

JUSTICE FOR FAMILIES

Exposed: Broken system that took away my baby

Thousands of innocent families have been traumatised by groundless investigations by child protection services. After a legal challenge by The Sunday Times allowed her to speak out, one mother tells her story



Amy Stephenson, with Brody, now two, and her partner Tom
LORNE CAMPBELL / GUZELIAN

Emily Dugan, Tom Calver

Saturday June 05 2021, 6.00pm, The Sunday Times

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Amy Stephenson has never washed the stripey sleepsuit her son Brody wore the day he was removed from her care at 18 weeks old. The nights after he left she slept with it, and she carried it in her handbag to court like a talisman until he was returned nearly four months later.

As she sits holding it in her neat kitchen in a quiet cul-de-sac outside Barnsley, her eyes moisten. Woven into its baby smell and familiar softness are memories that make her shake, even after months of therapy.

The family's nightmare began when Amy, 32, took Brody to the health visitor to be weighed in January 2019. She did not have to go — there was no appointment — but he was breastfed and she wanted reassurance that he was gaining enough weight.

Amy, on maternity leave from her job arranging patient transfers for Sheffield Children's Hospital, had no idea that two small bruises on his cheek would be the catalyst for a full child protection investigation. Nor could she guess that a fortnight later, follow-up x-rays would cause doctors to diagnose a non-existent rib fracture, leading to months of separation from her son and the arrest of her and her partner for child cruelty.

"I grieved for my child when he was still alive," Amy said. "From being young all I've ever wanted is to be a mum and that got stolen from me. I didn't get a first Mother's Day. I didn't see him roll over for the first time, I couldn't comfort him when he cut his first tooth. They took all my firsts away from me, and I can never be a first-time mum ever again."

She worries about the effect on Brody, now two. He never leaves her side and is still breastfeeding, despite the arrival four months ago of a sister, Indie.

The Sunday Times has been investigating the rise in parents falsely accused of harming their children. Since 2007, when

social workers and paediatricians were vilified for missing injuries that foreshadowed the death of Baby P, interventions have soared.

The number of families subjected to a child protection investigation in which no further action is taken has more than tripled, from 43,400 in 2010 to 134,620 last year. It suggests a culture of caution in which increasing numbers of children are removed from families for reasons that turn out to be groundless. Some social workers and paediatricians worry that the harm of separating babies from mothers is not considered enough when making risk-averse interventions.

Four out of five assessments of physical abuse in babies last year resulted in child protection plan, according to official figures released under information laws.

In England there were 2,140 assessments of babies under six months old where physical abuse was a factor. Of these 1,310 prompted “section 47” investigations where significant harm was suspected, leading to 400 child protection plans. This is a 20 per cent drop on the 500 plans five years earlier, even though the number of “significant harm” investigations rose by 19 per cent from 1,100 cases over the same period.

The rate of intervention varies wildly. In London 230 physical abuse assessments were recorded out of 58,920 babies, a rate of about one in 256. In North East Lincolnshire, there were 28 assessments among an estimated 811 babies, a rate of about one in 29. Of the 28 assessments, the number that led to a child protection plan was so low that it was suppressed for privacy reasons. North East Lincolnshire council blamed high levels of deprivation, and said it had put in place a “pre-birth pathway” to support families.

In the northeast, 160 physical abuse assessments were recorded out of about 13,300 babies, a rate of one in 83. The region includes Redcar and Cleveland, with one in 41 babies examined for abuse, Stockton-on-Tees, also one in 41, and Gateshead, where one baby in 42 was assessed.

Redcar and Cleveland said its social workers were “absolutely dedicated to supporting and safeguarding children” while following government guidance.

Many investigations are caused by a single bruise because of policies that say it is likely to indicate abuse in infants who cannot roll or crawl. This is despite a Cardiff University study showing that one in 20 pre-mobile babies have a bruise considered not suspicious by researchers.

Stories such as Amy’s are rarely told because of rules that stop journalists reporting on family courts unless a judge waives restrictions. She and her partner Tom wanted to speak, and can do so today because The Sunday Times pursued two expensive court hearings. “I don’t want any family to suffer the way we did,” Amy said.

When the social worker met Amy and Tom at Barnsley Hospital, where Brody was undergoing his first child protection tests, they instantly became frightened.

At this stage the two small bruises were the only injury identified. “When she walked in she didn’t acknowledge me and Tom,” Amy said. “She looked at Brody and said, ‘Let’s find out who’s been hurting you.’”

Amy initially thought the bruises might have been caused by Brody’s hands flailing around his mouth. Tom thought he might have caused them by grabbing Brody when he slipped being burped. He used a technique of sitting Brody upright on his lap with his cheeks between his fingers and thumb and his other hand to pat him on his back. Tom said that when Brody wriggled and slipped he instinctively caught him.

It was later decided in a strategy meeting of clinicians, police and social services that rough handling while winding was likely

to be what caused the bruises given their location and fingertip shape. Nobody could identify an assault that would cause them.



Bruises on Brody's face, which were probably caused by Tom grabbing him to stop him slipping from his lap, led to child protection tests and x-rays

Over two days in hospital, Brody had a full child protection medical, including dozens of x-rays, a CT scan of the brain and checks on his eyes for shaking. “The most discomfort I’ve ever seen my child in is being bent into positions to have pointless x-rays done,” Amy said. “That is the most distressed I’ve ever seen him.”

Her mother, Diane, worked at the hospital as a cleaner. When she told the social worker she did not believe Amy and Tom had harmed their son, she too was met with accusation. Amy said: “The social worker said, ‘Someone’s hurt him. It’s not been done accidentally.’ And my mum said, ‘You don’t know that until these medical reports come back’.”

That argument would later be used by the social worker to say that she was not suitable to foster Brody, despite being the grandparent who had spent the most time with him.

The hospital tests found nothing of concern and Amy and Tom were able to take Brody home with twice weekly safety visits. The health visitor’s notes suggest doting parents. She described bath times and cuddles, “only observed loving and attentive care being given” and noted that Amy and Tom spoke to Brody “softly and gently”.

After two weeks the couple took Brody back to Barnsley hospital for follow-up x-rays, a typical procedure in a child

protection medical. With this terrible chapter apparently closed, they walked to the high street to book a holiday.

The arrest

Amy and Tom were in Thomas Cook and had just put down a deposit on their first family holiday, to Sardinia, when the phone call came. It was social services telling them to come home immediately.

When they arrived the same social worker was waiting. Amy said: “She said, ‘We’re removing Brody. He’s suffered a significant injury while in your care and the police are on their way to arrest you.’”

She would not say what the injury was. At the police station they learnt that doctors had found a broken rib.

Amy remembers standing in the corner of her living room holding Brody and sobbing. Eventually Tom put Brody’s car seat into the social worker’s car and strapped him in. Brody had only ever been breastfed, but the social worker left with no milk for him. Because Amy’s mother had argued with the social worker at the hospital, Brody was fostered by his paternal grandparents.

Tom says that when his parents questioned what was going on, they nearly lost him too. He says the social worker said: “If you carry on, we’ll take him off you and he’ll go into foster care.”

The police arrested Amy and Tom for child cruelty and took them to the station, where they were kept in the cells for several hours and interviewed under caution. When the police told Amy that Brody had been diagnosed with a fractured rib she was distraught. “I felt sick to my stomach and like the world’s worst mum. I thought, ‘How has he had a fractured rib and I’ve not known?’”

At first the couple were allowed to see Brody four days a week in supervised 90-minute visits. The court eventually granted Amy one extra visit a week. She said: “I got told how lucky I was to see my son Monday to Friday for an hour and a half a day. But that’s not lucky.”

Amy expressed her milk into bottles for Tom to deliver to his parents' doorstep, as he was not allowed in. To make sure he could come to Brody's visits, he used up annual leave from his job mending cables for Northern Powergrid.

At the police interview, as he tried to make sense of the broken rib, he worried it had happened through enthusiastic play. In the police transcript he says: "He's my first lad, you know, and I can't wait to be able to play with him ... The only thing I can think of is I just like playing, get him laughing ... and I bounce him like that and get him in my hands like that round his chest."

His son had laughed and had not been upset. "I don't know if that could've caused it but I mean for me, a broken rib ... surely I would know?"



Brody was wrongly diagnosed with a broken rib
LORNE CAMPBELL/GUZELIAN

Wrong diagnosis

When Brody was taken away, Amy and Tom, 31, had been together, with hiccups, for three years. One night the pressure got too much. Amy could not understand how Brody had fractured his rib and turned on Tom. She drank too much wine and was so disruptive that the police were called and took her away.

Then a report from the court-appointed radiologist changed everything.

Dr Oystein Olsen, a consultant paediatric radiologist at Great Ormond Street Hospital in London, had examined the x-rays

from Barnsley hospital. He could find no fracture and “no convincing difference in appearances” in x-rays taken two weeks apart. Yet Barnsley hospital had diagnosed a healing fracture.

Olsen said in his opinion “the x-rays and scan do not show any injury” and reminded the court that there was a wide spectrum of normal rib irregularities.

Outlining the danger of viewing x-rays through the prism of child protection, he said: “It is fundamental to the practice of radiology that the detection of abnormality should be independent of any preconception held by the radiologist. Violating this principle would be detrimental to the entire foundation of the discipline since all current knowledge about the accuracy of diagnostic findings assume a non-biased approach.”

Brody’s is the third case we have uncovered in which a fracture was wrongly diagnosed in a baby, triggering an abuse investigation and separation from parents. Infant radiology is complex and babies’ growing bones can appear fractured when they are not.

In a letter of apology to the parents from Barnsley children’s services, Tessa Brown, service manager, wrote: “We expect very high standards of practice from our social workers and that includes being respectful, sensitive and courteous at all times. The way that you have experienced our service falls a long way below that and for that, I am very sorry.”

Barnsley Hospital has not apologised. A spokeswoman said: “We cannot comment on individual cases.”

In Barnsley, 13 babies were the subject of physical abuse assessments last year out of about 1,300, a rate of one in 100.

Andy Bilson, emeritus professor of social work at the University of Lancaster, said policies that assumed bruises in pre-mobile babies were rare needed to be looked at again. “In promoting the view that bruises are likely to be non-accidental they give staff a false basis for their assessments of the risks faced by children,” he said.

Bilson believes that where a fracture diagnosis is being considered as grounds to remove a child “a second expert radiological opinion should be speedily obtained to make sure babies are not taken into care unnecessarily”.

Prove your innocence

It took another three court hearings and more than a month before Brody was finally allowed to go home with his parents.

The court had to wait for the paediatrician who had first concluded the bruising was likely to be intentional, despite not seeing a photograph of it. In a final court report she confirmed that she thought the most likely cause was a grab that could have happened if Brody slipped while being winded.

The court also wanted a repeat of Amy’s hair alcohol test, which had come back with a possible positive for long-term alcohol abuse, because she used hair spray. Once she retook the test after washing her hair in baby shampoo it came back negative, but this delayed Brody’s homecoming.

Trevor Cave, a councillor and cabinet spokesman for children’s services at Barnsley council, said: “These decisions are not taken lightly, and we understand the impact it can have on a family. In this case, we were acting on the medical advice provided to us at that time, which suggested the child had suffered a significant fracture.”

An experienced social work team manager said that she was increasingly concerned for families accused of abuse. “You’ve got to prove your innocence in child protection,” she said. Young social workers coming into a sector with a high rate of churn hide behind procedures that offer professional protection, she added, as they do not have the experience to take risks.

“People are risk averse because of fears of retribution if you get it wrong. The families take the punishment for our fears about missing something.

“It is the paediatricians who call the shots and they sit on the fence and go for safeguarding without thinking of the trauma for a family because they prefer to leave a difficult decision to a judge.

“When babies have tiny bruises the paediatricians say it’s indicative of non-accidental injury, especially if it’s unwitnessed, but that’s not always the case. I’ve had a child with a mark from a car seat but they’ve immediately gone down the safeguarding route.”



Amy and Tom with Indie, left, and Brody
LORNE CAMPBELL/GUZELIAN

Post-traumatic stress

At home in Barnsley, Tom cradles sleeping Indie in his arms while Brody curls up in Amy’s lap. The scene is peaceful, but the family is wounded.

Six months after Brody came home, Amy started having panic attacks. She developed a stutter “and then for three days I couldn’t speak”, she said. She went to hospital thinking she was having a stroke and was told that it was the result of extreme stress.

Amy has not been able to return to work. She was signed off sick with stress and is on maternity leave with Indie.

She finds the thought of Brody getting an injury frightening. “I’m terrified if he bumps his head or bumps into anything. He’s a boy, he likes climbing, and I want to wrap him in cotton wool.”

Indie is 18 weeks old, the age Brody was when he was taken. Amy worries that the next few months will be a reminder of all the milestones she missed. “It’s hard not to think that

something's going to happen even though I know it's not. It's like my mind saying, 'Is someone going to take her away from me now and give her back four months later?'"

She wonders if she will recover. "That scar will never heal because all I want back is that 16 weeks and there's not a person in this world that can give me that back."



The risks of doing too much — or too little

Why are experts worried?

Some social workers and paediatricians are concerned that the damage caused by separating babies from their mothers unnecessarily is not given enough weight when making interventions. More babies are being taken away only for no evidence of abuse to be found. The numbers suggest they are right to be concerned.

How did this come about?

Professionals working with children are criticised if they intervene too much, and if they intervene too little. In 2007 the case of Baby P, a toddler who died in north London, led to social workers being vilified. He had suffered more than 50 injuries in eight months. Such cases lead to professionals becoming more cautious, a trend made worse by staff turnover. New social workers stick to protocols, and the protocols say that a bruise is likely to indicate abuse.

Is that true?

Bruises can show violence, but innocent explanations should be explored too. Cardiff University research suggests that one in 20 pre-mobile babies has a bruise on any given day, and these are not suspicious.

What about the role of doctors?

Clinicians say that in the wake of Baby P they are under pressure not to miss cases and that this can prompt the

overdiagnosis of abuse. One paediatric radiologist said: “Clearly people are sensitised. They don’t want to miss something.” A culture of over-intervention is not universal. In London and the southeast, rates of investigation and care orders are low. In parts of northeast England and Wales, however, the rate of children in care can be as high as one in 50.

And judges?

Social workers take the blame in child protection cases but ultimately a judge makes decisions about care. There is a huge variation in how courts apply the law. In north Wales, for example, 77 per cent of all care applications resulted in a care order between 2010 and 2016. In west London, 39 per cent resulted in a care order, according to Ministry of Justice figures.

What should be done as a first step?

The story of baby Brody is the third we have examined in which a fracture was wrongly diagnosed in a baby, triggering removal from the parents. The family court catches some mistakes but it can take months before expert witnesses examine x-rays. An immediate second expert opinion is needed from another hospital to make sure babies are not taken away unnecessarily.

Is there hope of a more balanced approach?

Yes. Many top professionals are worried, including Isabelle Trowler, the chief social worker for England. A year-long review of children’s social care, begun in January, gives the sector a chance to find a better approach.

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Andrew Bilson



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Chris Madder

6 JUNE, 2021



"Tom says that when his parents questioned what was going on, they nearly lost him too. He says the social worker said: "If you carry on, we'll take him off you and he'll go into foster care." - This is the thing which sent the most chills down my spine, the fact that even Tom's parents were threatened. Horrible, horrible, horrible. I cannot even begin to imagine what it would be like to have that happen to me and I cannot even begin to imagine how they are coping now because I am sure there will be enough people quite happy to say: "There's no smoke without fire".

[Reply](#) ☆ [Recommend \(163\)](#)



Rich > Chris Madder

6 JUNE, 2021



You can't challenge these people. They are so paranoid about their own ineptitude that they will just lash out at even the slightest challenge.

[Reply](#) ☆ [Recommend \(18\)](#)



tgg

5 JUNE, 2021



Well done Sunday Times for investigating this issue and paying for the court hearings so that the public can hear about the impact of professionals (medical staff, social care, courts) taking the 'safe' route to cover their liability (professional, legal or moral) instead

of correcting the process, especially getting second opinions. As often, when previously caught out for being too lax, the process has overshot in correcting the other way and it is time to improve this.

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KTKC > tgg

1 DAY AGO



Agreed, really highlights the importance of good journalism. What a terrible story, I can't imagine what that family has been through.

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Captain Walker > tgg

6 JUNE, 2021



Health and social care staff are unable to speak up (unrelated to the courts). But of course the general public are unaware of that.

[Reply](#) ☆ [Recommend \(1\)](#)



Gladys

6 JUNE, 2021



Interesting - but my experience is the opposite. As a court appointed child psychologist, I am currently overwhelmed with post lockdown referrals. The level of long term neglect, exposure to domestic violence, drug and alcohol abuse and the impact of parental mental ill health is the worst I have encountered in 25 years. Many of my current cases have been 'known to' social services for years, but remained under the official 'significant harm' threshold because of limited resources, lack of vigilance, and presumably because there weren't NAI boxes to tick. Often action is delayed by inexperienced social workers who are intimidated by hostile parents, often with significant criminal records. It is usually only when police are involved, and call out the squalid home conditions, drug dealing or sex working in the presence of the children that emotionally traumatised teenagers will plead to be placed in residential care. And just for clarity - my four most recent cases, involving a combination of the above, have involved families along the breadth of the supposedly affluent UK south coast.

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Alan Wilkinson > Gladys

6 JUNE, 2021



It's not interesting, it's horrifying. Of course there are cases where removal is justified. But they are irrelevant to those where it is not.

[Reply](#) ☆ [Recommend \(10\)](#)

M Middleton > Gladys

6 JUNE, 2021

Are you an Educational Psychologist, or a Clinical Psychologist who specialises in 0-18? The job title "child psychologist" is not one recognised by the HCPC.

[Reply](#) ☆ [Recommend \(3\)](#)

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C Capriz

6 JUNE, 2021

My heartfelt sympathies to this couple. I have worked and continue to work with abused and neglected children in an authority mentioned in this report and despair of how often the system goes the other way, with children surrounded by fecal matter, drugs, 'uncles' and social services under such strain that they keep giving mum another chance.

[Reply](#) ☆ [Recommend \(85\)](#)

G Gilberto Francois > Capriz

6 JUNE, 2021

Completely agree

[Reply](#) ☆ [Recommend \(1\)](#)

H Harbass

6 JUNE, 2021

My blood ran cold when I read this. Would my elder son have been taken from me when I (wrongly) thought that he had taken some of the tranquillisers that I had been prescribed? Would my younger son have been removed when he fell and bashed his head on the door jamb?

Thank goodness they were born in the sixties and not in the 21st century.

I believe that children should be protected but this level of presumption of guilt is really frightening.

[Reply](#) ☆ [Recommend \(81\)](#)

M Missus Mortley > Harbass

6 JUNE, 2021

Indeed. My daughter- born in Denmark- was often in A&E. from bouncing down a marble staircase to falling off the back of a sofa onto a wooden floor. Each time I had to explain what had happened, but this examination was always "independent of preconceptions ". Fast forward 16 years and we are in front of an NHS paediatrician and Epilepsy nurse, and I (being a good mum) am defending our right to understand her illness and question the myriad of drugs - sleeping tablets, anti-depressants etc that they want to give her on top of the anti-convulsants.

First they attempted to exclude me from the dialogue by trying to visit her in school (independent school fortunately so I put a stop to that), then I was told that Social Services would have to get involved and take her away from me. This is a horribly vindictive branch of our public sector.

[Reply](#) [☆ Recommend \(9\)](#)

L **Left of centre** > Harbass
6 JUNE, 2021

No, as I assume you went straight to get medical help, and had a genuine plausible explanation for the accident/injury. Very different to apparent broken ribs in a non mobile baby.

[Reply](#) [☆ Recommend \(2\)](#)

C **Crofter**
5 JUNE, 2021

The efforts of The Times to expose this emotional and psychological abuse of babies, parents and the wider family is to be applauded.

It is essential that national guidelines are drawn up as a matter of urgency so that inexperienced and non-specialist staff aren't misreading xrays. *(Edited)*

[Reply](#) [☆ Recommend \(65\)](#)

L **Left of centre** > Crofter
6 JUNE, 2021

I absolutely agree that we need second opinions where non accidental injury is noted.

May I add that that there are other concerns, minimised in this article - such as the mother being so drunk that the police had to be called, and (since proven incorrect) the possibility of alcohol misuse in the family, one could also speculate as to what 'with hiccups' may mean in the 3 year relationship.

Maybe the Times could provide all of the information the judge would have had access to at the time the order was made? Would it appear more reasonable then? I don't know, as I haven't seen it.

I'm glad this family are together again, I hope the mum access some therapy for the trauma she is still suffering.

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A **AH**
6 JUNE, 2021

And yet in Brighton a baby was able to starve to death over 6 days. It's such lazy work from the health visitors, only looking at what's right in front of them and then hoping to be proved right so they can be seen to be doing a job, which actually, they are not doing at all.

[Reply](#) ☆ [Recommend \(58\)](#)

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T **Thoughtful** > A H

6 JUNE, 2021

A Health Visitor's role is to visit maximum once a month, so how could they have known what was going on with this sad case?

[Reply](#) ☆ [Recommend \(1\)](#)

M **MJF** > A H

6 JUNE, 2021

I work as health visitor and have personally sent several immobile babies to A+E with unexplained bruises / marks. I don't think I can recall a time that I have ever suspected the parents of abuse or have been worried about the child's welfare, however we have explicit procedures for dealing with unexplained bruising or marks in immobile babies. Babies may have undiagnosed blood disorders causing them to bruise more easily and this is also a significant indication for further medical investigation. I neither have the medical expertise or experience to make that kind of diagnosis as a health visitor. I will often apologise profusely to parents for having to follow these procedures but many are more than willing to have their babies checked in hospital to rule out any underlying causes.

If bruises or marks are unexplained and the hospital have concerns or further injury is found, children's services will arrange a strategy meeting to gather more information from health services, police and education. The case will be escalated to a section 47 child protection investigation if there is significant cause for concern. This is always agreed between professionals and based on information available. It should be noted that a bruise in and of itself would unlikely necessitate a child being removed from parents care. The reporting on the case in this article suggests it was the diagnosis (albeit a misdiagnosis) of a fracture which necessitated the child being removed from parents care

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G **Grumpy from London**

6 JUNE, 2021

Who'd be a social worker?

[Reply](#) ☆ [Recommend \(47\)](#)

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G **Gilberto Francois** > Grumpy from London

6 JUNE, 2021

Exactly - working in any of these fields as a social worker, health visitor etc with chronic underfunding is very overwhelming and very often, unsupported - properly - in terms of supervision and psychological support..... a significant ratio of staff leave these professions within 5 years of qualifying... and yes it is absolutely terrible what happened to the couple here, but mostly, as other professionals have said, I have seen it go the other way where not enough was done to protect children from horrendous abuse.

[Reply](#) ☆ [Recommend \(5\)](#)

L **Left of centre** > Grumpy from London

6 JUNE, 2021

Never in children's services. Everyone who graduated with me is now in mental health, adults or the charity sector. Sadly that's part of the problem, high stressful caseloads, leads to high turnover leading to loss of experience.

Just like adult social care, the sector needs properly funding. Also many of the preventative services like sure start are no more.

I qualified in my 30s as a career change and I still earn less now than I did previously as a retail manager! Everyone on my degree was a mature student. I couldn't have done this at 18.

[Reply](#) ☆ [Recommend \(3\)](#)

S **SBO**

5 JUNE, 2021

This was going on before baby P. Happened to friends of ours, overzealous social services who actually lied to the court because they wouldn't admit to being wrong. Fortunately they could afford good legal representation and medical opinions. I think it easier for social services to focus on law abiding compliant parents.

[Reply](#) ☆ [Recommend \(40\)](#)

S **Sophie Kucerov**

5 JUNE, 2021

I feel sick to the stomach reading this - the power social services have over parents is shocking, the idea that parents should have to prove their innocence is shocking. What happened to our supposed liberal country? The few social workers I met on maternity leaves were typically inexperienced and knew less than i did about babies.

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