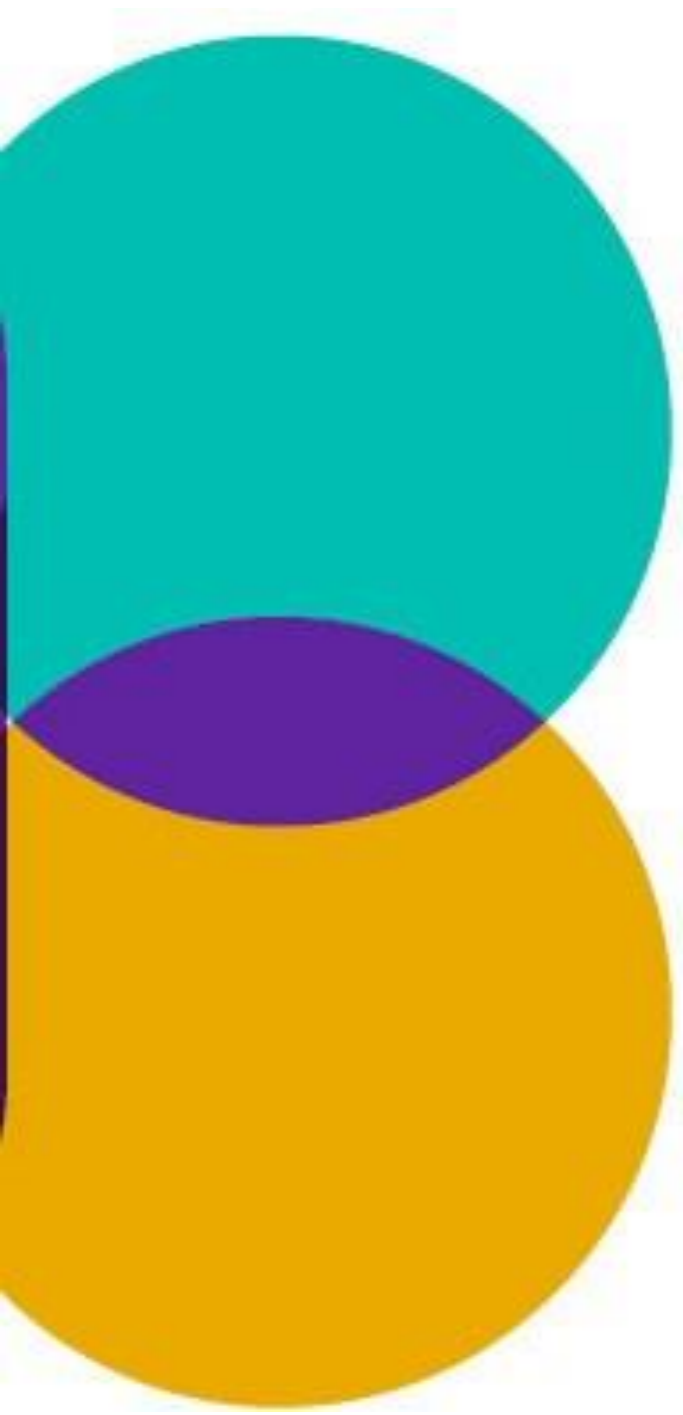


Bringing an end to domestic abuse and creating the best start in life for the baby



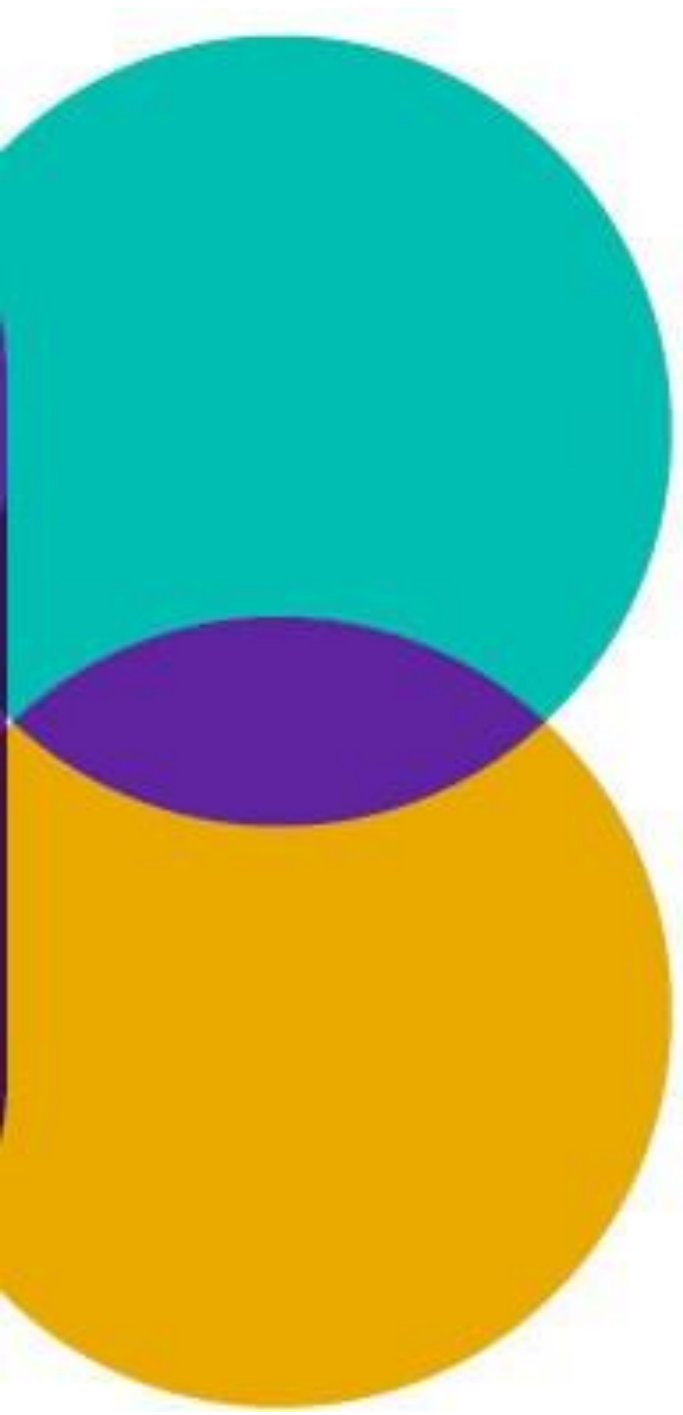
Ged Docherty
Team Manager
For Baby's Sake
Blackpool

For Baby's Sake; Beginnings



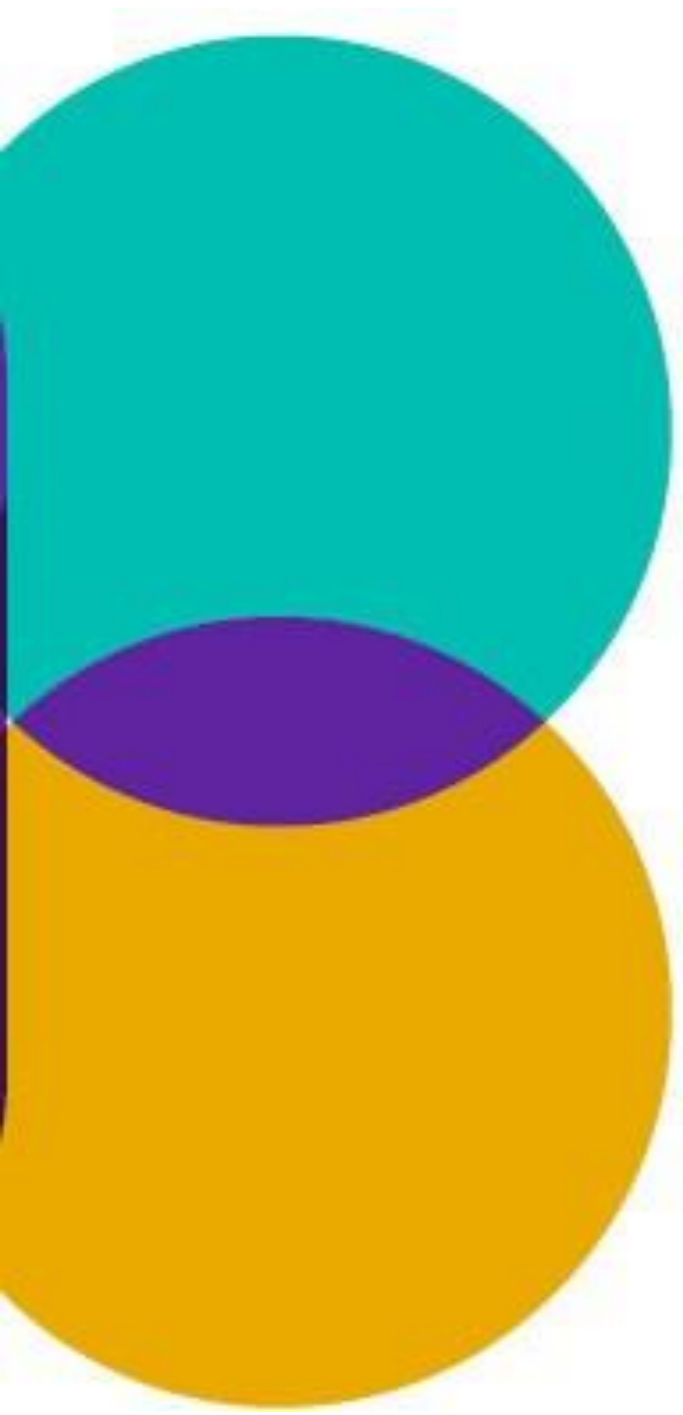
- The creation of the model was the culmination of over ten years of investment and learning by The Stefanou Foundation (now For Baby's Sake Trust since August 2020) .
- Initial two diverse prototype sites created in Stevenage and London Three Boroughs in 2015
- The success of the model led to expansion to create a collaboration with the Local Authority in Cambridge in 2019 followed by the expansion North with the creation of the Blackpool Team going live in January 2020

Why Blackpool?



- **Strategic collaboration between Blackpool Better Start; The For Baby's Sake Trust and Blackpool Council.**
- **Consultation with the community and wider partners evidenced the need for a holistic evidenced based programme to tackle the issue of Blackpool children being exposed to domestic violence.**
- **Department for Education figures for 2018/19 showed that 3,635 children in Blackpool were deemed to be in need of some level of support.**

Why Blackpool?



32% of those children were made subject to a child protection inquiry and this was an increase from the previous figures of 22% steadily increasing since 2010.

Domestic violence was the most common concern for children and was mentioned as a causal factor in 57% of social work assessments undertaken.

Domestic abuse is one the town's largest problems and Blackpool continues to have the highest rates of DVA nationally.

Research identified the need to have a systemic approach to prevention and reduction which is multi agency and collaborative in its approach.

Why For Baby's Sake?

- **A key priority for the For Baby's Sake Trust is to protect babies who are vulnerable and have no voice.**
- **Available evidence informs that domestic abuse experienced within the critical first 1001 days of life profoundly affects long-term life chances – specifically health outcomes**
- **To create a lasting solution via a new 'whole family' approach, harnessing the motives of both co-parents – breaking inter-generational cycles of abuse and harm within families**



For Baby's Sake- The team

- **1 Team Manager**
- **4 Practitioner's**
- **1 Programme Officer**
- **Access to expert advice and guidance via the Therapeutic Lead and wider For Baby's Sake Trust**
- **On-going thematic training opportunities to underpin professional development and thematic service delivery**



***For Baby's Sake* Blackpool Referral criteria;**

- **Around first 28 weeks of pregnancy**
- **Both parents have to be willing to participate in the programme and consent is secured**
- **Parents aged 17 at the point of delivery**
- **Available evidence of the beginnings of a willingness to change**
- **Acceptance of DVA being present in the relationship; can be bi-directional or in past relationships**



For Baby's Sake Blackpool

Referral pathway; 'One door' approach

- Telephone consultation with the Team Manager
- Email enquiries
- Referral form
- Attendance by Practitioners at Team meetings or thematic events to share information
- Multi-agency collaboration; 'the ripple effect'



Why (and how) to work with parents who are abusive

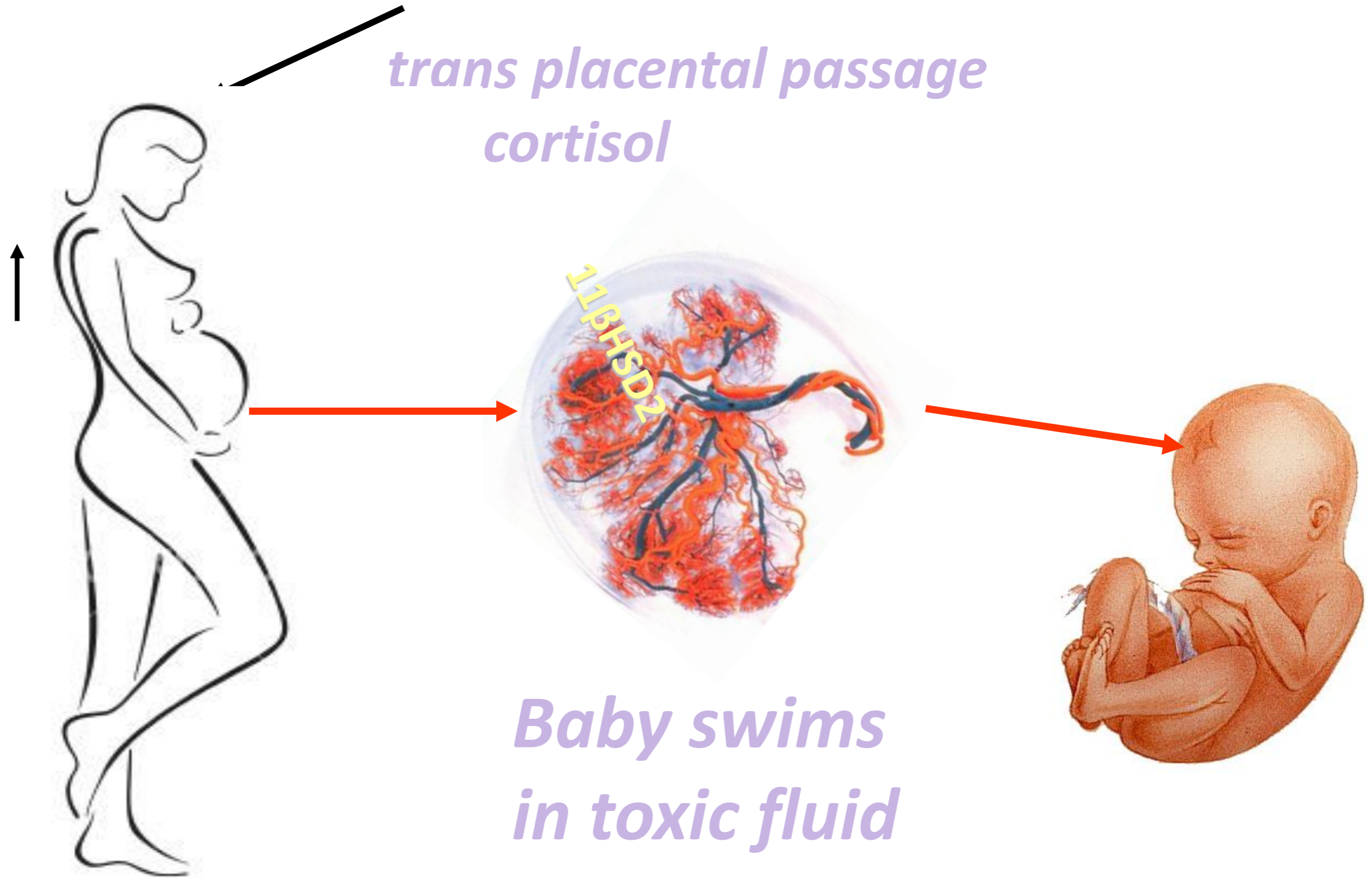
- Recognise that 'one size' approach will not fit all
- Recognise the differing levels of need, trauma history, risk and motivation/capacity to change.
- Recognise the impact of shame and guilt
- Recognise that the trauma informed and non-judgemental approach is crucial to supporting and maintaining sustained change
- Resisting the 'Righting Reflex'; the desire to fix can cause us to lose our capacity to paying attention to ambivalence



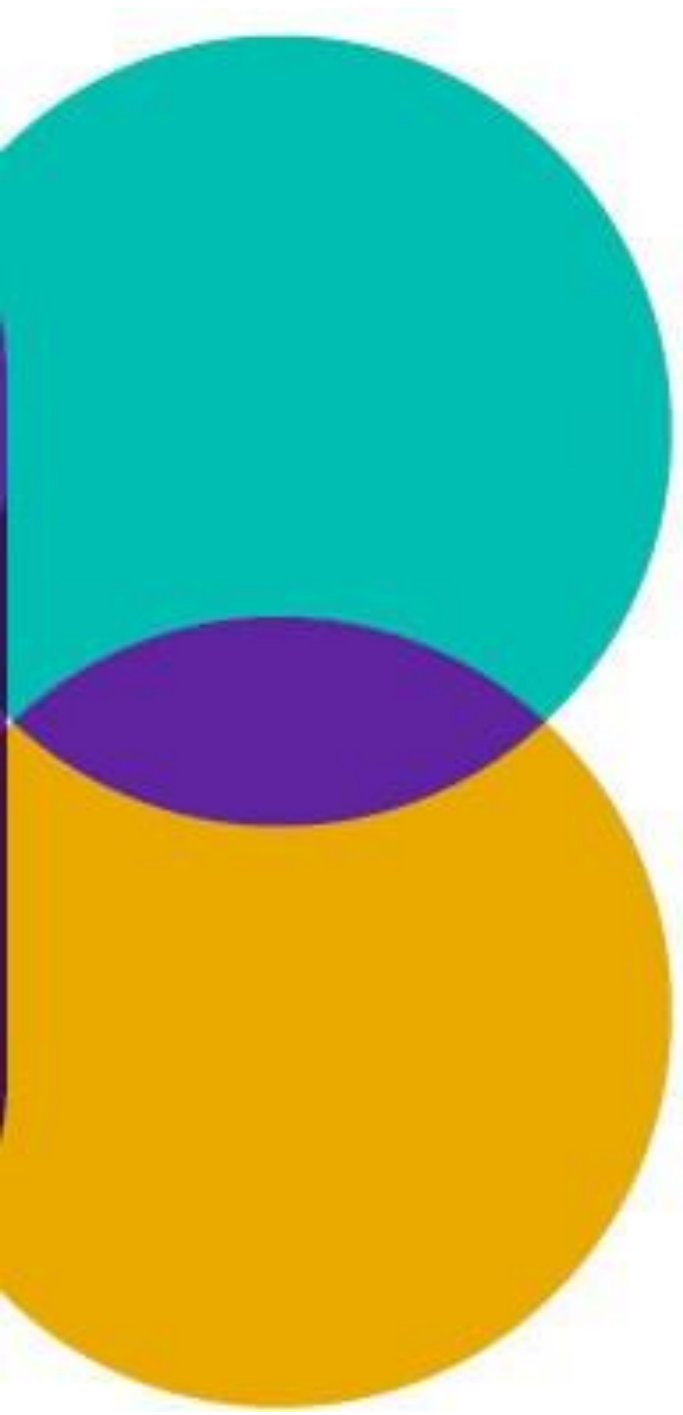
Domestic abuse - impact on the Unborn baby

Maternal stress/anxiety/mental illness

*trans placental passage
cortisol*

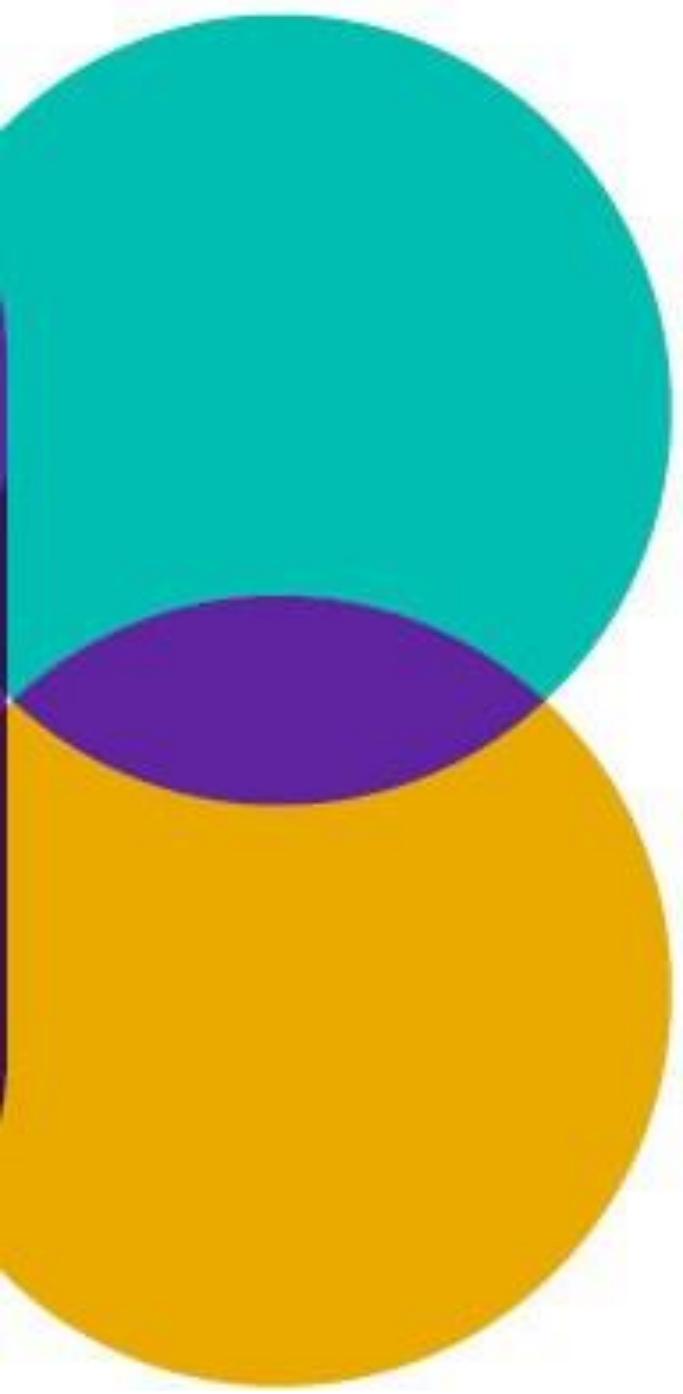


Domestic abuse – the impact on children



- Overall anxiety and worry
- Separation anxiety
- Excessive worry about their own safety and the safety of the non-abusive parent
- Sleep problems, nightmares, difficulty with concentration
- Increased hyperactivity/anger/aggression
- Withdrawal, low self-esteem and reduced confidence

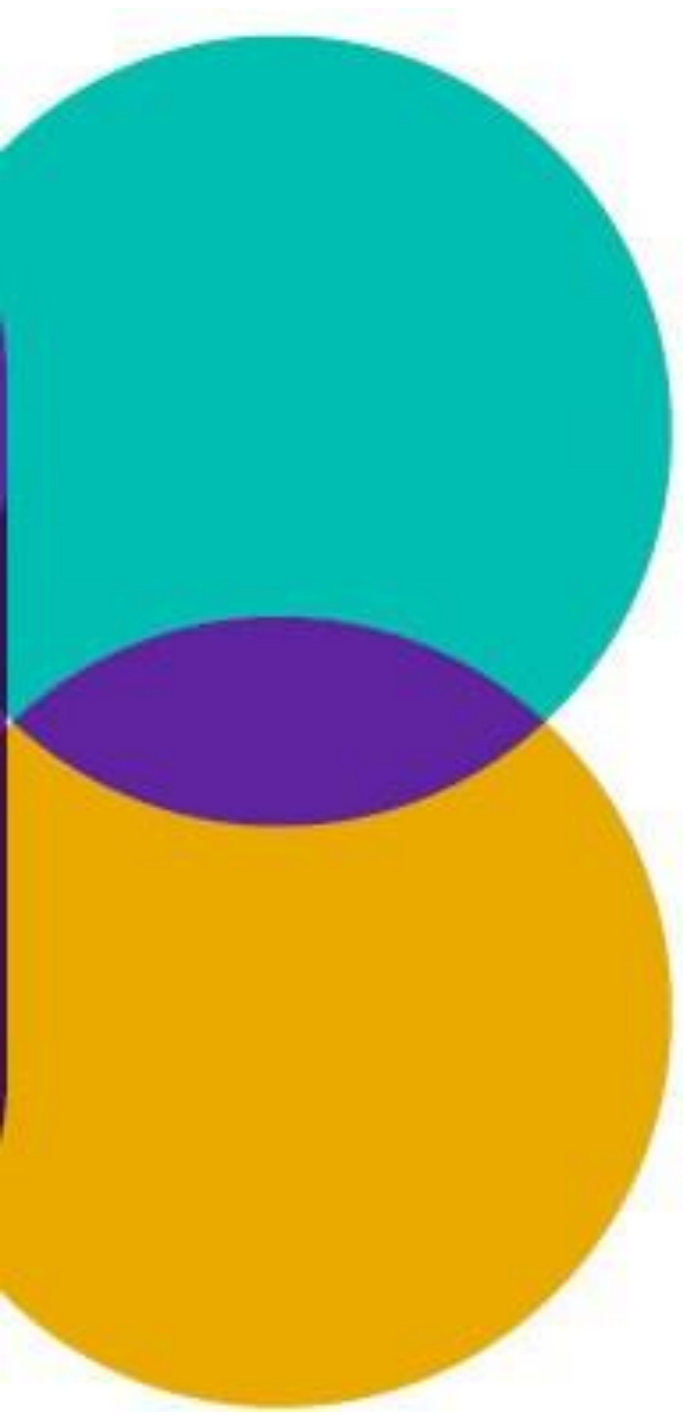
Potential longer term effects on children

- 
- Emotional difficulties, behavioural problems
 - Physical health problems
 - Trauma-related symptoms (hypervigilance, psychological numbing, withdrawal)
 - Research findings show ; a quarter of children exposed to domestic abuse continue to exhibit abusive behaviours long after the exposure to that abuse has ended

Safety first; risk management strategies

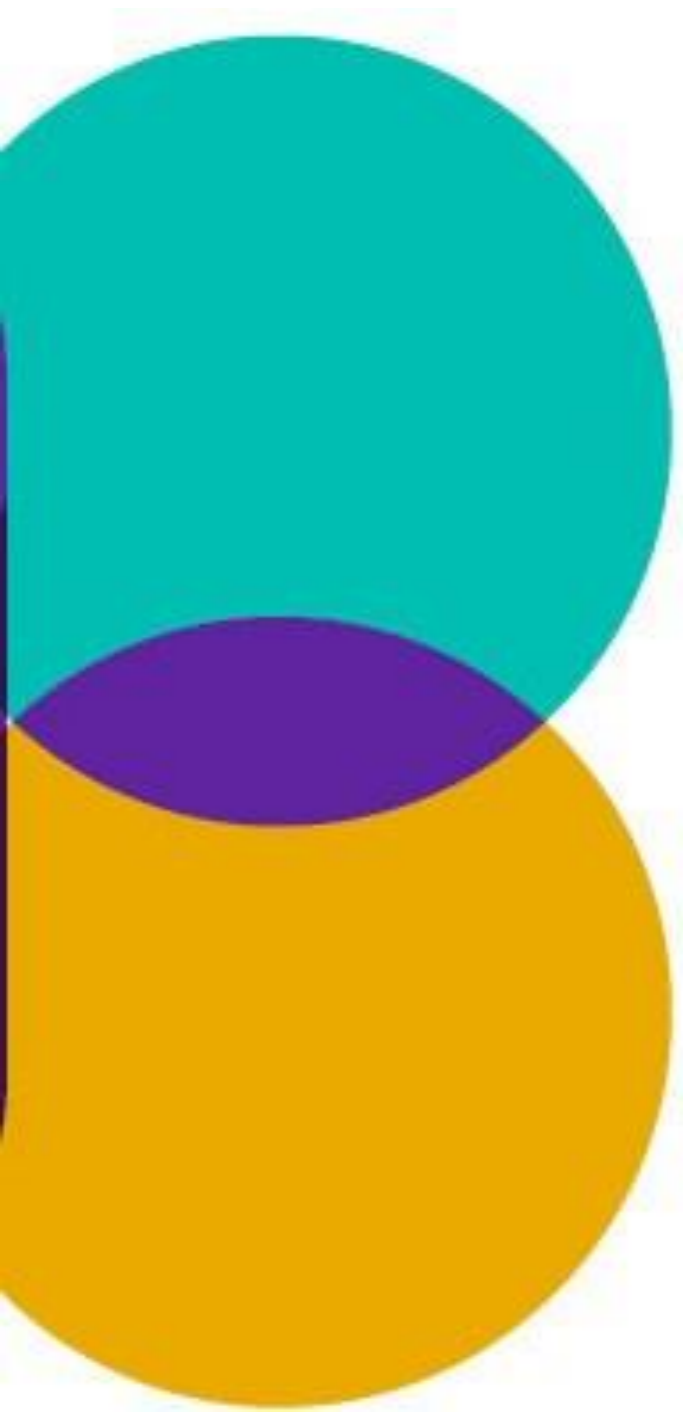
- Safeguarding is our priority
- Assessment of needs, risks and progress throughout their journey
- Regular individual supervision and case management
- Use of local authority case management systems
- Using SARA-V3 as our risk assessment framework – fits with our holistic and integrated model
- Participants trust practitioners, value this relationship

Parallel Therapeutic Approach



- Whilst Practitioners are not qualified Therapists they have undertaken thematic training with a qualified Therapist , in addition to access to sector experts.
- All practitioners understand and adopt therapeutic approaches to support, applying the concepts of empathy, active listening, congruence, reflection and unconditional positive regard in every interaction with individuals/couples/families.
- This has the potential of establishing and maintaining meaningful relationships that maximise the possibility for lasting and sustainable change.

Trauma Informed Practice Approach



- Traumatized people often perceive services to be unsafe, disempowering or invalidating
- Services should be encouraged to acknowledge people's strengths and resilience in the face of adversity ; *Blackpool Families Rock* strengths based model of practice
- Services could shift from entrenched perceptions to approaches which accommodate vulnerabilities and sensitivities of trauma
- Utilise the strengths of a relationship based practice approach to drive work forward

Trauma Informed; our response

- Feelings are validated, encouraging an understanding of the trauma the individuals have endured and its impact on their sense of self in the here and now
- *'we see you; we hear you'*
- This approach, offers participants a unique pathway to overcoming their unresolved trauma via the inherent congruence in the relationship
- With the right interventions trauma has the potential to be resolved and repercussions on future generations are minimised

Attachment Focused Parenting

Children experiencing DVA in their homes will likely present with disorganised attachment styles and *For Baby's Sake* seeks to ensure that a secure attachment becomes the reality for all of the babies supported by the service.

The team make use of thematic resources –

- **NBO; Brazelton Newborn Baby Observation checklist**
- **Alberta Wellness concepts; brain training/serve and return**
- **VIG; Video Interactive Guidance, capturing those 'better than average moments'**

Opening up difficult conversations

**TRAUMA COMPROMISES OUR
ABILITY TO ENGAGE WITH
OTHERS BY REPLACING
PATTERNS OF CONNECTION
WITH PATTERNS OF
PROTECTION.**

STEPHEN PORGES





7 tips for difficult conversations

- Build positive relationships
- Prepare carefully
- Choose an effective location
- Stay open
- Get to the point quickly
- Turn to the future
- Generate options that change trajectory

Affirmations; consider a persons strengths and how affirmations can facilitate or support self efficacy.

...difficult conversations

- *Ask key questions and listen and respond meaningfully to the answers; consider how the individual may respond emotionally*
- *Ask ‘what has happened to you?’ not ‘what is wrong with you?’; a truly trauma informed approach*
- *Think family and ask – ‘what does this parent / carer need right now to make them feel safe?’ – support them to identify and build their own capacity to self-regulate; breaking cycles.*



...difficult conversations; points to consider

- *Ask for yourself*; what do I need as a practitioner to feel confident and comfortable enough to work in a trauma-informed way
- *Consider individual need*; is my approach totally inclusive
- *Acknowledge your own anxiety* ; and its potential impact on your communication style. Think of how your body responds to conflict.
- *Be trauma informed*;

‘Applying trauma informed principles to people who haven’t experienced trauma results in zero negative consequences. Failing to apply those principles to people who HAVE experienced trauma can be enormously destructive’

Think Dad...think co-parent

Think Dad...

- Pregnancy and childbirth can pose an increased risk of tensions and conflict, which may then lead to incidences of domestic abuse. Alternatively, pregnancy and childbirth may also present a critical opportunity to engage men via a transformation model towards more caring concepts of masculinity
- Fathers' involvement in caring for their partners and children enhances the wellbeing and development of children as well as impacting positively on parents and their relationship.
- Working proactively with fathers supports us to better understand how their behaviour can have positive or negative impacts on their children and can be crucial to children and mothers' physical and emotional safety and wellbeing.



Think Dad...

- There is ample evidence from all over the world that engaged fatherhood has a positive impact on boys and girls – and the future relationships they will have as adults. Girls are more empowered, and boys are more likely to believe in gender equality.
- Wanting to be a good father and reducing the adverse effects of harmful behaviour on their children are some of the most important motivators for men who seek help. Unfortunately, most services involved in pregnancy, childbirth and early education fail to engage fathers by offering intervention specifically designed for them and to address DVA/IPV.



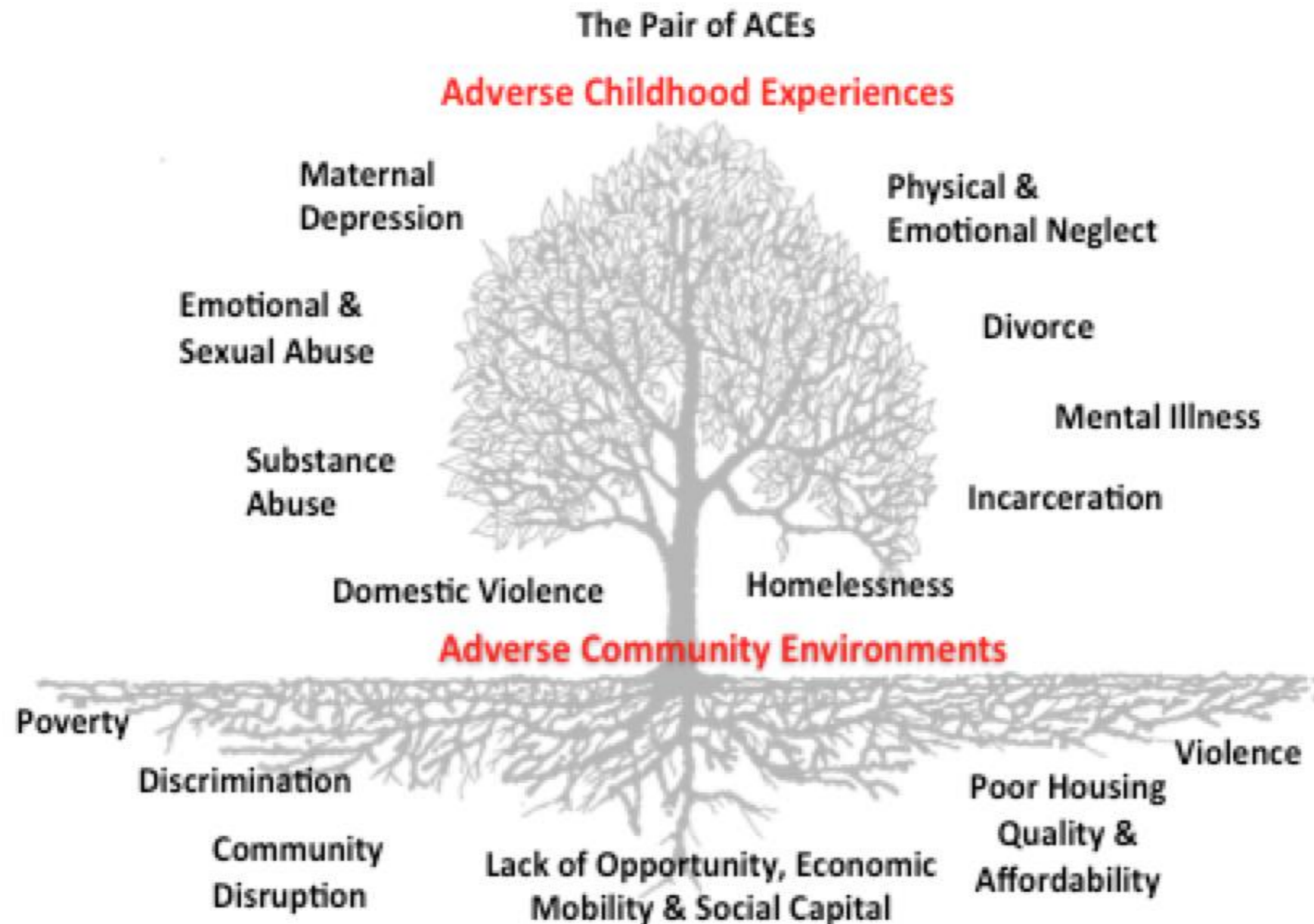
Think Dad...

- Many fathers feel that they would not find traditional perinatal support helpful or useful, as they believe these services are developed 'keeping mothers in mind'.
- Fathers seemingly continue to feel overlooked by maternity and family support services around the birth of their child and during the postnatal period, which can often create feelings of helplessness and isolation.

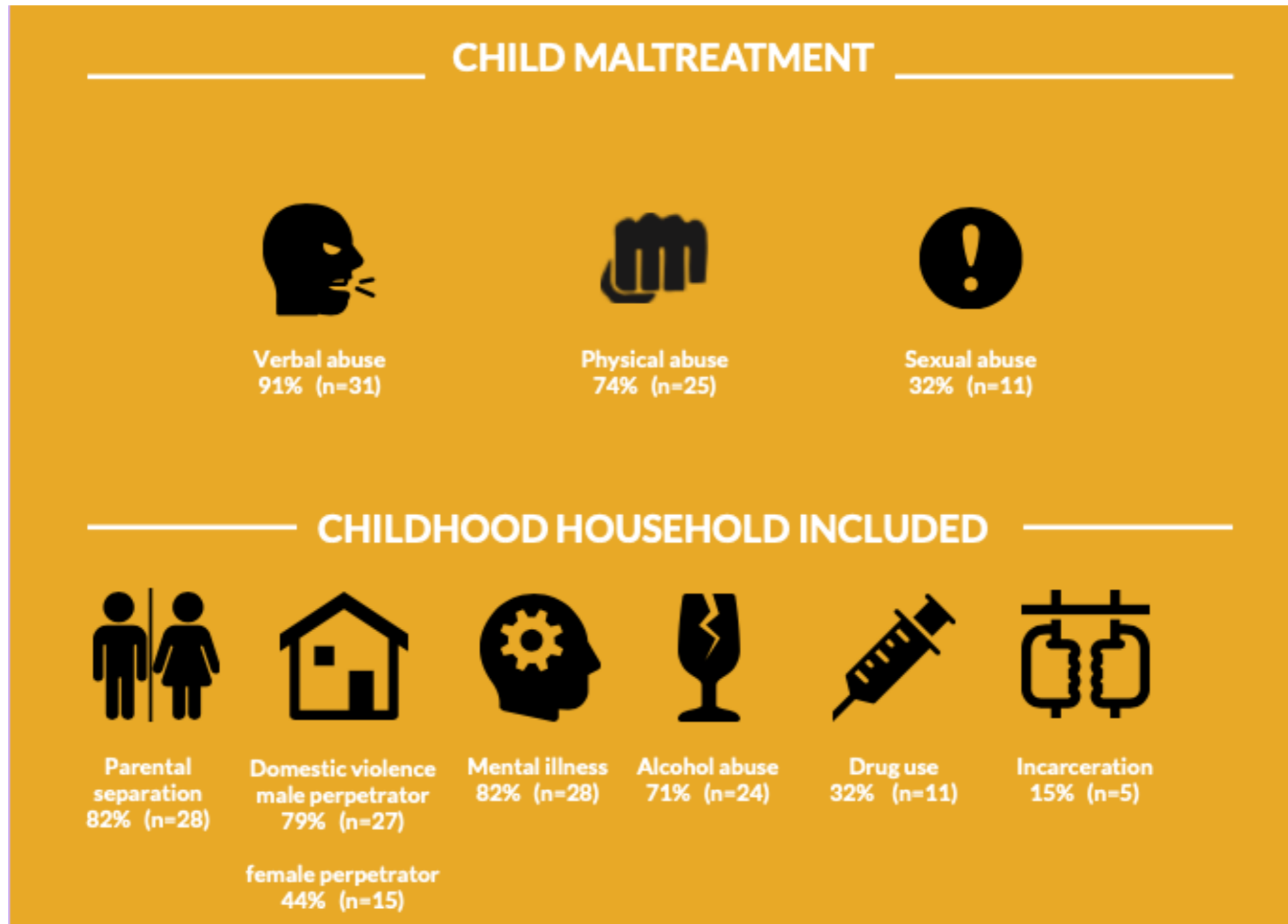


ACE's and our Parents

Adverse Childhood Experiences



Adverse Childhood Experiences (ACEs) of co-parents currently engaged

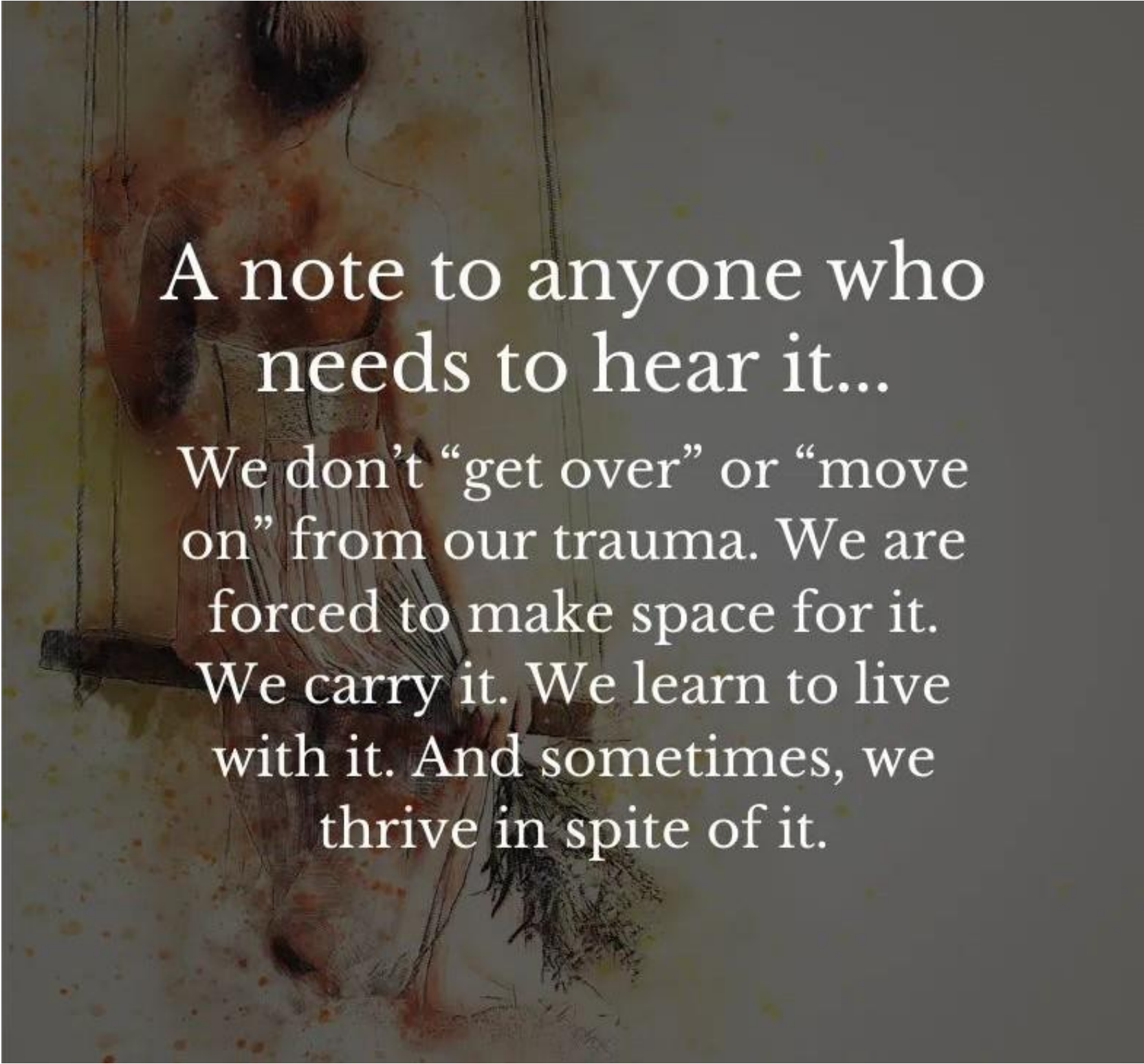


Exploring Adverse Childhood Experiences

- **Guilt and Shame; not talking about ACE's may send the wrong message to parents that they should be ashamed of their childhood experiences.**
- **Creating safe spaces for the sharing of personal histories is a significant part of the healing process**
- **It is incredibly empowering for parents to be able to process their own feelings. Self-regulation by adults is the first step to supporting their children self-regulate as a means to reducing anger and conflict**



Reflections



A note to anyone who
needs to hear it...

We don't "get over" or "move
on" from our trauma. We are
forced to make space for it.
We carry it. We learn to live
with it. And sometimes, we
thrive in spite of it.





**Thank you; time for
questions**