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Metadata Record: https://dspace.lboro.ac.uk/2134/3595

Publisher: © Loughborough University

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Very young children in need or at risk of significant harm: issues affecting parenting capacity

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Key words: safeguarding children, children at risk of significant harm, decision-making processes, needs assessment, parenting capacity

Introduction
This workshop is based on preliminary findings from 'Protecting and Promoting the Wellbeing of Very Young Children: A prospective study of babies in need or at risk of significant harm'. The study traces the decision-making process influencing the life pathways of very young children at high risk of significant harm from birth until age two.

Purpose
The study aims to:

- Identify whether children with similar needs become looked after in some authorities but remain at home with family support services in others, and to identify the reasons for these variations.
- Explore how, and at what point, the decision between providing family support services or placements is made; to explore the extent to which certain factors such as assessments of parents' capacity to address difficulties in family functioning, and the likely availability of support services influence such decisions.
- Examine what role various participants have in the decision-making process, and how differences in professional opinion are reconciled. To explore whose views have the greatest influence.
- Explore how far birth parents feel involved in the decision-making process; to examine how far certain interventions support or inhibit partnership working.
- Assess the extent to which certain decisions influence children's life pathways and promote or inhibit opportunities for satisfactory outcomes.

Ten local authorities are participating in the study. Authorities were selected on the basis that they undertook a relatively high proportion of core assessments, so as to maximise the likelihood that they would have sufficient numbers of very young children at risk of significant harm to meet the sample quota.
The sample comprises of 59 babies, the majority of whom were recruited between October 2006 and October 2007. Criteria for selection were that the child had been the subject of:

- a core assessment or section 47 enquiry or the child became looked after before their first birthday (this included pre-birth assessments).

Case file and interview data on life experiences, reasons for referral and evidence of need have been collected at the point the babies were recruited to the sample. Information has been traced back to the child’s birth (or pre-birth where applicable), as far as possible. Follow-up data are being collected at ages one and two to monitor changes in needs, circumstances, care plans, domiciles and placements. Quantitative data are being complemented with extensive interviews with key professionals involved in the decision-making process.

**Key findings**

These findings are based on preliminary analysis of the first stage of data collection for the study, that is, at the point when risk of harm was first identified.

In a previous Loughborough study on a long stay sample\(^1\) of very young looked after children none of the babies of parents suffering mental ill-health, domestic violence, drug or alcohol misuse were successfully rehabilitated to their birth families (Ward et al. 2006). It should, however, be acknowledged that this was a long-stay sample of children and that outcomes may differ if parents are committed to overcoming their addictions and/or engage in a rehabilitation programme earlier (Munro and Ward 2008). Case record data from the current study reveal that two thirds of families were experiencing one or more of these issues at the point of assessment. While it is too early to determine the outcome of these cases it is apparent that many parents were facing substantial problems that are likely to impact upon their care-giving.

The most frequently identified issue relating to maternal parenting capacity was mental ill-health followed by domestic violence. Fifty seven per cent of case records identified that mothers had suffered mental ill-health at some stage in their lives. There were variations in the nature and severity of difficulties experienced (ranging from ‘low mood’ to suicide attempts). At the point of assessment, just under a third were experiencing mental health difficulties. Fewer fathers were found to be suffering from mental health problems. Information on the severity of difficulties and the impact

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\(^1\) Remained in care or accommodation for at least twelve months
that they may have upon parenting capacity to meet the needs of very young children was under recorded.

Domestic violence was identified as a current concern in thirty per cent of cases; a higher proportion of mothers had previously been in relationships characterised as violent, but had subsequently separated from these partners. Inter-parental conflict was a more common issue than parental substance misuse in sample cases.

The forthcoming interim report explores in more detail risk and protective factors that were identified within households when a core assessment or s.47 enquiry was undertaken and how these influenced initial decisions. A final report will explore the consequences of key decisions and their impact upon outcomes, children’s progress and development.

Other emerging findings include:
- High proportion of parents who experienced abuse or neglect in their own childhoods
- High proportion of pre-birth referrals and assessments
- The pregnancy and removal cycle (longstanding children’s services involvement, multiple children permanently placed away from home).
- Parental engagement with services at the point of pregnancy: facilitating successful outcomes in spite of multiple risk factors?

Implications
The study has implications for the following:
- Social work training (needs and risks pre-birth).
- Inter-agency working in theory and practice (adult services; liaison between children’s services and housing).
- Cost/benefits of tackling the pregnancy and removal cycle.

References

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