

Good enough parenting

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The concept of Good Enough Parenting, introduced by Winnicott in 1965, has been useful to distinguish between care of children which is not ideal, and care which warrants removal of children from a family. There have been various attempts to turn the concept into practice guidelines, most notably by the British Agencies for Adoption and Fostering (Adcock & White 1985). However there is a dearth of Australian material and little which is concise.

Barnardos Australia believed that it was necessary to produce a short practice paper to address this critical issue in child protection practice. This paper was developed through a series of workshops with Barnardos workers which focused on their practice needs. It was designed to assist in decisions about parenting standards which are difficult, not the most obvious situations of neglect or abuse. The paper suggests ways of thinking about good enough parenting and practical questions to bear in mind in family assessment.

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THE PROBLEM

Although it is sometimes obvious that parenting is so poor that the children must be removed, the situations which welfare workers face are more often ambiguous. Although judgements on good enough parenting can be difficult, they are also critical, as 'getting it wrong' can affect a child's whole life. Although Courts hold the ultimate decision on removal, the impact of welfare workers' actions (such as a notification, withdrawal of family support services, reporting to the Court and constant scrutiny) can be very significant to the child and family.

Consideration of 'removal' of the child can cause enormous concern to workers. They often feel that they have insufficient information and too few resources to offer a family. The situation may rapidly polarise, with strong family hostility which becomes personally distressing for the worker. On the other hand, the responsibility of leaving children with the family weighs heavily, even when workers are committed to the importance of family to children. Workers also need to be aware of the issues for those who have mandatory and legislative responsibility in such cases.

Decisions about parenting standards are ones for which welfare workers are often criticised in the media and at public hearings: on the one hand for intervening with little justification, on the other for leaving a child in a 'dangerous situation'.

There is local evidence for both of these criticisms. In a study of child abuse notifications in Western Australia, David Thorpe (1994) concluded that

83% of all notifications were closed within one year. Almost half had been made against single-parent families, and many families had been reported because of the way they raised their children. However, during the same period 19 children being investigated by the NSW Department of Community Services were killed by their carers in their family homes (NSW Parliament 1996).

Continued exploration of the concept of good enough parenting is necessary, as child welfare has a poor history of understanding the complex issues surrounding good enough parenting. Aboriginal children were removed from their families on the basis that Aboriginal people could not be adequate parents. Child migrants were separated from their parents, families and culture and brought to Australia up till 1965 to give them a better way of life when their parents were unable to care for them (Barnardos Australia 1997). Both these policies are now seen as clearly inappropriate. However the situation may not necessarily have improved, with concern being currently expressed about the treatment of the children of the poor usually single parent household (Callahan 1993) and the rates of Aboriginal children in Juvenile Justice Centres remaining high. In 1995 the United Kingdom Department of Health stated:

Social Workers and their seniors are not offered the opportunity to acquire the sophisticated skills, knowledge and qualitative experience to equip them to deal confidently with the complex and emotive issues raised by work with children and families (Dept of Health 1995).

WHY JUDGEMENTS ABOUT GOOD ENOUGH PARENTING ARE SO DIFFICULT

When workers assess standards of parenting, they make complex decisions involving a range of community and professional judgements.

Ideally, these judgements are the practical expression of theoretical training given in welfare and social work education, aimed at understanding the cultural, class and personal factors which affect parenting and which are acceptable in our society. Individual professional and personal understandings of these issues further affect the judgement, as does the workers' experience of community and agency expectation.

A number of issues present real challenges to workers.

The difficulty in defining abuse

The very definition of abuse is controversial and shifting, and can be dependent on the context of the family. It is often left to the welfare worker to make decisions about parenting when the community is itself divided.

Abuse is nowhere clearly defined. The closest definitions we have are individual case decisions made through the Children, Criminal and Family Law Courts. However these, and the United Nations Convention on the Rights of the Child do not offer clear guidelines to child welfare practitioners. The New South Wales Child Protection Council has provided one of the best developed lists of abuse in the Draft Interagency Guidelines (New South Wales Government 1996), but professional discretion is still required.

Ambiguity in definition is partly a function of the fact that standards of care change over time. (Consider the attitude towards corporal punishment in Victorian times and the attitude of most schools today). In some situations these norms change quickly. For example, there have been significant changes in attitudes about accepted sexual behaviour towards children, and changes in the political power of women. One hundred years ago, only sexual intercourse with children was

defined as sexual abuse, but 'touching' has now often come to be seen as sexual abuse.

Standard of care also varies with class. For example, attitudes towards violence appear to be class-related. In New South Wales high domestic violence rates show a clear correlation with suburbs low in the socio-economic indicators (Devery 1992). This is a significant problem if those making decisions on parenting standards are of a different 'class' from client groups. The question of what cultural variation in behaviour to accept is also difficult. For example, it has taken Australians some time to come to a political position on female circumcision, a decision that some members of communities which practice this custom no doubt reject.

In addition to lack of clarity in broad community definitions of abuse, there are current and local issues which can lead to greater scrutiny of particular types of behaviour. Issues under media scrutiny may affect the worker's judgement about parenting standards. Welfare 'fadism' may be attributed to the need for workers to react to current community concerns. Goddard (1992) claims that ritual abuse is an issue which has been given undue prominence and has inappropriately affected workers' decision making. Repressed memory syndrome (Pope & Hudson 1995) is another contemporary example of this issue which has been taken up with gusto but which may have serious theoretical and empirical problems.

The difficulty of defining 'normal'

As well as these considerations, there are serious conceptual difficulties in defining normal or average behaviour in everyday practice. Workers' understanding of 'normal' may be distorted by their own values and experience, even by social welfare theories. It is essential for child welfare workers to look at the parenting debates within their community and to explore the issue in supervision and in team meetings with other staff.

The table of normal sexual behaviour in families (Dept of Health 1995) (Table 1) may not tally with workers' professional view of acceptable social behaviour related to children. However, these figures were drawn from recent English research, using a random sample of children aged between 4 and 16 who had not been abused.

Judgements about physical abuse may similarly not 'gel' with welfare workers' understanding of acceptable behaviour. In a 1990 study in the United Kingdom, four-fifths of parents studied hit their children. A study of 403 children found that most had been hit, the overall rate was 91% and three quarters of children under the age of one had been so disciplined (Dept of Health 1995). These figures are not dissimilar from studies in Australia (National Child Protection Council 1994).

There have been attempts to determine what is normal by analysing non-neglectful parenting in the United Kingdom when validating the 'Looking

Table 1 (UK Dept of Health 1995)

Parents report the child definitely or probably having:	%
Touched mother's breasts	63
Touched father's genitalia	12
Drawn genitalia	35
Been seen masturbating	67
Seen 'simulated' sexual intercourse on film/TV	31
Seen pornographic material	9
Seen horror movie	30
Bathed with parent	77

After Children - Assessment and Action Records' (Clare 1996). This study normalised parenting in six age-related categories, on the following seven dimensions: health, education, identity, family and social relationships, social presentation, emotional and behavioural development and self-care skills. These have been incorporated into the 'Looking After Children' case management tools, however, no 'normal' or 'average' level can be set.

Difficulty of assessing the significance of behaviour

The workers' expectation of a family's capacity to care for children can be coloured by their professional values and understanding of how much society will assist the family.

One important dimension in considering parental capacity is the worker's beliefs about the cause of and solution to child welfare problems, particularly about whether the functioning of the family is the result of external social structures such as poverty, or 'something' internal or personal such as psychological inadequacy. If the workers believe that poverty leads to social isolation and poor knowledge of how to parent, they may be more willing to keep a child with a family (if those supports are available). However, if workers understand abuse as the result of personal inadequacies which cannot be changed in a reasonable time frame, they may not be prepared to accept the child remaining with the family.

Based on the experience of Barnardos' workers, access to secure housing, respite care and baby sitting, assistance with domestic violence, and social support or holiday breaks assist many families to cope with rearing their children. Barnardos' experience is that abuse can be significantly reduced for some parents by modelling and teaching of adequate parenting skills and non-abusive ways of managing. In some cases this may be a long process and input may be needed for many years. Clearly decisions about leaving a child in a family will be shaped by this view, and the availability of appropriate services.



Similarly, workers are affected in their decision on parenting by their views about how parents come to be 'non-coping'. A single mother who grew up in child welfare, is the victim of domestic violence and has an addiction problem may be significantly neglecting the well being of her young children. However, she can easily be viewed as a victim herself, who will be further disadvantaged by the loss of her children through whom she finds purpose and future hope. Such a position may lead to the children being inappropriately left in the home. Similarly, adopting the view that parents are to blame for their circumstances may lead to 'child saving', with premature removal of children from a family.

Workers' personal reactions, even those formed through many years of work, may lead to poor judgements about parenting standards. Workers coming from a middle-class household may be horrified by the standards in a 'poor' household and may misinterpret their significance. Ironically another

worker may see a situation where the child is being cared for inappropriately in a poor community, and dismiss it as what one would expect to find. Such 'hardening' of views may mean that a child is inappropriately left in a dangerous situation.

Judgements on good enough parenting are also the result of the experiences of workers with families, and how they perceive the child and the capacity of the family to change. A series of disappointing results with families can lead a worker to become pessimistic. This can result in failure to mobilise social resources for a family when change could occur. In addition workers' assessments of a child's behaviour are highly personalised and may also distort perceptions. Their personal experiences may lead them to be relatively blind to a problem. For example, a worker may have experienced beatings as a child in a loving family, and may believe that beating has little effect on a child's development.

Workers' understanding of their agency's mission may also lead to underestimating the significance of parenting behaviour. Programs which are primarily concerned with violence against women may overlook neglect of a child or view it as intrinsically related to the domestic violence. Similarly programs which have a parent support focus may not want to jeopardise their relationship with the parent by checking that there is adequate food for the child, or making sure that they see the child regularly.

Difficulty of knowing how much help can be provided

Judgements about adequacy of care are coloured by the alternatives we have available to care for the child. The law is clear that intervention in a family can only be justified if there is improvement in the standard of care which is then offered. Effectively, however, workers are 'gatekeepers' of the substitute care system. Often complete removal from the family is the only 'assistance' that can be offered to a child. Substitute care is very often 'all or nothing', ie, the family either has total or no involvement with the child.

Some welfare agencies reject any notion of partial help and move towards 'punishing poor parents' in the design of their services. For example, many children would not need to enter care if they had access to respite care, or shared care arrangements. This could not only give the child role models and 'normal care experiences' but could effectively remove pressure on parents. Under such arrangements young people need not lose contact with their families, who will generally be their greatest long-term source of stability, and are not stigmatised by entering the care system.

There are often few resources to support a family and the alternative is the removal of children. However, workers with an understanding of the damage done to children through failed foster care placements, poor decision-making and release of children prematurely into independence, may be unwilling to make the decision to remove children.

The child's potential to be placed is also a consideration. If a child is going

to run from any alternate care there is little point in removal. The child's role in the family, eg, as a carer for a parent with a psychiatric disability, may also impinge on the decision about whether to leave that child in the home.

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USEFUL QUESTIONS IN ASSESSING 'GOOD ENOUGH PARENTING'

Despite the complexity of defining standards of care, child welfare workers must determine a point at which care is not 'good enough'. There is currently a growing professional interest in the development of risk management for child protection (McPherson, Macnamara & Hemsworth 1997), and developments in this area should be followed closely and incorporated into practice. However these should be used as a supplement to practice judgements, and are unlikely ever to replace sound holistic assessment.

The following questions may assist the ultimate decision on 'good enough parenting':

1. *How many children have been born to a family? Is there any evidence of difficulty in explaining the death or removal of other children?*

Previous history is the most significant predictor of threat to a child. For this reason there should be early and detailed social histories of the numbers of children

born to a family and their whereabouts.

2. *Have you seen the child alone to look for the child's serious indication of concern about his/her own future?*

The child's indication that he or she does not want to live in a situation should be listened to with care. Information gathered should be balanced with an assessment of the child's maturity and the competing rights of the others, particularly the parents. A child's desire to live with the family when there is threat of significant harm may be rejected.

The question of what age is acceptable for a young person to have the right to choose to live in a situation of significant harm is, however, a difficult one. Many older adolescents, removed from their family as a child, choose to return to the family as they get older. Some young women who have been sexually abused choose to return home to protect younger siblings. Barnardos has found there is little benefit in attempting to remove adolescents from an abusive situation if they are determined to remain.

3. *Is your assessment child focused?*

Assessment of good enough parenting must be 'child focused', that is, the focus should be on the impact on the child, not on parental intention or behaviour. Inadequate parenting may result from ignorance as well as intentional or deliberate omission, but can be just as damaging.

4. *Have you tested out your interpretation of behaviour to see if you are exercising inappropriate understanding of 'normal' behaviour and your role?*

Workers should explore 'norms' of behaviour through discussion with experienced workers about the reasonableness of behaviour in a particular community, class or cultural group. Supervision and team meetings are an important venue for clarifying the significance of behaviour which is worrying a

worker, and of the role being undertaken.

Local norms and culturally specific values can generally be best explored by getting to know local communities. Ex-consumers are an important source of understanding behaviour towards children and its significance. Organisations such as associations for young people in care can give this perspective from the child's point of view.

5. *Has the family refused support services?*

There are many reasons which may underlie a family's refusal to avail themselves of help. Furthermore, families have the right to refuse assistance, and may have been through the same 'unhelpful' interventions many times before. However, families are in a difficult position if they refuse assistance when under scrutiny by child welfare officials. Most families are aware that this refusal will be interpreted as showing a lack of commitment to their children.

Workers need to be aware that social isolation is an important risk factor for children. This is not only because children in isolated families cannot be helped by concerned advice or scrutiny by neighbours and friends. It is also because social isolation may mean that pressures on parents 'build up' and they are not assisted through ordinary social contact to deal with feelings and practical problems.

Workers should identify the intensity and frequency of contact between children and other adults before considering whether the children are socially isolated

6. *Do parents meet minimum standards in our community?*

It is necessary to consider the whole family context when determining whether parenting falls below the minimum acceptable.

In assessing the long-term effects of differing parenting styles, the severity and endurance of the particular incidents can be important. In a warm, supportive environment children who have been hit once or twice seldom

suffer long-term negative effects. Similarly, while a short period of neglect or emotional abuse is likely to cause unhappiness and some harm, an important part of the professional's task will be to understand the wider family context....most professionals find themselves judging the severity and chronicity of experience against the backdrop of other happenings in a child's life.

...occasional neglect, unnecessary and severe punishment or some form of family discord can be expected. It is a question of balance in the interactions with the child. If parenting is purely negative, it will be damaging; if negative events are interspersed with positive experiences, the outcome may be better. In a warm supportive home, it may be better for a parent to get very cross and later apologise than to do nothing at all. However in families low on warmth and high on criticism, negative incidents accumulate as if to remind a child that he or she is unloved. (Dept of Health 1995)

GUIDELINES

Given the complexity of making value decisions, the following standards are a guideline for some areas of minimum parenting. Children's needs for these factors vary according to their age and maturity. The following categories of issues follow the 'Looking After Children' (Clare 1996) case management tools.

Health

Nutrition

Nutrition will be considered 'not good enough' when it harms the child's physical well being and future development. The child's food intake should be noted carefully. It is sometimes overlooked in making assessment of a child's care, and must be taken very seriously. In extreme situations, inadequate nutrition will be obvious, but in less extreme cases objective measurements such as weight loss or weight tables must be considered.

Refusal to seek medical care should be considered seriously when significant harm may result and behaviour is

outside cultural or religious norms for the child's family.

Safety, supervision, clothing and lifestyle

Clothing

Clothing must be considered when it seriously jeopardises the child's physical well being. There are cultural and resource issues that must be understood and dealt with here. Practices such as 'swaddling' and/or being sewn into winter clothes can affect health, as can inadequate warm clothing in winter.

Shelter

Inadequate or dangerous shelter can endanger a child's health but problems with accommodation should not, in general, mean that children and parents are separated for any significant time.

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Supervision

The adequacy of parental supervision needs assessment. This is often dependant upon the physical environment. A child playing in a fenced, grassed backyard with no rubbish and no access to traffic flows may be completely safe with minimal parental supervision, whereas a child in a typical Department of Housing house with inadequate fencing, nearby traffic flows and access to rubbish would need far higher levels of supervision.

Education

The reasons for non-attendance at school should be examined carefully and the need of preschool children for adequate educational stimulation acknowledged.

Family and social relationships/social presentation

Physical discipline

Physical punishment of children is a controversial matter in the community and workers must exercise caution in making judgements in this area. However physical punishment which is excessive, frequent or leaves bruising or injury is unacceptable. Physical punishment which leaves marks around the neck or the face and physical discipline which is ongoing within a low warmth relationship should be viewed seriously.

Social development

Children must have the opportunity to mix with people outside the family in a way consistent with family and community norms. Isolation from other children should be considered seriously. Some groups in the community tend to relate only within their own group. This is not social isolation; it is group isolation. The isolated Children of God religious community is an Australian example of acceptable exposure to social development. In this case the children were returned to their families by the Courts, to the embarrassment of the Welfare Department in two States which had removed them.

Sexual abuse

A child has the right not to be raped or assaulted or suffer psychological damage which will affect adult sexual development. The decision to leave a child in a family where the offender remains, is always difficult, given the high recidivism rates for offenders and the vulnerability of children who have already been sexually abused.

The family's ability to protect the child from further abuse is critical to the decision to leave a child with the family. For further discussion of these issues refer to Barnardos Monograph on Child Sexual Assault (Foote 1995).

Emotional and behavioural development

Emotional well being is one of the most difficult factors to assess because of the wide range of behaviour accepted, personality differences and the roles of nature and nurture in emotional development. However, it should not be overlooked. Slow social development can be measured through tests of 'failure to thrive', and educational and developmental testing.

Particular care is necessary where the child is suffering serious emotional damage such as severe anxiety, depression, withdrawal or aggression, odd or bizarre behaviour. (This may require medical, psychological, psychiatric or neurological assessment). Workers should understand that the State has been particularly poor at providing emotional support to young people in its care. The study of wards leaving care indicates a very high rate of suicide attempts (Cashmore & Paxman 1996).

There is currently a growing professional interest in the development of risk management for child protection, and developments in this area should be followed closely and incorporated into practice.

IDENTIFYING WHEN FOSTER PARENTING IS NOT 'GOOD ENOUGH'

'Good enough' foster care must be judged by higher standards than apply to care in a birth family. This is because foster parents do not have the same importance in relation to a child's sense of identity and belonging. Furthermore there is a moral and legal obligation to ensure that standards of care in alternate care are better for the

child than the standards of a birth family. In NSW the Children (Care and Protection) Act states this clearly. The New South Wales Carers' Code of Conduct which outlines standards is an important document to use in assessing adequacy of foster care.

However, the longer the child remains with a foster family the more normalised the situation becomes, and the standard of good enough care it must reach may shift, depending on the child's wishes.

The point at which a foster placement may no longer be 'good enough' will depend on:

- the overall quality or 'balance' of care. However, the standard of physical care in foster care should always be of a high average, compared with the standard of that social class or group in the community.
- the wishes of the young person. Children who express a desire to leave a placement must have their reasons and feelings fully explored and must be taken seriously. As foster children have already experienced considerable loss, their rejection of a placement should be considered seriously.
- the length of time that the child has been in placement. Stability and continuity are important factors, particularly for children who have had a very disrupted past. The foster family's importance to the child must be considered, even though foster families will generally be less able to meet a child's need for identity, bonding and belonging than would a birth family.
- the practicality of finding alternative living situations which better meet the need of that particular child. While this is seldom articulated, it is always an issue. Being able to identify options and the problems surrounding alternative placement allows balanced judgements to be made.

Factors which could trigger intervention in foster placement, excluding the issues dealt with in the Code of Conduct, cover:

- lack of sympathy for the child and critical attitudes towards the child or young person;
- unreasonable resistance to birth parents and a negative attitude to extended family;
- child's lack of a sense of belonging in long-term placements;
- inflexibility in dealing with child's behaviour;
- over-dependence or refusal to co-operate with the team. However the growth of autonomy in placement should be encouraged;
- poor level of commitment to the agency's discipline policy. (This acknowledges the impact of emphasis on total compliance with the discipline policy);
- inconsistent routine or obsession, eg, with tidiness, which has a negative impact on the child.

CONCLUSION

Ultimately decisions about good enough parenting must be made by the worker in supervision.

Ideally professionals assess the severity and duration of the suspected abuse: they consider the child's reaction and his or her perceptions: they look at the parent's attitude and willingness to co-operate, and they sometimes think about the effects on the child's development. Ideally they look for any protective factors which will make his or her life more viable. Professionals also have to weigh up the effects of the intervention on the child's long-term well being (Dept of Health 1995).

However, workers can never be 100% certain that their decisions are correct and must live with a level of uncertainty. Welfare workers carry a heavy and difficult responsibility determining 'good enough parenting'. It may be that no one will ever be able definitively to answer the question about when a family is too dangerous for a child, or so neglectful that significant damage will be done. However, asking the right questions in a supported situation is critical, as is liaison with others who know the child; and these will assist in making the right decision. We do not wish to look back on our view about parenting standards in poor families today in the same way that we look back on our treatment of indigenous children and child migrants. □

REFERENCES

- Adcock, M. & White, R. (Eds) 1985, *Good Enough Parenting: A Framework for Assessment*, British Agencies for Adoption and Fostering, London.
- Barnardos Australia 1995, *The Decision to Notify*, Monograph.
- Barnardos Australia 1997, *History of Barnardos Australia*, Monograph.
- Callahan, M. 1993, 'Redefining Child Welfare' in *Feminist Approaches: Women Recreate Child Welfare*, ed B. Wharf, McClelland and Steward, Toronto.
- Cashmore, J. & Paxman, M. 1996, *Wards leaving care: A longitudinal study*, Social Policy Research Centre, University of NSW.
- Clare, M. 1996, The 'Looking After Children' Project in Western Australia, unpublished paper presented to the ACWA Biennial Conference, August.
- Department of Health (UK) 1995, *Child protection: messages from research*, Studies in Child Protection Series, HMSO, London.
- Devery, C. 1992, NSW Bureau of Crime Statistics and Research.
- Foote, W. 1995, *Child sexual assault practice*, Monograph 27, Barnardos Australia.
- Goddard, C. 1992, 'The 'ritual' and 'satanic' abuse of children: Crop circles and the organised abuse of children require a careful and considered approach', *Children Australia*, Vol. 17, No.1, pp. 27-34.
- McPherson, L., Macnamara, N. & Hemsworth, C. 1997, 'A model for multi-disciplinary collaboration in child protection', *Children Australia*, Vol. 22, No. 1, pp. 21-28.
- Mission of St James and St John 1993, papers presented at the 'Protecting our children: Where do we draw the line?' forum, held in Melbourne, 18 June.
- New South Wales Government 1996, *Interagency guidelines*, NSW Child Protection Council.
- National Child Protection Council 1994, *Information kit: Governments and the community co-operating to prevent child abuse and neglect*, National Child Protection Council, Canberra.
- New South Wales Parliament 1996, *Inquiry into Children's Advocacy*, Legislative Council Standing Committee on Social Issues.
- Pope, H.G. & Hudson, J. 1995, 'Can memories of childhood sexual assault be repressed', *Psychiatric Medicine*, Vol. 25, No. 1.
- Thorpe, D. 1994, *Evaluating Child Protection*, Open University Press, London.