

RE R (CHILD OF A TEENAGE MOTHER)**A**

Family Division

Bracewell J

25 May 2000

Care – Care plan – Twin-track planning – Concurrent planning – Young teenage mothers – General guidance

B

The mother became pregnant when she was 12 years old and gave birth when she was 13. After the birth, the mother and baby lived with a foster family where the foster-mother cared for the baby with the assistance of the mother, who had returned to full-time schooling. The local authority sought care orders in respect of the mother and the baby, with a care plan which involved the mother staying with the foster-parents and the baby being placed for adoption outside the birth family.

C

Held – making the care orders and approving a care plan for the mother and child to be separated without delay – planning for the baby had been left too late, with the consequence that the local authority had had dramatically to change its care plan, with consequential distress and disruption. No attempt had been made to identify and approve a prospective adoptive family prior to the hearing, which meant that the baby would have to move twice, first to a bridging placement and, then, once a family had been identified and approved, to an adoptive family, causing disruption at a crucial stage of the baby's development. Cases involving very young teenage mothers were rare but very difficult, and research suggested that there was a wide variation of approach by different local authorities. The court provided general guidance to assist local authorities dealing with similar cases. There was no general principle that babies of young teenagers should be adopted; each case would turn on its own facts and would depend in particular on the quality of support available for mother and child. The local authority should begin planning as soon as it was informed about the pregnancy and, during planning, it was not appropriate to concentrate on the welfare of the mother to the exclusion of the needs of the unborn child. Social work and expert assessments should be completed well before the birth. If proceedings under the Children Act 1989, s 31 were necessary, they should be issued on the day of birth and, where the mother was very young, the case should be transferred without delay to the High Court and a separate guardian ad litem appointed for the mother and the child immediately. The baby's interim placement should be determined on evidence by the court at an early hearing as a matter of urgency. The case should be timetabled on the basis that an early final determination was vital, if necessary invoking the standby procedure for a judge of the Family Division to hear the case. The court re-emphasised the importance of twin-track planning in cases in which adoption was a possible outcome. In cases of very young children, the local authority should also consider whether or not the case was suitable for concurrent planning.

D**E****F****G****Statutory provision considered**

Children Act 1989, s 31

Cases referred to in judgment

D and K (Care Plan: Twin Track Planning), Re [1999] 2 FLR 872, sub nom *D and K (Minors) (Care Plan: Concurrent Planning)*, Re [2000] 1 WLR 642, FD

H

A *Deborah Archer* for the local authority
David Tyzack QC for the mother
Joanna Dodson QC and *Alexa Storey-Rea* for the grandparents
Mhairi McNab for the mother's guardian ad litem
Peter Jackson QC for the Official Solicitor, the baby's guardian ad litem
Caroline Wright for the father

B **BRACEWELL J:** After a contested hearing, I have made a care order under the Children Act 1989, s 31 in respect of A, who is 13 years old, and her daughter L, who is 4 months old. The care plans which I have approved are that A and L should be separated without delay. They have, to date, both lived with a foster family where the foster-mother has cared for the baby with the assistance of A, who has returned to full-time schooling. The plan of the local authority is that A should remain living with the foster family, and L should be placed for adoption outside the birth family.

C A became pregnant when 12 years of age. This is the first case which this local authority has encountered in which the mother is so young, and I am satisfied that social services have found their task particularly difficult by reason of lack of experience of such cases.

D The statistics presented to the court show that the Department of Health (Teenage Pregnancy Unit) recorded 2472 conceptions for girls aged 14 and under in 1997 in England and Wales. Fifty-two per cent of the girls underwent termination, and many of the girls had become 15 by the time they gave birth. The result was that there were 288 births for girls aged 14 and under, of whom some 50 were to mothers aged 13 years old. The situation of A and L is therefore highly unusual, but not unique.

E In the publication *Pregnancy and Parenthood* by Judith Corlyon, (National Children's Bureau, 1999), the author researched teenage pregnancy in 11 local authorities across the country. She found no specific policies in relation to the provision of accommodation for teenage mothers, and there was a wide variation of approach by different local authorities. In general, local authorities found it unacceptable to place 13-year-old mothers in mother-and-baby units. Foster care was used as an alternative solution, although recruitment of carers willing to, and skilled enough to, accept young girls and their babies was difficult, and there were problems of boundaries and respective roles in such placements. In some cases the young girls and their babies were able to remain within the natural family home when the support and quality of care provided was appropriate.

F In an endeavour to assist local authorities who have to deal with these rare but very difficult cases, I have been asked to give some general guidance:

- G**
- (1) There is no general principle that the babies of young teenagers should be adopted.
 - (2) Each case must turn on its own facts. In the current case care orders were made, and the care plans approved, by reason of the sad and dysfunctional history of the parenting of the young mother, A, and the risks attached to A and L remaining together.
- H**
- (3) Where there is united family support of quality for mother and child, at home or elsewhere, the outcome may well be different.
 - (4) In cases where pregnancy is notified and local authority intervention

is a possibility, the local authority has very urgent responsibilities as follows:

- (a) Planning for the baby as well as the mother should begin as soon as pregnancy is disclosed. It is not appropriate to concentrate on the welfare of the mother to the exclusion of the needs of the child to be born. In the current case, planning for the baby was left too late, with the consequence that the local authority had to dramatically change their care plan in January 2000, with consequential distress and disruption.
- (b) Social work and expert assessments should be completed well before the birth so that effective and timely planning can be undertaken.
- (c) If proceedings under the Children Act 1989, s 31 are necessary, they should be issued on the day of birth, and where the mother is very young, the case should be transferred without delay to the High Court, and a separate guardian ad litem appointed for the mother and for the child immediately.
- (d) The baby's interim placement should be determined on evidence by the court at an early hearing as a matter of urgency.
- (e) Early final determination is vital, and the case should be time-tabled accordingly, invoking the standby procedure, if necessary, for a judge of the Family Division to hear the case.
- (f) Twin-track planning is essential for cases in which one of the possible outcomes is an adoptive placement. In the current case, by reason of a misunderstanding by a social worker, no attempt was made to identify and approve a prospective adoptive family prior to the hearing. In consequence, L will have to undergo two moves, in that a bridging placement will be necessary whilst an adoptive family is identified and approved, thereby causing disruption to L, and avoidable delay, at a crucial time in her development.

I repeat the guidance given in *Re D and K (Care Plan: Twin Track Planning)* [1999] 2 FLR 872, sub nom *Re D and K (Minors) (Care Plan: Concurrent Planning)* [2000] 1 WLR 642 which was reported in September 1999, and which was available for the legal department of the local authority in the current case.

- (g) In cases of very young children, the local authority should also consider at the earliest stage whether or not the case is suitable for concurrent planning as set out in *Re D and K*. It is a misconception for social workers to consider that there is any prohibition on identifying suitable adopters before the final decision of the court, provided that decision is not pre-empted. To delay appropriate planning for alternative outcomes is contrary to the welfare of the child.

That concludes my judgment in open court.

Care order accordingly.

A Solicitors: *local authority solicitor*
Foot, Anstey, Sargent for the mother
Hooper & Wollen for the grandparents
Tozers for the mother's guardian ad litem
Official Solicitor
Gowmans for the father

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PHILIPPA JOHNSON
Barrister

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