

Parental mental health and child welfare: Review of policy (summary)

Nicky Stanley and Pat Cox



social care
institute for excellence



The review questions

- How do English law, policy and guidance for adult, mental health and children's services address the linked issues of parental mental health needs and children's welfare?
- What support do law, policy and guidance provide for an integrated approach to parental mental health needs and child welfare?

Methodology used and why

This review covers English policy and guidance published between 1989 and June 2007. Acts of Parliament, Codes of Practice, White and Green Papers, Statutory Guidance, guidelines, practice guidance, consultations and other policy documents such as national service frameworks were included. Most of the publications reviewed were produced by central government offices but some key reports from bodies such as the Audit Commission and the Royal College of Psychiatrists as well as some influential inquiry reports were also included.

The review was informed by the twin principles of inclusivity and specificity. Policy and guidance documents addressing three fields – adult, mental health and children's services, together with some criminal justice publications – were covered. This breadth of scope was balanced by a tight focus on specific discussion of the linked issues of parental mental health needs and child welfare. Documents were accessed through electronic searches and hand searches of government websites and through expert contacts. A list of search terms was drawn up by the research team and used to search documents electronically. Additional hand searching allowed the relevance of particular passages to be inferred when the key terms were not immediately identified. Relevant passages were extracted, listed on a database and were then coded and sorted using an analytic framework designed to reflect the key themes emerging from the material.

Results

- Much of the policy and guidance reviewed was preoccupied with identifying the relationships between parental mental health problems and children's welfare, rather than with determining how services can meet these associated needs. However, the review found increasing policy recognition of the gaps between children's and adult services and acknowledgement that these gaps do not reflect the extent to which children's and adults' needs are interlinked. Policy and guidance urge practitioners and services to work together so that services can reflect the interaction of the needs of family members.
- Law, policy and guidance in this field explicitly prioritise the needs of and risks to children. Concerns about risks to children emerge as the strongest driver

for inter-agency communication, collaboration and integration and these concerns have exerted a strong influence on policy, planning and service structures.

- Policy generally utilises the concept of ‘**parental** mental health problems’ rather than distinguishing between mothers’ and fathers’ mental health needs. While mothers’ mental health problems are emphasised in guidance on maternity services and on women prisoners, fathers with mental health problems receive very little attention. Even guidance on the risks presented by adult offenders fails to specifically mention fathers.
- Most of the policy injunctions to look beyond service divides appear to be directed at mental health services. This reflects research and other literature, which emphasise that mental health professionals often fail to recognise the parenting role of people using these services. However, there is also a case for policy to identify and make use of the research evidence which examines the capacity of practitioners in children’s services to identify and respond appropriately to manifestations of mental illness in parents.
- A number of structures, such as the Common Assessment Framework (CAF) have been introduced to facilitate inter-agency planning and work within children’s services. The Care Programme Approach (CPA) offers a similar structure in mental health services. However, there are no built-in mechanisms or structures for linking the CPA with the CAF.
- The issue of varying thresholds for eligibility for services remains unresolved, is likely to represent a barrier to developing preventive services and may render attempts to establish structures such as care pathways problematic.
- Policy identifies the antenatal and postnatal periods as times when there is both the potential for delivering preventive interventions to families where parents have mental health problems and when risks to children are high because of their vulnerability. There is therefore a double imperative for the development of collaborative structures between maternity services, children’s services and mental health services.
- The social exclusion agenda has succeeded in drawing attention to the relationship between children’s and adults’ needs and has emphasised that the relationship between parents’ and children’s needs is not exclusively one way. Conceptualising parents’ mental health needs as at least in part a response to the demands of parenting under adverse conditions allows for the emergence of new responses.

Strength of the key findings

A number of these findings are supported by the wider research literature and by the findings of the Social Care Institute for Excellence (SCIE) knowledge review *Supporting disabled parents and parents with additional support needs* (Morris and Wates 2006). That review, which was conducted independently from the review reported here, also found that men's parenting roles were unacknowledged within adult social care policy and concluded that the Every Child Matters agenda focused on inter-agency collaboration between children's social care, child health and education rather than between children's and adult services.

Implications for practice

The review identified a number of key messages in current guidance that practitioners and their managers can use to promote a more integrated response to the needs of parents with mental health needs and their children. These messages include the following (further details can be found in Table 2 of the full report):

- Staff in mental health, health and adult social care services have a responsibility to safeguard a child at risk of harm and should activate local safeguarding procedures (Every Child Matters 2006).
- Parenting roles and responsibilities come within the criteria for adult social care services (DH 2003b).
- Where there is risk of significant harm to a child, confidentiality can be breached without parents' permission (DCSF 2006b).
- Parents identified as a key group entitled to CPA – the impact of parental mental health needs on children and of mental health needs on parenting to be included in the assessment (DH 2008).
- Parental mental health needs are an indicator for the use of CAF (DCSF 2006a).
- Staff in maternity services should identify women's mental health needs in pregnancy (DfES 2004)
- Young carers have a right to be offered a carer's assessment by adult social care services and may be offered direct payments (DH 2003a)
- Direct payments can be used to support parents with mental health needs bringing up their children (DH 2003a)

- Maternity services to provide a written plan for all women at risk of recurrence of severe mental illness (DfES 2004).

Strengths and limitations of the review

The review takes an even-handed approach and is comprehensive in its coverage of three key policy areas. However, it focuses on published policy and guidance rather than on its implementation. The extent to which policy and guidance are monitored and resourced and are congruent with existing procedures and trends plays a key role in determining whether policy is translated into practice.

References

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Every Child Matters (2006) *Working together to safeguard children*, London: The Stationery Office.

Morris J. and Wates M. (2006) Knowledge review 11: Supporting disabled parents and parents with additional support needs, London: SCIE.