

# **Recovery Beyond the Legacy of Trauma**

## **A report into the delivery and initial outcomes of Project 30**

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***'The more healthy relationships a child has, the more likely he will be to recover from trauma and thrive. Relationships are the agents of change and the most powerful therapy is human love'.***

***Bruce D. Perry***

## **Background**

SAFE (Stop Abuse For Everyone) was established as Exeter Women's Aid in 1974 and was set up to support women and children who were victims of domestic violence and abuse; through education, frontline support and through the provision of safe accommodation. In 2009, the organisation became independent from The Federation of Women's Aid, although has retained its membership, and was renamed Stop Abuse For Everyone. In 2014, SAFE moved away from providing safe accommodation and refocused on delivering community-based support provision.

The past two and a half years have brought a renewed sense of purpose to SAFE with a change in leadership, staff team and Board of Trustees. Today SAFE is a passionate innovator, striving for social change by driving new ideas, being a leading voice and influencer in the arena of trauma recovery by promoting an ethos of generous leadership. SAFE believes for change to be effective it takes a whole unit to work cohesively and this is true of the families we support and the stakeholders we work with.

SAFE's **vision** is for ***a world free from the impact of trauma.***

SAFE's **mission** is to:

- ***Provide therapy and training to support families and individuals to break the cycle of abuse***
- ***Being a leading voice in trauma recovery through cutting edge research and innovation***
- ***Drive an ecosystem wide approach across communities and supporting agencies***

SAFE has six **core pillars** which provide the foundation for the organisation. Our pillars set out the behaviours, beliefs and attitudes that define our culture and underpin our work and decision making:

**Boundaries:** ***To empower change through clarity and openness in communication***

**Respect:** ***To relate without judgment and embrace others' diversity, experience, and views***

**Honesty:** ***To speak truthfully and listen to the truth of others***

**Continuity:** ***To provide sustainability, empathy, and integrity***

**Negotiation:** ***To be flexible and seek opportunities to learn***

**Boldness:** ***To challenge, innovate and create***

SAFE is led by a specialist team, people with lived experience of trauma, a deep understanding of the dynamics of trauma and the capability to help people recover from its effect.

## Introduction to Project 30

Project 30 is a pilot project developed as a whole-family approach to support trauma recovery for 30 families within Exeter, Mid and East Devon.

In February 2020, the Safer Devon Partnership, Devon County Council, requested applications for funding to reduce re-victimisation and repeat referrals to commissioned specialist domestic violence and abuse support services. Following a successful submission, SAFE was awarded funding to deliver domestic violence and abuse recovery work for Exeter, Mid and East Devon localities. The application focussed on a whole family approach model for the recovery of trauma experienced from domestic violence and abuse. Project 30 was established as a pilot with the intention of reviewing effectiveness to aid future expansion of the model.

Project 30 offers access to deeper, more sustained therapeutic support for those who need it. This is achieved through a tiered, mixed-therapy programme, combining pioneering group psychotherapy with one-to-one support, delivered by adult recovery workers, child recovery workers, and trained therapists. It supports building and maintaining relationships, establishing restorative values, increasing understanding and developing skills within the family unit working with the non-abusive parent and their child(ren). The project is led by individual needs and tailored support is delivered over a period of up to 12 months. The delivery of Project 30 commenced in June 2020.

Project 30 works within a framework that incorporates the monitoring of safeguarding and the sharing of information. This is in line with the statutory guidance on inter-agency working to safeguard and promote the welfare of children: '*Working Together to Safeguard Children (July 2018)*', SAFE works within the multi-agency framework to enable best outcomes for the family, which lends itself to a reduction in re-referrals into service and/or escalation to statutory services.

## SAFE's Trauma Responsive Approach

Today there is an increasingly wide body of knowledge about trauma. More is known about its causes, its effects and which kinds of treatments and approaches to apply. Yet knowledge among professionals working with individuals affected by trauma continues to lag. Current training programmes only reach an estimated 1.1% of the professionals in a position to help people with trauma. The result is that individuals suffering remain not only unable to access sympathetic and skilled treatment but also unaware that their problems may stem from the earlier trauma they have experienced. The results of childhood trauma affect an estimated 8.4 m adults in the UK. When trauma is understood so too are many of our social and health problems: anti-social behaviour, domestic violence and abuse, sexual abuse, poverty, crime and repetitive, generational childhood neglect and abuse.

SAFE's approach to trauma recovery rests with the understanding of what we view as the hidden trauma. We refer to this trauma as small t trauma. Small t trauma is the trauma of feelings, the trauma that is caused by not having our basic emotional needs met from our primary care givers. The emotional messages that are given to children despite the physical actions cause our internal emotional needs to be dismissed and invalidated leaving us unable to validate our own emotions as we grow. This causes our emotional development to arrest, the trauma lays submerged within our developing psyche and a part of us becomes 'stuck' at what we refer to as our trauma age. Without intervention our emotional development may never be started again, and we therefore

respond to problems and difficulties from the age of our trauma rather than our chronological age. For example, an adult may experience difficulties with setting boundaries within a relationship because they are responding to the relationship from their trauma age and as such in certain circumstances can act from a point of immaturity and be unable to engage on an adult level; or a parent who is unable to say no to their child through fear of their child rejecting them thereby responding from their own need for approval rather than the safety of their child.

We consider small t trauma to be a dis-ease of emotional immaturity caused by childhood trauma which renders them unable to do things necessary to experience healthy adult relationships. Small t trauma arises from care giving that is anything 'less than nurturing'. It is subtle but consistent, it is covert and exists within the very fabric of the family. If small t trauma is untreated, it becomes internalised as a set of negative and damaging core beliefs. These core beliefs then dictate how someone sees themselves, how they see others and how they see the world around them.

Family culture and social norms experienced in childhood that are deemed as being 'less than nurturing', can lead to feelings of shame. Children carry this shame with them, from their initial core-relationship with their parents or carers, to other subsequent relationships with themselves and with others. This shame is toxic and effectively acts as a 'relationship pollutant'.

It is important however to understand that small t trauma does not always cause difficulties in functioning in later life but, dependent upon further emotional experiences and our environment, it may present as anything from general unhappiness, inability to settle and find our place, to entrenched drug abuse and domestic violence, and everything in between.

SAFE treats trauma by responding to the primary symptoms that present as a result of small t trauma. The primary symptoms are an inability to esteem ourselves, inability to protect ourselves within relationships, inability to own our own reality, inability to self-care and difficulty being moderate in behaviours and thoughts. The primary symptoms, when untreated, lead to the development of secondary issues which include resentment, addiction, mood disorders, physical illness and intimacy issues amongst others.

Many survivors of domestic violence and abuse have experienced small t trauma in childhood. It often goes unnoticed for a long time with the damage of small t trauma remaining hidden. Damage is done to relationships with both the self and others and there may be a lack of awareness about why healthy relationships are difficult to achieve. Healthy expectations of relationships are lost, boundaries are unclear, attachments are damaged and as such they lose the ability to form their own identity thereby leading to co-dependence. The children raised in the environment of these relationships then experience their own small t trauma and so the cycle goes on and on. SAFE also recognises the prevalence of small t trauma in perpetrators of domestic abuse.

### **Trauma and Adverse Childhood Experiences**

Childhood trauma is psychological injury sustained because of repeated exposure to harrowing events from which there is no escape. These events, sometimes termed as Adverse Childhood Experiences (ACEs), include domestic violence, childhood neglect, physical and sexual abuse, parental alcoholism, and situations such as growing up with hunger or poverty or a parent in prison. All children supported through Project 30 have Adverse Childhood Experiences (ACEs) that have the potential to adversely affect life chances if not addressed.

The ACE's study is well-known now and gives us a lay of the land in regard to developmental trauma, but it doesn't capture small t trauma and therefore potentially misses a whole cohort of adults whilst being diverted by the behaviours of their child/ren. To the untrained eye they are



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seemingly surviving life and, on the face of it, appear to be providing good enough parenting but beneath the surface they are not meeting their children's basic emotional needs, providing no emotional validation or empathy and attunement. These parents are parenting from their trauma age and inadvertently 'dumping' their own unprocessed pain into their children. This then provokes unbearable pain and pervasive shame in the child – the shame factor in trauma is huge but yet, shame does not feature on the ACE questionnaire. Many of these people are then wrongly diagnosed and therefore unable to access the correct treatment. They often go round and round the system, yo-yoing between providers and services with little hope of landing on the service that will make the difference. This is traumatising for the individual, frustrating for professionals and costly for society.

Repeated exposure to small t traumas can cause more emotional harm than exposure to a single big T traumatic event. SAFE seeks to educate, to support, to break this cycle of harm – for individuals and for social systems. Our understanding of the pervasive nature of small t trauma and significant harm it creates, provides the foundation for our whole-family approach. This will support individuals to keep themselves and others safe by tapping into the root causes of their behaviours and help them to learn to model a positive identity and positive relational dynamics.

Childhood trauma (in any form) is the root of many social challenges. It fuels half of all violent crime, including domestic violence and abuse and child abuse, and is responsible for over 52% of cases of anxiety and depression (Bellis et al, 2014, Gros et al, 2012). Childhood trauma may drive the hunt for self-soothing or self-annihilation inherent in drug and alcohol abuse and self-harm. It may also create social isolation, distract children from learning (thereby impacting educational achievement), reduce work productivity, and create unemployment, poverty, and homelessness.

At the heart of SAFE's ethos is group therapy. Being part of a group, or family of choice, brings many advantages from bonding and intimacy to hope and healing. We know there is comfort in commonality and the sharing of experiences reduces shame. SAFE's approach to trauma has its roots in the felt sense – you've got to feel it to heal it, feelings that cannot be felt via the virtual platform. March 2020 presented the world with a crisis on an unprecedented scale, a 'new normal' had to be found and SAFE adapted accordingly.

This report will not, therefore, truly capture the depth and breadth of our model. Service delivery has been re-shaped, and whilst we have taken our families through the recovery journey demonstrating some strong and excellent outcomes to date, it has not been the deeper experience of repairing connection that only physical presence can achieve.

## Delivery of Project 30

Project 30 is a comprehensive programme that caters for the whole family, both individually and as a unit. Below are the main components of the project:

- Adult 1:1 counselling
- Child 1:1 therapeutic sessions
- Child group work
- Adult group programmes: Domestic Abuse Recovery and Trauma Recovery
- Whole family sessions
- Family activity resource packs
- Family Care Plan
- Attendance at multi-agency Team Around the Family meetings
- Attendance at relevant professional meetings
- Internal case management meetings
- Quarterly consultation and evaluation questionnaires
- Case recording
- Quarterly reporting
- Internal Quality Assurance Framework

### Adult 1:1 counselling

At the onset of Project 30, the parent/carer engages in 1:1 counselling for a minimum of six sessions. They complete these sessions prior to commencement of child or whole-family work. This allows the opportunity for the parent/carer to reflect on their experience of domestic abuse and trauma, and the impact this has had for them, their child(ren) and the whole family. It also gives us our first window into the family functioning – and a sense of trauma age. The parent/carer can maintain their individual counselling sessions for the duration of Project 30 if they choose, reflecting their individual needs. To date, counselling sessions have been carried out online or by telephone due to the COVID-19 restrictions. Face-to-face sessions will be offered to those individuals wishing to continue in counselling when government guidelines allow.

### Child 1:1 and group work

Working with the child/young person to address the trauma experienced is fundamental to the project and aligns to the importance of capturing '*the child's voice*'. Project 30 focuses on actively listening to the child, addressing their individual needs, building a sense of self, strengthening inner and external resources, and creating emotional resilience and regulation. We know children often feel the abuse was somehow their fault, helping them make sense of this feeling actively reduces the toxic shame that has been inadvertently given to them.

Once the parent/carer completes a minimum of six counselling sessions, a children's worker is assigned to each child in the family taking part in the project. Where possible, the children's worker carries out face-to-face sessions within the school setting. Alternatively, sessions can take place within the home or online. SAFE has a flexible approach to meet individual needs to ensure work can be delivered effectively and to ensure COVID-19 guidelines are followed. The children's worker becomes part of the Early Help Team Around the Family (TAF) for the duration of the family engagement. The children's worker will attend meetings, work alongside other professionals to create a robust plan of action, and initiate meetings and activities. Face-to-face

recovery work and virtual meetings (where appropriate) are well underway with each child. Support and work will continue while needed and at the pace appropriate for each child.

### **Adult group programmes: Domestic Abuse Recovery and Trauma Recovery**

COVID-19 restrictions and government guidance have required us to postpone all group sessions until at least April 2021. Group work is dependent on the consistent building of strong relationships, and programmes will take place when guidance enables us to ensure people can take part safely and without the rupturing threat of sudden restrictions. Groups will be formed consisting of up to 10 parents/carers and one facilitator/counsellor. All Project 30 parents/carers have the chance to participate in group programmes once they have completed the minimum six sessions of counselling.

Group sessions are broken down into themes that enable participants to hold focus, connect past, present and future events, build on self-awareness and increase understanding around relationships. The sessions promote exploration of core beliefs and the impact these have on parenting style, day to day contentment and bigger life decisions. Life planning and goal setting also forms a key part of the programme, which builds confidence and focus on positive change within their recovery.

### **Whole-family sessions**

Whole family sessions will begin once all relevant family members have received the individual support and interventions that meet their needs. The sessions are led by a skilled SAFE facilitator and give the family the opportunity to express and explore their feelings with each other in a safe, non-confrontational environment. The number of sessions will be dependent on individual family's needs. The overarching aim of whole-family support is to increase capacity for dealing with life's challenges – challenges will continue to arise within the family post-intervention but learning the skill to navigate them is key. Sessions will amalgamate the individual work completed with each family member, strengthening communication and relationships, and building up the entire family unit.

### **Family activity resource packs**

Project 30 has bespoke activity resources, developed by SAFE for children and families. These are used in individual sessions, and sent out to families during school holidays, to support and motivate ongoing growth and change during periods when they may feel more isolated. Resources are designed to help children explore their feelings and thoughts and provide activities for the entire family to undertake together. Completing fun activities has the potential to strengthen family bonds and creatively develop positive relationships. Packs were distributed to all Project 30 families during October 2020 half term with additional resources sent after Christmas 2020.

### **Family Care Plan**

The allocated children's worker will complete a Family Care Plan with involvement from all family members at the start of their engagement in Project 30. The Plan contains the outcomes the family wants to achieve and sets out the steps needed to reach these. Every Family Care Plan is reviewed weekly by SAFE to ensure it meets the needs of the family in relation to the goals and outcomes.

### **Attendance at Team Around the Family meetings**

For the duration of a family's engagement in Project 30, the allocated children's worker will attend and be part of the multi-agency Team Around the Family (TAF). The children's worker will discuss the work and interventions carried out as part of the multi-agency partnership. The goals, actions, and outcomes from the SAFE Family Care Plan will form part of the TAF plan,

strengthening understanding and partnership working for best outcomes for the family. Sharing knowledge of what has worked is vital to ensure continuity of care – particularly for education settings.

### **Attendance at professional meetings**

SAFE have regular, strong representation at relevant professional meetings to ensure collaboration in approach and development and the sharing of information for Project 30 families. Meetings attended vary dependent on individual family needs and other service engagement. Meetings currently attended include Partnership meetings, Triage meetings, Vulnerable Pregnancy meetings, Child In Need meetings and Child Protection meetings.

### **Internal case management meetings**

Each Project 30 family is discussed during the weekly case management meetings involving children's workers, adult counsellors and therapists, and senior management. Dynamic discussions enable sharing of concerns and insights, monitoring of work undertaken, and celebration of progress. Case management is a whole team approach that forms part of SAFE CPD, through the exploration of ideas, sharing best practice, and assessing and monitoring of safeguarding concerns.

### **Quarterly monitoring and reporting**

Project 30 will have quarterly reports, including qualitative and quantitative data. Reports will be shared with the Safer Devon Partnership, Devon County Council (DCC), Commissioners, and DCC Early Help management.

SAFE has a robust monitoring and evaluation process for all services. Project 30 specifically includes four adult questionnaires and one children's questionnaire that are completed quarterly by all individuals. Questionnaires cover emotional health, wellbeing, quality of life and family needs, and track the experiences of each family member. They enable reflection of thoughts and feelings, and identify changes, forming a vital part of recovery.

The required DCC questionnaire is also sent to families at the start of the project, June 2021, and at the end of the project. Information is confidential, with data held by DCC, therefore, no monitoring or evaluation of findings by SAFE is possible.

### **Case recording**

All SAFE children's workers are competent in using the DCC Early Help Right for Children (RfC) system. They record relevant observations onto the system, and work will form part of the Early Help Plan (TAF) Plan. This enables a joined-up approach to multi-agency working as well as the tracking of outcomes for incentives such as 'payments by results'.

Full case notes are held for all Project 30 families, stored on a secure in-house case management system. This tracks all contact with families, details safeguarding concerns, actions, engagement with other agencies, and individual progress as well as equality data ensuring we continue to be inclusive.

### **Quality Assurance**

SAFE has an Internal Quality Assurance Framework. The management team regularly carry out random Quality Assurance reviews of individual cases, including Project 30 families. The Framework is structured to ensure work and processes adhere to the high standards set by SAFE, and national safeguarding and data protection guidelines. Findings from the reviews dynamically shape SAFE's development, and form an important part of staff CPD



## Consultation and Feedback

Project 30 prioritises the voice and experiences of the family. Families are key participants in the shape of their involvement with Project 30. Feedback is encouraged from adults and children, and SAFE also actively seeks the views of professionals. Vigorous consultation enables ongoing oversight of the impact of Project 30 for all involved.

Recent feedback includes:

### Child's voice

*'You [child's keyworker] are trustworthy and respect my privacy'.*

*'I feel like I can be myself around you [child's keyworker] and not feel judged about what I say'.*

*'I like doing different activities with you [child's keyworker]'.*

*'I am a lot nicer at home because you are helping me'.*

*'The work you [child's keyworker] have done with me has helped me change and made me feel better. I don't feel I think about it too much after'.*

One young person was struggling to verbalise how he was feeling. He would become angry and frustrated when he was feeling unhappy, unsafe, or confused. The SAFE worker used creative techniques and introduced visual aids to help him express how he was feeling and learn new healthier ways of expressing his distress. He reported: *'I don't need the cards anymore - I can show and tell you now because you helped me'.*

One parent raised concerns that her two children would not react well to a male worker as they had a fear of men following experiences with their dad. They also had little current connection with adult males. It was agreed to try and introduce a male children's worker to them. He gently established a relationship, and the children began to express and open up to him. One child found it harder to engage and needed a teaching assistant to accompany him to sessions. His SAFE worker took the time to build his trust. After a few sessions he told the teaching assistant he was happy to go to the sessions alone and did not need her there. Feedback from their parent and school is positive and the school has since made another family referral to Project 30 as a result.

The boys talk often about their SAFE worker and look forward to seeing him again, with one child saying: *'I am the luckiest kid alive as I get to work with you [child's keyworker]'.*

### Parent's voice

*'I have seen a difference in myself, I have more confidence in myself, I don't get so stressed out as much'.*

*'The counselling from SAFE was the best intervention I have been given'.*

*'My counsellor is brilliant and I'm feeling so positive and really enjoying my sessions I hope [my children] do too. Project 30 is brilliant'.*



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*'My heart warmed so much when she [the child] came out with a smile on her face and immediately wanted to show me the pictures. It's so lovely knowing that she is comfortable with you and I really hope it gives her the space she needs. Thank you'.*

*'Safe have really helped our family heal, the girls are getting on so well now, they don't fight and argue anymore. I can't thank you [child's keyworkers] enough for that. It has helped our relationships, and the girl's relationships with their friends. My counselling has made me recognise how I am with the girls and the behaviours I mirrored from how my dad treated me. I have changed this, it's been great'.*

### **Family work**

One parent we spoke to described how her family is really benefiting from the support through Project 30. She appreciated the activity resource packs that were sent out and said that it shows 'SAFE care and are thinking about the families. Her family enjoyed completing many of the activities together.

### **Comments from professionals**

*Trainee Social Worker (Children and Families Team Mid and East Devon):*

*'[Children's worker] has been a consistent positive asset to our shared family work. Her capacity to work as part of a multi-agency team is incredibly valuable, she has been open and proactive in jointly working with a child on their difficult journey from Early Help to Child Protection, she maintains an appreciative curious and optimistic stance and has at times provided much needed strengths-based respite with her feedback for the family when faced with what must seem like overwhelming professional concerns in meetings.*

*The holistic SAFE Project 30 approach has delivered solid results for the child, and her insight into the child's world has been invaluable. The family who are sceptical about professional's commitment to them have valued the consistent and long-term commitment that the Project offers providing an opportunity to build a much-needed trusted professional relationship.*

*As a student I have valued [children's worker's] generosity with her time and reflective approach to her work. She is a very knowledgeable practitioner who is a joy to work alongside, encouraging, challenging and secure in her professional judgements'.*

*Counsellor:*

A counsellor at a school in North Devon has been impressed with the level of support provided to families taking part in Project 30. She commended the whole family approach that was being used. She saw the length and scope of support as positive, stating that most agencies have a more limited time frame when working with young people. The school is eager for the children's worker to continue supporting the young person and to bring some expertise to professionals at the school in relation to trauma.

## **Challenges**

SAFE is resilient and resourceful, and despite many challenges to our delivery and funding structures because of COVID-19, we have adapted and diversified our approach, ensuring Project 30 started from a strong position and within contracted timescales.

Adjustments to Project 30 delivery include a current pause of face-to-face adult group support because of government guidelines. Should guidelines allow, the sessions are planned to start from April 2021, however, we continue to review the situation weekly to ensure all our support can be completed safely. Adult 1:1 counselling sessions are currently held online and by telephone,

parent / carers will be offered the option of moving to face-to-face when it is safe to do so. We will keep all three methods of delivery available to offer flexibility for parent/carers and support.

## Findings

The monitoring and evaluation of Project 30 is giving us a more detailed picture of issues relating to trauma and its impact on families. Findings are in line with national concerns around the short- and long-term impact of domestic violence and abuse.

Early results from Project 30 show that families have the resources and stability with which to grow, are empowered to face their challenges and move towards positive outcomes. We will continue to analyse the movement of individuals and families to assess progress made.

Appendices A - C show some data collected from families at the start of the project. Key findings include:

- Majority of children and young people experience challenges around attachment, low self-esteem and feeling unheard (Appendix A)
- Majority of adults feel they are struggling to cope, have low self-confidence and difficulty trusting others (Appendix B)
- Majority of adults and children feel optimistic about moving on from their experiences (Appendices A and B)
- Majority of adults and children experience strong family bonds and feel that they are in a safe environment (Appendix C)

A case study (Appendix F) sets out how support can begin to change life chances for individuals and a whole family as they start to address emotional distress and trauma, taking positive steps towards recovery.

## Conclusion

Project 30 demonstrates successful outcomes for families even at this early point in delivery and we will continue to evaluate, learn and develop. What is clear is that the damage that runs through families is complex and entrenched. If we are to effectively support families to change then we must provide services that respect this complexity. Recovery is not linear, and neither can our approach be. Recovery, just like domestic abuse, is circular and transformation will ebb and flow within this cycle as their journey progresses.

We are finding our way out of a global pandemic and we are shortly to see a new Domestic Violence Bill passed through Parliament, these two things give us an opportunity for change that perhaps has not been seen before. Many of those who have experienced small trauma will have found COVID-19 a significantly triggering experience, for evidence of this we need look no further than the huge rises in domestic abuse and poor mental health. Yet, we have the chance to create sustainable change. The challenge with any new policy is supporting the people who fall through the gaps and we must continue to voice our concerns to policy makers if we are to create sustainable change. We need to apply a flexible approach to policy implementation and strategies, develop a shared language and understanding of trauma and shift from being trauma

informed to trauma responsive and an authentic understanding that trauma is not something that happens to us, but something that happens inside of us.

If we take our whole family approach out to stakeholders, then we are able to drive ecosystem change at local and national level. By working as a family, we can develop a framework that provides the complex solutions needed to treat the complex problems experienced.

Project 30 was originally commissioned to provide support to 30 families. We know this is not even scratching the surface of need and so the project will expand and grow. Beyond the 30 families engaged for the pilot, the programme will become known as Flourishing Families. SAFE is committed to innovation and to influencing change across Devon and beyond. We will continue to develop and deliver ground-breaking trauma responsive projects to a wider cohort of need and fine-tune our trauma treatment to ensure it is inclusive. Our belief is that such change is vital for our families, our communities, and our society as a whole - our hope is that others will join our movement for change.

### **Main report ends**

#### *Appendices:*

*Appendix A – Child/young person questionnaire responses – December 2020*

*Appendix B – Parent/carer questionnaire responses – December 2020*

*Appendix C – Family dynamics questionnaire responses – December 2020*

*Appendix D - Children's activity resource pack information – September 2020*

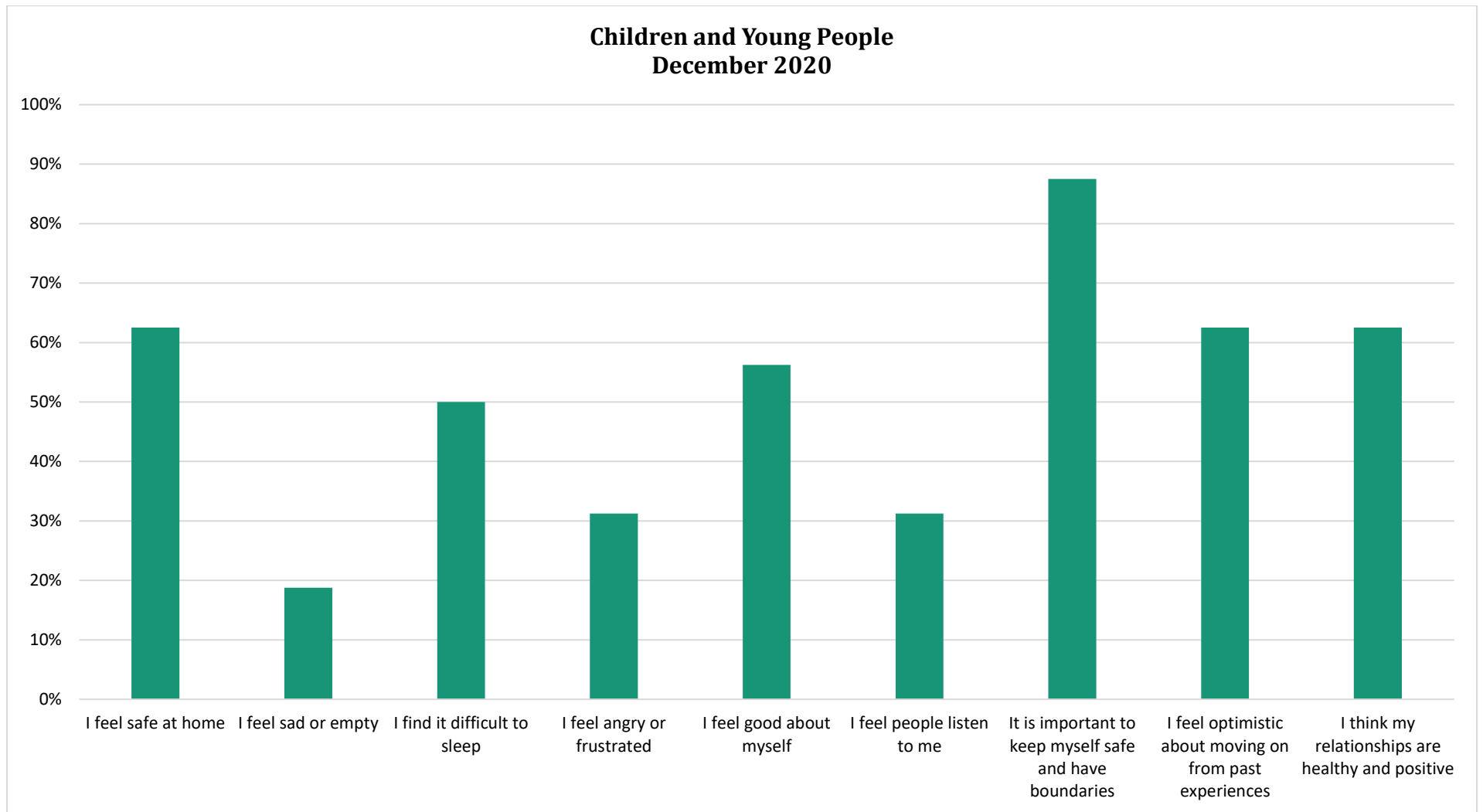
*Appendix E - Children's activity resource pack information – December 2020*

*Appendix F - Case Study – The Y family – January 2021*



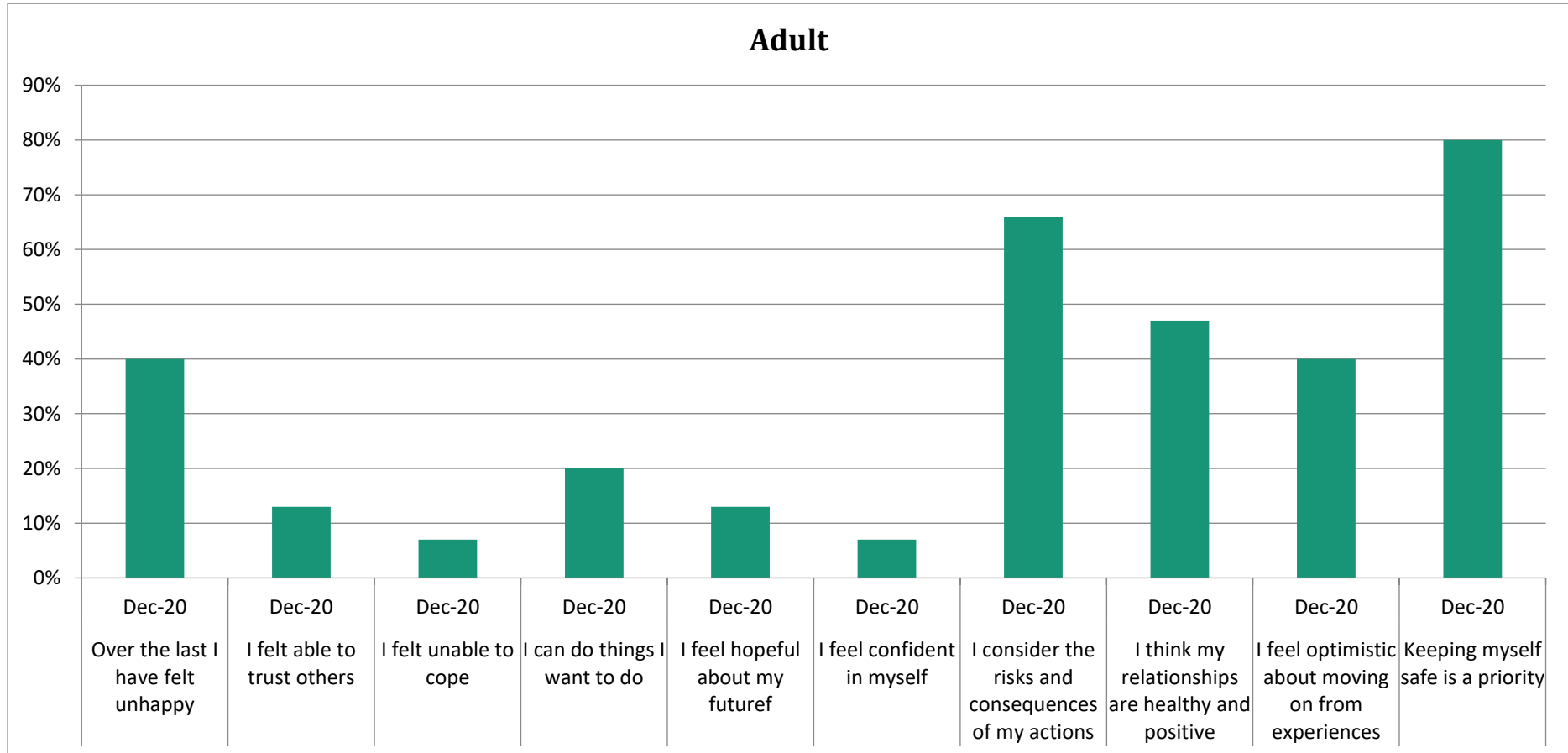
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**Appendix A – Child/young person questionnaire responses – December 2020**



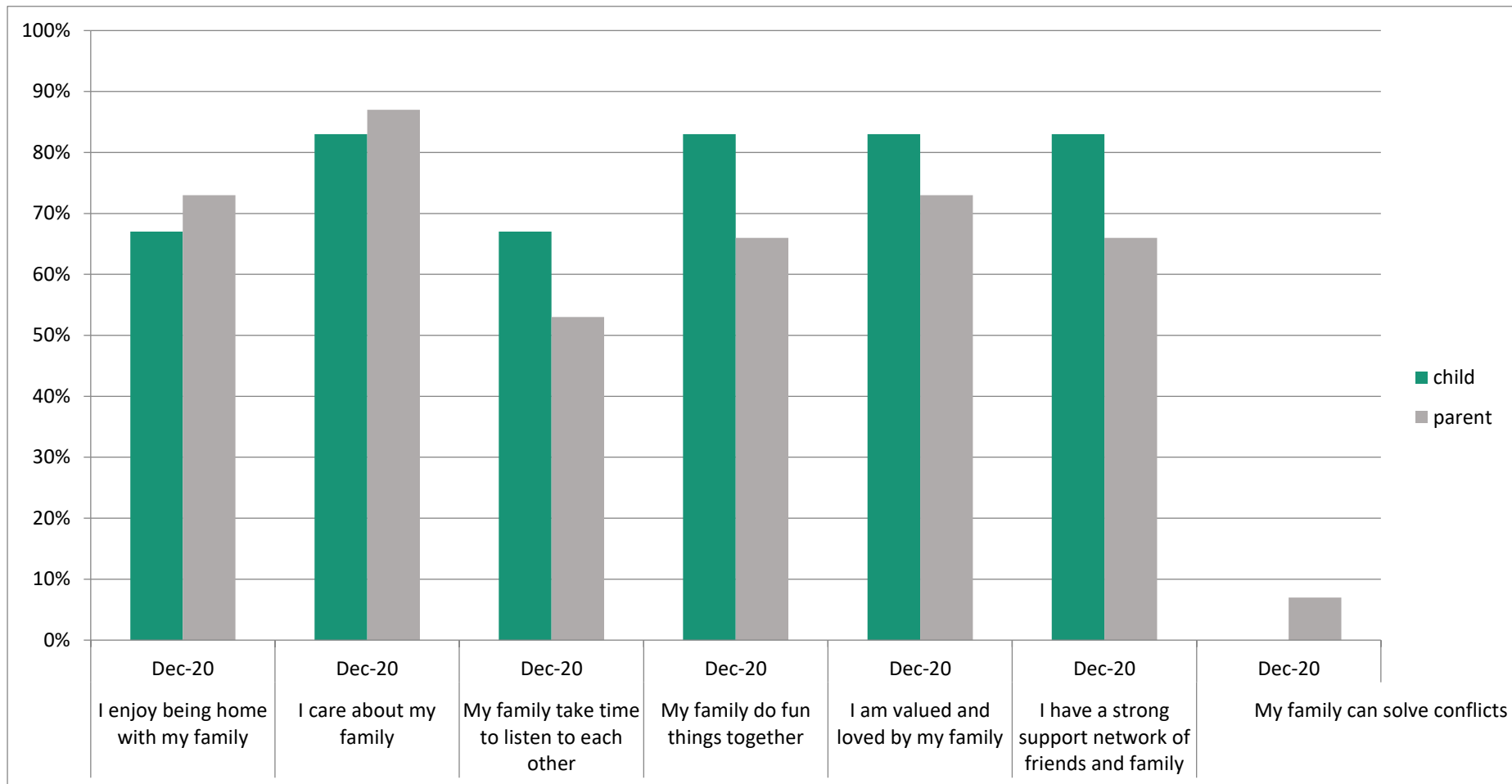
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Appendix B - Parent/carer questionnaire responses



Appendix C –Child/young person and adult/carer family questionnaire responses

Family dynamics and communication





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## ***Appendix D – Activity resource pack guidance - September 2020***

### **Activity Guide**

We do hope you and your family find these activities helpful and fun. We have created these to be easy to pick up and use, but if you follow the instructions below you will get the most out of these activities.

#### **Emotion Cards**

These are the little cards with cartoon characters demonstrating an emotion each. You can play a number of games with these cards, but we would suggest the three following games.

- Making Faces = Place a set of cards face down in a stack. Turn over the top card. Have your child name the emotion and make a face to match.
- Guess the Emotion = Spread out a set of cards face up. Take turns to choose a card but don't tell the other players which you have chosen. Make a face and see if the other players can guess which card you chose.
- The Way I Feel Story Game = Spread out a set of cards face up. Take turns to choose a card but don't tell the other players which you have chosen. Tell a short story about a time you felt like that and see if the other players can guess which card you chose.

#### **How Emotions Affect Me**

These are the worksheets with the blank faces on them. Simply get your child to write down what is relevant for them in the various boxes and draw the expression that people make on their face on the empty face. You can see our example of a completed happy face if you are having difficulty, but there is no right or answer, we all experience feelings in our own unique ways.

#### **Guess 3 About Me**

Use this worksheet to find out about how much you know about each other.

#### **Can We Talk?**

Anybody in the family can use these cards to talk about anything they want to discuss. You can link events to emotions if you want, but it doesn't matter how you choose to describe it as long as you use these cards to help you all to talk.

#### **Family Fun Challenge**

This worksheet will help you do a number of challenges as a family that should help you all bond.

#### **Would You Rather Cards?**

These fun cards pose some real dilemmas. Simply deal them face down and choose at random. Then answer the intriguing questions that are posed, but it is not enough just to answer, you will also need to explain why you have made this choice.

#### **Have Fun With Positive Drawing**

This worksheet will give you some great ideas to create some fun and positive drawings. You don't have to have the artistic skills of Picasso to take part, just try your best and you might be pleasantly surprised. If the idea of drawing sounds too daunting then you can always explore other ways of creating something fun, either through collage or maybe play-doh, it is up to you.

#### **Things I Like About Me**

Sometimes we forget the special skills and great qualities we have, use the tree to explore what makes you so great.





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## ***Appendix E – Activity resource pack guidance - December 2020***

### **Activity Instructions**

Here are a few positive activities you might like to try over the holidays. You can do them on your own or with your family.

See what you can learn about being kind to yourself and others!

Each activity is designed to promote positive self-talk, self-affirmation and develop healthy communication skills between family members, You can try them on your own, in a pair or as a family. They can be repeated as many times as you like.

### **Words of Kindness**

- Think of a word related to kindness e.g. generous, brave, helpful
- Put the word into a sentence relating to something you have done then write it down in a heart e.g. I was generous when I let my brother ride my bike o Try saying the sentence out loud and hear how kind you have been o See if you can fill up all the hearts!

### **Wheel of positivity**

Using positive words, create your own rainbow to see how colourful you are.

- Choose one word from the wheel each day
- Put the word into a sentence; say it out loud, write the sentence down e.g. I am happy today because I am seeing my friends
- Think about what you have said and why
- Colour one band of your rainbow as far across the curve to where you feel you are with the word today
- Complete a rainbow for week 1 and for week 2
- Compare your rainbows at the end

We hope you have grown your rainbow.



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## Appendix F – Case Study – Domestic violence and abuse, and the recovery journey

### The Story of the Y family

Things we might want to consider about our journey, family and relationships, housing, finances, employment and education, how we get on with our community, our boundaries and behaviour, any substance misuse Issues, health (physical and emotional)

#### The Family Story– What happened in the past and what is happening now?

##### Family Journey

The Y family are: Mum, Daughter (mid-teens), eldest Son (early teens) and Youngest Son (under 10 years). Mum has extended family in the area. The children attend local schools.

##### Family and Relationships

Mum works part-time in a professional role, although her employment situation is currently precarious as she may face redundancy in early 2021.

Mum’s mother lives locally and has attended some family meetings with her. Daughter has a very close relationship with her grandmother and frequently calls her when she is upset with Mum. Mum’s relationship with her mother can be fractious– she relies on her for some emotional and childcare support but can also feel criticised and challenged in her role. Daughter and Eldest Son sometimes see their dad’s parents and have a positive relationship with them.

Daughter and Eldest Son’s dad perpetrated physical and emotional abuse towards Mum, which the children experienced. Daughter has decided not to have contact with him, and Eldest Son’s contact is intermittent. Son struggles to manage this relationship emotionally, and it can make him feel very distressed.

Youngest Son’s parents separated several years ago. Youngest Son regularly spends weekends and school holidays with his dad. Mum reports no abuse from this relationship.

##### Education

Daughter performs well at school, and attendance is not a concern. During this latest lockdown (Jan 2021) she has decided to home-school rather than attend classes in person.

Eldest Son has struggled with attendance and attainment. He previously wanted to change schools but following 2020 social restrictions and lockdown, has focused more on his academic studies and reports having more enjoyment of learning and school.

Youngest Son engages at school but has seemed anxious and describes not ‘being good’ at lessons or having friends. He is currently receiving play therapy (not provided by SAFE).

##### Boundaries and Behaviour

Friendship dynamics and sibling relationships can be a challenge for all children, although they are friendly and engaging. They seek positive relationships but can struggle to hold boundaries or recognise healthy patterns of behaviour. Daughter and Eldest Son frequently fight, with verbal and physical aggression. None of the family are happy with their relationships and have been working individually and collectively to make changes. Mum finds it difficult to hold secure parenting boundaries for the children, being frequently overwhelmed when their behaviour challenges them.

Mum struggles to manage the children’s behaviours and retreats to her bedroom as a method of coping.

Daughter has been managing well socially at school with peers and adults but instigates many fights/arguments at home with Eldest Son.

Eldest Son can get pulled into socially inappropriate behaviours with peers that leave him at risk of exploitation or anti-social behaviour. He wants to impress his friends, and struggles to think through consequences of his actions, rather than undertaking any activities maliciously. He can be disruptive and aggressive at home and antagonises his siblings. Both Mum and Daughter have reported ‘seeing’ Eldest Son’s father in Eldest Son’s behaviour. He is subsequently at risk of having his emotional needs severely missed or dismissed.

Youngest Son’s behaviour has mimicked Eldest Son’s. He can lash out and be verbally abusive.

**Housing**

The family live together. The children’s Dads both live locally.

**Health**

Mum has been taking antidepressants for depression and anxiety for several years.

Youngest Son has had some issues around bedwetting/smearing and sleep, these seem to be behavioural rather than linked to any physical condition. He also has sensory issues for which a CAMHS assessment has been requested (summer 2020).

**Key Events in The Family’s Life**

- Physical and emotional abuse from Daughter and Eldest Son’s Dad and ongoing conflict around contact
- Youngest Son’s birth
- Separation of Mum from Youngest Son’s Dad

**Needs identified**

Mum feels that she does not have the skills to parent the children supportively and effectively. She would like to build more positive relationships for them as a family. She wants to change how she manages the family home and to feel happier and more content in herself.

She struggles to separate her feelings about her Eldest Son’s father from him, consequently affecting her sometimes aggressive and emotionally abusive behaviour towards him. Daughter feels responsibility towards Mum’s emotional needs and can often take on the role of ‘parent’ when Mum is feeling low.

Eldest Son is angry about contact/lack of contact with his Dad and struggles to manage his feelings around Dad’s behaviour and his own desire for a relationship with his Dad. He feels unhappy about his relationships with his siblings and Mum and feels misunderstood at home, which makes him argumentative and physically aggressive.

Youngest Son is modelling Eldest Son’s behaviour. He struggles to sleep in his own bed and has difficulty following Mum’s rules and boundaries, becoming rude and disruptive.

**What work has been undertaken (interventions and support)**

- SAFE is working on a whole family approach, supporting everyone to build emotional skills and resilience, to work together as a whole family, to build tools and understanding as a unit. The family accessed some individual work during 2019/20 after Eldest Son and Daughter were referred for support. However, the acceptance of the family onto the P30 project in August 2020 means that SAFE can now offer a consistent 12-month package of support, addressing the entire family's needs.
- The family has been working with the Family Intervention Team since late summer 2020. This has improved some practical challenges in the home (sleeping arrangements, chores, individual responsibilities etc) and the family are working together to make their home a happier, more positive environment.
- Sibling work between Eldest Son and Daughter is planned for spring 2021, with whole-family work to take place in the summer, once Mum has completed her peer group work.

#### Mum

- Mum has attended 1:1 counselling sessions since April 2020. SAFE initially offered this at the start of lockdown to provide temporary support before engaging in our Domestic Abuse Recovery group. Because of ongoing social restrictions, counselling has continued weekly and will do so until group programmes fall within the guidelines for safe delivery. Mum engages in sessions well and has worked consistently to increase self-awareness, explore constructive changes to her parenting and develop self-care. She continues to work closely with SAFE to progress herself and her family in a positive direction.

#### Daughter (16yrs)

- SAFE started working with Daughter in February 2020. There have been three stages to our engagement so far:
  - a. Face-to-face support focusing on Daughter's relationship with her family, particularly the fighting between her and brother, her frustrations around Mum's responsibilities and Daughter's decision not to have contact with her Dad. Her disagreements with sibling are often around their differing feelings about Dad. Daughter also struggles to separate sibling /Dad's behaviours and see them as separate individuals.
  - b. Remote/online (during lockdown) support around managing the challenges of not being at school and family dynamics. After a few sessions Daughter felt she did not want to continue with support as she was managing okay- we continued text messages with Daughter to maintain contact. Daughter started working with SPACE youth service at the start of the autumn term. We agreed to continue our support once they completed this to avoid any duplication or conflicts in the work. Daughter has made her own decisions about how/when to start work and what she feels would be of most benefit to her.
  - c. Remote/online (current) has just started with Daughter and she is engaging well. Daughter is keen to start some sibling work with Eldest Son and for some whole-family sessions to consider how they can improve their relationships at home.

#### Eldest Son (early teens)



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- SAFE started working with Eldest Son in October 2019. There have been three stages with our work so far:
  - a. Face-to-face support focusing on Eldest Son's relationship with his Dad, recognising the consequences his Dad's interactions with others, and helping Son to understand that his Dad's behaviours are not his responsibility.
  - b. Remote/online (during lockdown) support around Eldest Son's anger; Eldest Son felt an increasing amount of pressure from friends and family and school and was struggling to manage and respond positively to this.
  - c. Face-to-face (post-lockdown) where Eldest Son has been more reflective, willing to question himself and take more responsibility for his actions and behaviour.
  - d. Throughout our work, there has been continuing conflict with other immediate family members, particularly around his position in the family and how he is perceived by Mum and Daughter. Eldest Son is keen to take part in some whole-family work, in order to improve relationships and communication.

### Safety and Risk

The family are learning to understand their individual needs and developing skills to support each other and themselves more positively and compassionately.

Two major risks have been identified:

- a) Eldest Son's behaviour – this has the potential to put his siblings and himself at significant harm. In Spring 2020 we submitted a MASH referral with Mum's consent due to escalating concerns over Eldest Son's aggressive outbursts and concerns for the impact of violent behaviour on other family members. The MASH outcome was for the family to remain at an Early Help level. A referral through to Project 30 was made.
- b) Mum's relationships – the Family Intervention Team (FIT) team had concerns that Mum's relationships were potentially placing the children and herself at risk of abuse or neglect. After a meeting with Mum, it was decided not to escalate, with increased support and guidance for the family being put into place.

SAFE believe that the risks for the family can be reduced through ongoing support and structure to understand healthy expression of emotions and positive behaviours.

### Where is the family now (Outcomes of intervention and support)

The family are already reporting improved relationships and a calmer home environment, and other professionals have noted significant improvements to the family dynamic.

Mum is keen to start group work when possible, and to keep momentum of change for a more positive, healthy family.

Daughter has engaged consistently well with all support and continues to work with SAFE to build her understanding of healthy relationships and feel more positive about her family.



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Eldest Son is responding well to SAFE support, engaging more consistently, and showing greater insight and consideration of his behaviours and actions. He is more accepting of responsibility and expresses a desire to make positive changes for the family.

Despite the increased challenges of social restrictions and isolation, the family report feeling happier and more settled than when they began working with SAFE.