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The Changing Politics and Practice of Child Protection and Safeguarding in England

The purpose of this chapter is to provide a critical analysis of the changes in child protection policy and practice in England since the publication of my original chapter in *Thatcher’s Children* in 1996 (Parton, 1996a). In doing so, I will be drawing on a number of articles and books which have been published in the intervening twenty years (for example, Parton, 1997; 2006; 2008a; 2008b; 2009; 2010; 2011; 2012; 2014).

I will argue that the period from the mid-1990s until 2008 saw policy change in significant ways. In particular the state developed a much broader focus of concern about what caused harm to children and what the role of professionals and official agencies should be in relation to this. The object of concern was increasingly upon ‘safeguarding and promoting the welfare of the child’. In the process we witnessed an important change in the relationships between children, families and the state. Underlying such developments were new and sometimes competing ideas about risk to children and the best ways of addressing these. Such developments were implemented in the context of the introduction of a range of new systems of Information Communication Technology (ICTs) and a heavy reliance was placed upon top-down forms of performance management.

However, the period from late 2008, following huge social reaction to the tragic death of Baby Peter Connolly saw policy and practice move in new directions. Not only was ‘child protection’ rediscovered as an issue of significant political and policy concern but policy and practice began to be reconfigured in quite new ways. Such developments
were given a major impetus following the election of the Conservative/Liberal Democrat Coalition government in May 2010 and we can see the emergence of, what I call, an authoritarian neoliberal approach to child protection and child welfare more generally.

The last forty years have witnessed a considerable growth in concern about child abuse and the failures of professionals to intervene appropriately to protect children. As I argued in the 1996 chapter (Parton, 1996a), following high profile and very public criticisms of social workers and other health and welfare professionals in cases of child abuse in the 1970s and 1980s (Parton, 1985; Butler and Drakeford, 20011), the long-established state child welfare services in England came under increasing pressure and came to be dominated by a narrow, legalistic and forensically-orientated focus on child protection. Similar developments were evident in the other nations in the UK, as well as North America and Australia (Gilbert, 1997; Waldfogel, 1998; Lonne et al, 2009). By the early 1990s the child protection and child welfare systems could be characterised in terms of the need to identify ‘high risk’ cases so that these could be differentiated from the rest. Thereby children could be protected from abuse while ensuring that family privacy was not undermined and scarce resources could be directed to where, in theory, they were most needed (Parton, 1991; Parton et al, 1997). ‘High risk’ was conceptualised in terms of ‘dangerousness’, for it was the small minority of ‘dangerous families’ (Dale et al, 1986; Parton and Parton, 1989) subject to extreme family dysfunctions and violent personalities, who were seen as the primary cause of child abuse and which therefore needed to be identified so that children could be protected.
This was clear in the official government guidance at the time - *Working Together Under the Children Act 1989: A Guide to Arrangements for Inter-Agency Cooperation for the Protection of Children from Abuse* (Home Office et al, 1991) – where the focus of attention was explicitly stated as ‘the protection of children from abuse’. This was reinforced further in the only official guide on the purpose and content of professional assessments, *Protecting Children: A Guide for Social Workers Undertaking a Comprehensive Assessment* (Department of Health, 1988). The guide was specifically designed for social workers in cases where abuse was either substantiated or highly suspected and was concerned with how to carry out a comprehensive assessment for ‘long-term planning in child protection’ cases. At the time Pithers commented that:

> The guide addressed the key issue of whether a family is considered safe for a child, or whether it can be made safe, or whether it is so potentially dangerous that alternatives have to be found’ (Pithers, 1989, p.18).

**New Labour and the Move to Safeguarding**

However, during the mid-1990s a major debate opened up about how policies and practices in relation to child protection integrated with and were supported by policies and practices concerned with family support and child welfare more generally (Audit Commission, 1994; DH, 1995). Rather than simply be concerned with a narrow, forensically-driven focus on child protection, it was argued there needed to be a ‘rebalancing’ or ‘refocusing’ of the work, such that the essential principles of a child welfare approach should dominate (Parton, 1997). Policy and practice should be driven by an emphasis on partnership, participation, prevention and family support. The
priority should be on helping parents and children in the community in a supportive way and should keep notions of policing and coercive intervention to a minimum.

This change in thinking was evident in the official guidance published at the end of the decade, *Working Together to Safeguard Children: A Guide to Inter-agency Working to Safeguard and Promote the Welfare of Children* (DH et al, 1999). The words ‘protection’ and ‘abuse’ were dropped from the title which was framed in terms of the general duty placed on local authorities by Section 17(1) of the Children Act 1989 ‘to safeguard and promote the welfare of children in their area who are in need’. The guidance underlined the fact that local authority social services had wider responsibilities than simply responding to concerns about ‘significant harm’ and identifying child abuse and was explicitly located in the much wider agenda for children’s services being promulgated by the New Labour government, associated with social exclusion (Frost and Parton, 2009). The *Assessment Framework* (DH et al, 2000) published at the same time as the 1999 ‘Working Together’, attempted to move the focus from the forensic assessment of the risk of child abuse and ‘significant harm’ (DH, 2001) to one which was much more concerned with the broader idea of the impairment to a child’s overall development in the context of their family and community environment.

We can thus identify an important change in the nature of the risk which policy and practice was expected to respond to. The object of concern was no longer simply children at risk of abuse and ‘significant harm’. Effective measures to safeguard children were seen as those which also promoted their welfare, and should not be seen in isolation from the wider range of support and services provided to meet the needs of
all children and families. There was a broadening of concerns from ‘child protection’ to ‘safeguarding’, or, as I have argued elsewhere (Parton, 2010), from ‘dangerousness’ to ‘risk’.

This is not to say, however, that child protection disappeared, but that it was located in the wider concerns about ‘safeguarding and promoting the welfare of children’. This was defined for the first time in ‘Working Together’ published in 2006, where it was stated that:

_Safeguarding and promoting the welfare of children_ is defined for the purposes of this guidance as:

- protecting children from maltreatment;
- preventing impairment of children’s health or development; and
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care;

and undertaking that role so as to enable those children to have optimum life chances and enter adulthood successfully (HM Government, 2006, para.1.18, original emphasis).

Child protection continued to be specifically concerned with assessment and intervention in situations where children were ‘suffering, or likely to suffer, significant harm’. While the focus of both assessment and intervention had thus broadened between 1991 and 2006, the forensic investigation of possible ‘significant harm’ continued to inhabit the core of the system and it was local authority children’s social workers who had the clear statutory responsibility in this regard.
Risk and *Every Child Matters: Change for Children* Programme

The 2006 ‘Working Together’ guidance (HM Government, 2006) was published at a time of major change in children’s services in England. The government had launched its *Every Child Matters: Change for Children* (ECM) programme (DfES, 2004a), where the overriding vision was to bring about ‘a shift to prevention whilst strengthening protection’ (DfES, 2004b, p.3). The consultative Green Paper *Every Child Matters* (Chief Secretary to the Treasury, 2003) had originally been launched as the government’s response to a very high profile child abuse public inquiry into the death of Victoria Climbié (Laming, 2003). Major organisational change resulted following the 2004 Children Act, including the replacement of local authority social service departments with departments of children’s services which combined local authority education and children’s social care responsibilities. However, the changes were much broader than simply being concerned with overcoming the problems related to cases of child abuse. The priority was to intervene at a much earlier stage in children’s lives in order to prevent a range of problems both in childhood and in later life, including educational attainment, unemployment, crime and anti-social behaviour. The ambition was to improve the outcomes for all children and to narrow the gap in outcomes between those who did well and those who did not. The outcomes were defined in terms of: being healthy; staying safe; enjoying and achieving; making a positive contribution; and achieving economic well-being. Together these five outcomes were seen as key to improving ‘well-being in childhood and later life’. It was a very ambitious programme of change and was to include *all children*, as it was felt that any child, at some point in their life, could be seen as vulnerable to some form of risk and therefore might require
help. The idea was to identify problems before they became chronic. Two figures included in the Green Paper (Figures 1 and 2) are particularly helpful in understanding how the reform of children’s services was conceptualised.

[Figure 1 here]

[Figure 2 here]

All children in the population are included in the triangle in Figure 1 and categorised according to their level of vulnerability; while in Figure 2 services are organised according to whether they are specialist, targeted or universal. The idea was that problems were identified as quickly as possible to ensure they did not escalate and that services were integrated to ensure that this took place.

The model informing the changes was very much influenced by a public health approach to prevention and has been characterised as ‘the paradigm of risk and protection-focused prevention’ (France and Utting, 2005) informed by risk factor analysis (RFA) (France et al, 2010), whereby the knowledge of risk factors derived from prospective longitudinal research is drawn upon to design particular programmes and re-orientate mainstream services. The work of David Farrington in relation to youth crime prevention was particularly influential (Farrington, 1996, 2000, 2007). What was attractive to policy makers was that a range of overlapping personal and environmental ‘risk factors’ were identified, not only in relation to future criminal behaviour, violence and drug abuse, but also for educational failure, unsafe sexual behaviour and poor
mental health (Dryfoos, 1990; Mrazek and Haggerty, 1994; Goldblatt and Lewis, 1998). The Green Paper stated that:

we have a good idea what factors shape children’s life chances. Research tells us that the risk of experiencing negative outcomes is concentrated in children with certain characteristics (Chief Secretary to the Treasury, 2003, p.17, emphasis added)

and that these included:

- low income and parental unemployment
- homelessness
- poor parenting
- postnatal depression amongst mothers
- low birth weight
- substance misuse
- individual characteristics, such as intelligence
- community factors, such as living in a disadvantaged community

The more risk factors a child had, the more likely it was that they would experience ‘negative outcomes’ and it was ‘poor parenting’ which was seen to play the key role. Identifying the risk factors and intervening early provided the major strategy for overcoming the social exclusion of children and avoiding problems in later life.

However, the role of prevention was not only to combat the negatives involved but to enhance the positive opportunities for child development via maximising protective...
factors and processes. The approach was informed by the work of Michael Rutter (1990) who conceived of risk and protection as processes rather than fixed states and saw protectors as the basis for opening up opportunities. The timing of interventions was crucial for, if they were to have the most impact, the ‘early years’ were key and success depended on recruiting parents – usually mothers – to the role of educators. The notion of protection was thus much wider than simply protection from harm or abuse. In trying to maximise childhood ‘strengths’ and ‘resilience’ the idea of risk was itself reframed in far more positive ways (Little et al, 2004; Axford and Little, 2006).

To achieve the outcomes, the ECM changes aimed to integrate health, social care, education, and criminal justice agencies and thereby overcome traditional organisational and professional ‘silos’. Such a development required agencies and professionals to share information so that risks could be identified early and opportunities maximised. To take this forward a variety of new systems of information, communication and technology (ICT) were to be introduced – including the Common Assessment Framework (CAF), ContactPoint and the Integrated Children’s System (ICS).

The Common Assessment Framework (CAF) provides an important insight into the way ‘risk’ to children was rethought in the context of ECM and the way practice was to be reconfigured as a result. The CAF was an electronic assessment form to be completed by any professional when they considered a child to have ‘additional needs’ that required the involvement of more than one service. It included a wide-ranging set of data covering most aspects of a child’s health and development, including details about parents and siblings. The CAF was designed to identify those children who might not progress towards the five ECM outcomes without additional services and therefore
operated at the level of secondary prevention (or targeted services). The diagram in Figure 3, taken from the *CAF Practitioners’ Guide* (CWDC, 2009), provides a helpful picture of how the processes and tools designed to integrate children’s services and support early intervention were conceived, particularly in the context of Figures 1 and 2 earlier.

[Figure 3 here]

The *eCAF* clearly demonstrated how the importance of early intervention and the growing use of ICT were seen as central for the transformation of children’s services in England by New Labour. The focus of concern had broadened considerably from those children who might suffer child abuse or ‘significant harm’ to include all children, particularly those who were at risk of poor outcomes and therefore who may not fulfil their potential. In the process, the systems designed to screen and identify those in need of attention had grown in size and complexity and the challenges and responsibilities placed upon a wide range of agencies and practitioners increased considerably (Parton, 2010). As a result, it seemed that important changes were taking place in the relationships between children, families and the state, which I characterised at the time as the emergence of the ‘preventive-surveillance state’ (Parton, 2008a; 2010).

**Baby Peter Connolly and the Re-discovery of Child Protection**

While the *ECM: Change for Children* programme (DfES, 2004a) was presented by the New Labour government as its response to the Laming Report (Laming, 2003) into the death of Victoria Climbie, a number of commentators argued that the reforms had the
effect of marginalising child protection (Munro and Calder, 2005; Smith, 2008). This, however, was to change following the events of November 2008.

On 11 November 2008 two men were convicted of causing or allowing the death of 17-month-old Baby Peter Connolly, one of whom was his step-father. The baby’s mother had already pleaded guilty to the charge. During the trial the court heard that Baby P, as he was referred to at the time, was used as a ‘punch bag’ and that his mother had deceived and manipulated professionals with lies and on one occasion had smeared him with chocolate to hide his bruises. There had been over 60 contacts with the family from a variety of health and social care professionals and he was pronounced dead just 48 hours after a hospital doctor failed to identify that he had a broken spine. He was the subject of a child protection plan with Haringey local authority in London - the local authority which had been at the centre of failures to protect Victoria Climbié back in 2000.

The media response was immediate and very critical of the services, particularly the local authority (Jones, 2012; Warner, 2013). The largest selling daily tabloid newspaper, The Sun, ran a campaign aimed at getting the professionals involved in the case sacked from their jobs under the banner of ‘Beautiful Baby P: Campaign for Justice’ (The Sun 15 November 2008). Two weeks later the newspaper delivered a petition to the Prime Minister containing 1.5 million signatures and claiming it was the largest and most successful campaign of its sort ever. In addition a large number of Facebook groups, comprising over 1.6 million members, were set up in memory of Baby Peter and seeking justice for his killers. This weight of expressed opinion put major pressure on
the then government Minister, Ed Balls, to be seen to be acting authoritatively in order to take control of the situation. He responded by:

- Ordering the Office for Standards in Education, Children’s Services and Skills (Ofsted), the Healthcare Commission and the Police inspectorate to carry out an urgent Joint Area Review (JAR) of safeguarding in Haringey;
- Ordering the preparation of a new and independent Serious Case Review following the publication of the original one on 12 November and which he deemed to be inadequate and insufficiently critical;
- Appointing Lord Laming to carry out an urgent review of child protection in England;
- Establishing a *Social Work Task Force* to identify any barriers that social workers faced in doing their jobs effectively and to make recommendations for improvements and the long-term reform of social work and to report in the autumn of 2009.

On receipt of the JAR on 1 December 2008, which he described as ‘devastating’, the Minister announced he was using his powers under the Education Act 1996 to direct Haringey to remove the Director of Children’s Services, Sharon Shoesmith. Later that month she was sacked by the council without compensation and with immediate effect. In April 2009 Haringey Council also dismissed four other employees connected to the Baby Peter case – the Deputy Director of Children’s Services, the Head of Children in Need and Safeguarding Services, the Team manager, and the Social Worker. In addition the Paediatrician who examined Baby Peter two days before his death but missed the most serious injuries was suspended from the medical register; and the family doctor
who saw Baby Peter at least 15 times and was the first to raise the alarm about the baby’s abuse was also suspended from the medical register.

Very quickly reports surfaced that it was becoming very difficult to recruit and retain staff nationally to work in children’s social care, particularly social workers, and that morale was at an all-time low (LGA, 2009). The case was clearly having wide scale reverberations. A number of influential commentators, including the House of Commons’ Children, Schools and Families Parliamentary Committee (House of Commons, 2009) began to argue that the threshold for admitting children into state care was too high. Not only should Baby Peter have been admitted to care some months before his death but his situation was not seen as unusual. Similarly, the Children and Family Court Advisory and Support Service (CAFCASS, 2009) produced figures which demonstrated that: there were nearly 50 per cent more care applications to court in the second half of 2008-9 compared with the first half of the year; demand for care cases was 39 per cent higher in March 2009 compared with March 2008; and that the demand for care continued to remain at an unprecedentedly high level for the first two quarters of 2009-10 with June 2009 having the highest demand for care ever recorded for a single month.

The death of Baby Peter and the intense and rancorous social and media reaction clearly engendered a sense of very high anxiety amongst government officials and children’s services managers and practitioners (Garrett, 2009). It was also notable that the report produced by Lord Laming in March 2009 was entitled The Protection of Children in England (Laming Report, 2009) and that both this and the government’s response (HM Government, 2009) were framed in terms of ‘child protection’. Whereas previously
policy and practice had been framed in terms of ‘safeguarding and promoting the welfare of the child’, it now seemed that concerns about child protection had, again, moved centre stage.

At the same time as re-discovering child protection central government also seemed to re-discover the importance of professional social work. It is, perhaps, a particular irony that the area where social work had been so heavily criticised for over 30 years, child protection, was the area of practice where it continued to be seen as having the key role to play and the failures in the Baby Peter case seemed to reinforce this even further. The work of the Social Work Task Force, which reported in late 2009 (Social Work Task Force, 2009), was clearly central in this regard, and the government made it clear that a major contribution to the improvement in child protection practice was crucially dependent on the rejuvenation of a well-trained, respected social work profession (HM Government, 2010b).

Developments in the wake of the tragic death of Baby Peter had the effect of reinforcing the importance of child protection at the centre of safeguarding policy and practice and reinforcing the central role that social work played in this. For while the period since the mid-1990s, particularly since the introduction of the ECM reforms, had emphasised a much broader and more positive approach to risk, the narrow forensic approach to child protection, which was so dominant in the early 1990s, had clearly been (re)confirmed as lying at the heart of current and future attempts to ‘safeguard children’ (HM Government, 2010a). It seemed that government was determined to ensure that while there should be a continued emphasis upon early intervention, this should not deflect from ensuring that children were protected from significant harm. Child protection was
very much seen to lie – in terms of Figures 1 and 2 reproduced earlier – at the sharp
end, or apex, of any attempts to ‘safeguard and promote children’s welfare’. In many
respects the post-Baby Peter changes could be seen to consolidate one of the central
aims of the ECM reforms of wanting to bring about ‘a shift to prevention whilst
strengthening protection’ (DfES, 2004b, p.3).

It is notable that social work was to operate almost exclusively at this sharp end of child
protection. Whilst there had been a considerable expansion in preventive and early
intervention services from the mid-1990s, no longer were these seen as being in the
province of mainstream social work (Frost and Parton, 2009; Parton, 2009). This had
been made explicit in *Every Child Matters: Change for Children in Social Care* (DfES,
2004c) published at the same time as *Every Child Matters: Change for Children* (DfES,
2004a).

Social workers and social care workers need to be at the heart of the Every Child
Matters Change for Children programme. You play a central role in trying to
improve outcomes for the most vulnerable through your work with children in
need including those in need of protection, children who are looked after and
disabled children (DfES, 2004c, p.2)

It was social workers who were given the key and overriding responsibility for
operating the child protection system and this had changed very little from the situation
in the early 1990s. Following the tragic death of Baby Peter, social workers became
more concerned than ever with forensically investigating, assessing and managing cases
of child abuse in a context which was even more high profile and procedurally driven
than ever before. For example, the revised *Working Together* published in March 2010 (HM Government, 2010a), produced primarily in response to recommendations in the Laming Report on *The Protection of Children in England* increased in length from 231 pages up to 390 pages compared to the 2006 version (HM Government, 2006). Thus, while the final eighteen months of the New Labour government witnessed something of a revaluing of social work and a renewed recognition of the complexities involved, the actual focus and organisation of the work became even more prescribed and framed by its statutory and procedurally defined roles and responsibilities.

The period after November 2008 was also notable for an increased sense of anxiety and defensiveness in the way children’s social care was operating and there was clear evidence that it was having to cope with a large increase in referrals together with a growth in the number of children subject to a child protection plan, an increase in the numbers of children taken into care and a growth in Section 47 Enquiries (Association of Directors of Children’s Services, 2010). Increasingly it seems that early intervention was being interpreted as the need to formally intervene earlier with the increased possibility that children would be placed on a child protection plan, placed on a statutory order or taken into care (Hannon et al, 2010)

What also became evident by the end of the New Labour government in May 2010 was that there was a growing range of criticisms and concerns being expressed about the way policy and practice in this area had developed during the previous ten years. No longer were these criticisms only focussed on the tragic deaths of young children and the failures of professionals to intervene but that many of changes introduced may have had the unintended consequence of making the situation worse.
In particular, the introduction of the new electronic ICT systems, such as ContactPoint and the Integrated Children’s System (ICS) came in for considerable criticism (Shaw et al, 2009; Shaw and Clayden, 2009; Shaw, Morris and Edwards, 2009; White et al, 2010). Not only did such systems seem to increase the range and depth of state surveillance of children, young people, parents and professionals (Parton, 2006; 2008a; Anderson et al, 2009) and undermine individual and family privacy (Roche, 2008) they did not seem to work as intended. In particular they seemed to have the effect of: deflecting front line practitioners from their core task of working directly with children, young people and parents (Hall et al, 2010); increasing the bureaucratic demands of the work (Parton, 2008b; Broadhurst et al, 2010a; 2010b; White, Hall and Peckover, 2010); and catching practitioners in an ‘iron cage of performance management’ (Wastell et al, 2010) unable to exercise their professional judgement in order to safeguard children and promote their welfare (Peckover, White and Hall, 2008; White et al, 2009).

In addition, in broadening the focus of what was meant by risk there had been an elision or conflation (Munro, 2009; Parton, 2010) of concerns about children and young people who might be at risk from a whole variety of threats, including abuse, with other concerns about children and young people who might pose a threat to others particularly by falling into crime or anti-social behaviour. The agendas around the care and control of children and young people and those who might be either victims or villains were in danger of becoming very blurred (Sharland, 2006; James and James, 2008).
In attempting to widen and deepen attempts at early intervention in order to improve the outcomes for all children, while also trying to strengthen the systems of child protection, there was a real danger that there would be a growth in attempts at, what Michael Power has called, ‘the risk management of everything’ (Power, 2004). Rather than overcoming the defensiveness, risk avoidance and blame culture so associated with the child protection system in the 1990s, it seemed that these characteristics were increasingly permeating the whole of the newly integrated and transformed children’s services. Such concerns were heightened in the highly anxious context following the death of Baby Peter which seemed to prioritise an approach to practice based on ‘strict safety’ and a ‘logic of precaution’. Increasingly the language of risk was in danger of being stripped of its association with the calculation of probabilities and was being used in terms of not just preventing future harm but also avoiding the ‘worst case’ scenario (Ericson, 2009; Hebenton and Seddon, 2009).

The Coalition, Child Protection and the Authoritarian Neoliberal State

Soon after coming to power in May 2010, the Conservative/Liberal Democrat Coalition government announced it was introducing two changes to which the Conservative Party had committed themselves in their election manifesto (Conservative Party, 2010) and for which they had been arguing ever since the furore over Baby Peter Connolly’s death. ContactPoint was scrapped as from August 2010 and Serious Case Reviews were in future to be published in full. However, and perhaps more significantly, the government also announced the establishment of an independent review of child protection in England to be chaired by Eileen Munro, a qualified and experienced social worker and Professor of Social Policy at the London School of Economics.
The Review was published in three parts (Munro, 2010b; Munro, 2011a, 2011b; Parton, 2012) and clearly aimed to bring about a paradigm shift in child protection policy and practice:

The final report sets out the proposals for reform which, taken together, are intended to create the conditions that enable professionals to make the best judgments about the help to give to children, young people and families. This involves moving from a system that has become over-bureaucratised and focused on compliance to one that values and develops professional expertise and is focused on the safety and welfare of children and young people (Munro, 2011b, p.6).

It seemed that a major priority was to reverse a trend which had been evident for many years whereby the dominating response to tragedies in child protection had been to substitute confidence in systems for trust in professionals, particularly social workers (Smith, 2001).

The overall aim of the final report (Munro, 2011b) was to develop a child protection system which valued professional expertise and recommended that the government revise Working Together to ‘remove unnecessary or unhelpful prescription and focus on essential rules for effective multiagency working and on the principles that underpin good practice (Munro, 2011b, p.7). Inspection was also seen as a key negative influence on front-line practice and needed to be reformed.
The Review was also clear, along with the other reviews established by the Coalition government (Field, 2010; Allen, 2011a, b; Tickett, 2011), that it wished to emphasise the importance of ‘early help’ for ‘preventative services can do more to reduce abuse and neglect than reactive services’, and recommended that the government should place a duty on local authorities and their statutory partners to secure sufficient provision of ‘local early help services for children, young people and families’. In addition the Review made a number of recommendations designed to improve accountability and emphasised the importance of the local authority acting as the lead agency while wanting to strengthen the role of Local Safeguarding Children Boards (LSCBs).

But perhaps the most significant recommendations related to the role and practice of social workers. For, if there was to be a reduced reliance upon procedures, central guidance and targets, the authority and practice of professionals needed to be improved, and it was social workers who were seen as the key professionals in the reformed child protection system. The Review therefore aimed to build on the report of the Social Work Task Force (2009) and the work of the Social Work Reform Board, which had been established to implement the recommendations of the Task Force. In particular, it recommended that: each local authority should designate a Principal Child and Family Social Worker at senior management level to represent the views and experiences of front-line staff to all levels of management; a Chief Social Worker should be appointed to advise government and inform the Secretary of State’s annual report to parliament on the workings of the Children Act 1989; local authorities should review and redesign the way that child and family social work was delivered; and a range of changes should be introduced by both local authorities and higher education to improve the training, capabilities and overall professional development of social workers.
The government appeared supportive of the Review’s analysis and conclusions and accepted nine of the 15 recommendations outright. The government clearly saw the Review as consistent with its overall approach to the reform of public services. For:

The government is determined . . . to work with all involved with safeguarding children to bring about lasting reform . . . that means reducing central prescription and interference and placing greater trust in local leaders and skilled frontline professionals in accordance with the principles set out in the Government’s Open Public Services White Paper (Department for Education, 2011, p.5, para.2).

As I have argued elsewhere (Parton, 2012; 2014), a major problem with the review was that it never really addressed what it meant by child protection and, in particular, never addressed the fact that the problem of child maltreatment is generally agreed to be around ten times more prevalent than the number of cases that are ever referred to official agencies (Radford et al, 2011) and that if this was seriously addressed child protection, health, welfare and criminal justice agencies would be completely submerged.

However, the above quotation and explicit reference to the Open Public Services White Paper demonstrated that the government felt that the Review was quite consistent with its overall agenda for the reform of public services. Unlike New Labour, which had placed children right at the centre of its reforms, the Coalition government made it very clear that it was the reduction of public finance debt which was its overriding and most
urgent political priority. It also made it clear that it wished to decentralise power and reduce the role of the central state – to move from policies which emphasised ‘Big Government’ to those that emphasised ‘the Big Society’ (Ellison, 2011). However, what became increasingly apparent was that the Coalition reform of public services was far more radical than anything seen previously, including the Conservative governments of Margaret Thatcher and John Major (1979-1997). I have characterised the nature of the Coalition approach as the move to an authoritarian neo-liberal state which has a number of key elements (Parton, 2014) and for which the Open Public Services White Paper (HM Government, 2011), the severe cuts to public service expenditure and the introduction of a number of more authoritarian and coercive interventions were key.

The Open Public Services White Paper made it clear that every public service at all levels of government should be opened up to delivery by a wide range of providers, primarily the private and, to a lesser extent, the voluntary, charitable and third sectors. This quickly started to happen across health, education, criminal justice and local authorities. While such policies had been evident under New Labour the changes under the Coalition were much more wide-ranging, rapid and sweeping in nature.

From the outset the government introduced major plans for the reduction of public expenditure, including cuts of 28 per cent for local authorities over the course of parliament. Not only were these to be ‘front-end loaded’ in the first year but they were greatest in the poorest areas of the north, midlands and some London boroughs (Ramesh, 2012). It was also clear that families with children were no longer considered a priority group in welfare spending in the way they had been under New Labour (Stewart, 2011; Churchill, 2012). The Every Child Matters: Change for Children
programme was quietly but clearly dropped and there was a significant shift towards targeting the cuts to both children’s benefits and services, including Sure Start Children’s Centres (HM Treasury, 2010). An analysis by the Institute of Fiscal Studies indicated that households with children would lose by more than those without children at all parts of the income distribution as a result of the government’s changes to tax and benefits (Brewer, 2010).

A survey by the Directors of Children’s services estimated that the cuts in local authority children’s services for the financial year 2010/11 averaged 13 per cent, ranging from six to 25 per cent (Higgs, 2011) and Children’s Centres and early years services took a disproportionate cut in the overall reductions to education budgets (Chowdry and Sibieta, 2011). Because of the speed and size of the budget reductions the voluntary sector, which relied on central and local government for much of its income, was particularly hard hit and it was estimated that children’s charities experienced a greater proportion of public sector reductions (8.2 per cent) that year compared with the voluntary sector as a whole (7.7 per cent) (Gil et al, 2011; Children England, 2011).

It became increasingly apparent that the Munro Review emphasis on the importance of ‘early help’ was being undermined. Research carried out for the NSPCC (CIPFA, 2011) found that local authority children’s social care budgets faced reductions of over 23 per cent and that it was cuts to early intervention and preventative services which were taking the brunt. This was likely to result in greater demand for child protection services and it was clear that these were already under considerable pressure. Similar findings
were forthcoming in research carried out for the Family and Parenting Institute (Hapwood et al, 2012).

There was clear evidence of the growth in demand upon the statutory elements of children’s social care such that the trends evident following the social reaction to the death of Baby Peter Connolly continued. Between 2009/10 and 2011/12:

- while the number of referrals to children’s social care remained stable at just over 600,000/annum (having been 538,500 in 2007/08), the number of initial assessments went up from 395,300 to 451,500 (319,900 in 2007/09);
- the number of registered child protection plans increased from 44,300 to 52,100 (34,000 in 2007/08);
- the number of children in care increased from 64,400 to 67,050 (59,360 in 2007/08); (Source Department for Education annual Characteristics of Children in Need in England and Children looked after in England)

The number of applications for care to the courts increased even more dramatically from 6,241 in 2007/08 to 8,832 in 2009/10 to 11,055 in 2012/13 (Cafcass, 2013).

We can see a clear shift to an emphasis upon statutory child protection work, what the Association of Directors of Children’s Services called ‘increases in safeguarding activity’ (Brooks, Brocklehurst and Freeman, 2012, p.6).

It also became evident that the government was of the view that more children needed to be taken into care. This was confirmed in a significant speech by Michael Gove, the
Secretary of State, in November 2012 (Gove, 2012) when he also argued strongly that there had been a failure in leadership in relation to child protection over a number of years and that adults’ interests had been over-riding the needs of children.

In addition, and following a major campaign for reform by *The Times* newspaper, fronted by Martin Narey (Narey, 2011), the retired Chief Executive of Barnardos, the government launched a major initiative to ‘speed up adoptions and give vulnerable children loving homes’ (Department for Education, 2012). The plan was to ensure that adoption became a mainstream option for children in care. Local authorities were required to reduce delays in all cases and would not be able to delay adoption in order to find a suitable ethnic match; it would be easier for children to be fostered by approved prospective adopters while the courts considered the case for adoption; and if suitable adopters could not be found within three months the case would have to be referred to a new National Adoption Register.

Following a key recommendation of the *Munro Review*, and after a lengthy delay, the Coalition government published a revised version of *Working Together* in March 2013 (HM Government, 2013). While it had the same title as the previous guidance (DH et al 1999; HM Government 2006; 2010a) and did not change the definition of many of the key concepts in the 2010 version (HM Government, 2010a) – namely: safeguarding and promoting the welfare of children; child protection; abuse; physical abuse; emotional abuse; sexual abuse; neglect; and children – in other respects it had a number of important differences to the previous guidance. Significantly the document had been reduced in size from 399 to 95 pages and the number of footnotes from 273 to 43. In addition the *Assessment Framework* no longer had the status of statutory guidance. This
reflected the view of both the Munro Review and that of the government that the growing bureaucratisation of the work was a direct result of the growth in the central prescription and the length and complexity of Working Together. It was claimed that the revised guidance clarified the core legal requirements and made it much clearer what individual professionals and organisations should do to keep children safe and promote their welfare.

While the focus of the guidance continued to be ‘safeguarding and promoting the welfare of children’, this was no longer set out in the context of the ECM: Change for Children programme and its emphasis on ‘integration’. The 2013 guidance adopted ‘a child-centred and coordinated approach to safeguarding’ (para.8). Where:

Social workers, their managers and other professionals should always consider the plan from the child’s perspective. A desire to think the best of adults and to hope they can overcome their difficulties should not trump the need to rescue children from chaotic, neglectful and abusive homes. (p.22, emphasis added).

The theme of ‘rescuing children from chaotic, neglectful and abusive homes’ ran through the guidance and very much reflected the emphasis in other elements of the Coalition government’s policies of intervening early, admitting more children into care and investing in adoption.

Thus while the language of ‘safeguarding and promoting the welfare of the child’ was retained we can see a significant shift in the guidance towards a much more explicit ‘child protection orientation’ (Parton, 2014). It was not simply that any reference to the
ECM: Change for Children programme had been dropped but that the idea of ‘supporting families’, which had been so important ever since the ‘refocusing debate’ in the mid/late 1990s, had all but disappeared. For example, Chapter 1 of the 1999 *Working Together* (DH et al, 1999) was entitled ‘Working together to support children and families’ and emphasised that the guidance was based on ‘partnership’ and an ‘integrated approach’. This emphasis was no longer present in the 2013 *Working Together* (HM Government, 2013). No longer did it seem that the idea of ‘partnership’ with parents was given any major prominence.

**Conclusion**

I am therefore arguing that if we take these various developments together we can identify a significant shift in government policy concerned with child protection and safeguarding from that developed from the mid 1990s onwards, particularly compared to the changes introduced by the ambitious and wide-ranging ECM reforms. While changes were evident in the immediate fall-out following the scandal related to Baby Peter Connolly these have now been taken to a new level and increasingly it seems that intervention in families has become more coercive and authoritarian. While the range of universal and secondary prevention benefits and services has been reduced the role of the state in other areas has become more ‘authoritarian’ and much more willing to intervene in certain families with the full weight of statute behind it. At the same time the levels of poverty and deprivation have been growing and the private sector has been playing an increasingly major role in the organisation and delivery of services. Not only has the state been commercialised and residualised, it has become, for certain sections of the population, much more authoritarian. All are key elements in, what I characterise,
as the emergence of an authoritarian neoliberal state in services for children and families (Parton, 2014).

References


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Figure 1 ‘Every Child Matters’: Categorising Children

* These children may or may not be on the child protection register, nor looked after, nor vulnerable.

** These children are included in the children in need figure, and not all children on the child protection register are children looked after.
Figure 2 ‘Every Child Matters’: Targeted services within a universal context

- **Universal**
  - Services for all children and families
    - For example:
      - Health – GPs, midwives, health visitors
      - Education – early years and schools Connexions – 13-19

- **Targeted**
  - Services for children and families with identified needs
    - For example:
      - SEN and disability
      - Speech and language therapy
  - Services for families with complex problems
    - For example:
      - Children and Families’ Social Services
  - Services for children at high risk
    - For example:
      - Child protection
      - Adoption and fostering

- **Specialist**
  - Services for all children in targeted areas
    - For example:
      - Sure Start – Children’s Centres
Figure 3 Processes and tools to support children and families