











Merseyside Violence Reduction Partnership 2020-21 - support programmes for families of offenders

Sally-Ann Ashton, Zara Quigg

# Merseyside Violence Reduction Partnership 2020-21 – support programmes for the families of offenders

Sally-Ann Ashton<sup>1</sup>, Zara Quigg<sup>2</sup>

<sup>1</sup> Applied Health, Social Care and Medicine, Edge Hill University, <sup>2</sup> Public Health Institute (PHI), Liverpool John Moores University (LJMU), World Health Organization Collaborating Centre for Violence Prevention

May 2021

For further information contact Zara Quigg z.a.quigg@ljmu.ac.uk

# About this report

Merseyside is one of the 18 areas allocated funding in 2019 by the UK Government to establish a Violence Reduction Unit. To inform the continued development of the Merseyside Violence Reduction Partnership (VRP), in November 2019 (Quigg et al, 2020) and July 2020, the Merseyside Academics' Violence Prevention Partnership (MAVPP)¹ were commissioned to evaluate the MVRP as a whole, and selected work programmes. This report forms one of a suite of outputs from this evaluation work programme, and specifically presents an overview of two VRP funded interventions to support family members of offenders, to inform future programme monitoring and evaluation. Additional reports for 2020/21 explore:

- The overall development and implementation of the VRP (whole system evaluation; Quigg et al, 2021);
- The Mentors in Violence Prevention Programme (Butler et al, 2021);
- The VRP Data Hub (Lightowlers et al, 2021); and,
- The 'new' VRP Sports, Arts and Culture work programme (Hough and Quigg, 2021).

Evaluation outputs are available on the Merseyside VRP website: <a href="www.merseysidevrp.com/what-we-do/">www.merseysidevrp.com/what-we-do/</a>

# Acknowledgements

We would like to thank the following people and organisations for supporting the Merseyside VRP evaluation:

- The evaluation funders, Merseyside VRP.
- Members of the Merseyside VRP team, wider partners and programme implementers who supported evaluation implementation.
- Violence
  Reduction
  Partnership
- All study participants who took part in surveys, interviews and workshops.
- The wider MAVPP evaluation team for advising/supporting study development and or peer review: Rebecca Bates, Hannah Timpson, Matthew Millings, Jennifer Hough, Carly Lightowlers and Nadia Butler.

<sup>&</sup>lt;sup>1</sup> MAVPP includes academic representatives from all Merseyside universities, who represent a range of disciplines including public health, criminology, policing and psychology.

# **Contents**

1. Introduction	1
2. Partners of Prisoners (POPS) Merseyside Family Support Programme	3
2.1 Programme aim and delivery	3
2.2 Service users	3
2.3 Recruitment and retention	3
2.4 Current evaluations/feedback	4
3. Time-Matters UK Ltd (TMUK) Stronger Outside Programme (Family Support)	6
3.1 Programme aim and delivery	6
3.2 Service users	6
3.3 Recruitment and retention	6
3.4 Current evaluations/feedback	7
4. Key considerations for future evaluation and recruitment	8
5. References	9

# 1. Introduction

Interpersonal violence is a global public health issue, with severe consequences for individuals' health and social prospects across the lifecourse (WHO, 2014). In addition to these individual impacts, violence affects families, communities and wider society, placing significant burdens on public services including health, criminal justice, social services and other sectors. Internationally and across the UK, there is growing recognition of the advantages of adopting a public health approach to violence prevention which aims to promote population level health and wellbeing by addressing underlying risk factors that increase the likelihood of violence, and promoting protective factors. In 2018, the UK Government published its Serious Violence Strategy, encouraging a multi-agency, whole system public health approach to violence prevention (Home Office, 2018). To support local areas to adopt this approach, various measures were implemented, including provision of funding to Police and Crime Commissioners (PCC) in 18 areas to set up a multi-agency violence reduction units (VRU) bringing together police, local government, health, public health, community leaders and other key stakeholders (Home Office, 2019). Merseyside was one of the areas allocated funding and established the Merseyside Violence Reduction Partnership (VRP). During 2019/20, the VRP supported the development and implementation of a range of interventions to prevent violence. In 2020/21 the VRP was allocated additional Home Office funding, and continued to implement a range of activities to develop, promote and sustain a whole system public health approach to violence prevention, including funding the implementation of a range of targeted violence prevention programmes.

Families are a key resource in promoting desistance, improving compliance with prison regimes and supporting positive re-integration into the community, whilst contributing to the reduction of re-offending (Cid and Martí, 2012; Farmer, 2017). However, incarceration can impact the remaining family members, including disrupted relationships with the incarcerated person, experiencing shame or stigma, and increased risk of poor mental wellbeing, poverty and homelessness (Wilderman et al, 2012; 2014). Growing up with a family member who is or has been incarcerated is a recognised adverse childhood experience (Bellis et al, 2014). To enhance support for families and children of offenders who have been incarcerated, in 2020/21 Merseyside Violence Reduction Partnership (VRP) have funded two programmes:

- Partners of Prisoners (POPS): A newly funded family support programme, which aims to provide practical and emotional support to the families of
- Stronger Outside: An extension of a pilot project delivered in 2019/20 (Safe Together; Box 1) that aims to support children who have a parent or family member serving a custodial sentence; and offer support for their caregivers.

those who have a family member serving a custodial sentence.

To inform the on-going development and implementation of support programmes for families of offenders, this report provides an overview of these programmes and identifies key considerations for future monitoring and evaluation. Findings and considerations are based on evidence gathered through VRP and individual programme documentation, and discussions with VRP team members and programme deliverers.



## **Box 1: Safe Together**

The Safe Together: Children of Prisoners intervention was a new pilot art therapy programme that aimed to support children impacted by parental or familial imprisonment. The intervention was implemented with 11 children (aged 5-13 years) from January to March 2020 and included eight 2-hour sessions delivered primarily in a local community centre on Saturdays or Sundays. A number of positive outcomes and impacts were identified during the pilot, including children producing art and co-designing an art exhibition to share their experiences with others; and, co-designing a self-help booklet for other children. A number of children reported impacts such as:

- Feeling safe during sessions;
- Group bonding;
- Opportunities to share experiences in a safe space, free of judgement;
- Learning a new skill;
- The use of art to help them express themselves, deal with difficult emotions more effectively and increasing their safety (e.g. through reducing their physical acts of frustration); and,
- Helping them think more positively, through enabling them to focus on happy memories and their future aspirations (Quigg et al, 2020).

# 2. Partners of Prisoners (POPS) Merseyside Family Support Programme

## 2.1 Programme aim and delivery

POPS is an established service in Greater Manchester but is new to Merseyside (commencing delivery in 2020/21). The programme aims to support families who have a family member serving a custodial sentence by providing guidance and referrals for housing, debt, and other social and health services. They also help families to build resilience and offer emotional support.

"We aim to provide a variety of services to support anyone who has a link with someone in prison, prisoners and other agencies. POPS provides assistance to these groups for the purpose of enabling them to cope with the stress of arrest, sentence, imprisonment and release."

In Merseyside, POPS includes two community based Family Resettlement Workers who provide practical and emotional support for the families of 18-25 year olds who are being released from prison back to the Merseyside area. Family Support Workers work with the prisoner's family providing support, advice and guidance around:

- Licence conditions;
- Child concern/Child in Need cases requiring support;
- Housing, tenancy, arrears, eviction;
- Finance, debts, benefits;
- Emotional wellbeing; and,
- Developing community links.

Offender case managers (through completion of a POPS referral form) can make referrals to the programme. Following referral, POPS will engage with the prisoner and seek their consent to contact their family. Where consent is received, they will then arrange an initial meeting with the nominated family member (face-to-face or by phone depending on local COVID-19 restrictions), and together with the family complete an Outcome Star assessment (see 2.5), which helps to identify the family's needs and priorities and enables the development of an action plan of support.

# 2.2 Service users

POPS traditionally work with the families of prisoners. Family members identify areas where they feel they need support and also evaluate impact of the programme on key areas of their lives. The programme supports families of offenders of both sexes, however whilst a high proportion of offenders are male, due to a lack of dedicated service to support women offenders in Merseyside, there is an additional focus on ensuring family members of women offenders are referred in to the programme.

# 2.3 Recruitment and retention

Service users require a flexible approach to support. Previously the organisation has been required to close down cases if the client hasn't been in touch for 7 days. This has been problematic because some service users only need intermittent support. The current funding from Merseyside VRP has not required such a rigid approach and this has been helpful in setting up the programme. Since the organisation is new in Merseyside it has taken longer to establish community and professional

relationships. Referrals have come from prisons, probation and Magistra, who deliver programmes for the VRP in approved premises. Table 1 shows that there have been some obstacles in recruiting. There have been examples of the referral case manager not informing the client that they had been referred for the service, or missing contact details.

POPS reported that COVID-19 had had an impact on building new working relationships and consequently referrals. As noted, the organisation is new to Merseyside and they recognise the importance of visiting probation, children's centres, and courts in person, to enhance recruitment to the programme and wider programme implementation.

Table 1 Recruitment from August 2020 to March 2021

Cases referred	37
Referring organisation	
Prison	21
Magistra (VRP partner)	9
TMUK (VRP partner)	2
Community teams	2
Self-referral	1
Not specified	2
Families	32
Offenders	5
Cases pending	16*
Cases opened	20
Refused Support (family)	1
Cases closed (complete)	1
Cases disengaged (part complete)	1
Cases Disengaged	0
Current Caseload	17

\*Of the cases pending 5 were the offender being recalled to prison before the first point of contact with the service; 8 were due to no contact details or response; and at the time of writing 3 have booked an initial assessment.

## 2.4 Current evaluations/feedback

Family Resettlement Workers log all work with clients for safeguarding purposes. In order to evaluate individual's progress, the organisation currently uses the Outcomes Star assessment (homeless version)<sup>2</sup>. With the exception of offending, this version of the Outcome Star assessment includes many of the basic needs for families of prisoners. Questionnaires are recorded at intervals throughout a person's contact with the programme. However, the organisation recognises that families are unlikely to report the extent of their problems to a caseworker who they have only just met. They have found that as trust increases, people are more likely to report lower scores and to admit that they are struggling with a particular area.

The Outcomes Star assessment includes 10 factors (see Table 2) and is scored from 1 to 10. It accompanied by following explanatory key: 9-10 Self-reliance; 7-8 Learning; 5-6 Believing; 3-4 Accepting help; and, 1-2 Stuck (see Table 2 for an example of a client'. Clients can complete the questionnaire with their caseworker or alone. There are free text areas on the form for

Table 2: An example of a client's outcome star scores

Factor	Open	Close
Motivation and taking responsibility	10	10
Self-care and living skills	7	10
Managing money	5	10
Social network and relationships	8	10
Drug and alcohol misuse	10	10
Physical health	10	10
Emotional and mental health	4	10
Meaningful use of time	8	10
Managing tenancy and accommodation	5	10
Offending	4	10

each of the 10 factors and an action plan at the end of the document listing: priority area and score, next goal, SMART actions, by who and by when.

<sup>&</sup>lt;sup>2</sup> https://www.outcomesstar.org.uk/

Families often require support with debt or housing problems, and these can be resolved relatively quickly. However, many clients also require emotional support, which takes longer to foster and is also more difficult to quantify. The service user voices (Box 1) illustrate this clearly. Service users explain how they have struggled to access available services and to find basic support, but it is the impact of emotional support that is most striking in these testimonies. For these service users, the support of POPS caseworkers has clearly had significant positive benefits for their mental wellbeing. The organisation reported that the majority of clients show signs of improved coping within a 3-month period.

For previous projects, POPS have arranged a forum for service users to share their views on the programmes with funders/auditors. This has been particularly effective because it allows families to have a voice and to share their journeys in their entirety rather than recording select components. They have also employed a cost benefits analysis for their work in Greater Manchester.

#### Box 1: Service users' voices

#### Service user A

"[Caseworker], our Family Support Worker is really lovely. She has been incredibly helpful in signposting me to some organisations that could help us with a couple of issues. [Caseworker] has also been an invaluable help in liaising with the Probation Services and getting information from them. This has been really valuable since we often feel we're left a bit in the dark on what to expect. [Caseworker] has also been really helpful in putting us in contact with organisations who can help with housing issues which now looked like they're being addressed. All in all, the service is incredibly helpful!!"

#### Service user B

"My son was sentenced to eight years in prison. My family, my son had never been in any trouble before this. I took the whole thing so bad. I could not talk to anyone... One day my phone went, and it was a lovely lady called [Caseworker]. She explained to me she was from POPS. She was so lovely, very easy to talk to and I found myself talking to her and asking so many questions.

Nothing was too much for her. I felt oh my God someone knows and cares about what I am going through and that was for me a changing point. [Caseworker] phones me every week and I look forward to her calls. I look after my mum full time and it's so hard. [Caseworker] made phone calls for me to put me in touch with the city council for five free hours a week and someone comes in to sit with mum while I go shopping. What a difference it makes. I didn't know I could get the help."

#### Service user C

"My son was in prison and I had a call off a lady called [Caseworker]. She said she could give some support if I needed as I've been having struggles with my mental health and my children. I said yes. [Caseworker] has been in touch with me since December, I think, and she has given advice, listened to me, and helped me so much. My mental health gets the better of me sometimes and I struggle, and [Caseworker] has been there to keep in contact even if it is to say hello. I think that if it wasn't for [Caseworker] calling me I don't think I'd be in this place where I am now. I ignored calls at first but texted her back, and she called straight back. I would have lost every time I was that bad, and [Caseworker] just listened. She is an amazing lady and I could only wish I could put a face to the voice that's been helping thought my tough time. Thank you so much [Caseworker] we need more people like you."

# 3. Time-Matters UK Ltd (TMUK) Stronger Outside Programme (Family Support)

## 3.1 Programme aim and delivery

The programme offers low level early intervention by running separate monthly family support groups for children and adults who have been impacted by a family member in prison. Children are the focus of the programme; having a parent in prison is a recognised adverse childhood experience (Bellis et al, 2014). The Stronger Outside Programme aims to mitigate this risk without labelling; it provides a safe, non-judgemental space for young people who share a common experience. It also recognises that it is essential to support the main parent or carer because they are central to family cohesion. The programme was funded from October 2020 to March 2021; January to March 2021 was delivered online.

Sessions for adults and children are separate. Prior to COVID-19 restrictions, young people were able to attend art sessions and sports events. The programme gives adults and children the opportunity to share their experiences of coping with an incarcerated family member with others who are in the same position. It has offered group therapy sessions for the children, who often feel isolated and stigmatised by their situation. The organisation offers the non-offending parent/carer both structured and social support. Over time, the parents and carers organically form their own support groups. The parent and carers group have access to workshops on supporting childhood anxiety, child criminal exploitation and trauma.

## 3.2 Service users

Service users are children and adults who may or may not be engaged with statutory services (e.g. probation).

## Young people

Children with a parent or family member in prison are the focus of the programme. This is typically a father but could be another family member such as a sibling. The children who attend the programme are aged between 5 to 18 years, with 9 to 13 years being the most common range. Some children suffer from psychological distress and separation anxiety, but many are simply missing their family member.

#### Adults

The parents and carers who attend the programme are often placed under considerable strain when their family member is in prison. The service helps by connecting them to others in the same position. It also enables them to have time to themselves without having to worry about their children. Their keenness to engage with the programme is evidence of their support and concern for their family and children. Including adults in the programme was identified as a key area for development following experience of piloting the Safe Together intervention in 2019/20 (Box 1).

#### 3.3 Recruitment and retention

TMUK has a dedicated website and uses social media to promote its services. Parents or carers can self-refer to the service through the website. However, the majority of referrals are through support workers or schools. The organisation is relatively new, but the CEO has worked with companies in the

county and her doctoral research explored how families impacted by the Criminal Justice System experience support.

Retention varies and requires a flexible approach. Some young people don't need further support when their parent or family member is released from prison; others continue to attend the sessions because they have formed a bond with other children and young people. As part of the programme TMUK train peer mentors who support newcomers. One former service user is now at university and sits on the TMUK Board of Directors.

Since January the programme and peer mentoring training have moved on-line. There have been some children who have not engaged, possibly due to lack of equipment, not wanting to appear on screen, or because they don't wish to share their home environment. To facilitate this, iPads were sent to six children; this encouraged some to engage but others were not seen. A mother stressed the importance of a flexible attendance for young people (see case study, Box 2).

## 3.4 Current evaluations/feedback

There is currently no formal evaluation, but the organisation runs focus group for parents/carers. The CEO pointed out that questionnaires do not work well for service users because their lives often involve completing forms to access services. Furthermore, questionnaires do not capture the emotional benefits of the programme.

#### Box 2: Case study

A service user explained the importance of the programme after being referred by a support counsellor. Her son is now 14 years of age and was showing signs of behavioural problems at school. His father has been in prison for 80% of his life; having recently been released from prison he was imprisoned for a further offence. The son often feels let down by his father, who is now housed in another part of the UK making it difficult for them to have a relationship. The mother has also struggled to feel supported by her family and felt "broken". She reported that TMUK had been a "lifeline" and that she wishes the service had been available earlier, when her children were younger. In addition to the activities, the support network with other mothers and carers, she now has someone she can speak to whenever she needs some additional support.

This mother shared that many women do not like to admit that they need support when their partner is in prison. She reflected that it can be difficult to share family problems with her partner and described "wearing a mask" when attending prison visits. She said that when her son is engaged in the programme it gives her much-needed break without having to worry about where he is or who he is with.

# 4. Key considerations for future evaluation and recruitment

Both organisations focus on supporting those who have been impacted by an imprisoned family member. They recognise that this event can cause their clients to experience trauma, feel forgotten by the system and stigmatised by society. It is therefore appropriate that supporting the emotional wellbeing of service users is paramount for both services and their clients. However, assessing service impact is not straightforward. Firstly, clients can be understandably guarded when they first meet their caseworker and may not reveal the extent of their problems. This means that the baseline for improvement is not an accurate point for comparison. Secondly, the type of emotional support that is described by service users is difficult to quantify. Both organisations recognise that many of the families who use their services have been coping with extremely difficult circumstances, in some cases for years. It is fair to say that many people would not be able to cope with a situation that has become normalised for the families who enrol on the projects that are described here. Effectively evaluating impact for a programme that was described as a "lifeline" by one of the clients is no easy task.

Questionnaires can be limited for a number of reasons. They are restricted to a set of values and may not encompass the full range of problems that families encounter, nor reflect the full extent. Furthermore, there is the issue of cost for the organisations. Evaluation systems such as the Outcomes Star assessment require a significant initial purchase, training, and a yearly cost commitment. Since smaller charities are unlikely to have analysts on their staff, this raises a further question relating to data processing and analysis. Using service engagement was also recognised as problematic by staff and service users. Flexibility and choosing when they wish to engage with services or activities are important for client autonomy and successful engagement. It was also noted that many of the service users are required to complete forms to access other services and that adopting this approach to a voluntary support service could be seen as an obstacle.

There is a substantial body of academic evidence to demonstrate that the type of support services that are offered by both organisations are effective in reducing reoffending (Clancy and McGuire, 2017). The programmes reduce the risk of adverse childhood experiences and they assist pathways to desistance by recognising the importance of family resilience and the practicalities of returning to the community (Murray et al, 2012).

When asked what success looks like, both organisations said that their focus was whether the families felt supported. That it was essential for their services to be user led and for their clients to have a voice. Previously, POPS have held service user forums for their funded projects. This approach enables clients to feedback directly to funders and there is the potential for them to not only share their experience of positive change but also to shape future services and funding. This aspect was important to the mother who was involved in the TMUK programme; she felt that she wanted to give back to the organisation because it had supported her.

Building a trusting relationship with relevant communities and potential service users takes time. Organisations with a track record outside of the county and who are new to Merseyside could benefit from further support with this particular aspect. HMPPS recognise the important role that third sector organisations play in supporting offenders both directly and indirectly through their families. However, building professional relationships and understanding how agencies work at a local level also takes time. This is another area that could benefit from a review in order to maximise the effectiveness of allocation to services.



# 5. References

Bellis MA et al. (2014). National household survey of adverse childhood experiences and their relationship with resilience to health-harming behaviors in England. *BMC Medicine*, 12(1):72.

Butler et al. (2021). Evaluation of the Mentors in Violence Prevention (MVP) programme across Merseyside – Interim Report. Liverpool. Public Health Institute, Liverpool John Moores University.

Cid J, Martí J. (2012). Turning points and returning points: Understanding the role of family ties in the process of desistance. *European Journal of Criminology*, *9*(6), 603-620.

Clancy A, Maguire M. (2017). Prisoners and their children: An innovative model of 'whole family' support. *European Journal of Probation*, *9*(3), 210-230.

Farmer M. (2017). *The importance of strengthening prisoners' family ties to prevent reoffending and reduce intergenerational crime.* London: Ministry of Justice.

Hough J, Quigg Z. (2021). *Merseyside Violence Reduction Partnership 2020-21 – Sports, Arts and Culture work programme*. Liverpool. Public Health Institute, Liverpool John Moores University.

Lightowlers et al. (2021). *Merseyside Violence Reduction Partnership 2020-21: Evaluation of the Data Hub*. Liverpool. Public Health Institute, Liverpool John Moores University.

Murray J et al. (2012). Children's antisocial behavior, mental health, drug use, and educational performance after parental incarceration: a systematic review and meta-analysis. *Psychological bulletin*, 138(2), 175.

Quigg Z et al. (2020). Evaluation of the Merseyside Violence Reduction Partnership 2019-20 (Final Report). Liverpool. Public Health Institute, Liverpool John Moores University.

Quigg Z et al. (2021). *Merseyside Violence Reduction Partnership 2020-21 – Whole System Evaluation.* Liverpool. Public Health Institute, Liverpool John Moores University.

Wildeman C. (2014). Parental incarceration, child homelessness, and the invisible consequences of mass imprisonment. Ann Am Acad Pol Soc Sci, 651(1), 74–96.

Wildeman C et al. (2012). Schnittker J, Turney K. Despair by association? The mental health of mothers with children by recently incarcerated fathers. Am Sociol Rev, 77(2), 216-43.



