
How does Ethnicity Affect Children's Pathways Through Social Care?

February 2026



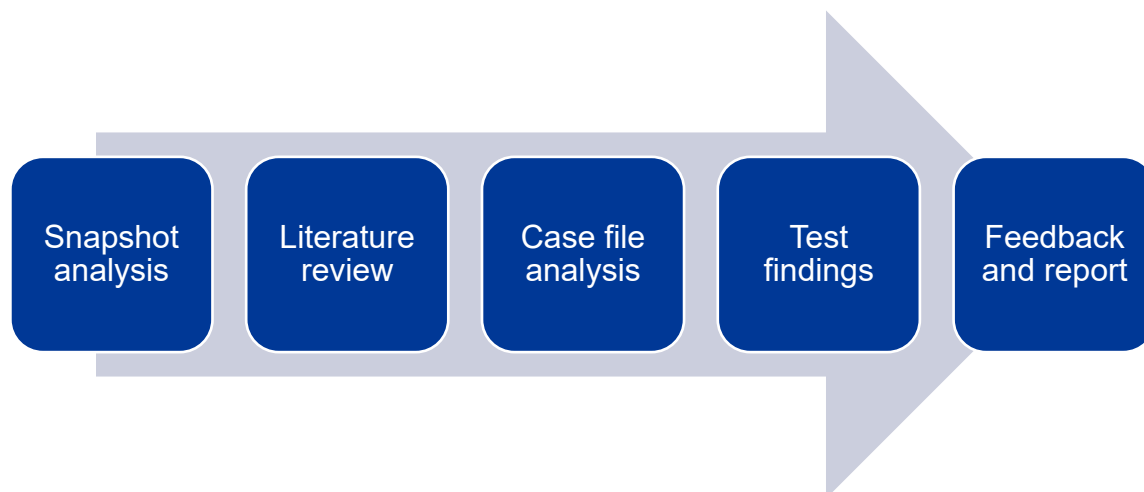
1. Introduction

This report describes the findings from a short pilot study undertaken in 2025 by the Institute of Public Care at Oxford Brookes University (IPC) and the London Borough of Tower Hamlets, supported by the Nuffield Family Justice Observatory. Many local authorities in England have long been aware of differences between the relative proportions of children from different ethnic backgrounds in their general population, those who are in need, those who require safeguarding and those who are subject to care proceedings.

Research in this area to date has primarily focused on quantifying and summarising trends. There has been less focus on how to explore detailed questions about why these trends might appear and how we can address them, particularly at an individual local authority level. In this project we piloted an approach which might help us to explore these questions in more detail.

2. The pilot approach

In the pilot exercise in Tower Hamlets, the approach we used was based very firmly on detailed analysis of children's case files. This was chosen as an approach because it allowed us to secure data in a common format which covered the full range of factors likely to be relevant to children's and their families' experience. It was supplemented by a literature review and workshops with professionals. We undertook the following activities:



3. Snapshot analysis

The purpose of the initial stage of the pilot project was to understand basic information from the site in terms of any themes or patterns in terms of the link between ethnicity and children and young people's involvement with social services. We explored basic local data about the proportions of children from different ethnicities in the overall local population and at three key points in the social care pathway (children in need, subject to safeguarding plan and in care proceedings) to get a snapshot initial analysis which told us:

- Asian children make up 62.6% of the children's population in Tower Hamlets. 15.5% are white, 9.1% black, and 8.3% of mixed ethnicity.
- Black children and white children had largely the same proportions subject to a social services referral, Child in Need Plan, a Child Protection Plan and care proceedings, and these were largely consistent with the proportion in the overall population.
- Although the proportion of Asian children who had a social services referral, Child in Need Plan, or a Child Protection Plan were all consistent with their proportion in the population, they were significantly less likely to be subject to care proceedings.
- Meanwhile, the proportion of mixed ethnicity children in the population overall was similar to the proportion of those children with a Child in Need Plan, or a Child Protection Plan. However, the proportion of mixed ethnicity children subject to care proceedings was much higher.

This gave us a starting point for the study – to consider whether these findings were significant, and to explore families' experience in sufficient detail to understand what factors might have a bearing on these patterns and trends.

4. Literature review

We then explored literature and research studies which were relevant to our pilot study, and in particular those which might help us to develop lines of enquiry about the factors to look for when considering why these trends might occur. We were fortunate that much of the available literature had recently been drawn together into an excellent summary paper by NFJO in 2023 '*How might our ethnicity affect our experience of the family justice system*' (Edney, C). It notes that much current evidence is based on largely quantitative studies examining (child-level) ethnic differences where children and families become involved with children's social care services (Bywaters et al., 2017; Webb et al., 2020; Ahmed et al., 2022). Key messages that we picked out from these studies include that, across England:

- Children from white or mixed ethnic groups are around twice as likely to 'escalate' from a Child in Need Plan to a Child Protection / Looked After Child Plan compared with children from Asian or other black ethnic groups.

- Children from white or mixed ethnic groups are more likely to be subject of care proceedings or enter care for the first time as very young children – and to go on to be adopted or to live in kinship care.
- Children of mixed ethnicity (specifically mixed White and Black Caribbean ethnicity) are estimated to be around 30% more likely than White British children to have a Child Protection Plan following a referral. All other ethnic groups are less likely when compared with White British children.

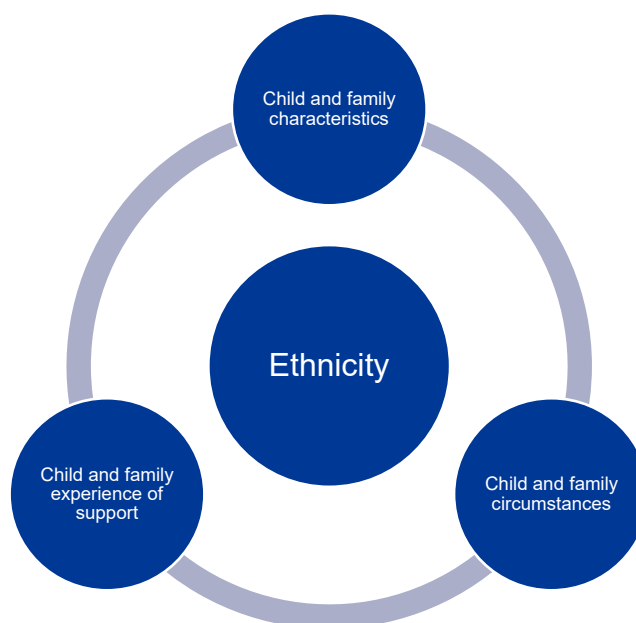
These and other studies helped us identify factors which may have an influence on the proportions of children from different ethnicities appearing at different stages in the social care pathway, including:

- Data: inaccurate identification of ethnic identity, limitations in data on out-of-home care, and limitations accurately identifying family and neighbourhood socio-economic circumstances.
- Demand: family and neighbourhood socio-economic circumstances, the role of family support, alternative sources of support (including religious institutions), perception of/prior experience of services and institutions, and inequity.
- Supply: institutional racism or bias, rationing of services, visibility to services, and surveillance.

Our task at that point was then to develop this initial outline into a more comprehensive analysis framework to guide our case file analysis.

5. Children's case file analysis

We used the following framework as the basis for our analysis of each of the children's files:



Under each heading we considered the following factors:

Framework	Factors to consider
Child and family ethnicity	Including for example ethnicity in detail for individual and family, and family background.
Child and family characteristics	Including for example age, gender, religion, disability, mental health, parents' presence and involvement, substance misuse history, domestic violence, trauma, religion.
Child and family circumstances	Including for example economic, neighbourhood, housing, siblings, education, health contact.
Child and family experience of support	Including for example Child in Need/Child Protection/Child Looked After experience, support quality, cultural competence, family community network, outcomes.

Finally, these factors were incorporated into a case file audit template of over 70 questions, along with details of which data points in the case files should be interrogated to answer each question.

The exercise needed sufficient data to be able to generate a set of specific findings about Tower Hamlets to enable them to justify making improvements in local services, so the sample did not have to be totally representative of the overall population in England.

We reviewed a total of 81 children's files. For each we used reviewers who had a good understanding of the social care pathway, had practice and/or research experience in this field, and were able to be objective and evidence-led. No matter how detailed a data collection template is, reviewers need to apply their judgement to the analysis and recording of evidence, and so these qualities were key to the effectiveness of the study.

As we were trying to identify where there were specific characteristics, circumstances and experiences which differed between ethnic groups we wanted, for each child and family, to understand the following:

Analysis category	What we were trying to take a view on
Ethnicity	Differences and similarities in the quality of information gathering, assessment, support and outcomes, including whether information is available and whether the work with that population group has taken proper account of ethnicity, across different ethnic groups

Analysis category	What we were trying to take a view on
Characteristics	Trends or themes in the relative prevalence and incidence of these characteristics between ethnic groups, why this might be so, and what impact this has had on outcomes.
Circumstances	Trends or themes in the prevalence and incidence of circumstances between ethnic groups, why this might be so, and what impact this has had on outcomes
Experience with services	Trends or themes in the impact of help and support from the local authority and partners between ethnic groups, why this might be so, and the relative impact on the wellbeing and outcomes for different population groups.

6. Our findings and implications

Once the data had been gathered, it was collated on a spreadsheet, which allowed us to prepare summaries of trends in characteristics by ethnic groups for comparison. These were tested with practitioners in Tower Hamlets.

To encourage consistency of data collection and analysis the evidence was presented in a way which followed the analysis approach outlined in the case file template. It picked out where there were strong common features or notable contrasts between ethnic groups and it proposed potential reasons for this, based on the findings from the individual case files.

Overall, our findings did NOT identify that there were consistent major differences in the characteristics, circumstances or experience of children and families from different ethnic backgrounds which contributed to any differences in the proportion of those children ending up in child protection, care proceedings or being looked after. While there were some differences between different ethnic and cultural groups, these differences were dwarfed by the differences in characteristics, circumstances and experiences of individual children and families. The balance of factors influencing outcomes for a child and family relate more strongly to that family's individual situation rather than to any factors shared across that ethnic group.

We found that all of the characteristics, circumstances and experiences outlined in the framework could be relevant to any child, family or group, leading to a conclusion that people working in this field with families must consider all factors as potentially relevant in any given situation, and avoid inadvertent stereotyping by ethnicity or culture.

While there were differences in the proportion of children and families from different ethnic groups experiencing different social care interventions (for example as noted above the high proportion of mixed ethnicity children going into care proceedings compared to other ethnic groups) we could not identify a simple causal link.

There were some examples of factors associated with challenges to family resilience and vulnerability for mixed ethnicity families, and the case files review suggested that there may also be factors associated with cultural competence of services providers and professionals, but these were not consistent.

We also found that positive social networks did appear to be important in helping families to keep and protect their children. On the other hand, uncertain migration status, poor language skills and previous family trauma (including experiences of racism and exclusion) seemed particularly significant for those families who really struggled to respond to the support offered by the local authority. However, there was no strong set of factors exclusive to a particular ethnic group which indicated that that group inevitably would have an experience that was different from others.

These findings suggest that continuing improvements in practice need to focus on the ability of services and practitioners to work effectively within the context of a unique and specific individual child and family, rather than framing their work as inevitably common across a specific ethnic or cultural group. Essentially, there are no shortcuts to effective support for any family. Workers need to consider all possible factors with all children and families, and they need to understand and work effectively with the particular circumstances of each family. Cultural competence is crucial in ensuring that support is in-depth enough and has positive impact on a family.

We shared the findings with children's social care staff and leaders in Tower Hamlets. Although the Council is already recognised as a leader nationally in this area (for example it continues to promote very best practice through its 'Better Together' Practice Framework for staff) it is keen to continue to develop. Together we identified areas where it can continue to improve including:

- To continue to improve data collection and analysis covering the prevalence and incidence of social care interventions by ethnic group, and how to explore this data with children and families to better understand factors which might be involved.
- To support workers to undertake more detailed exploration of asylum / migration history, cultural heritage / potential intergenerational trauma.
- To continue to develop better understanding and analysis of parenting norms embedded in parents' cultural heritage, including religion: and how cultural expectations shape parenting styles or family dynamics.
- To explore intersectionality further including how ethnicity intersects with disability, mental health and trauma including through racism.
- To explore family networks in more depth and the role of extended family, especially in dual-heritage or recent immigrant families.
- To invest in more culturally sensitive assessment resources and activities which enable workers to build an in-depth understanding of the family and its relationship to members' wider cultures.
- To build skills and capacity in the service to better consider and address the specific ethnic and cultural make-up of a mixed ethnicity family and what implications there may be for effective support.

- To evaluate the relationship between family members and local social and cultural networks and whether there are opportunities for support or not in the assessment process.

7. In summary

Overall, we think that this pilot project, undertaken together by the Institute of Public Care and the London Borough of Tower Hamlets has provided the opportunity to explore how to continue to move forward in working with children and families from different ethnic groups by understanding the range of factors which may have an influence on a family's wellbeing and resilience.

The approach offers a systematic way in which practice in this area can be reviewed, understood and improved. We think it can be of value to individual practitioners and team managers who want to review their support for an individual family; to training and quality assurance staff who need to understand practice effectiveness and want to support improvement; and to senior officers who need to consider their priorities for service improvement and change.

8. References

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