

Parenting capacity assessment: Improving decision-making





Introduction

As discussed in the Research to Practice Note, *Effective Parenting Capacity Assessment: Key issues*, parenting capacity refers to a parent's ability to protect children from risk and enhance their developmental experiences.

This Research to Practice Note complements the above document. It serves to acknowledge the complexity of parenting capacity assessments and present some practical strategies that can enhance the quality and accuracy of the assessment process.

Background

The assessment of parenting capacity is integral to the work of child protection practitioners. Most assessments consist of consensus-based guidelines that require clinical judgement in their application and interpretation.

A number of strategies have been identified that can assist with the assessment process and improve both its quality and accuracy. As described below, strategies range from using multiple sources of information and avoiding over-reliance on instruments to having an awareness of cultural factors and the special needs of some parents.

Strategies to improve clinical judgment and assessment

1. Use of multiple sources of information

To help verify the information used in parenting capacity assessments, it is recommended that information be drawn from a range of sources, such as:

- interviews with the parent(s)
- interviews with the child or children
- psychological testing
- review of documents (both the statutory authority and the parent(s) are asked to provide documents and details of 'relevant other parties' to interview)
- parent/child observation
- interviews with 'relevant other parties' or review of documents provided by others
- consultation with other involved professionals or review of their reports

 parallel procedures conducted with each prospective parent (where there are custody disputes).¹

The use of multiple sources of information also helps to address some common problems associated with parenting capacity assessments. These problems include a lack of recognition of known risk factors, the predominance of verbal over written evidence, a focus on the immediate present or latest episode to the detriment of significant historical information, and a failure to revise initial assessments in the light of new information.²

2. Avoiding over-reliance on instruments

Psychological tools and instruments can assist in improving the accuracy of assessments. They also help to overcome some of the problems associated with the consistency of decisions made by practitioners.³

It is important, however, to be aware of the reliability of these instruments. Practitioners sometimes mistakenly believe that the reliability of these tools is greater than is often the case. Putting too much trust in an instrument may bias the practitioner towards confirming the result obtained. For example, paying attention to the evidence that supports the claim that the family is high risk and being less open to counter evidence.⁴

3. Recognition of the issue of 'faking good'

A particularly pertinent problem in the use of psychological tools is the issue of positive self-presentation or 'faking good'. Practitioners need to be mindful of the fact that respondents often answer questions in a way that portrays them in a positive light.

4. Acceptance of responsibility and readiness to change

A key component of any assessment is determining parents' acceptance of responsibility and their readiness to change.

Intervention strategies stress the need for parents to accept responsibility for past acts and any damage done. Also important is the resolution of previous trauma, management of the parents' own emotional feelings and a capacity to recognise and respond healthily to feelings in their children.⁵

5. Collaborative practice

Forming partnerships, with both the family and external agencies, helps with accessing information from a range of sources and reducing the problem of practitioner selectivity of information.

6. Worker judgements regarding appropriate parenting standards

There have been some studies that attempt to identify the social judgement factors underlying worker assessments of parenting. Understanding these judgements is important, even where formal risk assessment systems are in place, as practitioners' decisions do not always correlate with scores on instruments.⁶

Practitioners will often have significantly different opinions about priorities in assessing parenting.⁷ It is therefore very important that practitioners examine and make explicit the values that underlie their assessments.

7. Supervision and training

It can be particularly difficult to identify factors affecting worker decision-making that are based on practice wisdom and that may be prioritised over the findings of instruments. Supervisors can play a key role in helping frontline workers reflect on and critique their reasoning.⁸

8. Using research findings

Access to information about the latest research and best practice is essential for evidence to be utilised by practitioners to inform decision-making.

The importance of a sustained 'research-to-practice' program within an organisation is integral to this process.

9. Awareness of the impact of cultural and other diversity on parenting capacity assessments

Cultural issues may affect not only definitions of parenting and parenting capacity, but also the practice of staff conducting such assessments.

There are significant ethnic group differences in parenting styles, for example some cultural groups viewed as engaging in harsher punishment and less overt positive affection still have positive child outcomes.⁹

For Indigenous families in Australia, there is a paucity of information on culturally appropriate assessments of children in relation to attachment. The core hypotheses of attachment theory (such as caregiver sensitivity, competence and a secure base) need to recognise the impact of people's cultural values.¹⁰

10. Tailoring parenting capacity assessments for parents with specific needs

For some parents, such as those with a mental illness or intellectual disability, there may be a need to tailor parenting capacity assessments. In this instance, assessments need to address such things as a parent's ability to seek help, the impact of the disorder on the child and the adequacy and effectiveness of the current treatment for the parent.

Further reading

 Assessment of Parenting Capacity. Literature Review. NSW Department of Community Services, 2005. Copies are available on DoCS' intranet and internet – www.community.nsw.gov.au

Endnotes

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Centre for Parenting and Research NSW Department of Community Services 4-6 Cavill Avenue Ashfield NSW 2131 02 9716 2222

www.community.nsw.gov.au researchtopractice@community.nsw.gov.au

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