



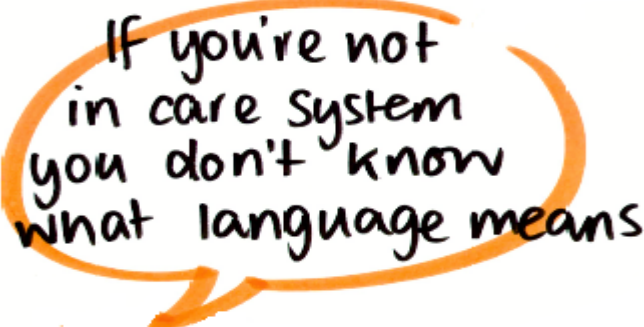
LANGUAGE MATTERS

**A Report on the Care Experienced Peer
Research Event held in March 2019**

Published July 2019

Contents

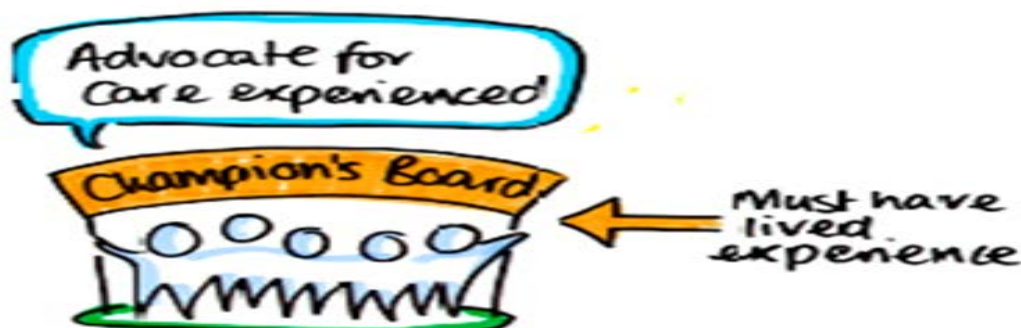
Introduction	Page 2
Acknowledgements	Page 3
Section 1 - 'Let me describe me' Language, Stigma and Behaviour	Page 4
Language	Page 4
Stigma	Page 9
Behaviour	Page 11
Section 2 - Name change suggestions	Page 14
Section 3 - Evaluation	Page 15
If there is one thing you could change about the care system what would it be?	Page 15
What's Working?	Page 17
What do you want our champions board to work on?	Page 18
Have you found this event helpful?	Page 19
Getting to Know us	Page 20
Corporate Parents – What are they?	Page 21
Section 4 - Additional comments	Page 22
Section 5 – What Next?	Page 23
Appendix 1 – Suggestions to Champions Board	Page 25



If you're not
in care system
you don't know
what language means

Introduction.

On the 14th March 2019 a Peer Research event took place called 'Who am I?'. This event was facilitated by North Ayrshire Council's modern apprentices and members of the North Ayrshire's Champions Board¹.



We wanted to bring together Care Experienced Young People and Professionals to start a conversation around the **Language** used in the 'care system', the **Stigma** often associated with the language that is used and the resulting **Behaviours** of Care Experienced young people and professionals.

We brought together approximately 20 care experienced young people with various care experiences and approx. 30 practitioners from front line practitioners to those in management positions from a range of services.

We wanted participants to feel free to express their thoughts and ideas and placed young people and professionals at the same tables to discuss what the Care System meant to them. Following this we separated professionals and young people to ensure that all young people felt comfortable in expressing their views without any preconceived power imbalances.

Each group answered the following questions.

1. What do we think of when we talk about Language in the Care System?
2. What do we think of the current Language?
3. Do you think the Language needs to change?
4. Are there other words we would prefer to use? What are they?
5. Do you think Language influences stigma faced by Care Experienced young people?



We then moved on to Stigma and asked, how does Stigma affect Care Experienced young people? What are the links between Language and Stigma and How can we change this?

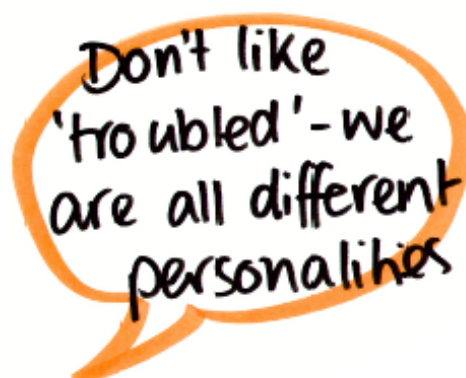
The event was rounded up by asking these 7 questions.

1. If there is one thing you could change about the care system what would it be?
2. One positive, what is working for you?
3. Is there any specific topics you would like the Champions Board to work on?
4. Have you found this event beneficial?
5. One positive word to describe a Care Experienced young person?
6. One positive word to describe Corporate Parents?
7. Any other comments you would like to add?

¹ The Champions Board are a group of Young Care Experienced people who come together to promote Care Experienced children and Young People's rights and to act in behalf of this community to effect change.

These activities generated an enormous amount of conversation and information that will need to be analysed and reported on. This report will attempt to describe the common themes and views from the participants. It will make recommendations on the way forward as well as highlighting the ongoing dilemmas we are all faced with to ensure that Care Experienced children and young people's rights are progressed, and any real or perceived barriers to fulfilling their potential are eradicated.

Statements in the speech bubbles are direct quotes from participants and quotes in orange boxes are messages from research.



Stigma, Language and behaviour

During the event it became clear that the language we use, the stigma we experience, and the behaviours exhibited are all interconnected. All these elements require a coordinated change and must be founded on a set of common values. These values need to be embraced by Corporate Parents and the Care Experienced community, integrated, and embedded in practice and the thinking of all those who are, or support, Care Experienced Children and Young People.

Getting It Right for every child has provided a set of core values that should be promoted throughout all the interactions we have and how we engage with others. These are: -

-
- *Promoting the wellbeing of individual Children and Young People*
 - *Keeping Children and Young People safe*
 - *Putting the Child or Young Person at the centre*
 - *Taking a whole Child/Young Person approach*
 - *Building on strengths and promoting resilience*
 - *Promoting opportunities and valuing diversity*
 - *Providing additional help that is appropriate, proportionate and timely*
 - *Supporting informed choice*
 - *Working in partnership with caregivers.*
 - *Respecting confidentiality and sharing information*
 - *Promoting the same values across all working relationships*
 - *Making the most of bringing together each worker's expertise*
 - *Co-ordinating help*
 - *Building a competent workforce to promote children and young people's wellbeing*
-

Getting it Right for every child itself is based on three change mechanisms, Practice, Culture and Systems. There are examples where systems have changed but there has been no attempt to change practice or culture and implementations have failed. Recommendations in this report need to address all three, Language, Stigma and Behaviour or the desired changes will either not be sustainable or effective.

WHAT'S WORKING?

WHAT SHOULD CHANGE?

WHAT TOPICS SHOULD CHAMPION'S BOARD WORK ON...



It costs nothing to change the language & makes a huge difference

Acknowledgements

North Ayrshire Champions Board

Demi Morrison (Chair)

Natasha Gills (Vice Chair)

Emma Templeton

Dannie Templeton

Charlie Porter

Taylor Ripley

Lee Rowe

Mhairi McFadyen

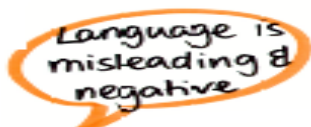
Courtney Gemmell

North Ayrshire Modern Apprentices

Section 1 - 'Let me describe me' Language, Stigma and Behaviour

Conversation around 'What do we think of when we talk about the language in the care system?' 'What we think of the current language used?' 'What needs to change?', 'What are the alternatives?' and 'How does language affect stigma faced by care experienced young people?' were all discussed at this event.

There were over **130** responses to these questions. We have attempted to categorise these into common themes. The Champions Board identified what they thought was most important or generated strongest feelings and are the headings in this report. Eg, 'We need to make the language more human'.

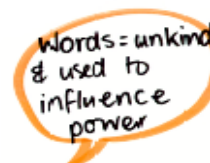


Language

'I believe the professional language of 'looked after children' [LAC] is having an adverse impact on the children that we are caring for in long-term foster families. Professionals are complicit in a system which labels children's long-term homes as 'placements', the people that are there to make them feel like family members as 'carers', with their lives openly scrutinised in their presence several times a year by a group of professionals – teachers, social workers, and health representatives at a 'LAC' review.' Community Care Matt Lewis April 29th 2019

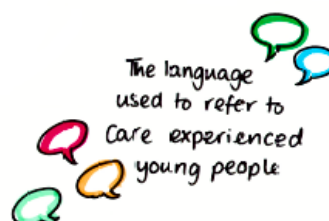
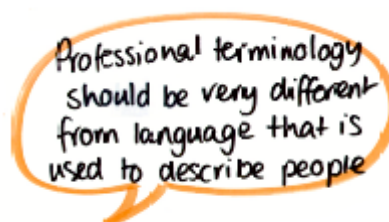
'We need to make the language more human'

There is no doubt that the current language used within the care System leads to feelings of **isolation, stigma, disadvantage** as well as a legacy of **discrimination** throughout a Care Experienced person's life. We heard from participants that the language needs to be **'more positive' and 'mainstream'**. i.e sibling contact to family time. Words like LAC, GIRFEC, Key worker, contact, staff, shift, review, sibling, CSO, panel, unit, manager, service etc need to be changed. Using the word 'shift' for example to describe a worker's work pattern may be acceptable in a professional language but not in conversations with young people and this only reinforces they are living in an institution and not a home. **Participants also felt that culture changes language as well as language changing culture.** Alternatives were offered and are highlighted in Section 2 of this report.



'Professional terminology should be very different from the language that is used to describe people, or at least feel comfortable with words that are used to describe us'.

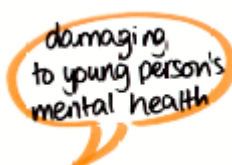
Should there be a separate 'professional' language? Participants questioned whether there should be terminology associated with the process of the care system, used to describe touchpoints on a journey, like a review for example. Professional would understand what this is but several young people felt that for them a much softer description would be more suitable. I.e. 'A meeting to discuss how we are doing, 'check in meeting', 'update meeting'.



Subject for further discussion – Professional Language. Is it still OK to have a separate language used between professionals to describe either touchpoints on the care journey, legal terms, or to describe professional roles even though such a language still promotes the concepts of institutionalised care.

'Language doesn't help young people's mental health'

Care Experienced children and young people are already vulnerable due to circumstances that most of the time is out with their control.



- Separation from parents, brothers and sisters, friends
- Lack of Agency/Rights – Not being able to do the things that you used to do
- Restrictions – Rules that you are not used to
- Not knowing what's going to happen.
- Loss of contact
- Taken advantage of. Losing power
- Must do as you are told
- Living with other young people – different age groups
- Additional rules
- Anxious about those you have left behind

²

Whether Care Experienced Children or Young People were accommodated at birth or subsequently they share one thing in common; they have experienced separation from their birth parents, an experience that is likely to have engendered feelings of abandonment. Many will also have suffered abuse and/or neglect; some will have experienced multiple transitions within the care system. All of these can be recognised as distressing or emotionally disturbing experiences.

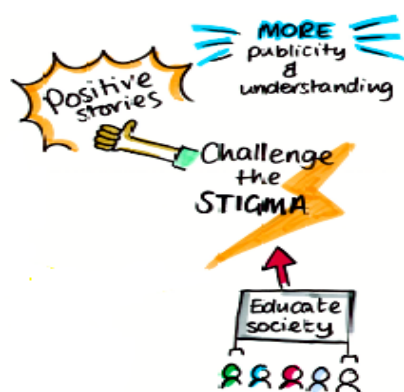
² North Ayrshire Champions Board

Young people coming into the local authority care system will already have had trauma and difficulties over and above those experienced by most of their peers. The Language used can often compound the way young people perceive themselves in an alien environment. Phrases like Unit, Placement and Contact de-normalise an already stressful and unfamiliar landscape and adds to feelings of being 'outside' reality adding to increased difficulties in coping.



'Care experienced young people are instantly labelled 'trouble maker''

Culturally there is a perception that all Care Experienced young people, especially those living in residential houses are 'troubled', 'bad' etc. A shift in this culture is needed not just amongst professionals but in society. We are calling for a proactive communication plan to address this and it has been suggested that our Champions Board have access to schools and develop a module within the Health and Wellbeing curriculum.



'Stigma and the language used in regard to being 'Care Experienced' needs to be dramatically improved. For example, with stigma, we should have 'young people' going into schools educating all pupils and all teachers. Listen to the ones who have lived experience because they know better than anyone.'



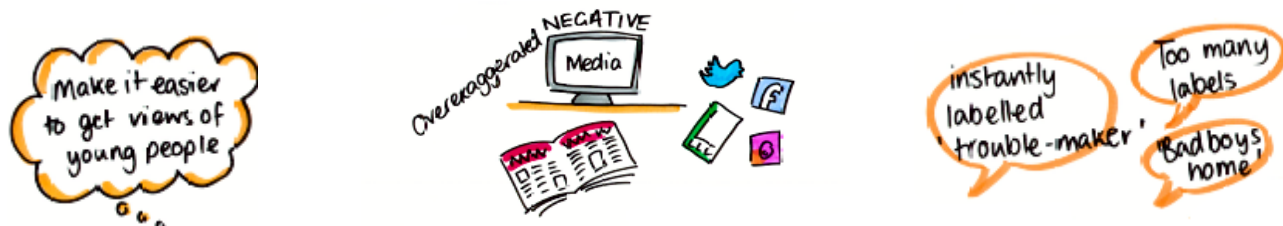
Better knowledge & understanding in Education System



Not enough known of people experiencing care - COULD LEARN MORE

Recommendation 1 – Access to Schools. The participants at the event felt that Care Experienced Young People should be involved in developing and raising awareness of what it means to be Care Experienced amongst their peers and the wider community. Access to schools should be explored and a video could be produced to be used for this activity

'Let me describe me'



The event itself was called 'Who am I?'. Stereotypes often lead to wrongful interpretations of the individual and each Care Experienced Child and Young Person is unique. Care Experienced Children and Young People must be allowed to describe for themselves who they are and what their experiences have been, either through the stories they verbalise or the behaviour they exhibit. Both require the listener to be flexible and understanding. Young People also have the right not to have labels or descriptions placed on them or pre-scripted terminology to describe their experiences or current circumstances. i.e rather than have a blanket term to describe a residential home, house, or unit, the young person should have the freedom to describe it as they wish. Some may be happy with Unit, some with house, or some just the name of where they stay.



'There are so many stereotypes in units from experience I felt isolated and labels

'Not family friendly'

'Contact', 'Siblings', 'Placement', 'Unit', etc are but a few of the professional terms used within the Care System that we would never or rarely use outside this system. Do you describe meeting up with family or friends as 'contact'? Who describes their living environment as a 'placement'? The inference is that we have no choice, no power, no autonomy to make our own choices and are a commodity to be 'placed' by factors controlled by availability, finance and convenience of others. Where is my choice? We may not have a choice of where we stay but we should have a choice to feel that it is a home, even if only temporary



'Jargon no dignity'



The use of jargon and acronyms depersonalises a very personal experience. Using shorthand gives the feelings of wanting to get something over quickly, it's too much trouble to say the whole thing. It is another language, a language that is foreign to those coming into care, another way of alienating Care Experienced People. Over time the language does become understood, but to what cost? The cost of confusion in the early days, the cost of being in a foreign landscape without an interpreter, the cost of lost time, the cost of feeling you are in a system that has its own rules that you don't understand

'Been created without thinking of how it would make someone feel e.g LAAC'

The system itself has been designed by 'professionals' and over time has been modified, changed and amended. The question was raised as to how many Care Experienced young people have been involved in changing, designing or modifying this system. It was felt that young people need to be involved in this activity.



Recommendation 2 – Process are put in place that will enforce a change in the language used. Young People should be involved in the design of processes that will ensure the preferred language is used. This will be part of an overall review of the 'Care System'.

Stigma

The process of stigmatisation starts when the individual's difference is perceived and linked to a negative stereotype, further leading to ostracism and discrimination for the individual being labelled (Link and Phelan, 2001). Conceptualizing stigma. Annual Review of Sociology, 27, 363-385. <https://doi.org/10.1146/annurev.soc.27.1.363>



'Care experienced Young people may think this title will stay with them for life, their future, because of the stigma linked with being in care.'

There is a difficult dilemma as 'Aftercare' is an entitlement to all care leavers up to the age of 26. We are encouraging Care Leavers to declare their care experience, so they can exercise their rights to services and support. However, with the current perceptions around some Care Experienced Young People may find this difficult. We therefore need a greater awareness with the public and professionals on what it means to be care experienced.



Subject for further discussion – How do we eradicate negative stereotypes and the confidence of Care Experienced People to declare their lived experience without fear of being judged?

'Stigma = negative views of self, mental health + anxiety, reduced aspiration, language used label stigma, reduces confident levels, treated differently, feel different and bullying.'

The above statement above reflects the feelings of Care Experienced children and young people. There are personal consequences when the perception of an individual is far from the reality of that person's circumstances and experiences. We have heard from others the effect on Mental Health, feelings of low self-worth, isolation and lack of confidence to achieve our potential. Stigma exists in the current language we use, exists in systems that should promote rights, individuality and empowerment. To tackle this there is a need to raise awareness of Stigma and its effects and how Corporate Parents need to react to these barriers so children and young people can develop their own self-worth, confidence and wellbeing.

There needs to be more care experienced people involved in important decision making

Recommendation 3 – Corporate Parents Stigma Policy. For Stigma to be tackled on a Corporate level there is a need for a common understanding across Corporate Parents of how Stigma manifests itself and what strategies can be put in place to combat this, and how this can be taken forward .

Stigma around
HELP
→ Police
→ Social workers
→ Key workers

Stigma affects self worth

'Language + stigma = assumptions. Stigma create by the words we use'

Stigma is a product of lots of things including the language that is used. It is acknowledged throughout this report that the language used can add to the real or perceived feelings of disempowerment and misinterpretations from others.

Professional language used
→ CREATES ←
stigma

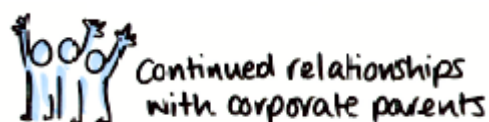
'Stigma holds people back, created a fear of them being themselves, often stems from ignorance/ misunderstanding, needs people to challenge perceptions, language means different things to different people, stigma comes from how it is used.'

Behaviour

‘Every child deserves a champion: an adult who will never give up on them, who understands the power of connection and insists they become the best they can possibly be.’ Rita Pierson, Educator

‘Learn more about young people’s experience’

Consistency and really listening is key to develop trusting relationships with those that can help a child or young person along their own individual journey. “The most basic of all human needs is the need to understand and be understood. The best way to understand people is to listen to them.” — **Ralph G. Nichols**. If Corporate Parents (another term not well liked) are truly to take on the role of a caregiver and treat children and young people like any other child then an emotional investment is required to be made, at least in terms of time, commitment and empathy.



3

‘Care is not rehab or jail’



Although perhaps an isolated comment issues of empowerment and disempowerment are critical in building trusting relationships and understanding behaviours of children and young people so they can reach their potential. It is important that any care setting should promote the rights of Care Experienced Children and Young People and afford them the chance to participate in making the rules and norms of their living space. ‘Care is not rehab or jail’. We still hear terms used in the system like ‘discharge’ that promotes idea of leaving an institution and not a person’s home.

³ Ralph G. Nichols, Leonard A Stevens, Are you Listening (1957)

'One member of staff from each team to be trained in counselling. Mental Health trained in every unit.'



This is particularly in relation to workers within our Residential Houses where young people felt that having someone within the house who had the skills in helping children and young people would be useful. More generally it was also mentioned several times about having access to other young people who had similar experiences and perhaps a peer mentoring scheme should be developed.

'We need people around us who understand and are empathetic to the issues we go through that affect our mental health'.

Recommendation 4 – Peer Mentoring Scheme and Mental Health.

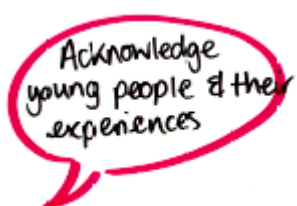
We have heard before during the consultation with Young People on the North Ayrshire Corporate Parenting Plan and at this event that Young People value the support of their peers who have gone through similar experiences. It is recommended that a Peer Mentoring Scheme is explored around Mental Health and further work carried out with staff to develop their skills around Mental Health

The Champions Board is currently developing a targeted 'Mental Health Toolkit' for Care Experienced Young People to use at any point in their Care Experience.

'Trust needs to be emphasised. 'Without trust there is nothing'.

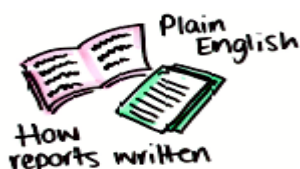
'If we want meaningful change, we have to make a connection to the heart before we can make a connection to the mind. Spending time to develop relationships and building trust is crucial to moving forward as a whole. Without culture, there is no culture of innovation. It all starts by creating an environment where people feel cared for, supported, and are nurtured.' George Couros

The Innovator's Mindset: Empower Learning, Unleash Talent, and Lead a Culture of Creativity



The above statement by George Couros sums up the feelings of children and young people who are care experienced. They need an environment where they feel cared for, supported and are nurtured. It is positive that all workers are being trained in nurturing approaches but wonder if this is enough. Without structural and culture changes 'nurture' is only a theory to be promoted and not a way of working.

Reports exaggerated



Care Experienced Children and Young People's views need to be heard and represented within reports and meetings. They may not be able to articulate how they feel or what to say so they need help to do so. Even though people might not agree with their views they have the right to express this verbally and in reports.

'Children's panels – Can we not have people that want to fight for you – not against you – The reports can be over exaggerated and sometimes false – I can't change it makes me angry.'

'We need more positive stories to emerge.'

Section 2 - Name change suggestions

Kinship Care =
Family

Residential Care
is for other groups
of people eg.
elderly

Unit = House, Home, Unit. 'Ask us individually what we want and call it'. May be different for each young person. Or 'just call it be the name of where we live'.

Subject for further discussion – How does the flexibility around the new language get embedded into an inflexible system for recording meetings, describing processes and satisfying legal requirements?

Kinship Care
= Family

Not 'contacting'
friends & families
you are just seeing
them

Placement- = The place where I live



Foster care = 'family care'. Let Young Person pick term for their situation, 'blended care'.

Sibling Contact = Time with Brothers and Sisters.

Contact = 'Family Time', 'visits'. 'Time with'

Staff – People who support me

Sibling = 'Brothers and Sisters!!!!'

LAC Review = A meeting to talk about your progress. 'Progress meeting', 'Update meeting,' 'Check in meeting' 'A meeting to discuss how we are doing'.

Unit Manager = Manager

LAC = Care Experienced

Key worker = Person who leads on helping, encouraging me.

Panel = Formal meeting at the Reporters Department to discuss my progress

A review
= A check in

A unit
= a gaff

Recommendation 5 – Glossary of terms developed by young people. Changing culture will require a change in the language that will be used in and around young people. This does not just mean changing one word for another, but rather providing a list of preferred terms, using language in context and using language that the child or young person prefers.

Section 3 - Evaluation

At the event 7 questions were posed. These were

1. Is there is one thing you could change about the care system what would it be?
2. One positive, what is working for you?
3. Is there any specific topics you would like the champions board to work on?
4. Have you found this even beneficial?
5. One positive to describe a care experienced young person
6. One positive to describe Corporate Parents
7. Any comments you would like to add?
- 8.

1. If there is one thing you could change about the care system what would it be?



The next question (Question 2 – What is working?) highlights some of the positives within the care system and some comments relating to this question may appear contradictory. E.g. 'Staff' were thought highly of as a support to many young people, but some young people also saw some staff members as a barrier to their development and growth with comments like 'Treated like a normal person by staff', implying they weren't. This reinforces the critical importance of personal relationships and the building of trust.

There was a call for siblings to be kept together, for 'young people 'not' to have a bad experience', more choice, more support in relation to Mental Health when leaving care, continued relationships with Corporate Parents, reduce red tape, and that all young people get loved and valued.

For this to happen the event participants felt that 'services' should be shaped by the young people themselves, there needs to be more publicity and awareness within the community, and to make more 'noise' about the positives and listen to those who know.



Regarding language, they agreed that it needed to be changed and that 'plain English' should be used always. It was mentioned that 'some of the labels are fine but there is always going to be a debate about it, everyone has a different opinion.' There was also a call for the 'Care System' to be less prescriptive and the need for it to be more individualised.



There were also more practical suggestions like the ending of 'big formal meetings', 'more support in schools' and 'Trauma responsive practice'.

Young People wanted their Corporate Parents to be 'less clinical', 'never assume' and to see the person before their behaviour. Participants wanted opinions to change with regard to how they are viewed and lastly to stop 'People feeling isolated... this shouldn't happen Ever! '



2. What is working?



The participants at the event did feel that there were some things that were working well and an acknowledgement that efforts are being made to engage with Young People and change, so that they can have the best chance of realising their potential.



3. What do you want our champions board to work on?



The event participants highlighted several areas that they wanted our Champions Board to work on (the full list can be found in Appendix 1). The Champions Board have prioritised these suggestions and are committed on focusing on the following areas below in the coming year.

The Champions Board are currently focusing on Mental Health but from the suggestions made at the event will also focus on: -

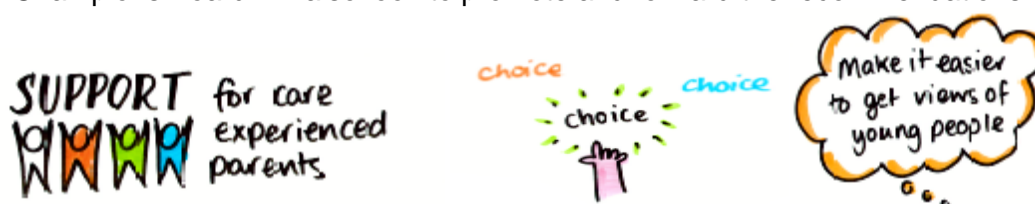
- Promotion and awareness raising in relation to the Champions Board and involving Young People in consultations.
- Researching the best ways to communicate with Care Experienced children and young people using social media and other formats.
- Helping more young people, professionals and Corporate Parents aware of what it means to be Care Experienced by sharing our stories.
- Stigma - Explore the development of a Stigma Policy and training.
- Language.



The Champions Board acknowledge that all the comments and suggestions are important and over the coming years hope to address all the suggestions to not only promote the rights and issues of Care Experienced People but to break down the barriers to reaching our potential.

Recommendation 6 – Champions Board to look at a work plan for the next year based on the feedback from this event. As well as the highlighted tasks above the Champions Board will develop a Communications Strategy on how awareness of the Care Experienced community can be promoted.

The Champions Board will also look to promote and forward the recommendations in this report.



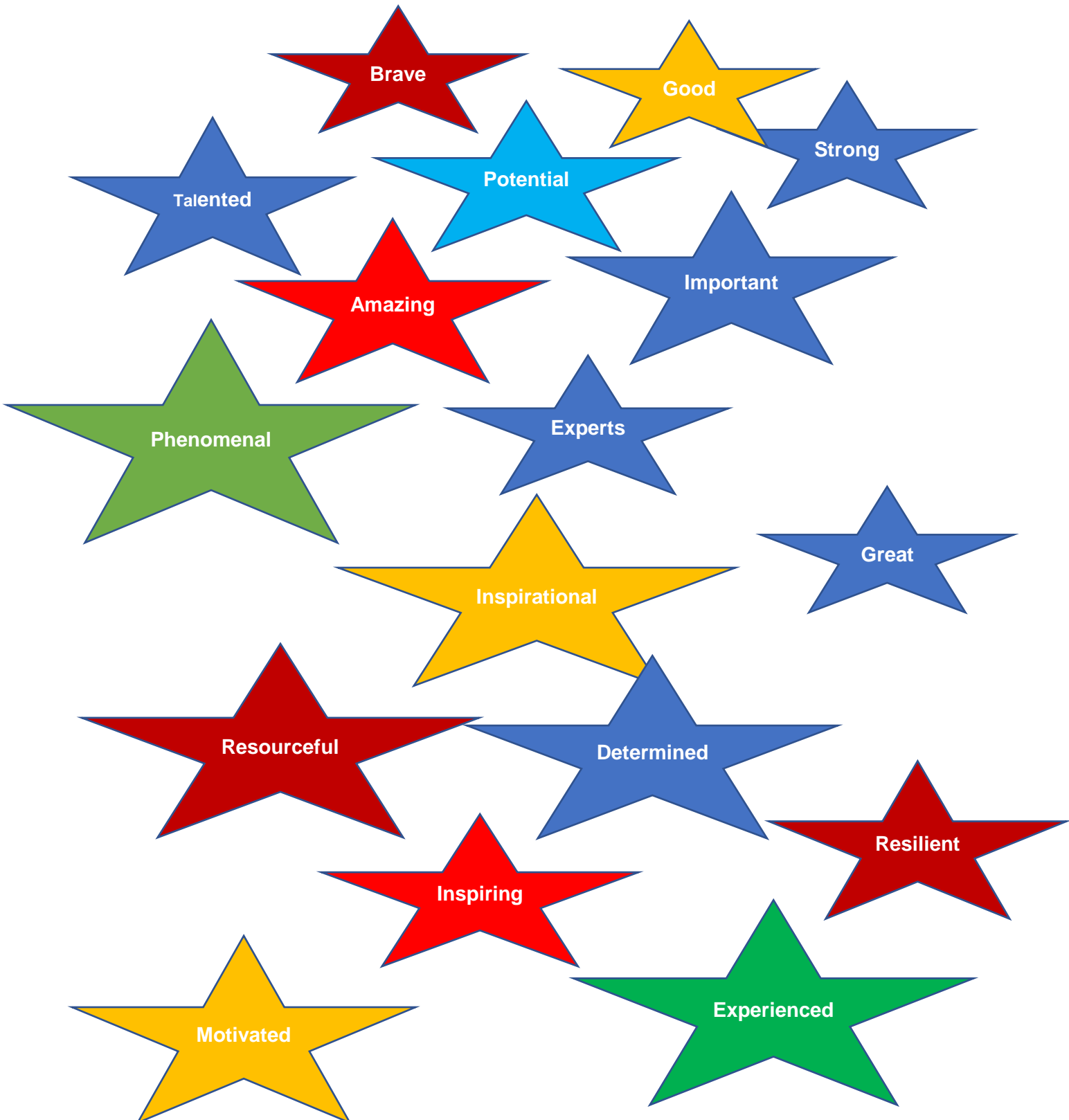
4. Have you found this event helpful?



All the comments above were positive and all the participants felt it was worthwhile, fun and informative. There was a call to hold more of this type of event.

5. 'Getting to know us'

Participants were asked to describe in one positive word a Care Experienced Young Person. This important exercise is linked with the language we use to describe young people with care experience and promote the use of a strength-based approach. These words didn't just come from young people themselves but those who work and befriend them. We are thankful to those who can look past weaknesses and identify positive attributes. The words were: -



6. Corporate Parents – What are they?

Young People and professionals gave their views on what a Corporate Parent should be and what they shouldn't. The words and phrases used should steer all our corporate parents to examine themselves and evaluate if they meet the benchmark set by this event.

Corporate Parents should be Supportive, Reliable, Inclusive, Present, Committed, Invested and provide opportunities. Does this describe your organisation?

As well as these organisational attributes there were strong views on the attributes of individual workers to be Caring, Loving, Real, Advocate, there for young People, Listener (and not Judging), Empathetic and Nurturing. Does this describe your workforce?

There was a call for Corporate Parents not to stand still but to be willing to learn, evolving organisations and lastly to be a family to those they have responsibility for.

Section 4 – Additional comments

This event generated an enormous amount of comment and discussion and many themes came to the fore. Some of the themes were: -

Professional interaction and relationships

Participants told us that professionals should never forget the human aspect of their work and the child and young person should always be at the centre, staff need to be flexible and change with the times.

We also would like others to 'see our potential and 'not label us', be less 'clinical', and see young people as a whole person, not just their behaviour.

'Believe in us', 'never give up and together we can achieve great things'.

Participation

'We all have a part to play', 'more people in public organisations need to be challenged to think like this great event and we need more sessions like this.' It was clear from the event that there needs to be more care experienced people involved with important decision making.



More events like this
please!! 😊

Recommendation 7 – Consultation Events. As the work progresses participants felt that there should be more events like this one. The Champions Board should explore the frequency of these events and potential topics.

The 'system'

'Can we start the care system again from scratch if young people want this?'. There were many calls to overhaul the 'system' and if this isn't possible to change the system, so that it is 'more human'. Nobody should 'leave care', we should always care and care should be lifelong. That means we must do better at maintaining relationships and supporting all those who are Care Experienced.



Pledges

As participants left the event they were asked to make a pledge on what they would do to support Care Experienced children and Young People. These are the pledges people made.

'To get more understanding of the care system and know how it hurts and effects young people in and out of care'

'when speaking with young people I will use more relatable language'.

'stand up and serve and protect care experienced young people'

'question when unsure and challenge when unhappy.'

'challenge stigma and learn more information about care experienced young people and their personal experience.'

'make care experience better for young people going through it in the future.'

'advocate for Care experienced young people to create positive change within the care system.'

'challenge stigma'

'challenge stigma and support young care experienced people to have a voice.'

'Continue to offer support to young people and remind them they matter – more than labels'.

'Support Young care experienced young people to have a voice at College'

'Challenge professional language being used with young people and children.'

'challenge stigma and listen to the young person.'

'Listen to the voices of Care Experienced young People.'

'Challenge Stigma.'

'make a change of people perception of young people in the unit'.

'help raise publicity and awareness in the community'

'ask and not assume – use your words'

'share all the positives and challenge all the negatives!'

'have young people at the centre of all my work.'

'challenge stigma and ensure every individual voice is heard.'

'dedicate time to learn from young people's experiences to make more of a difference.'

'encourage panel members to listen to young people and to make sure language used is less formal and more understandable for young people.'

'challenge myself to use less jargon and challenge others to choose different words.'

'encourage panel members in Ayrshire to use child-friendly normal language when speaking to young people in hearings.'

‘continue to empower children and young people to reach their full potential.’

‘as a member of the champions board I will make sure young people are heard.’

‘challenge existing policy that increases the likelihood that stigma will appear.’

‘challenge stigma at every level, every community, every step of the way for better outcomes for our young people.’

‘listen deeply and challenge stigma against care experienced young people.’

Section 5 - What next?

There would be no point in holding this event if it didn't make a difference to Care Experienced Children and Young People, so we need to take the learning from this event and build on the enthusiasm and commitment of those that attended. This is the start of the journey towards sustainable change for all our Care Experienced community so there are a number of recommendations that we would like to take forward.

Recommendation 1 – Access to Schools. The participants at the event felt that Care Experienced Young People should be involved in developing and raising awareness of what it means to be Care Experienced amongst their peers and the wider community. Access to schools should be explored and a video could be produced to be used for this activity

Recommendation 2 – Process are put in place that will enforce a change in the language used. Young People should be involved in the design of processes that will ensure the preferred language is used. This will be part of an overall review of the 'Care System'.

Recommendation 3 – Corporate Parents Stigma Policy. For Stigma to be tackled on a Corporate level there is a need for a common understanding across Corporate Parents of how Stigma manifests itself and what strategies can be put in place to combat this, and how this can be taken forward

Recommendation 4 – Peer Mentoring Scheme and Mental Health. We have heard before during the consultation with Young People on the North Ayrshire Corporate Parenting Plan and at this event that Young People value the support of their peers who have gone through similar experiences. It is recommended that a Peer Mentoring Scheme is explored around Mental Health and further work carried out with staff to develop their skills around Mental Health

Recommendation 5 – Glossary of terms developed by young people. Changing culture will require a change in the language that will be used in and around young people. This does not just mean changing one word for another, but rather providing a list of preferred terms, using language in context and using language that the child or young person prefers

Recommendation 6 – Champions Board to look at a work plan for the next year based on the feedback from this event. As well as the highlighted tasks above the Champions Board will develop a Communications Strategy on how awareness of the Care Experienced community can be promoted.

Recommendation 7 – Consultation Events. As the work progresses participants felt that there should be more events like this one. The Champions Board should explore the frequency of these events and potential topics.

Appendix 1 - Suggestions to Champions Board

- Siblings contact
- Support for care experienced parents
- Make sure YPs know they are important
- Create a glossary of terms you'd like practitioners to use
- Make a YP aware of who you are
- Promotion of group plus if they could deliver sessions around stigma and experience of care experienced
- Create a new language
- Consultation involve people in ** work (champions board table)
- Share your experience and tell us what's good, what's bad and what ideas you have.
- I would like YP to get the opportunity to develop language used
- Reform care system
- Behaviour and attitude of society
- Publicity and awareness
- Making young people more aware (Contacting schools and holding events)
- Make young people more aware of the support available
- The staff need more training
- The policy that incre***s stigma
- Staff
- Work with cooperate parents to jointly challenge perceptions, to improve understanding, input/ briefing sessions
- Sharing stories/ experiences with organisations (our staff development)
- Tell us what language they want to be used
- Gaff instead of unit
- Speak to ALL young people and not just one group
- Go into schools and explain what care is
- Choice
- Preferred communication methods for young people
- Get views on how information should be communicated eg, what social media platforms
- Impact of social media on young people.