Compassionate, Safe and Rigorous Child Protection Practice with Biological Parents of Adopted Children

There is a worldwide trend towards re-energizing the use of adoption as a tool of child protection, primarily designed to ensure that children do not languish in care. This paper poses the question: does this trend obscure the rights of relinquishing parents? By inquiring into a specific case, and reflecting on the themes surrounding this practice, the authors suggest that rigorous practice, which attends to the permanency needs of the child, is possible while simultaneously being responsive to the human rights of the biological parents.

Key Words: adoption policy; risk assessment; partnership; child protection

Adoption as an Instrument of Child Protection Practice

Historically, adoption has been utilized in all English-speaking developed countries as a long-term solution to situations where parents were deemed unable to properly care for their children. Beginning in the 1970s, space opened up for questioning the efficacy of adoption practices within the child protection discourse, with the result that many countries moved away from using adoption as an instrument of child protection. The reasons for this were various, but certainly include:

- Activism on the part of indigenous peoples, challenging the colonizing impacts of child welfare practices (Department of Social Welfare, 1986; Human Rights and Equal Opportunity Commission, 1997)
• Greater awareness of the impact of adoption on relinquishing mothers (Winkler and van Keppel, 1984; Jones, 1993)
• Concerns about long-term outcomes for adoptees (Brodzinsky, 1993)

More recently, the tide has turned once again towards increasing utilization of adoption within social services. This trend has come about primarily because of a concern that child protection services should prioritize the permanency needs of children over treatment services to parents seen to be resistant or untreatable (Gelles, 2000) and as a means of reducing the drift of children within the care system. This shift in social policy is being lead by the US and UK. The Adoption and Safe Families Act, 1997 and the ‘Prime Minister’s Review of Adoption’ (Performance and Indicator Unit, 2000), alongside strong national permanency targets in both countries, have significantly increased rates of public adoption (DfES, 2003; Adoption and Foster Care Analysis and Reporting System, 2005). Proponents of this trend, supported by a considerable body of research, believe that it is possible to achieve ‘good quality adoption’ (Rushton, 2004, p. 102) that addresses the earlier concerns. To this end, two of the most significant changes to current adoption practices involve creating greater openness within the ‘adoption triangle’ and endeavouring to deliver adoption placements that match for kin or culture.

In this paper, we want to explore the capacity for a child protection system that utilizes adoption to be open to parents who have already relinquished children and are involved in an adoption assessment regarding subsequent children. Howe (1998) observes that in issues of adoption ‘we need to handle with care both empirical and moral certitudes’. However, we also know that once professional judgements are made about a child protection matter, subsequent information tends to be organized to confirm the original judgement (Munro, 2002). These judgements, particularly when strongly negative, tend to evolve into an unquestioned and entrenched part of the received wisdom of a long-term case (Teoh et al., 2003; White, 2003).

The demonization of parents whose rights have been terminated can be so strong that no new assessment is undertaken when they have a further child. This was a relatively common procedure in earlier adoption practices; for example, many Australian aboriginal ‘stolen generation’ adults have found that their removal papers are word-for-word identical to the reports of older siblings, excepting that their name was inserted in whited-out spaces. Irrespective of race, adult adoptees who have this experience often feel that their own identity and circumstances were erased and made irrelevant by authorities who did not take the time to treat their situation as unique. Relinquishing parents express similar feelings in the
numerous self-help websites that can be found worldwide (for example, http://www.angelfire.com/or originsnsw/).

The English and American systems are committed to increasing permanency options for children through the use of adoption. Our concern here is to increase the likelihood that the system operates compassionately for returning, relinquishing parents, since we are aware of parental rights of subsequent children being terminated based on assessments of earlier children, in current cases in both the UK and US. To our way of thinking, if social services can deal justly with the returning population, this would also be a significant indicator of fairness for first-time parents.

Case Example

To explore this issue further and to ground the discussion in the realities of day-to-day practice, we want to draw upon a case example in which the biological parents of seven adopted children, whom we shall call ‘James’ and ‘Pauline’, were able, with professional involvement, to successfully retain the care of the eighth child, ‘Angie’. This is an English example, where we have assigned pseudonyms for the family members, the worker and team leader to protect the family’s privacy. The publication of this example is undertaken with the full support of the parents and social services department involved. The case example is explored through interviews we undertook with James and Pauline, the primary access and assessment social worker, whom we shall call ‘Ruby’, and her team leader, ‘Maddy’. Our aim here is to draw lessons from the collaborative, grounded inquiry undertaken with these key players, hoping to contribute to the development of compassionate practices that can avoid some of the excesses of past adoption policies.

Pauline and James moved across England to live with Pauline’s mother during the pregnancy of their eighth child because they believed they would not have any chance of keeping their baby in the previous county. Following the removal of their first four small children, James and Pauline’s fifth, sixth and seventh children were each removed at birth, or shortly thereafter, with no new assessment undertaken. Pauline and James were very aware that they were at risk of losing the eighth child and, at the encouragement of Pauline’s mother, made contact with social services in the new borough before an investigation was instigated through other sources.

About receiving this case, the social worker Ruby stated:

‘I was quite apprehensive. The fact that the family had had seven children previously removed was quite daunting, to have to then assess their capacity to parent this unborn child.’
Before starting the initial assessment, Ruby visited James and Pauline at their home, hoping to create with them the beginnings of a working relationship. Ruby was mindful that Pauline and James were likely to be highly anxious that social services would remove the next child, no matter what. James and Pauline were indeed very nervous, but stated they were impressed that Ruby immediately began to demonstrate to them that she would be honest and do nothing behind their backs.

Ruby requested all the files relating to the earlier children and received a large box of written material. Knowing she would not have time to digest this material during her workweek, Ruby took a weekend to read it all. The social services agency in which Ruby works uses the signs of safety assessment process (Turnell and Edwards, 1999) as its standard risk assessment procedure in cases involving at-risk children, and so Ruby organized the information by summarizing the harm, dangers and strengths relating to each child on seven one-page signs of safety forms.

The files presented a long history of the first four children being left alone for long periods, fed poorly and irregularly, suffering chronic diarrhoea and sickness, left in the care of adults convicted of child sexual abuse and falling significantly short of their developmental milestones. There were also issues surrounding James, who had been severely and repeatedly abused by members of his family from early childhood. This often left James depressed, dependent and childlike and unable to attend to the children’s needs when they were in his care.

The signs of safety risk assessment process asks the professional to consider strengths as well as dangers, and on the constructive side of the equation, Ruby was able to document that when Pauline and James were caring for their first child only, some professionals thought their parenting was acceptable. The couple also did not give up hope of being involved with the children; Pauline in particular maintained regular contact with the first four before the adoptions occurred. The fact that the couple were attempting to start a new life in a new area and had approached social services of their own volition also stood out as important strengths.

Ruby was careful to write the assessment summaries in straightforward language so she could work through ‘the forms’ together with Pauline and James. Ruby observed:

‘Summarizing it this way, made it very clear for me where I was coming from, so I was able to be very clear and open with Pauline and James about the concerns I saw and that meant they knew what I knew. This gave them an opportunity, which they felt they had never had, to reply back to those concerns and to challenge some of the information they felt wasn’t true. Doing this, I think they felt able to take some ground back for themselves from social services.'
‘To me this was really important because, when I was reading the court reports for the fifth, sixth and seventh child, they were all the same, except they’d just changed the names. It was really terrible; because of what happened to the first four the couple weren’t going to be allowed to have any children. I felt that more opportunity had to be created to see if things had changed.’

The strongest message from the interviews with Ruby, James and Pauline was that each felt the relationship they created was the cornerstone of working together. When asked how this relationship was created, all three spoke about Ruby paying careful attention to many small things such as returning phone calls promptly, doing what she said she would do, making regular visits, being on time and keeping Pauline and James updated on each case development. Underpinning this attention to detail, Ruby observed:

‘I try to be as ordinary as possible. I’m professional, yes, and I need to be clear about why I’m there. I’m not there to be friends but that doesn’t mean I can’t be friendly and treat them with respect.’

When asked, ‘What was different about working with Ruby?’, Pauline responded:

‘Ruby was honest. Ruby said I’m not gonna stand here and tell you you’re gonna get this baby home. She says to us, “I’m saying we’re gonna try and have the baby at home” . . . She said there was the choice there of having the baby at home and there was a choice there of the baby going into care . . . At least Ruby didn’t say right, we’re gonna let you have the baby, baby were born, and they took the baby away. Ruby was honest right the way through. She didn’t say one thing and do the other.’

The next step for Ruby and Maddy was to review the situation and decide what direction they would take. Ruby observed:

‘It was very difficult to make a decision about what we were going to do. I remember sitting down with Maddy and we were both nervous, because obviously Maddy’s got to justify that decision to people above herself. But at no point did I feel that they should not be given the opportunity. So we began from that point, thinking right, no matter what happens, these people will be given some sort of opportunity, be that in a residential assessment unit, the child going to stay with other family members, an assessment being undertaken in the community, or the child going into foster care.’

Ruby could not have pursued the work in this way without Maddy’s support and that of her colleagues. Collectively, they undertook a process to carefully think themselves into and through the risk management process that Ruby was engaged in.

‘I know Maddy ultimately takes responsibility for the decision but it was still a very hard decision for me. I remember nights lying at home thinking is this the right decision? What if the baby goes home and something tragic
happens? I was very, very nervous about it. Because it was a pretty worrying case Maddy had us look at the case as a team and as they became aware of the family, we went through this stuff together and that lessened my anxieties.

‘Maddy gets us to think through what we are doing and the risks we are taking very carefully. I’m not saying every child goes home, or we’d allow a child to stay in a home where something terrible is going to happen because that doesn’t happen, but to every degree there is some sort of risk in child protection work. Maddy challenges us and we challenge each other to be very clear about the risks we are taking, that’s our job really.’

Following the decision to give the couple an opportunity, Ruby began actively exploring possible options, keeping Pauline and James involved and informed as she proceeded. The direction the case would take crystallized when it was decided that Pauline and James would live with their baby in a residential unit for the first 3 months following birth. For Pauline and James, finding out that they would be given the opportunity to care for their baby and that their parenting would be assessed in the residential unit was a breakthrough moment:

‘Interviewer: Was there any incident that really stood out for you as important?
Pauline: Gettin’ to know that we were in the residential unit, weren’t it?
James: Waiting for that phone call, we didn’t know whether it was goin’ to be, you’re goin’ in or you’re not. When they rang up, the feeling was just unbelievable.’

During this time, Ruby also ensured that other professional and family supports were in place and introduced Pauline and James to the long-term worker who took over case management just before the birth.

‘Interviewer: So what happened so that they did keep the child?
Ruby: From what Pauline and James have said, I think they realized that this was probably their final opportunity. James had been very childlike himself but when they went into the residential unit, something must have happened that made him think, I need to get my act together here. The residential workers had said they thought Pauline could do it, but they were absolutely amazed about the transformation in James. He’s like a completely different person and he’s taken on a lot of responsibility as a father.
Interviewer: So any ideas what made the difference?
Ruby: I think nobody had ever believed in him. He’s somebody who, if you focus on the negatives, he buys into that because his whole life’s been so negative. I think what started to build within him, to make the changes, was that people complimented him. He loves compliments, he just completely lights up and he starts laughing if you say something nice about him. That’s just changed him in lots of ways, to the point where he’s able to look you in the eye and be confident of himself.’

The interviewer also explored some of this same territory with James and Pauline:
‘Interviewer: What were the assessment unit saying after the 3 months about James’s capabilities?
Pauline: Oh, he passed. If they hadn’t we weren’t going to come home with her.
Interviewer: And what was that like when they said he’d passed?
Pauline: It was great! He were crying and you don’t see that!
Interviewer: So what difference has it made for you, James, to have the opportunity to keep her?
James: I’ve proved that I can actually look after her now . . . She’s the only one, I’ve been able to [PAUSE] . . .
Pualine: Attach to!
James: Attach properly to. I’ve never been able to bond with the others.
Interviewer: What’s it like being able to attach and bond to Angie?
James: Well basically, it’s hard to explain. If she cries, I’m straight there.
Interviewer: Yeah?
James: It’s just a feeling you can’t explain. I wasn’t ever able to love the others properly like I can with Angie.’

Following the positive assessment from the assessment unit, Pauline and James took Angie home. At the time of writing this paper, Angie was almost two and a half and had reached all her developmental milestones ahead of normal schedule. Throughout most of this period, the couple remained on the child protection register and social services and other professionals continued to monitor the situation.

Themes

From the interviews with Ruby, Pauline and James, a number of themes became evident. First and most importantly, the practice was founded on a working relationship in which the parents felt understood and respected. The relationship then became the ground for the casework’s purposive focus, incorporating:

• An honest and rigorous focus on the concerns balanced by space to see strengths and changes in the parents
• Honesty by Ruby regarding the possibility of termination as well as the possibility of parental care
• Hope and a sense of opportunity for the parents
• Ongoing and careful attention by Ruby to the minutiae of sustaining the relationship in a situation where the parents were highly anxious

These, however, are not new themes; they have been identified as key aspects of constructive child protection practice elsewhere (Elliott et al., 2000; Farmer and Owen, 1995; Turnell and Edwards, 1999; Trotter, 2002; Turnell, 2004).

Rather than focus further on the frontline practice, what interests us here is the context that was created around the worker
and parents that enabled Ruby to work in this way. In many social service contexts, frontline workers perceive that this sort of constructive practice would be impossible because they feel constrained by demanding timelines and performance criteria and pressured by the anxiety and termination momentum that surrounds this sort of case.

To explore the context Ruby was operating in, we interviewed Ruby’s team leader, Maddy, about how she works to foster practice that combines rigour and compassion. From this inquiry we drew the following themes, each of which is exemplified with some of Maddy’s verbatim comments.

1. **Thoroughness**

   ‘Ruby was so thorough. I can’t tell you how many reports and court papers there were to read through, and she read every word of every one. So she’d heard the worst of it. And alongside the really bad stuff, she was able to find a list of safety factors that were compelling. After that, for us to have said, no we’re not going to give them a chance, would have been so clearly unjust. But it’s not about the parents getting custody. Right now we’ve got another case just like James and Pauline where we gave those parents every chance and every opportunity. Like Ruby, that worker got to know them, read everything, did the assessment and worked with them on it all. It took 4 months but it was the same process. After that we realized we just can’t do it, there’s too much risk for this couple to have the baby. So we’ve learnt to maintain this thoroughness as a team.’

2. **Using a shared risk assessment framework that evidences dangers, strengths and opportunities**

   ‘We have weekly team meetings where we use the signs of safety as the tool to focus on a case. In this process, the whole team works really hard to know the family and understand what’s going on. Everyone chips in with their worst fears, their best hopes and their optimism. The use of a shared framework that we can also then use with the families is energizing. It encourages creativity, it gives us a safe environment to challenge and appreciate practice and it builds cohesion and closeness within the team.’

3. **Managing anxiety**

   ‘I’ve realized it’s all about being able to evidence what you think and the decisions you make; it’s about rigour. The conversations we have in our team make me feel safe because we can evidence our decisions. I know things can still go wrong, but as long as we can evidence what we do, we’re fine. This shares the anxiety and leads to a much better, broader, stronger view. It shares the accountability, the risk. I know at the end of the day it comes down to my responsibility and that’s fine, but it’s the team all working together that gives us confidence to make our decisions.

   ‘In the previous county I worked in I went through a really horrific child death. There was panic. Senior people saying, we’re going to lose our jobs. I found myself responding, “What are you talking about? We’ve done nothing...’

‘In many social service contexts, frontline workers perceive that this sort of constructive practice would be impossible’

‘The whole team works really hard to know the family and understand what’s going on’
‘I’ve survived the worst thing that can happen to you in this job’

‘Falling back on the ‘safety zone’ of the earlier assessments’

‘Ability to maintain her composure in the face of anxiety with the lessons she learnt through enduring a previous death inquiry’

wrong, it’s our job, we know what we were doing”. We had criminal proceedings to deal with, the works. I realized, okay terrible things happen, but you can still do good things. So now in this team I know I’ve survived the worst thing that can happen to you in this job so I can offer them reassurance. I say to my team, “We don’t have to make a big drama out of something terrible”.

4. It’s about being as big as they can be

‘I try not to overmanage but to lead the team so the workers can be as big as they can be. I try to build confidence and competence by giving people their heads and by appreciating their good work. I provide the safety net if I feel they are missing something or making unsafe judgements, but it’s very rare that I intervene like that. This way they bring their creativity, their imagination to these ugly problems and that leads to better practice and to better relationship building.’

Situations in which parents who have previously lost their parental rights have another child are inevitably very notable cases in a child protection system and tend to create anxiety for the workers responsible. The pressurized environment of social services, alongside the inevitable high profile of these cases, creates significant momentum towards falling back on the ‘safety zone’ of the earlier assessments. As this example suggests, fostering a culture of systemic professional openness to returning, relinquishing parents requires careful attention to the processes used in assessing and working these cases.

Assessment in high-risk child abuse cases is usually a process that professionals enact at a distance from parents and families. More than this, there is an increasing tendency in the social services environment for the frontline worker to function as the information-gatherer and the supervisor to make the decisions behind the scenes. It is notable then that the access and assessment teams in this borough have elected to use the signs of safety assessment process that is designed to be undertaken openly and collaboratively with the parents. While this sort of participatory practice would be endorsed by most social workers, and while service recipients consistently say this is what they want in child protection services (Farmer and Owen, 1995; Dale, 2004; Dumbrill, 2006), it is the supervisory arrangements within the team surrounding Ruby that in our view created the context in which she could enact this aspiration. Maddy’s team leadership, which actively engages the practitioners in openly thinking through the risk estimation task, created a context wherein Ruby was better equipped to fashion a parallel participatory assessment process with the parents.

It is also notable that Maddy associates her capacity for this sort of leadership and her ability to maintain her composure in the face of anxiety with the lessons she learnt through enduring a previous death inquiry. This in our view is the sort of organizational and practice intelligence that is crucial to dealing well with complex
child protection casework but is also often undervalued and overlooked.

The processes that enabled Ruby to undertake the rigorous, compassionate and participatory practice cannot simply be mandated in organizational procedures or implemented through the prescription of a particular tool or model. The practice demonstrated in this example, and the participatory teaming, supervisory and decision-making arrangements that inform and stand behind it, point to the importance of fostering skilful frontline practitioners, within rigorous and collaborative work environments. Following the Laming Inquiry in the UK, there have been strong calls to increase the expertise, sophistication and decision-making capacity of frontline social services staff as the key to improving practice and avoiding errors (Parton, 2004; Reder and Duncan, 2004; Munro, 2005). To enact these directions undoubtedly requires resources and training; equally, in our view, it requires that careful attention be paid to the minutiae of what good social services practice looks like as a lived, enacted experience from the perspective of service recipients and frontline staff.

**Conclusion**

Despite attempts to enact current adoption policy in ways that address the failings of the past, Pauline and James’ case indicates that social services practitioners can still readily be swept along in the momentum of demonizing returning, relinquishing parents. In preparing this paper, we analysed performance data from UK and US governments regarding adoption (AFCARS, 2005; DfES, 2003) and found that both focus solely on data regarding the length of time children are in care. In the UK, this is viewed in terms of meeting the ‘best interest decision’ timeframe and of delivering quality social services.

We are not trying to argue against adoption, but rather arguing for the implementation of adoption policy that retains a rigorous watch on the permanency needs of children alongside compassion for relinquishing parents. It is interesting that there are no data gathered regarding the numbers of adoptions from parents who have already lost children and no monitoring regarding whether these parents received a new assessment when returning into the system. Implementing adoption policy that is both rigorous and compassionate is no easy task when a risk-averse, defensive culture tends to dominate casework and considerable national leverage is being placed behind increasing adoption targets.

With Ferguson (2004) and Weick (2002), we believe passionately that transforming social services in a time of late-modernity requires genuine engagement by the bureaucracy and the academy.
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with the lived, embodied wisdom of those at the frontline. Practitioners and service recipients have invaluable knowledges about how to make the system work that in our view are the missing ingredient in transforming social service practice.

In this paper, we have employed a process of grounded, reflexive inquiry to unearth, distil and utilize the wisdom of service practitioners and recipients. Our aim has been to point towards achievable means of delivering adoption policy that can not only meet managerial targets but is also more likely to meet human criteria of justice and fairness.

References


