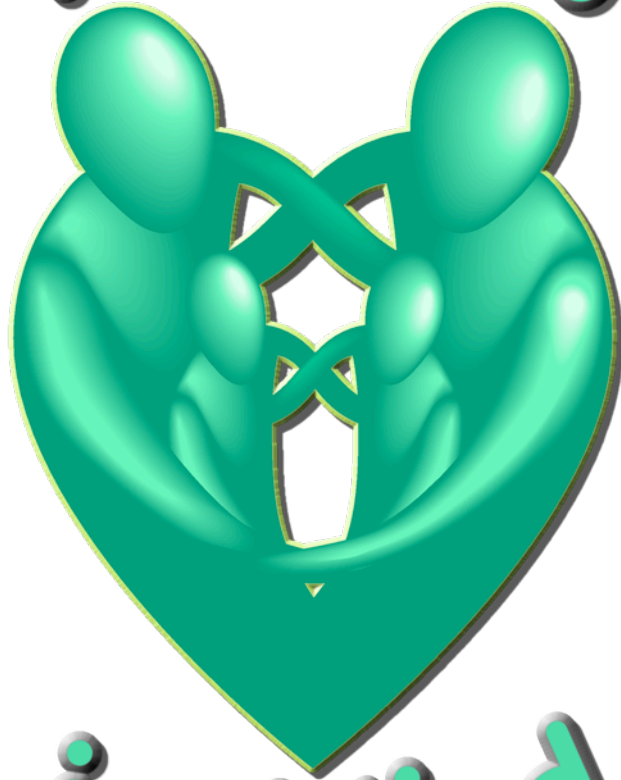


parents



in Mind

The Findings, and the Future?



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We're Mind, the mental health charity. We're here to make sure anyone with a mental health problem has somewhere to turn for advice and support.

Background

Parents in Mind is a Big Lottery Funded project of North Staffs Mind which was set up in May 2011 and has funding until May 2016. It came about as a result of NSM realising that, despite our offer of counselling for adults with emotional/mental health issues, there was a gap in provision for parents who needed support with their mental health who would otherwise not access services. This was because they were, for example, isolated geographically and/or socially; so anxious as to not be able to attend services; or antagonistic to traditional services as a result of past experiences. The project was to offer a non- traditional counselling service, operating either from localities close to the client, or in the home if need be. The staff could offer parenting advice as well as more traditional counselling around the adult's mental health issues, as some are accredited Parenting Practitioners as well as qualified counsellors. They would also do lots of communicating with relevant others to ensure clients' needs were met in every aspect which needed support, even acting as advocates where necessary.

Finance/Targets

The project has been funded at just over £100k per year (£500k for the duration of the project) and sees on average around 200 people per year. In the four years so far reported on, 731 people have had a service. Results have been transformational for some clients, and many have been able to make changes to their own lives and emotional well- being, and their ability to parent (and so have a positive impact on their own children's future mental health).

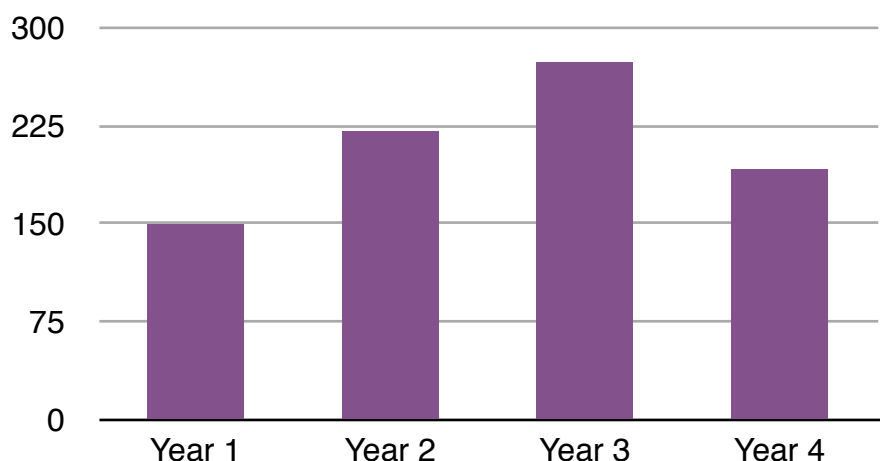
Our targets for the full 5 years are 750 clients to have had a service, 500 to report improved well-being

Referrals/Service

The service operates in Stoke-on-Trent and North Staffs including the Staffs Moorlands.

Referrals have been made by a number of agencies, notable amongst them Health Visitors, Local Support Teams, School Nursing Service, Parent and Baby Unit and Social Care. Clients can also self refer. The team of staff is a small one with 5 team members, all part time, but all qualified and very experienced as counsellors and with a "down to earth" and pragmatic approach to the work. They have been able to quickly develop trusting relationships with clients and to support and challenge as required.

Number of referrals into the service:
837



Clients

The clients we have seen have been complex and with multiple issues in the main. They have been struggling with emotional issues for many years in most cases, and have often had troubled childhoods themselves. They may have self-destructive coping mechanisms such as drug and alcohol misuse, self harm, social isolation etc. They are often disillusioned with services and may feel suspicious of statutory involvement for a whole variety of reasons.

Child Protection issues have often been present and we have worked collaboratively with other agencies to safeguard children. In some cases we have been able to help a parent keep hold of their child when it was expected he/she would be taken into care. Others have learnt how to look after themselves and their children better as a result of our involvement.

Although the majority of clients are female, around 10% are male, and our ability to offer a male counsellor has been valuable both for male clients, but also for some female clients.



Findings

There are a large number of parents struggling to cope, who although they may be in touch with services, are unable to make effective use of those services as their own emotional wellbeing is so compromised that they are not able to achieve the goals set for them. The barriers to full participation often are products of their own traumatic lives and childhoods, as well as societal ones of poverty, lack of education and low aspiration. These personal factors need to be addressed before they can become more motivated to do the practical tasks required of them to become more active parents and citizens.

Offering a service which is person centred, based on a real relationship of honesty and acceptance has proved to be the key to gaining trust and then working through some of the issues which have had massive impact on individuals' lives. Many clients have never been offered the chance to explore their own histories and to understand the negative impact of their own life experiences, and to understand how they have adopted mal-adaptive ways of living as a result. When given the chance to explore these in a non judgemental fashion, with a supportive, but appropriately challenging counsellor, then changes can be identified and chosen. Offering the service in locality based venues such as Children's Centres, or in the



home when needed, has made it a much more accessible service. It has encouraged some clients to take up the offer of counselling who would never attend a mainstream service.

Once parents feel understood and supported, as well as challenged to become more aware, then changes can be made which benefit the adult and any children in the family. Once an adult understands the impact their own experiences have had on them, the easier it is for them to understand how their own children are affected by their environment and the parenting they receive. Most people want to be good parents, to live more contented, less fraught lives, but many lack the knowledge and skills to achieve this. Offering support in a way which is acceptable, and works for them, can make all the difference.

The work is intensive and has meant that often parents are offered more sessions than we offer in our core adult services. Their issues are often complex, longstanding and require a depth of trust in the relationship which can come slowly when someone has a long history of feeling inadequate and undermined.

Cost Saving to Local Health Economy

On just a sample of 3 cases, we calculate that the service which the Stoke-on-Trent and North Staffs area has had, at no cost to commissioners since it is entirely funded by the Big Lottery Fund, has saved statutory agencies and the local economy £1.51 million.

This is broken down as follows:

- ◆ 1 client, who has made several serious suicide attempts in the past, is adamant that he would have committed suicide by now without a service from Parents in Mind (cost per incident for all services associated with completed suicide – police, NHS, Coroner, Social Care, loss to economy etc)

£1,450,000 (source www.nemhdu.org.uk)

- ◆ 2 children (2 families) kept out of care saving fostering/associated costs of up to £30,000 pa each child

£ 60,000 (one year) (National Audit Office figures 27/11/14)

- ◆ The service costs just over £100k per year and offers a service annually to around 200 people, therefore at a unit cost of £500 per client.

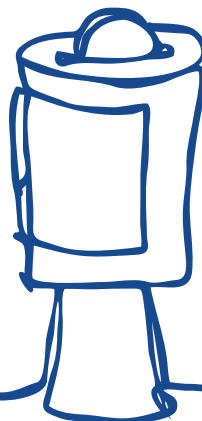
The Future

The service has 9 months funding left. The current waiting list of clients is around 50.

On present work rate this means we need to close our list to any new referrals from the middle of Oct 2015, otherwise we are offering false expectations to clients and referrers. There is no comparable service in North Staffordshire which offers parental mental health support alongside parenting support. If the service is lost, then accumulated experience is also lost and clients who could have benefitted greatly are not going to receive a service which meets their needs. The cost savings associated with the service will disappear, and instead other services will incur costs. Many referrers will have lost a trusted source of support for clients.

At our recent conference event in June 2015, research psychologist Dr Suzanne Zeedyk (University of Dundee) highlighted the importance of this type of work, and the costs to individuals, families, society and the public purse of not doing it. Money put into services to prevent individual and family breakdown save enormous sums further down the line (as our 3 cases illustrate).

We are therefore asking that Commissioners consider how this service, which has proved its worth to other agencies and to clients and children, might be supported post May 2016.



Some quotes from Parents in Mind Client evaluations

'Really found my counselling helpful. Turned my life around and made my family life less stressful.'

'I would strongly recommend the service to others. I have got my head together, now feel ready and capable to deal with future problems.'

'It pointed out things I hadn't realised where I could help myself, very direct but very kind and understanding.'

'I would like to thank you for the support and guidance you have given me. Without the free service I would not have gone on to counselling/support from anyone. I am so thankful, thank you. If all the counsellors are as good as D you certainly have a fantastic team.'

'She was amazing - changed my life so I can now start to live. Bloody Star.'

'Relationship with counsellor was like the light in the dark.'



Quotes from Referrer evaluations

"All the parents I have referred into the service have found the service useful and it has helped with their confidence, decision making and resilience through difficult situations."

"I feel that their (the client's) needs are being met enabling them to implement strategies which enable their children to receive quality care and understanding."

"Parents have benefited by being seen closer to where they live or within their home if convenient. Parents have reported feeling supported around various difficulties including further parenting support."

"For the young people who have worked genuinely with the service it has been extremely beneficial to them and it was a big help that they could have their visits in the home as this meant that they were not under more stress having to go to the appointment."

"Parents in Mind clearly fills an extremely useful gap in the mental health needs of the population of Stoke. My reasons for referring a parent would usually be when they are struggling with parenting their children but these difficulties are rooted in their own bad experiences of being parented and/or when they have a history of mental health difficulties which makes it difficult for them to put parenting strategies into practice."


Case Study

C. was referred to Parents in Mind by his solicitor and on advice from his social worker.

On referral his only child, a boy under 5, had been taken into care on a Section 20 Interim Care Order and C. did not feel hopeful that his son would return home again.

On our first session C. presented as very angry, somewhat hostile towards professionals and in denial of any responsibility he may have had in the circumstances leading to his son being removed. Within this first meeting the first crumb of trust was formed by me giving voice to these observations in an honest way with reassurance that he would not be judged, and recognition of his pain and suffering. C. spent the remainder of the session sobbing. At the end he touched my arm, thanked me and said he would let me know whether he wanted to come again. Two days later C. contacted the office and confirmed he would be attending our next appointment.

I initially saw C. for sixteen sessions. The main issues that he began to address and worked very hard on in therapy were:



Learnt patterns of behaviour, their origins and triggers, how they impacted on self and others and how to make changes to these patterns.

Particularly important to this work was the relationship with his parents and the impact of their behaviours towards himself and siblings, alongside some of the negative and traumatic experiences stemming from his childhood.

Affirmation and self valuing also played an integral role within the therapeutic process which seemed to enable C. to gain confidence, confront and start to come to terms with past issues and take responsibility both for the past, and the here and now.

Within the sessions C. was able to look at his own responsibility and failings concerning his son with a view to recognising how he ended up in such a dire situation and to reflect on the impact this had on himself and others around him.

At times the sessions were extremely difficult for C. but through having a trusting, supportive and, most importantly, non judgemental space each week, he became more able to consider change and became very determined to make amends to his son and try his utmost to get the opportunity to be a good parent.

C. has worked really hard over the last few months to prove his worth and re-establish his relationship with his son. He started with supervised contact, was then allowed unsupervised contact and a new plan has just been put in place through social services to aim to get son and father back home together hopefully by Christmas. At his request C. and I are now doing a further six sessions to concentrate on his parenting in order to support the new plan.

The PHQ and GAD7 which measure depression and anxiety levels were used with the client. At the start of therapy they were PHQ = 12 (moderate depression) and GAD = 20 (severe anxiety), at the end of therapy they were PHQ = 4 and GAD = 1. This shows the significant difference in where C's emotional and mental state now reside.

