

Topic 16

Working with birth parents

Key Messages

- A child and family-centred approach is needed to ensure children have ‘a secure, stable and loving family ... through childhood and beyond’ (DfE 2010).
- Each family’s journey through care is unique, but feelings of grief and loss are widespread. Birth families need support and understanding if they are to successfully renegotiate their role at different stages of that journey.
- Birth parents want involvement, information and understanding – in other words, empathy and respect – from social workers (Schofield et al, 2011). Active listening and honest communication will promote this understanding.
- Social workers have to balance the changing needs of children, foster carers, adopters and birth families. They have to respond appropriately in emotionally charged situations and while maintaining often fragile relationships. To do this successfully, social workers need an awareness of the impact of this work on their own emotions and responses.
- There is evidence that even families presenting resistance are able to change their attitudes over time given the right support (Schofield et al, 2011).
- Foster carers and adopters need ongoing guidance and support about how to manage their relationships and different forms of involvement with birth families (Cleaver, 2000).
- Relationships with birth families are not just about relationships with parents, but also the wider sibling and family network.

Care planning and work with birth families

As the *Care Planning, Placement and Case Review Guidance* makes clear, the goal of all child and family social work is to achieve permanence – to ‘ensure that children have a secure, stable and loving family to support them through childhood and beyond’ (DfE, 2010 as amended).

There are a variety of potential pathways through the care system and these will affect the purpose and goals of working with families:

- some children will make a permanent return to their birth parents
- others will return to their birth parents, only to re-enter care at a later date
- some will experience planned shared care arrangements
- some children will remain within the looked after system throughout the rest of their childhood

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- and a minority will experience legal permanence with other carers through adoption, special guardianship or a residence order. (Boddy et al, 2013)

If the plan is for the child to return home, work should be concerned with maintaining relationships in everyday life as well as addressing the problems that contributed to the placement. Where the plan is for long-term care, it is important to recognise the role of kinship networks in maintaining the child's sense of identity. All children and birth families need support in addressing issues of separation, attachment and loss (Boddy et al, 2013). (See the Briefing 15 on '[Managing risks and benefits of contact](#)').)

But whatever the route to permanence, skilled work with birth families is essential – either to ensure the safeguarding and well-being of the return, or to support families to adjust to their changing role. Social workers have the complex task of keeping the child's needs and the stability of the placement at the forefront of their minds, while also being mindful of the needs of the birth family (Boddy et al, 2013). Knowledge of the family – their past history as well as current circumstances – will give insight into family members' feelings and behaviour. This knowledge will help the social worker consider how significant factors might impact, positively or negatively, the family and affect the ability to change.

From the child's point of view, their birth family is likely always to have a role in their lives with some looked after children 'think[ing] about their birth families every day' (Cleaver, 2000). Where there has been abuse and neglect, some of these thoughts will be distressing but family connections are a significant part of the child's inner world and identity (Neil et al, 2010). When they are living away from their family home, regular contact with family members, including siblings and extended family, can lessen anxieties (Farmer and Moyers, 2005) and help make sense of past and present experiences. (See the Briefing 15 on '[Managing risks and benefits of contact](#)').)

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Summary of the legal context for looked after children

The Children Act 1989

- The [Children Act 1989](#) places a strong emphasis on the local authority **working in partnership with parents**. Guidance is set out in [The Children Act 1989 Guidance and Regulations Volume 2: Care planning, placement and case review](#) (DfE, 2010 as amended).
- Under section 22 of the Children Act 1989, the local authority has a **duty to safeguard and promote the welfare** of all looked after children.
- **Care orders**, under which parents and the local authority share legal parental responsibility, are made under section 31 of the Children Act 1989.
- Where a child is accommodated under a section 20 **voluntary agreement**, the parents have sole parental responsibility.
- Parental responsibility can be lost through adoption or other parental orders.

Parental responsibility

The [Children Act 1989](#) introduced the concept of **parental responsibility**. This is automatically given to a mother from birth and to both parents if married or in a civil partnership at time of the birth. From December 2003, under changes brought in by the Adoption and Children Act, fathers who are unmarried at the time of the birth have parental responsibility if they are registered on the birth certificate. Fathers can also acquire parental responsibility through a parental responsibility agreement with the mother or by obtaining a parental responsibility order from a court.

Other parties may acquire parental responsibility, for example under special guardianship (SGO) or child arrangement orders.

Parental responsibility includes certain rights and duties but is guided by the best interests principles.

The Coram Children's Legal Centre has published a [briefing on parental responsibility](#).

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Delegated authority and support for birth parents

- **Delegated authority:** The Delegation of Authority: amendments to the Children Act 1989 guidance and regulations (DfE, 2013) covers the requirements concerning delegation of authority to foster carers to make decisions relating to aspects of the child's normal life.
- The [Adoption and Children Act 2002](#) includes provision for **support and services to be provided for birth parents** and plans for how contact will be arranged during the process of adoption and after their legal role of parent has ended.

Parents of looked after children

There are two key areas of involvement for parents and families of looked after children:

- 1) **Decision making and reviews:** Under the [Adoption and Children Act 2002](#), the independent reviewing officer has a duty to ensure parents and relatives are consulted during the review process.
- 2) **Contact:** The [Children Act 1989](#) set out a 'presumption of reasonable contact', which was arguably seen as a parental right in case law but should be understood in the context of best interests of the child. The [Children and Families Act 2014](#) requires local authorities to ensure contact is consistent with safeguarding and promoting the child's welfare.

The impact of fostering and adoption on birth families

Most parents whose children have been removed experience feelings of bereavement, sadness, grief and anger. For most parents, the loss of identity of one's self as a parent is hard to come to terms with and changes in role are difficult to accept (Schofield and Stevenson, 2009; Neil et al, 2010). This is true for birth families of children who have been adopted, as well as those whose children are in foster care.

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Birth parents vary in the extent to which they feel a sense of responsibility or blame for their children entering care. Levels of anger and any subsequent sense that it is a good thing for the child will vary also (Schofield, 2009). For example:

- some parents accept their responsibility and the child's need for care, appreciate the work of the child's foster carer and value social work support
- others may be angry with professionals at the time, but come to accept some responsibility for the problems and see the benefit of care
- some parents who accepted the need for care at the time may now talk more critically of having needed more support, and think the child should now come home
- some parents blame the child for having been difficult to care for and needing to be in care
- and others were angry at the time, blamed social workers and did not accept the child's need for care – and they have not changed since. (Schofield, 2009)

For parents whose children have been adopted, the adoption process may compound pre-existing parental difficulties. Their lives may spiral out of control and they are likely to experience intense emotions, such as despair and rage (Neil et al, 2010). Any work with birth parents needs to acknowledge these emotions and the impact they may have on their behaviour and decisions, as birth parents may not be able to contain their anger enough to take in information or participate in important meetings.

Schofield and Ward (2011) use the concept of cognitive dissonance (ie the holding of contradictory beliefs or ideas) to describe how birth parents can be psychologically split – for example, 'I may still legally be a parent but I am not in reality' or 'I have tried my best to be a good parent and I love my children but they have suffered while in my care'. In order to mediate the emotional distress that contradictory feelings and thoughts create, a person often develops an attitude or story that enables them to rationalise what has happened – in this case, to cope with the separation from their child or children.

Some examples expressed by parents during the process of their child being taken into care might include:

'I am a good parent ...

- *... because I was not to blame for my child coming into care (my partner or the social worker was to blame)*

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- ... *because I always loved my child, even when we had problems or when I was in prison*
- ... *compared to some other parents, who really hurt their children*
- ... *but my child was too difficult for even a good parent to manage.'*

Expressed since the child had been in foster care:

'I am a good parent ...

- ... *because I accept that foster care is best for my child and support the placement and the carers*
- ... *because I have made positive changes to my life, such as giving up drugs*
- ... *because I am raising other children successfully*
- ... *because I remain in a constant state of anger and keep fighting to get my child back.'*

Engaging birth families

Birth families need to be engaged with the decision-making and care-planning process from the outset (Boddy et al, 2013). This should include not only birth parents but also (where appropriate) siblings, grandparents and extended networks.

Many parents of looked after children have had troubled and insecure attachments in childhood. They are also likely to have experienced a range of problems such as poverty, relationship difficulties, substance misuse or poor mental health (Schofield and Stevenson, 2009; Neil et al, 2010). Further difficulties arise if birth parents feel that social workers represent the 'authorities' and are fearful that their children will be taken into care if they ask for help (Schofield et al, 2011; Easton et al, 2013).

These complex needs can lead to particular difficulties for services trying to engage with birth parents. One study of neglected children found that social workers had difficulties in engaging 69 per cent of mothers and half of the father figures (Farmer and Lutman, 2012). Social workers who are reliable and able to establish a constructive relationship with birth parents can help reduce some of the tensions and encourage the development of constructive relationships between birth parents and their children or children's carers (Schofield and Stevenson, 2009).

Interviews with parents show they appreciate social workers who are able to listen and are 'straight-talking' and honest about their problems. 'Practitioners who find it difficult to break bad news or who encourage parents to be over-optimistic about their progress are not so highly valued' (Davies and Ward, 2012). Birth families say they want involvement, information and understanding (Schofield and Ward, 2011).

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This requires a child and family-centered approach (Boddy, 2013) within which an understanding of each other's perspectives is integral to working practice. It also requires a culture of active listening, empathy and respect that is promoted and modelled by the core team.

There is generally a presumption that children who have been placed in care will be reunified with their parents (Farmer and Lutman, 2012). Before a child returns home social workers need to set out clearly:

- the standards expected of parents during reunification
- the timescales for changes to be made
- the consequences if standards are not maintained
- a clear contingency plan that is acted upon if changes are not forthcoming. (Farmer and Lutman, 2012)

Purposeful social work activity is important for successful reunification (Biehal, 2006). These are key skills that social workers need for working successfully with families:

- taking time and being persistent in developing a relationship with the family
- inter-personal skills
- being open and honest and having the confidence to say when behaviours are not acceptable
- developing the family's trust
- being non-judgemental
- helping to motivate and incentivise families
- setting goals that are realistic and achievable
- being available and flexible. (Easton et al, 2013)

Examples of ways of working with resistant families can be found in the Research in Practice briefing: [Engaging resistant, challenging and complex families](#)

Relationships between birth families and foster carers/adopters

'We did our best to keep up contact although it was difficult. It stopped the children having fantasies about their parents, as inevitably they let them down in some way.' (foster carer in focus group discussion RiP/AfC and TACT for DfE Fostering and Adoption project November 2013)

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Foster carers, adopters and birth families will, inevitably, have mixed or difficult feelings about each other. The foster carer's or adopter's primary task is to care for the child, although the strength of the relationship with the birth family is likely to have an effect on the child's well-being (Neil et al, 2010; Sinclair, 2005) and can potentially impact on the success of the permanence plan. Attitudes of the adoptive parent toward the birth parent are thought to directly affect the child's formation of self-concept and identity (Silverstein and Roszia, 1998).

The impact of working with birth families

Empathy 'is our ability to identify what someone else is thinking or feeling and to respond to their thoughts with an appropriate emotion' (Baron-Cohen, 2011); it can also leave us personally upset. This 'vicarious trauma' (NSPCC, 2013) and strong feelings of fear, revulsion and anxiety are not uncommon among those who work within child protection and care, and these powerful emotions can trigger psychological defences like detachment or cynicism. Becoming defensive is natural when faced with resistance, but a combination of emotional intelligence and a directive approach (both elements of Motivational Interviewing – Miller and Rose, 2009) may help to keep essential lines of communication open.

Professional debriefing after stressful incidents has been found to be helpful (Brown and Bourne, 1996) and there is also a developing body of literature supporting the role of positive emotions in sustaining mental health and well-being in the human professions (Ballat and Campling, 2011). Mindfulness (Stahl et al, 2010) and Compassionate Mind Training (Gilbert, 2009) promote ways of thinking that develop empathy and compassion for oneself as well as others. (See the Briefing 7 on ['Leadership and supervision'](#).)

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Care Planning

- Different pathways through the care system affect the purpose and goals of working with families:
 - permanent return to birth parents
 - shared care arrangements
 - remaining within the looked after system
 - legal permanence through adoption, special guardianship or residence order
- Whatever the route to permanence, skilled work with birth families is essential either to ensure the safeguarding and wellbeing of the return, or to support families to adjust to their changing role

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Legal Context

- **1989 Children Act Volume 2** - *requirement for local authorities to work in partnership with parents*
- **Care Order section 31 1989 Children Act** - *parents and local authority share legal parental responsibility*
- **Section 20 1989 Children Act** - *accommodated with parental agreement parents have sole parental responsibility*
- **Section 22 1989 Children Act** - *local authority has duty to safeguard welfare of all LAC*
- **Definition of parental responsibility** - *automatically given to a mother from birth and both parents if married or in a civil partnership at time of the birth or treatment. It includes certain rights and duties but it is guided by the best interests principles*

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Impact Fostering/Adoption on Birth Parents

- Most birth parents have feelings of bereavement, sadness, grief and anger
- Loss of identity of one's self as a parent is hard to come to terms with for most parents
- For parents whose children have been adopted, the adoption process may compound pre-existing parental difficulties and their lives may spiral out of control
- Work with birth parents of adopted children needs to acknowledge their intense emotions and the impact on their behaviour - they may not be able to contain their anger enough to take in information or participate in meetings

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Engaging Birth Parents

- Need to engage (where appropriate) birth parents, grandparents, siblings and others in care planning process
- Many parents of LAC have had troubled attachments in childhood and are likely to have experienced a range of problems
- These complex needs can lead to difficulties with services engaging with birth parents

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Facilitating Engagement with Birth Parents

- Birth parents appreciate social workers who are able to listen and are 'straight-talking' and honest about their problems
- "*Practitioners who find it difficult to break bad news or who encourage parents to be over-optimistic about their progress are not so highly valued*" (Davies and Ward, 2012:84)
- Birth families want involvement, information, and understanding. This requires a culture of active listening, empathy and respect

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Facilitating Engagement with Birth Parents

- Before children return home social workers need to clearly set out:
 - the standards expected of parents during reunification
 - the timescales for changes to be made
 - the consequences if standards are not maintained
 - a clear contingency plan which is actioned if changes are not forthcoming. (Farmer and Lutman, 2012)

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Keys skills for engagement

- Taking time and persisting in developing a relationship with the family
- Having the necessary inter-personal skills
- Being open and honest and having the confidence to say when behaviours are not acceptable
- Developing the family's trust
- Being non-judgemental
- Helping to motivate and incentivise families
- Setting realistic and achievable goals
- Being available and flexible (Easton et al, 2013)

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Working with and supporting birth families

Methods

Suitable for self-directed learning or reflection with a colleague or supervisor.

Learning Outcome

Review your approach to working with birth families who are at risk of having their children taken into care.

Time Required

Two sessions of 45 minutes

Process

- At what stage do you involve the birth family in decision making and planning?
 - How might you secure earlier involvement?
- What inter-personal skills do you need to communicate with vulnerable and challenging adults?
- What steps do you take to alleviate parents' fears of asking for help because of the belief that their children will be taken into care?
- What steps do you take to provide early assessment and help to families who are at risk of their children being taken into care?
- How do you go about being open and honest with birth parents about the consequences if their parenting behaviour does not change?
- What methods do you use to set clear and time-limited written agreements with parents and proactively monitor compliance with these?
- How do you engage challenging and resistant families and challenge unacceptable parental behaviour?
- How do you ensure that birth parents understand the implications for children of being adopted or fostered?
- How do you support birth parents through care proceedings and after adoption?

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Working in partnership with birth parents

Methods

Suitable for self-directed learning or reflection with a colleague or supervisor.

Learning Outcome

Review your approach to working in partnership with birth parents and the role birth parents play in supporting the child's plan for permanence.

Time Required

Two sessions of 45 minutes

Process

Think about working in partnership with birth parents and the role birth parents play in supporting the child's plan for permanence.

- How can you explain appropriate delegation to parents who are dealing with loss and feelings of exclusion?
- How would you approach partnership work in the different contexts of a voluntary arrangement under section 20 and a care order made under section 31?
- How would you manage a conflict between the birth family and the foster carers – for example, about how late the child can stay out at night?
 - Would you respond differently if a long-term or permanent foster placement was the goal rather than reunification?
 - What does this tell you?
- Unlike adoption, when foster placements are confirmed as permanent there is no legal requirement for support plans for the birth parents.
 - What role does the social worker have here?
 - What impact will lack of clarity about parental role as a parent have on the birth family?
 - How can you facilitate understanding of the boundaries and expectations of their changing role?
- How can you organise supervised contact so that it is a positive experience for both parent and child?
- Unregulated contact is likely to cause significant stress to foster carers, but is highly valued by birth parents whose contact is limited.
 - How can both social workers work together to help the foster carer manage this situation?
 - What kind of training and support might carers need?

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The impact of fostering and adoption on birth families

Methods

Suitable for self-directed learning or reflection with a colleague or supervisor.

Learning Outcome

To review the factors that influence our sense of empathy.

Time Required

30 minutes

Process

Grieving the loss of a child into care has been described as ‘disenfranchised grief’ (Doka, 1989) – i.e. grief that is not culturally accepted or acknowledged by society.

Think of a recent case and answer the following questions:

- How difficult is it to feel empathy for someone who has caused or allowed their child to come to harm?
- What might mediate or influence these feelings?
- How can we maintain empathy for the individual?

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Relationships between birth families and foster carers/adopters

Methods

Suitable for self-directed learning or reflection with a colleague or supervisor.

Learning Outcome

To review the factors that impact on relationships between birth families and foster carers/adopters and identify actions that can support this.

Time Required

30 minutes

Process

Think of a number of cases and answer the following questions:

- What factors might prevent a constructive relationship developing between foster carers and birth parents over time?
- What formal and informal interventions might help this?
- What differences are there if the plan is for reunification as opposed to long-term foster care or adoption?

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The impact of working with birth families

Methods

Suitable for self-directed learning or reflection with a colleague or supervisor.

Learning Outcome

To reflect on how you maintain empathy with parents and identify ways that you can maintain a professional focus.

Time Required

30 minutes

Process

Reflect on your own practice and answer the following questions:

- How do you know if you are losing empathy with parents?
- What thoughts and feelings do you have?
- How can you regain your professional or human focus?
- Whose support do you need to help you maintain a professional focus?

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Meeting Needs

Cognitive Dissonance (holding contradictory ideas or ideas)

Methods

Suitable for self-directed learning or reflection with a colleague or supervisor.

Learning Outcome

To understand birth parents' perspectives.

Time Required

30 minutes.

Process

Read the summary of the concept of cognitive dissonance and its impact on birth parents.

1. On your own or with a colleague/supervisor reflect on whether there are similar narratives being expressed by families you work with?
2. What cognitive dissonances/contradictions are present in your own beliefs and feelings about a case you are involved in?
3. How do you rationalise this?

Summary

Schofield and Ward (2011) use the concept of **cognitive dissonance** (i.e. the holding of contradictory beliefs or ideas) to describe how birth parents can be psychologically split, for example, 'I may still legally be a parent but I am not in reality' or 'I have tried my best to be a good parent and I love my children but they have suffered while in my care'.

To mediate the emotional distress that contradictory feelings and thoughts cause, a person usually develops an attitude or a story to enable them to rationalise about what has happened (in this case to cope with the separation from their child/children).

Read through these examples of cognitive dissonance expressed by parents in the Schofield study:-

Expressed during the process of the child being taken into care

I am a good parent:

- *because I was not to blame for my child coming into care (my partner or the social worker was to blame).*
- *because I always loved my child, even when we had problems/I were in prison.*
- *compared to some other parents, who really hurt their children.*

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- *but my child was too difficult for even a good parent to manage.*

Expressed since the child had been in foster care:

I am a good parent:

- *because I accept that foster care is best for my child and support the placement and the carers.*
- *because I have made positive changes to my life, such as giving up drugs.*
- *because I am raising other children successfully.*
- *because I remain in a constant state of anger and keep fighting to get my child back.*

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Information and Involvement

Methods

Suitable for self-directed learning or reflection with a colleague or supervisor.

Learning Outcome

To improve communication with birth families.

Time Required

30 minutes.

Process

Read the summary of what birth families want from their social worker and reflect on how this impacts on a case that you are involved in where there are challenges in the relationship with a birth family.

On your own or with a colleague/supervisor come up with at least 2 ways you could improve the following:

1. Giving information to the family/parent about their child (it might be the method of the communication or the type of information that you can improve).
2. Supporting the birth family or parent to successfully renegotiate their role in respect of their child and their placement.

Summary

Birth families have named aspects that they find difficult in their relationships with social workers including:

- Continuity - social workers moving on when they had just built a relationship.
- Communication and relaying of information; for example not always getting accurate or up to date information about their child or about the things which are important to them. Leaving messages for the social worker that don't get passed on. Getting conflicting information from different professionals.
- Not having their view taken into account, the power imbalance, feeling that social workers cannot fully understand the impact of the loss on them, feeling that they are not trusted, social workers having fixed views about them or their families.
- **What they found helpful** - social workers being available and attentive and listening to them, honesty, getting regular information, social workers who understand them and their grief, who are approachable and help them to feel relaxed.
- Birth families have said they want **information, involvement and understanding** from social workers (Schofield 2010).

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Making Sense of Repeated Patterns

Methods

Suitable for a small group discussion in a team meeting or as part of a facilitated workshop. Prepare the extract from the newspaper below as a handout or use the full article from the website. Put the definition of disenfranchised grief on a flipchart along with the questions/areas for group discussion.

‘Grief from the loss of a child into care has been described as disenfranchised grief i.e. grief not culturally accepted or acknowledged by society’ (Doka, 1989).

Learning Outcome

To understand and respond to birth parents’ perspectives.

Time Required

30 minutes.

Process

Give the group the extract from a newspaper article in the Daily Telegraph on 30 July 2009.

Ask the group to spend 30 minutes discussing the following:

1. Their initial response.
2. How easy or difficult is it to feel empathy for the parents?
3. Why might this woman keep becoming pregnant?
4. To what extent does the concept of disenfranchised grief have relevance here?
5. What resources or services may be available in order to meet the parents’ needs?
6. What strategies and approaches are needed to ensure that planning with the parents is done in a partnership way to influence positive outcomes for the unborn child and the parents?

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Extract from Daily Telegraph on 30 July, 2009

Mother whose 13 children were taken into care is pregnant again

Theresa Winters, a woman who has already had 13 babies taken into care, is pregnant with her 14th child - and says she will keep on trying for more until she is allowed to keep one.

Miss Winters, 36, has not been able to keep any of her offspring beyond the age of two, but insists she deserves a second chance at being a mother.

She admits that social services had made the right decision in removing her first 13 children because she had neglected them, but claims to have "calmed down" now.

Miss Winters, who was taken into care herself as a teenager, says social services should be helping her and the father of 11 of her children, Tony Housden, to achieve their "dream" of becoming a family.

She told the Daily Mail: "We feel like social services are treating us like murderers when we haven't done anything.

"All we want to do is be a family and look after our children, it is very upsetting.

"We want help from social services, but they won't help us."

The parents have been told they cannot keep their children because of "concerns about severe neglect, lack of parenting ability and the consequent risk to any child in their care".

Miss Winters admits: "I was a bit aggressive, but never towards the kids. In one sense they were right to take them away, I was young. They looked at it thinking that if I was aggressive towards social services, I'd be aggressive toward my kids."

However, she insists she is a changed woman.

<http://www.telegraph.co.uk/women/mother-tongue/5935665/Mother-whose-13-children-were-taken-into-care-is-pregnant-again.html>

Topic 16

Working with birth parents

Exploring and overcoming challenges

Methods

Suitable for a group discussion in a team meeting or as part of a facilitated workshop.

Learning Outcome

To overcome challenges in working with birth families.

Time Required

20 minutes.

Process

1. Ask the group to identify the factors that make it difficult or challenging to work with parents and record them on a flip chart (10 minutes).
2. Ask the group to identify the approaches that help to overcome difficulties or challenges? (10 minutes).
3. Record responses on a flip chart. You may find it helpful to keep the flipchart as a reference for any exercises which explore birth parents' perspectives – there will be parallels and differences which are worthy of exploration.

Topic 16

Working with birth parents

Working with Resistance

Methods

Suitable for self-directed learning or reflection with a colleague or supervisor.

Learning Outcome

To understand and explore ways to work effectively with resistance.

Time Required

30 minutes.

Process

1. Think of a case where there are challenges in the relationship with a birth family.
2. Read the summary on resistance and reflect on how it relates to a case that you are involved in.
3. What responses could you give to the family members that are directive but which combine emotional listening and empathy?

Summary

Child and family social work is often characterised by resistance from parents who, for all kinds of reasons, need to keep you at bay, protect their secrets, and avoid you having contact with their children. This often manifests itself in passive non co-operation (where the client is either emotionally absent or disengaged in interviews, constantly out when you call or misses/ appears to be confused about appointments), disguised compliance (appearing to cooperate to keep you happy, but not in any real, genuine way), active disagreement or threatening behaviour, aggression and violence.

Attack is, of course, often the best form of defence and denying/minimising /deflecting statements are all different forms of this.

Research by Forrester et al (2008) suggests that, faced with this kind of behaviour, child welfare practitioners often respond in a confrontational or threatening manner and that all their usual empathic listening skills totally desert them. This is generally due to the stress and anxiety experienced when you sense that someone is lying to you or withholding crucial information – the more you feel this, the harder you push and the more resistant they become. It is then all too easy to get into an argument, which will inevitably generate some of the resistant reactions outlined below.

We then become defensive and argumentative in return. This then achieves the desired aim from the client's point of view – keeping you away from the real issues.

Understanding and accepting resistance as normal leads to the development of more effective communication skills, combining a 'relationship-based' or person-centred philosophy with a directive (as opposed to confrontational) approach. Research suggests that this combination of elements, drawn from Motivational Interviewing, does not result in any loss of focus on the child and increases skills in

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Working with birth parents

dealing with challenging and complex interviews (Forrester et al 2008). Getting under the resistant statement, connecting with the emotion behind it and constructing a response that combines 'emotional listening' with empathy not only challenges clients' expectations of what you will do but releases you from the confrontational clinch.

Topic 16

Working with birth parents

Working with family members

This exercise has been adapted from the Fostering Now Fostering Service Development Exercises¹.

Methods

Suitable for a group exercise in a facilitated workshop.

Learning Outcome

- To enable practitioners to analyse areas of practice relating to the involvement of families.
- To empathise with family members who lack power.
- To explore processes for promoting involvement.

Time Required

90 minutes including:

- 20 minutes to read the case study and consider the questions,
- 30 minutes to role play a meeting,
- 30 minutes feedback in role,
- 10 minutes summarising key learning points and actions.

Process – Role-play of a meeting of the team around the child

Introduction

Some [parents] may feel a sense of relief. They may have been at the end of their tether. Even in these cases, however, there are likely to be mixed emotions, feelings of loss, a sense of failure, a worry about how the event can be presented at school or to the neighbours, a concern about how their child may do when away from them and about whether he or she will cease to love them or fail to return.

A quarter of the children already knew their carers. Where they did not, pre-placement meetings took place in only half the cases. The parents (or at least the mothers, for social workers rarely worked with fathers) welcomed these, although some felt ill-prepared, inadequate or excluded, or that decisions had been made prior to the meeting. If they did not know the foster carers, they rarely met them in advance, although most would have liked to do this.

Fostering Now: Messages from Research (Sinclair 2005: 61-62)

Sharing the task of caring for children is not easy; parents and foster carers often approach the parenting task differently, leading to tensions in the relationship. The research suggests that acknowledging the feelings and views of parents, and actively involving them in the placement, can be a very positive step.

For this part of the exercise, use the case study for Dillon or a scenario that addresses issues that are relevant to the team or group.

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Working with birth parents

Activity set up

Allocate the following roles to members of the group; parents, foster carer, social worker and child/young person. Participants should then go into groups so that each of the roles is represented. Where there are numbers that aren't divisible by four then add in roles e.g. manager, supervising social worker etc.

1. Participants should read the case study for Dillon or their preferred scenario.
2. Ask each group to consider the following questions according to their role:
 - As the parent/foster carer/social worker/child or young person, what do they feel?
 - What do they want to say at the meeting to the social worker/foster carer/parent/child or young person?
 - What difficulties do they face in this situation?
 - What do they need in order to be able to participate in the meeting?
3. Each group should then role play a meeting with the social worker as the chair and participants presenting their views and feelings to the meeting.
4. After the 'role-play', take feedback from the participants 'in role'.

Questions to consider during the feedback session

- Where was power located in the meeting?
- Was the voice of the child or young person heard?
- Was the voice of the parent heard?
- Were issues of identity and diversity addressed?
- Was there an acknowledgement of the parent's feelings, such as hostility, anger, sadness, distress, guilt?

Learning points to focus on and draw out

- Understanding the impact on the child of their parent's feelings.
- Giving permission for views to be expressed.
- The impact that a lack of information can have.
- Clarifying how the parent can be involved.
- The impact of a social worker's use of power.

At the end of the feedback, make sure you take participants out of role. You should then summarise the practice points for involving family members, before ending by asking all participants to identify one thing they have learnt from the session and one thing that they will do differently in the future.

ⁱ Research in Practice (2005) Fostering Now: Fostering Service Development Exercises