



Newborn babies & care proceedings

A bulletin for professionals involved in safeguarding babies at or close to birth

Recurrence and post-proceedings support

In this edition, we are focusing on the support available for parents who are caught up in a cycle of returning to court in care proceedings on many occasions and losing multiple children to public or kinship care or to adoption. This is now commonly referred to as ‘recurrent care proceedings’.

We know from [research](#) that one in four mothers in England and Wales are at risk of appearing in a second set of care proceedings with a new child within 10 years of their first experience of court proceedings. Fathers are also likely to experience recurrent care proceedings, although at nearly half the rate of mothers, with around one in eight fathers in England at risk of appearing in subsequent care proceedings within five years. Further research on birth fathers and recurrence can be accessed [here](#).

Born into Care studies show that on average, 47% of newborn babies subject to care proceedings in [England](#) and 49% in [Wales](#) were children born to mothers who’d had previous children subject to proceedings in the five years prior to the start of the studies.

The research also highlights that mothers and fathers who appear in recurrent care proceedings have had significant and multiple adverse experiences in their own childhoods (including abuse and neglect, exposure to domestic abuse, loss, rejection, and instability in living arrangements both when with their families and when in the care system) and are likely to have been in the care system as children themselves.

A Spotlight paper containing five key areas for reflection from the research into recurrent care proceedings is available from the Nuffield Family Justice Observatory website – please visit <https://www.nuffieldfjo.org.uk/resource/recurrent-care-proceedings>.

Complex trauma

Mothers and fathers who experience recurrent care proceedings are likely to have long-standing physical and mental health problems – and the issues that give rise to concerns about harm to their children commonly include substance misuse, mental health problems, and domestic abuse. Many parents are dealing with complex and unresolved trauma, which is then compounded by the trauma of having their children removed through care proceedings.

The impact of such trauma and adversity often also leads to parents falling through support nets and being seen as ‘hard to reach’ or ‘difficult to engage’. Too often, once care proceedings are over, mothers and fathers cease to be the concern of children’s services and receive no support to address the issues that have led to them losing their children.

Development of services for parents who have experienced recurrent care proceedings

A deep concern about seeing the same parents in subsequent care proceedings and removing further children from them because the factors leading to the need for a care order had not been tackled inspired the late Nicholas Crichton to set up the first Family Drug and Alcohol Court (FDAC) in 2008. He said, ‘A family justice system “that removes the fourth, fifth or sixth child from families without doing anything about the reasons for removal is a failing system.”’ (Crichton, cited by Fouzder in Law Society Gazette 2018).

FDAC is a therapeutic, problem-solving court approach that offers a better way of conducting care proceedings for parents with drug or alcohol problems, which often co-occur with trauma, domestic abuse and mental health illnesses.

FDACs support parents to overcome the substance misuse, mental health and domestic abuse problems that led to their children being at risk of serious harm.

Research has consistently shown that outcomes for both children and parents are far better in FDAC than they are in normal care proceedings. Research also confirms that parents and professionals are overwhelmingly positive about the FDAC model, praising both the skills of the team in motivating and engaging parents and describing FDAC proceedings as much more collaborative and less adversarial than ordinary care proceedings. A summary of the findings of a study on FDAC can be found [here](#).

There are now 14 FDACs in England and Wales, working with parents from 36 local authorities.

For more information about the problem solving approach used in care proceedings that take place in FDAC, please visit <https://justiceinnovation.org/areas-of-focus/family-drug-and-alcohol-courts>.

Following the setting up of FDAC in the family justice system and the early findings from the research into recurrence, a number of other initiatives were established in Suffolk, Brighton, Reading, Salford, Nottingham and Hackney. Among these early initiatives, [FDAC](#) and [Pause](#), which began with a pilot in Hackney in 2013, have the highest profile, but many of the others are still in existence and other services across England and Wales have been developed since. Nevertheless, services are still relatively few in number and the majority are small and vulnerable to cuts.

Most services initially focused on mothers, although many more are now recognising the importance of working with couples. Very few have been set up to work specifically with fathers.

An example of a service that has been going for some time is [Comma](#) in Stockport. In this [film](#), Karina Dyer, the manager of the service, talks about their work and approach. Another example is [Foundations](#) in East Sussex – in this short [clip](#), Jacque Holloway describes their work.



Previous editions of *Newborn babies and care proceedings* have included films and information about [Strengthening Families](#), an early recurrent care service in Salford that works to support parents who have lost a child through care proceedings, and also supports parents through pregnancy, pre-birth assessments and care proceedings. In this [film](#), Joe Garraway, GMCA Recurrent Care Proceedings Lead, and Elaine Duke, Recurrent Care Proceedings Manager, explain more about the service.

In Wales, recurrent care services include [Baby and Me](#) in Newport and Jig-So in Swansea – again we have included films and details about them in earlier editions of this bulletin (which can all be accessed [here](#)). In this [film](#), a mother talks about the importance of support from Jig-So with her second pregnancy and child, after her first child was removed from her care.

Research in Practice has been providing an online Community of Practice for recurrent care services since 2020 and has set up a website alongside this activity, which can be found at <https://supportingparents.researchinpractice.org.uk/>. The website contains links to relevant research and practice information. It also contains a [map of existing recurrent services](#) in England and descriptions of what they offer.

The authors of the [Mothers in recurrent care proceedings: New evidence for England and Wales](#) study, published in 2022, call for far greater investment in services to support parents who have experienced recurrent proceedings. Although individual services are effective in reducing the problem in their areas, more services are needed with secure funding to ensure they can expand and work with more parents.

In 2017-2018, Research in Practice ran a Change Project on recurrent care, and from this developed a resource for those wishing to set up a support service in their area. It is available to download at <https://www.researchinpractice.org.uk/children/content-pages/working-with-recurrent-care-experienced-birth-mothers-online-resources/>.

Online seminar on working with families to prevent recurrent proceedings – available to watch

In April 2023, Research in Practice, Pause and the [Centre for Child and Family Justice Research](#) at Lancaster University jointly hosted a seminar based on the work of the organisations taking part in the online Community of Practice, currently funded by the Segelman Trust. The event was focused on demonstrating the importance of developing services for parents who have experienced recurrent care proceedings. It was particularly targeted at areas without services. The contributions – from researchers, practitioners, local leaders and mothers with lived experience of recurrent care services – were recorded and are available to watch [here](#).



Newborn babies and care proceedings aims to support professionals who have the difficult and complex task of assessing whether a newborn baby will be at risk of significant harm if they remain in the care of their parent/s. Each edition will provide links to a range of resources to help professionals better face this challenging area of work and improve practice and support for families.