

Jamma Umoja

Assessment Programmes



**Very Young Parents
& Looked after Children
Who are also Parents**

Why have an assessment programme?

Almost 40,000 girls became pregnant before they reached 18 in 2004 a significant minority of those young mothers and fathers were “*In Care*”, “*Looked After Children*” or “*Care Leavers*”. Teenage pregnancy is often a cause and a consequence of social exclusion. The risk of being a young parent is greatest for people growing up in poverty and disadvantage or for those with poor educational achievement. 60,000 children in care at any time, less than one in 10 get five good GCSEs, compared with more than half of other teenagers.

Teenage parents tend to have poor antenatal health, lower birth weight babies and higher infant mortality rates. Their own health and their children's is worse than average. Teenage mothers' poor backgrounds contribute to these effects, having a baby makes them worse.

The best place for a very young mother is to be at home with her own mother. However, many young parents have been neglected as children and are separated or estranged from their parents, also some of the birth families of the parents are of themselves likely to cause further concern rather than offer support. Unfortunately many young parents cannot rely on a significant amount of help from their parents and many cannot rely on any a few pose a real danger to both mother and child.

In such circumstances it is not difficult to see why so many young parents are viewed with concern; their lack of appropriate support and role models, their young age and probable history of problems in their own childhood coupled with their lifestyles and the normal adolescent problems make the difficult job of parenting even more difficult.

Young Parents particularly those looked after or leaving care start there parenting careers from a position of great disadvantage which can be passed on to their children in turn. Often they will only be able to achieve their goals of good parenting if they are offered and accept significant help from those professionals engaged in providing services for children in need. **The main focus of an assessment is usually centered on the young parents abilities, commitments to the child and crucially their acceptance and engagements with professionals whose are trying to offer support across a range of disciplines.**

What is a young parent?

Jamma Umoja is registered to accept mother's under the age of sixteen and we have assessed children as young as fourteen. Below this age can also be assessed but not normally in residence (see our Community Services Brochure). The upper age is difficult to define exactly as adults mature at varying paces.

We have never been asked to assess a single parent father under the age of sixteen and it is unlikely that we would be however; we have assessed many fathers just over sixteen and beyond both in residence and in the community, as part of a couple relationship or on their own. We cannot allow parents under the age of sixteen to cohabit in our centres.

We work with young parents towards resolving their problems, which come in many forms:

- ❖ Social isolation
- ❖ Poor childhood experiences and lack of appropriate role models
- ❖ Dysfunctional family backgrounds
- ❖ Personality disorders and mental health problems
- ❖ Victims of abuse including domestic violence
- ❖ Poor relationships with social services
- ❖ Vulnerability to violent or controlling partners
- ❖ Impulsivity and unrealistic expectations
- ❖ Addictions and associated criminality

It is usual that we see constellations of problems working in concert to produce a situation that can overwhelm the young parent. Unless commensurate help is offered to them during the assessment process and beyond they may well find looking after a child almost impossible.

Young parents have particular needs due to their young age. They can be quite difficult during adolescence and can present with a perceived management problem. Additionally they have a propensity to be over confident of their abilities. However, on the other hand problem behaviors may be resolved by maturation, bad practices are usually less ingrained and the potential and energy to learn and change is at an optimum.

Assessment Process

We conduct assessments on the basis of the welfare checklist, the framework for assessment and other children in need/protection assessment protocols; but we add to this assessing the actual strengths and weaknesses of young parents through conducting early and specific assessment protocols perhaps also including psychological (cognitive but not necessarily and never just IQ tests) psychiatric and perhaps drug and alcohol protocols to gain the best view we can of what are the complications of assessment and how best to assess and assist the parent.

It is important that this identification of strengths and weaknesses is not seen as a simple matter of relying on indicative testing or even expert opinion. Our assessments are holistic and we examine the strengths of a parent when comparing them against perceived weaknesses. We are also concerned to offer parents informed choices which could improve the prognosis.

The identification of the problem areas must also include an identification of what support and training a parent could benefit from in order to offer good enough parenting and which would also offer direct benefit to the child. This is then used to evaluate the probable outcome if such services were offered and accepted.

The assessment is therefore twofold:

- ❖ **Firstly what is the nature and the quality of the care offered through observations, history and an assessment of the problem areas.**
- ❖ **Secondly what is the prognosis for significant improvements when needed and how might they best be achieved.**

It is vital that careful planning is undertaken of the process and the parents understanding by identifying the *parameters* (exactly what is being assessed and *milestones* (what is expected of the parent/s). This has to be done very carefully in order that we know for sure that the parent does understand the concerns and the process.

Parameters are the specific focus of the assessment and will vary according to the specifics of each assessment. They may include capacity

to change, ability/commitment to engage, putting the child's needs first, what would be the situation if appropriate therapeutic or other interventions were offered and accepted and acceptance of the need to tackle problem areas. We can then adapt parenting assessment models to suit the particular needs and understanding of a young parent.

Milestones are the areas of engagement and progress required from a parent both during the assessment and beyond. These may include putting into practice advice given by Jamma and others, always being available for the child when possible, being open to change and having the capacity to change and offer good enough parenting.

Care Standards legislations require us (*and all other service providers*) to also offer support and guidance, which we of course welcome. This means that we must perform two functions at the same time one being the support and improving of families as required by Care Standards and the other primarily focusing on the need to produce evidence to help determine the child's best long term interests. Although they may seem to clash we do not find meeting these two requirements difficult as we have always worked on the premise that the most important function we perform is assessment.

We do need to offer parents insights into the problems they come with but also crucially assess whether they can benefit from solutions. This means that we do offer interventions, which we hope, would be helpful but only at a level where it does not prevent or interfere with our primary focus of providing evidence on the child's future care, with any benefit derived as incidental.

Under Eighteen or a Looked After Child

In addition to the assessment services offered it will also be appropriate and necessary to offer children in need services to mother and fathers under eighteen and in some circumstances above this. This will include offering the young parent a key worker to share concerns with and whose duty it would be to ensure their well-being in line with good practice and those areas covered within LAC reviews.

