

Babies and young children in care: the relationship between instability and delay

Harriet Ward

**Centre for Child and Family Research
Loughborough University**

Difficult questions

- When should support within the family be replaced by temporary or permanent substitute care?
- Will care promote or inhibit children's chances of achieving well being?
- How can practitioners and social care managers gain more understanding of the likely consequences of their actions?

Needs of babies in care

- Attachment is the basis for acquiring the ability to form secure and lasting relationships
- Most children form continuing attachments to birth parents
- The termination of this relationship can create an enduring sense of loss
- But the quality of the relationship is also of fundamental importance
- Abuse and neglect can lead to maladaptive attachments
- Separations within the first six months are thought to be least damaging

Needs of babies in care

- 'multiple breaks can lead to the child being virtually unable to make true relationships' (Jones et al, 1991, p.118).
- WHO definition of emotional abuse includes: 'the failure to provide a developmentally appropriate, supportive environment, including the availability of a primary attachment figure' (1999)

Children looked after in England: 31.3.04

- 61,100 children looked after by local authorities (55 per 10,000)
- Average duration 778 days; 29% leave within eight weeks
- 13% had three or more placements
- 2,600 aged under one; 9,000 1- 5; 19% 0-5
- Under ones: 2,100 in foster homes; 220 placed for adoption; 200 with parents; 70 in residential units with parents (ten secure)
- 3,700 adoptions from care

42 babies

- Admitted 1996-7 before their first birthday
- All looked after for at least a year
- Average time from entry to permanence: 29 months adoption; 34 months rehabilitation
- During the first year they were looked after
14 (33%) had one placement; 17 (40%) had three or more

Five years after admission (April 2002)

- 23 (55%) adopted
- 14 (33%) returned to birth parents
- 2 returned to other relatives
- 3 still looked after

In only three cases had original care plan been adoption or long term placement

Research questions

- Why did these very young children not achieve permanence more rapidly?
- Why did they move around so much?
- What are the effects of lack of permanence and instability on their long-term well being?
- How can we improve the capacity of the system to meet their needs?

Methodology

In-depth qualitative study

- Case file study to trace chronologically the child's care history and reasons for decisions
- Exploration of reasons for change and causes of delay
- Interviews with birth parents, current carers, social workers, team leaders, family placement workers, children's guardians, managers, solicitors, chief clerks

Because they were so young we could trace from birth:

- Changes in domicile
- Changes in household composition
- Changes in primary carer
- Reasons for changes
- Reasons for key decisions and causes of delay

42 babies

- 21 boys, 21 girls
- 31 white, one black Caribbean, ten mixed heritage
- All admitted before first birthday; 34 (81%) before six months old
- Fifteen (36%) health problems
- 26 living with a single mother
- Complex family relationships
- 24 mothers had problems re drugs, alcohol, mental ill health, and/or domestic violence; only one of these babies returned to care of mother

Protection issues

- 19 (45%) had been placed on the child protection register before they were born
- 18 (43%) placed on register after birth – most commonly for physical abuse, sometimes combined with neglect
- Abuse/neglect was the most common primary reason for admission (31:74% cases)
- Parental illness or addiction was the next most common reason (9: 21% cases)

Experiences of transience before entry

- Nearly half (18:46%) had at least two primary carers before they became looked after; five had four or more
- Twelve (31%) had one domicile before admission; 11 (28%) had had four or more
- Changes of domicile and carer were often accompanied by changes of household

Life pathways: before entry

Child's age:

4 months



Mother cannot cope: move in with grandfather

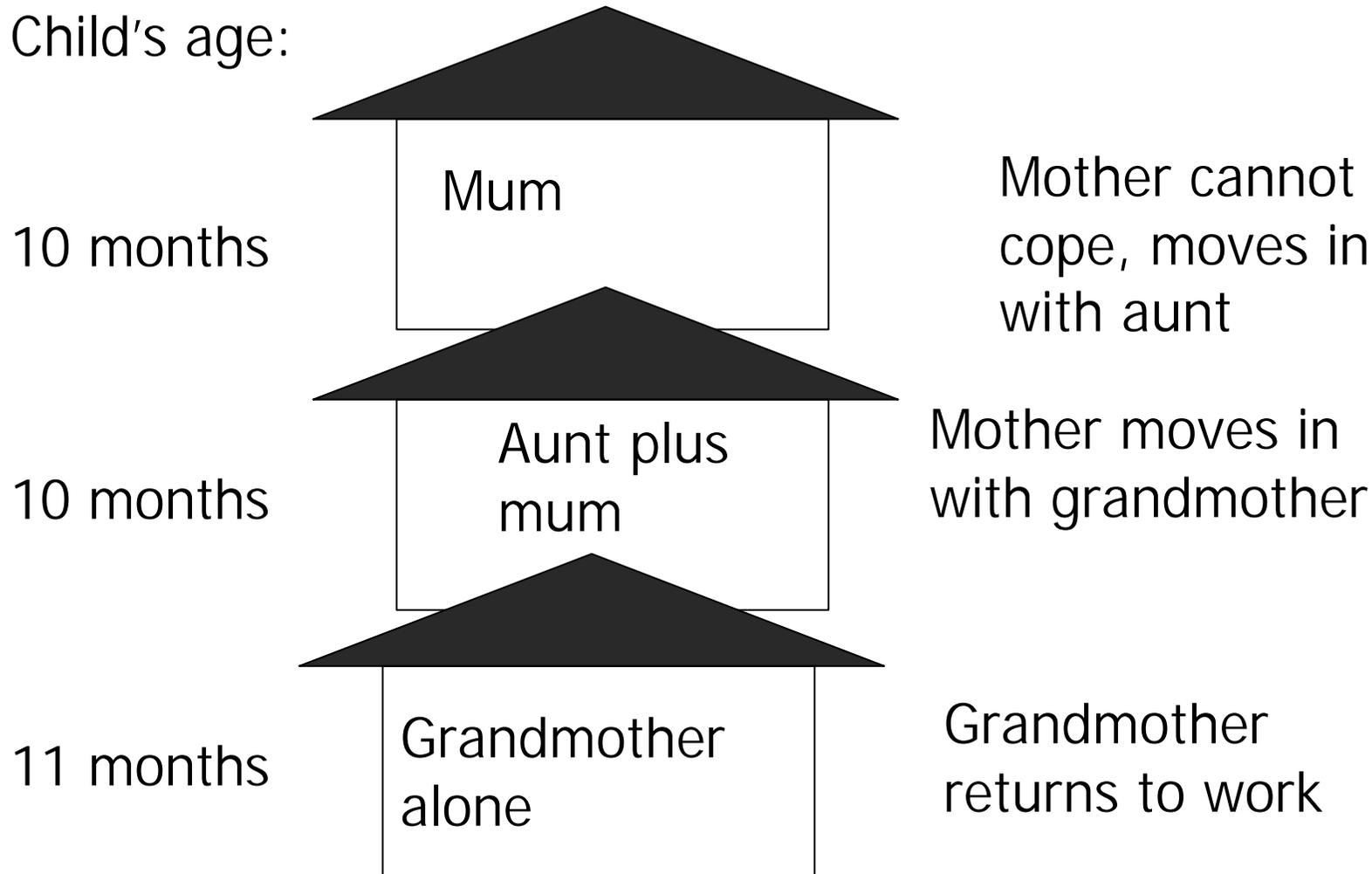
9 months



Argument:
Mother and child move out

Life pathways: before entry

Child's age:



Five domiciles;
six carers

Experience of transience while looked after

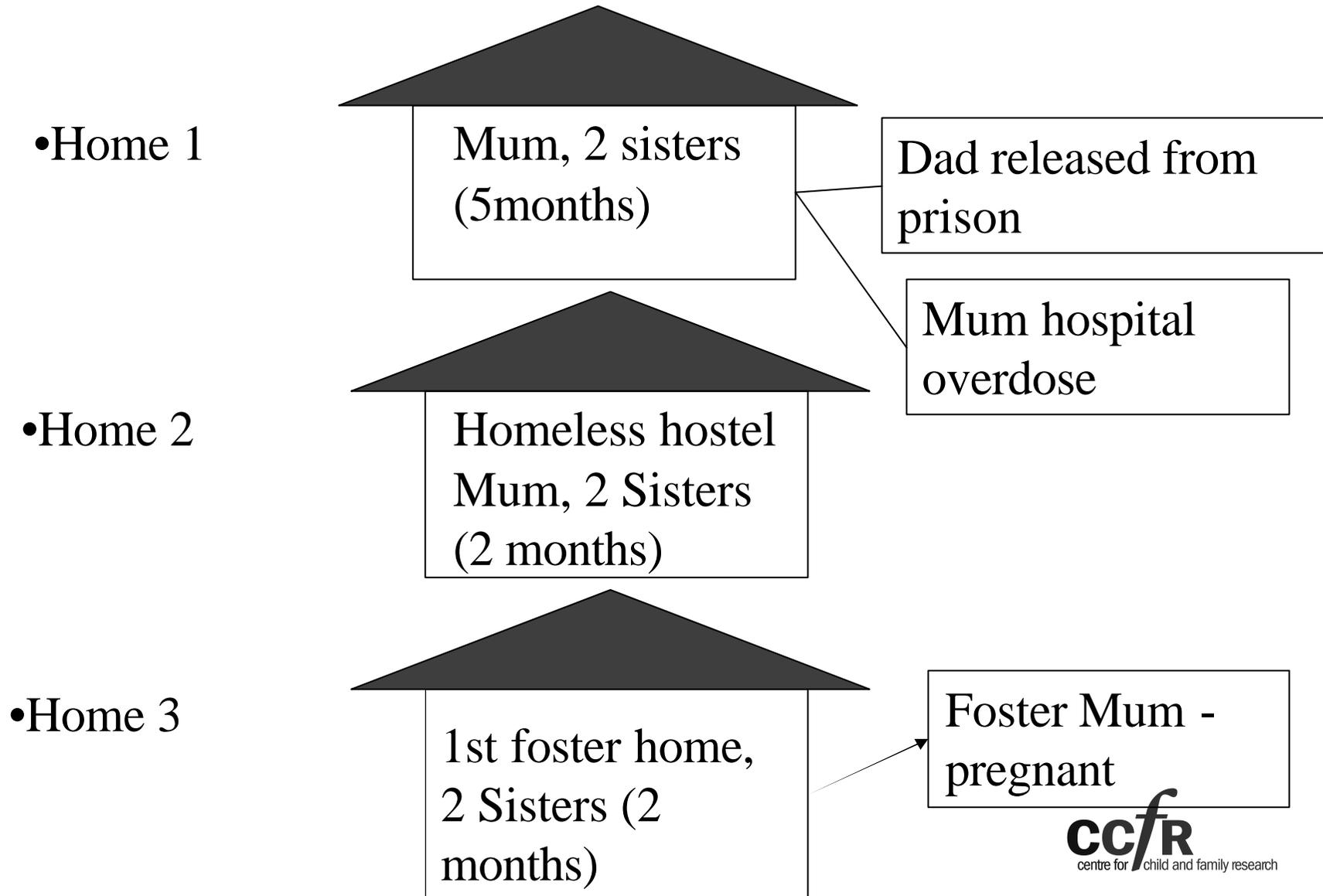
In first year of care episode:

- 14 babies had one primary carer
- 17 had three or more

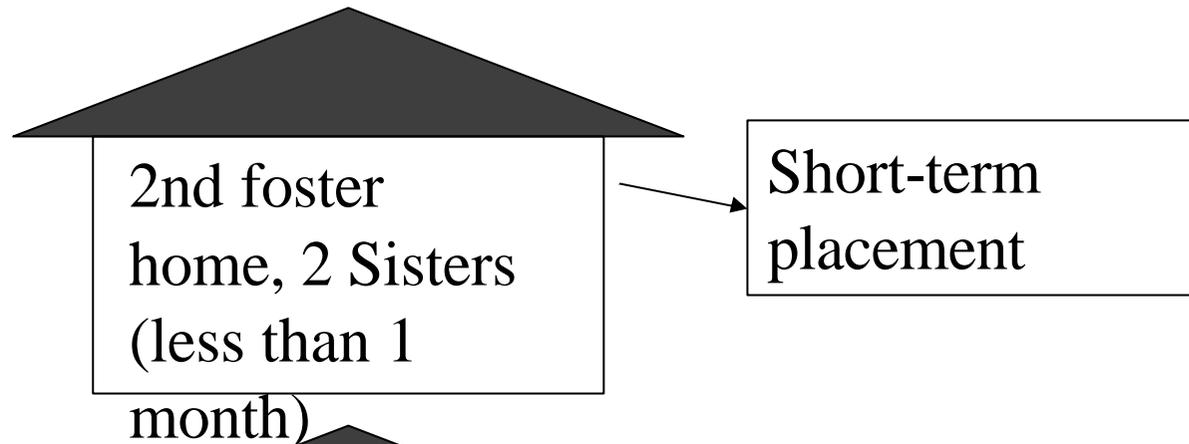
Throughout care episode (14-69 months)

- 4 (11%) had one primary carer
- 15 (40%) had two or three
- 19 (49%) had four or more

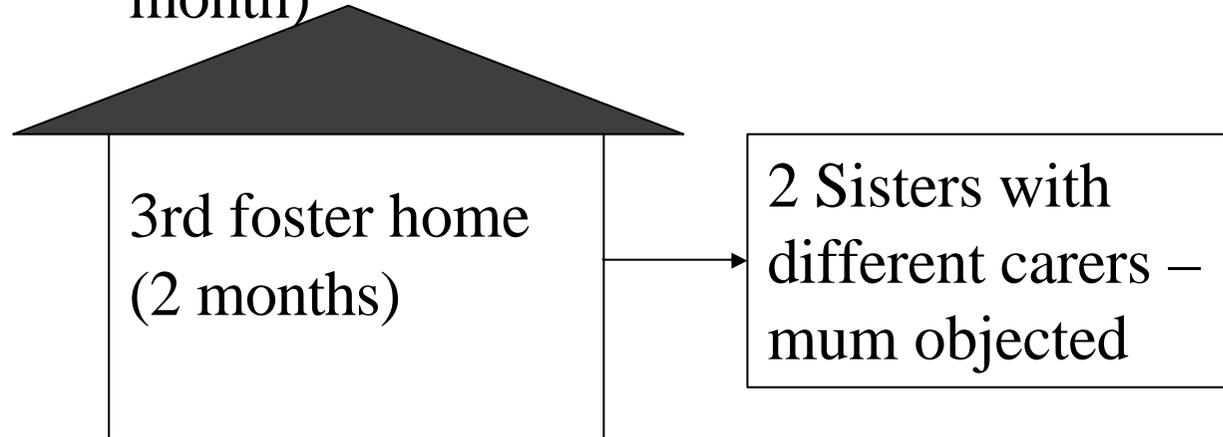
Transience in and out of care



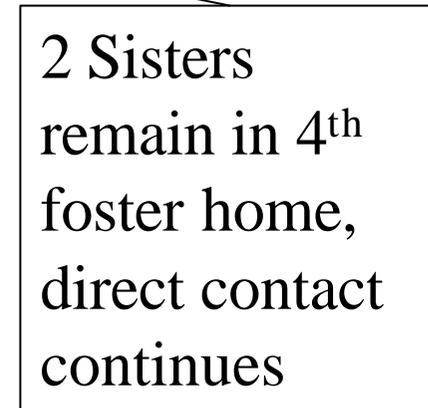
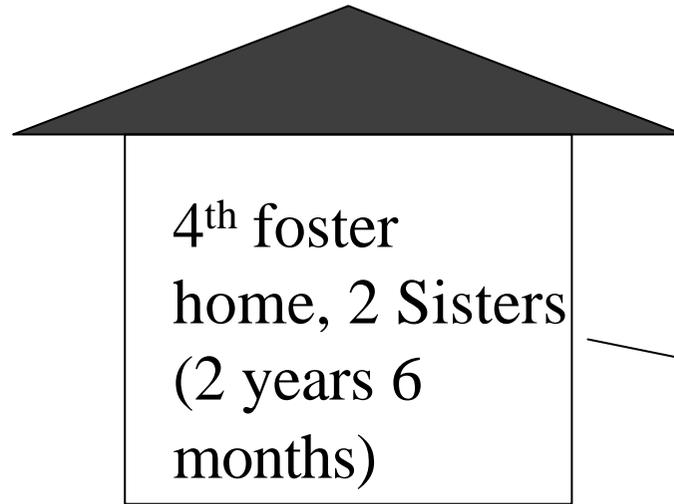
•Home 4



•Home 5



•Home 6



•Home 7



Effects of instability

He has a poor sleep pattern....he will wake several times ...three and five times a night...he's got his own bedroom, but he's also got a bed in our room, and he's mostly in that bed...he still needs..to be able to put his hand out and know that we are there

(Adoptive mother, 4½ years post placement)

Why did they move?

- 21 placements broke down (17 with parents/relatives)
- Half of all residential assessments broke down
- Relative placements broke down because of family or financial circumstances
- Reluctance to consider foster carers as potential adopters
- Many, though not all, planned transitions were positive moves (eg to be with siblings, with carers of same culture/ethnicity)

Why did they take so long to achieve permanence? (social services factors)

- Many children achieved permanence well before they ceased to be looked after : 18 (44%) within twelve months of entry
- Predominant view that return to birth family must always be first choice of care plan
- Adult services failed to take account of children's timescales
- Long waits for optimal matches

Resource & policy issues

- Sibling groups

“There’s a real resource issue for placing sibling groups together above two, or at the most three”

Resource & policy issues

- “It’s not just a resource issue...there’s also looking at the needs of children...it may be the fact that children have so many individual needs, that they override the need for them to be placed together”

Reactive rather than proactive planning

I don't think I could easily locate a decision making forum where we sat down with the evidence as it was then, and said what would happen....it is very hard to give voice to how frenetic, chaotic, shambolic sometimes working in a social services office can be. And really, it's a case of momentum being built up, building up to this alternative course of action, and ..it just kind of flows on inevitably

(Social worker)

Factors contributing to delay: adult services

Who was paying for it, how many chances were given? The drug and alcohol team would argue that most people going into drug rehab fail, at least for the first go. That's fine if you're dealing with adults, but if you've got a child...at a critical stage of development...you can't always afford to go the whole hog of two failures....can you ask a child to wait two years while their parent gets it together?
(Social work manager)

Factors that contributed to delays in achieving permanence (courts)

- Little weight given to social worker's opinions
 - delays in waiting for expert opinions
- Differences of opinion led to additional court hearings
- Human Rights Act
- Shortage of court time – especially county courts

Factors contributing to delay: courts

If in the course of court proceedings we lose time, for whatever reason, unavailability of experts, guardians not yet allocated, we are losing part of a child's childhood that we can't give back. If the case takes a year longer than it should for a combination of reasons.....we've lost [part] of a kid's childhood that we can't give them back

(Chief clerk, family proceedings court)

Legal and court issues

The delay in court...there's not much you can do about judges who take the view that a parent should be given a final chance.

Because what the judge says at the end of the day is the decision...One of the problems is that social workers have in court is that they're not highly regarded

(social worker)

Delay and instability

- The longer children wait for a permanent solution the more likely they are to experience further changes
- The less likely they are to develop secure attachments
- Delay is itself a cause of instability

Was permanence achieved?

- Adoptive placements all appeared stable
- Children returned to birth mothers if an abusive partner left the home
- Children returned to very young or learning disabled birth mothers who had learnt new parenting skills
- Instability sometimes continued after permanent placement theoretically achieved
- Children who returned to lone birth fathers did not achieve permanence

What's different now?

- PAF targets concerning placement stability
- Adoption and Children Act 2002
- National Adoption Standards
- Protocol for Judicial Case Management in Public Law Children Act cases
- New research initiative on adoption

BUT:

- 79% of those adopted in y/e 31.03.04 placed within 12 months – and 21% not
- Average length of care episode before adoption 2yrs eight months
- 13% of children had three or more placements

Messages for managers and practitioners

- The child's previous history should inform decisions
- The agency's capacity should inform decisions
- Information about adult services should inform decisions
- No decision is a decision in itself
- There may come a point when the need for stability overrides other considerations

Contact details:
h.ward@lboro.ac.uk

Ward, H., Munro, E., Dearden, C. (2005)
Babies and Young Children in Care: Life
Pathways, Decision Making and Practice,
London, Jessica Kingsley