

# Understanding recurrent care proceedings: Birth mothers, fathers and children, caught in a cycle of repeat public law proceedings

Cardiff University: CASCADE Event

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# Acknowledgements and Contact Details

- ✧ The Child and Family Court Advisory Service
- ✧ Nuffield Foundation
- ✧ Dr Bachar Alrouh (Full-time Research Fellow)

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# Project Website

Website:

<http://www.nursing.manchester.ac.uk/capps/>

Twitter:

[https://twitter.com/Recurrent CAPPS](https://twitter.com/Recurrent_CAPPS)

# Introduction

- Anecdotal concern about repeat care proceedings in England
- **Human and economic costs** of repeat losses to care
- What can we learn about **birth mothers, fathers and children** caught in this cycle?

# Establishing National Prevalence

## Value of the Cafcass dataset:

- Centrally held – electronic
- 100% Sample: multi jurisdictional
- Can be readily de-identified
- Can be restructured to answer research questions

# Observational Window (limitation)

- **Reliable data held electronically only available between 2007-2014 (calendar years/fiscal years)**
- **This window is sufficient to capture recurrence because repeat episodes follow in short succession**
- **But: will underestimate total number of cases, hence only allows statements of 'at least'.....**

**NB: Repeat removals – s.20 & private law options**

# Why start with birth mothers?

- The birth mother is automatically a party within legal proceedings
- In contrast, birth fathers are **not because they may/may not hold PR within the law**
- Risk of missing cases/further underestimating if we 'start' with fathers
- Women also invest their bodies in pregnancy and child-birth differently from men – hence there are gender specific issues in repeat pregnancy and infant removal in particular.....



# Removal at Birth

I lost one after birth in hospital on my own with no one around me, and I said “you can’t just take my baby”, and they were like “no, he needs to go into care”. I think they could have done things differently.

You go through a stage of mourning...I feel like I need more therapy now, not because of what I went through [as a child] but because of what I am going through now. You just want to kill yourself to be honest...

But .....I’m absolutely terrified now I’m pregnant with my fourth kid, I am absolutely terrified. Because so far they’ve been saying if you do your therapy you get to keep your kid, and now they’re telling me it depends what your therapist says.. Why do you let me get to a point half way through the pregnancy when I’m five months pregnant and its too late to do anything about it...

Being a Mum was the first thing I felt I’d been proud of in my whole life and they took it away. I was just left and then the depression sets in.

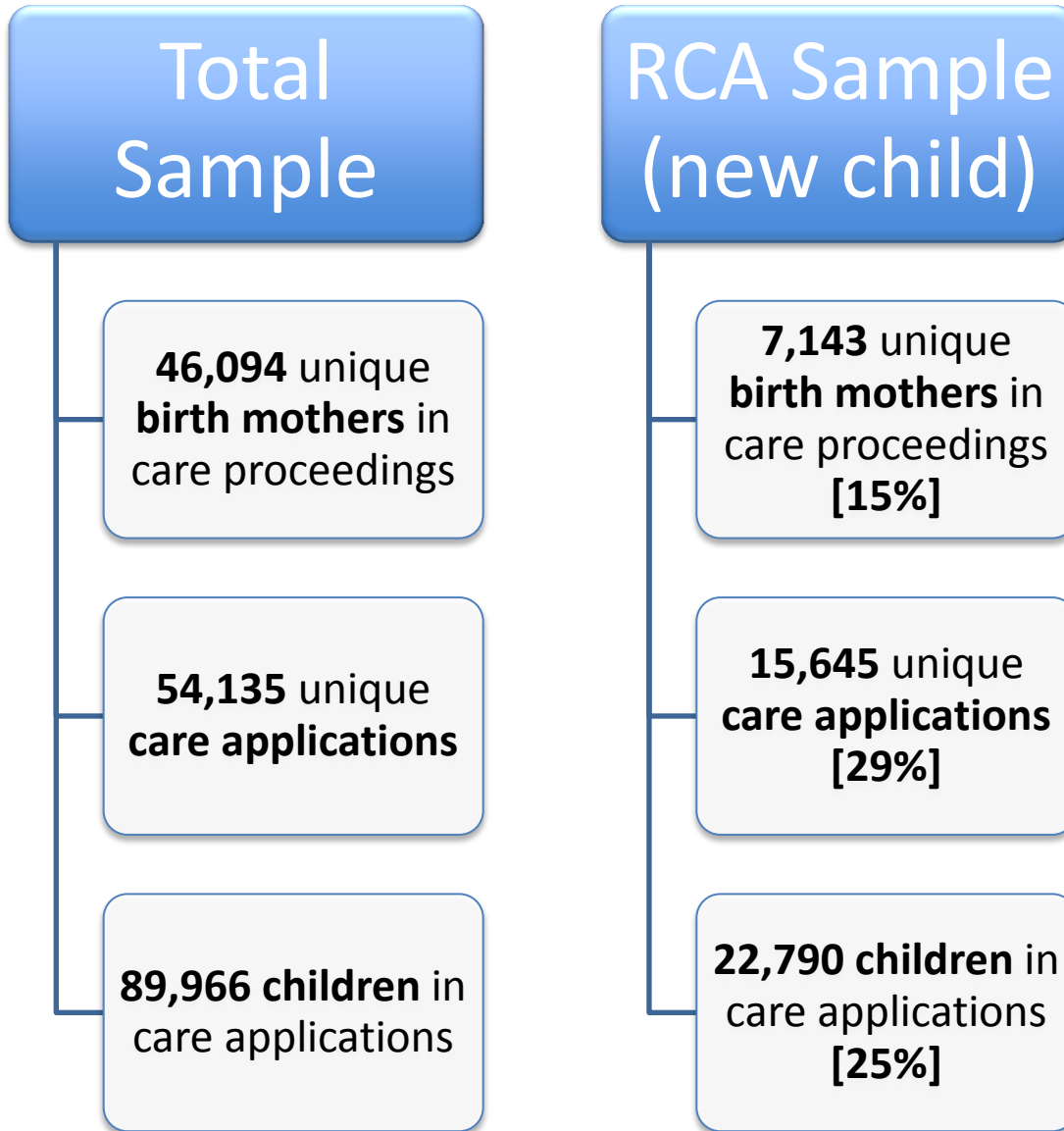




# Feasibility Study: identifying the recurrent sample

- **Step 1:** establish the number of care applications in **cases completed** between 2007-2013
- **Step 2:** identify **female respondents** who are mothers
- **Step 3:** eliminate cases that do not include a mother and a child
- **Step 4:** calculate the number of applications per mother
- **Step 5:** Divide the sample into **recurrent and non-recurrent cases**
- **Step 6:** Differentiate between repeat applications that **concern the same child/different children**

# Prevalence 2007-2013



# National Averages & Hot Spots

Average recurrence rate (care proceedings) = 29%

Variation -24% - 38%

❖ **Nottingham City: 36%**

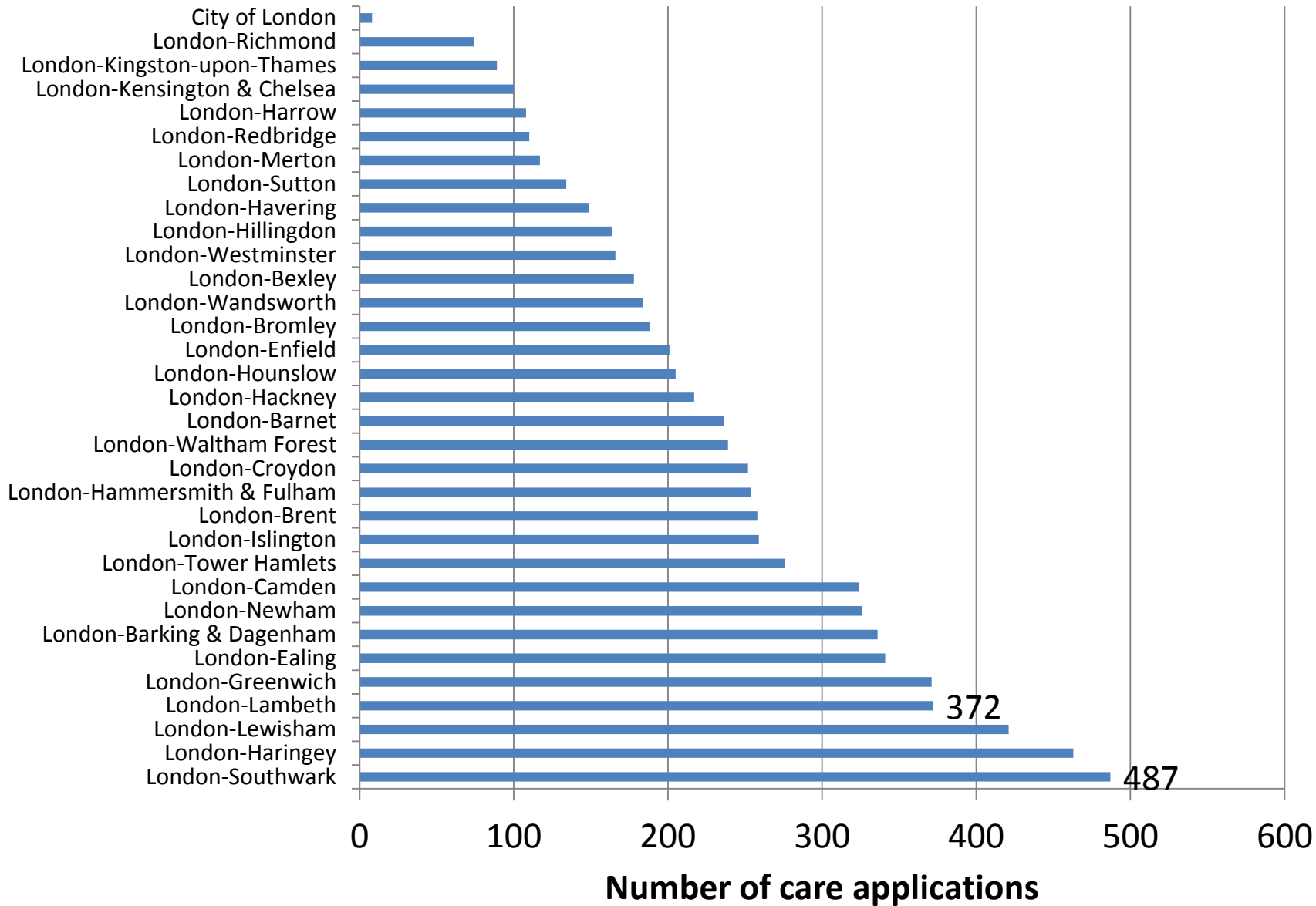
❖ **Leeds: 37%**

❖ **Birmingham: 35%**

❖ **Blackpool: 37%**

❖ **Portsmouth 38%**

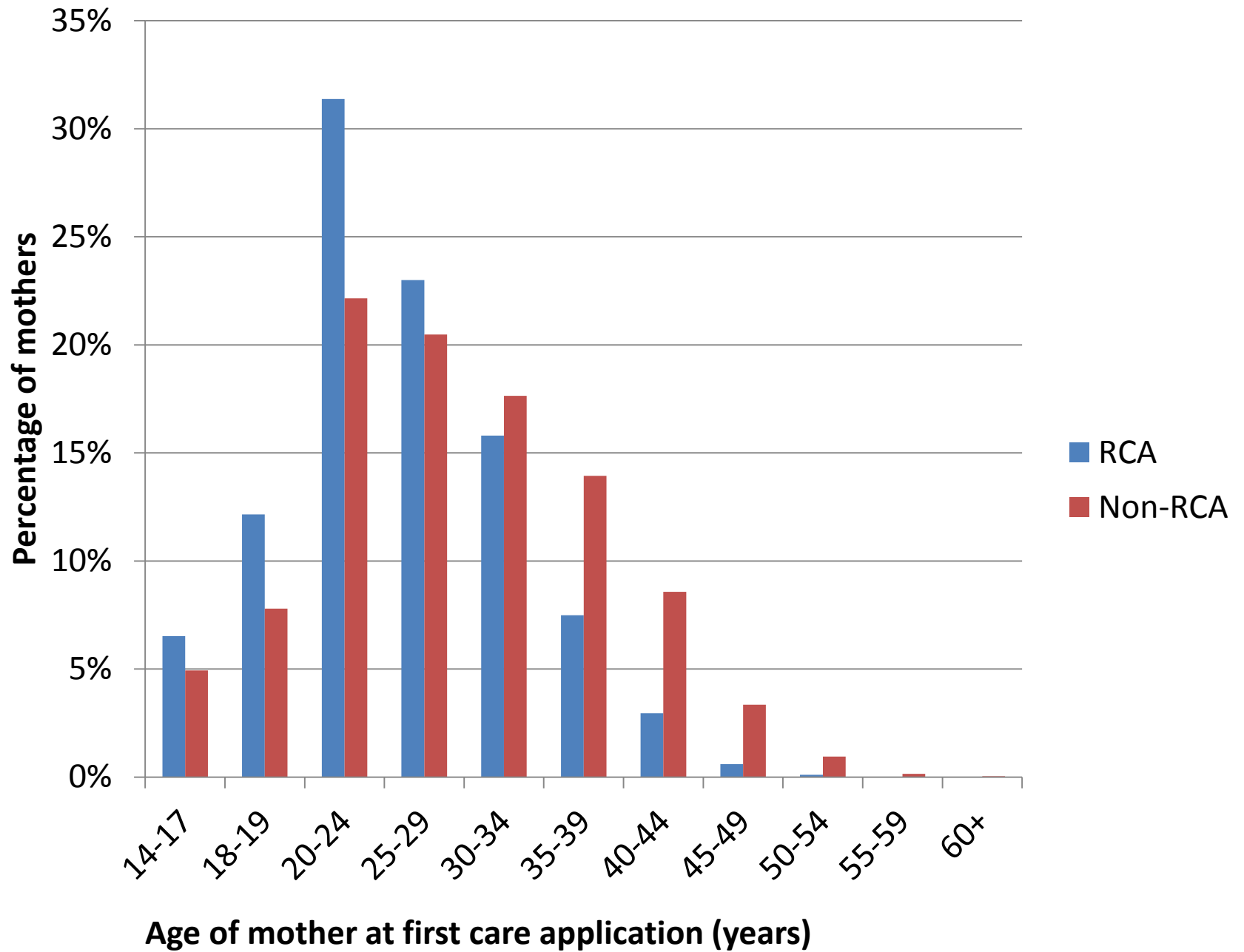
**Local Authority**

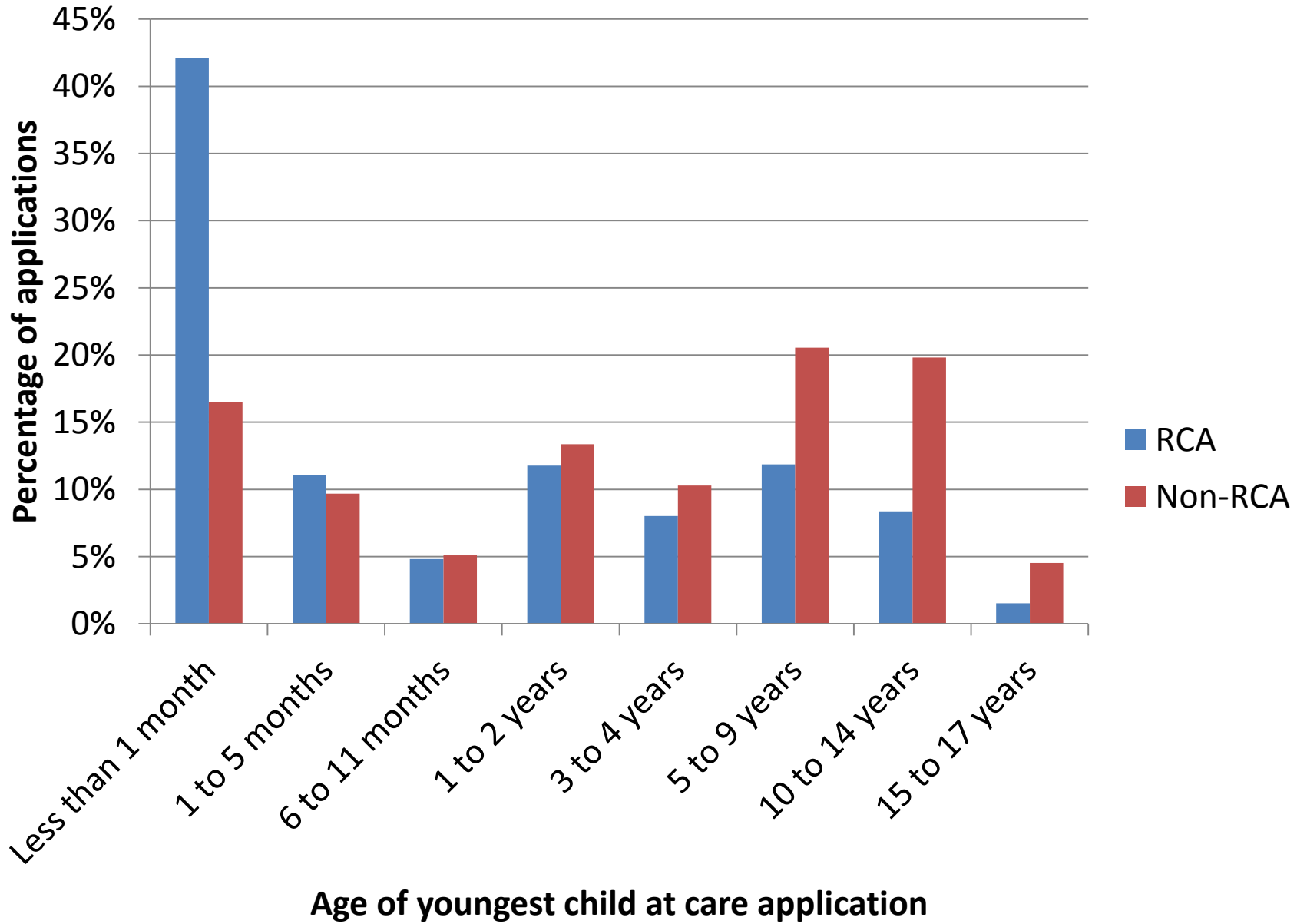


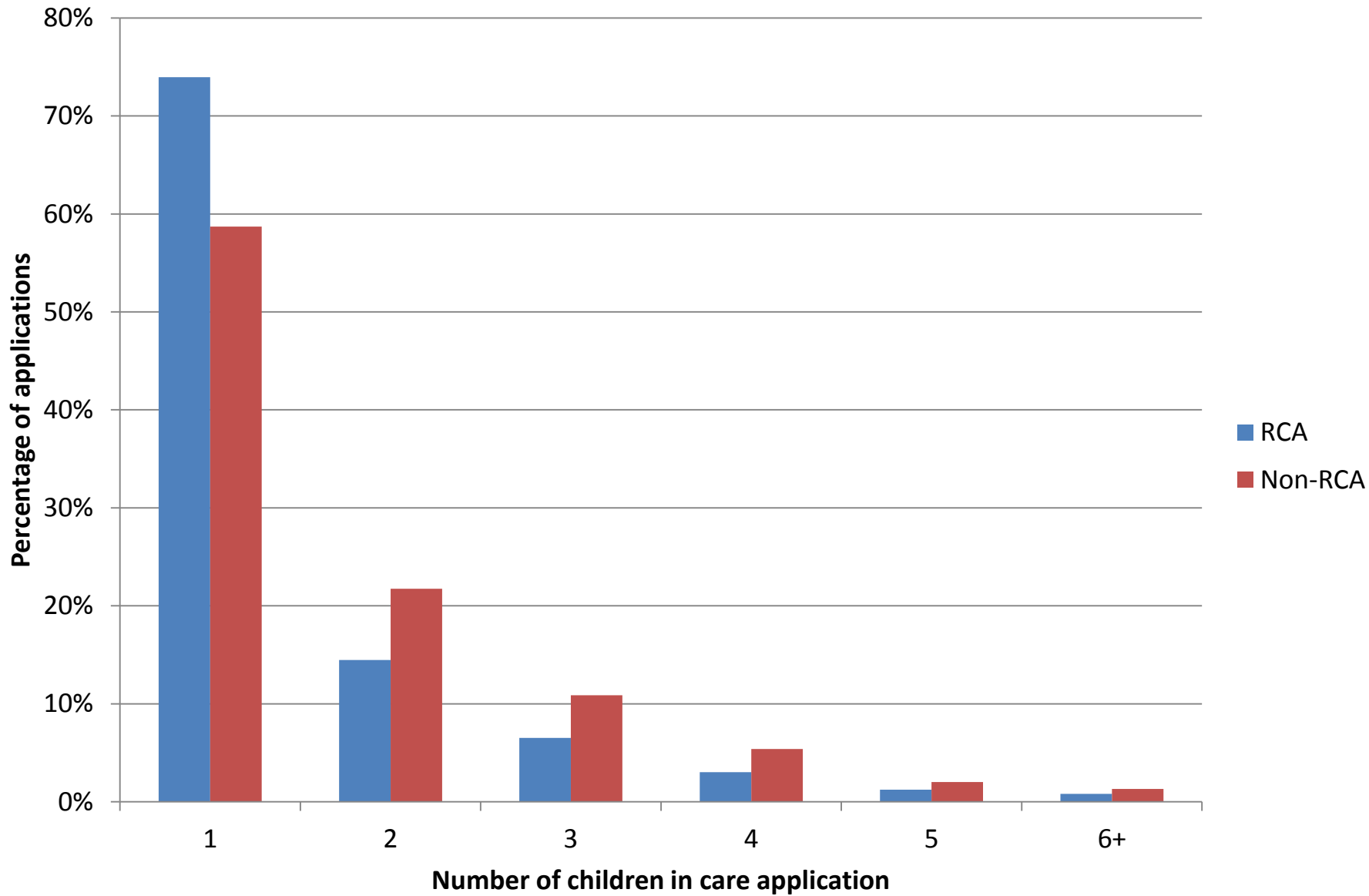
**Local Authority**



**Percentage of applications linked to recurrent mothers**









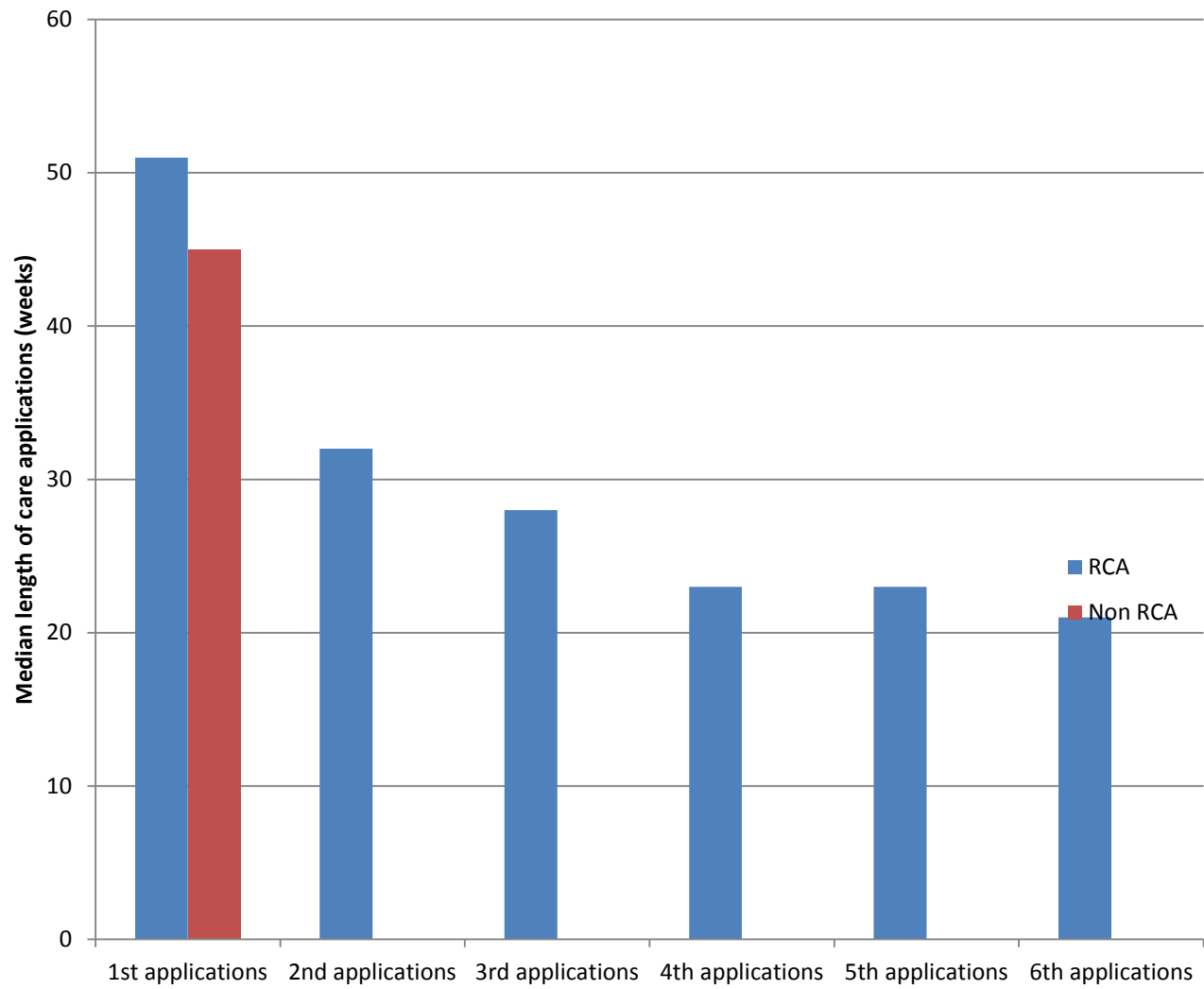
# Median Length of Intervals Between Care Applications (weeks)

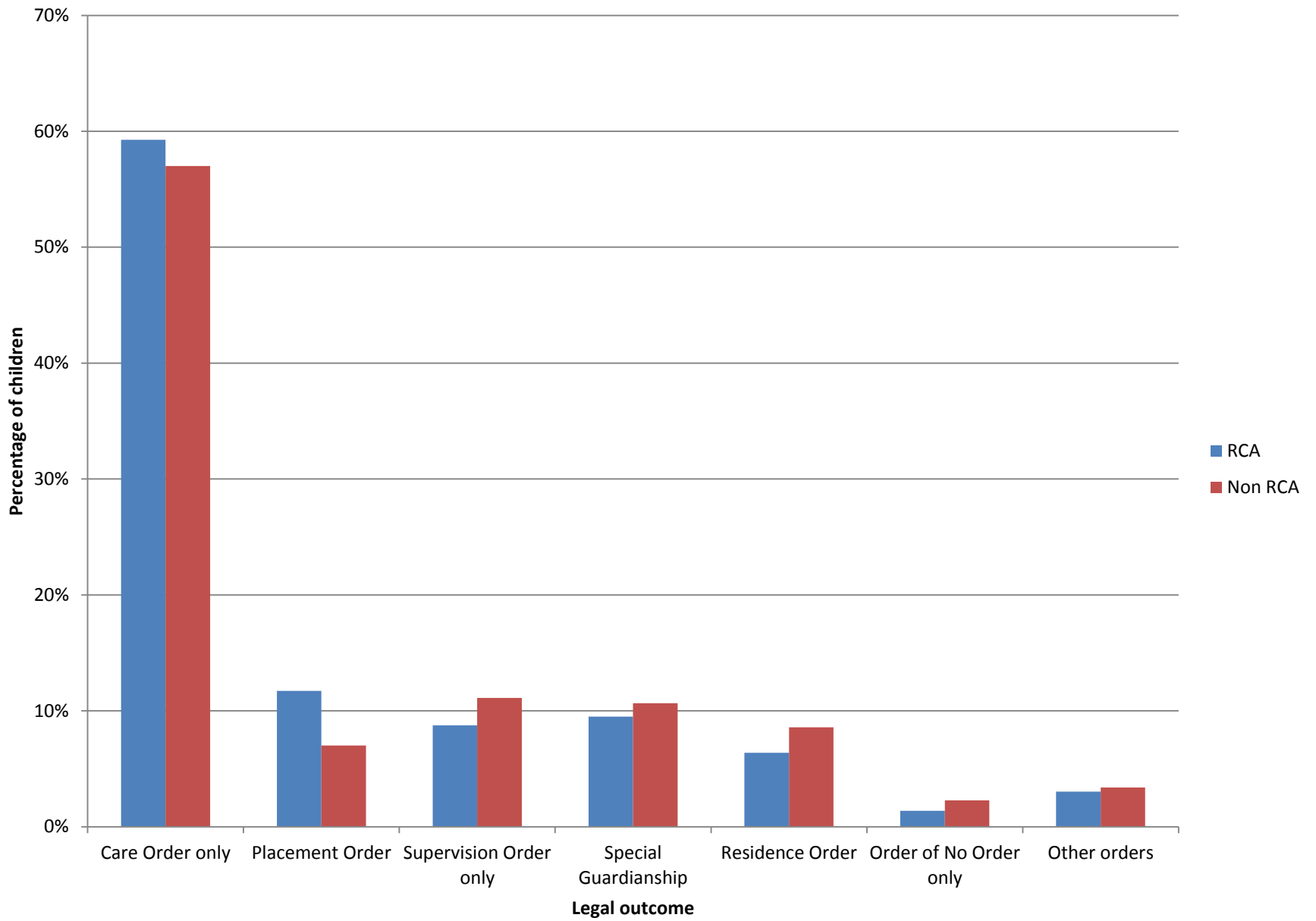
Number of Applications	2+	3+	4+	5+	6+
Number of Mothers	7143	1189	178	24	5
1st Interval	75	416	414	344	274
2nd Interval		71	450	457	349
3rd Interval			68	480	483
4th Interval				65	574
5th Interval					64

# Typical Cases

- Young woman (50% aged less than 24 years – high percentage of teenagers at first application compared to national picture)
- Pregnant in swift succession and commonly subject to repeat proceedings that concern a single infant







# Fathers

Approximately 32% of cases of mothers have no information on fathers

Just under half the cases are a 'recurrent couple' (mother and father appear together in more than one set of care proceedings)

There are recurrent fathers – not linked to recurrent mothers – so this increases the overall prevalence rate (by about 5-7%)

Fathers are also younger men compared to national demographic, but they are older than the mothers

# Implications

Where a negative cycle of recurrent care proceedings **remains unchecked, prognosis for recovering parenting capacity is poor because:**

- Intervals between LA care applications are typically short
- Care proceedings **get shorter over time**
- Many recurrent applications concern infants subject to a care application within 12 months after birth

Although 50% of mothers are aged between 14 and 24 at first application, which ought to give mothers significant time to mature – the national pattern is of a ‘decreasing opportunity’ for change once a mother is caught in this cycle.



# The Research Going Forward

Full statistical analysis of the national dataset (to include the 2014 cases) Survival Analysis

Geo-coding to establish national distribution of recurrent proceedings/local authority and court area

In-depth review of randomly selected represented sample of case files (completed cases 2013-2014)

In-depth interview work with 50+ mothers in five local authority areas

# The Research Going Forward..

Enriching the variables....

What are the challenges/opportunities in terms of data linkage across government departments/agenda setting



# Publications

Broadhurst, K., Harwin, Shaw, Alrouh, B. (2014)  
Family Law:

[http://www.familylaw.co.uk/news and comment/capturing-the-scale-and-pattern-of-recurrent-care-proceedings-initial-observations-from-a-feasibility-study#.VDGQAxZtdn1](http://www.familylaw.co.uk/news_and_comment/capturing-the-scale-and-pattern-of-recurrent-care-proceedings-initial-observations-from-a-feasibility-study#.VDGQAxZtdn1)