAMHS). After the doctor referred me they phoned and spoke to me, then talked to Mum and said they didn't think they could help. She got really cross and upset with them, because I used to cut myself and feel suicidal, and she told them they had to see me. I waited for months until we got the letter with an appointment on it. When I did go there I was worried that they didn't really want to see me and I felt quilty that I might be wasting their time. That made me feel worse. Some of my friends are depressed and cut themselves, and I try to help them but it makes me feel down because no matter what I say or how hard I try they still feel depressed.' (No gender given,17)

Children are often forced to look for support and information on the Internet and in secret sometimes facing not just judgment from family but being actively blocked from seeking medical advice. Children we spoke to highlighted that using the Internet as a source of information put them at risk because it gave misinformation. For example some children had tried to bandage their genitals to stop them developing or had ordered testosterone online which they had then applied to their faces to try to grow facial hair.

Mental health

Mental health was a significant issue for children in the online survey and focus groups.

Nearly 40% of children who answered the survey said that there was not enough support for mental health issues. They identified a range of issues that had an impact on children's mental health. The top ones were:

- Bullying (83%);
- School pressure (76%);
- Issues at home (75%);
- Exams (74%).

'All of these things increase the amount of stress on the child and may cause them to feel unhappy and depressed. These things can increase the likelihood of disorders such as anxiety and illnesses like depression as they target the child's mental health and drastically *lower their self-esteem.'* (Female, 14)

Children who responded to the survey reported feeling stressed and anxious a lot of the time. Over a third of children said they are stressed all of the time or most of the time.

Lack of services

Our findings suggest that children do not always know where to go to get support if they have a mental health issue - 40% of children who answered the survey said they did not know where to get help. When asked if there was a counselling service locally, over half of children said "no" or did not know if there was one.

Children we spoke to in focus groups highlighted specific problems around the structure of provision for mental health support in England. This is currently delivered through four tiers, three of which are commissioned through local Clinical Commissioning Groups (CCGs) while tier four is delivered by National Health Service (NHS) England. Children highlighted that such mixed provision results in difficulties moving between tiers as sometimes CCGs can't fund hospital care:

'[There's] a discrepancy between who's accountable for what, and if someone needs to move from tier 3 into tier 4 care, it's like, if you don't get the funding or if your CCG doesn't want you to move.' (Female, 15)

Children we spoke to from rural areas told us that fears about cost 'stop you getting treatment' (Female, 17). Some children said a lack of CAMHS beds had led to families having to pay privately for care, and also children being placed on adult wards:

'I was on an adult ward, privately even though I was 17...but that cost my parents £10,000 for three and a half weeks... And my parents are paying for me, goes into your head, am I worth £10,000, you know? Is it worth it?' (Female, 17)

Being placed on adult wards exposed children to sometimes distressing experiences, as in this example:

'I'm 17, I'm scared, I'm lonely and there are people around me telling me "I've been in hospital 17 times since I was 15 or 17"... And I'm just like am I going to be in hospital 15 times when I'm your age?' (Female,17)

Some children with mental health issues raised concerns around the availability and effectiveness of support given by CAMHS. Children we spoke to outside of London told us they had faced very long waiting times for CAMHS or were only offered six monthly appointments which could not offer in-depth support. In general children felt that they were not given adequate information about how to cope with their mental health issues and were often discharged quickly without resolving their issues.

There was also concern about the high turnover of social workers which meant children had to re-tell their stories, which could be upsetting (see also Chapter 4).

Risk of harm

Several children talked about being put in situations where they were at risk of harm. One child described a difficult situation he had experienced:

'I don't want to be sectioned but I don't want to go home because it's not safe. And they basically put me in a situation where it was, choose... and I was like, surely you can't do this because of safeguarding but they still did... and I was so angry because for six months I've been trying to get alternative accommodation.' (Male, 17)

Issues around risk and provision of services by private providers were raised by children. One child we spoke to said that she thought standards in a unit she lived in contributed to the suicide of another girl on the ward:

'I was in a place...an eating disorder unit. It wasn't run by the NHS. But the NHS paid for everyone to go there, and there was a young person under section. She was there and she actually committed suicide and she died in hospital. She committed suicide in hospital and she died there...I mean there were so many things that they could have done to prevent that from happening, and they were little things, which I thought NHS hospitals have because I have had an experience of being in NHS and seeing a private hospital didn't have that...to think these little things cost her life...Like she was under section. They knew she was vulnerable. They knew about her and everything...I felt it was completely different to an NHS hospital... There are little things like, even how the curtains... We don't have curtains in an NHS hospital... regulators need to be consistent with all hospitals stuff'. (Female, 16)

Concerns were also raised about staffing on adolescent mental health wards where there are sometimes insufficient staff to administer medication to inpatients. Use of agency staff sometimes means that nurses are not well informed on the correct administration or dosage of medication.

For children who had been in adolescent psychiatric units support on discharge was also an issue that left them at risk:

'When you're outside of hospital, you've got to do it all alone and find yourself, like, *alternative accommodation.*' (Female, 17)

Living in care and access to health services

Children we talked to spoke about how foster carers sometimes used discretion with regards to basic but non-urgent health requirements, for example dental work:

'And I asked. I needed my teeth sorted. And my carers wouldn't let me go to the dentist, so I had to put up with getting beaten up by kids because of my teeth all the time. And they wouldn't let me go to the dentist...' (Male, 13)

For this child 'not getting his teeth sorted' led to an extended period of bullying in school. Other children in foster care expressed frustration that their basic health needs were not addressed by foster carers:

'They can't even do basic things like take you to the doctors or the dentist.' (Male, 13)

Being listened to and decision-making in health care settings

The majority of children who responded to the survey said that they had not been involved in decisions about their own health care or about the health services in their local area. Only 29% of children told us they had had a say in relation to their health care or health services more generally.

Of those children who had been involved in decision-making on health care issues:

- 45% said something had been done differently as a result;
- 51% got what they wanted as a result of being involved in the decision-making process;
- 62% felt listened to and respected.

Children in the focus groups repeatedly told us they are not listened to by medical staff. One child told us that during her family separation court case she was not believed about symptoms she was displaying:

'So when I had my case on, it's like, I used to have something like pain or something, but they said it was just growing pain. And then they kept on saying that and then we found out it was a condition...If I had been listened to properly, and whether I'm young, or it doesn't matter, whoever, if I'm old or not, if I were to be listened properly, maybe I wouldn't have had to undergo some of the issues.' (Female, 9)

Other children gave examples of medical staff double checking with adults or ignoring their explanations.

'When I was five I broke my leg and when I went to the hospital you could see just a crack and I couldn't move it so then I told the doctor what happened and I said that I fell down the stairs. And then they said, they were just talking over me and I said well this happened and they said, no, this is what we're going to do now. And I didn't feel like it was actually, they didn't know what was going on. So it can be a little bit rude sometimes they just need to listen because it's everyone's right to be heard.' (Male, 9)

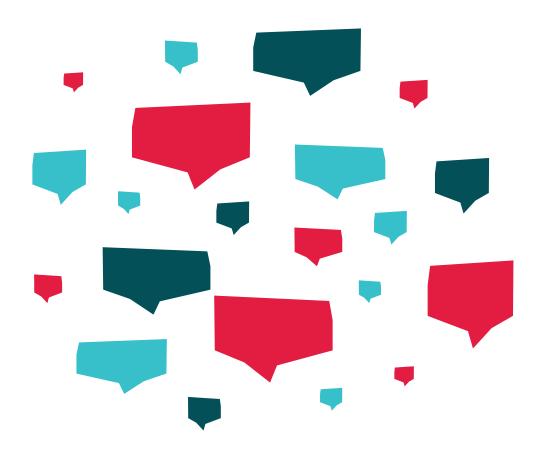
'Sometimes they ask you what happened but then once you tell them then they ask an adult the sort of same question, makes me feel quite upset really because they don't really listen to you as much as they do adults.' (Female, 8)

'Sometimes doctors don't trust you. They ask you a question and then like what's been happening, they ask the child and then they ask the parent' (Female, 10)

Disabled children often felt they were not listened to, for example one child with SEN told us that staff ignored her food choices whilst she was in hospital. Children explained that medical staff struggle to communicate with non-verbal children. One child described how her dentist repeatedly hurt her because he did not understand the hand signals she was using and would not give her time to try and communicate.

Children also reported repeated incidences of not being believed by medical professionals. One 17 year-old girl told us about an incident with CAMHS:

'I was in CAMHS, I got signed off because I missed an appointment. I went a week later. They gave us the wrong date and said it was our fault because we didn't turn up. I had it in our diary as well and I showed them and they said, "You've obviously made a mistake." (Female, 17)



Chapter 7: Education

This chapter explores issues around education, including children's involvement in decision-making in schools; the pressure of educational attainment on children's mental health; bullying and discrimination in schools – particularly in relation to marginalised children; and the use of isolation rooms and exclusions.

The findings show that children are not having their participation rights systematically respected in school (article 12). Progress has been particularly slow in relation to behaviour policy.

Children raised concerns about how some schools respond to challenging behaviour, including through the use of isolation as a punishment - a potential breach of article 37a - and exclusion and the lack of educational provision for children with serious mental health issues, which could mean having their right to an education (set out in article 28) not met. Other groups of children, for example young carers, report not getting adequate support or understanding from teachers about their particular circumstances.

Having a say in school

Three quarters of children who responded to the survey said that their school listens to what children have to say. However, 1 in 5 children said their school hardly ever or never listens to what children have to say.

When asked "do you have an opportunity to say how your school is run?" only 13% of children said they always get to have a say in how their schools are run. 44% of children said that they hardly ever, or never get to have a say in how their schools are run.

In the survey 26% of children reported that something had changed in their school as a result of them expressing their opinion. Changes ranged from improvements in toilets and food, to involvement in hiring staff and changing the exam timetables to give students more time for revision.

'Only small things e.g. more recycling or vendors for snacks.' (Female, 17)

'Change in the canteen, uniform and hiring of new teachers.' (Female, 13)

'I've managed to change how the school bus drivers (provided by the local council) are trained to help them get along with young people better.' (Female, 13)

One area where the majority of children said they do not have a chance to express their views is in relation to the behaviour policy: only 18% of children said they had helped decide the rules about how people should behave in their school.

Children told us how good their school council is at making sure children can have a say in how their school is run:

Excellent	22%
Very Good	13%
Good	13%
Ok	19%
Poor	16%
Don't know	9%
We don't have a school council	3%
I'm not sure if we have a school council	6%

Children in focus groups commented that their school council was good but doesn't help make major changes:

The school council... they're good people, but I don't think they affect the school much. Often the most thing they have done is add new equipment for the playground... and tuck shop...' (Male, 10)

Pressure and stress

71% of children who answered the survey question "do you enjoy school?" said "yes". However:

- 50% also told us that they would enjoy school more if they were less worried about their achievement:
- 51% said they would enjoy school more if there were less exams.

In the survey exam stress was identified as having a major impact on children's mental health, second only to bullying.

Children in the focus groups said teachers and schools were often preoccupied with results at the costs of children's other needs:

'In school you're just a number...And that's it, you're just a number. All they care about is your grades being top notch. They don't care about anything else' (Female, 15)

Children describe feeling not only that they weren't listened to but also that they had nowhere to turn for pastoral support in school: 'Sometimes when you try and tell them about stuff at home that you're scared about they don't always listen.' (Female, 17)

Children with mental health issues highlighted a need for schools to apply less pressure and more understanding if their grades dropped:

'Between November and February I was in and out of hostels and so on, so I missed school, and it's hard to catch up... And when you're predicted high grades you have so much pressure... I get more stressed over pressure... I think if teachers left me alone I'd be fine. I don't need pressure coming from all sides.' (Female, 17)

Bullying

Bullying was identified as a major problem in both the survey and focus groups.

40% of survey respondents felt that bullying was a big problem in school. Despite being a significant issue, nearly half of the children who responded (45%) said they had never been consulted about how to tackle bullying in their school.

Children who completed the survey and those in focus groups felt that schools do not deal with bullying properly. Children we spoke to said staff are often too focused on achievement to deal with bullying effectively. Some children told us that their school employed an anti-bullying worker but the worker was only in school once a week, which wasn't adequate.

Children made a number of suggestions to improve bullying in school. They wanted teachers to take bullying more seriously and take action when they see it happening:

Teachers not to pretend not to see bullying because they don't want their class to be distracted. It makes people feel scared and it's wrong to tell us that we are wrong to be upset, rather than admitting it's wrong to say all transgender people should be pushed under a truck, or all Muslims are terrorists and should be locked up.' (17, no gender given)

Children identified the need for better anti-bullying education:

'If young people understand the effects of bullying, because in serious cases it can lead to self-harm, it can lead to negative consequences and unfortunately in some cases suicide.' (Male, 17)

'Putting more of an emphasis on correcting the bully's behaviour, perhaps through compulsory sessions educating them on the dangers of bullying (eg causing the recipient to have depression, negative thoughts, feelings of dread, and even in cases leading to suicide due to feeling unaccepted and worthless) rather than just giving them a detention where they sit in a room for an hour. This is a meaningless punishment as it doesn't work, nor does it show them how and why they should correct their behaviour.' (Female, 17)

'If children were taught not to bully and if the school's counselling service was more well known throughout the school. It would also help if children were encouraged to speak out against bullying.' (Female, 14)

Children suggested there should be more quiet spaces where an adult was present at lunch and break times; 'more clubs at lunchtime, and some individual toilets with a supervisor outside to make them safe from bullies.' (17, no gender given)

Isolation and exclusion

Worrying issues were raised by children about being placed in isolation as a punishment and being excluded from school. Children described being placed in internal exclusion or isolation:

'My school is having internal exclusion and it's like being separated from the rest of the class.' (Male, 15)

'I go there for the next four days, you've got a little cubicle...' (Male, 15)

Children reported not getting any play or recreational time and often being denied breaks or hot food whilst in isolation. One boy, now 15, told us he spent five weeks of school time in an isolation cubicle aged 12:

'Isolation used to be in these little cubicles...you worked out what you want for lunch to eat, you get sandwiches because you weren't allowed hot meals...I ordered that in...I would do English reading books at break time then a five minute break, back to work until dinner time, 10 minutes to lunch and at the end of the day basically the school day finished at 15.15. We were allowed to go home at 17.15. It was horrible. I was in isolation for five weeks.' (Male, 15)

Children who completed the survey had mixed views as to whether their schools dealt with challenging behaviour appropriately:

- 28% said their school does deal with challenging behaviour in the right way;
- 34% think it is wrong that children are excluded from school.

Some children felt that there was a gender bias in terms of exclusion from school with boys being more likely to be excluded than girls. Two children who had both dyed their hair, using the same dye, were treated differently: 'She was allowed to stay and I got excluded.' (Male, 17)

Several children in focus groups said they had not been allowed to tell their side of the story before being excluded, for example: 'I didn't get a chance to say why I'd done it' (Male, 17). Children who were given an opportunity to explain often felt their perspective did not make any difference to the outcome: 'They were just saying stuff like they understood but acting like they didn't care.' (Male, 14)

Children said they felt exclusion pushed them towards negative behaviours and put them at risk. One child described how after being excluded he spent time: 'Just sitting at home doing nothing or going out smoking weed and stuff'. (Male, 17)

Children who had been excluded expressed frustration at not being allowed to take their exams and the negative impact this might have on their longer term outcomes;

'Even if they'd said we don't want you back in school but you can do the exams through us, still learn it yourself. That would have been brilliant, I'd have still done it!' (Male, 17)

Some children reported that the police were often called to deal with exclusions, so criminalising the behaviour of children in school and escalating the consequences and upset of being excluded:

'... They always used to get the police at our school, Like they used to get the police straight away and then you'd be locked up.' (Male, 15)

Discrimination in the education system

Many of the children we spoke to in focus groups talked about their experiences of discrimination within the education system. They also talked about how their specific circumstances had a negative impact on their education and educational outcomes.

We heard from children in the focus groups how teachers treated particular groups of children less fairly than others, reacting to 'them like they're being naughty' (Female, 7) and always "picking" on them regardless of their behaviour. Children in focus groups told us that children and families who were picked on were labelled as having a "bad reputation" in the school and local community. They were often late for school, were living in care, came from a low income background, were disabled or had SEN.

'If you were well off you would always be teacher's pet and you did really well at stuff and I was always in isolation and stuff.' (Male, 15)

'It's about history, if you been naughty in previous years... teachers will more or less see you because of your past. Like I said if you stop fighting they won't believe you.' (Male, 15)

Children felt that this kind of discrimination by teachers needed to be addressed: 'It's very sad, it needs to stop.' (Female, 11)

Mental health

Children we spoke to who had been on adolescent psychiatric units said this had a negative impact on their educational outcomes:

'I haven't got any GCSE's. I missed out on life, like, that whole period... I didn't have any friends...I really didn't have anything and then I had to come out and rebuild my life for myself.' (Female, 16 after four years in psychiatric care)

'I went in at the beginning of my AS, and I tried to go back multiple times but I haven't been able to go back so I have no A-levels, and I'm 18. I should be at university by now.' (Female, 18)

They also highlighted being disadvantaged through differential treatment from school staff on re-entering mainstream education, especially in relation to curriculum choice and participation in school activities. Children spoke of feelings of shame, embarrassment and inadequacy after being put onto more vocational courses by school staff which they felt resulted in educational disadvantage described as the "B Tec barrier". Children also told us that they were often not allowed to take part in usual school activities. One 16 year-old girl told us she had not been allowed to attend her school prom as she was deemed "too high risk". This was dealt with insensitively by the school which told her only a few days before the prom she would not be allowed to attend, when she had already bought her dress.

Children we spoke to also said there were problems with education within adolescent psychiatric units as teaching staff were not trained in mental health and could not support them properly. Children we spoke to felt it would be more helpful to their recovery to do more group sessions and activities. They felt that exam boards should take into account the disadvantage faced by children taking exams in adolescent mental health wards and adjust grades to match predicted levels of achievement before they became ill. One example of the disadvantages facing these children was having to use ligature proof equipment and not being allowed Bunsen Burners in science exams.

Children in contact with the criminal justice system

Children who had been arrested explained this had a negative impact on their education:

When I got arrested the police said "you've got until the end of your bail, so a month and a half, to inform whatever college you're at what's happened and arrange things." And so ... I've got a bit of time to transfer and continue my A-levels. And the next day I go in and the head teacher said I need a word with you. And I go in and he says "the police spoke to me yesterday, you're kicked out", that was it. Straight out. And I was. So the police told me I had a month and a half to move colleges and he was the one that went in that day and told the school what happened. I'm out of education because I couldn't transfer to a different college... I'm not going back to do my A-levels. I could have continued if it wasn't for the particular police officer.' (Male, 17)

Young carers

Young carers described a lack of understanding for their needs, explaining that unless someone 'has known your parent for a long time, like from primary school, something like that' (Male, 15), then they often would not understand the kind of support that they might need or the practical difficulties faced by young carers. For example, although they stated that schools were generally supportive once they knew the situation there were sometimes issues in education:

'I used to look after my Mum and you go to school and it affects us all, it affects your behaviour how you are acting in school. In year seven I used to look after my Mum at home and when I was in class I used to fall asleep...thinking about what was going on at home and then wake up and my behaviour changes straight away and I get all moody and my teacher tells me to go to our head of college.' (Male, 14)

Disabled children and those with SEN

The experience of mainstream education for children with SEN was sometimes negative. Children told us they felt unsupported in mainstream education which led to them feeling *'upset and not happy'* (Male, 15). Children with SEN in mainstream education told us it needed to be more inclusive as they did not feel involved fully in school life:

'I don't get involved with things as well. Like whenever there are activities going like PE, anything like that people just don't involve me.' (Male, 15)

They said the structure of the school day was not set up to meet their needs. Younger children with SEN told us that play and lunch times are too short and sometimes they do not have enough time to eat. Length of school days was also an issue:

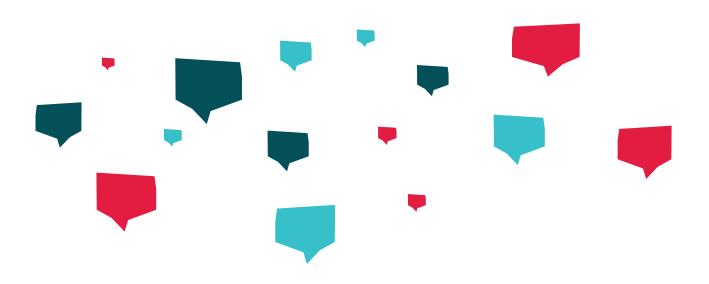
'I get up at 7.00am and go to school at 8.00am, it is really tiring...when I'm at school I use the table to rest my head.' (Male, 12)

Children with SEN reported daily experiences in schools that were confusing and which lead to them getting into trouble - which was in turn distressing:

'We get lots of distractions and we have to stay behind after school. And then something scary happens and people start messing about and don't follow instructions...Last time I got detention I was so scared...And in my mind I was saying, why am I in this room? I don't like that. I don't like detentions because they are really, really scary.' (Male, 12)

One child we spoke to with SEN described how his teacher 'doesn't listen to me she blames everything on me. I don't know how, what sort of teacher does, what sort of teacher does that?' He described this experience as 'heartbreaking.' (Male, 15)

All disabled children who we talked to felt that more education was needed regarding disabilities in general and suggested it would be useful to teach this in lessons such as PSHE in order to reduce bullying and differential treatment and to help staff and other students understand how to interact with and support disabled children in mainstream settings.



Children in care

Children living in foster care and residential care told us that they felt they were discriminated against in education both by their peers and their teachers: 'There's an expectation that if you live in care then you wouldn't be the same as other people.' (Male, 15)

Children said there was often little sensitivity to their backgrounds, for example:

"... In my school it was the teachers. So when I was in primary school they all knew I was in care but they didn't know why. So I just said to my teachers that my parents were dead. And she just looked at me...when we were doing about abortions and stuff, so obviously talking about alternatives and foster care was one of them. She took me outside of the classroom and made a big scene about it...In my school it's always the teachers who treat you differently.' (Male, 13)

Children in residential care told us they were treated differently in school because they were labelled as a "care kid" by teachers who then made assumptions that they would fail in education and cause problems. This left them feeling angry:

'How can you call someone a care kid? It's a vile way to speak to a young person. We're just as equal as everyone else, just because we don't live with our parents and we're under the authorities doesn't mean we're different...It makes me angry.' (Female, 17)

Children explained that bullying from other children often happened 'because they say I'm different' (Male, 13). Often 'saying anything about your family' (Male, 15) was a trigger fellow students used to upset children in care. In the example below a child recalls an incident that took place when he was 11 years-old:

'I used to go to a school they've got here... Then people found out that all they had to say was...your mum is a tramp...your dad is a drug addict and all this. Then obviously you just go mad and then... beat loads of people up and then got kicked out in two weeks.' (Male, 15)

Children in care told us that discrimination against them, and in particular those in residential care, resulted in feelings of anger and isolation. Some of them said these feelings pushed them to behave in ways that increased the likelihood of exclusion from school and left them at risk of educational failure

Children in care felt that although they could tell staff at school about bullying because of the discriminatory attitude by teachers in particular they were often not believed or supported: 'They ring your social worker and say you're the issue, she's the issue. She did it, it was all her fault.' (Female, 17)

Children felt there was a lack of empathy from teachers who needed to put themselves in the shoes of children living in care:

'The fact that you are in care and they don't know how to go about it because they've never been in that position. If they actually put themselves in our shoes, if they realised how awful they make us feel.' (Male, 15)

Children also highlighted that educational experiences could be limited by living in care, for example taking part in school trips that required social workers to give consent for a child's participation: 'I asked him and he kept forgetting. And I keep reminding him and it never happened so I missed my school trip.' (Male, 13)

Chapter 8: Play and leisure

This chapter explores issues linked to play and leisure facilities.

The findings show that particular groups of children experience difficulties in accessing play and leisure facilities, in breach of articles 31 and 23, due to fears about safety, prohibitive cost or recent closures. Children also report not having enough say on play and leisure facilities in their local area in line with article 12.

Access to play and leisure facilities

Lack of money

82% of children who answered the survey question said not having enough money has an impact on the kinds of activities children can participate in:

'Clubs cost money, so sports such as swimming won't be available.' (Male, 10)

'Some people can feel lonely as they can't do all the cool things that others can do and don't have so much choice.' (Male, 12)

'A lot of activities are expensive. Swimming is far too expensive.' (Female, 12)

Children said that play and leisure facilities in their areas are too expensive:

'Make them cheaper or free!' (Female, 12)

'Make things free for children to use.' (Male, 13)

Children in the survey also told us that lack of money at a local level had caused play and leisure facilities to close down. Over a quarter of children said that local play and leisure facilities had closed down recently. 40% of respondents said this was because there was insufficient money to keep them open.

Traveller children and space to play

Traveller children we spoke to in focus groups told us they did not feel safe to play where they lived as their site was very close to a motorway. Children said they were not allowed to play outside for fear that they might get hit on the road. They said this made them feel unsafe and was worrying for their families. The children we spoke to were excited that the council had promised to build a play area when they made the site permanent. They also hoped they would have access to a park and play areas.

Disabled children

Disabled children we spoke to in focus groups told us they would like more accessible play areas. One 16 year-old who communicated non-verbally told us this was the most important change she would like to see in her local area. Children who responded to the survey also highlighted this was important stating that leisure facilities should be 'more disabled friendly' (Male, 10) and that it would be better if all equipment were made 'disabled accessible' (Female, 11). Children felt that play and leisure facilities needed to be 'suitable for everyone' (Male, 14).

Children in rural areas

Children we spoke to ages 4-11 living in rural areas told us they would like 'more bus stops' (Male, 8) as this would mean that they were more easily able to travel to places where there were play facilities. Although there were green spaces surrounding their houses children told us there was a need for more parks with facilities.

Older children

Many teenagers who responded to the survey told us that play and leisure facilities needed to be improved by making them 'places for teenagers not just younger people' (Female, 14) that were more 'teenager friendly' (Female, 14). Suggestions for how this could be done included:

'Add a part for teens.' (Male, 13)

'More play equipment for older teenagers, e.g climbing wall.' (Male, 13)

'More safe spaces for teenagers.' (Female, 14)

Police, safety and play

Children from inner city urban areas we spoke to in focus groups reported often feeling unsafe in play areas or public spaces due to "gangs" or people watching them:

'Sometimes when I'm walking home by myself there's this gang by where I live, by my flat, and I have to pass them to get to my flat and they just stare at me, just staring... it makes me feel uncomfortable.' (Male, 10)

'Next to my local area there's a park where I get to go and play but I can't go by myself because there's a lot of drug dealers that go there'. (Female, 8)

'Sometimes when I go home... this gang near the estate, just opposite the school and they're always coming up...and always swearing and just throwing stuff.' (Female, 9)

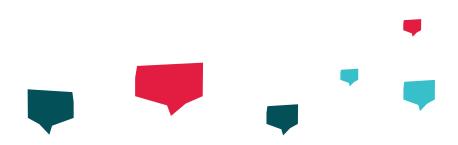
Some children said they feel unsupported by the police in dealing with these issues and were instead told to leave play areas:

'When I was nine... there were kind of like dark, scary people. I don't know like druggies and stuff, and they staring at me. And then they're coming close to me... And the police was right next to me and they didn't do nothing.' (Male, 10)

In one incident it seemed that after a child approached the police himself they failed to respond adequately:

'They said they'll sort it out. And two minutes later they're just standing there and they just go in the shops.' (Male, 10)

This finding was supported by survey responses where children told us that one thing that would improve their feeling of safety in their local area was 'a police force that actually protects you' (Female, 17) or 'more police on foot patrol.' (Male, 12)



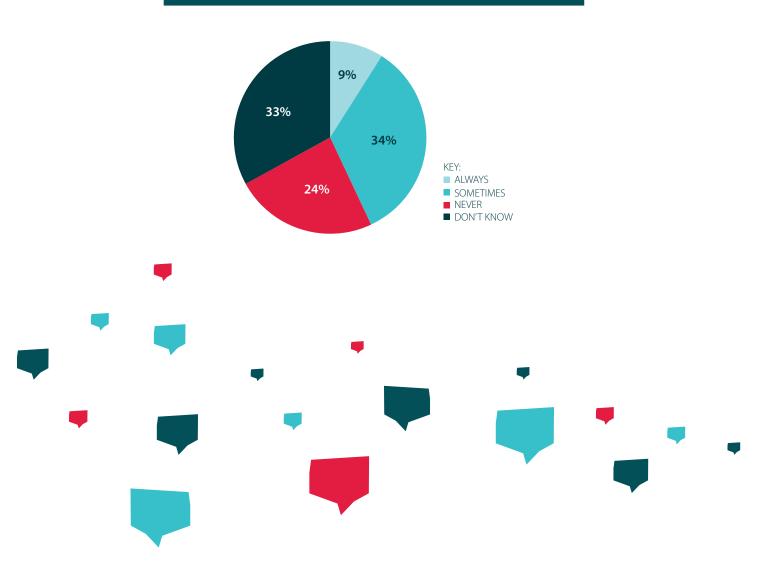
Having a say on play

There was little evidence that children are consulted on play facilities in their local communities. When asked the question "have you ever been asked for your views about play and leisure facilities?":

- 70% had not been asked for their view on what activities are on at their local leisure centre;
- 66% had not been asked about provision at their local youth club;
- 60% had never been consulted about new equipment in their local playground.

Only 9% of children who answered the survey said their views are always listened to when changes are made to play facilities in their local area.

DO YOU THINK YOUR VIEWS ARE LISTENED TO WHEN CHANGES ARE MADE TO PLAY FACILITIES FOR CHILDREN AND YOUNG PEOPLE IN YOUR AREA?



Chapter 9: Contact with the criminal justice and the immigration system

This chapter looks at children's experiences of, and interactions with, the criminal justice and immigration systems.

It highlights costs associated with arrest; lack of support and respect for and degrading treatment of children being released from custody; going to court and moving bail dates in breach of articles 37 and 40.

The findings also show that despite the removal of the UK's General Reservation to the CRC on Immigration and Citizenship children in the immigration system are still not having their rights met, especially in relation to article 40 and the best interests of the child (article 3).

Administration of the criminal justice system: arrest, going to court and release

For children who had been arrested there were many costs associated with arrest that they struggled to meet:

'I had to pay £15 to have my stuff destroyed. And I had no money. I get a fine and then they add on 45 guid... I'm 17, I don't really have [this money].' (Male, 17)

Children told us that on arrest they were sometimes required to travel for an hour or more to court hearings or to go for bail:

'I had to go to court, I live in a different town, it's an hour's drive.' (Male, 17)

'I had to go to one place just to go back for bail. I live in a town an hour away, I got arrested in my town and taken an hour away.' (Male, 16)

'Getting to that town, there's a court in this town, but why do I have to go all the way to another town to go to court?' (Male, 17)

Children said they often struggle to meet the costs of travel and that the time spent travelling sometimes affected employment as they needed to ask for time off. Being released without money put pressure on relationships as family members had to meet the costs associated with arrest and leave work to collect them.

Children highlighted a lack of support after release from custody or court hearings. They were often left far from home, in dirty clothes and without money. Examples include a sixteen year-old boy who was detained for nearly three days without charge and was not supported to get home, as well as children being sent to court where they waited for most of the day in the cells and were then released without support. One child said after his court hearing, the police left him over an hour's travel away from his home with nothing more than 'directions to the train station'. (Male, 17)

Some children were given soiled clothes to wear:

'When I got arrested that time they gave out dirty shit-stained tracksuit bottoms... and you're released in plimsolls with these horrible track suit bottoms on.' (Female, 17)

Children described how being released looking like 'you have come from prison' was humiliating but that 'you're so glad to be out you won't object at the police station.' (Male, 17)

Children also told us that in court they found it hard to find out what to expect. They were sometimes sent away without explanation:

'I waited an hour and a half until they told me to go in, I didn't get told anything.' (Male, 17)

'I waited for ages and then was told "you can go." (Male, 17)

Children said that they were subject to multiple changes of bail and hearing dates which they described as 'distressing' and leaving them feeling 'stressed'. They felt the police were sometimes intentionally wasting their time:

'I got a month and a half bail and as soon as I went back after a month and a half...they were like oh yes, did we not tell you, your bail was ending next month instead.' (Male, 17)

Other children recalled how they had not received information that they needed regarding bail:

'I got sent a letter and it turned up the day after I was supposed to go back to the police station'. (Male, 17)

Children divulged that arrest had often impacted on many other areas of their lives including work and education (see Chapter 7). They said advice and guidance was important to them after release. One-stop information centres were identified as particularly useful:

'I got offers of we can help you get back into college, we can help you with this, you can have someone to talk to... And offered to help find a job.' (Male, 17)

Children who had been arrested felt policing needed to change. Suggestions for how to improve relationships between children and the police can be found in Chapter 2.

Administration of the immigration system; treatment by Home Office and Border Agency staff

Separated children said they are treated with insensitivity by Home Office, Border Agency staff and social workers. One child said she didn't feel that Border Agency staff treated them well:

'I feel like they don't really respect people from another country.' (Female, 16)

Another child said a social worker had fallen asleep whilst he was talking to him:

'When I wanted to take a look at the guy, he was sleeping.' (Male, 15)

A major area of concern was how Border Agency staff conducted interviews.

Children described their interviews with Border Agency staff as 'scary' (Male, 15). Some interviews were several hours long and involved many questions. Children told us that discussing traumatic past experiences with someone they had never met before was distressing, but that border staff became 'very angry' or went 'insane' (Male, 15) if they needed a break or repeatedly did not answer a question, even if this was due to the translator speaking the wrong language:

'Yes, they think maybe you're lying, just like that or you're hiding something...I go to therapy to try to live like normal people, to try to forget what happened to me...you keep asking me things.' (Female, 15)

The translator, she was translating for me like 10, 15 questions, 10 times, five times one question. Asking, "where are you from?" Albania, no... I didn't understand... I don't understand you I was saying to the translator and she was saying, I can't understand you, and he [Home Office member of staff] got angry after, because the translator was there, and I was still saying to him, I don't understand you. He got angry because it was the same question 10 times, repeating.' (Male, 15)

Children told us they were left without food during the interview regardless of its length. One child told us their interview was five hours long. They complained that they were required to re-tell their story on multiple occasions even though the Home Office had gathered information previously:

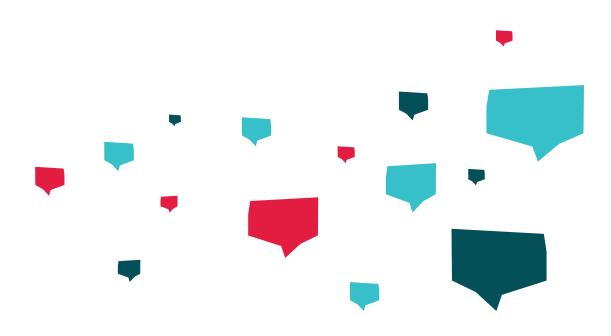
They have all the information about you...I think the people of the Home Office...they don't have to keep asking you one question and keep asking, asking, asking, asking...I was very, very hungry and I was like, I can't do this anymore. Because, I was having a headache and they were just making me feel bad, because they were bringing a lot of past back to me, which I was trying to forget about, and talking about it was bringing things that I don't want to remember, and it was just very frustrating and I was very, very angry and I said, I can't do this anymore.' (Male, 15)

One child also described having to re-tell his story five times in his first week of arrival and that the number of different adults he met was confusing:

'When I came here there was interpreter, solicitors, case workers. We're just getting confused what is going on.' (Male, 15)

Children said they felt unsupported after their interviews and that no one understood how they felt. They also said Home Office staff seemed to blame them for coming to the UK:

'I'm not happy that I'm living without my family. I miss my family a lot, like it's something that makes people live in foster care, or live in another people's country, and it seems like that, and now I just think that, the Home Office, they should understand that.' (Female, 15)



Recommendations by the steering group

As our report shows children's rights are not being respected in England and there are a myriad of issues that NEED to be dealt with. We feel like some groups of children in England go through a lot in their lives and are not getting the support they need from the Government. Because of this we recommend:



RESPECT:

There must be really good education and awareness raising on children's rights for all adults and children.

Personal, Social, Health and Economic Education (PSHE) and Citizenship should include education on issues around traveller communities, living in care, disabilities, transgender and Special Educational Needs (SEN) to help reduce discrimination. Citizenship and PSHE should also focus on teaching more on children's rights and how children can use their rights in practical, day-to-day situations.

All professionals who come into contact with children, including those in the justice system, social services and health-care settings should be trained to trust in children's voices and stop punishing them unfairly or leaving them in positions of risk. Children should be involved in delivering this training.

All children need to be listened to and taken seriously in all settings. They must be involved in making decisions about their lives.



FREEDOMS:

More careful recruitment, training and supervision of foster carers is required to ensure they respect the identity of children in their care and do not discriminate against any child in their care for any reason (especially on the grounds of religion, sexuality or cultural background).

Awareness and acceptance of gender identity issues affecting children must be improved. Barriers to changing identity documents, including cost, need to be removed.

Social workers must give children in care honest and clear information about all matters that affect them. There must be a system to ensure that children in care can access their personal file.

Ensure the privacy of children in care is respected in health and placement assessments.

Children must be taught about the rights they have in relation to the criminal justice system and contact with the police.

VIOLENCE AGAINST CHILDREN:

Neglect of children in care must stop. They must receive basic necessities such as pocket money and access to health-care.

More responsive and easily contactable support for children in foster care is needed to protect them from violence, abuse and neglect in their placements. Responses from social workers must be improved so that when children make a complaint they are believed and not left in placements where they are being abused, neglected or harmed. Responses to complaints must be sensitive and prompt.

Violence against children by police and in secure settings must stop. Physical restraint must only be used as a last resort.



CHILDREN IN CARE:

More social workers with permanent contracts are needed to ensure that children in care have a better chance of building trusting relationships with their social workers and are able to speak to them openly and honestly about issues in their lives.

More effort must be given to resolving problems between children and their foster carers. Social workers must always work with children and their foster carers towards resolving problems before placement change is considered.

Children under the age of 18 and young people up to the age of 21 should be allowed to choose when they are ready to leave care placements. Children and young people must only be moved into independent living, such as supported lodgings, once they feel they are ready - not due to a lack of budget to support their care.



STANDARD OF LIVING:

Families with children should not be housed in in Bed and Breakfast or other types of temporary accommodation but must instead be provided with safe, secure, affordable and permanent housing. If temporary accommodation is the only option it needs to be child friendly, clean and safe. It must never be used to house families with children for more than six weeks.

Families must have sufficient support to allow children to grow and develop properly. This should include financial support to buy basic necessities such as food and clothing, and provision of support services such as social groups for children from potentially stressful family environments.

Ultimately children shouldn't have to care for relatives. However whilst this is happening:

- Support must be improved for children who are young carers around collection of medication for adults they are caring for and access to basic necessities such as food – especially for those children who care for someone who finds it hard to leave the house and cannot be left alone;
- A system should be introduced to ensure young carers have direct sources of money for tasks such as shopping;
- Teacher training should include information about children who are young carers and the challenges that they face. This will help to increase sensitivity and support in schools for children who are young carers.



HEALTH:

All children should be listened to and given clear information and explanations about their health. This should include better information in schools and hospitals for disabled children and those with special educational needs and also for children whose families do not have English as a first language. Key health-care professionals should have basic training in sign language and Makaton so they can communicate with deaf and nonverbal children.

Medical care and support services for transgender children must be increased and they must be given prompt access to specialist medical treatment and support. Medical staff including doctors and nurses need to be trained to support transgender children in nonjudgmental ways.

All children must be referred appropriately between the tiers of mental health care. There must be better referral of children between tiers 3 and 4. This requires improved communication and more joined up thinking between Clinical Commissioning Groups and NHS England.

Public provision of Child and Adolescent Mental Health Services beds must be increased to meet children's needs. Families should never be forced to pay for private provision due to lack of beds and children should never be placed on adult psychiatric wards.



EDUCATION:

Children should not be excluded from education. Issues must be resolved in the school. Exclusions are damaging to children's education and can have a negative impact on the rest of their lives

Awareness of disabilities and mental health must be improved within the education system to tackle stigma, discrimination and bullying that currently affects children in schools. A number of key changes must be made:

- Reduce pressure around attainment in order to protect children's mental health and improve their enjoyment of education;
- Mainstream schools must be more inclusive of the needs of disabled children and those with SEN both in the structure of the school day and the way in which staff treat these groups of children;
- Improve how teachers deal with bullying. They must listen to children, take them seriously and address bullying promptly;
- Create opportunities for children to learn about the different types of bullying and the serious impact bullying can have on children.



PLAY AND LEISURE:

All local areas must have play facilities which are safe and fully accessible for all children, including disabled children and older children.

Children living on traveller sites must have access to safe play areas away from busy roads.

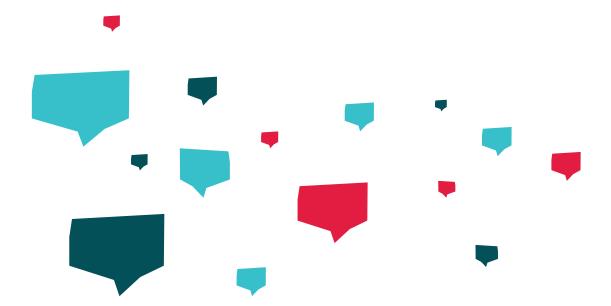


CRIMINAL JUSTICE AND IMMIGRATION SYSTEM

Children should not have to undertake time-consuming and expensive journeys to court when nearer options are available. If children do have to travel outside of their local area for court hearings financial and practical support must be available to help them attend.

Make transitions easier between the criminal justice system and daily life. This should include providing support services for children who have been arrested to help them re-enter education and employment.

Police officers need to communicate effectively and sensitively with children, and explain in a way that children can understand what is happening to them and why. In order to do this they must receive extra training on how to talk to and approach children. Youth-led training should be implemented to help police officers work more positively with children.



Acknowledgements

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