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'Up Against It': A progress report for practitioners

Building a Picture of Fathers in Family Justice in England

NOVEMBER 2018



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1 Summary

Context

The overall aim of our study, *'Up Against It': fathers' experiences of recurrent care proceedings*, is to begin building the much-needed knowledge base about fathers' appearance and reappearance in the family court. The study has three main objectives:

- Map the scale and numbers of fathers in first and subsequent s.31 proceedings.
- Build a picture of the circumstances of such fathers.
- Generate insights into the lives and coping strategies of recurrent fathers.

The picture of fathers in care proceedings is currently very limited. Although there has been substantial progress in understanding the patterns, trends and underpinning reasons for mothers' appearances and reappearances in the family courts (Broadhurst et al. 2015), this has not been matched by a parallel programme of work on fathers. The human and financial costs of high numbers of children being removed from birth parents, significant numbers of parents experiencing repeat removals, and the impact of such repeat removals cannot be addressed by only focusing on the lives of mothers (Brandon et al. 2017; Philip et al. 2018).

This report marks the mid-point of the project and presents findings from the first stage of our analysis of national administrative data from the Child and Family Court Advisory and Support Service (Cafcass). In addition we present findings from our focus groups with practitioners, which reflect the landscape of work with fathers in recurrent care proceedings, and raise discussion points for policy and practice.

Key findings

The results presented here reveal what has previously been unknown about fathers: namely the trends, patterns and profile of fathers in s.31 proceedings. For the first time, we also compare the profiles of fathers who have entered subsequent proceedings with

those who have not. Our analysis of population-level data provides five major insights:

- Whilst nearly all mothers are party to care proceedings, only 86% of fathers are party to the proceedings. There has not been an increase in the proportion of fathers' with party status over time. In fact, the proportion has decreased very slightly between 2010/11 and 2017/18.
- There has been a rapid increase in the annual number of both mothers and fathers entering s.31 proceedings since 2007/08. The number of mothers and fathers entering have been increasing in parallel.
- Mothers have higher rates of returning to court than fathers. The lower rate of fathers' recurrence is in part due to the invisibility of fathers within administrative processes.
- Little gender difference was found in the sociodemographic traits documented by Cafcass (e.g. number of children in proceedings, age of youngest child, legal orders that conclude proceedings) between mothers and fathers in s.31 proceedings, apart from the observation that the mothers are younger than the fathers.
- Among parents who enter recurrent s.31 proceedings, a high proportion return with the same partner. This suggests a need to pay closer attention to relationships and couplehood in the context of intervention and service development.

The findings from our focus groups with social work practitioners demonstrate the practice landscape of work with fathers in recurrent care proceedings. They also illustrate practitioner knowledge and views about such fathers, their circumstances and what may constrain or enable practice with them:

- The resources and motivations for doing rehabilitative work with recurrent fathers are limited and variable. Improving father engagement remains an aspiration rather than a strategic priority for local authorities.
- Failure to support vulnerable men to be involved or better fathers, regardless of whether they live with their children or not, impacts on children, both now and in the future.
- There is a need to recognise the ways in which services construct and respond differently to men and women, as fathers and mothers.
- More systematic and balanced knowledge is needed to mitigate "mythical storytelling" about recurrent fathers.



2 A comparison of non-recurrent and recurrent mothers and fathers: findings from population-level data

In this section, we provide new evidence on the trends, patterns and characteristics of fathers vis-à-vis mothers in s.31 proceedings, as captured by the Cafcass administrative data. Particular attention is paid to (i) gender difference (or its absence) between mothers and fathers in recurrent care proceedings; (ii) similarities and differences in the sociodemographic profiles of fathers in non-recurrent and recurrent proceedings; (iii) the relational structure between mothers and fathers as they move from first to recurrent care proceedings, not as individuals but as couples. For a full description of our methodological approach see Section A.3. Our quantitative results provide five major insights.

2.1 Fathers are less likely to have party status in s.31 proceedings than mothers

For mothers, parental responsibility (PR) is an ascribed legal status, whereas PR is an acquired legal status for fathers obtained through marriage, jointly registering a child's birth, seeking a parental agreement or a PR order. We found that effectively all mothers have party status to s.31 proceedings, whereas only 86% of identified fathers were party to the proceedings. The prevalence of 'missing' fathers in s.31 proceedings is partly attributable to fathers who do not have PR when a case is initiated.

We found no increase in fathers being made party to proceedings over time. In fact, the percentage of fathers being made party each fiscal year has undergone a very marginal decrease, from 89% in 2010/11 to 85% in 2016/17. The average over this period was 86%.

Policy and practice implications

Consideration needs to be given, at both policy and operational levels, to how PR status works in local authority and legal practice with men. Our results suggest that the function of PR as a filtering mechanism may inhibit, delay or create 'opt-out' points for fathers' involvement in care proceedings. Policy and procedure changes in

what appear to be gendered PR entitlements would be a crucial first step to uncover ‘missing fathers’ in s.31 proceedings.

2.2 There has been a parallel increase in the annual number of mothers and fathers entering s.31 proceedings

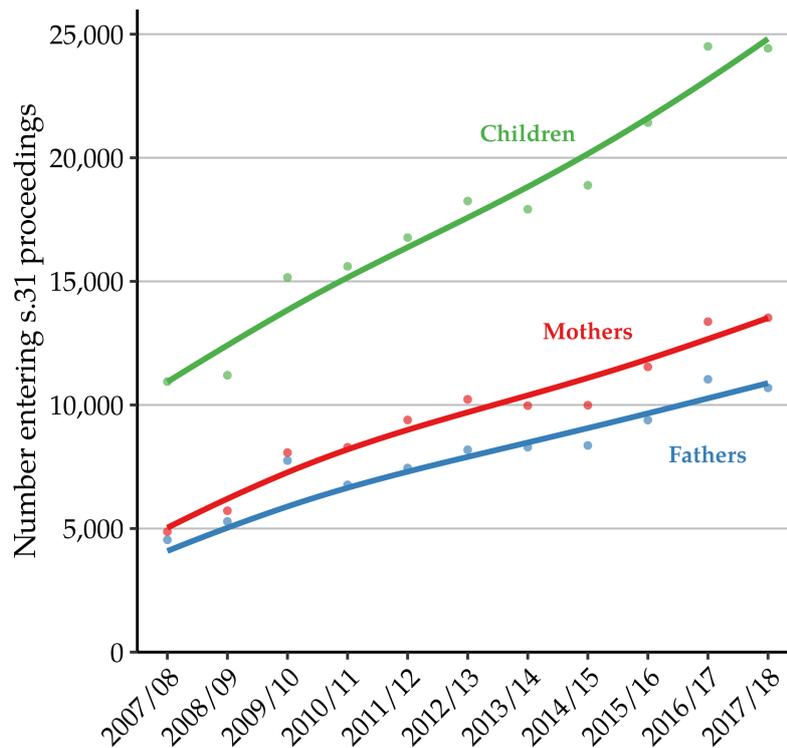


Figure 2.1: Number of children, mothers and fathers entering care proceedings from fiscal years 2007/08 to 2017/18.¹

¹Cafcass recording practices between 2007/08 and 2009/10 did not make a distinction between party and non-party fathers. Our trendline has been corrected for all fathers being recorded as party in the first three fiscal years.

The increasing volume of s.31 proceedings places an unprecedented strain on the family court. As shown in Figure 2, the annual volume of parents and their children entering the family courts has increased rapidly over the past decade. Due to changes in Cafcass’ recording practices, we can only reliably analyse the trends from 2010/11 onwards. Between 2010/11 and 2017/18, the annual number of fathers entering s.31 proceedings increased from 6,770 to 10,690 and that of mothers increased from 8,290 to 13,530. During the same time period, the annual number of children increased from 15,610 to 24,430. Given that the capacity of the English family court has stayed stable over the past decade, court staff are faced with an accruing pressure to provide efficient and high-quality family justice services.

Fathers are far from ‘invisible’ in the overall picture of s.31 proceedings. The data clearly show that the majority of fathers are identified in care proceedings. If we expect every child to have one mother and one father, our results show that around 21% of fathers



go unidentified. It is worth noting that although our data capture the initial records documented at the beginning of the case, it is possible that more fathers were uncovered during the proceedings and are later added to a given case. Therefore, the actual gender gap in the volumes of mothers and fathers entering s.31 proceedings every year is potentially narrower than reported here.

Policy and practice implications

The increasing volume of s.31 proceedings is propelled by parallel increases in the number of mothers and fathers entering the proceedings. The average annual rates of increase have been similar for mothers and fathers, at 8% and 7% respectively. Thus, it is the dual increase in the number of both fathers and mothers, rather than one or the other that has amounted to a looming national “care crisis”. While it is a pivotal task to uncover the 21% of unidentified fathers, it is equally important to engage the majority of fathers who are already captured by the family court but may be insufficiently involved in the process of care proceedings.

2.3 The rate of recurrent s.31 proceedings is lower for fathers than mothers

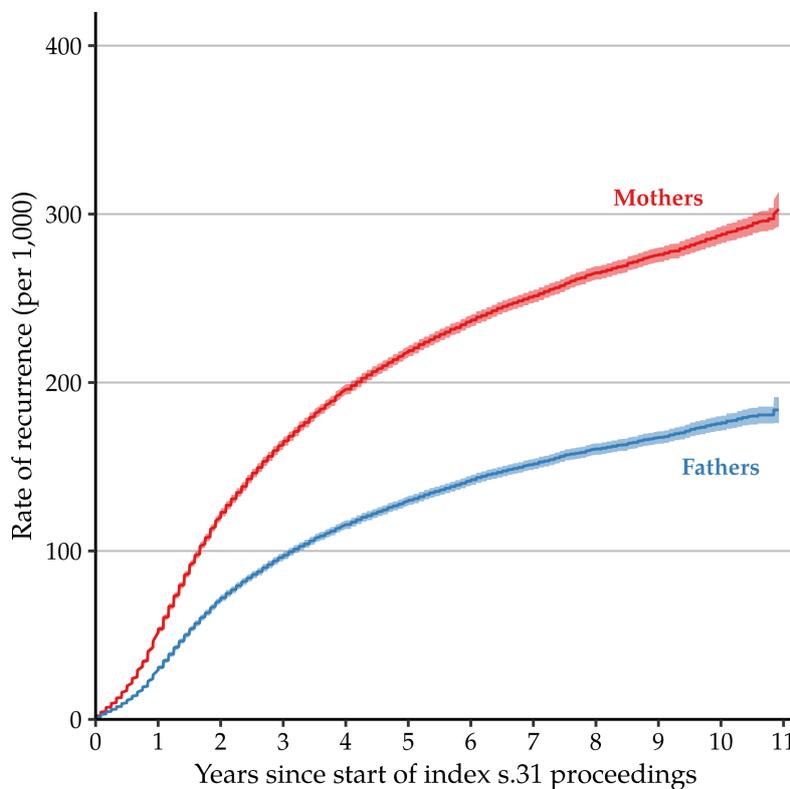


Figure 2.2: Rate at which mothers and fathers enter recurrent s.31 proceedings (per 1,000).

Fathers have a lower rate of entering subsequent care proceedings than mothers, as shown by the Kaplan-Meier curves in Figure 2.



Additionally, the increase in recurrent rates declines over time for both mothers and fathers.

Within five years of their previous appearances in the family court, we would expect 130 per 1,000 fathers to enter subsequent care proceedings. The equivalent rate for mothers is 220 per 1,000. If we follow parents for 10 years after their initial appearances in the family court, the recurrent rates for fathers and mothers are 175 and 290 per 1,000, respectively. At the five-year point, mothers are 1.7 times more likely than fathers to appear in court, and the gender difference is similar at 10 years, at around 1.7 times.

Policy and practice implications

Sensitively designed interventions could aim to reduce the number of recurrent care proceedings immediately following the conclusion of a case in the family court. There are two potential targets for this work: the hard to locate, absent or non-engaged fathers who may be a major cause of mothers' recurrent appearances in the family court, and the recurrent fathers who are present but appear at a somewhat lower rate than the mothers. The lower rates of fathers' recurrence should not detract from the urgency of interventions aimed at these present fathers. Finding the absent or non-engaged father poses a more difficult challenge. As we discuss later, the lower rate of fathers' recurrence maybe, in part, due to the invisibility of fathers within a local authority's administrative processes.

2.4 There is little difference in socio-demographics between fathers and mothers

Little gender difference in major sociodemographic traits is found between fathers and mothers, in both the non-recurrent and recurrent groups. However there are several differences *between* the non-recurrent and recurrent groups. The only exception is that mothers and fathers tend to concentrate at distinct life-course stages. As presented in Table 1, mothers tend to be younger than fathers, and parents who went on to reappear in the family court tend to be younger than non-recurrent parents. The average age of non-recurrent mothers and fathers are 30 and 33 years old, and that of recurrent mothers and fathers are 26 and 31 when they first appeared in the court. As recurrent parents tend to concentrate in a relatively early stage of the life course, they are seen to appear in the family court with younger children than their non-recurrent counterparts. Apart from these differences, fathers and mothers who have returned to the court, initially appeared with a similar number of children, their youngest children were similarly aged, and the legal orders concluding their first case were also similarly distributed.



	Non-recurrent		Recurrent	
	Mother	Father	Mother	Father
Parent's age ^{a, b, c, d}				
16-18	7.3	2.7	11.6	3.3
19-21	12.8	8.2	20.1	11.1
22-24	12.8	11.1	17.5	13.6
25-29	20.6	18.6	22.8	21.5
30-34	18.0	17.6	16.3	18.3
35-39	14.6	15.8	7.8	14.1
40-44	9.2	12.1	3.0	8.9
45+	4.8	13.9	0.8	9.2
Number of children subject ^{a, b, c}				
1	56.3	66.8	58.4	64.8
2	22.8	20.0	21.6	20.7
3	11.8	8.0	10.6	8.2
4+	9.1	5.2	9.3	6.3
Age of youngest child ^{a, b, c, d}				
Less than 0 weeks	1.6	1.3	3.4	3.5
0-3 weeks	17.8	16.8	24.3	25.6
4-52 weeks	22.1	20.5	28.1	27.6
1-4 years	31.4	32.0	32.3	29.1
5-9 years	16.3	17.9	8.6	10.3
10-15 years	10.8	11.4	3.3	3.9
Highest legal order group ^{4, a, b, c, d}				
Dismissed/ONO	6.8	6.4	4.4	5.4
FAO/SO	7.3	6.8	7.3	10.8
RO/SGO/CAO	12.9	12.5	11.8	10.4
CO/SAO	31.4	29.9	23.8	22.4
PO	22.3	24.0	33.1	29.0
Other	19.3	20.4	19.6	22.0
Partner status ^{a, b}				
Identified	78.5	97.1	78.2	97.9
Unidentified	21.5	2.9	21.8	2.1
Parent-partner age gap ^{a, b, c}				
10+ years younger	16.1	1.5	17.4	1.4
5-9 years younger	18.1	4.1	18.4	3.7
Less than 5 years	57.9	53.9	58.7	55.8
5-9 years older	5.6	21.5	3.9	20.7
10+ years older	2.3	19.0	1.6	18.5
Co-resident with partner ^{a, b, c, d}				
No	69.5	73.3	74.4	67.5
Yes	30.5	26.7	25.6	32.5
Partner in recurrent proceedings ^b				
Previous	–	–	35.7	74.9
New	–	–	40.6	22.8
Unidentified	–	–	23.7	2.3
<i>N</i>	31,770	32,630	8,590	4,480

Table 2.1: Descriptive percentages of non-recurrent and recurrent mothers and fathers at their index s.31 proceedings, with the partner they return with for recurrent mothers and fathers.^{1, 2, 3}

¹ By 'index proceedings' we mean the first recorded s.31 proceedings since 2007/08 as that is the start of our observational window.

² Parents were categorised as 'recurrent' if they returned within 5 years of their index s.31 proceedings.

³ Missing values were ignored for the purposes of calculating the percentages, see Table A2 for proportion of missing values in each variable.

⁴ If multiple legal orders were made at the end of proceedings, then the one associated with the 'highest' level of potential removal was recorded for our analysis.

^a Statistically significant difference between non-recurrent mothers and fathers at the 0.1% level.

^b Statistically significant difference between recurrent mothers and fathers at the 0.1% level.

^c Statistically significant difference between non-recurrent and recurrent mothers at the 0.1% level.

^d Statistically significant difference between non-recurrent and recurrent fathers at the 0.1% level.



Despite the lack of apparent gender differences in the individual and case attributes of recurrent fathers and mothers, their demographic profiles seem to challenge certain stereotypes:

- **Parents entering care proceedings with multiple children only represent a small proportion of cases.** As shown in Table 1, the majority of recurrent fathers (86%) and mothers (80%) had only one or two children subject in their index care proceedings, which is not substantially different from the profiles of non-recurrent fathers (87%) and mothers (79%). Only approximately 6% of non-recurrent and recurrent fathers appeared in s.31 proceedings with more than 4 children.
- **Whilst there are age gaps between mothers and fathers, the age gap is not associated with the risk of recurrence.** As presented in Table 1, fathers were slightly older than their partners, with the majority having an age gap of less than 5 years (approximately 55%). Cases in which fathers were much older than the mothers do exist, we found that approximately 21% of fathers were between 5 and 9 years older than their partners, and 19% were 10 years or older, respectively. This pattern was equally noted among both non-recurrent and recurrent fathers.
- **The prevalence of co-resident partners is different between recurrent and non-recurrent parents.** Recurrent fathers are more likely to be living with their partners than non-recurrent fathers, at the percentage points of 33% and 28% respectively. Recurrent mothers were less likely to be living with their partners – 31% of non-recurrent mothers and 26% recurrent mothers cohabit with their partners respectively. These differences by recurrence status were found to be statistically significant at the 0.1% level for both mothers and fathers.

Policy and practice implications

The comparative assessment of the sociodemographic attributes of non-recurrent and recurrent mothers and fathers in s.31 care proceedings suggests that efforts to prevent parents' recurrent appearance in the family court could effectively target parents who are at an early stage in their life course. The individual traits between non-recurrent and recurrent parents do not seem to vary by gender, although it is possible that the problems faced by non-recurrent and recurrent parents may be gendered.



2.5 Of the parents who return to court, there is a substantial proportional that return with their previous partner

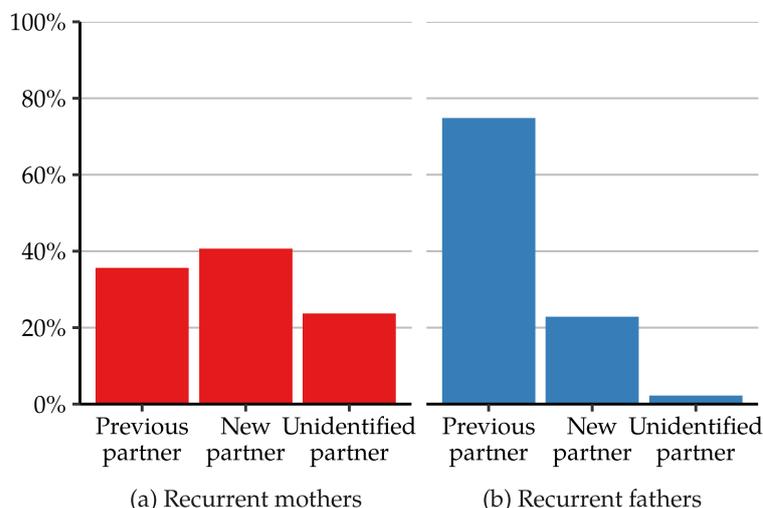


Figure 2.3: Percentage breakdown of who recurrent mothers and fathers enter their subsequent care proceedings with.

Recurrent fathers and mothers differ considerably in with whom they return to the family court. However, despite gender differences, a large percentage of parents return with their index partner. Figure 3 describes the ways in which fathers and mothers return to court: with the previous partner, a new partner, or an unidentified partner. Approximately 36% of mothers and 75% of fathers return to court with the same partners as in their previous cases. In other words, there is a significant group of ‘recurrent couples’ who are either remaining together or reunite across subsequent sets of care proceedings.

Recurrent mothers are 1.8 times more likely than recurrent fathers to return to the family court with a new partner. Within five years of their previous court appearance, 41% of mothers, as opposed to 23% of fathers, return to court with a new partner.

Mothers are 10 times more likely than fathers to return to court with an unidentified partner. The high level of unknown or unidentified fathers is a characterising feature of recurrent mothers in s.31 proceedings. Within five years of their previous court appearance, 24% of mothers return to the family court with an unidentified partner. In contrast, as low as 2% of fathers return with an unidentified partner. This gender asymmetry resonates with findings from our focus groups, where it was stated that fathers are often identified through mothers in s.31 proceedings.



Policy and practice implications

The evidence of recurrent couples appears relevant as a crucial factor in explaining recurrence for fathers, but also for a sizeable proportion of mothers. This suggests there is a sizeable group of parents (fathers and mothers) who may not currently be served by the existing interventions for tackling repeat removals of children. As three out of four recurrent fathers return to the family court with the same partners, it seems important to develop a more couple-focused response, which can both address individual needs whilst also working with the couple and co-parenting relationship. Whilst current mother-focused programmes such as PAUSE are an important part of service development, our evidence suggests that more and/or different ways of working are needed to respond to the full picture of recurrence.



3 Challenges and issues in developing practice with recurrent fathers: results from knowledge exchange focus groups with social work practitioners

In June 2018, representatives from all participating Local Authorities were invited to a Learning Network meeting. Three focus groups were held with a total of 25 practitioners consisting of social workers, managers, family support workers, social worker assistants, and legal representatives. Of the 18 participating authorities, 16 were represented. The purpose was to firstly conduct focus groups on the topic of working with recurrent fathers and secondly to share initial results from our analysis of Cafcass court data. For a full description of our methodological approach see Section A.4.

What follows is a summary of key themes and concerns discussed by the groups. Direct quotations are used in places for illustration, but no individual or authority is identified in the report.

The national service provision for fathers is patchy at best

Services for fathers were generally seen as limited, tended to be localised, reliant on short-term funding and/or the presence of particularly committed individuals. There was acknowledgement of the lack of post-removal services in terms of in-house provision, commissioning and external organisations. Part of the discussion focused on the lack of a link between children's social care and other provisions, where parental consent is needed for a referral for services once children have been removed.

Mothers and fathers will fall through the gap once proceedings finish. There is nothing until you are pregnant with your next child. . . and at the point when you have concluded proceedings trying to get their engagement and consent [to refer to them to other services] can be difficult.

(Head of Service)

In addition, there was recognition that existing services tend to focus on mothers. The growth of services for recurrent mothers,

“Mothers and fathers will fall through the gap once proceedings finish.”
(Head of Service)

and in particular the PAUSE programme, was noted and debated in terms of what the “active ingredients” might be, and whether such services could, or should, be more father, or couple, inclusive.

This debate also reflected tensions around arguing for services that engage and support fathers, without being seen as opposed to, or in competition with, women-only services; a dilemma which is even more difficult in the context of ongoing austerity. It also identified the potential of a more couple-focused approach to dealing with recurrence, alongside the tailoring of support in a gender-sensitive way, including perhaps a bespoke service for men.

Practitioners noted that services available to recurrent fathers are predominantly perpetrator programmes and/or accessible only via the criminal justice system. Whilst being held accountable for violent and abusive behaviour was thought to be crucial and a commonly reported factor in recurrent cases, such services were not felt to always be appropriate for recurrent fathers, or might not address other significant vulnerabilities for example mental health, past trauma or lack of stable housing.

We have nothing that transcends across to fathers around their own needs, be it employment or education, or – we almost have got an expectation that they will sort it out themselves really.

(Social Worker)

“We have nothing that transcends across to fathers around their own needs.”

(Social Worker)

There are few examples of post-removal and pre-birth services which explicitly set out to include fathers and include creative thinking around adapting parenting programmes to the needs of fathers without children in their care. However overall, rehabilitative opportunities for recurrent fathers are limited, incidental, or a postcode lottery.

There is complexity in developing rehabilitative work with fathers at risk of losing multiple children to care

There was discussion of improving practice in the best interests of children and the indication of a wish to include fathers as a matter of principle. Some local authority representatives struggled to describe any explicit motivations for rehabilitative work with recurrent fathers. The wider view was that motivation to improve practice – in order to directly support men’s parenting or to address longstanding gender inequalities in parental childcare responsibilities – carries limited strategic weight within local authorities.

More specific motivational factors included:

- The high financial (and human) costs of public care.
- The additional health and/or welfare needs of some children born to recurrent parents.
- The shortage of adoptive or long-term placements for children with complex physical or emotional needs.



- The need for equity of service; in terms of positioning recurrent fathers and mothers equally accountable, and in order to offer equal opportunities for change and rehabilitation.

Whilst similarities were noted between the needs of recurrent mothers and fathers; such as support with housing, employment, mental and physical health or substance misuse, the view was also that recurrent fathers often have particular issues with violence, aggression and emotional regulation. It was acknowledged that the distribution, design, and the routes into services have gendered dimensions, which does affect the access that men have to appropriate opportunities for change. For example, most perpetrator programmes do not directly address fathering, and most parenting programmes are not available to fathers without a child in their care.

Sometimes that is the best time to do the work with the parents isn't it, when the kids aren't at the family home. . . and yet on the flip side, it may be that mum won't attract this parenting course, or if it is a dad, they may not get a place because they have not got the children, so sometimes it feels like a Catch 22.

(Legal Team Manager)

"It feels like a Catch 22."

(Legal Team Manager)

There are perceived common characteristics of recurrent fathers

A number of characteristics were attributed to fathers who reappear in care proceedings, including: learning difficulties, out-of-home care experiences, histories of violence and/or offending and substance misuse. The view was that it is common for recurrent fathers to have several or all of these characteristics.

In relation to learning difficulties and care experiences, some practitioners noted the risks and vulnerabilities of couples where both parties have these characteristics. However, it was also noted that local authority services and systems tend to respond to individuals, and to mothers in particular, rather than couples. This constitutes one way in which fathers can be marginalised or overlooked.

The focus groups also raised the issue of intergenerational mobility in the care system, as children in care become parents themselves and return to the system with their children. One pertinent observation from a service manager was that histories of local authority care and repeat removals could leave parents:

Systematically tired and cynical of engaging in assessment work. . . the function of their behaviour is to be defensive and keep themselves out of contact and out of view and it becomes a self-fulfilling prophecy.

(Social Work Manager)

"Systematically tired and cynical of engaging in assessment work."

(Social Work Manager)

There was discussion of current leaving care services in terms of the extent to which pregnancy and parenthood are considered in service provision and support offered. The consensus was that Care Leavers' services and the role of personal advisors do not always respond to young adults as actual or potential parents:



The focus becomes that young person in terms of the needs and the accommodation, not that this young person is now going to become a parent. . . and if they do, then again it focuses very much on young women rather than young men.

(Social Work Manager)

In addition, the groups acknowledged that (young) men who grow up without an involved father or father figure, or with very negative experiences of being fathered, often have limited understanding or capacity to enact responsible fathering. As a result of this, these men would be expected to have a relatively stronger emphasis on fathers' breadwinning role and economic suitability as a key part of their fathering capacity, and far less attention being paid to care-giving.

There is a gendered attitude towards recurrence: fathers are mostly seen as a risk factor while mothers are mostly seen as being vulnerable

All three focus groups acknowledged a culture of risk aversion to including fathers with certain characteristics, including substance misuse, histories of childhood neglect/abuse, poor mental health or offending behaviour. Yet where those same characteristics appear in mothers, they are more likely to be responded to as "vulnerabilities". This is compounded by the prevalence of domestic violence or abuse (DVA) as another factor associated with child maltreatment, and the statistical pattern of a majority of "perpetrators" being men and the majority of "victims" women.

Given that all the above characteristics are seen as associated with recurrence, this suggests there may be a gendered attitudinal and organisational response to recurrent mothers and fathers. This may involve or include a different level of empathy, different expectations in relation to accountability and capacity to change. Alongside this, the focus group discussions also pointed to the enduring cultural assumption that children "belong" with mothers, that mothers are "primary" carers, and that the focus of services will be on mothers.

Our traditional method of keeping children and women safe is to make mum responsible for the family. . . so we make her responsible for his actions.

(Social Work Manager)

Another practitioner concern regarding recurrent fathers was described in terms of "roving" men who move in and out of relationships without sustaining either partner, or fathering relationships or responsibilities. This was often seen in the context of interlinked, often deprived communities, where localities, families or individuals can come to be seen as "notorious". Paradoxically, this suggests that both the presence and absence of a man in a household can potentially be seen as troubling to social workers, and as a risk to mothers and children.

" . . . we make her responsible for his actions."

(Social Work Manager)



The focus groups revealed some awareness of the power of extreme or memorable cases, which shape organisational thinking and practice with recurrent fathers, something one social worker described as “mythical storytelling”. The debate within the focus groups was around the balance between acquired local knowledge, which can lead to assumptions or preconceptions in relation to recurrent fathers, versus the need for professional curiosity.

Practitioners go ‘don’t go, don’t do an alarm visit for that family, dad is really aggressive’... so people are a bit reluctant to try and engage the father then, because of the history... but that is not through their own research or what they find out themselves – and it puts them off really.

(Social Worker)

Alongside this, there is little systematic data or information about recurrent fathers; agencies often have no idea if a father is recurrent until checks or assessments are made. Knowledge may only come to light if the father has had contact with the police, other agencies, or again is well-known anecdotally or locally.

Relationships continue to be seen as both a central part of the problem of recurrence, and also part of a potential solution. Yet it can be argued that the opportunities and constraints for forming sustainable, safe relationships are different for fathers and mothers, or indeed that factors mitigate against it differently, particularly for vulnerable families. Different factors may be at stake when relationships are formed or ended, including for example: benefit entitlement, tenancies, childcare, emotional support, intimacy, scrutiny from agencies or access to support. Taking account of such differences may be valuable in terms of both building and understanding the experience of recurrence for fathers.

Mothers and fathers are treated differently: fathers have more opportunities to avoid engagement or have their engagement limited

As the focus groups acknowledged, there is often a sense of fear or suspicion of engagement among both mothers and fathers, and particularly among those who have already had children removed. Yet, how this fear is interpreted or responded to by professionals may be different for fathers than for mothers, and can be one example of the way fathers become excluded. Fathers may be more likely to be seen as defensive or wilfully avoidant, and indeed have more opportunities to avoid engagement given the cultural and procedural focus on mothers. The group discussion demonstrated that agencies may have different views or expectations to fathers regarding what constitutes “engagement”, and without transparency and clear communication an opportunity for relationship building may be lost.

Maternal gatekeeping is frequently presented as a significant barrier to professionals’ engagement with fathers; some mothers



are reluctant to reveal the identity of fathers, others may refuse, deny knowledge or only have last known address. Again, the perceived prevalence of DVA in recurrent cases makes relying on mothers as the route to fathers even more sensitive. Nonetheless, there remained a sense that maternal gatekeeping was to some extent inevitable and that jeopardising a working relationship with mothers was a high-stakes option.

The focus groups discussed ways to address this issue, ranging from the different mandate held by workers at different levels of service, to changing the referral process, to fostering conversations about why and how fathers' information is important. For some, the issue can be seen as another example of an organisational focus on mothers, which can risk unfairly blaming them for fathers' absence or abusive behaviour whilst also failing to protect them from dangerous men. For others, the issue of reaching fathers was framed in terms of children's rights, and also the accountability of agencies to do more to locate and engage fathers.

It isn't just about fathers – so if he is the notorious father that we might rule out, what about that paternal family. . . I think equally around life story work, but even if they can't be in their paternal family, children still have a right to have a connection.

(Social Work Manager)

“It isn't just about fathers. . . what about that paternal family.”

(Social Work Manager)

The constraints a local authority has to work within dictate the extent to which a father can be searched for and worked with

Overall, the view was that there is commitment to, and some improvement in, involving fathers in a timely way. However, there was also debate around the shifting criteria, enabling or prohibitive factors that may trigger activity to find or engage with fathers at particular points in local authority processes.

To unpack this debate, two aspects of involving fathers seemed prominent. One is the identification of fathers and obtaining of contact details, family history and network; and the other is the assessment of fathers as alternative carers for children. In terms of notifying fathers of the local authority's involvement and seeking some form of communication with him about any process, the view was that this is increasingly expected and sought at an early stage. The main prohibitive factors still seem to be seen as mothers' reluctance to share information, alongside practitioners' sense of 'mandate' attached to different levels of service.

It is not until we are in a formal statutory process that maybe some of them wider checks are done.

(Principal Social Worker)

In terms of how and when fathers are considered or included in care planning for children when there are serious safeguarding concerns, there was an acknowledgement of the potential for delay.



This was seen to be due to the cultural and organisational tendency to concentrate on the mother first, before seriously considering fathers. In this way, fathers can appear as (or may feel themselves to be) carers of last resort.

I mean that is the reality on the ground, we work with mum first and if mum is improving then there is a tendency that we don't look at dads to involve him as well. . . there is the general notion of more pushes to the mum and if everything fails then we look at other options involving dads.

(Social Worker)

“ . . . if everything fails then we look at other options involving dads.”

(Social Worker)

Other issues discussed in relation to the timing of fathers' involvement, particularly in the context of care proceedings were:

- A lack of time needed to support a man to take on full time care of his children - including encouraging him to see this as not just possible but acceptable as a man.
- A lack of time required to locate, engage and establish a working relationship with fathers.
- Often fighting against social disapproval, or wider attitudes about gender and parenting, when they did try to support fathers, particularly as alternative carers for children.

Parental responsibility acts as a gatekeeping or filtering mechanism

There was evidence from the focus groups of variation in how parental responsibility can constitute either a gatekeeping or filtering mechanism. For local authorities, the difficulties in identifying fathers often pose challenges in terms of how, when, and with whom to engage. They may encourage fathers to seek legal advice but do not actively play a role in supporting fathers to obtain PR. It was also felt that there can be reluctance from the family court to include or consider men such as step-fathers, mothers' partners, or father figures.

Fathers PR status also appeared to impact differently on inclusion at various stages of involvement with local authorities:

- **Early help stage:** Workers often unsure whether to override mother if she says father does not have PR.
- **Public Law Outline (PLO) and pre-proceedings stage:** Mothers' account of father's PR questioned or pursued further.
- **Proceedings and court phase:** PR status dictates nature or extent of inclusion.



The relationship between parental responsibility and paternity is complex

Gendered legal infrastructures focus on biological paternity as a means of allocating a man's rights and responsibilities towards a child. There is clearly also an important political history to the respective legal rights and responsibilities conferred on mothers and fathers. Yet it seems clear that whilst grounded in certain biological aspects of certainty over parenthood, PR produces a level of complexity around the criteria for, and experience of fatherhood, which does not exist for mothers.

The focus group discussions demonstrated that the issue of paternity is highly pertinent, in relation to acquiring the legal status of parental responsibility and to the inclusion of men in pre-proceedings and care proceedings.

Across the focus groups three categories of fathers appeared, each representing a context where paternity was troubling:

- **Putative fathers:** either for a single child or sibling group – where men are known to agencies, but paternity has to be confirmed, or where a social father needs to be acknowledged
- **“Notorious” fathers:** where paternity is uncertain, in multiple or simultaneous cases, the men may be known by some agencies but are rarely engaged with any
- **Unknown and/or “too dangerous” fathers:** (usually due to DVA or other violent or sexual offences) – where paternity is uncertain, the men are not involved with agencies, and there may be good reason for excluding him from the child's life.

Some further general issues were illustrated in the focus group discussions, in relation to PR, one being that local authorities cannot control how the law defines parental responsibility for men. However, in terms of how and when PR is used and who counts as a father, there was a shifting sense of power and accountability, between agencies, the courts, fathers and mothers.

Secondly, the view was expressed that, in terms of recurrence and repeat removals, there may be a significant group of children, likely to grow up without knowledge of their biological fathers or paternal family. This was seen as ethically complex and troubling for all concerned.

I work with young women with their babies and they are hugely vulnerable and they come from really traumatic experiences but somewhere out there are the fathers of these children. . . so we are in PLO without dads at all and then they are perhaps named and these men are excluded rightly, wrongly, it is not for me to say, but there is a generation of children who are going to grow up without biological fathers.

(Manager of Pre-birth Service)

“I work with young women with their babies and they are hugely vulnerable. . . but somewhere out there are the fathers of these children.”

(Manager of Pre-birth Service)



It is unclear whether a service for recurrent fathers should mirror what is available for mothers or should be more bespoke

The question was put to all three focus groups as to what kind of offer might be developed for recurrent fathers. Certain common elements were identified, along with a sense of the similarities and differences between the needs of recurrent mothers and fathers, and recognition of resource gaps for men. Some felt that a “mirroring” of post-removal services for mothers was a useful direction, whilst others felt that more bespoke or creative ways of working are needed to avoid making assumptions about what works for fathers. Summarised below are key features identified across the focus groups:

- Openness to responding to recurrent fathers as vulnerable (not just “risky”).
- A focus on “containment” and emotional regulation, particularly in terms of how pain, loss and shame are experienced by men.
- The adaptation of parenting support (not necessarily manualised parenting programmes) for fathers without a child in their care.
- A holistic or “wraparound” service, to respond to all aspects of a father’s life.
- A personalised or key-worker approach, to build trust and broker links with other organisations who can help.
- Some element of men-only space, and/or men-to-men peer support, as a way to both challenge behaviour and facilitate change.



4 Next steps

The evidence and discussion points reported here will inform the ongoing data collection and analysis as the research project moves into its second and final year. We will continue working with the Cafcass data to improve our understanding of fathers involved in care proceedings, what is associated with their recurrence and how that might differ from mothers. We will build on the picture presented here by collating and comparing findings from the other two elements of our project: the national survey of fathers in PLO and proceedings, and the qualitative 'keeping in touch' study of recurrent fathers.

The survey will provide information on fathers' personal, family and material circumstances, and on the local authority concerns and intentions relating to his child's case. This information will build knowledge of the context and characteristics of fathers involved in first and subsequent care proceedings. The qualitative study will provide detailed case studies of the lives of a group of recurrent fathers as they unfold over time. This insight will build the picture of the vulnerabilities, risk and resilience factors and relationship challenges that such fathers face and represent.

At this point, one take-away message which overlays the many issues raised by the findings presented here, is the value of thinking critically about gender, parenting and relationships. At the levels of frontline practice, organisational strategy, and policy development, there may be a need for greater sensitivity to how services construct and respond differently to men and women, as fathers and mothers, as well as holistically to them as couples. Professional curiosity and gender sensitivity appeared to operate as constructive forces within the focus group discussions; our suggestion then is that they may be equally important resources for imagining and implementing change in local authority practice with recurrent fathers. As stated at the outset, the far-reaching costs of recurrent appearances in the family court cannot be addressed without the fullest picture of both the mothers and fathers involved. Therefore, it is crucial to uncover and address the underlying interrelation between mothers and fathers as they return to the court as couples.

A Methodology

A.1 Legal and ethical permission

Permission for the study was granted by Her Majesty's Court and Tribunal Service (HMCTS) and the Cafcass Research Governance Committee. Ethical approval was also granted by the Association of Directors of Children's Services (ACDS), the University of East Anglia and Lancaster University.

A.2 Research Questions

The following research questions framed this report:

1. What are the patterns and over-time trends of mothers vis-à-vis fathers in s.31 proceedings?
2. What is the rate of recurrence for mothers and fathers? How do they differ?
3. How do recurrent and non-recurrent mothers and fathers compare in their individual, case-level and relational attributes?
4. What do Local Authorities consider the barriers and motivations for working with fathers to be? And what are the possibilities for service development?

A.3 Quantitative analysis of court data

Data source

In order to answer research questions one to three, we analysed a data extract based on administrative records maintained by Cafcass in England. Our data extract covered all care proceedings from fiscal years ending March 31 from 2008 to 2018.

Analytical sample

In order to identify an analytical sample of mothers and fathers for our analysis, we imposed several sample selection criteria. These are summarised in Table A1 along with the resultant sample size reduction and the percentage change with each additional criterion.

One omission from this sample, and from the administrative records generally, are parents who were unidentified by the local

Sample selection criteria	N	Δ%
Parents	176,540	100.0
+ has gender	176,450	99.9
+ is not aged under 16	175,790	99.6
+ has at least one child aged 15 or less ¹	174,280	98.7
+ is party ²	163,480	92.6
+ entered between 07/08 and 12/13 ³	77,470	43.9

authority. Our dataset captures parents who have been made respondents to care proceedings. The parents either have PR as automatically recognised by the family court, or have successfully applied to the family court to be made party.

Sample 1 and analytical strategy

The analytical sample for the first research question includes all parents who were party to care proceedings ($N = 163,480$). The outcome of interest was the duration between the start of index care proceedings to the start of subsequent proceedings. Because it is possible for proceedings involving different children of the same parent to overlap, we used start-to-start time interval between proceedings rather than the interval between the end of index proceedings and the start of subsequent proceedings to measure the timing of recurrence. Those who do not enter subsequent proceedings were classed as “right-censored” with a duration equal to the time between the start of their index proceedings and the end date of our observation window (March 31 2018). Due to the varying lengths each individual was observed, the Kaplan-Meier estimate was used to calculate the cumulative incidence over time i.e. ‘the risk of recurrence’, with mothers and fathers being included as two separate strata. The cumulative incidence was then expressed as a rate per 1,000.

Sample 2 and analytical strategy

For research questions two and three, parents who were party to a first care proceedings between fiscal years 2007/08 and 2012/13 were selected for analysis ($N = 77,470$), i.e. they had been observed for at least five years. This helps us build a snapshot of their recurrent profile at the five-year cut-off point. If a parent entered a second set of care proceedings within five years of their first proceedings, they were classified as ‘recurrent’ as opposed to ‘non-recurrent’. We then disaggregated recurrent and non-recurrent parents by gender, which yielded four comparison groups, as described in Table 1. Chi-squared tests were conducted to test for statistical differences in our focal variables (1) between non-recurrent and recurrent mothers and fathers, respectively, and (2) between mothers and fathers within the non-recurrent and recurrent groups, respectively. Significant differences were determined at the 0.1%

Table A1: Sample selection criteria for parents party to care proceedings.

¹ This sample was used to determine the percentage and trend of fathers being party to s.31 proceedings.

² This sample was used for measuring total parents entering s.31 proceedings each year, and for estimating the rate of recurrence.

³ This sample was used for comparing non-recurrent and recurrent mothers and fathers.



level.

Our analysis focused on the following variables measured at index proceedings, percentage missing for each variable is presented in Table A2: a parent's age at the start of care proceedings, number of children subject to the proceedings, age of the youngest child involved in the proceedings, and whether one's partner is identified or unidentified. For those with identified partners, two additional measures were also included: parent-partner age gap and co-residential status. As a summary of the outcome of index proceedings, the last legal order that was sufficient to close the proceedings was measured. In cases of multiple legal orders, we measured the order that resulted in the 'highest' removal which were grouped as follows:

- Returned home: Dismissed / Order of No Order
- Parental care: Family Arrangement Order / Supervision Order
- Extended family: Resident Order / Special Guardianship Order / Care Arrangement Order
- State care: Care Order / Secure Accommodation Order
- Adoption: Placement Order
- Other

Variable	Mothers	Fathers
Parent's age at start of proceedings	5.9	15.0
Number of children subject to proceedings	0.0	0.0
Age of youngest child subject to proceedings	0.0	0.0
Highest legal order group	0.0	0.0
Parent-partner age gap	12.4	16.0
Partner status	0.0	0.0
Co-resident with partner	14.5	17.2
Recurrent partner	0.0	0.0

Table A2: Percentage of missing data for variables used to compare non-recurrent and recurrent mothers and fathers.

A.4 Focus groups of practitioners

In order to answer the first research question, we ran three focus groups to seek the views of practitioners. There was also a wider aim which was to generate research data that can be considered alongside the perspectives of recurrent fathers themselves (from the qualitative longitudinal element of our project).

Eighteen local authorities (LA) were already actively involved in the research project and were invited to send up to three representatives to take part in the focus groups. Within these authorities, relationships were established with the research team, and LA co-ordinators and facilitators for the research had been identified.

The three focus groups were held in June 2018 in which 25 practitioners attended, representing 16 of the 18 local authorities.



The participants were a mixture of social work managers, social workers and family support practitioners. Within this there were principal social workers, heads of service, team managers, and solicitors from local authority legal services.

Participants were asked for written consent, which included consent for the discussion to be audio recorded. It was explained that the recordings are stored securely, are shared only with the research team, and that no individual or authority will be named in any reporting. Each of the focus groups was one hour in length and was facilitated by two members of the research team. In each focus group, the following questions were asked:

- What is the 'profile' of recurrent fathers?
- Is there delay or 'drift' in including fathers?
- Is there a need for greater clarity or consistency in how PR is understood and applied in practice with fathers?
- What are the motivations for your authority to do rehabilitative work with recurrent fathers?
- What would a service for recurrent fathers look like?

All three focus group discussions were audio recorded and transcribed. The transcripts were summarised and analysed thematically and these summaries were then shared and discussed first by the researchers directly involved in the focus groups, and then by the wider research team. This process involved identifying issues that were prominent for the participants, but also those which resonated with the wider research and policy context. A final synthesis of the key issues raised in response to the questions together with some exploration of the implications for practice was then produced.



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