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WOMEN AND JUSTICE ARE WE MAKING PROGRESS?

CREATING SPACE FOR CHANGE



Sophie Humphreys introduces "Pause": a new approach to women, trauma and childcare

RUNNING the child protection service at the Homerton Hospital in East London, as well as in other strategic and advisory roles, I saw women who, time and again, experienced repeat removals of children from their care. Without anything changing, these destructive cycles would repeat year after year, and often for the same women. When it came to developing the Pause model, one woman in particular has always stayed at the forefront of my mind.

When I first met her, Clara was 28 and had already had two children removed. She was pregnant again, and initial proceedings were already underway for her third child. Clara had grown up in and out of foster care. Her father was physically abusive towards her and her mother was an alcoholic. During her time in foster care she was sexually abused by one of the carers. As a result, Clara was understandably very distrusting of services, particular social workers. To Clara, the world was a hostile and dangerous place.

Clara found it very difficult to contain her emotions when caring for her own children. She developed a complex personality, found herself in a catalogue of difficult relationships and was either the victim or perpetrator of domestic violence. The combination of unresolved emotions and angry outbursts were putting her own children at risk and resulted in their removal. Clara was a bright young woman who, at times, was able to recognise the risk she posed to her own children, but could not contain her emotional and sometimes aggressive outbursts.

Twelve years after we first met, and when Pause was at last becoming a reality, I saw Clara in the street. She told me she had just had her ninth child removed. For Clara, the years

between child number two and child number nine were filled with chaotic relationships, drug and alcohol abuse, unstable housing and, most pertinently, a lack of the support she needed. This meant Clara carried on giving birth in the hope she could fill the gap left after each pregnancy, both metaphorically and literally. Clara was in a battle with the local authority, the 'corporate parent' that had let her down as she herself grew up. She held steady to the need to 'keep one baby' and win this battle.

At the heart of the Pause approach is the desire to prevent the damaging consequences caused by taking thousands more children into care every year

Sadly, Clara is not an exception. Those involved in the family justice system will have seen possibly hundreds of cases, where a woman stands poised to lose her child, a child that is unlikely to be the first or the last. You know, too, that when they walk out of the courtroom, the absence of an appropriate support system will increase the chances of them returning in the months or years to come.

It was out of the frustration, the feeling that there had to be a better way of doing things, a way that would result in better outcomes for these children and the women that give birth to them, that Pause was founded.

Space for change

My colleague and co-founder, Georgina Perry, and I wanted to create a space for change, a space filled by something other than another baby, who will inevitably end up being removed, and the subsequent grief and trauma that follows. Together, we persuaded the London Borough of Hackney—where we had already identified that 49 women had given birth to 205 children who were taken into care—to fund a Pause pilot.

The numbers we saw in Hackney are significant but not unusual. A study in England (Broadhurst K et al, 2014) shows that, of a total of 46,094 birth mothers appearing before the courts, 15.5% were linked to recurrent care applications. It is numbers like these which helped Pause secure funding from the English Department for Education's Innovation Fund to expand. Pause is now delivering the programme in nearly 20 areas across England, working with third and public sector providers.

At the heart of the Pause approach is the desire to prevent the damaging consequences caused by taking thousands more children into care every year. By working through the lens of the woman, Pause helps them to take control of their lives, and to break the destructive cycle that causes deep trauma to both them and their children. The lives of the women Pause works with are typically characterised by their own experiences of neglect, abuse, sexual exploitation, and other social, emotional, and health-related challenges. To stop these trans-generational patterns being passed on again, Pause intervenes at a time when a woman has no children in her care.

Pause focuses on the woman herself, enabling her to 'pause' and put her needs first, often for the very first time in her life. In order to do that, as part of this voluntary programme, she is required to use the most effective form of reversible contraception, such as an implant or IUD, for the 18-month duration of the programme.

There are a number of elements that make Pause unique. The one that stands out, though, is our whole system approach, working with everyone including partners, family members, friends and other professionals. We also look beyond her maternal identity as a 'birth mother' and view her as a woman first and foremost.

Where traditionally services will signpost or refer, Pause practitioners go alongside the women, enabling a therapeutic relationship to develop while modelling more effective ways to navigate the world. Not only does this impact on the women, but it also influences other professionals and services, enabling them to respond more effectively to the needs of vulnerable adults and children.

We know that women cannot engage meaningfully with counselling or therapeutic work if they do not know where they will be spending the night, or if they desperately need a prescription, so we start with the practicalities, focusing on harm reduction and stabilisation. Pause is the glue, the helping hand, and ultimately the change agent: but the plan and the pace is always led by the woman.

Behind the everyday practical elements, Pause is underpinned by relationship-based practice, social learning theory and evidence-based interventions. Intergenerational cycles of trauma and loss require a systemic, integrated model of support. The women who work with Pause are viewed in

all their richness of identity, never defined by their presenting issues, such as substance misuse, or their maternal identity. Instead, Pause practitioners work in a non-authoritarian way, demonstrating equality through a therapeutic relationship that affords women space and agency. Everything is approached from a strengths-based perspective, providing feedback and reflection that builds confidence and self-esteem.

This approach yields results. A recent independent report carried out on behalf of the Children's Social Care Innovation Programme found that there were significant improvements in the confidence and self-worth of the women taking part in Pause. Women who started Pause with severely limited aspirations ended the programme with new goals, with many finding employment or re-entering education.

Quality of life also improved. There were reductions in drug and alcohol misuse among the women and incidents of domestic violence decreased significantly. In addition, over a quarter moved to secure housing, having previously been homeless or vulnerably housed (Opcit Research, 2017).

Pause also brought about practical change for many of the women. With the support of their practitioner, women were able to access relevant specialist services, putting in place relationships which could last beyond the 18-month period of the Pause programme.

Pause in Scotland

As Scotland has more significantly more looked after children per 10,000 than any other UK nation (Scottish Government, 2017), we were delighted to be invited by the Scottish Government in 2016 to present to various partners and agencies to explore how Pause could work in Scotland. That initial presentation led to a number of further conversations with Scottish local authorities and, less than a year later, we are about to begin initial scoping work in Dundee.

The continuing success of Pause in England has enabled us to secure grant funding from the Big Lottery Fund to explore expansion into Scotland, as well as Wales and Northern Ireland. This is an exciting, if slightly trepidatious, move for Pause. While we understand the different context, building a bespoke model that reflects the needs of the city or area in which we work is at the core of every Pause Practice that we open. And, while the operating context may be different, the chaos and challenges facing the women that we seek to support are the same.

As Pause continues to scale and spread across England, and with our expansion into Scotland, Wales and Northern Ireland, we aim to make this support available to all women, regardless of where they live in the UK. As a result, more women like Clara will be given the opportunity and space to start creating a more positive future for themselves, and for their children.

Sophie Humphreys is the Founding Chair of Pause - Creating space for change. www.pause.org.uk/

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