Pregnancy/Sexual Advice services

One area which was well documented in submissions was pregnancy. We received a report on a six month project conducted at Luther Street Medical Centre in Oxford which examined the reasons behind high unintended pregnancy rates amongst young women living in homelessness services, and considered reducing the health inequalities in access to contraception in this group of women.

The Health Inclusion Team and Sexual Health Outreach Team (both part of Guys and St Thomas' community services) were highlighted for the work they have been doing at St Mungo's South London Women's hostel to provide sexual health interventions and support for women who become pregnant. This includes working with the specialist midwifery teams and local hospitals to try and give the women and the unborn child the best opportunity to stay healthy and ideally together. Similarly CLASH @ St Mungo's (Central London Action Sexual Health) is a dedicated outreach service based in Camden at three St Mungo's hostels. This includes support to prevent unwanted pregnancies, and health advice to women if they do become pregnant.

Children visiting supported accommodation

The way 'single homelessness' services are run can, in themselves, be a barrier to contact with children or family. Safeguarding is, of course, the priority but many projects assume a blanket ban on child visits is needed when it may not be. St Mungo's North London Women's Project has arranged safe visits to the hostel for children, in a friendly open room. One practitioner at our conference suggested that we need a "pan-London approach to accommodating women in places they can host visits from children."

A resident from St Mungo's Haringey services suggested:

"Homelessness and housing projects could do more to support contact. The key is looking at visitor policies and residents being able to have family to visit them and even stay over."

"Women should be supported to go and meet their children, including help with budgeting and travel fares." Resident, St Mungo's Birkenhead Street Hostel

Thank you again to all who submitted

If you would like to view all the submissions in full for this theme, please visit **www.rebuildingshatteredlives.org** and click on the 'Children and Families: Improving Support' theme.

The site will also include details of the forthcoming roundtable event which is being hosted by Action for Children. The event will be exploring this theme in more detail and discussion will help inform the campaign and be submitted as evidence.

The fourth theme of the Rebuilding Shattered Lives Campaign — **'Substance Use: Helping women with drug and alcohol problems'** — is now open for your submissions of opinions, good practice and innovations. Find out more about the theme and get involved at **www.rebuildingshatteredlives.org**

St Mungo's will continue collecting contributions during 2013, and then use this robust and dynamic evidence base to campaign for services for women to be the best that they can be.

Dame Clare Tickell, Chief Executive, Action for Children

St Mungo's, Griffin House, 161 Hammersmith Road, London W6 8BS Tel: 020 8762 5500 Fax: 020 8762 5501 www.mungos.org

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Dame Clare Tickell, Chief Executive, Action for Children

Introduction

I would like to begin by thanking everyone who submitted views or good practice examples to this theme.

St Mungo's Rebuilding Shattered Lives campaign aims to identify how we can get the right help to women, at the right time. It is brilliant to be part of this piece of work because it has provided us with a unique opportunity for different organisations to come together as a broader coalition to investigate the very complex issues around women's homelessness.

The campaign is looking at these issues from a number of different perspectives and it is inspiring to see the breadth and diversity of responses on the topic of women's relationships with their children and families.

My hope was that this call for evidence would help inform a national debate on the needs of vulnerable women and their children and, importantly, identify solutions about how we can collectively break intergenerational cycles of deprivation and neglect. It has been very heartening to see the many and varied responses highlighting innovative practice and new ideas, as well as the concerns and gaps in provision where further work is needed. Hearing from practitioners and women themselves about their experiences, it is clear that many feel they are not well informed or supported on issues such pregnancy, parenting or care proceedings.

At Action for Children we believe the best way to improve the outcomes for children and young people is to intervene early. This means working with mothers and their children to break cycles of deprivation. We know that effective professional relationships with vulnerable parents, which recognise their skills and abilities, can help them to achieve their potential. Along with many other organisations we have shared our research and best practice, I hope this can now all be brought together to support better resources and information sharing between sectors.

Dame Clare Tickell, Chief Executive, Action for Children





Tanya English, Executive Director of Fundraising & Communications, St Mungo's

St Mungo's welcomed the opportunity to co-host a conference, Getting it Right for Women Rough Sleepers during this theme. The conference, on 22 November, looked at what leads women to sleep rough in the UK and across Europe. Professor Kate Moss from Wolverhampton University presented her research as part of the Women Rough Sleepers Who Suffer Violence project – a project funded by EU DAPHNE.

Families and children was a strong theme on the day. Professor Moss explained that: "In our research to date, issues related to motherhood and children have come out as extremely important for women rough sleepers. In the UK, 65% of women interviewed had children who were not currently in their care'.

Tanya English, Executive Director of Fundraising and Communications, St Mungo's

Summary of Submissions

Understanding between sectors

It is unusual for the groups who have submitted information to come together – from women's organisations to housing and homelessness groups to children's organisations, and we are delighted that the campaign has facilitated this. It has shown a common concern for vulnerable women and their children, bringing differing perspectives on how the best outcomes can be achieved.

We received submissions from homelessness practitioners and women themselves who felt that women experiencing homelessness are not given a fair chance to keep their children by social workers or courts. A specialist outreach worker from Street Talk, a charity which provides mental health care to women who are trapped in street based sex work or victims of trafficking, explained that: "In my experience, Women's housing situations are used against them when it comes to custody of children. Social services frequently use 'having no appropriate housing' as a reason why children should be removed."

A client attendee at St Mungo's Birkenhead Street Hostel Women's Event suggested that:

"With social services, women should be treated better than they are now, they need more support."

However, we also received a submission from a child protection consultant and trainer who outlined types of neglect and the importance of protecting children, suggesting that too much attention can be given to the carer and not the child in neglect cases:

"It would be quite wrong to state that homelessness = neglect, just as it is wrong to state that poverty = neglect but just as there is a correlation between poverty and neglect, there is also a correlation between homelessness and neglect...From serious case review data the evidence seems to be that professionals feel compassion for the primary carer, who is neglecting their child but may very well be doing their best, usually in very difficult circumstances. Our attention is diverted away from the child and our focus in on the primary carer and how we can support them."

These are quite contrasting viewpoints which highlights there would be benefit from more cross sector knowledge sharing, working and understanding of priorities on each side. All professionals are working to the same aim of positive outcomes for the mother and their child. As one practitioner at our *Getting it Right for Women Rough Sleepers* conference highlighted: "Services are not joined up: one service supports a mother and another service supports a child."

Access to drug and alcohol treatment

Practitioners who focus on child protection such as children's social workers have a duty to intervene if they feel that drug or alcohol use is affecting a woman's ability to parent their child. This does not always mean permanent separation, however, if they are able to access treatment and support.

A theme that arose in submissions was women being separated from children because they were unable to access drug or alcohol treatment quickly enough, or with their child:

"It would be better if more women had a chance to go to rehab and when they come out see their child and be reconnected. Instead often the child has already been adopted."

Resident, St Mungo's Birkenhead Street Hostel

"The fact that there are only two rehabs in the country that will accommodate women together with their children also stands against them in court cases. While a woman is in rehab that is another six months where they are not having custody and often they are somewhere far from home and not able to keep up visits. Those who stay with their child in rehab are much more likely to keep custody."

Specialist outreach worker, Street Talk

From the evidence provided, it is clear effective drug and alcohol support for women is a key area that practitioners in all fields need to work together on, to ensure women receive the support and advise they need earlier, preventing the harm on them, their children and future children. When substance use is involved at the point of pregnancy, all efforts should be made to keep mother and baby healthy and accessing support. The British Association of Social Workers (BASW) guide on alcohol, families and children was highlighted in submissions as a useful resource which encourages a better understanding of the situation faced by mother/parent and child:

Access to housing / mother and baby accommodation

We received one submission from a mother and baby accommodation project for young homeless women, Covenant House Mother and Child Programs, based in the USA. Many respondents highlighted that there is a lack of this type of provision in the UK, and that if there was more, more homeless mothers would stay with their children.

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Theme round up

Reunite submitted information on their innovative project for women leaving prison to access parenting support and be reconnected and access housing with their children.

Bereavement or after adoption support

"Loads of women don't hold it together if they lose their children. They need more support and an opportunity to talk about it."

Client attendee at St Mungo's Birkenhead Street Hostel Women's Event

We received useful submissions from agencies which provide support to women going through adoption proceedings, trying to establish contact or who have lost children, including Norcap, After Adoption and MATCH (Mothers apart from their children).

Family Support

We heard from a range of family support organisations, such as Family Lives and Family Action who help prevent homelessness though their advice and support. Also Adfam, who focus on families affected by substance use, and DPPI who support disabled parents – both of great relevance to this campaign.

Action for Children submitted various research and guidance documents on early intervention and family support. The intensive family support model has a robust evidence base which shows this intervention can keep children out of care, prevent anti-social behaviour and support vulnerable families who are at risk of becoming homeless.

https://docs.google.com/a/avaproject.org.uk/file/d/0B9C9QbSc8ON8SHNOem9jSXRhLUU/edit?pli=1