Child psychotherapists working with children and young people involved in family court proceedings

Introduction

This briefing document has been compiled to explore and explain an aspect of child psychotherapists’ work that does not fall within the usual CAMHS provision, but is instead offered within specialist services which may form part of a wider CAMHS team.

In some areas a court report will be commissioned by social services which have a Service Level Agreement in place with the providers, but in others it is commissioned by individual local authorities on a case by case basis.

Some services will offer pre-sentencing reports for the Criminal Justice System but the majority of this work done by child psychotherapists falls within cases which are heard at family proceedings courts.

Most child psychotherapists providing court reports or acting as expert witnesses do so as a member of a multidisciplinary team, although some child psychotherapists work independently and are instructed as individuals.
**Work for the family court**

Following the breakdown of functioning within very complex families, the court will seek information about the parents and the child, often in order to see if remaining in the care of their parents is the best course of action for the child. The primary purpose of a parenting assessment is to form an opinion concerning whether a particular parent or couple can function adequately as primary carer/s to their child or children, and, if so, to consider what support is needed to promote the children’s welfare in the family. The formal assessment report serves as a recommendation to the court which will then decide an outcome.

In order to have information to assist in making this judgement the court will seek to understand the child, especially in terms of his or her emotional needs. The letter of instructions may well ask the child psychotherapist to evaluate the extent of harm that the child has suffered, their developmental status, and needs for the future - including placement, contact, therapy and education - and also the capacity of their parents to understand and meet those needs.

**Parents and infants**

Child psychotherapists are also asked to assess parents and infants. This requires the use of specialist skills, which are an important part of a child psychotherapist’s training. They are able to observe the attachment and interaction between parents and infants and to understand the responses of children who are too young to express themselves through language or play.

Child psychotherapists commonly assess and treat highly disturbed children who have had experiences of physical, emotional or sexual abuse. The skills they have acquired from these experiences serve them well for work in family court proceedings.

Carrying out a court assessment with a child is a complicated task requiring the child psychotherapist to satisfy two often competing and contradictory demands. On the one hand, the child psychotherapist seeks to understand the child’s view of the world and any source of emotional distress, difficulty and developmental concerns, particularly those based on environmental impingements.

In order to do this in the usual way, they would join the child in play, talk and action to establish a position of trust, and show their empathy. On the other hand, the context of a court assessment, and the amount of material and information given to a child psychotherapist, makes it different from carrying out an ordinary assessment.

They are pressurised further by the need to find out information from the child about their experiences, to gather their wishes and views when they are often emotionally and cognitively unable to do so.
Similarly, most of the children that are seen by child psychotherapists are caught in an impossible situation. It is extremely rare - though not unheard of - that a child will express the wish to be removed from their birth family and placed in care. Consequently, they are faced with the dilemma that to tell the truth, to “spill the beans”, as it were, about the extent and nature of their experiences, the level of physical, emotional and sexual abuse they may have suffered along with neglect, may well further endanger the certainty of them remaining with their birth family. This is a loyalty conflict in the extreme and the biological bond to birth parents, however abusive, is often very strong.

**Key tasks when making a court assessment:**

- Understand the child’s internal world and development (emotionally, socially, psychologically), their attachment relationships and communicate this effectively
- Find a way to represent the child’s voice, which can so easily be lost in court proceedings and with families in conflict
- Put this into a frame and language that is robust and acceptable to the courts in order to highlight and prioritise the needs of the child.

Consequently, when carrying out an assessment child psychotherapists need to bear these tensions in mind and, in particular, try to get a real picture of the child’s emotional and social development and welfare which is then communicated to the network and court in a way that is meaningful and substantial. This would entail writing a report on the child that solicitors can recognise is based upon a solid theoretical and clinical framework, preferably with some evidence base.

**Work with families involved in court proceedings**

The way that a child psychotherapist works with families involved in court proceedings varies from service to service, but will involve individual meetings with the child or children, possibly meetings with parents (this work may be done by other colleagues) and possibly seeing the child and parents together. It is important to bear in mind that this is not therapy, although it may be therapeutic and that the normal rules of confidentiality do not apply. The child psychotherapist will explain this in language that is appropriate to the age of the child or children being seen.

Child psychotherapists are trained to pay close attention to what is happening when they are with a child or with children and parents, to notice and remember details. The skills used in on-going work with patients can be adapted for, and applied to, the assessments that child psychotherapists provide for the family courts.
Child psychotherapists will gather information that can be used to form an opinion in a variety of ways, depending on the age and abilities of the child. They may ask questions, inviting the child to draw family members and talk about them, or they may gather their evidence through watching the child’s play.

When a child is given the opportunity to play with toys, carefully chosen to give as much space for them to be used in a symbolic way, he or she will usually show something of their internal preoccupations. Noting the sequence is absolutely essential. *When* something is done is as important as *how* it is done. Child psychotherapists have been trained to remember in this way.

In providing reports to inform others, it is vital that the interview is remembered and recorded in detail so that the readers can use their own thoughts and judgment. Some practitioners use video or audio recording of their interviews, which is not part of usual child psychotherapy practice.

**STORY STEM ASSESSMENT PROTOCOL**

Some child psychotherapists have been trained to use the Story Stem Assessment Protocol. As part of this technique children are presented with the beginnings of a set of stories, using doll and animal figures, and asked to “show me and tell me what happens next”. They are invited in effect to complete each story in their own way. Their stories reflect their own expectations and perceptions of family life based on their own experiences.

Using the validated rating scheme, these can be compared with the stories of other children, both those who have suffered maltreatment, and those who have not and the child’s responses can then be analysed for recurring themes.

Child psychotherapists do not rely on the spoken word, the overt answer to the direct question - so much more needs to be taken into account. Rather they notice small body movements or if there is a slight hesitation before a child or young person says a particular word, which alerts them to the fact that some emotions, which they may not yet understand, accompany that part of the narrative.

They are also aware of the emotional tone when observing a piece of play, and note the significance of how a child or young person responds to a question.

Child psychotherapists have been trained to be alert to and use the feelings evoked in themselves as a way of understanding the other.

They make allowances for the strangeness of the particular setting, but something of the way a child or young person interacts with them is likely to offer useful information about their general, as well as their specific, expectations.
Composite case example:

Moira, 35, has six children ranging in age from 13 years to 18 months. There were two fathers involved, but she has separated from the last one and is now a single mother. All her children have been placed in a variety of foster placements after an incident when she went into her eldest daughter’s bedroom and found her with her brother on top of her, both naked. She contacted the social worker and the children were removed.

Moira now wants all her children back in her care. Part of the complex background history of the family is that there had been social services involvement over the years related to neglect. The house was chaotic and the children’s clothes were dirty. It was reported that two of the children were severely delayed in their development. The two fathers have also both come forward to take care of the children that are theirs.

The piece of work requested in the letter of instruction asks for a cognitive and mental state assessment of the mother and her parenting capacities, and an assessment of the two fathers and their parenting capacities.

The service is also asked for an assessment of each of the children and their physical, educational, social and emotional functioning, their possible therapeutic needs and placement needs. Then the attachment relationship between each of the children and each of the parents is requested, alongside the sibling relationships, which would help with the recommendation on placement.

Sometimes child psychotherapists are asked to state whether or not they are of the view that it would be in the children’s interests to stay living with the biological parents and, if not, to consider viable alternatives.

For Moira’s children this would raise the question of whether it would be in the best interests of each child for them to stay together as a sibling group or whether they would do better if separated, and, if so, whether any of them should remain together.

In the light of the sexual activity they might also be expected to comment on any of the children’s particular needs and behaviour should lead to a recommendation for that child to be placed in a foster placement where they are the only child.

This is a big piece of work requiring an expert team of adult, family, as well as, child specialists.

Writing a court report

An integral part of the work is the commitment to produce timely reports in keeping with family court deadlines. The child psychotherapist will summarise and process large amounts of information. The reports on the individual meetings conducted by the child psychotherapist will in most cases be incorporated into a larger report to be created by the wider team.

Some services send the detailed report of each individual session so that the court can read the evidence and form their own conclusions. Others, aware that the court may have much to read, pull out of their reports on individual sessions the aspects that they consider to be of significance.
It is vital that child psychotherapists hold onto an awareness that what was seen and noticed is a ‘snapshot’, an impression.

They should be able to state with absolute clarity what they have seen, what they think about what they have seen, and why they think it: but they must also acknowledge that their view is inevitably partial.

In a multidisciplinary service the whole team involved with the case is likely to meet to discuss their thoughts, and it is always useful and informative to share perspectives.

Pre-sentence reports

In the cases of young people who have been convicted of an offence, the court may seek an opinion from the child psychotherapist on sentencing. Questions may be asked of them as to whether the young person is amenable to psychological treatment. They may also seek advice about placement and supervision.

By means of carrying out a detailed psychodynamic assessment, the child psychotherapist is able, perhaps with the co-operation of colleagues from other disciplines, to contribute to an understanding of the meaning of the offence (something not usually within the remit of the court).

In this way they can speak for the needs of the young person for rehabilitation rather than the kind of punishment that may do little to prevent re-offending.

Risk assessment is often a part of this process, which may provide for supervision or monitoring in a way that can facilitate, not impede treatment.
Attending court

Going to court as an expert witness is an anxiety-provoking situation and everyone involved needs to be fully prepared, having read all the updated papers appearing before the family proceedings court.

The child psychotherapist needs to be very familiar with the report that has been submitted and must be able to face cross examination on every aspect of the work and the opinions formed during the assessment.

Barristers ask probing questions about methodology and how this relates to opinions formed. Child psychotherapists in court address the judge and do not get caught up in the adversarial atmosphere often created in the court room.

The very nature of court proceedings with its adversarial approach and search for facts and the truth of the situation sit uneasily with the kind of sensitive work required to truly assess the social, emotional, educational and developmental needs of the child.

The evidence base

All child psychotherapists have a high level of expertise in child development which allows them to be able to state whether the behaviour that they witness from a child or young person falls within certain developmental norms.

Additionally, child psychotherapists are familiar with Attachment Theory and can describe what they see of a child’s various attachments. It may be important to explain the apparent contradiction between the abused child’s experiences and yet wish to remain with the abusive caregiver, which may be difficult to convey to the family courts.
What they, as clinicians, need to make clear is that strength of attachment and bond is not
the issue, rather its level of security and organisation.

They need to be able to make it clear that a child will cling to an abusive, frightening or
unpredictable parent even though they are suffering considerable harm.

Bowlby’s theoretical grounding of attachment in biological and etymological process
makes it an invaluable way of understanding this apparent contradiction. A significant
number of children assessed will present as disorganised in their behaviour.

The child psychotherapist will use a variety of highly specialised tools in their work, often using or adapting the Adult Attachment Interview, the Child Attachment Interview, and the Parent Development Interview which have the advantage of being evidence-based and measurable.

They may also use the Story Stem Assessment Protocol (SSAP) which is derived from
the work of the MacArthur Story Stem Battery. It has been used extensively in research
and clinical practice to explore the ‘internal working models’ of children’s attachments
and how they perceive their relationships.

Some of the research into the use of Story Stems has particularly focused on the mental
representations of family life children have when they have suffered abuse or neglect.

The SSAP is best used with children between the ages of four and eight. For child
psychotherapists who are skilled at engaging children in this way, it often consolidates
their clinical impression of a child, giving further weight to their sense of the child’s
internal worlds and emotional wellbeing.

**Commissioning child and adolescent psychotherapy**

If you are interested in commissioning a child psychotherapy service in your locality, either via your local NHS CAMHS or via a private provider, please call the ACP office on 020 8458 1609 or email contactus@childpsychotherapy.org.uk. Details of institutions and individual child psychotherapists providing a court report service are also available. You can access more information on our website, including further briefing papers on the work of child psychotherapists with looked-after children, in schools, in hospitals, with parents and carers, with children with disabilities and through long-term and intensive work.

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