



Risk, Adverse Influence and Criminalisation

Understanding the over-representation of looked after children
in the youth justice system

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This independent research has been prepared by Dr Jo Staines of the Hadley Centre for Adoption and Foster Care Studies, School for Policy Studies, University of Bristol. It was produced to accompany Lord Laming's independent review of looked after children in the criminal justice system. Lord Laming's review was established by the Prison Reform Trust in 2015 to investigate the disproportionate numbers of children in care who were involved with the criminal justice system and to make recommendations for reform. The review's full report and its Executive Summary are available from the Prison Reform Trust.

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1 Introduction

This paper presents a systematic review and narrative synthesis of the international literature on looked after children and young people's involvement in the youth justice system. It includes both published and 'grey' literature, and focuses on specific key areas of research relevant to looked after children's involvement in the youth justice system: risk and protective factors prior to entry to care; relationships, interventions and experiences during care periods; transitions out of care; and the policies and practices within both the care and youth justice systems that increase or reduce the chances of a looked after child becoming involved in the youth justice system.

1.1 Methodology

Relevant literature was identified through searching the following databases: Social Care Online (Social Care Institute for Excellence), Social Sciences Citation Index, PsycINFO, Social Services Abstracts, EThoS, Child Welfare Information Gateway, Child Development & Adolescent Studies, British Education Index, Educational Resources Information Centre and Zetoc. Other databases that include 'grey' literature were searched, including the NSPCC Library, CommunityCareInform and the Youth Justice Board's Effective Practice Library; reports from relevant organisations were also included. Handsearching, journal browsing, citation tracking, websites and personal contacts with authors were used to supplement the core database searches.

To be included in the review, the literature needed to be available in English and be focused primarily on children and young people aged 10-18, or studies of young people who had previously been looked after; the review aimed to be inclusive in terms of ethnicity, gender, disability, sexual orientation, age, and religion/faith. The review includes empirical research, both qualitative and quantitative, and policy documents and guidance that enabled the identification of effective and/or innovative services and interventions. The literature search excluded children and young people admitted to mental health residential facilities, as these are a distinct group of children and young people with particular needs and characteristics. Research based on very small samples, with fewer than five participants, was also excluded due to the limited generalisability of such small-scale studies.

The search terms employed included:

Delinquency	Youth justice
Looked after children / young people	Crime
Residential care	In care
Foster care	Court
Substitute care	Anti-social
Offending	Criminalisation

The majority of the available literature was from the USA, Sweden and Western Europe. The research included large-scale quantitative studies, smaller-scale mixed methods research and detailed qualitative studies, and incorporated the views of youth justice and care professionals, looked after children and young people, and in some instances, birth family members. The policy documents included reviews and evaluations of the effectiveness of policies and services during care periods and of leaving care and independent living services.

1.2 The scope of the review

The legal mechanisms by which children become looked after, and the terminology used to define out-of-home placements vary across time and location; most children and young people are placed in alternative accommodation due to concerns for their welfare (abuse, neglect, relationship breakdown), with a small proportion coming into care as a result of their behaviour (aggression, involvement in offending, substance misuse and so forth) (Department for Education 2015b). In terms of the care and justice systems in England and Wales, the literature review included research with children and young people looked after under section 20 of the Children Act 1989, children subject to remands to detention or local authority accommodation, and those sentenced by a court to residence in local authority accommodation or a Youth Rehabilitation Order with a fostering requirement. The review also included studies of care leavers: in England, defined as those young people aged 16 – 21 years old who have been in care for 13 weeks or more between the ages of 14 and 18, and who are entitled to ongoing support and assistance from the local authority under the Children Act 1989 up to the age of 25 if they are in education, employment or training, or returning to education.

2 Background

This review has been produced to accompany Lord Laming's independent review of looked after children in the criminal justice system. Lord Laming's review was established by the Prison Reform Trust in 2015 to investigate the disproportionate numbers of children in care who were involved with the criminal justice system and to make recommendations for reform. The review takes place within a context of general concern for the short- and long-term outcomes and wellbeing of looked after children in England and Wales. The number of children and young people becoming looked after has increased over the past seven years (Department for Education 2015a), including an increase of those aged over 10 (the minimum age of criminal responsibility in England and Wales). A substantial body of research suggests that looked after children and young people have significantly worse emotional, psychological and behavioural health, including using illegal drugs and being involved in offending behaviour, and are more likely to experience difficulties in interpersonal relationships than other young people (Landsverk and Garland 1999; Williams et al 2001; Burns et al 2004). Bywaters and others (2014) found that looked after children are more likely to have lived in neighbourhoods with high levels of deprivation (experiencing lower levels of neighbourhood income, fewer employment, education and training opportunities; barriers to housing and services and higher levels of crime; see also Dixon et al 2006). Young people with experience of care are at increased risk for low educational attainment, unemployment, homelessness or housing problems, substance misuse, and physical and mental health difficulties (Barth 1990; Kendrick 2005; Courtney and Dworsky 2006; Montgomery et al 2006; del Valle et al 2008; Gaskell 2010; Allen and Vacca 2011; Dixon et al 2015). A National Audit Office report (2015) highlights that there has been little or no improvement in such outcomes for children in care in recent years, a problem that is compounded by the significant placement instability that many children and young people continue to face, and the distances they may be placed from home.

The potential correlation between involvement in the care system and negative outcomes for children is particularly evident when considering looked after children's over-representation in the youth justice system. Becoming involved in the youth justice system, with a subsequent criminal record, can then contribute to future difficulties with housing, employment and personal wellbeing (Ausbrooks et al 2011). The short and long-term outcomes for 'crossover' or 'dually-involved' young people (those who are involved in both welfare and justice systems) tend to be more negative than for those who are involved only one system of intervention (Herz et al 2012). The majority of children and young people who become looked after have experienced abuse and neglect; many will display difficult or challenging behaviour while in care, which for some children can result in them being drawn into the youth justice system, further adding to the disadvantages they face (Department for Education 2013).

2.1 Caveats on research and statistics

Statistical correlations between being looked after and being involved in offending behaviour are difficult to identify due to idiosyncrasies in the way data are recorded: for example, in England and Wales, Police-recorded offending rates are based on offences committed in their own geographical force area, over the calendar year, whereas local authority figures of looked after children are drawn from the financial year, and include children who are placed out of area.

Furthermore, looked after children are an administratively, rather than a clinically, defined population; their only common feature is a perceived need for separation from their birth family (although some looked after children may remain at home while under care orders) (Bullock and Gaehl 2012). Police recording systems vary across forces, and changes in Police recording practices and in the legal orders available for both looked after children and those involved in offending behaviour also make longitudinal analysis of the data problematic.

The available data are also not always as accurate or detailed as may be desired; for example, records may not indicate the age at which the individual was in care, or the duration of their care experience - which could range from a very short episode (one or two days) to a substantial number of years (potentially an individual's entire childhood). Statistics show that there is considerable variation across different local authorities in the number of looked after children involved in the youth justice system, which may be explained more by differences in recording practices than demographic differences. Those aged 10 – 15 are the largest group in the care system in England and Wales, but have a particularly diverse range of characteristics and needs and tend to experience less placement stability than younger children (Boddy et al 2007), which can make unpicking the impact of different elements of their background and experiences especially challenging.

2.2 Correlations between care and offending

Despite these caveats, both official statistics and international research have demonstrated a correlation between experience of the care system and involvement in offending behaviour, although the strength of this association is debated and the patterns of contact with both systems vary (Herz et al 2012). The most frequently collated statistics in England and Wales on children and young people's involvement in offending behaviour are the number of first-time entrants (FTE) to the youth justice system, and the number of children and young people serving custodial sentences within the youth secure estate (Secure Children's Homes, Secure Training Centres, and Young Offender Institutions). Both measures indicate that, notwithstanding a significant decrease in the number of first time entrants and in the numbers of children and young people subject to custodial sentences, looked after children are significantly over-represented within the youth justice system. For example, children in care are significantly more likely to be sanctioned for an offence than children in the general population: 5% of looked after children had been convicted or subject to a final warning or reprimand during the year ending 31st March 2015, compared with 1% of all children (Department for Education 2015a). Overall, Berman and Dar (2013) found that 49% of young men under the age of 21 who had any involvement with the criminal justice system had spent some time in care (although, as noted above, this could range from a matter of days to a number of years).

Similarly, while less than 1% of all children and young people in England are in care, 33% of boys aged 15-18 and 61% of the same aged girls in custody report having spent time in local authority care (Kennedy 2013; see also Summerfield 2011; Berman and Dar 2013). Within custody, children with experience of the care system appear particularly vulnerable: for example, they report higher levels of drug, alcohol, emotional and mental health problems; they are more likely to have a disrupted educational background, and to experience victimisation by other young people (Murray 2012; Kennedy 2013; Prime 2014).

The number of looked after young people in custody in Young Offender Institutions (YOIs) has increased, despite the number of all children in custody having decreased significantly in recent years. This increase does coincide with legislation implemented in April 2013 which gave young people remanded into custody looked after status; although specific statistical information on the extent of this change is not available, it is not unreasonable to attribute much of the increase to the change in legislation. Department for Education (2015b) statistics show that, on 31st March 2015, 260 of the 706 children in England's YOIs were looked after (36.8%), an increase from 8.7% in 2011. An analysis of ASSET (assessment) data by Gyateng and others (2013) showed that 40% of those in Secure Children's Homes were currently or had previously been looked after, 36% in Secure Training Centres and 26% in Young Offender Institutions.

While statistics suggest that looked after young people are more likely to be involved in offending behaviour than other children, the vast majority do not offend. There has been less research on resilience and why most looked after young people do not offend, although Schofield and colleagues' study (2014, 2015) is of note (discussed below). Darker and colleagues (2008) found that, of 250 young people aged 10-17 who spent at least a year in care, 16% had offended prior to entry to care but did not do so whilst they were in care; 17% offended both before and during care, but 70% were law-abiding. Farmer and colleagues (2004), in a longitudinal study of 68 adolescents in foster care, found 18% offended whilst in placement but that all bar one of these young people had previously been involved in offending behaviour. These studies suggest that, for some young people, being looked after can provide a protective environment that helps to mediate the impact of previous adverse experiences and risks, such that children and young people do not become involved in, or desist from, offending behaviour.

Conversely, Hayden (2010) followed 46 young people over a one year period following their admittance to residential care in 10 local authority homes in England; by the end of the year, around two-thirds had a record of offending. In a study of 46 residential units in England, Sinclair and Gibbs (1998) found that 40% of the young people admitted to care without any previous cautions or convictions were cautioned or convicted whilst in a residential unit, and 75% of those with a previous conviction were either cautioned or re-convicted. Similarly, in Biehal and colleagues' research (1995), 43% of the 74 care leavers studied had been convicted (see also Graham and Bowling 1995; Minty and Ashcroft 1999; Hazel et al 2002; Farrington et al 2006). Alltucker and colleagues (2006) found that young people with foster care experience were four times more likely to be 'early start' offenders than those with no care experiences; Oriol-Granado and others found a high proportion of looked after adolescents in juvenile detention centres in Catalonia (see also Haapasalo 2000; National Working Group on Foster Care and Education 2007). In a Ministry of Justice survey conducted in 2013, being taken into care was reported as being associated with becoming involved in offending behaviour; and reconviction in the year after release from custody was linked to the individual's background, with care experience being reported as a contributory factor (Brunton-Smith and Hopkins 2013).

These research studies indicate that, in some instances, the care environment is either unable to compensate for prior adverse experiences and risks, or is itself criminogenic and can engender offending behaviour in looked after children and young people. Unpicking the interplay between children's different backgrounds, experiences and pathways through care is key to

understanding why being looked after appears to exacerbate or perpetuate involvement in offending behaviour for some children and young people but not others. As Herz and others (2012) argue, more attention has been paid to establishing a relationship between care and offending than has been given to identifying the specific characteristics that influence individual involvement in offending behaviour, although research in this area is growing.

The available research on the correlation between care experience and offending behaviour tends to focus on two interlinked approaches: 'risk factor' explanations, focusing on experiences prior to entry to care; and explanations that focus on the impact of adverse influences¹ on children's behaviour, including potentially negative relationships and inadequate service provision (Shaw 2014). The latter explanations also encompass considerations of the criminalisation of looked after children due to structural problems and system-level failings that can serve to draw looked after children into the youth justice system. Although presented separately here, risk factors and adverse influences experienced during the care period clearly interact: children who enter care having experienced abuse and trauma are then particularly vulnerable to being negatively influenced by relationships and experiences within care. This impact of this interaction is then exacerbated by involvement in the youth justice system itself, which can further criminalise looked after children.

¹ Shaw (2014) refers to these influences as 'contamination effects'; the phrase 'adverse influences' is preferred here due to the negative connotations of the term 'contamination'.

3 Risk factor explanations

Risk factor approaches argue that looked after children's involvement in offending behaviour is not directly related to the care experience, but that the risk factors for offending are the same as, or similar to, the risk factors for entering care, such as neglect or abuse, poor parental supervision, poor educational engagement and achievement, substance misuse, anti-social peers, mental health difficulties and individual behaviours (Anderson et al 2001; Shin 2004; Farrington et al 2006; Darker et al 2008; Traube et al 2012; Logan-Greene and Semanchin Jones 2015). Prior to entering care many looked after children and young people have experienced many of the risk factors that also lead to offending; thus it is argued that the correlation between care and offending is, to a large extent, a result of shared risk factors (Darker et al 2008; Schofield et al 2014). The thresholds for entry to care are high, and most children and young people who enter care do so during or following a period of extreme disruption at home, and often have a prolonged or intense experience of abuse and neglect, relational aggression and family instability (Chamberlain 2002; Shin 2004; Harker and Heath 2014). 61% of children who become looked after in England and Wales do so due to abuse or neglect (Department for Education 2015b), which can have long-lasting effects on their emotional, social and physical wellbeing. Adolescents at risk of family breakdown typically have serious emotional and behavioural difficulties (Biehal 2005, Sinclair et al 1995, Triseliotis et al 1995), and may have experience of trauma and loss (Chamberlain 2002; Haskett et al 2006; Grogan-Kaylor et al 2007; Blades et al 2011), potentially resulting in attachment issues and lowered resilience, all of which can be associated with increased involvement in offending behaviour.

Further, many looked after children may experience individual difficulties; for example Dunleavy and Leon (2011) found that children and young people in the foster care system are significantly more likely to be diagnosed with a mental illness than those in the general population, as a result of maltreatment and genetic vulnerability; and are more likely to exhibit behavioural difficulties that are associated with involvement in the youth justice system (such as anti-social behaviour, aggression and oppositional disorders) (see also Campbell et al 2004; Pilowsky and Wu 2006; Vaughn et al 2008; Goodman and Goodman 2012; Schofield et al 2014; Barrett et al 2015). Fisher (2015) concludes that research evidence strongly suggests that looked after children's neurobiology is negatively affected by early adversity, which is then exacerbated by placement instability and transitions, leading to behavioural, emotional and educational difficulties. Chmelka and others (2011), in a large-scale American study, demonstrated that looked after children with learning disabilities and/or behavioural disorders were more likely to be involved in offending behaviour than other looked after children.

Drawing on a sample of 188 young people in long-term foster care from the National Survey of Child and Adolescent Well-Being in the USA, Woods and colleagues (2013) discuss the complex inter-relationships between physical health, mental health and behaviour for adolescents in foster care. Adolescents with a chronic illness reported significantly greater mental health problems, substance misuse and increased involvement in aggressive, anti-social or offending behaviour. However, they concluded that depression significantly mediates the effects of overall health on delinquency whereas Harold and others (2013) argue that young people who engage

in high levels of delinquency are at particularly high risk of developing problems with depression. Dyer and Gregory (2014), in a sample of 25 looked after children in Scotland who were referred to an 'Interventions for Vulnerable Youth' project, highlighted that 76% had been exposed to domestic violence and 88% had experienced another form of childhood maltreatment; these young people typically showed early precursors of mental disorders known to place them at risk of persistent offending.

Looked after children and young people are also particularly likely to have either diagnosed or undiagnosed speech, language and communication (SLC) difficulties that may affect their social interaction (Hopkins 2014); Bryan and others (2007) found that 64% of children who have experience of care and are known to the Youth Offending Service have undiagnosed SLC needs (see also Chmelka et al 2011). Recent data for England shows that 29% of young people who had been looked after for a year had a statement of special education needs (SEN), and a further 38% had SEN without a statement (Department for Education 2014). Children coming into the care system or the youth justice system undergo a range of assessments that they would not receive if they remained in the community, which may result in a higher incidence of diagnosis than in the general population. However, Schofield and colleagues (2014) found that looked after young people involved in offending behaviour were also more likely to have a statement of SEN than either looked after children who were not involved in offending or young people involved in offending who were not looked after.

3.1 Gender

Echoing patterns within the general population, looked after boys are significantly more likely to be convicted than looked after girls (Dixon et al 2006; Bullock and Gaehl 2012), which can lead to the marginalisation of girls as a minority group within the youth justice system. The individual characteristics, needs and trajectories of girls involved in offending behaviour, and particularly those who are also looked after, is a neglected area of research and practice (Creaney 2012). Small-scale qualitative research in England has identified a reluctance of some foster carers and residential care staff to work with girls (O'Neill 2001; Lipscombe 2006) due to the fear of allegations of abuse and gendered stereotypes about girls' challenging behaviour. This is also reflected in the youth justice workforce, where there is a widely held perception that girls are more difficult to work with than boys (Daniels 1999; Chesney-Lind and Belknap 2004; see also Bateman and Hazel 2014). In a study of 188 fostered youth in the USA, Farruggia and Geramo (2015) found that looked after boys had higher levels of aggression than girls, although girls may exhibit aggression and violence in very different ways to boys (Crick and Grotpeter 1995), which may not be addressed in relevant training for carers and care staff. Evidence suggests that looked after girls may have experienced more difficulties prior to placement (for example, being more likely to have been physically and emotionally abused, to have self-harmed or attempted suicide, and to have a greater number of background adversities) (O'Neill 2001; Farmer et al 2004; Lipscombe 2006) and may have experienced a higher number of care placements (Chamberlain 2002).

The Mental Health Foundation (2012) is clear that gender should always be considered with respect to anti-social behaviour and offending, yet Creaney (2012) argues that the youth justice system, at least within England and Wales, fails to distinguish between genders within its formulaic assessment documentation and that many girls (not just those who are looked after) are drawn into youth justice system for welfare reasons, rather than due to their offending behaviour (see also Gelsthorpe and Sharpe 2006).

3.2 Age

The age of the young person is another individual characteristic that appears influential. For example, Baskin and Sommers (2011) in a large, matched sample of young people living with relatives, foster families and in residential care, dependants receiving in-home care and non-dependent youth in the USA, found that the most consistent predictors of delinquency were placement instability (discussed later) and age at placement. Young people who were older at placement and young people with at least one placement change were more likely to be arrested for violent and non-violent crimes than younger youth with no placement changes. However, Chamberlain and others (2007), showed that older girls exhibited less delinquency over time than younger girls in both Multi-Dimensional Treatment Foster Care placements (MTFC; discussed later) and in group care. This reflects broader research which demonstrates that girls' desistance starts at a much earlier age than that of boys.

3.3 Ethnicity

The interplay between ethnicity, looked after status and offending behaviour is also a significantly neglected area of research. There are, however, long-standing concerns about over-representation of black and minority ethnic (BME) children and young people in the youth justice system, although this varies depending on the particular ethnic groups. For example, Asian children are consistently under-represented within the youth justice system, while black and mixed heritage children are over-represented (YJB/MoJ 2016). Whether black and other minority ethnic children are over-represented within the care system is debated, with evidence to suggest that the apparent over-representation of black children is a result of higher levels of inequality experienced by black children (Bywaters et al 2014). Unpicking the relationship between inequalities, ethnicity, looked after status and involvement in offending behaviour is crucial to enable an understanding of disproportion, risk and resilience. Department for Education (2015b) statistics suggest that there is some over-representation of travellers of Irish Heritage and Gypsy/Roma children within the care population, with approximately 0.5% of the care population being traveller/gypsy children. There is more significant over-representation within the custodial population, with 11% of those in STCs and 8% of those in YOIs describing themselves as from a gypsy/traveller background compared with 0.1% in the general population of 0.1%. This group also reported higher levels of problems in custody (Prime 2014). However, research on the specific needs and experiences of gypsy/traveller children is particularly limited. Most of the available research on ethnicity is based in the USA (for example Jonson-Reid and Barth 2000; Kirven 2000; Solomon et al 2010) and may not be directly comparable to the outcomes for BME children in England and Wales.

3.4 Disability

Although, as noted above, there are some correlations between physical and mental health and offending behaviour, accurate data on the number of looked after children with disabilities who are involved in offending behaviour are not routinely collated or published. Using a very inclusive definition of disability, Chmelka and others (2011) found that looked after children with disabilities displayed more high risk behaviours, including offending behaviour; however, the majority of children included in their study had learning disabilities, behavioural disorders or speech and language difficulties (discussed above); less than 5% had 'other' forms of disability, such as brain injury, physical disabilities, or developmental delay. It may be that children and young people who are recognised as having a disability are subject to increased supervision and/or have fewer opportunities to be involved in offending, or conversely that where children do engage in law-breaking, higher levels of supervision may lead to higher levels of detection. Further research is needed to understand disabled looked after children's experiences of both care and the youth justice system.

3.5 Asylum-seeking and refugee children

Little is currently known about asylum-seeking or refugee children's involvement in the youth justice system, especially in relation to their looked after status. Wade and colleagues (2005), in their study of just over 200 unaccompanied asylum-seeking children in England, note that a small number (six boys) were known to have been involved in offending behaviour, but do not discuss how the youth justice system responded to them. Many asylum-seeking children will have experienced trauma and loss, isolation and separation from their families and may display challenging behaviour (Ryan 1997). They may not understand the role of foster or residential care, nor be aware of their rights within the care and/or justice systems (Ryan 1997; Wade et al 2012). As this population of children increases, research into their experiences will be necessary to ensure their needs and rights are met.

3.6 Low educational attainment

Poor experiences of education, including school exclusion and truancy and poor educational attainment, are recognised as having a significant impact on offending behaviour and trajectories (McAra and McVie 2010). Poor school performance among young people who leave foster care is strongly associated with adult psychosocial problems including offending behaviour, suicide, drug abuse and welfare dependency (Berlin et al 2011). As noted above, looked after children and young people are also particularly likely to have speech, language and communication difficulties, and/or special education needs, which may affect their engagement with education. Looked after children are more likely to experience exclusion from school or be involved in truancy; children excluded from school may experience boredom and lethargy, and spend increasing time in an environment which can put them at greater risk of offending (Berridge and Brodie 1996). Farmer and colleagues' study (2004) showed that, amongst adolescents in foster care, offending behaviour was significantly related to previous school exclusion, truancy and non-attending. Ryan and colleagues (2007) found that placement stability and school enrolment are two of the most important predictors of not becoming involved in offending behaviour. Lipscombe's study (2006) also demonstrated that offending while in a foster care placement was significantly less likely if the

young person's educational or employment situation had improved during the placement. Similarly, Taylor (2006) argues that a strong attachment to a pro-social carer was most protective against involvement in offending behaviour when it was combined with involvement in education, providing a routine and structure for the young person, as well as improving their attainment.

Adolescents in residential care may also have to deal with the transition to middle and secondary school, which presents a separate but complex set of challenges for the young person to negotiate (Chamberlain et al 2006), including exposure to a larger peer group and increased expectations for time-management and self-monitoring. This transition is complicated for young people in care by their maltreatment histories, changes in their living situation, and difficulty explaining their background to their peers and teachers. Difficulties in moving to a new school can have cascading negative effects, including delinquency, substance abuse, mental health problems and health-risking sexual behaviours.

3.7 Previous involvement in offending behaviour

While some research indicates that the risk of involvement in offending behaviour is greater for all looked after children, it is more so for those who were already displaying difficult or challenging behaviour at the time of placement. For example, Widom (1991), in a large sample of early childhood abuse and neglect cases followed up via criminal records in the USA, found differences in arrest rates between children placed solely because of abuse or neglect and those placed for abuse or neglect in conjunction with delinquency. In a longitudinal study of 450 children with experience of care in England and Wales, Bullock and Gaehl (2012) found that rates for subsequent offending of children who came into care presenting delinquency and other difficult behaviour and who had long-term care placements were 2.7 times higher than for those who came into care for abuse and neglect and 1.6 times higher than for those entering care due to family breakdown (see also Jonson-Reid and Barth 2000; Ryan et al 2007; Darker et al 2008; DeGue and Widom 2009; Tyler and Melander 2010). However, only 2% of children come into care primarily because of their own socially unacceptable behaviour (Department for Education 2015b).

Schofield and colleagues (2015) focused upon the role of social cognition and moral development in regulating aggressive behaviour, and how the biological, psychological and social risk factors experienced by looked after children affect the development of social cognition (see also Dunleavy and Leon 2011). Ausbrooks and others (2011) highlight the impact of experiencing trauma, loss and multiple care placements on personal relationships and problem-solving and coping abilities. This can then impact on the development of anti-social or delinquent behaviours, resulting in an increased risk of becoming involved in the criminal justice system.

It is difficult to separate the poor outcomes for some looked after children from their negative pre-care experiences (Stein 2006). Bullock and Gaehl (2012) concluded that all of the looked after children in their sample experienced an increased risk of offending but that it was not possible to evaluate the outcomes for these children without taking account of their characteristics and the risk these pose. They found no evidence that being in care per se

reduces or increases the risk of offending; offending behaviour is not constant and the risks associated with it vary over time, with much depending on the child's predisposition, life events and the quality of interventions received. In a Danish full-sample study of the placements of 15,814 children born between 1982 and 1987, Andersen (2014) found that children's background characteristics vary with their probability of experiencing great placement complexity; children from families with relatively good socio-economic resources experience less complex placement courses compared to children from families with relatively poor resources. As Schofield and colleagues (2015) argue, the relationship between the care system and offending is complex due to the interplay between the child's background and their care experiences, and the interaction between risk and resilience factors. They compared the experiences of looked after children who offended, other children who offended, and looked after children who did not offend, and found that each group were exposed to similar risk factors but experienced them at differential rates. For example, the looked after children who offended experienced more exposure to risk factors than the other groups, and looked after children who did not offend had greater resilience (measured as being more involved in positive activities and having greater contact with a positive peer group).

4 Adverse influence explanations

Alongside the shared risk factors for entry into care and involvement in offending behaviour, being placed in care itself may adversely influence an individual's involvement in offending behaviour (Shaw 2012). Entry into care during adolescence is recognised as a key period of transition, which can provide an opportunity for positive change for the young person and enable them to build resilience, but which can also carry significant risk (Schofield et al 2014); the experience of coming into care itself can be very distressing, irrespective of the quality of the placement. Much research indicates that offending behaviour may be a by-product of out-of-home care (particularly residential care), with looked after young people's behaviour being influenced by a complex interplay of factors, including the values and identities formed by young people prior to entering care, peer and staff relationships, the challenging dynamics in care placements, and different staff/unit policies, practices, cultures and environments (Shaw 2014). These effects will vary depending on the type, nature and duration of placement, and the age and characteristics of the young person (Mason et al 2003). O'Neill (2001) found that most of the young people in her study admitted to care through welfare routes who were then involved in offending said that their offending behaviour had commenced following their admission to care and their criminal record was a direct consequence of being admitted to care. Similarly, Lipscombe (2006) found that while some children and young people believed their offending behaviour had led to their admission to care, others felt that becoming looked after had triggered their offending behaviour (see also Blades et al 2011).

4.1 Residential and foster care

There is much debate about the relative impact of foster care and residential care on looked after children's involvement in offending behaviour, with research evidence generally showing that children in residential care have more involvement with the justice system than those placed with foster carers, although this may be due to the increased prosecution of looked after children in residential care (discussed later). For example, Nacro (2012) demonstrated that 21.4% of those in residential care were involved in offending compared with 3.6% of those in foster care and approximately 3% of children and young people in the general population. Bullock and Gaehl (2012) found that 16% of those in foster care were convicted after leaving care, compared with 39% of those in residential care and 50% of those living with relatives or friends (see also Lipscombe 2006). Ryan and others (2008), in a large-scale quantitative analysis of over 8,000 administrative records from a large urban county in the United States, demonstrated that the relative risk of delinquency was approximately two and a half times greater for adolescents with at least one residential group home placement as compared with young people in foster care settings. Oriol-Granado and colleagues (2015) found that young people in residential care became involved in offending behaviour, on average, a year later than non-looked after children and argue that this could be interpreted as showing that offending behaviour was influenced by the experience of being in care. Conversely, it could equally be argued that placement in a residential unit has a protective effect, delaying the onset of offending.

However, the apparent increased rates of offending in residential care may reflect the particular profile of those in residential care: those in residential care tend to be older than those placed in foster care (Horrocks and Karban 1999; Shaw 2012); may have more complex needs; may have previously experienced foster care placements; have experienced greater placement instability; and/or be considered harder to place (Fanshel et al 1989; Sinclair et al 2007; Oriol-Granado et al 2015). Due to reports of historical abuse, increasing costs, and concerns about its efficacy, residential care is increasingly being used as a last resort for young people with particularly complicated histories for whom foster care is deemed inappropriate (Hicks et al 2009; Department for Education 2013). This can lead to a concentration of individuals with the most challenging behaviours and to a high rate of placement instability and change within the residential unit (Horrocks and Karban 1999; Ryan and Testa 2005; Ryan et al 2008; Hicks et al 2009). A reduction in the number of children's homes, particularly specialist homes, and a continued shortage of foster carers (Fostering Network, undated), has limited the opportunity for matching children's needs with the most appropriate provision. This can sometimes mean that more challenging behaviour cannot be effectively dealt with, resulting in recourse to the Police and youth justice agencies (Shaw 2012).

4.2 Peer relationships

Hayden (2010) identified that the residential care environment can present a set of risks, particularly for adolescent boys, that reinforces offending behaviour including peer dynamics (see also Little 1990; Chamberlain 1998, 2003; Sinclair and Gibbs 1998; Hucklesby and Goodwin 2002; Lipscombe 2006; Taylor 2006). In a two year longitudinal study of 100 high-risk adolescents in residential care, Bender and Loesel (1997) found that young people who felt integrated in a large peer group were unlikely to change their behaviour: for those who were involved in offending or anti-social behaviour, the social support they gained from their friends (who were likely also to be involved in offending behaviour) helped to maintain their involvement in offending. Conversely, those who had a smaller circle of friends were more likely to report a decrease in negative behaviours, although this protective effect was small. Blades and colleagues (2011) highlight the wide age range of children living in some children's homes and how older young people may negatively influence younger children. It is generally argued that foster care, particularly Multi-dimensional Treatment Foster Care (MTFC), reduces the contact an individual may have with peers involved in offending behaviour, which in turn reduces their own involvement in offending

4.3 Relationships with staff and foster carers

Research has also indicated that staff training and qualifications, patterns of staffing and levels of supervision in residential care homes can have an impact upon the likelihood of children being involved in offending behaviour, which may differ from experiences in foster care placements. For instance, Wilson and Woods (2006) argue that inadequate supervision in traditional group care placements can influence anti-social outcomes for looked after young people. Young people interviewed in Lipscombe's (2006) small-scale qualitative study believed that the lax discipline they had experienced in residential care led to an increased involvement in offending (see also Tyler and Melander 2010; Schofield et al 2014). Schofield and colleagues (2014), in their survey of looked after children and youth offending services in four local authorities in England and Wales, highlighted how care staff being insufficiently trained, lacking an understanding of the pathways

that can lead to offending, and not creating effective care plans, could increase the risks for children and young people. Hicks and colleagues (2009) conclude that 'successful' outcomes for children and young people in residential care are influenced by the process of providing care, including the nature of the staffing and management practices in the unit. Blades and others (2011) emphasise the need for children to have positive relationships with at least one trusted adult who can be relied upon to provide practical and emotional support, yet recognise that this may be difficult in residential care due to staff turnover and/or higher numbers of staff in children's homes.

Taylor (2006) argues that a failure to make positive relationships within a care placement can lead to a young person feeling excluded and marginalised (see also Winter 2015). Taylor highlighted the importance of having a stable relationship and secure attachment to a pro-social carer, whether this was a member of residential care staff or a foster carer, to prevent involvement in offending behaviour but that this needed to be supported with involvement in education (discussed later). Blades and others (2011) similarly show that some children believe the chances of their offending increase if they do not develop close relationships for security and support with the adults they encounter in care, and conversely strong relationships can reduce the likelihood of offending.

Matching the foster carer's care-giving style with the needs of the young person placed can be important in facilitating a positive relationship. Lipscombe (2006) found that some young people resented remand foster carers who adopted a more regulatory or controlling stance, although these carers were perhaps more effective in preventing involvement in offending behaviour than those who took a more nurturing or permissive approach (see also Walker et al 2002). Similarly, Fuentes and colleagues (2015) argue that that criticism or rejection of a child or young person by their foster carers, could have an important effect on the child's behaviour, and suggest that preparation for fostering should help foster carers to acquire positive parenting strategies and to avoid either authoritarian or permissive parenting.

Both foster carers and residential care staff need appropriate training, ongoing support and to feel valued. Farmer and colleagues (2004) explored the correlations between foster carer strain, informal and formal support systems and placement outcomes for adolescents displaying challenging behaviour; placements in which foster carers felt under strain and unsupported were at increased risk of breakdown. Foster carers requested further training, particularly in managing violent behaviour, and timely access to therapeutic input for the young people in their care. Walker and colleagues (2002) drew similar conclusions, and also reflected on the importance of appropriate remuneration for foster carers, which helps carers to feel valued as care professionals.

4.4 Behaviour management

Foster carers and residential care staff are frequently required to support children with extremely challenging and aggressive behaviour (McLean 2015; see also Alink et al 2014); the management of such behaviour has consistently been highlighted as a significant contributory factor in the criminalisation of children and young people (Morgan 2006, Taylor 2006, Darker et al 2008, Fitzpatrick 2009, Nacro 2012, Shaw 2014). McLean (2015) undertook a small-scale

exploratory, qualitative study of the dynamics of behaviour management within residential care; key tensions identified by the care workers included the sense of parenting at a distance, the pressure for consistency, the desire for balance between control and connection, the desire for normality and the inconsistent nature of relationships. Copley and colleagues (2014) emphasised the impact of staff attitudes on children and young people and the importance of empathy for staff to maintain supportive relationships in residential settings. Alnajdawi (2013), in a small-scale qualitative study in Jordan, found that a lack of staff motivation in addressing children's challenging behaviours and inconsistencies between the unit's principles and staff practices meant that residential units were unable to rehabilitate children in order to reduce reoffending. Instead, she argues that such homes were largely punitive and operated to criminalise children and separate them from society. The Department for Education (2013) recommend that, to avoid the unnecessary criminalisation of children, children's homes need to have good quality, child-centred practice and a commitment to the parenting role.

Overall, there is substantial evidence to suggest that residential care is the care setting that poses the greatest risk of increasing the likelihood of young people becoming involved in offending behaviour (Darker et al 2008). However, there are a small number of studies that suggest residential care may be preferable for some children and young people, and there are certainly children and young people who struggle with being in a family home and would prefer to be placed in residential care (Lipscombe 2006). It has also been argued that children's homes may be better able to tolerate difficult behaviour than mainstream foster care in some situations (Cliffe and Berridge 1991, Rowe et al 1989, Sinclair and Gibbs 1998). Gallagher and Green (2013), albeit in a small qualitative study, found that outcomes for young people placed in therapeutic residential homes were good in terms of emotional and behaviour wellbeing, physical health, accommodation, education, the absence of early parenthood and substance use, and the absence of criminal convictions. Another study of 18 residential programmes for high-risk young people in the USA showed that most reported success in school attendance and in reducing drug abuse and criminal activity (General Accounting Office 1994).

4.5 Placement stability

Regardless of where they are placed, many looked after children and young people experience multiple moves and placement instability: research conducted in England by the Hadley Centre (2015) found that 38% of those aged 11 or over reported experiencing at least one change of placement in the previous 12 months, including a quarter who had moved twice and 16% who had moved three or more times. Placement instability is widely recognised as contributing to increased risk of involvement in offending behaviour; for instance Schofield and colleagues (2014) concluded that children who have more than four placement moves are more likely to offend. Other research has similarly identified a strong association between a history of placement instability and offending behaviour, even after controlling for prior problem behaviour (del Valle et al 2008; Ryan et al 2007; DeGue and Widom 2009; Cusick et al 2011; Lee et al 2012; Allen and Vacca 2011; Baskin and Sommers 2011; HMIP 2012).

Placement instability may result from bureaucratic decisions unrelated to the child (National Audit Office 2015) or foster carers or care staff's reluctance or inability to manage children's challenging or offending behaviour (Norgate et al 2012). Children may also demonstrate challenging behaviour as a defence mechanism to help deal with the uncertainty of moving (Farmer et al 2004; Lipscombe 2006). Children who have experienced placement instability may distance themselves from adults to avoid being hurt (Skoog et al 2015). Placement instability and breakdown is also affected by difficulties in accessing mental health services; a lack of placement options and a limited number of foster placements; and over-hasty placement decisions due to strict time restrictions on emergency placements (Norgate et al 2012). Matching the right placement to the child, taking into consideration the preferences of the foster carer, the age of other children in the family and so forth can have an impact on placement stability (Farmer et al 2004). However, a National Audit Office report (2015) demonstrated how placement choice in England and Wales may be driven more by costs and regional disparity in the availability of local placements, rather than on informed decisions about the most appropriate placement for the child.

Rock and colleagues (2015) conducted a systematic review and narrative synthesis of research on placement moves and breakdown; including both qualitative and quantitative research. Increased placement instability was most strongly correlated with older children, externalising behaviour, a longer total time in care, having had residential care as a first placement setting, separation from siblings, and experience of multiple social workers. Key protective factors included placement with siblings, placements with older foster carers (see also Solomon et al 2010), more experienced foster carers with strong parenting skills, and placements where foster carers provide opportunities for children to develop intellectually.

Multiple placement moves often have negative consequences for psychological and emotional wellbeing and consequent behaviour, can undermine the relationships built with carers and care staff, and disrupt education (Shaw 2014; Sebba et al 2015). Children who experience more placement moves tend to have worse educational outcomes than other children. They are more likely not to be engaged in education, employment or training and have an increased chance of being unemployed or in low-paid employment, with the concomitant risks of further offending (Jones et al 2011). Providing stability can be a key mediator of positive adult outcomes including physical and mental health, education and employment (Jones et al 2011, Schofield et al 2014, 2015), and may be associated with providing young people with a positive attachment to compensate for earlier problems in their lives and promoting resilience (Stein 2012, Schofield 2001). Stability and good quality care may also contribute to development of social cognition – understanding and recognising feelings in others – which may reduce the risk of offending; this is difficult to achieve when young people experience multiple placements (Schofield et al 2015).

4.6 Changes of social worker

Placement instability and staff changes within local authorities can mean that looked after children and young people experience multiple changes of social worker, with the concomitant difficulties in developing new relationships and feeling supported (Skoog et al 2015). The Hadley

Centre (2015) highlight how only 23% of the looked after children studied had kept the same social worker during the previous 12 months, 43% had two social workers and 32% had three or more social workers. Blades and colleagues (2011) illustrate how many looked after children have negative views of their social workers, believing that they had too many other children on their caseload and that priority was given to children who regularly got into trouble; the frequent turnover of social workers was also problematic, particularly when children were not informed that this was happening. Staff changes and placement moves can make it difficult for children and social workers to develop close and trusting relationships (Jones and Kruk 2005; Strolin-Goltzman et al 2010), and changes of social workers have been significantly associated with placement instability (Egelund et al 2010). Ungar (2013) argues that having a constant relationship with a trusted adult is key to recovery from trauma, and that enhancing the likelihood of resilience among maltreated children, including those who are looked after, requires social supports and formal services to be available, accessible and stable.

4.7 Location and management of placement

The location and management of care provision may also impact upon the likelihood of children and young people becoming involved in offending behaviour. For example, there has been increased dependence on private provision within England and Wales, with the growth of independent foster care agencies and privately run children's homes (Ofsted 2015); international research suggests that the latter, in particular, may have a number of important implications. For instance, Johansson and colleagues (2008) studied changes in the provision of residential care in Sweden, where the majority of care homes (80%) are now privately run. They found that public sector institutions have better educated staff and a higher staff-resident ratios than privately run institutions, but that they are also more restrictive in their intake and have young people with fewer problems, especially delinquency and other anti-social behaviour.

Ann Coffey, Chair of the All-Party Parliamentary Group for Missing Children, said in a debate on children in care that private children's homes may become clustered in low-cost areas (Hansard HC, 7 January 2016, c525). In a large-scale study in Chicago, Huang and Ryan (2014) demonstrate that care placements cluster in neighbourhoods characterised by high concentrated disadvantage, low ethnic heterogeneity, low collective efficacy, prevalent neighbourhood disorder and violent culture, which may be associated with involvement in offending behaviour. However Ofsted (2015) found that children in children's homes are less likely to be living in the most deprived areas than children who are fostered, although there are five local authorities where children in children's homes are more likely to live in the most deprived areas.

An increased dependence on private provision may also affect the distance children are placed from home; of those children looked after with a private provider in England and Wales, 63% were outside the local authority's boundary, compared with 40% of those placed in state-run provision (Department for Education 2015a). Being placed further from home can make it difficult to maintain contact with family, harder to achieve effective professional communication across different geographical areas and complicate planning for resettlement or leaving care (HMIP 2012, 2015). A loss of, or infrequent, contact with family and friends increases the

likelihood of offending while in care (Blades et al 2011). This may be particularly problematic for children living out of area who may be more vulnerable to the risk of being drawn into offending (HMIP 2012); children placed a long way from friends, family and community are at increased risk of going missing from care, which in itself carries an increased risk of contact with the Police (discussed later).

In 2014-15, over a third (37%) of children in residential care and 14% in foster care were placed more than 20 miles from home (Department for Education 2015a); and an Ofsted thematic inspection in 2014, based on a sample of nine local authorities, found 92 cases of children living outside their home local authority area and who were more than 20 miles from their home community. Some children and young people need to live out of area for reasons of safety or due to particular placement needs; but in four local authorities information was not shared properly with agencies; in a third of cases insufficient consideration was given to the quality or appropriateness of placements; and in nearly half, the required level of direct support needed to meet complex needs was not fully in place when a child moved. Most of the young people had regular contact with close family members, but in half of the cases not enough consideration had been given to how children could stay in touch with all the people who were important to them. Ofsted (2014) concluded that corporate parents, including Local Safeguarding Children Boards, generally did not give enough priority to understanding the risks and challenges faced by looked after children living far from home, or how to ensure that these children are not further disadvantaged by delayed plans for their future. Those who lived out of area but in an adjacent authority often benefitted from a pre-existing close collaboration between agencies, or by continuing to receive services from their home local authority. The nearer a child was to home, the more likely it was that direct support from home services, for example education or health provision, could be sustained. The Howard League for Penal Reform (2016) has criticised contracting out children's homes to private companies, arguing that a lack of transparency and a lack of accountability means that poor practice and inadequate service provision within some homes remains hidden.

4.8 Mental health services

As discussed earlier, Luke and colleagues (2014) maintain that looked after children have a greater risk of developing mental health problems and psychiatric disorders than other disadvantaged and non-disadvantaged children, due to their inherent susceptibility resulting from genetic predisposition, pre-birth factors (poor maternal health, maternal substance misuse and so forth), their experiences of abuse, neglect and maltreatment at home, in care moves, and the impact of separation and loss. In an analysis of data collated by the Office of National Statistics, Ford and others (2007) similarly found that all looked after children have higher rates of mental health problems than the general child population, but that the likelihood of having mental health problems was greater for children in residential care than in foster care placements. Luke and colleagues (2014) emphasise the importance of a whole system approach to mental health, including early intervention, strong relationships, carer training, continuity of care, child-centred interventions and a flexible interpretation of children's behaviour as being important factors in the management of mental health difficulties (see also Bazalgette et al 2015). However, there is arguably a lack of mental health expertise amongst residential care

staff and foster carers in England and Wales (Farmer and Pollock 1998, Sinclair and Gibbs 1998; Lipscombe 2006; Connor 2011; House of Commons Education Select Committee 2016). There also has been significant criticism of the provision of mental health services for both looked after children and those involved in offending behaviour, with services being over-subscribed, reactive (rather than preventative or proactive), failing to provide interventions for children in short-term or unstable placements, basing services on adult models of provision, and applying diagnostic labels that describe offending behaviour rather than facilitating understanding (see, for example, Department for Education 2006; Campbell and Abbot 2013; Durcan et al 2014; House of Commons Education Select Committee 2016). There may be particular difficulties in accessing mental health services for children and young people placed outside their local authority area. The House of Commons Education Select Committee (2016) concluded that provision for looked after children with mental health concerns is often poor, with inconsistent and inadequate assessments, inflexible mental health services and the denial of services to children who do not meet high thresholds. Morris (2015) details how some children and young people may be elevated through the intervention levels of ASSET by YOT professionals with benign intentions so that they can receive access to crucial services.

4.9 Missing from care

There has been a significant increase in the numbers of children recorded as going missing from care in England and Wales. This may be partly influenced by an increase in the number of children placed out of area, although figures may also have been affected by improved measurement and recording. For example, there has been a 19% increase in the number of children missing from foster care (4,245 in 2013-14 to 5,055 in 2014-15), with a corresponding 29% increase in the number of missing incidents (Ofsted 2016). The All Party Parliamentary Group for Runaway and Missing Children and Adults (2012) estimated that 10,000 children and young people go missing from care each year. Biehal and Wade (1999), in a study of 200 young people going missing from residential and foster care in four local authorities, found that between 25% and 71% of all 11-16 year olds in mainstream children's homes went missing from care, and faced immediate risks of victimisation, sexual exploitation and prostitution, offending and substance misuse (see also Browne and Falshaw 1998; Biehal and Wade 2000; Shalev 2011; HM Inspectorate of Probation 2012).

Malloch and Burgess (2011) discuss the challenges of defining young runaways and the constructions of risk and responsibility that are applied to distinguish 'genuine' runaways from others. Hayden and Goodship (2015) found that many children were reported missing but that 93% were located within a day and often in hours or less. They also noted that the proportion of children in care reported missing was high (44.9% of incidents and 28.7% of individuals) but that the capacity of Police to respond and meaningfully 'risk assess' every case was hampered by the high volume of reports outside office hours, a lack of readily shared data and different conceptions of risk.

Looked after children are significantly more likely to go missing than other children (see also Fanshel et al 1989; Taylor et al 2014; National Police Chiefs' Council 2015). McMackin and colleagues (2005) found those with lower educational attainment were at higher risk of going

missing from residential care. Taylor and others (2014) identified four themes as reasons for running away: authority and power; friction; isolation; and environmental issues (see also Wade et al 1998). Young people were critical of the lack of support they received on their return and the lack of boundaries they experienced; they also stressed the importance of being heard, treated with respect, able to exercise autonomy, and feeling that someone cares.

4.10 Structural criminalisation

Alongside explanations that focus on the adverse impact on individuals of being looked after, research has also attempted to explain the correlations between being looked after and being involved in offending behaviour by focusing on the structural criminalisation of looked after children by youth justice processes and the behaviour of the Police, legal professionals and judiciary towards those with looked after status. This is arguably related to the stigma of care and the low expectations held for looked after children. Most of the available research here focuses on structural problems and system-level failings, in contrast to risk factor theories that locate the causes of offending with the individual in care (House of Commons Justice Committee 2013; Fitzpatrick 2014; National Police Chiefs' Council 2015). For example, it has been found that early contact with the youth justice system increases the likelihood of later involvement with it, partly through the impact of stigmatisation and labelling (McAra and McVie 2007); and that looked after children are at greater risk of coming into contact with the youth justice system at an earlier age when 'challenging' behaviour is classified as 'offending' behaviour by carers, staff, the Police or other legal professionals.

Paul (2008), through interviews with residential care staff, found that the likelihood of Police involvement related to factors such as differing staff thresholds and tolerance levels; staff experience; individual relationships between staff and young people; relationships with local Police; and the organisational and managerial ethos and culture. Further, reporting incidents to the Police may be influenced by the frequency (rather than inherent seriousness) of incidents and a lack of objectivity and consistency in decisions about whether the Police should be involved, as well as an overall sense of powerlessness felt by staff who need to maintain authority within the unit, arguably precipitated by their perceived low status and lack of training, set in a context of risk averse, bureaucratic practice (Shaw 2014; see also Sinclair and Gibbs 1998; Hayden 2010; Schofield et al 2014). The Howard League for Penal Reform (2016) report that some Police officers have told them that private providers of children's homes, in particular, rely on the Police to provide temporary respite for staff who are not trained or able to manage children's behaviour, or to compensate for staff shortages by holding children in Police cells (discussed further below).

The National Police Chiefs' Council (2015) recognises that every effort should be made to avoid the unnecessary criminalisation of children in care, making sure that the youth justice system is not used for resolving issues that would ordinarily fit under the umbrella of parenting. However, research suggests that the Police are too frequently called to respond to minor offences (such as damaging property or 'kicking off') in some care homes, with low thresholds for Police involvement despite the existence of practice protocols designed to reduce such contact (Taylor 2006; Hayden 2010; Blades et al 2011; Schofield et al 2014; Shaw 2014). Furthermore, the

performance framework for Police in England and Wales has placed pressure on the Police to respond to offences reported to them in a formal way, with the interpretation of arrest policies requiring 'positive action', leading to looked after children being detained for behaviour that, in other circumstances, would not warrant Police involvement (HMIP 2012).

4.11 Relationship with the Police

In addition to potentially unnecessary involvement by the Police in response to challenging behaviour in care homes, some looked after children have reported feeling discriminated against by the Police (Blades et al 2011). The National Police Chiefs' Council (2015) acknowledges that looked after children in care often have a negative view of the Police, based either on their experiences of Police engagement with themselves or their family or passed onto them from their birth parents. Looked after children may lack trust in the Police and feel that they do not get the support and protection they need (All Parliamentary Group for Children 2014). As noted above, concern has been raised about the number of children, including those who are looked after, who are held in Police cells overnight (Howard League for Penal Reform 2011; All Party Parliamentary Group for Children 2014; Care Quality Commission 2014). The Howard League for Penal Reform (2016) argues that children who are already looked after are more likely to be detained in police cells than other children, either because the Police are reluctant to place them back in children's homes deemed unable to support vulnerable children, or because the contractors running private children's homes refuse to accept them back. The Home Office (2016) has issued a draft Concordat on Children in Custody to ensure that statutory requirements are met and children are transferred from police cells to alternative accommodation. However, the draft Concordat does not make specific reference to looked after children nor to the impact on them of being moved to a new children's home or foster care placement.

There is also evidence of wide variations in the extent to which children and young people request, and receive, legal advice in Police stations, both compared to adults and also between young people of different ages (Kemp et al 2011); while this is not specific to looked after children, there are relevant implications (see Staines 2015), particularly as looked after children may be less well supported in Police stations than other children. All children aged 17 and under should be accompanied by an Appropriate Adult when they are interviewed or charged by the Police; the Appropriate Adult will normally be a parent or guardian, a duty social worker, or another responsible adult. Looked after children may be disadvantaged as they are more likely to be appointed an Appropriate Adult previously unknown to them and who may have very limited information about the child or their background (Criminal Justice Joint Inspection 2011).

4.12 In court

Research from the USA suggests that looked after children are treated differently in court from other children (see, for example Herz et al 2012). In a small-scale qualitative study in England, Shaw (2012, 2014) found that some professionals thought that a young person's care status might in itself negatively impact upon the way their behaviour is perceived and consequently dealt with by the Youth Court; some looked after children also report feeling discriminated against in courts, although others felt that the courts had been lenient in respect of their care history (Blades et al 2011). A perceived ingratitude on the part of looked after children towards

their carers or a desire to assist 'beleaguered' staff could affect sentencing decisions, with custodial sentences perhaps being passed to provide 'respite' for the care professionals involved (see also Lipscombe 2006). There is also evidence to suggest that professionals (social workers, foster carers and/or residential care staff) may not project a favourable impression to the court as a result of feeling overwhelmed by persistently challenging behaviour (Shaw 2014). The Crown Prosecution Service in England and Wales has developed a policy to reduce the unwarranted prosecution of looked after children, but there is evidence that it is not being fully implemented (House of Commons Justice Committee 2013).

Research has identified concerns about the quality of legal representation children and young people receive in the Youth Court (Centre for Social Justice 2012). Wigzell and colleagues (2015), in a survey of 215 advocates, interviews with youth justice practitioners and young defendants, supplemented with court observations, found considerable variability in the quality of advocacy in youth proceedings. They noted a lack of training specific to youth justice legislation and a failure of advocates to recognise the significance of Youth Court work and the repercussions for young people. Youth justice advocacy was seen as being undervalued and having low status; the lower fees received and large caseloads leading to more ambitious lawyers favouring other criminal work. This inexperience and a lack of 'professionalism' were noted by both the young defendants and youth justice practitioners. The study did not specifically discuss looked after children but argued that, despite the need to 'have regard to' children's welfare, proceedings remain essentially adversarial. Intersecting social problems (family breakdown, poor mental health, SLC needs and so forth), which may be manifest in behaviour are not always identified promptly and can hinder communication; these difficulties are exacerbated by the absence of parents or carers / social workers (see also Allen et al 2000; HMIP 2011; Carlile 2014).

The Independent Parliamentarians' Inquiry into the Operation and Effectiveness of the Youth Court (Carlile 2014) also found that looked after children's social workers did not always attend court, asked YOT workers to attend on their behalf, or did attend but had minimal, if any, knowledge of the individual child. Care planning guidance (Department for Education 2015c) specifies that it is 'best practice' for social workers to attend court for looked after children, but the operation of the youth court, whereby children may wait hours for their case to be heard rather than having a specific appointment, discourages social workers and other practitioners from attending. A number of organisations, however, said they had seen improved engagement from children's services since the new remand arrangements transferred the costs of remand from the YJB to local authorities and gave every remanded child looked after status. As noted earlier, approximately two thirds of young people in the youth justice system have speech, language and communication difficulties (Bryan et al 2007), which can make them more vulnerable within the court system (Jacobson and Talbot 2009). They may struggle to understand what is being said or the implications of what is happening to them (Snow and Powell 2004); this can be due to difficulties in understanding the vocabulary used in court, which can lead them to jeopardising their compliance with court orders (Royal College of Speech and Language Therapists 2012). 80% of magistrates have stated that a young person's demeanour and presentation directly influences their sentencing decision (Audit Commission 2004); those with SLC needs (discussed earlier) may be at a disadvantage in court (Talbot 2010).

4.13 In Custody

As noted earlier, looked after children are significantly over-represented in custodial establishments and report higher levels of drug, alcohol, emotional and mental health problems and are more likely to have a disrupted educational background and to experience victimisation by other young people (Summerfield 2011; Murray 2012; Berman and Dar 2013; Kennedy 2013; Prime 2014). Children who report having been looked after also report a poorer experience of behaviour management procedures within custodial establishments than other children, being less motivated by reward schemes, more likely to have been subject to an adjudication, and more likely to have been physically restrained (Prime 2014). An Inquest (2015) analysis of a sample of 47 young adults and children who had committed suicide while in custody in England and Wales between 1 January 2011 and 31 December 2014 indicated that 30% were care-leavers or had suffered some kind of family breakdown which required them to live outside of their immediate family home.

Looked after children in custody may experience particularly problematic resettlement transitions when they leave custody; it is unlikely that the care placement they had before being remanded or sentenced to custody will still be available to them and an alternative placement will usually need to be found. Prime (2014) found that young people with experience of the care system were more likely to report practical problems with accommodation and money when they arrived in custody and were more likely to anticipate problems across all areas of resettlement - although they were more likely to know who to contact for help with these problems. Conversely, Glover and Clewett (2011) found that young people who were looked after saw themselves as forgotten about while in custody, and received limited help to plan suitable accommodation; a limited range of accommodation options for 16 and 17 year olds resulted in some living in unsuitable accommodation such as Bed and Breakfast or hostel accommodation. Combined with a lack of sufficient support on release, this contributed to disengagement with services and increased reoffending. Younger children were placed back with families who were unable to cope and who had little support, in some cases leading to homelessness some months after release from custody.

The duty to secure appropriate accommodation for looked after children is not always completed in a timely manner (HMIP 2011) and many feel effectively abandoned by the local authority (Coyne 2015). A thematic report on resettlement by HMIP (2015) found that the support given to children leaving custody was frequently inadequate, leading to reoffending, poor physical and/or mental health, inappropriate accommodation and a lack of education, training or employment opportunities. Hart (2006) highlights how planning for the resettlement of looked after children is often fragmented, partly because such children are subject to two different systems, with children's services taking a secondary role to youth justice services while children are in custody and therefore failing to provide the support needed once they leave the youth justice system (see also Herz et al 2012). An enduring theme from research is that some care leavers report feeling safer in custody than living independently in the community (Fitzpatrick and Williams 2014). As noted above, Prime (2014) found that looked after children in custody were more likely to anticipate problems across all areas of resettlement, although they were more likely to know who to contact for help with these.

4.14 Transitions into and out of care

There is extensive research on the experiences of young people once they leave the care system and move towards independence (see, for example, Stein 2012). This is a key point of transition (Schofield et al 2014) and one which, evidence suggests, can be critical in influencing young people's involvement in offending behaviour. The provision of on-going personal, social, emotional, financial and mental health support; appropriate accommodation; education, training or voluntary opportunities; the management of family and peer relationships and so forth, can all impact upon the likelihood of a previously looked after child becoming involved in the criminal justice system once they reach independence. Looked after children may experience a premature and abrupt transition to independence: in 2015, 24% of looked after young people in England and Wales ceased to be looked after at age 18, with 5% of 17 year olds and 6% of 16 year olds doing so. Less than half of those eligible to remain with their foster carers after the age of 18 under the Staying Put initiative did so (discussed below). Only 3% of 20 year olds and 2% of 21 year olds were living with former foster carers, compared with half of 20-24 year olds in the general population who were living with their parents (ONS 2015). The transition to independence can be hindered by a lack of suitable accommodation, difficulties in making the transition to adult services and social isolation (Lipscombe 2006; House of Commons Committee of Public Accounts 2015) and a persistent culture that assumes that leaving care means a transfer to the benefits system (Centre for Social Justice 2014).

Physical and mental health problems may increase when leaving care. This may be associated with the physical and psychological demands of leaving care at an early age combined with problems experienced before coming into care and while in care (Dixon et al 2006). Research suggests that the young people most likely to experience entrenched housing problems include those who leave care early (at age 16 or 17), who move frequently for negative reasons, who have mental health problems and emotional and behaviour problems, and who leave secure accommodation (Stein and Morris 2010). Ward (2011) highlights how placement instability and discontinuities in care may act as a barrier to the establishment of a sense of self-continuity, belonging and connectedness. This may increase the likelihood of leaving care becoming a transitional flashpoint for some young people. Difficulties in moving on to adulthood, particularly premature or accelerated transitions, may increase the propensity for young people to lose sight of the thread that connects their past to their future and engage in self-destructive behaviours, including offending.

The Centre for Social Justice (2014) found that statutory pathway plans were not in place for half of the young people leaving care, and that care leavers were likely to lack soft skills such as demonstrating commitment and communicating effectively. Daining and DePanfilis (2007) found that girls, older young people and those with lower perceived life stress had higher resilience scores and managed the transition to independence more successfully.

Young people remaining in foster care placements through extended foster care services or initiatives such as 'Staying Put' (designed to encourage fostered children to remain in their foster placement until they are 21) until they are prepared and ready to leave is associated with reduced crime and sustaining better educational and employment outcomes (Daining and

DePanfilis 2007; Lee et al 2014; Munro et al 2012). Courtney and Dworsky (2006), in a large-scale sample of 633 care leavers, found that those young people who chose to remain under the care and supervision of the child welfare system experienced better outcomes than those who either chose or were forced to leave care. An evaluation of the Staying Put initiative found that there was a positive impact on educational attainment, including entry into Higher Education, and that it enabled young people to move directly to independent accommodation when they left care; those not 'staying put' experienced more complex transition pathways and housing instability; the evaluation did not comment on the impact on offending behaviour (Munro et al 2012). However, not all young people want to remain in care longer: Department for Education (2015a) statistics show that only 48% of those eligible to remain with their foster carers after their 18th birthday did so; and similar placements are not available for those in residential care. There are clearly resource implications for such initiatives, with some foster carers being unwilling or unable to continue providing placements for these young people, particularly as there may be financial disincentives.

Research shows that the transition to adulthood for looked after young people may be affected by eligibility criteria that exclude young people from services that might benefit them, the inadequate funding for transition services, a lack of coordination across service systems and inadequate training for service professionals about young adults' development (Osgood et al 2010). Many looked after children retain strong ties to their biological family, whether or not they return to live with them, and need to have skills for managing potential problems at home, including understanding and navigating birth family, partner and social relationships (Dixon and Stein 2005; Sinclair et al 2005; Wade 2008; Cusick et al 2011).

The provision of leaving care and independent living services can assist young people with preparation and life skills, accessing housing, employment, education, parenting, financial, social and personal support. This may, in turn, reduce potential involvement in offending behaviour (Dixon et al 2006; Montgomery et al 2006; Courtney et al 2011; Jones 2011) although this is difficult to evidence. For example, Everson-Hock and others (2011) conducted a review of research into the effectiveness of seven schemes providing support to looked after children making the transition to independence; the studies showed that young people receiving such support were more likely to complete education, to be in employment and to be living independently, and less likely to be young parents. However there was no reported impact on involvement in offending behaviour (see also Montgomery et al 2006). Cusick and others (2011) found that being in receipt of Independent Living Services was associated with a reduction in violent behaviour, but less so with a reduction in offending behaviour. Both Everson-Hock and colleagues (2011) and Montgomery and others (2006) noted the variable quality of research into the impact of leaving care services, which tempers the validity and generalisability of the findings.

5 Examples of interventions, protocols, and good practice

There is an extensive range of interventions and good practice examples that aim to address risk factors experienced prior to entry to care, experiences during the care period, transitions to independence and to limit the potentially criminalising effects of being looked after. Reflecting the different theories put forward to explain why looked after children may be over-represented within the youth justice system, the interventions tend to relate to individual risk factors and characteristics (such as behavioural support programmes, education or training initiatives, substance misuse interventions, mental health support and so forth), reducing the impact of adverse influences within the care environment (including improving staff training, behaviour management and relationship formation) and wider structural level initiatives to reduce the unwarranted criminalisation of looked after children (such as the development of national and local protocols for responding to looked after children who are involved in offending behaviour). Some interventions aim to address combinations of these factors; for example, the implementation of restorative approaches can have a positive impact on individual behaviour and staff relationships and prevent unnecessary Police involvement.

The complexity of looked after children's backgrounds and the diversity of care placements and care experiences, combined with different methodological approaches, outcome measures and the variable quality of research, means it is difficult to reach firm conclusions about the effectiveness of interventions (Little et al 2005). Many of the interventions and good practice examples are limited to small-scale, time-bound projects in discrete geographical areas, making it hard to generalise from their findings.

5.1 Risk and resilience factors

As Schofield and others (2014) argue, interventions need to take account of the risk factors that are influential at different ages (for example family and school-related risks need to be targeted at an early age, while the development of stable adult relationships and constructive activity may be more relevant during adolescence), but therapeutic interventions may be necessary at any age.

There are programmes that particularly target mental health support for looked after children. For example, Arcelus and others (1999) describe the development of a direct access child and adolescent mental health service for children living in residential care or with foster families in England and Wales, which aimed to decrease waiting times for mental health support. Another local council (Social Services Improvement Agency 2011) implemented a process to ensure all looked after children are screened for mental health needs and are 'fast-tracked' to receive Child and Adolescent Mental Health services (CAMHS) without being placed on the waiting list, and provided foster carers with mental health training. This resulted in a lower rate of placement breakdown and enabled more very vulnerable young people to be maintained in foster care placements. Other areas have implemented an intensive wraparound mental health service for looked after children (see, for example, Hill 2011) and have tried to develop multi-agency responses for addressing their mental health needs.

Dunleavy and Leon (2011) argue that increasing looked after children's coping skills and psychological strengths can reduce offending behaviour and improve wellbeing, as well as supporting the use of behavioural interventions that aim to help looked after children control their anger and develop effective coping skills and problem solving abilities. Similarly, Schofield and colleagues (2014) emphasise the need for a greater focus on building resilience within children and young people, including developing trust in relationships and a feeling of belonging, increasing social cognition, enhancing self-esteem and so on. However, as noted above, research on the specific predictors of resilience in looked after children is sparse (Fisher 2015). Leve and others (2012b) conducted a review of interventions for foster children (who were not necessarily involved in offending behaviour) focusing on attachment behaviour, resilience and social learning. They concluded that behaviour and biological systems remain, to some extent, pliable and that supporting caregivers to provide developmentally sensitive care can promote positive development and resilience.

Although not always specific to looked after children, numerous studies have shown that community-based interventions such as Multi-Systemic Therapy and Functional Family Therapy can reduce young people's involvement in offending behaviour (see, for example, Littell et al 2005; Painter 2010; Greenwood and Welsh 2012). Multi-Systemic Therapy has also been demonstrated as having some success as an intervention for families at high risk of breakdown to prevent young people entering care (Lee et al 2015), although it is not suitable for all (Fox and Ashmore 2015). A trauma-informed casework practice, or interventions such as Trauma-Focused Cognitive Behavioural Therapy, may be appropriate for some looked after young people whose offending behaviour may be associated with experiences of trauma or loss (Herz et al 2012).

Some initiatives specifically address education and/or training for looked after children. Increased involvement in education benefits young people by developing social networks, new opportunities and extra-curricular activities (Jackson and Cameron 2014), and may be a protective factor for involvement in offending behaviour. Research has shown that educational outcomes for looked after children can be improved in care, through specific interventions and training and supporting foster carers, care staff and teachers to address educational deficits (Flynn et al 2010, Cameron et al 2015). There has been an improvement in educational progress for looked after children in most local authorities in England and Wales but gaps still remain in relation to young people in the general population (Sebba et al 2015). A number of studies have found a positive relationship between involvement in extracurricular activities and the reduction of offending behaviour of young people who are not looked after (see, for example, Persson et al 2007; Ryan et al 2008; Sandford et al 2008), although Farineau and McWey (2011) found that this association was reduced if there was no positive relationship between the young person and their caregiver. Jones and Lansdverk (2006) describe the implementation of an innovative residential educational programme for fostered young people; a three-year follow up of this programme showed that, although many experienced job instability and low wages, there were much lower rates of criminal justice involvement, homelessness and victimisation than in other studies of young people leaving foster care (Jones 2008).

5.2 The care environment

There is an extensive body of evidence to suggest that Multi-dimensional Treatment Foster Care (MTFC) and other specialist treatment foster care programmes, such as KEEP (Price et al 2012), can reduce children and young people's involvement in offending behaviour through intensive, targeted support. These operate by reducing contact with other young people involved in offending behaviour, addressing mental health difficulties, facilitating educational attainment, and so forth. It is beyond the scope of this review to consider all of the available research data, but the over-arching message from the research indicates that MTFC can reduce placement instability and disruption (Chamberlain and Reid 1998; Westermarck et al 2008; Macdonald and Turner 2008; Hansson and Olsson 2012), reduce involvement in offending behaviour (Eddy et al 2004; Robst et al 2011) and reduce the symptoms of depression (Harold et al 2013; Kerr et al 2014) (see also Eddy and Chamberlain 2000; Zagar et al 2009; Biehal et al 2011; Kirton and Thomas 2011; Biehal et al 2012; Marshall and Smith 2013; Green et al 2014; Waterman 2015). Research has also been conducted with a specific focus on the placement of girls involved in offending in MTFC, a group who otherwise have been neglected within youth justice research and policy (see, for example, Leve et al 2005, 2012a; Chamberlain et al 2007; Smith et al 2012; Van Ryzin and Leve 2012). Many authors (for example, Smollar and Condelli 1990; Schofield et al 2014; BAAF 2015) have concluded that high quality foster care may provide a protective environment that can significantly benefit the life chances of children and young people.

As discussed above, Everson-Hock and colleagues (2012) found that interventions aimed at delivering additional support and training to foster carers (such as cognitive skills and attachment training, and managing challenging behaviour) can have some beneficial effects for looked after children, including reducing behaviour problems and placement instability and improving their emotional health and wellbeing. Similarly, many of the concerns about residential care relate to the quality of staffing and support: well-trained and well-supported staff within small units may result in the provision of high-quality residential care for young people. The Department for Education (2013) found that training in verbal conflict management, defusion and de-escalation techniques was valued by staff and helped them to identify possible causes of conflict and potential triggers for challenging behaviour before incidents occurred.

There are a number of interventions and programmes that particularly focus on providing improved support for care leavers, for example through work experience and employment opportunities within the local authority, and participation in training professionals who work with young people (see, for example, Hart 2006; Centre for Social Justice 2015).

5.3 Unwarranted criminalisation

There is a wide range of initiatives, protocols and policies that appear to reduce the inappropriate criminalisation of looked after children by the care and justice systems, although most have not been independently evaluated. The YJB's Effective Practice Library includes a number of schemes focused on looked after children (including Triage, improved training for residential care staff, local protocols and so forth) although these have not been formally evaluated. For example, one local authority has developed a joint initiative with the YOT, CPS, Police, courts, foster carers, and independent children's homes, with regular liaison meetings

being held, the development of an agreed system of categorising incidents as internal, not serious or serious and the identification of appropriate methods of resolution for each; an agreed definition of the difference between being 'absent' from the placement and being 'missing'; and guidance on which incidents must be recorded by Police (YJB Effective Practice Library). Many other Police services, YOTs, and/or local authorities, have developed protocols with residential care providers (such as having a key point of contact within the Police service, who has responsibility for designated children's homes) to address the inappropriate criminalisation of looked after children, although questions have been raised about how widely and how well these are implemented (Schofield et al 2014; Howard League for Penal Reform 2016). Wong and others (2015), in an evaluation of Youth Justice Reinvestment Custody Pathfinder (an incentive payments programme), found that the development of a dedicated social worker post, within local Youth Offending Services, helped to co-ordinate service provision for looked after children involved in offending behaviour. Herz and others (2012) discuss two initiatives within the USA that have been developed to address the systemic factors that affect dually-involved young people, including addressing barriers to sharing information, and establishing a joint infrastructure that enables youth justice and child welfare systems to work together.

Alternative approaches to behaviour management, such as the use of restorative justice (RJ) in residential units, have been effective in reducing Police involvement by resolving issues internally, rather than relying on the Police. For example agencies in one county reported a 50% reduction in offending in children's homes as a consequence of the greater use of restorative justice interventions (House of Commons Justice Committee 2013; see also Willmott 2007; Hopkins 2009; Littlechild 2009, 2011; Hayden and Gough 2010). However, it is unclear how widespread these initiatives are or how well-integrated the restorative approaches are within wider behavioural management policies (Department for Education 2013; Staines 2013).

There are also perhaps more radical changes that could be made to reduce the criminalisation of looked after young people, such as raising the age of criminal responsibility and/or viewing offending by children and young people as a welfare issue rather than as a criminal justice concern, with the care system playing an active part in supporting children and young people who are involved in offending behaviour (BAAF 2015). Fitzpatrick (2014) suggests that, where looked after children have been involved in minor offending behaviour, their criminal records should be wiped when they leave care, to avoid stigmatising them and to help them access employment and housing. Alternatively, rather than being required to take formal action in response to all minor transgressions, the Police could be enabled to record low-level crime-related behaviour in a way that allows for the behaviour to be addressed by a welfare agency but without the incident forming part of a young person's criminal record, for example having a new recording category as 'referral for other agency support and intervention' (NCB 2015). Further, as mooted in the Crime and Courts Bill 2012 (although not included in the final Act 2013) the Youth Court should be permitted to refer cases to the Family Court if more appropriate, or to refer a case back to the Crown Prosecution Service, Police or Youth Offending Team for a record of 'No Further Action' or for alternative diversionary interventions instead (NCB 2015).

6 Conclusions

From the research evidence discussed here, it is clear that most looked after children are not involved in offending behaviour. Some of those who do become involved in the youth justice system while in care were involved in anti-social behaviour, offending or demonstrated challenging behaviour before their entry to care. However, for a significant proportion of looked after children, the care experience does appear to contribute to the onset of offending behaviour, and for others it exacerbates and perpetuates their pre-existing involvement. Research suggests that the services offered once a young person enters care are not always successful in combating established offending behaviour (Darker et al 2008) and that some youth justice interventions can further criminalise children and young people who do display challenging or offending behaviour.

For those who do offend whilst in placement, it is likely that their behaviour results from a complex interaction between their experiences in care, involvement with different professional systems, individual characteristics and resilience, and the familial and environmental risk factors that led to their entry into care (Schofield et al 2014). There is some evidence to suggest that looked after children who offend are more likely to have special educational needs, to have been abused or neglected, or to have more mental health problems than offenders who are not looked after. However more research is needed to understand fully how these factors, and others, influence individual pathways into care and offending. Identifying appropriate interventions requires the disentangling of factors such as age of entry and reasons for entry into care, the length of time spent in the care system and movements within care, in order to understand how becoming looked after can be a protective factor for some, yet exacerbate offending for others (Blades et al 2011). It is also necessary to situate any analysis of these factors within an ecological framework, to understand the impact of wider family, school and community environments on individual children and young people's experiences and trajectories (Herz et al 2012).

The key elements for achieving positive outcomes for looked after children appear to relate to placement stability, involvement in education (and possibly extra-curricular activities), promoting resilience, capitalising on the protective capacity of relationships – not just with caregivers but also relatives, friends, professionals such as social workers, YOT workers, teachers and activity leaders (Schofield et al 2014), and timely and appropriate leaving care provision. If looked after children do not receive sensitive and committed care, or their behavioural or emotional problems overwhelm carers, then highly-targeted therapeutic and educational support is likely to be necessary to manage young people's behaviour effectively. Collaboration between professional systems – children's services, education, mental health support, substance misuse provision, youth justice and so on – is essential to ensure that positive outcomes can be achieved (Herz et al 2012).

Placement stability can be enhanced by the appropriate and timely provision of services, including mental health support, educational provision, and by facilitating positive contact between children and their birth families, friends and other significant individuals, particularly

when children and young people have been placed out of their home area. There is perhaps more evidence to suggest that multi-dimensional treatment foster care is more effective in reducing looked after children's offending behaviour than residential care, but it may be that the latter can be as effective if staff are appropriately trained and supported, and protocols are fully implemented to reduce the unwarranted reliance on the Police to respond to challenging behaviour. Some children and young people do not want to be placed in foster care, and placements in high-quality, small-scale residential units need to be available for them.

Leaving care is a period of high risk for many young people who may experience a complex transition to independence, hindered by a lack of formal and informal support. Research shows that the provision of leaving care services can protect young people from becoming involved in offending behaviour once they leave care, by supporting their transition to independence. Initiatives such as Staying Put need to be further developed, to prevent young people leaving care prematurely, although it must be noted that some young people do not want to remain in care and may need other forms of support as they make the transition to independence. Additional support needs to be developed to enable looked after young people to access further and higher education, training and employment, to help them to find and maintain suitable accommodation, and to promote positive health and wellbeing.

There are a number of areas where further evidence and understanding is needed (see also Herz et al 2012). Gender is a pertinent issue: despite looked after girls being significantly over-represented within the youth justice system and in custody, they are still a minority group and as such their needs may not always be recognised or adequately addressed. There is some evidence to indicate that looked after girls who offend may have experienced more difficulties prior to placement than boys, and they may experience differential treatment within the care and justice systems, which warrants further investigation. The over-representation of children from specific ethnic backgrounds, and the intersectionality of gender and ethnicity, also needs further research, and offending by asylum-seeking children who become looked after is, as yet, undocumented.

All of the research evidence underlines the importance of high quality, secure placements, the need for timely interventions, and the need for a multi-agency, multi-dimensional approach to reducing looked after children's contact with the youth justice system. Research demonstrates that strategies and protocols to reduce looked after children's involvement in offending behaviour can be highly successful, for example meaningful and manageable responses to children and young people who are 'absent' from their care placements and dealing with minor disputes and offences through restorative approaches, but these protocols need to be implemented much more widely. It is imperative that looked after children and young people have access to advocacy and good quality legal representation at the Police station and in court, and that they have stable and consistent support from their social worker and other professionals within both the youth justice and care systems. This support needs to be provided on a flexible, long-term basis, until the young person has made a successful and stable transition to independence.

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The Prison Reform Trust is an independent UK charity working to create a just, humane and effective penal system. It does this by inquiring into the workings of the system; informing prisoners, staff and the wider public; and by influencing Parliament, government and officials towards reform.

From 2007 to 2012 the Prison Reform Trust's Out of Trouble programme, generously supported by the Diana, Princess of Wales Memorial Fund, worked with some success to help reduce the numbers of children in custody in England and Wales. As part of that programme, the Prison Reform Trust commissioned research into the views of looked after children on the links between care, offending and custody. In 2015 the charity launched a major review chaired by Lord Laming to investigate the disproportionate numbers of children in care who were in custody and to make recommendations for reform.

This independent research has been prepared by Dr Jo Staines of the Hadley Centre for Adoption and Foster Care Studies, School for Policy Studies, University of Bristol. It was produced to accompany Lord Laming's review. The review's full report and executive summary are available from the Prison Reform Trust.