



Nothing About Us Without Us: co-operative social care across generations

Submission from Welsh and Yorkshire Young Co-operators to the Casey Commission

1 October 2026

Following the Prime Ministers statement this week <https://www.gov.uk/government/news/prime-minister-andy-burnham-sets-out-plans-for-a-new-national-care-service> we ask the Casey Commission to recognise that social care concerns children, young people and families as well as adults. We understand its formal remit is adult social care in England. Nevertheless, reforms will be weakened if they overlook childhood, unpaid care, family relationships and transitions. We seek connected recommendations and explicit consideration of these interfaces, respecting Welsh devolution.[1]

Decisions made today will shape our lives tomorrow

Adults making social care reforms today are determining systems that our generation will inherit, live within and have to navigate. We will experience their consequences as people receiving support, care workers, unpaid carers, parents and community members. Excluding children and young people from shaping these reforms means excluding those who will live longest with their outcomes. Meaningful consultation must begin while choices remain open, with accessible opportunities to influence proposals and clear explanations of how our contributions affect decisions.

Childhood and adult services cannot be considered separately within social care reform. For disabled children and young people, needs, relationships and aspirations continue across the eighteenth birthday, even when legal frameworks, eligibility criteria, funding arrangements and responsible teams change. Poorly coordinated transitions can interrupt trusted support, undermine education and employment opportunities, increase isolation and place unsustainable demands on families. Reform should prevent these gaps through early, jointly accountable planning shaped around the young person's life.

For care experienced young people, transition may also involve leaving a placement, securing housing, maintaining relationships and accessing emotional, practical and financial support. These changes can occur together, without the family safety net available to many peers. Care-experienced young people who are also disabled may face overlapping systems whose responsibilities are unclear or disputed. Their support must be coordinated without assuming that leaving-care services replace disability-related provision, or vice versa.

The Casey Commission should therefore assess how adult reforms affect children approaching adulthood, young carers and care-experienced young people, and recommend connected action with those responsible for children's services. A reform cannot be judged successful if it improves adult provision while leaving young people struggling to reach it.

Nothing About Us Without Us requires our generation to help shape both the destination and the pathway into it.

We submit our discussion paper, Nothing About Us Without Us: Children, Young People and Co-operative Place-Making in the Pride in Place Programme, as accompanying evidence. Its central argument applies directly to care: children and young people are citizens now, with rights, knowledge and strengths. Decisions affecting our lives require our participation, supported by meaningful influence rather than occasional consultation.[2]

Our paper asks who belongs, who decides and who holds power. Social care must answer those questions. Being invited to a meeting does not establish influence over assessments, budgets or commissioning. Authorities should show what changed because we participated, explain decisions accessibly and provide effective opportunities to challenge them. Listening without sharing power leaves the underlying exclusion intact.

Hart's analysis of tokenism and Lundy's model of space, voice, audience and influence, referenced in our paper, provide practical tests.[3][4] Children need safe opportunities to express views, communication support, decision-makers who listen and demonstrable consideration of their contributions. One confident young representative cannot speak for everyone. Participation must include disabled children, young carers and those excluded from formal meetings.

The UN Convention on the Rights of the Child reinforces this approach through participation, disability inclusion, family support and play. The disability convention recognises participation and community inclusion, including disabled children's right to express views with appropriate assistance.[5][6] These are relevant frameworks for reform, not reasons to postpone support until adulthood. Childhood relationships and community access matter in their own right.

We raise concerns that disabled children and adults, and their families, must fight repeatedly for assessments and provision. Requests for support with isolation, independence, communication, community activities and carers' sustainability can be treated as optional extras. Eligibility decisions should examine needs and applicable duties, not rely on assumptions that families should manage indefinitely or that distress must escalate first.

Social care cannot be reduced to child protection. In England, section 17 of the Children Act recognises disabled children as children in need and provides a framework for supporting their welfare and families.[7] Adult Care Act duties include wellbeing and prevention. Wales's Social Services and Well-being Act connects care with wellbeing, prevention, voice and control.[8][9] Safeguarding and supportive provision are complementary.

Where families report being told that help requires child-protection concerns, the Commission should investigate the reasoning and consequences. Disabled children should not have to become unsafe before support is considered. Appropriate short breaks, personal assistance and community participation can sustain relationships and prevent crises. Parents seeking help should encounter partnership and proportionate assessment, rather than automatic suspicion about their parenting.

Transitions must preserve relationships and support. Becoming eighteen does not remove disability, isolation or dependence on assistance. Planning should begin when it can meaningfully inform future provision, involve the young person and consider carers' needs. Separate eligibility systems must not produce avoidable gaps. Young carers also need recognition, opportunities and support extending beyond what adults need from them.[8]

Co-operation offers practical ways to strengthen reform. Multi-stakeholder co-operatives can connect people receiving care, workers, families and communities through shared governance. They can make influence an organisational responsibility, support continuity and retain resources locally. Our paper's references to community wealth building and collective stewardship help explain why ownership and decision-making matter alongside service specifications and prices.[2]

Published co-operative care research identifies relationship-based provision, workforce voice and local reinvestment. Cartrefi Cymru and Swansea's Friends United Together illustrate democratic and user-led approaches; Equal Care Co-op offers further learning from Yorkshire and London.[10] These examples deserve investment and evaluation. Co-operative structures must demonstrate accessible participation, safe practice and accountability, supported by sustainable funding rather than assumptions that solidarity substitutes for resources.

We are concerned that public resources can flow to preferred providers while existing community co-operatives struggle for recognition, contracts and premises. Authorities should investigate these concerns through published allocation records. Institutional connections and polished applications should not outweigh lived experience, local trust and proven provision. Access to buildings, refurbishment funds and secure leases must be transparent and fair.

Commissioning private businesses while overlooking suitable co-operatives deserves scrutiny, particularly where public value leaves communities. Existing providers should receive fair opportunities to demonstrate outcomes and democratic accountability. We ask commissioners to publish ownership patterns, financial flows, tender criteria and reasons for exclusions. Quality, continuity, workforce conditions and community benefit should carry meaningful weight within lawful procurement arrangements.

New programmes must strengthen existing capacity. Replacing established co-operative provision with newly favoured organisations can destroy trusted relationships and accumulated expertise. Co-operative development funding should reach competent specialist agencies and care organisations through transparent arrangements. Local authorities and mayoral bodies should enable partnerships and share decisions, with safeguards against funding being absorbed into administration or generic support.

Nothing about some of us without all of us requires accessible participation: Easy Read, alternative communication, interpreters, quiet spaces, flexible times, travel costs and independent advocacy. Class, poverty, disability, racism, geography and language can intersect to exclude people. Participation should recognise expertise through payment where appropriate, while ensuring benefits advice and practical support. Communities must help determine how inclusion is measured.

Public responsibility must remain clear: sharing power does not mean abandoning statutory duties. Authorities should support community leadership while remaining answerable for assessments, funding and delivery. We want accountable partnership, with independent challenge when decisions restrict our lives unjustifiably.

We recommend a supported young people's advisory and scrutiny structure within the reforms, with influence over priorities, evaluation and resources. Include family-support co-operatives and young co-operators and young carers, those who contribute to the child and adult social care service delivery; commission specialist development assistance; protect continuity during changes; fund prevention and fair work; and examine the Fair Care Mark

as an assurance framework alongside regulation. Publish progress and responses to participants. Social care should enable us to belong, contribute and live with dignity. Co-operation can help make those promises real.

References and supporting evidence

1. Department of Health and Social Care, [Independent commission into adult social care: terms of reference](#). This submission asks for attention to interfaces and connected recommendations; it does not assert that the Commission already has a UK-wide, all-age mandate.
2. Hanley, M. M., *Nothing About Us Without Us: Children, Young People and Co-operative Place-Making in the Pride in Place Programme*, 12 September 2026. Prepared for Yorkshire Young Co-operators and Sheffield Co-operative Development Group, reflecting dialogue with Welsh young co-operators. Submitted as accompanying evidence. Relevant chapters: 4 (rights and citizenship), 5 (intersectionality and adjustments), 8 (community assets), 12 (shared governance), 13 (stewardship), 14 (community wealth building), 16 (representation) and 17 (practical participation). The current discussion paper describes exploratory dialogue and literature; this submission does not portray it as a formal evaluation of social care.
3. Hart, R. A. (1992), *Children's Participation: From Tokenism to Citizenship*, UNICEF International Child Development Centre. Cited in the accompanying paper. [UN catalogue record](#).
4. Lundy, L. (2007), "'Voice' is not enough: conceptualising Article 12 of the United Nations Convention on the Rights of the Child", *British Educational Research Journal*, 33(6), 927–942. Cited in the accompanying paper. [European Commission explanation of the model](#).
5. United Nations (1989), *Convention on the Rights of the Child*, particularly Articles 12, 18, 23 and 31; Committee on the Rights of the Child (2009), *General Comment No. 12*. Both referenced in the accompanying paper. [UNICEF convention text](#).
6. United Nations (2006), *Convention on the Rights of Persons with Disabilities*, particularly Articles 7 and 19. Referenced in the accompanying paper. Treaty commitments are presented as reform frameworks, not as a claim that every article creates a freestanding domestic entitlement to a particular service.
7. [Children Act 1989, section 17](#). Needs-led family support is distinct from the significant-harm framework for child-protection enquiries. Specific provision depends on the applicable duties and individual assessment.
8. Department of Health and Social Care, [Care and support statutory guidance](#), particularly chapters 1, 2 and 16 (wellbeing, prevention and transition).
9. Welsh Government, [Social Services and Well-being \(Wales\) Act 2014](#), including the principles of prevention, voice and control. Section 16 is relevant to promotion of co-operatives and user-led provision.
10. Vicario, S., Jenkins, S., Brookes, N. and Hamblin, K. (2026), [Social Care Co-operatives in the UK](#). Small-sample, partly self-reported research supports further development and evaluation, rather than universal outcome claims.