parents with learning difficulties child protection and the courts

a report to The Nuffield Foundation
on Grant No. CPF/00151/G

Tim Booth and Wendy Booth

Department of Sociological Studies
The University of Sheffield
March 2004

INTRODUCTION

We were funded by The Nuffield Foundation under the Child Protection, Family Law and Justice Programme to undertake a two-year investigation of parents with learning difficulties[1]involved in care proceedings. This is our final report to the Foundation.

The report outlines the wider context of the study, describes the research we have done, summarises the findings to date and highlights their implications for policy and practice.

In preparing our report we have made a virtue of *brevity, relevance and accessibility:*

- *brevity,* in that we have sought to convey the main messages from our research without reporting all the supporting detail;
- *relevance*, in that we have focussed on matters with an applied rather than a theoretical import;
- *accessibility,* in that we have chosen to keep to a minimum the amount of technical and statistical information.

The driving purpose of this study was to explore the process and outcomes of child protection work with parents who have learning difficulties and to evaluate the implications for policy and practice. This goal has determined the form of this report.

---

[1] The term ‘learning difficulties’ is used in this report in place of other common labels (such as ‘learning disability’, ‘mental handicap’, ‘mental retardation’, ‘intellectual disability’ and the like) in line with the preference of the self-advocacy movement in the UK. It encompasses people with a broad range of impairments all of which include permanent limitations in intellectual capacity and social functioning that started before adulthood.

THE WIDER CONTEXT

There are no accurate and reliable figures on the number of parents with learning difficulties. Several factors make it difficult to count how many parents there are. These include fragmented services, poor records, no common definitions, missing assessments and the invisibility of many parents to official agencies.

For all these reasons, mothers and fathers with an intellectual disability constitute a hidden population whose size is hard to estimate.

Mirfin-Veitch et al (1999) used capture-recapture methods to estimate the number of families headed by a parent or parents with learning difficulties in the Otago and Southland regions of New Zealand. Their findings produced a prevalence rate of 2.51 families per 1000 families in the general population. Applying the same rate to England and Wales yields an estimate of approximately 37,000 families where at least one parent has learning difficulties.

On the basis of a survey of service involvement in the Mansfield and Ashfield areas of Nottinghamshire, Nicholson (1997) reports that, in a population of 200,000, between 40 and 80 parents with learning difficulties and their families were being worked with by services at any one time (see also Bradley et al. 2000). Extrapolating this rate to England and Wales gives a total of between 10,000 and 20,000 families. However, many families survive in the community without ongoing support from the services. Using the same ratio between these two groups as Mirfin-Veitch et al's statistical model generated gives a total population of between 23,000 to 46,000 families headed by a parent or parents with learning difficulties.

Drawing on data from the US Bureau of the Census, Barker and Maralani (1997) estimate there are 7 million disabled parents with children under 18 at home in America, of whom 5% have cognitive disabilities. In the UK, estimates of the number of disabled parents range from 1.2 to 4 million, depending on how they are calculated (Goodinge 2000, para.1.8). If a similar proportion as given by Barker and Maralani has learning difficulties, then this points to there being somewhere between 60,000 to 200,000 parents in the UK. This latter figure approaches McGaw's estimate of 250,000 (McGaw 1997).

The broad spread of these estimates and the uncertain assumptions on which they are based leave it hard to know what to make of them. What research does show clearly, however, is that referrals of parents with learning difficulties are rising steadily in the UK and most groups of professionals working with families now have them on their caseloads.

Reports from Clinical Psychology Departments as far afield as Swansea (Woodhouse et al. 2001), Nottingham (Bradley et al. 2000), and Sunderland (Johnson et al. 1995) note a big increase in requests for parenting assessments. Similar reports of increasing referrals have also come from community learning disability teams (Guinea 2001) and advocacy schemes (Mansell and West 2000). Several local studies have found that most practitioners have parents with learning difficulties on their caseloads. Stevenson (1998) reports that two-thirds of the social workers in the Children and Families Teams and Children's Disability Teams she studied were carrying at least one case (see also Charlett 2001; Nicholson, 1997 #1736). Genders (1998) found a similar level of involvement among community nurses and English (2000) among health visitors and midwives.

So, although the precise number of parents may be elusive, the fact that they feature prominently on practitioners' workloads is well established.

Parents' involvement with practitioners usually starts because they need help with looking after their children and all too often ends with them losing them. Around the world the picture is the same: parents with learning difficulties are hard pressed to hold on to their children. Studies from a long list of countries and legal jurisdictions present a remarkably consistent trail of evidence showing that, in any sample of parents, about two out of every five of their children will have been permanently placed outside the family home. Table 1 provides an overview of this international research.

Table 1

Author	Location	Percent children no longer living with birth parents
Faureholm 1996	Denmark	30%
Pixa-Kettner 1998	Germany	30%
Van Hove and en Wellens 1995	Belgium	40%
Mørch, Jens et al. 1997	Norway	39%
Mirfin-Veitch, Bray et al. 1999	New Zealand	41%
McConnell and Llewellyn 1998	Australia	33%
Accardo and Whitman 1990	St. Louis, USA	46%
New York State Commission 1993	New York, USA	50%
Nicholson 1997	Nottinghamshire, UK	48%

Such high rates of child removal appear to indicate widespread parenting failure among this group of parents. However, as Dowdney and Skuse (1993) have pointed out, a child's reception into care is an unsatisfactory criterion of parental inadequacy in the case of parents with learning difficulties. A number of variables mediate the relationship between parental adequacy and child outcomes. As Czukar (1983), for instance, observes, parents with learning difficulties 'are especially vulnerable to losing custody of their children in child welfare adjudications because of prejudicial attitudes, unfounded assumptions about inadequate parenting, lack of appropriate support services, and other problems.'

International research, mainly from Australia and North America, lends support to Czukar's contention and suggests that parents with learning difficulties receive a raw deal in care proceedings and the courts. Booth (2000) summarises this evidence and highlights the following key points:

- Parents with learning difficulties are disproportionately represented in care proceedings.
- They are less likely than other parents to have received support in their parenting – or to have received inadequate support – before care proceedings are initiated.
- They are at risk of having their parental responsibility terminated on the basis of evidence that would not hold up against non-disabled parents.
- They are likely to have their competence as parents judged against stricter criteria or harsher standards than other parents.
- They are more likely to have their children removed and their parental rights terminated.

- They are disadvantaged in the child protection and court process by rules of evidence and procedure, their own limitations and inadequacies in services.

- They are less likely to receive support in correcting the conditions leading to termination.

There has been no comparable research yet published in England that looks at how the child protection system impacts on parents with learning difficulties and their families. Such a study is overdue. Legitimate concerns arise when members of a vulnerable social minority, known to meet with entrenched discrimination in society, face a disproportionate risk of compulsory statutory intervention in their family life and of losing their children. These concerns are given added weight by the Social Services Inspectorate, which has found that:

- Parenting assessments are undertaken by staff who do not have the necessary skills (Goodinge 2000 para. 1.29).
- Critical decisions about the children of learning disabled parents (such as being placed on or remaining on the child protection register and /or being removed from the family) can be made on 'inappropriate or inadequate information' (Goodinge 2000 para. 1.29).
- Social workers in Children and Families teams are viewed by disabled parents as 'insufficiently knowledgeable' about 'how to enable disabled adults to parent' and 'over zealous in their assessment of the risks' faced by their children (see, for example, Social Services Inspectorate 1998).

This study set out to investigate how child protection cases involving parents with learning difficulties are handled by social services and the courts and to explore the factors that drive decisions in care proceedings about the best interests of children from such families.

RESEARCH DESIGN AND METHODS

This study was conceived and carried out as an exploratory and descriptive piece of research rather than an hypothesis-testing one. This approach was dictated by:

(a) *our current state of knowledge* – when what is missing is basic documentary information about the involvement of parents with learning difficulties in care proceedings;

(b) *problems of access* – which pre-empt a tightly structured, a priori research design; and

(b) *problems of sampling* – which present possibly insurmountable obstacles to obtaining statistically representative data.

The broad aim was to bring together information from a variety of sources and a variety of perspectives that would help to provide an accurate fix on the position of parents with learning difficulties navigating their way through the child protection system and the courts.

The study involved five separate phases of research.

DOCUMENT REVIEW OF COURT RECORDS

The court records of all care and related proceedings coming before the Family Proceedings Court and the County Court in Leeds and Sheffield in the year 2000 were targeted for review. Table 2 gives a breakdown of the total number of case files found in each court during the focal year.

Table 2

	Family Proceedings Court	County Court
Sheffield	90	204
Leeds	244	286
Total	334	490

All relevant files were found in the two County Courts, except for a small number of cases transferred to other courts when the families moved. In the two Family Proceedings Courts, the number of files found was less than the number of applications considered because of transfers up to the County Court (170) and missing files (43).

These 824 cases involved 437 public law applications by local authorities under the Children Act 1989, excluding a small number of applications to vary an order made in earlier proceedings. These 437 cases were our primary focus. Data were extracted for all these cases in all courts regarding:

(a) *parent and family characteristics*, including information on ages, family structure, ethnicity, disability and evidence of convictions/drug/alcohol problems;

(b) *case characteristics,* including information on type of application, the applicant, history of previous notifications/investigations/ orders, the basis of present concerns, details of any police involvement, services and support received, and developments since the application was lodged;

(c) *court process characteristics,* including information on the dates the case opened and closed, details of the final outcome (type of order made, if any) and placement decisions.

Additional data were collected for all cases involving a parent or parents with an unambiguous assessment of learning difficulties, including information on:

- the family's socio-economic situation
- the key influences on social work decisions
- the identified risk factors
- the evidence presented to court
- the plans for the child(ren)

A two-part proforma was used for recording data (on all cases and learning difficulties cases only) direct from the court files. These data were then input anonymously into an SPSS database using the court case number as the only identifier.

Access to the court files was granted following a formal application to The Lord Chancellor's Department for a Privileged Access Agreement. This ensured the ready co-operation of court managers and staff but also took almost eighteen months to secure.

DOCUMENT REVIEW OF SOCIAL SERVICES FILES

The records of all case conferences convened or re-convened by Sheffield Child Protection Unit in the year 2000 were examined and data extracted for all those that were identified as involving a parent or parents with learning difficulties.

A total of 310 case files relating to 399 children were reviewed (the records relating to 4 cases that went to conference could not be located). This resulted in the identification of 25 eligible cases involving 37 children. Only 5 of these cases did not result in registration. The remaining 20 cases were put on the Child Protection Register for reasons of: neglect (11 cases); emotional abuse (4 cases); risk of sexual abuse (3 cases); risk of physical injury (1 case); and neglect/risk of physical injury (1 case).

An attempt was made to trace the social work files of all 25 focal cases. This proved to be a difficult assignment. There was no central filing system in the Department. It was necessary, therefore, to refer to the Area Office last known to have worked with the case. Problems arose where the papers had been forwarded to another Area after families had moved house; where the named worker had left and the case had been reallocated; where the caseworker was away on holiday or on sick leave. In the end, data was obtained on 15 out of the 25 cases. Despite our best efforts, the files for 10 cases could not be found.

Parents with learning difficulties were not identified as a category of service user in the Department's record system. Accordingly, it was not possible to search for families who were on the caseload of Children and Families Teams but whose children had not (yet) been placed on the Child Protection Register.

The Family Support Service was approached with a view to reviewing the files of any families headed by a parent or parents with learning difficulties then currently receiving support in the home. Again, this turned out to be harder than envisaged. There was no integrated paper or computerised record system of family support service users and no way of identifying parents with learning difficulties from the divisionally-based paper records that did exist, short of reading them all. The Family Support Service Manager offered to email all support workers asking them to inform her of any current cases in which one or both parents had learning difficulties. Only one family was identified in this way.

Information was extracted from the case files and recorded on standard proformas designed for the purpose:

> *From the CPU files*
> Data was collected on the family's characteristics and home circumstances; the reasons for the initial referral; the case history; process and outcomes; and the quality of case recording.
>
> *From the social work files*
> Data was collected on the family; the basis of original concerns; services provided; details of the assessment undertaken; the quality of recording.

OBSERVATION OF COURT PROCEEDINGS

Proceedings were observed in 12 cases involving parent(s) with learning difficulties before 8 different judges in Sheffield County Court (7 cases) and Leeds County Court (5 cases). These proceedings included 1 Directions Hearing, 1 Finding of Facts, 9 Final Hearings and 1 Judgement.

Permission to observe in these courts was first sought from the presiding judge, and then from the legal representatives of both sides and, through their solicitor, from the parent(s) involved. The only refusal came after a six month wait for the Final Hearing of a case involving an Asian mother with learning difficulties who turned down our request to sit in court.

Managing attendance at these hearings proved to be logistical challenge. We sometimes did not know if the parents would agree to our presence in court until their solicitor asked them immediately prior to the hearing. Also, hearings were frequently postponed at the last minute and rescheduled at a day's notice, depending on the availability of a judge and/or a courtroom.

The main purpose of attending proceedings was to observe how parents with learning difficulties presented in court and how the court process accommodated them. Observation was structured using a prepared protocol and recorded live in narrative form.

INTERVIEWS WITH PROFESSIONALS AND PRACTITIONERS

Personal interviews and group discussions were conducted with a purposive sample of people who had professional experience of working with parents with learning difficulties in the child protection system. Thirty individual interviews and 8 group interviews/discussions (with a total of 31 participants) were completed.

The main purpose of these interviews and discussions was: (a) to explore professional perceptions and concerns about ways of working with parents who have learning difficulties and (b) to throw light on the factors that are weighed in the balance when making decisions in these cases.

Table 3 shows the distribution of interviews by respondents:

Table 3

Professional Status	Number of Respondents
Social workers and managers	16
Guardians/CAFCASS officials	21
Child Protection Coordinators	3
Support staff	4
Psychologists	3
Solicitors/Barristers	9
Judges	5

The interviews were conducted as open-ended, unstructured discussions around a common set of topics or issues relating to policies, practices and procedures in assessment, child protection work, family support, legal representation and the administration of justice. The majority (26) of the one-to-one interviews were tape recorded, with the respondents' permission, on a promise of confidentiality. Six of the 8 group discussions were also tape recorded for later transcription.

Access to judges was arranged via court managers. Solicitors and barristers were identified from court lists, personal contact or third party recommendation and approached directly. In both instances, the fact that our study had been vetted and sanctioned by The Lord Chancellor's Department, after clearance from the President of the Family Division of the High Court, helped greatly in opening doors and overcoming reticence. Access to Guardians and CAFCASS officials was facilitated by a regional office in Yorkshire and Humberside, which arranged for us to give a lunchtime presentation to interested staff; introductions made at this meeting paved the way for follow-up contacts. Permission to approach social services staff was negotiated with social work management. Individual workers were invited personally to share their experience with us.

INTERVIEWS WITH PARENTS

Personal interviews were completed with 25 parents and partners from 20 households in which at least one child had been the subject of a care application. Table 4 gives a breakdown of the interviewees by household type:

Table 4

Household Type	Number of interviewees		
	Couple	Mother only	Father only
Both parents together	4	3	1
Parent and partner	1	3	0
Lone parent	0	7	1

The 20 households contained a total of 32 parents and partners, including 24 parents with learning difficulties (19 mothers and 5 fathers). We interviewed 22 of these 24 parents (18 mothers and 4 fathers). All the interviews included at least one parent with learning difficulties, as did all the households.

The 24 parents with learning difficulties had between them a total of 57 children, including 4 who were now adults and leading lives of their own. Thirteen (25%) of the 53 under-age children were living with their parent(s) at the time of the interviews, and six of this group had been involved in care proceedings. Only 7 of the 53 children had never been subject to a care application. Of those no longer with their parents, 16 were fostered, 23 had been adopted and 1 was living in a Children's Home. One pregnant mother was facing a care plan for the adoption of her unborn child following the decision of a pre-birth case conference. Eleven of the households contained no children at the time of the interview.

The terms of our Access Agreement with The Court Service precluded us from contacting directly any of the parties, including their representatives, using information drawn from court files. Other ways had to be found of locating parents who might talk to us. Initially we had the idea of approaching, through their solicitors, the parents who had agreed to us observing their cases in court. While the solicitors were happy to act as intermediaries, none of the parents were receptive to our requests and we concluded that the trauma of their recent experience had left them emotionally raw and unwilling to go over the same painful events yet again. After this setback, we decided to work through professional gatekeepers in the health and social services, the law, and advocacy schemes by asking them to put us in touch with parents they had known who had been through the courts sometime in the not-too-distant past. The understanding was that the professional as go-between would approach the parent(s), explain our study and how they could help and invite them to meet with us at a time and place of their own choosing. To this end, we prepared an outline of the study for the professional's information and a plain language version for them to give to the parents, although we know that not all of them passed it on. Sometimes the go-between fixed an appointment directly with the parents and simply notified us of when and where we should meet them. More usually, having indicated their willingness to see us, the parents agreed to the go-between giving us their telephone number and we then contacted them personally to arrange a meeting. Although time-consuming, this approach eventually produced the number of interviews we had planned. The parents we met were spread over six local authorities in South Yorkshire, West Yorkshire and Greater Manchester.

The interviews with the parents were conducted as guided conversations around a series of topics floated by the interviewer and pursued for as long as the informant was willing and had something more to say. We were always conscious of the distressing nature of the events we were talking about. Most of the parents were still clearly grieving for the child or children they had lost and their stories still had a heart-rending immediacy no matter how long ago they had taken place. Our 'rules of engagement' were simple. The parents were in the driving seat and we were led by them. As soon as they indicated a topic was closed there was no more probing and we moved on. Our job was to listen, and listen again. Whatever the parents chose to talk about we should do them the courtesy of hearing them out, even if it was not directly pertinent to our own interests. Our aim was to conclude the interviews with the parents feeling vindicated, having been able to put their side of the case, knowing it had been received sympathetically and not having been made to feel guilty for the outcome. If this meant abandoning the textbook injunction to maintain a neutral stance as an interviewer, we were quite ready to identify ourselves with the parents' viewpoint.

The topics listed on our 'aide memoire' included: the history of parents' involvement with the services and their opinion of the support they have received; parents' relationships with service workers and professionals; their understanding and evaluation of the assessment process; their feelings about attending case conferences, reviews, core group meetings and the like and their views about how these are conducted; their observations on the court proceedings, how they were treated in court and what was said about them in court; their understanding of the reasons why their child was removed; their views about contact arrangements and their child's placement; what might have helped to prevent them losing their child.

Most of the interviews were concluded at one sitting. A second visit was made to just four households. All but two of the interviews were tape recorded with the consent of the interviewees. Detailed notes of the two unrecorded interviews were typed up immediately afterwards. The tapes were transcribed by the researchers for extra security, having regard to the promise of confidentiality given to all the interviewees.

SUMMARY

Data for the project were collected from: the records of 437 cases heard before the Family Proceedings Court and the County Court in Leeds and Sheffield in the year 2000; the case files relating to 310 case conferences convened by Sheffield Child Protection Unit in 2000; observation of court proceedings in 12 cases in Leeds and Sheffield County Courts; 30 interviews and 8 group discussions (involving 31 participants) with professionals and practitioners; and personal interviews with 25 parents and partners (22 of them with learning difficulties) who had previously been through care proceedings.

THE COURT FINDINGS

The 2000 Cohort

The 437 care applications initiated by local authorities in the four courts involved in this study concerned a total of 828 children, an average of 1.9 children per case.[2] Table 5 shows the distribution of children by court:

Table 5

	Family Proceedings Court	County Court
Leeds	79	384
Sheffield	46	319
Total	125	703

AGE OF CHILDREN

The 828 children ranged in age from 0 (<1 month) to 210 months (17.5 years). The mean age was 57.3 months or nearly five years (95% CI, 53.6-61.0 months). By age band:

- 231 children (28%) were aged 12 months or younger when proceedings commenced, including 92 (11%) newborn children (<1 month).
- 153 children (18.5%) were between the ages of 1 – 3 years.
- 166 children (20%) were aged 3 - 6 years.
- 199 children (24%) were between 6 – 12 years.
- 79 children (9.5%) were 12 years or older.

---

[2] The basic unit of analysis used in this study is the child. Cases, parents, families or households will be used only where these units contribute to an understanding of the data.

ETHNICITY

Over three quarters (n= 655; 79.1%) of all children were of White UK origin; a further 11 (1.3%) were classified as White Other. Ninety-six children (11.6%) had mixed parentage, including 44 White/Asian, 44 White/Afro-Caribbean and 12 others. There were 20 children from Pakistani backgrounds, 8 African/Afro-Caribbean and 7 classed as Asian. The ethnicity of 31 children was not known.

IMPAIRMENT/DISABILITY

Just over one in seven children (n=112; 13.5%) had some form of documented impairment or medical condition. The single largest group (n=72; 8.7%) comprised children who were recorded as having learning difficulties, followed by those with miscellaneous medical conditions (n=16); sensory impairments (n=14); physical impairments (n=14) and emotional/behavioural difficulties (n=4).

FAMILY COMPOSITION

A substantial minority of children (n= 348; 42%) lived in a lone-parent household when proceedings commenced, of whom 158 had little or no contact with the non-custodial parent, in most cases (148) the father. A third of the children (289; 33.8%) were living with both parents when their case came to court and another 166 children (20.1%) belonged to reconstituted families. The remaining 30 children were either living with extended family members or with adoptive/foster parents.

Parental Learning Difficulties

Among the total of 437 relevant care applications by local authorities, we found 66 (15.1%) in which at least one parent had learning difficulties.

These 66 cases referred to 127 children in total.

A further 21 applications involving an additional 56 children contained evidential material referring to one or both parents having borderline learning difficulties[3]

Table 6: Prevalence of children in court cohort by parental learning difficulties

Parents with...	Number of children	Per cent
Learning difficulties	127	15.3
Borderline learning difficulties	56	6.8
No learning difficulties	645	77.9

Over one in every six children subject to care proceedings in the year 2000 in the two courts we studied had at least one parent with learning difficulties. The proportion rises to almost a quarter of all children (22.1%) if cases involving parents with borderline learning difficulties are included.

In most instances, the parent's learning difficulties were documented in a psychologist's or (less often) a psychiatrist's clinical report to the court. In others, the assessment was found in a social worker's report supported by reference to previous testing or attendance at a special school.

---

[3] These cases have been excluded from the subsequent analysis which refers only to those where a clinical assessment or other incontrovertible evidence (such as attendance at a special school) of learning difficulties was found.

The 66 care applications featured 59 mothers with learning difficulties. IQ scores were cited for 30 of these mothers and ranged from 52 to 75 with a mean of 62.9 (95% CI, 60.7-65.0).

A total of 21 fathers with learning difficulties were identified from the case records, including 16 biological fathers and 3 stepfathers. IQ scores were available for 9 of these fathers and ranged from 61 to 69 with a mean of 65.1 (95% CI, 63.3-66.9).

Fourteen of these applications (22.2% of all those involving parents with learning difficulties) included both a mother and a father with learning difficulties. In 45 cases (68.2% of the total) only the mother was identified as having learning difficulties, although in 4 of these the biological father was reported to have borderline or ‘suspected’ learning difficulties. There were just 7 applications (10.6%) in which the father alone had learning difficulties, although again 3 of the mothers were described as ‘borderline’.

The mothers with learning difficulties ranged in age from 14 to 45, with a mean of 29.8 years (95% CI, 28.1-31.6). The fathers were a little older on average, ranging from 20 to 56 years with a mean of 33.0 (95% CI, 30.6-35.3).

Table 7 compares the rate of occurrence of parental learning difficulties with other parental disabilities, problems or dependencies in the court sample.

Table 7: Children by parental disability[a]

Parents with...	Number of children	Per cent children
No disability	267	32.2
Drug/alcohol issues	333	40.2
Mental illness	254	30.7
Learning difficulties	127	15.3
Physical disability	34	4.1
Sensory disability	7	0.8

a. The groups listed are not mutually exclusive

Only a third (32.2%) of the total number of children in the courts cohort had parents with none of the listed disabilities or dependencies. The most numerous group were children of parents with drug and/or alcohol problems, followed by children of parents with a mental illness. There were notably few children whose parents had physical or sensory disabilities.

CO-MORBIDITY

Over a third (n= 25, 37.9%) of the 66 cases involved a mother (21) and/or a father (5) with some kind of impairment in addition to learning difficulties. Seventeen of these mothers and all the fathers had a specified psychiatric disorder, mainly clinical depression (8), or some other unspecified mental health condition.

Drugs and alcohol were documented as problems in 20 of the care applications featuring parents with learning difficulties. Chronic or binge drinking and/or drug use was alleged in the case of 16 fathers and 7 mothers.

CRIMINALITY

Only 3 mothers had a criminal record, although no further details were available in the files. By contrast, two out of five (n=20) of the biological or de facto fathers had previous convictions: 9 were ‘Schedule 1’ offenders. No details were available about the criminal record of 11 of these men. Only 4 of this group of fathers had learning difficulties.

The Children

AGE

The 127 children in the court sample who had a parent or parents with learning difficulties ranged in age from 0 (<1 month) to 189 months (approaching 16 years). Their mean age was 50.4 months (95% CI, 41.1-59.7 months). Looked at by their age when proceedings commenced:

- almost one third (n=41, 32.3%) were no more than twelve months old, including 28 who were newborns (<1 month);
- 26 children (20.5%) were aged between 12 and 36 months;
- 22 children (17.3%) were aged from 36 months (3 years) to 72 months (6 years);
- 28 children (22%) were between the ages of 72 months (6 years) and 144 months (12 years);
- 10 children (7.9%) were over 12 years.

The mean age of these 127 children was not significantly different to that of children in the other cases we examined whose parents did not have learning difficulties. However, the children whose parents had learning difficulties were more than twice as likely to be newborns (<1 month) when care proceedings were initiated (22% as against 9%).

ETHNICITY

The great majority of the 127 children of parents with learning difficulties were classified as White UK (n= 114; 89.8%). Four children from 2 families were Pakistani, and 2 other children were identified as 'Non-European'. The remaining 7 children had mixed parentage. There was no obvious difference in terms of their ethnic origins between the focal group of children and their sample peers.

IMPAIRMENT/DISABILITY

Almost one in three (n= 40; 31.5%) children of parents with learning difficulties themselves presented some form of impairment or disability by comparison with only one in ten (n= 72; 10.3%) of their peers in the court sample. The association between parental learning difficulties and child impairment was found to be statistically significant (*Phi*= .224 and p<.001). The incidence of different impairments among the children was as follows:

- 19 children had learning difficulties;
- 19 children were developmentally delayed;
- 5 children had physical disabilities;
- 4 children had sensory disabilities.

FAMILY COMPOSITION

Just over half (n= 64; 50.4%) of the 127 subject children were living with both their birth parents when care proceedings commenced. By contrast, only a third (31.4%) of the children whose parents did not have learning difficulties were living with their own mother and father. This observed difference was statistically significant (chi-square = 12.09, p.<.005): parents with learning difficulties involved in child care proceedings are more likely to be living with a partner as a couple.

Forty-six (36.2%) of the subject children were living with lone mothers, although 20 had at least some contact with their fathers. Four of them were living with their mothers in extended family households. Two children, a sibling pair, lived in a lone father household.

Fourteen children (11%) belonged to reconstituted families: in 13 cases their mother had taken a new partner and in one case the father had started a new relationship. One child was not living with either parent but with kin.

During the course of care proceedings the family circumstances of 17 children changed. The birth parents of 7 children, including 2 sibling pairs, separated. The mothers of 6 children, including 4 brothers and sisters, split with their partners. A father of 3 children returned home and one mother left an extended family household.

Court Outcomes

This section examines the outcome of care proceedings for children of parents with learning difficulties within the court sample and draws comparisons with the outcomes for other groups within the 2000 cohort.

Just 13 (10.2%) of the 127 children of parents with learning difficulties in the court sample were returned home:

- 1 was returned home on a Care Order;
- 1 was placed home with both parents on a Residency Order (although both residency and parental responsibility were transferred to the father without learning difficulties);
- 9 were placed home on Supervision Orders; and
- 2 children remained at home when the care application was withdrawn.

Another 19 children were placed with kin: 11 on Care Orders and 8 on Residency Orders.

Fully three quarters (n= 95; 74.8%) of the children whose parents had learning difficulties were placed out-of-home and outside the family circle. Forty of this group were subject to Care Orders. In one case a Residency Order was made in favour of the foster carers. Another child remained in 'voluntary' substitute care when his mother agreed to contact arrangements and the local authority subsequently withdrew the care application. The remaining 53 children (41.7%) were all freed for adoption.

Table 8 shows the orders recorded in all cases involving parents with and without learning difficulties. Table 9 presents the placement outcomes by the same two groups of parents.

Table 8: Care orders of children by parents with and without learning difficulties[a]

Parents with...	Dismissed or withdrawn		Supervision order		Residency order[b]		Care order		Freeing order	
	No.	%	No.	%	No.	%	No.	%	No.	%
No learning difficulties (n= 684 children)	39	5.7	55	8.0	58	8.5	335	49.0	197	28.9
Learning difficulties (n= 127 children)	3	2.4	9	7.1	10	7.9	52	40.9	53	41.7

a. Excluding12 children where the outcome was unknown; 4 children where a Parental Responsibility Order was made; and 1 child where a Prohibitive Steps Order was made.
b. Residency +/- supervision order.

A statistically significant association was found between parental learning difficulties and court orders (*Phi* = .11, p<.05). The children of parents with learning difficulties were significantly more likely to be the subjects of freeing orders than children of other parents. One potentially contributing factor to this finding is the higher proportion of newborns in the sample of parents with learning difficulties, given the importance attached to securing a permanent placement for such young children.

Table 9: Placement outcomes of children by parents with and without learning difficulties[a]

Parents with....	Home		Kinship		Non-family	
	No.	%	No.	%	No.	%
No learning difficulties (n= 689 children)	208	30.2	120	17.4	361	52.4
Learning difficulties (n= 127 children)	13	10.2	19	15.0	95	74.8

a. Excluding 12 children for whom the placement outcome was unknown.

Placement outcome was also found to be correlated with having a parent who has learning difficulties. The children of such parents were significantly more likely to be placed out-of-home and outside their kinship network (*Phi* = .178, p<.001).

Between Group Comparisons of Court Outcomes

The 828 children in the 2000 cohort of court cases were divided into 5 groups on the basis of the presence or absence of parental learning difficulties, mental illness and drug/alcohol problems. Children whose parents had physical or sensory disabilities were not separately classified due to their small numbers and, where no other disabilities were present, were subsumed into the 'no disability' group for analytical purposes. The 'learning difficulties' category was defined to include children whose parents may also have had one or more other disabilities or dependencies in order to maintain a cell count sufficient to allow valid statistical comparisons between the groups. The distribution of court orders and placement outcomes for the 5 groups is shown in Tables 10 and 11.

Table 10: Court orders by parental disability group[a]

Parents with....	Dismissed or withdrawn		Supervision order		Residency order[b]		Care order		Freeing order	
	No.	%	No.	%	No.	%	No	%	No.	%
No disabilities (children = 287)	19	6.6	22	7.7	19	6.6	150	52.3	77	26.8
Learning difficulties +/- other (children = 127)	3	2.4	9	7.1	10	7.9	52	40.9	53	41.7
Mental illness only (children = 111)	5	4.5	14	12.6	13	11.7	46	41.4	33	29.7
Drug/alcohol problems only (children = 195)	15	7.7	15	7.7	16	8.2	91	46.7	58	29.7
Mental illness + drug/alcohol problems (children = 91)	0	0.0	4	4.4	10	11.0	48	52.7	29	31.9

a. Excluding 12 children where the outcome was unknown; 4 where a Parental Responsibility Order was made; and 1 where a Prohibitive Steps Order was made.

b. +/- a supervision order

A *Phi* co-efficient statistic was computed to determine if there was a significant association between the disability group and the court orders made. The results confirm what the raw percentages suggest (*Phi* =.188, p<.05): that, by comparison with any other group, children of parents with learning difficulties were more often made the subjects of freeing orders.

Table 11: Placement outcome by parental disability group[a]

Parents with....	Home		Kinship		Non-family	
	No.	%	No.	%	No.	%
No disabilities (children = 288)	97	33.7	44	15.3	147	51.0
Learning difficulties +/- other (children = 127)	13	10.2	19	15.0	95	74.8
Mental illness only (children = 113)	41	36.3	16	14.2	56	49.6
Drug/alcohol problems only (children = 197)	54	27.4	39	19.8	104	52.8
Mental illness + drug/alcohol problems (children = 91)	16	17.6	21	23.1	54	59.3

a. Excluding 12 children for whom placement outcomes were unknown

A significant association was found between placement outcomes and parental disability group (*Phi* = .220, p<.001). The children of parents with learning difficulties were placed out-of-home more often than any other group.

Who Goes Home?

Only 13 (10.2%) of the 127 children with a mother and/or father with learning difficulties from the 2000 courts cohort were returned home to live with their parents. Nineteen (15%) were placed with other relatives. The remainder (95), fully three-quarters of the total, were placed in the alternative care system, and 53 of these were freed for adoption. Children of parents with learning difficulties were half as likely again to be placed outside their own families or freed for adoption by comparison with their peers from all other families taken together. What is it that distinguished the minority of children who returned home from the majority who were removed from their families?

First, the children who went home were older. They ranged in age from 0 to 183 months, with a mean of 86.3 months, as compared with a range from 0 to 189 months, and a mean of 43.4 months, for those who were placed out-of-home. The mean age difference between the two groups was statistically significant (t=2.65, p<.01). Social services tend to regard older children as less vulnerable and are more inclined to listen to their views. At the same time, they are harder to place, with the number of suitable and willing foster carers or adoptive parents tailing off as children grow older.

Second, in six of the thirteen cases, the child's own determination to return home played a significant part in the outcome. The most forceful way in which children expressed these feelings was by persistently running away from foster placements and making their way back to mum and dad. Harry's[4] story is a case in point.

Harry's Story

Harry and his elder brother, Keith, who has learning difficulties, were eleven and twelve when care proceedings were instigated. They had come to the notice of Social Services when their father, Clive, had packed them off to school with a note asking that they be fostered. Clive was alone at the time, depressed and had started drinking excessively. His wife had died some two years earlier. Although they had been separated for some time, he had never lost hope of a reconciliation. Indeed, this hope had driven him to follow her from town to town, moving several times, with the boys in tow. Such 'instability' was highlighted by Social Services in their brief to the court. The turning point, however, seems to have been Keith's challenging behaviour. According to the case records, Keith was aggressive and violent towards Harry and Clive was struggling to manage. After Clive had given up on his boys, he packed his bags and moved in with his mother on the other side of the country. Over the following months he remembered their birthdays and continued to ask after them. Harry's birthday wish was to be with his father. He bought a train ticket with the money that Clive had sent him as a present and, without warning, found his way back to his dad. With Keith in foster care, Social Services and the court were satisfied that Clive could cope.

Third, children were more likely to be returned to the family home if their parents acknowledged professionals' concerns about the care they were providing, submitted to their scrutiny and worked with them to improve their parenting. Parents' non-cooperation and their failure to appreciate the need for change were the trigger for care proceedings in over half of all cases involving parents with learning difficulties. The Catch-22 here is that parents

---

[4] All personal names used in this report are pseudonyms.

must first admit their behaviour is putting their child at risk, so legitimising social services intervention, in order to stand any chance of the family being reunited.

Fourth, nine of the thirteen children who went home had at least one brother or sister simultaneously placed in care. Professional concerns about the ability of parents to cope with the number of children they had or with their special needs were evident in almost half (46%) of the 66 cases we examined. The view appears to be that lightening the load on parents by reducing the number of children in their care might enable them to cope.

The Keen's Story

Laura (2 years) and Ashleigh (6 years) were taken into foster care, along with their autistic brother, Angus (4 years), after a childminder notified Social Services of a small bruise on Angus' face. Concern had been heightened when Debbie, their mother, was observed to be having problems managing Angus' behaviour. This concern was compounded when Laura appeared not to be putting on weight as she should and Debbie was being less than co-operative with her social worker. Debbie's parenting capacity was called into question. The case turned when Debbie got back together with her husband, the children's father, and a psychologist reported that Angus would present a challenge to any parent. The girl's were restored to the care of their parents with support and monitoring, and the situation was observed to improve. Angus remained in foster care.

Fifth, the comings and goings of men in families also impacted on the decision to return children home. The presence of a man who was viewed by social services as a threat to the children's welfare could force the mother into having to make a bitter choice between separating from someone she loved or losing her kids. Equally, reconciling with an estranged partner or starting a new relationship could ease the placement of children back home where the man was seen as supportive.

Finally, no child was placed back home against the recommendations of an expert assessment, typically conducted by an independent psychologist. Their opinion was routinely sought in care proceedings involving parents with learning difficulties. Such assessments were documented for 92 of the 127 children in the court records we examined. Table 12 presents a cross-tabulation of expert opinion by placement outcomes.

Table 12: Expert opinion by placement outcomes

EXPERT OPINION	HOME		OUT-OF-HOME (including kinship)	
	No.	%	No.	%
Not documented	1	0.8	34	26.8
Capable with support	12	9.4	22	17.3
Potential for change but unlikely	0	0.0	8	6.4
Incapable without extensive support	0	0.0	3	2.4
Incapable or too risky	0	0.0	43	33.9
Conflicting opinions	0	0.0	4	3.2

Only one child was placed home in the absence of a favourable expert assessment and in that case no opinion was documented. On the other hand, a favourable assessment did not necessarily guarantee a return home: 22 children were placed out-of-home despite the expert opinion that their parents were capable of managing with appropriate support.

What is noteworthy about the small number of children who were returned home is that the reasons were overwhelmingly circumstantial. There is no evidence of these outcomes having been worked for by the services; no sign of them being the result of professionals working in partnership with parents to secure the best interests of the child. Indeed, the provision of supports or training did not show as a factor in bringing them about.

The Child Protection Concerns

What was the nature of the concerns that triggered legal action and brought these cases to court? What was the nature of the harm that had befallen the children in these families? Table 13 shows the distribution of professional concerns relating to the 127 children of parents with learning difficulties.

Table 13: Professional concerns

	Physical Abuse	Sexual Abuse	Emotional Abuse	Neglect
Alleged[1]	16	10	26	78
At risk[2]	25	30	12	38
No mention	86	87	89	11
Total	127	127	127	127

1. Includes all cases where specific evidence of harm presented to court.
2. Includes all cases where a specific claim was made that a child was at risk (but had not yet suffered) harm.

PHYSICAL ABUSE

A total of 16 children (12.6%) were alleged or proven to have been physically abused. A further 25 (19.7%) were held to be ‘at risk’ of physical abuse. There was no mention of physical abuse in respect of any of the remaining 86 children.

The physical abuse described in the court files varied in severity and the supporting evidence ranged from observations or reports of a mother shouting and hitting her children, to unexplained bruises, through to serious physical injury.

SEXUAL ABUSE

Ten children (7.8%) from 7 families were said to have been sexually abused. A parent – the father – was the alleged perpetrator in just 1 case, involving 3 children. A further 30 children (23.6%) were claimed to be ‘at risk’ of sexual abuse. There was no mention of sexual abuse in the case of 87 (68.5%) of the children.

EMOTIONAL ABUSE

A total of 26 children (20.5%) from just 9 families were alleged to have suffered emotional abuse. Such allegations were backed up by reference to incidents where ‘the mother would scold and chastise the children inappropriately’, or ‘the parents verbally abuse and threaten the children’, or to mothers ignoring children on contact visits: a common reference was to children witnessing domestic violence. Twelve children (9.4%) were held to be ‘at risk’ of emotional abuse. There was no mention of emotional abuse in 89 (70.1%) cases.

NEGLECT

Neglect was by far the most common professional concern, with 78 children (61.4%) alleged to have been affected. A further 38 (29.9%) were identified as being ‘at risk’ of neglect. There were only 11 cases (fewer than 1 in 10) where neglect was not mentioned as a concern.

Neglect appeared in multifarious guises. The case records were peppered with references to ‘poor hygiene’, ‘poor parenting’, ‘lack of emotional availability’, ‘inadequate stimulation’, ‘few toys’, ‘missed health appointments’, ‘truancy’, ‘chaotic home life’, ‘inappropriately dressed’, ‘hungry at school’, ‘slow weight gain’, ‘lack of control’, ‘speech delay’ and the like. Broadly, these concerns fell into five main categories: bad home conditions, failure to thrive, inadequate care and supervision, lack of understanding of children’s needs, and developmental delay.

SIGNIFICANT HARM

There were just 7 cases where there was no dispute about the fact that the child had suffered significant harm. In a further 59 cases a claim that the child had suffered significant harm had not been ruled out. In 40 of these 66 cases the child reportedly suffered developmental delay. The remaining 60 children (data missing for one case) were held to be likely to suffer significant harm unless their situation changed.

SUMMARY

The picture presented here is of a group of children who were more vulnerable than victims. Neglect rather than abuse was the main threat to their well-being, and this more by omission than commission on the part of their carers.

There was an explicit reference to sexual, physical or emotional abuse in the court records of just over a third (n= 43; 33.9%) of the children. Emotional abuse remains a nebulous, less tangible form of harm. Exposure to ‘marital or family conflict and/or violence’ is cited in *Protecting Children* (Department of Health 1988) as a cause for concern about potential emotional harm, along with rejection, lack of praise or encouragement, lack of comfort or love, lack of attachment, lack of proper stimulation (eg. fun and play), lack of continuity of care (eg. frequent moves), lack of appropriate handling (eg. age-inappropriate expectations), serious over-protectiveness, inappropriate non-physical punishment (eg. locking in bedrooms). Often, however, it remains difficult to link these emotional deprivations with any identifiable serious consequences for the child, not least because children vary in their resilience and capacity to cope under conditions of such stress and adversity. For this reason, it is extremely rare for a case to be brought to court on the basis of emotional abuse alone (Hunt et al. 1999 p.84), which is more usually cited as a secondary or subsidiary concern. From the evidence contained in the court records, just 26 out of the total of 127 children (20.5%) could be placed in the more forensic categories of having suffered either sexual or physical abuse.

If the incidence of sexual and physical abuse was confined to a minority of cases, the same was not true of neglect. Proceedings were instigated in the case of one third (n= 43: 33.9%) of all the children because of neglect alone. Given the substantial overlap between the characteristics of neglect and the behavioural signifiers of emotional abuse listed above, it is arguably more meaningful to treat the latter as a special case of the former rather than as belonging to the same category as physical and sexual abuse. On these grounds, another 17 children (15 who were said to have experienced both neglect and emotional abuse and 2 who reportedly met with emotional abuse only) can be taken into account, giving a total of 60 children, almost half (47.2%) of all the cases, who were brought to court because of misguided rather than malicious parenting. If cases thought to be at risk are included, then only 11 of the 127 children were identified as not presenting concerns for reasons of neglect.

There were 41 out of the 127 children (32.3%) about whom no allegations were made regarding any form of abuse or neglect. This figure includes the 33 newborn babies and 8 older boys and girls.

The compelling impression conveyed by this data is one of parents struggling to meet the standards of care expected of them by the professionals whose job it is to protect children, sometimes falling short, sometimes resorting to ill-advised methods, sometimes looking unlikely to safeguard their child's well-being further down the line, but rarely acting knowingly to cause their children harm.

The Parents in Focus

Pervasive and persistent poverty was the lot of this cohort of 66 families and their children. Over three quarters (n= 52; 78.8%) were reliant on welfare benefits (and no record was available for another 14 families); one third contained no adult in gainful employment (and no information was documented in the case of fully two-thirds (n= 43; 65.2%) of the families). For a quarter (26.6%) of the families, life on a low income was made harder by burgeoning debt.

A lack of continuity in the care of children, as indicated, for example, by frequent changes of address, is regarded by social workers as potentially detrimental to a child's welfare and treated as a warning sign of emotional abuse. Over a third of the families (n= 22: 34.8%) were described as homeless or transient and 22 had been living in temporary accommodation when care proceedings were initiated. The reasons for such a state of affairs are not clear but the harassment and victimisation encountered by families in local neighbourhoods, as noted in several court records, and the experience of domestic violence (see below) may both be implicated.

Over a half of the mothers in the court sample (n= 34; 52.3%) had a history of childhood maltreatment. At least 15 were known to have been sexually abused, some unremittingly over a period of years. The perpetrators were typically, though not exclusively, men in the family. The prevailing descriptors of these women's childhood were 'brutal' and 'traumatic', although precise details were often missing. For example, one psychologist observed that a mother had been 'extensively damaged by her own childhood experiences' but omitted to provide any supportive evidence by way of example. 'Gross neglect' was also cited in many cases, and an 'absence of any positive parenting role models' was widely mentioned.

Maltreatment was documented less often in the case of fathers, although this may well reflect the fact that there was generally less biographical information available about them in the court records. Six of the 50 fathers (12%) were recorded as having been abused as children. 5 of whom had spent time in substitute care.

Domestic violence was documented in the court records of 26 (39.4%) families and affected 54 of the 127 children (42.5%) in the court sample. However, it is not exactly clear what this means in each case as sometimes no details were given or what additional information was available suggested little more than raucous but non-physical domestic rows.   With that qualifier, there is no doubt that many of the mothers had been assaulted by their present partners. Indeed, some had reportedly experienced 'a string of violent relationships'. For almost two-thirds of the mothers (61.5%), this history of exposure to routine violence in their lives could be traced back to childhood. Those mothers who had reportedly been maltreated as children were almost twice as likely to be in relationships marred by domestic violence at the time social services intervened in their family as those without such a background (64% v 36%).

The court data suggest that the majority of parents had little or no social support from their own extended families. In 41 cases (62.1%), there was no mention made in court files of any help given by grandparents or other relatives. Indeed, where they were mentioned, it was often as a source of trouble or a threat rather than a resource to the family. It is possible, however, that parents' support networks were not given much consideration by the professionals with whom they had contact and so were not entered into the record. It is quite conceivable that social workers only commented on such matters where family or friends posed an additional risk to a child and so strengthened the care application. Equally, independent assessors, mostly psychologists, typically focus their gaze on the intra-personal and within-family dynamics of a case rather than a family's wider social milieu.

A similar blinkeredness was evident in the court files about the adequacy of support provided to parents by the statutory services. There was no mention of any concerns about the support delivered to families in four out of five case files (n= 53; 80.3%). This is a surprising finding. Support for parents with learning difficulties is known to be 'patchy and underdeveloped' (Department of Health 2001 para.7.41). The 2001 White Paper, *Valuing People,* acknowledged that further work is needed to ensure that assessments result in appropriate services being provided to children and families. An analysis of case files involving parents with learning difficulties in Northamptonshire Social Services by the Social Services Inspectorate (1999) revealed that the assessed family's needs had been met in full in only one third of cases. Bill Robbins, then ADSS spokesperson for learning difficulties, summed up the import of the situation when he said, ‘If a child has to enter the care system, it is a failure of the system of support more than an intrinsic failure of the parent with learning difficulties.’ (Sale 2002) In this context, the absence of any comment on the services provided to families in such a high proportion of cases encourages the view that, in the eyes of many professionals, including judges, parents with learning difficulties are expected to cope standing alone.

Explicit concerns were raised about the support given (or not given) to parents in the case of only 13 families (19.6%): in 4 instances by the parents themselves; on 2 occasions by the Guardian ad Litem; 3 times by psychologists; once by a judge; once by the parents’ Citizen Advocate; once by the Official Solicitor; and twice by some combination of these sources. Four main categories of complaint were evident.

> First, *promised supports had not been provided or the support provided had been inadequate:* ‘(the mother) needs extensive help with everyday life, but to my knowledge has received no help from the appropriate learning difficulties services. The family have been let down by the system.’
>
> Second, *the parents were set up to fail:* ‘strategies have been employed, such as cajoling, parenting classes and so on, that were doomed to failure.’
>
> Third, *agency intervention had been ill-informed or ill-conceived:* ‘Agencies should seek specialized advice from professionals with experience of working with adults with learning disabilities. Such professionals would help agencies adjust their expectations and will be

> able to advise on approaches which would enhance her learning. I think this has been lacking.'

> Fourth, *the parents were ignored or sidelined:* 'Adequate explanations for changes have not been provided. When plans were changed at short notice or without adequate explanation this distressed (the mother)'.

SUMMARY

The picture presented here is of parents struggling under the multiple burden of inherited disadvantages, social deprivation, intellectual disability, social isolation and a lack of support bordering on institutional discrimination. It would be remarkable if people facing these pressures, with fewer coping resources than most on which to draw, did not run into problems with their parenting. For this group of mothers especially, given their circumstances, good-enough parenting demands more of people who have less to give.

The consequence of this bitter truth is shown by the fact that 32 (48.5%) of the 66 care applications featuring a parent or parents with learning difficulties involved a mother or father who had already had a child removed. These 32 families had a combined total of 129 children already in the 'looked after' system, in addition to the 114 children in the study cohort. Overall, then, the 66 families in the court sample had 243 children placed out-of-home, or an average of 3.7 children for each case family. (The total might even be higher if the fate of all the subject children's half siblings was known.)

A whirlpool of distress lies hidden in these figures. The reality beneath is of mothers especially, battling against the odds to create a family home, with little but their own impoverished childhood to fall back on by way of example, eventually coming under the surveillance of social workers more concerned with policing than supporting their parenting, and ending up ensnared in an enquiry, operated by rules and standards beyond their understanding, which finally leads to legal proceedings and the loss of a cherished child - only then to go and have another baby, in an attempt to establish the ordinary family life they crave, hoping this time to succeed by shutting the door on the professionals they no longer trust, so sparking the same concerns and kick-starting the whole cycle again.

Case Profiles

The 66 cases involving a parent or parents with learning difficulties are not easy to classify by child protection concerns. As shown above, in any one case there were often concurrent concerns about, for example, insanitary home conditions, a chaotic lifestyle, money management and budgeting problems, a parent's mental health or volatility, developmental deprivation, domestic discord, the mother's incapacity to protect her child and, importantly, parental non-cooperation with and occasionally aggression towards social services staff. However, it proved possible to categorise most cases (n= 63) into one of five groups defined in terms of the paramount child protection concern and the circumstances preceding statutory child removal. These five case types are described below.

DEVELOPMENTAL DEPRIVATION (N= 26)

This category includes those families where the capacity of one or both parents or partners to provide for their child's basic developmental needs was the pre-eminent concern.

The nature of the perceived developmental deprivation varied with the age of the child. For infants and toddlers, professional concerns were often prompted or justified by observation of slow or atypical weight gain, listlessness and/or a general failure to thrive.

In the middle years, social workers' documented concerns focussed more on the observed or perceived risk of developmental delay and of children not realising their full potential. The parent with learning difficulties was typically seen as being 'unable to keep up with and anticipate the child's developing and changing demands and needs.' Developmental delay was widely put down to a presumed lack of stimulation or to emotional unavailability on the part of the mother.

In the case of older children, the concerns were more often about behaviour difficulties, irregular school attendance, lack of discipline and boundaries and the absence of 'effective parental control'. For example, in one case 'the child had been seen to be out of (mother's) control and has run away on occasions'; in another, the child was seen 'wandering the streets at night'. Other concerns included children taking on too much responsibility for their brothers and sisters.

MOTHER UNABLE TO PROTECT HERSELF LET ALONE HER CHILD (N= 17)

The risk of sexual abuse was the primary child protection concern among cases in this category, although the alleged failure to protect covered other threats too.

The signature case in this category is one in which the mother lived with a known Schedule 1 offender and refused to leave him in order to be assessed as a lone parent. Similar cases included ones where a Schedule 1 offender, usually an extended family member such as an uncle or a grandfather, had regular or unfettered contact with the child.

In other cases the main concern was physical harm to the child at the hands of a violent or exploitative partner. Such fears were sometimes grounded in accounts of men with volatile temperaments who were prone to lashing our but also in accounts of men who misappropriated the family's finances 'leaving the mother and children short of food'. These men were often noted as being threatening or aggressive to social services workers too.

Typically, the mothers in these cases were presented as isolated, passive and dependent, frequently dominated by their male partner or 'string of male partners' and 'unable to distinguish safe from unsafe partners'. Their vulnerability was such that they were seen as being targeted by men who use them and put their children at risk: as one report read, 'the mother is unable to protect herself or her children from risks posed by other adults...and it appears that she has been exploited by virtually every "friend" and by a succession of Schedule 1 offenders'.

Whilst these mothers were cast as victims, they were rarely seen as blameless. In many cases they were also regarded as complicit or even responsible for the risk posed to the child. The case reports contain plentiful comments about how these mothers: 'failed to acknowledge the risk posed to the child'; 'puts her own needs first'; 'lacks recognition of her role in the abuse that her other children have suffered and how she could alter her behaviour to avoid repetition'; 'indicates an inability to grasp that *she* puts the children at risk'; have 'repeatedly been told that if she wishes her children to be returned to her she must separate from (her partner)'.

THE PAST IS PRESENT: NEWBORNS AT RISK (N= 13)

This category includes families whose previous history was deemed to justify removing their newborn child at birth. These cases went straight to court without any further work being done with the family. In every case, the mother, and sometimes the father too, had at least one other child, usually more, in the looked-after system or adopted. The circumstances leading to the removal of these older children were various but it was not the nature of the perceived risk that these cases had in common. Rather it was the fact that child protection workers believed the family situation had not changed for the better and was unlikely to do so.

In all these cases, workers had no faith that the family would cope any more successfully this time around. This conclusion was usually based either on a parent's reported failure to learn or to demonstrate change despite past attempts at rehabilitation, training or support or on the mother's perceived lack of insight. For example, one social worker observed of a mother that she 'has been unable to see her own failure as the cause of her older children being removed from her care and placed elsewhere.' In other instances, expert opinion had previously advised that learning difficulties made it unlikely the parent would ever be able to provide good enough care as 'the children's needs would change at a faster rate than the parents' abilities to learn the new skills necessary, with the children ultimately outsmarting their parents.' Finally, some parents would not co-operate in an assessment or allow professionals to visit them in their home. In two cases, for example, both mothers had been to court on several previous occasions and always with the same result: a freeing order. They just seemed to capitulate, refusing to consent to the care application but withdrawing from the proceedings.

SEVERE AND CHRONIC MENTAL ILLNESS (N= 4)

Concerns about the mental health of the mother or father were not an uncommon feature of cases in all the categories but there were a few where they seemed to play a determining role in the outcomes. In each of these cases the mother was suffering a chronic mental illness severe enough to require admission to a psychiatric unit and to prevent her from looking after her children.

FORENSIC EVIDENCE OF ABUSE (N- 3)

This category includes those cases that were based on and driven by medical or forensic evidence of physical (n=1) or sexual (n=2) abuse. Other concerns, such as squalid home conditions or domestic violence, may also have been present but the characteristic feature of these cases was that the clinical evidence provided seemingly conclusive proof of harm to the children about which there could be little debate.

An Australian Comparison

This section compares the findings from this study with those from a similar investigation undertaken in the New South Wales Children's Court by McConnell et al (2000).

McConnell et al reviewed the court files of all care and protection matters finalised in two Children's Courts in Sydney over a nine month period between May 1998 and February 1999 in order to establish the prevalence and outcomes of care matters involving parents with a disability. During this period a total of 407 care matters were dealt with of which 285 referred to care applications initiated by the Department of Community Services.

The prevalence of parents with learning difficulties by case and by child in both the UK and Australian court samples is shown in Table 14.

Table 14: Prevalence of parental learning difficulties in care proceedings in UK and Australia

Parents with...	Cases		Children	
	UK (n= 437)	Australia (n= 285)	UK (n= 828)	Australia (n= 469)
Borderline learning difficulties	21 (4.8%)	14 (4.9%)	56 (6.8%)	31 (6.6%)
Learning difficulties	66 (15.1%)	11 (3.9%)	127 (15.3%)	22 (4.7%)
All learning difficulties	87 (19.9%)	25 (8.8%)	183 (22.1%)	53 (11.3%)

There is approximately the same proportion of borderline parents in both court samples. A similar equivalence is not found, however, in the case of parents with learning difficulties where the incidence of both cases and children in the UK is three to four times higher than in Australia.

Based on a population estimate of less than one percent, parents with learning difficulties are significantly over-represented in care proceedings in both jurisdictions but much more so in the UK. The reasons for this disparity between the two countries are not immediately apparent. It seems unlikely that the difference could be explained by there being a higher proportion of parents in the UK population because there are no obvious additional controls or deterrents to becoming a parent in Australia. This suggests there may be a higher rate of referral in the UK, either because there are fewer family and community supports available to families or because the child protection net is spread wider. Alternatively, given a similar rate of referral, it may be that there are better services and other resources available to support parents in their parenting in Australia or that professionals working with these families are more circumspect about resorting to the law.

Outcome data for the children of parents with learning difficulties in the UK and Australian court samples is shown in Table 15.

Table 15: Placement outcomes for children in court proceedings[a]

Parents with....	Home		Kinship		Non-family	
	UK	Australia	UK	Australia	UK	Australia
Learning difficulties	13 (10.2%)	13 (59.1%)	19 (15.0%)	4 (18.2%)	95 (74.8%)	5 (22.7%)
No learning difficulties	208 (30.2%)	153 (36.9%)	120 (17.4%)	157 (37.8%)	361 (52.4%)	105 (25.3%)
All cases	221 (27.1%)	166 (38.0%)	139 (17.0%)	161 (36.8%)	456 (55.9%)	110 (25.2%)

a. Excluding cases where the placement outcome was unknown.

The NSW children of parents with diagnosed learning difficulties were over five times more likely to be placed back home than their UK counterparts who, in turn, were more than three times as likely to be placed out-of-home and outside the family circle. There are evident differences in the overall pattern of outcomes between the two countries. Australian children involved in care proceedings are much more often placed with their parents at home (38.0% vs. 27.1%) or with kin (36.8% vs. 17.0%) and much less often placed with foster parents outside the family or freed for adoption (25.2% vs. 55.9%). These facts clearly reflect differences in policy and practice that are carried through into cases involving the children of parents with learning difficulties. Even so, the contrast between the outcomes in the UK and NSW for families headed by a parent or parents with learning difficulties, which reveal even greater disparities than in the total court sample, suggests they are treated more punitively within the English courts.

Overview of Court Files Data

The archival data from the court files contain two sorts of information: verifiable information about facts such as diagnoses, dates and decisions and suppositional-type information in the form of opinions, judgements and interpretations. The data reported above about the numbers of parents with learning difficulties and their children, and the outcomes of their court case, belongs in the former category. The data about professional concerns and the risks and harm befalling the children belong in the latter category.

The data from the court files presents worrisome evidence about the over-representation of parents with learning difficulties in care proceedings. Estimates suggest that families headed by a parent or parents with learning difficulties constitute less than one percent of the population (McConnell, Llewellyn et al. 2000) and possibly as few as 2.51 per thousand families (Mirfin-Veitch, Bray et al. 1999). Yet this group featured in more than one in six (15.1%) of all local authority care applications heard before the courts featured in this study in the year 2000. If parents described as having borderline learning difficulties are added in then the proportion rises to one in every five cases (19.9%). Likewise, one in six children involved in care proceedings had a mother and/or father with learning difficulties (15.3%); a proportion increasing to almost a quarter (22.1%) if borderline parents are included. This means that parents with learning difficulties and their children feature in care applications a minimum of 15 times and, more realistically, up to 50 times more often than their numbers in the population would warrant.

These stark facts unavoidably raise questions about discriminatory treatment that are given added force when the data on outcomes are considered. These showed that the children of parents with learning difficulties were significantly more likely than other children to be the subjects of freeing orders and were significantly more often subject to out-of-home placements outside the extended family. Moreover, children in the English courts were much more likely to experience these intrusive outcomes than their peers in the New South Wales Children's Court.

The families at the core of this study were characterised by having at least one parent with a disability covered by the Disability Discrimination Act 1995[5]. The issue is whether the problems that brought them and their children to court derived from their disability and, thereafter, whether they were treated less favourably because of their disability.

In order to throw light on this issue we must look at the evidence from the softer information contained in the court files. This information is mostly made up of professionals' reported observations, assessments and

---

[5] The Disability Discrimination Act 1995 defines a disabled person as someone with "a physical or mental impairment which has a substantial and long-term adverse effect on his ability to carry out normal day-to-day activities."

perceptions of the parents and their families. As such, it contains two kinds of material:

- facts, that other people would independently verify

and

- perceptions, with which others might or might not agree.

Also, it should be remembered that this material has been selected to substantiate a case: counter-factual information need not have been recorded. With these considerations in mind, what does the court data tell us?

It tells us that most of the children were brought to court because of neglect. Even the minority of cases involving physical or sexual abuse tended to hang on a charge of neglect on the part of a mother with learning difficulties for failing to protect a child against exploitation by others. The main risk factors identified for such neglect were the parent's (usually the mother's) lack of skills and insight, her failure to appreciate the need for change, her inability to learn and her lack of cooperation. In half of all cases (n=33), a parent's intellectual impairment was specifically cited as a risk factor:

> 'Given her cognitive problems, (the mother) would find it extremely difficult to care for children.'
>
> 'There is nothing one can do to improve an individual's intelligence in order to acquire a better level of parenting ability.'
>
> 'The fact that she did rear her children virtually alone for some years causes me great concern and I think the Social Services

> Department must review their ability to better identify parents such as (the mother) who have limited intellectual functioning.'
>
> 'The mother has learning difficulties which make it impossible for her to function adequately as an independent adult.'
>
> 'Both parents have serious intellectual deficits making it potentially dangerous for any child to be cared for by them and it would be particularly dangerous for a new baby.'
>
> 'The mother's learning difficulties and poor parenting capacity make it unlikely that she will ever defer her own needs to those of the child.'

In other words, the problems giving rise to the professionals' concern and leading them to feel that the situation as given was irremediable were directly related to the mother's intellectual disability.

However, having pinpointed the parents' disability as a key risk factor, there is little evidence in the files to suggest that the parents were provided with supports and services to compensate for their disadvantages. On the contrary, the prevailing assumptions seem to have been either that the parent was incapable of change and therefore supports would avail nothing or that the supports required would be so intensive as to effectively usurp the parent's role anyway. (Interestingly, where supports were provided but proved ineffective it was invariably put down as the fault of the parents rather than a failure of the services.) This fatalistic outlook runs counter to the clear findings from international research showing persuasively that:

- training works and virtually all mothers can be helped to improve their parenting with training (Feldman 1994);
- adequate support services are crucial in helping parents to overcome their limitations when the best predictor of neglect ‘appears to be the absence of suitable societal and familial supports’ (Tymchuk 1992);
- the attitude of those delivering the support is the most important factor contributing to the success or failure of a parent with learning difficulties (Tymchuk 1990).

It is difficult to avoid the conclusion that this group of disabled parents, who were over-represented in care proceedings and significantly more likely to have their children freed for adoption and placed outside the home and family than any other group, were treated more harshly because of their disability. They were blamed for the additional difficulties they encountered in parenting because of their cognitive impairments, left to flounder under the pressure of them without understanding or support and then punished when their children suffered as a result. It is as if a person in a wheelchair, stuck at the foot of the Town Hall steps for want of a ramp, was then prosecuted for failing to pay their rates. The law now recognises that barriers to access are public issues not private troubles and that the responsibility for doing something about them is a matter for public policy not the disabled individual. This lesson appears not to have been taken on board in child protection work or in child care law. The results from this study raise unanswered questions about the interface between disability discrimination legislation and the Children Act.

THE PARENTS SPEAK

Turning our interviews with the parents into an account that remains true to their experience presents many problems and dilemmas. All their stories are unique and every one is different. At the same time, they all contain generic elements that link them as stories of a kind. Putting the emphasis on biographical integrity risks losing sight of their universal features. On the other hand, focussing on the commonalities that bind the stories together entails losing much of the personal detail that gives them their narrative drive. The fact is there are two distinct plotlines present within the interview transcripts:

> First, there is *the parent's voice:* referring to an individual's or couple's personal story or biographical narrative.
>
> Second, there is *the parents' voice:* referring to the collective experience of the group as revealed once the idiosyncrasies of their individual stories have been stripped away.

In an attempt to convey both voices, so as to combine the dramatic power of the personal story with the more generalizable results of analysis, we have chosen to present a number of individual, mostly first-person accounts of parents' experiences in the child protection system together with an overview of the common themes that run through the stories of the group.

The Parent's Voice

Mary O'Neill: Living with Fear

We talked in the living room at Mary's home. Thomas played with his toys on the floor. Mary had initially expressed concern at me seeing her house and we had planned to go out to a café to talk. When I called she invited me in and asked me to sit down. She said she was OK about me stopping, and made a cup of tea. Apparently, she had been worried about there being no carpet on the stairs.

'Police had telephone calls to say I was leaving Thomas in house on his own and stuff like that, which were untrue. I've never left him at all. I think it were neighbour next door actually. Next minute I know, police is at door. So me first reactions were to grab Thomas. And I held him. They bent me down and put handcuffs on me. They took Thomas in one car and me in another. They took me down to Police Station to question me. They put me in a police cell. One of the police turned round and said, "Get in there. You're a danger to yourself and a danger to others." So that upset me.

They just took him. I didn't even know he'd gone. I didn't know where he was or anything.

I went to see a solicitor to try and get him back. I went through Yellow Pages and saw the solicitor's name and thought, he sounds a good 'un. I said I'd do anything to get him back. So they said you'd have to go to a residential assessment home on day care, Ramsden House. So I went on day care. Like I were going there and Thomas were going back to foster carer's in evening and I were just crying all the time. I thought I'd lost him.

Foster carer's had older children living in the house and I was quite worried about that. I thought, what's older children going to do to younger children?

Cos sometimes they do, don't they? I couldn't go and see him. I couldn't even have the telephone number. I thought that was quite hurtful. But at least they were fetching him to Ramsden House. When I first had contact with him it was at social services. I was upset about that cos I could only see him for an hour once a week.

He come one day and it was cold, and he come with no T-shirt on, just a jumper. I said, I don't dress him like that, I always make sure he's got a T-shirt on. Some of clothes were a bit thin. Like I always put him clean on every day from top to bottom, and like he come there and he wasn't having clean on every day.

I think you're worried anyway when they go into foster care, thinking are they all right, and we don't know the foster parents, who he's with, stuff like that. Wondering if he'll settle, and I know he won't because I'd been used to having him all the time around with me. Sometimes you hear about these kids going with foster parents and you hear these kids being ill-treated. I wouldn't want to experience that again. No one knows what it's like until they've actually been through it. He was living a month away from me. I couldn't go to sleep. My mum was saying try and get some sleep, but I couldn't. I was up all night just crying 'til he come back to me. They said, will you come in Ramsden House to live and I said, yes, if it means me being with me son twenty-four hours, yes. And then they brought him in then.

At first I were a bit scared in Ramsden House because I'd never been through owt like that before in my life. I thought, what's people going to be like in here? Are they going to be aggressive and stuff? I was scared. It's frightening when you see, like, other people and they've had their children took off them and you see them go. It's upsetting and you try and hold it back. ‘Til that day comes and they say you’re going home with your child it’s all you can think about.

I got on with all the staff. They were quite good to me, yes. It built me confidence up as well. I’d gone in me shell as it’d shook me confidence. I wouldn’t speak to people, cos I’m quite shy until I get to know ‘em. But I think they helped me, yes. Like you had to tell them all your background. I didn’t sort of like that, telling your background, but they said it sort of helps you.

They have games and stuff, brings you out of yourself, and group meetings, which I think were quite good cos you were talking. And they say, try not to get upset in front of your child cos it upsets them. It was a bit emotional, and you try not to, but I know sometimes you can’t help it and they just put their arms around you. And I thought it was quite nice of them to do that because you felt supported and you felt wanted.

They were all young ones in there and I thought, I wish someone would come my age. Then when Joan come in I felt more happier. I still keep in contact with her, like I telephone her and, like, she’s been over for day and I’ve been over there for day.

I did an assessment in Ramsden House. They said, “We have to give you an assessment to make sure you can look after your child.” They said, we want you to get back into community and that lot. You had to do your own shopping, which I’m used to, and your own cooking, meals for Thomas, meals for myself. They had to make sure that the meals were good. They had, like, a book and I used to ask if I could have a look at the assessment what I’d done. They’d show you book and you could go and read it yourself in your bedroom if you wanted to read it privately. And at meetings they'd tell you how well you'd done. So when they told me, I was over the moon. I thinked I shocked me family as well cos I don't think they thought I could do it. I had to prove to them as well that I could do it.

In court, I remember, me health visitor, she was saying nice things, she wasn't saying nowt wrong about me. Everything they read out was OK apart from one social worker, when they read out that I were violent and me mother were violent. That weren't true. I was annoyed. But I didn't say nowt. I just kept quiet. Like me mum knew that she weren't violent and I weren't violent. Social worker were tripping up when she said it, so I know she were lying. I didn't pull her up about it; I just let her carry on. I knew my child were in no danger.

They said to me, "Will you go to Sure Start?" and I said yes, cos it got Thomas mixing with children as well. He likes it. Like he could go for four hours, but with him going into foster care I'm still a bit clingy, I know that.

I do get myself out more now whereas before I wouldn't have done that. When he was a baby I wasn't getting out enough. But now I feel confident to go places.

I've had case conferences and reviews, yes. But when they've told me I've done well then I'm OK. It is scary for anyone because they don't know what outcome's going to be. But when you go and you know you've done well, it's a great feeling. Sometimes you might have to raise your voice a bit to make them listen. If they've written something that I don't understand or can't read it I turn round and say, I can't understand this bit, what it says. But so far I can read their writing and I've had good reports. Like Sure Start, I've had good reports from them. It puts that I've done well with Thomas, that I've shown an interest in Thomas, educational stuff, shown him how to do things. It's getting people to have more confidence with their children. I think if you're a single parent it's worse, but they build that confidence up for you, to go out and do it.

First they had a protection order on him. Then he was on an interim care order. Then took him off and put him on a supervision order. My solicitor said, put him on a supervision order, then after twelve months, when you've had him at home, and if you're doing well, we'll take him off it. But why all this, when there was no need for all this? I went through quite a lot, which I'm trying to put all behind me, start a new life.

Last time in court they just said how well I'd done in Ramsden House. How well I'd done with Thomas and how well I'd done with his food and that lot. They did advise me at one bit cos they thought I was putting too much on his plate, or sometimes too less. I couldn't win sometimes; I just did what they said. Cos they said we can get you for neglecting your child if you don't feed him. They said they would class it as neglect.

I came home with Thomas from Ramsden House straightaway. And then I just had an assessment at home with him. It's what they call outreach, and that's to make sure I was OK and Thomas was OK. I had about three outreach visits. I felt relieved and just happy and everything. I think I said thank you, cos it was so big a relief. I was so happy.'

Rebecca Hall: Emotional Abuse

Rebecca is a lone mother and has recently moved to a bungalow with her two sons, Mark aged 6 and Jason aged 4. She asked if she could be interviewed at the self-advocacy office where she works. Rebecca has cerebral palsy and uses a wheelchair much of the time for getting around. She also has asthma and osteo-arthritis which causes her a lot of pain.

Three dates have been booked for her to attend court before the final hearing in four months time. At present her sister, Karen, and her sister-in-law, Elaine, have both applied to be the children's foster parent although adoption has also been mentioned by social services.

I'm a widow and I'm registered disabled. I've two boys. Well I had Mark, then I got caught with a little girl. I had a miscarriage at three month, then I got caught again with another little girl and same thing happened. Then I got caught with Jason. He shouldn't have been born while February time but he decided to come in December. I had to go in Special Care Unit. Then me husband kept complaining of pains in his chest. I tried to persuade him to go to doctor's but no, then next minute he passed away in somebody's bungalow. It was a big shock to me 'cos I'd just come out of hospital. I had Jason at home then, and I was breastfeeding him, when all of a sudden the milk just went from out of me breast, so I had to put him on bottle. My husband was 51. It was hard to know how to tell Mark about his dad. Then I just told him and he sat on my knee all night crying. He wouldn't leave me.

We don't know what's going off at court. We're just going backwards and forwards. My friend Tanya said, don't let them put them up for adoption. They're wanting to put them up for adoption and I said to my solicitor, no way.

I've got a disability social worker, Rhona Bates. I had her before I moved, about two years, then she left and I had another social worker called Susan but she left to be at home with her baby and I got put back with Rhona. The children have a social worker, Jane Pond. Before I had Jane Pond I had Milly and she were right nice. And then she left 'cos she got another job and I had this Jane Pond. Milly knew what I were going through. She could see what Jason were doing to me. She even came that day Jason were going for me.

With Jason they keep saying it's me but I know it's not. Cos Jason were going for me when he were one year old. He were biting me. I were going to me mum's but I were limping, and me mum says, what are you limping at, and I said I've hurt me leg. But me sister says, "She's in some pain", so I went to bottom of stairs and I showed her. There were teeth marks all round here, a bruise and blood on me trousers. They don't know if he has learning difficulties.

They've started sending a little book home from nursery - exercise book - and they write inside. Headmistress told me she'd had to have Jason in her office. I said what's he done? You know them doorstoppers, well he threw one of them at window. Well, we took him in office and tried to talk to him but he changed the subject.

I've even had a go at me health visitor. I know I shouldn't have done but I did. She kept saying, "Jason's a placid little lad." So I said, well you have Jason then. I said I've got holes everywhere in my house. I said I've got a hole in bathroom door, holes in their bedroom doors, hole in living room door and a hole in me wall. I said, is that good? She said, "He's pleasant."

Mark's all right. He does play up now and again but I just say to him, this sort of behaviour's not allowed Mark, Mum's got enough on with Jason. If I tell Jason not to do it he just takes no notice. He just carries on. I've learnt to switch off to Jason. I don't pay him any attention. He's at nursery now. He goes Monday, Tuesday, half day Wednesday, Thursday, and Friday.

I took Jason to a clinic. We went by special transport but they wouldn't send it back for me so I had to stop in town and had to phone me sister to fetch me home with Jason. Then, cos I missed a couple of appointments, they said don't bother coming again, you're not interested in Jason's health. But I were poorly at the time.

I need special transport. If I can't get it then there's no way I can go. The time I went, they said he could be hyperactive. Me mum raises her voice at him and says, "No, you don't do that Jason". Then next minute he'll just chuck fireguard and kick it around room. But I said to me mum, there's something else. And me sister said to me, "I wonder if he's got autism."

I'm in bungalow now and my fusebox's on wall. Jason, if he wants, climbs on my walking frame, which I don't use so often, and turns all my fuses off. And then, when I'm in kitchen, he knows I've got boundaries like, and I say, you step over that line mum's going to have to smack your leg, or tap it, cos you will get burnt in the kitchen. And he just takes no notice. He climbs up on my dining table and turns all the switches off. He messes about with kettle. I've had to take my safety gate down with me being in me wheelchair. With wheelchair having big wheels at the back and small wheels at the front, the front wheels will go through it but not the back wheels. So I had to take it down. I've been to Sure Start but they say they can't help me. That's where they got me the safety gate from.

I had social worker from when Jason started to sit up. Me mum said, put him in the buggy so that if you fall you won't fall on him. So I used to put Jason in the buggy but he weren't learning to crawl or anything. They thought I didn't want him to learn to crawl so I said to them, I put Jason in there for safety. Cos if I fall on him, who's going to get the blame? Me. I used to put him in playpen but he didn't like it in playpen. I try to adapt to what kids need. I get there in the end.

Trying to get across the main road with a child what's got behaviour problems, and he throws himself in the main road and there's traffic coming down because there's no zebra crossing. You can never get across that road. I used to pick Jason up but now I have to use a strap and hold it. He kept saying, I don't like it and I said, well, I can't go out with you on your reins when I'm on my walking frame. But, now I've ended up in my chair, I can't do it, because I can't get my chair across road and tell him to run across at same time. So Karen says, I'll take Jason to nursery and you take Mark to school, which is just around the corner from my bungalow.

Before I had Rhona Bates I had someone called Jeff and it was him what got the children's social worker involved because I said I didn't want one. I was managing quite all right with help from my family. He said, oh, I'll get you a children's social worker who can help you go out with children. I ask social worker what she come for. She said, Jeff's got me involved cos you need help with the boys and I said, no I don't. She said, I'm going to take them swimming and that but she never did.

They say I've had enough help but because I'm not learning what they want they think I don't need any more help. When I went to OPTIONS there was somebody there called Nina and she used to explain what was going off and I used to try and remember what to do. But because I have problems with me memory, it like forgets after so long, she had to keep repeating it. And they thought I weren't learning at OPTIONS but I had picked it all up but I forgot most of it. So they thought I weren't learning. And I said to me mum, there isn't anybody there to explain with a learning difficulty; to explain what's going off. I said it's all proper people. Like I've got an advocate lady and she explains about what's going off at court, she explains. There's nowt like that at OPTIONS; nowt at all.

OPTIONS come to my house first time. I had to tick off some numbers and I thought, what's this for? And they asked me questions about how badly behaved Jason were, and were it my fault, and how depressed I were and I thought, God! Cos I do get depressed. I've been on anti-depressant tablets for 6 years, or even more. I'm under a psychiatrist and that.

The children's social worker has left now. She's gone to Australia. Apparently I'm going to have a new social worker but it's the manager. I don't think I can trust her. My social worker's friendly but I couldn't get on with other. I couldn't understand what she was saying cos she didn't talk, she used to mumble. My advocate's good at explaining things to me but others don't bother. I say, "Can you try and put that a different way?". Coming here has helped me cos I didn't have the confidence before.

I just couldn't take to some social workers I had. They spoke down to me like I was a child and I didn't like that. I took to Jane Pond but when she put the boys on the Child Protection Register I thought, that's it, you're finished with me.

I can't trust my health visitor anymore either. She gets me wound up too quick. Like when I've telled her something she'll twist it round and I'll say, no I haven't said that. When I went to see my asthma nurse yesterday I told her; I get on all right with her.

I've had somebody from home help. They did all right but when Jason were a baby I thought this'll be good. When Jason were asleep I thought she could spend a bit of time with me and Mark, playing. But because Jason were new, like I'd fed him and changed him and bathed him, by the time she comes he'll be in his cradle. But every time she comes she'd say, morning Rebecca, and morning Mark, and she used to go and pick Jason up. I said, don't do that please cos I've just fed him and I want to spend some time with Mark before he wakes up. She didn't like it so she went. I had another social worker called Jimmy Smith and she phoned him up. He said he'd had a report and I'd told home help off. I said yes, cos she was picking the new baby up and she's not doing the jobs I've asked her to. I said all she's interested in is picking Jason up. He said, they keep saying you're asking them to clean windows and that. I said, no I'm not. I said, you know what you can do cos I don't want them no more. And I won't have them.

I get on all right with me new GP I've got now. And the midwife I had, she were lovely.

I have family help. I didn't have any neighbours come in or anything like that. I sort of kept myself to myself cos I didn't know what anybody else would think. My mum gives me a lot of help, and my sister Karen. She lives quite close. I've got one brother, he's helpful now and again. He's divorced and his children have grown up. His son's girlfriend's just had a baby.

With help, I think me family's best. If I don't understand what's going off, Karen will explain to me. Like if any letters come and I don't understand it, she'll read it and kind of explain it the best way she can. She keeps going over it and reminding me. You see social workers and that don't keep going over it. They just think, oh, Rebecca's got it. If you go over it quite a few times, keep going over it until it goes up here, I can remember it.

You see, I've got me mum at the minute living with me. My bungalow's only two bedroom but with this process going off, with boys and court, I'm like an elastic band. I want my life back how it used to be. If my boys go and live with Karen, which I'm hoping…then I'll have the privilege of them coming up for their tea and getting to see them. If the boys ain't…then me mum's going back down to live with Karen. Me mum did live with Karen but, at the moment, Karen's got somebody coming tomorrow who's going to assess her to see what's she's like. Know what I mean? The guardian can't make her mind up what's going to be best for the boys. Because what she's said is, our Elaine, my sister-in-law, is too laid back and doesn't give a monkey's, and Karen's not laid back and her house is always nice and tidy. She's got strict rules. Where Elaine ain't got no strict rules; there's nothing there at Elaine's house so they can just do anything they want. You see I wouldn't allow that.

Karen has just one adopted son. She can't have any children. She took me upstairs at weekend and said, have you seen the boys' bedroom that we've done? They've got bunk beds. They've got their own telly and that. She's even bought them a computer. Her husband, Walt, is also boarding out the loft to make it into a playroom for them. I said, if you have them then they're going to have what I can't afford to do for them. But I'll get to see them.

I had assessment with psychologist to see how old this brain of mine has got. But she won't tell me. I thought I'd done all right. The only thing is I can read but I don't like reading out loud in front of people. So when she asked me to read I said no. I said, the only thing that's poor is me maths. I've gone to college just to improve me maths and I can then help Mark at home. She said, it would be helpful if you did read but I said, no, I don't like reading out loud. She didn't say how I'd done.

I'm interested in being assessed cos last time I had it done I was living with me mum. I must have been about 16 and they told me that my brain was between 11 and 12. But I wouldn't accept that. And they said, it's here love, and they showed me.

She asked me what my childhood was like and I said OK, cos me mum and dad tret me like others. Just cos I had a disability they didn't treat me any different.

I have to go to hospital this Friday. You see I can straighten this knee but I can't straighten this one. They have to take an X-ray. By the time they've done I have a lot of pain in the whole of me body and I can't sit up or move me arms. They want to see how fast things are going. I said to doctor, can you do anything? And he said, “Rebecca, I can't mend old machinery.”

Case conferences used to be down at Stanhope House. There used to be Jane Pond, social worker, community nurse, health visitor, headmistress from Mark's school and school nurse. I could never understand why school nurse had to come. Our Mark's never been to her yet.

Jane Pond put them on the Register. I shall never forgive her cos when she first come I said, you aren't coming to take my boys away. And she said, no, I promise you, I ain't gonna do that. Then she says, I hope you don't mind but I'm going to put your boys on the Child Protection Register. I told Karen and Karen says, what for? I said, I don't know and then she told me. Emotional abuse. I said, what's emotional abuse? They said it's because I kept saying there was something wrong with Jason, which I still stick to because he shouldn't be doing what he's doing and he's going on five now and he's no better. Well, last time we had a case conference he was de-registered but I'm not going to forgive her for what she's done.

When she first put him on Child Protection Register I was in a right state. I rang me mum up and I was heart broken. She says, have you been knocking them against wall? She thought I'd been belting them or sending them to school dirty or there'd not been enough food in house or I'd not kept them warm enough. She said, it can't be that Rebecca. I said it was emotional abuse. You see, I can't have them on my knee because I'm in that much pain. I give them love and a kiss but because I can't get down on floor to play they think it's emotional abuse. I said to me mum, nobody knows what's happening. You all think I'm all right here but I'm getting chewed up slowly. Me mum's come to live with me cos she thinks I'll do something stupid.

Every time I go to court my advocate goes with me. When I go in that room there's them two social workers sat at back and I'll be sat at side desk, then my solicitor will be at another desk. I sit at the back of her. The first time that I went in, my advocate went in with me and she were holding me hand and she kept saying to me, "You all right?". And I'd say yes. But the second time they wouldn't let her in. I thought, if she went with me inside court she could explain if I didn't understand what's going off.

The first judge, she were a lady judge, she were nice, I liked her. She kept looking at me and smiling at me. The second time it were Judge Armitage. Now I don't like him at all. My solicitor doesn't even like him and that's saying something. She says I've to be very nice and sweet to that gentleman cos he's not a nice person.

When solicitor sends me anything I ask her to put it in plain English and not jargon. Cos she puts words in my records and I can't understand them, so I fetch them down here. I know me advocate's not supposed to but…and I know me family's not supposed to, but how the hell am I supposed to understand what's in the papers if nobody's allowed to read it first to try and explain what it means and what's going off.

My sister's like my spokeswoman. She comes to core group meetings but she's not allowed to come to case conferences. She went with me once to case conference and they told her she couldn't go in so she had to go round town for an hour until it was over.

At meetings I felt as if they've pulled me down. I've not said anything. I've just gone home and said to me mum, waste of time. They talk fast and then I have to wait for my advocate. I say, I didn't understand that, did you? I think I've learnt that they're worried about children because it's my disability. The reason they say the boys were on the Child Protection Register is because boys are growing up faster and getting brighter and intelligent and you're getting worse and your disability's going down so you'll not be able to keep the boys under control. I says, don't think the boys are going to pull the wool over my eyes. When I mean a thing, I mean it and that's it. They're not giving me that chance to watch me boys grow up into beautiful young men. My solicitor says no, they won't come back until they're about sixteen, if they want to come back.

When social worker first talked about court I went and got myself a solicitor. My sister had heard about the one I've got so I made an appointment and told her what has gone off. It was my community nurse what told what would happen in court. I've known him since I were 15, I trust him a lot. I've been to court a few times but it's been adjourned this time until May. I just want to get on and have it done with.

Last time I went to court my solicitor was like pushing me into a corner to get me to agree to adoption and I said no. I just said to her, if that's what you want you'll have a fight. It were like if they couldn't make their minds up who was going to have the boys then the third option were going to be adopted. She said, if I keep saying no every time then the judge will just squash what I say and go ahead with it. I said, "Well, that's not right."

I quite liked the guardian, she listened to me.

The first time I went to court it were nerve-racking. Me stomach were turning over, me mouth going dry. I was shoving mints in me mouth to make it stay watery. I thought, oh God, let me get out. What annoys me is, me solicitor says I've got to be at court for nine and we sit about outside courtroom while 11. I said, you've got to think like this, I've got to get me boys to school before I can get up here. Then I have to try and get the Handybus. They say, yes, I can have it, they can take me in but they can't fetch me back. And then you're waiting nearly all day to go into court. I have to try and ring our Karen, if Karen's not come with me to court, or ask her husband to fetch us home. Sometimes I have to catch a taxi. Last time I had the Handybus it was six pounds and it would've been six pounds back. I pay it when the bill comes.

They asked me if I'd go in witness box and I said yes. But me solicitor said, if you get in that witness box the barristers will ask you a lot of questions and keep twisting it and twisting it until they get what they want. I said let them twist it round cos that gets me mad. But I'd do it, if I have to go in witness box, cos I'd do owt for my boys to keep them at home. Solicitor asked, would I put up a fight against Elaine, and I said yes. Although she's my sister-in-law I would fight against her having boys cos she's got no rules, and my boys need rules. I'm going to go into that witness box, don't you worry.

At first they said they'd just take Jason and I said, oh no you won't. You don't take Jason unless you take Mark. I said, they're brothers; you keep brothers together. That was my decision. I wouldn't have them split up.

Solicitor said if they go for adoption then that means I lose contact altogether. I even mentioned it to my community nurse. I said, "Do you know if they did put my boys up for adoption would I get any school photos and birthday cards?". He says, no, you don't get nothing like that. It'll be those that adopt them, they get the birthday cards and school photos, calendars, the whole lot.

At the final hearing it was agreed that Rebecca's sister Karen should foster both children. Rebecca is allowed to see them at weekends, once during the week, and on special occasions.

Marie Simpson: No Hiding Place

Marie is pregnant and lives alone. She attends a literacy class at the local college, which is where she met the baby's father, Lenny. Lenny used to be in the Army but now lives on the other side of town where he can keep in regular touch with his two children from his first marriage. He stays with Marie as often as he can and is loving towards her but he is unaware of the plans social services have to remove the baby at birth. This will be Marie's fifth child. She is wanting to be sterilised after the birth.

The room where we talk is newly carpeted and decorated but houses only a two-seater settee and a television set. Marie is slightly built and she and I sit side by side on the settee, each with a cup of tea. Lenny sits on the floor for half an hour and talks to us about himself. He then leaves to see his children for the weekend and kisses Marie goodbye outside in the hall.

Lenny won't talk to social services. He says, "You know what I'm like with social services and social workers." He's told me he'll be there one hundred percent to support me and everything. But if I talk about social services he just changes the subject. He doesn't want to know at all.

I've had a social worker since I was a bairn myself. When I was growing up, thirteen to fourteen, I still had them cos I was being beaten up by my own father, and I got sexually abused by my own father as well when I was about fifteen.

I had to go into foster homes and children's homes. And there were quite a few times, when I was around twelve or thirteen, when I tried to take me life, that's when I realised what was going off and that. According to social services, I lost me mum when I was about four and I didn't really understand. And now I still think about it. I'm coming up to thirty-three and I still haven't come to terms with not having a mum around. It was just me dad what brought me up and then, when I was taken into foster homes, and like children's homes as well, I was virtually brought up by those. Apparently they took good care of me. They did a good job.

All I really wanted at the time was me mum. They tried to tell me what had happened but one minute they were telling me my mum died of cancer and then they told me she'd died because of all the beatings that she were getting off me dad. As far as I know he's still alive but I've had no contact whatsoever with him since I left home, and I don't want to have contact with him.

I was having social services from the day Rickie was born. They didn't give me much support, just a bit of support, until Rickie turned three and I gave him up. I couldn't cope with him. It was somebody like a home help, coming to house for a couple of days just to play games and see how he's progressing. Even though they were talking to me they were more concerned about how I was dealing with the child, and dealing with the child's behaviour. It was his behaviour that I wasn't getting much help with.

Rickie were three when I had to go to court. He was a difficult child, he used to hit me, do all sorts, bite. He just wasn't the Rickie I gave birth to. He was fostered out but now he's with my brother. He knows I'm his mum cos my brother's told him that. He used to call me by my first name because he wasn't quite sure who I was. He called me Marie. Now he's getting older there's been a complete change. He realises it was me that gave birth to him and it was me what brought him up. It's like, mum, can I do this and, mum, can I do that. And he always seems to fling his arms around me now, and when he phones it's, mum, I love you and all this.

Rickie, he's fourteen, that's the oldest one. Mandy, she's one, Darren, he'll be ...er...two coming three, and Freddie, he's the second oldest, he'll be four now. Freddie, Darren and Mandy, they're adopted; they're all together. I don't know where this little one's going yet. I can't see them that's got my three youngest having my unborn child. They've only just managed to keep them three together.

My solicitor's basically not happy at all: what they're doing now with this one. He's fuming that I'm not even being given a chance. I wasn't even assessed with Mandy. She were seriously ill when she were born. She were on the Special Care Unit at the hospital. As far as I know she's OK now.

I was living in Redfern House, it's like a hostel thing for blokes and for women. Do you know the Co-op? It's just at the back there and there's flats outside what's attached to Redfern House itself. I was down for one at first with Mandy's dad, before Mandy's birth, but he started beating me up and being violent towards me while I was still carrying my daughter. They had to break my waters a week later and that's when they found out she was seriously ill. You could see all the bruises and that on me stomach where he were kicking me and punching me and that. I know he got arrested for what he did.

I've had about five social workers. The only ones I've really got on with were John Berry and Stephen Walker. Those two, I found myself talking to them more. I found it easy to talk to them about what had happened to me. But Stephen Walker was mainly the one what gave me the support. When I had Rickie with me, he was the one who was there for me all the time. If I needed someone to talk to, or I needed help in any way, he was always there. He sat and listened and if I was upset he was a really good listener.

I've had help from me brother who's been very understanding, and me bloke Lenny. I've got loads of friends but not any I could trust. I can't really talk to them about anything like this.

I need somebody who's very understanding and will sit there and listen, like you're doing now, if I'm upset or anything about what's happened in the past, and I know they're reliable and they'll be there for me, just for someone like that to talk to.

At the moment I'm under a counsellor. I haven't seen her for the last couple of weeks but the way I see it, she's not a social worker, she's only a counsellor, but I don't find I can trust her anymore. The social worker from the adoption team referred me. We talk about the past and what's happening now with this unborn child. But I don't know who I can trust and who I can't trust. There's only two people I can trust at the moment and that's me boyfriend, Lenny, and me brother.

I've seen psychologist twice. It was when I was having Mandy. I had to go to his office or something to be assessed. I didn't know at first why I were having it done but when he explained to me what it was all about, and what his part in the job was, then I understood what they were doing. I didn't find it helpful though. I just thought it was about how to be a parent and what you do as a parent. But he just kept asking me really personal questions and me background, me dad and that, and it was really stressing me out and I was thinking, what on earth is he asking me all this about me background for, to do with me dad, and I don't have anything to do with me dad. He had to write something for court.

I remember him asking me about the help I needed and all I can remember saying to him is that social services need to be there more often to give me support with the kids. Apparently he writ it down as well.

I haven't been assessed with this one. That's what they're supposed to be doing. They called a meeting yesterday and my solicitor advised me to go. He went with me. He took me there and he brought me home. I got really stressed out and really upset. So I left me solicitor to speak on my behalf even though the woman chairing the meeting was asking me questions. But I just couldn't answer. My solicitor turned round and said, I think you need to give Marie her bairn. He said, basically you're not giving the poor woman a chance to be a mum to her babbie. He were really good.

All I can remember social worker saying was it was to do with digging up me past and me other kids. And he was saying nasty things about my boyfriend who I'm with now, Lenny, and I haven't even told him that yet. And social worker was saying, Marie hasn't even changed in herself, she's still the moody person she was in the past. He criticises me and yet he doesn't know me whatsoever. He says I'm not the changed person he reckons I ought to be.

It's Young Ones, just down here, where there's a nursery and there's computers, that caused me to lose my two youngest boys. They went behind my back and told social services I was braying my two kids up at the nursery. I had Darren with me, and he was still a bairn, and Freddie was in the next room playing with all the other kids and they were saying that he were getting vicious, he were biting and kicking and them saying it was me what was causing it. They said it was me what was hitting Freddie and making him do it. I just couldn't handle it cos I was in the baby group with

Darren and Freddie knew I was in the next room and he kept coming into me and he was like, scared, crying all the time, and he was upset cos he thought mummy had left him. He kept coming out of the nursery to check if I was still there. When it came to quarter past three and they started packing up all the paints, they turned round and told social services I'd brayed my son as we were leaving Young Ones. They said I was kicking him and punching him at back of head and it got back to social services and they were down the house the same day and they took the kids. Without even letting me say what was supposed to have happened. They took the kids just like that. They just took their word for it.

And when their dad came home he wondered where the kids were and I told their dad what had happened. Next minute he had me pinned up against wall and started kicking hell out of me, and punching. His sister came round and saw what he did to me and I ended up in Casualty. I just couldn't put up with that anymore and I ended up at a Unit for battered homeless mums, a refuge. I'm still in fear of him.

I'm not happy about attending meetings because they make me feel really uneasy when I attend. Social worker usually explains what it's about but they don't listen to me. The only person I do trust to tell me what's happening is my solicitor. He'll help me read what's written about me if he's got the time, or he'll make time. He usually goes through it. He knows I'm not very good at reading. They say wrong things about me and I've spoke to my solicitor about it but they just want to believe what's down on paper really.

Sometimes I understand what's happening but most of the time my solicitor has to explain to me what's going on. Sometimes I've had to go to these meetings on me own, and it hasn't been easy. Cos that's when the social worker thinks he can get round me cos I haven't got me solicitor. He'll change his words and say he's there to help and support me and I know different.

Lenny doesn't come to meetings. He's like me. They can only push him so far and he'll blow up.

I was against them taking kids. They went with strangers. Darren and Freddie went with the same foster family, but Mandy didn't. There was one time I met the foster mum, and the foster dad, when I was having contact. The foster mum was sitting there in the room and she didn't even go out of the room and I felt very uncomfortable having her there and I just basically got up and walked out. I saw them about once a week. Then it was twice a week when I went to this sort of room in Sheffield where there was a little play area, and there was all social workers around, and secretaries, you know, keeping an eye on you. I couldn't put up with everyone watching every move you made and playing with them, watching you feed the kids. I couldn't put up with it, so they had to drive me back and drop me off at Redfern House.

In the end I had to tell solicitor what was going off and I had to let him know I wouldn't go to any more contacts cos I felt really uneasy and out of place cos I was being watched with me own kids. He turned round and said, that's not good enough. He said, you should be allowed contact with the kids and not with the social worker. The kids were playing up quite a lot cos they knew in a way, even though they were only three and four, they knew something were going off and they were getting really stressed out and getting really upset. They were playing up all the time and flinging their arms round me and saying, mummy, I don't want you to go. And with me being upset I didn't realise it was affecting kids, and with kids being upset I just walked out. I think they're still trying to figure out from that day 'til now, why aren't we with mummy. Cos at the end of the day, it's not just us what's getting hurt, it's the kids what's getting hurt and it's them what's suffering.

There were quite a few times when they said I couldn't have contact, cos they were trying to say it were me what was upsetting the kids. I said, I was putting the kids first, making sure how the kids feel, and they said, it's you what's upsetting them. There was one time when I was due a contact and I couldn't go through with it so I had to tell the solicitor. I said, I'm going home and it were five week and he hadn't heard from me and he was really worried about me and that's when I was living in Redfern House. They had to send for the police cos I wouldn't answer the door and they had to use a spare key to get into the flat and they found me unconscious cos I took an overdose. All I remember is waking up in the hospital and wondering why that policewoman was standing at the side of the bed.

It's mainly me brother what's helped me. He's helped me fill in the forms to get like a Fund loan or whatever it is, to get carpets and that. He got his mates to help him put the carpet down. So that's really the only thing that belongs to me, the carpets, and the fridge. I haven't got a washer yet but that's next on the list.

But Mandy's now been adopted with her two brothers. I still have worries about them. Social services haven't given me any feedback when they were supposed to. Letters and that, and photos. I've had nothing, and I'm still waiting for it. They won't tell me where they're living. I've got a funny feeling they're living locally. I've got plenty of photos of them before they went to foster family, and when they were with foster family, but not since they went for adoption. The court said to me solicitor that I was supposed to be having photos and letters once every year and I haven't been getting them since they went for adoption. And it's just not on. Every time I keep chasing it up, Tom O'Connor, the one who's dealing with the adoption part, he just keeps fobbing me off with some excuse all the time. It's got to the stage when I've gone up to Tinker House, quite a number of times, I've basically been abusive towards Tom O'Connor cos he's not been honest with me over the kids cos I haven't heard nothing from them. It's all right for them to do what they do, taking the kids, and then they're fobbing me off, and saying I'm getting this once every year and I've been getting nothing.

Since I was a little bairn myself I've had them and to me they've done more damage to me than what they realise. At the end of the day they've picked the wrong person to mess with. If they're going to do this to me, and they're going to do it now, when this bairn's born, they've got to accept the consequences. It's even got to the stage....my boyfriend was coming through the door and he had to take the tablets off me. I was on the verge of taking a load of tablets, even though the bairn's still inside. He was wondering why. He knew for a fact that I'd been under a lot of stress and he knew I was at a meeting yesterday with my solicitor but he didn't know what the meeting was all about.

I thought my solicitor would be pushing for an assessment by now but he's busy with other cases and that. Even if it meant this babbie went into a foster home and me being assessed that way, I would have been willing to persevere, but my solicitor didn't really understand what I was saying to him. He was telling me yesterday to persevere with the social workers but why should I persevere with them when at this moment in time they're taking the babbie off me? Why should I keep them happy? They're just not giving me the support that I need. So there's no way I'm going to persevere with them.

There's social workers that I'm really against at the moment and that's why nobody's allowed in the house now, apart from my bloke.

If my solicitor wanted to come here he'd have to ring first. Choosing him as my solicitor was my idea. I'd heard all about him off friends who'd had him in the past. They kept telling me how good he was so I thought I'd give him a go. Now and again I think he's doing a good job but, to me, I think he could have done a lot better to try and save me two boys and me daughter. He could have tried harder with them and he could try harder with this one as well. It's just got to the stage where I find myself not trusting him now. He's telling me not to give up but it's all right for him to say that but at the end of the day I haven't got the fight in me anymore to do it. He's expecting me to go all through this again, all through the courts again, and I just haven't got it in me anymore.

I had mixed feelings when I was in court. I even got up at one stage to see if I could have a chance with the boys but it didn't do me any good. At first it was in the Magistrates Court in town and then it moved to Sheffield and I had to go to Sheffield two or three times. When we were in Sheffield, I didn't have the money on me or anything like that, so me solicitor had to give me a lift there and back all the time. The social workers offered to take me there but I wouldn't have it. I didn't really understand what was happening in court. My solicitor had to tell me.

It affected me really bad, with the boys, and it's going to affect me now when this one's born. I've told my solicitor that, when he goes to court, there's no way I can go as it's going to affect me too much. He said, well, you're going to have to go to put your point of view, but I said what's the point when they've already decided what they're doing. And all he kept saying was, it's the court what has the last word. But they're only going to let them take the little'un away so what's the point of going. I can't go through all the agony and the pain any more. To me, the judge isn't doing his job right, he's just letting the social workers take the kids away from mums. And then, when I'm going into town, or waiting for the bus, all I see is kids getting brayed everywhere I walk. And I'm thinking to myself, I'm not even given the chance to look after my kids and there's parents what's getting away with doing this and that to their kids and it's just not on.

I've been angry inside since I was a child myself. I've got this anger steak inside me and that's why me bloke Lenny, if he knows I'm going to lose it, he'll either walk out and sit in his van until I've calmed down or he'll drive round for an hour, go and see his mates, and then he'll come back. He'll ring me first to say is it safe to come back.

Social services have talked about an anger management course and I tell them where they can shove it. Like in the hospital itself, and they come and see you to try and talk to you about your anger, what causes it, and how do you feel when you lose it, what sort of things do you do when you lose your rag. I've had that when I had Darren and Freddie. And they tried it with Mandy and I just basically told them to 'F' off cos I didn't want it. And I think they're going to do it again when this one's born. Hopefully I'll come out of hospital the same day bairn's born. I don't want nothing to do with anybody. I don't even want to see bairn. They've told me I can see bairn before they take it away but I just don't want anything to do with the babbie. They said, well, when she's older, or he's older, they're bound to come looking for you, but I don't want nothing to do with them when they get older. I don't want them anywhere near me. Cos it's really stressed me out and it's really got to me, what social worker's done. I can't take it anymore and that's why I was going to do last night what I was going to do. Those tablets...until he walked through the door.

I always bottle it up inside. I won't let go. But I've promised myself the next bloke what does use me as a punch bag, they're going to be very sorry.

Annie Collier: Life Sentence

Annie lives alone on the first floor of a block of flats. We sat talking in her cosy living room. On the display cabinet were photos of herself with her two boys, Simon and Billy, taken on the day she was last allowed contact with her youngest. Other photos of the boys stood alongside. As she spoke she looked fixedly at the photos nearly all the time.

They've lived away about four years now, this April. Simon's in foster care and youngest, Billy, has gone for adoption.

Before Simon's father came to live here he was a schedule one sex offender. I used to live at Tipstone with my children and he kept coming to see me. I did feel sorry for him in some ways cos his family didn't want to know him. He'd been in prison after what had happened.

This social worker, I think she was from London. She was a bit on clever side; a bit big headed. And me, I've never liked social workers cos they want to know all your business. At that time, what she did, she went up to Simon's school, questioning him, and I don't think that's right. She just went up on her own. And then she bounced back down to my house and she got Billy in kitchen, questioning him, and I know at that time Billy couldn't understand cos he was only young. He'd be three, or four. I know he was a bit frightened of her, Billy. When she got him in kitchen, questioning him, I had to stop in living room. She had to shut kitchen door so I couldn't hear Billy, what Billy was saying. Then she said, "Annie, is it true that Simon's father has been visiting", and I just sat there and didn't know what to say because she thought she were clever and I just come out with it. I said, yes, it is true, it is true. So she says, we'll have to get a court order out and everything. He shouldn't have been coming to my house at that time when he'd just come out of prison.

She came with another gaffer from where she worked and they both came to my house to get me children. I had to get all their clothes ready, and I'd got clothes on washing line.

They waited while I met Simon off school bus. I said to Simon, you know what you've done now, you're going to be took off me. He didn't know what to say. He was laughing. I said, would you like to be took off me? I think babbie was upset; I think Billy was upset. I said, I don't know what to do now. I felt like doing something to myself. I said, what shall we do Simon, shall we go back home or what? When I told me parents later they said as soon as Simon got off that bus you should have come straight to our house with those kids.

Social worker said I couldn't cope with children on me own, with having learning difficulty and having to class me as an unfit mother as well. At that time it was too late to have social worker for my children. I didn't get no help nor nowt. I fetched them up from when they were born. I kept them clean, and some of my friends says, what you've had your kids taken off you for, Annie, I can't believe it. Them kids nice and clean, no lice or anything since I had them.

When I had them first took off me though, they were together in foster care. Then they got separated and then Simon had problems with this other foster carer's. He kept having problems running away. He used to come here. I'd say, Simon, it's not safe. He's missed his brother a lot cos he's gone up for adoption. He sees him about twice a year, in holidays and Christmas time.

Where me eldest one lives, in foster care, they both work and now the foster carer seems to be getting all our Simon's money, that DLA, and she's asking social workers to get grants for Simon cos he's growing out of clothing and everything. I go to Simon's review meetings at foster carer's and she always seems to be asking for clothes for Simon.

Them that's got Billy, they've adopted another little girl and she's a bit younger than Billy. He's a doctor and she's a nurse. And them where Simon's living, she's a nurse and he's a mechanic.

Some social workers were nice. They were friendly. They say, we know you're upset Annie. I say I look at kids' photos. I can't look at other children sometimes. I can't tell other people I've had mine took off me. And then I couldn't say nowt meself in court. It were social worker and solicitor I think what says Annie can't have her children, she can't cope, she's got learning difficulties. I said, have I got to be scruffy to have me children? Have I got to paint me face coloured to have me children? I was fetching everything up. I wrote a letter to judge and took it up meself.

I never stop thinking of them.

At that time I should have had a social worker. You see, I was having trouble where I was living. I couldn't let my children play out. Other children round that area wanted to hit Simon all the time cos he went to that special school. They were calling him. They were pulling my fencing down, using my garden as a tip. I wanted to move on medical grounds but the council wouldn't move me.

When I were young me dad worked at pit. I used to sleep with me dad. I asked me mam, why did me dad used to sleep with me? He never slept with me brother and he never slept with me sister; why was it me all the time? Was it because I was the youngest? I never had no friends when I was younger. He only slept with me in day time. Me mam was working at the time, she used to do a night shift. I used to think where were you, mam, when I was sleeping with me dad. She said, "He never touched you". I said, you weren't there watching me and me dad in bed, things like that, were you…

Simon's father used to hit me. He used to when I lived at Tipstone with just Simon. At that time, I had a court Injunction out for him to keep away and everything. I can't love him or anything after what he's done but I just feel sorry in some ways cos he's got asthma, and his family don't want him.

When Billy went up for adoption I had a last visit with him. It was me, Simon's father, that social worker who took him off me, and another social worker. They took a few photos. I was upset. I took Billy to toilet and he knew. He kept saying, "I'm going to my new mum and dad's now". And I picked him up in toilets and I said, Billy, I'm your mam, your real mam. I says, will you always remember me Billy? I'll always be your mam, I said, I'm going to miss you so much. They took a photo and he'd gone right sad…right sad.

A couple of days after, or rather a couple of weeks after, I had a nightmare about Billy. I thought he's gone now. Then I had another dream, it was terrible this dream. It's something on your mind all the time. But these thoughts I've had in me head, duck, when I've had depression, it makes me feel I want to smash all me head in when I've got it right bad.

I asked if me mother could see Simon again after me dad died and the social worker said the reason why Simon can't see your mother yet, Annie, is because she's just lost her husband and she might talk about her husband to Simon and Simon might be upset. And I had to explain to me mother. I said, mother, you can't just see Simon yet. Cos she's had a bad life as well. She's had a bad life with me dad. I said to her, mother, if you do see Simon, don't mention me dad to him will you cos it'll upset him. And if Simon mentions me dad to you, just try to ignore him or something. And she's all full up and she can't hardly speak to him.

I would wait for Simon and Billy. It's not long now for Simon cos he's fourteen in May. But I know it's still a long time for Billy and sometimes, with Billy being away all that time, it reminds me of being in prison. All this time that Billy is away it's like being like someone in prison. It feels like both of us sometimes.

Well, last time I went to meeting, they were doing all talking, all lot of them, Simon's social worker, Simon's other grandma. I said, excuse me, can I say something. But I got a bit frightened cos they were all there. Simon sat on settee with his grandma and I was a bit upset. I thought, he never sits with his mam, he never sits with me.

I see Simon about once a month, or is it two months? It's just for an hour and I get upset. I'd like to see him longer because every so often I draw money and I buy presents. I don't always give him money. And Simon's father says, "You don't buy Simon with money you know". I says, he's only a child, I do like giving him money. I give him money on his birthdays, I give him money for Christmas.

At last contact, me, Simon and foster carer went to McDonalds. But I said, at last meeting, I'm getting a bit jealous cos his other grandma from Worksop's taking him all over. And I said I'd like to go all over with Simon. They said sometimes it's not up to you, Annie, what you want. It's up to Simon.

At the next review meeting, when she's there, I've got to ask Simon's grandma to leave the meeting and take him out cos I want to speak. It's every six months and I didn't do at last review meeting when she was there. But I'm going to do it at this one. What it is, duck, she's been on about taking Simon to see his father and I don't want it to happen because Simon can't come here to my house.

And I've got to see if I can send Billy a couple of photos and a letter. I've asked them and they say, Annie, you can send some photos and a letter if you want to, but it's also up to the adoptive parents and if they want to accept them as well, if Billy can have them.

What makes me mad is that some parents have got their children in foster care and they can see them anytime they want even if the children are in homes. They can see them on a weekend. I did ask once but they said it's different for you, Annie. I still think it's unfair and I'm going to tell them at that meeting.

The Parents' Voice

Assessment

The attitudes that social workers bring with them to their work with families feed through into the assessments they undertake. Those who lack faith in the capacity of parents with learning difficulties are more inclined to adopt a 'deficiency perspective' that puts the emphasis on what is going wrong in the family. Those who believe in them are more likely to see their positive attributes as strengths on which to build.

About a third of the parents we interviewed said they had not had an assessment or could not recall ever having one. Among the majority who could clearly remember being assessed, some were given a full residential parenting assessment where others, like Rebecca Hall for instance, were simply put through some standard psychometric/IQ tests: 'Yes, I had an assessment with psychologist to see how old this brain of mine has got.'

Parents had no difficulty in grasping the idea of assessment: 'an assessment (is) to make sure you can look after your child'; '(it's) to see if we could protect and things like that. If it came to it what would we do'; 'to see if I could cope with 'em.' They were quite capable of understanding what it was all about when it was explained to them. The fact that some parents could not recall their assessment is less a reflection on them than on the openness with which the process was carried out.

Reading behind the parents' accounts, they appear to have received one of three types of assessment:

> *A focussed assessment of parenting skills*
> The characteristics of this type of assessment were that both parents (in the case of couples) were explicitly engaged in the process of assessment, their children were included, it took place over an extended period of weeks or months, usually out-of-home in a Family Centre, Family Placement or residential unit, and the parents were generally informed how they had got on ('They had like a book and I used to ask if I could have a look at the assessment what I'd done. They'd show you the book and you could go and read it yourself in your bedroom if you wanted to read it privately. And at meetings they'd tell you how well you'd done.') .

> *A psychometric assessment/IQ test*
> The characteristics of this type of assessment were that only the parent with learning difficulties was involved, parenting capacity was assessed by inference rather than observation, it was completed in a matter of hours (sometimes less), usually in a clinic and the parent was not informed of the outcome ('He went straight to the social workers, rang them back and told them. All I knew was that it was something to do with the kids.')

> *A closet assessment*
>
> The characteristics of this type of assessment were that it was undertaken without the parents' knowing, the assessment criteria were never made explicit, the parents were not helped to make a direct input, judgements were largely impressionistic and the parents were not party to the outcome.

The parents' accounts bear out Glennie et al's (1998) observation that there 'is no common assessment framework in use across agencies working with neglect.' English (2000) asked 23 respondents from 7 professional groups if they used a formal assessment tool with parents who have learning difficulties and 18 replied that they did not. There are no signs that this situation has changed since the introduction of the new Framework for the Assessment of Children in Need and their Families (Cleaver and Nicholson 2003).

Research and practice experience have together helped to clarify some of the key features that should be looked for in a well-founded assessment involving parents with learning difficulties. Almost all of these were missing in the accounts of their assessments given by the families we interviewed:

> *First, assessments should mostly take place in the home in an environment and using equipment that is familiar and comfortable to parents and children alike*. As Kelly et al (1996) say. 'The home setting is the optimal place for assessing current needs and providing models for concrete changes in the mother's relationship with her child and, via modelling, with other adults.'

Among those families we interviewed who were aware they had been assessed, only two were assessed entirely in their own home while a further three had a combination of in-home and out-of-home assessment. Most closet assessments by their nature would have taken place in the parents' home, albeit without their knowledge.

Out-of-home assessments in Family Centres or residential units immediately disadvantage parents by introducing extraneous and exceptional pressures that are likely to impact on their performance.

Second, psychometric assessments should not be relied on as the sole or primary measure of parenting capacity. The continuing use of IQ and other measures of cognitive functioning as a proxy for parenting capacity flies in the face of the substantial weight of research evidence demonstrating that no such link exists (Greenspan and Budd 1986; Tymchuk and Feldman 1991; Dowdney and Skuse 1993). It also suggests that many supposed experts contracted to provide testimony to the courts are out of touch with the evidence base (McConnell, Llewellyn et al. 2002). Equally, the predisposition of courts to accept such evidence as scientifically sound is misplaced. There are many technical reasons for this including the fact that such tests are known not to measure accurately the intellectual functioning of culturally disadvantaged groups; that their validity diminishes when they are applied to groups other than the population on which they were standardised; and that they do not set out to measure many of the qualities intrinsic to parental competence. As Robbins (1998) has counselled, assessment 'procedures should relate in several different ways to the reality of both the family's situation and the possibility of improving it' and this involves, crucially, 'identifying capacity in terms of behaviour' – not, it should be noted, in terms of cognitive ability. Kidd Webster and Ullmer (Kidd Webster and Ullmer no date) spell out what this means. It means, they say, paying attention to such things as, 'the emotional and physical health of both parents and children; children's attendance at school and parents' participation with school staff; social networking; parents' willingness to discuss problems and concerns, but equally their eagerness to share good news or positives; general demeanour and affect of parents; parents' perception of their children; bonding attachment; parents' ability to put the child's needs before their own; the community perception of the family; the family's willingness to work with others and participation in other services.' All this entails painstaking observation and spending time with the family, not just a clinic appointment and a checklist. As McGaw (2000) adds, such 'functional assessments provide the qualitative information on the "nuts and bolts" of parenting, which is missing from diagnostic findings.'

Parents in our study who had been through a psychometric assessment had no illusions about its limitations. Listen to Keith Haigh: 'Well, I think it were a bit daft really. It was like, with money, you go to shop and you buy some things and you've so much money, how much have you got left, how much change. I thought, what's all that got to do with fetching kids up.'

Third, the expectations held of the parents and the criteria by which they will be judged should be made explicit. Buckley (2003) reports that social workers in child protection cases 'were frequently non-specific about the sort of criteria which they employed to make assessments' with the result that 'assessments were made on a very impressionistic basis'. The absence of validated assessment tools and an accepted methodology unavoidably makes for subjective judgements (Holborn, Perkins and Vietze, 2000). Munro (1999) found that social workers' '(f)irst impressions of a family have an enduring effect' in that 'they influence the way new information is interpreted' as well as leading to them being 'slow to revise their judgements'. Where practitioners have had no training and little experience of working with people who have learning difficulties, as is often the case with social workers in Children and Families Teams, these first impressions may be influenced, unwittingly, by the common stereotypes ingrained in our culture, which invoke an image of people with learning difficulties as permanent children (dependent, lacking competence, emotionally immature, self-centred) or sexually dangerous (lacking self-control, impulsive, unsocialised in behavioural norms) (Wolfensberger 1970). Practitioners are led down this road into pathologising the family and seeing only their failings. Prejudices like these work to filter out information that does not confirm such a deficit model of the family: as Snodgrass (2000) has observed, it turns assessment into a process of finding out what is wrong with the family. This deficit model thinking encourages the inconsistent application of standards and expectations in search of evidence that corroborates the presumption of parental inadequacy. Listen to Brenda and Don talking about their struggle to hold on to their son, Trevor (Schwier 1994):

Brenda: I felt sometimes they was holding Trevor out in front of us like a present if we done a good job...No matter what I did, I felt like I couldn't please them all.

Don: We felt we were ganged up on. We were tryin' to do somethin' right. We never knew when different workers were goin' to show up or what time. One worker would tell us to do one thing, so we would and then another would say, "No, you can't have Trevor until you do that another way."'

Tina Bowden made much the same point to us: 'The social worker would say, do it this way, and the support worker would say, do it that way. And you don't know which one is right.' Deficit thinking also leads to the imposition of standards that are not applied to people without disabilities (Grant 1980; Booth and Booth 1994; Block 2002). Chinn (1996) quotes a social worker talking about her colleagues' attitudes to a mother with learning difficulties: 'I mean, I've read reports, and they've described what my three year old regularly does, and called it sort of "disturbed behaviour".' Seen from the parents' point of view, they are left not knowing what standards they have to live up to or how they are being judged: like playing a game without being told the rules. They are aware they might lose their children if they do things wrong but they can never be sure if they are doing things right. Not surprisingly, they are cynical about social workers' motives and the purposes of assessment: 'all he was interested in was getting Johnny adopted'; 'she was there for taking kids, not helping us.'

Only three of the parents we interviewed expressed any positive feelings about their assessment and in only five cases were the parents able to recall having any information about their assessment shared with them. Cleaver and Nicholson (2003) found that social workers were less likely to provide parents with learning difficulties a copy of the Initial Assessment than other families. The Department of Health (2001) has acknowledged that further work is needed to help staff use the new Assessment Framework when working with parents with learning difficulties and has identified this group as a priority for follow-up. One important issue for any such a review must be how to make the assessment process more open and transparent to parents.

Fourth, parents should be provided with support if necessary to ensure their views and interests are represented. As Horwath and Morrison (Horwath and Morrison 2000) declare, ‘it is of crucial importance to involve the parents as much as possible in decision making’, particularly in the case of groups like parents with learning difficulties whose self-esteem is likely to be low because of their experiences of discrimination. This same point is echoed in the training guidance issued to accompany the new Assessment Framework for children in need and their families (Department of Health 2000). Parents, it says, are entitled to an assessment that includes a fair representation of their interests. Recognising it is unlikely they will be able to represent themselves adequately, good practice suggests that ‘an identified worker should be available to support them in their decision-making’ at all stages of the assessment (Cotson et al. 2001). An important indication of the parents’ engagement in the assessment is whether it contains an evaluation of the extent to which shared perceptions of the kind of support required can be agreed between them and their practitioner (ibid).

Only two of the families we interviewed reported having anyone to support them during their assessment and both these families attended the same specialist residential assessment unit. There were others who had an advocate but none of these advocates were said to have been a party to the parents' assessment. Whatever the practice guidance might say, the reality is that most parents are left to negotiate the process of assessment on their own. The upshot is that professional's views enter the record unchallenged while the parents' views are effectively sidelined or suppressed.

Only 5 families could recall being informed about the outcome of their assessment: although in two cases the parents reported only having been told they had 'failed'; a third mother said her social worker had simply told her 'the children weren't clean enough'; and in a fourth case the mother had been sent a copy of the assessment report which she had been unable to read. Only 3 families said they had been asked about the kind of support they might like. These facts sit uneasily with the idea that assessments should be undertaken in a spirit of partnership between practitioners and parents (Department of Health 2000): most parents in our study viewed assessment as something that was done to them rather than with them.

Fifth, assessments should involve practitioners experienced in working with people who have learning difficulties. The Social Services Inspectorate (Goodinge 2000) has expressed a particular concern about the assessment of parents with learning difficulties which, it says, is undertaken in some councils by staff 'who do not have the necessary skills': staff who lacked awareness and access to the specialist assistance and resources that might be required to support parents in their parenting.

Only 3 of the families we interviewed unambiguously received a specialist parenting assessment: they all attended a residential unit dedicated to this task. Some others were assessed by an educational or clinical psychologist but it was not possible to tell whether they received a proper parenting assessment: certainly, in some cases, it was clear they were put through no more than standard psychometric tests. Most parents, however, where they received one at all, appear to have been assessed by a social worker from a Children and Families Team. These workers generally have little experience or knowledge of learning difficulties; they tend to approach assessment narrowly from the point of view of child protection (Mansell and West 2000); their focus is usually on the risk to the child rather than on the skills of the parents; and their concerns are directed towards the children's needs rather than 'the total range of needs within the family arising from the parent's disability' (Social Services Inspectorate 1998).

The Social Services Inspectorate (1999)has identified 'the assessment of parenting potential of a person with a learning disability' as an important area for development. The findings of our study would add urgency to this recommendation.

Support

Surprisingly, given the adversarial history of parents' past encounters with the service system and the bitter legacy left by having children taken away, the majority of those we interviewed were still able to find some positive things to say about their social workers. Only a minority (7 out of the 20 households) could find nothing good at all to say about them. This upbeat finding speaks of one simple fact: most parents had had dealings with a troop of social workers, some of whom they liked and some they did not:

> 'I started off having Laura, she worked at Bankside. Then I had Ruby Fayre, I'd call her a bloody bitch if I ever saw her again. Sally Garnham and then Freda Johnson, but she's now called Greenock, she got married. We did have one called Kylie as well and she's changed cos we've now got someone called Stuart. There's plenty I didn't like. Sally Garnham I didn't like, Ruby Fayre I didn't like, Freda Johnson I didn't like, cos they were always telling you what to do and what you shouldn't do.'

Most parents, like Sally McGuire quoted above, were clear in their own minds about what made the difference between the social workers they got on with or found helpful and the ones they took against. It all boiled down to their attitude, and to the parents' perception of what their practitioner thought of them. Parents defined the right attitude in terms of three simple qualities:

a readiness to listen

> 'There was only two I got on with, no three. I got on with Pauline Smythe, but she's an adult one. I got on with Jeremy. It was their attitude. They didn't push you out. You can tell if someone doesn't like you, you know what I mean?'

> 'The only ones I've really got on with were John Berry and Stephen Walker. Those two. I found myself talking to them more. I found it easy to talk to them about what had happened to me. But Stephen Walker was mainly the one what gave me the support.....he was the one who was there for me all the

time. If I needed someone to talk to, or I needed help in any way, he was always there. He sat and listened and if I was upset he was a really good listener.'

not being bossy

'I didn't like that Lesley Thomas cos she were a bit clever all the time, you've got to do this, you've got to do that. She were telling me, like if I'd been up with Angie and Chloe, she were telling me to get me Hoover on at six o'clock and get me washing on at eight. You mean to tell me, you've got two small children who you've just been up most of the night with, and then they expect you to put your Hoover on, put your washer on.'

'This social worker, I think she was from London. She was a bit on clever side. A bit big-headed. And me, I've never liked social workers cos they want to know all your business. Some of them were a bit too clever. They seemed to know everything.'

'I just couldn't take to them. They spoke down to me like I was a child and I didn't like that.'

'But this one I've got now, she's lovely. She talks to me, and if I don't understand owt she explains it. But with others, used to tell me. They didn't used to explain what was going off.'

'What didn't I like about some social workers? They used to tell you what to do in your own home.'

> 'All she did was just sit and talk, talk, talk. Why don't you do this? Why don't you do that? Take him here, take him there.'

> *being helpful*

> 'Some bad uns, some good uns. There was a social worker with us, she was real nice. She had to move. She got us a cot, and blankets, everything. You liked her too, didn't you Andrew? She were right good and helpful, like. Some social workers are not like that. Lois Penny – is it all right to mention her name? – she was interfering too much. I felt like hitting her. They wind me up that much that I just can't handle it.'

> 'Suzy was all right, she were nice. She was helpful, her. She was better than Nancy. I'm all right with her but Suzy used to help me with stuff, help me out with clothes. If I called her, she used to help out.'

> 'Jill, she's all right. She helps you out if you need furniture and that. She's good with stuff like that.'

> 'She was there for taking kids, not helping us.'

These simple qualities go the heart of what makes for an effective relationship between parent and practitioner. Social workers who lack these qualities, who talk rather than listen, instruct rather than advise, and fail to address people's practical needs for support, will quickly alienate parents and forfeit their trust. These same qualities tended to be associated in the parents' estimation with other characteristics that identified those whom they described as good social workers, including being: available when needed; accessible (for example, returning phone calls); approachable; dependable; and good at explaining things. Taken together, these qualities define what might be called a respectful attitude toward the families.

These observations are fully in accord with the finding consistently reported in the wider literature that the attitude of those who deliver support is a crucial factor determining its effectiveness (Tymchuk 1990). As Snodgrass (1992) has succinctly declared, ‘parents know when you don’t like them and they know when you don’t like their children.’ A core lesson to emerge from programmes set up to support these families is that effective practitioners ‘see themselves as having something both to give and to learn’ and have ‘a genuine interest and commitment’ in working with parents (Ray et al. 1994).

The attitudes that make or break practitioners in the estimation of parents may be an expression of the job they have to do. Social workers in Children and Families Teams are responsible for policing families in order to safeguard the well-being of children. It may be that these structural responsibilities necessarily shape their relationships and their dealings with parents: in other words, their occupational persona is a function of their occupational role. Evidence from the interviews that would support this interpretation is given by the fact that social workers from Children and Families Teams were more likely to be criticised than social workers from Adult and Disability Teams. Also, practitioners like health visitors, community nurses and midwives were more often rated positively than social workers. In other words, the esteem accorded to practitioners by parents appeared to be related to their professional status. If this is true, then it raises serious doubts about whether social workers in Children and Families Teams can realistically be expected to work in partnership with parents who have learning difficulties as current policy guidance exhorts them to do: the nature of their work may debar the formation of just such a relationship.

However, the possibility cannot easily be dismissed that some social workers bring their attitudes to the job: that the ‘professional knows best’ culture observed by the Social Services Inspectorate (1999), which gives only token acknowledgement to users’ views, is itself a product of the kind of people attracted into child protection work. Certainly, listening to the parents and to their prevailing description of social workers as people who ‘don’t give you help only criticise’, it is hard not to conclude that there is still life left in the stereotype of the ‘do-gooder’. A number of parents were angered at having been lectured, as they saw it, about their parenting by young and/or childless social workers with no first hand knowledge of what they were talking about:

> ‘It’s like when I used to change ‘em. She used to say, I don’t like shitty nappies. She’s no kids. I said you don’t know what it’s like, I’ve had four.’

Perhaps workers who are conscious of their own lack of practical experience are put on the defensive and inclined to be more dogmatic and less receptive to parents’ views. (Interestingly, this criticism was never voiced about health visitors although many would also likely be of an age when they have no children of their own.) Whatever the case, the issues raised here carry implications for social work training: the fundamental lesson which has to be learned anew by every raw social worker is, as Robert Strike (2002) put it, to ‘talk to us NOT at us’.

Case Conferences, Core Group, Review and Other Meetings

Half of the parents we talked to offered no direct response when asked how they had felt when attending case conferences, core group meetings and the like. Some wept silently at the black thoughts the question triggered off but could not find a way of articulating their feelings. Whatever emotions were released lay beyond the words our informants could find to convey them. This should not be surprising. A restricted code and limitations in expressive language skills are part and parcel of what it means to have learning difficulties. Evoking feelings in the abstract, divorced in time and space from the situation that produced them, is not something that comes easily given the concrete frame of reference that characterises the discourse of most people with learning difficulties. However, those parents that did rise to the question spoke with one voice: unanimously they said these meetings were harrowing:

> 'They do too much criticising in case conferences.'
>
> 'They don't make me feel welcome.'
>
> 'I feel nervous because most of the time I don't understand what they're talking about.'
>
> 'I feel embarrassed when I'm at them meetings - we both do actually.'
>
> 'I've had case conferences and reviews, yes. A bit scared. It is scary for anyone.'
>
> 'I'm not happy about attending because they make me feel really uneasy....'

> ‘...when you go to a case conference they treat you like a piece of meat.’

Only two parents said they felt the purpose of meetings was not explained to them properly (‘You guess it as you go along’). The great majority acknowledged that they had been put in the picture and that an effort had been made to ensure they were aware of what the meeting was about. Several parents singled out the Chair of the case conference for special mention and clearly appreciated the way he or she had made a point of taking them on one side to brief them personally (‘Yes, she always sits with us first and explains what it’s all about. And then the rest of the people come in, other professionals come in.’).

From the parents’ point of view, however, communication remained a one-way street. Most felt strongly that, while allowed to have their say, they were not listened to: ‘I answer question best way I can and they push it under the carpet’; ‘I do say things but it’s more like they’re talking to each other’; ‘I don’t think they listen. I just sit there’; ‘No, they don’t listen. We were allowed to talk but they’d already made their minds up’; ‘They just listened to what I had to say and then carried on’; ‘He was a good chair, he listened, but all others didn’t, no’. Only four parents felt their views had been taken seriously (‘Yes, they do listen. Sometimes you might have to raise your voice a bit to make them listen. If you be open and honest with them, they’ll be open and honest with you.’) and in two of these cases the parents had had an advocate to speak for them.

Aside from the pervasive sense of being present but having no place in these meetings, parents also complained about:

the number of participants

‘Just a lot of people. Make ‘em smaller. Just a few people there.’

‘It’s a bit overpowering.’

not knowing all those present

‘There’s usually between five and six, maybe more. I know some of them but like yesterday they had a policeman, not in uniform, he was in plain clothes and he just made me feel really out of place that he was sitting there.’

‘There’s usually about half a dozen people. I don’t know them, not all of them.’

being the butt of so much criticism

‘All I was getting really was negative vibes from everybody. Gary’s done this, Gary’s done that. He wasn’t saying anything positive about Gary. It was negative, negative.’

‘Criticism all the time.’

‘..digging up the dirt. It upsets me.’

not understanding what was being said

‘No, they talk fast and then I have to wait for Kath [advocate]. I say, I didn’t understand that Kath, did you?’

‘I feel nervous because most of the time I don’t understand what they’re talking about. I can’t understand big words.’

> *being grilled*
>
> 'I do get upset. I do get agitated in these meetings. A couple of times I've gone to meetings and I've got up and walked out because it's as though they're grilling you.'
>
> 'It was like being in court again. It reminded me of court and I were crying. I said, I don't like it Adrian.'
>
> *feeling put down*
>
> 'They don't mind if they hurt our feelings.'
>
> 'They kept saying I wasn't a fit mother. I didn't like that.'
>
> 'They don't treat us as a family unit.'
>
> 'I felt as if they'd pulled me down. I've not said anything. I've just gone home and said to me mum, waste of time.'
>
> *overlong meetings*
>
> 'They go on too long.'
>
> 'Case conferences take too long, miles too long.'

Most parents struggled, in varying degrees, to understand what was happening in the meetings. Big words, written papers, fast talk, jargon, unfamiliar rules of procedure and 'nerves' all made it hard for parents to follow what was going on. The majority had found someone they could trust to turn to for advice, even if it was 'our Debbie' or 'mum'. Four people looked to social workers to perform this role ('social workers have been straight and open with me so far') but in the win-or-lose system of child protection most parents clearly saw them as being on the other side ('Their only interest was the child'). Even so, fewer people named their solicitor than a social worker, probably because solicitors did not often attend these meetings and were perceived as being a touch remote. By contrast, all the families (6) who had an advocate nominated their advocate as the person they would trust to explain things. This vote of confidence was unequivocal: advocates emerged as the only reliable port of call for parents wanting to understand the process in which they were enmeshed.

Another reason why parents showed so little faith in the trustworthiness of social workers is because they had witnessed them 'telling porky pies' before. Corby et al (1996) report that 31% of parents interviewed in their study 'said that statements made about them by professionals in the [child protection] conferences were factually incorrect'. Seven out of 10 families we talked to held that wrong things had been said or written about them at meetings:

> 'We said that's a lie, that's a lie, that's a lie. We took it down solicitor's. I said it's lies, it's not true.'
>
> 'They're asking questions and you've got to think what you say before you answer because half the time they twist it, to say something what they want to say and not what you said. It's like these papers I got from court. Half of what's in it isn't true.'

The accusation that most often provoked the parents' ire – especially mothers' - was that they had neglected their children:

> ‘They kept saying I wasn’t a fit mother. I didn’t like that. I just told ‘em I am a fit mother. I know I’ve got learning disabilities but I am a good mum.’
>
> ‘Yes.....about not feeding them, that I was neglecting them. I could understand if they were mucky. I’d buy them new clothes every week. I used to take them out if I had a bit of money. Instead of buying stuff for meself I used to buy Ally and Clare new clothes every week. So I can’t understand why. I said I always cook them meals, I always feed them. I give them vitamin tablets - Doctor used to give me that. I said I can’t see nowt wrong. They just listened to what I had to say and then carried on.’
>
> ‘They said I didn’t feed my kids and they were mucky. That isn’t true at all.’
>
> ‘They say I can’t cope with three children because I have epilepsy. I’ve been down to my mum’s in tears. She says I’m a good parent.’

Most people with learning difficulties who become parents will have grown up with a bottom-of-the-class identity. In their families, neighbourhoods, schools and workplaces, they will have been picked out or picked on as different or less worthy. Indeed, part of their problem is having been told what’s wrong with them from a very early age (Snodgrass 2000). Becoming a parent marks a personal achievement that belies this ascribed reputation and gives mothers especially a valued status and a proper role in the adult world (Booth and Booth 1995). Being told yet again that they are a failure threatens both their hold on their child and their hold on their new found sense of self. Perhaps this explains why most of our parents resisted what they saw as the false accusations levelled against them where Corby et al's respondents 'did not feel able to challenge them' (Corby 1996 p.480): 'I say how dare you talk about me like this on paper'; 'I lost my cool, lost my temper'; 'I say, you haven't been to my house when I've done things. They're not there to see it. But they don't like it when I tell them'; 'Oh yes, we've challenged it. Marty, our advocate, wrote to Social Services and told them we were being treated like animals'; 'I've spoken to my solicitor about it (but) they just want to believe what's down on paper really'.

Perhaps, too, this readiness to reject the findings of professionals was part of their undoing. One of the key tasks of case conferences is 'to assess the parents' recognition of a problem and their capacity to change' (Horwath and Morrison 2000). Parents' attitudes, especially the mother's, have a crucial bearing on the outcome. Those who acknowledge their culpability for the problem, cooperate with practitioners and demonstrate compliance with their advice are more likely to be seen as suitable candidates for rehabilitation (Buckley 2003). Those who do not accept the professional's interpretation of the situation are more likely to be viewed as presenting a risk to their children or as incapable of protecting them. Parents with learning difficulties lack the skills to navigate their way through such complex negotiations. Farmer and Owen (1995) noted that working class parents encountered cultural and linguistic barriers to their participation in case conferences. Such obstacles are magnified many times for parents with learning difficulties. As Mansell and West (2000) observed, verbal information given during meetings 'can be too subtle for parents to comprehend.' Indeed, only a couple of the parents we interviewed said they understood what went on at meetings ('Some of the jargon I don't understand, it needs explaining to me. But most of the time we're OK. We know what's going off.'). The majority found themselves more or less at sea ('We didn't know what they were on about') and, without the help of an advocate or representative, the proceedings would have just washed over them:

> 'If I don't understand at first, Jenny (advocate) explains to me afterwards.'
>
> '..if I don't understand what they're on about, Averil (advocate) tells me and explains to me.'
>
> 'No, they talk fast and then I have to wait for Kath (advocate). I say, I didn't understand that, Kath, did you? 'Cos she takes a diary and then I ask her what did they say. We sit round a table at that case conference but I felt I were included and then afterwards I felt as if I weren't.'
>
> 'Sometimes I understand but most of the time my solicitor has to explain to me what's going on.'
>
> 'Sometimes I was saying yes when I think I should have been saying no.'

People who find it difficult to grasp the nuances of meaning and procedure that drive the business of case conferences and similar meetings cannot know how best to present or conduct themselves. Moreover, the scales are further tipped against parents by the fact that the discussions and decisions are 'strongly based in the experience of practitioners' (Farmer and Owen 1995). Such experience rarely encompasses work with people who have learning difficulties, so making it more likely that the practitioners will misread the parents' responses. Parents, then, face a double jeopardy:

unable themselves to understand the system they are caught up in, their special needs are mostly not understood by those who run it.

The interviews underlined the importance of parents having a representative to support them in case conferences and reviews. They were mostly at a loss without such support ('I've had to go to these meetings on me own, and it hasn't been easy. 'Cos that's when the social worker thinks he can get round me 'cos I haven't got me solicitor. He'll change his words and say he's there to help and support me and I know different.') The only parents who regularly had someone with them were those who had their own advocate. Solicitors' diaries did not always allow them to attend, some clearly did not see their presence as a priority, and parents sometimes did not have a solicitor at this stage. Some Chairs permitted a relative or friend to accompany a parent but others did not ('Me dad come.... They wouldn't let him in'; 'Me sister Susan - she's like me spokeswoman - she comes to core group meetings but she's not allowed to come to case conferences. She went with me once to case conference and they told her she couldn't go in so she had to go round town for an hour until it was over').

Case conference proceedings and papers are classified as confidential and the parents are warned not to disclose any information presented or discussed with anyone outside the meeting. Those who don't have a competent representative present are massively disadvantaged by this embargo or, like Rebecca, forced to break the rules:

> 'How the hell am I supposed to understand what's in the papers if nobody's allowed to read it first and explain what it means and what's going off. Like the last statement I had, I just couldn't understand it so I brought it down here this week for Kath [her

> advocate] to read. She goes through it and if there's any words I don't understand then she'll try and put it another way so I will understand.'

Parents are ill-served without proper representation in these vital meetings where so much is at stake. Their children too lose out because only the professionals' interpretation of their best interests is given a full hearing. It is astonishing that people whose disability means they have difficulties processing information, whose expressive language is restricted and who may not be able to read or write, can be left to flounder unaided in decision-making meetings where the future well-being of their child is being considered. Undoubtedly one reason why so many parents with learning difficulties are siphoned down the court route is because they haven't been given a fair hearing earlier in the case. Such a kangaroo set-up flies in the face of human rights and natural justice. It has long been recognised that the 'whole issue of parents' access to independent advice, advocacy and support before the case reaches court needs to be tackled.' (Hunt et al. 1999) The case for such a review is even more pressing in the case of parents with learning difficulties.

The parents' accounts of their experiences of case conferences, core groups and other meetings present a grave picture of a plug-eared process at work. In truth, many of the observations and criticisms made by our informants mirrored those of parents without learning difficulties who have also been drawn into the system and who similarly reported feeling:

- 'intimidated by its [the case conference's] size' (Hunt et al. 1999);
- 'exceedingly lonely' (Farmer and Owen 1995);

- inhibited by ‘the formality of the atmosphere’ (Farmer and Owen 1995);
- ‘not being listened to adequately’ (Freeman and Hunt 1998);
- humiliated by the emphasis on ‘negative information’ (Farmer and Owen 1995)
- angry about the submission of ‘inaccurate statements’ (Munro 1999)
- unable to express their views or challenge the professionals’ concerns (Cleaver and Freeman 1995).

In this context, it would be inaccurate to say that the parents we talked to reported experiences that amounted to discrimination. Their complaints did not suggest that they were treated any differently to other parents. Clearly they felt disempowered but, then, the research shows that most parents involved in child care investigations feel exactly the same. However, the issue of disability that defined the group of parents we interviewed cannot be dismissed so easily. Indeed, part of the problem is that in many cases the parent’s learning difficulties were simply not taken into account in terms of the way the meetings were conducted. So whilst their disability may not have impacted on their treatment it almost certainly did impact on the outcome of the investigation. Parents were more likely to be perceived as incompetent, unable to protect, incapable of change, and non-compliant and, consequently, more likely to have care proceedings taken out against them for want of due attention being paid to their extra support needs.

Court Proceedings

Parents’ observations and reflections on their experience of court proceedings were marked by noticeably less anger, bitterness and frustration than was evident in their accounts of case conferences, core group and other such meetings convened by social services. They showed a resignation or submission to decisions and judgements made by the court of a kind that was not extended to the outcomes of the process of assessment and review. In this sense, the judicial proceedings were granted a legitimacy by the parents that the preceding child welfare investigations were not. So far as the parents were concerned, they were undone by what went on before the court hearings not what went on in them. The strong sense of injustice so many of them nursed focussed on their conviction that they had been ‘fitted up’ and misrepresented by the evidence put before the court.

Few parents said they had been advised by the social worker on their case about their legal rights, where to obtain advice, how to find a solicitor or what help might be available to them once the decision had been taken to pursue a care application. Most were left to their own devices. Just one mother was put in touch with an advocacy group by the social worker from the Children and Families Team. Despite their learning difficulties, none were put in touch with a disability social worker or referred to the Adult Services Team for help in finding their way through the legal and bureaucratic maze ahead of them.

Most families found their own solicitor - via the phone book, relatives, past dealings or on the recommendation of an advocate:

> ‘I found him meself. Because I went to another solicitor when it happened and I didn’t like him. He was mad with me and I was mad with him. He upset me. I didn’t think he wanted to help really. I think he were on clever side. He was a big shit house. I think I found Dennis ‘cos he said to me, I’m the right person to find, or summat, ‘cos I deal with social services and children.’

> ‘I’d had dealings with [firm of solicitors] before, when I was pregnant with Gary, I was having problems with Social, they weren’t giving me a maternity grant. [Solicitors] were really good, I could talk to them.’
>
> ‘I think it was [advocate] what introduced me, ‘cos I think she knows him. We made an appointment and went and see him.’
>
> ‘It was my idea. I heard all about him off friends who’d had him in the past before. They kept telling me how good he was so I thought I’d give him a go.’
>
> ‘I sorted out a solicitor myself. I was just looking through [telephone] book and I looked at his name and I thought, he sounds a good solicitor.’

This situation does not serve parents well, especially parents with learning difficulties who might be expected to find it harder than others to navigate their way around the system. For parents to be sure they find someone with the expertise that will serve them best it is important they choose a solicitor who belongs to the Children Panel. This means he or she will have satisfied The Law Society’s knowledge and skills requirements for providing advice and representation to adults under the Children Act 1989. Parents who are left without guidance might very well end up with a solicitor who does not have experience in the relevant branch of the law. Local authorities should be required to ensure that parents are provided with a list of Children Panel members in their locality, and advised of the importance of consulting a solicitor who belongs to the Panel, when they are notified of the decision to initiate care proceedings. Parents with learning difficulties will need such information explained to them personally.

The fact remains, however, that the great majority of the parents we interviewed held a good opinion of their solicitor and were very satisfied with the service they had received: ‘good’, ‘excellent’, ‘I thought he did a nice job’, ‘Everything was spot on’, ‘She were brilliant. She told me if there’s any trouble to call in and see her’, ‘I think he’s done quite well. I would recommend him to anybody else that needs help. He’s a good solicitor’. With the single exception of one mother who felt her solicitor was ‘now and again doing a good job but....could have done a lot better to try and save me two boys and me daughter’, none of the parents we talked to could think of anything they didn’t like about their solicitor.

These positive opinions were not associated with favourable case outcomes. Parents who had lost their children were also ready to find a good word for a solicitor who they appreciated had fought hard for them: ‘They were really good, they tried their best. They tried everything to keep Auriel with us’; ‘He tried his best’; ‘She was fighting but there were too many social workers’. One reason why so few parents had any criticisms of their solicitor is that they were not reluctant to discharge those they felt were not doing a good job: ‘I sacked him ‘cos he didn’t challenge the guardian ad litem’; ‘She didn’t help me get kids back. She was on their side. So when I had Kerry I changed’; ‘The solicitor SSD suggested was hopeless so I phoned a few up and found one who helps families’. But undoubtedly the main reason was because the parents felt their solicitor listened to them, understood their point of view, explained things in terms they could comprehend and was seen as being on their side:

> ‘He used to explain to me what they were going to say, stuff like that.’

> ‘I liked everything he did. He did a good job. He explained what was going off, then I understand him.’

> ‘And she did it so I understood. If there was something I didn’t understand my solicitor put it in shorter sentences and explained it more clearly. She also gave me lots of advice.’

Parents’ opinions about solicitors contrasted markedly with those they held about social workers. This cannot be put down simply to the fact that social workers had to make hard decisions that upset the parents. Solicitors too had to be brutally frank at times:

> ‘She [solicitor] said if I keep saying no every time then the judge will just squash what I say and go ahead with it. I said, well, that’s not on, that is not right. She said it’s not going to be me that has the say, it’s not going to be you, it’s going to be the judge and what the judge says goes.’

> ‘Well, he said I couldn’t have contact with me brother. I didn’t like that.’

> ‘Her solicitor said the same, that it would probably be for the better if Gilly was put up for adoption.’

The difference in the eyes of parents was that whereas their solicitor was honest and could be trusted to do his best for them, the social workers they encountered had been duplicitous, saying one thing to their face and another in their reports, case conferences and in court (‘One minute they were saying I could take him home then the next minute they were going to put him in foster care’).

Virtually all the parents said they had been ‘tense’, ‘a lickle bit nervous’, ‘scared’ as they waited for their case to come up:

> ‘A bit frightened because I’ve never been to court in me life. I thought I might say something stupid and what’re they going to think about me. Sometimes I feel like I have got a brain and sometimes I feel like I haven’t got a brain. I don’t feel comfortable, and I don’t know what to say. I just want to come out with some things I want to say but I don’t know what they’ll say about me.’
>
> ‘nervous, very nervous. Before I went in I was very nervous.’
>
> ‘It were nerve-racking. Me stomach were turning over, me mouth going dry. I was shoving mints in me mouth to make it stay watery. I thought, Oh God, let me get out.’
>
> ‘Before we went into court I was sat with me mum and I ended up going to toilets because I’d got that nervous the tears started.’

A few collected themselves once proceedings had begun (‘When I got in and everyone started talking I were fine’; ‘Actually I felt quite at ease, funnily I did’; ‘But when we managed to get into court and we were sat down and magistrates were talking and solicitors were talking, you become more relaxed’). Most, however, like Diane Mortlake, remained ‘terrified. Each time, terrified. All the time I was right scared. When I first went in front of magistrates I nearly passed out’; Mary Wenlock, ‘just wanted to get out of the room’. For others, the experience proved too taxing:

> ‘I said I couldn’t face being in court at the end and my solicitor said she’d deal with it for me.’

> 'I couldn't face County Court. I told solicitor, I can't face it.'

> 'It was scary before you go in and then afterwards. I picked up a glass of water in the middle and I chucked it over social worker. She wasn't happy at all. The judge didn't say nowt.'

> 'I've told my solicitor that when he goes to court there's no way I can go as it's going to affect me too much. He said, well, you're going to have to go to put your point of view, but they're only going to let them take the little'un away so what's the point of going. I can't go through all the agony and the pain any more.'

Most parents had little idea of what to expect in court so their anxiety was fuelled by fear of the unknown:

> 'It was my first time in court and I felt weird, like it wasn't me there.'

> 'I thought someone would be telling us off.'

> 'I'd never been in court before so when I saw these people I thought, uh oh.'

> 'I didn't know what was going to happen.'

Many admitted to having difficulty understanding what was going on in court and what was being said:

> 'The judge asked me [if I understood] and I said yes. Some of it I didn't. He said put your hand up if you don't understand.'

> ‘We look at each other and say, what was that? Can you explain that in English? I couldn’t take in what was happening. It’s a different language an’ all. It was mumbo jumbo to me.’

Most of those who said they did understand looked to their solicitor or advocate to explain matters to them.

The majority of parents were confined to the role of spectator in the final act of the drama that settled the future of their children. Few (3) were invited to give evidence. Many would not have felt able to stand up in front of the court but in most cases it was clear that their solicitors believed they would not assist their case by doing so and read out their statement instead (‘...we couldn’t say anything, could we Kevin?’). As Mary Wenlock explained:

> ‘They asked me if I’d go in the witness box and I said yes. I’d do owt for my boys to keep them at home. But me solicitor said, if you get in that witness box the barristers will ask you a lot of questions and keep twisting it and twisting it until they get what they want.’

Jayne Spooner learned the truth of this warning:

> ‘I had to go up on stand. The judge wanted to know what we wanted. I told him we wanted Allie to come home with us. But I knew in my mind he’s going to take her. They were firing questions at me left, right and centre and I was getting all confused. They tried to catch me out.’

Pitching a barrister against a person with a clinical diagnosis of learning difficulties amounts to a form of legal bullying. Such interrogation of vulnerable adults is prohibited in the police station. It should not be allowed in the Family Courts. Parents should be enabled to speak up for themselves without having to risk humiliation by counsel making hay at the expense of their disability.

None of the parents we interviewed voiced any overt complaints about their treatment in court. None demurred at the way the proceedings were conducted. None objected to the impenetrable language. None blamed the judges for getting it wrong. None said the law was an ass. Most were cowed by the mystery of court procedures and awed by their formality but accepted all this as part of the panoply of the legal process. Most, too, resigned themselves to the verdict of the court and accepted the outcome fatalistically. Their anger was reserved for those who had contrived to bring them to court in the first place on the basis of distorted assessments of their family history and circumstances that placed excessive weight on their failings (however minor) and gave no credit for their strengths (however great).

Other research into parental perceptions of child protection proceedings (Lindley 1994; Freeman and Hunt 1998) has detailed a litany of complaints about aspects of the court process that families found hard to accept including:

- *ill-preparedness* for what they had to go through;
- *marginalisation* in professionally dominated court hearings;
- *isolation and lack of support* in the courtroom;
- *exclusion* from the proceedings by the complexities of the legal process and legal discourse;
- *depersonalisation* by an adversarial system that does not facilitate their participation or recognise them as individuals;

- *powerlessness* in an environment that most found intimidating.

Our parents may well have harboured some of the same feelings but they did not articulate them. Perhaps they couldn't. But a close reading of their narratives suggests that most of them entered court in a spirit of resignation. Some, of course, were keenly aware of having already been down the same road before. Others were daunted by the power of the system they were up against and, like Erica and Kev, made to feel they 'couldn't do nothing'. Generally, though, most parents we talked to went into court believing that the outcome had already been determined. Hilary Post put these suspicions into words when she said, '..what's the point when they've already decided what they're doing.'

The Aftermath

The conclusion of the court proceedings did not end the families' trials. Only three of the parents we interviewed had not lost children to the looked-after system. Among the others just one mother, whose son had been adopted, accepted that 'he's better off where he is.... They're giving Gary the start in life I didn't have.' She alone among the parents who had to give up a child submitted to the court's decision with a sense of 'relief that it was all over', feeling she 'could finally put it behind me.' All the rest were still tormented by their loss.

Our brief was to talk to the parents about their experience of care proceedings. It soon became apparent that these events were not history; something to look back on in the past. The proceedings still preoccupied their present and marred their future, like a prison sentence as Annie Collier put it. Her older boy was placed in long term foster care but her youngest had been adopted:

> 'I would wait for Simon and Billy. It's not long now for Simon cos he's fourteen in May. But I know it's still a long time for [eight year old] Billy and sometimes, with Billy being away all that time, it reminds me of being in prison, All this time that Billy is away it's like being like someone in prison. it feels like both of us sometimes.'

For these parents, the hurt has not eased nor will their grief abate. However long ago it was since their case was heard, talking about it invoked a story in the here-and-now. The impact of the proceedings continued to ripple through their lives. A full appreciation of what being caught up in the child protection system meant to the parents entails understanding something of the emotional and practical aftershocks they suffered.

A quarter of the parents we talked to voluntarily mentioned that they had been or were going to be sterilised as a direct result of having been through care proceedings. There may have been others who said nothing. It is not possible to tell how far these decisions were taken on health grounds, under the press of professional 'advice' or from a consuming desire to avoid having to face the same trauma of loss with yet another child: all three considerations played a part with Sally:

> 'Our Annie was a month early. She weighed two pounds of sugar. I had a caesarean. My heart stopped twice with our Annie. And he said if I had another child it'd be caesarean again. I said I want to be sterilised. Social worker says get done, get sterilised. Doctor says, are you sure she said that to you? Yes, cos they can take it away

> again, just like that, again. I said to doctor, I have to do what social worker tells me. She told me, get yourself done before it gets too late. I'm not going to court again, not going to go to court. All that upset.'

Some parents were driven by depression and despair to thoughts of suicide or acts of self-harm:

> 'It's something on your mind all the time. When I had a contact with Micky and I took them tablets, this lady I went to see said it's like anxiety or something. She said, Katy, you're thinking too much, you've so much on your mind. Well, I've had thoughts in me head, duck, when I've got depression and I've seen two CPNs and I don't need one. There's nowt wrong with me. But these thoughts I've had in me head, duck, when I've had depression, it makes me feel I want to smash all me head in, when I've got it right bad.'

> '...it's really stressed me out and it's really got to me, what they've done. I can't take it anymore and that's why I was going to do last night what I was going to do...those tablets'.

> 'When they said he was going up for adoption I were like doing silly things to myself. I was scratching me arm. Usually if I'm right upset I do my arm right bad. I did it for weeks. I was right down. I used to sit in room and get upset at night and then I used to do it. My sister saw it. She used to say, silly Anne, don't do it.'

> 'I was in and out of hospital, in and out. I had a nervous breakdown when Alison went. According to me husband and me sister I might have one again. I said, how can you tell? She says, it's because I've

> got sad eyes all the time and you've not got no children at all. It's getting me down at home about it. Since our Dean went I can't stop crying every single night. Since he went I can't stop crying.'
>
> 'I said to me mum, nobody knows what's happening, you all think I'm all right here but I'm getting chewed up slowly. Me mum's come to live with me because she's thinks I'll do something stupid.'
>
> 'I don't care about myself. I don't bother about house. Very tearful. I get depression. I had to go last week to get me tablets sorted out, go to me doctor's. He knows how I am. The doctor actually put his arm round me and said, "I'm sorry" '.

Most parents continued to fret and worry about their children. The cross they had to bear was knowing their children were out there somewhere but not knowing whether they were well cared for, happy and safe:

> 'One time on contact he had bruises all over him. They said he'd been pushed. I said, wait a minute, has he been pushed at school? They said yes. He'd said, "Want toilet, want toilet" and we went and I checked him. I always checked him on contact, make sure there's no bruises or owt. I said to [social worker], what's my son doing with all bruises on him? I said, that's disgusting. My children have never been like that. She said he'd been in a fight at school. They'd took his tooth out at front. I were mad. I was really, really mad. I says, I can't go to school and stick up for him. Know what I mean? It's not my place. It's them who has him, it's their place now. She said don't shout at me, she said. I said I've got to shout at you, I said whose fault is it if he gets bloody hurt?'

‘With Roger, when he moved to his second placement – first placement were all right – then second placement I got to know about, they weren’t buying him clothes or looking after him right, and that’s why he moved again.’

‘When we saw him at Christmas he was a right tramp. I said, he can’t wear that old coat, walk about like a tramp. I bought him a new coat, new jumper, new trousers. And he’s getting hit by other children. He wouldn’t settle or nothing. That’s why they moved him. I said I can’t handle it. If he gets hurt who’ll get blame for it? Know what I mean love? I’m not getting blame for it. He’s with foster mother now.’

‘The last contact I had with Chrissy I found a mark on her. On her forehead. They asked me if I’d marked her and I said no, I haven’t, I found the mark. I said, look there’s a mark there and she [social worker] said, oh I’ll report it, I’ll inspection into it and see what happened.’

‘Anna’s got pushed around from pillar to post. They moved her to Westbury, then from Westbury to…this other foster woman and we met her and she said, your daughter’s a bad tempered little…When they move her from one to another she’ll be confused. She’s been to four places. She’s with a Dean and Mary at the moment. When our Clare was adopted she was abused by foster carer. They didn’t tell me for a week. I said you’re supposed to protect my kid. Now Dean and Mary, they’ve been monitored for three months. They said they didn’t want to meet us. They said they didn’t want to meet the parents.’

> ‘I think you’re always worried anyway when they go into foster care, thinking are they all right, and we don’t know the foster parents, who he’s with, stuff like that. Wondering if he’ll settle, and I know he won’t because I’d been used to having him all the time around with me. Sometimes you hear about these kids going with foster parents and you hear these kids being ill-treated.’

> ‘It’s like when we had contact with her at Brownsides, when she used to come from foster parents, they used to fetch nappies and food and that, and we had this ginger haired bloke from social services. If I had to change her, he’d come with us. We took her nappy off and the bloke said, what the dickens! All her backside was completely red raw. She was completely sore. So what happened I don’t know. I had to cover her with cream. So they couldn’t have been changing her nappy or anything. She can’t have been looked after. Plus she was in raggy clothes. I give them loads of clothes and they didn’t put them on her. I said to social worker, look, my daughter’s looking like a dosser to me.’

As the quotations illustrate, these worries were not confined to parents who had lost all contact with their children. Even those who were still allowed visits remained anxious about their children’s welfare while in the care of people they knew could not love them as much as they did. The visits provided a measure of reassurance but also brought with them the pain of repeated partings, with each goodbye bringing yet another broken heart:

> ‘I used to go up and see Avril but I haven’t been up for a bit. Too upsetting. I found it too difficult. Coming home as well. Some days I felt like taking her home. Taking her myself.’

‘I look forward to seeing him all the time. And I don’t like coming home, I don’t like leaving him. He cried. He wanted to come home. He said I want to be with you and me dad.’

‘He’s been moved five times altogether. And that’s a lot for me that. He’s been confused all the time. He says I want to come home, I want to be with you mum. It’s hard. I say, not until you’re eighteen. It upsets me. He cries. And I cry you see.’

‘Twice a week when I went to this sort of room in Sheffield where there was a little play area, and there was all social workers around, and secretaries, you know, keeping an eye on you. I couldn’t put up with everyone watching every move you made and playing with them, watching you feed the kids. I couldn’t put up with it.......The kids were playing up quite a lot cos they knew in a way, even though they were only three and four, they knew something were going off and they were getting really stressed out and getting really upset. They were playing up all the time and flinging their arms round me and saying, mummy, I don’t want you to go. And with me being upset I didn’t realise it was affecting kids, and with kids being upset I just walked out. I think they’re still trying to figure out from that day ‘till now why aren’t we with mummy. Cos at the end of the day, it’s not just us what’s getting hurt, it’s the kids what’s getting hurt and it’s them what’s suffering.’

‘When I first had contact with him it was at social services. I was upset about that cos I could only see him for an hour, once a week.

> That was quite hurtful as well. It's hurtful for anybody until the day you get your child back.'

Parents' anguish was continually refuelled by everyday events that reminded them of their children and bore out their deep-seated feelings of having been treated unfairly:

> 'To me the judge isn't doing his job right, he's just letting the social workers take the kids away from mums. And then, when I'm going into town, or waiting for a bus, all I see is kids getting brayed everywhere I walk. And I'm thinking to myself, I'm not even given the chance to look after my kids and there's parents what's getting away with doing this and that to their kids and it's just not on.'

> 'The first foster carer had some problems with Micky and he used to run away. She couldn't cope. I says they took my kids off me cos I couldn't cope. Now foster carer couldn't cope. What makes me mad is that some parents have got their children in foster care and they can see them anytime they want now even if the children are in homes. They can see them on a weekend. I did once ask but they said it's different for you Annie. I still think it's unfair and I'm going to tell them.'

> 'I've still got carrycot in kitchen, I've got bath in lobby, and buggy. Me cousin had a little boy in August and she had all clothes. Guardian told me social services shouldn't have told me to go out with maternity benefit and buy everything for babbie. They told me the week before I had her that if I bought everything I'd have a good chance of keeping her.'

> ‘I found out from social services, and my solicitor told me as well, that foster carers bought him a brand new bike for Christmas and he had an accident. He got knocked off his bike and had his legs broken. He had to go to hospital and have them re-set. But what gets me is that if that’d been when he was in our care there would have been a big stink.’

One particular cause of anger and upset for parents was the repeated failure of the authorities to ensure they received an annual photograph of their children when they were entitled to one:

> ‘I was supposed to be having photos and letters once every year and I haven’t been getting them since they went for adoption. And it’s just not on. Every time I keep chasing it up, Tom O’Connor, the one who’s dealing with the adoption part, he just keeps fobbing me off with some excuse all the time. He’s not been honest with me over the kids cos I haven’t heard nothing from them. It’s all right for them to do what they do, taking the kids, and then they’re fobbing me off, and saying I’m getting this once every year and I’ve been getting nothing.’

> ‘I sent her a letter, I think it were last year, July last year, and every September, every year, we’re supposed to get a letter to say how she’s been, but we haven’t had it. They haven’t been in touch with us. Adoptive parents say, oh, she’s not interested. I’m supposed to get a photo and a letter every year of Chrissy, but I haven’t got no photo nor nothing.’

> 'Basically, at the moment, I'm fed up because I'm not getting any photos off them of my daughter, of our daughter.'

What rankled with many parents was the feeling that the authorities didn't play straight: 'They've not gone by the rules, or by the book.' Where agencies blithely ignored their obligations regarding parents' court-ordered rights to contact, without fear of any come-back or penalty, the parents themselves were subjected to what they saw as petty restrictions on pain of having what contact they had withdrawn:

> 'Contact starts at half past four while about six. They said, you don't swear in front of them. I always take spice for them and once social worker said, oh, they can't have spice. You get some nice social workers and some flipping funny ones.'

> 'My mother's deaf and she has learning difficulties a bit. I asked if she could see Simon again after me dad died and the social worker said the reason why Simon can't see your mother yet, Annie, is because she's just lost her husband and she might talk about her husband to Simon and Simon might be upset. And I had to explain to me mother. I said, mother, you can't see Simon yet.....I couldn't say nowt to Simon in front of them cos they said, be careful what you say to him, Annie, about this and that and t'other. And what it were, they say I've been talking to Simon about his father, and he's been getting all upset and everything, but it was Simon always asking me as well, "Have you seen me dad, mam?". '

> 'Yes, I still see Clare. The foster parents bring her down every six weeks or so. We're not allowed to ask her about our [adopted] son

> Mark. But I do ask her. I just say, have you seen him and is he all right.'

It is through exchanges such as these that parents are forced to face up to their changed status and the fact that their relationship with their children is no longer what it was. In no way is this made more painfully clear to them than having to give up calling themselves mum and dad:

> 'I sent her a card on her third birthday and I put, to Chrissy, happy birthday, love from Dianne. I couldn't put mum. Our Lesley says, just put love from mum, cos that's what you are. I said, yes, but they don't see it like that. I think it's all wrong.'

> 'My face-to-face contact's stopped but there's a letterbox system where I can send letters and cards. But what do I put on a card if I send one? They said, oh, you'll have to put Sally on it, not mummy. But that's going to be hard for me, really hard.'

Reconciling the immutable facts of biology with the loss of parental responsibilities presents a crisis of identity that few people negotiate successfully. As Julie Burnley said of her adopted son, 'He knows I'm his mam, his first mam.' Most parents opted to live with the ambiguities and wait for time to resolve them:

> 'I'm just waiting. I'm going to wait till he knocks on the door. You see, if I have him back I'll be a family, a proper family.'

> ‘But when he’s older it’s not up to us two, or Social, it’s up to Damien to decide.’

> ‘He [husband] had a dream about Amy and she came looking for us and she were pregnant. And that’s going to come true. I hope it does come true. Some dreams can come true.’

In the meantime, they resigned themselves to a kind of nether role of parents-in-suspense.

Involvement in care proceedings also affected parents’ relationships with each other (or their partner), their other children, their family and their neighbours:

> ‘With his dad being a Section 1 offender, I had a choice: either have the baby, and kept the baby but got rid of the father or have the baby, keep the father and lose the baby. I decided in the end the baby was more saving than what the relationship was.’

> ‘Peter’s a Schedule 1 sex offender. He’s trying to prove it’s wrong. They said you have two choices, which one will you make. I said I’d give up the bairn and I’d stop with Peter. I couldn’t cope with a bairn anyway on my own.’

> ‘My wife gets that depression a lot, and she takes tablets. She shouts at kids, nothing bad like, she’d been shouting, and she’d been spending money and this had been going on for so long. Social services gave me a choice. If I left the wife I could keep the kids. You see I had no choice. They wanted me to pick the kids up from school without the

wife knowing. But I wouldn't do it, know what I mean? So we finished up for us to go to court. Social worker found me house and we came here. The wife sees them every two week but she sees them at social services. I could see her in town but if I took the kids they'd take them off me. I asked them about if I bump into her and they said, oh, it's all right but I haven't to stop long. She asked me to go back to her, but I can't go back. They'd take them off me, like. I think really they ought to give her another chance. She said if we got back together again, she said she'd change. It affected me health leaving her, it did aye. I didn't like doing it but I had no choice. What could I do? You know, we'd been together about ten years.'

'Top boss at social services has told me I can't take children to see my sister. I can go but kids can't. What it is, there's an old gas cooker in her kitchen what don't work, and she's got car wheels in there near the door, and she's got a Alsatian dog there. They say house isn't safe. Social services wanted to check it out but family refused. They wanted to check me mum and dad's too. They came down one day and me dad told them to go. He said, you're not checking my house.'

'We had to get smoke alarms, and plug covers, and we had to get cupboard locks. All out of our own expense, no assistance from social services. They told us we had to have these things. It was on Care Plan. We've had to sign agreement. My particular agreement is that I'm in house for a certain time. Basically it's most of the day. I can't even get a part time job. And Mary's agreement was that she stopped going to her sister's every day of the week. She goes two or three times a week. But it was an insistence, if you know what I mean.'

> ‘I look at kids’ photos. I says to me dad, I can’t tell people about having me children took off me, and he says, Rosie, tell ‘em. I says, no, cos they’ll start laughing at me.’

For the parents, these reordered relationships were an embodiment of the guilt and anger left by the proceedings and of the fact that, as parents, they had been marked down as failures.

Most parents seemed genuinely bewildered by what had befallen them. For the most part, they had not harmed their children. Their love for them was manifest and real. The character of their lives and the condition of their homes were little different to those of their neighbours. Few really understood why they had ended up in court and why their children had been taken away and, listening to their stories, it is impossible not to share some of their puzzlement. Many accepted they needed some support but few were offered it. Many were probably more honest than was good for them, reporting minor accidents and incidents that other families would not have thought to disclose. And just as children with special needs are vulnerable to bullying by their peers so too are these parents often subject to malicious reporting by their neighbours to social services. For both these reasons, the parents were more likely to come under professional surveillance, and professionals trained to look for problems can usually find them. The parents’ stories had a kind of inevitable momentum about them, driven less by what was happening in their lives than by the dynamics of the process in which they had become entrapped. It is this that accounts for the apparent gulf between the general ordinariness of the family’s troubles and the pathos of the final outcome.

LEGAL OPINION

This section presents findings drawn from our interviews with family court welfare officers, solicitors, local authority legal advisers, barristers and judges. For ease and simplicity we shall refer to this group collectively as legal respondents. These interviews were issue-oriented rather than case-related: they were planned and conducted as open-ended discussions on matters bearing on the workings of the law and the family courts in cases involving parents with learning difficulties and their children.

Case Numbers

Almost none of the legal respondents we talked to were surprised by the proportion (15%) of cases involving parents with learning difficulties coming before the family courts:

> 'It doesn't [come as a surprise] really. If you're going to be taking care proceedings it's going to be because the parent has, in a crude sense, some kind of inadequacy. The reality is that people who have a high level of functioning are far less likely to need state intervention to give a helping hand or to ensure that children are protected from inadequate parenting.' *(LA solicitor)*

> 'No, it wouldn't surprise me; there are a substantial number of people with learning difficulties. But, of course, there are also a substantial number of people who are borderline learning difficulties, who psychologists would say have not got that diagnosis, but for me and many other practitioners, would say they had clear difficulties understanding what's going on, not just reading and writing, but they

> had difficulty understanding the paperwork, the documentation, the procedure, the process.' *(Solicitor)*

> 'Not at all. I suppose they would largely be the neglect cases. I would imagine there are a lot of learning disabled mothers who can't protect them from violent partners. No, it doesn't surprise me.' *(Barrister)*

Indeed, many were 'surprised it's so small actually':

> 'I would have expected it to be higher. Learning difficulties is the one that is more problematic for parenting so I would have expected it to be higher for that reason.' *(Judge)*

> 'If anything I'd say it was a bit lower than I'd expect on the basis of my own portfolio of clients.' *(Solicitor)*

To the extent that anyone did find the figure surprising it was because so many parents with learning difficulties were actually identified in the court files: although solicitors recognised them among their clients they felt their learning difficulties were often not addressed in the care proceedings:

> 'Well, the sixteen percent that are actually identified is quite a surprise. Sixteen percent in itself isn't surprising; I would think probably sixteen to twenty percent of my clients have learning disabilities. [But} the judges are really only concerned with the welfare of the child; they are concerned with what the local authority's care plan and plans for the child are going to be. I am sure on that basis the issues surrounding the parents get left behind or missed out.' *(LA solicitor)*

> 'I don't think I've seen it highlighted in the documentation which I've read. The background is given of the child, and if the child has learning difficulties then that would be made clear, but I don't recollect often seeing anything to indicate that either of the parents had.' *(Judge)*

Two main reasons emerged why the figure was not found to be exceptionable:

> First, because people felt it mirrored or even underestimated the proportion of parents with learning difficulties among their own clients: 'Well, if you're thinking in the IQ range 70-75 and below I suspect I've at least that proportion of clients in that category – probably more.' It is possible, however, that our respondents were confusing learning difficulties with low IQ, literacy problems or a general slowness and not appreciating its specific nature as a clinical condition manifested during the development period involving an intellectual impairment combined with problems of adaptive behaviour.
>
> Second, because parents with learning difficulties constitute a vulnerable group in society who more likely to come to the attention of the child protection services because of their lack of parenting skills and social competence: 'They are prone to being investigated: they have a lot of contact with professionals and they come under scrutiny.'

If the incidence of learning difficulties cases in the family courts matched our respondents' expectations then the outcomes too were seen as predictable. Presented with the finding that only ten percent of the children in these cases were returned home to live with their families, most respondents were unabashed: 'Really, that many? That's good, I think. My impression is that they don't or can't be returned home.' *(Judge)*

> ‘The court is looking at them and thinking they’re not up to the task of parenting so the sooner we find a permanent home for the children the better it’ll be for them.’ *(Solicitor)*

> ‘I would expect that kind of thing. The prognosis for any parent with learning difficulties coming into the court system is poor’. *(Solicitor)*

Four principal reasons were put forward to explain why so few children were rehabilitated with their parents: severity, time scales, resources and needs.

Severity

Respondents suggested that only the serious cases get to court so inevitably the likelihood of rehabilitation is slim:

> ‘I suspect what you’d find is that whenever care proceedings are started, there’s frankly a long chance of rehabilitation taking place. There are forces at work that stop too many care proceedings being brought. These are two-fold. There’s resources, and the fact that social services haven’t got time to take speculative cases to court, and also the fact that under the Children Act you should try and support the families with their children in any event and you should only go to court if necessary. Things have got to be fairly bad before you go into court.’ *(LA solicitor)*

> ‘By the time a case has got to court things are really quite bad. We have to remember that the cases that actually get into court are pretty bad. The ones that are going to work and where the children are going back home tend to really have happened before.’ *(Barrister)*

Time Scales

The focus of the court is on the welfare of the child and, generally speaking it was said, parents with learning difficulties are less likely than most other parents to be able to change their ways in time to meet the developing child's needs. Furthermore, the courts are under pressure to avoid unnecessary delays in finding a permanent placement for a child and parents' slower rate of learning increases the risks of children being 'damaged further in the process':

> 'If you've got parents with that type of difficulty, if there is any therapy or counselling that's going to assist them, it's generally going to take that much longer than it might do with people who are not in that category. Of course you've got to look at the whole issue of delay when you're looking at children and clearly you've got to try and avoid delay if you can. You're there in these proceedings to look at the children and look at the interests of the child rather than feeling sorry for a parent, thinking they might be having a raw deal. It's the focus; the focus is on the children rather than the parents.' *(Judge)*

> 'The courts have as a bottom line that delay is prejudicial to the child.' *(Solicitor)*

> 'I suspect that the learning difficulty parents tend to fall in the neglect category rather than the injury category and on time scales they will struggle because the work that's required is often found to be outside the time scales of the child.' *(Barrister)*

> 'If those parents aren't able to care within a time scale appropriate for a child then it's right that they don't care for that child.' *(LA solicitor)*

> ‘I think the children are always being put first and I think the difficulty is that nine times out of ten the parents can’t address their own difficulties within the time scale that is required for the children. And if that’s the case the children have to be put first. You can’t have care proceedings dragging on for years, or you shouldn’t. The overriding concern is to avoid delay.’ *(Barrister)*

> ‘You often hear it said, especially by judges, that the parents’ timescale isn’t the same as that of the children: that while the parents might be able to improve their parenting in time, the children might not be able to wait that long because their needs are changing at a faster rate than the parents can learn.’ *(Solicitor)*

Resources

A lack of family supports and a lack of commitment to working with these families was also cited as a reason for parenting failure and the removal of children:

> ‘I think there’s perhaps not much commitment to working with people and, of course, as far as the local authority’s concerned, it’s a big investment, if they have parents with learning difficulties, to work long enough and intensively enough for the child to be rehabilitated.’
> *(Solicitor)*

> ‘[There’s a] lack of facilities, really, to help learning disabled parents. I think it takes such a high level of input from social services that effectively they’re not supporting the child so much as supporting the parents. I think if the outcome can be, well, let’s find this child a new family, I would think that’s quite an attractive proposition from the local authority’s point of view. From my experience, if the reality in

> [the child] going back to the parents involves the support of both parents as well as any support the child might need, they don't tend to work with that, perhaps because it's expensive.' *(Barrister)*
>
> 'It's the, I suppose, lack of preventative support resources on offer to people with learning difficulties. I think that if there was more of a supportive package, I can't see why they can't be parented by their own parents.' *(Solicitor)*
>
> 'I suspect there is an element of resource issue and they're just not bringing the resources to support these people in the way that they would have to be to enable the child to go back.' *(Barrister)*
>
> 'The local authority aren't doing enough to work with parents with learning difficulties to try and improve their situation. There certainly aren't enough specialist people who can work with parents with learning difficulties.' *(Solicitor)*

Needs

A final reason given for the high proportion of cases resulting in children being removed is because the parents' needs are too great rather than supports being too scarce:

> 'It's often thought not appropriate to support them, even if the resources were there, because if they did have the kind of twenty-four hour support that sometimes is suggested they would benefit from, then they wouldn't be parenting the child, and that's seen often as a negative as well.' *(Solicitor)*

> ‘Their problems are more intractable than others and less susceptible to intervention that achieves change. My view is that the cases get to court, the problem is intractable, it’s incapable of remedy, therefore free the children for adoption.’ *(LA solicitor)*

> ‘They really are dependent on professionals and I think you will find that if you are looking at any South Yorkshire social services they will tell you that they haven’t got the resources to put in, either social workers or just carers, for the amount of hours, every single week and every single day, that some of these parents need. There isn’t the money for resources that these parents need every day.’ *(Judge)*

When asked what should be made of the fact that a significantly higher proportion (42%) of children of parents with learning difficulties were freed for adoption, our respondents put forward five main factors that influenced the outcome for this group of parents:

Lack of the capacity for change

Parents were believed to be either unable to learn new skills or unable to learn them quickly enough to meet the time scales of the child; either way it was felt they could not satisfy the professional concerns that had prompted proceedings in the first place

> ‘It depends how people look at someone with learning difficulties; it’s something from which you don’t recover.’ *(Judge)*

> ‘The difficulties which they present are the sort of difficulties that are not amenable to therapy of whatever sort so that it gets better within the time scales of the children. Parents with learning difficulties aren’t amenable to be made better, improved within a short period. If you’re

dealing with a child of six months old then a year's a long time in that child's life and you have them placed permanently. The parents can't manage to improve so we say, the phrase we use is, this child cannot go home within the child's time scales. A parent with learning difficulties, their difficulty is such that they won't be ready for that child within a reasonable period.' *(Judge)*

'If there's perceived to be no chance of change in the parents then children will be taken early. Capacity for change is very important.' *(Judge)*

'Cases where there is a learning difficulty are by definition more complicated than cases where there is simply a young mother who doesn't understand hygiene rules and where she can be taught about it. People who have difficulty with the learning aspect slow down the whole process and if you've got a child who's say two when proceedings started and heading towards school age by the time it's concluded then....' *(Barrister)*

'The chances of them being able to learn how to parent a child sufficient to meet its needs are remote and will take years and years.' *(LA solicitor)*

'When they do the assessments in any proceedings, there is always going to be some focus on whether they have got the capacity to change. With learning difficulties, the issue would be have they got the capacity to change and to sustain that.' *(Solicitor)*

Pressures for permanency

The family courts are under pressure to avoid unnecessary delays in finding a permanent placement for children; as one solicitor put it, ‘from day one, permanency is on the agenda’. It is easier to find adoptive parents for younger children. Rather than risk delays that might prejudice a child’s future placement the courts generally opt for early adoption (Hunt and Macleod 1999). Parents with learning difficulties tend to be identified early: ‘It’s a tick list issue if a parent has learning difficulties; it’s picked up right at the beginning’ (LA solicitor). So their children tend to be younger when they come before the court. From this point of view, the higher rates of adoption among this group of children are partly a function of their age.

Lack of insight

Parents with learning difficulties, it was suggested, frequently failed to understand the nature of the concerns that professionals held about their children and their parenting or refused to acknowledge that there were any problems needing to be addressed. A common example was the mother who continued to associate with a boyfriend who had a Schedule 1 conviction. Because it is not possible to establish a working partnership to improve the situation with parents who persist in denying there is a problem, the chances of rehabilitation are reduced accordingly and the likelihood of a permanent placement outside the family being sought is increased.

> ‘I think my approach would be to say, in most cases, if you want to get your children back you’re going to have to cooperate with social services, understand what they see as the problems and what the Guardian might see as the problems and see if you can work with those problems.’ *(Solicitor)*

> ‘One of the crucial things working against these parents is that often there is no insight; no insight into their need to change or why there are concerns about their parenting. There’s also often an aggression towards the workers who are there to effect change, not those giving support but those who are there to bring about change.’ *(Judge)*

> ‘Lack of cooperation certainly works against parents and I think, I’m sure, some of it’s related to the fact that they don’t understand and they don’t actually take in the seriousness of the situation and what they’re doing wrong. In other words, they can’t understand the local authority’s concerns.’ *(Solicitor)*

Parental non-compliance

Parents whose past history indicates failure to accept professional supervision and guidance, or to cooperate with the services and comply with their efforts to improve their parenting, or antagonism towards outside intervention in the family are seen as a poor bet in the rehabilitation stakes.

> ‘It [the proportion of children freed for adoption] says something about the parents’ ability to engage with the whole process. Social services are very demanding. If the parents do not engage, then that’s it. One of the constant criticisms you see in reports is that mother wouldn’t cooperate or father wouldn’t cooperate, and that’s a big deal, and a history of non-cooperation with health visitors and all that, the whole panoply, is always put down as being indicative of possible harm. So I would imagine that these parents might find it harder to cooperate than others.’ *(Judge)*

> 'I'd say any of my clients who are perceived as non-compliant get the same ordeal from social services. There is a line with very little movement and they [parents with learning difficulties] can be very disconcerting to work with for somebody not able to empathise.' *(Barrister)*

> 'One of the things that characterises parents with learning difficulties is an aggressive approach, an inflexibility.' *(Judge)*

> 'You get more through these cases by trying to work with social workers.' *(Solicitor)*

> 'You have to get them to try and cooperate as fully as possible with social services because sometimes that is the hindrance to parents; sometimes they are so opposed to social services and they can't cooperate or work with them. If that barrier is there, then lack of cooperation can jeopardise everything.' *(Solicitor)*

Parents present too big a risk

Parents' learning difficulties play into culturally ingrained presumptions of incompetence that tend to snuff out any confidence in their ability to cope with the demands of parenthood: as one solicitor said, 'There is a tendency to make the assumption that people functioning at that level just won't be able to hack it. And the judges and social services are both under a lot of pressure to find a permanent placement for children as soon as possible, while they're still at an adoptable age, rather than have things drag on to the point where the children become harder to place.'

> 'I generally take the view that if I can keep a child with parents obviously I would do it. But you have to look at the prognosis as well,

> so you balance up all the reports and if the reports say that, yes, there's an even moneyed chance that it's going to work, and the child isn't going to be in any physical danger, then you'll give it a whirl. If the feeling is that you're going to go through all of this and, at the end of the day, the probability is that it's not going to work, then you just don't take the risk, because you end up so much further down the line and there's the possibility of further damage and there's less chance of what might be a proper placement for the child outside the family. That's the problem.' *(Judge)*

> 'You know it's terribly easy to go along with the local authority. I mean it's the easiest way through to go for adoption. It feels safe….' *(Judge)*

> 'Generally, intervention is over a long period of time, the resources are scarce and the fact is you may have a negative thought about the attachment. I don't think any of our judges would gamble on leaving a child in that situation for too long.' *(Barrister)*

Legal Representation and Legal Process

Clients with learning difficulties generally were felt to require more time from their solicitor:

> 'They need more time spent with them to explain what's going on, to ensure they grasp and appreciate both the process and the options facing them. The parents all qualify for legal aid so there's no problem about that, but in terms of money for effort these cases are the least well rewarded amongst legal aid work – and that's not lucrative at best. The difficulty is getting our claims for special payments agreed –

> payments that are made in recognition of the fact that work with these parents calls for special skills or extra time. This fact isn't always acknowledged or accepted by the judge who must approve them.'

> 'Yes, I try to spend more time and suspect ideally you would spend a lot more time, but I don't know at the end of it how much clients of mine and other clients have understood what's going on and felt that their lawyers had explained to them what's going on.'

> 'Oh yes. You have to explain things in a clearer manner to try and get things across, because I don't think there's anything more frustrating for a parent than to feel that they don't know what's going on.'

A particular challenge facing the solicitor is 'getting to know what they really want': 'There is, how shall I put it, a tendency for them to go along with what they think you want. You have to be very careful not to hold a mirror up to yourself and just get back a reflection of your own ideas. It takes time and patience.'

Solicitors liked to be involved at case conference stage if possible, even though their role in that forum is procedurally constrained:

> 'At this moment in time, you attend a case conference as a supporter and nothing more. You don't attend the conference as a legal representative and I have to say to clients that, if I attend, my role here is to advise you, to tell you what is going to happen - I can't cross-examine people, I can't ask questions, although I can perhaps speak to you if you want to ask a question. So the advantage of being at the case conference is that you're there at the grass roots level,

> you know what the local authority are intending to do or you can emphasise to your client that they must cooperate with the local authority's assessments. But you're constrained by what you can and what you can't do at a case conference.'

> 'I get involved wherever I can. It's not always possible because sometimes I don't get involved in the case until that stage has been passed. Indeed, one of the problems is that there are big differences in practice between social work teams. Some social workers will advise the parents to contact a solicitor from the start, as soon as a child protection investigation is initiated. Others don't and parents can be well down the track before we're brought in.'

Another factor working against solicitors' early involvement in cases is the parent's failure to appreciate soon enough the direction in which things are moving or to read social workers' intentions:

> 'I think the difficulty they have is actually understanding the seriousness and the serious nature of the local authority's involvement and what that means as far as their family is concerned.'

Most respondents recognised that 'the court system's difficult for any parent' and that 'all parents in proceedings face difficulties'. Having said that, however, most also felt that parents with learning difficulties faced especially acute problems in 'understanding what's going on': 'Most have difficulty and some have no idea.'

> 'I think to understand the system and participate in a court case in any sensible way you have to have a reasonably high level of intelligence. It is quite complicated, there's lots of things happening, there's lots of

> documents, the documents are not written in simple English. Anyone of average intelligence would have some difficulty. Once you have somebody with learning difficulties, I think their chance of understanding what's going on, what's being said, what the issues are, is often extremely poor.'
>
> 'I suppose, in court, as long as they have got an advocate and someone representing their interests, I don't believe they would be disadvantaged. But I suppose whilst a hearing is ongoing they are not going to have someone sat, as you would if you couldn't speak English, as an interpreter, giving a verbatim explanation of the tactical questions and what's been put across. They are not going to understand all the jargon and what angle this particular person is coming from, so I suppose that is just going to wash over them.'

As one respondent emphasised, however, 'it's not just about understanding the documents'. It is also about whether the parents can comprehend 'what the social services concerns are' and what they have to do 'to deal with those concerns if they are about their parenting or their background'. The failure to translate these professional concerns into terms the parents can understand encourages the view that they lack insight and hence the capacity to change. In other words, parents' supposed inability to change, an assessment that can have a profound effect on the outcome of their case, might be an artefact of the professionals' ineffectiveness in expressing their concerns in a language the parents can understand. As one judge commented: 'There is a whole social services speak; they have a way of talking which bears no relation to the way normal people talk and I can imagine they [parents] just hear this and think, what on earth are they on about. Then they just close down.'

Solicitors generally think twice about asking a parent with learning difficulties to take the stand, preferring mostly to read out a parent's written statement instead:

> 'If it was a client who may not do themselves any favours giving evidence then I would probably advise them that matters should be dealt with on submission rather than them distress themselves or get into an argument with the local authority about what happened here and what happened there.'

Again the issue boils down to one of comprehension: people who lack the skills of verbal reasoning and, often, a grasp of time and dates can become flustered and frustrated under questioning:

> 'It's very, very difficult in neglect cases to be cross-examined in each and every incident. If you're facing a barrage of criticisms about your day-to-day parenting which has gone on over four to five years, then it can be quite an ordeal.'

The danger then is that they lose patience and become aggressive, so creating a bad impression before the court:

> 'Some get angry, they are not able to control their anger, they can't express themselves verbally, whereas if you put their words into black and white their position comes across much clearer than it would do if they were stood giving oral evidence.'

Where a court allows an expert witness to be appointed to provide independent testimony it will generally be on the basis of jointly agreed instruction. Our legal respondents expressed a number of observations about the expert witness system:

- ‘Judges now aren’t keen on independent experts’: a view affirmed by a judge who commented, “You can have over-use of experts so you’ve got to draw a line.’ Getting approval for an expert witness to assess general parenting skills (as opposed to providing clinical evidence in non-accidental injury cases) can be problematic. Many judges are inclined to the view that ‘parenting assessments are the realm of the social worker’ and to ask ‘Why do we need another professional?’ Such a stance privileges the social worker’s evidence, potentially to the disadvantage of the parents.

- ‘The experts that tend to be used are ones who are considered acceptable by Guardians and local authorities.’ Experts who have given opinions that diverge from the local authority’s or the Guardian’s view in cases tend not to get used in the future ‘and that may create an element of unfairness’.

- ‘Time constraints may work against the parents.’ An expert may not immediately be available and the assessments can take a long time to complete. The judge may decide the court cannot wait that long in the interests of the child.

- ‘The emphasis is on avoiding delay’ rather than ensuring a well-founded assessment. The expert agreed ‘is normally the one who can do the work in the time scales of the proceedings’ whereas the better ones are usually more difficult to get hold of because they are always busy.

COMMENTARY

A recurring issue running through our respondents' accounts of the process of legal representation in family proceedings involving parents with learning difficulties relates to problems stemming from the parents' lack of comprehension.

A lack of comprehension was implicated as a reason for the parents:

- failing to appreciate the seriousness of the professional concerns about their parenting;
- failing to understand the importance of working with professionals to address their concerns;
- having difficulty in dealing with the bureaucracy of child care investigations – the paperwork, timekeeping, language and procedures;
- becoming angry and aggressive about professional surveillance and intervention in their families.

These characteristics in turn contributed to professional assessments and court perceptions of parents as lacking insight, being uncooperative and exhibiting deficits in parenting capacity.

The key point here is that all these difficulties and failings can be traced back directly to the disability – intellectual impairment – that lies behind their lack of comprehension. Yet almost no account is taken of parents' special needs for support arising from their disability during care proceedings. As one solicitor said: 'I don't think enough significance is given to the fact that learning difficulties are a disability. They mainly concentrate on the lack of cooperation from these people.' This shows most clearly in two ways:

- First, parents with learning difficulties are not routinely provided with independent advocacy support during child care investigations and assessments (a situation also highlighted in Australia – see Swain et al 2002). Indeed, as our earlier accounts of parents' experiences showed, parents may be refused permission to allow a supporter to accompany them to case conferences, reviews and such meetings. People who do not speak English can expect to be provided with an interpreter throughout such investigations. Parents with learning difficulties, as Sweet (1990) has pointed out, possess a different 'language of learning'. They have an equal need of someone who can translate the language of professional discourse into an idiom they can understand.

- Second, parents are not routinely offered access to independent advocacy support during court hearings. Discretion rests with the judge as to whether or not to admit an advocate/friend into the court. Parents we talked to had been forbidden from having a supporter accompany them, even though the formal layout of the courtroom often leaves the parents sitting alone, at the back, behind and separated from their solicitor. Criminal courts now provide a Witness Service offering information about court procedures as well as confidential emotional and practical support by trained volunteers to witnesses called to give evidence. The closed nature of the family courts may have worked against similar recognition of the need for parents with learning difficulties, who encounter special problems in comprehending what is going on in court, to be supported before, during and after hearings, but it should not be used as an excuse for continuing to disregard their disability.

The failure to properly address the effects of a parent's disability undoubtedly disadvantages mothers and fathers with learning difficulties by setting up extra barriers to their participation in proceedings and to them receiving a fair hearing. It leads to them being treated even less favourably than other parents (who themselves widely experience proceedings as ‘intimidating, disabling and depersonalising’ (Hunt et al. 1999)) and so meets the test of discrimination embodied in the Disability Discrimination Act 1995.

Learning Difficulties, the Threshold Criteria and Support

Parents with learning difficulties enter court with a label that carries a ready-made reputation for inaptitude. The diagnosis of learning difficulties requires the presence of *impaired intelligence* (a significantly reduced ability to understand new or complex information or to learn new skills) together with *impaired social functioning* (a reduced ability to cope independently) which started before adulthood and had a lasting effect on development (Department of Health 2001). Moreover, as a marginalized group in society, people with learning difficulties share a long history of stigma and oppression built on culturally ingrained notions of the simpleton or ‘permanent child’ (Wolfensberger 1970).

The threshold criteria for intervention under the Children Act require that a court be satisfied that a child is suffering or is likely to suffer significant harm as a result of his or her care not being what it would be reasonable to expect a parent to give. Such a judgement is determined in the light of the evidence on the balance of probabilities.

Put these two points together and the question arises of whether parents with learning difficulties meet with a presumption of incompetence that too easily leads to them failing the welfare test or, put another way, whether professionals and the courts are too easily led to the conclusion that their children are likely to suffer developmental harm as a result of their reduced ability to cope. In short, do the threshold criteria provide enough protection against unwarranted intervention in families headed by a parent or parents with learning difficulties?

In putting this question to our legal respondents there was an interesting division of opinion between judges and barristers and local authority solicitors on one side and the solicitors who represented parents on the other.

The judges and barristers were of one mind in saying they had no problems with applying the threshold criteria and no reservations about the standards they embodied:

> 'The approved standard is very clearly directed by the House of Lords as to what it means. And I don't think any of us have any difficulty applying it. I don't think we've found a case where we've felt uncomfortable about the standard.' *(Judge)*

> 'I don't think they are placed in any more of a disadvantage, or given any more of an advantage, than people who don't have any learning difficulties.' *(Judge)*

> 'I have no problems with the threshold criteria.'*(Judge)*

> 'The threshold test per se I don't have a difficulty with because if it's more stringent there's a real concern that the local authority will fail to intervene even more than they are failing at the moment, and you get them six to ten years down the line and that would be horrendous.' *(Barrister)*

> ‘But the test is on good-enough parenting, not great care. I start by wanting the child to stop with the family. Every judge wants that. It’s the whole spirit of the Children Act. So I know that they start with a down side. So I’m looking at all the support we can put in there to help them improve themselves and to help them improve the way they look after the children and see if, with that support, they can make it.’ *(Judge)*

By contrast, the solicitors were more equivocal in their views:

> ‘Yes, it seems to be that legally they [the threshold standards] are very low and significant harm seems to be treated as a very low level.’
>
> ‘There is a case to be made that the bar is set too low at the moment.’
>
> ‘Well, they only have to have reasonable belief at the commencement to feel that an order is warranted, so the test itself is quite low. They can then have that power to remove and make the process much more difficult, in terms of there’s not that family unit together.’

The Children Act Regulations and Guidance make it clear that children ‘should not necessarily be identified as in need because one or both parents is disabled’. The Regulations go on to emphasise that ‘the provision of services to the parent, either under adult disabled persons legislation or under 17(3) of the Act, may safeguard the welfare of the child sufficiently to enable the parents to continue looking after him at home’ (para. 2.5). We asked our legal respondents if they felt that enough consideration is given to this option. Opinions varied according to the respondent's role in the proceedings.

There was no doubting that issues of support were carefully and thoroughly weighed in the balance so far as the local authority legal advisers were concerned:

> 'The Children Act is underpinned with the consideration, "Is this really necessary? Is this the only option?" It is the local authority that has to bring the case to court and we have to satisfy the court that this is necessary and that there is no other option that meets the child's needs. Solicitors for the parents are aware that that is something which they can ask the court to consider, that we haven't satisfied the court about. The court can't tell the local authority what to put in its care plan but it can refuse to accept it. I think the courts are able to wield a tremendous amount of power in individual cases. They can't redirect the budgets of local authorities but the court can say, well, there is another option available here, you could try this placement. If that happens, and any delay in doing it is not going to ruin the chances of this child ever being brought up properly or possibly being placed in an alternative placement, the judge can say, "I'm not going to approve the care plan you've put forward because I don't think it's the right care plan for the child and we'll adjourn here until you come up with a care plan that I like". So they have a large amount of control and a large amount of ability to, not direct, but to cause the local authority to reconsider how it allocates resources in an individual case. The courts are always pretty good at forcing the local authority, or inviting the local authority, or leaning on the local authority to spend money.'

> ‘I think we always do ask the question and I think we do always scrutinise it carefully. Whether or not we can always get all the services we always want, I doubt. On those cases where children should be rehabilitated to their parents, do we find the services? I think a lot of people, particularly social workers, work very hard to make that happen.’

The judges, by contrast, were more circumspect in their opinion and less bullish about their powers:

> ‘As the Court of Appeal tells us repeatedly, we can’t force indefinite costs and expenses on local authorities. If you had the resources for it, you’d do it. You’d expect them to come along and say, yes, this can be done, we can provide this type of support for a period of twelve months or however long it is, and we’ll pick up the tabs for it. But I can’t say, you must. There was a Court of Appeal decision on it which says, much as we would like to, we can’t.’

> ‘The problem is that when they get here [into court], under the rules we can’t order any experts who are therapeutic. The rules won’t permit it; the Legal Aid Fund won’t pay for it. So time and again you would like to see therapeutic work done – for example, you’ll find certain facts against the parents and you think, right, we should do this work but where’s the money to come from? Social services can’t or won’t pay for it and the legal aid fund won’t pay for it. I can say a lot of things but I know that they [social services] will say, that’s a good idea, and write it down, but what they do when they leave the room is another matter. It’s how much money they have to do it and, with the best will in the world, I can’t order it.’

> ‘I don’t know if we’re doing enough for families. I’m not in a position to say we don’t do enough of this or that. If there was evidence that a family had not had support which should be available then I would make a finding to that effect. If one felt that here are disadvantaged parents who had not had proper support which might enable them to hang on to their child, then one would invite the local authority to look at the case again. But the courts can only work with what’s available. If parents are falling through the cracks I can’t magic up resources to fill them. In terms of there being gaps, the court can’t fill those gaps.’

Finally, the parents’ solicitors struck a more sceptical and downbeat note:

> ‘Not much consideration is given to how helping these parents might help the child. But also there is the feeling that these resources aren’t there anyway, that the parents’ need for support is likely to be long term and social services are only able at most to provide help in the short term. They soon reach the point of thinking that it would be better to find the child a permanent placement with an adoptive family than continue to have to fund expensive supports for the foreseeable future.’

> ‘I think the local authority are obviously constrained by resources as far as that [the provision of services] is concerned. I think in my experience the only time that you will ever get them to volunteer looking at specialist services to assist parents is if pressures are placed on them by legal representatives or a child’s guardian. Guardians certainly, to be fair to them, do pick up these issues.’

> ‘My experience from talking to people in the support services in [name of town] is that they don’t tend to be involved with learning difficulty

> parents. I get the impression that support isn't put in, it's not available, there isn't a resource there. I suspect there's a lot of innate prejudice against people with learning difficulties, not necessarily deliberate prejudice but I wonder how much judges and people like that are able to have any understanding of how those people are seeing things and grasping things. I think generally they get a bad deal out of the system, I would say that.'

> 'I think there should be a requirement that the local authority undertakes an assessment of the parents and the resources that might be offered to them by their own adult learning disability services before investigations start in those cases where we're talking about long term neglect, or risks of emotional harm, or where the situation isn't going to worsen in the next few weeks or even the next few months.'

COMMENTARY

The application of the threshold criteria and the provision of supports to parents are intimately connected, vitally so in the case of parents with learning difficulties whose problems in parenting can be traced back to their disability. International research has demonstrated conclusively that adequate supports protect against parenting breakdown: that the additional difficulties parents with learning difficulties encounter in providing good-enough care for their children as a result of their disability can be offset by compensatory services. Against this background, the failure to deliver support sets the family up to fail the threshold criteria. There was little indication from our interviews with legal respondents that the courts understood this crucial linkage as an issue of disability rights. Moreover, to the extent that it is picked up as an *ad hominem* matter in individual cases, the courts have no mechanism for dealing with it because, in the words of one judge, 'I can't whistle up the resources.'

The picture that emerges is one in which discriminatory incentives appear to be at work whereby cash-strapped local authorities can avoid having to commit resources to provide long-term support to parents with learning difficulties by having their children removed and placed for adoption. A solicitor put it like this: 'I think they are taking, I wouldn't like to say it's the easier option but, removing the child from the parent and placing them with someone who they can just leave them to get on with rather than offering that support, is the easier option so it is discriminatory in a sense.' This discriminatory option is eased and rationalised by the policy imperative of avoiding delay in the interests of the child in care cases, as embodied in the new Protocol for Judicial Case Management in Public Law Children Act Cases, June 2003 and the arrangements for speedier adoption introduced in the Adoption and Children Act 2002 (Booth 2003).

The evidence from our legal respondents suggests that one important reason why the courts may be disinclined to address the discriminatory incentives facing local authorities and challenge the inadequate support given to parents is a sensitivity and receptiveness to the prospects of delay: as one judge said, 'The problem that we have at this stage of the food chain is that we're a long way on. We're many, many months down the line and we're quite often faced with the problem of delay, damage to a child that might be caused by further delay with no guarantees of success within the child's time scales. Quite often we're forced to do things that we might not want to do.' The apparent tension implied here between the delivery of supports and the danger of delay points to there being a potential conflict in practice between the paramountcy principle enshrined in the Children Act – which requires that the court must put the welfare of the child first – and the now widely-accepted principle of family policy that 'supporting parents supports children'[6]. The narrow focus exclusively on the child's welfare blinkers the court to the ways in which the local authority's failure to address parents' needs (arising from their disability) impacts adversely on their parenting capacity. In this respect, the courts display the same tunnel vision which the Social Services Inspectorate found to be common among social services departments in their approach to disabled parents:

> 'The focus of staff appeared to be either on the children in the family or on the impact of the adults' disability on their personal needs. Workers rarely looked beyond this and *seldom focused on the whole family and how to support and help the parents in the discharge of their parental duties*' (Goodinge 2000 para. 1.6, italics added)

The Social Services Inspectorate argues that a 'philosophical and practical shift in the approach to working with disabled parents is required' within social services departments, underpinned by 'a recognition of the right of disabled people, within the bounds of current legislation, to be supported in fulfilling their roles and responsibilities as parents' (ibid. para. 1.7). The same 'philosophical shift' is needed in the courts if the human rights of parents with learning difficulties are to be squared with the best interests of the child in such families.

---

[6] See, for example The Home Office, *Supporting Families: A Consultation Document,* London: HMSO, 1998. Indeed, this principle is endorsed and commended in the official guidance on the new *Framework for the Assessment of Children in Need and their Families* (London: Department of Health, 2000) which advises that: 'Providing services which meet the needs of the parents is often the most effective means of promoting the welfare of children.' (p. 9)

Parents with Learning Difficulties, Care Proceedings and the Moral Matrix

We explored a number of issues with our legal respondents that were intended to open up discussion of the moral sentiments that cases involving parents with learning difficulties might lay bare in court. Most of those we talked to seemed to find it hard to engage with this line of questioning. It was almost as if they had never considered the idea that notions such as neglect or good-enough parenting or reasonable care might carry a moral loading, never mind the possibility that the label ‘learning difficulties’ might operate as a moral stigma as much as a clinical diagnosis. For most respondents, the business of the courts is the making of judgements of fact, not judgements of moral worth. The currency is always, as one put it, ‘hard facts’. Out of the adversarial clash between the local authority’s case and the parents’ case ‘the truth emerges and it’s for the judge to decide’. The two most striking characteristics of the lawyers’ responses were their deeply-held faith in due process and its facility for getting at the truth from the contested examination of the facts, and their reluctance to be seen to criticise their fellow professionals. For all these reasons, our attempt to throw some light on the hidden workings of the moral calculus in care proceedings proved more difficult than we had anticipated.

Watkins (1995) has argued that ‘presumptions of unfitness continue to subtly define the law’s approach to parents labeled mentally retarded’ in the USA. We invited our respondents to reflect on whether such a comment might equally well be made about care proceedings in the UK. A few voices conceded the possibility that having learning difficulties might sometimes be treated as prima facie evidence of parental incapacity:

> ‘Yes, you see it often, parents are written off. People respond to the evidence of IQ by saying, with that level of intellectual functioning the parent will never learn, therefore they will never change and so they will never be able to care adequately for the child. You often see it in psychologist’s reports, a straightforward link between IQ and parenting capacity. Oh yes, they talk as if there is a causal connection between IQ and parenting ability.’ *(Solicitor)*

> ‘I think there could be a tendency for that to happen. If things are done properly, then the answer is no, there shouldn’t be a temptation to say, right, learning difficulty by itself is the innate reason for making a care order. But I can see that may be a possible temptation if you’re busy in court and dealing with lots and lots of cases, not to want to enquire too deep into that.’ *(Solicitor)*

To the extent that such prejudicial thinking might infect proceedings it was mostly seen as a danger earlier in the process, before a case got to court:

> ‘Well, may be social workers might do that but as a lawyer I always have to ask what’s the evidence of harm. If you don’t have hard facts in the past then it’s unlikely you can come to a view that there’s a possibility of likely harm in the future.’ *(LA solicitor)*

> ‘If it’s general neglect, or whatever, there must have been a long trail before they bring them to court so their disability will already have put them on the wrong foot with social services before they get here.’ *(Judge)*

> ‘At the end of the day, the paperwork that has been compiled in the proceedings is all before the people dealing with the final evidence and

> the judge has it there so nothing is hidden. It is there in black and white as to what these parents' abilities are and why the local authority are pursuing the order that they are pursuing. I mean the proceedings are the last resort so if anything needs to be done, it needs to be done well before that.' *(Solicitor)*

In the forum of the court, the consensus was, any prejudice against parents because of their learning difficulties would quickly be brought out into the open and exposed for what it was: 'It couldn't secretly pervade your view' *(Judge).*

> 'Most of the judges we deal with would chuck it back at us if we said the threshold's met because of learning difficulties.' *(LA solicitor)*

> 'I'd like to think that each case is objectively looked at. The judges will give us a hard time if they don't think we're doing the right things.' *(Barrister)*

It is impossible to study the transcripts of our interviews without catching a whiff of complacency, or naivety, in these responses. The experience of racism points up the lesson that discrimination does not have to be overt to be real. Indeed, the Race Relations Act 1976 embodies a distinction between *direct discrimination* (Section 1(1)a) – treating people less favourably due to their race, colour or nationality – and *indirect discrimination* (Section 1(1)b) - applying a rule or requirement which effectively leads to less favourable conditions or treatment for a particular racial group. Our legal respondents showed little awareness of this distinction or how it might be relevant to the treatment of parents with learning difficulties in care proceedings. Their responses were generally dismissive of the idea that parents might face any direct discrimination and unmindful of how indirect discrimination might impact on the parents' case.

The research evidence highlights two phases in care proceedings where the likelihood of parents with learning difficulties meeting indirect discrimination is especially high: the assessment phase and the threshold test.

Indirect discrimination in assessments

(1) Social workers with the most expertise in learning difficulties are least likely to be involved with parents (Mandeville 1990). Most parenting assessments are undertaken by Children and Families Teams yet social workers in these teams rarely have any training or experience in working with people who have learning difficulties. The practice guidance issued with the new Assessment Framework for children and families in need (Department of Health 2000) is emphatic that 'involving both learning disability professionals and children's services right from the start is vital' (Cotson et al. 2001). Yet the Social Services Inspectorate (Goodinge 2000) has found that eligibility criteria and priority matrices often 'hindered access to services because those for adults services did not recognise the potential impact of being a parent and for children's services parental disability was not an important factor.' The result, the SSI concludes, has denied learning disabled parents 'access to specialist staff and appropriate services'. Indirect discrimination occurs in the assessment process where parents with learning difficulties have their disability underplayed at the same time as they are denied access to the specialist services it makes necessary.

(2) The important bearing that the assessment of parents' capacity to change has on decision making in care proceedings has already been

underlined. Professional opinion concurs that parents ‘are more likely to change if they receive early support services as part of the assessment process’ (Farmer and Owen 1995; Horwath and Morrison 2000). The ‘restrictive eligibility criteria’, which effectively exclude many parents with learning difficulties from access to appropriate adult disability services (Goodinge 2000), load the odds against them being positively assessed against this critical benchmark.

(3) People with learning difficulties have special learning characteristics and needs. Effective training must address their own ‘language of learning’ (Sweet 1990). Research has shown that parenting education can improve the knowledge and skills of mothers and that ‘failure to learn may also be related to inadequate training procedures’ (Tymchuk and Feldman 1991). Verbal instruction, for example, has been found to be less effective than performance-based training strategies (Tymchuk and Feldman 1991; Feldman 1994). Tried and tested methods involve task analysis, repetition, modeling, guided practice, feedback and positive reinforcement (Feldman 1994). Planning for generalisation and maintenance of learning is also crucial. Home-based programmes have proved to be by far the most successful way of delivering parenting training. Staff themselves must be well trained and experienced in learning difficulties (Tymchuk et al. 1990). Shoehorning mothers with learning difficulties alongside other parents in generic programmes that fail to match their special learning characteristics or ignore this evidence base will set them up to fail. Equally, new learning for these mothers is likely to take longer and require more repetition and reinforcement. Where procedural concerns about delay lead to the imposition of time scales that fail to recognize parents’ slower pace of learning, resulting from their disability, this again constitutes a form of indirect discrimination.

Indirect discrimination and the threshold test

1) Parental learning difficulties alert the social worker to the possibility of harm to the child. Such a response is cued by the cultural meanings linking mental incapacity and social incompetence. Munro (1999) has shown the enduring effect that first impressions have on social workers' assessments of risk. In the case of parents with learning difficulties, these first impressions can draw the social worker into adopting a 'deficiency orientation' that focuses on the parents' deficits at the expense of their strengths and positive qualities (Mount and Zwernik 1988; Booth and Booth 1993). A case against the parents is easily build out of such selective information[7], or what a barrister referred to as 'negative reporting', especially when the law permits both opinion and hearsay evidence by practitioners. As one local authority legal adviser told us:

> 'Little facts build a picture. You turn it on whether the child turned up at school with a black eye, was inadequately clothed on a freezing day, inadequately fed, didn't keep medical appointments.'

The threshold test indirectly discriminates against parents with learning difficulties because their disability and the stereotypes it invokes make it more likely that they will fail than other groups.

2) The threshold criteria require that the court be satisfied that the likelihood of harm is attributable to the child's care 'not being what it would be reasonable to expect a parent to give'. None of our legal respondents had any problems with the notion of reasonable care:

---

[7] McConnell refers to the 'verificationist' tendencies of practitioners to look for evidence that fits in with their existing or pre-conceived ideas about parents and their functioning.

> ‘The whole notion of reasonableness is in every aspect of every law. The reasonable whatever is everywhere. So to us it’s perfectly normal.’ *(Judge)*

Yet when challenged about where the normative standards implied by the notion of ‘reasonable care’ come from, it became apparent that they were benchmarked against the non-disabled population in the community (see also Posner and Diaz 2002; Swain and Cameron 2003): one judge said they reflected ‘common sense’; another the ‘expectations in society generally’; a third judge said that, ‘At the end of the day you’ve still got to weigh up the risk of safety and safety factors: that takes priority.’ It was also apparent that, whether explicitly or by default, the question of the supports received by the parent was not a pertinent factor in making a determination in this regard. The practice is for decisions to be made on the basis of the parent’s competence as a parent standing alone: if ‘their prognosis without support isn’t particularly good those children will be removed.’ *(Family Court Welfare Officer)* Applying a hypothetical standard of reasonable care to disabled parents without taking account of their disabilities or the supports they might require to put them on an equal footing with other non-disabled parents is discriminatory.

Concerns about possible indirect discrimination against parents with learning difficulties in care proceedings are magnified by the use of a ‘balance of probabilities’ standard for proving ill-treatment in child care cases. In the USA, the Supreme Court has ruled that a ‘fair preponderance of the evidence’ standard of proof is insufficient for terminating parental rights and that a ‘clear and convincing evidence’ standard of proof is needed[8]. We asked our legal respondents if they thought the ‘balance of probabilities’ standard is rigorous enough.

The weight of opinion was firmly of the view that the civil standard is about right, having regard to the heightened cogency test introduced by *Re H & R*[9] and the fact that care proceedings are about child protection rather than the attribution of guilt or innocence:

> ‘Yes, I do actually [think the standard is rigorous enough]. You can never devise a system that’s going to be entirely foolproof and you have to ask yourself would more children that needed protecting fall through the net if you waited for a higher standard of proof. Even though I fully accept there will be some cases where the decision does go the wrong way, I think there are more with a good result.’ *(Judge)*
>
> ‘You have to think about - if it’s in relation to children - erring on the side of balance of probabilities than erring on a burden that’s higher would be preferable.’ *(Solicitor)*
>
> ‘I think it is. The child has got to be protected.’ *(Barrister)*
>
> ‘I’ve had no difficulties in deciding what’s in the best interests of children. These are long cases. By the end it’s pretty clear which way things are going.’ *(Judge)*

However, as the evidence presented earlier from the court records shows, almost half of all the children of parents with learning difficulties who

---

[8] In Santosky v Kramer, 455 US 745, 102S.ct 1388, 71L Ed. 2nd 599 (1982).

[9] Re. H and R (Child Sexual Abuse: Standard of Proof), 1996, 1 FLR 80.

appeared in our court sample had passed the threshold test on the grounds that they were likely to suffer significant harm. The standard for proving ‘likely significant harm’ is a lesser standard than the ‘balance of probabilities standard’ necessary for proving actual significant harm. It requires only that the local authority prove there is ‘a real possibility, a possibility that cannot sensibly be ignored having regard to the nature and gravity of the feared harm in a particular case’ (Wates and Hayes 2002). Parents with learning difficulties enter the court with a question mark over their competence. The fact of their disability raises reasoned doubts about their capacity to safeguard their child’s welfare, which places an evidential burden on the parents to prove their fitness to parent (Watkins 1995). In the absence of other evidence, the recourse to psychological and residential assessments amounts to a reversal of the burden of proof on parents in the making of threshold decisions. They are required to demonstrate that the local authority’s presumption of parental inadequacy is ill-founded. As one solicitor said:

> ‘Yes, the scales are tipped against the parents. It starts with the parents having to prove that they’re good enough, rather then the state having to prove they’re not good enough.’

In neglect cases especially, making out a case that the possibility of harm cannot sensibly be ignored is a lot easier than refuting it: ‘It’s all about listing the negatives’, as one solicitor put it. In such cases, ‘people will get away with making all sorts of allegations about the level of care and because none of the allegations themselves are serious there is an argument that the burden of proof isn’t stringent enough.’ *(Barrister)* As one judge opined, ‘It’s very easy to prove the threshold test when you’re looking at things like neglect.’ Parents with learning difficulties are easily trapped by a system in which due process offers them no protection against the misrepresentation of their disability and too often appears to turn on its head the presumption that children's interests are best served by seeking wherever possible to preserve the bond between them and their parents. It remains an open question whether the right to a family life for parents with learning difficulties under the Human Rights Act is compatible with this interpretation of the paramountcy principle contained in the Children Act.

CONCLUSIONS

In this final section of our report, we draw together the key findings that have emerged so far from our study.

Key Findings

1) Fifteen percent of all local authority care applications were found to involve a parent with learning difficulties (p.20).
2) Another five percent of applications involved a parent with borderline learning difficulties (p.20).
3) Over one in six children subject to care proceedings (15.3%) had at least one parent with learning difficulties. This proportion increases to almost a quarter (22.1%) if cases involving parents with borderline learning difficulties are included (p.20).
4) Parents with learning difficulties and their children feature in care applications up to fifty times more often than would be expected from their numbers in the population (p.51).
5) Children whose parents had learning difficulties were more than twice as likely to be newborns (<1 month) when care proceedings were initiated (p.23).

6) Almost one in three (31.5%) children of parents with learning difficulties themselves presented some form of impairment or disability by comparison with only one in ten of their peers in the court sample (p.24).

7) The children of parents with learning difficulties are significantly more likely than their peers to be living with both their birth parents when proceedings commenced (p.24).

8) Three quarters of all children who had a parent or parents with learning difficulties were placed out-of-home and outside the family circle (p.26).

9) Two in every five focal group children (41.7%) were freed for adoption (p.26).

10) The children of parents with learning difficulties were significantly more likely to be the subjects of freeing orders than children of other parents (pp.27-8).

11) The children of parents with learning difficulties were significantly more likely to be placed out-of-home and outside their kinship network (p.27/9).

12) Only 13 (10%) of the 127 children with a mother and/or father with learning difficulties were returned home to live with their parent(s) (p.30).

13) Neglect was by far the most common professional concern leading to a care application. Almost two thirds of children (61.4%) were alleged to have been affected and a further 29.9% were identified as being ‘at risk’ of neglect. There were fewer than one in ten cases where neglect was not mentioned as a concern (p.35).

14) Proceedings were initiated in a third of all cases because of neglect alone (p.37).

15) The incidence of sexual and/or physical abuse was limited to a small minority (20.5%) of cases (pp.34-8).
16) Almost half (48.5%) of the care applications featuring a parent or parents with learning difficulties involved a mother or father who had already had a child removed (p.42).
17) The 66 families in the court sample headed by a parent(s) with learning difficulties had an average of 3.7 children each placed out-of-home in the looked-after system (p.42).
18) Comparisons with an Australian courts study showed the incidence of both cases and children involving parents with learning difficulties to be three to four times higher in England although the children were five times more likely to be placed back home by the Australian courts (pp.47-9).
19) A third of parents said they had not had an assessment or could not recall ever having one (p.90).
20) Parents' accounts suggested the absence of a common assessment framework (pp.91-2).
21) Almost all the features known to make for a well-founded assessment were missing in the accounts provided by parents (pp.92-9).
22) Parents identified the key qualities that made for a good social worker as: a readiness to listen, not being bossy and being helpful (pp.100-2).
23) Most parents thought that the purpose of case conferences, core group and review meetings had been explained to them and singled out the Chair for commendation (p.106).
24) For most parents, communication remained a one-way street and most felt they were not listened to (pp.106-7).
25) Most parents struggled to understand what was happening in meetings (p.108).

26) Advocates (from advocacy schemes, not lawyers) emerged as the most valuable support for parents in meetings (p.109).

27) The majority of families held that factually incorrect things had been said or written about them in meetings (pp.109-11).

28) Parents with learning difficulties face a double jeopardy: unable to understand the system they are caught up in, their special needs are mostly not understood by those who run it (pp.111-13).

29) Few parents said they had been advised by their social worker about their legal rights, where to obtain advice, how to find a solicitor or what help might be available to them once the decision had been taken to pursue a care application (p.116).

30) The great majority of parents held a good opinion of their solicitor (p.118).

31) Parents felt their solicitor listened to them, understood their point of view and explained things in terms they could understand (p.118).

32) The emotional aftershocks of losing their children continued to torment the daily lives of parents in the form of suicidal thoughts, depression, despair and relationship problems and to blacken their outlook on the future (pp.124-32).

33) Four reasons were cited by legal respondents to explain why so few children were rehabilitated with their parents: the severity of the case, time scales, resources and the extent of parents' needs (pp.141-5).

34) Five main factors were said to influence the outcome of cases involving parents with learning difficulties: their lack of the capacity for change, pressures for permanency, their lack of insight, parental non-compliance and the degree of risk (pp.145-50).

35) Parents supposed inability to change might itself be an artefact of professionals' ineffectiveness in engaging with the parents (p.153).

36) Almost no account is taken of parents' special needs for support arising from their disability during care proceedings (p.156).

37) The lack of adequate support for parents with learning difficulties sets them up to fail the threshold criteria (pp.158-64).

38) The narrow focus exclusively on the child's welfare blinkers the court to the ways in which the local authority's failure to address parents' needs (arising from their disability) impacts adversely on their parenting capacity (p.166).

39) Legal respondents showed little awareness of the distinction between direct and indirect discrimination or how it might be relevant to the treatment of parents with learning difficulties in care proceedings (p.169).

40) Indirect discrimination is most likely to show itself in the assessment phase and in the application of the threshold test (pp.170-3).

41) The fact of their disability places an evidential burden on parents with learning difficulties to prove their fitness to parent (p.175).

Policy Implications

1) The results from this study raise unanswered questions about the interface between disability discrimination legislation and the Children Act. Public policy now recognises the discriminatory nature of disabling barriers. It is not clear that this important lesson has been taken on board in child protection work or in child care law.

2) The use of psychometric tests as proxy for a proper parenting assessment flies in the face of the substantial weight of research demonstrating that no simple link exists between cognitive functioning and parenting capacity, and suggests that many supposed experts

contracted to provide testimony to the courts are out of touch with the evidence base.

3) Social workers from Children and Families Teams (CFT) are generally ill-placed to undertake an assessment that encompasses the total range of needs within the family arising from a parent's disability.

4) It is doubtful whether CFT social workers can realistically be expected to work in partnership with parents who have learning difficulties as current policy guidance exhorts them to do.

5) One reason why so many parents with learning difficulties are siphoned down the court route is because they have not been given a fair hearing earlier during the investigations.

6) There is a pressing case for a full review of parents' access to advice, advocacy and support during child care investigations and before their case reaches court.

7) The failure to pay attention to the extra support needs of parents meant that their learning difficulties impacted detrimentally on the outcome of investigations in such a way as to make it more likely that care proceedings would be taken against them.

8) Steps should be taken to ensure that parents with learning difficulties are provided with a list of Children Panel members in their locality, and advised of the importance of consulting a solicitor who belongs to the Panel, when they are notified of the decision to initiate care proceedings.

9) The adversarial nature of the court process that can end up pitching a barrister against a person with a clinical diagnosis of learning difficulties amounts to a form of legal bullying. Parents should be enabled to speak up for themselves without having to risk humiliation by counsel making hay at the expense of their disability.

10) Counselling and support should be made available to parents who have lost a child to adoption. Government policy is currently that such services should be provided as part of a local authority's general duties to meet the needs of all birth parents in relation to adoption. Very few local authorities in fact offer such support; none of the parents in our study had received any sort of counselling. There is anyway a strong case for making such a service independent of the local authority that initiated proceedings in the first place.

11) A mechanism is required to ensure that a local authority discharges the care plan agreed by the court or returns to court to seek an order of variation. As one judge averred, 'many, many care plans do not get implemented as the court ordered.' The Court of Appeal has already rejected a proposal to star items in the care plan that the court believes are essential to the welfare of the child in order that a local authority can be called to account for not carrying them out. Some other device is needed to prevent local authorities from failing to implement the care plans that formed an important part of the case for the termination of the parents' responsibilities for their child.

12) The failure to properly address the effects of a parent's disability undoubtedly disadvantages mothers and fathers with learning difficulties by setting up extra barriers to their participation in proceedings and to them receiving a fair hearing. It leads to them being treated even less favourably than other parents and so meets the test of discrimination embodied in the Disability Discrimination Act 1995.

13) Discriminatory incentives appear to be at work whereby cash-strapped local authorities can avoid having to commit resources to provide long-term support to parents with learning difficulties by having their children removed and placed for adoption.

14) There appears to be a conflict in practice between the paramountcy principle enshrined in the Children Act – which requires that the court must put the welfare of the child first – and the now widely-accepted principle of family policy that ‘supporting parents supports children’.

15) A philosophical and practical shift in the approach to working with disabled parents is required in the courts if the human rights of parents with learning difficulties are to be squared with the best interests of the child in such families.

16) The evidence raises concern that the treatment of parents’ disability leads to a reversal of the burden of proof in the making of threshold decisions whereby parents are required to demonstrate that the local authority’s presumption of parental inadequacy is ill-founded.

17) Parents with learning difficulties are easily trapped by a system in which due process offers them no protection against the misrepresentation of their disability.

18) It remains an open question whether the right to a family life for parents with learning difficulties under the Human Rights Act is compatible with the interpretation given to the paramountcy principle contained in the Children Act.

REFERENCES

Accardo, P., & Whitman, B. (1990). Children of mentally retarded parents. *American Journal of Diseases of Children, 144*, 69-70.

Barker, L. T., & Maralani, V. (1997). *Challenges and strategies of disabled parents: Findings from a national survey of parents with disabilities*. Oakland, California: Berkeley Planning Associates for Through the Looking Glass (Research and Training Center on Families with Adults with Disabilities).

Block, P. (2002). Sexuality, parenthood and cognitive disability in Brazil. *Sexuality and Disability, 20*(1), 7-28.

Booth, T. (2000). Parents with learning difficulties, child protection and the courts. *Representing Children, 13*(3), 175-188.

Booth, T. (2003). Parents with learning difficulties and the stolen generation. *Journal of Learning Disabilities, 7*(3), 203-209.

Booth, T., & Booth, W. (1994). For better, for worse: the prospects for partnership between professionals and parents who have learning difficulties. In T. Philpot & L. Ward (Eds.), *Values and Visions: Changing Ideas in Services for People with Learning Difficulties*. London: Butterworth-Heinemann.

Booth, T., & Booth, W. (1995). Unto us a child is born: the trials and rewards of parenthood for people with learning difficulties. *Australia and New Zealand Journal of Developmental Disabilities, 20*(1), 25-39.

Booth, W., & Booth, T. (1993). Accentuate the positive: a personal profile of a parent with learning difficulties. *Disability, Handicap and Society, 8*(4), 377-392.

Bradley, R., Toft, S., & Collins, G. (2000). Parenting assessments. *Learning Disability Practice, 2*(5), 9-11.

Buckley, H. (2003). *Child protection work: Beyond the rhetoric*. London: Jessica Kingsley Publishers.

Charlett, J. (2001). *Parents with Learning Disabilities*. Nottingham: Nottingham Health Action Zone.

Chinn, D. (1996). All mothers together: talking about mothering and learning disabilities. *Changes, 14*, 213-217.

Cleaver, H., & Freeman, P. (1995). *Parental perspectives in cases of suspected child abuse*. London: HMSO.

Cleaver, H., & Nicholson, D. (2003a). *Learning disabled parents and the Framework for the Assessment of Children in Need and their Families*. London: Royal Holloway, University of London.

Cleaver, H., & Nicholson, D. (2003b). *Learning disabled parents and the Framwork for the Assessment of Children in Need and their Families*. London: Royal Holloway, University of London.

Cotson, D., Friend, J., Hollins, S., & James, H. (2001). Implementing the *Framework for the Assessment of Children in Need and their Families* when a parent has a learning disability. In J. Horwath (Ed.), *The child's world: Assessing children in need* (pp. 287-302). London: Jessica Kingsley.

Czukar, G. (1983). Legal aspects of parenthood for mentally retarded persons. *Canadian Journal of Community Mental Handicap, 2*, 57-69.

Department of Health. (1988). *Protecting children: A guide for social workers undertaking a comprehensive assessment*. London: HMSO.

Department of Health. (2000). *Framework for the assessment of children in need and their families*. London: The Stationery Office.

Department of Health. (2001). *Valuing people: A new strategy for learning disability for the 21st century* (No. Cm 5086). London: The Stationery Office Limited.

Dowdney, L., & Skuse, D. (1993). Parenting provided by adults with mental retardation. *Journal of Child Psychology and Psychiatry, 34*(1), 25-47.

English, S. (2000). Parents in partnership. *Learning Disability Practice, 3*(2), 14-18.

Farmer, E., & Owen, M. (1995). *Child Protection Practice: Private Risks and Public Remedies*. London: HMSO.

Faureholm, J. (1996, 1996). *From lifetime client to fellow citizen.* Paper presented at the Parenting with intellectual disability, Snekkerstein, Denmark.

Feldman, M. (1994a). Parenting education for parents with intellectual disabilities: a review of outcome studies. *Research in Developmental Disabilities, 15*(4), 299-332.

Feldman, M. (1994b). Parents with intellectual disabilities. *Network, 4*(1), 41-47.

Freeman, P., & Hunt, J. (1998). *Parental perspectives on care proceedings*. London: The Stationery Office.

Genders, N. (1998). *The role of the community nurse (learning disability): Parenting by people with learning disabilities*. London: The Maternity Alliance.

Glennie, S., Cruden, B., & Thorn, J. (1998). *Neglected children: Maintaining hope, optimism and direction*. Nottingham: Nottinghamshire County Area Child Protection Committee.

Goodinge, S. (2000). *A jigsaw of services: Inspection of services to support disabled adults in their parenting role*. London: Social Services Inspectorate: Department of Health.

Grant, C. (1980). Parents with defined intellectual limitations. In *Sterilization and Mental Handicap: Proceedings of a symposium*. Toronto: National Institute on Mental Retardation.

Greenspan, S., & Budd, K. (1986). Research on mentally retarded parents. In J. Gallagher & P. Vietze (Eds.), *Families of Handicapped Persons: Research programmes and policy issues*. Baltimore: Paul H. Brookes.

Guinea, S. (2001). Parents with a learning disability and their views on support received: a preliminary study. *Journal of Learning Disabilities, 5*(1), 43-56.

Horwath, J., & Morrison, T. (2000). Assessment of Parental Motivation to Change. In J. Horwath (Ed.), *The Child's World: Assessing Children in Need*. London: Jessica Kingsley Publishers.

Hunt, J., & Macleod, A. (1999). *The best-laid plans: Outcomes of judicial decisions in child protection proceedings*. London: The Stationery Office.

Hunt, J., Macleod, A., & Thomas, C. (1999). *The last resort: Child protection, the courts and the 1989 Children Act*. London: The Stationery Office.

Johnson, D., Gipson, D., Thomas, C., & Wells, T. (1995). *Parents with learning disabilities: A study of the reasons for referral of parents with a learning disability and an estimation of their number in the Sunderland population*. Sunderland: Department of Clinical Psychology, Hillview Clinic.

Kelly, J., Morisset, C., Barnard, K., & Patterson, D. (1996). Risky beginnings: Low maternal intelligence as a risk factor for children's intellectual development. *Infants and Young Children, 8*(3), 11-23.

Kidd Webster, S., & Ullmer, D. (no date). *The Positive Parenting Project: An Evaluation of a Prevention Program for Families Headed by Parents with Mental Retardation*. Madison, Wisconsin: Webster & Associates.

Lindley, B. (1994). *On the receiving end: Families' experience of the court process in care and supervision proceedings under the Children Act 1989*. London: Family Rights Group.

Mandeville, H. (1990). *Supported Parenting: Finding a home in the service system*. Madison, Wisconsin: Wisconsin Council on Developmental Disabilities.

Mansell, J., & West, M. (2000). *Supporting parents with learning disabilities in Rotherham*. Rotherham: Rotherham Advocacy Partnerships supported by The South Yorkshire Coalfields Health Action Zone.

McConnell, D., & Llewellyn, G. (1998). Parental disability and the threat of child removal. *Family Matters, 51*(4), 33-36.

McConnell, D., Llewellyn, G., & Ferronato, L. (2000). *Parents with a disability and the NSW children's court*. Sydney: University of Sydney.

McConnell, D., Llewellyn, G., & Ferronato, L. (2002). Disability and decision-making in Australian care proceedings. *International Journal of Law, Policy and the Family, 16*, 270-299.

McGaw, S. (1997). Practical support for parents with learning disabilities. In J. O'Hara & A. Sperlinger (Eds.), *Adults with Learning Disabilities: A*

Practical Approach for Health Professionals (pp. 123-138). Chichester: John Wiley and Sons.

McGaw, S. (2000). *What works for parents with learning disabilities?* Barkingside: Barnardo's.

Mirfin-Veitch, B., Bray, A., Williams, S., Clarkson, J., & Belton, A. (1999). Supporting parents with intellectual disabilities. *New Zealand Journal of Disability Studies, 6*, 60-74.

Mørch, W.-T., Jens, S., & Andersgard, A. (1997). Mentally retarded persons as parents: Prevalence and the situation of their children. *Scandinavian Journal of Psychology, 38*, 343-348.

Mount, B., & Zwernik, K. (1988). *It's Never Too Early, It's Never Too Late: A Booklet about Personal Futures Planning* (No. Publication No. 421-88-109). Minnesota: Metropolitan Council.

Munro, E. (1999). Common errors of reasoning in child protection work. *Child Abuse and Neglect, 23*(8), 745-758.

New York State Commission on Quality of Care for the Mentally Disabled. (1993). *Parenting with Special Needs: Parents who are Mentally Retarded and their Children*. Albany, New York: New York State Commission on Quality of Care for the Mentally Disabled.

Nicholson, J. (1997). *Parents with learning disabilities: A survey of current services in the Mansfield and Ashfield areas*. Mansfield: Central Nottinghamshire Healthcare Trust.

Pixa-Kettner, U. (1998). Parents with intellectual disability in Germany: Results of a nation-wide study. *Journal of Applied Research in Intellectual Disabilities, 11*(4), 355-364.

Posner, G., & Diaz, P. (2002). Everything we always wanted to know about the threshold criteria. *Family Law*(November), 850-852.

Ray, N., Rubenstein, H., & Russo, N. (1994). Understanding the parents who are mentally retarded: guidelines for family preservation programs. *Child Welfare, 73*(6), 725-743.

Robbins, D. (1998). *Assessment in child protection and family support: Report of an SSI study*. London: Department of Health.

Sale, A. (2002, 7-13 November). Proud parents. *Community Care,* 30-31.

Schwier, K. M. (1994). *Couples with Intellectual Disabilities Talk about Living and Loving*. Rockville: Woodbine House.

Snodgrass, P. (1992). How many? How much? Scarce resources and supported parenting. In H. Mandeville (Ed.), *Building the Foundation: Public Policy Issues in Supported Parenting*. Madison: Supported Parenting Project, Wisconsin Council on Developmental Disabilities.

Snodgrass, P. (2000). A conversation with Polly: An interview by Dolores Ullmer Liamba. In D. Ullmer Liamba (Ed.), *Cultivating competence* (2nd ed., pp. 57-67). Madison: Wisconsin Council on Developmental Disabilities.

Social Services Inspectorate. (1998). *Inspection of services to support disabled adults in their parenting role: Southampton*. Bristol: West inspection Group: Department of Health.

Social Services Inspectorate. (1999). *Inspection of services to support disabled adults in their parenting role: Northamptonshire County Council*. Bristol: West inspection Group: Department of Health.

Stevenson, M. (1998). *Social workers' attitudes to their practice with parents with learning difficulties under the provisions of the Children Act 1989: A descriptive study.* Unpublished MA in Socio-Legal Studies, University of Sheffield, Sheffield.

Strike, R. w., & McConnell, D. (2002). Look at me, listen to me, I have something important to say. *Sexuality and Disability, 20*(1), 53-63.

Swain, P., & Cameron, N. (2003). 'Good enough parenting': parental disability and child protection. *Disability and Society, 18*(2), 165-177.

Swain, P., Goodfellow, J., Lee, J., Cameron, N., & Bennett, W. (2002). *Pride and prejudice: A snapshot of parents with disabilities experience of the child protection system in Victoria. Final report of the Disability, Parenting and the Law Project.* Melbourne, Australia: Disability Discrimination Legal Service.

Sweet, M. (1990). *Discovering the Parent's Language of Learning: An educational approach to supporting parents with mental retardation*. Madison: Supported Parenting Project, Wisconsin Council on Developmental Disabilities.

Tymchuk, A. (1990). *Parents with Mental Retardation: A National Strategy*. SHARE/UCLA Parenting Project, Department of Psychiatry, School of Medicine, UCLA.

Tymchuk, A. (1992). Predicting adequacy of parenting by people with mental retardation. *Child Abuse and Neglect, 16*(2), 165-178.

Tymchuk, A., & Feldman, M. (1991). Parents with mental retardation and their children: review of research relevant to professional practice. *Canadian Psychology, 32*(3), 486-496.

Tymchuk, A., Hamada, D., Andron, L., & Anderson, S. (1990). Emergency training for mothers who are mentally retarded. *Child Behavior Therapy, 12*(3), 31-47.

Van Hove, G., & en Wellens, V. (1995). Ouders met een mentale handicap: realitet en begeleiding. *Orthopedagogische Reeks Gent, 5*.

Wates, M. H., J., & Hayes, M. (2002). Child protection in the Court of Appeal. *Family Law*(November), 817-828.

Watkins, C. (1995). Beyond status: The Americans with Disabilities Act and the parental rights of people labeled developmentally disabled or mentally retarded. *California Law Review, 83*, 1415-1475.

Wolfensberger, W. (1970). Models of mental retardation. *New Society*(January 8th), 51-53.

Woodhouse, A., Green, G., & Davies, S. (2001). Parents with learning disabilities: service audit and development. *British Journal of Learning Disabilities, 29*, 128-132.