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Integrating Objects of Intervention and Organizational Relevance: The Case of Safeguarding Children Missing from Education Systems

'Identifying the object of intervention and altering frames of organizational relevance'

'To steer diverse professionals involved with their lives down a more individually relevant path'

At the early stages of the development of integrated services, a study that examined the views of children and their carers on being missing from education is drawn upon to highlight two key issues that connect with the integration agenda: identifying the object of intervention and altering frames of organizational relevance. It is argued that if the proposed national outcome framework for England is to be meaningfully achieved (being healthy, enjoying and achieving, making a positive contribution, staying safe and achieving economic well being) within new service configurations, children's problems can no longer be fragmented into objects of organizational or professional expertise. Organizational relevance must adjust to enable the service user's (in this case children's, young people's, and their parents'/carers') framing of problems to be communicated, heard, and responded to. Three cases are presented for illustrative purposes, which show (i) the continued fragmentation of the service user's problem into objects of organizational relevance and (ii) the impact of this fragmentation on outcomes for children. Following presentation of the cases, a policy discussion is offered, which highlights a number of factors that undermined agencies' efforts to offer a joined-up and holistic service in this particular local context. The study draws links between this particular local context and issues of national relevance and concludes that, for the families in this study, problems presented to agencies continued to be framed according to organizationally relevant concerns and practical realities. This process occurred in spite of efforts by children, young people, and their parents/carers to steer diverse professionals involved with their lives down a more *individually* relevant path. Copyright © 2006 John Wiley & Sons, Ltd.

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The Children Act 2004 was broadly welcomed, and heralded what one local authority has described as 'the most radical move since the 1948 Children's Act, a very positive step' (http://www.everychildmatters.gov.uk/resources-and-practice/search/EP00031). The Act and the green paper preceding it, *Every Child Matters* (Department for Education and Skills, 2003), were directed at reducing risk and promoting better outcomes for *all* children. However, the impetus for its implementation was undoubtedly crystallized by the report of Lord Laming on the death of Victoria Climbié (Parton, 2005). Building on almost three decades of policy and practice that promote interagency working to safeguard children, the Act makes new organizational arrangements that transform procedural guidance into a statutory framework. Across all local authorities senior management teams have been reconfigured following the Act's requirement that every top-tier or unitary local authority in England appoints a director of children's services (DCS) and designates a lead member for children's services. At the same time, under the powers of pooled budgets provided by the Act, children's trusts (or their equivalent) are in the process of being established.

The DCSs are accountable for the delivery of education and social service functions for children, and any health functions for children delegated to the authority by an NHS body. The Act allows authorities flexibility over the organizational arrangements, but all authorities should have a director in place by 2008 (http://www.everychildmatters.gov.uk/strategy/dcsandlm/). The role combines, within a recognized organizational structure and legal framework, the two key strands of policy in relation to children progressed by the government since 1997. The first is that of safeguarding children and the second that of reducing social exclusion. Integrating children's social services under the same framework as children's educational services is one possible method of improving outcomes for all children and tackling these two policy priorities. Reconfigured services aim to promote effective, earlier identification of children's additional needs and to ensure a more holistic response via improved mechanisms for effective multi-agency working (DfES, 2003).

At the early stages of this development, we draw on recent research to propose that services require more than legal and organizational integration in order to address these two key issues (safeguarding and social exclusion) holistically. A study which examines the views of children and their carers on

> *'The Act makes new organizational arrangements that transform procedural guidance into a statutory framework'*

'Competing "objects of intervention" are articulated in the research interviews'

children missing from education will be drawn on to consider two fundamental issues that should underpin the integration agenda: identifying an integrated object of intervention and altering frames of both disciplinary and organizational relevance. The former concept derives from work in organizational theory that identifies 'objects' of health organizational activity for topics such as diabetes (Engeström and Blackler, 2005). This is extended by exploring the way in which competing 'objects of intervention' are articulated in the research interviews, including such things as securing workable education solutions versus allocating a school place, finding a safe place to stay versus pursuit of a criminal case, and a daughter's well-being versus an offer of accommodation.

Overview of the research

The aim of the research project from which this paper is derived was to understand the reasons why children go/are missing from the education system in a local authority with multiple problems including high levels of temporary housing, lower than national average levels of life expectancy at birth, 12 of the worst wards in Britain measured by average gross density of population, the most affected area in the region for alcohol related deaths, and which scores third highest on the index of deprivation (2004) for the region. The project involved interviewing professionals (education welfare officers, social workers, and LEA staff), children who had gone missing (13 boys and 11 girls), and their parents/carers (31 mothers, three fathers, and two male carers). Data was collected between November 2002 and June 2003. The local authority in question had pioneered a system for the identification, tracking, and referral of children missing from school and had established a system designed to facilitate a multi-agency and co-ordinated response to the needs of these children and their families. In this paper, we draw on selected case studies for illustrative purposes; however, the cases and the issues we have chosen to focus on reflect consistent findings across the data set. For a full account of methodology, background to the research, and findings see the work of Broadhurst *et al.* (2005).

'we draw on selected case studies for illustrative purposes'

The participants and their 'objects of intervention'

Despite the research context being a focus on children missing from education, almost all of the parents and children we

interviewed faced serious disadvantage and difficulty, much of which was precipitated by domestic violence or family breakdown, homelessness, and poverty. The largest proportion of those interviewed were mothers and their children who had fled domestic violence and experienced multiple and compounding difficulties. Downward social mobility associated with domestic violence due to compounding factors such as homelessness are well documented (Watson and Austerberry, 1986; Bull, 1993; Cramer, 2005). Despite the multiple problems the families faced, all the parents and carers in the study maintained and reported a steadfast commitment to promoting the welfare of their children as *their* primary object of intervention. Given the context of their lives, these parents and carers focused on keeping children safe from violence, often in poor neighbourhoods, refuges, hotels, and hostels, and promoting positive developmental outcomes for their children with very limited resources. The object of getting the best outcome for their children was present in all cases, although how this was to be achieved was an *individual* matter.

Unfortunately for both children and adults alike, the participants in the study reported that professionals they called on for help either failed to share their views about how intervention should be organized or were unable to offer the response that was required due to organizational relevancies such as bureaucratic and resource constraints. Since problems were fragmented according to organizationally relevant concerns, this resulted in the participants reporting that their attempts to secure positive outcomes for children were frustrated. The purpose of this paper is to illustrate, via three case examples, the *detail* of how this fragmentation occurred, with a view to offering insights that are relevant for policy and practice development. Whilst three cases are outlined, the key finding that we discuss, the service users' unsuccessful attempts to secure their 'objects of intervention', was a common theme throughout the narrative accounts in the larger data-set. Again, our earlier paper provides a fuller account of findings from the larger sample (Broadhurst *et al.*, 2005).

'The object of getting the best outcome for their children was present in all cases'

Case example 1. Object of intervention: 'securing schooling close to home'

A mother reported that she had moved to Authority X in order to escape domestic violence and to draw on support from a network of relatives. Upon arrival in Authority X, the mother was supported by a women's refuge, which she described as understanding her 'problems' and which supported her to find

'Concerned that her daughter's panic attacks would prevent her travelling any distance independently to school'

accommodation. During this period of acute disruption, the eldest daughter in the family (aged 14) had spent a period out of school. Some 2 months later the mother made contact with the schools admissions service and requested that the child be enrolled in a school that was closest to the family's accommodation. Her request was rejected and she appealed against the decision. The mother was concerned that her daughter's exposure to trauma and subsequent social dislocation had caused her significant psychological problems. She was concerned that her daughter's panic attacks would prevent her travelling any distance independently to school:

> *Mother*: I appealed for school M, cos that was the closest to us at the time.
> *Interviewer*: Where were you living then?
> *Mother*: Area B; I appealed for school M but we lost the first appeal, so she didn't get a second appeal till January; the appeal failed. They gave her a school as far out as you could think of—school T . . . She went for one day, attempted to go for at least a fortnight, but she was throwing up, it was the distance she was having to travel and the fact of a strange town (int. A).

Because of the appeal process, the girl in question had spent four and a half months out of school. Her first day in school T was so anxiety provoking that she subsequently dressed for school for a fortnight but was not able to get on the school bus. Following her daughter's unsuccessful attempt to travel to school T, the mother then decided to apply for a place at school B, where the girl's aunt worked as a learning assistant:

> *Mother*: I said 'right then you are not going to school T anymore, forget it', so my sister phoned the education up and school B. We thought we would try there with my sister working there, she is a learning assistant. We rung the school up every day and we rung education up every day, nearly, it was always they were going to get back to us. It was one phone call on the mobile and one on the phone and I checked every day . . . Then she (ESW) rung me up not last week, the week before, threatening me with court action and this, that, and the other . . . (int. A).

'The school's admission service in authority X did not share either the mother's or the child's framing of the problem'

The school's admission service in authority X did not share either the mother's or the child's framing of the problem. Located in an area where secondary schools were already significantly over-subscribed, the admissions service was accountably concerned with filling vacancies and ensuring a rational distribution of children between schools according to number. Where any account was taken of family ties, this only stretched to sibling groups, thus the relationship between the child in

question and her aunt fell outside organizational relevancies. For the mother in question and her daughter, the admissions service's response to the child compounded their difficulties (the mother became subject to a court order), with the mother claiming that the service failed to see or understand the child's needs. The child remained out of school.

Case example 2. Object of intervention: 'finding a safe place to stay'

In the following case a girl (now aged 17) reported that she had been forced to live with her father at the age of 14, following the separation of her parents. Her mother went to live with her new partner, where conditions were already overcrowded and there was no space for her. Her father had a drink problem, and, whilst she enjoyed a good relationship with her father when he was sober, when he was drunk he would become frustrated by aspects of her behaviour and hit her. At the age of 14, she turned to social services for help, because she had nowhere to go to escape her father's behaviour. Her 'object of intervention' was simply to find somewhere else to live. She did not want to fall out with her father. For the social services, organizational relevancies to do with safeguarding children framed the girl's request for help. This resulted in intervention meted out in the form of a child protection investigation.

> *Girl*: I went to social services and they just kept asking questions and annoying me . . . I know that they ask questions, but they were just getting on top of me, if you know what I mean (int. P).

The girl described her immediate problem as having 'nowhere to go'. She could not stay long-term at her mother's flat and she could see no alternative,

> *Interviewer*: So why didn't you stay with your mum?
> *Girl*: Because I was on the settee, I didn't want to stay on the settee for the rest of my life (int. P).

Social services offered to assist her to prosecute her father, but she rejected this help; it did not sort her problem of having nowhere to sleep, and instead she went to live with her sister in London who had 'a spare room':

> *Girl*: they wanted to know if I wanted to press charges against my dad, I did but I didn't if you know what I mean. I didn't want all the hassle of them asking me questions so I just left it and went to London . . . , my

'For the mother in question and her daughter, the admissions service's response to the child compounded their difficulties'

'Her "object of intervention" was simply to find somewhere else to live'

'Social services offered to assist her to prosecute her father, but she rejected this help'

sister had a spare room . . . but I wish I had stopped in (X town) and stayed in school (int. P).

That the girl went to live with her older sister and was away from her father's maltreating behaviour may have been interpreted as a successful outcome from the perspective of social services. Certainly her actions prompted the closure of the case. How problems are framed (in this instance risk of physical assault) determines both the starting point for intervention and also the point at which intervention should cease. However, in terms of outcomes for the girl, she stayed in London for 14 months and spent 6 months of this time out of school. Despite a previous stable and productive history in school in authority X, this transition marked the end of her productive years of schooling. Dissatisfied with her life in London, she returned to town X some 18 months later, having temporarily resolved her difficulties, and rejoined year 11 in her former school. In the following extract, she describes her difficulties in re-engaging with her former school:

> *Girl*: Yes I got back into school Z, but it wasn't the same . . . they weren't my mates, . . . do you know what I mean? And I just didn't like it. Some of my mates were funny, they kept asking why I had moved in the first place, so I just didn't go . . . my dad wasn't happy.
> *Interviewer*: What did he say about you not going?
> *Girl*: He kept saying 'why don't you go?', 'You will never get a brain on you'. He keeps calling me thick . . . (int. P).

Her refusal to attend school re-ignited problems with her father; she moved out of home (aged 16) and went to live with her older boyfriend (aged 30), whom she saw as providing the only *relevant* source of help (a place to stay). However, at the time of the interview she had fallen out with her boyfriend, whom she reported as 'threatening to kill her'. The girl presented to Connexions at the age of 17 with the same 'object of intervention' that she had presented to social services aged 14: wanting to obtain a secure, safe living environment for herself. She was temporarily sleeping on the floor of her grandmother's flat. Here she describes 'her object of intervention':

> *Girl*: I came in [to Connexions] yesterday, there was a flat above my grandma's and I phoned housing benefit, I told them I was 18 but I haven't got a job yet, but I asked if I could have the flat, and how much they would allow me . . . J said they would only allow me £32, so I can't get it (int. P).

The particular Connexions agency could help her to get a job and offer advice about college (organizationally relevant matters); however, given the huge demand on housing in the

'This transition marked the end of her productive years of schooling'

'Wanting to obtain a secure, safe living environment for herself'

particular local context, she did not present in terms of local housing policy as a priority. When asked by the researcher what she wanted from life she said, 'money and a nice flat'.

Case example 3. Object of intervention: 'securing a pregnant teenage daughter's well-being'

A lone mother provided an account of her attempts to find a safe place for her teenage daughter (T) who was pregnant and bullied in school, then subject to harassment by the baby's father's family. She talked of the impact this had on her daughter and how this prompted a move to town X:

> *Mother*: T started not eating, fretting so much, she was 5 months pregnant and she really was starting to look ill with it, I thought I've got to do something, so I thought we'll move away just until she's had the baby, thinking we would go for just a few months, you know (int. R).

The mother's object of intervention was to find a place of safety and security for her older daughter T and her two younger daughters. However, upon arrival in town X, her attempts to find housing were fraught with difficulties:

> *Mother*: I moved down and tried to find somewhere to live, we ended up with a flat cos we got told there was a place here for us and when we actually came it wasn't.
> *Interviewer*: So you actually gave up your house to come because you were told there was housing here?
> *Mother*: I actually phoned up in advance to check and there was, so I wasn't very happy about that as you can imagine. We ended up trailing around town X for about 4 hours trying to find somewhere and we ended up going in one of these flats to let and I spoke to the guy and he said I will give you a special rate. This was still expensive cos it was one room, it was £100.
> *Interviewer*: All of you in one room?
> *Mother*: Yes, so it was expensive but it was the best we could do. At least there was a roof over our heads (int. R).

At the time of the interview, the mother had secured two rooms in bed and breakfast accommodation and had been living there with her three daughters and her daughter's baby for 18 months. She described the accommodation thus:

> *Mother*: There are big Alsatians. I shouldn't say this but I will anyhow, she actually has them in the kitchen you know . . . the fact is we all go past the kitchen to talk to her and pay her rent or whatever but they are in there at mealtimes it's not hygienic. I don't mean it to get her into trouble but it is definitely not on. We have been told that if the dogs

'When asked by the researcher what she wanted from life she said, "money and a nice flat"'

'Her attempts to find housing were fraught with difficulties'

'At least there was a roof over our heads'

come into the dining room, to make sure we are sat down else they would go for your backs . . .

Interviewer: That is pretty scary . . . So why does she have the dogs in the kitchen, is she worried about burglary?

Mother: Well her husband died 3 year ago, so I think it has got something to do with that, like I said before occasionally she gets drug addicts in here, usually it is nothing more than weed but we do know there has been crack, heroin, coke, you name it, done in here. If she finds out and she has got proof who it is she gets rid of them but it is finding out . . .

Interviewer: It's not safe is it?

Mother: It's not safe the children are terrified all the time (int. R).

For the housing department, that the mother has been offered a council property and refused it (because she had heard the estate was 'full of drugs and violence') did not make her a priority. At the time of the interview the mother was pursuing a private rented flat instead. However, the bond required was £950; the council would pay £500 pounds of this bond, but were not accountable for the difference. If the mother reported her concerns about the bed and breakfast accommodation to 'landlord services', the fact that the family was not housed more than five persons to a room would render their present experiences outside organizationally relevant concerns. Whilst landlord services were accountably concerned with quality of accommodation, this does not include guard dogs, and in the case of drugs evidence would have to be furnished to prompt a response. Equally, that children have no space for homework or are embarrassed to bring friends home for tea was not an issue for the housing department. The mother could report her concerns to social services; however, the risks that the mother might report to do with drugs in the bed and breakfast accommodation or dogs would not be heard as risks relevant for a social work response; they would simply be passed back to the housing department or the police.

Difficulties with housing were only one of the mother's difficulties. Her attempt to find schooling for her daughter T, which the mother viewed as essential to her daughter's well-being, was also frustrated. Head teachers, whose organizationally relevant concerns were with attainment and attendance, were reluctant to offer T a place in school while she was pregnant, instead suggesting that she start school after the baby was born:

Interviewer: So was T out of school at that point?

Mother: T was out of school when we move down here and

Interviewer: Was she still pregnant then?

Mother: Yes, we did some asking around about schools most of them said they couldn't take two girls of their age, they said they could get one

'That children have no space for homework or are embarrassed to bring friends home for tea was not an issue for the housing department'

in and not the other 'cos of T's age, especially when I think they found out T was pregnant, truth be told.

> *Interviewer*: Do you think that had an impact?

> *Mother*: Yes definitely, 'cos they didn't think she would be in school very much; to be truthful she *did* want to go to school (int. R).

Discussion

These three illustrative cases studies highlight the challenges that complex lives present to services that aim to offer an integrated response. Whilst this discussion is stimulated by issues raised by the the selected case studies, it is possible to draw on a number of theoretical and research debates that are more broadly applicable and that raise a number of pertinent issues for current 'integrated' services.

Children become visible to different agencies for different reasons: for example, being out of school or being at risk of significant harm as in the cases above. Each agency has its own priorities; they focus on a different part of a child's life, all of which will be known to connect in some way but all of which are available to solution in fragments. In case 1 above, the family initially received a positive response from the women's refuge (Cramer, 2005); however, subsequent encounters with the education authority frustrated the mother's 'object of intervention' (securing schooling close to home). In this particular local context, the school's admissions service faced unusual pressures of very high residential and thus pupil mobility, linked factors that are seen to exert significant practical pressures on the ability of education authorities to respond *flexibly* to individual needs (Dobson *et al.*, 2000; Ofsted, 2002; Broadhurst *et al.*, 2005). Given the demands of the local context, direct conflict resulted between the needs of the family and those of the school's admissions service. Whilst the local education authority had pioneered a multi-agency system of identifying and tracking vulnerable children outside school, in keeping with current moves towards integrated services (DfES, 2003), patterns of mobility particular to this local context together with the admissions policies and practices undermined organizational developments towards integration. In addition, according to the organizationally relevant targets of the admissions service, allocation of a school place could be recorded as a positive result, even where a child subsequently failed to attend. Non-attendance would be a matter for the education welfare service rather than school admissions. Each agency has its own targets that can be achieved separately and have behavioural outcomes that can be observed and measured, some of which link tangentially

'Children become visible to different agencies for different reasons'

'Allocation of a school place could be recorded as a positive result, even where a child subsequently failed to attend'

with the outcomes of *Every Child Matters*. However, the national outcome measures now set (DfES, 2004) require a great deal more, some of which can only be measured from the service user's perspective. In this particular case, for the girl and her mother, issues such as improved levels of self-esteem, realization of educational potential and the development of trust relatsionships were desired outcomes.

The point at which children become visible to systems and the system that is able to see them determines the intervention they receive and the judgement about whether successful outcomes have been achieved. Whilst current moves towards shared targets and outcomes are to be welcomed, case 1 illustrates the difficulties that are inherent in working towards shared perspectives across agencies. In case 1 (and common to participants in this study) the girl in question had a clear vision of her needs and had attempted to communicate her 'object of intervention' to agencies; her desired outcomes, however, fell between or outside the agencies she encountered.

> *'Her desired outcomes, however, fell between or outside the agencies she encountered'*

In case 2, and tracing this particular girl's life course trajectory from the ages of 14 to 17, it is possible to reflect on the reasons that services during this period (which might be classed as pre- and post-integrated provision) failed to respond to this particular girl's framing of her needs and 'object of intervention'. This particular girl's life-story is representative of the larger sample of young people interviewed, whose lives are characterized by what the Social Exclusion Unit (SEU) have termed 'disordered transitions' (SEU, 2004). Whilst it is increasingly acknowledged within policy and practice arenas that a large number of young people do not straightforwardly follow traditional life course patterns, it is also acknowledged that services struggle to respond to those where transition to adulthood is not straightforward (SEU, 2004). The girl's breakdown of her relationship with her father at 14 prompted a move away from dependence on her parents; at that time, however, this was not identified by agencies or supported. Rather, her presentation to social services was seen and framed as a child protection concern to do with physical assault. Social Services did not hear *all* her concerns, which included 'sleeping on the settee', which was to provide the dominant motivation for her subsequent actions. Children and young people with such 'disordered transitions' often form part of an invisible vulnerable population.

> *'Services struggle to respond to those where transition to adulthood is not straightforward'*

At the age of 17, an age more readily identifiable as potentially involving transition to independence, further factors again inhibited appropriate support and rendered part of her problem outside the gaze of agencies. The local Connexions agency had a brief to respond holistically to the needs of

vulnerable young people aged 13–25 as outlined in *Bridging the Gap* (SEU, 1999). However, workers at this particular agency, operating in a context of acute housing shortage, understood that the girl would not be a priority in terms of *local* housing policy. She was neither a child 'in care', 'leaving care', 'a teenage mother' or strictly 'homeless'. Under the present government, services have been organized around priority or targeted groups; those that fall outside those groups are thus less visible to services and, in addition, local context defines the boundaries of those who are considered a priority (see Lupton and Tunstall, 2003, for fuller discussion of targeted provision). Whilst attempts have been made to respond to a wider vulnerable population of young people (as exemplified by the brief for Connexions), in reality thresholds for intervention do not operate according to paper guidelines but rather demands and resources that are context specific (Ainley *et al.*, 2002). The YMCA (2005) has offered a critique of proposed changes for young people, outlined in *Youth Matters* (DfES, 2005), identifying the continued vulnerability of 16–17 year olds who are homeless under the present government agenda for change. Under *Youth Matters*, there are no plans for homelessness services to be integrated within children's trusts (YMCA, 2005). In addition, Connexions operates in a continued climate of reduced state financial support to young people, and this is a clear obstacle for those who need to become independent at an earlier point. The housing benefit system continues to discriminate against young people (aged 16–17) who wish to move into independent living (YMCA, 2005). Dependence on parents is encouraged for longer periods to support further and higher education, and those who do not fit within this framework also have less 'fit' with agency priorities (Garrett, 2002; SEU, 2004; Shelter, 2005). In this case, the combination of constraints resulted in the fragmentation of the girl's problems, despite the agency's intentions towards a more 'holistic' assessment of need. However, as the above cases illustrate, the fit between the service user's own identified 'object of intervention' and the help they receive is critical if the *service user* is to judge/experience the outcome of intervention as effective.

In case 3, social housing again features as a key issue. Hickman and Robinson (2006) state that it is 'now less useful to refer to a "national" housing market'; rather, the housing market can be considered as a 'discontinuous series of local and sub-regional markets' (pp. 159–160). However, the authors also claim that transformation of the social housing sector has been pursued with a universalism that has failed to 'recognize and work with the grain of local or regional

'Local context defines the boundaries of those who are considered a priority'

'Those who do not fit within this framework also have less "fit" with agency priorities'

'A lack of "decent" social housing greatly undermined the work of agencies to meet local need and social objectives'

differentiation' (p. 160). A key finding in this study (as the case studies illustrate) is that a lack of 'decent' social housing greatly undermined the work of agencies to meet local need and social objectives. A key issue was the ability of the local housing authority to move families out of emergency and short-term accommodation in bed and breakfast accommodation, due to the shortage of longer term social housing, an issue of national relevance and not just specific to authority X (Shelter, 2005, 2006). In case 3, may of the particular facets of living in B&B accommodation, which are pertinent to the *Every Child Matters* agenda, presented as outside the frame of relevance of the housing department, such as in this case the intimidating presence of dogs or lack of space to do homework.

Conclusion

The social-structural obstacles that continue to impact on service provision are well documented elsewhere (Bradshaw, 2005; Grover, 2005; Dex and Joshi, 2005; McKnight and Goldthorpe, 2004). Here we aim to offer something of the *detail* of how the user's object of intervention can be frustrated in interaction with the objects of intervention of different services and professionals, despite moves within authority X towards integration.

Post-Climbié, very significant energies have been invested in reconfiguring services for children to ensure a more holistic response. Research and policy developments have focused on removing obstacles to seamless provision for children. Key obstacles have been seen to lie in problems of co-ordination: information sharing, absence of a lead professional, poor management, and inadequate training (DfES, 2003). Children 'slipping through the net' of services is explained in this context. In this study, and taking an alternative focus on the impact of professional interventions in the lives of families, we have drawn attention to further circumstances that inhibit holistic provision for children. The illustrative case studies presented above indicate that there is much to do in terms of identifying a shared object of intervention between professionals, carers, and children and altering frames of organizational relevance so that all are able to respond to this shared object. Within health, education, and social services the primary object of intervention in relation to children is, respectively, the child's health, the child's attendance and attainment, and the child's safety, followed by the child's needs for services. The assumption underpinning integration is that these objects of intervention will somehow merge within new

'Key obstacles have been seen to lie in problems of co-ordination'

structures and roles. The above case studies illustrate that bureaucratic and organizational change alone and even shared categorical frameworks with outcomes commonly defined may still miss the individual service user's object of intervention. Lives are increasingly characterized by fluidity and change; in the discussion above we have touched on diverse mobilities and disordered transitions as simply two challenges that face agencies that attempt to define 'needs' *a priori*. In addition, local context will also define and determine what is and what is not possible despite presenting need. If integrated services continue to operate in a climate of rationed resources due to insufficient social housing, poor economic support to vulnerable young people who fall outside 'priority' groups, and so forth, then the service user's own presentation of needs risks fragmentation.

Following on from the priority given by this government to listening and responding to children's views, children's participation, and involvement, we consider it is essential to begin to understand 'service users' as a first baseline for producing integrated services, including and especially those designed to safeguard children and improve outcomes in all areas. Our research found that where interventions had been successful, such as in some pupil referral units and dedicated schools operating in very disadvantaged areas, it was because the first response to the child was to not focus on their organization's framing of the problem but to try to understand the world from the child's point of view and from the point of view of those who care for the child on a daily basis. We found flexibility in workers' thinking coupled with imaginative service user focused responses defining 'what works' in particular local contexts. Workers often reported the need to step outside and re-work agency guidelines and categorical frameworks to meet *individual* need.

Integrated services must be able to hear the *integrated problem*, understand it, and then deal with it in an integrated way. Recent research (Care*and*Health, 2005) would suggest that services still have some way to go. The integrated processes advocated by the DfES of the Common Assessment Framework, information sharing, and children's trusts will not in themselves reduce perspectives that originate from organizational relevance or professional discourses. Each of these processes can operate whilst keeping adult and professional discourses intact, continuing to undermine, belittle, refuse, or fail to understand the priorities of children and their carers. For some time now there have been arguments in the children's rights field that suggest that it is right that adults do make positive choices on behalf of children that, as adults, they

'Insufficient social housing, poor economic support to vulnerable young people who fall outside "priority" groups'

'Continuing to undermine, belittle, refuse, or fail to understand the priorities of children and their carers'

'Children and their carers will seek their own solutions, which can often confound the original difficulties they faced'

would wish us to have made (Eekelaar, 1986), and we would not wish to refute this. What, however, our data suggests is that the service user's perspective on *a* solution provides a promising but challenging starting point for any integrated intervention, wherever the child becomes visible and whatever the professional perception of the problem. Being 'able to play my drums', having 'somewhere safe to play', 'getting a place of my own', 'having a boyfriend', were just some of the solutions that were offered to us as starting points but that wouldn't fit within the current boundaries of service provision, nor with specialist areas of expertise that professionals may want to preserve (Webb and Vulliamy, 2001). Our data, however, suggests that if services and those who work with children fail to start from the service user's objects of intervention, children and their carers will seek their own solutions, which can often confound the original difficulties they faced.

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