



Children of Prisoners Empowered (COPE): Interim project evaluation

1. Context

Children of Prisoners empowered (COPE) is a Leeds community based service delivering intensive support to disadvantaged children and young people affected by a parent's imprisonment in HMP Leeds, HMP New Hall and HMP Wealstun. Through casework support, mentoring support and partnership working, the service aims to address the behavioural, emotional and financial disadvantages created or exacerbated by a parent's imprisonment. By addressing these key areas, COPE expects to achieve the following outcomes:

- Improved home life - Creating a home environment where children and young people safe and are able to thrive
- Improved ability to express feelings – Providing a space for children and young people to explore their feelings about their situation and to be heard
- Reduced isolation - Empowering the family unit to think positively and increasing their engagement with their local community

The COPE project is staffed by one full time caseworker, with some input from Peer Advisors when they are available.

This interim report will consider the following areas in turn, before drawing conclusions and using learning to make recommendations for year two of the project:

- The extent to which the project is meeting its target numbers

- The extent to which the project is meeting its stated outcomes
- How the project compliments local statutory services and adds value to local provision

2. Method

This evaluation has been undertaken during the Covid-19 pandemic and resulting period of 'lockdown'. As such, it has not been possible to carry out a planned site visit to shadow the caseworker and scrutinise case files, nor to interview families and referring professionals in person. Instead, data has been gathered by the independent evaluator using the following means:

- Telephone interview with COPE caseworker
- Telephone interview with a referring professional (Children's Centre family support worker)
- Telephone interviews with two families currently being supported by COPE
- Case studies of work with children and young people prepared by the caseworker
- Analysis of project monitoring data

Note on limitations: While strenuous efforts were made to engage with more professionals who have referred children and families to COPE (in particular teachers) it was not possible within the timeframe and under the circumstances. As such, the conclusions it is possible to draw in relation to how COPE compliments local statutory provision, are limited.

3. Findings and analysis

3.1 Numbers

The COPE project is currently exceeding its target numbers. The total number of children and young people the project expects to support over two years is fifty. At the end of year one, COPE has supported (and in some cases continues to support) thirty nine children and young people affected by parental imprisonment living in Leeds and the surrounding area.

Table: Numbers of referrals in year one by age

| Age group | Expected referrals over two years | Actual referrals in year one |
|-----------|-----------------------------------|------------------------------|
| 0-4 | 6 | 12 |
| 5-9 | 22 | 14 |
| 10-15 | 18 | 12 |
| 16-18 | 4 | 1 |

At this mid-point, the project might expect to have received between twenty and thirty referrals. Table 1 shows that not only has COPE significantly exceeded this number in its first year but also the expected ages of children referred is lower than expected. In the youngest age bracket, twice the number of children have been referred in year one than were expected over the life of the project. Further, while referrals in the 5-9 age bracket are broadly in line with expected numbers, most of those referred in the 10-15 bracket are at the lower end. Therefore, referrals of children between 5 and 12 years of age are significantly higher than expected at this point.

COPE is a responsive service providing bespoke support to address the need(s) of each individual child, taking into account their family situation and age. This responsiveness is reflected in the kinds of 1:1 support and activities provided, for example: activities (trips to the park, ice-skating, go-karting, Go Ape, picnics) and work exploring emotions and feelings through play, drawing, arts and crafts and talking.

Table: Numbers of referrals in year one by source

| Source of referral | Numbers of referrals |
|--------------------|----------------------|
| Self | 7 |
| School | 13 |
| Children's Centre | 14 |
| Prison | 4 |
| Police | 1 |

The high numbers of referrals received from Children's Centres and schools indicates that COPE has been well publicised and has a good reputation in the community. Evidence from the interview with a family support worker suggests that they have a good understanding of what the service can offer, and have witnessed

positive outcomes and therefore feel confident to make repeat referrals. The COPE caseworker has worked hard to establish and maintain productive working relationships with professionals, who report having confidence in her skills and specialist knowledge regarding the criminal justice system and ability to engage effectively with children and families.

3.2 Outcomes

The children and young people supported by COPE are not only affected adversely by parental imprisonment but are also often members of significantly socially excluded families facing multiple disadvantage. This can include: financial hardship and debt; poor and insecure housing; domestic violence/abuse; mental and physical ill health; bereavement; neglect; poor or curtailed education; substance misuse; child sexual exploitation and; social isolation.

In many cases, in order to improve the child or young person’s situation, other family members also require support from the project. This is provided by the COPE caseworker and/or a St. Giles Peer Advisor. Examples of support and activities provided to the wider family include:

- Addressing housing issues including rent arrears, overcrowding etc.
- Benefit and debt advice and applications
- Life skills, including cooking on a budget/healthy eating, cleaning, decorating etc.
- Support and advice re: issues such as domestic abuse, forced marriage, bereavement and isolation etc.
- Addressing substance misuse, mental health and wellbeing, bullying etc.

Table: Progress made against the project's stated outcomes

| Stated outcome | Significant progress made | Started making progress | Yet to make progress |
|--------------------------------------|---------------------------|-------------------------|----------------------|
| Improved home life | 10 | 19 | 10 |
| Improved ability to express feelings | 11 | 18 | 10 |
| Reduced isolation | 4 | 6 | 29 |

Outcome 1 - Improved home life

"Thanks [caseworker], I feel like me and mum get on better now and don't argue all the time". (Child supported by COPE)

The home lives of children and young people who experience a parent going to prison are inevitably changed and unsettled. Many of those supported by COPE experience trauma including domestic violence, sexual abuse, mental illness and neglect. Pre-existing disadvantage and hardship can be exacerbated and result in increased poverty if the family breadwinner receives a custodial sentence. Often the parent/carer left at home struggles to cope; anxiety, depression and substance misuse are common. Children are further disadvantaged under these circumstances in practical ways, such as lacking essential furniture (cots, beds, white goods, carpets and basic furnishings) and not being able to attend school. They also suffer emotionally, feeling abandoned both by the parent in prison and the parent at home who is unable to meet their needs.

In year one, some or significant progress has been made in relation to home life by twenty nine of the thirty nine children and young people COPE has supported. The following case study illustrates how life changing this support can be:

Case study: Mum and two children

The family was referred by a children's centre following dad receiving an unexpected custodial sentence. Mum was left at home with two pre-school boys and another baby due imminently. She was in shock and was not coping with parenting her children. Dad had control of all finances, including the family's benefits. Mum had no access to any money, no bank account in her name and no idea how to apply for benefits herself. She was also unaware that the family was in debt, having arrears of rent, council tax, water rates and all utilities.

The COPE caseworker referred mum to a debt consolidation specialist and contacted the housing provider to inform them of the change in family circumstances and the difficulties now faced. She helped mum to open a bank account and liaised with the benefits office to negotiate a change of circumstance rather than having to make a new application which would take time to implement. Family benefits are now all in her name.

Once mum felt more stable and secure financially, the caseworker was able to begin supporting mum to engage and interact with her sons. Mum said she wasn't used to playing with them and felt stupid and unconfident about how to do so. The caseworker encouraged and accompanied the family to the local park which they had never previously experienced. She provided outdoor toys and games and modelled group play and family interaction, such as picnics. She helped mum to feel confident about managing the boys and worked with the children in an age appropriate way to understand how they could help mum and each other. Family life is now more secure and safe both practically and emotionally.

For other children and families, progress is at an earlier stage either because they are more recent referrals and relationships and trust are still being built, or because issues and challenges are more deeply entrenched and there are multiple needs to be met which will take time. Nonetheless, a number of positive changes for these families can be evidenced, for example COPE has supported families to: move from temporary to more permanent housing; decorate homes when families have been moved; access beds and bedding for children previously sleeping on the floor; deep clean an uninhabitable house; establish basic hygiene routines (such as tooth brushing, bathing and washing) for families where these were lacking; better manage finances and address outstanding debt issues and; identify and prioritise their support needs and set family goals.

Outcome 2 - Improved ability to express feelings

"I don't feel like I'm the only one going through this, thanks [caseworker] for helping me to understand. I know I can talk to you about anything, I trust you". (Child supported by COPE)

Experiencing parental imprisonment can be frightening, disturbing, confusing, upsetting and anxiety provoking for children and can engender feelings of anger, shame, guilt, loss and mistrust. However, it can be very difficult for children to recognise these feelings or understand where they come from and what they mean. Often therefore, they become suppressed and find expression through behaviour which can be difficult for the child, family, teachers and others to deal with.

People in a child's life at this time can be equally ill-equipped to help them deal with parental imprisonment: Other family members may themselves be struggling to express their feelings and professionals such as teachers may have no knowledge of the prison system and therefore lack the experience and confidence to broach the subject. Both the professionals and families interviewed recognise the importance of having access to someone with the skills, knowledge and ability to explain the situation and help guide children through this difficult time. Without that specialist support, their destructive feelings risk embedding more deeply and further isolating and disadvantaging children.

In year one, COPE has achieved some impressive outcomes in relation to helping children and young people express feelings about their circumstances. Twenty nine have started to make or made significant progress in this area, for example by going from being entirely unable to express their feelings to being able to articulate how they feel and take action to avert a negative outcome arising from difficult feelings. The following case study illustrates this further.

Case study: Two brothers living with their grandmother

These two brothers were referred by social services. They were being cared for by their grandmother having been abandoned by their mother and their father having recently gone to prison. Both boys exhibited challenging behaviour at home and at school that the adults in their lives were struggling to manage. The younger boy has a diagnosis of attachment disorder and his brother's behaviour often becomes aggressive.

The COPE caseworker began working with the boys to establish a rapport and gradually build trust, which took several months. This non-pressured approach enabled them to begin exploring together how to recognise emotions, what different feelings might mean and how to talk about those feelings. The caseworker found that the boys were reluctant to sit and talk but could do so more freely when engaged in another activity, particularly something physical, so she took them on a number of trips to parks, adventure play areas, ice-skating, go-karting and for food. She was able to engage in follow up work with the boys at home and in their school environment and developed visual aids that they could use to indicate to others how they might be feeling when they felt unable

to voice their emotions. She also worked with their grandmother to help her recognise the boys' emotions and equipped her with tools and techniques for managing them more effectively:

"The boys love her to bits, she's been really great for us all. She has a way about her that they will talk to her where they won't with anyone else. One of them had really bad anger issues but she's taught him to manage it, he can walk away now. She also helps when something's gone wrong at home; I'll ask her to talk to them about so and so and she helps them see it from different angles. They are much more open and loving with me now and they'll be open about their feelings, the good and bad."

With younger children in particular, finding ways to express their feelings can be a challenge and requires creativity, patience and skill. Some examples of tools employed by the COPE caseworker that are suitable for supporting younger children (as well as older) include: a 'thought jar' or 'worry bag' where thoughts, feelings and worries can be safely placed to return to when the child is ready and/or when they next see their caseworker; and, emoji charts and jelly baby trees to help identify feelings and track changes in feelings over time. Using these and other techniques, most children have been able to make some progress in terms of expressing their feelings, for example by moving from saying 'I don't know how I feel' to being able to recognise that they feel a particular emotion but not yet be able to explain why.

Another important finding, linked to this outcome, is an increase in children's confidence and self-esteem. This can be evidenced in a number of ways including: children feeling more comfortable going to school; children who'd previously expressed feeling scared when visiting their parent in prison feeling able to ask questions prior to visits to help them know and understand what to expect; children feeling able to try new activities and experiences which they would previously have avoided; and, children feeling able to offer an opinion or say what they would like when previously they would have said 'I don't know' when asked something about themselves.

Outcome 3 - Reduced isolation

"I like seeing you every week and doing things with you - you make me laugh." (Child supported by COPE)

All the children and young people with whom COPE has worked in year one have experienced some degree of social isolation. Financial disadvantage certainly plays a part in this; often families lack the money to cover essential living costs so anything extra is impossible. However, not all social isolation is due to practical barriers and in many cases it is the stigma (perceived and actual) and sense of shame and distress experienced by children about having a parent imprisoned that underlies the issue. This is often exacerbated by family members at home not wanting or feeling able to talk about what has happened or the children themselves not wanting anyone to know and therefore making a conscious decision to isolate themselves in order to minimise the likelihood of 'exposure'. Often the crimes for which parents are imprisoned have happened in the local community which can lead to gossip and speculation and contributes to families feeling judged and wanting to minimise their exposure to the outside world.

Working with children and families to reduce social isolation can be extremely challenging and takes a long time. For some families, the nature of the crime committed means they are not safe in their neighbourhood and need to be moved, which is a challenging and lengthy process. For others, working with deeply felt emotions and/or entrenched behaviours caused or exacerbated by mental health challenges is a slow process and progress is not linear. As such, this outcome is longer term and difficult to achieve within the first year of working, which is reflected in the progress figures in table 2.

The majority of children and young people have not yet made progress in relation to this outcome. COPE is focusing initially with these families on stabilising home life and establishing functioning and positive relationships in order to build resilience within the family unit. Nonetheless, ten of the thirty nine children have made some degree of progress in reducing their social isolation as illustrated by the following case study.

Case study: Daughter and mum

This girl was referred by her school. She had witnessed domestic violence within the home for many years for which her dad received a custodial sentence. At the time of referral she presented with signs of trauma and her mum was suffering with depression and anxiety. The girl was very isolated both within the home and outside, having no social interactions with peers at school or within her wider community.

The COPE caseworker supported mum and daughter to interact by playing together, initially using board games and working towards more imaginative, free play. In time she supported mum to take her daughter to the local park, choosing early morning when it was quiet. The girl gradually became more confident in her physicality and found it freeing and empowering. The caseworker found out about gymnastics classes and encouraged her to join.

The school also noticed a difference in the girl's confidence, self-esteem and consequently social behaviour. They report that she interacts more readily with staff and peers, putting her hand up in class which never previously happened, and has begun to play with other children.

3.3 Added value

As well as meeting its stated outputs, COPE also compliments local statutory services and adds value within the wider 'ecosystem' of local provision. Data from the interview with a professional who has referred children to the project and from families who have received support from COPE, indicates that the project is held in high regard and fulfils a specific need not otherwise addressed.

One area highlighted by the family support worker as particularly important to the success of the project is the professional expertise and credibility of COPE's caseworker. Her specialist knowledge about the particular situation the families referred to COPE face, is valued by colleagues and clearly adds value to wider service provision locally.

"The kind of work she does with them, she's the expert. Obviously I work with families all the time but for that specific part, you know, imprisonment, no-one else is doing that and she makes it easy for people in that really difficult situation to tell their story. She can help in a different way because she knows and that is so supportive to us as a service as well as to the families themselves." (family support worker)

Equally, the caseworker displays real skill at engaging quickly with children, young people and their families, and builds trusting relationships that enable the challenging work to be undertaken together. One of the families interviewed, with significant experience of being involved with multiple services, identified the quality of the relationships established with the COPE caseworker as markedly different from her previous experiences.

"Social service don't offer anything like this. They just come and see if everything's alright then go. They don't build a relationship with you in the same way. The boys wouldn't interact with them but they absolutely love [COPE caseworker]. She's dependable, she says leave it with me and she does it. She's made a difference by caring.'" (carer)

'She's amazing, so approachable. I've had feedback from families I've referred saying they liked her straight away. She builds relationships so well. These children find it very hard to trust but she makes it easy. I feel very lucky that I can refer children who need that specialist support and feel fully confident in the service.'" (family support worker)

Linked to this, COPE provides partnership working and support to other services working with children and families in a way that enables those services to be more effective in their efforts.

'It's the part of the jigsaw that's missing that helps us be more effective in our job too. One family I referred, the mum disclosed more to [COPE caseworker] than she had to me because of her expert knowledge. I then had a better picture for the work I do with the family. It means you've got your finger more on the pulse and so with that I can really see how COPE makes my work more effective.'" (family support worker)

Further, the family support worker was able to clearly identify how COPE compliments rather than duplicates other provision, even when families are being supported by several services simultaneously.

"Other services are so stretched, it's really good to work together. They do have a really distinct role to play. I don't know anyone else that fits that role when families are in crisis. Things can change so quickly for them, they might be in court in the morning and go straight to prison; their world changes in an instant. COPE is able to react just like that whereas there's usually a delay from other services." (family support worker)

Both the referring professional and the families interviewed identified COPE's flexibility and responsiveness as key to making it distinct from other support providers. COPE's caseload is set deliberately at a level which means the caseworker can respond to issues and crises as they arise, and also so the intensiveness of support can be altered to respond to changes in a child or family's circumstances.

"Their flexibility is amazing. [Caseworker] has more time to concentrate on the children somehow, she can stay in touch longer and give them more of her time. She's able to go into school and work with them there, that's amazing. Resources for all agencies is poor these days, IAPT, CAMHS, they all have long waiting lists but she can get in there and work in all these areas and really quickly as well. She is so responsive to needs." (family support worker)

Further, COPE's remit is such that the support provided to children and families can be very different from the norm, and can involve activities and experiences that have a powerful and lasting impact.

"She's building memories for those children that they wouldn't have. I know she got one family some outdoor games and took them to the park. Some of these families won't take their children anywhere so when she takes them go-karting or Go Ape or whatever, it's like a dream for them." (family support worker)

4. Conclusion and recommendations

There is clear evidence that COPE is providing valuable support to children/young people and their families in relation to the effects on children of parental imprisonment. To date, COPE has supported more families than would be expected at this mid-point and is therefore over-delivering in relation to numbers. Progress made against the project's stated outcomes is also very positive (particularly at this relatively early point) not least because of the time it can take to build trusting relationships and lay the foundations for subsequent 'outcomes based' work. The skills, knowledge, expertise and personal effectiveness of the COPE caseworker appear to be instrumental to the project's success.

Notwithstanding the limited data available, evidence does also suggest that COPE is valued by other services and is filling a gap and providing support to its cohort that is not otherwise available locally. There is a risk however that, with increasing stress in and pressure on the system, COPE could begin to compensate by filling this growing gap, operating at above capacity or taking on responsibilities that should sit elsewhere. It will be important to actively seek additional professionals' perspectives over the coming year and to review this position.

It has been a challenge to obtain data under the current circumstances but even so, a more robust mechanism for recording outcomes and outputs that allows for a nuanced recording of progress would help. It would be useful for COPE to create a spreadsheet which clearly highlights the three stated project outcomes and which the caseworker could easily update regularly in order to more readily evidence when and how each has been met by every client. This will not only help in terms of future evaluations but will also make it easier for the caseworker to keep track of progress in real time as project numbers increase.

The COPE project proposal refers to having access to "a team of Peer Advisors who can provide the family with support from 'someone who has been there.' They provide pro social role modelling for parents and older children, addressing emotional needs and offering ongoing support to families with finance, substance misuse, health, advocacy and positive thinking." At this stage it is unclear how well established this resource is, and the extent to which Peer Advisors are being used to support families referred to COPE cannot be commented on. It would be useful to revisit and focus in more detail on this area as part of the end of project evaluation.

Laura Thorne, Confluence, May 2020