Reframing Children's Care in Scotland Research Supplement: Methods and Findings

April 2020

Marisa Gerstein Pineau, PhD
Daniel Busso, EdD

FRAME WORKS

Introduction

In 2017, the FrameWorks Institute joined The Robertson Trust, Life Changes Trust and the Centre for Excellence for Children's Care and Protection (CELCIS) to research the public narrative around children's care in Scotland. The aim of this work is to tell a new story that not only increases the public's understanding of children's care and care experience – how it works, what care experienced individuals need, and how to support them – but also changes attitudes towards care and builds support for effective programmes and policies.

This Research Supplement describes in detail the research methods and findings that underpin the recommendations in the accompanying Strategic Brief, *Each and Every Child: How to Talk About Care Experience in Scotland*. That report outlines the new narrative on children's care and offers strategic advice on how to apply the recommendations to communications today.

This research builds on earlier research that examined the depth of the challenges advocates face when they communicate about children's care. This earlier research explored and compared how experts and members of the public think about children's care and identified the gaps in understanding that a successful reframing strategy needs to address. The results of this analysis, as well as an in-depth analysis of media and third sector communications about children's care, can be can be found at the Children's Care section of the FrameWorks website.

Research Methods

Below, we describe the research conducted as part of the second phase of the project, which involved the design and testing of frames to address the gaps identified in the first phase of work. These frames were tested in 2019 and refined using three methods: on-the-street interviews, survey experiments, and peer-discourse sessions. These methods combined involved 5,577 participants (see below for the number of participants included in each method).

Frame Design

To identify effective ways of talking about children's care, FrameWorks researchers specified a set of tasks the frames needed to perform and then brainstormed potential reframing strategies[*] that we thought might accomplish one or more of these tasks. These potential tools included values, metaphors, messengers, explanatory chains and issue frames, among others.

— **Values:** cultural ideals and enduring beliefs that are broadly shared by all members of society and help establish why an issue matters

— **Explanatory metaphors:** analogies that help members of the public understand complex social or scientific issues

— **Explanatory chains:** step-by-step descriptions of cause and effect that allow the public to understand connections among the complex factors in a problem

— **Gain/loss conditions:** descriptions of what may be gained by addressing an issue or social problem, or what may be lost if the issue is not addressed

— **Issue frames:** descriptions of larger categories of societal issues.

After generating a list of candidate tools to test, researchers solicited feedback from the advisory group to make sure that the explanatory metaphors, in particular, were both apt and usable by various organisations and advocates in the field. Based on this feedback, researchers chose a set of metaphors to carry forward and refined the wording and presentation of these tools in order to empirically test them.

---

* Framing refers to the subtle selection of certain aspects of an issue to cue a specific response. FrameWorks tests a set of frame elements that convey meaning and affect the way that people respond to an issue. These include values, metaphors, narratives, messengers, and more.

On-the-Street Interviews

FrameWorks researchers conducted 49 'on-the-street' interviews to explore the effectiveness of candidate framing tools with members of the public. On-the-street interviews are an exploratory method that tests whether and how framing tools, in this case explanatory metaphors, affect how people think about an issue. In these short (10–15 minute) interviews, researchers asked participants a series of open-ended questions to ascertain respondents' baseline thinking about children's care.[*] Participants were then read an explanatory metaphor to test what effect alternative frames had on their thinking about children's care. These interviews serve two purposes: (1) to test the ability of candidate reframing tools to improve public thinking on issues around children's care, and (2) to provide illustrative video that can be shared with advocates to clarify communications challenges and the potential of using certain framing strategies.

In these one-on-one interviews, researchers tested seven explanatory metaphors designed to generate understanding of how children's care can create positive outcomes for children and young people (the *Scaffolding*, *Roots*, *Foundation* and *Tailored* metaphors); and of the reasons for involvement in children's care system (the *Overloaded*, *Constraints* and *Navigating* metaphors). Interviews were conducted in Glasgow and Aberdeen in April 2019.

Researchers then analysed the resulting data, looking for patterned ways in which each tool affected thinking and talking about children's care. The analysis also focused on isolating the reasons why each metaphor had its respective effects. The iterations researchers tested in these interviews and the findings from the method are detailed below. See Appendix A for the full tested iterations used for each method.

Survey Experiments

Following on-the-street interviews, we conducted two online survey experiments in September and November 2019. In total, 5,475 members of the UK public participated in the experiments, of whom 10 percent resided in Scotland. Due to the challenges of recruiting a sufficiently large sample of Scottish respondents, we used a UK-wide sample that was demographically matched to the Scottish public in terms of age, sex, household income, education, race and ethnicity.

In each experiment, respondents were randomly assigned to an experimental condition (in which they read one framed message) or to a control condition (in which they read nothing). After reading this framed message (or, in the case of the control group, no message), participants were asked a set of questions designed to measure attitudes about children's care and care experienced individuals; understanding of the causes of care involvement and the ways in which an effective care system can create positive outcomes; and support for effective

---

[*] Participants read and signed a consent form granting the FrameWorks Institute permission to film and use their words and images before each interview.

policies and interventions. Questions were Likert-type items with five- or seven-point scales, or open-ended questions requiring free-text answers. They were presented in a random order. For the purposes of analysis, responses to these questions were aggregated to form a set of composite measures, or 'batteries'. See Appendices B and C for the full set of message treatments and outcome questions.

Peer Discourse Sessions

Next, FrameWorks researchers conducted peer discourse sessions – group-based, facilitated conversations that identify patterns of reasoning about a topic and explore the potential of reframing strategies to shift group discussion and thinking in productive directions. Sessions include a variety of discussion prompts and role-playing activities designed to evaluate which frames are most easily understood by the public, allow them to most productively use new information, and are most easily used during conversation with peers. Researchers conducted five 90- to 120-minute sessions with a total of 53 participants in Edinburgh and Glasgow in September 2019. Participants were recruited to capture variation across a range of demographic characteristics including education, political ideology, age and gender. Each session consisted of eight or nine participants. Three of the 53 participants had been in children's care at some point in their lives, although they had not been recruited for that purpose.

Research Evidence Supporting Recommendations

The research process described above led to a set of findings that shift the narrative from 'the forever damaged other' to 'what all children need to thrive'. These recommendations are discussed in full detail in the Strategic Brief. Three overarching recommendations form this narrative shift:

1. **Centre** children's care on healthy development.

2. **Explain** what the care system can and should do to ensure healthy development.

3. **Connect** healthy development to healthy community ties – and our collective responsibility to build and maintain those ties.

These higher-level recommendations are supported by seven more specific recommendations that emerged from the three research methods. Below is a detailed description of the research base and findings for each of these recommendations.

Recommendation #1: Lead with what all children need to thrive.

Researchers tested two contrasting messages in the survey experiment to learn which was more successful at moving the public's thinking about children's care in a more positive direction. The first message described children in care as having needs that are fundamentally similar to

the needs of any other child (a Universal message). In contrast, the second message foregrounded the ways in which – due to the unique nature of their background and life experiences – children in care have fundamentally different needs than their peers (a Targeted message).

The results of the experiment showed that the *Universal* message – emphasising that children in care have similar needs to other children, such as stable living arrangements and relationships – leads to better attitudes towards people with care experience and raises support for improvements to the children's care system.

The contrasting *Targeted* message that described children in care's needs as unique and did not make the connection to the needs of children in general was ineffective at moving attitudes and support. This suggests that connecting the needs of children in care to other children's needs diverts 'othering' and redirects stigmatising thinking towards more positive attitudes.

This finding was reinforced in the peer discourse sessions, where participants said that not only children in care, but all children need early interventions to thrive.

Figure 1. Effects of *Universal* vs. *Targeted* frames on attitudes and support for policies

∗ = p<0.05
∗∗ = p<0.01
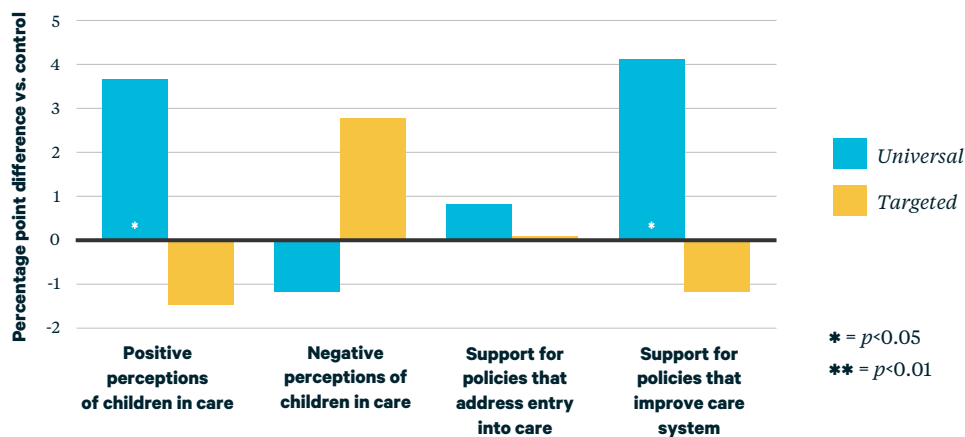
Recommendation #2: Talk about how Scotland's care system can lead to healthy development.

Issue frames establish what a topic is actually 'about'. For example, children's care may at its core be an issue of childhood development. Alternatively, children's care could be an issue of poverty. Framing research shows that foregrounding particular issue frames can dramatically affect public thinking and policy support.

In peer discourse sessions, we tested three different "issue frames" around children's care:

— A *Healthy Development* issue frame, which focused on the ways in which an effective care system can promote the healthy development of children;

— An *Addressing Poverty* issue frame, which focused on the ways in which an effective care system can mitigate the effects of poverty;

— A *Combating Stigma* issue frame, which focused on the ways in which an effective care system can combat stigma and ensure that those with care-experience are accepted as members of communities and society.

In the sessions, the *Healthy Development* issue frame was highly effective at moving participants' thinking about children's care in productive directions. After exposure to the *Healthy Development* frame, participants in all five sessions were able to discuss the developmental needs of children in care and were able to think in concrete ways about how improvements to the care system could help meet these needs. This frame was especially effective at redirecting participants away from the widely held assumption that those in care are 'irreparably damaged'. It cued constructive thinking about the need for early interventions, and the potential for the care system to build resilience by addressing prior trauma, and the opportunities for long-term success and happiness.

> **After exposure to the *Healthy Development* frame, participants in all five sessions were able to discuss the developmental needs of children in care and were able to think in concrete ways about how improvements to the care system could help meet these needs.**

The other two issue frames tested in the peer discourse sessions with the *Healthy Development* frame, *Addressing Poverty* and *Combating Stigma*, did not move thinking in productive directions. The *Addressing Poverty* issue frame led to scepticism about whether improvements to children's care can combat poverty, which they viewed as a much larger and intractable social problem. This pushback created barriers to understanding and support for effective policies and interventions. The *Combating Stigma* frame, meanwhile, had a strong 'backfire' effect, meaning the frame had the opposite of its intended effect. This finding is discussed further in Recommendation #5.

Recommendation #3: Use the *Scaffolding* metaphor to explain how an effective system supports healthy development.

Explanatory metaphors are linguistic devices that help people think and talk about a complex concept in new ways. By comparing an abstract or unfamiliar idea to something concrete and familiar, explanatory metaphors can make information easier to understand – and have a particular power to change the way a topic is understood.

Across methods, the *Scaffolding* metaphor proved effective at explaining the role of the care system and how it can produce positive outcomes for children and young people. In on-the-street interviews, the metaphor was intuitive for participants and clearly communicated the idea that the children's care, when working well, can create good outcomes. Participants exposed to the metaphor used it with ease, and frequently used the words 'building', 'foundation' and 'restoration', as well as the word 'scaffolding' itself – an indication of the frame's communicability and usability.

The metaphor effectively conveyed the idea that those in the care system need stability and individualised supports that respond to a person's particular needs and background. Participants reasoned that, in the same way that we erect scaffolding around buildings to strengthen them, children need scaffolding from the care system – things like strong relationships, and services to address trauma they may have experienced. This indicates that the metaphor strengthens people's understanding of the ways in which children's care can create good outcomes.

By coincidence, one of the participants given this metaphor in on-the-street interviews identified as care experienced herself. They reacted very positively to the metaphor and – more importantly – understood it as empowering. They were able to talk about agency and the ways in which scaffolding can provide opportunities for children and young people in care while still giving young people in care a sense of agency as they reach adulthood. When asked to summarise the metaphor she said: "[Scaffolding] is given to me, and there is a consistent emphasis on structure and *scaffolding*, and the conditions are in place for you to pursue your own path."

In the survey experiment, the *Scaffolding* metaphor did not demonstrate any statistically significant effects on closed-ended outcome measures. This is likely to be because this type of question is not ideally suited to capture how the metaphor affects thinking. However, an analysis of the open-ended questions posed at the end of the survey showed that respondents did understand the metaphor and connected it to the need for stability and strong supports for children in care.

Recommendation #4: Explain how social factors can lead to involvement with the care system using the *Navigating Waters* metaphor.

Among the three metaphors developed to explain the underlying causes of care involvement, *Navigating Waters* was the most effective at building understanding in both the on-the-street interviews and the survey experiment. *Navigating Waters* effectively conveys the idea that families may face a range of different factors that make it difficult to care for children. Participants in on-the-street interviews used the idea of 'stormy weather' to talk about unforeseen events – such as the loss of a job – that may affect families. The language of 'safe harbours' in the metaphor also helped participants think about the supports that families may need, such as respite care, that could prevent involvement in the care system.

The survey experiment echoed this finding, showing that *Navigating Waters* increased respondents' understanding of why families become involved in the care system.

Recommendation #5: Don't talk about – or lead with – stigma without explaining how stigma works.

In peer discourse sessions and the survey experiment, researchers explored if (and how) the topic of stigma is best introduced when speaking about individuals with care experience.

In the sessions, members of the public responded negatively when the topic of stigma was entered into conversation (see Recommendation #2 above): they either denied that stigma represents a real problem in the present day, or they asserted that stigma affects many groups in society (and therefore care experienced people are not exceptional in this regard). These responses led participants to dismiss the possibility that those with experience face discrimination, or that this discrimination can have serious and detrimental effects.

In order to explore this finding further, researchers tested two messages designed to learn more about how to address stigma in more productive ways that do not inspire this backfire effect. The first, *Description of Stigma,* simply asserted that the public hold misperceptions of those in care, and that these stigmatising attitudes have negative effects throughout their lives. The second message, *Explanation of Stigma,* also noted the stigma experienced by those in care, but also paired this with an explanation of implicit bias – or the largely automatic attitudes and behaviours that are shaped by cultural depictions of children and young people in care (the term 'implicit bias' itself was not used in the explanation).

The message that simply described stigma had no effect on attitudes towards care experienced individuals. But the second message, explaining where stigma originates and how it works, did have a statistically significant effect on respondents' positive attitudes towards children and young people in care. The combined findings of the peer discourse sessions and the survey experiment suggest that use of the term stigma is counterproductive to communications about children's care unless the process by which stigma occurs is clearly explained first.

Figure 2. **Effects of *Descriptive* and *Explanatory* frames about stigma on attitudes**

Legend:
- Description of Stigma
- Explanation of Stigma

$*$ = p<0.05
$**$ = p<0.01
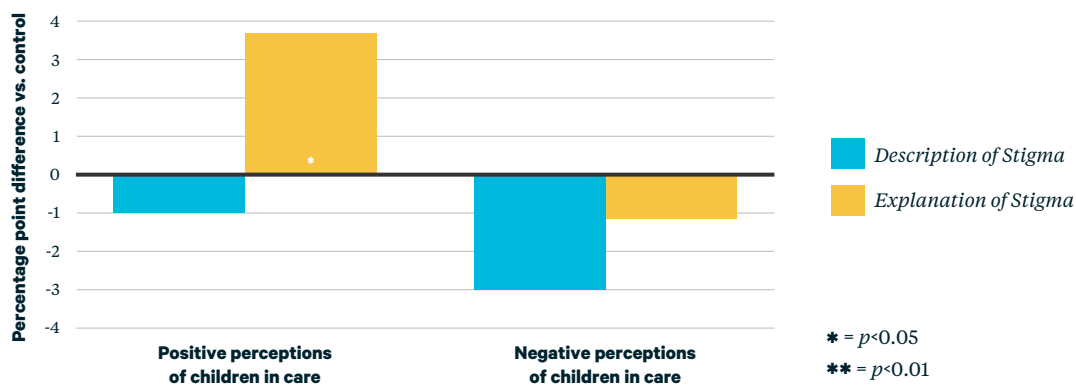
Recommendation #6: Place individual stories in context to show how care experienced young people can thrive.

Researchers tested two types of stories about people with care experience in the survey experiment. Each story was identical in its basic details, but the *Individual* story described the experiences of a young person (Jamie) successfully transitioning out of children's care that was focused exclusively on his experience. The *Individual + Thematic* story framed this highly individualised story with information that contextualised Jamie's experiences by explaining the things that children in care need and how children's care can provide for these.

The survey results demonstrate that when people read a highly individualised story about a person with care experience that lacks a clear explanation of cause and effect, their attitudes towards care experienced individuals worsen. But when the same story includes the larger context, people's understanding of the causes of care experience increases, without the attendant negative effect on their attitudes. Ensuring that stories about individuals include contextual details enhances people's understanding of care experience while inoculating against stigmatising thinking.

Figure 3. **Effects of *Individual* and *Individual + Thematic* stories on attitudes and understanding**
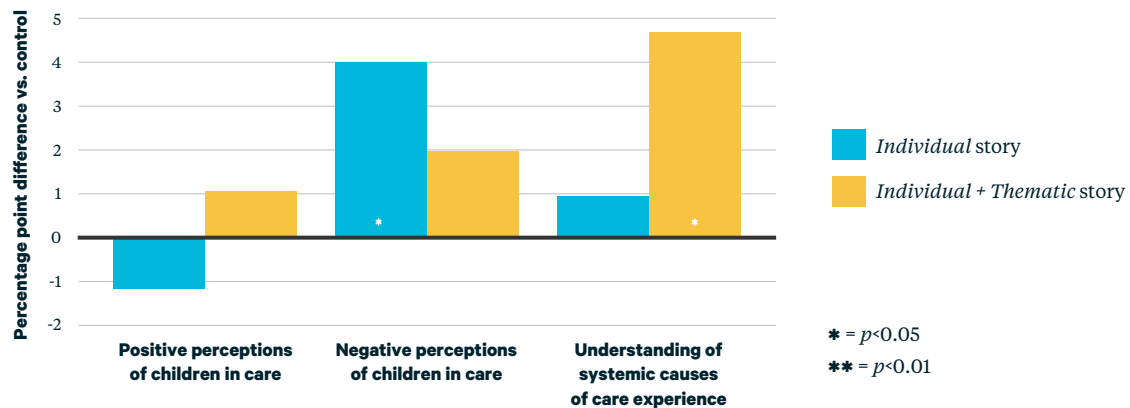
Recommendation #7: Connect poor care experience to weakened community ties – and show that by improving one, we strengthen the other.
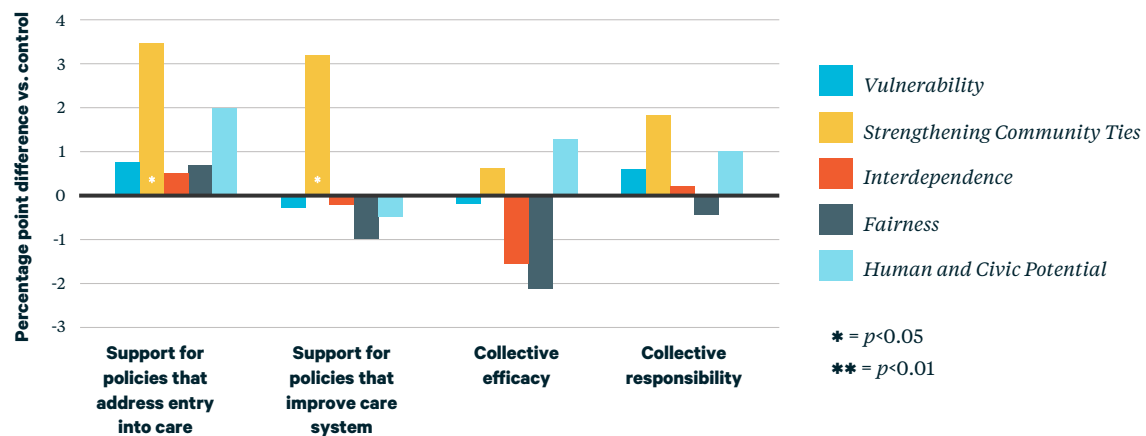
Values tap into people's shared commitments and priorities to make a case for why people should care about a particular issue and work to address it. Because values help people understand why an issue matters and provide reasons for action, we expected that values messages would foster a sense of collective efficacy and responsibility, and boost people's support for policies that can improve youth outcomes.

Researchers tested five values in the first survey experiment: *Strengthening Community Ties, Vulnerability, Interdependence, Fairness,* and *Human and Civic Potential*. Only the value of *Strengthening Community Ties* had statistically significant effects on any of the outcome measures.

Strengthening Community Ties increased support for effective policies and interventions to improve the children's care system and support for policies that address upstream factors such as poverty and inequality that can lead to care involvement. This suggests the value was particularly effective at introducing and answering the 'why is this important' question and raising support for solutions to improve the children's care system.

Importantly, this iteration of the experiment focused on the *lack* of community bonds and connections, and the idea that improving children's care can help address that problem. This finding was supported by the peer discourse sessions, where participants noted that while they thought community should be involved in the children's care system, there is currently a lack of community ties that makes this particularly difficult. This suggests that the public highly values strengthening community ties, and positioning improvements to the care system as a way of strengthening these bonds is an effective way to bring audiences into the conversation around children's care.

Figure 4. **Effects of values on support for policies and sense of collective responsibility and efficacy**

Legend:
- Vulnerability
- Strengthening Community Ties
- Interdependence
- Fairness
- Human and Civic Potential

✱ = $p < 0.05$
✱✱ = $p < 0.01$

Recommendation #8: Spotlight positive outcomes for children and young people if we improve the care system.

In both the survey experiment and the peer discourse sessions researchers tested two contrasting messages about outcomes: one centred on what would be gained if the children's care system is improved, and the second focused on the losses that will result if the system is not improved. The first, *Promoting Good Outcomes*, explained how children's care can, by providing the right supports, create positive outcomes for children. The second, *Avoiding Poor Outcomes* discussed the negative outcomes children in care will experience if they lack these supports.

The message spotlighting positive outcomes increased understanding of how an effective children's care system works and built support for policies that would increase funding and resources for the care system. This message also increased support for preventative policies

such as increasing social benefits and providing stronger mental health services. The message focusing on avoiding negative outcomes for people with care experience, on the other hand, increased *negative* attitudes towards care experienced individuals.

Focusing on how the children's care system can create positive outcomes is an effective way of building support for strengthening the care system but should always be paired with concrete solutions.

Similar *Gain/Loss* frames were tested in the peer discourse sessions (See Appendix D for iterations). Participants who received the *Gain* message about positive outcomes talked about the importance of ensuring these outcomes. The frame also generated discussion about more intrinsic outcomes such as happiness and wellbeing. However, without clear explanation or examples of how these outcomes could occur, participants became less certain about attainability and more fatalistic.

The participants who received the *Loss* frame about negative outcomes more often defaulted to thinking about the culpability of parents whose children are in the care system, and the perceived 'bad' values in low-income communities, and fatalism about preventing these outcomes. This frame also led to discussions about children in care being permanently damaged by trauma.

The combined results of the survey experiment and peer discourse sessions indicate that focusing on how the children's care system can create positive outcomes is an effective way of building support for strengthening the care system but should always be paired with concrete solutions. Messages emphasising the negative repercussions of not providing effective supports, on the other hand, can backfire.

Figure 5. Effects of *Gain* and *Loss* frames on attitudes and support for policies

Legend:
- Promoting Good Outcomes (blue)
- Avoiding Poor Outcomes (yellow)

∗ = $p < 0.05$
∗∗ = $p < 0.01$
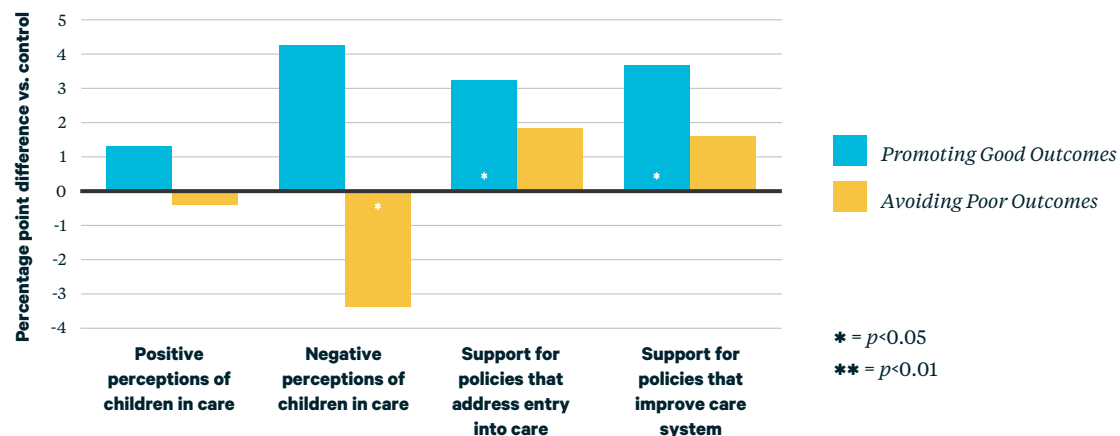
Conclusion

This supplement provides the research base for the reframing strategy presented in the Strategic Brief for this project, *Each and Every Child*. In that report, readers with find guidance and examples of how to apply the framing tools discussed here. We offer these findings as a contribution to the field's ongoing conversation about how to use these frames to ensure that all children and young people in care – and those who have been in care – have what they need to thrive.

Appendix A: Iterations Tested in On-the-Street Interviews

Scaffolding

The Scottish care system needs to provide children with scaffolding to help build their lives. When children enter the care system after going through difficult experiences, they need scaffolding – a supportive structure that helps them build happy and successful lives. Just as scaffolding can be erected around parts of buildings that need the most support, the care system needs to provide children with the kinds of support they need to build strong, stable lives, such as caring relationships, stable placements, and services that help them address the challenges they may have experienced. Our children's care system can provide the scaffolding that children need to build positive experiences and thrive.

Roots

The Scottish care system needs to strengthen children's roots to help them flourish. When children enter the care system after going through difficult experiences, they need roots – supports that connect them to their communities and give them the stability they need to flourish. Just as trees need roots to grow and stand strong in the ground, children in care need caring relationships, stable placements, and services that help them address the challenges they may have experienced. Our children's care system can nurture and strengthen the roots in children's lives, helping them develop and grow strong, so that children have what they need to thrive.

Foundation

The Scottish care system needs to provide a foundation for children's lives. When children enter the care system after going through difficult experiences, they need a strong base on which they can build happy and successful lives. Just as a building depends on a sturdy foundation to be stable and secure, the care system needs to provide children with a foundation on which to build strong, stable lives, with caring relationships and stable placements, and services that help them address the challenges they may have experienced. Our children's care system can be this foundation, helping children build positive experiences and thrive.

Tailored

The Scottish care system needs to be tailored to fit every child's needs. When children enter the care system after going through difficult experiences, they need supports that are designed to fit their needs and that equip them to live happy and successful lives. Just as clothes can take different shapes to fit different figures, the care system can be designed to fit every child's needs, by providing them with caring relationships, stable placements, and services that help them address the challenges they may have experienced. Our children's care system can be tailored to every child and outfit them to have positive experiences and thrive.

Overloaded

Children in Scotland may become involved in the care system when their parents are overloaded by the challenges in their lives. Just as a lorry can bear only so much weight before it stops moving forward, the weight of things like poverty, social exclusion, poor housing, and chronic unemployment can place a heavy load on parents, slowing them down and making it harder for them to provide children with the best kinds of care and support. As a society, we can ensure fewer families become involved in the care system by offloading sources of stress in parents' lives, helping keep families moving forward in bad conditions.

Constraints

Children in Scotland may become involved in the care system when their parents are constrained by the challenges in their lives. Things like poverty, social exclusion, poor housing, and chronic unemployment can trap parents in bad situations, restricting their ability to provide children with the best kinds of care and support for their children. As a society, we can ensure fewer families become involved in the care system by freeing parents from the sources of stress in their lives, enabling families to escape the constraints of their circumstances and thrive.

Navigating

Children in Scotland may become involved in the care system when their parents have trouble navigating the challenges of their lives. Just like stormy weather can make it hard for boats to sail with an even keel, things like poverty, social exclusion, poor housing and chronic unemployment can make it difficult for parents to stay afloat and provide children with the best kinds of care and support. As a society, we can ensure fewer families become involved in the care system by providing parents with lighthouses and safe harbours to withstand the challenges and stresses in their lives and allow for smoother sailing during difficult times.

Appendix B: Iterations Tested in Survey Experiment

Values

Strengthening Community Ties

Our society today lacks a sense of community and connection. One of the ways that we've undermined our social bonds is by failing to support children in care, which leaves them feeling disconnected and disaffected. By leaving these children isolated, we've betrayed the idea that we're a true community and have undermined the spirit of community in our society. By making improvements to the children's care system, we can bring our communities together. We need to make sure the care system provides children with the kinds of support they need to develop successfully, such as caring relationships, stable placements, and services that address the challenges they may have experienced. By taking steps to improve the children's care system, we can strengthen the connections between us, restore our country's sense of community, and unite our society.

Vulnerability

We need to look after the most vulnerable members of our society. But at the moment, we aren't doing enough for children in care – the most vulnerable among us – and this is leaving them at risk. These children can easily suffer lifelong harm, and without improvements to the children's care system, they are likely to experience serious threats to their development. We need to make sure the care system provides children with the kinds of support they need to develop successfully, such as caring relationships, stable placements, and services that address the challenges they may have experienced. Children in care are among the most vulnerable members of our society, and we should improve the children's care system to protect them from the harm they might otherwise suffer.

Interdependence

As a society, we are all interdependent – what affects one of us affects all of us. At the moment, children in care are not getting what they need, and this undermines the prosperity of the whole country. When children in care do not get the support they need, they don't develop the skills and capacities they need to make positive contributions to our economy and society. By making improvements to the children's care system, we can help those with care experience contribute as they grow up, which will help us all. We need to make sure the care system provides children with the kinds of support they need to develop successfully, such

as caring relationships, stable placements, and services that address the challenges they may have experienced. Because our fates are all connected, taking steps to improve the children's care system would benefit all of us.

Equal Opportunity

Everyone should have an equal opportunity to do well in life. But at the moment, children in care are not getting what they need, and as a result they don't have as much of an opportunity to succeed as others. When we don't provide children with the support they need, this denies them a fair chance to succeed in life. By making improvements to the children's care system, we can make sure that all of us have the resources and opportunities we need to do well. We need to make sure the care system provides children with the kinds of support they need to develop successfully, such as caring relationships, stable placements, and services that address the challenges they may have experienced. Building a fair society means taking steps now to provide equal opportunities for everyone, including children in care.

Human and Civic Potential

As a country, we are committed to realising our potential as individuals and as a society. But at the moment, children in care are not getting the support they need to reach their potential. And when we don't help all of our children reach their potential, our whole society loses out. By making improvements to the children's care system, we can enable those in care to fully develop their abilities and contribute to their communities. We need to make sure the care system provides children with the kinds of support they need to develop successfully, such as caring relationships, stable placements, and services that address the challenges they may have experienced. By taking steps to improve the children's care system, we can help all children reach their potential and, in turn, reach our full potential as a society.

Promoting Good Outcomes vs. Avoiding Poor Outcomes

Promoting Good Outcomes

In a new report, experts are calling on the government to make lasting improvements to the children's care system. With these changes, children in care will experience positive outcomes later in life – including better mental health, higher educational achievement, and stable employment.

The report, to be released later this week, suggests that taking action will significantly improve children in care's health and wellbeing. For example, the suggested changes to the system would make sure that children have permanent and long-lasting living arrangements, which would make it easier for them to stay in the same school and make

lasting friendships. This means they will be more likely to stay in school and feel connected to their communities and society as adults. Similarly, the improvements to the care system would make sure that children in care can get effective mental health services, which means they will be able to address trauma they have experienced. This will improve their overall mental health as adults.

The report's message is clear: if we improve the care system, children in care will get the support they need and be much more likely to experience positive outcomes throughout their lives.

Reducing Poor Outcomes

In a new report, experts are calling on the government to make lasting improvements to the children's care system. Without these changes, children in care will continue to experience poor outcomes later in life – including a higher risk of mental illness, lower educational achievement, and higher rates of unemployment.

The report, to be released later this week, suggests that our failure to take action is costing children in care their health and wellbeing. For example, many children in care don't have permanent or long-lasting living arrangements, which can make it difficult to stay in the same school or make lasting friendships. This means they are more likely to leave school without qualifications and feel disconnected from their communities and society as adults. Similarly, children in care often can't get effective mental health services, which means they may be unable to address trauma they have experienced. This can increase their risk of mental health issues as adults, including anxiety and depression.

The report's message is clear: if we don't improve the care system, children in care will continue to face challenges and be more likely to experience poor outcomes throughout their lives.

Individual vs. Individual + Thematic Stories

Individual Story

Jamie's story reminds us that many children in care are able to overcome the challenges they have faced and go on to thrive. Jamie was only 10 years old when he was taken into care. His father struggled with alcohol abuse, and his mum worked long hours to support the family. After a neighbour reported that he was being neglected, Jamie was sent to residential care. This experience caused Jamie to lash out at his teachers and other students. His behaviour also made it hard to find a long-term placement with a foster family. Yet despite these challenges, the care system was able to find Jamie a home in which he could thrive. The relationship he had with his foster mum, Hazel, provided him with the love and attention

he needed to succeed. With her support, Jamie was able to complete secondary school and plans to go to university next year. He eventually hopes to become a social worker and help others who are facing the same difficult circumstances that he did.

There are children all over the country that, like Jamie, need support. That's why we need to provide children in care with the resources, relationships and services that make it possible for them to thrive.

Individual + Thematic Story

We need to make lasting improvements to the children's care system. When children enter the care system after going through difficult experiences, they need resources, supports and services that help them develop successfully. This includes caring relationships, stable placements, and services to address the challenges they may have experienced. With these changes, children in care will experience positive outcomes later in life – including better mental health, higher educational achievement, and more stable employment.

Jamie's story reminds us that – when the care system is working well – many children in care are able to overcome the challenges they have faced and go on to thrive. Jamie was only 10 years old when he was taken into care. His father struggled with alcohol abuse, and his mum worked long hours to support the family. After a neighbour reported that he was being neglected, Jamie was sent to residential care. This experience caused Jamie to lash out at his teachers and other students. His behaviour also made it hard to find a long-term placement with a foster family. Yet despite these challenges, the care system was able to find Jamie a home in which he could thrive. The relationship he had with his foster mum, Hazel, provided him with the love and attention he needed to succeed. With her support, Jamie was able to complete secondary school and plans to go to university next year. He eventually hopes to become a social worker and help others who are facing the same difficult circumstances that he did.

The care system needs to provide the same kinds of support to *all* children in care that it provided to Jamie. If we make changes to the system to provide all children with the resources, relationships and supports they need, all children will be able to thrive the way that Jamie has.

Universal vs. *Targeted*

Universal

Children in the care system have the same kinds of needs as all other children. That's why we need to provide them with the resources and supports that *all* children need to thrive – regardless of their background or the start they've had in life – but that children in care frequently don't get.

For example, all children benefit when they don't have to move around often and can stay in the same home or community over the long term. This allows them to stay in the same school, make lasting friendships and develop a sense of belonging. Children in the care system are no different. When they have access to long-lasting or permanent living arrangements, it provides them with stability and security, and the opportunity to form strong relationships and connections within their communities. To take another example: all young people need support as they move into adulthood. For many young people, this support comes from family, who provide advice, financial support, or a place to live even when they go to university or start work. Individuals leaving the children's care system also benefit from this kind of support into early adulthood. When we provide care leavers with continued support with housing, employment, or finances, this sets them up to be successful as adults.

Children in the care system need the same basic things as any other child. If we provide these things, children in care will get the support they need and be much more likely to experience positive outcomes throughout their lives.

Targeted

As a result of their background and the challenging start they've had in life, children in the care system have a unique set of needs. That's why we need to provide them with particular kinds of resources and supports that meet those needs – supports that children in care frequently don't get.

For example, when children are removed from their families and placed into care, it affects their feeling of safety and belonging. That's why it's so important for them to have access to long-lasting or permanent living arrangements. These provide them with stability and security, and the opportunity to form strong relationships and connections within their communities. To take another example: young people who leave the care system need specific types of support as they move into adulthood. When we provide care leavers with specific types of continued support with housing, employment, or finances, they are better able to overcome life's challenges and be successful as adults.

Children in the care system have a unique set of needs that we need to address. If we provide the particular things they need, children in care will get the support they need and be much more likely to experience positive outcomes throughout their lives.

Describing Stigma vs. Explaining Implicit Bias

Describing Stigma

Almost all children in care experience stigma and discrimination: communities protest when care homes for young children are built in their neighbourhood; members of the public mistakenly assume that children were placed into care due to their own poor behaviour; and children in care are often looked at as 'different' from other children. These stigmatising attitudes can make life even more challenging for children in care.

In order to end discrimination and stigma facing children in care, we need to help people see children in care in a more positive and accurate light.

Explaining Implicit Bias

Almost all children in care experience stigma and discrimination: communities protest when care homes for young children are built in their neighbourhood; members of the public mistakenly assume that children were placed into care due to their own poor behaviour; and children in care are often looked at as 'different' from other children. These stigmatising attitudes can make life even more challenging for children in care.

But where do these stigmatising attitudes come from, and what can we do about them? The answer lies in how our culture portrays people with care experience.

The messages we receive from an early age lead us to form automatic negative judgments about children in care. Tabloid newspapers, reality TV programmes and other media churn out stereotypes of children in care as rude, troubled, hard to deal with, or a 'lost cause'. Over time, these images subconsciously affect our attitudes and behaviours, in ways that we may not even realize. This leads to stigma and discrimination – which has a huge impact on those with care experience throughout all areas of life. Once we know about these unintentional biases, we become less likely to act on these 'snap judgements' and more likely to treat people fairly, regardless of the start they've had in life.

In order to end discrimination and stigma toward children in care, we need to help people see children in care in a more positive and accurate light.

Messengers

Care Experienced Youth

In a new report, Care Leavers for Reform, an organization representing care experienced young people, is calling on the government to make lasting improvements to the children's care system. These changes, it argues, will enable children in care to experience positive outcomes later in life – including better mental health, higher educational achievement, and more stable employment.

According to the group of care leavers, the suggested changes to the system would make sure that children have permanent and long-lasting living arrangements, which would make it easier for them to stay in the same school and make lasting friendships. "This would mean that children in care will be more likely to complete secondary school and feel connected to their communities and society as adults" said Laura Mitchell, who was in the care system as a child and is now a leading advocate for reform. Similarly, Care Leavers for Reform argues that improvements to the care system would make sure that children in care can access effective mental health services, which means they will be able to address trauma they have experienced. Mitchell emphasised that "this will improve the overall mental health and wellbeing of care experienced people throughout their lives".

The report's message is clear: individuals with care experience don't think the country is doing enough to improve the children's care system. By making lasting changes to the system, we can ensure that every child in care has the support they need to experience positive outcomes throughout their lives.

Foster Carers

In a new report, the National Foster Carers Association is calling on the government to make lasting improvements to the children's care system. These changes, it argues, will enable children in care to experience positive outcomes later in life – including better mental health, higher educational achievement, and stable employment.

According to the group of foster carers, the suggested changes to the system would make sure that children have permanent and long-lasting living arrangements, which would make it easier for them to stay in the same school and make lasting friendships. "This would mean that children in care will be more likely to complete secondary school and feel connected to their communities and society as adults" said Laura Mitchell, who was a foster carer and is now a leading advocate for reform. Similarly, the National Foster Carers Association argues that improvements to the care system would make sure that children in care can access effective mental health services, which means they will be able to address trauma they have experienced. Mitchell emphasised that "this will improve the overall mental health and wellbeing of care experienced people throughout their lives".

The report's message is clear: foster parents don't think the country is doing enough to improve the children's care system. By making lasting changes to the system, we can ensure that every child in care has the support they need to experience positive outcomes throughout their lives.

Social Workers

In a new report, the National Social Workers Association is calling on the government to make lasting improvements to the children's care system. These changes, it argues, will enable children in care to experience positive outcomes later in life – including better mental health, higher educational achievement, and stable employment.

According to the group of social workers, the suggested changes to the system would make sure that children have permanent and long-lasting living arrangements, which would make it easier for them to stay in the same school and make lasting friendships. "This would mean that children in care will be more likely to complete secondary school and feel connected to their communities and society as adults" said Laura Mitchell, who was a social worker and is now a leading advocate for reform. Similarly, the National Social Workers Association argues that improvements to the care system would make sure that children in care can access effective mental health services, which means they will be able to address trauma they have experienced. Mitchell emphasised that "this will improve the overall mental health and wellbeing of care experienced people throughout their lives".

The report's message is clear: social workers don't think the country is doing enough to improve the children's care system. By making lasting changes to the system, we can ensure that every child in care has the support they need to experience positive outcomes throughout their lives.

Appendix C: Experimental Survey Outcome Measures

Scales	Sample questions
Attitudes towards care experienced individuals	Imagine a typical child in the children's care system. To what extent do you think each of the following words or phrases would describe them? ['*Not at all*', '*A small amount*', '*A moderate amount*', '*A large amount*', '*A very large amount*'] a) Lazy; b) Selfish; c) Hard to deal with; d) Threatening; e) Angry; f) Friendly; g) Intelligent; h) Caring; i) Motivated
Understanding of stigma	Children in the care system experience discrimination because of their background. ['*Strongly disagree*', '*Disagree*', '*Somewhat disagree*', '*Neither disagree nor agree*', '*Somewhat agree*', '*Agree*', '*Strongly Agree*']
Understanding of systemic causes of care involvement	How important do you think the following factors are in explaining whether or not children and families become involved in the care system? ['*Not at all important*', '*Slightly important*', '*Moderately important*', '*Very important*', '*Extremely important*'] a) Parents' experience of poverty; b) Parents' experience of stressful life events; c) Parents' mental health issues; d) The poor values that some communities hold about families and parenting; e) Parent's inability to make good choices about their lives; f) Parent's lack of care and concern for their children's welfare
Understanding of an effective care system	We're interested in what you think can best help children in the care system to succeed. Rank each of the following goals of the care system, from what you think is most important at the top, to least important at the bottom. '*Make discipline stricter for children in care*'; '*Removing children more quickly from unstable families*'; '*Provide education to parents of children in care about effective parenting practices*'; '*Provide education to parents of children in care about the risks of alcohol and drug use*'; '*Restrict or cut off contact between children in care and their families, including extended families*'; '*Increasing oversight of care professionals within the system*'; '*Provide psychological services to children and young people to address past trauma*'; '*Provide early interventions to families at risk of care involvement*'; '*Provide young people leaving care with mentors and other supportive relationships*'; '*Offer training on childhood development and trauma to caregivers*'
Policy support	How willing or unwilling would you be to pay more in taxes to increase resources for the children's care system? ['*Not at all willing*', '*Slightly willing*', '*Moderately willing*', '*Very willing*', '*Extremely willing*']

Scales	Sample questions
Collective efficacy	How realistic is it that that we, as a society, can make sure that children in care do just as well as other children?
	['*Not at all realistic*', '*Slightly realistic*', '*Moderately realistic*', '*Very realistic*', '*Extremely realistic*']
Collective responsibility	In your view, how much of an obligation does our society have to ensure good outcomes for children in care?
	['*No obligation at all*', '*A very small obligation*', '*A small obligation*', '*A moderate obligation*', '*A large obligation*', '*A very large obligation*', '*An extremely large obligation*']
Salience	In your opinion, how concerned should the country as a whole be about whether children in care are successful?
	['*Not at all concerned*', '*Slightly concerned*', '*Moderately concerned*', '*Very concerned*', '*Extremely concerned*']
Open-ended questions	What are some of the things that we can do, as a society, to make sure that children in the care system do well?
	[*Text entry response*; *Provide one, paragraph-style textbox*]

Appendix D: Iterations Tested in Peer Discourse Sessions

Gain vs. *Loss*

Gain

We need to make improvements to the care system, because when we do children in care will experience positive outcomes later in life – including good mental health, high educational achievement, and stable employment.

Loss

We need to make improvements to the care system, because without these changes, children in care will continue to experience poor outcomes later in life, such as a higher risk of mental illness, lower educational achievement, and high rates of unemployment.

Issue Frames

The ***Healthy Development for Children in Care*** project. This will make sure that all children and young people in care have what they need to support their healthy biological, psychological and emotional development. By focusing on the kinds of things that promote healthy development so children in care will have what they need to thrive as adults.

The ***Addressing Poverty, Promoting Children's Care*** project. This will make sure that children's care helps address poverty. By focusing on the kinds of things that combat poverty, we can prevent children from being taken into care and prevent care leavers from experiencing poverty themselves.

The ***Combating Stigma Against Children in Care*** project. This will make sure that no one who is in children's care or was once in care is stigmatised or discriminated against. By focusing on combating stigma, we can make sure that care experienced children and young people are accepted as members of our community.

Values

Social Cohesion

In our country, we value our sense of connection and community, and making sure every child and young person in care has what they need strengthens those bonds and brings our community together.

Scottish Pride

Scotland is unique in that we strive to ensure that everyone in our society does well and making sure every child and young person in care has what they need is part of that commitment to all our citizens.

Vulnerability

Children in care are the most vulnerable members of our society, so we should make sure that every child and young person has what they need so they are not at risk.

Fairness

Everyone in our country should have a fair chance to succeed and making sure that every child and young person in care has what they need to do well creates a fairer society.

Potential Messengers

—   Care experienced individual

—   Foster parents

—   Social workers

—   Community leaders

About FrameWorks

The FrameWorks Institute is a non-profit think tank that advances the mission-driven sector's capacity to frame the public discourse about social and scientific issues. The organisation's signature approach, Strategic Frame Analysis®, offers empirical guidance on what to say, how to say it, and what to leave unsaid. FrameWorks designs, conducts and publishes multi-method, multi-disciplinary framing research to prepare experts and advocates to expand their constituencies, to build public will, and to further public understanding. To make sure this research drives social change, FrameWorks supports partners in reframing, through strategic consultation, campaign design, FrameChecks®, toolkits, online courses, and in-depth learning engagements known as FrameLabs. In 2015, FrameWorks was named one of nine organisations worldwide to receive the MacArthur Award for Creative and Effective Institutions.

Learn more at www.frameworksinstitute.org

Reframing Children's Care
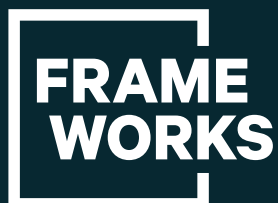in Scotland Research Supplement:
Methods and Findings

April 2020

FRAME WORKS