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Who are parents with learning difficulties?

This chapter focuses on the assessment of parents who have learning difficulties, the issues these parents face and the implications for professionals who assess their parenting capacity. The term learning difficulties is used to include parents with a diagnosed learning disability (IQ 70 or below) as well as the far wider group of parents whose impairment is not so severe but who also struggle with their everyday lives. A learning disability is defined as ‘[a] significantly reduced ability to understand new or complex information, to learn new skills (impaired intelligence); with a reduced ability to cope independently (impaired social functioning); which started before adulthood, with a lasting effect on development’ (DH 2001, p.14).

Parents’ needs are individual but may include struggling with literacy, understanding abstract concepts such as time, and organising routines and keeping their children safe, even though they may really love and be committed to them. This chapter will use the term ‘parents with learning difficulties’ to include both parents with a diagnosed learning disability and those with a learning difficulty.

What are the concerns about the welfare of the children?

Poor parenting is not directly linked to parents’ IQ when it is above 60; rather, it is related to parents’ difficulties with learning, combined with their often poor socio-economic status, lack of social networks and role models, and additional physical and mental health support needs. These parents often do not have the support they need to develop the necessary knowledge and skills for parenting (Darbyshire and Stenfert Kroese 2012; Emerson and Brigham 2013; Tarleton, Ward and Howarth 2006).
instance, if parents struggle with literacy, they will not be able to read most of the literature available on parenting, including the leaflets provided by midwives.

**What are the outcomes for the children?**

Increasingly, research evidence suggests that outcomes for children of parents with learning difficulties are likely to be poor (Collings and Llewellyn 2012). Hindmarsh, Llewellyn and Emerson (2017) undertook secondary analysis of data from waves two to four of the UK Millennium Cohort Study, and found that children of mothers with intellectual impairment face a heightened risk of poor social–emotional wellbeing (at ages three and five) and peer exclusion (by self-report) at age seven. In addition, Wickström et al. (2017) found that, at seven, children of parents with intellectual disabilities in Sweden were at increased risk of injuries, violence and child abuse. Collings and Llewellyn’s (2012) literature review found that these poorer outcomes for children of parents with learning difficulties were linked to the poverty and poor social environments experienced by parents with intellectual disability rather than to the parents’ intellectual disability itself (see also Chapters 28 and 29). However, more recently, findings from Emerson and Brigham’s (2014) UK study, adjusted for between-group differences related to low socio-economic position, showed parental intellectual disability was associated with an increased risk of child developmental delay and speech and language problems, although not with child behaviour problems or frequent accidents or injuries.

**What are children’s views of their lives?**

A small number of (mainly retrospective) studies have sought the views of the children of parents with learning difficulties. One recent inquiry by Wołowicz-Ruszkowska and McConnell (2017, p.482) describes children experiencing a ‘different, yet ordinary’ life. However, they and other researchers (Faureholm 2010; O’Neill 2011; Ronai 1997) also identify that children reported bullying and ostracism related to their mothers’ intellectual impairments and difficulties with relationships (Lindblad et al. 2013). The importance of informal support, often from a female family member, in providing them with a stable positive relationship is also highlighted (Faureholm 2010; and see Chapter 29). Only one (small-scale) study addresses children’s views of formal support (Collings, Grace and Llewellyn 2017), and this suggests that family support from professionals can also provide enduring positive relationships for children.

**Dilemmas and difficulties when assessing parents with learning difficulties**

There are a number of issues that are particularly pertinent when assessing the parenting capacity of parents with learning difficulties. These include:
parents' social exclusion and the related stigma of having learning difficulties

parents' eligibility for services

parents' fear of engagement with services

workers' lack of experience, and therefore making assumptions regarding parents' parenting capacity and need for support

timescales in child protection proceedings.

Within the wider context (see Chapter 1), the current crisis intervention approach and provision of short-term services only are inconsistent with parents' needs for ongoing support, which may have been an identified outcome from the assessment process. This chapter does not have space to address these issues in any greater depth, but the reader is asked to consider the impact of austerity on service provision and the dilemmas faced by workers who believe long-term support would enable parents to ensure their children’s wellbeing but fear that such support will not be provided.

**Parents' social exclusion and the stigma of having learning difficulties**

Adults with learning difficulties often have long histories of exclusion and failure in school and employment (Redley 2009; and see Chapters 28 and 29). They may be socially excluded in a number of ways, such as unemployment, poor social networks and mental health support needs (Cleaver and Nicholson 2007; Darbyshire and Stenfert Kroese 2012). Even though they may struggle with aspects of their lives, many parents with learning difficulties will have been to mainstream school and may not consider themselves to have difficulty with learning or may fear the stigma of having this ‘label’.

This can cause problems for professionals: for example, workers may feel worried about discussing a parent’s possible learning difficulties for fear of insulting or stigmatising them. Simple screening tools can be used, or advice sought from the community learning disability team if workers are concerned about parents’ levels of understanding and learning. Although sensitive, this issue must be addressed to help support parental engagement (e.g. through tailoring communication), and to ensure best outcomes for the children and appropriate support for parents.

**Parents' eligibility for services**

Parents who do not have a diagnosed learning disability tend not to be known to services or to be eligible for support from the adult learning disability teams, since many teams focus support only on adults with an IQ under 70. However, they may have support needs which should be assessed and addressed before their parenting capacity is assessed (Care Act 2014; HM Government 2018). The Care and Support (Eligibility Criteria) Regulations (2015), in England, state that an adult may be eligible for support if:
• their needs arise from an impairment or illness
• they are unable to manage at least two ‘specified outcomes’ (which include caring responsibilities for a child, maintaining a habitable home environment or accessing services)
• in consequence, the adult’s wellbeing will be significantly impacted. (Regulation 2(1))

Parenting capacity assessors should be aware of the support available and its actual/potential impact on the adult’s parenting. The child’s needs are always paramount, but ensuring their parents’ needs are also met may improve outcomes for the children.

**Engagement with services**

Arguably more than other parents who come into contact with services, these parents are likely to be anxious and even resistant to engagement with professionals (see Chapter 7). They may equate scrutiny and assessment with the threat of child removal, and this may impact on their response to questioning and observed interactions with their children. When adults with learning difficulties do not understand abstract concepts, they may agree or acquiesce rather than highlight their lack of understanding. Practitioners need to be particularly sensitive to this possible reaction by parents, and to be careful to provide a clear and transparent explanation of the purpose and procedure of the assessment (Budd 2001). An advocate can provide parents with emotional and practical support, and also support professionals to ensure that parents understand the assessment process and the concerns about the welfare of their children (Tarleton 2008). An advocate may be a necessary ‘reasonable adjustment’ to ensure effective two-way communication in accordance with the Care Act 2014 or Equality Act 2010.

**Workers’ lack of experience with adults with learning difficulties**

Research shows that many workers have no experience or training in working with this vulnerable group of parents (Tarleton et al. 2006). They may try to meet parents’ needs, within busy caseloads, without the necessary knowledge or skills base. This can result in practitioners feeling unskilled, ill-equipped and less confident. Workers may also find their assessments are not accepted as ‘expert’ by courts, or they may be challenged by lawyers that the parents have not received a ‘fair trial’ (see below). Advice should always be sought from the adult learning disability team and/or occupational or speech and language therapists, and workers should be familiar with the *Good Practice Guidance on Working with Parents with a Learning Disability* (WTPN 2016; see also HM Government 2018, paragraphs 30 and 32 and Appendix B ‘Guidance issued by external organisations’).
Assumptions about capacity and parents’ need for support

Parents report facing stereotypes, such as they should not or cannot parent or learn the necessary skills. This can inhibit them from asking for help or engaging with professionals, as they fear that revealing difficulties might result in their children being removed from their care (Tarleton et al. 2006). Parents’ learning difficulties per se can also be mistakenly considered as a reliable indicator of parenting capacity. Research has shown that, although parents with very low scores on intelligence tests (IQ scores below 60) do tend to have more difficulties, an IQ score below 60 does not, of itself, provide a sufficient basis upon which to infer incapacity or predict future harm to a child (Tymchuk and Feldman 1991). Callow, Tahir and Feldman (2017) indicate that in the US IQ is still overused as a proxy for parenting ability. This trend is also reported widely by professionals in the UK.

Parents report that some assessments appear to seek to confirm their inability to parent, rather than to understand what they can do and what their support needs are, and that they are held to higher standards than other parents (Tarleton et al. 2006). The Commission for Social Care Inspection (2009) confirmed that higher expectations are placed routinely on parents with learning difficulties than other parents. Courts have held that the unique circumstances in each family should be considered and society must be willing to tolerate very diverse standards of parenting (Re L (A Child); (Care: Threshold Criteria) [2006]). Assessors are advised to reflect critically on the possibility of bias in their professional value judgements when assessing parents with learning difficulties (see also Chapter 4).

Research shows that parents with learning difficulties can learn, adapt and overcome parenting difficulties when appropriate teaching methods and supports are employed (McGaw and Newman 2005). Assessors should be aware that whilst parents may genuinely love their children, their learning difficulties are lifelong and they may need long-term support to ensure the children’s welfare as the children grow and raise new challenges.

This principle of ongoing support (or ‘parenting with support’/‘supported parenting’) is central to the English and the Scottish good practice guidance documents on working with parents with a learning disability (Tarleton et al. 2006; WTPN 2016; SCLD 2015). The need of parents with learning difficulties for proactive, longer-term support is key to policies supporting vulnerable children. For example, the Scottish Supported Parenting Guidelines have been included in the Children and Young People (Scotland) Act 2014 (see, for example, The Scottish Government 2016 [AQ]).

Longer-term support, or support as and when needed, could help to keep children with their parents, where possible, as envisaged by the UN Convention on the Rights of the Child (1989), the UN Convention on the Rights of Persons with Disabilities (2006), the Children Act 1989 and the Human Rights Act 1998.
Timescales in child protection proceedings
Parents with learning difficulties are disproportionately represented in child protection proceedings (Masson 2008 [AQ]). The 26-week timetable for the conclusion of proceedings is particularly challenging for these parents as they need time to learn new skills and knowledge. The assessment is a key factor in the court’s decision. It is vital, therefore, that assessments are carried out at the earliest opportunity by specialist assessors, and that supports and training are put into place as quickly as possible, if the process is to be fair and families are to be given any chance of staying together.

Where an assessor believes that a brief extension to the 26 weeks is essential to allow the parent to demonstrate engagement and capacity to change (see Chapters 7 and 11), they should say so. The court does have the power to extend, but will do so only where justice requires and it is within the child’s own timetable (Re S (A Child) [2014]).

Key principles when assessing parents with learning difficulties
Parents with learning difficulties are entitled to ‘reasonable adjustments’ (Disability Discrimination Act 1995 in Northern Ireland; Equality Act 2010 in England, Wales and Scotland) to ensure their needs are met by services (DH and DfES 2007; Tarleton et al. 2006; WTPN 2016). This section provides key principles which would enable assessments to be tailored/reasonably adjusted accordingly.

Expert assessors
In Re C (A Child) [2014] a ‘targeted and suitable expert assessment’ was required as well as ‘expert and insightful analysis and support from a suitably qualified professional’. Assessments should be carried out by professionals with experience of working with adults with learning difficulties, or with the support of services that work with adults with learning difficulties, so that due regard is paid to the parent’s learning difficulty (Kent County Council v A Mother [2011]).

Assessments also benefit from contributions from a wide variety of professionals (see Chapters 8 and 15), including clinical psychologists who can provide insights regarding the impact of the parent’s learning difficulty on their life and parenting; speech and language therapists who can provide support regarding communication; and occupational therapists who provide insight regarding how parents can be taught practical skills. If it is safe for the child, assessments should be undertaken in the parent’s own home as this is where parents are likely to feel most comfortable and able to participate. This also means they are assessed in a familiar environment and not faced with added complications, such as using new equipment (DH and DfES 2007; Tarleton et al. 2006; WTPN 2016).
Clear communication

Professionals should, of course, engage with all parents as positively and individually as possible, but given their experience of stigma and negative assumptions regarding their parenting ability, parents with learning difficulties suggest that professionals should take particular care to be polite, friendly and respectful, and take time to build a positive, trusting relationship with them (WTPN London Parents Advisory Group 2014). When possible, parents appreciate being told in advance of visits, and the professional arriving on time. Parents have observed that if they do not arrive to a meeting on time, this can be taken as a sign of disengagement, but when professionals are not there on time, they are simply running late.

Practitioners assessing the parenting capacity of parents with learning difficulties should ensure they communicate slowly and clearly using short sentences with only one (‘concrete’) concept per sentence. They should highlight positives where possible, use words that are easy to understand, and avoid jargon, abstract concepts and double negatives as they are very confusing.

Workers may need to explain and explain again. This explanation should be straightforward and tell parents ‘as it is’, to avoid misunderstandings. Technical terms such as ‘parenting assessment’, ‘attachment’ or ‘case conference’ should be clearly explained. Professionals should match their body language and expressions to the information being given – that is, not share bad news or serious concerns regarding the welfare of the children while smiling, even if sympathetically.

In written communication, parents often benefit from ‘easy read’ versions of documents and letters, but it is good to check first with them about individual preferences. Generally, easy read information includes:

- a large, clear font
- numbers in the text (‘20’, not ‘twenty’)
- clear explanatory pictures, preferably photos, of the actual places and people which represent the key points from the text.¹

Parents also benefit from support to engage with the assessment process, such as text reminders of meetings and transport organised, or by ensuring they know the correct route/bus numbers. Assessment outcomes should also be communicated clearly to them, in an easy read format if required. The courts have recognised that sometimes a parent’s apparent failure to engage with professionals is simply a result of the professionals’ own

¹ More information about writing easy read materials can be found at: www.changepeople.org/free-resources and www.inspiredservices.org.uk/Information%20for%20All.pdf [AQ]
failure to communicate effectively, or due to their use of inappropriate practices – for example, ‘The courts must be careful to ensure that the supposed inability of parents to change might itself be an artefact of professionals’ ineffectiveness in engaging with parents in appropriate terms’ (Re G and A [2006]); ‘I conclude that there is at least a possibility here that the negative assessment of SH stemmed in part from the fact that [the social worker] and SH were simply not on the same wave-length when discussing matters’ (Derbyshire County Council and SH [2015]).

Where it appears that the parent cannot change some aspects of their parenting, options to bridge these gaps (e.g. by using appropriate support) must be fully explored (see Chapter 11).

**Early assessment**

Parents with learning difficulties may have their parenting capacity assessed on numerous occasions. Parents will often benefit from an assessment for ‘early help’, which may inhibit serious concerns being raised regarding the wellbeing of their children (see also Chapters 2, 15 and 16). This is especially so when parents are supported to develop the necessary skills and knowledge, or provided with support to overcome barriers to positive parenting (such as help with benefits or access to mental health services). Parents are often assessed pre-birth (see Chapter 27). This early assessment and support could help ensure a healthy pregnancy and positive outcomes for the baby. It is known that mothers with learning difficulties are more likely to experience traumatic pregnancies and give birth to premature and/or low birth weight babies when not provided with timely and appropriate support (Hoglund *et al.* 2012a, 2012b).

**Focus of the assessment**

Parenting capacity assessments should be competency promoting. They should focus on parents’ current knowledge and skills, their learning ability and the circumstances under which the parents successfully learn or apply knowledge (see also Chapter 11). Professionals should recognise that parenting capacity is influenced by many factors, including the children’s changing needs, as well as the parents’ socio-economic context and the resources and support available to them (Munro 1999; Spencer 2001; Turney *et al.* 2012; and see Chapters 9 and 10). Parents are often isolated, with little support, and may be struggling with a wide range of issues (including poor mental or physical health). Assessment of the parents’ ability, therefore, should be undertaken in the light of appropriately individualised support that is, or should be, available to the parents (whether from family, friends, community resources or services). The appropriateness and impact of these services should be considered (see Chapter 11). If a service has not been tailored to the parents’ learning and communication needs, it is unlikely to be effective and could even be undermining.
There are a number of tools that lend themselves to the assessment of parenting when the parent has a learning difficulty. These include the following:

- **The Parent Assessment Manual** (McGaw 1998)² is the most frequently used assessment tool for supporting parents with learning difficulties (as reported in Tarleton *et al.* 2006, and anecdotally since). It is a comprehensive, computer-based assessment covering 31 domains, ten that are child focused (e.g. feeding, healthcare, guidance and control, responsibility and independence) and 21 that are parent focused (routines, abuse, relationships and support, environment and community, etc.). It includes knowledge cartoons, observations and workbooks, and should lead to recommendations for teaching/support.

- **Signs of Safety**³ is also reported as providing a structured, positive approach for assessment (Bunn 2013). It is recognised as being positive and strengths based, using a clear, easy to understand format, which engages parents and children and enables professionals to be specific about the issues.

- **Learning Curves** (Morgan and Goff 2004) is a specific assessment for parents with learning difficulties, developed by Norfolk Safeguarding Board.⁴ The pack introduces parents with learning difficulties, their contexts and support needs, and factors that assessors need to consider.

- Psychometric assessments can help assessors understand how a person communicates, understands, retains and makes use of information. This should inform the type of assessment and how it is carried out. However, psychometric assessments should only be used in the context of multi-method and multi-source assessments, with practitioners clearly indicating the limitations of the assessment measures.

Wherever possible, multi-method assessments should include direct observation of actual parenting skills in the home setting (see Chapter 9). Alternatively, assessments may be undertaken at children’s centres or, if the child is at risk, a residential assessment or mother and baby foster placement.

**Recommendations from the assessment**

Assessment recommendations (see also Chapter 4) should be detailed and specific, allowing for the possibility of parental, social and environmental contextual change, growth and development, as well as the possible need for ongoing support. The

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² [www.pillcreekpublishing.com/pams_more.html](http://www.pillcreekpublishing.com/pams_more.html)
³ [www.signsofsafety.net](http://www.signsofsafety.net)
duration, type and level of service required should be specified. A wide range of support can be provided to parents through children’s centres, nursery places and ongoing support in the home from family support workers, as well as Shared Care (informally through family or friends or formally with foster carers), Short Breaks or Shared Lives placements (where the parent lives with a carer who provides ongoing support).5

The recommendations should also include review dates for services provided (particularly where long-term service intervention is recommended) to ensure that the changing needs of children and their parents are considered and met appropriately. As always, individual service planning, if undertaken in consultation with the family, is more likely to have successful outcomes for supporting children within their families.

Summary

Parents with learning difficulties are, perhaps, one of the most vulnerable groups of parents who come into contact with services due to concerns regarding the welfare of their children. These parents have difficulties with learning, and often face a wide range of barriers to parenting well and ensuring positive outcomes for their children, such as poor mental health or poor social support networks. Assessment of their parenting capacity should take place after their own support needs have been assessed and met, and should focus on what they can do, as well as the difficulties and their support needs. Parenting capacity assessments should take place as early as possible, and should consider the impact of any services/support already provided. Clear communication is key to the assessment process, which should lead to clear recommendations regarding the support that the family needs. Assessors should have experience of working with adults with learning difficulties and be supported by other relevant professionals to ensure a comprehensive and appropriate assessment of parenting capacity.

Parents with learning difficulties are disproportionately represented in child protection proceedings (Masson 2008 [AQ]). The 26-week timetable for the conclusion of proceedings is particularly challenging for these parents as they need time to learn new skills and knowledge. The assessment is a key factor in the court’s decision. It is vital therefore that the assessments are carried out at the earliest opportunity, by specialist assessors, and that supports and training are put into place as quickly as possible, if the process is to be fair and families are to be given any chance of staying together in accordance with their human rights.

5 https://sharedlivesplus.org.uk/faq/about-shared-lives [AQ]
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