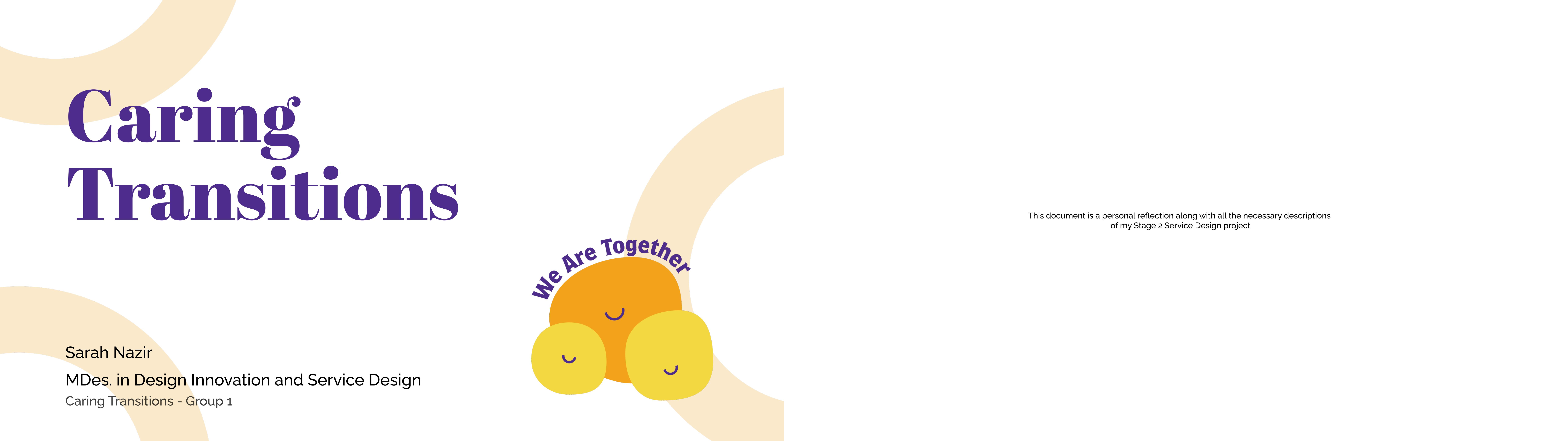


Caring Transitions

Sarah Nazir

MDes. in Design Innovation and Service Design

Caring Transitions - Group 1



This document is a personal reflection along with all the necessary descriptions of my Stage 2 Service Design project.



We Are Together

Content

Introduction	01
Positionality Statement	02
Initial Research	03
Research Approach	04
Engagements	05
• Engagement 1	05
• Engagement 2	06
• Engagement 3	07
• Engagement 4	07
• Engagement 5	08
Insights and Analysis	09
• Affinity Mapping	09
• Five Principles	10
• Aim Statement	10
• Stakeholder Map	11
• Persona Building	11
• Archetypes	12
• Matrix	12
• Process Mapping and Storyboarding	13

Opportunity Mapping	14
• Journey Map	14
• Ecosystem Map	15
Concepts	16
Proposal	17
• Part 1	18
• Part 2	19
• Part 3	20
• New Service Blueprint	21
In the Future	22
Conclusion	23
Bibliography	24

The care system in the UK is huge and the number of homes and young people within that space has been rising every year. As of 2022, there were 13,555 children in care homes and 2,861 social workers working in the system. There has been a direct imbalance, and about 55% of the social workers handle more than 20 cases and the number goes up to 40 and more too.

The system requires assistance but due to the negative perception and inappropriate behaviour, it is challenging to identify a suitable platform. Young individuals in the system require genuine support and nurturing, however, many have experienced significant challenges within the system and yearn for support to endure.

Our service design project is centred on improving the transitional phases of care for young people in care homes in the UK. The brief was to identify and address unmet needs, with the ultimate goal of better meeting the needs and experiences of young people engaged in the care system.

To approach this challenge, our team explored the complex issues that young people face during this transitional phase. We recognised that many of these individuals have experienced broken relationships, often leading to a sense of powerlessness and feelings of being misunderstood by society. These challenges can manifest in numerous ways, including difficulties with education, housing, employment, and mental health.

We also recognised that social workers play a significant role in the lives of young people in care homes. Social workers are responsible for coordinating care and support services, working closely with young people and their families, and liaising with other organisations involved in the care system. As such, the perspective of social workers was a critical component of our project.

To develop solutions that better meet the needs of young people in care homes, we focused on creating an inclusive and collaborative process. We engaged with young people, social workers, and other organisations to gain a deep understanding of the challenges and opportunities within the care system. Through this process, we worked to create solutions that take into account the needs and perspectives of all stakeholders, in order to enhance the service provision and ultimately improve the lives of young people in care homes.

Keywords:

transition, young people, relationships, empowerment, social worker

Introduction

Positionality Statement

As a service design project focused on young people in care and the unmet needs within care homes, it is essential to acknowledge my positionality and the impact it may have on this project.

I am a middle-class female individual with my own set of privileges, including having access to education and support from my family. As an international student living in the UK, I have a different perspective on the UK care system, which may differ from that of someone who has grown up in the country.

My personal experience of living in a safe home with my parents and younger sister has also shaped my perspective on this project. I recognise that this upbringing has given me a level of security and stability that some young people in care homes may not have experienced. Therefore, it is crucial to acknowledge and consider the intersectionality of privilege, as it can influence how I approach this project.

Moreover, I understand that I have a responsibility to listen to and centre the experiences of the young people in care homes, as they are the experts in their own lives. As a service designer, it is essential to engage with empathy, humility, and openness to understand their unique experiences and perspectives. I am committed to using my privilege to amplify their voices and co-create solutions that genuinely meet their needs. I will remain mindful of my positionality and how it may affect my design process, with the ultimate goal of creating a more equitable and inclusive care system.

search

in with an engaged
of care.

children, one interaction stood out of being unequal and unequal in the facility. They believed that the people around them treated them

and breakdown major elements. We understood that to design solutions, we had to understand the system. We started by identifying the system as the frontrunner and narrowing down the system with the system. In order to do this, we had to figure out where the highest risks were. The system has the biggest impact on the system.

hases suffer because there
l officials of their condition
was personally able to se
status, life after leaving the
sibility to basic life feature

by the government people deserve. As regards far too many children, the support they need, our aim was to give the greatest support.

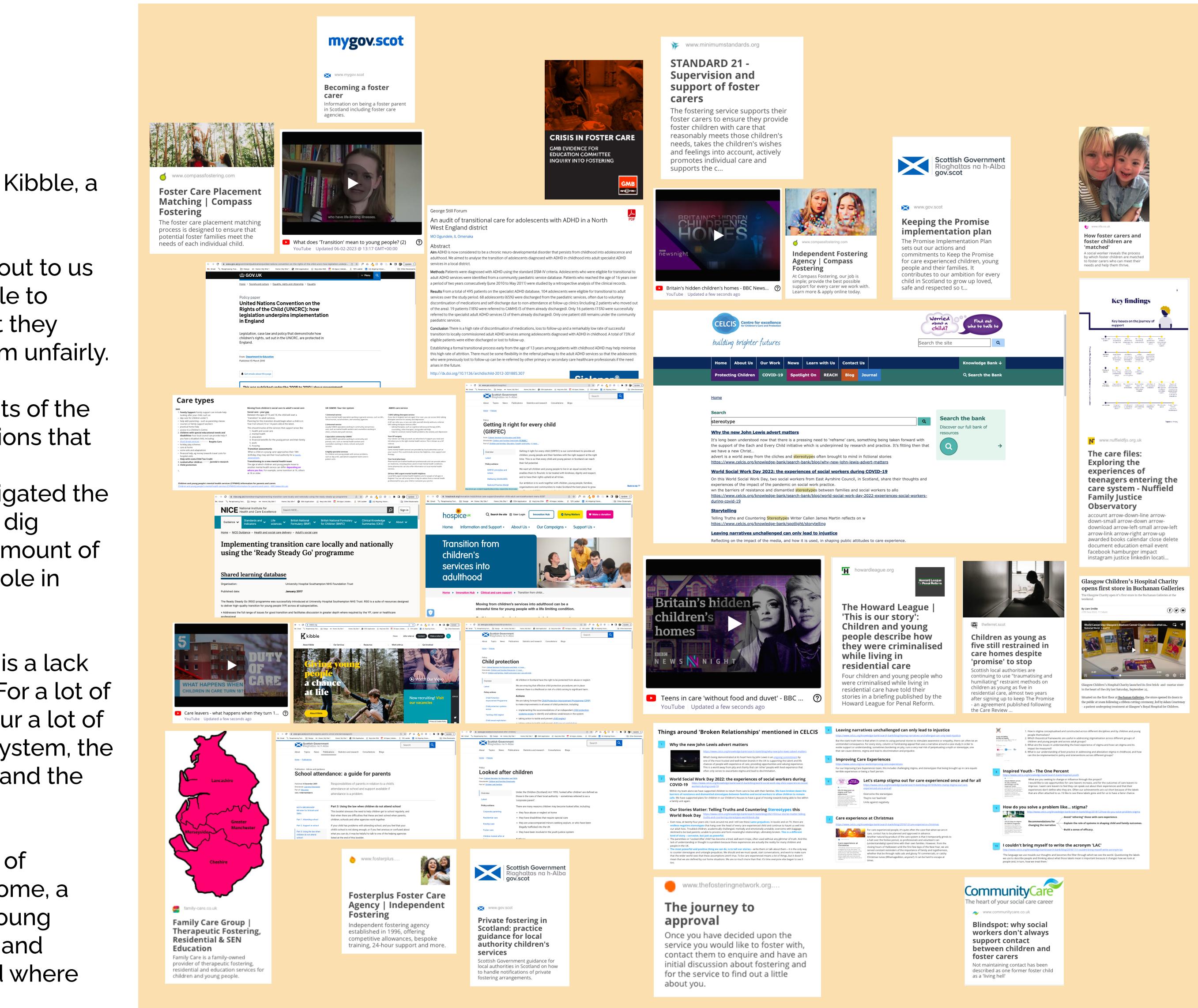


Figure 1: Some of the website, articles and research documents that formed our initial inquiry

Research Approach

Our approach for the project was based on three qualitative methods: **1. Observation** **2. Interviews** **3. Focusing on Lived Experiences**

In our service design project, it was important to involve young people in the design process to create for their unmet needs. We recognised the need to listen to their experiences within the care system, their interactions, and their life after that to ensure our project reflects what they truly need.

Therefore, we utilised the **Interpretive Phenomenological Research Approach (IPRA)** which focuses on participants' lived experiences and opinions. To analyse the challenges and crises faced by children in the care system, we gathered stories and perspectives from various sources, including CELCIS, young people who were a part of the system, street interviews, and case studies. These insights helped us identify the theme of relationship, which we used in the design process.

However, we acknowledged the limitations of the Phenomenological Research approach as it is difficult to exclude bias. Data collection and processing can influence researchers' understanding of the phenomenon. Emotional stories and opinions were collected during the interviews, making it challenging to extract objective phenomena and analyze them without being influenced by subjective emotions. To mitigate this, we aimed to make the entire process as practical as possible, using service design tools and our sense-making process to segregate the subjective from the emotional.

The approach to our research was guided by the **Design Justice Principles**. "Design justice rethinks design processes, centers people who are normally marginalized by design, and uses collaborative, creative practices to address the deepest challenges our communities face" (Design Justice Network, 2018). Our aim is to fight the inequalities in the system and to create equitable and inclusive design which was reflecting the Design Justice Principles. To be specific, we were able to use three principles from the Design Justice Principles, and those are:

Principle #1: *We use design to sustain, heal, and empower our communities, as well as to seek liberation from exploitative and oppressive systems.*

Principle #2: *We centre the voices of those who are directly impacted by the outcomes of the design process.*

Principle #10: *Before seeking new design solutions, we look for what is already working at the community level. We honor and uplift traditional, indigenous, and local knowledge and practices.*

During our work with this vulnerable groups, we were committed to conducting our project in an honest and responsible manner, based on established methodology and principles. The perspectives and experiences of the unheard young people were prioritised, and we were careful to obtain **informed consent** and maintain **confidentiality** in order to protect the young people. We avoided any exploitative or harmful approaches and instead used their stories to drive positive change. Throughout our conversations with the young people or their stakeholders, we maintained a **respectful and sensitive attitude**, and took care to review each question multiple times to avoid causing any unintended harm. Our ethical considerations were at the forefront of every step of the project to ensure that we were conducting ourselves in a responsible and respectful manner.

Engagements

Engagement 1: Innovation Centre for Care

Based on our desk research, we realised that in order to understand the perspective of creators for the young people, it is important to talk to the organisations that work in this area. We decided to go ahead and have a conversation with a go-to organisation, which acts as a bridge between policy makers and the people who use that policy - the young people in care homes. Our approach for the interview was to create an engagement by showing our stakeholders and with the help of their real life experiences of working in the organisation, dig deeper to understand the entire process of creating for the young people. The questions were semi-structured and broad, that is because we wanted to understand the system from their lens and understand their perspective on the broken relationships and the 'unmet needs of the young people in care'.

Insights

- This system is too **complicated** and children are **forced** to transit so many times.
- Even though the existing system was built for protecting children, but very few children are benefiting from it. It was **built upon the stereotype** of children who need care.
- Children have **no rights** to decide where they can go and easily be taken away from their birth families.
- **The system and its operation traumatise the children.**
- The child in the system has **never felt understood** by the system and has **no support or aid**.
- The **rules are broken** with everyone managing their own committee - visible **power struggle**.
- The **child is out of the stakeholder map and not the prime centre** of decision making.
- **Nobody works to ensure what a child really needs**, especially in different transition stages, as some of them go through **multiple transitions** in a short duration.

Keywords: Physical Restraint / Lack of being Trauma Informed / Powerlessness / Broken Relationships / Power Struggle / Complicated

Engagement 2: A Care Leaver

Diving deeper on our understanding of broken relationships and power struggle, we managed to interview Miss C, who had been a part of the care system. After leaving the care system, she has become an advocate to spread the right information about the people in care homes and also to make sure that rightful steps are taken by organisations to create changes so that young people in care homes can have an improved connection with the system.

Miss C had a positive foster care experience, and had felt safe in the space only after being taken up by the foster parents. She had bad mental health issues throughout her care journey and had often felt alone and lost, with lack of support. Additionally, this finding

Insights

- There are **multiple social worker changes**, which can often frustrate the young person
- The **social worker is not in contact** as much as they need to be
- Developed a good foster care experience only when the foster parents were able to **bend the rigid rules** within the walls of the home
- Some **rules are strict, rigid** and often times **scarring** to the individual
- Society made them feel like **less of a normal human being**
- **“Child of the State”**
- No personalisation, everyone under the same **umbrella rules**
- **Lack of genuine care and support**, even in bad mental health condition stages

Keywords: *Negative Relationships / Real Needs / Empowerment / Traumatic Experiences / No Support / Lack of Connections / Stress*

f Glasgow residents on care homes and the young person's journey within them, we conducted street interviews. This
paces to hear their views on the topic. By doing so, we were able to identify a significant lack of awareness in society about
people within them. These findings became an integral part of our spirally developed project, informing our understanding of
s.

to the lack of support for young people, which contributes to feelings of disempowerment and a lack of understanding. Our
a of concern that could be explored
of awareness surrounding care
hem, we hope to raise awareness
le group.



reached a
ur attempts

ach by
ured th
ences a
we we
ng from

ment type opment

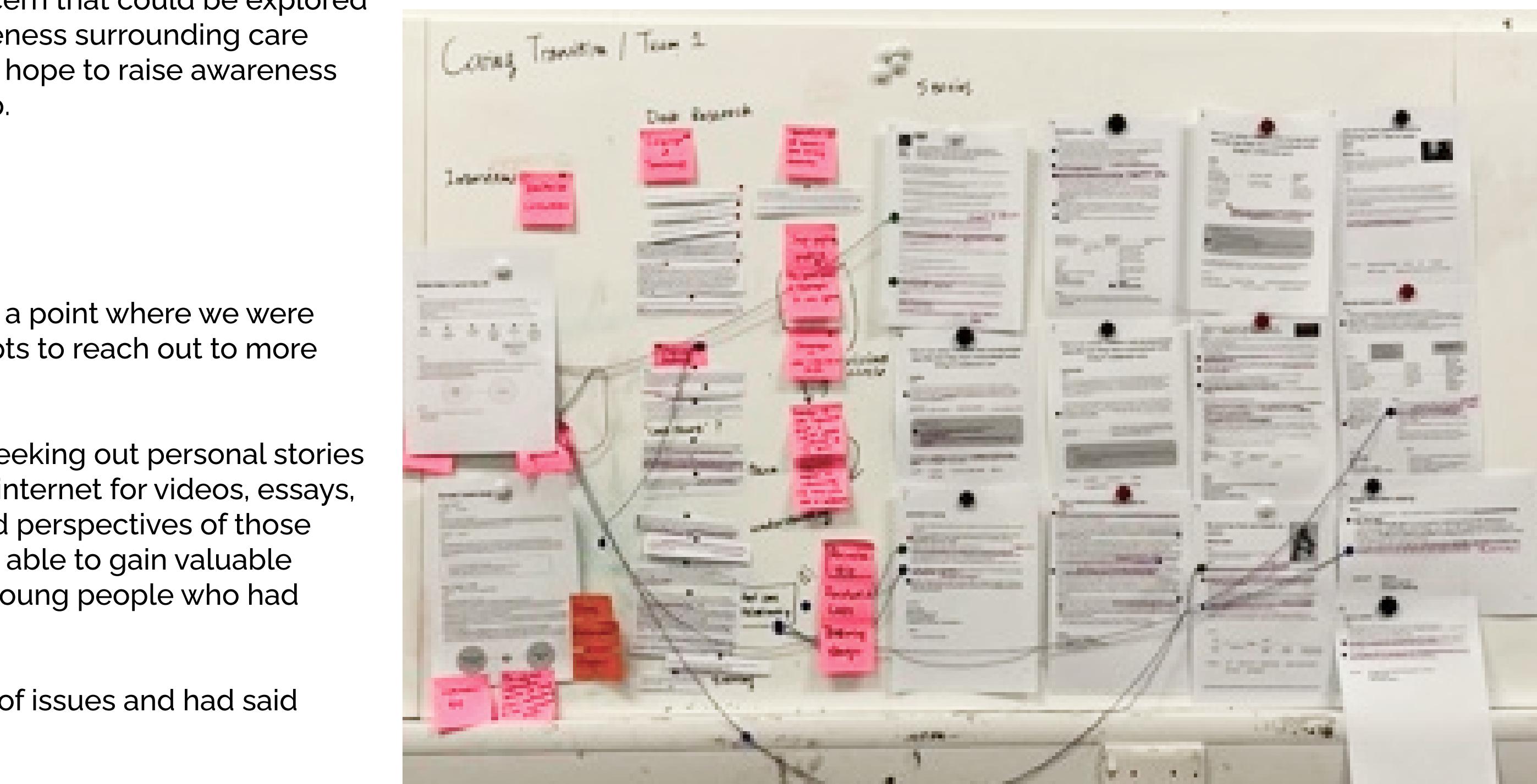


Figure 2: Photographic representation of how we worked with all the case studies we found online and used for our research

Engagement 5 - Kibble: Child Care Home

We had an engagement with Kibble at the beginning and ending stages of our projects. As mentioned in the initial research, the conversation during that time was important in understanding the depths of broken relationships and in order to base our further studies in the topic.

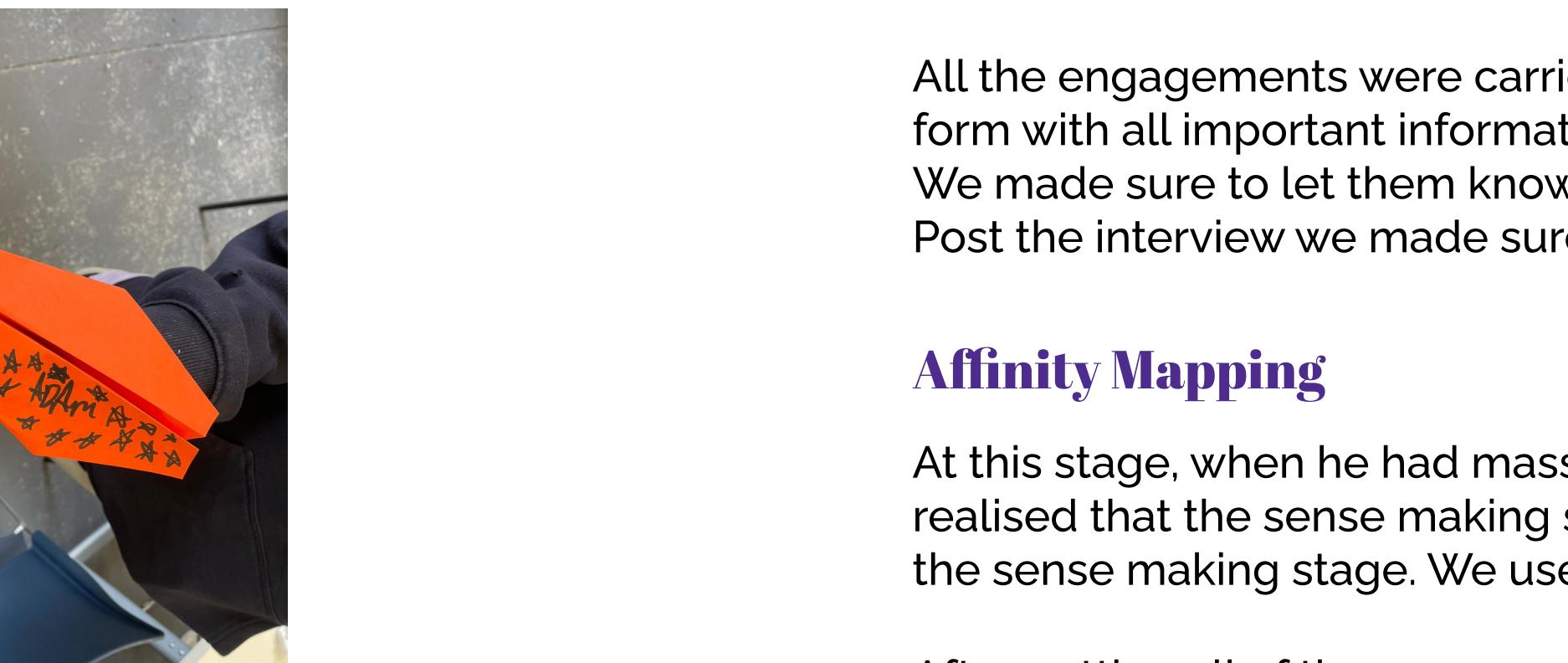
Interaction 1:

The interaction which happened at the Kibble Care Home establishment near Paisley, was done by four members of the Caring Transitions team and it was the first in-person interaction we had on the topic. The engagement with the young people at Kibble and the service providers was an eye-opening moment where our own **presumptions on the behaviour of kids and their lives were broken**. We were able to see the kids in the real situations and understand how these kids were people who **needed a little support and empowerment** to come out to the society. These young people who were **going through various transition stages** in this care home, were actually looking for some support and **guidance** from the world.

Interaction 2:

The students of GSA invited the young people from Kibble to their studios for interaction and engagement. Initially, the young people seemed uninterested in participating in activities. However, they gradually warmed up to the students and began discussing things with them after realizing that the students were sincere and cooperative.

The team had to **encourage** the shy kids, but they felt more comfortable after seeing others having a good time. These young people in care homes have **limited opportunities to engage with others**, and their hugs and smiles demonstrated how much **they value positive relationships**. At first, the children were **hesitant to share** anything, feeling like it was a task, much like when social workers are present. However, once a better connection was established, they began **expressing their creativity, dreams, likes, and dislikes**. This tells us how these kids **need the right platform** and non-official seriousness at times to express themselves.



*are of the creative things the young children made during the second
s of the first interaction at Kibble*

An

hical considerations. Prior to the interview, the participants were made to read a brief on the project and given a consent form. It was made sure that no participant was feeling unsafe, unheard or uncomfortable throughout the interview run or after it. They can choose to stop at any point of time, and they can choose not to answer or skip a question which does not feel comfortable to them. They can also choose to mail the completed interview form to the researcher via email as well.

tion in front of us, it was getting a little difficult to think about what should be done to move forward. This is the time we tried to think about all the conversations we had and everything that was said during that as an essential element of ensemble all the significant keywords, situations, or incidents that formed the foundation of our outlooks and beliefs.

ole to see the themes that were emerging. We started categorising the entire post-it notes information into bigger brackets of context and reasons behind those.

the end

forced into

ling is
d for fe

action on
in care

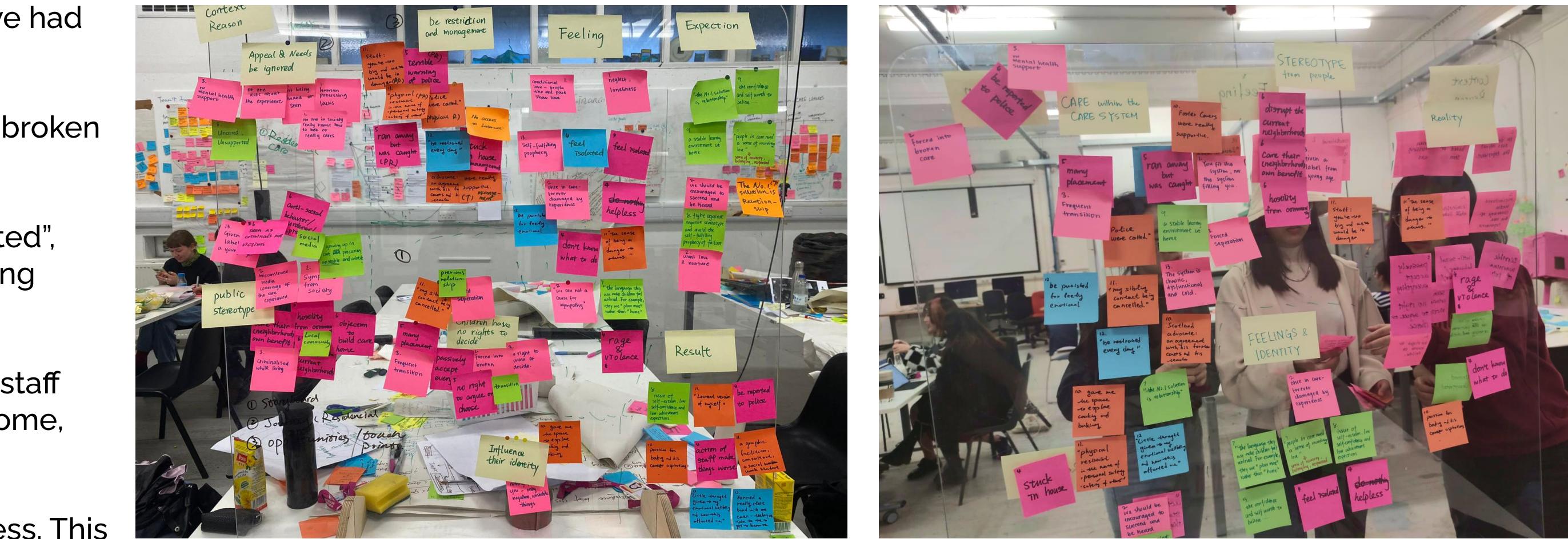


Figure 4: two sides of the glass board where we put up our affinity map.

The Chosen Five Principles

Based on this, we developed our principles. These principles were thematic and we believed that it would be an essential framework to help develop our project. We wanted to use these principles to understand what is necessary for the users, and what should be kept in mind to create a seamless and cohesive user experience. This was helpful in focusing our approach and helping the entire team look at the same motive.

Thus, [the five principles](#) we finalised were:

Empowering Relationship

Building a Positive Relationship

Humanising the System

Real Needs

Trauma Informed

The Aim Statement

We used the above mentioned principles to create an aim statement which would refine the focus area. For defining the aim, we used the 4 Ps of service design - people, product, partners and processes. These 4 Ps made the complicated pool of information more succinct for me, personally and was helpful in understanding the holistic impact of what was being created.

“Designing a service (product) that puts the young people in care (people) at the centre, and empowers them by improving their relationships with social workers and the care system (process), in collaboration with relevant stakeholders (partners).”

Stakeholder Map

Based on our research, we had created a stakeholder map in the initial phase of the project. We used the same stakeholder map to engage with our interviewees. This stakeholder map brings together major stakeholders that have importance within the life of a transitioning young people. We tried to map major service providers, within the care home, in the social and official sectors of their lives.

The figure on the right is the ideal scenario, whereas the one on the left shows what the real situation. This showcases how the system is dehumanised and confirms the formation of insights from our first engagement with CELCS

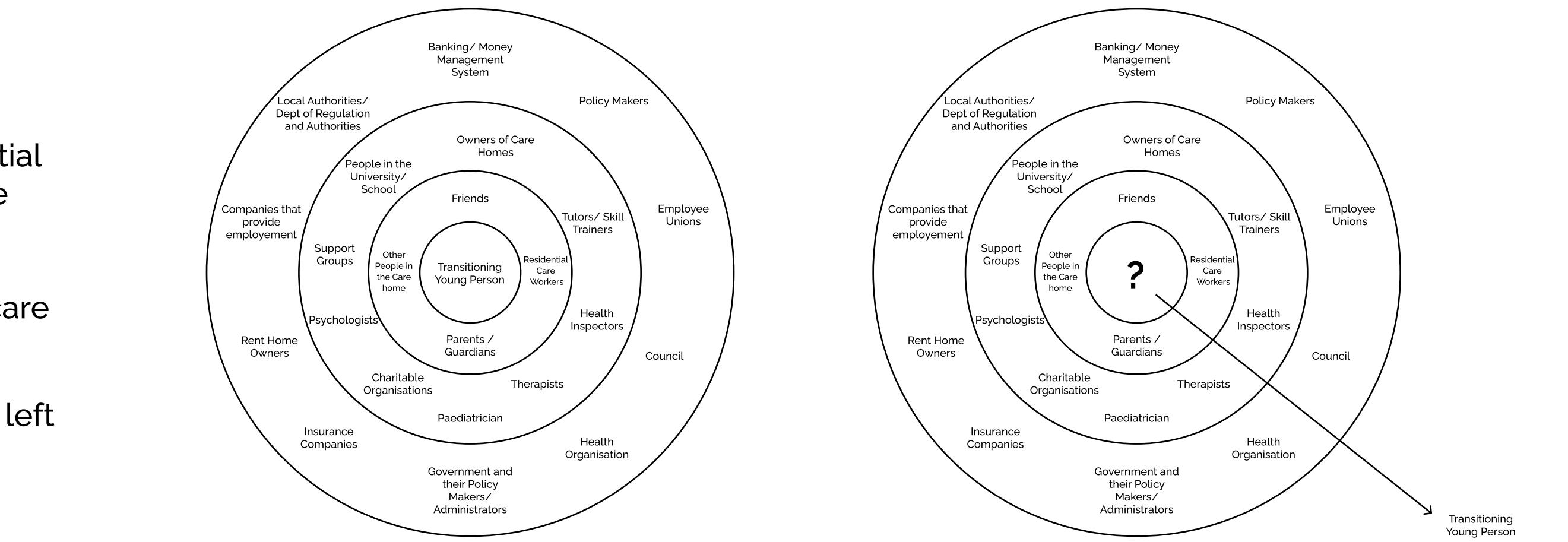


Figure 5: On the left is the stakeholder map we made on the basis of our research, and on the right is the stakeholder map which CELCS refers to as the ideal situation in the care system

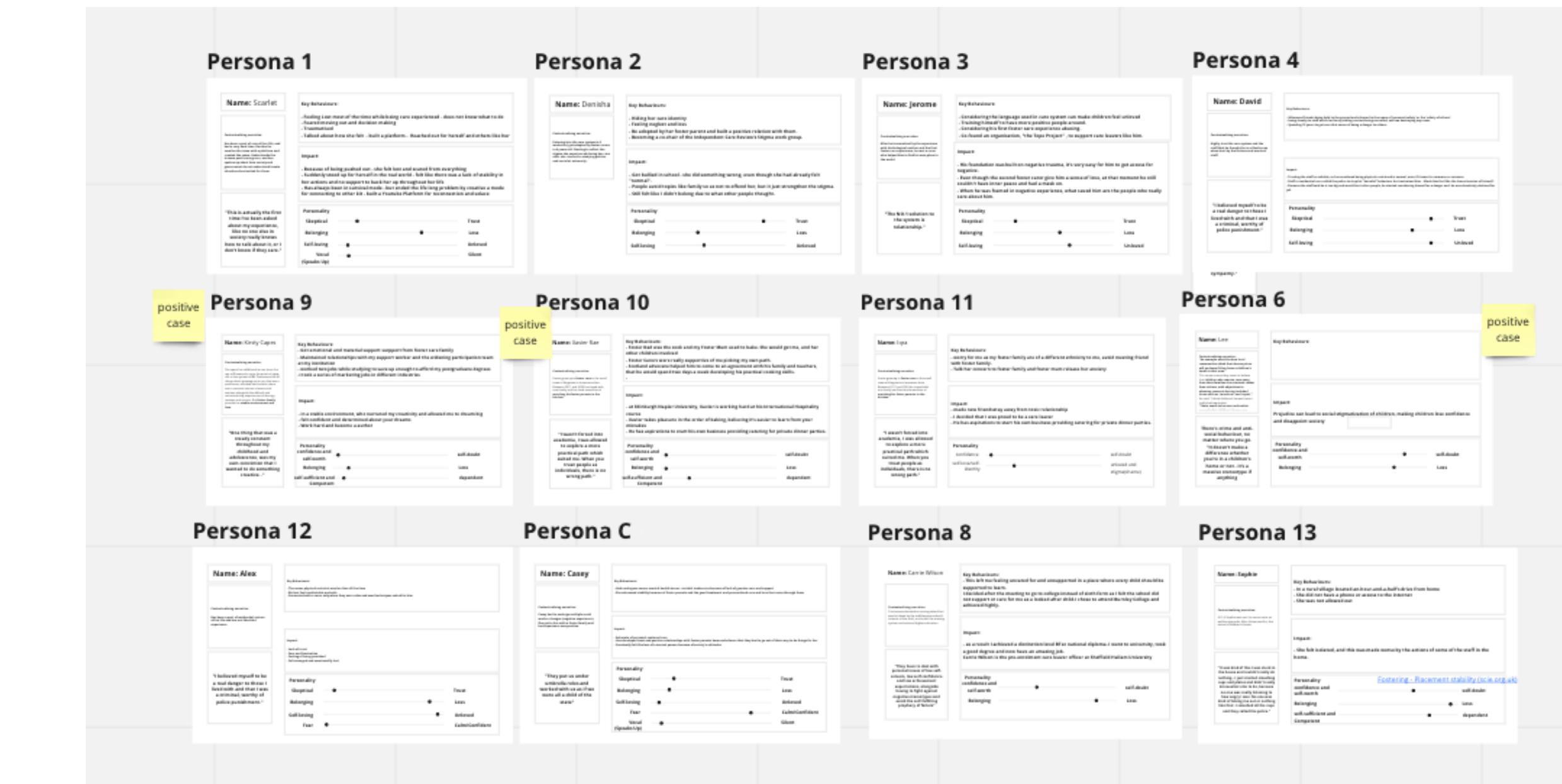


Figure 6: Some of the personas we created on Miro board from histories/case studies we encountered online

Persona Building

By gathering stories at different stages, we were able to create several personas that helped us analyse the different categories of people in care homes and understand who we were designing for.

However, it was not an easy task to fit different aspects of young people's life, behaviours and attitudes into a small number of moulds. We faced challenges during the creation of these personas and it took multiple rounds of back-and-forth to finalise our model.

Nevertheless, we found that creating personas based on motivations, barriers, strengths, and needs was helpful. We aimed to understand important elements such as how they felt, how they were treated, and how they perceived their relationship with the system and themselves.

Archetypes

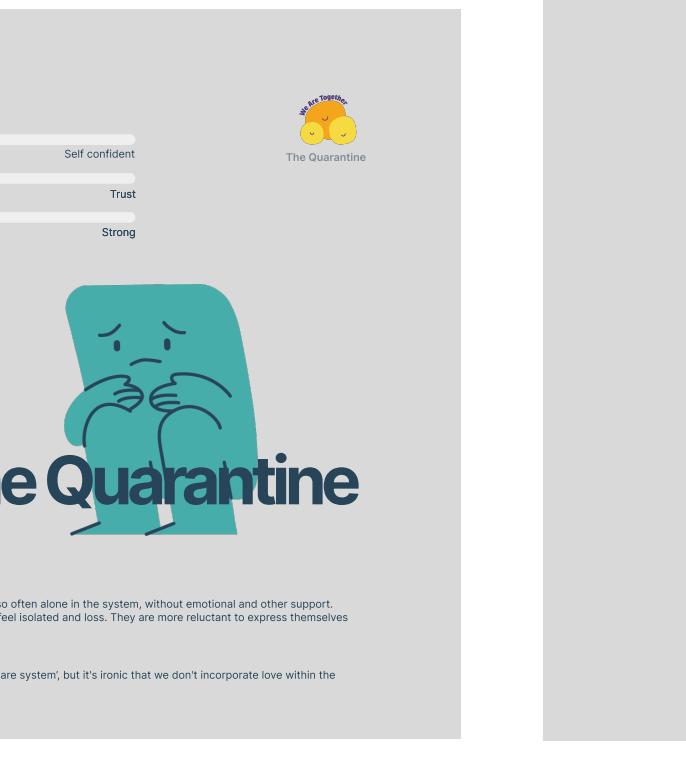
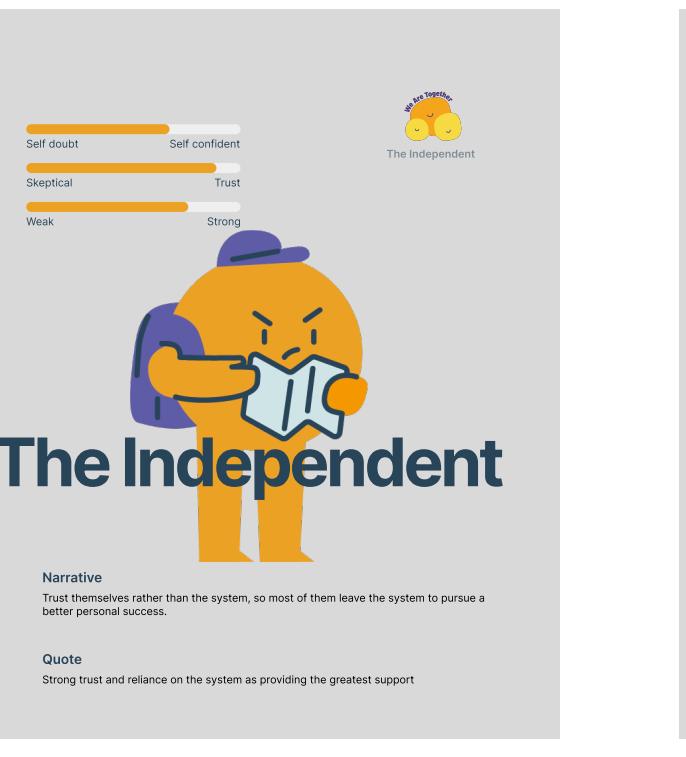
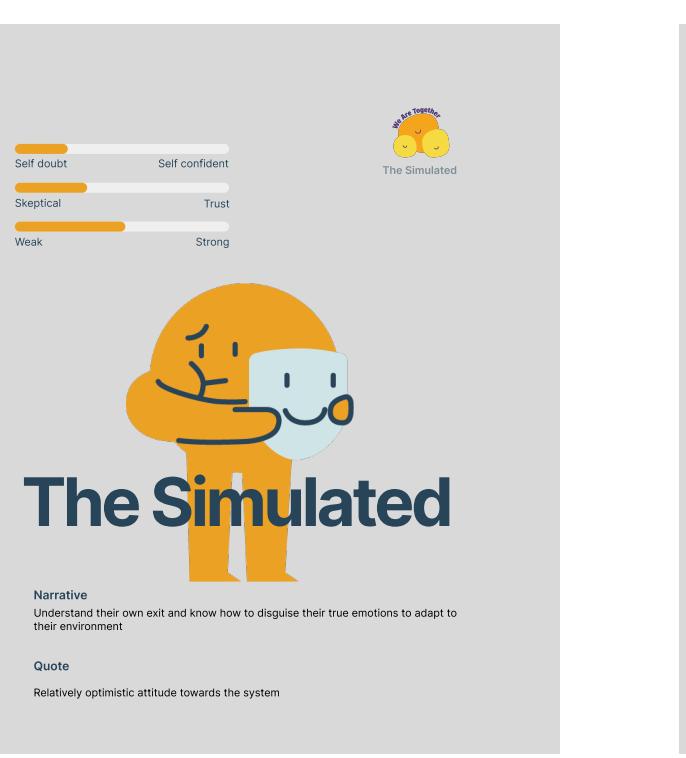
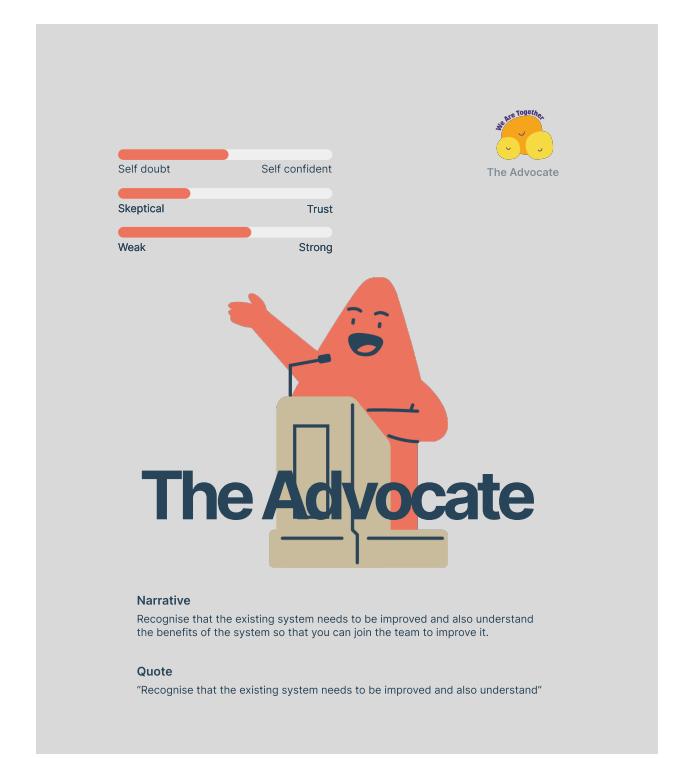
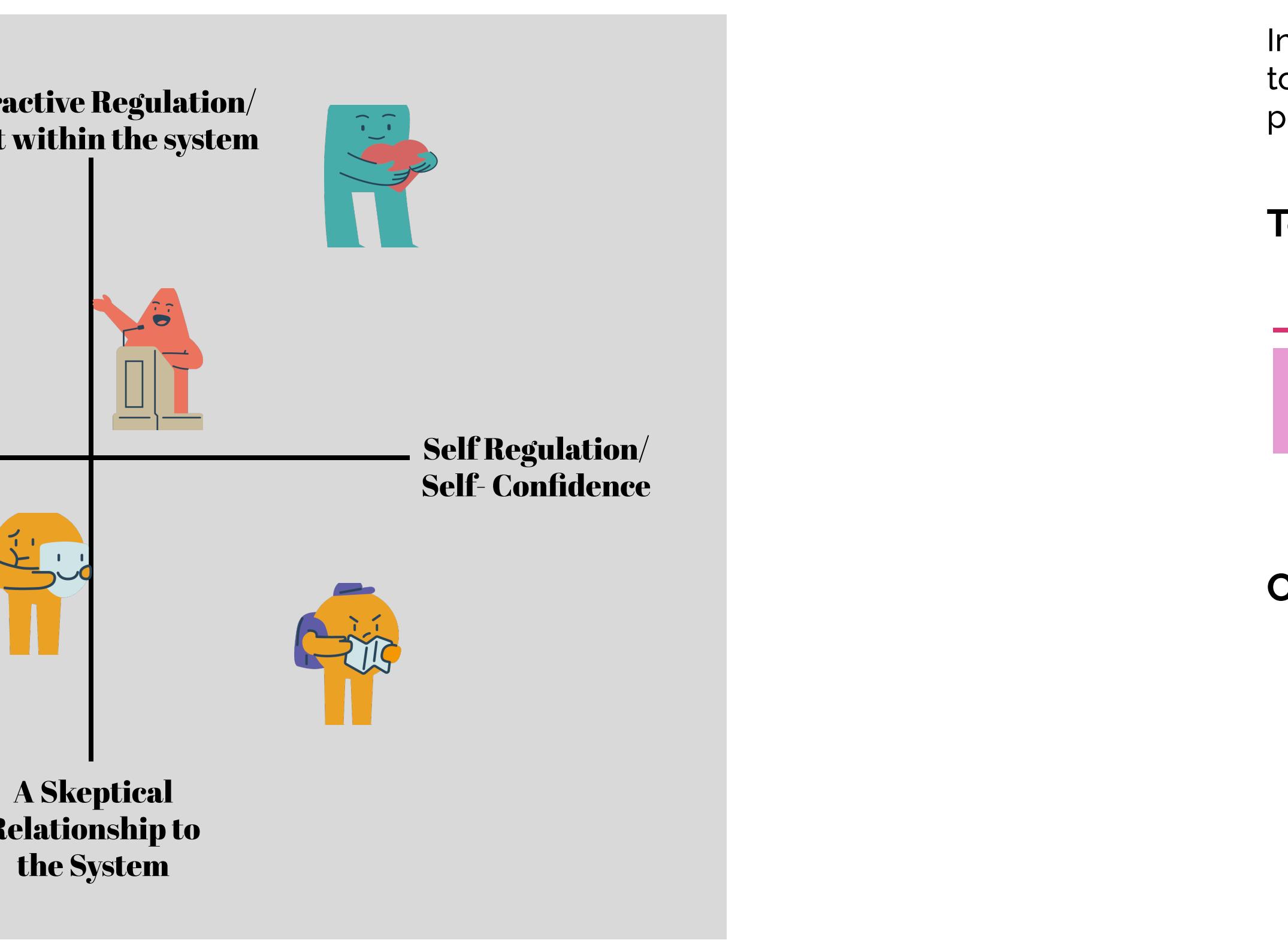


Figure 7: The Six Personas

After having a chosen archetype, we were able to walk through with an intention in mind. The chosen archetype helped us understand a lot about the feelings, motivations and interactions of the young person within the care system. The scales within each archetype was helpful in understanding the type of relationship they had with the system. This helped us create our specific intention in the next parts of the project. The matrix ,also, was helpful in mapping the level of interaction a quarantined individual has by themselves and their interaction with the system. It helped us visually picture what is needed for a quarantined archetype to move to the fortunates spot in the care system.

Based on the Archetype

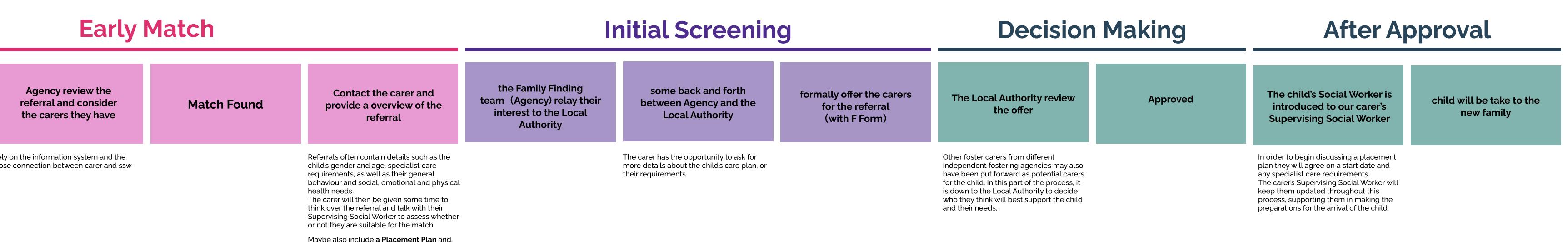


Storyboard

Carer*



With Foster C



mapping of becoming mapping of profit

file me

Understanding Opportunities - Journey Map

After understanding individual processes, it was important to contextualise it to understand the opportunities we can create. The system is extremely complex, so it was essential to map the entire process into one and find the problem stages. This was helpful for us to understand what the various kinds of crucial opportunities of design we have. These mapping were done keeping our quarantined archetype in mind.

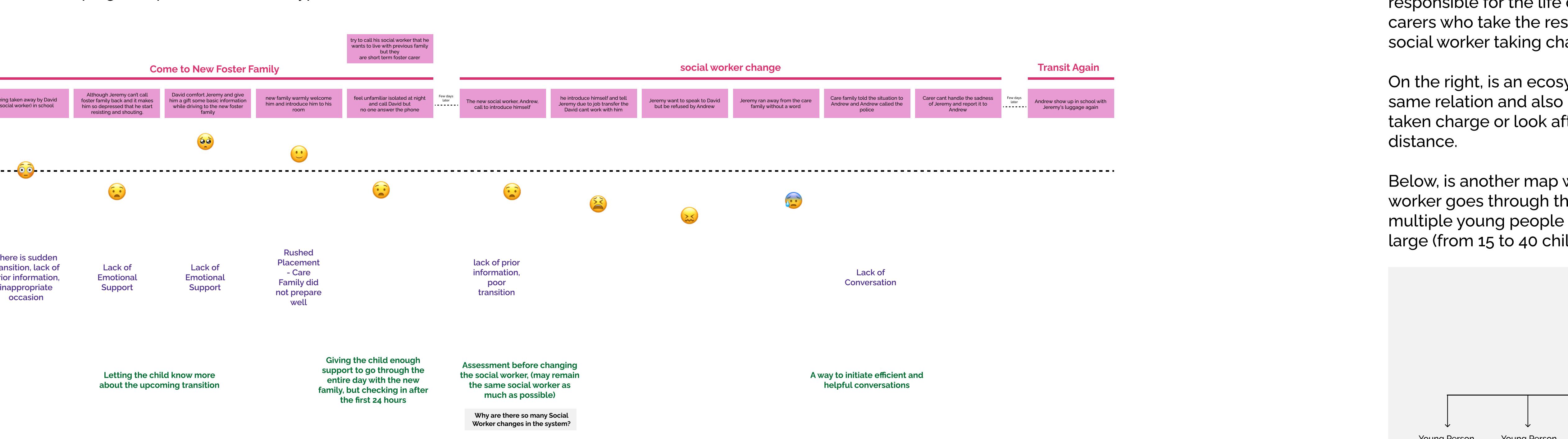


Figure 11: Journey Map of young person and the transitions within foster and social workers

EcoSystem Map

Based on our research, we created an ecosystem map, which brought together major stakeholders that have importance within the life of a transitioning young person.

It was three different agencies in relation to one another - the young person in a care home, the social worker who is responsible for the life of the young person, and the foster carers who take the responsibility and have a supervising social worker taking charge of this entire agency.

On the right, is an ecosystem map which showcases the same relation and also some other agencies that have taken charge or look after the entire system, from a distance.

Below, is another map which showcases how each social worker goes through the same relationship map for multiple young people and often the number is extremely large (from 15 to 40 children)

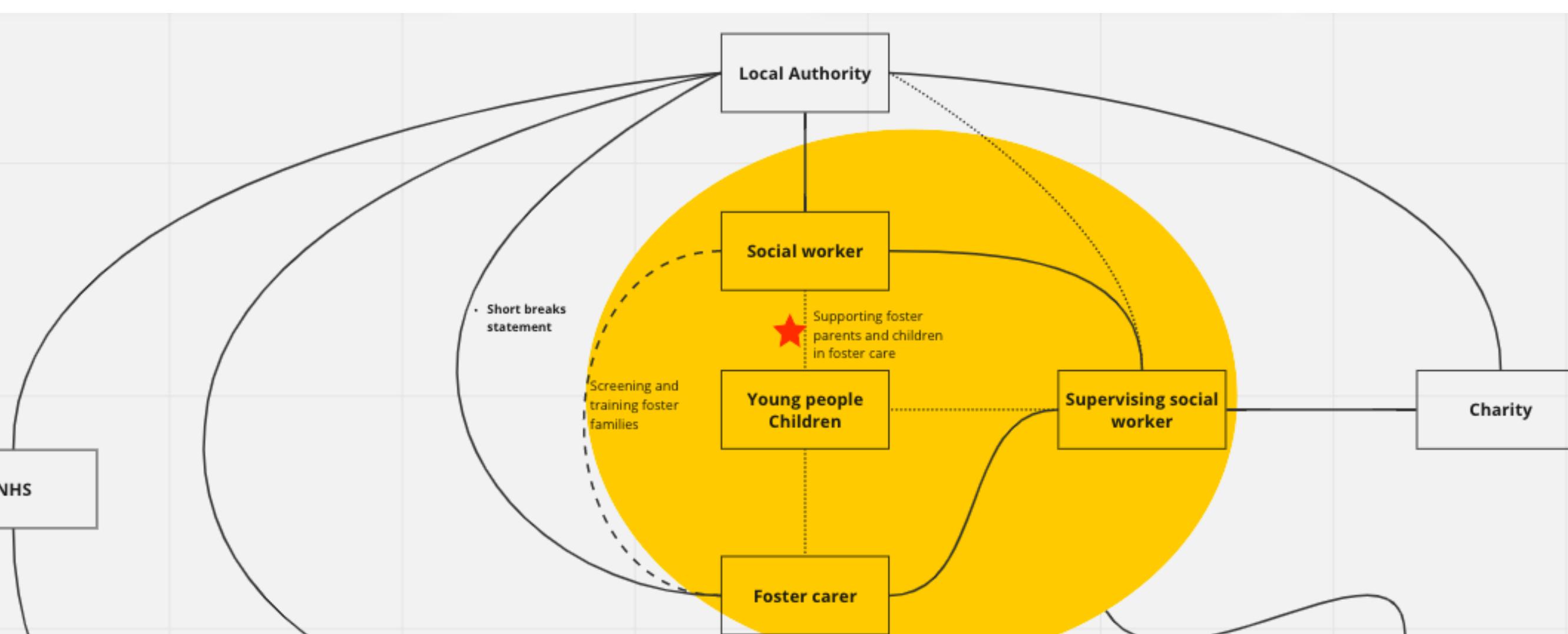


Figure 12: A simplified ecosystem map of the social worker and foster carer in young person's map

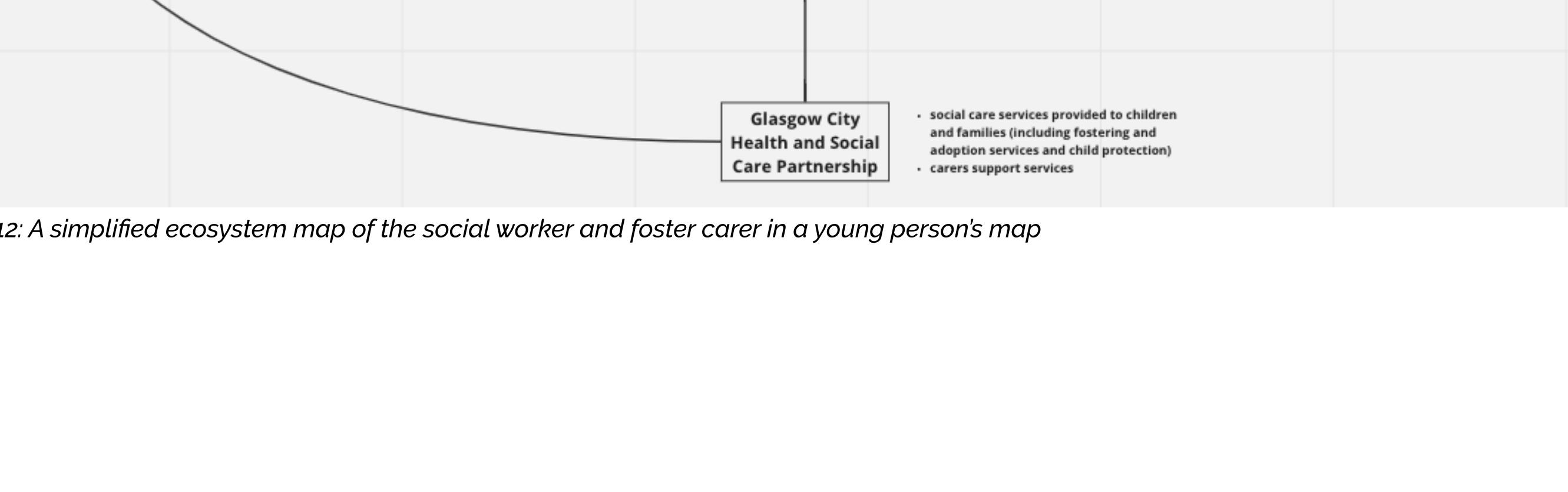


Figure 13: Simplified figure to show the workload of a social worker

Concepts

It was evident in the entire process and journey mapping that the biggest burden of responsibilities lies on a social worker and often they manage multiple kids that can make the entire process slow and the transition phase rough and bumpy. The social worker is the eye of the young person in transition, as they are present through all stages, provide relief and placement ease. Through our research, we found some major problems in this relationship of a quarantined young person and their social worker, which are:



At this stage, to contextualise the understanding and re-focus the approach between the social worker's needs and the young person's needs, we used the 5Ws and 1H formula. Through the process, it was evident that it would be impossible to create a better relation between the young person and social worker, without creating ease at work for a social worker. The 5Ws and 1H for our conceptualising phase were:

WHAT What is the project or issue?
To build better relationships and empower the children for a brighter future.

WHERE Where is the project or issue located?
Empower children for their life in a care home and also during social work transitions

WHEN When will the project take place or when did the issue occur?
The issue occurs with every child during improper treatment at the care home and/or with social worker transition

WHY Why is the project or issue important?
Lack of positive connections and proper care for the young person

WHO Who is involved or affected?
The young person and the social worker

HOW How will the project be executed or how did the issue arise?
The Service Designed based on the 5 Principles

Proposal

With thorough research, we identified that designing for the unmet needs of a young person in care would never be complete without keeping the needs of the social worker in mind.

The social worker holding so much responsibility over the life of the young person in care is often seen to be violating the system, suddenly leaving and the entire workforce has seen extremely misbalanced demand and supply.

The proposal has three important elements, and the diagram is a representation of the changes proposed. The new plan has been built on the existing resources and has a mix of new touch points or modified ones. The new version of the service plan for the young person in care and the social worker is brought under an umbrella initiative plan, we called 'We Are Together'.

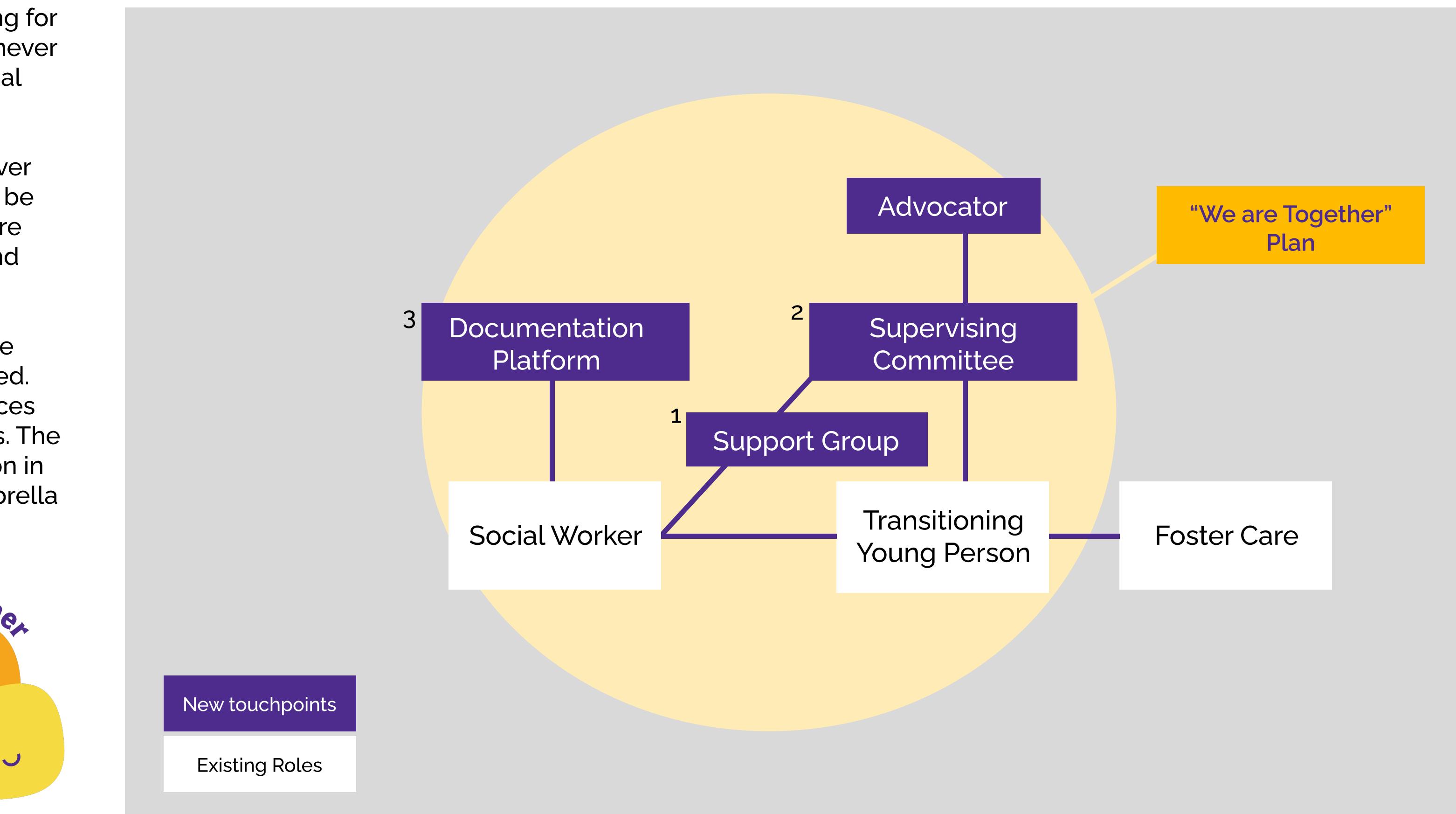


Figure 14: Proposal and the added touchpoints represented diagrammatically

Proposal: Part 1 - A Support Group

It was found that our young person archetype, the Quarantined, was often feeling powerless, lost and isolated. His relationship to the system was broken and he was skeptical and felt all alone through the entire journey of living in a care home. It was important to bring positive relationships into his life and make him feel like he wasn't alone. He needed the right motivation to explore and bring the best version of himself out, and the bureaucratic system did not provide the space for him to feel so. Just like in our Kibble activity, the kids needed a little push to feel safe and happy, we felt that it was important to design a service that would benefit them on a regular basis and give them the needed support at all times.

Keeping all this in mind, we felt that a support group would provide the right platform for the young people to come together and give and receive support. The support group would be designed in a way that offers a safe place where you can get information that is practical, constructive, and helpful. This support group meeting, which would be organised by a social worker would help him divide the overbearing load of individually meeting each child under him and he can review each child's progress or provide upcoming program information or social work transition details in one meeting to multiple children. The child can get an empowered feeling to voice out his feelings and provide opinions. This would provide the right positive push to the Quarantined archetype to gather a sense of togetherness and empowerment. This would become a collaborative space and would be beneficial for not only the child, but the social worker also by managing his time better.

Benefits:

1. Building positive relations with people who have been in care
2. Creating hope and empowerment
3. Sharing experiences and discussing matters of concern with the Social Worker, which otherwise is not done because of lack of time for individual care and the excessive workload
4. Focus of self-care and group development

What to expect:

1. Clear schedules for people in different groups to attend and share
2. Sharing is not mandatory, being present is
3. There should be a sense of structure in the activities
4. This should provide a platform to connect with the Social Worker which was otherwise seemingly impossible
5. Having activities and clubs within it for personal development: book club, creativity groups, etc.

The Type of Activities that would be a part of the support group can include:

Individual Activities:

1. Creating a Memory Box
2. Personal diary or CD for self development
3. Art Therapy
4. Book Reading
5. Nature Walk

Group Activities:

1. Break the ice game (one word starters)
2. Creating gratitude maps
3. Creative collage making
4. Pottery
5. Journaling
6. Mindful Discussion Hour on topics of interest
7. Nature Therapy
8. Wellbeing workshop

Proposal: Part 2 - One platform for documentation

The second part of the 'We Are Together' initiative would consist of designing a proper platform for documentation.

Proper documentation would help social workers to stay up to date with all the information related to the young people in his care circle. This platform would not only include documentation from the life of a young person - his personal history, but would also include all his placements and care plans. Along with this, there will be documentation of the support group meetings so that everyone in the official department can have an equal access to what is happening and proper care and activity planning can be done.

Transition of social workers in the care system has been sudden and ill-planned, which has often led to a bigger burden on the mental abilities of the child and makes the new social worker feel out of touch. The entire process of understanding the young person starts from scratch and by the time they get connected, the relationship cycle breaks again and a new social worker arrives. This is a common occurring and often breaks relationship touchpoints, but this documentation platform would act as a touchpoint which can give access to all the information about the child in one place and smoothen the transition hurdles. This would also give the much-needed stability to the care system and thus give time to address the real needs of the children.

The pictures of four mock up screens have been presented alongside.

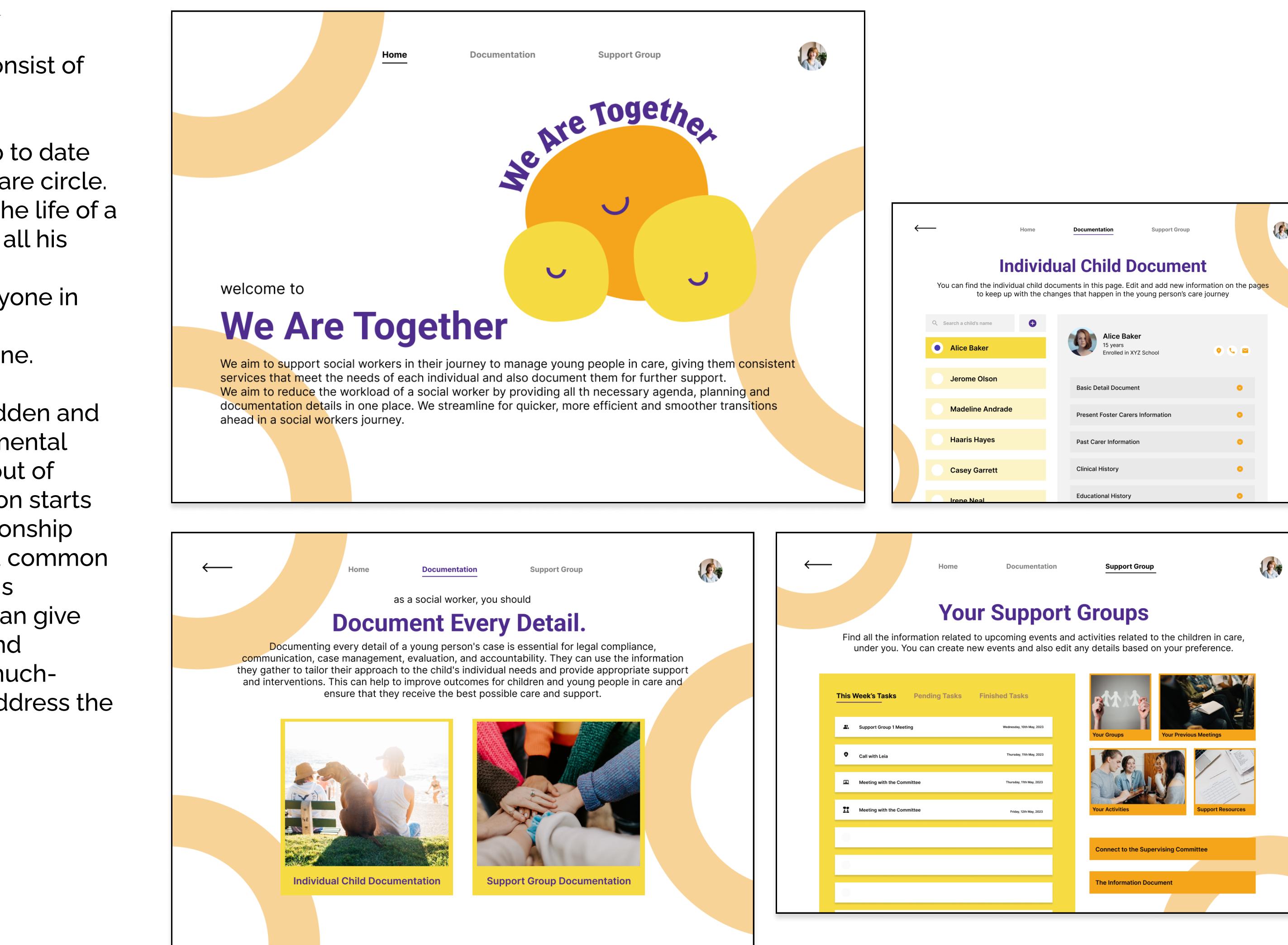


Figure 15: Mock Webpages of the documentation platform under the 'We Are Together' initiative

Proposal: Part 3 - A Committee to Supervise

The social worker's behaviour has frequently exhibited violations of the system, resorting to physical discipline methods with the children and displaying a lack of connection. The responsibility of managing social work lies with the Local Authority; however, due to the overwhelming workload and imbalance, ensuring that all procedures and strict measures are followed by the social worker becomes challenging.

Our proposal involves creating a committee that conducts regular check-ins to ensure that the correct procedures are being followed. To ensure fairness and justice for all, we suggest designing the committee to include not only Local Authority and bureaucratic individuals but also those with firsthand experience in care or advocating for the rights and justice of the people. By having an advocate present, young people would feel heard and supported by someone who holds the appropriate authority and shares their perspective, instilling a sense of empowerment and assurance. The committee can also take charge and check reports of meetings. The presence of the advocate would foster the development of positive relationships, empower the individuals involved, and effectively address their genuine needs.

To make sure, that there are appropriate methods to keep in touch with the committee, the social worker would have connecting methods on the application, whereas the child would get a booklet which would provide them with all the methods to connect. This booklet would provide them with all the necessary information and their rights when connecting with not only the committee but also when they connect with the support group.

Below (left) is a diagrammatic representation of how the above mentioned services would look in the new ecosystem and how they will be managed under the new initiative, and on the right is a mock version of the booklets for the young people.

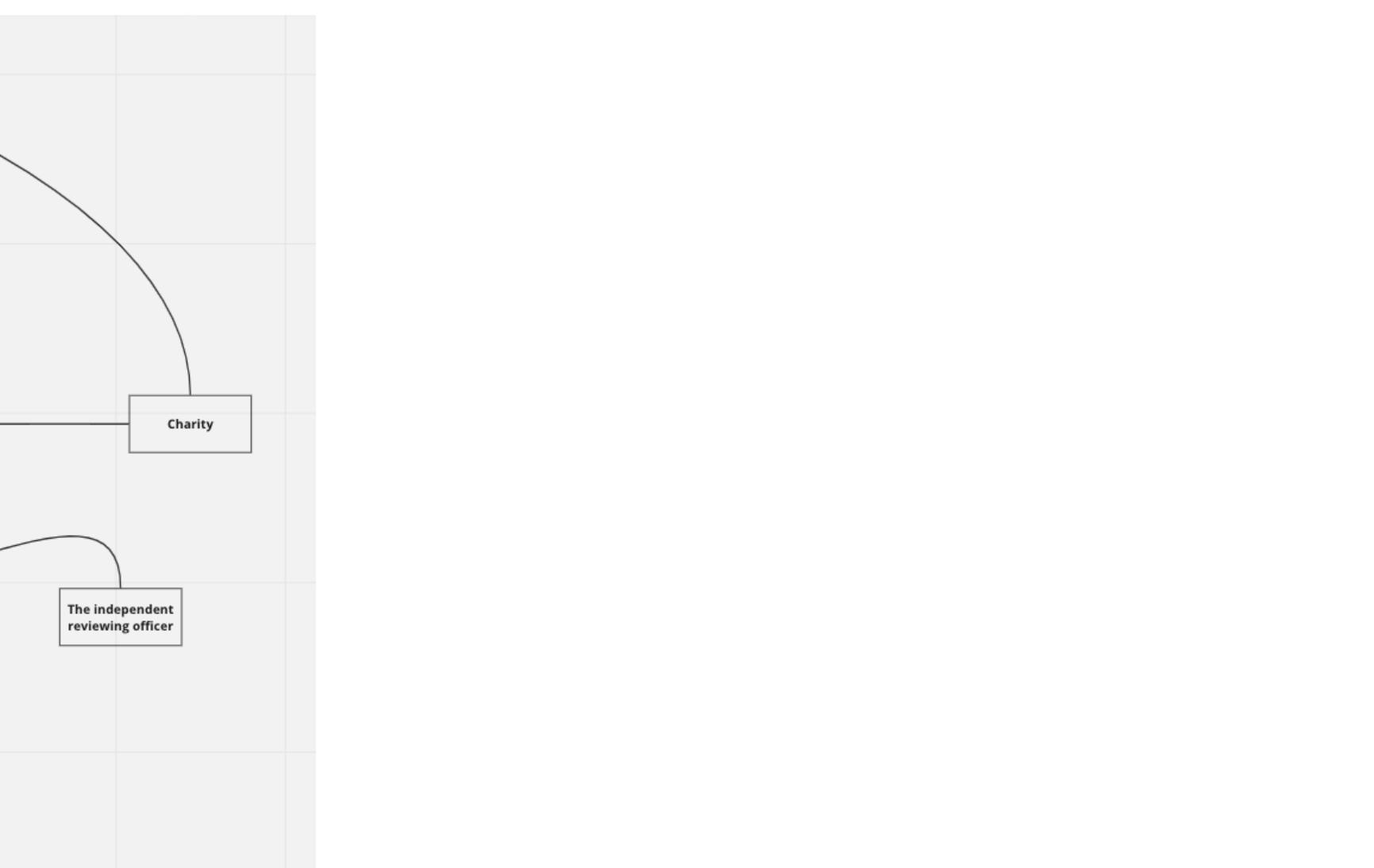


Figure 16: Vision of the Ecosystem Map with the proposed innovations

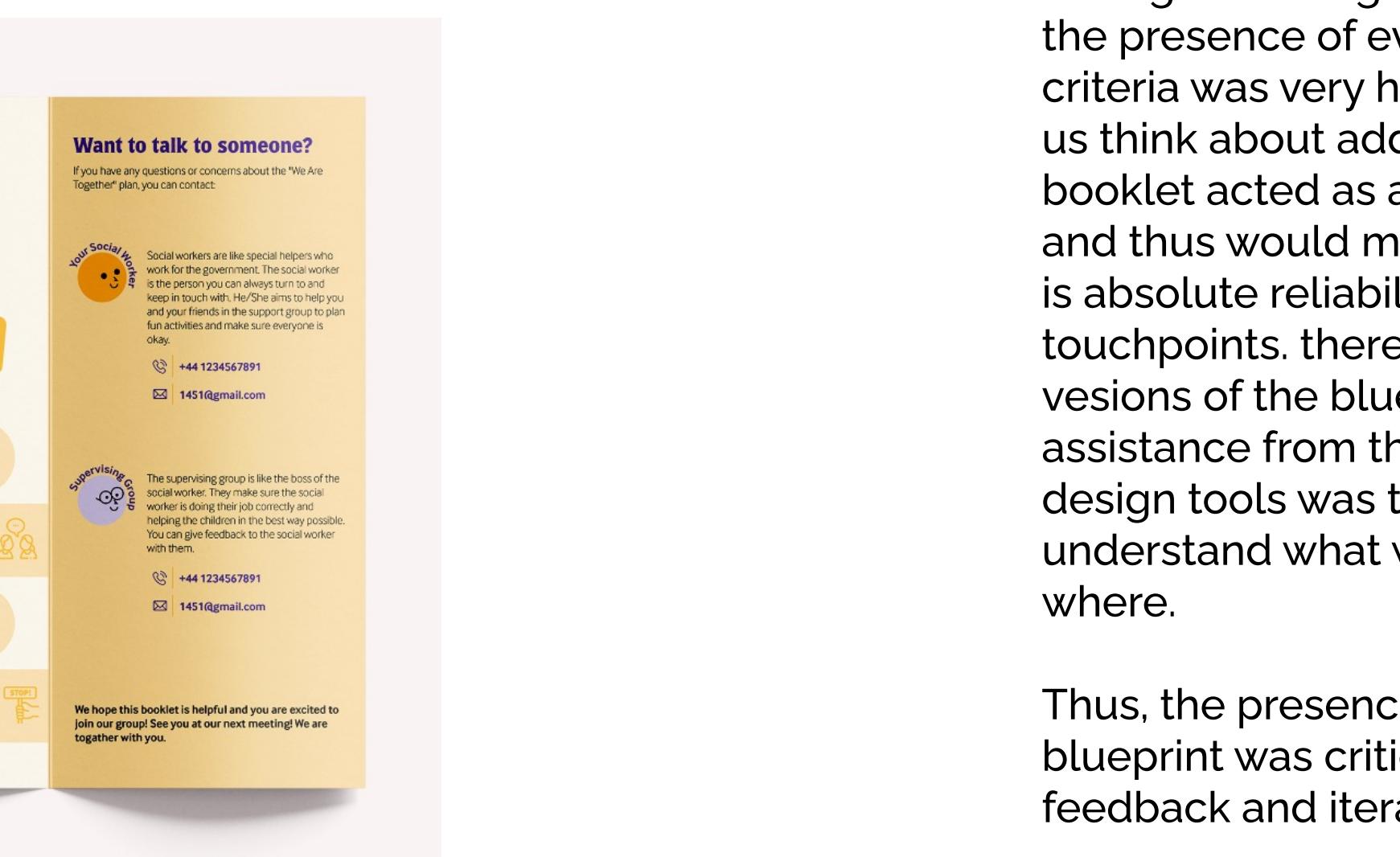


Figure 17: Proposed Mock Booklet for helping young people understand their rights and provide them with all necessary contact information

The New Service Blueprint

Service Blueprint of our proposed solution helped us visualise the necessary elements of the initiative and provided a holistic framework for understanding the utility from the it.

By working with the three major stakeholder - already present and proposed - we were able to clearly see their intentions, presence and roles at each step of the process. During each stage of the blueprint, the presence of evidence as a

Thus, the presence of the service blueprint was critical as it gave visual feedback and iterative opportunities.

STAGE	ENTERING INTO WAT			DURING THE WAT
	Child	Stakeholder Journey	Supervisor Committee	
Stakeholder Journey	meet the new social worker hand the booklet to the child receive the update of new child with details booklet	be informed of meeting details set up the meeting agenda receive the update of new child with details call/email/ platform	attend the meeting host the meeting receive the update of new child with details call/email/ platform	attend the meeting lead the discussion advocate may be present in the meeting call/email/ platform
Evidence	read the booklet update the child's situation	prepare for the meeting putting the child in a certain support group	transport/ physical presence	ask questions take part in activities observe and take notes observe and interact
Line of Interaction	Child	Social Worker	Supervisor Committee	take part in activities write reports go through platform report the user's anomalies
Frontstage	read the booklet putting the child in a certain support group	putting the child in a certain support group	send someone (advocate) to the meeting	discuss and update new information
Line of Visibility				
Backstage			New Child Management: (route management / meeting arrangement / activity planning, etc.)	Meeting Management (record / process feed-back, etc.)
Line of Interaction			VPD/ Booklet Design	other professional support for arranging documentation and analysis tools
Support Process				

Figure 18: A service blueprint for 'We Are Together'(WAT) initiative

Future Work

I believe that the service design project 'We Are Together' holds immense potential. With the right support and enhancements, it has the capability to address multiple issues faced by young people on a daily basis. Launching this service can be a significant step in addressing these issues while also tackling the problem of social worker overload. By creating effective touchpoints and contact with support groups, this initiative can address unmet needs at various levels.

In the future, it is important to get this initiative reviewed by several stakeholders and make necessary revisions as and where needed. It is important to have a closed group that can go through the parts of the proposal and give insights so that this project can become an implemented reality.

Moving forward, future research could focus on bridging the gap between society and the care system. This can be achieved through initiatives aimed at creating awareness and encouraging more interaction with the community. Such efforts can garner greater support for vulnerable young people who may feel lost and powerless.

One of the key strengths of this service design project is its sustainability. Rather than creating new seeds of innovation, 'We Are Together' builds upon existing systems and enhances them with additional innovations. This makes it adaptable to new transitions within the system and enables it to drive significant changes in response to emerging trends.

Overall, the 'We Are Together' service design project has the potential to create meaningful impact and drive significant positive changes in the care system. With the right support, it can become a catalyst for progress and pave the way for a better future for young people.

Conclusion

Thus, it can be concluded that 'We Are Together' initiative was an in-depth study focusing on the unique needs of young people within the care system in UK. This project was a step in the direction of change and the initiative is the right intervention needed to turn the atrocious system around. This initiative would not only be a move for personal development of the young children but also help improve the organisational structures. The care system is an overwhelming space and is prone to neglecting the needs and wants of young people. This initiative would provide a platform to change, by giving a voice to the young people in care.

With 'We Are Together's' support group, the young people can build empowering and positive relationships and the presence of proper documentation along with it would make sure that the processes address the real needs and remain trauma informed. The addition of a committee with advocates would only make the system more humanised and lay seeds for better humanised changes in the future. As per the aim statement, the initiative would once again bring the young person in the centre of the processes and helping the collaborators run smoothly during transition phases.

The project was a challenging one, however the drive to create a sustainable and stable innovation for the young people was motivating for me to walk through the complex and unseen path of the care system. Understanding the lived experiences and basing the entire project on those experiences and opinions was a challenging task. The use of multiple service design tools acted as an asset to refocus on the necessary aspects of the situation. Throughout this project, the aim was to connect with the people comprehensively.

In return, this project has allowed me to expand my approach and take a more holistic view of back-end processes, lived experiences, and innovation tools. This approach is crucial for future endeavours, and this project serves as an initial step in my journey towards learning from a new perspective. I aim to continue honing this skill in the coming years to create more human-centred and personalised changes that positively impact people's lives. Overall, this project has been a valuable learning experience, and I look forward to applying the knowledge and skills gained from it to future service design projects.

Bibliography

About Kibble Children's Charity in Scotland. (n.d.). [Www.kibble.org](http://www.kibble.org). <https://www.kibble.org/about-kibble/>
 administrator. (2015, August 12). Fostering. [Www.eastdunbarton.gov.uk](http://www.eastdunbarton.gov.uk). <https://www.eastdunbarton.gov.uk/health-and-social-care/services-children-families/adoption-fostering-and-kinship/fostering#>

CELCIS. (2019). Home | CELCIS - Centre for Excellence for Children's Care and Protection. [Celcis.org](http://celcis.org). <https://www.celcis.org/>

Contact us. (n.d.). Action for Children. Retrieved May 11, 2023, from [https://www.actionforchildren.org.uk/contact-us/](http://www.actionforchildren.org.uk/contact-us/)

Creative, V. (2021). About the care system. [Become](http://becomecharity.org.uk/about-the-care-system/#:~:text=As%20of%2031st%20March%202022). <https://becomecharity.org.uk/about-the-care-system/#:~:text=As%20of%2031st%20March%202022>

Design Justice Network. (2018). Read the Principles. [Design Justice Network](http://designjustice.org/read-the-principles). <https://designjustice.org/read-the-principles>

Downe, L. (2020). Good Services : how to Design Services that Work. Bis Publishers.

Finn, D., & Brody, J. (2014). THE STATE OF COMMUNITY DESIGN: AN ANALYSIS OF COMMUNITY DESIGN CENTER SERVICES. *Journal of Architectural and Planning Research*, 31(3), 181–200. <https://www.jstor.org/stable/44114603>

Hiller, R. M., Fraser, A., Denne, M., Bauer, A., & Halligan, S. L. (2022). The Development of Young Peoples' Internalising and Externalising Difficulties Over the First Three-Years in the Public Care System. *Child Maltreatment*, 28(1), 107755952110707. <https://doi.org/10.1177/10775595211070765>

IMO. (n.d.). The IMO Podcast: open and honest conversations with care leavers - IMO. In My Opinion. Retrieved May 11, 2023, from [https://www.childrenscommissioner.gov.uk/imo/podcast/](http://www.childrenscommissioner.gov.uk/imo/podcast/)

Keeping Families Together Through Whole Family Support And Support for Our Care Experienced Children, Young People and Adults. (2022, March 30). [Www.gov.scot](http://www.gov.scot). <https://www.gov.scot/publications/keeping-promise-implementation-plan/pages/5/>

Lee, K. (2011). Beyond Blueprints and Basics: A Service Design Conference Report. *Design Issues*, 27(4), 95–100. <https://www.jstor.org/stable/41261959>

Osgood, D. W., Foster, E. M., & Courtney, M. E. (2010). Vulnerable Populations and the Transition to Adulthood. *The Future of Children*, 20(1), 209–229. <https://www.jstor.org/stable/27795066>

Razall, K. (2019, November 12). Teens in care "without food and duvet" - BBC Newsnight. [Www.youtube.com](http://www.youtube.com). <https://www.youtube.com/watch?v=L2x0frDxM&t=1s>

Razzall, K. (2019, May 21). Britain's hidden children's homes - BBC Newsnight. [Www.youtube.com](http://www.youtube.com). <https://www.youtube.com/watch?v=VQjwpc2k>

Scotland. (2021). Home for Good. [https://homeforgood.org.uk/statistics/scotland#:~:text=There%20are%2010%23%20children%20in](http://homeforgood.org.uk/statistics/scotland#:~:text=There%20are%2010%23%20children%20in)

Scottish Government. (2021, March 15). Trauma-informed practice: toolkit. [Www.gov.scot](http://www.gov.scot). <https://www.gov.scot/publications/trauma-informed-practice-toolkit-scotland/pages/4/>

Singh, S. P., & Tuomainen, H. (2015). Transition from child to adult mental health services: needs, barriers, experiences and new models of care. *World Psychiatry*, 14(3), 358–361. <https://doi.org/10.1002/wps.20266>

The Promise Scotland. (2021). Home - The Promise. [Thepromise.scot](http://thepromise.scot). <https://thepromise.scot/>

Väänänen, T. (2020, March 11). Defining services, products and platforms in health & care. [Medium](http://medium.com/@teopsv/defining-services-products-and-platforms-in-health-care-9b99c74f4c02). <https://medium.com/@teopsv/defining-services-products-and-platforms-in-health-care-9b99c74f4c02>

Ward, I., & Clarke, D. M. (2022, March 15). World Social Work Day 2022: the experiences of social workers during COVID-19. [Www.celcis.org](http://www.celcis.org). <https://www.celcis.org/knowledge-bank/search-bank/blog/world-social-work-day-2022-experiences-social-workers-during-covid-19>