Seeing the light: innovation in local public services

London Borough of Sutton: Helping children who have witnessed domestic violence

The people and the place

1 In 2000 the London Borough of Sutton organised a multi-agency ‘needs-led audit’ to look at the provision of services in the borough. An analysis of 200 files and subsequent discussion highlighted twelve areas of unmet need. Those for immediate attention included children suffering from loss and trauma. In a notable percentage of cases this was associated with domestic violence. At the same time, domestic violence was increasingly in the spotlight due to the government’s Children and Young People agenda, and new legislation was under discussion.

2 Children were rarely, if ever, referred to any service when domestic violence had been highlighted as the main adversity in their life. But for children, their emotional and behavioural distress can have both short and long-term consequences. There is also a high risk that where children are directly physically abused, the effect upon their perceptions and beliefs can leave significant emotional scars.

3 Linda Finn and Dawn Crisp then became involved in developing a response to the identified service need. As manager of Sutton Children’s Fund, Dawn was in a position to fund the start up of a service. Linda, Coordinator for the borough’s Stronger Families project, led on the development and implementation. Her first step was to review the relevant research and discuss the vision for the project with the Women’s Aid Federation. A programme was identified, which had been used in Canada for almost 20 years but had only been used in the UK within refuge settings. Dawn and Linda decided to bring it to Sutton.
The innovation and the impact

4 The programme is called the Community Group Treatment Programme. It runs over a 12-week period for children aged 4 to 16, with children divided into age-specific groups to address a range of issues. These include validation of the children’s experiences, understanding abuse, reducing self-blame, safety planning and managing appropriate and inappropriate expressions of emotion.

5 The programme offers a concurrent component for mothers to attend groups and the sessions have been most successful when both mothers and children attend. Mothers are supported to understand how the violence has impacted on the child and how best to help them through the healing process.

6 Results have been excellent. In the first year Sutton ran six groups for children. All children are assessed pre- and post-group to confirm the expected outcomes and at the end of the group mothers and children complete satisfaction ratings. This revealed that the majority of children who started the group completed it, indicating enjoyment and satisfaction with the programme. Children also improved in their ability to identify abusive actions after the group. Far fewer indicated they would try to intervene in abuse episodes, a cause of great risk to children. Fewer children subsequently condone any kind of violence in relationships or feel they are the cause of abuse or violence. Children also developed problem-solving skills to help them resolve conflicts.

How did the innovation happen?

7 Having decided to bring the programme to Sutton, Linda discussed the idea with Dr Audrey Mullender, an eminent researcher in this field, who endorsed the Canadian model. Sutton then contacted the team in Canada and invited them to come and run a training programme.

8 The first day of training, in May 2003, was for 30 strategic heads from across all the relevant agencies, both statutory and voluntary. The intention was to get commitment from senior managers and this worked. This training day was followed by a two-day course for a hundred staff across local agencies to raise awareness and embed knowledge. The training captured the interest of participants and secured their commitment to delivering the new service. In October 2003 the first pilots were run – 1 mother’s group and 1 for children aged 9 to 11. This led to the roll out of the service from October 2004.

9 Working as a team with a shared vision has been crucial. A wide and varied number of professionals from across the borough have undertaken to deliver the programme. These include the manager of Sutton Welcare (a voluntary organisation); a senior manager and women’s safety worker from the London Probation Service; health visitors; social services staff; behaviour support team staff; child and adolescent health workers; education welfare officers; and school nurses.
Following the training and pilot groups, a steering group was set up to guide the project in its implementation phase. This steering group feeds into the local domestic violence forum, which reports directly to the Sutton Children and Young People’s Partnership.

Mothers and children from the programme have been able to directly offer something back into their community – forming a reference group for the local Domestic Violence Forum and taking part in consultation with the Women’s Aid Federation. The children from the programme also developed a poster campaign to highlight the issue of domestic violence and this has been well publicised throughout Sutton.

Following a reciprocal visit to Canada, Linda and Dawn felt it was important to begin to share information about the group treatment programme with colleagues in other local authorities and agencies. This led to a two-day national conference, arranged with the help of Women’s Aid, entitled ‘What about me?’ The conference was a huge success and generated wider interest in what Sutton was doing. What the borough hadn’t envisaged was the profile that Sutton would achieve as a result and the demand for training that would ensue.

What helped to get it started?

The project started with clear assessment of need and this was followed by a research review that found strong evidence to support the Canadian programme. The model was chosen not only for its programme content but also for the evidence in research literature of the benefits of a collaborative approach in working with children and mothers who have lived with domestic abuse.

At the same time, there was a long-term vision within Sutton’s social services department and among partner agencies about what they wanted to achieve and strong commitment to do something for mothers and children who had lived with domestic violence. This happened at a time when domestic violence had a growing national profile with the development of the Domestic Violence Crime and Victims Bill – which became an act in 2004.

What helped to keep it going?

The programme has been delivered using a collaborative, multi-agency approach. As the project has developed the commitment of partner organisations to funding for the coordinator role and releasing their own staff where required has been crucial to keeping the programme going. The investment in training strategic staff at the outset has paid off. It has aided commitment to the project at senior levels in partner organisations and maintained the high profile of the project.
Early success, positive feedback and associated publicity for the project have helped maintain momentum. Professional links have been maintained throughout with the team from Canada, giving the team access to expert advice which has enhanced programme development.

What helped to share the learning?

Looking back at the development of the service, Sutton considers that its value is ‘subsequently obvious, self-evident’, and is committed to offering training to other local authorities. This has meant that much of Linda’s time has recently been taken up hosting visits and speaking at conferences.

The endorsement of the project as innovative practice by external agencies has raised its profile nationally. It has been identified as best practice by Women’s Aid and the Greater London Domestic Violence Forum, and won the 2006 LGC award for innovation.

Challenges along the way

The main challenge has been providing the programme within existing resources. Initially Linda (now coordinator for the Group Treatment Programme) started with part-time input of two days a week funded through the Health Improvement Plan. Now funding comes through the Children’s Fund, Social Services and the Primary Care Trust and Linda’s role is dedicated to running the programme. But the funding is still project-based rather than mainstreamed and is only confirmed until March 2008. Sustaining the programme relies on staff across all agencies being able to give their time to help run the programme. This makes continuing with the programme manageable, but as Linda says, ‘Demand is so great we could run groups every day of the week.’

What next?

Sutton now runs between 8 and 12 programmes a year for mothers and children of different age groups, and has trained over 100 staff in the discipline. To reinforce the shared impact, all agencies involved in the programme are able to refer children to it.

Reduction of the impact of domestic violence is a key component of Sutton’s Children and Young People’s plan. Recorded incidence of domestic violence across agencies remains high but Sutton want to ensure families and children receive the right service in a timely and coordinated way. This multi-agency work will be a high priority for Sutton in the future.
22 Sutton is trying to secure funding to expand parenting support services in general, including creating additional capacity for delivering the group treatment programme. The Council also plans to conduct a local evaluation of the programme to ensure access and usage are maximised for the future.

23 The approach to this programme pioneered by Sutton has been identified for wider implementation in the Mayor of London’s second domestic violence strategy. Sutton is acknowledged in the consultation as having the experience and expertise to enable the programme to be rolled out across all 33 London boroughs. The challenge for Sutton now is managing the dissemination of the learning, as Linda notes: ‘we are committed but it can’t be to the detriment of delivery here’.