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| **Reunification of Looked After Children with their Birth Parents in the United Kingdom: A Literature Review and Thematic Synthesis** |

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**Abstract**

**Background:** Reunification of looked after children with their birth parents is the most common route to permanency for looked after children in the UK (Department for Education, 2018).  Previous research evidence, mainly from American studies, suggests numerous factors that contribute to successful reunification outcomes (Biehal, 2007).  Less is known about the current evidence base for reunification practice in the UK.

**Objective:** This review aimed toidentify, appraise and synthesise published literature concerned with the reunification of looked after children with their birth parents in the UK.

**Methods:** A systematic search of the literature identified eight peer-reviewed studies conducted between 2005 and 2017 exploring reunification practice in the UK.  Studies were critically appraised and thematically synthesised according to the Thomas and Harden (2008) approach.

**Results:** Eight articles met eligibility criteria.  Descriptive themes were: support, case management, oscillation, parenting, and reoccurrence of abuse.  Analytic themes were: lack of guidance, and risks associated with return.

**Conclusions:** A pattern of oscillation between home and care was common for many looked after children, and remaining in care produced relatively better outcomes.  Difficulties arise when comparing studies on reunification, due to methodological variation.  Further research is needed to explore the views of reunited children themselves.

**Keywords:** looked after children, birth parents, reunification, United Kingdom

**Introduction**

The UK Children Act 1989 was introduced to reform and clarify the law dealing with the welfare of children.  The Act specifies how Local Authorities should carry out their responsibilities in relation to care planning, placement, and case review for Looked After Children (LAC), with a primary duty to safeguard and promote their welfare (Department for Education [DfE], 2015a).  A key principle is that children are best looked after by their birth families, which is reflected in the concept of parental responsibility, and the Local Authority (LA) duty to return LAC to their families, unless this is not in their interests.  This principle led to an emphasis on reunification of LAC with their birth parents within social work policy and practice within the UK.  Despite this emphasis, there has been limited research on reunification and the impact on children’s stability and wellbeing.

 Reunification is the practice of returning a child to live with their family following a period in LA care.  The DfE define reunification as: “a child is recorded as returning home from an episode of care if he or she ceases to be looked after by returning to live with parents or another person who has parental responsibility” (DfE, 2013, p27).  This definition does not include children whose looked after status did not cease immediately upon return home from care i.e. those who remained on a care order (DfE, 2015a).  Reunification in itself is not always a successful outcome for LAC with some returning to LA care after a short period at home while others may return after much longer periods.  For success, a reunification should result in long-term safety and stability for the child (Kimberlin, Anthony, & Austin, 2009).

The current reunification policy drivers for England are outlined within the Improving Permanence for Looked after Children Data Pack (DfE, 2013) and Working Together to Safeguard Children (DfE, 2015b).  The DfE (2018) recorded 75,420 LAC on 31 March 2018, an increase of 4% compared to 2017.  There were 29,860 children who ceased to be looked after in 2018, with 31% returning home to their parents, which made this the most common outcome for LAC in England.  There is growing evidence that reunification is the least successful permanence option due to the risk of re-abuse (Biehal, 2007; Thobrn, 2009) and with a number of reunified children re-entering the care system (Kimberlin *et al.*, 2009).  Given the number of children currently in care and the likelihood that many will return home to their families, it is of paramount importance that those working within this area understand the current research context.

Timely reunification and prevention of re-entry into LA care for LAC is important for several reasons.  Rutter (1983) found that for children who experience multiple changes over a short period of time the stress is cumulative and they are at greater risk of negative outcomes than children who experience a single stressor or no stressors.  Successful reunification is likely to prevent multiple placements, therefore leading to greater stability for children.  The importance of stability for children in care was recognised and reinforced through the introduction of the Children’s Commissioner’s Stability Index.  This is an annual measure launched in 2017 to report on the stability that children in care in England experience (Children’s Commissioner for England, 2018).  Attachment theory has provided a framework for understanding the immediate and long-term effects of early relationship experiences on the developing child (Cassidy & Shaver, 2008).

Attachment research highlights how a secure attachment can be a protective factor for social and emotional development (Cassidy & Shaver, 2008).  Young children who have had many periods in care often have inadequate attachment relationships (Rees, 2006).  Early attachment is crucial and inadequacy can have a profound, wide-ranging and life-long impact (Thompson, 2008) and lead to intergenerational transmission of insecurity (de Wolff & van Ijzendoorn, 1997).  Children who are successfully reunified with their birth families have the opportunity to strengthen their early attachment relationships.  Finally, there are significant financial cost benefits for the LA and Government. The estimated cost of failed reunifications is £300 million per year (National Audit Office, 2014).

Previous research (Carnochan, Lee & Austin, 2013; Kimberlin *et al.*, 2009; Wulczyn, 2004), largely conducted in America, on factors predicting successful reunification outcomes, has identified several variables including: child characteristics (e.g., age), parental factors (e.g., substance misuse, mental health), placement factors (e.g., number, duration, reason for placement, previous care episodes), and level of family contact while in care (Thoburn, 2009). The danger of oscillation between home and care is highlighted throughout this reunification literature (Boddy, McQuail, Owen, Petrie & Statham, 2008).

**International Context**

The provision of children’s social care services varies considerably across the world.  The approach that countries take towards child protection broadly falls into one of two orientations: the “child protection” orientation (prominent in Australia, Canada, the UK, and the US) and the “family service” orientation (prominent in many European countries, including Belgium, Denmark, and Sweden (Price-Robertson, Bromfield & Lamont, 2014)).  The different systems in place are based on assumptions underlying child welfare policies and law.  These systems are embedded in complex cultural, social and historical contexts which makes direct comparison of research evidence in the area of reunification practice challenging.

The underlying assumption of child protection policy in the US, where much of the research on reunification is conducted, is that children are better off raised by their natural parents (Wulczyn, Zimmerman & Skyles, 2002).  This preference provides the rationale for timely reunification as a core outcome for children placed in foster care (Kimberlin *et al.*, 2008).  There are differences, however, with the UK in the profile of the care population.  The majority of children in the US enter the care system via a court order resulting in a higher rate of entry to care (Thoburn, Robinson & Anderson, 2012).  In England of the 32,050 children who were placed in care during 2017-2018 fifty percent entered under voluntary arrangements (DfE, 2018).  There are also a ‘lower number of universal services available in the US which means that neglect resulting from poverty, inadequate healthcare and poor supervision from working parents are more frequent reasons for entering care’ (Thoburn *et al.*, 2012, p. 4).  Entering care under these circumstances tends to be associated with higher rates of reunification.  For example, during 2016, 250,248 children exited foster care in the US with 51% of these being reunited with parents (Child Welfare Information Gateway, 2017) a figure much higher than in the UK.

There are also differences in research methodologies of studies conducted in the UK and those in other areas which presents difficulties when comparing research evidence.  US researchers tend to use large-scale longitudinal studies to follow up children entering care compared to those who are reunified, those who remain in care and those who are adopted (Thoburn *et al.*, 2012).  UK researchers however, tend to follow up smaller samples and use service evaluation designs.

**Rationale for the Review**

There are no known systematic reviews focussed exclusively on reunification of LAC in the UK.  Previous reviews completed in this area have focussed primarily on findings from American literature (Biehal, 2006; Kimberlin *et al.*, 2009; Thoburn, 2009).  A review completed by Biehal in 2006 (including British and American studies) identified relatively few British studies on reunification compared to the substantial body of research on family reunification in the US (Beihal, 2006).  Due to the differences in provision of statutory care, policies and research methodologies between countries, direct comparison is not possible.  This current article reviews the literature from 2005 to build upon Biehal’s study and focusses on UK peer-reviewed studies.

For the purpose of this review, reunification is defined as a child returning full-time to a parent(s) whom the child was living with when removed or when the child is returned to another parent. It does not include children leaving care to live with extended family or friends in kinship care.

**Aims**

This review aims to provide an overview of the contemporary UK research literature concerned with children being looked after by the LA and then reunified with their birth parents.

**Methodology**

A review protocol was developed following the Preferred Reporting Items for Systematic Review and Meta-Analysis – Protocol (PRISMA-P: Moher *et al.*, 2015)

**Search Strategy**

An initial unlimited search of the Cochrane Library, the PROSPERO international register for prospective systematic reviews and Google was conducted.  No systematic reviews were found.  Online searches were conducted using the following databases: PsychINFO, PsycARTICLES, CINAHL, MEDLINE, ASSIA, Web of Science and Social Care Online.  Keywords used can be found in Table 1.  Thesaurs and Medical Subject Headings terms were used where applicable.  Limiters were set for: peer-reviewed articles, English Language and articles published from January 2005.

To minimise publication bias an additional search of grey literature was conducted.  Government databases and charitable organisations (e.g. NSPCC, JRF) were searched to identify any additional reports.  This search did yield reports on reunification; however, these findings were reported as research articles which had already been identified in the database searches.  This review included only peer-reviewed studies to improve the quality and validity of the findings (Higgins & Green, 2011).

Table 1

Database Keywords

Articles were screened separately by the main author and an independent reviewer (JM[[1]](https://mc.manuscriptcentral.com/LongRequest/cfsw?DOWNLOAD=TRUE&PARAMS=xik_n1KuBLvxEk2U5MSSD74aZdnnrDjB2UYxi94bh8QYs1LWvLxrPj4hAziV1yLGcuUfBDZqMLWeT4jJkqWVCriH4NpZYJZA1PhGaZhe6twiqNmLVmwLidXTT4RGrkE4GyzAm6qUCgNTBp5vnKcHp62ZRwa1VLGTmQXZFWgQMM8UBib2ToBoUbD6juZHaS36ZG9GcP9R7H8Q33VDKf8u4sPFSRgpzThY6EPxSSxLhztwQZmYuRrP" \l "_ftn1)), first by title, then by abstract.  Cohen’s k was run to determine inter-rater agreement between the main author and independent reviewer, with an almost perfect agreement (*k* = 1.0, *p* = .001).  Articles were then screened by full-text; Cohen’s k was again calculated and there was substantial agreement (*k* = .62, *p* = .035).  One study could not be agreed upon, and in this case consultation with a third reviewer (HD[[2]](https://mc.manuscriptcentral.com/LongRequest/cfsw?DOWNLOAD=TRUE&PARAMS=xik_n1KuBLvxEk2U5MSSD74aZdnnrDjB2UYxi94bh8QYs1LWvLxrPj4hAziV1yLGcuUfBDZqMLWeT4jJkqWVCriH4NpZYJZA1PhGaZhe6twiqNmLVmwLidXTT4RGrkE4GyzAm6qUCgNTBp5vnKcHp62ZRwa1VLGTmQXZFWgQMM8UBib2ToBoUbD6juZHaS36ZG9GcP9R7H8Q33VDKf8u4sPFSRgpzThY6EPxSSxLhztwQZmYuRrP" \l "_ftn2)) was sought.  Citation searches of all eligible articles using Web of Science and a hand search of the content and references from the eligible articles were conducted to maximise the scope of literature considered.  Three additional articles were found which met eligibility criteria.  The PRISMA diagram (Figure 1) illustrates the search strategy, while Table 2 shows the inclusion and exclusion criteria.

Table 2

Eligibility Criteria for Inclusion in Review

The database search yielded 1,551 references (after duplicates were removed); 1,425 articles were excluded at title screen, and 121 removed following abstract or full text screen.  The main author and independent reviewer agreed that eight articles were eligible for inclusion; five were quantitative, one qualitative and two mixed methods articles.

Figure 1.  Flow diagram demonstrating screening process following PRISMA guidelines (Moher *et al.*, 2009)

**Data Extraction**

The following data were extracted from each study; author, year, aims, data collection and analysis, sample, follow-up period, funding, main findings, ethics, bias, strengths and limitations.  Where data were missing from studies the author was contacted for further information and clarification.

**Quality Assessment**

Quality checklists, completed independently by the main author and JM, were used to assess the quality of each study.  For quantitative studies the Crowe Critical Appraisal Tool (CCAT, 2013) was used.  Qualitative studies were appraised using the Critical Appraisal Skills Programme (CASP, 2013) checklist for qualitative studies.   Finally, mixed methods studies were appraised using the Evaluative Tool for Mixed Method Studies (Long, 2005).

**Data Synthesis**

A thematic synthesis was conducted following the approach outlined by Thomas and Harden (2008).  This approach provides a method of systematically reviewing and synthesising qualitative research and was chosen due to the qualitative nature of the research findings.  Data were coded from the data extraction forms.  Text included in the analysis related to the ‘findings and discussion’ sections of the studies.  Collected data were coded line-by-line.  Codes were clustered to generate descriptive themes and then used to generate analytic themes.  Coding was conducted iteratively and analytic themes were refined and verified through reflections and discussions with SH[[3]](https://mc.manuscriptcentral.com/LongRequest/cfsw?DOWNLOAD=TRUE&PARAMS=xik_n1KuBLvxEk2U5MSSD74aZdnnrDjB2UYxi94bh8QYs1LWvLxrPj4hAziV1yLGcuUfBDZqMLWeT4jJkqWVCriH4NpZYJZA1PhGaZhe6twiqNmLVmwLidXTT4RGrkE4GyzAm6qUCgNTBp5vnKcHp62ZRwa1VLGTmQXZFWgQMM8UBib2ToBoUbD6juZHaS36ZG9GcP9R7H8Q33VDKf8u4sPFSRgpzThY6EPxSSxLhztwQZmYuRrP" \l "_ftn3) who had access to the full-text articles.  Themes were only considered if they were supported by at least three articles.

**Results**

**Study Characteristics**

The main characteristics of studies included in the review are shown in Table 3.  The eight peer-reviewed articles described a total of six different studies.  Three articles (Farmer, 2012; Farmer & Wijedasa, 2013; Lutman & Farmer, 2012) outline findings from the same longitudinal study exploring return stability (Farmer, Sturgess, O’Neill & Wijedasa, 2011) and present different variations of the same outcome variables.  As this may introduce bias findings from these articles will be referred to as one study.

**Overview of Methodological Quality of the Research**

**Study Design.**  Two studies were prospective longitudinal designs (Brandon & Thoburn, 2008; Farmer, 2012; Farmer & Wijedasa, 2013; Lutman & Farmer, 2012), three retrospective longitudinal designs (Biehal, Sinclair & Wade, 2015; Broadhurst & Pendleton, 2007; Murphy & Fairtlough, 2015), and one followed a qualitative approach (Malet, McSherry, Larkin, Kelly, Robinson & Schubotz, 2009).  Follow up periods for the longitudinal studies ranged from two (Farmer, 2012; Farmer & Wijedasa, 2013; Murphy & Fairtlough, 2015) to eight years (Brandon & Thoburn, 2008).  One study compared reunified LAC with a group of LAC who remained in care (Biehal *et al.*, 2015).

 Five studies completed case file reviews (Biehal *et al.*, 2015; Brandon & Thoburn, 2008; Broadhurst & Pendleton, 2007; Farmer, 2012; Farmer & Wijedasa, 2013; Lutman & Farmer, 2012; Murphy & Fairtlough, 2015).  Additionally, four studies conducted qualitative interviews (Biehal *et al.*, 2015; Brandon & Thoburn, 2008; Broadhurst & Pendleton, 2007; Farmer, 2012; Farmer & Wijedasa, 2013; Lutman & Farmer, 2012).  Only two of these studies reported the findings of these interviews (Brandon & Thoburn, 2008; Broadhurst & Pendleton, 2007).  One study conducted only qualitative interviews (Malet *et al.*, 2009).

**Sample Characteristics.**  Sample sizes ranged from eight (Malet *et al.*, 2009) to 180 participants (Farmer, 2012).  Five studies were from England (Biehal *et al.*, 2015; Brandon & Thoburn, 2008; Broadhurst & Pendleton, 2007; Farmer, 2012; Farmer & Wijedasa, 2013; Lutman & Farmer, 2012; Murphy & Fairtlough) and one from Northern Ireland (Malet *et al.*, 2009).  Three articles limited their sample to children accommodated due to abuse or neglect (Biehal *et al.*, 2015; Lutman & Farmer, 2012; Murphy & Fairtlough, 2015).   All studies used samples recruited from local authorities.

Table 3

Overview of studies included in review

**Data Analysis**.  The analytical approaches applied in these studies are outlined in Table 3 (Biehal *et al.*, 2015; Broadhurst & Pendleton, 2007; Farmer, 2012; Farmer & Wijedasa, 2013; Lutman & Farmer, 2012; Murphy & Fairtlough, 2015).  Two studies did not report the methods of data analysis (Brandon & Thoburn, 2008; Malet *et al.*, 2009).

**Outcomes of Reunification**.  Successful reunification was largely defined as a child remaining at home by the end of the follow up period.  Figures reported for re-entry into care ranged from 47% (Farmer & Wijedasa, 2013) to 63% (Biehal *et al.*, 2015) with wide variation in rates of stability between LAs (Biehal *et al.*, 2015; Brandon & Thoburn, 2008; Farmer, 2012; Farmer & Wijedasa, 2013; Lutman & Farmer, 2012; Murphy & Fairtlough, 2015).

Recurrence of neglect and abuse was identified in four studies (Biehal *et al.*, 2015; Brandon & Thoburn, 2008; Farmer, 2012; Farmer & Wijedasa, 2013; Lutman & Farmer, 2012; Murphy & Fairtlough, 2015).  Age was the only child characteristic used as an outcome variable.  Child age was considered in three studies (Biehal *et al.*, 2015; Farmer, 2012; Farmer & Wijedasa, 2013; Lutman & Farmer, 2012; Murphy & Fairtlough, 2015).

**Quality Appraisal**

The overall quality of studies was mixed.  Reporting of aims, recruitment strategies and discussion of findings was generally clear.  Detail and/or justification of methodology, particularly sampling and data collection and analysis was poor.  Data analysis and interpretation lacked transparency and were explained insufficiently to enable replication.  All studies had limited reporting of underlying theoretical perspectives and had small sample sizes.  Consideration of ethical issues and bias was only addressed by some of the studies.

**Thematic Synthesis**

The analysis aimed to synthesise UK research on reunification.  The synthesis of results generated five descriptive themes: support, case management, oscillation, parenting, and recurrence of abuse. The descriptive themes were constructed into analytic themes which ‘go beyond’ the original findings (Thomas & Harden, 2008).  The analytic themes were: lack of guidance and risks associated with return.

Table 4

*Themes and subthemes emerging from the studies*

**Lack of Guidance**

The different aspects of case management such as: assessment, planning, preparation and decision-making regarding reunification were all characterised by inconsistency and related to unstable outcomes for LAC.  Variations in practice were identified both within and between LAs.  Parents included in these studies reported that they did not feel sufficiently involved in these aspects of case management.  They did not feel involved in care planning or that their views were taken into account which left them feeling disempowered.  On recalling the experience of LAC meetings with social workers one participant reported being told:

*“This is what’s happening and this is what you’ll do. And if you don’t do it then the kids won’t go back.  And if you don’t like it, you know what’s going to happen” (Malet et al., 2009)*

The lack of guidance for both social care staff and parents meant that, in some areas, there were no conditions set for circumstances in which a child who has returned home should be placed back into the care system.  This creates circumstances where vulnerable children may be left in unsafe situations.

*No clear expectations regarding who should decide when a child could return and on what basis (Murphy & Fairtlough, 2015)*

The number of children who returned home varied by LA, creating a permanence lottery in which a child’s future rests on the area in which they live.  Differences were found in follow up support arrangements depending on a child’s pathway into care with children who had been voluntarily accommodated receiving less support once they returned home. Studies often reported that support from other agencies (such as NSPCC, Barnardo’s or Health Visitors) during reunification led to more successful reunifications, however, the support received from LA services was variable.

*When another agency or professional helped to supervise the returns singly or jointly with children’s services the returns were four times more likely to be stable (Farmer & Wijedasa, 2013)*

Studies reported that initial social work support promoted positive change, however there were gaps identified in the support available and aftercare support from social services was often insufficient.  The inconsistencies identified may be the result of factors including: the size of the LAC population, the provision of local services, and the LA approach to reunification.  Underpinning this inconsistency is a lack of concrete policy guidance, with social workers relying on their own experience and discretion to compensate for this.

**Risks Associated with Return**

Studies explored factors which predicted reunification stability and outcomes of reunification.  Once children had returned home the LA issues regarding case management described above had less influence.  Instead the success of a return was largely dependent on parental and environmental factors.  The LA failed to take into account the extra stress on a fragile family system of having children there and moreover children who have experienced being taken away and living in another context.  Despite reunification being the most common route from which children leave care there were significant risks consistently identified.  Oscillation, the process of moving back and forth between LA care and home, was consistently highlighted as a risk for reunification breakdown.  A significant number of children oscillated between home and care.  Farmer (2012) found a third of children experienced two or more failed returns, which was strongly associated with poor outcomes.  This also represents significantly higher financial costs for the LA.

*We refer to these children as ‘oscillators’…one such child endured thirteen return breakdowns by the age of sixteen (Farmer, 2012)*

As identified above aftercare support offered by the LA was variable and inconsistent therefore patterns of oscillation and the negative impact of this are missed.

Several issues regarding parenting were highlighted by researchers, these included aspects of poor parenting prior to reunification, recurrence of parental difficulties post reunification, and parental engagement with the LA.

*On occasions, cases were (temporarily) closed, even though there were still concerns about the children’s welfare, because of the instability of workers to engage the parents (Brandon & Thoburn, 2008)*

These factors were thought to contribute to reoccurrence of abuse or neglect which was a consistent theme throughout the studies.  For example, Farmer (2012) found 77% of children returned to parents who had previously abused or neglected them.  Poor parenting was identified as the greatest predictor of child maltreatment following reunification (Farmer, 2012).  In some cases, this led to re-entry into care and in others children remained at home despite concerns.

*Over half the children who returned home suffered one or more further episode of neglect… there was evidence that there were ‘unprotected’ children and all had a poor outcome (Brandon & Thoburn, 2008)*

Despite parental factors contributing to the reoccurrence of abuse cases were identified where children’s services or the courts failed to take decisive action and allowed children to be left in damaging situations despite repeated reports from neighbours or police.  Further highlighting how inconsistencies in social care practice contribute to poor outcomes for reunified LAC.

*Despite concerns being raised for nearly two-thirds of children at some point after reunification, only one-quarter subsequently received a resulting escalation of social care involvement (Murphy & Fairtlough, 2015)*

The risk of oscillation and re-abuse associated with return identified by these studies indicates that further proactive LA support, rather than less, is needed for families with reunified children.  This support should be tailored to the family’s needs rather than based on availability.

**Discussion**

The purpose of this review was to examine what is known about reunification of LAC with their birth parents within the UK.  The quality of the eight included studies was mixed and the reporting of methodology was particularly poor.  Therefore, these results should be treated with caution.  The findings from these studies focussed on the outcomes of reunification and factors that contributed to success.  Findings revealed that between 47% and 63% of LAC who returned home experienced failed returns and re-entered LA care.  The following factors were identified as predictors of return stability prior to children returning home: child’s age, improved parental difficulties, adequate family preparation, and support from social services.

Previous British studies have reported between 37% and 52% of children reunified re-entered care and a third of reunification experiences were of poor quality (Farmer, 2006; Packman & Hall, 1998; Sinclair, Baker, Wilson & Gibbs, 2005;).  The figures for re-entry reported in this review show that this percentage has increased from 52% (Packman & Hall, 1998) to 63% (Biehal *et al.*, 2015).  Reasons for re-entry into care varied, but factors included re-abuse or neglect and poor parenting.  Failed reunifications can have serious implications for children in terms of their long-term attachment, emotional and behavioural stability.  Lutman and Farmer (2012) reported that the number of different placements children experienced after reunifications ranged between one and thirty.

 As in previous studies, a pattern of oscillation between home and care was identified for many children.  Farmer (2012) highlighted a particular case where one child endured thirteen return breakdowns by the age of sixteen.  Such children are likely to develop negative expectations of adults which may transfer into new relationships (e.g. foster families), making it hard to establish trust (Schofield & Beek, 2014).  This oscillation is not only the physical movement back and forth but the emotional shift between loss and restoration time and time again.  Attachment theory identifies how children’s relationships with adults are crucial to their trust of other people, their understanding of relationships and their beliefs about themselves (Simmonds, 2004).  The process of care proceedings, family contact, and periods of foster care are very disruptive for children (Schofield, Thoburn, Howell, & Dickens, 2007).  Returning home, even after a short period in care, is also rarely simple (Bullock, Little & Millham, 1993).  Thus, more consideration needs to be given to the number of failed returns young people have experienced when planning for permanency.  Much more proactive tailored support is needed to facilitate successful reunification. Although costlier in the short-term, there are likely to be greater financial gains in the long-term.

There is a need to look to key stakeholders, commissioners and policy makers to examine current policies and procedures.  Brandon *et al.* (2008) referred to the “start again syndrome” where workers coped with the overwhelming information about families and feelings of helplessness in many difficult, long-term cases by putting aside their knowledge of the families’ past and focussing throughout on the present.  Given that previous failed returns are related to reunification breakdown (Farmer *et al.*, 2011), questions must be asked as to how many failed returns should young people undergo.  Research also cautions that focussing on strengths in the present is not effective when working with families with multiple entrenched problems (Brandon *et al.*, 2008).  Biehal *et al.* (2015) concluded that children remaining in care have relatively better outcomes when compared with those who return home.  Social workers need to be supported in complex decision-making through clinical supervision, consultation and reflective practice with other professionals, such as Clinical Psychologists.

 The reviewed articles do not refer to any factors that differentiate one child from being reunified from another who remained in LA care in relation to child characteristics.  The child’s age was often considered as a variable in studies.  However, Biehal *et al.* (2015), who compared reunified children with those who remained in care, found no significant differences between the groups in terms of: age, sex, type of abuse, or parental problems.  There appears to be a lack of transparency regarding decision making in terms of who returns and who does not.  Parental and LA factors such as case management were the most significant predictors of reunification success, thus highlighting the inconsistent nature of practice and lack of reunification guidance to follow.

 Looked after children experience poorer physical health outcomes, higher rates of learning difficulties, inferior educational outcomes and increased vulnerability to mental health difficulties compared to other children (Crawford, 2006).  The interaction of problems which precipitated entry to care with the experience of being looked after results in a complex interaction of past and present experiences (Golding, 2010).  Exposure to psychological trauma and emotional deprivation may prevent the development of a secure attachment style.  These factors combined with oscillation between home and care, feelings of loss provoked by separation from birth family and adjustment to new care arrangements may contribute to increasing vulnerability to developing mental health difficulties (Golding, 2010).  It is unclear whether mental health difficulties are a contributing factor in placement disruption or an outcome of multiple placements (McNicholls, O’Connor, Bandyopadhyay, Doyle, O’Donovan, & Belton, 2011).  Given the vulnerability, it is recommended that more detailed pre-emptive assessments of emotional wellbeing and mental health should be conducted at time of entry to care (DeJong, 2010) and prior to reunification.

**Limitations**

Although the reviewed articles produced consistent findings, the following factors should be taken into account before drawing conclusions.  Evidence linking outcomes for children returning home from care is weak, which to an extent is inevitable given the large number of environmental, child and parental variables, and the poor quality of the studies.  It is difficult to compare studies on reunification as they often vary in terminology, methodology, follow up periods, and data analysis.  The case file review method favoured by these studies is limited in that there is inconsistency in terms of what is recorded in some files but not in others.  Case files by definition are also the social worker’s construction of events.  Finally, three of the included articles reported findings from the same study therefore limiting the review to six discrete studies.  The paucity of UK research in this area limited the scope of this review and highlights the need for further research.

**Implications for Research and Practice**

Further research should attempt to overcome the limitations outlined in this review.  Larger sample sizes with appropriate statistical analysis are needed to investigate the process of social care decision making regarding reunification and to identify local variation.  If researchers are to continue to use the method of case file review, appropriate reporting and transparency needs to be improved in this area, and consideration should be given to utilising reporting standards during the design stage to improve the quality of research.

Although some studies supplemented the case review method with interviews, good quality qualitative data is also lacking in this area.  To further understand the experience of reunification the perspectives of the children themselves needs to be obtained and reported, especially as previous research has shown that the majority of children were ambivalent about reunification and concerned about whether it would be successful (Farmer, Sturgess & O’Neill, 2008).  Parents are likely to observe changes in their child’s behaviour following reunification, for which they may need support to understand, in order to prevent breakdown.  It is important to understand from a child and parental perspective whether they have been prepared and supported prior to and following reunification.  The lack of children’s voices within the literature is identified as a gap in the evidence base regarding reunification practice within the UK.

Articles within this review highlighted the difference in profile of ‘today’s’ care population compared to the populations examined in earlier studies as a driver for further research (Broadhurst & Pendleton, 2007).  Since the introduction of the Children Act 1989, the trend has been for younger children to enter care, increasingly for reasons of abuse or neglect, and to remain in care for longer (Biehal, 2007).  The papers included in this review drew findings from samples that in most cases are over ten-years-old.  Further research is needed with younger samples to examine this new context of care.

Given the high incidents of oscillation identified in this review social care professionals could benefit from the development of existing and new training packages focussed on increasing knowledge around the psychological impact of separation and reunification.  This training could help to guide decision making and the development of practice frameworks.   For example, the NSPCC, in partnership with the University of Bristol, has developed a Practice Framework which is an evidence-informed risk assessment and planning document for use by LAs.  Early evaluations of this framework have found that it was welcomed by practitioners and managers (Farmer & Patsios, 2016), but it is yet to be seen if this will be implemented nationally.  The DfE (2015) recommends that LAs need to develop their own approaches based on existing research evidence.  To overcome the variability and inconsistency between Locl Authorities, standardised assessment tools and measures could be introduced to assist social care professionals during assessment and decision making.

**Conclusions**

This review aimed to establish what is known about reunification of LAC with their birth parents within the UK.  Findings revealed that the majority of LAC who returned home experienced failed returns and re-entered LA care, which is consistent with previous findings.  A need for better decision making, effective assessment and support, both pre-and post-reunification, for children and families were identified.  The research literature on reunification within the UK and in other countries tends to focus on risks and deficits.  Families represented within the care system often face severe socioeconomic challenges, yet they also have resources, knowledge and skills to deal with these adversities.  Studying reunification using greater and more targeted sample sizes would help to identify and gain a better understanding of the factors that enable families to thrive and stay together.

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Table 1

*Database Keywords*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **‘Child’** | **AND** | **‘Foster Care’** | **AND** | **‘Family’** | **AND** | **‘Reunion’** |
| Child\*  **OR**  Teen\*  **OR**  Adolescent  **OR**  “Young pe\*” | “Foster care”  **OR**  “Foster child\*”  **OR**  “Foster parent\*”  **OR**  “Out of home care”  **OR**  Residen\*  **OR**  Institution\*  **OR**  “Child\* in care”  **OR**  “Looked after child\*”  **OR**  “Care leav\*” | Famil\*  **OR**  “Family unit” | Reunion  **OR**  Reunify\*  **OR**  Restor\*  **OR**  “Return home”  **OR**  Reintegration  **OR**  Transition |

Table 2

*Eligibility Criteria for Inclusion in Review*

|  |  |  |
| --- | --- | --- |
| **Criteria** | **Inclusion** | **Exclusion** |
| **Population** | Looked after children | Care leavers |
| **Study Design** | Peer reviewed research articles | Non-peer reviewed literature and studies involving hypothetical scenarios |
| **Aim or Objective** | Primary aim of studies was family reunification in LAC | Studies on reunification post-adoption and in extended kinship care |
| **Geographical Coverage** | Studies including UK participants |  |
| **Dates** | Published between January 2005 and January 2017 |  |
| **Language** | English |  |

Table 3

*Overview of studies included in review*

| **Study** | **Funding** | **Sample** | **Methodology** | **Follow Up** | **Analysis** | **Key Findings** | **Limitations** | **Clinical & Practice Implications** | **Quality Appraisal** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Lutman & Farmer**  **(2012)** | DfEa | n = 138 neglected LACb from seven LAs ( England) | Prospective Longitudinal –    Case file review | 5 years | Chi-square    ANOVA    CHAID | Half the reunifications had broken down after two years.    59% of children were neglected or abused after reunification.    Children over age six at increased risk of placement instability after their reunifications ended.    Rates of stability varied widely by local authority. | Case file data limited by inconsistency of reporting and social workers construction of events.    Small sample size. | Need for early intervention, an authoritative approach to case management and a more proactive approach to safeguarding.    Need for strategies to ensure maltreatment is not normalised.    Parents may require specialist help to make sufficient changes. | CCATc  45% |
| **Farmer & Wijedasa**  **(2013)** | DfE | n = 129 LAC from six LAs (England) | Prospective Longitudinal –    Case file review | 2 years | Logistical regression    Fisher’s exact test    Chi-square | 47% of reunifications had disrupted after two years.    Previous physical abuse and failed reunifications associated with reunification breakdown.    Reunification breakdown rates varied widely by local authority. | Case file data limited by inconsistency of reporting and social workers construction of events.      Small sample size.    Large confidence intervals    Interview data unreported. | Need to work with parents to achieve a shared understanding about what needs to change over what timescales before return is possible.    Need to develop clearer advice and policies to guide reunification practice.    Need for ‘refocus’ of attention onto reunification practice. | CCAT  35% |
| **Farmer**  **(2012)** | DfE | n = 180 LAC from six LAs (England) | Prospective Longitudinal –    Case file review | 2 years | Logistical regression | Two-thirds of children experienced one or more failed reunifications.    Preparation, appropriate services, purposeful social work practice and foster care assistance with reunion contributed to return stability.    Many children returned to continuing parental difficulties. | Case file data limited by inconsistency of reporting and social workers construction of events.    Small sample size.    Interview data unreported.      Results of the regression analysis unreported. | Need for reviews to detect patterns of oscillation so more decisive intervention can be considered.    Need for intervention with LAC with behavioural and emotional difficulties and with their parents.    More involvement by foster carers and residential workers in preparing children and providing post-reunification support.    Need for training for social workers on the impact of substance misuse to children.    Need for LAs to develop clearer policies and practice advice for reunification of all children. | CCAT  40% |
| **Murphy & Fairtlough (2015)** | Unreported | n = 42 LAC accommodated due to abuse or neglect from one local authority (England) | Retrospective Longitudinal –    Case file review | 2 years | Exploratory data analysis | Successful reunification associated with: children being young in age, having short, stable care experiences and consistent family contact prior to return.    Inconsistent assessment and planning prior to reunification. | Case file data limited by inconsistency of reporting and social workers construction of events.    Small sample size.    Sample drawn from one local authority. | Implementation of a LAC multi-agency panel responsible for approving reunifications and ensuring consistent decision making.    Further research on use of culturally specific support services to support reunification.    Strengthening the use of foster-carers within reunification practice. | CCAT  73% |
| **Biehal *et al.***  **(2015)** | DfE | n = 149 maltreated LAC from seven LAs (England)  (n = 68 reunified, n = 81 in care) | Retrospective Longitudinal –    Case file review | 3 – 6 years | Logistical regression | Key predictors of reunification were improvement in parental problems and risk to the child not being unacceptably high.    35% re-entered care within 6 months, 63% re-entered at some point during the follow-up period due to recurring abuse or neglect.    Outcomes poorest for reunified neglected children.    Decision making varied considerably between local authorities. | Case file data limited by inconsistency of reporting and social workers construction of events.    Lack of representativeness of the sample.    Follow-up period varied considerably. | Need for identification and intervention for emerging difficulties during early months post-reunification.    Further investigation of the policy levers available to LAs to enable more equitable permanency.    Better assessment, monitoring and support to ensure decision-making is based on clear evidence of change. | CCAT  65% |
| **Malet *et al.*  (2009)** | Public Health Agency in Northern Ireland | n = 8 birth parents of 9 children from a population of (N=81) under the age of 5 who returned home) (Northern Ireland) | Qualitative –    Specific design unreported | N/A | Unreported | Parents and their children were experiencing multiple difficulties and struggled to cope after reunification.    Inconsistent and inadequate Social services support pre and post reunification.    Care proceedings experienced as extremely stressful.  Parents not given sufficient information. | Sample size.    Population from which the sample is drawn.    No information on how the data was analysed. | Different approaches to assessment, monitoring and support required based on the needs of families. | CASPd  60% |
| **Broadhurst & Pendleton (2007)** | LA | Stage 1 n = 13 families with 19 looked after children  Stage 2 n = 7 families with 12 looked after children    Sample drawn from one local authority in England | Retrospective Longitudinal –    Stage 1:  Case file review    Stage 2: Qualitative interviews | N/A | Content analysis | ***Case File Findings***  No single factor contributed to the application and making of a care order.    ***Interview Findings***  Case workers believed if children returned home on s.31, care orders would ensure the continuation of safeguarding services.    Families encouraged to take lead in discharging care orders but lacked the skills and knowledge to do so. | Case file data limited due to inconsistency of reporting.    Case file social workers construction of events.    Findings refer to correlations but statistics are unreported. | The judicial system may be failing to make use of the full range or care orders available under the Children Act 1989.    Practice needs to more closely consider the point at which a care order should cease and to identify obstacles that impact on the discharge of orders.    A performance target related to discharge of care orders for children in placements at home is needed. | ETMMSe  65% |
| **Brandon & Thoburn (2008)** | NSPCCf | n = 77 LAC from four LAs (England) | Prospective Longitudinal –    Stage 1: Case file review    Stage 2: Qualitative interviews | 8 years | Unreported | 14 reunified children were at home at follow up, 8 experienced re-abuse or neglect.  Two were found to be experiencing maltreatment at all three follow up points despite being on the child protection register.    10 children who returned home within 1 year and then left again had not subsequently returned.  Most of these children had multiple moves and disrupted care.  All these children received long-term services.  All experienced re-abuse or neglect. | More information available on those with longer social service involvement. Poorer outcomes overrepresented in the sample. Less information on cases with successful outcomes.    Case file data limited due by inconsistency of reporting and social workers construction of events.    Inconsistencies and lack of information regarding methodology.    Follow-up data only provided by three LAs | Need for social workers to know when preventative work or reunification attempts reunification are not in the child’s best interest. | ETMMS  45% |
| a Department for Education  b Looked after Children  c Crowe Critical Appraisal Tool  d Critical Appraisal Skills Programme  e Evaluative Tool for Mixed Method Studies  f National Society for the Prevention of Cruelty to Children | | | | | | | | | |

  Table 4

*Themes and subthemes emerging from the studies*

|  |  |
| --- | --- |
| **Themes and Subthemes** | **Studies** |
| **Lack of Guidance** | |
| Support | Biehal *et al. (*2015); Brandon & Thoburn (2008); Broadhurst & Pendleton (2007); Farmer (2012); Farmer & Wijedasa (2013); Lutman & Farmer (2012); Malet *et al*. (2009); Murphy & Fairtlough (2015) |
| Case Management | Biehal *et al. (*2015); Brandon & Thoburn (2008); Broadhurst & Pendleton (2007); Farmer (2012); Farmer & Wijedasa (2013); Lutman & Farmer (2012); Malet *et al*. (2009); Murphy & Fairtlough (2015) |
| **Risks Associated with Return** | |
| Oscillation | Biehal *et al. (*2015); Broadhurst & Pendleton (2007); Farmer (2012); Farmer & Wijedasa (2013); Murphy & Fairtlough (2015) |
| Parenting | Biehal *et al. (*2015); Farmer & Wijedasa (2013); Lutman & Farmer (2012); |
| Recurrence of abuse | Biehal *et al. (*2015); Broadhurst & Pendleton (2007); Farmer (2012); Lutman & Farmer (2012); Murphy & Fairtlough (2015) |