

pause

creating space
for change



What do we mean by repeat
removal?

Lisa's story



https://www.youtube.com/watch?v=e68cY3_41d0

First things first...

Thank you!

Pause: Southwark



The Scale of the Problem

Between **2007-2014**, 43,541 women lost their children as a result of care proceedings. Of this number, 7,022 were 'repeat' proceedings.

We can consider *all* 43,541 women who record an index episode as 'at-risk' of a **first repeat episode** of proceedings...

At least 24% of women are likely to return to court within 7 years

Maternal Age and Recurrence

Teenage motherhood is associated with recurrence

Maternal age is a risk factor for recurrence, with **the youngest women most likely to record multiple repeat episodes**

Young women may experience an index and first repeat episode before they exit their teenage years

Need for change for women, their families and the community

- Where a negative cycle of recurrent care proceedings remains unchecked, prognosis for recovering parenting capacity is believed to be poor.
- Care proceedings get shorter over time, often women are already pregnant again during care proceedings trying to replace what has been taken from them (Broadhurst, Harwin and Shaw 2014).
- There is decreasing opportunity for change once a mother is caught in this cycle.
- Research has identified that looked after children and young people are several times more likely to have a statement of special educational needs, to experience mental health problems; to be excluded from school and to be NEET. Careleavers are more likely to end up in the criminal justice system, as victims and perpetrators. They face adverse outcomes across the lifespan: in work and education; in chronic physical and mental conditions.(McAuley, Pecora and Rose 2006).
- The women that meet Pause criteria are likely to be regular **sporadic and reactive** users of other local services including that of Housing, Substance misuse services, Health care and Mental health services, Probation and Criminal justice services and Domestic abuse services.
- They are less likely to be engaged in preventative care and support. Helpseeking is one of their primary difficulties.

Southwark










123 Women

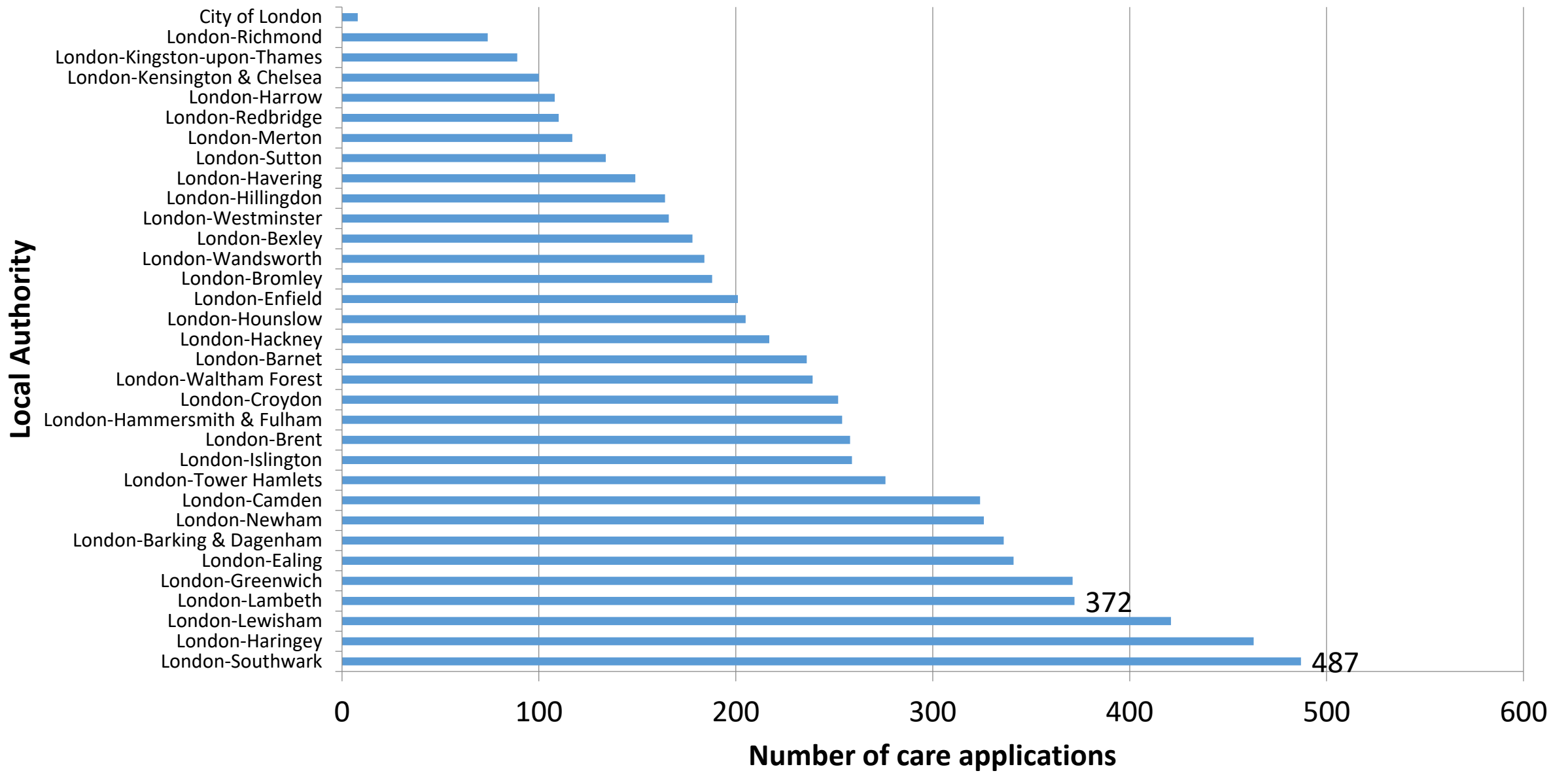


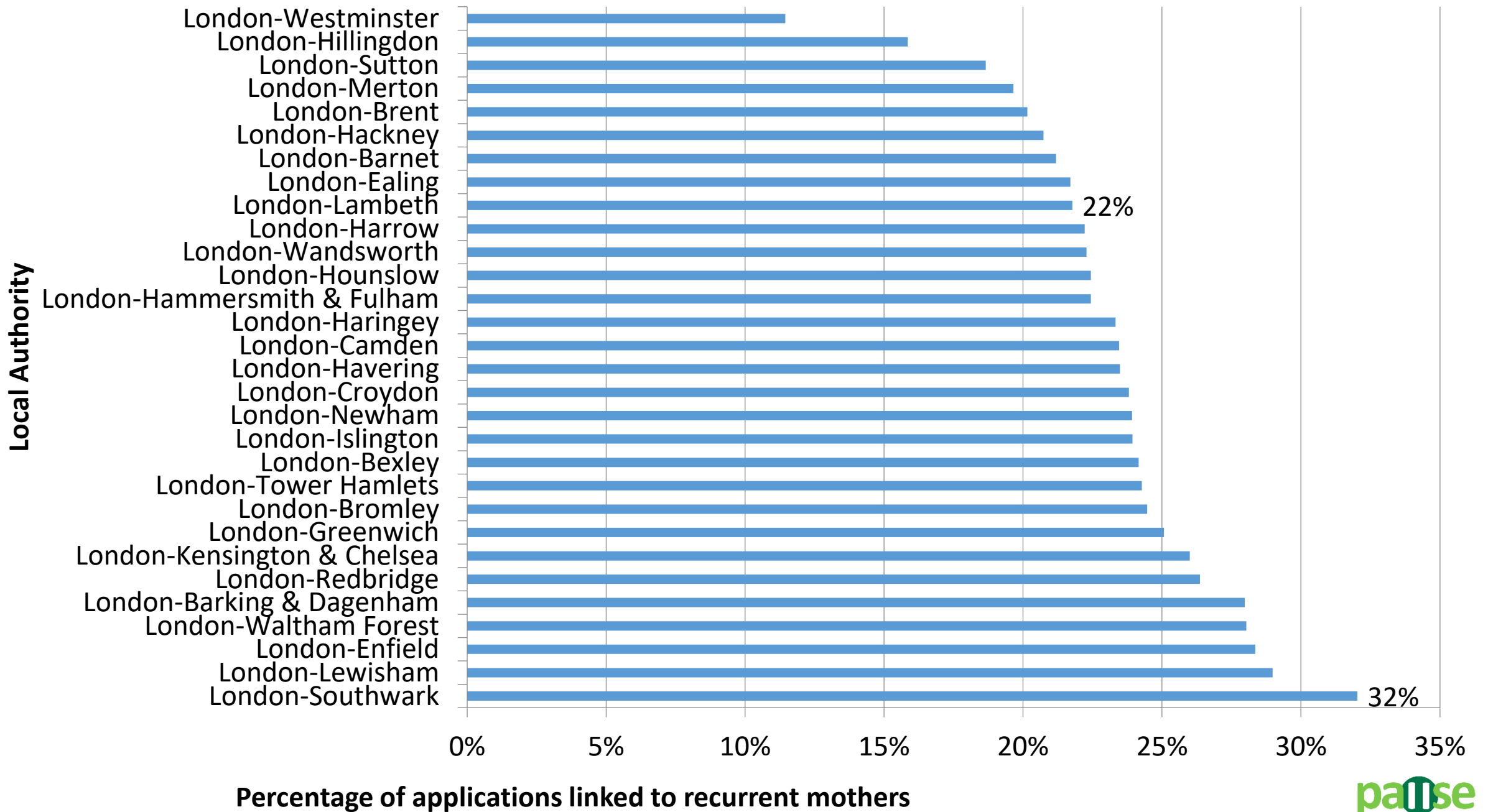
377 children removed



Southwark statistics (21 women)

 <p>100% have experienced violence within relationships</p>	 <p>26 % have alcohol issues</p>	 <p>47% have a history of being in the care system</p>
 <p>37% have substance misuse issues</p>	 <p>100% have experienced mental health difficulties</p>	 <p>32% have a diagnosed learning difficulty</p>
 <p>75% have housing difficulties</p>	 <p>25% have been in contact with the criminal justice system</p>	 <p>58% have a history of sexual abuse or exploitation</p>



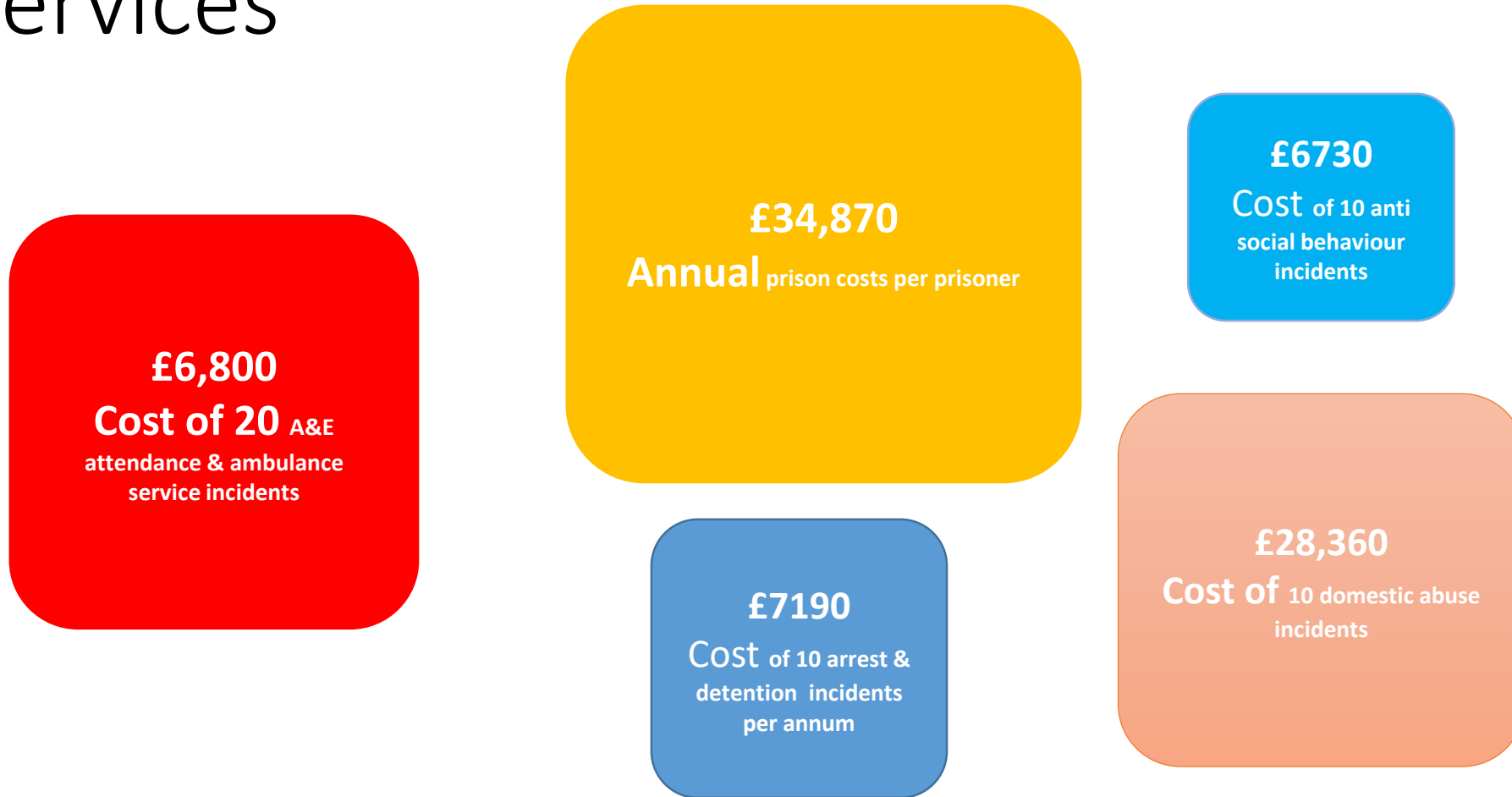


Lack of Access to Support

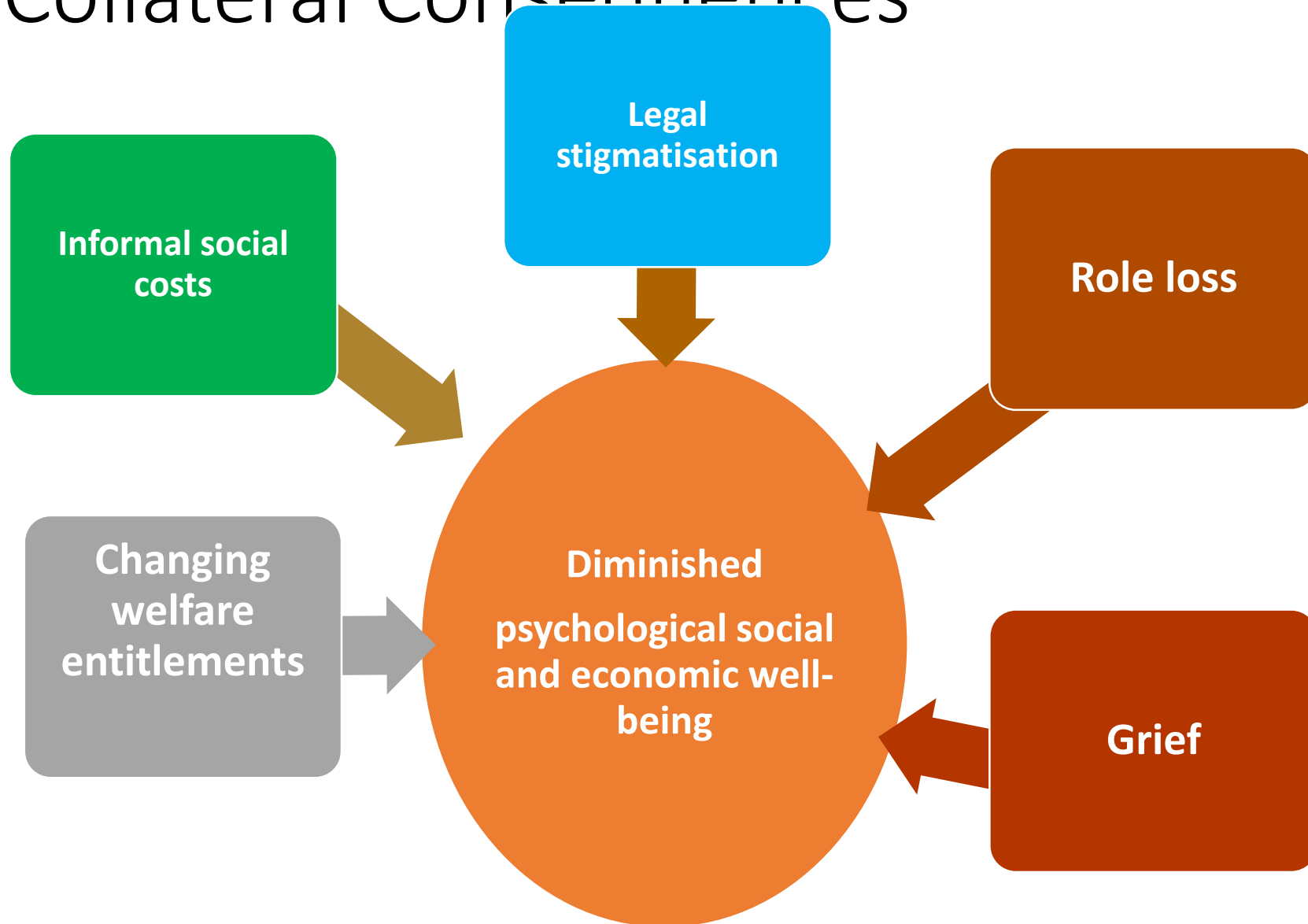
- “Not good enough” to parent, “not bad enough” to qualify for services – and deeply mistrustful of professional help.



A few more costs: Health, Police & Prison Services



Collateral Consequences



Loss of welfare entitlements and informal social costs

- Loss of home – forced move ‘bedroom tax’
- Loss of benefits
- Sanctions on kin relationships (contact) and potential exile from informal parent networks

Maternal Identities

- Ongoing identity as mother even where child is adopted and no ongoing contact
- Ongoing identity not adequately acknowledged
- Holding out for child returning as an adult
- Visual representations
- Contact arrangements and perceived relationships with alternative carers important

Legal stigmatisation

Family court history – is never ‘spent’

Particularly pronounced for care leavers:

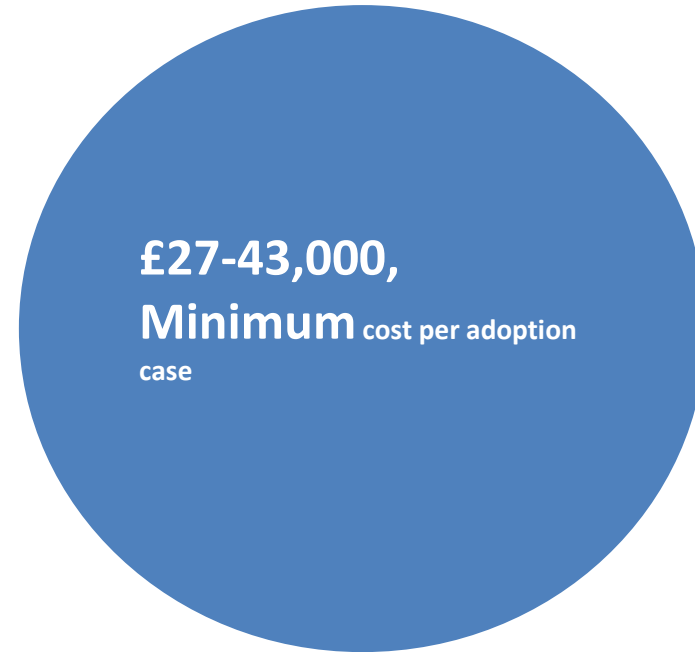
- 47% women interviewed had spent time in care system
- Felt under particular scrutiny by state
- Deep mistrust of system
- Fear
- “Punishing me twice”



Why do things differently?

- Financial cost – across all systems
- Human cost – children, families, communities, and women.
- Because the ‘bad mothers’ of today were yesterday’s hurt children.
- And fundamentally, because it is not too late.
- Each one of our women is extraordinary and frankly, we don’t want to miss out.

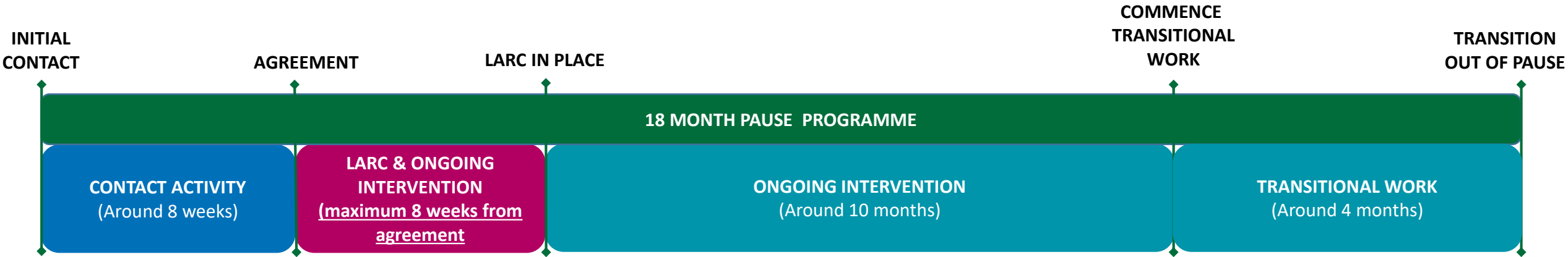
Costs: Children services



The Integrated Model



PAUSE Timeline of Support



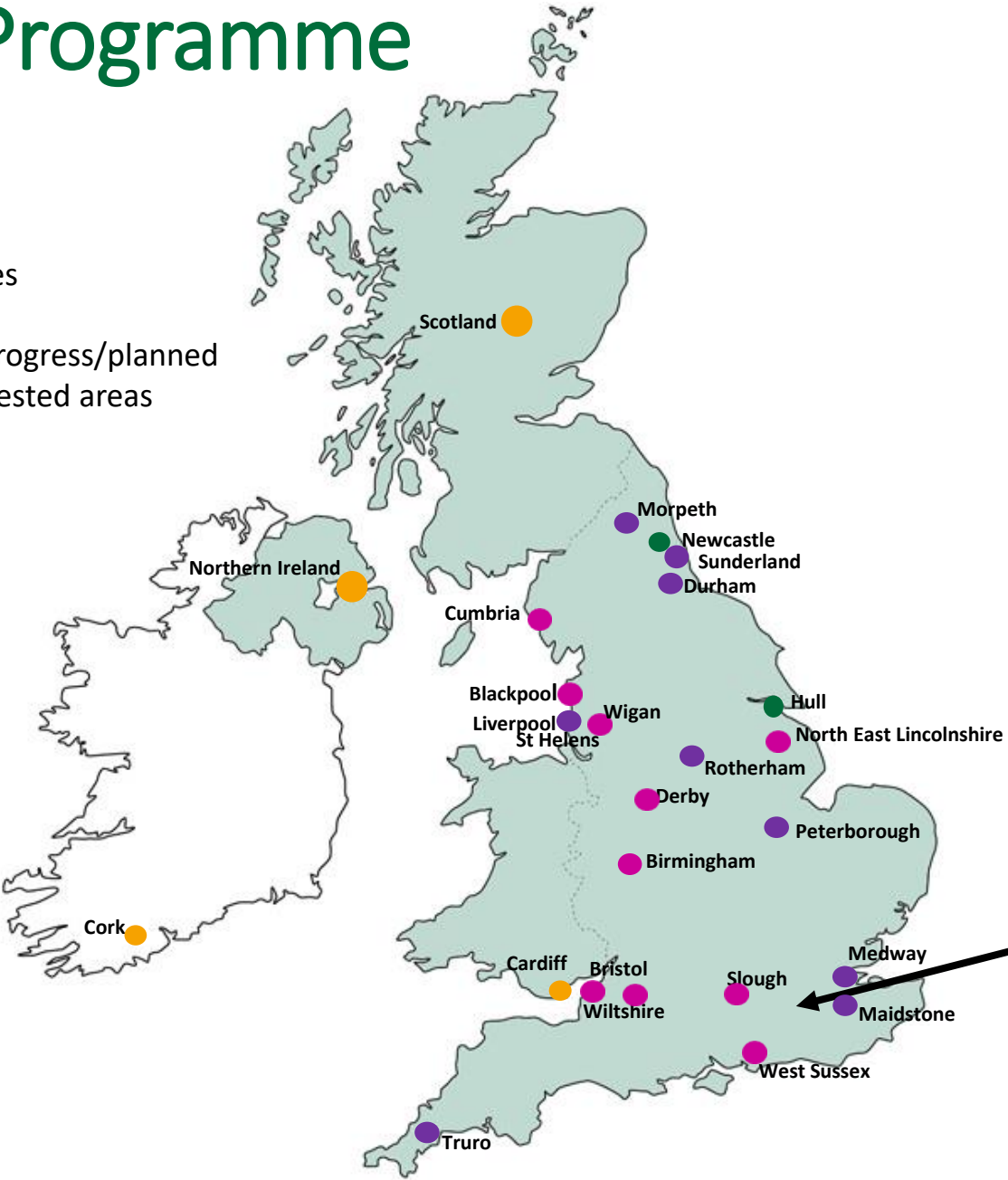
What Pause does and does not do . .

<i>What Pause does</i>			<i>What Pause does not do</i>
Requires the women to take Long Acting Reversible Contraceptive	Helps build resilience and self esteem	Offers bespoke education/career plan	Work with women to get their children back
Models how to navigate every day systems and bureaucracy	Helps build healthy boundaries	Helps women learn ways to avoid adversarial interactions	Offer parenting support or parenting classes
Works closely with partners and others in their system	Reflects on responsibility to previous children	Addresses negative issues when ready e.g. chaotic drug use, domestic violence	Conduct parenting assessments
Supports the women into stable accommodation and helps to sustain it	Develops aspirations for the future	Supports the women to reflect on the past and face trauma	Rescue women and run their lives for them

National Programme

Key

- Current Pause Practices
- In development
- Scoping exercises in progress/planned
- Other Leads and interested areas



London

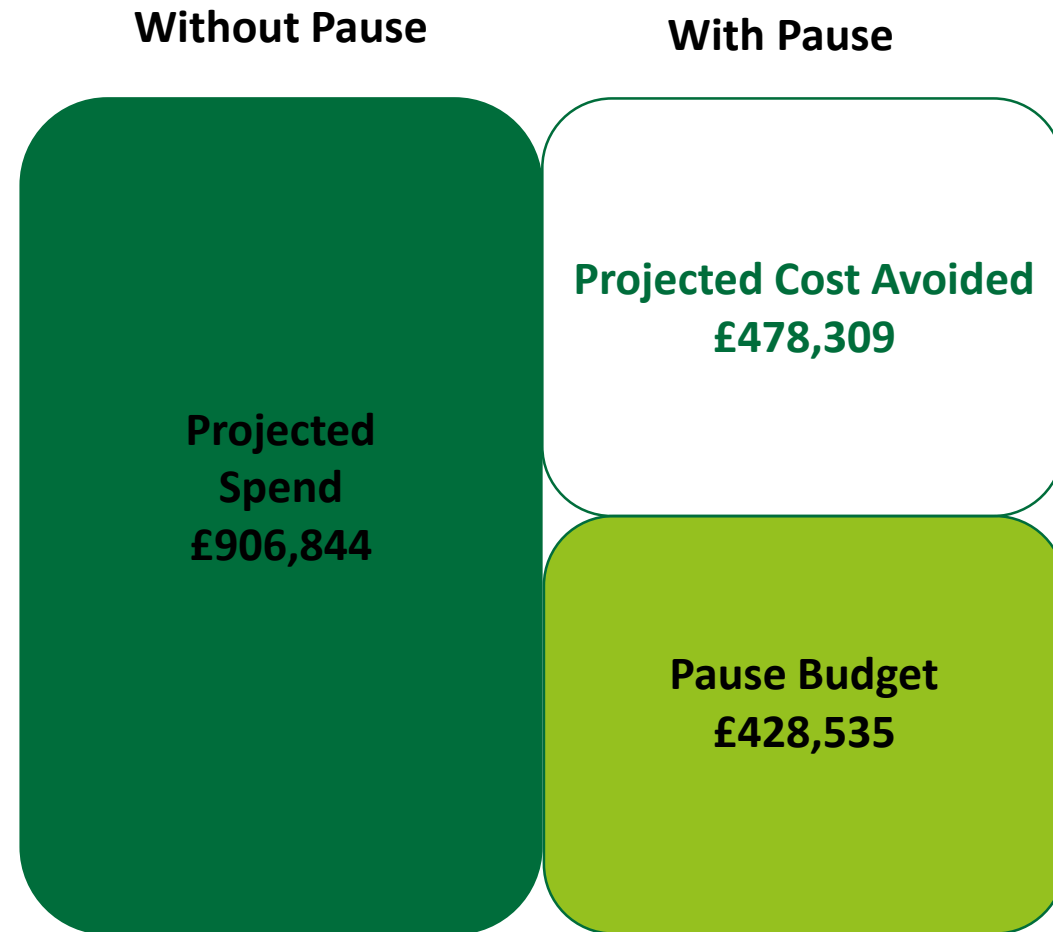


What Pause does...



Pause Hackney: Cost Benefit

- 29 women over 18 month period of intervention
- Birth rate of 0.53 per year
- No pregnancies & babies removed into care



Working in arenas where mistakes are the territory

- Our women have usually made many, many previous attempts to make friends, start courses, stop drugs or drinking, get help with mental distress, gain housing, move away from destructive relationships. They often lack resilience skills – they make a lot of starts and give up easily. They may be at the pre-contemplative stage of the cycle of change.
- This is often reflected in services' engagement with short bursts of support followed by eviction, disengagement, discharge or expulsion.
- Our work requires practically linking women into housing, drug and alcohol help, mental health input, and breaking away from problematic relationships.
- But the efforts they make with us will be one in a long line of efforts. How do we make this effort different?

A fundamental shift in approach

Mistakes, lapses and setbacks are not the things that take us off map

Mistakes, lapses and setbacks are the territory:

they are what women, systems and services need to learn to navigate.

What we know about the consequences of ACEs

- Brain is not the problem
- The problem is
- Resilience
- Connecting

Reflecting and connecting

- We target increasing reflective and connective capacity – because if we can connect with someone when we're hurt, pain lessens, and when pain goes down, we open up space to learn
- and learning from things that go wrong is the difference between adaptive and maladaptive.
- At Pause Southwark, we positively reward relating – we want women to associate both being reflective and communicating with feeling safe (emotionally and relationally), feeling understood, feeling important, respected, intelligent, and with laughter, safety, kindness and trust.

Doing things differently

Sybille

Southwark film

- <https://vimeo.com/194499975>

