‘Advocacy makes you feel brave’:
Advocacy support for children and young people in Scotland

Susan Elsley
Consultant

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1. EXECUTIVE SUMMARY

INTRODUCTION
WHAT IS ADVOCACY
FINDINGS OF STUDY
FUTURE DEVELOPMENT OF ADVOCACY FOR CHILDREN AND YOUNG PEOPLE

2. INTRODUCTION

OUTLINE OF STUDY
METHODOLOGY

3. CURRENT UNDERSTANDINGS OF ADVOCACY

WHAT IS ADVOCACY SUPPORT FOR CHILDREN AND YOUNG PEOPLE
HOW ADVOCACY IS PROVIDED
ROLE OF ADVOCACY IN SUPPORTING CHILDREN AND YOUNG PEOPLE
CHILDREN AND YOUNG PEOPLE’S VIEWS OF ADVOCACY
INDEPENDENT ADVOCACY
EXAMPLE OF ADVOCACY DEVELOPMENTS ELSEWHERE IN UK

4. CIRCUMSTANCES IN WHICH ADVOCACY IS PROVIDED

CHILDREN AND YOUNG PEOPLE’S RIGHT TO ADVOCACY
ACCESS TO ADVOCACY BY AGE GROUP
ACCESS TO ADVOCACY BY CIRCUMSTANCES
ACCESSING SERVICES
GAPS IN EXISTING PROVISION
GENERAL GAPS IN ADVOCACY SUPPORT
SPECIFIC GROUPS OF CHILDREN AND YOUNG PEOPLE

5. PROVISION OF ADVOCACY SERVICES

ORGANISATIONS PROVIDING ADVOCACY SERVICES
ADVOCACY SERVICES PROVIDED BY THE VOLUNTARY SECTOR
LOCAL AUTHORITY CHILDREN’S RIGHTS SERVICES
LEGAL REPRESENTATION AND ADVOCACY

6. PROVIDING QUALITY ADVOCACY SERVICES

DEVELOPING A CULTURE OF CHILDREN’S RIGHTS
WORKING TOGETHER: PROFESSIONALS AND ADVOCACY
DELIVERING HIGH QUALITY ADVOCACY SERVICES
7. CONCLUSIONS

STRATEGIC OVERVIEW OF ADVOCACY SERVICES 33
PROMOTING ADVOCACY 33
CHILDREN AND YOUNG PEOPLE’S EXPERIENCE OF ADVOCACY 34
GAPS IN ADVOCACY SUPPORT 34
PROVIDING QUALITY ADVOCACY SERVICES 35

8. EXAMPLES OF ADVOCACY SERVICES 36

9. APPENDIX 1: CONTRIBUTORS TO THE STUDY 41

10. REFERENCES 43
Acknowledgements

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The title for the report ‘Advocacy makes you brave’ is a quote from a young person who used the services of Advocacy Western Isles.
1. Executive summary

Introduction
This report presents the findings from a scoping study into advocacy support for children and young people. The research was commissioned by the Scottish Government in order to find what advocacy services are available in Scotland, where they are and the circumstances in which they are available and to which groups of children and young people.

A total of 39 face to face or telephone interviews were undertaken with representatives of voluntary organisations and local authorities which directly provide advocacy services or have expertise in the needs of particular groups of children and young people. In addition, interviews were undertaken with representatives of national agencies. A range of other organisations provided information or informal contributions.

What is advocacy
Advocacy is about ensuring that children and young people can express their views and that these views are heard and taken into account by those who are involved in decision making about children and young people’s lives.

Advocacy can provide support to children and young people in all kinds of formal situations such as complaint processes, tribunals, Children’s Hearings and court proceedings. It can also provide support to children and young people in more informal situations where having their voices heard can make a significant difference to their lives at home, in access to services and in their communities.

Advocacy is provided in a range of ways. Children and young people can advocate for themselves or be supported by a range of adults including parents and carers and professionals. It can be undertaken in groups as collective advocacy. It is also a distinct service provided by professional advocates and underpinned by common approaches.

Advocacy can support children and young people to deal with particular issues or circumstances. It can also empower children and young people and develop their life skills. Advocacy is not about securing the ‘best interests’ of the child but about a child or young person’s right to express his or her views. The role of the advocate is to support the child or young person’s voice.

Findings of study
The study found that advocacy was regarded as a core service in ensuring that children and young people’s rights are upheld. Promoting a greater awareness of the role of advocacy as well as a culture of children’s rights was seen to be fundamental to the effectiveness of advocacy for children and young people.

There is a commitment to children and young people’s right to have their voices heard in areas of legislation and policy. The right to advocacy is acknowledged in some of these instances but is less likely to be a statutory or practice commitment. In some limited
situations children and young people are entitled to legal representation, safeguarding or other forms of support.

There was a general commitment to independence in the provision, commissioning and funding of advocacy. However, independence was regarded as a complex issue. It was seen to be important that a service was independent to preserve advocates’ objectivity. This independence could take different forms.

Children and young people’s views on whether a service provided the impartiality and quality that they needed was seen to be central to any discussion about the independence of a service. What emerges from research and consultation with children and young people is that the quality of the advocacy relationship is of great importance. Children and young people do not usually refer themselves to advocacy services. They do not have a great deal of awareness of advocacy in advance of their first contact with a service.

It is difficult to identify whether existing provision meets the needs of children and young people in the absence of local or national strategic approaches to matching children and young people’s need with availability of service. Children and young people’s access to advocacy support depends on where they live rather than on what they need. Most services are targeted at a specific set of circumstances and are not able to address issues which fall outside their remit.

There is not a consistent approach to providing advocacy for children and young people across all age groups. Advocacy services have different upper and lower age limits for children and young people who access advocacy services. There is less advocacy support available for younger children and for older young people aged 16 years and over.

There are significant gaps in advocacy support for children and young people. This includes a lack of services for children and young people looked after at home, disabled children and young people, for those attending Children’s Hearings, those living in rural areas and black and minority ethnic children and young people.

The study found that there were a diverse range of well regarded advocacy services providing support to children and young people across Scotland. The range of voluntary organisations involved in delivering some form of advocacy support shows that there are a variety of different models and approaches to independent advocacy support for children and young people. Local authorities have a strategic role in providing advocacy support for children and young people. They do this through commissioning services from independent organisations as well as providing advocacy themselves.

Children and young people’s access to advocacy and legal representation were seen to be closely linked. Professional advocacy was seen by many as being a step before legal representation.

The study revealed a lack of easily accessible national and local information on advocacy services for children and young people in Scotland. There was a call for the development
of standards for advocacy services for children and young people and for more professional status to be given to the work of advocates.

**Future development of advocacy for children and young people**

The findings show that there are number of potential ways in which advocacy support for children and young people could be strengthened in Scotland. These include:

- the development of national and local strategies for advocacy support for children and young people
- ensuring that children and young people’s views and experiences inform advocacy services
- the promotion of greater awareness of advocacy and children’s rights to professionals, children and young people, and their families
- the development of national standards for advocacy services for children and young people
- consideration of how gaps in advocacy services could be addressed in consultation with advocacy providers.
- providing opportunities for training and networking for professional advocates
- exploring ways in which the independence of the range of advocacy services can be supported, including the provision of appropriate funding arrangements.

In conclusion, this report suggests that there are opportunities to develop advocacy support for children and young people in Scotland which can build on existing high quality practice and offer advocacy support to children and young people who need these services.
2. Introduction

Outline of study

This report presents the findings from a scoping study into advocacy support for children and young people. The research was commissioned by the Scottish Government in order to find what advocacy services are available in Scotland, where they are and the circumstances in which they are available and to which groups of children and young people. It is intended that the findings will help the Scottish Government make an assessment of the current position for advocacy services for children and young people in Scotland. This commitment is outlined in the Scottish Government’s programme for action, *Do the Right Thing: For people who work with children or work on their behalf* (Scottish Government, 2009), which was developed in response to the *Concluding Observations* of the United Nations Committee on the Rights of the Child (Committee on the Rights of the Child, 2008).

The research was undertaken between June and September 2009 by an independent consultant. Information was gathered from national and local organisations which directly provide advocacy to children and young people as well as other service providers.

The following questions were explored:

- what are current understandings of what is advocacy support for children and young people?
- what are the circumstances in which advocacy is available?
- where are advocacy services located?
- which children and young people have access to these services?

The study considered the availability of services across different geographical and local authority areas including urban and rural communities. It was informed by guidance and policy on children and young people’s entitlement to advocacy and the range of semi-judicial, legal and administrative processes where children and young people may have access to advocacy support.

The needs of diverse groups of children and young people were considered. These groups included children and young people who are looked after, young people leaving care, disabled children and young people and black and minority ethnic children and young people including young Gypsy Travellers and unaccompanied and separated young people.

Children and young people were not interviewed due to the size and scope of this study. However, children and young people’s views and experiences are central to any consideration of advocacy support. Consideration should be given as to how children and young people can contribute to future discussions on advocacy services.
**Methodology**

Interviews were undertaken with representatives from key organisations in order to explore the nature and availability of advocacy services. There were a total of 39 in-depth face to face or telephone interviews. Many interviews involved a range of representatives from the same organisation or associated projects including two group interviews with children’s rights officers. All data gathered in interviews was recorded and summarised. Where possible, summaries of interviews were shared with participants to ensure accuracy. Data was analysed by theme using Excel.

In addition, a small number of organisations contributed their views through a short questionnaire where interviews were not practical or to gain insights from a wider group. This included a number of local authorities which provided responses to a questionnaire distributed to members of the ADSW Residential Child Care Sub-Committee.

Participants were drawn from voluntary organisations and local authorities which directly provide advocacy services as well as those with an interest in advocacy support for particular groups of children and young people. In addition, interviews were undertaken with representatives of national agencies including the Care Commission, HM Inspectorate of Education (HMIE), Scottish Children’s Reporter Administration (SCRA), the office of Scotland’s Commissioner for Children and Young People (SCCYP), the Scottish Human Rights Commission (SHRC) and the Social Work Inspection Agency (SWIA). A range of other organisations provided information or informal contributions to the study. Up to date information was sought on advocacy developments elsewhere in the UK. A list of contributing organisations is included at the end of the report.

**3. Current understandings of advocacy**

**What is advocacy support for children and young people**

Advocacy can help people to express their own views and to make decisions which are informed according to the Scottish Independent Advocacy Alliance (SIAA, 2008b). Advocates can help people by speaking on their behalf if they cannot speak for themselves. It can increase the options that people have by providing them with information. Advocacy provides support for those who are vulnerable or discriminated against (SIAA, 2008b).

These definitions of advocacy are also applicable to support for children and young people. However, Oliver and Dalrymple (2008) point out that advocacy services provided for children and young people are different to those for adults although there may be similarities in the underpinning principles. They suggest that advocacy support has been influenced by presumptions about children and young people’s capacity to participate in decisions that affect them. In addition, services in the UK have developed around the particular circumstances of children and young people such as those who are looked after (Oliver and Dalrymple, 2008).

Organisations contributing to the study were asked for their own definitions of what was advocacy support for children and young people. There was general agreement that
advocacy is a way of ensuring that children and young people can express their views and that these views are heard and taken into account by those who are involved in decision making about children and young people’s lives. As one participant suggested:

It is a vehicle to offer support, encouragement, understanding, or to promote a child’s point of view that is possibly not heard sufficiently. It could provide [an] opportunity for a child to gain more confidence in difficult, sometimes traumatic or bewildering circumstances. It can provide a child’s perspective on many complex issues where much of the power and decision making lies with adults. (Local authority questionnaire response)

Advocacy can provide support to children and young people in all kinds of formal situations such as complaint processes, tribunals, Children’s Hearings and court proceedings. It can provide support to children and young people in more informal situations where having their voices heard can make a significant difference to their lives at home, in access to services and in their communities.

Those who took part in the study were committed to the role of advocacy in supporting children’s rights as defined in the United Nations Convention on the Rights of the Child (UNCRC). There was a general view that advocacy is not about securing the ‘best interests’ of the child but about a child or young person’s right to express his or her own view. Advocates cannot form a professional view on what is in the best interest of children and young people. Their role is to support the child or young person’s voice.

The Scottish Government acknowledges the importance of advocacy in its contribution to the UK Government report to the United Nations Committee in the Rights of the Child (Scottish Executive, 2007). It has produced a follow up programme in response to the United Nations Committee’s Concluding Observations to the UK in 2008 (Scottish Government, 2009). This programme includes a commitment to agree priorities for advocacy and the preparation of a national plan to improve advocacy support for children and young people in Scotland.

**How advocacy is provided**

Advocacy can be provided in a number of ways. Pithouse, Parry and Crowley (2005) suggest that there are broadly three different types of advocacy although these categories may overlap. Their definitions of advocacy can be summarised as follows:

- Case, systemic or cause advocacy. In these situations learning from cases helps collective advocacy which promotes systemic change.
- Passive and active models of advocacy. These can vary from a professional advocate speaking on behalf of an individual to a person self advocating.
- Service model of advocacy. Services are established or commissioned by service providers who continue to have some oversight. These services provide case advocacy and possibly collective or peer advocacy.

(Pithouse, Parry and Crowley, 2005: 6)
These models of advocacy are influenced by who is involved in providing the advocacy and the extent to which children or young people can advocate on their own behalf, by themselves or as part of a group.

The study found that there are a number of approaches to advocacy support for children and young people. In an individual situation, a child or young person can often advocate for themselves and make their own views known, the active model outlined above. This is likely to be easier in environments where listening to children and young people and encouraging their participation is commonly accepted. But self advocacy can be much more difficult for children and young people who experience difficult and challenging circumstances and have to engage with complicated processes and a range of adult professionals. In these instances, advocacy provided by adults can help children and young people to express their views and to participate more effectively in formal and informal situations. Advocacy provided by other children and young people is not common. Oliver and Dalrymple (2008) state that peer advocacy is more likely to take place between adults than among children and young people.

Advocacy support to children and young people can be undertaken by a range of adults including their parents and carers as well as professionals such as social workers, teachers, youth workers, child care staff and nurses (Boylan and Dalrymple, 2009; Creegan, Henderson and King, 2006). These adults may provide advocacy as part of their personal or professional relationships with an individual child or young person. This form of advocacy was not considered in this study but it is important to recognise its value in supporting children and young people.

Advocacy is also a distinct service which is provided by professional advocates and underpinned by some common approaches. These advocates, by virtue of their discrete role providing advocacy to children and young people, are able to support the individual child or young person without a professional or personal conflict of interest. This study found that most advocacy support in this category is provided by independent organisations which are part of the voluntary sector and by children’s rights officers who are employed by just under half of local authorities in Scotland. These advocacy services usually provide support in a specific set of circumstances although some provide support across a wider range of issues. Professional advocacy is the form of advocacy support which is considered in this report.

National or local organisations may undertake collective or group advocacy with children and young people. The majority of organisations who took part in the study highlighted the importance of collective advocacy for ensuring that the voices of children and young people were heard across a variety of contexts. This collective or group advocacy is undertaken by many organisations that work with children and young people.

Some advocacy support is provided to parents and carers of children and young people rather than for children and young people themselves. This is particularly the case in the case of education issues concerning additional support needs in relation to the Education
(Additional Support for Learning) Scotland Act 2004 and the more recent 2009 Act which makes amendments to the previous act. Organisations with disabled children, young people and their families highlighted that advocacy is more frequently provided to parents and carers than to children and young people.

Participants pointed out that advocacy is different to other types of services which support children and young people such as befriending, counselling, safeguarding, providing information and mediation. However, advocacy provided by professional advocates may overlap with elements of these other activities. In turn, these services may provide some form of advocacy as a consequence of their role in relation to children and young people.

Advocacy is provided in range of ways. Children and young people can advocate for themselves or be supported by a range of adults including parents and carers and professionals. It can be undertaken in groups as collective advocacy. It is also a distinct service provided by professional advocates and underpinned by common approaches.

**Role of advocacy in supporting children and young people**

The study found that advocacy was regarded as having two overarching roles. It is a resource for supporting children and young people in dealing with particular issues or circumstances. It can also empower children and young people, enable them to participate more widely and develop their life skills. The importance of the link between advocacy and participation and empowerment is noted in other research (Boylan and Dalrymple, 2009; Creegan, Henderson and King, 2006).

Participants thought that advocacy could make a significant contribution to helping children and young people find out about their rights. Advocacy can support children and young people to understand what happens at different stages of the processes in which they are involved. Children and young people can explore the implications of the situations they are in and why other people might have different views to their own. They then have the ability to make informed choices about what they would like to happen.

Advocacy also had a role in dealing with obstacles to children and young people’s participation. They can be supported by advocates to take part in a variety of processes such as formal meetings, tribunals and Children’s Hearings. They might have difficulties in understanding written reports and the jargon used by professionals and be overwhelmed by the numbers of people who attend meetings. Children and young people might not have had the opportunity to have their voices heard previously and have low levels of confidence. Participants thought that advocacy can support children and young people address these challenges.

It was pointed out that advocacy could challenge adults’ views about children and young people’s capacity to take part in processes. Professionals and parents and carers, for example, might take a view that children and young people were not able to contribute to processes and discussions. This was seen to apply particularly to younger children and to disabled children and young people. However, many participants pointed out that having
an advocate could support children and young people to participate despite these adult perspectives.

Advocacy professionals also suggested that the support of an advocate could lessen children and young people’s feelings of helplessness. This is relevant where young people do not understand the implications of what is happening to them. Through advocacy, they can be supported to be part of the process that they are encountering rather than feel excluded. Advocacy can therefore help children and young people to negotiate and participate more effectively in problem solving.

Many participants highlighted that trust is an essential element of developing a positive relationship between advocates and children and young people. Those involved in advocacy services stated that the quality of the advocacy relationship is important where children and young people are dealing with difficult or traumatic situations. To build trust, children and young people need time to build relationships with their advocates. The importance of a high quality advocacy relationship is confirmed by research with children and young people (Creegan, Henderson and King, 2006; Gillies, 2002; Pithouse, Parry and Crawley, 2005).

Several professionals pointed out that, ultimately, the aim of advocacy is to promote self advocacy so that young people can speak out on their own behalf. This is important where young people are continuing to deal with challenging situations in their own lives. It was suggested that advocacy can help in developing important life skills for children and young people. This is particularly relevant for young people who are leaving care and disabled young people in their transition to adult services. However, self advocacy is not easy to achieve because of young people’s previous experiences, low self-esteem and the complexity of the situations they encounter. One children’s rights officer pointed out that the process of advocacy can last for ‘ten minutes, few weeks, few months or ten years’ depending on the needs of the child and the remit of the advocacy service.

Advocacy was regarded by those who contributed to the study as being a core service in ensuring that children and young people’s rights are upheld and redressing power imbalances between adults and children.

**Children and young people’s views of advocacy**

There is not an extensive body of research and consultation on children and young people’s use, views and experience of advocacy support in Scotland. Where research has been undertaken, it has focused on children and young people’s experience of advocacy in specific settings. A number of key findings emerge from the existing research relating to children and young people’s access to, and experience of, advocacy services.

Research on children and young people’s experience of advocacy support and participation in the Children’s Hearing System, *Big Words and Big Tables*, found that advocacy support provided by independent advocates was not a common experience for children and young people (Creegan, Henderson and King, 2006). Children and young people who did have access to this support found it to be helpful. They wanted advocates...
who could be trusted, communicated effectively and were able to listen. The report also found that advocacy support for individual children and young people was likely to come from different adults who undertook several roles that could be associated with advocacy. The researchers concluded that advocacy for children and young people in the Children’s Hearings system needed to consider the shared and diverse needs of children and young people (Creegan, Henderson and King, 2006).

A research project on advocacy undertaken by Yorkhill NHS Trust in Glasgow found that older young people were more aware of the concept of advocacy than younger children (Gillies, 2002). This could be attributed to previous contact with health professionals. The older age group wanted advocates who were relaxed, friendly and that they knew already. Confidentiality was again important. In addition to research on advocacy, Who Cares? Scotland has published the findings from an extensive body of consultation and research with young people on their experiences in care settings (Siebelt and Morrison, 2008; Barry and Moodie, 2008). These provide insights into the relevance of the advocacy relationship to children and young people who are looked after away from home.

Research commissioned by the Welsh Assembly Government (Pithouse, Parry and Crowley, 2005) on children and young people’s views on advocacy identified a number of key issues which are relevant to the Scottish context. The Welsh study found that children and young people did not know about advocacy in advance of their initial contact. They were unaware how advocacy provision was structured or its management arrangements. Children and young people wanted access to advocacy earlier rather than later. Their choice was to be supported by professional advocates in formal processes because of the knowledge of advocates and their focus on the voice of the child. Children and young people wanted to get to know advocates as well as be confident that the service was confidential. The independence of the advocate was important although children and young people were not always clear what independence meant in terms of an advocacy service (Pithouse, Parry and Crowley, 2005).

What emerges from research and consultation with children and young people is that the quality of the advocacy relationship is of great importance to children and young people and that they do not have a great deal of awareness of advocacy in advance of their first contact with a service.

Independent advocacy

The independence of an advocate is regarded as an important element of a high quality advocacy service. The Scottish Independent Advocacy Alliance states that advocacy should be provided independently of service providers (SIAA, 2008c). In order to preserve independence, organisations providing advocacy should only provide advocacy support and they should aim to be free from conflicts of interest. The Scottish Executive’s (2001) guidance for commissioners of independent advocacy services also highlights that independence is an important component of advocacy and that these services should be accountable to those it serves as well as being ‘constitutionally and psychologically’ independent of local and national government. However, Oliver (2008)
points out that research elsewhere in the UK shows that there are different interpretations of independence. Oliver suggests that independence should be seen as part of a continuum rather than as something fixed. This wider interpretation is relevant to this study which found that there were different perspectives about which services were independent.

Children and young people’s views on whether a service provided the impartiality and quality that they needed was seen to be central to any discussion about the independence of a service. It was suggested that independence becomes more complex when a child or young person raises issues about a service with which they are not happy and which also employs the children’s rights officer providing advocacy. In these instances the child or young person seeking advocacy might perceive this service to be biased. The study on advocacy in the Children’s Hearing system, *Big Words and Big Tables*, found that the independence of an advocate was not necessarily an important factor (Creegan, Henderson and King, 2006). However, the report also suggests that the importance attributed to trust, confidentiality and the ability to challenge panel members indicates that independence might also be seen to be important, taking into account these different advocacy skills (Creegan, Henderson and King, 2006). Advocates in this context might include a wide range of different adults including professional advocates.

The question of whether advocacy should be independent of provider is most relevant to those local authorities which have a children’s rights service. Those from local authorities which employed children’s rights officers emphasised that they worked hard to eliminate any issues about independence in the provision of their own advocacy services. Most had managerial and physical arrangements which ensured that children’s rights officers were separate from those working directly with children such as social workers. One senior local authority representative emphasised that local authorities provided public services and children’s rights officers were not there to deflect issues from local authorities. They had an important and strategic function in advocating for children and young people as well as informing the work of local authorities on children’s rights issues.

Children’s rights officers stated that they were able to challenge their employing local authority in their advocacy role. They were able to take concerns to senior officers in their own authorities. Several children’s rights officers pointed that they had access to staff, resources and information which would not be available in independent services provided by the voluntary sector. Children’s rights officers were clear about the other benefits that arose from local authorities having this level of advocacy expertise in-house. It provided opportunities for developing other activities including consultation with groups of children and young people, resources and training for staff and informing service and policy developments.

The issue of independence also affected advocacy services provided by the voluntary sector and where they were funded by local government or the local NHS board. This relationship did not always promote independence because of the financial dependence of voluntary organisations and the role of the funder in establishing service priorities as part of contractual arrangements. Organisations said that they were often in receipt of short
term temporary funding which could change from year to year. This was difficult for organisations which ran services across a number of local authority areas. These organisations could find that they were providing different services to children and young people in each area. It was suggested that it would be beneficial to have funding which was provided nationally and separate from statutory agencies in order to ensure the independence of advocacy services. Another approach would be to provide incentives for local authorities to provide appropriate funding which was secure for a period of time and which enabled there to be some contractual distance between the commissioner and the provider.

Independence in advocacy was regarded as a complex area. It related to who provided advocacy services as well as the funding and commissioning arrangements. There was a general commitment to independence which could be interpreted in different ways. Children’s rights officers provided services which were valued and seen as high quality. A significant number of independent advocacy providers also pointed out that it was important for a service to be independent to preserve the advocate’s objectivity. Children and young people’s perceptions of the impartiality and quality of the service were of central importance.

**Example of advocacy developments elsewhere in UK**

Both England and Wales have undertaken work on developing advocacy support for children and young people during the last few years. National standards for the provision of advocacy in England were published in 2002 (Department of Health, 2002). In Wales, a substantial programme of work has been undertaken in the development of a strategic approach to advocacy services for children and young people. This follows the recommendations of a number of influential reports during the last decade including the Waterhouse report, *Lost in Care*, (Department of Health, 2000) and a report from the Children’s Commissioner for Wales, *Telling Concerns* (2003). National standards for advocacy services for children and young people were agreed in 2003 which state, for example, that ‘advocacy should be led by the views and wishes of children and young people’ and that children’s rights and needs are central to advocacy (Welsh Assembly Government, 2003:5). An approach to developing local advocacy services through statutory cross sector partnerships has been developed. A national advocacy unit has been established by the Welsh Assembly Government to promote advocacy, report on advocacy standards and outcomes and explore commissioning arrangements. A national independent advocacy board was set up in 2009 to take an independent strategic overview of advocacy developments in Wales. The board has membership from young people and adult professionals.

The proposals for advocacy services for children and young people in Wales have been developed through extensive consultation at national and local level. This is particular to Welsh structures and processes. However, there may be elements of the work undertaken in Wales which are relevant to a Scottish context. One example might be the involvement of children and young people in the national and local development of advocacy services.
4. Circumstances in which advocacy is provided

Children and young people’s right to advocacy

The study found that advocacy services are available to children and young people in a variety of circumstances. A child or young person may get advocacy support when they engage in formal processes and systems such as child protection case conferences, Children’s Hearings, mental health and additional support needs tribunals and where they go to court.

They also may have access to advocacy to help with situations that are not related to formal processes. These can cover a wide range of areas depending on the circumstances of the child. In a recent review of its services, Who Cares? Scotland noted that children and young people wanted help from advocates with issues around contact with families and friends, to clarify rules and routines around group living, contact with social workers, care planning and leaving care (Who Cares? Scotland, 2009).

The Scottish Government’s report for the UN Committee on the Rights of the Child points out that there are a number of approaches which can be used where children’s rights are denied (Scottish Executive, 2007). In addition to tribunals, children and young people have the right of appeal to court, where, for example, refusal of placing requests in the Sheriff court can be appealed. Children and young people have the right to make complaints to public bodies. The Scottish Commissioner for Children and Young People has a duty to promote and uphold children’s rights, including monitoring areas where children and young people’s rights have been infringed.

The principle of children and young people’s right to be heard is stated in a variety of legislation such as the Children (Scotland) Act 1995, the Looked After Children (Scotland) Regulations 2009, the Standards in Scotland’s Schools Act 2000 and the Education (Additional Support for Learning) Scotland Act 2004. Although the rights of children and young people to express their views is affirmed in legislation and in policy documents such as the Children’s Charter (Scottish Executive, 2004) and programmes such as Getting it Right for Every Child (GIRFEC), there are few instances where children and young people’s rights to advocacy are enshrined in legislation or other processes. The Mental Health (Care and Treatment) (Scotland) Act 2003 gives the right to an independent advocate to anyone with a ‘mental disorder’, a term which covers those with mental health difference, personality disorder or learning difficulty. This includes children and young people. The Act places a legal duty on local authorities and the NHS in the Act to ensure that independent advocates are available to those who need them. The National Care Standards for care homes for children and young people includes standards for raising concerns, comments and complaints and for advocacy services (Scottish Executive, 2005b).

Children’s Hearings have a number of approaches to support children and young people’s right to be heard. Children and young people are entitled to have a representative present at a Children’s Hearing under the Children (Scotland) Act 1995. This can be a person that children and young people choose to support them such as a member of their family, social worker, teacher or a professional advocate. In addition, a Children’s Hearing or a
sheriff can appoint a safeguarder where it is deemed necessary to have an adult protect the interests of children during proceedings. Children and young people have the right to legal representation at Children’s Hearings if they are likely to be placed in secure accommodation or have a movement restriction order.

In reviews and inquiries undertaken at national level, the value and importance of advocacy services have been emphasised. In its report on the inspection of the care and protection of children in the Western Isles, the Scottish Executive social work inspection team recommended the establishment of a national system which would provide the opportunity for all children and young people who were involved in Children’s Hearings and inter-agency meetings to have an advocate when decisions were being made (Scottish Executive, 2005a). The independent inquiry into abuse at Kerelaw Residential School and Secure Unit found that children and young people did not have access to advocacy workers as a matter of course (Scottish Government and Glasgow City Council, 2009). The inquiry report recommended that there should be adequately resourced advocacy and children’s rights services.

There is a commitment to children and young people’s right to have their voices heard in areas of legislation and policy. The right to advocacy is acknowledged in some of these instances but is less likely to be a statutory or practice commitment. In some limited situations children and young people are entitled to legal representation, safeguarding or other forms of support.

**Access to advocacy by age group**

The study found that advocacy services had different policies about which age groups of children and young people had access to their provision. Some advocacy services provided a service for young people from 0 to 18 years of age although it was frequently the case that services for younger children had a lower age limit of five years of age. The upper age group was extended by a small number of organisations to 21 or 25 years of age, particularly for young people who had left care and young people with disabilities. Who Cares? Scotland, for example, has an upper age limit of 25 years for access to its services and it works predominantly with young people rather than younger children.

In some instances, advocacy organisations provided services for young people aged 14 or 16 years upwards so services to older young people were those that were also available to adults. This was particularly the case with services linked to mental health and learning disability which were generally provided by area based advocacy agencies. Some organisations were cautious about providing advocacy for younger children. SIAA (2008c) reports that some organisations do not provide advocacy to children who they perceive cannot form or express a view. There is no indication what the lower age limit is in these instances.

Those who undertook advocacy for very young children included a number of local authority children’s rights services and independent advocacy organisations. Advocates from these services were emphatic that there was a need for advocacy for this age group. One independent advocate stated that “any child can make their wishes and feelings
known as long you know in what way to communicate’. It was suggested that services
should be guided by a rights based approach with the expectation that advocacy should be
provided to all children and young people who need it. One children’s rights officer
stated that there had been a significant number of referrals of children under five to the
children’s rights service in the previous year. Several agencies described situations where
they had been asked to act on behalf of very young children on issues relating to child
protection, adoption and asylum seeking families.

It was highlighted that there was often a need to use innovative approaches with very
young children. Partners in Advocacy used a variety of creative methods such as
storyboarding and active play, pointing out that advocacy can take longer with younger
children. SIAA suggests that non-instructed advocacy could be appropriate for very
young children. Approaches to non-instructed advocacy include getting to know the
person using the advocacy service, exploring a variety of communication methods and
finding out likes and dislikes as well as speaking to significant people in that person’s life
(SIAA, 2009).

Participants also pointed out that there was a lack of advocacy for older young people.
This was particularly the case for young people who may have had access to advocacy
when they were looked after away from home but find that this support is not available
when they leave care. Some children’s rights officers and Who Cares? Scotland services
provide advocacy but this is not available to all young people leaving care. It was pointed
out that young people leaving care often need advocacy until well in their twenties due to
their vulnerable situation and the lack of other support.

Disabled young people experiencing the transition to young adults’ services also have
poor access to advocacy. Those who supported disabled young people suggested that this
is often complicated by the involvement of parents and carers who may have taken
decisions on behalf of their child in the past.

Age issues relating to young people who are unaccompanied and separated were viewed
as being important because of their immigration status. Young people needed access to
advocacy as soon as possible after their arrival in Scotland to ensure that they are
protected and their rights upheld. These young people are likely to have little prior
experience of advocacy, do not necessarily speak English and are often without other
forms of support.

Young people in all these older age groups were regarded as being particularly
vulnerable. They required support in dealing with complex situations which involved a
wide range of agencies. They were likely to need medium or long term support.

There is not a consistent approach to providing advocacy for children and young people
across all age groups. There is less advocacy available for younger children and for older
young people aged 16 years and over.

19
Access to advocacy by circumstances

A major challenge in undertaking this study has been to identify what advocacy is available to children and young people who need this form of support and in what circumstances across Scotland. This is because the pattern of provision for particular groups of children and young people is diverse and is dependent on what services are available locally.

Crucially, the study found that there was not an overview of advocacy services for children and young people at local or national level so information on access to advocacy was not easily accessible. There are no national figures on, for example, whether children and young people who attended Children’s Hearings had advocates or whether all children and young people looked after away from home had access to advocacy. It is therefore difficult to assess the extent to which children and young people have access to advocacy.

Professional advocacy support was more likely to be available to groups of children and young people who were experiencing particular circumstances such as being looked after away from home or going through processes such as Children’s Hearings. This was often provided by organisations with a specific remit. A much smaller number of independent advocacy organisations provided generic advocacy services which were based more broadly around the needs of individual children. These services were not necessarily available in each local authority area.

The study found that there were fewer specialist advocacy services in rural areas. In these areas, advocacy support was provided by a range of organisations although these varied between authorities. It could be accessed through local authority children’s rights officers or a commissioned children’s rights advocacy service, generic advocacy organisations with a service for children and young people and Who Cares? Scotland.

The study found that the main group of children and young people who had consistent access to advocacy support were those looked after away from home. Children and young people had access to advocacy services through two main sources of support, Who Cares? Scotland and local authority children’s rights officers. Some other independent advocacy services also provided a more limited advocacy service for this group of children and young people.

These services were not generally available to all children and young people who were looked after away from home. They were predominantly directed at young people in residential child care including services provided by local authority units and independent providers, secure units and residential schools. Children and young people who were placed out of their own local authority area had some access to advocacy from children’s rights officers and Who Cares? Scotland but this service was not always available.

The study found that there were fewer services available to children and young people in foster care than in residential child care although some local authority children’s rights services and some Who Cares? Scotland’s services were available to this group who
often included younger children. The Fostering Network has worked with groups of children and young people in foster care to identify their needs and advocate on their behalf. It has found that sons and daughters of foster carers also require access to advocacy. The Fostering Network highlights that foster carers routinely advocate for children who are fostered and should have training to support them in this role.

There were few services available to children and young people looked after at home or placed with kinship carers. Only a small proportion of advocacy services across all advocacy providers worked with these groups of children and young people. Whether this service was provided depended on local commissioning arrangements.

There was not a wide availability of provision available to young people leaving care although some local authorities provide or commission services for this group. It was suggested that an advocate could help young people with their Pathways Plans and that young people leaving care needed support well into young adulthood.

These findings show that even where there is advocacy support for children and young people who are looked for, it is not available to all children and young people who are currently or were previously looked after. The study found that it is difficult to assess how many children and young people who are looked after do not have access to advocacy services.

In other areas, access to advocacy is less consistently provided for children and young people but specialist services exist alongside generic advocacy or children’s rights services. Advocacy support for disabled children and young people, for example, is provided by a number of organisations including Partners in Advocacy which works across several local authorities in the west and east of Scotland, some children’s rights officers, generic advocacy organisations and local organisations such as FBS Advocacy in North Lanarkshire and SNIP which works in Edinburgh, Midlothian and West Lothian. However, these services are not available in all areas. This diversity in the type of service and geographical coverage of advocacy provision is also reflected in advocacy services which focus on areas such as mental health, child protection and education.

Accessing services

Referrals to advocacy services mostly came through social workers and other professionals. Most advocacy services said that children and young people did not, as matter of course, refer themselves to advocacy support. A number of services pointed that once children and young people knew about a service they were more likely to contact the service independently. This confirms the findings from research with children and young people. Pithouse, Parry and Crowley (2005) point out that children and young people in their study did not generally seek out advocacy but they were more likely to proactively engage when aware of services.

Children’s rights officers and Who Cares? Scotland workers visit residential establishments so that there are more informal opportunities for children and young people to request support. One participant from an advocacy project highlighted that it
was ‘encumbent upon adults to recognise when children’s rights have been infringed’ and in turn to provide support to children and young people.

The study found that children and young people do not refer themselves to advocacy services. There is a lack of information on advocacy which is available to children and young people.

Gaps in existing provision
The study found that there was a diverse range of well regarded advocacy services providing support to children and young people across Scotland. These services meet the needs of different groups of children and young people. They are funded and resourced by national and local government, NHS boards and charitable trusts. However, participants stated that these services cannot currently meet the advocacy needs of all children and young people.

General gaps in advocacy support
Participants in the study identified a number of areas where there were general gaps in advocacy support. The following section summarises these gaps:

- Children and young people’s access to advocacy support depends on where they live rather than on what they need. There is not uniform coverage of advocacy services across Scotland. Children and young people with similar needs living in different local authority areas do not necessarily get access to the same kind of service. There are therefore inequalities in the provision of advocacy services.

- Most services are targeted at children and young people affected by specific sets of circumstances and are not able to address issues which fall outside their remit. Only a small number of advocacy services provide a generic service which can respond to a range of children and young people’s needs. So, for example, young people who receive advocacy when being looked after in residential care do not necessarily have access to advocacy when they leave care, even if they still need this support.

- Advocacy services have different upper and lower age limits for children and young people who access advocacy services. There is an inconsistent approach to providing advocacy for different age groups so younger children and older young people often miss out on the services they need.

- It is difficult to identify whether existing provision meets the needs of children and young people in the absence of local or national strategic approaches to matching children and young people’s need with availability of service. Advocacy services indicated that they were not able to proactively promote their services because of high levels of unmet demand in their areas.
Specific groups of children and young people

Specific groups of children and young people were identified by participants as missing out on advocacy support. The following groups of children and young people had limited or restricted access to professional advocacy support:

- Children and young people who are looked after at home, are placed in kinship care and are fostered have less access to advocacy than those placed in residential child care. It was pointed out that children and young people who are placed in residential care experience different levels of advocacy services depending on the services available in their placing authority. Young people in secure care do not necessarily have access to the advocacy they need because of their high level of needs.

- Disabled children and young people have limited access to advocacy, particularly at key transitions in their life such as the move to adults’ services and from primary to secondary school. There is a need for advocacy support for children and young people who access respite care or short breaks. Disabled young people also need support to raise issues about access to services including leisure and social activities. Advocacy support is usually provided to parents and carers rather than to disabled children and young people themselves.

- Young people leaving care do not generally have access to advocacy that can deal with the complexity of their needs in the transition to young adulthood. Young people in this situation often need access to advocacy until well into their twenties.

- Advocacy for children and young people in the child protection system is limited and only available in a small number of local authority areas.

- Children and young people in the Children’s Hearings system have differing experiences of access to advocacy and legal representation. There is a lack of consistency in the ways in which children and young people’s voices are heard.

- Children and young people missing from education have limited access to advocacy with few services providing advocacy in this area. Advocacy support is not generally available for children and young people participating in tribunals relating to the Education (Additional Support for Learning) (Scotland) 2004 Act and the new amended Act. In these instances advocacy is more likely to be available to parents and carers although these services are also in great demand.

- Children and young people in rural areas have less choice and diversity in advocacy services. Confidentiality is crucial for children and young people who live in rural areas in order to maintain their privacy.

- Access to independent advocacy support in health services does not appear to be widely available although there are some services around mental health and for
• Children and young people from black and ethnic minority groups do not routinely have access to advocacy that they need. Cultural issues and the need for confidentiality need to be taken into account in providing services.

• Gypsy Travellers have limited access to advocacy services. There is a need for high quality advocacy support for young Gypsy Travellers. This would require building up relationships of mutual trust.

• Young carers may have support through young carers groups but this does not necessarily provide formal access to individual advocacy although this maybe available informally.

• Young people who arrive in Scotland unaccompanied and separated have poor access to advocacy. This is made more complicated because of the extreme vulnerability of this group of young people who are generally aged 14 years of age or more. The Scottish Refugee Council is exploring the development of a guardianship scheme.

• Lesbian, gay, bisexual and transgender young people require access to support that meets their needs and is confidential. The need for advocacy for this group of young people has not been recognised by funders.

• Children and young people experiencing parental relationships breakdown and dealing with issues around contact need access to advocacy. It is difficult for children and young people to access legal representation in their own right.

Children and young people’s access to advocacy support depends on where they live rather than on what they need. Most services are targeted at a specific set of circumstances and are not able to address issues which fall outside their remit. Advocacy services have different upper and lower age limits for children and young people who access advocacy services. It is difficult to identify whether existing provision meets the needs of children and young people in the absence of local or national strategic approaches to matching children and young people’s need with availability of service.

The study found that there were gaps in advocacy support for children and young people with a range of experiences including children and young people looked after at home, disabled children and young people, those who attended Children’s Hearings, those living in rural areas and black and minority ethnic children and young people.
5. Provision of advocacy services

Organisations providing advocacy services
The study identified a range of organisations which provide advocacy services to children and young people. Information on services was gathered by contacting organisations and asking about advocacy services in their geographical or interest area and through reference to SIAA’s map of advocacy services across Scotland (Scottish Independent Advocacy Alliance, 2008a).

This study found that there is a lack of easily accessible national and local information on advocacy services for children and young people in Scotland. Some organisations were unaware of advocacy services in their area or did not know about specialist advocacy services at national or local level. Other organisations were unclear about the specific remit of advocacy providers. This lack of widely available information is likely to be a barrier for children and young people, parents and carers and other professionals who want to access advocacy support.

The following section summarises the range of organisations providing advocacy support to children and young people in the voluntary sector and through children’s rights services in local authorities. Examples of different advocacy services are included in Section 8 of the report.

Advocacy services provided by the voluntary sector
The voluntary sector is the main provider of professional advocacy to children and young people in Scotland. As the Scottish Executive’s (2001) guidance for independent commissioning points out, local authorities and health boards have a strategic role in commissioning independent advocacy services. These independent commissioned services are generally run by the voluntary sector.

Voluntary organisations providing advocacy are funded by a range of sources including local authorities, health boards, the Scottish Government and charitable grants such as the Big Lottery and Children in Need. Most organisations were resourced by more than one of these funding sources. Uncertainty about funding was a major concern for organisations particularly in the current economic climate. Some thought that advocacy services could be detrimentally affected by funding cutbacks in the future.

The map of advocacy produced by SIAA (2008a) covers a range of services and includes provision for both adults and children and young people. SIAA acknowledges that the advocacy map may not be complete as it is dependent on information submitted by organisations. It therefore provides a useful but not exhaustive list of some of the advocacy support that is available for children and young people.

The SIAA map identifies a small number of services, approximately five in total, which provide advocacy services solely for children and young people. A number of independent providers such as Who Cares? Scotland, CHILDREN 1st and other organisations are not included as entries. Children’s rights officers are not included in the SIAA map as they are not independent. Many of the services which are not included in
the SIAA advocacy map would usually be accessed through referrals from children’s service providers or through contact with children and young people in, for example, residential child care.

A further 14 organisations in the SIAA map provide an advocacy service for adults and children and young people. This is an approximate number as some services do not specify the younger age range of their services. The advocacy services for adults that these organisations provide are in the areas of mental health, learning disability, physical disability and dementia. Some are available to young people aged 14 or 16 years of age upwards and are most commonly linked to issues around mental health and learning disability, particularly in relation to the Mental Health (Care & Treatment) (Scotland) Act 2003. Approximately eight of these organisations provide a more extensive service for children and young people and many have staff who work solely with children and young people. Some services have developed their provision for children and young people since the SIAA mapping exercise was undertaken.

There appears to be several broad categories of voluntary organisations providing independent advocacy to children and young people:

- national and local organisations which provide advocacy services for individual children and young people. Organisations that provide this service include Who Cares? Scotland which works across Scotland, Drumchapel Children’s Rights Project in Glasgow and FBS Advocacy in North Lanarkshire.

- national organisations which run advocacy projects as well as other services for children and young people. Organisations include Barnardo’s and CHILDREN 1st which have a range of advocacy and children’s rights services. Family Group Conference services run by CHILDREN 1st train volunteer advocates to support children, young people and vulnerable adults.

- advocacy organisations which provide advocacy services to adults and also have a project or service for children and young people. Organisations include Advocacy Highland, Advocacy Orkney, Advocacy Western Isles and Partners in Advocacy

- a small group of organisations which provide support including advice and training to those providing advocacy such as SIAA, Scottish Child Law Centre, Clan Childlaw and Govan Law Centre.

- organisations which provide advocacy to parents and carers primarily but recognise the value of advocacy to children and young people and may in some cases provide this support. Organisations include ISEA (Scotland) and the National Autistic Society.

- law centres which provide legal representation including Clan Childlaw, Govan Law Centre and the Legal Services Agency (LSA).
• a wider range of organisations which provide collective or group advocacy for specific groups of children and young people but do not generally provide individual advocacy to children and young people except on an informal or ad hoc basis. This includes organisations such as Article 12 in Scotland in its support to young Gypsy Travellers, LGBT Youth Scotland and young carers’ groups supported by the Princess Royal Trust for Carers and other organisations such as the Glasgow Association for Mental Health (GAMH).

• organisations that do not provide advocacy as a matter of course but have a role in gathering evidence, informing and campaigning for advocacy for particular groups such as the Scottish Refugee Council’s work on unaccompanied and separated young people.

The range of voluntary organisations involved in delivering some form of advocacy support shows that there are a variety of different models and approaches to independent advocacy support for children and young people.

Local authority children’s rights services
Local authorities have a strategic role in providing advocacy support for children and young people. They do this through commissioning services from independent organisations as well as providing advocacy themselves.

The study found that local authorities can provide advocacy through the ongoing delivery of its children’s services and in line with policy and practice areas such as GIRFEC. Local authority managers, social workers, teachers and youth workers can provide advocacy as part of their ongoing role. This contribution to advocacy support is difficult to quantify but was acknowledged to be a valuable resource by many in this study. In addition, local authorities may run participation and consultation activities for children and young people which can be described as collective or group advocacy.

Under half of local authorities directly employ children’s rights officers with in-service children’s rights officer posts. There are differing levels of resources in local authorities which have these posts, with the majority of children’s rights officers being singleton posts, either full or part time. A small number of local authorities such as Aberdeenshire, Edinburgh, Glasgow and South Lanarkshire, have more than one children’s rights officer post to provide services to a wider group of children and young people.

In some local authorities, a post may not be specifically designated as children’s rights officer but the postholder may undertake some of the functions undertaken by children’s rights officers. Such posts may be called a consumer involvement officer or clients’ rights officer and may undertake other local authority roles in addition to having a remit for children’s rights and advocacy.

Some local authorities have commissioned voluntary organisations to deliver children’s rights services instead of providing their own in-house children’s rights officer posts. This is the case in Moray where the service is commissioned by the local authority from
CHILDREN

1st, Fife commissions a service from Barnardo’s, Shetland commissions a service from Shetland Isles Citizens Advice Bureau and Falkirk commissions a service from Quarriers.

There are a number of local authorities who do not have children’s rights officers or who do not commission a similar service. It is unclear if there is a strategic overview of advocacy support for children and young people in these local authorities. There are a number of local authorities which previously employed children’s rights officers but no longer deliver this service themselves. Some concern was expressed about whether services had been commissioned to replace this advocacy provision.

Most local authorities, with the exception of Orkney and Shetland, commission a service for children and young people looked after away from home from Who Cares? Scotland. The contractual arrangements can vary from four hours to 70 hours per week. Services for looked after children and young people are commissioned from local organisations in Orkney and Shetland.

There was some variance in the remits of children’s rights officers. It is hard, therefore, to compare the details of different services across Scotland. Children’s rights services in local authorities predominantly focus on children and young people looked after away from home in residential or foster care. Some local authorities also cover other areas including the rights of disabled children, education issues and unaccompanied and separated children and young people.

Children’s rights officers provided advocacy support to individual children and young people. They also had other roles such as providing feedback on the quality of services, consultation with groups of children and young people and providing input to policy and practice. Many had a role in contributing to strategy and policy development and providing expert advice on children’s rights to their local authority.

**Legal representation and advocacy**

The study found that many thought that legal representation was regarded as a form of formal advocacy. However, those with expertise in child law viewed legal representation as being different to professional advocacy although both shared the principle of acting on behalf of a person. Children and young people’s access to advocacy and legal representation were seen to be closely linked.

Professional advocacy was regarded as a step before legal representation. One participant suggested that the ‘strength of advocacy is around negotiation and discussion. It is about resolving issues before they become legal’. The absence of advocacy support for children and young people in particular circumstances could mean that legal representation was seen as the default recourse in the absence of other mechanisms which allow for children’s voices to be heard. Participants thought that it was important that children and young people had adequate access to advocacy in order to minimise the use of legal representation except when it was their right and they required the service.
In some settings, most specifically in the Children’s Hearing system, social workers, safeguarders, professional advocates such as Who Cares? Scotland workers or children’s rights officers as well as lawyers could all variously undertake an advocacy role in the process. Recent work commissioned by the Scottish Government (Ormston and Marryat, 2009) has reviewed the working of the children’s legal representation grant scheme in relation to the Children’s Hearings system. It found that a number of participants found the role of the legal representative unclear. Some participants in this study thought the wide range of adults involved in the Children’s Hearing system made it difficult and intimidating for a child or young person to fully participate and have their voices heard.

Participants emphasised that professional advocates and lawyers needed to work in partnership when required. It was pointed out that lawyers who represent children and young people do not necessarily know them as well as professional advocates. The current arrangements for legal aid, where this is available, means that lawyers do not have the time to build up relationships over a period of time with children and young people. It was reported that lawyers often meet children and young people for the first time just before a Children’s Hearing or court appearance. It was suggested that children and young people can see lawyers as different and that children need access to both advocacy and legal representatives if they require these services.

It was emphasised that children and young people have a right to a view in any court action concerning them and are entitled to legal aid in their own right. They are entitled to instruct a solicitor if they wish and if they understand enough about what that means. It was pointed out by one agency that some children and young people had requests for legal aid turned down on the grounds that their views coincided with one of their parents and that their parent could adequately represent their views. This undermined their right to have their voices heard.

Some advocates pointed out that there were variances in practice between courts about whether advocates were allowed to accompany a child or young person into a court setting to support them. Participants with experience in supporting children and young people in legal proceedings suggested that there needed to be more consistency by courts in allowing professional advocates to be present to support a child or young person.

6. Providing quality advocacy services

Developing a culture of children’s rights

Boylan and Dalrymple (2009), who have written extensively on advocacy in the UK, point out that there is a close relationship between children’s rights and advocacy. The commitment to children’s rights in the work of advocates was apparent in the study. Most advocacy organisations identified that they had a central function in increasing awareness of children’s rights and the UNCRC. Undertaking this work was viewed as essential to their effectiveness. It could lessen the potential of professional misunderstanding about advocacy and increase positive interactions between adults and children and young people.
Many organisations suggested that children’s rights were not well understood among those working with children and young people. As one advocate highlighted, there was ‘still a huge anxiety and misunderstanding for professionals about what are children’s rights’. Professionals were sometimes confused about the role of advocates and their commitment to supporting the child or young person to express their views. The advocating role could be seen to conflict with the ‘best interests’ approach of other professionals such as social workers.

The study found that it was important to establish cultures in organisations where children’s rights were accepted and where there was a commitment to listen to children and young people. One participant suggested that this ‘creates [a] climate in which advocacy can thrive’ and where there is a ‘commitment to listen’. It was suggested that it was essential for senior managers to have a commitment to children’s rights and the role of advocacy. The concept of the lead professional as promoted in the Scottish Government’s GIRFEC agenda was regarded as a good example of supporting a positive culture to advocacy. Inspection agencies such as SWIA, HMIE and the Care Commission were seen to have important roles in reporting on how well children and young people were heard. This was seen to be a powerful way of ensuring that local authorities were accountable.

Advocacy organisations found that there was little awareness of children’s rights among children and young people and their parents and carers. This was particularly the case with disabled children and young people as well as those young people who had had difficult and traumatic experiences. A number of the organisations proactively promoted children’s rights. Drumchapel Children’s Rights Project, for example, delivered workshops to first year pupils at local secondary schools on the UNCRC. The CAMHS and Transition Advocacy Service at the Royal Edinburgh Hospital worked with groups of young people in the wider community to promote awareness of mental health, young people’s rights and role of advocacy. As one participant from a national coalition of voluntary organisations pointed out:

> There is a generally need to empower all children with the ability to speak for themselves and feel comfortable in their rights and responsibilities and feel that they have a right to have a voice and say from the earliest possible age.

Promoting a greater awareness of the role of advocacy and of a children’s rights culture was regarded as fundamental to the effectiveness of advocacy for children and young people.

**Working together: professionals and advocacy**

The study found that the relationship between advocacy services and other provision was regarded as an important element of advocacy services. Knowledge about the role of advocacy among other professionals could vary considerably although some participants indicated that this had improved and there was a growing understanding of advocacy. Advocates said that relationships with other professionals who worked with children and young people were sometimes difficult. One independent organisation indicated that
other professionals did not routinely refer children and young people who were looked after to its service.

Some organisations or projects invested time in developing contacts with other professionals. This improved working relationships which, in turn, benefited children and young people. It also resulted in a less confrontational approach in processes where children and young people and their advocates were involved. On the whole, it was suggested that raising the profile of advocacy would further improve relationships and the effectiveness of advocacy. As one voluntary sector representative pointed out: ‘more background awareness raising would mean not advocating into a desert’.

Professional advocates identified that they worked with advocates from other agencies. Children’s rights officers and Who Cares? Scotland worked closely together due to their common interests around looked after children and young people and the commissioning arrangements between local authorities and Who Cares? Scotland.

Some independent advocacy organisations indicated that they did not have such close contact with other advocacy organisations or professionals. This was a concern for smaller organisations where advocacy professionals worked on their own or in small teams. Local authority children’s rights officers had a network which met quarterly. A number of organisations were seen as significant resources for both expert advice and support. The Scottish Child Law Centre, Govan Law Centre in Glasgow and Clan Childlaw in Edinburgh were identified as organisations which provided valuable support, particularly around legal issues.

It was suggested by a number of organisations that there could be more effective networking and partnership working between independent organisations which provided advocacy support for children and young people, children’s rights officers in local authorities and the office of Scotland’s Commissioner for Children and Young People (SCCYP). This would provide a mechanism for sharing experience and knowledge as well as providing mutual support.

**Delivering high quality advocacy services**

There was little information available about the effectiveness of individual advocacy services in Scotland. Some services had commissioned evaluations of their services or part of their services. These were generally for internal reporting or funding purposes. The Scottish Executive (2001) guidance for commissioning of advocacy services, which is being updated by SIAA, highlights that advocacy groups should be independently evaluated regularly and that commissioners of services should provide financial support for this activity. This did not appear to be common practice. SIAA is also developing an evaluation framework for independent advocacy.

Many participants pointed out that there was a need for standards for advocacy for children and young people in order to provide quality assurance for these services. Such standards have been developed in England and Wales (Department of Health, 2002; Wales Assembly, 2003). A number of participants highlighted that children and young
people have the right to a basic standard of advocacy service and that they should be provided with adequate information about what they could expect from services. It was suggested that there should be a regulatory framework for advocacy services. Some thought that a duty to provide advocacy to children and young people could be added to existing legislation. It was strongly emphasised by some contributors that effective outcomes for children and young people should be seen as a measure of a ‘good’ advocacy service.

The roles of SWIA, HMIE and the Care Commission’s roles in inspection and monitoring services were seen to be important for assessing how well children and young people’s voices were heard in different service contexts. Advocacy services have been included in recent reviews of good practice. HMIE published three reports in September 2009 which drew together examples of good practice and contextual information on listening to children (HMIE 2009a; 2009b, 2009c). The Care Commission (2008) in a review of practice in residential child care, was concerned about whether all children and young people are able to make a complaint about residential care if they choose. The Care Commission goes on to say that it has an expectation that children and young people will have access to advocacy and contribute to any internal evaluations of a residential service.

Organisations which were affiliated to SIAA drew on its principles and standards for independent advocacy and its code of practice (SIAA 2008b, SIAA 2008c). These guidance documents are for independent advocacy organisations and do not differentiate between services for adults and children. It was pointed out that some organisations that provided advocacy support for children and young people were not affiliated to SIAA and did not make use of these standards.

Participants wanted professional status to be given to the work of advocates in order to recognise the skills, expertise and relevance of their contribution to children’s wellbeing. More training should be available to those providing advocacy in order to increase skills and ensure more consistent quality in the delivery of services. Several thought that the development of an accredited qualification in advocacy would increase the professionalism and quality of the service. One organisation said that it had accessed accredited training in England as it was not available in Scotland.

It was suggested that training was needed on complex areas of legislation and child protection in order for advocates to better respond to children and young people’s needs. Govan Law Centre provides specialist training and advice on the Education (Additional Support for Learning) (Scotland) 2004 Act and the new amended act. Clan Childlaw and the Scottish Child Law Centre provided training, support and advice children’s rights and the law. This was available to a wide range of professionals.

The increasing involvement of children and young people in collective advocacy through consultation and participation was welcomed. However, a number of participants were strongly of the view that children and young people should be involved in the
management of advocacy services. In addition, their participation was central to the development of new national and local approaches to advocacy.

7. Conclusions

This report has presented the findings from a scoping study into advocacy support for children and young people. The research was commissioned by the Scottish Government in order to find what advocacy services are available in Scotland, where they are and the circumstances in which they are available and to which groups of children and young people.

The following section draws together the main conclusions from the study and indicates areas where advocacy support for children and young people could be developed.

**Strategic overview of advocacy services**

There are a diverse range of well regarded advocacy services providing support to children and young people across Scotland. Voluntary organisations deliver independent advocacy support for children and young people through a variety of different models and approaches. Local authorities have a strategic role in providing advocacy support for children and young people. They do this through commissioning services from independent organisations as well as providing advocacy themselves.

It is difficult, however, to identify whether existing provision meets the needs of children and young people in the absence of local and national strategic approaches to matching children and young people’s needs with the availability of services.

- Information on advocacy services and who accesses these services should be gathered at local and national level. This should inform the development of services and provide a strategic overview of advocacy for children and young people in Scotland.
- National and local strategies for advocacy support for children and young people should be developed to support the planning and development of services.

**Promoting advocacy**

The study found that there was a strong commitment to the importance of advocacy services for children and young people. Advocacy was seen to be a core service in ensuring that children and young people’s rights were upheld. Promoting a greater awareness of the role of advocacy and of children’s rights was seen to be fundamental to the effectiveness of advocacy for children and young people. Other professionals were not always aware of advocacy services. The lack of self referrals by children and young people to advocacy services suggests that there needs to be greater availability of accessible information.
• Advocacy providers, the Scottish Government and local authorities should consider ways of promoting greater awareness of advocacy and children’s rights to other professionals, children and young people, and their families.
• Advocacy providers and other agencies should consider ways of providing information on advocacy to children and young people in order to increase self referrals to services.

**Children and young people’s experience of advocacy**

Children and young people’s experience and views are central to the provision of a high quality advocacy service. There is, however, not an extensive body of evidence about children and young people’s views and experiences of advocacy support in Scotland. The study also found that there was little information available about the effectiveness of individual advocacy services in Scotland.

• Research and consultation should be undertaken with children and young people on their views and experiences of advocacy support in order to inform service and policy developments. The outcomes for children and young people from accessing advocacy support should be explored as part of these activities.
• Advocacy providers should routinely evaluate their services where this does not already take place. This process should involve gathering children and young people’s feedback on services as well as that of other stakeholders.
• Children and young people should have the opportunity to contribute to discussions on the future development of advocacy at national and local level.

**Gaps in advocacy support**

The study found that there were a range of services which provided effective advocacy support for children and young people. However, there were some significant gaps in existing services across all groups of children and young people.

Children and young people’s access to advocacy support often depends on where they live rather than on what they need. Most services are targeted at a specific set of circumstances and are not able to address issues which fall outside their remit. So children and young people’s access to advocacy can be limited by service boundaries. Advocacy services have different upper and lower age limits for children and young people. There is less advocacy support available for younger children and for older young people aged 16 years and over.

There are gaps in advocacy support for children and young people with a range of experiences including children and young people looked after at home, disabled children and young people, those who attended Children’s Hearings, those living in rural areas and black and minority ethnic children and young people. It was emphasised that advocacy should be available for those who need this form of support.
• The Scottish Government and commissioners of advocacy services should consider how children and young people could access similar services regardless of where they live in Scotland.
• Commissioners and providers of advocacy service should review existing age limits for their services. Advocates who have experience of working with younger children should be encouraged to share their expertise. Good practice guides and resources on how to provide advocacy to younger children should be shared or developed.
• The Scottish Government and commissioners of advocacy services should consider how gaps in advocacy services could be addressed in consultation with advocacy providers. This should particularly focus on areas where children and young people are most vulnerable and their advocacy needs are not being currently met.

Providing quality advocacy services

It was highlighted that children and young people have the right to a basic standard of advocacy service and that they should be provided with adequate information about what they expect from services. There was a call for the development of national standards for advocacy services for children and young people in order to provide quality assurance.

Participants wanted professional status to be given to the work of advocates in order to recognise the skills, expertise and relevance of their contribution to children’s wellbeing. In addition, organisations were keen to access further training and to have opportunities to network and share expertise.

Local authorities provided children’s rights services which were valued and seen as high quality. It was also seen to be important for a service to be independent to preserve advocates’ objectivity. Children and young people’s perceptions of the impartiality and quality of the service were of central importance. Independence of advocacy services is a complex area.

Voluntary organisations providing advocacy are funded by a range of sources including local authorities, health boards, the Scottish Government and charitable grants such as the Big Lottery and Children in Need. Most organisations were resourced by more than one of these funding sources. Uncertainty about funding was a major concern for organisations, particularly in the current economic climate.

• National standards for advocacy services for children and young people should be developed by the Scottish Government in partnership with national agencies, advocacy commissioners and providers in order to support the provision of high quality advocacy support.
• National and local opportunities for networking among advocacy services should be supported and developed in order to ensure the sharing of good practice and specialist expertise. Networking could be supported at national and local level.
• Training should be developed, where it is not currently available, for professional advocates in order to increase skills and ensure consistent quality in services. Particular consideration should be given to the development of accredited training.
• There should be further debate on ways in which the independence of the range of advocacy services can be supported.
• The current commissioning and funding arrangements for services should be reviewed in order to ensure that the independence of advocacy services can be maintained and there is continuity of services.

In conclusion, this report suggests that there are opportunities to develop advocacy support for children and young people in Scotland which build on existing high quality practice and offers advocacy support to children and young people who need these services.

8. Examples of advocacy services

The following are examples of advocacy services to illustrate different approaches to providing formal advocacy support to children and young people in Scotland. All examples were provided by the individual organisations.

Who Cares? Scotland
We offer independent, rights-based advocacy support to children and young people aged up to 25 years who are or have been looked after away from home. We’ve begun working with some looked after at home too. Presently, we work mostly with over 12s, with the bulk living in residential care though this is changing. The work we do with children and young people in foster care is in the main concentrated in a few local authority areas.

We take our remit from children and young people – not that we don’t take referrals but our starting point is checking the individual understands what we offer and wants our help. Raising awareness of children’s rights and our role amongst children and young people (and professionals working with them) is key. They tell us trust, the relationship and independence are critical. We don’t make judgements about what is in their best interests or tell them what to do. Instead, we help them understand their rights and options, make informed choices and, above all, express their views. Our independence acts as a safeguard too.

We receive a Scottish Government grant and, outwith Orkney and Shetland, we have contracts with Scotland’s other 30 local authorities – which vary in size and priorities – and with eight independent residential care providers.

Our other activities - often with partners - include consulting children and young people at local and national level to capture their perspectives. We offer various participatory ways for them to speak for themselves and encourage them to succeed. We use what we learn to influence policy, practice and training.
**Advocacy Western Isles**

Advocacy Western Isles provides an independent Children and Young Persons (CYP) Advocacy service for all children and young people who may require it from birth to age 21 throughout the Western Isles. The project is currently funded by the Big Lottery.

Advocacy support is offered in many areas including children’s panels, residential care, family issues including residency and contact, alcohol and substance misuse, education, additional support for learning needs, bullying and criminal justice.

The service also undertakes presentations on advocacy and children’s rights to various youth groups and hopes to be able to take this in to schools. The CYP service has also just started its first collective advocacy group of 15 children who are pursuing issues and funding in order to make positive changes in their community.

The aim of the Advocacy service is to ensure that the rights of children and young people are explored and upheld, they are given a voice and are listened to in order to become involved in decisions that are made about them.

We have found young people have a feeling of being valued and being important. We try to ensure that young people are able to influence their lives through expressing their views and have a sense of being listened to regarding decisions and being supported in their choices. The young people also have a sense of confidence and control with one commenting ‘Advocacy makes you feel brave’.

Through independent advocacy, agencies should ultimately be able to make more informed decisions which should result in better decisions for children and young people.

**CAMHS and Transition Advocacy service for young people based in the Royal Edinburgh Hospital**

The service is for young people aged from 12 to 18 years old who receive psychiatric services and support from the Royal Edinburgh Hospital. Advocacy is provided irrespective of the status of patients. We advise on rights, promote the individuals’ expressed wish, provide information, attend meetings, help to ask questions and on occasions provide access to free legal advice should a person choose to oppose any formal detentions when they are used.

Our service can include young people from across Scotland who receive treatment and assessment here in Edinburgh. We also provide advocacy support to young people who may find themselves on adult wards. We are funded by NHS Lothian. The service was managed by Circles Network until October 2009 when AdvoCard, an Edinburgh-wide advocacy project for adults who have experience of mental health, took over management of the service.
We have raised awareness of young peoples’ rights of access to advocacy and mental health issues by visiting projects out in the community. We have taken part in service planning by canvassing the views of young people regarding their individual care and treatment issues and anonymously sharing those issues with staff and hospital management.

We try to make our service as accessible as possible. We run drop in sessions and respond to calls directly from patients as well as from staff. Our aim is to help young people have a voice and develop ownership of their experience. Young people say that they have been strengthened by having access to independent advocacy. We have thank you cards to prove it!

What is important is that young people have an independent advocate who is not part of the care and treatment team and who they can develop a rapport with and trust in expressing their wishes. From this, questions can be asked and information gathered which reinforces young people’s self confidence and raises their self esteem. It gives young people an opportunity to reflect on where the journey has taken them so far whilst transitioning into adult life.

**Drumchapel Children’s Rights Project**

Drumchapel Children’s Rights Project is a community based independent resource and is a constituent part of Drumchapel Law & Money Advice Centre. The project offers a generic professional advocacy service covering the West Glasgow geographical boundary as defined by the local Community Planning Partnership. The service is open to all children and young people aged five to eighteen and in essence we will support any appropriate issue presented by or on behalf of a child or young person in the area and referrals are received from a variety of sources, including parents.

Funding is an on-going issue and is currently received from Social Work Services, Community Planning Partnership and the Volant Trust and this activity consumes significant time commitments to remain financially viable. The project delivers workshops on the UNCRC in both local high schools and some primary schools to raise awareness of the convention and the project as well as training to teachers and professionals. The advocacy service responds to any need identified through this provision and we also participate in local service planning and developments.

A significant point is that the project works with a number of young people who are not known to statutory services and the generic approach we take allows us to respond to all identified and unmet needs therefore safeguarding their rights across all their needs.

**Moray Children and Young People’s Rights Service, CHILDREN 1st**

Moray Children and Young People’s Rights Service is a CHILDREN 1st project and has been commissioned by Moray Council to provide a service for the Moray area.
There are two posts with different remits. One post provides a generic service for children and young people aged 0 – 18 years. Children and young people are advised about their rights. The service provides a rights overview for very young children and other children who have additional support needs which prevent them from expressing their views. Advice is offered to professionals on children’s rights. Young people are prepared and supported to attend meetings. Young people can be supported to make a complaint. They can be supported to appeal an exclusion from school or a change in their Education Maintenance Allowance entitlement. We also consult with children and young people on the services they receive and liaise with Moray Council on issues, patterns and themes.

The second post focused on child protection. This service is for children aged 7 – 16 years. In exceptional circumstances we will work with children under 7 who are deemed mature enough to understand the processes and support them to express their views. The remit of this post is to prepare and support children and young people to express their views at their child protection case conferences and associated meetings.

Some professionals misguided attempt to protect young children from ‘difficult’ or ‘hard’ information about their circumstances. However, we have found that early inclusion in their planning is a positive experience for children and contributes to their wellbeing.

**South Lanarkshire Children’s Rights Services**

South Lanarkshire Council provides its own children’s rights service. There are three children’s rights officer posts supporting different remits which are funded by the local authority’s Social Work Resources.

**Children and young people who are accommodated**

We offer an advocacy service to children and young people who are accommodated in children’s houses, residential schools, foster placements, therapeutic residential placements and secure accommodation. We visit all children and young people aged 5 plus and provide them with a children’s rights pack including those placed external to South Lanarkshire. We have worked with children under 5 in the past and do not have an upper age limit. There is a dedicated telephone line and mobile phone numbers available weekdays. We help young people to present their views at Children’s Hearings, court hearings, LAAC review meetings, child protection case conferences and complaints interviews. Other activities include exit interviews with care leavers, anti-bullying training, and a newsletter for under 12s produced by young people. We contribute to service planning and policy development.

**Children and young people affected by disability**

We offer advice, information and advocacy support to young people with a disability in receipt of social work services. Young people can self refer, but the majority of referrals are made via social workers, residential care staff or families. Many children and young people using the service have limited experience of using advocacy services. They may use alternative and augmentative forms of communication and require support to access the service. We visit young people who are living away from home in residential establishments external to the area. We run an annual consultation, *the Burning Issues*
Consultation and Advocacy Network (BIPAN) and co-ordinate My View Too which offers training for staff in social work, health and education in order to better involve young people with a disability.

**Children and young people in receipt of education services**
We offer advocacy, advice and support to individual children and young people aged 4 to 18 years of age. Young people can self refer but most are informed of the service by education or social work staff. Postcards detailing the Children’s Rights Service in Schools are issued to Schools, Children and Families Teams, Integrated Children’s Services and Psychological Services. The Children’s Rights Officer supports and represents young people at various meetings including Exclusion Appeal Hearings and Children’s Hearings.
9. Appendix 1: Contributors to the study

The following contributed to the study through participating in face to face or telephone interviews, responding to questionnaires and providing information.

Aberdeenshire Council
Angus Council
Anne Crowley (Consultant)
Advocacy Highland
Advocacy Orkney
Advocacy Project
Advocacy Western Isles
Article 12 in Scotland
Association of Directors of Education in Scotland (ADES)
Association of Directors of Social Work (ADSW)
Barnardo’s Scotland
Borders Council
CAMHS and Transition Advocacy Service, Royal Edinburgh Hospital
Care Commission
CHILDREN 1st
Children in Scotland
Children in Wales
Children’s Rights Alliance for England (CRAE)
City of Edinburgh Council
Clan Childlaw
Dundee City Council
East Lothian Council
For Scotland’s Disabled Children
Fostering Network
Glasgow Association for Mental Health Young Carers Project
Govan Law Centre
HM Inspectorate of Education (HMIE)
ISEA (Scotland)
LGBT Youth Scotland
National Autistic Society
North Ayrshire Council
North Lanarkshire Council
Partners in Advocacy
The Princess Royal Trust for Carers
Quarriers Falkirk Children’s Rights Service
Scottish Child Law Centre
Scottish Children’s Reporters Administration (SCRA)
Scotland’s Commissioner for Children and Young People
Scottish Human Rights Commission
Scottish Independent Advocacy Alliance (SIAA)
Scottish Institute for Residential Child Care (SIRCC)
Scottish Safeguarders Association
Scottish Throughcare and Aftercare Forum
Shetlands Islands Citizen Advice Bureau
Special Needs Information Point (SNIP)
Scottish Refugee Council
South Lanarkshire Council
Voice for All, Youth Counselling Services Agency
Yorkhill NHS Trust
West Dunbartonshire Council
West Lothian Council
Who Cares? Scotland
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