

Understanding the needs of vulnerable children

Parents for Children 13.10.2005

**Professor Hedy Cleaver
Royal Holloway, University of
London**

Increased risk of significant harm

- **Much research shows that children who grow up in families where there is domestic violence, mental illness, parental substance misuse or parental learning disability are at increased risk of significant harm**
- **Vulnerability may be the result of direct harm to the child or indirectly through the impact of parenting capacity and factors within the wider family and environment**

Child welfare concerns

- **A high proportion of children referred to social services live with families where there is evidence of domestic violence, parental substance misuse or mental illness**
- **At the initial assessment stage 17% of children were found to be living in families where there is domestic violence, 12% parental substance misuse, and 13% parental mental illness**
- **At the Initial Child Protection Conference stage approximately 50% of cases there is evidence of domestic violence and 25% evidence of parental substance misuse, 25% parental mental illness**

The impact on parenting

- **Parents may become increasingly focused on their own issues**
- **Parents may have difficulty controlling their emotions**
- **Parents may become less sensitive, responsive, loving, caring, and nurturing**
- **Parents may have difficulty organising their lives**
- **Parents may neglect their own and their children's physical needs**
- **There is an increased risk of child abuse**
- **Children may have to be separated from their parents**

Parenting hampered by the social consequences

- **Reduced living standards**
 - Family income used to satisfy parental needs
 - Unpredictable behaviour makes jobs difficult to sustain (possible consequences of job loss: rent/mortgage not paid, debts, accommodation lost, power cut off)
- **Loss of friends and family**
 - Bizarre/unpredictable behaviour alienates friends and family
 - Parents are ashamed of their circumstances and hide their experiences
 - Immediate family members and friends sometimes lack understanding and are judgmental
- **Marital/partner disharmony**
 - Places great strain on relationships between partners
 - Coping on day to day basis exhausting and dispiriting
 - Alcohol problems often associated with domestic violence

Children's reactions

Young children are more likely to show:

- **anti-social behaviour**
- **emotional problems**
- **and problems in the school environment**

Young people's reactions

Adolescent often experience:

- **friendship difficulties**
- **a split between home life and peer relationships**
- **being prescribed psychoactive drugs**
- **earlier use of alcohol or drugs**
- **greater use of violence to resolve problems**
- **leaving home early**
- **earlier marriages**
- **involvement with a 'semi-deviant' sub-culture**

These behaviours are a way of coping

By behaving in this way:

- **children and young people are asking for attention**
- **they are hoping that their behaviour will make their parents focus on them, and therefore focus less on their other problems**
- **they are hoping that others outside of the family will notice and come and rescue them**
- **or alternatively, others might come and put the family right again**

Children react in these ways because they have certain needs which are not being met

- **Children and young people need love, affection, and nurture**
- **They need a clear structure within which they can learn the rules about life**

Living in a family where a parent has problems often means that the child does not get either of these needs met

Parenting issues can affect the safeguarding process

- Parents' fear that children will be removed makes them reluctant to admit to domestic violence or substance misuse – they can appear uncooperative and hostile to offers of support and services**
- Practitioners fear of erratic and potentially violent parents may result in a reluctance to confront families on sensitive issues**
- Lack of knowledge, expertise and training may result in practitioners not recognising symptoms of parental mental illness, domestic violence, parental substance misuse or learning disability, or its impact on children**

The need to work with other agencies can affect the safeguarding process

- **A variety of agencies may need to be involved in assessment, planning and service provision**
- **Inter-agency work within the child welfare field is often uncoordinated, haphazard and plagued with difficulties**
- **Splits between adult and children's services, the different legal frameworks and professional perspectives can militate against effective inter-agency working and the provision of services**

The legal framework

- **S.27 of the Children Act 1989 places a specific duty on agencies to co-operate in the interests of children in need and S.47 places a duty on agencies to help the local authority social services with its enquiries in cases where there is reasonable cause to suspect a child is suffering or likely to suffer significant harm**
- **S.11 of the Children Act 2004 strengthens the 1989 Act by placing a duty on statutory agencies to co-operate to improve children's wellbeing**
- **The Assessment Framework sets out the principles of inter-disciplinary and inter-agency assessments and the importance of agencies working in a co-ordinated way to an agreed plan, to ensure optimal outcomes for children**

Findings from current research

- **The research findings are drawn from two studies**
- **The first focuses on children living with domestic violence or parental alcohol or drug misuse**
- **The second focuses on children living with parents with learning disabilities**

High levels of co-morbidity

- **Social work assessments showed that domestic violence, parental substance misuse and learning disabilities rarely exist alone. Many parents also experience one or more of the following:**
 - domestic violence
 - problem alcohol or drug use
 - poor physical or mental health
 - learning disability
 - a history of childhood abuse
 - growing up in care
 - the care of a disabled child
- **The co-morbidity compounds the difficulties parents experience in meeting their children's needs**

An example of co-morbidity

- *Mum describes herself as having a series of difficult life experiences. She reports experiencing domestic violence in all her relationships and has a variety of physical health problems and has intermittent chronic depression, specific learning disabilities and agoraphobia. A family history of both learning difficulties and mental health problems exists*

Impact on children's development

Severe developmental needs found in:

- **34.5% of cases where evidence of domestic violence**
- **29.5% of cases where evidence of parental substance misuse**
- **39% of cases where co-existence of domestic violence and parental substance misuse**
- **50% of cases where parent has a learning disability**
- ***25% of cases in a random sample***

- **Classed as severe developmental needs when social worker identified needs in 3 or more dimensions: health; education; emotional and behavioural development and self care; identify and self presentation; and family and social relationships.**

Impact on parenting capacity

Severe parenting difficulties identified in:

- **37.9% of cases where evidence of domestic violence**
- **52.9% of cases where evidence of parental substance misuse**
- **71% of cases where co-existence of domestic violence and parental substance misuse**
- **57% of cases where parent has a learning disability**
- ***19% of cases in a random sample***

- **Classed as severe parenting difficulties when social worker identified difficulties in 3 or more dimensions: basic care; ensuring safety; emotional warmth; stimulation; guidance and boundaries; and stability**

Impact on family and environmental factors

Severe difficulties in relation to family and environmental factors identified in:

- **55.9% of cases where evidence of domestic violence**
- **68.9% of cases where evidence of parental substance misuse**
- **82.9% of cases where co-existence of domestic violence and parental substance misuse**
- **66.6% of cases where parent has a learning disability**
- ***37% of cases in a random sample***
- **Classed as severe difficulties in relation to family and environmental factors when social worker identified difficulties in 2 or more dimensions: family history and functioning; social resources (wider family, community resources, social integration); housing; employment and income**

The most vulnerable children

Severe difficulties in all three domains identified in:

- **22% of cases where evidence of domestic violence**
- **19% of cases where evidence of parental substance misuse**
- **33% of cases where co-existence of domestic violence and parental substance misuse**
- **34.5% of cases where parent has a learning disability**
- **9% of cases in a random sample**

Provision of services

- **A comprehensive package of services was frequently provided – example of services given when children were living with a parent with learning difficulties:**
 - **Respite care, family support and care, day nursery, HomeStart, HV to visit weekly, Women's Aide worker to visit weekly, transport to respite care, injunction against father visiting**

Outcomes for children

- **Service provision did not always result in children being able to live safely with their parents**
- **Some remained at home in questionable circumstances**
- **Other children became looked after**

An example of children continuing to live in unacceptable circumstances

- *Although they had moved from a flat to a house, the house was now extremely unkempt, dirty and smelly. Their dog, which is a large dog, was out of control but not really aggressive. The snake was in a box in the front room and the children were playing in that room. The father drinks very heavily, and the mother continues to suffer from uncontrolled epileptic fits*
- (parent with learning disabilities - researcher's report at the time on the interview - one year after the referral)

An example of children needing to be looked after

- *We are very concerned about the impact of chronic and very serious alcoholism on Charlie's (aged 8) life. Dad is very ill, the alcohol has affected both his physical condition and mental condition. He has problems walking and his short term memory is seriously affected. He will probably be dead within a short period and yet is unable to stop drinking (social worker)*
- **The father was unable to acknowledge his difficulties**
- *I am receiving support and have managed to control my drinking, I've done everything social services have asked (father and sole carer)*

Social worker's views of what hampers the impact of services

- **Parents difficulties in being able to fully engage with the service providers**
 - *Mum was referred to the drug clinic but only attended on a few occasions and then went back onto drugs*
- **Insufficient local services**
- **Long waiting lists for specialist services**
- **Inability to provide long term services**
- **Poor co-ordination between agencies**

Conclusions

- **The experiences of children who have grown up in families where there is domestic violence, parental substance misuse, mental illness, or parental learning disabilities is likely to have a negative impact on all aspects of their behaviour and relationships**
- **Children are likely to need long-term and well targeted support including specialist help, from a range of different agencies to ensure they are safeguarded and their welfare promoted**
- **When children become looked after contact with parents may be more difficult because the issues parents are coping with may result in them behaving in unpredictable and challenging ways**