



Live Fear Free Helpline

Providing confidential support and information on domestic abuse, sexual violence and violence against women in Wales

0808 80 10 800

Llinell Gymorth Byw Heb Ofn

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Cymorth i Ferched Cymru Welsh Women's Aid

Rhoi Merched a Phlant yn Gyntaf Putting Women & Children First

Inquiry into the emotional and mental health of children and young people in Wales

Consultation Response by Welsh Women's Aid
Closing date: 29.09.17

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These are the views of:	<i>Welsh Women's Aid (Third Sector) - the national charity in Wales working to end domestic abuse and all forms of violence against women.</i>

About Welsh Women's Aid

Welsh Women's Aid is the umbrella membership organisation in Wales that supports and provides national representation for the 24 independent third sector violence against women, domestic abuse and sexual violence (VAWDASV) specialist services in Wales (our membership of specialist services¹). These services deliver life-saving and life-changing support and preventative work in response to violence against women, including domestic abuse and sexual violence, as part of a network of UK provision.

As an umbrella organisation, our primary purpose is to prevent domestic abuse and all forms of violence against women and ensure high quality services for survivors that are needs-led, gender responsive and holistic. We collaborate nationally to integrate and improve community responses and practice in Wales; we provide advice, consultancy, support and training to deliver policy and service improvements across government, public, private and third sector services and in communities, for the benefit of survivors. This includes advising and supporting commissioners and strategic leads in their development of VAWDASV needs assessments and strategic plans, promoting evidence for innovative new service models, and supporting research into the prevention of abuse.

Some of the many umbrella services we deliver for members include facilitating the involvement of member services' in relevant policy, legislative and strategy developments and encouraging co-production in service development; providing advice and information on the development and delivery of promising practice in the sector; providing support with policy and practice matters, and regional and national data analysis reports to support local needs assessments, strategy and commissioning developments.

We also deliver direct services including the Welsh Government funded Live Fear Free Helpline; a National Training Service; the national Children Matter programme of work which, for example, supports local services to help children and young people affected by abuse and to deliver

¹ Our membership of 24 third sector VAWDASV specialist services in Wales, with whom we have national partnership agreements to ensure our work is coordinated and integrated: BAWSO, Hafan Cymru, Safer Wales incl. Dyn Project, Llamau, Cardiff Women's Aid, Cyfannol, Safer Merthyr Tydfil, Newport Women's Aid, Port Talbot & Afan Women's Aid, Swansea Women's Aid, Threshold, Atal Y Fro, Women's Aid RCT, Calan DVS, Carmarthen Domestic Abuse Service, West Wales Domestic Abuse Service, Montgomeryshire Family Crisis Centre, Aberconwy Domestic Abuse Service, Bangor & District Women's Aid, Clwyd Alyn Housing Association Domestic Abuse Service, Domestic Abuse Safety Unit (DASU), Glyndwr Women's Aid, Gorwel (Grwp Cynefin) and North Denbighshire Domestic Abuse Service (NDDAS).





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preventative Safety, Trust and Respect (STAR) programmes across Wales, and refuge and advocacy services in Colwyn Bay and Wrexham. We are piloting the Survivors Empowering and Educating Services (SEEdS) project, which is empowering survivors of violence and abuse to collectively influence and inform services and commissioning frameworks, and help change public and community attitudes. We also deliver the Wales National Quality Service Standards, a national accreditation framework for domestic abuse specialist services in Wales (supported by the Welsh Government) as part of a UK suite of integrated accreditation systems and frameworks. (More information on the NQSS can be found here: <http://www.welshwomensaid.org.uk/what-we-do/our-members/standards/>)

1.1 Welsh Women's Aid's response

1.2 As the umbrella organisation for violence against women, domestic abuse and sexual violence in Wales our response is based on consultation with our membership of specialist services and reflects their experiences across all regions. Our members' experiences of Child and Adolescent Mental Health Service (CAMHS) services vary quite significantly across Wales, with survivors subjected to a postcode lottery in relation to the quality of the CAMHS services that they or their children receive.

The information in this consultation response was gathered from consulting with Welsh Women's Aid's specialist violence against women member services and with survivors, through Welsh Women's Aid's SEEDS project (Survivors Empowerment and Education Service), whose children have used CAMHS in Wales.

2.1 Summary of Welsh Women's Aid recommendations

- 1) Reduce the waiting times for children and young people accessing CAMHS services, in particular those with long waiting lists such as services for clients with PTSD and anxiety.
- 2) Enable consistent service quality across Wales, building on the good practice being delivered in some areas to ensure that this is available to all children and young people across all areas of Wales.
- 3) CAMHS staff to have greater understanding of:
 - a) Violence against women, including domestic abuse and sexual violence (VAWDASV);
 - b) The effect VAWDASV can have on children and young people as witnesses to abuse and as survivors of abuse themselves;
 - c) The effect VAWDASV can have on the non-abusive parent whose children and young people may be accessing CAMHS services;
 - d) Perpetration of VAWDASV and safe practice.
 - e) Multiple complex needs of children and young people who have experienced abuse or violence so they can treat the client holistically rather than focusing on one specific matter such as ADHD etc.
- 4) A clearer, smoother transition from children to adult services is much needed, which allows for young people and young adults to continue to access the same services when transitioning between CAMHS and adult mental health services.
- 5) Promising practice in CAMHS services, which work closely with specialist violence against women services, to be adopted across Wales, ensuring good partnership working across all regions.
- 6) The Welsh Government's 'Good Practice Guide: A Whole Education Approach to Violence Against Women, Domestic Abuse and Sexual Violence in Wales' should be sent to every educational institution with a clear commitment to delivering it in every school.



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3.1 Specialist CAMHS – waiting times.

3.2. Welsh Women’s Aid specialist violence against women member services have found that a referral within CAMHS varies depending both on the nature of the referral and the location of the specialist service that has made the referral. One specialist service spoke about the response time for clients receiving a service referral due to suicidal ideation and self-harm as “very good”, stating that several children in 2017 had received very prompt service.

3.3 However, the same specialist service raised concerns around children receiving a CAMHS service around symptoms of post-traumatic stress disorder (PTSD) and anxiety, where waiting lists remain very long. One child waited for seven months for a service. Even so, the member specialist service stated that CAMHS staff were available over the phone and offered all the help they could in terms of resources and activities to help the young person during this long wait.

3.4 Another specialist service in a different location had a less positive feedback from their clients who accessed CAMHS services. By contrast, survivors felt that they received limited support that seemed to take a long time to be put in place. Once the support was in place, it was offered in quick succession before it ended, with no additional support in place, following its conclusion.

3.5 One specialist service gave positive feedback, stating that “when we have made referrals to our local area they have been progressed quickly.” While their limited interactions with CAMHS services had been positive, “referral to ongoing support is difficult” in the area “as there are no services locally.”

Recommendations:

- 1) **Reduce the waiting times for children and young people accessing CAMHS services, in particular those with long waiting lists such as services for clients with PTSD and anxiety;**
- 2) **Enable the consistency service quality across Wales for all client groups.**

4.1 Funding –

- a) the extent to which access to psychological therapies for young people have improved
- b) children and young people in care, children with ADHD and autistic spectrum disorders etc.

4.2. Within some violence against women specialist member services, concerns were raised regarding young people’s feedback when accessing support:

4.3 Children and young people specialist service workers in some areas of Wales fed back that children and young people in their area who have accessed CAMHS with regards to witnessing or experiencing domestic abuse, had not always had the best experience or support. Children and young people had felt that the services they received did not necessarily reflect the correct support they required, and stated that they struggled to connect with the workers at CAMHS and felt they were dealt with as part of a formal system rather than on an individual basis.

4.4 Further feedback from conversations with survivors of violence and abuse whose children had accessed the CAMHS service raised concerns about the lack of understanding regarding violence against women, including domestic abuse and sexual violence. “I believe that the CAMHS psychiatrists



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given to us did not take their responsibility seriously enough to research domestic abuse and its affects and contributed to life changing damage for my daughter and unmeasured grief for me.” – Survivor

4.5 One specialist service reported that “mothers feel they are left to have to deal with the children and their behaviours, they are not given much direction or support on what they could do to be supporting the child. Mothers feel that the expectation from the service [CAMHS] on them is of a high level and with the external pressures and factors of fleeing an abusive relationship they are not always realistic. This unnecessary pressure then makes the mother have heightened emotions/feelings of failure, guilt, and not being able to take care of the children’s needs/wellbeing.” – Welsh Women’s Aid specialist member service

4.6. Concerns were also raised about the understanding of CAMHS services when interacting with possible perpetrators of violence against women against both the mother and the children and young people accessing support. One survivor fed back about a perpetrator being present at appointments with CAMHS as well as being held responsible for the behaviour of the perpetrator. This highlights a lack of understanding of coercive and controlling behaviour.

4.7 Further concerns were raised by specialist members services that if the children and young people have addition support needs such as autism, ADHD, Asperger’s etc. the focus or reasoning offered by CAMHS will be a reflection of the additional need, rather than what the children and young people have witnessed or experienced in connection to their experience of violence against women.

4.8 By comparison, a children and young people worker from a different specialist member service, who had very positive feedback in general around CAMHS services, stated that “during my sessions with children and young people that have had, or are receiving support from CAMHS they have always spoken very positively of the time they have worked with CAMHS, and that the support they received has been relevant to their emotional needs.” They went on to say that they’d had the opportunity to work closely with CAMHS and “on more than one occasion I have found CAMHS to be a service ready to give advice and guidance of the best way forward when supporting children and young people with emotional and mental health issues.”

Recommendations:

3) CAMHS staff to have greater understanding of:

- a) **Violence against women, including domestic abuse and sexual violence (VAWDASV);**
- b) **The effect VAWDASV can have on children and young people as witnesses to abuse and as survivors of abuse themselves;**
- c) **The effect VAWDASV can have on the non-abusive parent whose children and young people may be accessing CAMHS services;**
- d) **Perpetration of VAWDASV and safe practice.**
- e) **Multiple complex needs of children and young people who have experienced abuse or violence so they can treat the client holistically rather than focusing on one specific matter such as ADHD etc.**





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5.1 Transition to Adult Services – How well planned and managed transitions to adult mental health services are.

5.2. Concerns have been raised by specialist member services around the transition of services from children to adults, which is not seen as a smooth process. Once the children services come to an end due to the age of the young person, the young adult is required to be referred back into adult services. The young adult is then placed onto a waiting list to access support, which sometimes results in them waiting months to access support once more.

5.3 Survivor feedback highlighted the huge amount of distress and the detrimental effect this may have on the young person’s wellbeing. This also highlights inefficiency within the system, as it can ultimately cost more to provide further support to the same young person to mitigate the impact of a hiatus in the support during the transition period.

Recommendations:

4) A clearer, smoother transition from children to adult services is much needed, that allows for young people/young adults to continue to access the same services when transitioning between CAMHS and adult mental health services.

6.1 Links with Education (emotional intelligence and healthy coping mechanisms):

- a) the extent to which health, education and social case services are working together;
- b) the development of the Health and Wellbeing Area of Learning and Experience as part of the new curriculum.

6.2. In one area a specialist member service reported that children and young people being supported by CAMHS were not being signposted to other relevant agencies. Also, information was not being shared which would allow a wraparound approach to the family. They stated that in their experience, the support that children and young people received was very singular and focused on one particular issue, when often a more holistic approach would be beneficial.

6.3 However, a joined-up approach was disclosed by a children and young people’s worker that was much more positive: “I have also had 1:1 meetings with a CAMHS clinical psychologist to discuss an individual’s support plan during their school transition from primary to secondary school. Sessions were planned between the secondary school, the clinical psychologist and myself to ensure the family and the individual that all aspects were planned, so if there were any issues during the school term there was always a ‘plan B’ to ensure the young person’s safety was always maintained.”

6.4 Some Welsh Women’s Aid specialist member services have also indicated that they have received very beneficial CAMHS training, which has been provided at a high standard, particularly on early prevention around depression, anxiety, eating disorders and trauma.

6.5 With regards to curriculum changes, Welsh Women’s Aid believes that all children and young people going through the Welsh education system should benefit from high quality health and well-being education. In particular, we advocate for a whole education approach:



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- **Whole Educational Approach:** survivors of violence against women recommended a whole educational approach in every school, which must be supported by the specialist violence against women sector. The Welsh Government has published a 'Good Practice Guide: A Whole Education Approach to Violence Against Women, Domestic Abuse and Sexual Violence in Wales'² which should be sent to every educational platform.

6.6 Welsh Women's Aid supports the promotion of a whole education approach to violence against women, including domestic abuse and sexual violence in schools. We believe that the research and practice (outlined in the Good Practice Guide) can have a huge impact in terms of prevention and early-intervention for these types of abuse, and will ultimately lead to a healthier generation of young Welsh citizens. By aiming to prevent abuse from starting or mitigating its effects by identifying it early, it will also promote improved well-being and mental health in children and young people in Wales.

Recommendations:

- 5) **Promising practice in CAMHS services, which work closely with specialist violence against women services, to be adopted across Wales, particularly in areas where specialist services have had more negative feedback on their local CAMHS services.**
- 6) **The Welsh Government 'Good Practice Guide: A Whole Education Approach to Violence Against Women, Domestic Abuse and Sexual Violence in Wales' should be sent to every educational institution with clear commitment to delivering it in every school.**

Welsh Women's Aid would again like to thank the Children, Young People and Education Committee for the opportunity to comment on this important issue. Welsh Women's Aid is also available to provide further written and oral evidence around this issue if required.

Any comments or questions regarding our response can be directed to:
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² <http://gov.wales/docs/dsjlg/publications/commsafety/151020-whole-education-approach-good-practice-guide-en.pdf>.

