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"The 'PERSPECS' principles: early action and migrant children with no recourse to public funds"

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The `PERSPECS' principles: early action and migrant children with no recourse to public funds

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Abstract

Purpose

This article makes the case for early action approaches with migrant families, introducing a set of principles for practice, mapped against the Professional Capabilities Framework (PCF) for social work and the Social Work England Professional Standards

Design/methodology/approach

The article first explores the context of social work with migrant families, outlining the challenges and gaps in our conceptual understanding of this work. The article then introduces a conceptual model of work with migrant families by drawing on the literature from social work and allied professions, and informed by social work values and ethics.

Findings

Current social work practice with migrant children has been criticised as defensive, procedural and lacking a coherent conceptual basis, particularly for those who are subject to the no recourse to public funds rule. This field of social work practice would benefit from an evidence informed model of practice, anchored in human rights approaches and focused on early action. Eight principles, drawn from existing good practice in other social work and social care contexts are outlined as a basis for a new model of practice in migrant social work.

Originality

In recent years there has been an increased interest in research about the no recourse to public funds (NRPF) rule and its negative impact on children. However, there is currently no evaluated model of social work practice for children and families with NRPF.

Keywords:

no recourse to public funds; early action; statutory neglect; migrant families

Introduction

The no recourse to public funds (NRPF) rule is a provision in the UK Immigration rules preventing people who are subject to immigration control from claiming a list of social security benefits (UKVI 2014). The rule was first established in the Immigration Act 1971, but has been repeatedly expanded in scope to include most temporary migrants to the UK. Its most recent extension was in 2012 to include families granted leave to remain in the UK on human rights grounds (Dickson and Rosen 2021).

NRPF can be seen as an example of everyday bordering (Yuval Davis et al. 2018) where members of the general public and health and welfare professionals alike become part of the process of policing access to services based on immigration status. However, restrictive policies such as the NRPF rule are neither new, nor restricted in scope to the UK, being part of an international trend towards conditionality in social policy (Greve 2020). In a British context, the NRPF rule can be seen as part of a long history of debate about access to social welfare for non-citizens, dating back to debates about whether refugees from the Napoleonic wars should be entitled to access parish poor law relief (Webber 2012). The NRPF rule also has echoes in welfare chauvinist policies in other countries, such as the public charge rule in the USA which was first introduced in the Immigration Act 1882 to prevent people from entering the country who were likely to be unable to take care of themselves independently without recourse to public assistance (Hirota 2013). The NRPF rule contributes to racialized othering (Jolly et al. 2021), as it disproportionately impacts on people of colour. According to Smith et al. (2021) people of colour make up 78% of the population with NRPF.

There are no official data on the number of children and families who have NRPF, however, Citizens Advice suggest that there are 329,000 migrants in the UK with dependent children who are subject to the rule as part of the conditions of their leave to remain (Smith et al. 2021). There are also an estimated 215,000 undocumented migrant children in the UK who have NRPF (Jolly et al. 2020). Data from the Home Office reveal an eightfold increase in applications for suspensions of the NRPF condition between the first and second quarters of 2020 (Home Office 2020). For people who are subject to the NRPF rule, lack of access to social protection can increase the risk of poverty and food insecurity (Jolly 2022), particularly for those who do not have the right to work in the UK because of their immigration status (Farmer 2020). This frequently results in destitution, defined by the Immigration and Asylum Act (1999) as the state when someone:

• does not have adequate accommodation or any means of obtaining it (whether or not their other essential living needs are met) or;

• has adequate accommodation or the means of obtaining it but cannot meet their other essential living needs (Home Office 2021)

One of the few statutory welfare entitlements for children with NRPF is 'child in need' support under Section 17 of the Children Act (1989), giving social workers a central role in the welfare of destitute families with NRPF. In 2011, a survey of 51 local authorities found that 6,500 people with NRPF were being supported (Islington 2011), and in 2015, a survey of 174 local authorities in England and Wales found that 2,679 NRPF families and 4,644 children were receiving support as children in need. Section 17 support for families with NRPF costs local authorities an estimated £25 million a year in London alone (Rowney 2015), and an estimated 61 percent of families with NRPF who were supported under section 17 were in London (Price and Spencer 2015). There is evidence that numbers of families supported under section 17 is growing, and numbers of referrals of people with NRPF to local authorities increased sharply during the early stages of the Covid-19 pandemic (Dickson et al. 2020).

Social work with families subject to NRPF

Unlike other fields of social work practice, there is no statutory guidance for local authorities on support for people with NRPF. However, the NRPF Network provide a range of resources for local authorities (NRPF Network 2021), and third sector agencies such as Project 17 provide training for social workers (Project 17, 2013). There is also comparatively little research on best practice with children and families who are subject to the NRPF rule. However, evidence suggests that section 17 subsistence support rates are sometimes too low to alleviate poverty (Jolly 2018), and housing provided under section 17 is frequently inadequate to meet children's needs (Threipland 2015), research indicates that local authorities have sometimes responded to the cost of supporting families with NRPF through 'gatekeeping' practices (Dickson 2019), such as Lewisham's 'robust front door' policy (Jolly 2018). Instead of intervening early to prevent families from becoming destitute in the first place, families are sometimes refused support until a crisis (Farmer 2017).

One of the challenges for social work with families who are subject to NRPF is that, far from protecting children, the NRPF rule and other 'hostile' immigration policies are designed to discipline families who are seen as an undesirable presence in the country, to encourage them leave the UK and to not 'burden' the public purse (Farmer 2020; Dickson and Rosen 2020). This can result in acute tensions between social work's ethical obligation to promote human rights and social justice (IFSW 2016) and the everyday reality of social work practice with migrant families (Jonsson 2014).

The death of two year old Lynne Mutumba and her mother Lillian Oluk provide an example of the ways in which families with NRPF can slip through safety nets designed to safeguard child welfare. The family were found dead of apparent starvation in their Kent home while being supported under section 17 of the Children Act. The subsequent serious case review concluded that far from a failure of individual professional practice, most agencies performed as was expected of them. However, the review concluded that:

"lawful and efficient responses are not always enough to compensate for the very particular vulnerabilities of the extremely marginalised group represented by those who have no recourse to public funds." (Smith, 2018)

Situations where individual workers and agencies act according to policy and procedure, but are not able to counteract the vulnerablising (Lind 2019) effects of the NRPF rule can result in children experiencing situations which would be considered as neglect if as a result of action by a parent or carer (Jolly 2018). This 'statutory neglect' creates both practical and ethical difficulties for social workers who have professional obligations to "promote the rights, strengths and wellbeing of people, families and communities." (Social Work England 2020).

In the presence of these contradictions, it is vital that at the level of individual practice, social workers develop critically reflective practice which acknowledges these tensions, and at a service level services should take account of these structural constraints on child welfare.

This paper sets out a conceptual framework for good practice with families who are subject to the NRPF rule, using the principles of early action, and applying good practice from other fields of social work to support migrant families, benchmarking these principles against the PCF and Social Work England professional standards.

An Early Action approach might provide a way to deliver more effective support to families with NRPF, by preventing families from becoming destitute, rather than responding to the effects of destitution. The structural factors of everyday bordering discussed above cannot be completely removed by more proactive practice, however, structural constraints can be identified and acknowledged, allowing mitigating factors to be explored in partnership with children and families.

Early Intervention and Early Action

Early intervention refers to a range of activities designed to improve a young child's development, based on an assessment of the strengths and needs of children and the family, where support and services are provided and regularly reviewed as the child develops (Ramey and Ramey, 1998). Early intervention (or early help) is also used in a broader sense to refer to interventions beyond the early years, where support is provided at any time in the life course to prevent a later crisis occurring. For instance, the Early Intervention Foundation (EIF) defines early intervention as: "identifying and providing effective early support to children and young people who are at risk of poor outcomes." (EIF 2020). Such crisis prevention approaches are sometimes labelled 'early action', and are used beyond children and families services to other contexts, such as the criminal justice sector (Community Links, 2011, p.3).

The efficacy of early intervention is well evidenced, and statutory guidance in each of the four UK nations highlights the importance of intervention with children before crises develop (Department for Education, 2018; Welsh Government, 2018; Department of Health, Social Services and Public Safety, 2017; Scottish Government, 2014). Early intervention with families in poverty has been shown to lead to sustained positive effects on intellectual development and academic achievement in preschool children (Campbell & Ramey, 1994), improvements in both short term IQ, and long term effects on educational achievement, grades, special educational placements, and social adjustment (Barnett, 1995). Conversely, a failure to intervene early can lead to long term negative outcomes, and acute 'late intervention' services cost nearly £17bn per year (Chowdray and Fitzsimmons, 2016).

More recently, early intervention approaches have been used in the refugee and migrant sector by Refugee Action to reorientate services away from providing 'end of line' crisis support following a refusal of an asylum application. Instead, in the Early Action approach adopted by Refuge Action and partners, support is provided when people first arrive in the UK in the form of immigration, housing and welfare advice, and befriending and orientation support (Asylum Early Action 2021). Initial indications are that organisational redesign to incorporate early action principles and develop services which focus on early action can contribute to reduced crises for users of these services (Thomas & Jolly 2020).

Early intervention approaches have also been criticised, particularly those which are based on interventions with pre-school children. For instance, Featherstone, Morris and White (2014) argue that approaches which focus on quick, decisive interventions with under 3's are based on a misuse of neuroscience and can be harmful. Early action approaches can also sometimes be narrowly focused on saving money, see for instance, the Early Action Taskforce's concept of the triple dividend, where early intervention is justified by a post-financial crash concern with deficit reduction:

"Early action isn't only cheaper than later action and important for social wellbeing; it helps to reduce the deficit and to increase growth. A population that is 'ready for everything' contributes more, public spending goes down and growth goes up: thriving lives, costing less, contributing more." (Community Links 2011).

Gray (2014) argues that such approaches risk moving the prime focus away from helping people towards saving money as an end in itself. Gray suggests that these approaches have their roots in the social investment concept promoted in the UK by New Labour– where social democratic 'tax and spend' approaches were replaced with targeted means tested programmes, and neoliberal ideas of personal responsibility and worker discipline were promoted. For Gray, this approach is particularly pernicious when applied to child protection settings, where early intervention to remove children may come to be seen as preferable to intensive long term work with families to address needs. To differentiate from this approach, Gray prefers the terminology of 'early help' than early intervention, which he argues allows for a focus on family support to be retained.

Finally, the concept of early intervention has been criticised for an excessive focus on family functioning rather than systemic issues which could improve community life as a whole. Churchill and Fawcett (2016) give the example of an early intervention programme in New South Wales, Australia. There were significant beneficial changes for children as a result of the programme, however, because the programme was implemented in a neoliberal context with a focus on both outsourcing of state services, and cost effectiveness, elements of the programme which were expensive, such as public consultations, community mapping and staff professional development were never implemented (Churchill and Fawcett 2016).

In summary, this article will use the term 'early action' in preference to 'early intervention' or 'early help' in recognition that the approach suggested in this article does not just apply to early years, but throughout the life course, and is not narrowly focused on an intervention or support from an agency, but the wider community context in which action can take place. In the following section, the principle of early action for migrant families with NRPF is discussed alongside seven other overlapping and mutually reinforcing principles which aim to ensure that early action itself is embedded in an understanding of broader community and systemic factors, rather than as an isolated cost saving measure. Although applying early action approaches are likely to have the additional benefit of being more cost effective to local authorities, this is not in itself suggested as a a core principle of the concept.

PERSPECS Principles of early Action with NRPF

Social work with people with NRPF has sometimes been seen to operate as separate to other fields of social work, with assumptions and values based on immigration control, rather than children's rights (Jolly 2018; Farmer 2017). The following principles demonstrate the ways that existing widely recognised social work principles and perspectives can be applied more consistently to this group of children and families. The aim is to provide a set of principles against which practice can be evaluated, and reflected on, which are rooted in social work values, standards and ethical expectations, rather than anti-immigration rhetoric, or an unexamined 'common sense' hostility to migrants. As such they provide a counterweight to the prevailing policies and trends in practice, and a basis for ethical reflection and action. The eight principles are drawn from commonly used and

understood principles of social work practice, and will be familiar to most social work practitioners. However, they have not previously been explicitly applied in social work practice with people who are subject to NRPF, and therefore the implications and complications of this area of social work have not been explored.

The principles form the basis for the NOREAM Pilot programme in Hackney (Ott et al. 2021, Begum et al. 2021), but are designed to be used more broadly and are mapped against both the social work Professional Capability Framework (PCF) and the Social Work England professional standards. This allows services to benchmark themselves against each principle. Although they were developed in an English practice context, they could be also mapped to relevant professional standards or codes of practice in different national or regional contexts.

As a memory aid, the eight principles have been organised into the single use encoding mnemonic 'PERSPECS'. As a mnemonic device, acronyms can assist with memorisation and recall of facts and ,n. ,). Alth. higher oro. od that the prin. concepts in a variety of contexts (Putnam 2015). Although recollection of concepts does not in itself imply that the practitioner has engaged with higher order learning skills, or that they will critically reflect in practice, it gives a greater likelihood that the principles will be recalled in practice settings where critical reflection can take place.

Table 1: PERSPECS

Principle	Summary	PCF link	Social Work England link
(P) Person- centred	The paramount responsibility is to safeguard child welfare, and a child's welfare should take precedence over concerns about immigration status. The wishes of children and families should be considered during assessment and service delivery.	PCF Domain 2: Values and ethics; Domain 3: Diversity and equality; Domain 4: Rights, justice and economic wellbeing; Domain 6: critical reflection and analysis; Domain 7: Skills and interventions; Domain 8: Contexts and organisations.	Social Work professional standard 1: Promote the rights, strengths and wellbeing of people, families and communities; Professional standard 2: Establish and maintain the trust and confidence of people; Professional standard 5; Act safely, respectfully and with professional integrity
(E) Early action focused	By intervening earlier before a crisis, better outcomes for children are achieved. This involves proactively identifying future risks of crisis such as destitution, and working with families who approach the local authority for support but do not yet meet the threshold for Section 17 support.	PCF Domain 1: Professionalism; Domain 5: Knowledge; Domain 7: Skills and interventions	Social Work professional standard 1: Promote the rights, strengths and wellbeing of people, families and communities.
(R) Rights anchored	Children and families should not face discrimination, and should be able to access welfare support, education as a right, rather than at the discretion of support services. Children have a right to be consulted on decisions which affect them.	Domain 4: Rights, justice and economic wellbeing	Social Work professional standard 1: Promote the rights, strengths and wellbeing of people, families and communities.
(S) Strengths based	Instead of focusing on the deficits of children and families, the strengths of children and families should be identified and acknowledged. Services should work with them to identify protective factors to prevent crisis, and to build on these factors.	PCF Domain 1: Professionalism; Domain 4: Rights, justice and economic wellbeing; Domain 5: Knowledge; Domain 7: Skills and interventions.	Social Work professional standard 1: Promote the rights, strengths and wellbeing of people, families and communities.
(P) Partnership led	Partnership operates on three levels: Partnership between different directorates within the local authority; Partnership between the statutory and voluntary sector where differing organisational perspectives, roles and	PCF Domain 1: Professionalism; PCF Domain 2: Values and ethics; Domain 4: Rights, justice and economic wellbeing; Domain 7: Skills and	Social Work professional standard 1: Promote the rights, strengths and wellbeing of people, families and communities; Professional standard 2: Establish and maintain the trust

		Professional standard 4: Maintain my
Evidence from research and practice is used to improve outcomes instead of doing things the way they have always been done. Practitioners are empowered to ask questions, and not accept things at face value. In any situation, practitioners will consider: why am I doing this? What is the evidence for this action?	PCF Domain 1: Professionalism; Domain 2: Values and ethics; Domain 5: Knowledge; Domain 6: critical reflection and analysis; Domain 8: Contexts and organisations; Domain 9: professional leadership.	continuing professional development Social Work professional standard 3: Be accountable for the quality of my practice and the decisions I make; Professional standard 4: Maintain my continuing professional development; Professional standard 6: Promote ethical practice and report concerns
NOREAM draws on the philosophy of care ethics and a relational approach based on care and compassion. Support is based on building relationships and a participatory approach where service users are valued and included in decisions that affect them.	PCF Domain 1: Professionalism; Domain 2: Values and ethics; Domain 7: Skills and interventions.	Social Work professional standard 2: Establish and maintain the trust and confidence of people; Professional standard 5; Act safely, respectfully and with professional integrity
Neglect can operate on the micro-level of families and households, but also on the macro level of laws and policies which are inadequate to protect children. Migrant children can be particularly vulnerable to statutory neglect, and in order to protect children all levels of neglect must be identified and responded to.	PCF Domain 3: Diversity and equality; Domain 4: Rights, justice and economic wellbeing; Domain 6: critical reflection and analysis; Domain 7: Skills and interventions; Domain 8: Contexts and organisations.	Social Work professional standard 1: Promote the rights, strengths and wellbeing of people, families and communities; Professional standard 5; Act safely, respectfully and with professional integrity
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(P) Person-centred

Person-centred approaches have been widely used in the human services (Waters and Buchanan 2017), including support for people with learning disabilities (Mansell and Beadle-Brown 2003), services for older adults (Brooker 2003) and healthcare contexts (Santana et al. 2017). They have their roots in the Rogerian core conditions of empathy, congruence and unconditional positive regard (Rogers 1959). However, despite being commonly used there is no single definition of what 'person-centred' denotes in a social work context. Nonetheless, Water and Buchannan (2017) identify seven key themes of: honouring the person, being in relationship, facilitating participation and engagement, social inclusion/citizenship, experiencing compassionate love, being strengths/capacity focussed, and organisational characteristics.

In contrast to person-centred approaches, NRPF services have sometimes been characterised as procedural and service driven, or focused on concerns about immigration status and eligibility for support rather than the needs or concerns of the child or family (Dickson 2019, Farmer 2017). In an NRPF context, a person centred approach would first focus on assessing need, rather than immigration status, and would consistently take the interests and opinions of the child into account.

(E) Early action focused

In an NRPF context, there is evidence of families being initially refused section 17 support and later approaching the council again once their situation had deteriorated, with harmful consequences for the family. For instance, Dexter, Capron & Gregg (2016) suggest that 6 out of 10 of families who were referred for section 17 support were refused help. High, or poorly understood thresholds for support can mean that families in rent arrears might be refused support until they are formally evicted and become homeless (Dickson 2018). Early action involves proactively supporting families who might be at future risk of crisis, and working with families who approach the local authority for support but who do not yet meet the threshold for Section 17 support. This might be through commissioning additional family support services, lowering thresholds, or simply referring to another agency for timely immigration advice.

(R) Rights anchored

The global definition of social work characterises social work as a rights based profession (IFSW 2014), and Healey (2008) notes the ways that even prior to the adoption of the Universal Declaration of Human Rights, social work leaders were involved in movements and campaigns for human rights. Nonetheless, Healey contends that social work has more commonly focused on needs rather than rights (Healey 2008). In a context where migrants are often denied their rights (Dembour & Kelly 2011), social work practice which is anchored in a human rights perspective becomes particularly pertinent. Mapp et al. (2019) argue that rights-based approaches to social work have the goal of an equitable distribution of resources and power, suggesting a change in power relationships for marginalised populations. They contrast this with charity-based approaches and needs-based approaches which either preserve or incrementally change the status quo of power relationships. In order to do this it is necessary for social workers to see service users as 'rights holders' and to "focus on human rights violation rather than individual pathologies" (p.265).

In the context of social work with migrants with NRPF, early action necessarily entails

a focus on helping people to access their rights, for instance to regularise their immigration status. Supporting people to be able to use services they are entitled to, such as healthcare is a key task for early action approaches with this user group. However, rights anchored practice implies not just helping people on an individual level to secure their rights once they have been threatened, but advocating for change to policy at a structural level to prevent rights being violated in the first place.

(S) Strengths based

Strengths based approaches in social work have their origin in case management for people with severe mental illness in the 1990s, but have since been more widely applied across social work contexts (Saleebey 1996). The approach is contrasted with the 'pathological model' of individualised, medicalised, psychosocial interventions, which focus on a person's deficits or impairments, rather than their abilities and potential. Despite the wide acceptance of strengths based approaches in social work, they have not always been adopted in practice, and instead services have sometimes had a focus on 'helping people to change' rather than supporting strengths (Staniforth, Fouche & O'Brien, 2011).

To apply strengths based approaches to work with people subject to the NRPF rule would mean acknowledging the strengths, skills and resources that migrant families possess (what Sharma and Marsh (2018) describe as 'self-empowerment') as well as the resources contained in the wider community – the networks of mutual aid and support, and the 'hospitable environments' which support and sustain families and protect against wider societal hostility.

(P) Partnership led

Partnership working has been used in a variety of contexts, and is sometimes associated in the UK with a promotion of collaboration and joint working between the NHS and local authority social care services (Lymbery 2005). However, partnerships can be ineffective when there are uneven power relationships between partner organisations, where there are unclear or undefined benefits to service users, or where partnerships are led by senior managers and the practicalities on the ground are not established (Dickinson and Glasby 2010). There is a wide acknowledgement that 'joined up working' presents better outcomes and value for money, although this is not always backed up by evidence (Glasby, Dickinson & Miller 2011), however, Petch, Cook and Miller (2014) identify that some elements of partnership working improved outcomes.

Partnership working between agencies can be hindered when there is a financial conflict leading to antagonism. For instance, in delayed discharge 'cross charging' in acute hospital care (Henwood 2006), and in NRPF services where third sector advocates may take legal action to challenge unlawful local authority decisions (Birmingham City Council 2013). Traditionally, children's NRPF services have been characterised by suspicion between local authority services and voluntary sector advocates. This lack of partnership has clearly led to poorer outcomes where the value of voluntary sector advocates has not been valued. Learning from Serious Case Reviews indicate that practitioners should be aware of the migrant support agencies in their area and involve them in care planning and support (Perry 2018).

There is also an additional meaning of 'partnership' - beyond partnership of agencies to partnership with service users, where relational working is used to work for common goals, based on trust, negotiation and co-creation (Holt and Kelly 2018). These ways of working are deeply resonant with

social work values of collective responsibility (IFSW 2014) but are in contrast to efficient, time limited interventions. Working in partnership with children and families in a democratic way is contrasted with a reductionist view which narrowly focuses on child protection at the expense of a wider understanding of child welfare (Roose et al. 2012). Partnership with service users is an under theorised area, with definitions varying from mere consultation with service users, to active participation in shared action (Taylor and Le Riche 2006). In practice within an NRPF context, a partnership approach should involve user participation on the steering group or management committee, and a collaborative approach to goal setting with families, who might have different priorities than services themselves.

(E) Evidence-informed

The global definition of social work describes social work as both a practice profession and an academic discipline which is "underpinned by theories of social work, social sciences, humanities and indigenous knowledge' (IFSW, 2014). 'Evidence-based practice' has been defined most simply as 'intervention based on the best available science.' (McNeece and Thyer 2004). Evidence-Based Practice (EBP) has its roots in medicine where medical students were taught critical assessment skills to strengthen the use of scientific evidence in medical practice. However it has since been applied in other contexts including social work (Mullen, Bledsoe and Bellamy, 2009). Evidence-based social work practice has been criticised as being based on a deterministic view of rationality and detached facts which are divorced from processes, and do not take account of reflexivity or context (Webb 2001). Some scholars see a danger in the wholesale moving of assumptions from natural sciences to social interventions, and the privileging some forms of evidence such as Randomised Controlled Trials over other, more contextual sources of evidence. There is also criticism of a lack of inclusion of service user perspectives in some versions of evidence based practice, and understanding of the influence of the practitioner themselves, their values and ideas in the intervention and evidence from practice is sometimes undervalued (Gilgun, 2005).

Nonetheless, the need for an evidence base in social work practice, and the ability to question why, and on what evidential basis something is being done is vital to good social work practice. Without an evidence base, there is a danger of resorting to unexamined 'common sense', tradition, or appeals to authority (McNeece and Thyer 2004). The issue therefore is not so much whether there should be an evidence base, but what sort of evidence is valued and accepted as a basis for practice.

In the case of social work with families who have NRPF, the issue is particularly acute. There is currently little research evidence for social work with families with NRPF, and there is a need for more research using different perspectives to promote and understand best practice, to empower social workers with range of tools and understandings to improve outcomes for children.

Social work practice in the field of NRPF should therefore aspire to be' evidence-informed', a concept which is more comprehensive than evidence-based practice, and which recognises different forms of knowledge and evidence, not privileging one particular source (Neveo and Slonim-Nevo 2011). Evidence can be contradictory, unavailable or inconclusive (Gilgun 2005), and needs to be critically reflected on, and interpreted. Therefore there is a need for NRPF practice which excludes unexamined prejudice or assumptions (particularly around hostile approaches to immigration which are not child centred), but which acknowledges different theoretical perspectives, from academic research evidence, to practical experience and user perspectives.

(C) Compassion grounded

Social Work England's consultation on the updated rules and standards for social workers in England found that people with lived experience of social work and young people valued compassion as one of the key features of a good social worker (Social Work England 2019). Similarly, Sinclair et al. (2016) found that palliative patients valued compassion over sympathy - which was seen as based on pity, and empathy - which did not imply observer action.

Compassion, literally 'to suffer with others' (Tanner 2020), has both an affective component, and behavioural component, implying an action in response to the suffering of others (Tanner 2020). Much has been written about compassion fatigue in social work (Harr et al. 2014). However, Radey and Figley (2007) note that there are factors which promote compassion: satisfaction, including positive affect, inner resources, and self-care. Nonetheless, compassion has been rarely addressed in the social work literature (Tanner 2020).

The consequences of a lack of compassion in social work services is particularly acute for people with NRPF. Dickson (2018) writes of examples of hostile attitudes from local authority NRPF children's services towards those who approach them for support, giving examples of what service users described as intimidation, aggression, and disrespect. Farmer (2020) talks of the way that social workers have been drawn into the logic of immigration control in their stigmatising responses to 'illegalised' migrants. Humphries (2004) sees social work as complicit in implementing immigration policies which are both degrading and inhuman. For social workers to practice in a compassionate way with migrant children, the lack of compassion in service delivery should be addressed so children are treated as 'children first, and migrants second' (Crawley 2006).

(S) Structurally aware

Ornellas, Spolander and Engelbrecht (2018) suggest that there has been a movement away from 'micro' approaches and understandings of social inequality in social work towards 'macro' perspectives, which engage with structures of power, as well as individual need, and the IFSW Global definition of social work includes a call to engage with 'people and structures' (IFSW 2014). Nonetheless, structural approaches which engage with practice on a macro level are not commonly used in social work in a UK context (McBeath 2016). McBeath argues however, that tasks such as policy work, community development and organisational leadership were considered as social work tasks by welfare state pioneers, and can and should be re-envisioned for the 21st century.

Many of the challenges facing people with NRPF are rooted in policy decisions, and therefore approaches to safeguarding their welfare need to take account of macro and structural constraints. For instance, decisions about when the NRPF rule should be applied in certain contexts (or if the rule should exist at all) have a large impact on the prevalence of destitution and child poverty, but are policy decisions based on the needs of immigration control rather than on child welfare, and are therefore legitimate areas for the social work profession to campaign on.

When using an individual casework approach at a micro level, even if a social worker can not change the policy context in which they are embedded, the elements of a family's situation which are structurally caused and those that are a result of individual factors should be examined and understood. For instance, neglect can operate on the more familiar individual, micro level, where a parent or caregiver can persistently fail to meet a child's basic physical and/or psychological needs

(HM Government 2018), but children can also experience the symptoms of neglect due to policies and legislation which persistently fail to meet a child's basic needs. If the difference between the different causes of neglect is not understood, inappropriate interventions might take place. A child who does not have access to adequate food or accommodation because they live in a family who have been barred from accessing homelessness assistance or social security benefits by government policy under the NRPF rule might present very similarly to a child where the parent or carer was preventing. However, the cause - and therefore the solution - might be very different for situations of 'statutory neglect' (Jolly 2018).

Conclusion

Although processes of bordering and immigration control apply internationally, the specific mechanisms, legislation and processes are often rooted in an individual nation state. Therefore, the specific nature of the NRPF rule will not apply in different national contexts. However, as an international profession, the need to respond to the statutory neglect that migrant children and families face, and develop an anti-oppressive, human rights anchored social work practice is common to all social work practice contexts. The PERSPECS principles of early action provide one way of achieving this, as a set of standards for action which can be referred to in practice in different contexts to ensure ethical social work with migrant children in a given context.

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The 'PERSPECS' principles: early action and migrant children with no recourse to public funds

Abstract

Purpose

This article makes the case for early action approaches with migrant families, introducing a set of principles for practice, mapped against the Professional Capabilities Framework (PCF) for social work and the Social Work England Professional Standards.

Design/methodology/approach

The article first explores the context of social work with migrant families, outlining the challenges and gaps in our conceptual understanding of this work. The article then introduces a conceptual model of work with migrant families by drawing on the literature from social work and allied professions, and informed by social work values and ethics.

Findings

Current social work practice with migrant children has been criticised as defensive, procedural and lacking a coherent conceptual basis, particularly for those who are subject to the no recourse to public funds rule. This field of social work practice would benefit from an evidence informed model of practice, anchored in human rights approaches and focused on early action. Eight principles, drawn from existing good practice in other social work and social care contexts are outlined as a basis for a new model of practice in migrant social work with migrant families.

Originality

In recent years there has been an increased interest in research about the no recourse to public funds (NRPF) rule and its negative impact on children. The NRPF rule is a provision in the immigration rules which prevents people who are subject to immigration control from claiming most social security benefits in the UK. In recent years there has been an increased interest in research about the no recourse to public funds (NRPF) rule and its negative impact on children. However, there is currently no evaluated model of social work practice for children and families with NRPF.

Keywords:

no recourse to public funds; early action; statutory neglect; migrant families

Introduction

The no recourse to public funds (NRPF) rule is a provision in the UK Immigration rules preventing people who are subject to immigration control from claiming a list of social security benefits (UKVI 2014). The rule was first established in the Immigration Act 1971, but has been repeatedly expanded in scope to <u>now</u> include most temporary migrants to the UK. Its most recent extension was in 2012 to include families granted leave to remain in the UK on human rights grounds (Dickson and Rosen 2021).

NRPF can be seen as an example of everyday bordering (Yuval Davis et al. 2018) where members of the general public and health and welfare professionals alike become part of the process of policing access to services based on immigration status. However, restrictive policies such as the NRPF rule are neither new, nor restricted in scope to the UK, being part of an international trend towards conditionality in social policy (Greve 2020). In a British context, the NRPF rule can be seen as part of a long history of debate about access to social welfare for non-citizens, dating back to debates about whether refugees from the Napoleonic wars should be entitled to access parish poor law relief (Webber 2012). The NRPF rule also has echoes in welfare chauvinist policies in other countries, such as the public charge rule in the USA which was first introduced in the Immigration Act 1882 to prevent people from entering the country who were likely to be unable to take care of themselves independently without recourse to public assistance (Hirota 2013). The NRPF rule contributes to racialized othering (Jolly et al. 2021), as it disproportionately impacts on people of colour. According to Smith et al. (2021) people of colour make up 78% of the population with NRPF.

There are no official data on the number of children and families who have NRPF, however, Citizens Advice suggest that there are 329,000 migrants in the UK with dependent children who are subject to the rule as part of the conditions of their leave to remain (Smith et al. 2021). There are also an estimated 215,000 undocumented migrant children in the UK who have NRPF (Jolly et al. 2020). Data from the Home Office reveal an eightfold increase in applications for suspensions of the NRPF condition between the first and second quarters of 2020 (Home Office 2020). For people who are subject to the NRPF rule, lack of access to social protection can increase the risk of poverty and food insecurity (Jolly 2022), particularly for those who do not have the right to work in the UK because of their immigration status (Farmer 2020). This frequently results in destitution, defined by the Immigration and Asylum Act (1999) as the state when someone:

• does not have adequate accommodation or any means of obtaining it (whether or not their other essential living needs are met) or;

• has adequate accommodation or the means of obtaining it but cannot meet their other essential living needs (Home Office 2021)

One of the few statutory welfare entitlements for children with NRPF is 'child in need' support under Section 17 of the Children Act (1989), giving <u>local authority</u> social workers a central role in the welfare of destitute families with NRPF. In 2011, a survey of 51 local authorities found that 6,500 people with NRPF were being supported (Islington 2011), and in 2015, a survey of 174 local authorities in England and Wales found that 2,679 NRPF families and 4,644 children were receiving support as children in need. Section 17 support for families with NRPF costs local authorities an estimated £25 million a year in London alone (Rowney 2015), and an estimated 61 percent of families with NRPF who were supported under section 17 were in London (Price and Spencer 2015). There is evidence that numbers of families supported under section 17 is growing, and numbers of referrals of people with NRPF to local authorities increased sharply during the early stages of the Covid-19 pandemic (Dickson et al. 2020).

The NRPF rule should also be seen in a wider context of child poverty in the UK. It is likely that only a minority of families with NRPF experience destitution, but children from Black and minority ethnic groups are more likely to experience poverty than white British children, and children with NPRF were not able to access the £20 uplift to Universal Credit during the pandemic which contributed to a reduction in child poverty overall in 2020/21 (Stone 2022). There is also increasing evidence of a link between household income and prevalence of abuse and neglect Research by Bywaters et al. (2022) suggests that reductions in income increase the extent of neglect and abuse, while improvements in income reduce them. They conclude that local authority children's services often take insufficient account of the socio-economic circumstances affecting families, and that more information about how poverty is influencing the numbers of children from different backgrounds being harmed is needed.

Social work with families subject to NRPF

Unlike other fields of social work practice, there is no statutory guidance for local authorities on support for people with NRPF. However, the NRPF Network provide a range of resources for local authorities (NRPF Network 2021), and third sector agencies such as Project 17 provide training for social workers (Project 17, 2013). There is also comparatively little research on best practice with children and families who are subject to the NRPF rule,... Howeverbut, evidence suggests that section 17 subsistence support rates are sometimes too low to alleviate poverty (Jolly 2018), and housing provided under section 17 is frequently inadequate to meet children's needs (Threipland 2015). **F**<u>R</u>esearch indicates that local authorities have sometimes responded to the cost of supporting</u> families with NRPF through 'gatekeeping' practices (Dickson 2019), such as Lewisham's 'robust front door' policy (Jolly 20189). Instead of intervening early to prevent families from becoming destitute in the first place, families are sometimes refused support until a crisis (Farmer 2017). For instance, the common practice of conducting eligibility screening before beginning an assessment of need can act as a barrier to providing early help, with families needing to prove both their immigration status and that their needs arose within the local authority area, before assessment can commence. This can be difficult to prove especially for families who are homeless or vulnerably housed. As a result, up to 67% of referrals are initially refused in some local authorities (Jolly, 2019; Dexter et al. 2016), and in one West Midlands local authority, only 8% of referrals resulted in provision of support without some form of intervention or advocacy such as the threat of legal action (Birmingham City Council, 2013).

More fundamentally, although section 17 is primarily used as a means to reduce destitution through provision of subsistence support and/or accommodation for families with NRPF, the definition of a child in need is much broader and more holistic than the definition of destitution in Immigration law. A child is in need if they are: "unlikely to achieve or maintain a reasonable level of health or development, or whose health and development is likely to be significantly or further impaired, without the provision of services; or a child who is disabled." (HM Government, 2018, p.22). The Working Together (HM Government, 2018) guidance also suggests a broader scope than preventing

destitution, stating that the child in need assessment process should be multi-agency, should 'include a child's wishes and feelings' and should 'set clear measurable outcomes for the child and expectations for the parents. The plan should reflect the positive aspects of the family situation as well as the weaknesses.' (p.38).

One of the challenges for social work with families who are subject to NRPF is that, far from protecting children, the NRPF rule and other 'hostile' immigration policies are designed to discipline families who are seen as an undesirable presence in the country, to encourage them leave the UK and to not 'burden' the public purse (Farmer 2020; Dickson and Rosen 2020). This can result in acute tensions between social work's ethical obligation to promote human rights and social justice (IFSW 2016) and the everyday reality of social work practice with migrant families (Jonsson 2014).

The death<u>s</u> of two year old Lynne Mutumba and her mother Lillian Oluk provide an example of the ways in which families with NRPF can slip through safety nets designed to safeguard child welfare. The family were found dead of apparent starvation in their Kent home while being supported under section 17 of the Children Act <u>1989</u>. The subsequent serious case review concluded that far from a failure of individual professional practice, most agencies performed as was expected of them. However, the review concluded that:

"lawful and efficient responses are not always enough to compensate for the very particular vulnerabilities of the extremely marginalised group represented by those who have no recourse to public funds." (Smith, 2018)

Situations where individual workers and agencies act according to policy and procedure, but are not able to counteract the vulnerablising (Lind 2019) effects of the NRPF rule can result in children experiencing situations which would be considered as neglect if as a result of action by a parent or carer (Jolly 2018). This 'statutory neglect' creates both practical and ethical difficulties for social workers who have professional obligations to "promote the rights, strengths and wellbeing of people, families and communities." (Social Work England 2020).

In the presence of these contradictions, it is vital that at the level of individual practice, social workers develop critically reflective practice which acknowledges these tensions, and at a service level services should take account of these structural constraints on child welfare.

This paper sets out a conceptual framework for good practice with families who are subject to the NRPF rule, using the principles of early action, and applying good practice from other fields of social work to support migrant families, benchmarking these principles against the PCF and Social Work England professional standards.

An Early Action approach might provide a way to deliver more effective support to families with NRPF, by preventing families from becoming destitute, rather than responding to the effects of destitution. The structural factors of everyday bordering discussed above cannot be completely removed by more proactive practice, however, structural constraints can be identified and acknowledged, allowing mitigating factors to be explored in partnership with children and families.

Early Intervention and Early Action

Early intervention refers to a range of activities designed to improve a young child's development, based on an assessment of the strengths and needs of children and the family, where support and services are provided and regularly reviewed as the child develops (Ramey and Ramey, 1998). Early intervention (or early help) is also used in a broader sense to refer to interventions beyond the early years, where support is provided at any time in the life course to prevent a later crisis occurring. For instance, the Early Intervention Foundation (EIF) defines early intervention as: "identifying and providing effective early support to children and young people who are at risk of poor outcomes." (EIF 2020). Such crisis prevention approaches are sometimes labelled 'early action', and are used beyond children and families services to other contexts, such as the criminal justice sector (Community Links, 2011, p.3).

The efficacy of early intervention is well evidenced, and statutory guidance in each of the four UK nations highlights the importance of intervention with children before crises develop (Department for Education, 2018; Welsh Government, 2018; Department of Health, Social Services and Public Safety, 2017; Scottish Government, 2014). Early intervention with families in poverty has been shown to lead to sustained positive effects on intellectual development and academic achievement in preschool children (Campbell & Ramey, 1994), improvements in both short term IQ, and long term effects on educational achievement, grades, special educational placements, and social adjustment (Barnett, 1995). Conversely, a failure to intervene early can lead to long term negative outcomes, and acute 'late intervention' services cost nearly £17bn per year (Chowdray and Fitzsimmons, 2016).

More recently, early intervention approaches have been used in the refugee and migrant sector by Refugee Action to reorientate services away from providing 'end of line' crisis support following a refusal of an asylum application. Instead, in the Early Action approach adopted by Refuge Action and partners, support is provided when people first arrive in the UK in the form of immigration, housing and welfare advice, and befriending and orientation support (Asylum Early Action 2021). Initial indications are that organisational redesign to incorporate early action principles and develop services which focus on early action can contribute to reduced crises for users of these services (Thomas & Jolly 2020).

Early intervention approaches have also been criticised, particularly those which are based on interventions with pre-school children. For instance, Featherstone, Morris and White (2014) argue that approaches which focus on quick, decisive interventions with under 3's are based on a misuse of neuroscience and can be harmful. Early action intervention approaches can also sometimes be narrowly focused on saving money, see for instance, the Early Action Taskforce's concept of the triple dividend, where early intervention is justified by a post-financial crash-concern with deficit reduction:

"Early action isn't only cheaper than later action and important for social wellbeing; it helps to reduce the deficit and to increase growth. A population that is 'ready for everything' contributes more, public spending goes down and growth goes up: thriving lives, costing less, contributing more." (Community Links 2011).

Gray (2014) argues that such approaches risk moving the prime focus away from helping people towards saving money as an end in itself. Gray suggests that these approaches have their roots in

the social investment concept promoted in the UK by New Labour– where social democratic 'tax and spend' approaches were replaced with targeted means tested programmes, and neoliberal ideas of personal responsibility and worker discipline were promoted. For Gray, this approach is particularly pernicious when applied to child protection settings, where early intervention to remove children may come to be seen as preferable to intensive long term work with families to address needs. To differentiate from this approach, Gray prefers the terminology of 'early help' than early intervention, which he argues allows for a focus on family support to be retained.

Finally, the concept of early intervention has been criticised for an excessive focus on family functioning rather than systemic issues which could improve community life as a whole- Churchill and Fawcett (2016) give the example of an early intervention programme in New South Wales, Australia. There were significant beneficial changes for children as a result of the programme, however, because the programme was implemented in a neoliberal context with a focus on both outsourcing of state services, and cost effectiveness, elements of the programme which were expensive, such as public consultations, community mapping and staff professional development were never implemented (Churchill and Fawcett 2016).

In summary, tThis article will use the term 'early action' in preference to 'early intervention' or 'early help' in recognition that the approach suggested in this article does not just apply to early years, but throughout the life course, and is not narrowly focused on an intervention or support from an agency, but the wider community context in which action can take place. In the following section, the principle of early action for migrant families with NRPF is discussed alongside seven other overlapping and mutually reinforcing principles which aim to ensure that early action itself is embedded in an understanding of broader community and systemic factors, rather than as an isolated cost saving measure. Although applying early action approaches are likely to have the additional benefit of being more cost effective to local authorities, this is not in itself suggested as a a core principle of the concept.

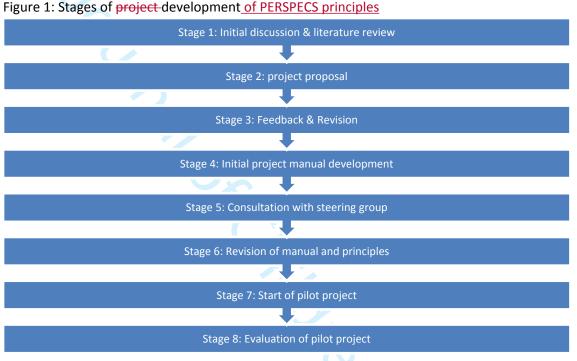
Methods

The PERSPECS principles formed the underlying conceptual basis for the NOREAM Pilot programme in Hackney (Ott et al. 2022, Begum et al. 2021). The NOREAM pilot was a multi-agency and interdisciplinary project which applied the principles of early intervention to local authority NRPF support. The pilot had three operational elements: 1) Strengths and needs assessments with families, including immigration and housing advice 2) Complex Case Consultations to provide expert advice to local authority practitioners 3) and small grants for families to prevent destitution.

However, the principles are designed to be used more broadly and are mapped against both the Professional Capability Framework (PCF) and the Social Work England professional standards. This allows services to benchmark themselves against each principle. Although they were developed in an English practice context, they could also be mapped to relevant professional standards or codes of practice in different national or regional contexts.

The initial project idea was conceived <u>developed</u> in conversation between the author, and the manager of the Hackney NRPF team after identification of the need for an evidence base for NRPF social work. An informal scoping exercise was conducted for evidence on social work practice with

migrants using SCIE's 'social care online' database to identify the principles and assumptions on which NOREAM is based. The full iterative process of programme development is outlined in figure 1. Changes to the principles during the development process include adding human rights as a core value ("Rights Anchored") following feedback from the steering group, and broadening the descriptor of "Structurally Aware" to include structural approaches to child welfare.



The PERSPECS Principles of early Action with NRPF

Social work with people with NRPF has sometimes been seen to operate as in isolation-separate to other fields of social work, with assumptions and values based on immigration control, rather than children's rights (Jolly 2018; Farmer 2017). The following principles demonstrate the ways that existing widely recognised social work principles and perspectives can be applied more consistently to this group of children and families. The aim is to provide a set of principles against which practice can be evaluated, and reflected on, which are rooted in social work values, standards and ethical expectations, rather than anti-immigration rhetoric, or an unexamined 'common sense' hostility to migrants. As such they provide a counterweight to the prevailing policies and trends in practice, and a basis for ethical reflection and action. The eight principles are drawn from commonly used and understood principles of social work practice, and will be familiar to most social work practitioners. However, they have not previously been explicitly applied in social work practice with people who are subject to NRPF, and therefore the implications and complications of this area of social work have not been explored.

The principles form the basis for the NOREAM Pilot programme in Hackney (Ott et al. 2021, Begum et al. 2021), but are designed to be used more broadly and are mapped against both the social work

Professional Capability Framework (PCF) and the Social Work England professional standards. This allows services to benchmark themselves against each principle. Although they were developed in an English practice context, they could be also mapped to relevant professional standards or codes of practice in different national or regional contexts.

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 As a memory aid, the eight principles have been organised into the single use encoding mnemonic 'PERSPECS'. As a mnemonic device, acronyms can assist with memorisation and recall of facts and concepts in a variety of contexts (Putnam 2015). Although recollection of concepts does not in itself imply that the practitioner has engaged with higher order learning skills, or that they will critically reflect in practice, it gives a greater likelihood that the principles will be recalled in practice settings where critical reflection can take place.

Table 1: PERSPECS

Principle	Summary	PCF link	Social Work England link
(P) Person- centred	The paramount responsibility is to safeguard child welfare, and a child's welfare should take precedence over concerns about immigration status. The wishes of children and families should be considered during assessment and service delivery.	PCF Domain 2: Values and ethics; Domain 3: Diversity and equality; Domain 4: Rights, justice and economic wellbeing; Domain 6: critical reflection and analysis; Domain 7: Skills and interventions; Domain 8: Contexts and organisations.	Social Work professional standard 1: Promote the rights, strengths and wellbeing of people, families and communities; Professional standard 2: Establish and maintain the trust and confidence of people; Professional standard 5; Act safely, respectfully and with professional integrity
(E) Early action focused	By intervening earlier before a crisis, better outcomes for children are achieved. This involves proactively identifying future risks of crisis such as destitution, and working with families who approach the local authority for support but do not yet meet the threshold for Section 17 support.	PCF Domain 1: Professionalism; Domain 5: Knowledge; Domain 7: Skills and interventions	Social Work professional standard 1: Promote the rights, strengths and wellbeing of people, families and communities.
(R) Rights anchored	Children and families should not face discrimination, and should be able to access welfare support, education as a right, rather than at the discretion of support services. Children have a right to be consulted on decisions which affect them.	Domain 4: Rights, justice and economic wellbeing	Social Work professional standard 1: Promote the rights, strengths and wellbeing of people, families and communities.
(S) Strengths based	Instead of focusing on the deficits of children and families, the strengths of children and families should be identified and acknowledged. Services should work with them to identify protective factors to prevent crisis, and to build on these factors.	PCF Domain 1: Professionalism; Domain 4: Rights, justice and economic wellbeing; Domain 5: Knowledge; Domain 7: Skills and interventions.	Social Work professional standard 1: Promote the rights, strengths and wellbeing of people, families and communities.
(P) Partnership Ied	Partnership operates on three levels: Partnership between different directorates within the local authority; Partnership between the statutory and voluntary sector where differing organisational perspectives, roles and	PCF Domain 1: Professionalism; PCF Domain 2: Values and ethics; Domain 4: Rights, justice and economic wellbeing; Domain 7: Skills and	Social Work professional standard 1: Promote the rights, strengths and wellbeing of people, families and communities; Professional standard 2: Establish and maintain the trust

	expertise are understood and valued; and partnership	interventions; Domain 8: Contexts and	and confidence of people; professional
	between social workers and families, where the views of	organisations; Domain 9: professional	standard 3: Be accountable for the quality of
	children are central and included in the support process.	leadership.	my practice and the decisions I make;
			Professional standard 4: Maintain my
			continuing professional development
(E) Evidence	Evidence from research and practice is used to improve	PCF Domain 1: Professionalism;	Social Work professional standard 3: Be
informed	outcomes instead of doing things the way they have	Domain 2: Values and ethics; Domain	accountable for the quality of my practice and
	always been done. Practitioners are empowered to ask	5: Knowledge; Domain 6: critical	the decisions I make; Professional standard 4
	questions, and not accept things at face value. In any	reflection and analysis; Domain 8:	Maintain my continuing professional
	situation, practitioners will consider: why am I doing this?	Contexts and organisations; Domain 9:	development; Professional standard 6:
	What is the evidence for this action?	professional leadership.	Promote ethical practice and report concerns
(C)	NOREAM draws on the philosophy of care ethics and a	PCF Domain 1: Professionalism;	Social Work professional standard 2: Establish
Compassion	relational approach based on care and compassion.	Domain 2: Values and ethics; Domain	and maintain the trust and confidence of
grounded	Support is based on building relationships and a ////	7: Skills and interventions.	people; Professional standard 5; Act safely,
	participatory approach where service users are valued		respectfully and with professional integrity
	and included in decisions that affect them.		
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(S)	Child welfare has both individual and collective aspects,	PCF Domain 3: Diversity and equality;	Social Work professional standard 1: Promote
Structurally	and <u>Nn</u> eglect can operate on the micro-level of families	Domain 4: Rights, justice and	the rights, strengths and wellbeing of people,
aware	and households, but also on the macro level of laws and	economic wellbeing; Domain 6: critical	families and communities; Professional
	policies which are inadequate to protect children.	reflection and analysis; Domain 7:	standard 5; Act safely, respectfully and with
	Migrant children can be particularly vulnerable to	Skills and interventions; Domain 8:	professional integrity
	statutory neglect, and in order to protect children all	Contexts and organisations.	
	levels of neglect must be identified and responded to.		

(P) Person-centred

Person-centred approaches have been widely used in the human services (Waters and Buchanan 2017), including support for people with learning disabilities (Mansell and Beadle-Brown 2003), services for older adults (Brooker 2003) and healthcare contexts (Santana et al. 2017). They have their roots in the Rogerian core conditions of empathy, congruence and unconditional positive regard (Rogers 1959). However, despite being commonly used there is no single definition of what 'person-centred' denotes in a social work context. Nonetheless, Water and Buchannan (2017) identify seven key themes of: honouring the person, being in relationship, facilitating participation and engagement, social inclusion/citizenship, experiencing compassionate love, being strengths/capacity focussed, and organisational characteristics.

In contrast to person-centred approaches, NRPF services have sometimes been characterised as procedural and service driven, or focused on concerns about immigration status and eligibility for support rather than the needs or concerns of the child or family (Dickson 2019, Farmer 2017). In an NRPF context, a person centred approach would first focus on assessing need, rather than immigration status, and would consistently take the interests and opinions of the child into account.

(E) Early action focused

In an NRPF context, there is evidence of families being initially refused section 17 support and later approaching the council again once their situation had deteriorated, with harmful consequences for the family. For instance, Dexter, Capron & Gregg (2016) suggest that 6 out of 10 of families who were referred for section 17 support were refused help. High, or poorly understood thresholds for support can mean that families in rent arrears might be refused support until they are formally evicted and become homeless (Dickson 2018). Early action involves proactively supporting families who might be at future risk of crisis, and working with families who approach the local authority for support but who do not yet meet the threshold for Section 17 support. This might be through commissioning additional family support services, lowering thresholds, or simply referring to another agency for timely immigration advice.

(R) Rights anchored

The global definition of social work characterises social work as a rights based profession (IFSW 2014), and Healey (2008) notes the ways that even prior to the adoption of the Universal Declaration of Human Rights, social work leaders were involved in movements and campaigns for human rights. Nonetheless, Healey contends that social work has more commonly focused on needs rather than rights (Healey 2008). In a context where migrants are often denied their rights (Dembour & Kelly 2011), social work practice which is anchored in a human rights perspective becomes particularly pertinent. Mapp et al. (2019) argue that rights-based approaches to social work have the goal of an equitable distribution of resources and power, suggesting a change in power relationships for marginalised populations. They contrast this with charity-based approaches and needs-based approaches which either preserve or incrementally change the status quo of power relationships. In order to do this it is necessary for social workers to see service users as 'rights holders' and to "focus on human rights violation rather than individual pathologies" (p.265).

In the context of social work with migrants with NRPF, early action necessarily entails

a focus on helping people to access their rights, for instance to regularise their immigration status. Supporting people to be able to use services they are entitled to, such as healthcare is a key task for early action approaches with this user group. However, rights anchored practice implies not just helping people on an individual level to secure their rights once they have been threatened, but advocating for change to policy at a structural level to prevent rights being violated in the first place.

(S) Strengths based

Strengths based approaches in social work have their origin in case management for people with severe mental illness in the 1990s, but have since been more widely applied across social work contexts (Saleebey 1996). The approach is contrasted with the 'pathological model' of individualised, medicalised, psychosocial interventions, which focus on a person's deficits or impairments, rather than their abilities and potential. Despite the wide acceptance of strengths based approaches in social work, they have not always been adopted in practice, and instead services have sometimes had a focus on 'helping people to change' rather than supporting strengths (Staniforth, Fouche & O'Brien, 2011).

To apply strengths based approaches to work with people subject to the NRPF rule would mean acknowledging the strengths, skills and resources that migrant families possess (what Sharma and Marsh (2018) describe as 'self-empowerment') as well as the resources contained in the wider community – the networks of mutual aid and support, and the 'hospitable environments' which support and sustain families and protect against wider societal hostility.

(P) Partnership led

Partnership working has been used in a variety of contexts, and is sometimes associated in the UK with a promotion of collaboration and joint working between the NHS and local authority social care services (Lymbery 2005). However, partnerships can be ineffective when there are uneven power relationships between partner organisations, where there are unclear or undefined benefits to service users, or where partnerships are led by senior managers and the practicalities on the ground are not established (Dickinson and Glasby 2010). There is a wide acknowledgement that 'joined up working' presents better outcomes and value for money, although this is not always backed up by evidence (Glasby, Dickinson & Miller 2011), however, Petch, Cook and Miller (2014) identify that some elements of partnership working improved outcomes.

Partnership working between agencies can be hindered when there is a financial conflict leading to antagonism. For instance, in delayed discharge 'cross charging' in acute hospital care (Henwood 2006), and in NRPF services where third sector advocates may take legal action to challenge unlawful local authority decisions (Birmingham City Council 2013). Traditionally, children's NRPF services have been characterised by suspicion between local authority services and voluntary sector advocates (Begum et al. 2022). This lack of partnership has clearly led to poorer outcomes where the value of voluntary sector advocates has not been valued. Learning from Serious Case Reviews indicate that practitioners should be aware of the migrant support agencies in their area and involve them in care planning and support (Perry 2018Jolly and Gupta 2022).

There is also an additional meaning of 'partnership' - beyond partnership of agencies to partnership with service users, where relational working is used to work for common goals, based on trust, negotiation and co-creation (Holt and Kelly 2018). These ways of working are deeply resonant with

social work values of collective responsibility (IFSW 2014) but are in contrast to efficient, time limited interventions. Working in partnership with children and families in a democratic way is contrasted with a reductionist view which narrowly focuses on child protection at the expense of a wider understanding of child welfare (Roose et al. 2012). Partnership with service users is an under theorised area, with definitions varying from mere consultation with service users, to active participation in shared action (Taylor and Le Riche 2006). In practice within an NRPF context, a partnership approach should involve user participation on the steering group or management committee for Early Action projects, and a collaborative approach to individual goal setting with families, who might have different priorities than services themselves. Although the Working Together Guidance recommends a child centred approach which involves working in partnership with children and their families (Department for Education 2018), in practice this principle is not always applied with children and families (Jolly and Gupta 2022).

(E) Evidence-informed

The global definition of social work describes social work as both a practice profession and an academic discipline which is "underpinned by theories of social work, social sciences, humanities and indigenous knowledge' (IFSW, 2014). 'Evidence-based practice' has been defined most simply as 'intervention based on the best available science.' (McNeece and Thyer 2004). Evidence-Based Practice (EBP) has its roots in medicine where medical students were taught critical assessment skills to strengthen the use of scientific evidence in medical practice. However it has since been applied in other contexts including social work (Mullen, Bledsoe and Bellamy, 2009). Evidence-based social work practice has been criticised as being based on a deterministic view of rationality and detached facts which are divorced from processes, and do not take account of reflexivity or context (Webb 2001). Some scholars see a danger in the wholesale moving of assumptions from natural sciences to social interventions, and the privileging some forms of evidence such as Randomised Controlled Trials over other, more contextual sources of evidence. There is also criticism of a lack of inclusion of service user perspectives in some versions of evidence based practice, and understanding of the influence of the practitioner themselves, their values and ideas in the intervention and evidence from practice is sometimes undervalued (Gilgun, 2005).

Nonetheless, the need for an evidence base in social work practice, and the ability to question why, and on what evidential basis something is being done is vital to good social work practice. Without an evidence base, there is a danger of resorting to unexamined 'common sense', tradition, or appeals to authority (McNeece and Thyer 2004). The issue therefore is not so much whether there should be an evidence base, but what sort of evidence is valued and accepted as a basis for practice.

In the case of social work with families who have NRPF, the issue is particularly acute. There is currently little research evidence for social work with families with NRPF, and there is a need for more research using different perspectives to promote and understand best practice, to empower social workers with range of tools and understandings to improve outcomes for children.

Social work practice in the field of NRPF should therefore aspire to be' evidence-informed', a concept which is more comprehensive than evidence-based practice, and which recognises different

forms of knowledge and evidence, not privileging one particular source (Neveo and Slonim-Nevo 2011). Evidence can be contradictory, unavailable or inconclusive (Gilgun 2005), and needs to be critically reflected on, and interpreted. Therefore there is a need for NRPF practice which excludes unexamined prejudice or assumptions (particularly around hostile approaches to immigration which are not child centred), but which acknowledges different theoretical perspectives, from academic research evidence, to practical experience and user perspectives.

families with NRPF face particular barriers in accessing support services (Farmer 2017, 2021; Dixon, 2019), and are at particular risk of poverty (Jolly 2022), but that local specialist support services can help (Kerr and Watts 2022; Jolly and Gupta 2022). Early action approaches should engage with this research in order to embed the learning into practice.

(C) Compassion grounded

Social Work England's consultation on the updated rules and standards for social workers in England found that people with lived experience of social work and young people valued compassion as one of the key features of a good social worker (Social Work England 2019). Similarly, Sinclair et al. (2016) found that palliative patients valued compassion over sympathy - which was seen as based on pity, and empathy - which did not imply observer action.

Compassion, literally 'to suffer with others' (Tanner 2020), has both an affective component, and behavioural component, implying an action in response to the suffering of others (Tanner 2020). Much has been written about compassion fatigue in social work (Harr et al. 2014). However, Radey and Figley (2007) note that there are factors which promote compassion: satisfaction, including positive affect, inner resources, and self-care. Nonetheless, compassion has been rarely addressed in the social work literature (Tanner 2020).

The consequences of a lack of compassion in social work services is particularly acute for people with NRPF. Dickson (2018) writes of examples of hostile attitudes from local authority NRPF children's services towards those who approach them for support, giving examples of what service users described as intimidation, aggression, and disrespect. Farmer (2020) talks of the way that social workers have been drawn into the logic of immigration control in their stigmatising responses to 'illegalised' migrants. Humphries (2004) sees social work as complicit in implementing immigration policies which are both degrading and inhumane. For social workers to practice in a compassionate way with migrant children, the lack of compassion in service delivery should be addressed so children are treated as 'children first, and migrants second' (Crawley 2006).

(S) Structurally aware

Ornellas, Spolander and Engelbrecht (2018) suggest that there has been a movement away from 'micro' approaches and understandings of social inequality in social work towards 'macro' perspectives, which engage with structures of power, as well as individual need, and the IFSW Global definition of social work includes a call to engage with 'people and structures' (IFSW 2014). Nonetheless, structural approaches which engage with practice on a macro level are not commonly used in social work in a UK context (McBeath 2016). McBeath argues however, that tasks such as policy work, community development and organisational leadership were considered as social work tasks by welfare state pioneers, and can and should be re-envisioned for the 21st century.

Many of the challenges facing people with NRPF are rooted in policy decisions, and therefore approaches to safeguarding their welfare need to take account of macro and structural constraints. For instance, decisions about when the NRPF rule should be applied in certain contexts (or if the rule should exist at all) have a large impact on the prevalence of destitution and child poverty, but are policy decisions based on the needs of immigration control rather than on child welfare, and are therefore legitimate areas for the social work profession to campaign on.

When using an individual casework approach at a micro level, even if a social worker <u>can notcannot</u> change the policy context in which they are embedded, the elements of a family's situation which are structurally caused and those that are a result of individual factors should be examined and understood. For instance, neglect can operate on the more familiar individual, micro level, where a parent or caregiver can persistently fail to meet a child's basic physical and/or psychological needs (HM Government 2018), but children can also experience the symptoms of neglect due to policies and legislation which persistently fail to meet a child's basic needs. If the difference between the different causes of neglect is not understood, inappropriate interventions might take place. A child who does not have<u>without</u> access to adequate food or accommodation because they live in a family who have been barred from accessing homelessness assistance or social security benefits by government policy under the<u>with</u> NRPF rule might present very similarly to a child where the parent or carer was <u>being neglectful</u>, However, the cause - and therefore the solution - might be very different for situations of 'statutory neglect' (Jolly 2018). Where children experience neglect as a result of structural factors, it is important that this is acknowledged by professionals working with the child, and this is not mistaken for parental neglect.

Conclusion

Although processes of bordering and immigration control apply internationally, the specific mechanisms, legislation and processes are often rooted in an individual nation state. Therefore, the specific nature of the NRPF rule will not apply in different national contexts. However, as an international profession, the need to respond to the statutory neglect that migrant children and families face, and develop an anti-oppressive, human rights anchored social work practice is common to all social work practice contexts. The PERSPECS principles of early action provide one way of achieving this, as a set of standards for action which can be referred to in practice in different contexts to ensure ethical social work with migrant children in a given context.

The principles can be used in three ways to inform practice and service delivery. First, as a service level audit tool to assess the extent to which Early Action principles are applied in practice with migrant children; Second, as a developmental tool when planning new services to check that migrant centred practice is applied at the service development stage, and finally as a framework for individual reflection on practice to structure CPD activities for practitioners.

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Reviewer	Comment	Response
Reviewer 1	is there a way to say more about the model and the evaluation, perhaps when speaking about the methods?	A paragraph has been added to explain the NOREAM model on page 6 "PERSPECS Principles of early Action with NRPF" and a link to the pilot evaluation has been added.
	It may also be helpful to set out some of the links to wider child poverty and social care literature (e.g. Bayswater etc).	A section has been added on page 3 "Introduction" contextualising the situation of families with NRPF in the wider literature on child poverty.
	I think it would be useful to emphasise the methods section with a clear sub-heading and to say a little more about the method of analysis used to construct this framework.	A separate methods section has been added with brief explanation of the iterative process of developing the principles and NOREAM project
	Also it's not entirely clear how you narrowed down principles to these ones and whether others were considered/excluded.	A brief description of the changes to the principles is included in the methods section. Initially, seven principles were identified from the scoping exercise, and an eight on Human Rights was included after consultation with the steering group.
	I also wondered whether children in asylum- seeking families have been considered within this approach.	A section has been added to the methods section describing this.
	I wondered if it would be worth saying something about the expanding need for considering children subject to immigration control/NRPF restrictions and the need for social care.	A section has been added to the methods section describing the expanding need to support children with
	My only slight comment here would be to clarify NRPF within the abstract as it won't be obvious to everyone what it means/implications.	A brief explanation of NRPF has been added to the abstract
Reviewer 2	The main one is that the paper would benefit, in my view, from a sharper focus on practice. This would make clearer the relevance of the model to those working with families with NRPF and what this framework offers that differs from what currently happens.	A paragraph has been added on page 3 "Social work with families subject to NRPF" expanding on the practice context and discussing the child in need assessment process and duties under the Working Together guidance.
	1) an outline early in the paper of what happens when NRPF cases come into CIN teams and how they are worked. E.g. what makes it different in terms of what social workers are able to do/not do? And what does it mean to be the only service a family are entitled to, rather than having the narrower remit of being a child-focussed services	I have added a paragraph in the 'Social work with families subject to NRPF' outlining the screening process for families with NRPF, and including some statistics explaining the 'gatekeeping practices' referred to above.

amongst a network of others? You mention this in some places (e.g. P3 lines 14-18 point to gatekeeping processes but these are not discussed in enough detail for the reader to understand how they work)	
 2) in the main section of the paper where you outline the framework, I would have liked some more specificity around how the principles you lay out could generate different types of practice. I was left thinking "these apply to many/most families but I'd like more detail on how they relate to families with NRPF in particular". The structure of outlining the principle and key debates in the first paragraph and then tying it to the NRPF context in the second works well, but I found that the latter parts were somewhat generic. I was hoping for more specific detail on how these principles might translate into better practice e.g do SWs need to be more tied into community support as a practitioner – it probably requires a greater degree of creativity because your normal routes of referral to other services are not open. Or a shift in mindset that these families need to be worked with differently rather than pigeonholed as a category of family that are difficult to help? 	I have added some more specifics for each of the principles to relate them to NRPF.
Suggestion two: a more developed conclusion As it is written, the paper peters out somewhat with a very brief conclusion. Without the detail described above on practice and more specific implications for families with NRPF, the framework feels somewhat "pie in the sky". This is particularly acute given the current context social workers and families are operating in. I understand that it is designed to be a starting point in terms of future evaluations and benchmarking, so I'd really like to read more in the conclusion about how the framework might be used going forward, next steps, and how you would expect social workers/their managers to use it.	I have extended the conclusion and added three suggestions for how the principles could be used in practice.
Suggestion three: sections that could be removed/edited down Given I've suggested additions above, I wanted to suggest areas where the word count could be cut down	The paragraph on the mnemonic has been shortened, and the section on early help v early action has also been shortened.

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somewhat in case these are useful. The section	
on legislation at the start could be more	However, I have left the legal
succinct in my view e.g. I don't think we need	definition of destitution in, because
the legal definition of destitution to	there is a current debate about how
understand your points in this paragraph.	to define destitution, and the word
Similarly, the section on early help vs. early	is used in a wider sense to describe
action felt longwinded. I think the paragraph	anyone in extreme poverty (See, for
on the mnemonic (p.6) is over explained and	instance, the JRF definition of
could be reduced to a sentence.	destitution). It is therefore
	important to confirm that it is the
	narrower legal definition of
	destitution, which is specific to
	immigration law that I am referring
	to.
Other specific edits:	These have been amended
 P4 line 53 apostrophe typo 	
- p.13 there is a typo lines 7-11	

Continuity planning

Stability

And sustainability

Development and growth

PSWEG

Continue, growth stragetic – esploring level 7 aprenticeships. Step up to social work etnder.

Services

5.12