



Assessment of Parenting Capacity

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www.lawlink.nsw.gov.au/ccc

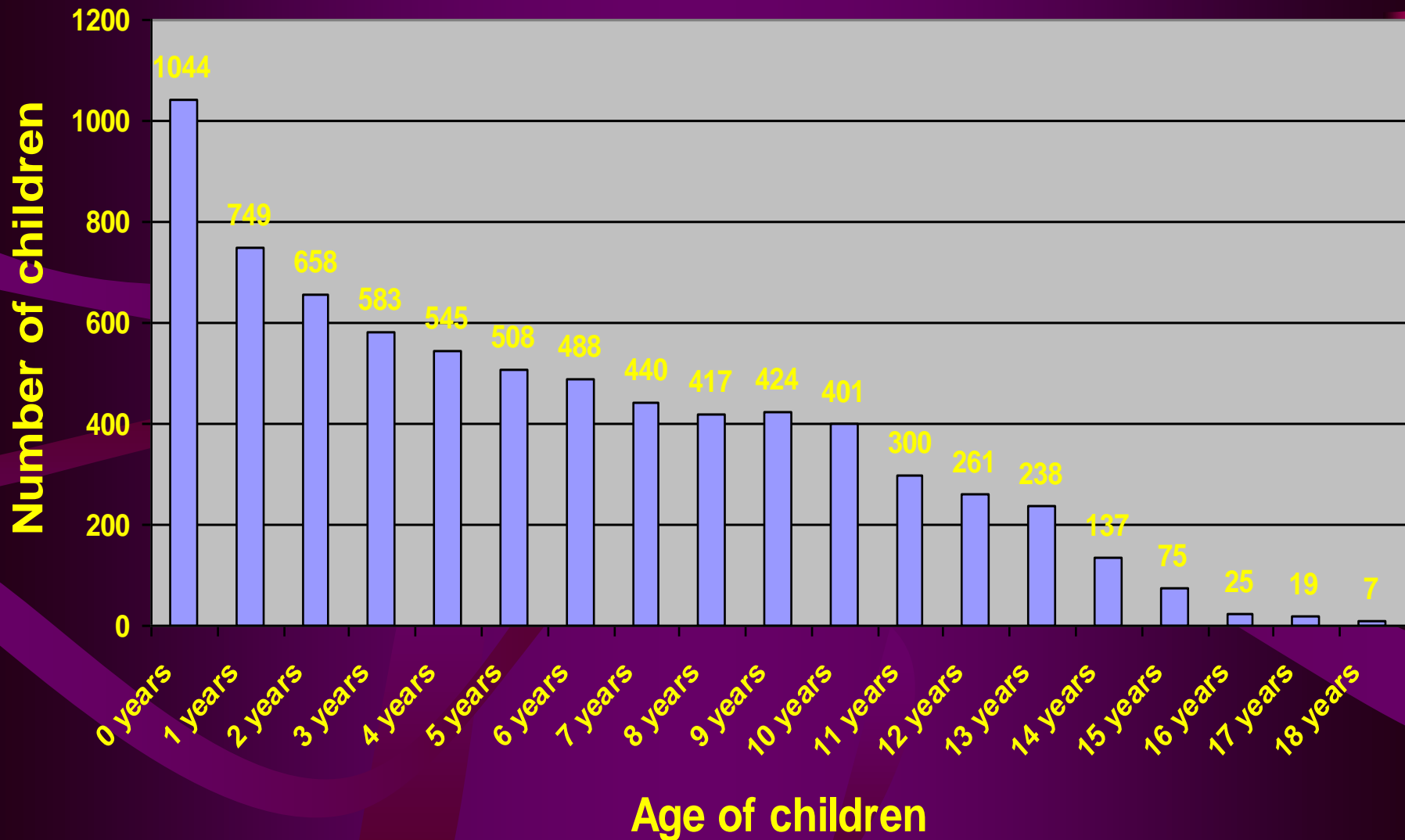
The Big Picture

- **Why are you here? Why do you need to know about this?**
- **Clinical, ethical and professional problems**
- **What can/can't mental health professionals offer?**

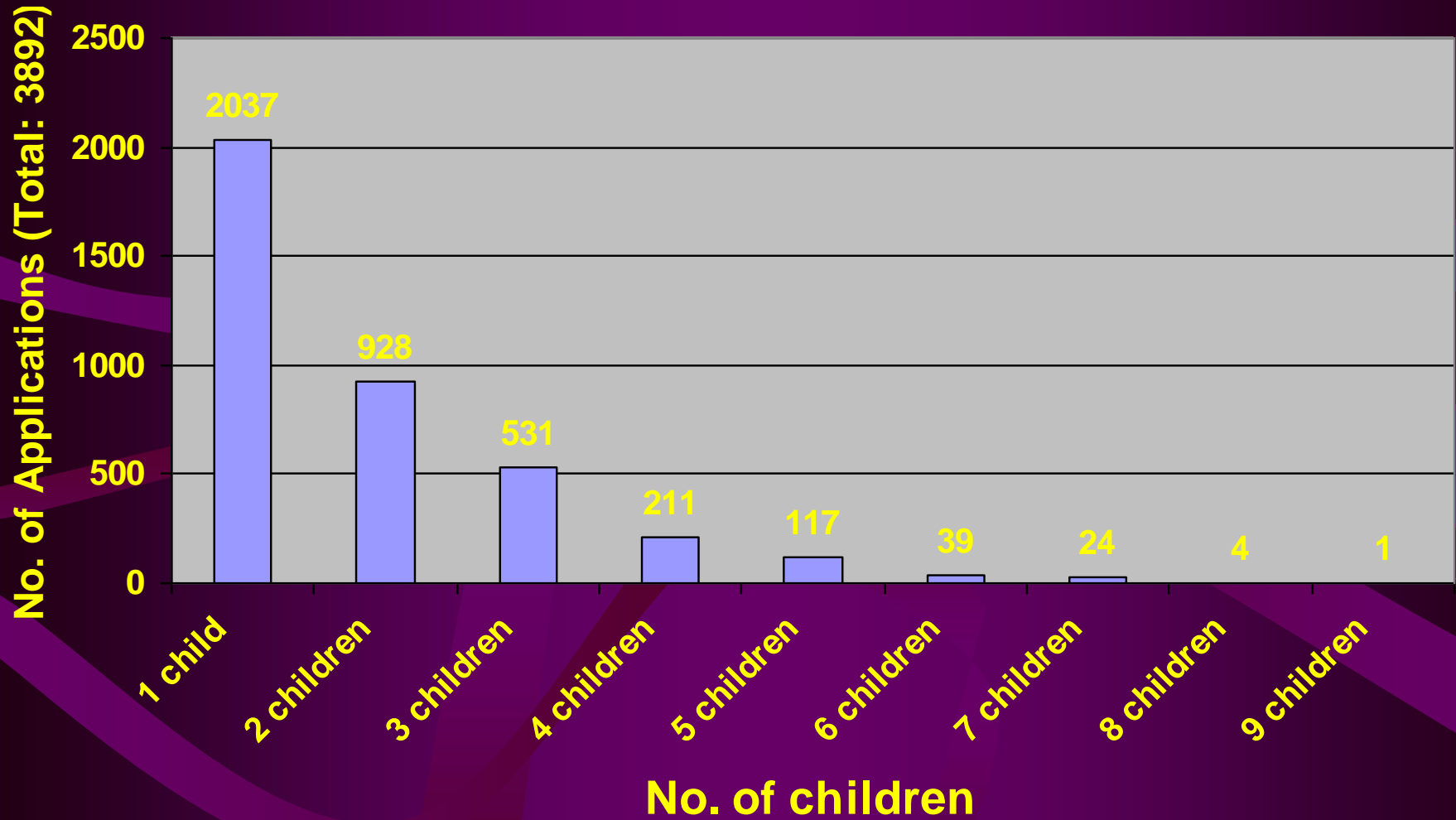
The NSW Children's Court Clinic

- Set up by NSW Children & Young Persons (Care and Protection) Act 1998
- Conducts **independent assessments for courts**, mostly of children, and of parenting capacity
- Both internal and contracted Authorised Clinicians (child psychologists, social workers and psychiatrists) conduct assessments, and are expert witnesses in court.

Ages of Children Referred...



Children per Order ...



Questions we attempt to answer

(See the clinic website for more details*)

1. Parenting capacity/responsibility

2. Parent/caregiver–child relationships

3. Children and young persons' individual characteristics, needs and wishes

4. Suggestions for steps to achieve desired outcomes

-But we need an agreed case summary, and to know what specific problems the court needs to resolve.

* www.lawlink.nsw.gov.au/ccs

Abusive Parents and their Children

- **Risks of parents' drug and alcohol abuse**
- **Abusive parents (Denver Group)**
- **The abused child's perspective (Martin)**
- **Children in abusive and neglectful families (Crittenden)**

Risk and Protective Factors in Vulnerable Families

Fonagy (1998)

- (i) Biological factors
- (ii) Family and social factors
- (iii) Quality of parenting
- (iv) Quality of attachment status
- (v) The influence of non-maternal care

Caregiver relationships are primary:

practical parental empathy/ responsive caregiving

Areas Affected by Child Abuse and Neglect

- **Physical development**
- **Emotional development**
- **Behavioural development**
- **Social development**
- **Cognitive and cultural development**

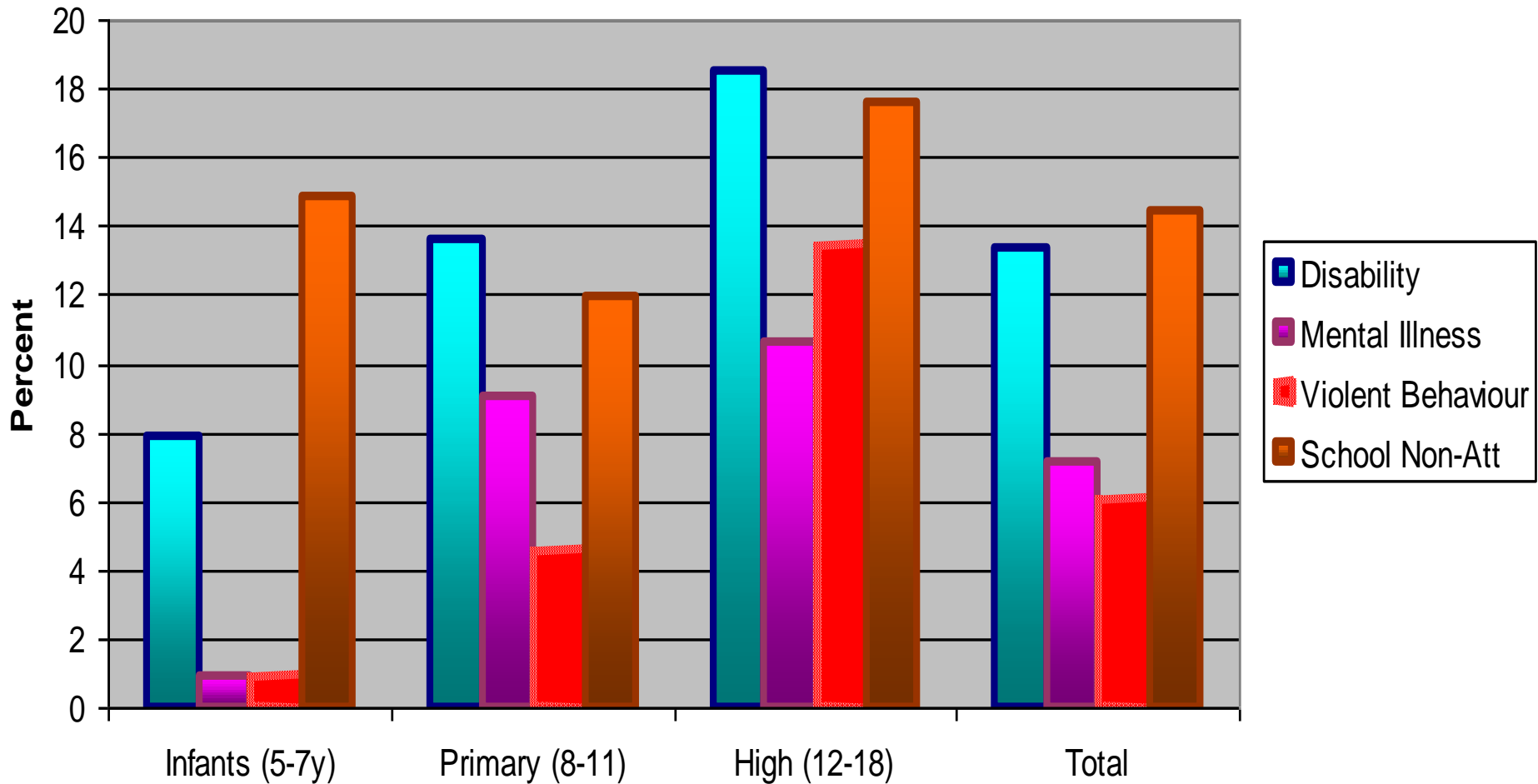
Development not even, sequential or harmonious

What Children Need, and the Impact of Child Abuse and Neglect

Area	A Child Needs	Problems...
Physical	Physical care and safety	Physical, nutrition, growth, dental, coordination
Emotional	Empathic Attention and Attachment Relationship	Attachment disorders, FTT, emotional and behaviour
Behavioural	Emotional and behavioural self-regulation	Attention, impulsivity, aggression
Social	Role models	Social, language
Cognitive and Cultural	Cultural Education	Attention, play, problem-solving, education, culture

Clinic Data: Child Problems

School-Aged Children



Parents' Resources



- Responsive caregiving and protection
- Reflective Function
- Bonding
- Emotional availability
- Strategic behaviour management
- Ability to transmit the community's cultural and social values.

Assessment of Parenting Capacity

Child Needs	Parent Resources		
	Normal	Vulnerable	Chronic Need
Physical Care and Safety			
Empathic attention			
Attachment Relationship			
Emotional and behavioural self-regulation			
Role model			
To learn			

Child Needs Assessment

Physical Care and Safety	<ul style="list-style-type: none">•Welfare and medical/ development history,•Developmental assessment,•Observation of behaviour,•Predictable developmental crises
Empathic attention	<ul style="list-style-type: none">• Observation, attachment assessment
Attachment relationship	<ul style="list-style-type: none">• Relationship history, attachment assessment
Emotional and behavioural self-regulation	<ul style="list-style-type: none">•Behaviour problems and emotional symptoms,•Family observation, social interactions, school reports
Role model	<ul style="list-style-type: none">•Behaviour, peer socialisation, adaptive behaviours
Cultural education	<ul style="list-style-type: none">•Education, peer socialisation, recreation, cultural and spiritual development

Assessment of Parents' Resources

Responsive Caregiving and Protection	<ul style="list-style-type: none">•History, observation of parentcraft (e.g., PSI long form)•Cognitive/language abilities•Adaptive behaviour (e.g., ABAS)•Risk Predictors (e.g., CAPI, SAARA)
Reflective Function	<ul style="list-style-type: none">•Clinical interview, AAI, partner interviews, attachment assessment
Bonding	<ul style="list-style-type: none">•Relationship history, attachment assessment, PCRI
Emotional Availability	<ul style="list-style-type: none">•Mental health, interview about the child, observation of interaction (e.g., MSE, DASS, PAI, PSI, CAPI, SASSI-3, STAXI-2)
Strategic Behaviour Management	<ul style="list-style-type: none">•Observation of interaction: management of behaviour, behaviour problems
Community values	<ul style="list-style-type: none">•Social, educational and work history,•Extended family network, socialisation, community links,•Capacity to foster cultural/moral/spiritual development¹⁵

An Ordinary Assessment Model

- Reason for the referral
- Obtain a history of the family
- Parent and child:
 - Cognitive aspects/Adaptive behaviours
 - Emotional/Personality/Psychiatric aspects
 - Social Interaction
- Specific tests of family functioning
- Formulation (formulation tool)
- Recommendations

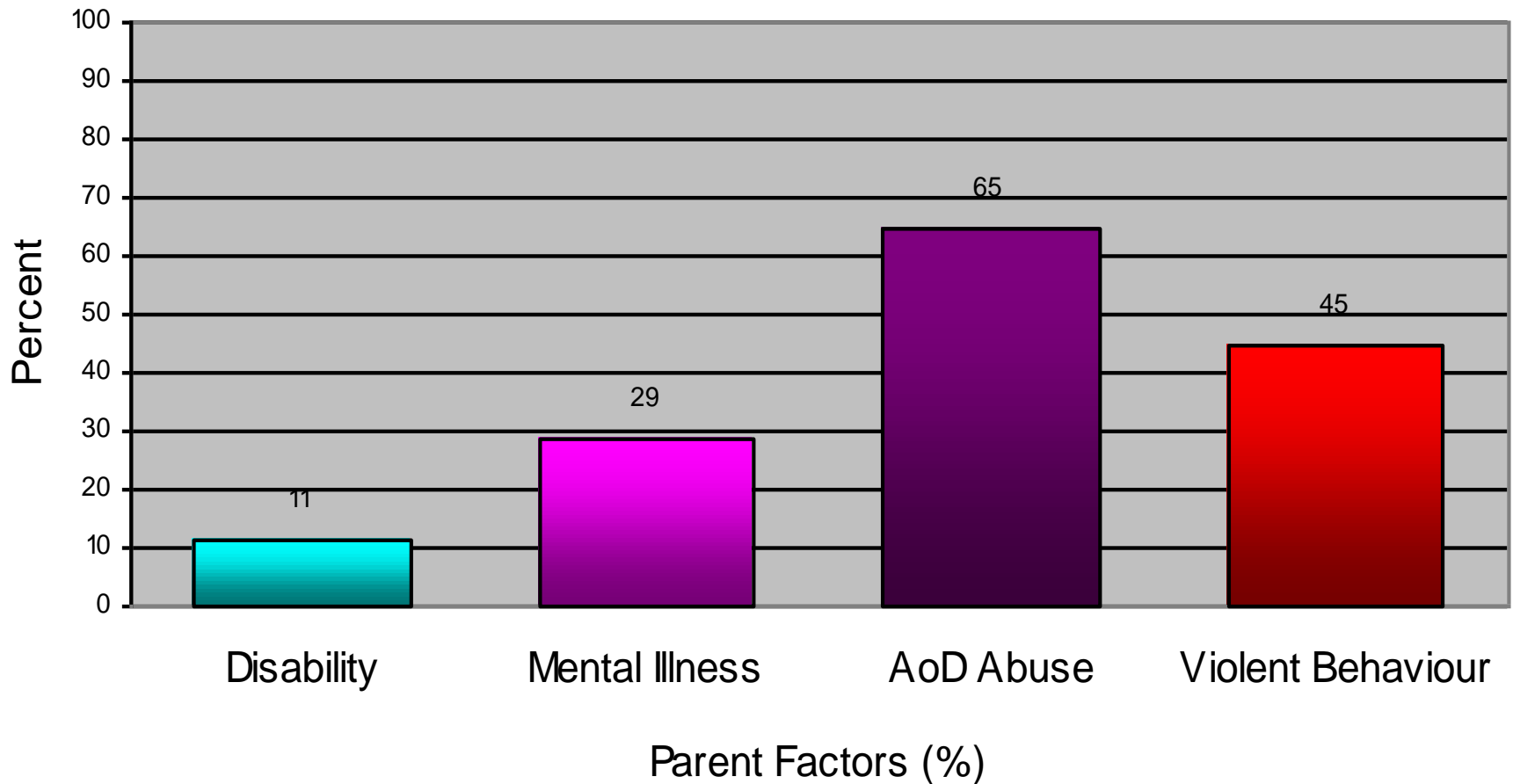
Specific Risks and Challenges

- Intellectual disability
- Drug/alcohol problems
- Personality disorders
- Maternal health
- Mental health
- Domestic violence
- Cross-cultural, ecological factors



Clinic Data: Parent Problems

Parents of children assessed by the CCC



Difficult decisions

- **Is the child in imminent danger?**
- **How inadequate or damaging is the family?**
- **Concrete evidence of a child's vulnerability?**
- **How likely are supportive interventions to change things?**
- **How adequate are the alternatives?**
- **Placement factors**

The big question:

Will the child benefit from restoration?

Think: What is in the child's best interests?

•Yes?

- **Immediate (unconditional)? or**
- **Conditional? – treatment, placement, contact: but can the child wait?**

•No?

- ▶ **What environment will be safe, nurturing, stable and secure for this child?**
- ▶ **Contact visits**
- ▶ **Future prospects**



**The End
– Thanks**