Care Experienced Parents
Findings from our Annual Participation Programme

'Believe in Us'

Care Experienced parents
June 2022
# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>A message from Amie Tait</td>
<td>3</td>
</tr>
<tr>
<td>What did we find out?</td>
<td>4</td>
</tr>
<tr>
<td>What could the future look like?</td>
<td>5</td>
</tr>
<tr>
<td>Why Care Experienced parents?</td>
<td>8</td>
</tr>
<tr>
<td>How do we know this?</td>
<td>12</td>
</tr>
<tr>
<td>Building solutions</td>
<td>13</td>
</tr>
<tr>
<td>What should change to improve support for Care Experienced parents?</td>
<td>13</td>
</tr>
<tr>
<td>What should professionals and other supportive adults know?</td>
<td>16</td>
</tr>
<tr>
<td>Experience of services and support</td>
<td>19</td>
</tr>
<tr>
<td>Impact of being a young parent</td>
<td>19</td>
</tr>
<tr>
<td>Impact of stigma and discrimination</td>
<td>20</td>
</tr>
<tr>
<td>Fear of removal</td>
<td>21</td>
</tr>
<tr>
<td>Feeling able to get help and support</td>
<td>22</td>
</tr>
<tr>
<td>Support during pregnancy</td>
<td>24</td>
</tr>
<tr>
<td>Support during early parenthood</td>
<td>26</td>
</tr>
<tr>
<td>Practical support</td>
<td>28</td>
</tr>
<tr>
<td>Being a Care Experienced parent</td>
<td>29</td>
</tr>
<tr>
<td>What happens next?</td>
<td>31</td>
</tr>
<tr>
<td>Signposting support</td>
<td>33</td>
</tr>
</tbody>
</table>
A message from Amie Tait

"Becoming a parent has been the most rewarding, motivating, demanding, anxiety provoking, fun, loving, reflective, enduring experience of my life. ‘It takes a village to raise a child’, is an African proverb that highlights to me the importance of all our roles personally and professionally. I’m a family worker with 10 years experience of supporting families within their homes and communities. My Care Experienced lens has been double edged, at times it has been an asset, but it has also exposed me regularly to the unconscious bias at play that maintains the stigmatisation felt by our community.

We need to ensure we educate and raise awareness of this at every opportunity, to ensure that there are a range of skilled helpers with increased awareness of the challenges. There must be clear pathways for parents in our communities to access specialist support if required – with the right people, with relevant skills who are accessible when needed.

The Care Experienced community is diverse, with differing needs, however, becoming a parent can often illuminate our differences from the general population. We may not have the traditional family supports readily available to offer support and guidance, access to additional finances, childcare, supports to celebrate our successes and champion us and we may not have a network of social supports in place. We have an important opportunity with this work to rebalance inequalities and offer support for Care Experienced parents that’s appropriate and timely.

Care Experienced people need to have confidence that when we access services, we receive a service that assesses our individual needs and does not make assumptions about our parenting abilities due to our history. Instead, services should offer a range of supportive relationships, which manages risk, offers consistency in approaches, and creates a partnership at the point of contact. We need a workforce that understands and is aware of the challenges that may be experienced and can act as a resource by reducing anxieties, being transparent and increasing our trust, confidence and skills. Ultimately being there to help us when needed.

The stigma of being Care Experienced is alive and kicking within our society, it isn’t always obvious but it’s acutely felt and eloquently recorded by Care Experienced parents within this report. We know that all families require support in various forms. However, some groups within our communities may require additional support when accessing services. That support should not further stigmatise, and this report for me asks: are we getting it right? Care Experienced parents have identified 11 recommendations that will help us ensure that we do get it right. The Care Experienced community need people to believe in them, who are willing and able to recognise and respond to their needs, so they can be the best parents that they can be to their children."

AMIE TAIT
Who Cares? Scotland National Representative Body

1 The National Representative Body is a group of 14 democratically elected Care Experienced people who represent the wider membership of Who Cares? Scotland. You can find more out about the NRB here.
What did we find out?

We spoke to **47** Care Experienced people across Scotland...

...and we have **11** clear asks for change.

Many Care Experienced parents have felt the impact of **STIGMA** and discrimination.

Care Experienced parents need spaces where they can **CONNECT** with each other and provide peer support.

Around **1/3** Care Experienced parents felt comfortable asking for help from services/professionals.

Only **37%** felt able to get the support they needed.

Universal support services need a **JUDGEMENT-FREE** process to identify Care Experienced parents and provide suitable professional support to ensure positive parenting journeys.
Every Care Experienced parent should have the right to good quality support, as and when they need it. We recognise the power of positive, supportive professionals and know this is something already experienced by many Care Experienced parents across Scotland. We want this to be a consistent experience for parents across all of our communities. From views shared with us about the changes Care Experienced parents want to see, we have shaped recommendations alongside our National Representative Body.

1. The Scottish Government should explicitly name Care Experienced parents in the work of the Perinatal and Infant Mental Health Programme Board, and create specific pathways to proactively offer access to these services. The Perinatal and Infant Mental Health fund run by Inspiring Scotland should include funding specific work with Care Experienced parents.

2. The Promise’s Whole Family Support work in ‘Change Programme One’ should recognise the specific needs of Care Experienced parents and support creating funding streams for Care Experienced parent-focused projects from the Scottish Government’s £500 million Whole Family Wellbeing Fund.

3. As ‘Corporate Grandparents’, local authorities and COSLA must recognise the needs of Care Experienced parents as a strategic priority when implementing The Promise. They should work with Care Experienced parents to develop specific pathways to proactively offer support, including a sensitive and judgement-free process for parents to share they have experience of care. This should build on learning from the Early Learning and Childcare support offer for 2-year-olds of Care Experienced parents.

4. The lifelong impact of Care Experience must be recognised in the provision of any support for Care Experienced parents, by ensuring no age cut-offs. This reinforces existing calls from Care Experienced people to have better rights protections throughout their lifetime.

We have included this terminology as some parents who spoke to us felt this was helpful framing for how they want support to be offered, while recognising that some Care Experienced people found this language unhelpful during the Independent Care Review.
5. **The Scottish Government must recognise Care Experienced parents by including specific actions in their ‘Best start: five-year plan for maternity and neonatal care.’** Care Experienced people should co-design practice guidance for relevant Corporate Parents working in maternity and neonatal care, promoting understanding of Care Experience and how practitioners can sensitively offer additional support.

6. **Training must be co-designed with Care Experienced people about how to best support Care Experienced parents of all ages.** This should be tailored for providers who deliver universal and specialist support to parents, including services in the NHS such as Health Visitors and Midwives. Training should also be available for Social Workers, with a specific focus on young parents who are receiving social work support and become parents while living in care or when ‘leaving care’. Core to this training is the need to challenge stigma and assumptions about parenting capacity due to experiences of care.

7. **All training and practice improvement work to better support Care Experienced parents must explicitly link with training on trauma-informed practice by NHS Education for Scotland.** This is especially important to embed in universal healthcare approaches during pregnancy, birth and early childhood. For example, trauma-informed practice must be acknowledged explicitly in the ‘Best start: five-year plan for maternity and neonatal care.’

8. **Local authorities and the Scottish Government should sustainably fund specific peer groups and parenting support spaces for Care Experienced parents in each local authority area.** This offer should be designed with Care Experienced people in local areas and a variety of options should be considered, such as groups for younger mums and dads to connect. Delivery should be community-based and collaborative with third sector and trusted community organisations. Funding could also lead to specific independent organisations specialising in support for Care Experienced parents.³

³ We would like to point to the examples of ‘Project Unity’ in Wales, which offers intensive support, opportunities, education and training to care-experienced pregnant women and young mums up to the age of 25 across Wales, and the specialist Glasgow charity Amma Birth Companions that provides care information and advocacy for birthing people facing barriers to support, which recognises that birthing people from marginalised or racialised groups experience disparities in perinatal care.
9. **Social Security Scotland and the Scottish Government must make sure all Care Experienced parents have the financial and practical support they need.** This should include access to the various Best Start Grants and Food payments and additional funds should be explored further. This should be delivered as part of the Scottish Government’s Tackling Child Poverty Delivery Plan 2022-26, and in the implementation of The Promise, which recognises the increased likelihood of families being separated due to poverty.

10. **Focused work must take place to prevent children from being separated from Care Experienced parents, as part of realising The Promise’s ‘Change Programme One’ focus on ‘Whole Family Support’.** As detailed in the recommendations from our National Care Service consultation, this includes ensuring the workforce is trauma-informed in all areas of practice. There must be time and resource to connect with families, listen to and include them in decision-making, and tailor support to help families stay together. This should include ensuring parents who are living in care at the time of becoming pregnant are supported to stay with carers and in care placements where they feel safe and secure.

11. **Further research must take place to understand the frequency of children being removed from Care Experienced parents in Scotland, as has been undertaken by researchers in Wales.** This should build on the recent ‘Born into care in Scotland’ study commissioned by the Scottish Government, to understand the scale of the issue and if systemic discrimination is taking place. Any research taking place must be trauma-informed and supportive and sensitive to the needs of parents who have had their children removed.

We recognise these asks are just the start of shaping what change needs to look like and we would like you to work with us and our National Representative Body to affect our calls to action, so please get in touch at: policy@whocaresscotland.org

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All families need support to raise children in our communities, whether that is access to affordable childcare, connecting with other parents who understand the highs and lows of parenting or receiving the right care and support from our NHS and other services essential to keep families happy and healthy.

This support is protected by Article 5 of the United Nations Convention on the Rights of the Child (UNCRC), which states the government’s responsibility to respect the rights and responsibilities of parents to guide and advise their child so that as children grow, they can properly realise their rights. However, for Care Experienced parents, special consideration is required when thinking about the support they might need. We know this because Care Experienced people we work alongside have consistently told us about the need to focus on the issues which impact them when experiencing parenthood.

Discrimination against people experiencing pregnancy and those on maternity leave is unlawful under the Equality Act 2010, and such discrimination is well evidenced. From our findings, we are concerned about the examples of discrimination and lack of support Care Experienced parents have encountered, because of approaches in health and social work which are not inclusive of their needs.

We know that Care Experienced parents can face increased scrutiny from statutory services, as they are often more visible to services due to currently or previously receiving support. This scrutiny can be difficult to navigate, and Care Experienced parents have recognised a need for change in the culture of family support, which can feel deficit-based and risk-averse. Instead, they want to see support which collaboratively builds confidence, ability and provides what the family needs to be happy and healthy together.

As a provider of Independent Advocacy to Care Experienced people of all ages, we also know Care Experienced parents can become separated from their children, who may be removed from their care.


6 Pregnancy and maternity discrimination research findings, EHRC, 2018
In just the past two years across 25 different local authorities, issues related to maintaining ‘contact’ with their children were raised 85 times with WC?S advocacy workers.\(^7\)

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**Advocacy issues raised**

- Little or no opportunity to have formalised ‘contact’ with their children, sometimes for over a year, and often with no long-term plans for maintaining relationships. Often a lack of communication from social work with the parent about these plans.

- When ‘contact’ does go ahead it is often formal and supervised, with parents being unclear what it will involve. These visits can be too short or in an inappropriate venue, and parents spoke about feeling scrutinised by professionals looking to identify perceived weaknesses as opposed to experiencing a strength-based approach.

- During the pandemic, ‘contact’ with children was sometimes not offered at all, being reduced, or cancelled and there were instances of parents not being allowed to hold, touch or be near their children for long periods of time.

- Video or phone only ‘contact’ during the pandemic was permitted, often without support to access the technology needed to do this.

- During the pandemic, parents were not being allowed to see their children for important events such as birthdays or Christmas, despite contact orders which allow this.

- Positive changes in ‘contact’ with children being promised by professionals but not delivered, even when progress needed has been made by parents.

- A lack of representation in formal processes such as pre-birth assessments and child protection meetings, with parent’s views being minimised or not considered.

- A lack of explanation given to parents about recommendations in multi-agency meetings and Children’s Hearings, resulting in confusion and fear.

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\(^7\) Data retrieved from Who Cares? Scotland’s organisational database, DRIVE, on 09/05/2022
Members of Who Cares? Scotland have already been asking for change on this area across the country, from the Glasgow Champions Board ‘Care Experienced Parents’ group in 2018/19, to groups in East Lothian and Shetland who have chosen parenting and maternity care as priorities to influence change locally.

In March 2019, we held our first national conversation between a group of Care Experienced parents and the First Minister about their experiences and also received 48 responses to a national online survey scoping the issues faced by parents with experience of care. Parents requested better financial support, approaches to reduce the stigma of being a Care Experienced parent, and more access to free childcare from an earlier age. This led to a commitment in the 2019 Programme for Government, to expand the offer of free early learning and childcare for 2-year-olds to Care Experienced parents. This is the first time this group were recognised in Scottish policymaking as needing access to additional support offers.

In Scotland, a recent 10-year analysis of the delivery of the Family Nurse Partnership service across Scotland showed that a high proportion of clients in receipt of the service have been Care Experienced or on the child protection register (22%). The Family Nurse Partnership programme (FNP) is an intensive, preventative, one-to-one home visiting programme to improve outcomes for parents and children. This shows a higher likelihood of Care Experienced parents may need support from tailored family support services, such as FNP.

Existing research in the UK also recognises specific needs of Care Experienced parents and raised concerned about the outcomes, experiences and support availability for parents. In response, the Children’s Social Care Research and Development Centre (CASCADE) co-produced a Good Practice Charter with Care Experienced Parents and undertook a campaign called #MessagestoCorporateParents, asking Corporate Parents to commit to supporting parents who are leaving care.

In Scotland, the 2022 ‘Born into care in Scotland: circumstances, recurrence and pathways’ study by the Universities of Lancaster, Stirling and the Scottish Children’s Reporter Administration (SCRA) analysed data for 2,849 infants who entered the care system via a Children’s Hearing before they were a year old between April 2013 and March 2020 and looked in-depth at the circumstances of 70 of

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those children and their families. The research identified over a third (37%) of mothers and a quarter (24%) of fathers were Care Experienced.

Content note: some views and experiences shared in this report are sensitive and may be difficult to read. Please be conscious of how you feel before reading the report and step away when you need to. We have included a page at the end of the report which signposts some support services.

All direct quotes included in this report are views shared by Care Experienced people. These views belong to the individuals who have expressed them and do not necessarily represent the views of Who Cares? Scotland.
Care Experienced parents shared their opinions with us about the support they received as parents and importantly, their ideas for the positive changes they want to see happen in Scotland. This work was carried out as part of our Annual Participation Programme in 2021, which creates clear ways for Care Experienced people to drive our influencing work and shapes how we change policy and practice.

To understand what needs to change, we spoke to 47 Care Experienced people across 15 different local authorities Scotland. Most shared views through an online survey and we also held group sessions and 1-1 interviews. A third of the people we spoke to were aged between 25-29 years old, and most Care Experienced people involved were over 24 years old.
What should change to improve support for Care Experienced parents?

Parents spoke about the need to be able to share that they have experience of care with professionals in health and other services, so they can be automatically offered important additional supports. This is something which may be easier for other parents without care experience to access, particularly if there is already a strong family network.

However, we know that because of how care experience is depicted in our society and our media, this can impact how people react to and treat Care Experienced people. Parents shared that there is still a lot of fear about disclosing historic care experience due to judgement and stigma, which could lead to assumptions about their capability to parent.

A judgement-free process is needed to make sure services can identify where parents with experience of care might need different kinds of supports or professional approaches, to make sure they have positive parenting journeys. This should not lead to automatic assumptions of increased risk to the child involved.

‘I think there should be a range of services that are immediately at hand for Care Experienced parents. Services that deal with mental health, parental support, connect groups of like-minded people.’

‘...great to feel someone is out there should you need that support at all stages of parenthood. Sometimes it difficult when you’ve never had parents yourself...the impact of that is always there. So, support can make all the difference.’

One parent called this pro-active approach to offering support as corporate ‘grandparenting’:
‘Corporate ‘grandparents.’ Help and support to access childcare and education or employment.’

Examples of practical support, such as with finances and housing, were identified by parents as essential to make sure Care Experienced parents felt able to support their families:

‘Give us appropriate housing – not temporary or bedsits!’
'More home support and funding (for essentials, furniture etc) to ease and aid a struggling Care Experienced parent with finances.'

'Most Care Experienced parents don’t want their own child to ever feel unwanted or abandoned so they will be actively seeking to create a better family life. Hardship is often a reason that this is not easy so access to financial support is necessary.'

'I want leaving care to stay involved longer to offer specific support.'

Care Experienced parents specifically want to see mental health support offered if needed, as part of perinatal mental health services, especially to cope with any fears or the impact of their own trauma.

'Mental health support should be offered to every Care Experienced parent. Access to these services are not always immediate or easy.'

'Referral to perinatal health team was life saving for me and should be something Care Experienced parents should have access to if needed.'

Many parents spoke about wanting more peer support and groups to be available specifically for Care Experienced people, where parents could support each other, connect and share experiences in safe spaces, allowing them to be honest about their parenting experiences.

'Have Care Experienced parents to help Care Experienced expecting parents.'

'Meeting other Care Experienced people during pregnancy...Someone else is feeling what I am feeling. That we’re going through the same thing.'

'I think ongoing support would be good but maybe in an informal network that held social events would be nice - takes some of the stigma out of having 'official' support.'
Specific professionals who have a more detailed understanding of care experience were also mentioned, such as an advocacy service: ‘Having an advocate who is Care Experienced or knows about care experience would be useful...’

Other types of support also need to be more readily available to Care Experienced parents, from breast feeding support to baby groups and parenting and antenatal classes, to help build confidence.

‘Having professionals or volunteers who have life experience in parenting is helpful, if they are sensitive and good at helping parents to build confidence in their style of parenting.’

‘Giving someone to talk to, antenatal classes for Care Experienced to provide life skills for young mums.’

One parent shared that they were not offered antenatal classes, even though they would have benefitted from them. It is vital that social work support complements and does not override the universal offers of support for expecting parents.

‘Myself and my partner didn’t take antenatal classes, but to be fair we never got offered them because we had social work involvement very early into the pregnancy. I would have taken it as well, but because we had social work involvement, they were more interested in sorting out the care plan because there were a lot of serious concerns about how I would cope as a dad. I wasn’t experienced, and they had concerns about that.’

Parents also spoke about more support being needed to find information about what services and support groups they could access locally.

‘...there needs to be some sort of support. People don’t understand the options that are available.’

‘I went and found parent and baby groups myself. But no one encouraged me to do that.’

Parents also spoke about the importance of consistency in support from professionals they have a trusting relationship with, as it can be more difficult to build trust if someone has had negative previous experiences with statutory services.

‘If you have a good relationship with a worker you should be able to keep them (e.g. keeping a Health Visitor once child start school.)’

‘I feel all parents need a confidential non-judgmental supportive person around when they have young children, not just Care Experienced parents (both me and my partner were both...’
Care Experienced and the relationship with both families was up and down to the point that we tended to be extremely self-reliant.) The generation before my parents were actually the most supportive towards us and so we had some family support from great aunts and uncles.’

What should professionals and other supportive adults know?

Care Experienced parents spoke about wanting professionals and supportive adults to believe in them, build their confidence, encourage them, and ultimately see their strengths, rather than taking a deficit-approach.

‘For me it was the little things, like I just needed someone to tell me I was doing a good job. I just needed someone to tell me that I wasn’t going to turn out like my parents. I just needed someone to tell me I could be a good parent.’

‘...someone to tell me it’s going to be ok, someone to tell me I’m doing well, someone to believe in me.’

‘It’s not their fault they were in care and they’re doubting their ability, so support them to see they’re good enough and they deserve to be happy.’

Many spoke about their determination to provide the best life they can for their children and that their experiences of care can be viewed as a strength by professionals.

‘As parents we want the best for our children and we are working so hard to get out of the cycle of generational care. You are corporate grandparents and if it’s not good enough for your own children it’s not going to be good enough for us or ours either. The other parents I know who are Care Experienced are giving parenting their all whilst coping with life challenges that others don’t necessarily have. Support us to be the best parents we can be and don’t automatically judge us.’

‘Our Care Experienced backgrounds can make us determined to give our children the best possible future because our childhoods were fraught with difficulty.’

One parent specifically spoke about how intersectional identities can lead to experiencing multiple forms of judgement and combined stigma about a person’s ability to be a parent, and that they had personally experienced this as a Care Experienced parent who also has learning difficulties:

‘If they are taking steps to change their way of life that protects the child, if they are trying their best, it can’t just be seen [by professionals] as not good enough. I see it in my community, with addiction, with migrant families who have a language barrier, and with learning difficulties. I have learning difficulties and was very quickly chucked to the kerb. Support them
instead of doing that, offer them things and take the kids out, or come into the house and spend some time. I just want someone to care.’

Parents want to see professionals build trust, listen to their needs and be honest, open and understanding in how they offer support and advice in a judgement-free way. Importantly, parents do not want professionals to make assumptions about a parent’s abilities because of their care experience.

‘Don’t assume. Build up trust. Take time to listen and ask the right questions”

‘I think the frontline needs to be really…. There needs to be a real sense of support without judgment.’

‘They need to know we’re not going to fail straight away...It shouldn’t be an assumption just cos we’re Care Experienced.’

Parents also want professionals to acknowledge that it is not always easy or comfortable to ask for support from services. Parents shared that even if a service is there and ready to help, they would like professionals to understand that they could be worried asking for help is seen negatively and as a reflection of their abilities. This also reinforces why it is vital that offers of support are proactive, rather than waiting for the parent to have to ask.

One person emphasised that Care Experienced parents will need to form a safety network and be reassured there are no repercussions for anything they express, as she would have been very reluctant to engage at a younger age.

‘I haven’t felt comfortable (asking for help) because of the risk of being thrown under the bus. I think if I say I’m struggling to cope or get up in the morning, it will be used against me.’

When asked what would help you ask for help, one parent answered: ‘Knowing people will talk to me before making reports about me. Less judgement. If people do things they say they will do then you would trust them to go to them! Why should we have to ask? I feel like it should be offered.’

As part of a human-rights based approach, Care Experienced parents want to feel empowered by professionals to share their views and to feel actively included in how care is provided for them and
their families. The needs of younger Care Experienced parents should be recognised within this, as we know that often, younger people’s views can be taken less seriously. 9

‘We need social work being more sympathetic. I never had support at the start, were talking about me and not including me... I had to speak and tell them how it is once I had my house.’

‘Educate health professionals that mothers are able to understand their own choices and make them.’

Parents asked that professionals within services that specialise in supporting parents, whether in health, social work or maternity services, are able to access training about how best to approach providing support for someone with experience of care.

‘Although majority of professionals are aware of Care Experienced parents, I think a clearer understanding service-wise would benefit anyone using the services.’

‘Understand that the trauma experienced in childhood can impact on how we parent (for me this had a positive impact but not everyone.)’

‘(Know) that Care Experienced young people have been judged and discriminated their whole life. Don’t put them through that as a parent as it can be mentally damaging and just because a person is a single parent or doesn’t have any family support doesn’t mean they can’t be a parent.’

‘Knowledge is power and if these professionals understand what it means to be Care Experienced, they may be better at delivering there services.’

‘Consistency across services – medical and social work need to act the same.’

Prevention of children being removed and making sure the focus was on keeping families together, also came up in responses, echoing The Promise’s Whole Family Support work.

‘I think professionals and services need to be a little bit more compassionate. Rather than chucking in the towel and taking the kids into care, they should actually use everything they can to stop that happening.’

9 The Scottish Government have recognised the inequality that young parents face in Scotland and have created a national Pregnancy and Parenthood in Young People Strategy to combat this.

Whocaresscotland.org
Who Cares? Scotland | Scottish Charity No. SCO26076
Experience of services and support

Care Experienced parents shared their experiences of receiving and accessing support during their parenting journeys, from pregnancy to early childhood. There was a mix of positive and negative experiences shared across a range of services.

Impact of being a young parent

It is already recognised in research and policymaking in Scotland\(^\text{10}\) that younger parents are more likely to experience challenges, stigma and judgement about their decisions when going through parenthood. In addition to being Care Experienced, parents shared how their young age impacted how they were treated or supported. This shows how intersectionality of identities of being both a young parent and a Care Experienced parent, can create additional challenges.

‘She said that she really struggled to speak out as a younger parent (and still does at times), back then this was down to fear due to experiences of the care system and she felt she had to be ‘careful’ of what she talked about and any struggles she had. She says she can still struggle with this now especially in her work environment as she feels there is still a lot of judgement out there as to what kind of parent you are etc. She emphasised that Care Experienced parents will need to form a safety network and be reassured there are no repercussions for anything they express as she would have been very reluctant to engage at a younger age.’

‘I was 19 with my first child, I was made to feel like I was dirty for being a young mum not in a stable relationship. Throughout my pregnancy and when my child was young, I was never supported to trust my instincts making me second guess myself becoming fearful of letting anyone know when I wasn’t coping then developing a mistrust of authority figures and services…’

‘I’m older now and wouldn’t hesitate so much but as a younger parent it would have been very difficult for fear of being judged.’

‘I was always made to feel like a silly little girl who didn’t know what I was doing. No-one trusted me or my instincts.’

\(^{10}\) The Scottish Government have recognised the inequality that young parents face in Scotland and have created a national Pregnancy and Parenthood in Young People Strategy to combat this.
‘Consistently denied having my tubes tied to prevent further pregnancy (too young, can’t possibly know I would want another child, they’d see me back in maternity in a year or two).’

‘As a young pregnant teen, I could have used ongoing support for emotional issues.’

This also extended to experiences in support groups or amongst other parents:

‘The stigma and judgement by other ‘older’ women in these groups was talked about. It’s not like I can’t cope. I just didn’t know.’

‘Older mums. They look down on you a bit. You get judged.’

**Impact of stigma and discrimination**

We know that because of how care experience is depicted in our society and our media, this can impact how people react to and treat Care Experienced people. Many Care Experienced parents shared how they had felt stigmatised when receiving support or were worried about the assumptions professionals and services would hold towards them.

‘I kind of think cos they knew (about care experience) they were always asking about my mum.... They shouldn’t just assume I wasn’t a good person or my parents weren’t good people.’

‘My child was born 6 weeks prematurely- at the time I do remember thinking... oh my god, will they think she’s not going to be alright, she was in care. I am always careful. For a very long time, I was very careful about who I told I was Care Experienced to.’

‘I would like to see social work take a step back from those that don’t need it.’

Parents shared their perception of their experience of care leading to an automatic referral or assumption of social work involvement. Any practice which assumes a parent may be a risk to their child or require social work intervention only because they are Care Experienced is discriminatory and parents want to see an end to any practice where a Care Experienced parent is automatically referred to social work.

‘Written off too quick – just because I was in care doesn’t mean my kids will be. When you’re Care Experienced you automatically get a social worker when you’re pregnant – how is that fair?’
‘Just because I’m Care Experienced a referral should not be made to social work. More support instead of asking “are you keeping it?” “Are you sure?” Trust mums instincts – my son’s mental health needed support and I wasn’t believed.’

‘I’m Care Experienced...I work alongside social work, children’s rights and Who Cares? Scotland, but if I get pregnant, I will STILL get a referral to social work because I was in care, even although I have no social work for my first child.’

‘I wasn’t offered any support to a birthing plan just judged when I said I was Care Experienced which they took as if I was a risk to child and made a referral to social work which came to nothing because I am not a risk. Never had a visit from social work to ask if I feel their support would beneficial.’

Fear of removal

Linked to the impact of stigma and discrimination, many Care Experienced parents who spoke to us shared fears of their children being removed. This could make it difficult to ask for support due to worries about being seen as less capable because of being Care Experienced and the fear of consequences, such as social work intervening, because of reaching out for help.

‘Always scared that if I speak out that I will be punished by social work wanting to get involved.’

‘The impact of a Care Experienced person who reaches out for help - even though their struggles in that moment is transitory... if I had told my GP or if I had told the Children’s school etc, I know our circumstances would have triggered a social work response and a snowball of god only knows what, would likely have been the outcome.’

‘I quickly learned how to satisfy their questions to keep them at arm’s length and not let them know how broken I felt inside. Because if they knew they’d take my son, I thought I wasn’t good enough to be his mum, but I knew I would love him with all that I am and I would love him for as long as I could.’

‘My biggest fear was having my child taken into care if I became unwell like my Mum. This led to me trying to hide being unwell and it would have been good to have reassurance around this.’

‘At first I was scared they would take my baby from me but I learned that I have to be honest and if it’s the best for my son that’s all that matters.’
‘I have only started to ask for help since my children have become adults, since I know they cannot be taken away from me. I can now be honest about what I went through without the fear of putting my children through the traumatic experience of being removed from their family like I was.’

Feeling able to get help and support

We heard mixed experiences about how easy it was for Care Experienced parents to receive help and support, with low numbers feeling able to get what they needed or feeling comfortable to ask.

‘I haven’t had any extra support due to my care experience. I didn’t even know I was entitled to extra support because of this.’

‘I appear quite capable of doing things, so people seem to brush me off.’

‘When I went for an initial meeting with the midwife, they asked about Care Experience. It was a tick box exercise. She said, ‘I need to ask these questions but it doesn’t change anything.’

Some Care Experienced parents also shared that they chose not to tell services they were Care Experienced or did not think they could ask for additional support. Others noted they had not been asked or did not have their experience considered in how they were supported:

‘I did not feel I deserved extra help.’

‘There did not seem to be an understanding from health professionals as to the barriers Care Experienced people face.’
‘I haven’t had any extra support due to my care experience. I didn’t even know I was entitled to extra support because of this. I also tried to access help from social work after domestic abuse, however, was told they couldn’t help.’

A strong theme from responses about accessing services and support centred on how difficult it can be to ask for help when it was needed, due to fear of judgement.

‘I felt if I asked for help, I’d be seen as a failure.’

‘The 5-6 week wait for Universal Credit can be detrimental, going without basic things like toiletries, due to being embarrassed to ask for help as you don’t want to be seen as unable to cope as a parent.’

One parent shared with a Who Cares? Scotland worker a particularly difficult experience of how they did not feel able to ask for support for their mental health and receive help for their financial situation and when they did reach out, had a negative experience:

She gave an example of really struggling to ask for help and admit not being able to cope. Phoning NHS when struggling with mental health. Even though they knew there was a child in the house, she was told to phone her GP on the Monday morning. Going days with little money and again even though the benefits office knew that there was a child, they were left to fend for themselves. They received little benefits and did not having a family network or support in place to help. They described the feeling of so much stigma attached and ‘the fear of your own child going into care because you aren’t good enough, but if you had the help you need, you would be.’

We also asked Care Experienced parents which specific supports and services they came across during their pregnancy and early parenthood journeys and what those felt like. The range of services parents told us about were varied, with the most common professionals and services being Health Visitors and Midwives.
Support during pregnancy

We asked about the specific support available during pregnancy from professionals and services, and responses were mostly positive, with 57% answering ‘the right amount’ was available. However, 43% answered ‘not enough’, showing there is work to be done to ensure all experiences of pregnancy feel supported. When asked about quality of support, parents again were mostly positive with only 27% answering ‘poor quality.’
Many parents shared positive experiences of support:

‘I had a fantastic midwife - I told her. I actually helped her out with some things.’

‘The midwife and nurses I met throughout my pregnancy were very helpful and always listened to my worries and asked any questions. I remember being worried on my first phone appointment to a midwife when I was pregnant and was reassured there would be no need to involve social work or let them know of my pregnancy as I was not in care anymore, this all changed when I got a health visitor when my son was 6 weeks old.’

However, we also heard examples of challenging experiences with services and support, especially in support to choose whether to go ahead with the pregnancy or not.

‘Was made to feel inadequate and was questioned what kind of life I could provide to my unborn child by GP.’

‘I was told by social worker to get a termination as they said I would never get keep him. One of the nurses at the abortion clinic asked me ‘what do you want?’ She asked me twice, I said ‘what do you want me to do now?’ She told me to go home. I pretended to reschedule the appointment to buy me time. I then refused to get an abortion.’

The impact of the pandemic was also mentioned as making access to services difficult.

‘My second child was born during the pandemic...the lack of face-to-face support was the hardest and has definitely impacted my mental health.’

‘I was pregnant during the pandemic and having difficulty with my pregnancy, was having to attend hospital every two days for monitoring by myself, I was trying to relay to the dad what was wrong with me and baby but was unable to obtain most of the information due the stressful circumstances. I was not supported at all, made to wait at appointment for hours with no food or drinks, started taking a packed lunch with me because I was starving and cost me a fortune in travel.

Several parents shared challenging experiences of maternity care and of giving birth in hospital, where they felt health practitioners did not listen to their needs and understand the impact of previous trauma on their experience of medical interventions: This shows further work needs to take place to make sure all universal services supporting pregnancy and maternity are trauma-informed and responsive.
‘No support was provided for reliving trauma as part of my parental assessment, nothing for the trauma of my child being taken straight to the Special Care Baby Unit after a traumatic birth. I wasn’t told if I could see them and I found out from my discharge papers that I had suffered a tear in my uterus during their attempts at delivery despite me repeatedly trying to have a voluntary c-section instead of a delivery to avoid complications like that. 23 hours of labour... instead of induction in a controlled and safer way.’

‘When I asked for support and begged the midwife to come and see me no-one came to see me, check on my stiches or my baby. That resulted in me getting pelvic inflammatory disease and on medication for pain. Medical staff didn’t listen to me and caused (me) complications and unnecessary pain. I was given an epidural despite refusing it. I asked for no male staff and that was in my birth plan. The first thing that happened in theatre was I woke to a man standing beside me. There were many trauma triggers which led to a panic attack because I couldn’t feel or move my legs because of the epidural. (Trauma triggers from restraints as a child.)’

One parent felt her pain was dismissed: ‘From 36 weeks onwards I was in huge amounts of pain... saw the consultant (routine appointment after scan) and was basically told to just rest. By 38 weeks I could barely walk. I called but they didn’t call back till the next day and I was told to rest. It was as if I wasn’t taken seriously.’

Support during early parenthood

We also asked about support available during the first 3 years of parenthood and responses were overall more negative, with 61% answering that ‘not enough’ support was available. When asked about quality of support, again this was more negative with 35% answering ‘poor quality’ and 45% answering ‘okay quality.’
Positive experiences shared included:

‘It varied but I was fortunate to have an excellent Health Visitor for some of the time who was also an experienced parent - she helped me to be confident in my abilities as a parent.’

‘Personally, for me the family nurse was the best support I had, especially towards the end of the 2 years.’

‘I felt like because of my mental health history the first time round we had good support. In the first few months of being a parent I was really scared and my Community Psychiatric Nurse from the perinatal mental health team was brilliant. She offered lots of hand holding and reassurance.’

‘The social worker I had for two of my children, she showed a bit of compassion. The child protection case conference was good. While the police were quick to say they didn’t want me to have anything to do with the child, others said, ‘wait a minute’ and said I had strengths and could be a wonderful person. It was agreed the child could come home, and I was happy to work with that and try and prove the doubters wrong, for the sake of my children.’

Parents also shared examples of when the initial professional supporting them led to a negative experience, but once a new professional became involved, they received much better support. This shows the need to create consistency in approach across services:

‘I have a new Health Visitor who is amazing and not as over baring or judgemental towards my house (as a previous Health Visitor)... all that pressure put on me by my first Health Visitor was for nothing and could have been avoided if she had looked into it rather than just telling me she thought I’d needed the support.’

One Care Experienced parent had spoken to her GP many times about a rash (on her child) and it wasn’t clearing up. She initially felt unsupported. One day, she got another GP who suggested it was another issue and prescribed something else and it cleared up right away.

‘She was lovely. She knew straight away.’

Examples of support also included instances where services felt time-limited and inflexible:

‘The first 6 weeks was great, I still had involvement from Kibble, however after that I moved house twice with not much support and shortly after my baby’s 1st birthday Barnardo’s cut all contact with very little warning, and before that, they weren’t really a great help anyway, social work don’t understand mental health very well.’
One parent shared a challenging experience of when they had reached out for support for their mental health and felt services were unable to help:

‘When my child was less than a year old, my mental health declined, I reached out for support but was told unless I was putting my child at risk there was nothing they could do. Mental health team then put a referral into social work. The social worker phoned and said we have had a look at your records and can see you have had a troubled past. She asked if I was “doing drugs, drinking alcohol or getting into trouble with the police.” I said no… she then asked what support I felt I needed. I said all I needed was someone just to tell me I was doing a good job... because of Covid we never got to do any of the classes. Then the mother and baby classes were also cancelled, just felt very alone and isolated. She informed me there was nothing she could do. I also explained my concerns to the health visitor, I said growing up with very little emotional support, not having the parents who could meet my needs who ultimately failed as parents that I had concerns I would do that to my child... not having someone to phone when she has been crying non-stop, no one to tell me all the tips and tricks of what worked, just not having a support. Health visitor said that isn’t my job.’

Practical support

Parents also shared both positive and negative examples of support for practical issues, such as financial support, access to suitable housing and being supported to learn important skills like cooking.

‘I have picked up the phone to social work before and said I’ve had a really bad week and we are struggling to put food on the table, and within an hour of us phoning, they were at the door asking how they could help. I was taken aback. They said ‘we understand you’ve had a bad day, can we come in and talk about it.’

“I had Includem supporting during my pregnancy, I got cooking classes, went to the shop, budgeted for dinner...that helped me prepare.’

A parent spoke about trying to get a house of their own and move out of supported accommodation. This process started before she had the baby but it is still ongoing a year later – she shared that ‘they keep adding on things I need to do.’

‘My house was flooded and I was made to feel like it was my fault and no one helped me I had to get support from an independent advocate.’

‘...maybe you can look at the parents’ home and get the council in to see how it can be more suitable? Get a new boiler, new walls, new floors, and then they can re-assess it... Maybe if there are mental health or addiction issues, look at other avenues, other charities, other services that could help.’
Many Care Experienced parents shared the best and most challenging experiences of parenthood. It was clear across responses that the experience of having and raising children was a positive one for many, from experiencing unconditional love to experiencing family dynamics differently for the first time.

‘Amazing, it takes over (love), you also grow up and start understanding your own parents.’

‘You don’t know how big your heart is until you have them.’

‘A couple of years ago, my son said to me ‘daddy you are my hero’ and I cried. It melted my heart. He always says ‘daddy you are my best friend’. My daughter says the same things, she says ‘I love you’ and it melts my heart.’

‘It’s really hard now- but in the end- when they’re in the nursery, or they start school, and you can see them growing- it’s worth it.’

‘Seeing them grow even if you are not looking after them, it’s great to see them grow up.’

‘She [baby] won’t go to anyone else. It’s just me she’s wanting… I’ve never had that before.’

The challenges shared have been explored in detail throughout with reflections on supports, services and changes Care Experienced parents want to see. Some of the difficulties spoken about included not having information, confidence with children, issues with mental health, practical needs such as housing or finances, and also feeling at a disadvantage compared to parents who had more consistent support networks.

‘You don’t know what to do- there’s no one to ask. Who’s the one to tell you?’

‘Isolation can be an issue- you don’t want to burden your partner.’

‘I became a dad because I enjoy the responsibility of being a parent, but I really do find managing their behaviour difficult, and I get punished when I don’t get it right.’

‘I remember this quite poignantly… was with some other mums – I remember them talking about how they had support – I had to almost walk away from my career due to the level of support. Now one’s a politician and a published author.’
It is extremely important when discussing parenthood, to recognise that Care Experienced parents can experience separation from their children and state intervention in the relationship they have with their child. Although this was not an area we specifically asked about in detail, it is important to acknowledge the experiences that were shared with us about this. To fully understand the experiences of Care Experienced parents whose children have been removed, we want to see more in-depth and trauma-informed research, which is extremely sensitive and supportive to the needs of these parents.

‘Not having her with us is pretty hard... She (child) isn’t allowed at ours, she comes and visits she can’t stay at ours.’

‘I’ve not had any professional support. It took me having my son removed to get services.’

‘Social work came up 30 mins after I had given birth and gave me short time to make decision to either send [name removed for anonymity] to go to some old woman’s house or for me to go in some mother baby placement.’

Another theme which came up when reflecting on parenthood, were relationships with partners. It was felt by some Care Experienced parents that their partner’s needs were not supported or that an assumption was made about how capable or involved they would be:

‘Social work never assumed me and [name removed for anonymity]’s dad would get a house together. They had made decision that he wasn’t mentally old enough. If he had dad groups and had support he might have been a better dad.’

‘We worked hard to stay together; we have been together a long time together before... I wouldn’t leave her (partner) because we had a bairn.’

One parent also shared that becoming pregnant meant they could no longer stay with foster carers and suddenly had to move into living in a flat, which was not set up for them moving in:

‘I loved staying at (foster parents) I was sad I had to leave. I couldn’t stay because I was pregnant...I was devastated with that. I knew my time coming to an end with foster care, there was no transition or support about the ending of the placement. I was given a flat...it had no carpets, needed lino for bathroom and kitchen... the flat needed to be decorated.’
What happens next?

We know that change is needed to make sure families with experience of care have the support to create strong foundations, so they can stay together. We want to work with services and support organisations to challenge stigma associated with being a parent with experience of care. We believe this work is a vital part of realising The Promise, and particularly in improving how Scotland provides Whole Family Support.

We will share these findings and actions for change with Corporate Parents, the Scottish Government and other key decision-makers. We ask they use their power to make the changes Care Experienced parents want to see and will make sure Care Experienced parents are visible and recognised in policymaking. This will include influencing:

- Allocation of the £500 million Whole Family Wellbeing Fund from Scottish Government.
- The development of the offer for free Early Learning and Childcare for 2-year-olds for Care Experienced parents.
- The national ‘Best start: five-year plan for maternity and neonatal care’.
- The Scottish Government commitment for the Family Nurse Partnership programme to target first time mothers under the age of 25 who are Care Experienced.
- The work of the Perinatal and Infant Mental Health Programme Board.
- The Promise Scotland, to consider how this evidence can help shape their work to implement changes to Whole Family Support as part of Change Programme One.

If you would like to work with us and our National Representative Body on any of our calls to action, please get in touch.

Thank you!

We would also like to say a huge thank you to every Care Experienced person who shared their view with us and are grateful to our National Representative Body for giving their time and support to shape this work.
Contact details:

Lucy Hughes, Policy Development Co-ordinator at: hughes@whocaresscotland.org

Policy and Participation Team at: policy@whocaresscotland.org
Signposting support

If you’re a Care Experienced person and you need someone to talk to, we can be contacted by phoning 0330 107 7540 or emailing help@whocaresscotland.org.

The Who Cares? Scotland Helpline is open Monday–Friday, 12pm–4pm.

Early Learning and Childcare Offer and support to apply: [https://www.mygov.scot/childcare-costs-help](https://www.mygov.scot/childcare-costs-help).

Social Security Scotland - [https://www.socialsecurity.gov.scot/](https://www.socialsecurity.gov.scot/)

One Parent Families Scotland [https://opfs.org.uk/support-and-advice/](https://opfs.org.uk/support-and-advice/)
- Including a helpline for lone parents: 0808 801 0323
- Advice about benefits, Health and wellbeing

Children 1st Parentline, A helping hand for every family in Scotland [https://www.children1st.org.uk/help-for-families/parentline-scotland/](https://www.children1st.org.uk/help-for-families/parentline-scotland/)

Home Start [https://www.home-start.org.uk/parenting-links](https://www.home-start.org.uk/parenting-links)

Amma birth companions: [https://ammabirthcompanions.org](https://ammabirthcompanions.org)