

Children's Services Planning in Northern Ireland: Developing a Planning Model to Address Rights and Needs

Eamon McTernan & Ann Godfrey

This article reflects on a number of key concepts and planning tools that have been developed or adapted through the inter-agency planning of services for children and young people in Northern Ireland (Children's Services Planning). These conceptual models have been developed between 1999 and 2005 and illustrate the key contribution of Children's Services Planning to two significant shifts in how the planning task has been understood. These refer to, firstly, the movement from service orientation to needs orientation, and secondly, the progression from needs to rights within service planning.

Children's Services Planning in Northern Ireland is now based on the United Nations Convention on the Rights of the Child and the Whole Child Model, which demonstrates the understanding that there is no such thing as a uni-dimensional child who only requires services from one agency. The Family Support model has been in use for some years within the process, and the joint outcomes framework, to be designed to enable agencies to address rights and needs has also been adopted across all four Children and Young People's Committees. In terms of outcomes, an overarching Strategy for Children and Young People will develop an outcomes framework within Northern Ireland, which is likely to build upon that of Every Child Matters, as well as children's rights. Children's Services Planning has also demonstrated that the approach to planning of universal services must be consistent with the planning of services for children with additional needs. There needs to be a strong linkage between the planning and delivery of universal and targeted services.

It is a contention of the article that concepts such as those described are required for multi-sectoral planning, and that a whole system planning approach is required to address the rights and needs of children and young people.

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Introduction

This article reflects on a number of key concepts and planning tools that have been developed or adapted through the inter-agency planning of services for children and young people in Northern Ireland (Children's Services Planning). These conceptual models have been developed between 1999 and 2005 and illustrate the key contribution of Children's Services Planning to two significant shifts in how the planning task has been understood. These refer to, firstly, the movement from service orientation to needs orientation, and secondly, the progression from needs to rights within service planning. The process has been punctuated by a series of transitions, as follows:

- Single agency planning to integrated planning.
- Understanding the relevance of children's rights to the planning of services.
- Building a model of childhood that supports integrated planning and the inclusion of rights.
- Adopting outcomes as a framework for joint planning to address rights and needs.
- Building a model that can help us describe the kinds of family support services required to address rights and needs.
- Seeking a whole system response to the rights and needs of children.

It is a contention of the article that such models are essential for multi-sectoral planning, and that a whole system planning approach is necessary to address the rights and needs of children and young people.

Single Agency Planning to Integrated Planning

The past decade has seen an important conceptual shift in our understanding of the planning task. This can be summarised as a displacement of the service orientation (how do we get the child to the services) in favour of a needs orientation (how do we design the all the services around the child). The question of how to achieve child-centred coordination and delivery of services is not recent, and can be traced back some 30 years. The early emphasis on Child Protection, which defined integration in terms of procedures and information sharing (starting from the enquiry into the death of Maria Colwell in 1973), has since given way to ideas and proposals about integrated service planning to meet all children's needs. This has been reflected in key legislation—the Children Act 1989 (in particular Part III) and the Children (Northern Ireland) Order 1995 (in particular Part IV)—which set in place requirements to plan for all children in need.

In 1993, the Audit Commission (for England and Wales) carried out a major review of the implementation of Part III of the Children Act 1989 (Audit Commission, 1994). The findings highlighted criticisms of the lack of coordination of services and led directly to mandatory Children's Services Plans in 1995 in England and Wales, which were to provide strategic, inter-agency formulations on needs and priorities, to be drawn up by local authorities.

Children's Services Planning was introduced legislatively in Northern Ireland in 1998. Guidance issued by an Inter-departmental Group (Department of Health and Social Services, Department of Education for Northern Ireland and Northern Ireland Office, which is responsible for youth justice services in Northern Ireland; DHSS, DENI, & NIO, 1998) established four Children's and Young Peoples Committees. These were to be hosted by Health and Social Services Boards (which plan and commission health and social care services for their areas). The Boards were tasked to oversee a planning process, based on inter-agency and inter-sectoral needs assessment, to support children in need and vulnerable children. The difference in lead agency in Northern Ireland was due to the fact that, unlike in the rest of the United Kingdom where many services are delivered through a local government structure of local authorities, many services in Northern Ireland, including health, social care, education and housing, are delivered through agencies that are overseen by appointed Boards.

An inspection of English Children's Services Planning processes carried out in 1998 (Social Services Inspectorate, 1999) found that the Children's Services Planning was not an effective driver of real change in outcomes for vulnerable children. One reason was that many Plans were not based on an inclusive inter-agency framework, and instead focused very much on children's social services. The critical lesson for the Northern Irish Children's Services Planning process was that it was essential that Children and Young People's Committees have an explicit multi-agency base from the start of the process, rather than taking an incremental approach to the inclusion of a range of agencies.

Children's Services Planning in England as formulated at that time, has now been replaced by a planning process driven by multi-agency Children and Young People's Strategic Partnerships, so that both England and Northern Ireland have now developed such multi-agency processes, although through different routes.

Understanding the Relevance of Children's Rights to the Planning of Services

The assumptions underpinning the UK approach to social policy for children and young people are changing. There is increasing emphasis, through the United Nations Convention on the Rights of the Child (UNCRC) (United Nations, 1989) and human rights legislation, on rights-based approaches.

The UNCRC is an international agreement on the rights of children. It sets out the basic rights to which all children are entitled in all areas of their lives. In 1991 the UK Government ratified the Convention, thereby committing itself to promotion of children's rights, through the provision of services as well as other means.

There are four general principles of the UNCRC:

- non-discrimination;
- the best interests of the child;
- respect for the child's view and the right to participate and for their view to be given due weight; and
- the child's right to life, survival and development.

Taken together, these principles form the corner-stones of the Convention, which provides a set of minimum standards for children's civil, political, economic and cultural rights. These standards can be broken down into three main categories:

- *Provision*—rights to minimum standards of health, education, social security, physical care, family life, play, recreation, culture and leisure and adequate standard of living.
- *Protection*—rights of children to be safe from all forms of neglect and abuse, exploitation and the effects of conflict.
- *Participation*—rights of children to a name and identity, to be consulted and taken account of, to have information, freedom of speech and opinion and to challenge decisions taken on their behalf.

The UNCRC is the most complete international statement of children's rights to date. The rights in the Convention are seen as necessary for the full and harmonious development of the child's personality and are inherent to the dignity of the child. It also recognises children's developmental needs—physical, emotional, intellectual, social—and also recognises the additional needs of some children.

When Children's Services Planning began in Northern Ireland in 1998, there was an acknowledgement that progress should be regularly tested against the Articles of the UNCRC (Southern Area Childrens and Young People's Committee, 1999; Western Area Childrens and Young People's Committee, 1999). However, much development was required to begin to enable effective linkages between the promotion of rights and the planning of services.

In Northern Ireland, the context of the 30-year conflict shaped the evolution of Children's Services Planning in two ways.

Firstly, the overriding priority of politicians had for many years been resolution of the constitutional and security issues, largely eclipsing attention to children's policy by the Government. However, the establishment of the Northern Ireland Assembly through the Good Friday or Belfast Agreement (Northern Ireland Office, 1998)—an agreement between the governments of the United Kingdom and Ireland on the future of Northern Ireland—created an opportunity for all parties to agree on two measures to establish the agenda for children and young people, which were both based on the UNCRC. These were the establishment of a Northern Ireland Commissioner for Children and Young People and the commitment to a 10-year rights-based and needs-based strategy for children.

Secondly, there has been a particularly active and vibrant community and voluntary sector in Northern Ireland (Northern Ireland Council for Community and Voluntary Action, 2002), including a number of organisations that have taken up the issue of human rights during the period of conflict and violence. The Northern Ireland Children's Rights Alliance, a forum of statutory as well as voluntary agencies committed to promoting the UNCRC, set up the Children's Rights Development Unit in 1995, to further promote children's rights (Titterton, 1995). The Children's Law Centre, which opened in 1997 and which built on this process,

is founded on the principles of the UNCRC. Voluntary sector agencies such as the Children's Law Centre and Save the Children generated an enhanced awareness of the rights agenda and brought this consciousness into the integrated planning process.

The formation of the Northern Ireland Assembly and the Northern Ireland Executive (a devolved government for Northern Ireland within the United Kingdom) and the attention paid to rights within this process created a new type of platform for children's policy. This coincided with the United Nations Committee on the Rights of the Child's (2002) criticism of the UK Government's failure to meet some of its commitments under the Convention. The "Getting it Right" (Geraghty, 1999) report on the state of children's rights in Northern Ireland at the end of the twentieth century described a number of the shortcomings and illustrated the distance that needed to be travelled. At the same time came the domestic legislative expression of the European Convention on Human Rights, in the Human Rights Act 1998. More recently, the Northern Ireland Commissioner for Children and Young People and Queens University Belfast carried out an audit of the state of children's rights in Northern Ireland in 2004 (Kilkelly *et al.*, 2004). So, the emergence of the rights agenda in Northern Ireland, together with the foundations for integration that had been established through the Children's Services Planning, provided an opportunity to explore how the rights of children could be promoted through social policy.

Building a Model of Childhood that Supports Integrated Planning and the Incorporation of Rights into Planning

The "Whole Child" Concept

The early development of integrated planning in Northern Ireland exposed considerable variations of approach across all agencies to their work for children (CIPVA, McTernan & Godfrey, 2004). It became clear that benefits would accrue to the process if it could be anchored and stabilised around a shared and robust understanding or model of childhood.

This model, which we will refer to as the "Whole Child" model, was built upon:

- (a) An understanding of the important dimensions of a child's development.
- (b) An understanding of the child as an active participant in his/her own world.

Dimensions of Childhood Development

The Framework for the Assessment of Children in Need and their Families (Department of Health, Department for Education and Employment, Home Office, 2000) had already been developed by the UK Government as the core tool for carrying out assessments on the well-being of children and young people. The approach maintains that (Parker, Ward, Jackson, Aldgate, & Wedge, 1991):

- All children need to progress across a spectrum of development if they are to achieve satisfactory well-being in adulthood.
- They will make satisfactory progress only if their development needs are met.
- Services should not only take account of children's developmental progress, but also provide opportunities for children to be offered experiences that are relevant to success.

While this approach offered a research-based tool for examining need—which could be developed to capture the aggregated needs of populations of children—the early piloting of user participation projects led in the direction of a model that could place greater emphasis on the interaction between children and the services that were available to them (McTernan & Godfrey, 2004).

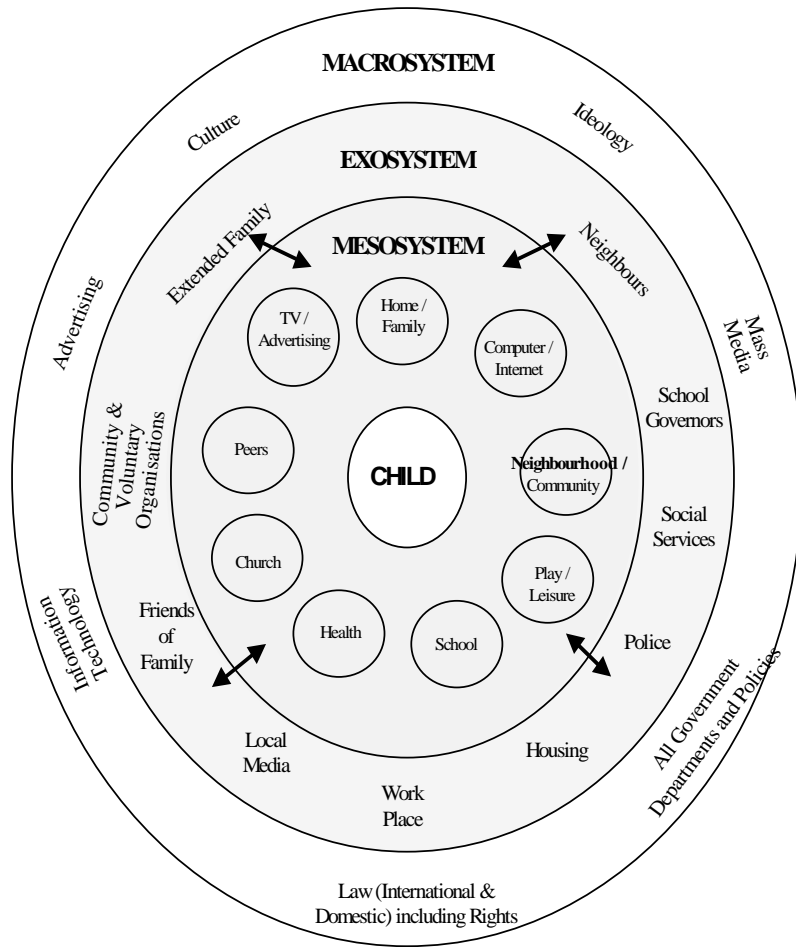
The Child as an Active Participant—Social Ecological Model

The Children's Services Planning process therefore sought to develop a model that could enable planners to explore the inter-relationship between each child and the world around him or her. The term "world" refers not only to immediate surroundings, but also to the way in which the child is affected by, and acts on, parts of bigger systems. While the UNCRC provided a theoretical framework for viewing the child as an active participant, agencies needed a commonly understood model that could help them "map" out the planning of services to relate to the lives of children and to measure gaps and progress towards the realisation of rights. The model described here can be used to support the promotion of rights throughout the child's whole environment, and through the child's lifecycle and developmental stages.

This work is based on an adaptation of Bronfenbrenner's ecological model of development. The description of component parts of the model are attributed to Bronfenbrenner: we have merely adapted the model to reflect children's lives in Northern Ireland (Figure 1).

This model has, at the centre, the child, including the dimensions of his/her development, as described above. Nearest the child are a range of microsystems, which for most children include family, school, church, play/leisure, and so forth, which include the relationships that the child forms within these settings. The child's development is critically affected by these relationships, be they positive or negative. They also consist of other people, including the child's immediate family, the other children in the neighbourhood, the child's teacher, and so on. The microsystems are not constant, but change as the child grows.

The mesosystem refers to the system of relationships within the child's microsystems. This might include the parents' relationship with the child's teacher and the relationship between the child's siblings and neighbourhood friends. The mesosystem is that world of meaning, experience, of close relationships, of attachment or rejection, of possibilities, of play, of learning, of fascination, of adventure, of affirmation or condemnation—that existential space that is unique for



- Microsystems
The system closest to the child.
- Mesosystem
The inter-relationships between elements of the child's Microsystems.
- Exosystem
Social systems that can affect children but in which they do not participate directly.
- Macrosystem
The culture and society in which the child lives.

Figure 1 Adapted from Bronfenbrenner's Ecological Model of the Environment. Text and Model Adapted from Kopp and Krakow (1982, figure 12.1).

every child. This precious and sensitive place is marked, for the majority of children, by the trusted and familiar routines and boundaries of family, neighbourhood, school, friends, church, and so on. In general, the more interconnected these systems

are, the more the child's development is likely to be supported in a clear and consistent way.

The exosystem refers to social settings that can affect the child but in which the child does not participate directly. Some examples are local services such as health, housing, social services, community and voluntary groups, and so on. It also includes the local effects of law and policy (e.g. teachers' salaries, budgets for new textbooks and equipment) and the parents' places of employment, which may or may not establish policies regarding paid family leave and on-site daycare facilities.

Finally, the model contains the macrosystem, which involves the society in which the child lives. The macrosystem affects the child through its beliefs, attitudes, and traditions. The macrosystem within Northern Ireland itself has been unstable because of political uncertainty, and this general instability has impacted on children (Fay, Morrissey, Smyth, & Wong, 2001; Smyth, Fay, Brough, & Hamilton, 2004). Children living in Northern Ireland will be influenced by community values that are located in the history of conflict. Some effects of this will be manifested in sectarian attitudes at a very early age (Connolly, Smith, & Kelly, 2002). In general, the effect on children and young people's lives of cultural and ideological constructs located in the macrosystem are considerable, although frequently unacknowledged. The idea of the macrosystem is consistent with a social model of the understanding of childhood—in which childhood is not a static phenomenon based only on age or developmental stages, but is also influenced by societal views of what role children and young people should and do play (Denzin, 1997; Hoyles, 1979; Stainton Rogers, 1992).

The Social Ecological Model and the UNCRC

Consistency between the UNCRC and the Whole Child Model is evident, in that the Convention sets out rights relating to all aspects of the child's life, which the model can be used to map. The UNCRC also recognises children's individual capacity, in that children are seen as active participants in their own lives and have a right to *participate*, and that their views must be given due weight in decisions that affect them. The model can be used to map the areas of the child's life in which age-appropriate methods for consultation and participation could release children's creativity and views, thus promoting rights to participation, and also, at the same time, informing the planning of services for children.

Best practice in child protection requires that children are protected in all settings, as does the right to *protection*. This model both maps these settings, and, through the concept of the mesosystem, underlines the well-rehearsed need for cross-sectoral and cross-agency collaboration to protect children. This message that child protection is everyone's business has been emphasised in the Laming report (Laming, 2003) and the Green Paper "Every Child Matters" (Chief Secretary to the Treasury, 2003).

In terms of rights to specific *provision*, such as the right to education, the model also maps the provision of services onto other aspects of the child's life, and points up how those services should link positively with all aspects of the child's life. However, for

example, the exclusion of disabled children from education that promotes their full potential is well documented (Byrne & Caul, 2001; Geraghty, 1999; Monteith, McLaughlin, Milner, & Hamilton, 2002). Planning for an individual child so that this right can be promoted must be based on an assessment process—such as those based on the *Assessing Children in Need and Their Families; Practice Guidance* (Department of Health, 2000) or *Person Centred Planning* (Sanderson, Kennedy, Ritchie, & Goodwin, 1997)—which takes into account all aspects of the child’s life. The model provides a very useful tool for those planning services for populations of children.

Adopting Outcomes as a Framework for Joint Planning to Address Rights and Needs

International Developments in Outcomes Frameworks

The early part of this century has seen increasing focus, both internationally and within the United Kingdom, on outcomes and their measurement as a way of ensuring that children’s needs are met. This has found expression in the UK Government Green Paper “Every Child Matters” (Chief Secretary to the Treasury, 2003) and in the Children Act 2004. Five high-level outcomes now direct policy and planning for children in England:

- Being healthy.
- Staying safe.
- Enjoying and achieving.
- Making a positive contribution.
- Economic well-being.

Internationally, the US state of Vermont has played a leading role in the use of outcome measures (Hogan & Murphey, 2002)—with particular success in enabling communities and state agencies to work together to achieve better outcomes. The approach is based on agreement, across the planning system and including communities, to work collectively towards the achievement of progress towards a number of simply expressed high-level outcome statements.

In the Vermont work, “common purpose” (Hogan & Murphey, 2002) is captured in high-level outcome statements; for example, “All pregnant women and infants thrive” or “All children are ready for school”. Progress towards the common outcome is measured by a range of core “feeder” indicators, drawn from each contributing agency. Each key agency tracks its unique contribution—not as an end in itself, but towards the common outcomes that are publicly recognised and owned. Agencies, however, need to cooperate in order to maximise that contribution. Using concepts such as the accumulative and interactive nature of indicators (e.g. infant mortality is linked to smoking in pregnancy, which can be linked to education and school attendance levels, which are also linked to teenage pregnancy and child protection, etc), and the inherent interconnectedness of systems, the Vermont work has demonstrated the power of agreed common purpose to direct coordination, facilitate

business planning, improve communication and critically to promote investment in prevention.

In the Northern Ireland Children's Services Planning process, there has been difficulty in shifting the emphasis from single agency-specific objectives towards jointly agreed ones. So the Vermont approach was attractive in the Northern Ireland context because:

- (a) it had a track record of effectiveness in promoting inter-agency and inter-sectoral working in order to improve the lives of children and young people;
- (b) its language and processes were well grounded in work in local communities, so that both citizens and senior agency managers could recognise common purpose (e.g. one outcome such as "All Children are ready for School"), and could work together towards the same end;
- (c) Northern Ireland already had in place, as a result of the statutory basis of Children's Services Planning, a range of the necessary inter-agency and inter-sectoral partnerships; and
- (d) work had already been done in Northern Ireland, through Children's Services Planning, to develop the necessary inter-agency database from which to develop indicators.

Developing an Outcomes Framework in Northern Ireland

However, neither the work in Vermont nor "Every Child Matters" explicitly links outcomes with rights. In the course of the consultation process leading to the production of the 2005–2008 Children's Services Plans, the four Children's and Young Peoples Committees developed an approach to outcome measurement that drew on elements from "Every Child Matters", from the Vermont work (in particular, the emphasis on outcomes linked to developmental stages, on community participation, and on prevention), and from the articles of the UNCRC. The Children and Young People's Committees developed a set of outcome statements as follows:

1. All children and young people have a stable upbringing.
2. All children and young people live in stable supported communities.
3. All children and young people live free from poverty.
4. All pregnant women, new parents and babies thrive.
5. All children are ready for learning and school.
6. All children and young people enjoy and succeed during school years.
7. All children and young people are involved in decisions that effect them.
8. All children and young people make a positive contribution that is valued.
9. All children and young people make a safe transition to adulthood.

These outcome statements were not intended as statistical targets; they were intended as guides—statements of common intent—which are each informed by a series of

core ‘feeder’ indicators measuring the inputs of different parts of the system. The model is described diagrammatically in Figure 2.

Measurement of Outcomes through Child Rights Indicators

It is contended that it is in the choice of indicators that the models that described can come together. The “Whole Child” model sets out the environments in which children and young people live, and it is within these environments that positive or negative outcomes are achieved. Indicators need to be framed within a wider commitment to integrated planning, and must be child rights indicators rather than child well-being indicators, if the outcomes framework is to measure progress towards rights.

Recent work developed by the Children’s Law Centre suggests a distinction between child well-being indicators and child rights indicators. Analysis of the two types of indicators has been described by Boyce (Children’s Law Centre and Save the Children, Boyce, 2005) as follows:

- Both child well-being and child rights indicators are intended to have the ability to measure over time so as to examine progressive realisation.
- Child well-being indicators may use disaggregated information: use of disaggregated information, however, is a key characteristic of child rights indicators.
- Obtaining the views of children and young people is not a necessary requirement of child well-being indicators—but it is a vital component of child well-being indicators, in compliance with Article 12 of the UNCRC.
- Child well-being indicators will not focus on the extent to which Government is fulfilling its duties as set out in the UNCRC—this is the underlying purpose of child rights indicators.

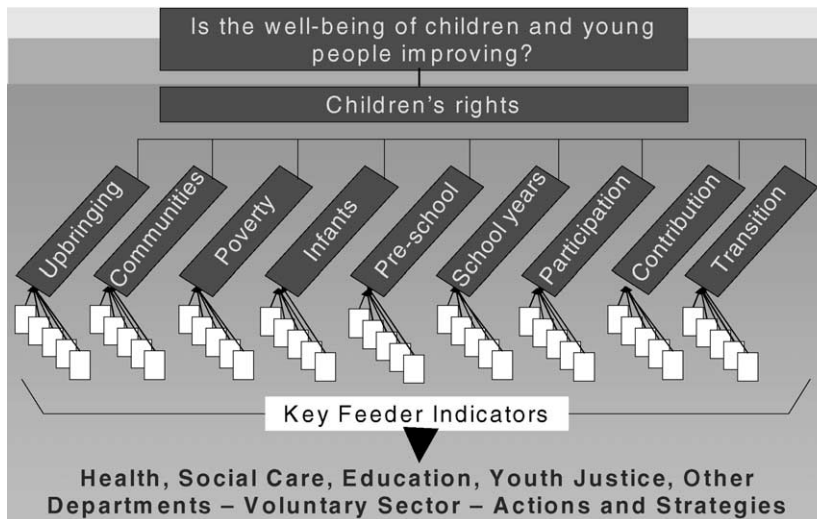


Figure 2 Outcomes Framework.

Boyce argues for two main objectives in the selection of indicators:

1. To maintain systematic information systems on the national conditions of children's lives, in order to plan, implement and evaluate interventions for their well-being and enjoyment of their rights.
2. To fulfil the Governments obligation as a state party to UNCRC by showing the progressive achievement of children's rights.

In terms of the conditions of children's lives, the Whole Child Model also provides guidance on the selection of indicators, and linkages between them. In terms of linkage, the Vermont work demonstrates the accumulative and interactive nature of well-chosen indicators; for instance, infant mortality is linked to smoking in pregnancy, which can be linked to education and school attendance levels, and so on. As previously stated, the Whole Child Model is based on the same socio-ecological body of theory as the Assessment Framework for Children in Need and their families (*ibid.*), and the latter can provide additional guidance on indicators.

However, a further consideration in the choice of indicators is that, at present, information collection systems available in Northern Ireland rely on negative measurement (e.g. Children on the Child Protection Register, referrals to Child and Adolescent Mental Health Services, school non-attendance, mothers smoking in pregnancy, etc.). In developing a comprehensive set of indicators we are working on the inclusion of the measurement of assets of children, young people, parents and communities such as those developed by the SEARCH Institute (Benson & Leffert, 2001)—rather than the measurement of deficits.

We therefore contend that the use of the UNCRC, the Whole Child Model and an emphasis on assets will, together, provide a set of child rights indicators that address children's whole lives, and that provide a way of measuring Government action towards its obligations under the UNCRC.

Currently, only limited information is available in Northern Ireland for the measurement of such indicators. Critically, much information currently available does not measure children's own views of their enjoyment of rights. Also, most statistical information is not disaggregated into populations of children according to racial origin, disability, and so on, so differential experience cannot be measured at present. However, this theoretical framework provides a map to form the design of information collection systems in the future.

Building a Model of Family Support Services to Address Rights and Needs

Support to Families to Address Rights and Needs

Children's Services Planning in Northern Ireland has actively promoted and developed the theme that support of families is integral to the support of children and to the realisation of the needs and rights of children. The Children Act 1989 and the Children (Northern Ireland) Order 1995 set out to "provide the necessary legal tools to parents, relatives, foster carers, child minders, child care professionals and

judges, so as to further the best interests in children in their care” p. 1 (Allen, 1999). Through this legislation, the balance between the state and families, in relation to children, shifted in two ways. In terms of rights, the position of parents was enhanced by their strengthened ability to challenge the actions of the state in legal processes. The right of a child to family life was thus given greater precedence than in previous legislation, and this has been further strengthened by the Human Rights Act 1998 (ibid.). In terms of needs, the Children Order introduced, through the concept of Children in Need, a major shift regarding the onus on the State to support families to promote the positive health and development of children. This replaced the previously limited role of the State to intervene as a last resort, related to protection, with positive duties to support families in their role of promoting the holistic development of their children.

The linkage between the respective roles of family and state is also addressed within the UNCRC. The importance of family in children’s lives is emphasised throughout the Convention. It is raised in the preamble, which notes that “the family, as the fundamental group of society and the natural environment for the growth and wellbeing of all its members and particularly children, should be afforded the necessary protection and assistance so that it can fully assume its responsibilities . . . ” and also that “the child, for the full and harmonious development of his or her personality, should grow up in a family environment, an atmosphere of happiness, love and understanding.”

A Planning Tool for Family Support

Within the development of Children’s Services Planning in Northern Ireland, it became clear that a planning tool was required to map and analyse both need across population groups and the available and required family support services to meet such need. When we use the term family support, we mean “support to parents to provide the quality of care that enables children to reach their full potential . . . (and) where parents are unable, either on a temporary or permanent basis, to do this, complementary support or alternative care” p. 33 (Southern Health and Social Services Board, 2005). This planning tool, which will be described below, was developed before it was clear that family support services should be addressing rights as well as needs. However, it is a contention of this paper that a robust and effective strategy for family support is as essential in promoting children’s rights as it is for addressing needs. Furthermore, the Whole Child Model provides guidance on the arenas within children’s lives within which support may be needed, and, if this can be combined with the planning tool for family support, this should assist the state in maximising its role in supporting families to support children.

This approach to planning seeks to ensure that each child’s microsystem (whatever their needs) can be supported by supports and services that build upon assets available to the child, his/her family, and his/her community. Positive emotional and psychological development of children is based on active and creative exploration of a world that gradually expands from first steps in the family, to early years in the

neighbourhood, to school, and beyond. Assets are built up and consolidated at each developmental stage, but the microsystems of children are highly sensitive to both positive and negative influences. The impact of adverse circumstances on children can be mediated and limited by good experiences of family/carers and other areas of their lives, thus building on their resilience and protecting them from the worst effects of external circumstances (Furstenburg, Cook, Eccles, & Sameroff, 1999; Gilligan, 2003).

It is on this basis that family support has to be central to coherent planning to address the rights and needs of children and young people, by building on strengths and assets and by mitigating difficulties. Services and supports need to be carefully designed so that they engage with the actual experience of children and young people, and are supportive of all positive aspects of their lives. The more additional services a child requires, the greater the challenge to design, coordinate and deliver in ways that enhance the child's experience.

What is therefore required is a planning model or tool that provides a framework for enhancing the assets of children, young people and families, at different levels of need. Some families, because of a variety of circumstances, require more support than others. It is also critical to ensure that, where possible, supports and services are delivered at the earliest point where they can enhance the experience and outcomes for those who use them—rather than at a late stage when the needs of children and young people can only be addressed by specialist and/or interventionist services, or when the family has broken up. This approach reflects both the underlying philosophy and the promise of the Children Act and Children Order to prevent the impairment of children's health and development and the need to promote the realisation of their potential as enshrined in the UNCRC.

The planning model is based on the work of Pauline Hardiker and colleagues (Hardiker, Exton, & Barker, 1991). The Hardiker model is recognised throughout the United Kingdom and internationally as a robust and flexible tool for planning services to meet children's needs. It is used to capture the services/supports provided by any sector (e.g. by families, community, voluntary and statutory sector agencies, both locally and regionally).

This model, which has become known as the Northern Ireland Family Support Model, has been applied to the population of children and young people in Northern Ireland as shown in Figures 3 and 4.

The UNCRC sets out rights and an associated set of standards, which should underpin the planning of services. The Family Support model helps us focus on those standards that should be applied at each level of need. It therefore facilitates the practical implementation of rights through services.

The four-tier approach demonstrates what needs to be done at each level and shows the interdependency between the levels.

For example, good, effective services at Level 1, for primary health or leisure/education, would resonate best with the rhythm of the child's life in his/her family, neighbourhood, belief systems, and so on. Good primary school teachers are uniquely placed to understand and respond to each child's needs and potential. But some children need additional services and specialisms. Level 2 services are essential,

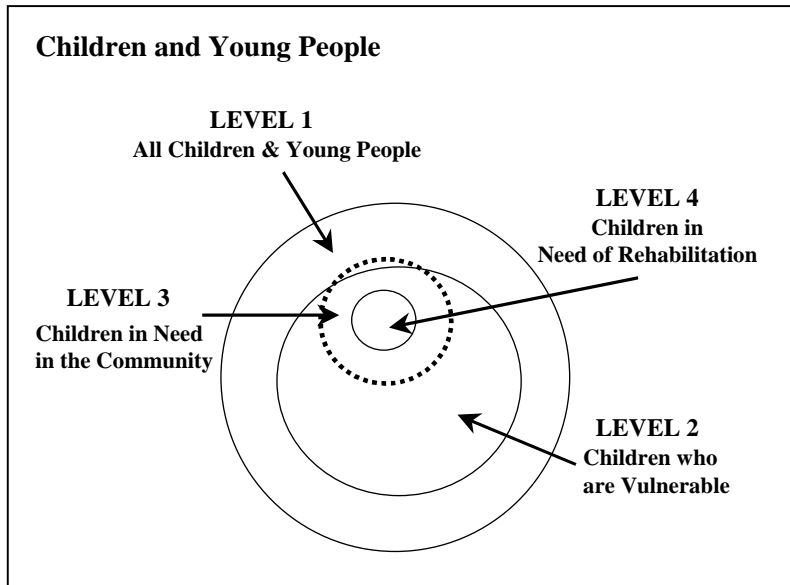


Figure 3 Need for Family Support.

preventative and/or diversionary. These are services that children and families can access easily and locally. They should enable most children to overcome short-term difficulties or enable other children (e.g. disabled children and young people) to maximise their independence. Examples of such services would be parenting support,

Level 1 represents services provided to the whole population to provide mainstream health care, education etc. It also includes services based on universal rights for the whole population, and services designed to improve the situation of disadvantaged people through community development.

Level 2 represents support for children who are vulnerable, through an assessment of need. Services are targeted to individual children, with parental support, and are provided in statutory and voluntary settings. It incorporates services that must address rights such as Article 23, UNCRC, on the right of disabled children to special care, education and training.

Level 3 represents support to families, or individual children and young people, where there are chronic or serious problems. It is provided through a complex mix of services, which need to work together well in order to provide the best support. These services must address UNCRC special measures of protection such as Article 39, on the duty to provide for recovery for victims of neglect, exploitation or abuse.

Level 4 represents support to families, or individual children and young people, where the family has broken down temporarily or permanently, and the child or young person may be looked after by social services, in youth custody or prison or as an in-patient, for instance due to disability or mental health problems. These services must address rights such as article 40, UNCRC, which sets out the rights of children accused of offences.

Figure 4 Levels of Family Support.

behavioural support in schools, and speech therapy. Such services will work best when children and families can relate to them as non-intrusive and non-stigmatising.

Level 3 services are required to be designed to meet the needs of children where there are complex difficulties, often characterised by state intervention, although not exclusively. Examples would include children on the Child Protection register, children coming before courts, those with complex disability, those with significant emotional or behavioural difficulties, and children with serious long-term physical illness. A number of services typically need to be brought together at Level 3, many of which are driven by statutory and procedural emphasis. The challenge of designing and delivering and coordinating such services is to ensure that they can engage creatively and positively with other elements the child's immediate surroundings—in other words, that they join the child's world. Children and young people at Level 4 have typically fallen through community/family support systems, or are at imminent risk of so doing. Substitutes to family care such as residential care, foster care, hospital, and youth custody environments are included here. In many instances the task will be to enable the child to reconstruct their world to help them grow, build up their self-esteem, and learn to protect themselves in the future. The task also includes the aim of supporting the children and young people to settle either in their previous or a new community environment.

It is important to stress the degree to which the Hardiker model emphasises the interdependence between the four levels. Strong and effective services for all children at Level 1 will alleviate the need for Level 2 services for many children. A good and comprehensive range of preventative services at Level 2 will address difficulties early enough to affect the numbers of children and young people who require services at Level 3. Focused and intensive services at Level 3, which can draw on the strengths of family and neighbourhoods, will impact on the numbers of children who are at risk of having to leave home.

Building a Whole System Response to Planning for Children

Usage of Models to Date by Children's Services Planning

Children's Services Planning started with the understanding that there is no such thing as a uni-dimensional child who only requires services from one agency. The development of the Whole Child Model has been important in that it has been adopted as a joint vision of childhood across all representative agencies on the four Northern Ireland Children and Young People's Committees (Eastern Health and Social Services Board, 2005; Northern Health and Social Services Board, 2005; Southern Health and Social Services Board, 2005; Western Health and Social Services Board, 2005). The Family Support model has been in use for some years within the process, and the joint outcomes framework, to be designed to enable agencies to address rights and needs, has also been adopted across all four Children and Young People's Committees (*ibid.*). In terms of outcomes, the Government Department that is developing a Northern Ireland overarching Strategy for Children and Young

People—the Office of the First Minister and Deputy First Minister, Northern Ireland Administration (2004)—is also in the process of developing an outcomes framework, which is likely to be built upon the “Every Child Matters” outcomes framework referred to earlier, as well as children’s rights.

Discussion and debate around these models has led to a position within Children’s Services Planning that a *holistic* understanding of children and their needs requires a “*whole system*” response. By the term “whole system” is meant a *multi-dimensional planning framework* within which agencies and services offer their responses to the needs of children. This planning framework needs to incorporate:

- The vision of the child in their world built on the social–ecological model.
- Rights-led and needs-led planning of family support services.
- Creative solutions for supporting parents/carers, family, neighbourhood–community and state in order to create those conditions within which an active child can flourish.
- The concept of the child as an active citizen, who continually impacts on the world around him/her, which is fundamental to UNCRC and the Human Rights Act 1998, and underlines the argument for increased involvement and consultation.
- A focus on outcomes, based on a “whole child” understanding, which can be best achieved through maximising the contributions of family, neighbourhood/community and state.

It is our view that such a planning framework needs to be supported by a structure that addresses the following questions:

- How do services that provide for large populations of children maintain a “whole child” focus?
- How can all services (state and community) jointly accept “whole child” responsibility and provide for the rights and needs of children within their aims and objectives?
- How can planning ensure that as many children as possible get what they need through integrated universal services?
- How can planning ensure that children with additional needs have those needs met?
- How can planning ensure that the system is outcome focused; that is, that it works towards demonstrable, high-level outcomes that are both based on children’s rights and that describe health and well-being of the population of children and young people, and can measure the degree to which these outcomes are achieved?

There has been considerable debate about the relationship between services provided for all children and those required by children with additional needs. This parallels the UNCRC in its setting out of general rights for all children, and its specific Articles to ensure the access of some children to these general rights. An example would be the protection of the rights of disabled children to education.

It is our view that there needs to be strong linkage between the planning and delivery of universal service and targeted services. The advantage of an emphasis on universal services is that they can be delivered without stigmatising any children. If the principle of *integrated* universal services can be established, this will also establish the planning context for children who need additional services. In other words, the approach to planning of universal services must be consistent with the planning of services for children with additional needs. Also, an integrated approach to the planning of early intervention and preventative services will ensure that community resources are maximised. In other words, early support and prevention can be delivered by means that are most compatible with the child's existing lifestyle. Much work in the fields of disability, youth justice, services for Looked After Children, mental health services for children and young people—Children's Services Plans 2005–2008 (Southern Health and Social Services Board, 2005; Western Health and Social Services Board, 2005)—has established the necessity of integrated planning to be relevant to children with additional needs.

Recommendations for a Whole System Response to Planning for Children

At present, key services are delivered through agencies that relate upwards to different departments of government, which have very separate roles and functions. The high-profile issues facing children in Northern Ireland include rates of teenage pregnancy, drug and alcohol abuse, suicide rates, needs of refugees and asylum seekers, young people disaffected from school, needs of ethnic minority children, integration of children with disability, homelessness, sectarianism, and mental ill health (Children's Services Plans 2005–2008) (Southern Health and Social Services Board, 2005; Western Health and Social Services Board, 2005). These issues illustrate that needs of the children and young people are multi-dimensional, and by their very essence require multi-dimensional responses—which cannot be addressed by any single agency, department or sector.

Through our experience of Children's Services Planning in Northern Ireland, which has been carrying out multi-agency strategic planning *at local level* for children with additional needs over the past six years, we have learned the following:

- It is possible to develop integrated planning frameworks, based on rights and needs, which include all agencies, all sectors, parents and young people, as well as technical data collected and shared across agency and sector.
- The importance of the *process* of agencies, sectors, children and young people, and parents and carers learning to work in partnership cannot be overemphasised.
- The effectiveness of the multi-agency planning at local level is severely limited by the absence of similar approaches at the departmental level.
- For planning to be successful for children with additional needs, there must be integrated planning for all children, at all levels.

As stated earlier, the UK Government has passed the Children Act 2004, following the Green Paper “Every Child Matters”, which has set in place the strategic direction for the integration of services for children in England. Key themes, which are consistent with the Northern Ireland experience of Children’s Services Planning, include;

- Agreed high-level outcomes for children and young people based on needs and an understanding of the “Whole Child”.
- Services to support families to help their children achieve the outcomes.
- Linkage between universal and targeted services.
- The need for an integrated planning process to achieve the above.

In terms of an integrated planning process, there is a significant debate at the time of writing about the shape of public services in Northern Ireland, led by the Review of Public Administration, Northern Ireland (2005). At the same time, the over-arching Strategy for Children and Young People is being developed by the Office of the First Minister and Deputy First Minister, Northern Ireland Administration (2004), as mentioned earlier. The confluence of these two developments has provided an important opportunity.

It is our view that the potential exists for the Strategy for Children and Young People to set in place a set of outcomes for children and young people based on rights and needs, requirements on all departments of Government to work towards these outcomes, and a performance management framework that measures departments’ contribution to their delivery.

Similarly, the Review of Public Administration provides a further opportunity to strengthen arrangements at government and local levels to enable joint planning and delivery of services for children and young people. The Review:

- (a) has introduced the concept of Community Planning, which, in respect of planning for children and young people, could build on the structures and processes at local level already based on partnership working and understanding of children’s rights and needs established through Children’s Services Planning;
- (b) could, similar to the model in place in England, introduce a stronger legal incentive on all agencies to plan and commission services jointly—this would depend on the introduction of a statutory requirement on all participating agencies to demonstrate that they have planned together and jointly commissioned (put in place and paid for) the services needed to achieve jointly agreed outcomes for children; and
- (c) has the opportunity to put in place Children and Young People’s Strategic Partnerships, which would oversee the joint planning and commissioning that is required for all children, not just vulnerable children as at present within Children’s Services Planning. A key lesson from the Vermont work is that coordinated planning based on common outcome statements and underpinned by effective legislation results in more emphasis on prevention. It is our view that this could work towards the same aim as recent changes in England for the coordination of all services for all children.

This article has reflected on concepts used within Children's Services Planning in Northern Ireland. The work carried out in Children's Services Planning is far from complete. Much of it has taken place at the frontier of policy development—because Children's Services Planning, established at the local level but poorly developed at the regional level between departments of Government, has been located outside established systems and practices. We contend that the models outlined in this article offer ideas and solutions that could enable integrated, child-centred planning to be mainstreamed and maximum advantage to be taken from the pending structural changes in the administration of Northern Ireland, in order to significantly improve outcomes for children and young people.

References

- Allen, A. (1999). *Making sense of the Children Act* (3rd ed.). Chichester, John Wiley and Sons.
- Audit Commission (1994). *Seen but not heard—Co-ordinating community child health and social services for children in need*. London, HMSO.
- Benson, P. L., & Leffert, N. (2001). Childhood and adolescence: Developmental assets. In N. J. Smelser, & P. G. Baltes (Eds.), *International encyclopedias of the social and behavioral sciences* (pp. 1690–1697). Oxford, Pergamon.
- Boyce, S., (2005). *What Kind of Indicators can best monitor the delivery of the Children's Strategy?* Briefing paper prepared for the Office of the First Minister and Deputy First Minister by Children's Law Centre and Save the Children.
- Byrne, B., & Caul, B. (2001). *The right to learn: The locations, transitions and attainments of deaf and partially hearing children and young people in Northern Ireland*. Belfast, Royal National Institute for the Deaf, Northern Ireland.
- Chief Secretary to the Treasury (2003). *"Every child matters": Green paper presented to Parliament 2003*. London, The Stationary Office.
- Children Act. (1989). London, HMSO.
- Children Act. (2004). London, The Stationary Office.
- Children (Northern Ireland) Order. (1995). Belfast, HMSO.
- Children's Law Centre and Save the Children. (2005). *What kind of indicators can best monitor the delivery of the Children's Strategy?* Briefing paper prepared for Office of the First Minister and Deputy First Minister by Children's Law Centre and Save the Children. Belfast, Children's Law Centre and Save the Children.
- Connolly, P., Smith, A., & Kelly, B. (2002). *Too young to notice? The cultural and political awareness of 3-6 year olds in Northern Ireland*. Belfast, Northern Ireland Community Relations Council.
- Denzin, N. K. (1997). *Childhood socialisation*. San Francisco, Jossey Bass.
- Department of Health, Department for Education and Employment, & Home Office. (2000).
- Department of Health (2000). *Assessing children in need and their families: Practice guidance*. London, The Stationary Office.
- Department of Health, Department for Education and Employment, & Home Office. (2000). *Framework for the assessment of children in need and their families*. London, Stationary Office.
- DHSS, DENI, and NIO. (1998). *Children's services planning guidance*. Belfast, The Stationary Office Northern Ireland.
- Eastern Health and Social Services Board. (2005). *Eastern area children's services plan 2005–2008*. Belfast, Eastern Health and Social Services Board.
- Eastern Health and Social Services Board, 2005, Northern Health and Social Services Board, 2005, Southern Health and Social Services Board, 2005, Western Health and Social Services Board, 2005.

- Fay, M. T., Morrissey, M., Smyth, M., & Wong, T. (2001). *The Cost of the Troubles Study: Report on the Northern Ireland Survey: The experience and impact of the troubles* (2nd ed.). Belfast, INCORE (University of Ulster and the United Nations University).
- Furstenberg, F., Cook, T., Eccles, G., & Sameroff, A. (1999). *Managing to make it: Urban families*. Chicago, University of Chicago Press.
- Geraghty, T. (1999). *Getting it right: The state of children's rights in Northern Ireland at the end of the 20th century*. Belfast, Save the Children and Children's Law Centre.
- Gilligan, R. (2003). The value of resilience as a key concept in evaluating family support. In I. Katz, & J. Pinkerton (Eds.), *Evaluating family support: Thinking internationally, thinking critically*. London, Wiley.
- Hardiker, P., Exton, K., & Barker, M. (1991). *Policies and practices in preventive child care*. Avebury, Gower.
- Hogan, C., & Murphey, D. (2002). *Outcomes: Reframing responsibility for well-being*. Report to the Annie E. Casey Foundation. Baltimore, MD, The Annie E. Casey Foundation.
- Hoyles, M. (Ed.). (1979). *Changing childhood*. London, Writers and Readers.
- Human Rights Act. (1998). London, The Stationary Office Ltd.
- Kilkelly, U., Kilpatrick, R., Lundy, L., Moore, L., Scraton, P., Davey, C., McAlister, S. (2004). *Children's rights in Northern Ireland: Research commissioned by the NI Commissioner for Children and Young People*. Belfast, Northern Ireland Commissioner for Children and Young People.
- Kopp, C., & Krakow, K. (1982). *Child development in the social context*. London, Addison-Wesley.
- Laming, Lord. (2003). *The Victoria Climbié enquiry: Report of an enquiry by Lord Laming*. London, The Stationary Office.
- McTernan, E. & Godfrey, A. *Children's Services Planning—The Northern Ireland Model*. Unpublished paper given to the CIPVA/IFA Northern Ireland. Working Together to Improve Children's Lives. Conference at Templepatrick on 24th February, 2004. Text of Speech available at www.southernareacsp.n-i.nhs.uk/publications/presentations.
- Monteith, M., McLaughlin, E., Milner, S., & Hamilton, L. (2002). *Is anyone listening?: Childhood disability and public services in Northern Ireland*. Belfast, Barnardo's.
- Northern Health and Social Services Board. (2005). *Northern area children's services plan 2005–2008*. Ballymena, Northern Health and Social Services Board.
- Northern Ireland Council for Community and Voluntary Action. (2002). *State of the sector III: Northern Ireland voluntary and community sector almanac*. Belfast, NICVA.
- Northern Ireland Office. (1998). *The Agreement* (also known as the Good Friday Agreement and the Belfast Agreement). Belfast, The Stationary Office.
- Office of the First Minister and Deputy First Minister, Northern Ireland Administration. (2004). *Making it r wrld 2: Consultation on a draft strategy for children and young people in Northern Ireland*. Belfast, Office of the First Minister and Deputy First Minister.
- Parker, R., Ward, H., Jackson, S., Aldgate, J., & Wedge, P. (1991). *Looking after children: Assessing outcomes in child care*. London, HMSO.
- Review of Public Administration, Northern Ireland. (2005). *Further consultation on the Review of Public Administration*. Belfast, Review of Public Administration.
- Sanderson, H., Kennedy, J., Ritchie, P., & Goodwin, G. (1997). *People, plans and possibilities—Exploring person centred planning*. Edinburgh, Rowntree Foundation and SHS.
- Smyth, M., Fay, M. T., Brough, E., & Hamilton, J. (2004). *The impact of political conflict on children in Northern Ireland*. Belfast, Institute for Conflict Research.
- Social Services Inspectorate (1999). *Planning to deliver: Inspection of children's services planning*. London, Department of Health.
- Southern Area Children and Young People's Committee. (1999). *Southern Area Children's Services Plan 1999–2002*. Armagh, Southern Health and Social Services Board.

- Southern Health and Social Services Board. (2005). *Southern area children's services plan 2005–2008*. Southern Area Children and Young People's Committee. Armagh, Southern Health and Social Services Board.
- Stainton Rogers, R. (1992). The social construction of childhood. In W. Stainton Rogers, D. Hevey, J. Roche, & E. Ash (Eds.), *Child abuse and neglect: Facing the challenge*. London, B. T Batsford Ltd in association with The Open University.
- Titterton, M. (1995). All feasible measures?—Children's rights and violent conflict in Northern Ireland. *Children and Society*, 9(2), 41–53.
- United Nations (1989). *The United Nations Convention on the Rights of the Child*. New York, United Nations.
- United Nations Committee on the Rights of the Child. (2002, October). *Concluding observations of the Committee on the Rights of the Child: United Kingdom of Great Britain and Northern Ireland*. CRC/C/Add. 188 (Concluding Observations/Comments). Can be accessed at <http://documents.un.org/simple.asp> and then search on date of doc ie 9th October 2002.
- Western Area Children and Young People's Committee (1999). *Western Area Children's Services Plan 1999–2002*. Derry, Western Health and Social Services Board.
- Western Health and Social Services Board. (2005). *Western area children's services plan 2005–2008*. Area Children and Young People's Committee. Derry, Western Health and Social Services Board.