

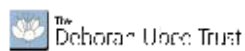
**Prevent
Protect
Repair**



Prevent-Protect-Repair Evaluation Phase 2

Domestic Abuse interventions across Lewisham

**CADA:
Children Affected by Domestic Abuse
Home Office Funding**



Introduction

Children Affected by Domestic Abuse in Lewisham: Prevent-Protect-Repair - Evaluation Phase 2

Lewisham Prevent-Protect-Repair project is a multi-agency partnership building on and developing the existing domestic abuse response in the borough with particular focus on developing support for children who have experienced domestic abuse. The initiative aims to scale up existing provision through increasing capacity and reach, whilst identifying and addressing gaps in support. Partnership is a key element both strategically and operationally in order to develop a holistic and sustainable multi-agency approach across the borough.

This report is a snapshot of Phase 2 of the Lewisham Prevent-Protect-Repair initiative funded by the Home Office Children Affected by Domestic Abuse funding (CADA). The report covers the period April 2020 to March 2021.






Prevent-Protect-Repair: The project has 3 interconnected strands

PREVENT: raising awareness and changing perceptions of domestic abuse, to improve how the system in Lewisham recognises and responds to the experiences of children, young people and their families.

PROTECT: building the skills, confidence and capacity of the Lewisham workforce to respond skilfully to the needs of children and families experiencing domestic abuse. Mobilising and embedding a whole system approach across the borough.

REPAIR: addressing the impacts of domestic abuse on vulnerable children, young people and their families through increased capacity of existing provision and commissioning additional specialist support.

Prevent-Protect-Repair is led by the London Borough of Lewisham via the Partnership Board and Steering Group of key delivery partners. The Board consists of LBL Children & Young People Early Intervention Commissioners, Early Years Alliance Service Manager, Chair of VAWG forum and DA Consultant, The Athena Service Manager and LBL VAWG Programme and Strategy Manager. Governance and scrutiny comes from the existing Lewisham VAWG Forum and VAWG steering group, which reports into the Safer Lewisham Partnership.

	Beneficiaries	Phase 1	Phase 2	Total	
	Children Supported	185	274	459	
	Parents/Carers Supported	131	167	289	
	Total Individuals	316	441	757	
	6,591 page views of the Professionals' Portal and Timekeeper video				

Definition of Domestic Abuse

'Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality'.

This can encompass but is not limited to the following types of abuse: • psychological • physical • sexual • financial • emotional
Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim (1).'

With particular regard to children and young people: The Domestic Abuse Act 2021 establishes that a child who sees, hears, or experiences the effects of domestic abuse and is related to the person being abused or the perpetrator, is also to be regarded as a victim of domestic abuse.

Why the project is needed - Impact on Children & Young People

Experiencing domestic abuse can have a devastating impact on children and young people, and this can last into adulthood. It undermines the child's basic need for safety and security and has a negative impact on their development, education outcomes and mental health. It can have a lasting effect on a child's behaviour, brain development and overall wellbeing.

Abuse in the home can happen to anyone, it is not limited by social or economic status, where you live or ethnicity and it is a global phenomenon. It is still largely a hidden problem – occurring behind closed doors. Barriers to reporting and underreporting makes the scale of the problem hard to estimate.

However, the need to protect, support and repair the damage to children affected is evident. It is estimated that 1 in 5 children experience domestic abuse; there are approximately 75,000 children in Lewisham which means up to 15,000 children in the borough are affected. The Athena Service - Lewisham's dedicated domestic abuse crisis service – accepted 601 clients to their community based services in 2019/20 with 865 children and young people impacted; 67% of these are children under 11 years old. Lewisham Children and Family Centres estimate that 50% of its referrals are for families where there is an element of domestic abuse. In 2018/19 Lewisham Police attended 5,806 reported incidences of domestic abuse of which 3,525 offences were committed. Lewisham Youth Offending Service annual report 2017, shows that of those who re-offended 100% of young women and 63% of young men were known to have experienced domestic abuse.

Impact of COVID-19 on incidence of domestic abuse

Phase 2 of Prevent-Protect-Repair started alongside the global COVID-19 pandemic, with repeated lockdowns and restrictions on movements since March 2020. Whilst this affected everyone, children and families experiencing abuse faced increased risk of harm and isolation. Confined to home, access to services and help was limited for children already receiving support and concerns increased for children already under the radar. For example school staff being unable to see changes in children's behaviour in the same way that they can when children are physically in school.

The pandemic also impacted services' ability and capacity to respond – furlough, staff illness, the inability to access workplaces and community venues and safety of staff all had an impact.

Although there is limited official data so far on the impact of lockdown on domestic abuse, the Office for National Statistics (ONS) recorded more than a quarter of a million domestic abuse related reports, showing an increase of 7% from the year before and an 18% increase from two years ago. The ONS also reported that in mid-May 2020, there was a 12% increase in the number of domestic abuse cases referred to victim support(1). Between April and June 2020, there was a 65% increase in calls to the National Domestic Abuse Helpline, when compared to the first three months of that year .

Emerging evidence indicates there may have been a change in those who perpetrate abuse. Between April and June 2020, there was an 8.1% increase in abuse from current partners, a 17.1% increase from family members and a decline of 11.4% in abuse experienced by former partners, according to a study by LSE and the Metropolitan Police(2). In April 2020, the Home Affairs Committee said there was 'evidence that cases are escalating more quickly to become complex and serious, with higher levels of physical violence and coercive control(3).

Prevent-Protect-Repair COVID-19 Response

COVID-19 pandemic and subsequent lockdowns have had an impact on all aspects of planning and delivery across the PPR partnership and beyond. Many of the programme interventions were in mid-delivery during March 2020 when the first lockdown began, or on a waiting list for a service with little prospect of immediate delivery. Programmes were paused, partners acted swiftly to draw up contingency measures to support and keep families safe over lockdown.

This has been a massive ongoing challenge and the connectivity of the Project Steering Group has been significant in responding to the crisis and supporting workforce resilience.

The sensitive nature of domestic abuse interventions and programmes has meant particular care has been taken establishing a virtual / online offer and developing robust principles and processes for virtual delivery. Key considerations included the safety of participants, the family's situation/environments alongside the need for privacy and safety to engage, mitigating access to technology and connectivity.

Programme leads and designers have had to be very responsive to the changing circumstances and creative in their approach. Where programmes were deemed inappropriate for virtual delivery, alternative checking in measures for supporting families have been undertaken.

The path out of lockdown and national restrictions have continued to impact service delivery and management. However, where possible virtual and hybrid delivery has been implemented and in all services where a caseload is active there is regular contact and risk management.

Whilst there is hope that we are at the tail end of COVID-19 restrictions, considerable uncertainty remains. However, the PPR partnership crisis response has put in place strategic and operational processes to respond to future challenges.

(1) <https://commonslibrary.parliament.uk/domestic-abuse-and-covid-19-a-year-into-the-pandemic/>

(2) https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3686873

(3) <https://committees.parliament.uk/publications/785/documents/5040/default/>



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Executive Summary

Click on the image to download a copy of the executive summary



Prevent-Protect-Repair

Executive Summary - Evaluation Phase 2

Domestic Abuse interventions across Lewisham

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Acknowledgements

The report and the snapshot of work it represents is the product of many peoples efforts and their organisations. We would like to thank the children and mothers who shared their experiences and insight with us and to all the families who have participated in the programmes and services offered. Their insight, input and contribution are invaluable to understanding and meeting the needs of families.

We would also like to acknowledge and thank Lewisham professionals who have shown such commitment to supporting families in unprecedented times. Under the aegis of the Prevent-Protect-Repair partnership professionals from across Lewisham have worked over and beyond their day jobs to respond to the challenges of COVID-19, continuing to support and help keep children and their families safe:

LBL Early Intervention Commissioning Team, Early Years Alliance, Lewisham Children and Families Centres, Athena, Future Men, The Positive Parenting Company, Deborah Ubee Trust, CSUK, LBL VAWG Steering Group.

Summary of findings

The effects of the COVID-19 pandemic and restrictions have had an unprecedented effect on all aspects of programme delivery and interventions. Exacerbated by children and families facing multi vulnerabilities in addition to domestic abuse. This challenge runs throughout this report.

The Prevent-Protect-Repair partnership has effectively responded to these challenges, mobilising resources and the workforce across the piece, planning strategically and ensuring the needs of families are met. The partnership 'glue' developed through phase 1 ensured a coherent web of online services and activities across the borough. Partners shared their expertise, resources, and local knowledge; highlighting the needs of children and families, identifying and plugging gaps in provision. Alongside this, partners have reconfigured interventions online where possible. The crisis nature of the pandemic means this has been a huge undertaking. The role of partners with an overarching remit across the borough has provided key infrastructure support to keep the project moving forward, notably the EYA Lewisham Children and Family Centres and the Children's Commissioners.

Ensuring children and their families are supported

Whilst interventions have not been able to run as expected due to COVID-19, measures to keep children and families safe and mitigate the effects of lockdown have been undertaken across the partnership. Many families had additional support needs because of the pandemic, such as needing access to food and play resources, linking them into the local network ensured they received the help they needed. Furthermore, where interventions have been able to resume for example the CODA and Freedom programmes, there is clear evidence of the benefits for children and their families.

A bespoke family support offer was initiated through the Children and Family Centres to ensure support and safety for children and adults who could not access specific domestic abuse support during lockdowns due to safety concerns. Children have also received alternative therapeutic support through Victim Support. A timely Tech Abuse workshop for parents and practitioners was developed.

The Caring Dads Pilot has contributed valuable experience and insight into the considerations for a strategic and operational response for fathers who are perpetrators of abuse. It has also brought to light some of the sensitivities and complexities inherent in this. It has been established that behaviour change programmes, especially those aimed at perpetrators, are not easy to establish. The education and information aspect can be delivered virtually but the more intensive and deeper focused behaviour change elements have to be delivered face to face.

Awareness raising, supporting and connecting professionals

The newly developed online domestic abuse portal has connected professionals across the borough and has provided a simple single point of access to advice, information and support. This includes information about the services and programmes available and how to access them; resources and awareness raising tools including access to the Inner Eye film for training and engagement; programme schedules and a simple route to refer into training programmes and Professionals' Surgeries.

The Professionals' Surgeries offer has also led to the development of a Domestic Abuse Advisory Hub for social workers in Lewisham -funded by What Works in Children's Social Care. This is a virtual and reflective space for social workers to seek advice from a panel of specialists in domestic abuse and aiming to reduce professional isolation.

Establishing a virtual offer in response to lockdown has required a step change

The process of reconfiguring services to online delivery has provided important insights. Establishing a virtual offer has been challenging due to the very sensitive nature of domestic abuse interventions and programmes: the need to provide privacy and safety in the home for children and families is not straightforward due to families' situations. For example children need a private confidential space to engage with programmes and this may not be available in the home; parents may not wish to discuss issues in front of children and if the children are very young they may not have anyone to look after them while they engage; tech poverty is still a problem faced by a number of families and in particular families fleeing domestic abuse. Clearly if the abuser is in the home this adds to the risk of harm.

This has led to practitioners developing robust principles and processes for virtual support, and reconfiguring group interventions to ensure fidelity to the programmes and standardisation across the multi-agency model. This includes top up and online skills training and support for the workforce to deliver safely online.

Feedback from families shows that for some parents virtual delivery is convenient, more accessible - for example not having to take time off work or travel to a venue – and they like the comfort of home. However, some parents can't or won't access online groups due to safety fears, lack of confidence/knowledge in using tech/virtual platforms or because they prefer not to.

Engagement is different online and some parents have said they miss the human factor – getting out to attend a course, the support and solidarity they get from connecting face to face with women in similar circumstances. In previous evaluations of face to face groups this has been a central part of their journey out of isolation. Children who experienced a mix of face to face and online CODA programmes generally said they preferred meeting face to face but were happy to reconnect online if this wasn't possible. The feedback highlights that the success of support and intervention rely on human level trust and relationship building between facilitators and participants and also between peers in group interventions. Whether this can be replicated to the same level as the in person delivery remains unclear.

Whilst some interventions were subsequently able to move to online delivery once this process was complete - for example CODA, Caring Dads and The Freedom programme - ongoing practitioner and programme flexibility was essential. For example children and young people offered the Healthy Relationships programme virtually chose not to follow the programme structure online and preferred to engage with the facilitators for ad hoc support and advice. The Deborah Ubee Trust were able to deliver to some children over the age of eleven, but this was dependent on their preferences, access to technology and access to a private and confidential space.

A virtual offer also poses challenges to engaging with children and families who remain under the radar of services and those who have not been able to access support, and this is exacerbated by school and community service closures. This highlights the ongoing importance of informal networks and community awareness raising - of both the signs of domestic abuse, the services available and how to access them.

With regard to economies of scale - whilst online delivery brings an economy of scale to some extent, there are other factors that mitigate against this. For example, numbers of group participants have to be reduced to be delivered safely and securely; the impact of tech poverty and measures to address this have to be factored in; access to online support and intervention efficacy through losing the 'human touch' need further exploration.

Recommendations

Area of Learning	Evaluation Context	Recommendations	Timescale
PPR partnership approach	The necessity for and effectiveness of the PPR multi sector approach across Lewisham has been established, alongside infrastructure to support this.	To plan for and ensure continuing support for infrastructure for PPR partnership approach when extension funding ends in April 2022.	January 2022
COVID-19 uncertainty	Emergency Planning to mitigate impact on children & families of subsequent pandemic measures in Autumn & Winter 2021-2022 / subsequent emergencies.	To embed the learning of the PPR partnership COVID-19 response to ensure cross borough contingency measures are in place to enable a swift response for children and families in the event of future lockdowns or restrictions. To ensure fall back planning and emergency response are part of programme planning and risk assessments for both existing and new commissioned interventions. Support organisations to develop their response.	Ongoing
Engaging children and families under the radar of services	Concern that engaging families under the radar of services was made more difficult during COVID-19 restrictions	Re mobilise awareness raising activities for professionals across Lewisham and children and families and the wider community. Employ a range of strategies including outreach, online /social media activities as well as physical methods like posters and leaflets in schools and community services – to ensure children and families are aware of signs of domestic abuse and how to access support.	Autumn 2021
Face to face vs Online delivery	COVID-19 crisis has dramatically changed the environment in which we live and work. Increased reliance on socially distanced/online modes of delivering support for families has been necessary, yet many interventions rely on 'human interaction'.	Where possible operate a hybrid approach – a mix of online and face to face. Embed ongoing online skills development in CPD programmes across the borough (including voluntary and community sector). Continue to review the efficacy of online programmes and support.	Ongoing
Tech Support	PPR COVID -19 response has highlighted tech poverty in the borough.	To leverage the wider policy environment to ensure children and families have access to appropriate technology and support to use it.	Ongoing
Working with fathers	Caring Dads pilot highlighted the need to provide both support and challenge for fathers and the complexities inherent in providing this.	Develop a Borough-wide strategy for fathers including mapping pathways for meeting the different needs of fathers (abusers and fathers who are not abusers) and how they interact across agencies. This should include further scoping of interventions to ensure clarity about levels of risk and intended beneficiaries and outcomes.	2022

CODA Children Overcoming Domestic Abuse

Introduction

CODA is a 12 week therapeutic programme for women & children who have experienced Domestic Abuse. It provides a community based setting for children to share and talk about their experiences, so they understand abuse, reduce their self-blame, can do some planning to keep themselves safe, and learn how to manage their emotions so they can be expressed appropriately.

CODA enables the recovery process and aims to:

- Validate the children's experiences
- Reduce the self-blame that is commonly associated with children experiencing abuse
- Develop a child-appropriate safety plan
- Manage appropriate and inappropriate expressions of emotion
- Enhance the mother-child relationship
- Enable both the mother and child to heal together

There is a separate programme for the children and the mothers, these run concurrently. It can be delivered as both a group programme and 1 to 1. It is a Canadian group work model adapted for the UK by AVA (Against Violence and Abuse). This series of programmes was delivered by EYA Lewisham Children and Family Centres for Prevent-Protect-Repair.

Usually the programme is delivered face to face, however this could not continue following the COVID-19 lockdown and a new online version was developed. Regular check-ins were carried out with both the children and mothers whose programmes were put on hold- to provide support and ensure their safety during lockdown. This was extended to include vulnerable families on the waiting list.

The new digital offer was developed by EYA Lewisham Children and Family Centres alongside AVA - to ensure fidelity to the CODA programme and enable standardisation across the multi-agency delivery model. This included scrutinising each session and adapting every activity to ensure it translated effectively to online delivery, whilst replicating the group experience. Particular care was taken to ensure the potentially triggering nature of the sensitive material covered could be done safely online. An additional online 'top-up' training session for facilitators has been created and is now considered a pre-requisite to delivery. The training package upskills practitioners and increases their confidence in two key areas: (1) the use of Zoom as a vehicle to facilitate a safe space for women and children to process their experiences, in a way that continues to maintain their confidentiality and privacy; (2) to effectively facilitate the adapted, online-friendly activities.

4 programmes were delivered in Phase 2, 2 programmes were a mix of face to face and virtual delivery – these were paused when COVID-19 lockdowns were imposed in March 2020 and were subsequently completed online. There were also 3 x 1:1 programmes delivered. 20 children and 20 mothers benefited.



Evaluation Methods

Children's programme: An end of programme poll was completed with the children attending via zoom and facilitators carried out post programme feedback with the children. These were audio recorded with the children and mothers' permission.

Mothers' programme: Mothers were asked to complete a pre and post survey monkey questionnaire. An external evaluator carried out post course feedback sessions on zoom. These were audio recorded with the mothers permission.

Mothers have a range of choices regarding attending the feedback session and the audio recording. For example a participant can choose not to be recorded, they can give permission for their voice to be used, they can give permission for their words to be used but not their actual voice. Where children's voices are used - in videoscribes for example - their voices are changed.

Audio recordings provide rich feedback from participants and in-depth analysis. The end of programme interviews offer children and mothers the opportunity to reflect on the programme and how it has benefited them; to be involved in the way services are designed and delivered going forward; and importantly ensures the voices of the children and mothers are heard in their own words. The session also provides a quality assurance element as the mothers' session is conducted by an external evaluator; who also analyses the children's feedback .

Findings

The videos below illustrate the impact that our recovery support – in the form of the CODA Programme – has had on children. Using the voices of the children, these powerful videos encapsulate the child's lived experience and what they have gained as a result of attending the CODA Programme.



CODA Group Programme



CODA 1-2-1 Programme

Children's poll results

- Coming on the CODA programme has made me feel more listened to
- Coming on the CODA programme has made me feel more understood
- After attending the course I know what to do to keep myself safe
- After attending the course I know I am not to blame for the hurting and fighting in my home
- Coming to the sessions has made me more comfortable about sharing how I feel
- I had fun coming to the sessions

**100%
said**

Summary of the children's audio feedback

Children interviewed enjoyed and valued their experience of the programme, they reflected on what they liked and what they learned. Listening to the feedback children are clearly trying to make sense of their experiences and are at different stages.

- Children have made friends on the group – particularly the two groups who started with face to face sessions - and found others who understand what they have experienced, often for the first time. This was significant and corroborated by feedback from mothers.
- Children talked about how they valued the facilitators, the audio recordings demonstrate the trust between facilitators and children.
- Children have described how alone they have felt and the importance of knowing other children have experienced something similar (it's not about them / their fault).
- The importance of confidentiality to the children, to explore what has happened and their feelings in a safe place.
- They have gained insight into their feelings and how to manage them.
- Exploring and learning how to keep safe. Children talked about what they would do to keep themselves safe.
- The importance of having fun – balancing the work. The volcano activity was a big hit and mentioned by many of the children.
- Feedback about zoom from the children who experienced a mix of face to face and online sessions generally preferred to participate in person as they had made friends already. At the same time they were glad they could resume and 'see' each other on zoom as this was preferable to not 'seeing' each other at all.

What was the best thing about the group?

'That we got to have fun and all the bad stuff that was happening in our family - we got it out'

'I really liked it because I made new friends and I didn't know the group existed. I was a bit lonely not having parents together, like I was the only one, I found it really helpful'

'When we did the breathing thing and that helped; when I talked about what was happening it was a bit upsetting and when I did the breathing thing I felt better'

'My favourite week was the starting week because I met you (the facilitator)'

'I felt able to share and share myself more'

'When I first came everyone was nice and I got to have fun, I just want to stay there'

'I like sharing what I'm not really comfortable about and then afterwards feeling better'

What didn't you like?

'The fact that it has to end'

'There is nothing I did not like about Wednesday group'

What did you learn on the group?

'That we got to have fun and all the bad stuff that was happening in our family - we got it out'

'What I learnt from the anger / volcano week, everyone has a weird little monster within them that gets really really angry, it makes us be angry and the volcano represents the anger coming out'

'Being able to control feelings of anger, its ok to be angry but not ok to take your angry feelings on other people and sometimes it can help to talk to someone else'

'I learnt that its not ok to be in the middle of the hurting and fighting that can sometimes go on and what to do when it happens, call the police, go into a safe spot, to a neighbour or family member'

'I like sharing what I'm not really comfortable about and then afterwards feeling better'

'Everything's going to be alright'

'Its ok to be different and not everyone is going to feel the same way'

What would you say to another child thinking of coming on the programme?

'Definitely come because I know you are going to enjoy it.'

'You will enjoy it and all the bad things that happened in your past you get to bring it out'

'It is a patient and helpful group'

'Friday group can help you and you don't always have to share your feeling and you can share what you want to share and you can relax about your feelings'

What was it like doing the programme on Zoom?

The children who had experienced a mix of face to face and online sessions generally said they preferred to meet in person. However, they were glad that they could resume the course and 'see' each other during lockdown on Zoom - as this was preferable to not 'seeing' each other at all.

'Zoom - we can see each other! I like you and I like being able to talk to you despite the coronavirus making it difficult'

'I thought it was better face to face there is quite a difference, I think it would have been better if we could have paused and done it face to face'

'I like that instead of a call we could see each other and even though we're not together in real life we are together in a way, and you can talk about your feelings on a Zoom meeting where you can see the people you are talking to'

'It was good (on Zoom) but sad that we couldn't meet in person and I miss the group at Bellingham'

Mothers' Feedback

The CODA programme can have a powerful effect on the relationship between mother and child. Children are empowered to reflect on their experiences, problem solve and develop strategies to move forward positively. Whilst at the same time Mothers are supported to understand the effects of the abuse on their children and learn strategies to help their children, for example in dealing with their emotions, *'when one of my children are having an argument I know how to handle it. I tell them when you worry or you are angry its normal. But then you need to let your brother or sister know what they are doing and that you don't like it'.*

Click on the image to watch a videoscribe showing the Impact of the CODA programme on the mothers. Please note the women's voices have been changed for anonymity – the feedback has been read by other mothers in Lewisham.



Survey Feedback

100%
said

- Coming on the programme has improved my understanding of the effects of domestic abuse on me
- Coming on the programme has improved my understanding of the effects of domestic abuse on my child
- Communication between me and my child has improved since attending the programme
- Their child has talked to them more about their feelings since attending the programme

67%
said

- Their child's behaviour at school improved since coming on the programme

What changes have you noticed in your child as a result of coming on the programme?

'He seems more confident and ask more questions and is happy to leave me to go into school and is concentrating more on his work'

'He tried to understand more rather than lashing out and he is understanding that dv is not accepted He is now calm in dealing with issues'

What are the benefits of coming on the programme for you?

'I feel it has helped me become more confident and stronger moving forward toward the future'

"Having others to talk to and being able to express how I've felt or what I've been through with out judgments'

'This programme has helped build my self-confidence'

What are the benefits of coming on the programme for your child?

'He is more confident and his behaviour has changed and is asking me more questions and sits and talks to me and is concentrating more on school work'

'I think it's helped him to understand the difference of a healthy and unhealthy relationship and how people should be treated'

'She's more emotional towards me, she's more affectionate towards me, its improved our relationship'

The Freedom Programme

Introduction

The Freedom Programme is for women who are or have been experiencing domestic abuse. It examines the influence of attitudes and beliefs on the actions of abusers and the responses of those who have experienced the abuse.

The programme helps women to make sense of and understand what has happened to them, to understand how their children are affected by being exposed to this kind of abuse and how their lives are improved when the abuse is removed. It gives women the space to develop ways of thinking and behaving to protect themselves and their children from harm.

The programme was developed in the UK by Pat Craven. This series of programmes were delivered by the Early Years Alliance: Lewisham Children and Family Centres as part of Prevent-Protect-Repair. Each programme has 11, two hour weekly sessions and run by trained facilitators.

The Freedom Programme is usually delivered face to face in small groups. Following COVID-19 lockdowns in March 2020 it was not possible to continue to do this. The two programmes running were paused and facilitators checked in weekly with participants whilst protocols and arrangements were made to deliver the programme virtually. From October 2020 all programmes have been delivered remotely, with robust processes to maintain privacy and safety of participants.

The aims of The Freedom Programme are:

- To help women understand the beliefs held by abusive men and to recognise which of these beliefs they have shared
- To illustrate the effects of domestic abuse on children
- To assist women to recognise potential future abusers
- To help women gain self-esteem and the confidence to improve the quality of their lives
- To introduce women to other women who share similar experiences



Evaluation Methodology

There is a two-pronged evaluation approach, a pre and post programme questionnaire via survey monkey, plus semi-formal group interviews with the women at the end of their course to gather feedback about their experience of the programme and their insights into how the programme has benefited them and their families. Each group are also asked for suggestions about how the programme could be improved and other services that could be beneficial for women in similar circumstances. The session provides a quality assurance element as the session is conducted by an external evaluator.

The feedback is audio recorded with appropriate permissions to provide in depth analysis. The participants have a range of choices regarding attending the feedback session and the audio recording. For example a participant can choose not to be recorded, they can give permission for their voice to be used, they can give permission for their words to be used but not their actual voice.

The process provides rich feedback from participants, an opportunity for women to be involved in the way services are designed and delivered going forward and importantly ensures the voices of the women are heard in their own words.

Interviews were carried out with all all freedom programme groups across both phases (except for 1 course where participants preferred not to participate).

Findings

Mothers clearly valued their experience of the Freedom Programme, and reflected on the benefits to them and their children, many said it was life changing.

Click on the image opposite to watch videoscribe highlights of some of the feedback from mothers on the programme, it illustrates the impact of the programme. Please note the women's voices have been changed for anonymity – the feedback has been read by other mothers in Lewisham.



Survey Feedback

- The programme has made me more aware of tactics and behaviours in relationships
- The course helped me feel more confident in general
- The course had a positive effect on me
- I now feel less isolated in my situation
- I am aware of domestic abuse support that is available to me

100%
said

The programme helped mothers understand the tactics of abusive men, assisting them to recognise tactics of abuse in the future. Mothers highlighted the importance of understanding what's happened to them and their children, being heard, believed and validated:

'I think it's invaluable because it's so important to have your experiences validated and to be really clear about what these abusers are about and what their tactics are. So I think it's amazing and I feel really sad that it's ending.'

'One thing being in this group, it's fantastic, where you can recognise things that may not mean anything to others in the outside world. It's clarified that this is a normal tactic, it verifies what you've been through, that you're not mad, this is something.'

"It's very easy as time goes to minimise what happened in your head and go well it was only this, it was a long time ago and I'm sure that person is different now, maybe I did overact a bit and you start to minimise everything BUT it wasn't minimal and it was a very very big deal"

Helping mothers tackle the shame that is commonly (and erroneously) associated with domestic abuse

'I don't feel shame around it anymore because of the course I have learned not to feel shame about it. It made me want to spread my awareness and I am quite sad that the group is ending. I want more of it I think it's really helped me.'

'I could tackle it. And I can approach it differently. And I'm not abusive. It's just like a post traumatic stress disorder with a lot of things, how you react, because I felt like I'm a bad mother, I felt I'm a bad mother. And actually, the course helped realise I'm not a bad mother'

One week is dedicated to highlighting the effects domestic abuse can have on children. Mothers said it helped them understand this and reflect on how to support them

'After everything happened my son began to behave just exactly like his dad behaved. I got some knowledge from the group about how to approach him and how to talk to him and how to challenge his behaviour, and I think that has worked. He is more calmer at home now. He is beginning to understand that 'Oh I can't talk to my mum like that'. So I really appreciate the group.'

'Before me and their dad had separated you know there was a lot of shouting the last main incident happened and the children had to witness, you know, their dad had punched me in the face and they had to see all that. But this programme for the women's insight and the way that they can support children I can't fault it I can't fault it at all.'

I'm hoping that my children will go on some of the courses that they do. The CODA one. I have 3 children and I'm really hoping that my kids can go on stuff because they need it and they will really benefit from it.

The programme enabled women to gain support from one another and not feel so alone or invisible

'Especially the issue of silence for me, you're not supposed to discuss this with anyone this is just to be kept indoors. And for just getting an opportunity to release it out there and make me feel good about myself. That was quite beneficial for me. And you know when I'm much better, it means I can parent better'

'That's one thing that's been super super important is that sense of validation. Sometimes when you are not believed in the outside world, or you tell your story to some people who don't get it because they haven't gone through it, it's so crushing, not recognising that what you've been through is abuse and belittling your experience'

Mothers were asked 'If you were in charge, what would you change? Participants noted the imbalance in the response to domestic abuse, with mothers feeling that they have to do all the work and some mothers being mandated to attend programmes as part of care plans.

'It would highlight that this guy keeps coming up with different women ... some from a really young age and maybe they (the authorities) would do some thing'

'This course is really beneficial but there's a lot of concentration on me to change my mindset. I understand this - I'm the main carer. But there's no onus on him to have to do something'

'If they're penalised every time they get involved with a woman and do the same thing they might actually think twice before doing anything and behave in a particular way because they've been made to take responsibility. The whole system doesn't make them take responsibility at all.'

'He has been involved in the whole situation too so he should be made to have to do something too - otherwise there will be consequences'

'If he still wants to be a part of their lives (the children), he has to change'

Mothers' feedback about Zoom delivery

'I think the programme is wonderful. And I think it helps. So if you can deliver a programme or not deliver it at all, then if you can adapt it and do it in that way, then then you should do it. But I think at some point, you should probably when it's possible to do a face to face one, you know, taste interaction'

'First few sessions are about bonding, online you need to find a way to incorporate this into the programme'

'It's easier to put on your game face on Zoom - put on your make up etc and distance yourself from the emotion'.

'I liked them both equally, face to face probably, they were both fine, I thought'

'Much better to deliver online rather than not to deliver, but preferable to deliver face to face'

'Zoom works better because its more convenient' (in fact we had this conversation via Zoom, the parent was in a B&Q car park)

Domestic Abuse Professionals' Portal

A Domestic Abuse Resource for Professionals in Lewisham

The online portal is located within the Lewisham Children and Family Centres website. Building the portal has supported the remobilisation phase of Lewisham's Prevent-Protect-Repair partnership following the challenges of COVID-19 and the effect on delivery. It has created the necessary infrastructure to enable professionals to have a single point of access to domestic abuse information, advice and support in Lewisham and to connect with subsequent funding streams and programmes, for example the What Works for Children's Social Care funding stream.

The portal provides quick and easy access for practitioners to get help for the families they work with and to access support in their role. This includes information about the services and programmes available and how to access them, resources, awareness raising tools including access to the Inner Eye film for training and engagement, programme schedules and a simple route to refer into training programmes and professionals' surgeries.

The portal is an evolution of the Domestic Abuse Champions initiative started in phase 1 to train and support frontline champions in schools to support their colleagues identify and respond to domestic abuse effectively. The portal provides a practical and effective alternative resource within the constraints of COVID-19.



4,091
page views



1,133
unique views

Professionals' Surgeries

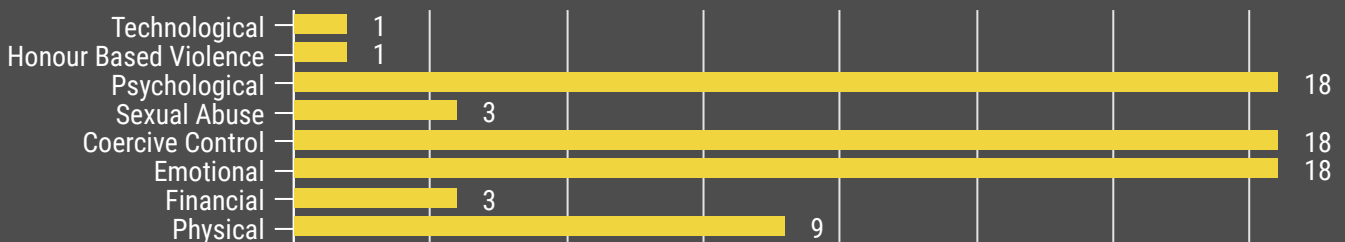
Professional surgeries were offered through The Portal. This provided a supportive and confidential space for practitioners to discuss families they were working with and get advice from a domestic abuse specialist. 4 surgeries were delivered in Phase 2. 8 social work professionals attended and 18 families including 25 children were submitted (discussed). Feedback from the facilitator describes the complexities of issues faced by the professionals in supporting families attending. The professionals' feedback shows that the surgeries were valued, and they helped the professionals' confidence and knowledge in supporting the families they submitted. All professionals would recommend the surgeries to a colleague. The professionals' surgeries offer has also had a big impact on the development of a DA Advisory Hub for social workers in Lewisham informing the language which is used by professionals and leading on the development of a terms of reference.

Surgery Feedback

- The surgery met my needs
- The session improved my understanding of the dynamics of domestic abuse in the family
- The session increased my confidence in facilitating positive change in the family
- Would recommend a surgery to a colleague

100%
said

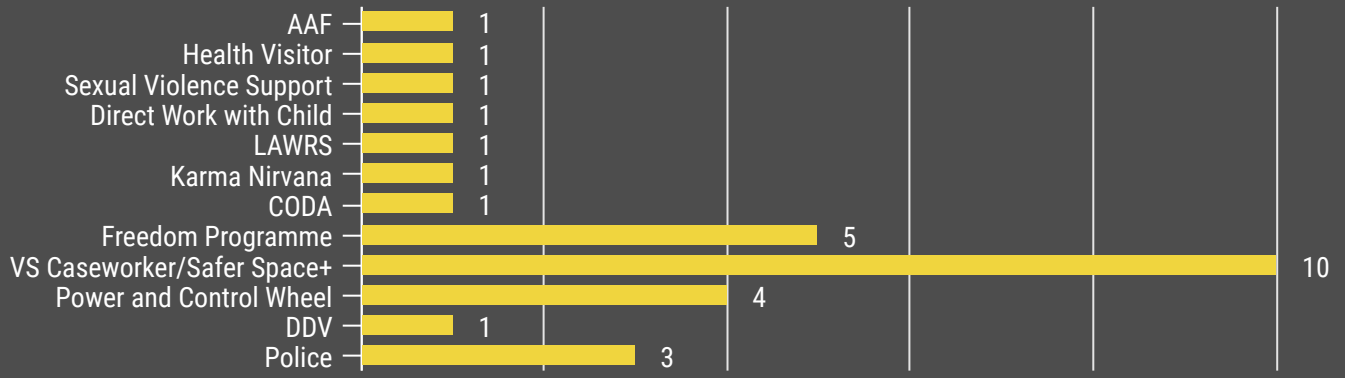
Types of Abuse Presented



Immediate Actions Advised



Service Support Advised



The Timekeeper

Domestic Abuse Video Resource

The Timekeeper video is produced by Inner Eye productions. It was commissioned by the PPR partnership and is used to raise awareness about the serious impact that domestic abuse can have on children and families. It adds to the set of resources that are used as part of the PPR programme. to engage and support professionals and community members to understand and respond in an effective way.

Based on real experience of residents of Lewisham, the film tackles very sensitive issues including physical abuse and coercive control. It highlights that abuse can be subtle and complex, and encourages discussion and challenges understanding of coercive control and the impact that it can have on children.

Due to pandemic restrictions the film's premiere was screened online in September 2020, followed by a question and answer session to a panel of PPR professionals. There were 63 Lewisham professionals attending the online premiere. The film has been made widely available as a training and awareness raising tool and has been viewed by individuals and groups throughout the pandemic.

It remains a resource to be used with parents and also for training practitioners. It can be viewed by clicking on the image below.

There is also an accompanying question and answer video featuring experienced professionals discussing the film and the effect of domestic abuse on families across Lewisham. This was recorded during an interactive session in April 2021 where professionals who watched the video could share their experiences, questions and even feelings about the film. The video can be accessed [here](#).

The Timekeeper

2,500
views



11-year-old Ben is desperate to protect his mother from the physical and psychological abuse dished out by his father. Instead of being able to save his Mum, he is drawn into his father's coercive control, through a game involving timing his Mum's trips to the local corner shop. Traumatized by fear and guilt, he withdraws into himself. His only salvation comes in the form of a school learning mentor.

The Timekeeper has had 2,500 views on YouTube. However, many more people have seen the film as it has been used in training sessions, team meetings and group events.

'Excellent job, well done to everyone. Very powerful and I think raises a perspective many people don't think about. We'll have to think about how councillors and myself can help share and help amplify the messages in the film'
Mayor of Lewisham

'That was so moving and powerful, thank you to all those involved in. Its impact will be immeasurable'
LBL Chief Exec

'Very keen to make this a part of our wellbeing and mental health champions that we are aiming to establish in early years settings. It would fit really well in terms of practitioners being able to signpost onto support services'
Early Years Quality and Sufficiency Service Manager

'A powerful film very harrowing. Society needs to keep talking and exposing DA - so that it becomes socially unacceptable and perpetrators are shamed and can't get away with their abuse'
Family Nurse Supervisor

'Great film and captured the very subtle and individual ways in which one person can control another and the impact on children. Well done to everyone involved'
Consultant Midwife in Public Health

The Athena Service: Early Intervention Worker



Introduction

The Athena service - Lewisham's dedicated domestic abuse crisis service, run by Refuge, provides confidential, non-judgmental support to people living in the London Borough of Lewisham who are experiencing gender-based violence. The Athena Service accepted 601 clients to their community based services in 2019/20 with 865 children and young people impacted; 67% of these were children under 11 years old. Demand continued to rise through the pandemic placing enormous strain on services and requiring services to adapt to significant challenges facing families and staff.

CADA funding through Lewisham Prevent-Protect-Repair partnership enabled Athena to employ 2 additional full time Domestic Abuse Workers in the phase 1: a Community Outreach Worker and an Early Intervention Worker and continued to support an Early Intervention Worker through Phase 2. Phase 2 also saw the development of online Technology Abuse Awareness training for practitioners and parents.

The role of the Early Intervention Worker is to work directly with women and children and young people in the community who are experiencing domestic abuse and to intervene early to avoid problems escalating. This includes raising awareness of what abuse is and what a healthy relationship looks like and doesn't look like, raising awareness of the support available and how to access it. As well as working with clients, the Early Intervention Worker delivers engagement events with professionals in education, health and political services using the Inner Eye awareness raising film commissioned through the partnership.

Early Intervention Worker snapshot of work in Phase 2

- 16 cases held in Caseload
- 6 cases are young women aged 13 to 17 who have experienced Domestic Abuse
- 39 referrals received in Phase 2, 23 cases admitted for support
- 6 school engagement events, 1 Home School Liaison team event

Supporting young people during lockdown

The Early intervention worker was able to carry out intensive work with the clients supported. Normally the worker would meet clients in schools and other locations across the community, during the Covid-19 lockdown the worker had to significantly adapt working practices to work online and in a COVID safe way. The young people accessing the service required a lot of encouragement to try out online sessions with their support worker; clients who were already experiencing difficulties with their mental health found themselves at crisis point as the lockdown cancelled their existing support systems. Many clients could not safely interact with their keyworker due to self isolating with people who posed a danger to them. Furthermore, as services introduced skeleton support systems for the highest risk cases only, Athena became one of the only professionals vulnerable people were in contact with during the health crisis.

Referral Sources

The main referral sources were from Children Social Care, followed by MARAC (1) and the police. Usually the service would expect more referrals from schools as they are often in a position to identify signs of abuse and its impact on children and young people early on. The pandemic has made this difficult and impacted the number of direct referrals from schools - it is likely they are referring into Lewisham's Multi-agency Safeguarding Hub and following this pathway to refer to Athena. To mitigate this Athena have been delivering engagement events for school professionals and this will continue going forward. All referrals were for females, the majority were young girls under the age of 18.

(1) Multi Agency Risk Assessment Conference is a meeting where information is shared on the highest risk domestic abuse cases between representatives of local police, health, child protection, housing practitioners, Independent Domestic Violence Advisors (IDVAs), probation and other specialists from the statutory and voluntary sectors.

Main type of abuse experienced

- Domestic violence
- Child sexual exploitation
- Online grooming
- Sexual abuse

Young People's Feedback on Closure

100%

supported by an Early Intervention Worker (EIW) reported feeling much safer
supported by the EIW reported now feeling not at all frightened.
said that the quality of their life improved

92%

said that they felt confident in knowing how to access help

Outcomes achieved



Safety

- Develop and implement an individual support plan
- Help finding new safety accommodation
- Support providing a statement to the police
- Supported through a criminal case by being kept informed of the progress of the case
- Support obtaining civil orders that provide protection
- Client receives advice and support in relation to the impact of personal child sexual abuse/violence



Health

- An opportunity to discuss the emotional effects of the domestic violence
- Talk about myths and realities of domestic violence
- Client accesses specialist provider in relation to mental health
- Support around addressing physical health
- Advice and Empowerment to make decisions and get support about unplanned pregnancy



Economic

- Support to review financial situation following domestic violence
- Support to continue safely in education

Challenges

- There are not enough services to signpost clients to for support following cessation of abuse (when it would not be deemed suitable for The Athena Service but the young person would still benefit from peer support, group work, floating support, etc)
- There is a lack of specialist mental health support for young people from the age of 13 who do not meet the threshold for SLAM/CAMHS. The majority of our clients expressed feelings of hopelessness, anxiety, suicide ideation, self-harm ideation however there are no specialist resources immediately available for support
- There is a need for a multidisciplinary meeting to discuss complex cases for reflection, advice and safety planning due to the complexity of the issues amongst The Athena Service clients (CSE, DA, online grooming, mental health, homelessness, truancy, etc)
- Early Intervention Workers reported a generic lack of understanding of dynamics of the types of abuse young people experience resulting in an inaccurate analysis of the problem leading to ineffective intervention

Tech Abuse Awareness Training

During the second phase of funding Athena developed a very successful and timely online Technology Abuse workshop for practitioners and parents to keep children and young people safe on the internet. Going forward Athena are looking to expand this to different cohorts; for example delivering the training to children and young people who have completed the CODA programme, and a planned roll out of school specific Tech Abuse workshops.

The feedback from parents was very positive. They found the sessions well presented, informative and useful with good resources. Parents commented that they found it useful to be reminded about parental control and privacy settings and the slang and emojis young people use. They felt the sessions would help them keep their children safe.



60 professionals from 16 organisations and 2 schools attended
4 online sessions for parents delivered
64 parents attended

Feedback from attendees

'Really useful, my year 5 daughter just asked to find out if she can have Tik Tok now and it was great to be able to have an informed conversation with her'

'Very informative especially about the location bit. My children are still quite young, but it's helped to prepare me'

"I personally enjoyed learning about the meaning of emojis used by our young people. I was a bit shocked, though. Thank you for educating me'

'Thank you for teaching us how to keep our children (and ourselves) safe through the various social media apps. There's a lot that I've learnt here today. Thanks again'

Case Studies

The following case studies illustrate the range of work the Early Intervention Worker carries out and the impact this has on Lewisham young people.

'S' is a 17 year old girl. She was placed in care as a result of emotional abuse and neglect from members of her family. She was referred to us by another voluntary agency for specialist support after she was sexually assaulted.

Our Early Intervention Worker helped the client access food parcels from the local food bank as well as immigration advice to regularise her status and guarantee her rights once she becomes an adult. With our support, she was able to report abuse that she witnessed to the police as well as work with social care to make sure she had a robust support plan in place. Working together with the client in order to realise some of her long term ambitions, we applied for a grant so that she could access private tuitions as well as purchase a laptop to help her with her studies. The combination of working to address what happened in her past as well as focusing on proactive steps she herself could take has helped the client to seek the level of support and treatment she needed in order to better manage her mental health.

'R' was 15 when she was groomed online and coerced into sexual acts and self-harm. She was referred to our service by children social care for support identifying her experiences as grooming and increasing her online and physical safety. The work we carried out over a number of months involved helping the client identify the methods used by the alleged perpetrator to isolate and control her. As the client slowly came to understand that she had been groomed and was not in a relationship, it was important to support her to manage the impact this has had on her emotional well-being. Working together with the staff at R's school and the social workers ensuring we were constantly reiterating the same key messages was crucial to the successful outcomes achieved with this young person. The role of the worker is to work directly with women and children and young people who are experiencing domestic abuse and to intervene early to avoid problems escalating. This includes raising awareness of what abuse is and what a healthy relationship looks like and doesn't look like, raising awareness of the support available and how to access it. As well as working with clients the Early Intervention Worker delivers engagement events with professionals in education, health and political services using the Inner Eye awareness raising film commissioned through the partnership.



T was admitted into the service on 14/10/2020 after being referred by her mother, who was also accessing support from the Athena outreach service. T had witnessed and been victim to psychological abuse from her father, and her parents had recently separated. T was unsure about accessing support and had not felt comfortable discussing the abuse with anyone previously apart from her mother, who she was also providing a lot of emotional support to. T disclosed that she was still experiencing ongoing abuse in the form of persistent messages from her father. The EIW supported T. by making a safety plan, including supporting her to block her father's number on different platforms, and what to do if her father tries to approach her on her route home from school. T was struggling emotionally with the experiences upon entering the service, and was also struggling to make sense of the changes in her family following her parent's separation, as she was living with her mother and her brothers with her father. The EIW supported T. to name her emotions and find methods that worked for her to express and manage her emotions when they became overwhelming. The EIW talked through options for mental health support with T, and supported T's mother to make a referral for CAMHS, where T is currently on the waiting list to receive therapeutic support. T had questions about civil remedies such as non-molestation order and child arrangement order, as her mother had discussed these with her. The EIW was able to explain these processes to A in an age appropriate way. T and her mother had concerns about T's brothers, who were living with the alleged perpetrator and were beginning to present with some similar behaviours. The EIW made two referrals to Children's Social Care to safeguard T's brothers; she provided T with emotional support around these behaviours and discussed how to create boundaries with her brothers to protect her from further abuse. With time, T revealed that she had concerns that she would find herself in an abusive relationship in the future and not know what to do. The EIW supported T by discussing abuse dynamics and red flags in relationships, using tools such as the Teen Power and Control Wheel and supporting T to think about what she expects from her future romantic relationships. T left the service on 08/04/2021 as all of her support needs had been met. T reported that she felt better able to manage her emotions and make sense of her situation since accessing support. T reported that she felt safer, her quality of life had improved, she felt less frightened and she felt confident in how to access help.

Caring Dads Pilot 2019 to 2021

Introduction

Caring Dads is a 17-week group intervention programme for men who have abused, neglected or exposed their children to domestic abuse. It is an evidence based programme, originating in Canada in 2001 and implemented internationally. The Lewisham PPR Caring Dads pilot is hosted and facilitated by Future Men.

The PPR partnership identified the lack of perpetrator challenge, support and education as a major gap in provision in Lewisham from the outset. Whilst Future Men are commissioned by Lewisham to support young fathers aged 16 to 25, and also fathers aged 25 - 35 referred through Children's Social Care Multi Agency Safeguarding Hub, this work was not specifically targeted at domestic abuse work and it became apparent that a targeted response was needed.

Caring Dads was included in the PPR offer as a pilot following a detailed scoping of the intervention which took place in spring of year 1 (2019). This included a presentation by a UK Caring Dads accredited trainer and attended by members of the PPR steering group. The aim of the pilot was to better understand the model and test how a perpetrator programme could work safely in Lewisham alongside growing the skills and confidence of practitioners to respond to perpetrators.

Programme protocol requires two facilitators to deliver the programme with at least one (preferably both) to be trained as an accredited Caring Dads facilitator. Because this was a new initiative in Lewisham, implementation included accredited facilitator training to provide a bank of facilitators who could be released from their 'day job' to deliver courses going forward (completed in June 2019).

The pilot therefore consisted of two phases, training a bank of accredited facilitators within Lewisham and delivering courses for fathers.

Rationale for Caring Dads

The need to hold perpetrators to account whilst providing opportunity for change and support was identified as a significant gap in provision in Lewisham from the outset. Simply put, if we want to stop the abuse we must work with the abusers.

Domestic abuse services have necessarily focused on those experiencing the abuse. However, at times the focus on the people experiencing abuse (usually women, mothers and children) has contributed to the survivors feeling blamed, judged and responsible, especially when in contact with Social Care and court proceedings. Feedback from mothers attending the Freedom Programme reflected that there is an imbalance in the response to domestic abuse - with mothers feeling that they have to do all the work. Also where repeat perpetrators go on to re-abuse in subsequent relationships' the same pattern continues unchallenged.

“ *If they're penalised every time they get involved with a woman and do the same thing they might actually think twice before doing anything and behaving in a particular way, because they've been made to take responsibility. The whole system doesn't make them take responsibility at all.*

Mother on Freedom Programme

”

About the Caring Dads programme

Caring Dads is for fathers who have neglected, abused or exposed their children to domestic abuse. The core principle of the Caring Dads programme is to help keep women and children safer by while holding abusive fathers to account. Whilst at the same time the programme recognises the importance of fathers: research shows that when fathers are positively involved, children benefit cognitively, emotionally, socially, and developmentally.

Aims of the Caring Dads Programme

To develop sufficient trust and motivation to engage men in the process of examining their fathering

To increase men's awareness of child-centred fathering

To increase men's awareness of, and responsibility for, abusive and neglectful fathering behaviours and their impact on children

To consolidate learning, begin to rebuild trust, and plan for the future



Key principles underpinning planning and delivery

Principle 1: Priority must be given to the safety and well-being of children

Principle 2 : Children's safety and well-being is intrinsically connected to that of their mothers

Principle 3 : Intervention must be prepared to address clients whose motivation for change may be low

Principle 4 : Focus needs to be on promotion of child-centered fathering rather than building on child-management skills

Principle 5 : Because abusive fathers have eroded their children's emotional security, the need to rebuild trust will affect the pace of change and potential impact of relapse on the child

How did the programme work in Lewisham?

Accredited Facilitator Training: 18 professionals were trained from across the CYP workforce in phase 1 followed by a post lockdown training refresher in summer 2020.

Caring Dads: Lewisham's fathers course

In the Lewisham context 40 fathers were referred for the pilot programme, the majority from Children's Social Care and a smaller number from partner agencies in the borough. Potential fathers went through a screening process to establish eligibility, with regard to safety of the mothers and children concerned, and buy in from the fathers.

The course was delivered face to face starting in January 2020. 10 fathers started the programme and attended the first 10 sessions before a pause in delivery due to the first COVID-19 lockdown in March 2020. The programme was able to resume in November 2020 with 4 fathers completing the remaining 7 sessions.

In the intervening months of lockdown, the course facilitators carried out weekly check-ins with participants - and mothers where appropriate - via telephone, to mitigate concerns. The facilitators used a check-in script to ensure they covered all safeguarding issues and to acknowledge and support families with the additional stresses and challenges of lockdown. 3 of the fathers were the main carers of their children. Contact with the dads also helped to reinforce the Caring Dads activities and remind them of the issues spoken about so far in the programme.



40 fathers referred onto the programme



10 fathers started the programme



weekly telephone contact through lockdown

Evaluation

Caring Dads administer their own evaluation from Canada to ensure fidelity to the evidence-based programme. Pre/post psychometric tests are completed and analysed online and reported back to delivery partners on completion of the programme. Unfortunately, the sample size from Lewisham is small and the results are unavailable from Canada, apart from an exit survey completed by the fathers.

Fathers who completed the exit survey (n=3) indicated very high self-rated scores for Thoughts, Feelings and Actions, Involvement (with their child), Distress (self) and Questions about Parenting. Without a pre-test or baseline, it is not possible to measure change or to establish programme effect. There is also no supporting data from mothers or children.

In addition, in-house programme feedback was conducted with those fathers who completed the programme (n=3). The response was mixed with regards to the programmes' effect on behaviour, relationships (with the child and the child's mother) and parenting. This requires additional contextual data and baseline from the Caring Dads evaluation to clarify results. Anecdotal feedback suggests some fathers had experienced positive parenting intervention prior to the Caring Dads course and therefore their responses reflected changes they had already incorporated into their parenting. The feedback regarding the facilitators' was very positive by all fathers completing the programme.

With regard to feedback about course quality and satisfaction, the fathers reported very positive responses on both surveys about their experiences on the course, the facilitators skills, knowledge and approach and all would recommend the programme to other fathers. Feedback from other sources including an interview with a Caring Dads facilitator, checkpoint reports to funders and discussions in PPR steering group have also contributed to the findings of this report.

Satisfaction Survey

- They were satisfied with Caring Dads course
- They trusted the facilitators
- The facilitators consistently focused on what was best for my child
- The facilitators could handle difficult situations
- Facilitators were able to help me set goals to work on
- Facilitators collaborated with other professionals involved with me and my family, ensuring all were on the same page
- Facilitators respected the strengths from my culture, family ties, life experience

100%
said

Findings Discussion

"We want to ensure that perpetrators of VAWG, not victims, are held accountable for their actions, whilst building capacity to change. We will have a zero-tolerance approach to abuse, and are also committed to being trauma-informed in our response to perpetrators where this is appropriate.

We recognise the challenges that come with working with perpetrators of abuse, and will ensure that professionals in Lewisham have the confidence, skills and support to safely respond to perpetrators of abuse that come into contact with their services. We will support and develop aspirational approaches to masculinity and fatherhood "

from the draft Domestic Abuse Strategy 2021 to 2026

The Caring Dads Pilot in Lewisham has contributed valuable experience and insight into the considerations for a strategic and operational response for fathers who are perpetrators of abuse. The role of the PPR Partnership has been significant in the process of scoping, championing, and implementing Caring Dads. Without the CADA funding this would not have been possible. Implementing the Caring Dads programme has been challenging for several reasons not least the unprecedented schism created by the pandemic.

Despite this, Future Men and the project facilitators continued to support fathers and mothers through lockdown and regroup to complete the programme. This additional workload and challenge for practitioners was considerable and unplanned for due to the nature of the pandemic. Feedback from fathers completing the course has been strong regarding facilitators attributes, skills, and approach. Feedback regarding the effects of the course on fathers' behaviour, relationships and parenting is less clear, partly due to the nature of evidence based programmes and points to the need for local data collection including contextualised data and parent voice.

The ambition to have a bank of facilitators to deliver the programme going forward has not materialised, partly due to 'day job' pressures on practitioners across all sectors – which have escalated further due to the pandemic. Several trained facilitators have moved roles out of Lewisham, further diminishing the pool available. At the time of writing there are no further planned delivery for Caring Dads courses due to the lack of available accredited facilitators.

Further, the experience of the pandemic and the need for a crisis response mid programme has made concrete the need for flexibility to respond to circumstances and to meet the needs of families. Anecdotal responses suggest a rigid programme model may create barriers not just for participants but also for the professionals delivering.

The CADA project management team is reviewing the future delivery of the programme and whether an alternative programme or approach is more feasible. For example, whether the Caring Dads approach could be adapted to a 1:1 delivery model.

“*the PPR partnership has created a constructive platform for collaboration across agencies, practitioners and stakeholders. Creating a space to appropriately challenge each other around perceptions e.g. about the need for support for men; Working together to meet needs effectively underpinned by a good understanding of each other's specialism and really listening to each other and understanding each others contribution to the overall aims of Prevent-Protect-Repair'*

Future Men practitioner.

Perpetrators are not an homogenous group

The Caring Dads experience has reiterated that perpetrators are not an homogenous group and a one size fits all response is not appropriate or effective. For example, we know that abusive fathers pose different levels of risk; there are fathers who are repeat perpetrators and some who have been abusers from an early age. There needs to be a scoping and mapping out of a range of interventions and responses to meet the complexities of individual fathers' circumstances and where they are in their 'journey' of abuse. Clarity about criteria for different interventions is necessary, including meeting the challenge of engaging with fathers to get their 'buy in'. Surrounding these complexities are the need for a clear safety plan to ensure families are not put at risk and also effective communication between all agencies involved.

Support for fathers in general

There is also a need for a response that enables non-abusive fathers (and men without children) who want to explore masculinity and fatherhood: Thinking about fatherhood and thinking about relationships and their role in a positive way contributes to both the Prevent and Protect strands of PPR through education and awareness raising.

The Healthy Relationship Programme

Introduction

The 'Healthy Relationship Programme (HRP) – 'Removing Barriers to Learning' is a national early intervention, behavioural change programme, designed and delivered by CSUK Coaching. The programme helps vulnerable young people aged 11 to 18 build their resilience, self-esteem and confidence. Supporting young people to build successful relationships and avoid harmful relationships; recognising passive, assertive and aggressive behaviour and identifying how best to communicate in any given situation.

HRP is a yearlong group programme, delivered in school in single sex groups with a maximum of 10 in each group. HRP consists of 8 school based workshops, 6 x 1 to1 coaching sessions and 4 tracking workshops and uses a range of coaching and behavioural change techniques:

- Positive Psychology
- Neuro-Linguistic programming (NLP)
- Gestalt Therapy
- Person Centred Counselling
- Cognitive behavioural approaches
- Linguistics and Behaviourism

At the same time HRP helps schools to:

- Raise Awareness of domestic abuse, including coercive control and economic exploitation and how domestic abuse affects children.
- Actively promote happy, healthy and aspirational life choices
- Safeguard and identify those at risk and those who have additional needs
- Promote appropriate and sensitive sex, relationships, emotional and drugs education for vulnerable pupils who may already be involved in risky behaviour

Evidencing the outcomes of the Healthy Relationship Programme

CSUK have their own programme evaluation consisting of Baseline and Post Baseline (at end of programme, 12 months) data collection covering the following 2 sets of measures:

Achieving Behavioural Change measures: School Attendance, Self Esteem, Aspiration, Confidence, Participation in Positive Activities, Personal Wellbeing

Health and Wellbeing measures: Emotional Health, Diet & Physical Health, Substance Misuse, Relationships, Sexual Health Safety, Education, Finance, Internet and Social Media

CSUK has delivered across both Phase 1 and 2 of Prevent-Protect-Repair partnership. Unfortunately, both phases were significantly impacted by the challenges of COVID-19. Please see discussion below. The first cohort started face to face in January 2020 and was put on hold as the country entered the first lockdown in March 2020. Despite this the project team worked to adapt to opportunities for virtual delivery where possible and supporting young people through this challenging time.

Phase 1, Cohort 1

The first HRP cohort started in a Lewisham secondary school in January 2020, with 19 participants; 9 girls and 10 boys in year 7 (age 11 or 12). 42% of the cohort had at least 1 indicator of Adverse Childhood Experience (ACE), with 21% having 3 or more. ACE's can have lifelong impacts on health and behaviour and HRP aims to reduce these risks through building resilience. ACE's include physical, emotional and sexual abuse and neglect, and additional factors in the home including substance abuse, mental illness, relative in prison, domestic abuse and divorce.

Adverse Childhood Experience (ACE)



Physical
abuse



Emotional
abuse



Sexual
abuse



Neglect

Vulnerabilities in the first Lewisham cohort

- 100% all pupils were referred due to behaviour issues, with 21% pupils having experienced school exclusions.
- 63% have diagnosed learning difficulties, specifically Dyslexia and ADHD
- 37% feel unsafe in their local environment
- 26% are currently being bullied
- 37% had witnessed or experienced abuse (this was unknown to teachers)
- 100% of boys had accessed porn on their mobiles and had received explicit sexual material
- 100% of boys had been contacted by a stranger online requesting or advertising sex
- 0% of girls regularly accessed porn however 40% had received unsolicited sexually explicit material
- 80% of girls had been contacted by a stranger online requesting or advertising sex
- 1 pupil currently self-harming and experiencing suicidal thoughts, (a safeguarding report was made)
- 63% reported historical suicidal thoughts
- 84% reported historical self-harm

Phase 1 cohort which started face to face in January 2020 was put on hold as the country entered the first lockdown in March 2020. Schools returning did not allow for programme sessions to return to normal and facilitators were not able to access schools physically. Repeated lockdowns and constantly changing circumstances have been difficult to anticipate and respond to. Despite this the project team worked hard to adapt to opportunities for virtual delivery where possible and supporting young people through this challenging time.

Phase 2 was unable to deliver the face to face school based programme due to the pandemic and repeated school closures, the Health Relationship Programme began roll out of a new virtual 1:1 face to face delivery programme targeted at vulnerable young people identified by the Multi-Agency Concern Hub as at risk of experiencing or who have experienced domestic abuse. It was intended that the young people referred would attend virtually from their school site. This has been challenging to co-ordinate due to repeat school closures and issues of privacy and tech poverty at home. Two young women have received this service.

Healthy Relationship Programme Findings

The experience of virtual delivery has highlighted that vulnerable young people have additional needs to be met to access virtual support programmes. There is an increased need for engagement, trust and confidence building and a safe, private space with adequate technology. Some young people may not want to engage virtually.

Young people who have accessed the HRP programme remotely, stayed in counselling mode and were reluctant to move forward onto the aims and outcomes of the programme in a virtual environment. Young people did want to access the programme but not digitally, largely because of their surroundings and privacy; the younger aged children also struggled to engage virtually. This means the programme has not been able to run as intended instead the programme has responded flexibly to the needs of the young people. There was a lot of engagement with the young people, and it became a less structured process with young people preferring to get in touch when they felt they needed support rather than following a course structure.

Facilitators also observed that where young people were living with a lone parent who had experienced domestic abuse (post abuse), it was clear that a lot of the needs displayed by the young people were also a reflection of their parent's emotional state.

The Healthy Relationship Programme was adaptable and delivered virtually during the pandemic, but there were significant challenges to rolling out this programme from an operational and practical perspective. Schools are a central ingredient of the programme and it requires a significant role from school professionals – who were also facing an incredibly challenging environment - to support a virtual model and provide safe spaces for children to access this programme. Relationships and behaviour change is more difficult over the internet.



The Deborah Ubee Trust

Introduction

The Deborah Ubee Trust aims to promote emotional wellbeing and raise awareness of emotional health through:

- Providing a range of therapeutic services and holistic treatments
- Increasing the amount of therapy available to people who need support
- Promoting good practice around therapeutic intervention
- Providing continuing professional development to practitioners.
- Contributing to the development of new therapists by offering support and training to placement counsellors

DUT has a dedicated centre on the border of Greenwich and Lewisham with nine purpose-designed counselling rooms - including a play-therapy room and space for dance and movement therapy.

The need for the mental health support and talking therapies is clear, yet timely access to mental health support remains a critical issue. With particular regard to children, a study by NHS Digital in October 2020 found that 1 in 6 children have a mental health condition, an increase of almost 50% since 2017. There was an increase in mental health problems among both boys and girls, but it was more pronounced among primary-aged children, especially boys aged five to 10 (1)

However as the Children's Commissioner notes 'The sad truth is that in spite of progress, services are still nowhere near meeting the level of need and hundreds of thousands of children are being left without help as a result'. The impact of COVID-19 and the strain on public services is still unfolding, however, it is highly likely that the level of underlying mental health needs will remain significantly higher as a result of the pandemic.

As part of the Repair strand of the project, Deborah Ubee Trust (DUT) established a bespoke therapeutic offer for children and young people who have experienced domestic abuse, incorporating Drama, Play, Art and Movement Therapies. The support is child led and 20 weeks of therapeutic support is offered to each young person. This can be extended where necessary. The intervention is offered at the DUT organisation on the border of Deptford /Greenwich and also in Children's Centre venues in Evelyn and Bellingham where they have set up Art & Play therapy spaces.

DUT use the Strength and Difficulty Questionnaires at the beginning and end of support to evaluate the benefits of the support for the children and young people; also case studies to illustrate the benefits of the support for their clients and an in house feedback form.

Referrals from the wider programme were passed on to DUT from December 2019 who assessed these for suitability and also gathered consent from CYP and families.

17 children and young people began therapeutic support from January 2020. This was interrupted and put on hold in March 2020 due to the Covid-19 lockdown, as it was inappropriate to continue therapy virtually. This was partly because of the age of the children and also due to the nature of Play/Art/Drama and Movement therapies offered. However, therapists continued to support families via fortnightly check in calls with the mother to ensure families have their needs met as far as possible. This entailed developing a close working relationship with EYA Children's Centre Manager who provided support and assistance to DUT during this time.

*My son really valued his time with his therapist. Some quotes from him:
'C' is the playiest adult ever'
'I wish I could go back and play more right now'
'C' is the gentlest adult ever'*
Mother

"Our Family really appreciate the therapy Debbie Ubee Trust offered our child. He enjoys the play therapy and especially the drawing aspect of it. It helped him to have the courage to express his feelings which he really struggled with before, now he is very vocal and can draw or write down these feelings. As a family we are so grateful and so does our child. IN HIS WORDS, "Mom I will miss my therapy sessions."
Mother

An example of how therapy was interrupted by COVID-19



K a 12 year old boy receiving therapy.
20 sessions planned

3 session prior to lockdown
6 sessions between lockdowns
11 sessions after the last lockdown

K created an image : A monkey on a lifeboat floating on the ocean with a shark circling around. A rescue team was coming to save the monkey. 'I felt' K had been constantly put in a helpless situation like this monkey. The Covid-19 pandemic had disrupted his therapy sessions just like his family life.

The Deborah Ubee Trust Case Studies

Case Study 1

K was a 12 year-old boy when he started the therapy. His twenty therapy sessions were split into three periods of time over a year and a half (three sessions before the first Covid-19 lockdown, six sessions between two lockdowns and eleven sessions after the second lockdown). We changed our therapy room from after the first lockdown in order to comply with the Covid-19 guidance for the workplace.

K said that he needed therapy to sort out his "anger issue". He blamed himself for his quick-temper, impulsiveness and impatience towards his family members. He described himself as aggressive at home, whereas in the therapy room he was polite, sensitive and cautious. We discussed his contrasting behaviours, and that made him aware of the different emotional patterns at home and in the therapy room. This opened a door for us to look at how the family issues affected his emotions and the perceptions of himself. The absence of his father had left him with mixed feelings of sadness, worthlessness, anger and confusion. He was especially haunted by the guilt for not being "good enough" for his father. We discussed his family dynamics and that helped him see how he had been drawn into the role of "scapegoat" and detach himself from his father's difficulties to adapt to family life. With the sudden Covid-19 lockdown, we suspended our therapy sessions. I was left wondering how K was going to cope with these heavy feelings.

K restarted his therapy eight months later after the first lockdown ended. He adapted to our new therapy environment well and showed his enthusiasm for art. His drawings of superheroes and disaster/rescue stories created with Lego pieces were the themes expressed during this period. He constantly checked the clock and complained about how the time had gone by so quickly. He mentioned his sibling conflict but preferred not to discuss them any further. I felt he was frustrated by not having a personal space at home. I raised the issue and we discussed his frustration. He became aware and realised how suffocated he felt about his sister's challenging behaviour and how he used anger as a way to defend his own personal space.

In the third period of therapy, K was in deep sorrow as he had bumped into his father on the street during lockdown, but his father had ignored him totally. He was eager to find out where his father was staying, but his mother forbade him to do so. K used the therapy space to deal with this distress emotion and also tried to make a decision which could help him focus on his present life. On top of his feelings of confusion regarding his father, his stepfather's over-controlling parenting upset him. However, because of his mother, he endured his anger towards his stepfather, although sometimes he would vent his anger towards his younger sister who he thought was a traitor and in alliance with his stepfather. K also struggled with the fear that he had "inherited" his father's violent nature which meant that he would lose control and hurt someone one day.

K once created an image : A monkey on a lifeboat floating on the ocean with a shark circling around. A rescue team was coming to save the monkey. I felt K had been constantly put in a helpless situation like this monkey. The Covid-19 pandemic had disrupted his therapy sessions just like his family life. However, K was still determined to develop a healthy way of facing the frustrations and adversities he was dealing with in his life. He was learning to accept his emotions and to set boundaries when people did not respect his personal space. I hope his new experience in our therapeutic relationship will give him confidence and encourage him to take action with self-awareness and self-compassion.

Case Study 2

C arrived at our first session excited. With contract drawn, he grabbed puppets narrating stories about their battles, lined up warring plastic soldiers and smashed down block towers.

C's level of activity remained high during the next sessions. As I consistently responded, offering him encouragement whilst establishing boundaries, he began to include me in his play. Themes included aggression, repetitive conflict and destruction. Puppets threw other puppets "breaking bones" and Lego characters ripped each other apart. As these scenes played out, C responded enthusiastically as I added expressions of feeling to his stories; how terrifying for the injured elephant puppet, how furious the hammerhead shark. At the end of our third session as we were tidying up, C said he liked coming to counselling because he had never really felt "heard" before.

In our fifth session, C played with "dad and son" trucks. "Dad truck" smashed into carefully positioned bollards and pedestrians, whilst "son truck" followed him trying to reach him to "kiss him" on the bumper. As I reflected on how I felt sad for "son truck", C paused briefly (a rarity) and nodded. Tentatively I asked whether he often felt sad to which he nodded before continuing to replay the story. Later I asked whether the story could perhaps end differently, encouraging self-agency. C said that maybe the "dad truck" could be rescued by the "son truck" who may then feel happy and proud. In subsequent sessions, C's stories shifted, with 'good versus evil' becoming the predominant theme. Together we made up characters, "Jimmy" the rubbish man who, only known to us, was really a superhero and "baby flamingo" who was teased at school and became a famous dancer. As we elaborated on the characters' stories, without prompting, so did C about his own experiences of witnessing domestic violence. In one session C described his mother being physically assaulted quickly adding "it was ok because it was only one punch". On reflecting this gently back to C, we were able to explore how C felt at the time and whether that "one punch" was really ok. These explorations whilst always brief, allowed C to know his feelings and question thoughts safely.

In another session, C questioned why he had been singled out from his siblings for physical abuse. Was it because he was a "troublemaker" and "chaotic" as he had been labelled by his dad (and school)? Sensitively, we were able to act out with puppets and question this self-blame and the impact this had on his feelings of self-worth and directly address where the responsibility for his father's behaviour lay.

C openly expressed his feelings further as sessions continued; about visiting his dad, an ongoing court case and possible house move. Within his play too there was a shift; it was slower and calmer and C demonstrated increased problem solving and empathy skills, with even the occasional 'happy' ending. In our last session before lockdown, C played out a scene using a dad alligator soft toy and his baby. At the end of the story C happily concluded that the dad alligator was defeated by talking "because talking is what we are good at".

Conclusion

A significant amount has been achieved in the year by the Prevent-Protect-Repair partnership despite the impact and challenges of COVID-19 pandemic.

COVID-19 and the associated restrictions have had unprecedented effects on all aspects of programme delivery and interventions. These were further exacerbated by children and families facing multi-vulnerabilities in addition to domestic abuse. This challenge and response runs throughout the report.

The Prevent-Protect-Repair partnership has effectively responded to these challenges, mobilising resources and the workforce across the piece, planning strategically and ensuring the needs of families are met. Digitalising the programmes and providing continuity of care to families through such a vulnerable time has been critical. For example, 1984 support sessions were delivered through a mix of individual and small group interventions in the year with 274 children and 167 families benefiting.

There is clear evidence of positive impact on children and families of the interventions and of the partnership approach.

The partnership 'glue' developed through phase 1 ensured a coherent web of online services and activities across the borough. Partners shared their expertise, resources, and local knowledge; highlighting the needs of children and families, identifying and plugging gaps in provision. Alongside this partners have reconfigured interventions online where possible. The crisis nature of the pandemic means this has been a huge undertaking. Whilst there is hope that we are at the tail end of COVID-19 restrictions, considerable uncertainty remains. However, the PPR partnership crisis response has put strategic and operational processes in place to respond to future challenges.

Extension funding from the Home Office CADA initiative until March 2022 will enable the partnership to build on the achievements of the year, further enhancing the support available to children and their families who experience Domestic Abuse and continue to embed the approach across the borough.

