



bright spots

The wellbeing of children in care and care leavers learning from the Bright Spots Programme

Dartington Trust

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About this briefing

This briefing provides an overview of the key messages from the Bright Spots Programme. Although it is aimed at strategic leads and senior managers, the contents are of relevance to anyone working with children in care and care leavers. **In telling the story of Bright Spots the briefing addresses two fundamental questions:**

- 1) What makes life good for children in care and care leavers?
- 2) How can we make life better for children in care and care leavers?

The briefing comprises three main sections:

- > Overview of the Bright Spots Programme.
- > Key findings from Bright Spots.
- > Practice examples to improve children in care and care leavers' wellbeing.

It is divided into the following sub-sections:

- > Background to the Bright Spots Programme.
- > What is wellbeing?
- > What do children in care and care leavers say is important to their wellbeing?
- > How does the Bright Spots Programme work with organisations?
- > Key findings from Bright Spots.
- > What makes life good for children in care and care leavers?
- > Practice examples to improve children in care and care leavers' wellbeing.
- > What next for the Bright Spots Programme?

The briefing provides key messages from the Bright Spots programme, practice examples and reflective questions to help you think about how you might use the evidence and be involved in the programme in the future. Quotes from children and care leavers who took part in the Bright Spots surveys are included throughout the report. Each quote indicates the age group of the child or young person who responded.

Part 1: Overview of the Bright Spots Programme

Background to the Bright Spots Programme

It gives you that evidence base on how children feel, which is the true measure on how you're doing as a local authority isn't it? (Local authority respondent, Lewis & Selwyn, 2021, p. 8)

The Bright Spots Programme is a partnership project between **Coram Voice** and Professor Julie Selwyn at the **Rees Centre** (University of Oxford). The origins of the work go back to 2013 and a seemingly straightforward research question asked by the Hadley Trust: "which local authorities provide a good care journey for their children in care"? The researchers could not answer the question from the available data, which led to the Hadley Trust funding and supporting the Programme over the last nine years. The researchers found that whilst there were objective outcome measures, none of these focused on what children themselves felt about their lives (subjective wellbeing).

An example of objective measures are the national statistics published by the Department for Education (2021), which focus mainly on the negatives (for example, whether children are involved with criminal justice or substance misuse services). They are usually restricted to aspects of children's lives that are visible and quantifiable (for example, how they are doing in education) and rely heavily on adult assessments rather than the views of children and young people (whether they view their accommodation as suitable).

Ascertaining the wishes and feelings of children and young people in care is a requirement set out in the Children Act 1989 (Part 3, Sec 22 (4)) and reinforced in corporate parenting principles, which encourage the expression of views, and for those views to be taken into account (Department for Education, 2018). The United Nations Convention on the Rights of the Child (UNCRC, 1991) sets out children's rights to be heard, safe, and to be involved in decisions that affect them.

However, even where participation is strong in a local authority, only a minority of children and young people attend children in care councils or inform service development (Hazlehurst et al., 2016). The Bright Spots Programme is one way to help local authorities listen to a wider range of views and crucially, to respond to how their children in care and care leavers are feeling. Of particular importance is that it identifies things which may not ordinarily appear on performance dashboards (see below for further details).

The **Bright Spots Programme** has been working with children in care since 2013, and care leavers from 2017, to understand what needs to be in place to enable these children and young people to flourish. The Programme helps local authorities to systematically gather the views of their children and young people. Findings are used to influence practice, service development and strategic thinking, which is essential in ensuring that children's wellbeing is at the heart of delivering highquality services.

The Programme uses four online surveys of wellbeing to capture the views of children and young people in care (a survey for each of the ages 4-7yrs, 8-10yrs and 11-18 yrs), and care leavers (age 18 to 25yrs). To date, the Bright Spots surveys have been completed by over 17,500 children and young people from 59 local authorities in England and Wales.

The Bright Spots Programme is based on three core principles:

- 1) Focusing on what children and young people say about their lives and what is important to them.
- 2) Ensuring the views and experiences of children and young people influence service development and strategic thinking.
- 3) Sharing good practice between local authorities and agencies.

The Bright Spots surveys are key to the Programme and have been developed in five phases: (i) literature reviews, (ii) expert roundtable, (iii) focus groups and workshops with children and young people, (iv) survey development and (v) piloting (including cognitive testing) (see Selwyn et al., 2017; Wood & Selwyn, 2017; Zhang & Selwyn, 2019 for further information, and also the sections below).

The Bright Spots Programme has been recognised as making an important contribution to the measurement of children's wellbeing (Ryder et. al., 2017; Soffia & Turner, 2021).

The Bright Spots survey provides an effective means of collating the views of children in care. The information gathered has ensured that children's views are appropriately reflected in the updated promise to children in care and care leavers and has informed the refreshed strategic plan. (Ofsted Inspection Report, North Somerset, 2020, p. 9)

Questions for reflection

- > How does your organisation currently hear the voice of all children in care and care leavers about what matters to them?
- > How do children's views influence the design and delivery of your services?

What is wellbeing?

The importance of wellbeing has been acknowledged by governments, policy makers and the general public in recent years. Whilst there is no universally agreed definition of 'wellbeing', there is a consensus that it is multi-dimensional and taps into all aspects of people's lives, such as their socioeconomic status, positive relationships and self-esteem (Soffia & Turner, 2021). Different definitions of wellbeing emphasise different elements, with some giving more prominence to experiencing happiness and others to functioning well.

Subjective wellbeing is at the centre of the Bright Spots Programme and understood as, **feeling good and functioning well at an individual and interpersonal level** (Huppert, 2009). Research has shown that subjective wellbeing correlates with other outcomes such as educational attainment, better health, and employment prospects (OECD, 2021).

In recent years there has been an increased focus on understanding children and young people's subjective wellbeing (for example, The Children's Society, 2021) and how the elements that make up children's wellbeing may differ from those of adults. However, when the Bright Spots Programme began there was far less known about what wellbeing meant to children in care and care leavers, and whether this differed from other children and young people. The Bright Spots Programme addressed this gap in knowledge.

Questions for reflection

- > What makes *your* life and the lives of those you care about good?
- > What makes the life of the children and young people in your organisation good? How do you know this?

What do children in care and care leavers say is important to their wellbeing?

How did we find out what is important for wellbeing?

To understand what mattered to children in care and care leavers, the Bright Spots Programme worked collaboratively with around 170 children in care and care leavers, to identity what they thought makes a good life. This involved:

- > focus groups with children in care
- > workshops with care leavers.
- (See box below for further information about these.)

These events led to the creation of two new sets of wellbeing indicators based around different domains (see Figure 1 on page 8 for children in care and Figure 2 on page 9 for care leavers).

They identified things which may not ordinarily appear on performance dashboards: not feeling lonely, feeling good about appearance, having pets, spending time in nature or getting the chance to do similar things as friends (see the box below for examples from the workshop). Some of the survey questions that were subsequently developed are also used in national surveys (ONS, 2017; ONS, 2019) enabling a comparison of the responses from children in care or care leavers with those of children and young people in the general population.

Co-producing the wellbeing indicators with children and young people

The development of both the *Your Life, Your Care* survey (for children in care) and the *Your Life Beyond Care* survey (for care leavers) was guided by a children's rights perspective (James & Prout, 2005) with an emphasis on the child as active, competent and able to express an opinion on what mattered to them.

Children in care survey development

We held 18 focus groups with 140 children in care to enable the co-production of the questions that make up the *Your Life, Your Care* surveys. A variety of exercises were used as a springboard to discuss wellbeing, for example:

- > Young people were asked to write down all the people they knew, and to identify their three most important people and to think about why they had chosen them.
- Transition maps, where the young people were asked to draw a map of their life journey, indicating significant moments, such as starting school, or moving placement. Following this, if they wished, they were asked to talk through the way they felt at those times and what helped them or might have helped them to overcome any difficulties.
- Pretending to be an inspector visiting a foster carer's home and describing what you would expect to see in a good home or drawing a large outline of a social worker or carer and inside the outline drawing pictures or writing down the key qualities they would hope for.

Co-producing the wellbeing indicators with children and young people

Care leavers survey development

For the *Your Life Beyond Care* survey, we recruited two groups of care leavers (n=31) from two local authorities: one large metropolitan area and one smaller more rural area. Over the year, four workshops were held in each local authority, facilitated by the Bright Spots team.

- > Workshop 1 explored young people's views on, 'what makes a good life?' this produced a 'long list' of ideas on what care leavers considered important for their wellbeing.
- > Workshop 2 focused on selecting, drafting, and critiquing survey questions related to the things young people had identified as associated with positive wellbeing.
- > Workshop 3 focused on the best ways to distribute and encourage care leavers to complete the survey.
- > Workshop 4 was held after the pilot survey was conducted in the two authorities to discuss draft findings and young people's ideas on what their local authority should do next with the results.

The questions from the draft *Your Life, Your Care and Your Life Beyond Care* surveys were piloted, cognitive interviews undertaken and questions and survey design were edited following feedback (see Briheim-Crookall et. al., 2020; Wood & Selwyn, 2017 for more information).

Examples produced at the workshops are provided below.





Figure 1 Your Life, Your Care Wellbeing indicators (children in care)



Figure 2 Your Life Beyond Care Wellbeing indicators (for care leavers)

Stop and look at the wellbeing indicator diagrams and think about the work in your organisation:

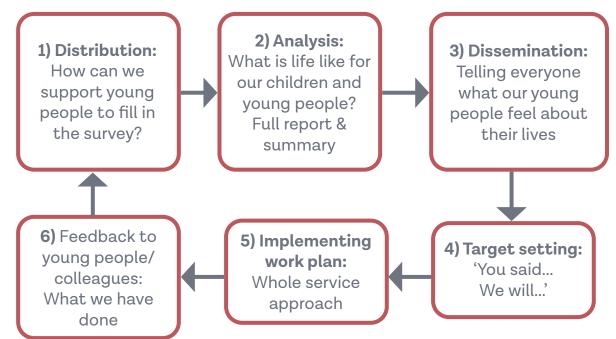
- > Are there areas your children or care leavers say are going well?
- > What are the areas that need improvement and focus?

How does the Bright Spots Programme work with organisations?

Bright Spots surveys are commissioned by local authorities and bespoke support is provided to each local authority by Coram Voice to encourage a good response rate. Part of the preparation involves setting up a working group that includes a senior leader. Each authority is asked to identify 'trusted adults' who can help children to complete the survey if needed (trusted adults cannot be the child's worker or carer because there are questions about them in the survey and the intention is for children to be able to complete the survey honestly). Local authorities achieve better response rates when they commit time preparing for the survey (e.g. carrying out a mapping exercise to identify when, where, and with whom, the child could complete the survey, especially those out of area or in secure accommodation). The survey is anonymous and quick (taking between 10 and 15 minutes). All questions are optional, and children have to give their consent to take part.

The Bright Spots team carries out independent analysis and produces reports, which highlight where local authorities are doing statistically better in comparison with other local authorities ('Bright Spot' awarded) and areas for improvement. Local authorities commit to disseminating the results and many produce action statements on how they will respond to their survey findings (see Figure 3). Many local authorities take the findings back to their Children in Care Councils to ensure young people are part of creating the solutions.

Figure 3 Bright Spots Process Flow



Evaluation of the Programme suggests that local authorities are motivated to take part because the child's voice is central to the work; it is underpinned by academic research and; it produces high quality analysis allowing local authority performance comparison over time and benchmarking against other local authorities (Lewis & Selwyn, 2021).

Part 2: Key findings from Bright Spots

The key findings highlighted in this section are based on **analysis of the views of nearly 10,000 children in care** (n=9,472) and **over 4,000 care leavers** (n=4,280), from 2016 to 2021. More information on the findings, including sources of comparison data, can be found in our reports (Selwyn & Briheim-Crookall et. al., 2020; Ludvigsen & Taylor, 2021; Suh & Selwyn (2022).

Findings for children in care are presented first followed by findings for care leavers.

What factors were associated with very high wellbeing and low wellbeing?

Children in care

How was wellbeing assessed?

Younger children's (age 4 to 10 years) wellbeing was assessed by their responses to all the questions. Those who had four or more negative responses and who described themselves as unhappy the previous day were categorized as having low wellbeing.

Older young people's (age 11 to 18 years) surveys contain more questions and their wellbeing was assessed based on their scores on four questions (some of which are also asked of young people in the general population): satisfaction with life; happiness yesterday; things done in life having a meaning; and positivity about their future. Young people's scores were placed into four categories (low, moderate, high and very high wellbeing). The same categories are used by the Office for National Statistics in their reporting of the wellbeing of peers in the general population (ONS, 2018c).

> "I love being in care because the people I live with are very nice and love me very much." (8-11yrs)

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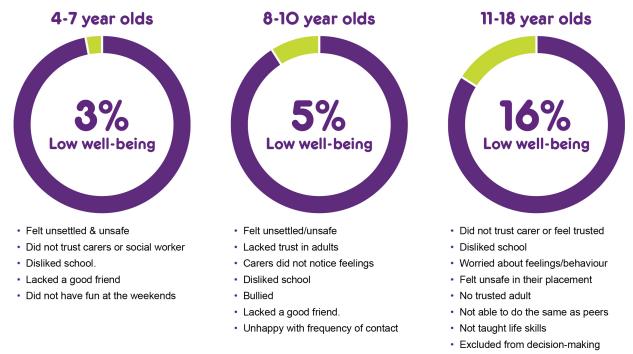
What we found

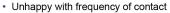
Many children in care were positive about their lives; 82 per cent felt their lives were getting better.

Most of the younger children (97% aged 4 to 7 years and 95% aged 8 to 10 years) felt they were doing well. Wellbeing decreased as children got older; 84% of young people in care (11-18 years) recorded moderate to high wellbeing, an age trend also seen in the general population (The Children's Society, 2021).

Our analysis also examined the factors that were associated with low wellbeing (see Figure 4).

Figure 4 Key factors statistically associated with the low wellbeing







Questions for reflection

- > Examine the key issues associated with low wellbeing for children in care what work are you doing in your organisation to address these issues, and what are the existing gaps?
- > How are you involving children and young people in creating solutions?

Positively, compared to the general population, a similar proportion of young people in care had very high wellbeing, but there was also a larger percentage with low wellbeing (see Table 1). For example:

- > 39% of children in care aged 11-15 years scored very high on feeling the things they did in life were worthwhile compared to 32% of children aged 10 to 15 years in the general population.
- > But 11% of young people in care had low scores on this measure compared with 4% of young people aged 10-15 years in the general population.

Table 1Comparison of wellbeing – young people in general population (10-15)* and young
people in care** (age 11 to 15)

		General population	Bright Spots programme
Things I do in life are worthwhile	% with low score	4%	11%
	% with very high score	32%	39%
Life Satisfaction	% with low score	4%	15%
	% with very high score	31%	37%
Happiness yesterday	% with low score	7%	18%
	% with very high score	30%	38%

*General population Young people age 10-15 (n=2,127-2,235)

www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/datasets childrenswellbeingmeasures ** Your Life, Your Care young people age 11-15 (n=1,668-1,696)

Care leavers

What we found

Care leavers' wellbeing was assessed in a similar way to children in care. Care leavers who scored between 0-4 (low) on two or more of the four questions used by the ONS to report on the wellbeing of the general population were categorised as having low wellbeing. The four questions use 0-10 scales to rate life satisfaction, happiness, feeling the things you do are worthwhile and anxiety.

There was a steep decline in wellbeing for care leavers. Around 30% of care leavers experienced low wellbeing, a proportion twice as high as young people in care. Compared with young people (11-18yrs) in care, a higher percentage of care leavers also felt unhappy, unsafe and unsettled where they lived (Figure 5).



Figure 5 Comparison of young people in care and care leavers

Care leavers with low wellbeing were more likely than other care leavers to:

- > be lonely
- > struggle with finances
- > feel unhappy about their appearance
- > feel unsettled where they lived
- > experience higher levels of stress
- > have more negative emotions than positive ones
- > have a disability or limiting health problem.

Care leavers with very high wellbeing had the opposite experience in many ways and tended to have strong supportive relationships (Figure 6).

Feel settled

Care leavers with very high well-being Felt treated better/same as Struggled to cope financially other young people Hardly ever/never felt proud, Felt proud and strong excited or strong Felt safe and settled at home Felt unsetttled where they live Did not feel lonely or afraid Felt lonely or afraid or angry **Experienced low levels** Experienced high levels of of stress stress Bigger support networks, Lacked trusting and supportive including partners relationships and good friends

Felt optimistic about their future

Happy with how they looked

Pessimistic about the future

Unhappy with how they looked

Care leavers with low well-being

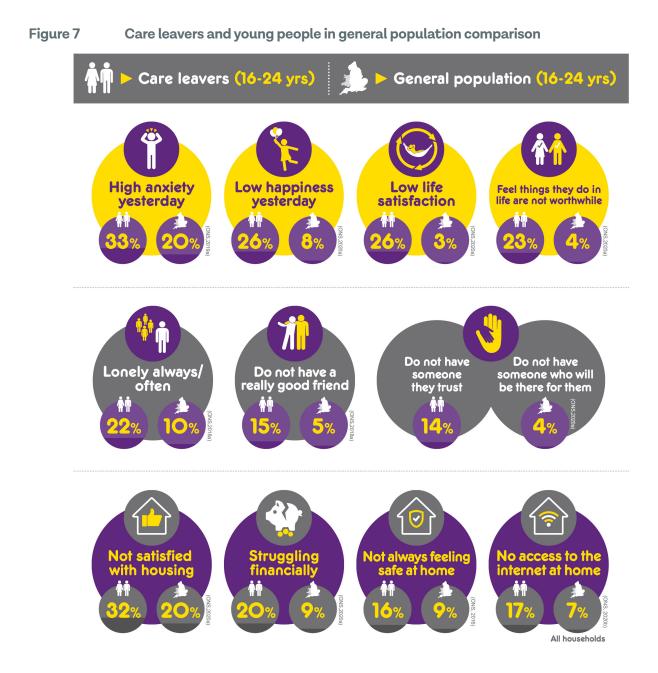


Questions for reflection

- > Examine the key issues associated with wellbeing for care leavers what work are you doing in your organisation (in partnership with young people) to address these issues, and what are the existing gaps?
- How are you involving young people in creating solutions?

Comparing the wellbeing of care leavers with young people in the general population

The ONS publishes national data on the wellbeing of young people in the general population (16-24 years). We compared the responses of care leavers to the same questions that are asked of peers¹ and found care leavers had lower levels of wellbeing on a range of measures (see Figure 7).



1 See the following data sources:

www.ons.gov.uk/peoplepopulationand community/wellbeing/datasets/youngpeopleswellbeing measures and the set of the set o

www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/childrensandyoungpeoplesexperiencesofloneliness/2018 www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/adhocs/006255feelingunsafewalkinghomeandbeinghomealoneafterdarkbyageandsextheeffectoffearofcrimeonqualityoflifeyearendingmarch2016 www.ons.gov.uk/peoplepopulationandcommunity/householdcharacteristics/homeinternetandsocialmediausage/datasets/inter-

www.ons.gov.uk/peoplepopulationandcommunity/householdcharacteristics/homeinternetandsocialmediausage/datasets/inter netaccesshouseholdsandindividualsreferencetables

There was a stark difference in responses depending on the local authority. Figure 8 illustrates the difference between the local authority with the smallest percentage of care leavers with low wellbeing, the average percentage and the local authority with the greatest percentage of care leavers with low wellbeing. The wide variation also suggests that it is possible to get it right and that we can learn from local authorities where young people feel they are doing well.





What makes life good for children in care and care leavers?

This section describes some of the key areas that matter to children in care and care leavers' lives in more detail.

Relationships with carers and workers

Having a trusted adult and a having a reciprocal trusting relationship with carers were the most important factors explaining local authority variation in wellbeing. Young people (age 11-18 years) who trusted their carer and also felt trusted by them had a 71% reduction in the odds of having low wellbeing compared with young people who did not feel trusted and did not trust their carer. Levels of trust differed by type of placement; those in kinship care had the greatest trust in their carers, while young people in residential care had the lowest ratings of trust.

Figure 9 Levels of trust in carer by age group



Most children trusted their social worker, though rates again decreased as children got older; more than one in ten (13%) young people (age 11-18) reported 'hardly ever' or 'never' trusting their social worker. Relationships are hard to maintain if workers constantly change; only about a third of young people (35%) in care had had the same social worker during the year.

Social workers don't actually know me. They read about me off a piece of paper. I've had so many I can't even count.

(11-18 years)

In comparison, care leavers reported higher levels of trust and lower turnover of workers than children in care (see Figure 10).

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Figure 10 Comparison of rates of trust



He [Personal Adviser] will call me regularly to check in with me and make sure I am ok, which makes me feel very secure. (Care leaver)

Relationships with family and friends

Many children and young people were unhappy with how often they saw their families. For example, over a quarter of children and young people felt they saw their mum too little (see Figure 11). Those in residential care were least satisfied.

More than one in ten (13%) children (8-10 years) and more than a quarter (26%) of young people (11-18 years) had no contact with either parent. Boys more often reported a lack of contact compared with girls. The youngest children (4 -7 years) were not asked about their contact arrangements.





Contact with family was one of the most common issues raised in the survey. Experiences were mixed; for example, some older young people had made a decision not to see a parent, but some wanted to see wider family members (especially grandparents, aunts or uncles).

Comments about contact centres were generally negative. Children were unhappy about the distance they had to travel and were worried about how much money their family had to spend to get there. They also felt that supervision at the centre was intrusive. They liked doing everyday activities with their families such as going to the park or bowling (see Lewis & Selwyn, 2022).

The place is too small, and so I would like it to be longer and outside, it feels more like a family day out that way. (8 to 10 years) Asked about whether they had a good friend, one in ten (10%) young people in care did not, compared with 3% of young people in the general population (ONS, 2018c).

I would like to stay in touch with the children of my foster carer when I leave, because they are my friends. They also make me happy, and we have lots of fun. (8-10 years)

It was striking how small some care leavers' social networks were; friends were the main source of emotional support (55%), but one in 20 (6%) felt they had no one and nearly one in ten told us they only had support from their leaving care worker.

Anxiety stops me [having fun] and having no friends, also I live in a small town with no opportunities. (Care leaver)

My best friend is an outstanding young man who through all the stuff he has on his plate he manages to still carry some of my life without complaining or hesitating. Whenever I am down or just need something to bring me up, he is always there. (Care leaver)



Question for reflection

> How are the relationships which children and care leavers identify as important to them (friends, family, carers, and workers) nurtured and supported in your organisation?

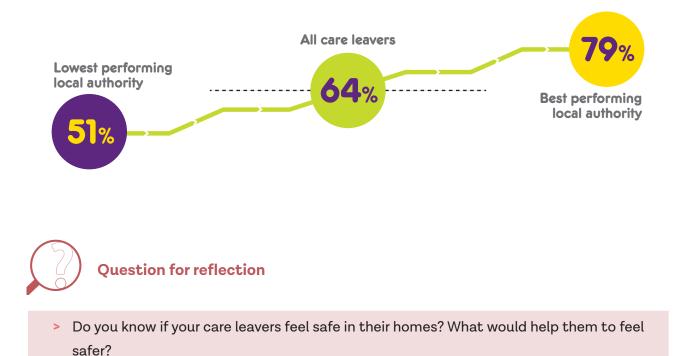
Right to feel safe

Positively, most children and young people in care (about 88%) felt safe where they lived; this is higher than children in the general population (82%).

I like being in care it makes me feel safe. (8-10 years)

Young people were less likely to feel safe if they had lived in multiple places and one in 20 living in residential care 'never' felt safe. The picture was particularly concerning in relation to care leavers; around a third did not always feel safe in their home. Disparity between local authorities was evident (see Figure 12).

Figure 12 Variation by local authority: Care leavers who felt safe in their home



Right to have views heard

Involvement in decision-making is a right as set out in Articles 12 and 13 of the UNCRC (UNICEF, 1989) and listening to and taking account of children's wishes and feelings is core to corporate parenting (Department for Education, 2018). The control that children and young people feel they have over what happens to them can influence their wellbeing.

Although the majority (86%), of children and young people felt included in decisions at least 'sometimes', many children responded that they wanted more involvement, better information about what was happening and feeling that their views were taken seriously and listened to.

My social worker always includes me in decisions. Out of all the social workers I've had [name] is the one I've connected to the most. (11-18 years)

I feel like when my social worker and other professionals have a meeting and it concerns me, when neither me or my mom are involved, it makes me feel anxious of what has got said...and what I get told second hand may not be true. (11-18 years)

The importance of ensuring children and young people's voices are heard and acted upon is set out in more detail in the following Research in Practice resources: *Enabling and embedding creative participation in child and family social work: Practice Tool* and: Embedding participation in child protection practice: Recorded Webinar.

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The importance of education

Children and young people in care were more positive about school than those in the general population; a higher proportion of young people in care (79%) liked school 'a lot' or 'a bit' compared with young people in the general population (70%). Liking school decreased with age (see Figure 13).

Not liking school was associated with not having a good friend, being in residential care and being afraid to go to school because of bullying. Overall, about 95% of children and young people felt their carers were interested 'all/most of the time' or 'sometimes' in what they were doing in school or college; a higher proportion than young people (88%) in the general population.



Figure 13 Liking school 'a lot' or 'a bit'





Questions for reflection

> How can you identify and support children and young people who don't enjoy school?

How do you work with education professionals to support children and young people who may be struggling at school?

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Part 3: Practice examples to improve children in care and care leavers' wellbeing.

Using Bright Spots findings to develop and change practice

The Bright Spots findings show that we need to learn from the positive experiences of those with high wellbeing and address the variation in experiences. Some of the changes identified and made by managers and social workers who took part in Bright Spots were small and easy to implement, whereas others were strategic. Staff and young people often emphasised the power of the collective voice; the sheer number of voices all saying the same thing was often the catalyst for change.

The stark thing I remember was when they didn't know who their social worker was, that for me was a real sort of "I can't believe that."...We need to be honest and open and clear and that allows us ... to look at all our practice, and not just assume that everybody is doing the same, as what I would do.

(Local authority representative, cited in Lewis & Selwyn, 2021)

You mustn't under-estimate how much Bright Spots has been a part of adding to that broader narrative that we have to change our behaviour. ... what actually motivated that change has been the whole collaborative narrative, but Bright Spots has been a very important aspect of it. (Local authority representative, cited in Lewis & Selwyn, 2021)

Examples of how local authorities have used their Bright Spots findings to develop and change practice are collated in the Coram Voice **Practice Bank** and detailed in the evaluation (Lewis & Selwyn, 2021). Local authorities that were able to deliver a successful programme and make changes often had:

- > a stable workforce
- > an established children in care council
- > support from senior management, especially the Director
- > inclusion of the participation lead within the senior management team
- > good working relationships with the virtual school.

Such arrangements were bolstered when there was also a culture that encouraged challenge and reflective practice. However, learning shows that implementing changes will differ by organisational context and what works in one may not work in another, which is why the starting point for the Programme is to focus on local solutions created in partnership with children.

Practice examples

Some examples of practice from organisations that have worked with Bright Spots are provided below.

North Somerset

Used their Bright Spots findings to rethink their pledge and to change the de-personalising language used by professionals. The change in language reflected the cultural shift that had occurred within the local authority, with children's voices valued, a focus on developing relationships and on ensuring children had a trusted adult. The change in language was visible in many of the local authority policy documents.

Sheffield

Set up a 'reverse scrutiny panel' of care experienced young people to oversee different strands of the action plan. The corporate parenting board are expected to present and receive feedback from the panel and work with them to improve their response to the Bright Spots findings.

St Helens

Were concerned that not all children (especially younger ones) knew who their social worker was. They developed one-page profiles of social workers and introduction cards to give out to children, which have their picture and contact details on. Children in care and care leavers' subjective wellbeing is underpinned by a complex range of factors. The dynamic and multifaceted nature of wellbeing means that there are many routes to improvement. Local authorities have worked on a whole range of initiatives associated with better wellbeing; focusing on hobbies and fun; reducing isolation; improving self-esteem and increasing opportunities for involvement in decision-making, as illustrated below.

Isle of Wight

Some children were not spending time outside in natural environments so, at low cost, an allotment project was established that is accessible for those with a disability and can be a hub for other activities too.

East Riding

The local authority got together a group of care leavers to discuss the survey findings. Young people wanted more group based activities and a football team was set up. Dance workshops have also been started to help support children's self-esteem.

Sheffield

Ran a challenge ('Reality cheque') for staff and councillors to live on the average income of a care leaver for the week. The challenge was also profiled in the local paper.

Isle of Wight

Have involved care leavers in commissioning their own accommodation with a focus on feeling safe.

Sheffield

Body image was an area that the children in care council chose to focus on, organising a fashion show designed to encourage children to 'love themselves' for who they are.

Wellbeing indicators: Examples of resources for practice

The Bright Spots Programme has produced a range of resources for practice related to the different wellbeing indicators. Here we highlight two of these areas:

- 1) Understanding reasons for care.
- 2) Tackling stigma.

1) Understanding reasons for care

Having an adult explain the reasons for care directly influences children's wellbeing. Yet a concerning finding is the high number of children and young people who feel they lack a good understanding. About half of the youngest children, a third of children aged 8-10 years and a fifth of older young people wanted more information and for an adult to explain. Just under a quarter of care leavers (23%) felt they didn't fully understand why they had been in care or wanted to know more (see Figure 14).

Children and young people asked for carers and professionals to be honest and open, not to delay or avoid talking about things, and to talk about their histories and families when they wanted to know more.

They call it life story work ...but they don't really do it. I have a memory box, but I want information and facts To know more about how I came into care. I think I should have been told years ago. (11-17 years)

Why do people not tell me the whole truth [about] not being able to talk to my birth mother? (8-10 years)





There was variation across local authorities, for example:

- East Riding had a relatively high proportion of care leavers who felt the reasons they were in care had been fully explained – they explicitly include a question in pathway plans about whether young people have any questions about why they became looked after so it is an area regularly talked about.
- In Southampton, the local authority responded to their Bright Spots survey findings by developing a new training workshop for social workers called 'Finding the right words'. The training offers a reflective space to work together on ways to communicate difficult experiences. To support the youngest children, the local authority have also created a storybook about a bear who needs different care. The book is designed to be used as a starting point for life story work and the aim is for each child to receive a bear with the book when it is rolled out. The books will be individually tailored as pages can be changed to reflect the different reasons for admission to care.

Further reading

Bright Spots insight paper: Understanding why you are in care

2) Tackling stigma

Young people aged 11-18 years were asked if adults did things that made them feel embarrassed about being in care: 13 per cent responded that was the case. Young people wrote about adult actions that singled them out as different from their peers (for example, review meetings at school; workers wearing badges; having a different name to carers). Young people felt their privacy was not respected, confidentiality was breached, and some felt that they were discriminated against because of their care status.

Everyone knows I am in care. Why hold meetings where everyone can see? (11-18 years)

When I was in primary school, they used to put a little colour next to my name to show I am in care.

(11-18 years)

Challenging stigma in the care system

Local authorities have responded to stigma experienced by children and young people by changing policies so foster carers and children agree on the names they call one another at placement meetings, and revisiting this at looked after children reviews.

Sheffield's children in care council developed a project called 'Assembly squad'; children worked with the virtual school and a design team to create materials for school assemblies and lesson plans, challenging myths about children in care for all the schools in their area. A film was made to de-mystify care. All schools in the city will get the resources.



Bright Spots insight paper : Challenging stigma in the care system

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What next for the Bright Spots Programme?

The Bright Spots Programme continues to develop and involve more local authorities. Taking part involves commitment from across the local authority and a willingness to hear children's responses. It can be surprising and difficult to really hear what children in care and care leavers have to say.

Findings from the Programme highlight the things that are strongly associated with wellbeing. Some of these are not routinely considered, such as understanding why young people feel unhappy with how they look, tackling loneliness amongst care leavers, as well as building trust between children and carers or workers. Local authorities need to shift their focus to designing services with a clearer focus on children and young people's wellbeing. Listening to what the Bright Spots findings tell us can help establish a care system that not only keeps children and young people safe, but also helps them to flourish.

Until current information routinely includes children's own views, we will continue to miss a vital part of the picture. Key questions that strategic leads need to consider when developing policy and practice in the care system include:

- > Are our services really based on what children in care and care leavers say is important?
- > Do we really know how our children are feeling?
- > Do we work in partnership with them to design and deliver support?



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Further reading

For further information see the following Bright Spots publications: *https://coramvoice.org. uk/for-professionals/bright-spots/bright-spots-publications/*

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