



Bristol Health and Wellbeing Board

Title of Report:	Pause Bristol
Author (including organisation):	Anna Smith, One25
Date of Board meeting:	27.1.21
Purpose:	Decision

1. Executive Summary

The main purpose of this paper is to outline the purpose and benefits of Pause Bristol and for the board to support the approach and identify possible funding streams. Funding is not secured beyond 2021

2. Purpose of the Paper

To inform the board about causes, aims and outcomes of the Pause Bristol programme and develop a funding relationship to secure the futures of women who have suffered the trauma of permanent removal of their children.

3. Background and evidence base

Since June 2018, One25 has been running Pause Bristol. The overall mission of Pause is to prevent the damaging consequences of children being taken into care. It is a national programme of 18 months' support, for 20 women who have had two or more children permanently removed. It is delivered by a team of five, a lead, a coordinator and three Pause Practitioners who work intensively with a caseload of 7-8 women over the time, building trust and working one to one, to support her to meet goals she sets. These may include, registering with a GP, getting fit, writing a letter to their child, reducing drug addiction or attending group work. Group work for the women is held weekly and is usually an activity. In the past this has included skating, the cinema, or making cards. The group work builds confidence and allows women to spend time with others who have had similar experiences without the stigma and shame they feel as women and as mothers. Integral to the programme is the agreement that women will chose some form of Long Acting Reversible Contraception (LARC) to prevent pregnancy for the duration of the programme and often beyond.

Pause was founded by two senior social workers in East London, who were passionate about filling a gap that they observed, the lack of support for women once their children were removed. As one head of children' services in London put it to us "*Basically we take away their children and then drop them*". As well as disengaging from all services, this leads to long lasting trauma for mothers and poor relationships with children taken into care. We are also failing to work with the circumstances which led to permanent removal. This leads to further birth and removal.

The women do not get any other support with this traumatic experience and 65% battle with addiction, many are suicidal when we engage with them, 91% struggle with poor mental health, much of which is undiagnosed, 100% experience domestic and sexual violence. By working to engage

and support women, many of who are totally alienated from services, we aim to support them to set goals for themselves work with the issues that led to their children being removed.

The programme supports City Plan Health to reach the following goals

83: 30% more people living in the most deprived wards will be doing more than 30 minutes' physical activity per week compared to 2020 - Pause women have very poor physical health and often set themselves goals of getting fit or joining a gym. We often start walking with them.

90: Citywide action to ensure the Adverse Childhood Experiences (ACE) model is embedded across Bristol's statutory organisations and trauma informed practice is commonplace – Pause works to prevent the birth of children who may be removed and also to improve mothers' contact with children

103: Reducing the gap in life expectancy - premature deaths are very high amongst women eligible for Pause. A scoping exercises in 30 areas in the UK noted that 233 women had died between their children being in care. They were 36 times more likely to die than women their age

137: Following successful implementation of the Bristol Drug and Alcohol Strategy 2020-2024, everyone will have the right to a healthy life safe from the harms of alcohol and other drugs – reducing drug use, detox and rehab, are often goals and achievements of women on the programme

482: Bristol is a city of no social isolation and loneliness is no longer a systemic challenge in the city - the women Pause works with are profoundly socially isolated both from support networks and from services. Many do not have healthy relationships with families or friends and do not have a GP

516: Bristol will be a zero suicide city – Pause women have very poor health and are often suicidal

533 Bristol will be a city free from domestic abuse and gender inequality – all of the women Pause Bristol works with have experienced domestic abuse, many are in very abusive relationships.

From the **Health board** we note that 56% of Bristol's population is overweight or obese – this is reflected in a high number of the women we work with. Often their goals including getting fit.

From the **JSNA**: data shows 15% have “below average mental wellbeing”, rising to 20% in the most deprived areas. – poor mental health is a key issue for Pause women. References are all listed below

4. Community/stakeholder engagement

Pause has developed excellent relationships with external partners through presentations, ongoing referrals and through two boards run by the programme: The Pause Operational Board and the Pause Strategic Board. These problem solving forums, have both interrogated the programme and built in system change processes to improve the way it works. They include partners in a non-exhaustive list:

- The police
- Bristol Drugs Project and ROADS
- SARSAS – sexual violence support
- Bristol council Children's Services
- Unity Sexual Health

- Social care
- Housing

Pause national also attend these meetings; this links us with the national Pause programmes and good practice. Our profile and involvement in strategic groups, means One25 is integral to city plans. We are, for example, currently involved in discussions with Bristol Council and Golden Key about the delivery of the Changing Futures bid, submitted as an EOI on 21.1.20. If successful, this will bring £1.5-4 million into the city, to work with people with complex needs. Our active partnership building, involvement in research and our other services, complement and add value to Pause.

5. Recommendations

We are proposing a partnership with the health and wellbeing board in supporting the continuation of funding for Pause and the outcomes for the women on the programme. We recommend that the Board supports the approach and identifies possible funding streams.

6. City Benefits

The programme benefits the support of mothers as a member of communities in the city who are otherwise marginalised and left alone to deal with their trauma. Whilst they are often invisible and so not of concern, this means that women then present in crisis at services. By not supporting and intervening through the provision of Pause, we delay and increase a cost to the city.

Each programme prevents pregnancies which would otherwise result in the removal of babies at birth. An in-depth calculator used as part of the evaluation of the national programme, projected for our first cohort, that the programme prevented 14 pregnancies. Without Pause, it is almost certain these pregnancies would result in women not being able to keep these children in their care.

The National Pause evaluation states in its summary that the impact of Pause is *“positive change in women’s lives, meeting longstanding unmet health and welfare needs and addressing significant histories of trauma and adversity... The costs of intervention are significantly offset by savings to the public purse. There are also benefits to the children who have been removed, leading to improved contact with their birth parent and improved relations.”*

7. Financial and Legal Implications

Pause costs £360K to run annually but saves double this cost in child proceedings alone. The national evaluation of Pause established that for every £1 spent, £4.50 is saved in child protection processes. This is likely to be much higher when other costs are factored in: visits to A&E, drug crisis services, arrests, time in prison and evictions, all of which are reduced by the programme.

8. Appendices - References

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/932816/Pause - Sussex.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/932816/Pause_-_Sussex.pdf)

<https://www.bristol.gov.uk/documents/20182/33379/Bristol+Health+Needs+-+A+highlight+report+2020.pdf/cbf6006d-139b-472e-8d1c-ae9beb7e1156>

<https://www.bristol.gov.uk/documents/20182/4611852/JSNA+2020+-+Mental+Wellbeing.pdf/403345dd-946b-32b5-9929-c9c1b3a50bce>