

# Evaluation of Circle's East Lothian Children Affected by Parental Substance Use Project

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## Acknowledgements

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Circle offers long-term support to families affected by parental substance use. The approach is strengths based, solution focused, systemic and ecological, meaning that it takes account of the whole context.

## 1. Introduction

Circle adopts a 'whole family approach', with the meaning of 'family' defined by the individual and includes wider 'family' too. This approach takes account that for most families there is interdependence between each other's needs (O'Connor et al. 2014). The intervention is responsive to the set of family challenges each family has and recognises that each family member offers their own unique perspective on this. Family Outreach Workers at a cost of £45K per year, work with families in communities on an outreach and voluntary basis and offer family group work as well as working with family members one-to-one at different times. They provide emotional and practical support, building individuals' and families' social capital to sustain changes and help families connect with universal and targeted services to which they are entitled to enhance their wellbeing.

During the pandemic, and abiding by the restrictions, they have continued to offer families as much face-to-face support as possible and been innovative in their responses, meeting families in gardens, for socially distanced walks, drop-offs and pick-ups from school, and contact over the telephone. The service were also successful in securing funding to help families meet basic needs, such as electricity, food, clothes and getting connected online, as well

as delivering bespoke 'wellbeing packs'. Referrers include social work, recovery services, health visitors and midwives, education staff, third sector and community groups as well as self-referral. Circle commissioned this evaluation, not only to help inform their practice but also in line with Rights, Respect and Recovery, to ensure the voices of families are heard, and lived and living experience is at the core of service development and delivery.

### Structure of Report

The next section outlines the evidence base on the extent of parental addiction across Scotland and the relevant policies for this particular area, before moving on to an outline of the research methods and limitations. The first findings section presents the quantitative data or 'numbers' collated by the service of all 44 families supported over the past year and the outcomes recorded for this group. The second section of the findings and the main component of this report is the qualitative study, or the stories behind the numbers, that involved eight families and presents the key themes that emerged from the analysis. The findings from interviews with workers and management are presented followed by interviews with four services that work with the project. The final section draws conclusions and recommendations.





## 2. Evidence Base on Extent of Parental Addiction and Relevant Policies

It is estimated in Scotland that 36,000 to 51,000 children in Scotland live with a parent (or guardian) whose alcohol use is potentially problematic (Bardsley et al. 2018). The Midlothian and East Lothian Drug and Alcohol Partnership (MELDAP) in 2014 commissioned a Children Affected by Parental Substance Misuse (CAPSM) Needs Assessment. This study indicated that there were roughly 3,300 children across the area living with a parent with at least some level of problematic alcohol use (MELDAP, 2019). Furthermore, Fetal Alcohol Spectrum Disorder (FASD) is the leading preventable cause of intellectual disability and birth defects (ibid). It is estimated that between 2-5% of all live births will involve children affected by FASD. In 2017 there were approximately 2,000 live births in the MELDAP area. Potentially this could mean that between 40 to 100 children were born with FASD that year. However, recent evidence suggests an even higher prevalence rate than the 2-5% figure (ibid). The most recent Scottish Health Survey is based on 4,903 adults and 1,978 children from across Scotland (McLean and Wilson, 2020). It was found that just under a fifth of children (17%) reported living with a parent who was harmful drinking. The impact of poverty and alcohol use is clear, whereby in the 10% most deprived areas of Scotland rates of alcohol-specific death are more than 4.5 times higher and alcohol-related hospital stays around seven times higher when compared with the 10% least deprived areas (Giles and Anderson, 2020).

**3,300**  
children in  
Midlothian and East  
Lothian live with a  
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alcohol use

**17%**  
of children reported  
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who was harmful  
drinking

The extent of drug use remains hidden, however, the latest statistics based on those registered for specialist drug treatment, drug-related hospital admissions and Criminal Justice Social Work reports in Scotland, shows that in 2015 just over 40,000 individuals were identified (Pirie et al. 2020). It is estimated that the real number of individuals with problematic drug use is more than double (ibid). In the MELDAP Delivery Plan for 2019-2022, it is observed that the prevalence of female drug users in East Lothian is markedly higher than the national figure. It is recommended that consideration be given to ways of engaging with this group who face additional barriers, and face stigma particularly if caring for children.

It is increasingly acknowledged that substance use is the outward manifestation or coping mechanism for 'hidden' or underreported harms, and in particular poverty, trauma, childhood abuse, and violence. One in seven adults in the latest Scottish Health Survey report having four or more Adverse Childhood Experiences (ACEs), with those in the most deprived areas almost twice as likely to have experience of these than in the least deprived (McLean and Wilson, 2020). The literature on ACEs are not without criticism and can individualise what are structural problems, and for example it is worth noting that poverty isn't regarded as an ACE. The literature on resilience also affirms that families can gain strength or develop coping strategies from adverse experiences such as violence in the home (Hill et al. 2007), yet such 'experiences' should never be something someone has to endure. Essentially, a preventative approach should be prioritised and families able to reach in for support rather than being identified through a deficit model and stigmatised.



### There are a number of key relevant policies:

- Getting it right for every child (GIRFEC), which promotes eight factors often referred to as 'SHANARRI' to improve outcomes and support the wellbeing of children. These are that every child should be Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible and Included, at home, in school and in the wider community.
- The Independent Care Review (ICR) published 'The Promise' in 2020, which sets out an ambition for Scotland 'to be the best place in the world to grow up' so that children are 'loved, safe, and respected and realise their full potential' (2020: 4). There is a strong emphasis on children's voices being included in decision-making and for families to be supported to stay together, and draws attention to the pervasive impact of poverty as well as the role of family support.
- The Scottish Attainment Challenge aims to close the attainment gap between the most and least disadvantaged children.
- In 2013 the Scottish Government launched 'Getting our Priorities Right' as guidance for practitioners, to support families who are affected by substance use. In this, it states that all children and adult services should focus on a 'whole family approach', taking account of wider needs and promoting early intervention. In 2018, Rights, Respect and Recovery, Scotland's strategy to reduce alcohol and drug use, harms and deaths also promotes taking a whole family approach, and yet in reality this is still actually quite rare. For example, where there are criminal charges, in social work statutory services this will often mean that children will have a separate worker to the parent(s).
- The Mental Health Strategy developed by the Scottish Government for 2017-2027 looks at the 'whole system' recognising the importance of specialist services and early intervention, such as support to families through parenting programmes. The Strategy also points to the need for families affected by substance use to be provided with holistic support and for alcohol, drugs, mental health services and social work to work together. The Community Mental Health & Wellbeing Supports and Services Framework published in January 2020 sets out an objective that children and their families get the help they need, when they need it through easily accessible support close to their home, education, employment or community.





### 3. Research Methods and Limitations

This study set out to have breadth and depth. The quantitative data of families from across the past year who have been supported has been collated by the service. The main focus of this report is a qualitative study carried out that involved eight families, specifically four fathers, four mothers and two children, one aged six and another eleven. In addition, this analysis includes an interview carried out by the organisation Media Education with an eleven year old. However, unlike the parents, where the interviews were in-depth the interviews with the children were very short. Four parents also took part in a longitudinal study with re-interviews happening between four and eight months from the initial interview, to provide more depth into their journey over time. Semi-structured recorded interviews took place (Cousin, 2009), and where this was not possible contemporaneous notes were taken. In the initial stages all interviews were face-to-face, but because of the restrictions, interviews were then carried out by phone as this was what the families reported preferring. Interviewees were made clear to only discuss the areas that they felt comfortable to do so and were not pushed to give

answers. Those who took part in the qualitative study also gave permission for access to files and to approach workers to find out any other information. Participants received a £20 voucher for taking part by way of thanks. Interviews with three staff and management and four services took place to gather their views about the challenges faced by families and the support given, and what helps.

One of the main challenges in qualitative research is people being able to tell it like it is (Holloway and Jefferson, 2000), and of their own understanding of their situation and context. Fieldwork took place from February 2020 until mid November 2020. The number of participants for this study is small and may not be representative of a wider group, nonetheless these are valuable accounts to understand more about the context in which families experience substance use, and what they feel makes a difference to them.

Drawing on the work of Nowell et al. (2017) a thematic analysis was carried out, and this involved six phases,

1 Becoming familiar with the data

2 Generating initial codes

3 Searching for themes

4 Reviewing themes

5 Defining and naming themes

6 Producing the report

Names and some minor details have been changed to protect individuals' identities.





## 4.1 Findings from the Service's Data

### Key Facts:

- Over the past year the project has worked intensively with 44 families made up of 150 individual family members and three unborn babies.
- 58% of families were referred by Children's Services, and other referrals came from drugs and alcohol support services, criminal justice, and more recently health visitors.
- 19 of the families were already in the service at the beginning of the evaluation.
- 18 families were closed during this time.
- The length of support varied from between one year for the majority, to two years.
- At the time of the evaluation around a quarter of children being supported within families by Circle have or are suspected to have Autism Spectrum Disorder (ASD) or Attention Deficit Hyperactivity Disorder (ADHD).
- Of 25 families and specifically 29 children and 10 unborn babies supported over the past year, 23 children were kept out of care, five children and one baby were taken off the Child Protection Register (CPR) and two babies avoided being put on the CPR as a result of support.
- Taking the average cost per week of Residential Care is £3,700, keeping the 23 children out of care who were deemed at risk for even a week saves £85,100. This emphasises that not only is early intervention and prevention the most effective way to support families, it is also the most cost effective. Although costs should not be a driving factor in supporting or championing this approach, in reality it is a factor.
- All eight families who took part in a survey said they would recommend the service and rated the support as 'excellent.'

### SHANARRI outcomes for a sample of 13 families who have cases closed and outcomes recorded over the past year

The following table presents a summary of the SHANARRI outcomes achieved where the need was identified and provides a summary of cases.

SHANARRI Indicator	No. of Families where need identified	Level of Success
Safe	9	89%
Healthy	12	75%
Achieving	10	80%
Nurtured	12	92%
Active	7	100%
Respected	6	100%
Responsible	1	0%
Included	5	100%

## 4.1 Findings from the Service's Data

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### **Safe**

Nine families had being 'safe' identified as a relevant outcome and eight made positive progress towards this. Specifically, two improved their living conditions and a further two secured more appropriate housing. All eight reduced risks associated with their lifestyle to ensure the safety of their children, such as reflecting on substance use and no longer associating with those who take substances.

### **Healthy**

12 families identified being 'healthy' as a relevant outcome and nine (75%) made positive progress towards this with support offered to attend recovery and health appointments and to use recovery tools such as cycle of change and drink/drug diaries. Two had no change and one family had a relapse to alcohol use. The mum in this case had suffered chronic and acute domestic abuse, but whilst her then ex-partner was in prison she worked intensively with the service, and began a process of recovery. However when her partner returned from custody her victimisation commenced again. In spite of much safety planning she began taking substances again and ultimately the baby was 'accommodated'. This highlights the complexity of these cases and the challenges faced by both individuals and services in making a difference.

### **Achieving**

Where education was a relevant outcome for ten families, eight (80%) made positive progress with one-to-one support given, seven had improved engagement at school with one child's attendance increasing from 48 – 86%. Two children were also offered bespoke support around additional needs.

### **Nurture**

12 families had 'Nurture' identified from the outset as an outcome to work towards. 11 (92%) reported positive change in being able to better recognise their children's emotional needs. Five also improved their understanding of roles and boundaries and eight families were supported to develop appropriate behaviour strategies and how to reinforce positive behaviour. All the families were offered the programme 'Parents Under Pressure'. Five families took part in parenting programmes, improving how they meet their children's developmental and emotional needs.

### **Active**

Being 'Active' was a relevant outcome for seven families and all made positive progress by accessing age appropriate community and family activities, and this is an important aspect of the work Circle do, as will be discussed in the next section.

### **Respected**

All six families who wanted to be more respected reported this being achieved 100% through being involved in key decision-making processes like child planning, child protection and children's hearings, also increasing self-esteem as a result of feeling heard.

### **Included**

Four of five families felt less socially isolated by connecting with professional and community sources of support.





## 4.2 The Stories: Findings from the Qualitative Study

### Key Facts:

- The relationship established between the worker and family is central to any progress made.
- Helping families to engage and overcoming mistrust of services requires time and persistence.
- The level of practical as well as emotional support, and that this is a whole family approach and engagement, as a choice sets it apart from other services.
- The key themes identified were the isolation experienced by families, the prevalence of long term substance use linked to mental health issues, bereavement and loss as well as past trauma, and the levels of anxiety which have been and continue to be barriers to engagement. As parents, they also feel guilt and stigma for their substance use.
- Circle are shown to have a significant positive impact on families with stability established in relation to past substance use and this coinciding with people being connected to mental health support, in secure and safe housing, and in one case taking up employment and another engaging in volunteering.
- The service supports families to regain their positive identities as parents and also for children to understand substance use and in turn their role as children.
- Through the support of Circle, seven of the nine children had been taken off the CPR. It is very likely that without the support from Circle at least two children would have been taken into care and this was confirmed by Children's Services.
- Circle have been able to engage with families who have until now not engaged with support. Their importance is amplified during the pandemic where in some instances they have been the only support accessed and without which these families would otherwise be isolated.
- Although rarely opened up about, the backdrop of enduring poverty is clear and this is strongly linked to addiction, mental health issues, domestic abuse and isolation. As the pandemic continues the structural inequalities are set to deepen, and Circle's role as an organisation to help families living in deprivation is especially clear.

### Overview

In this section the analysis of interviews with eight parents and three children is reported on in four parts, that is i) the key themes that set out the context of the cases, ii) the engagement with Circle and views of support iii) the impact made and iv) the ongoing challenge of poverty.



### i) Key Themes: Context of Cases

#### Backgrounds of Trauma and Abuse

Workers report that almost all of the families they support have had some form of trauma or abuse in their lives when younger. Laura, Lisa and Helen spoke briefly of experiences as children of being in abusive families and of parental addiction. Ryan merely hinted at a difficult childhood, as he remarked in the re-interview, that it is only now he really feels 'safe'.

#### Recent or Current Experiences of Abuse and Violence

Experiences of abuse were common. Laura, Helen, Elaine and Lisa had all been in domestically violent relationships. Laura had also been hospitalised through a violent attack from her partner's drug dealer and Lisa sexually assaulted within the past year. Shane and David described both being emotionally abused by their now ex-partners. Shane had been prevented from seeing his children and David described himself as being coercively controlled for many years with a severe effect on his mental health. For all who reported abuse, the impact on their confidence, self worth and role as parents was devastating.

#### Isolation

All apart from John talked about being cut off from family and friends because of their addiction. Elaine and David spoke about the challenges in also being physically distant from their families. The pandemic made the isolation for most worse. The experiences of Shane and David will be discussed in more detail in the next sections.

*"I am really on my own. I have family that live down the coast but the buses are terrible, so I actually see my daughter in Glasgow more, it was once a month but now not at all with lockdown."*  
(Elaine)

#### Bereavement and Loss

Although a link that appears to be well known among drugs and alcohol services, there is currently little research about the relationship between addiction and bereavement or loss (Masferrer and Caparrós, 2018). In this study, this was very apparent and the feeling of having hit 'rock bottom.' Helen and Elaine had both lost their parents, Ryan spoke about the 'loss' of his children when they were taken into care, and Shane and David struggled with the end of their relationships with their now ex-partners and not being able to see their children.

*"I was heartbroken. I was mentally on the floor."* (Shane, interview 1)

*"It was just feeling like everyone was on top of me."* (Elaine, interview 1)



### Mental Health Issues and Substance Use

The prevalence of mental health issues and substances being used as a way of coping is also significant. It brings to the fore the challenges individuals face to get support and being refused access to mental health services because of their addiction, and how policies like these fail to take account of the realities of people's lives. David, Shane and Helen had all been suicidal at their lowest points. Laura, Ryan, Lisa, Elaine, Helen and David reported having anxiety issues and this preventing them from leaving the house. Elaine and Lisa had become so anxious at points that they had been unable to take their children to school. Laura used alcohol, and Lisa and Elaine used heroin to feel calm. David, Shane and Ryan spoke openly about going into a downward spiral of heroin abuse after experiencing loss and depression. At one point David was dealing drugs to try to pay off his debts and to feed his and his then partner's habit. He was under surveillance by the police and also being threatened by those who he owed money to. He took street diazepam to deal with his anxiety. John reported feeling very stressed and using cocaine as a release. He felt that by the time he and his partner had been under surveillance by social workers, they had actually gotten to grips with what had been an increasing use of drugs recreationally.

It was observed in the study that the women were overall less open about talking about their substance use and this could be because of the stigma felt, with mothers feeling especially judged (Sharpe, 2015). It could also be that trust had not been built yet with this being a short study, or simply interviewees were keen to focus only on the future. This is a point worth exploring further though and highlights that supporting women in particular, both to open up about the extent of substance use, and also to build trust, overcoming backgrounds of abuse and trauma and a well established 'functional' mistrust will undoubtedly take both substantial time and effort.

### Homelessness and Unsafe Housing

Helen, Shane, David and Ryan had all been homeless when they first engaged with Circle. The challenges of living in temporary accommodation added to the feeling of having hit rock bottom, and for those who are fragile in recovery the whole circumstances can severely undermine progress.

*"When it all happened I moved in with Dad in Edinburgh but we don't get on, so I went to the Council and then I was in a B and B for three months and that wasn't good, because of the people that were in there. The amount of drugs, I have not lived that type of life, the whole prescription drug thing." (Shane, interview 1)*

Although not homeless, Elaine reported being verbally attacked by her neighbours and falsely accused of alcoholism, and had it not been for Circle's support, Children's Services may have taken her child into care.

### Spoiled Identities as Parents

All interviewees spoke about wanting to be a good mother or father, and feeling that they were viewed as being the opposite not only by services but by wider society too, and it could be said that their identity as parents had been 'spoiled' (Goffman, 1963). These feelings of inadequacy create barriers, with parents feeling guilty, affecting their self esteem.

*"This whole thing with the social work, it was as if we were being told we are crap parents and that was hard to take. We had never been involved with any services before this." (John, interview 1)*

## 4.2 The Stories: Findings from the Qualitative Study

Similar findings in terms of how parents feel are also echoed in a recent consultation carried out by Circle and Mid and East Lothian Drugs (MELD) (2020) which heard from families across East Lothian. In response, in the report it is contended that ‘it is vital not to dismiss or diminish an individual’s or family’s lived experience for it is from the expression and exploration of these experiences that change in society comes’ (Circle and (MELD), 2020: 34).

### Resilience

The accounts of those interviewed also brought to the fore the resilience they have had to show but are not really aware that they have, whereby throughout their lives and often without support, they have had to deal with really difficult issues. Although being self-reliant is positive, this also has the negative downside of individuals finding it difficult to ask for and accept help. This could also be linked to attachment patterns with individuals not feeling they can rely on others to provide care, as they did not have this in their own lives when younger.

### ii) Engagement with Circle and Views of Support

#### Length of Time Working with Circle

Of the eight parents interviewed, three had worked with Circle in the past before. Of the eight, the length of time with this particular support is shown in the table:

Length of time	Number (n8)
6 to 12 months	2
13 to 18 months	2
19 to 24 months	1
Over 2 years	3

#### Number of Children

The eight families involved in the study comprised nineteen children and Elaine was also pregnant. When they first came to work with Circle, nine children were on the CPR, six in kinship care and four other children were in the custody of their mother following the couple’s separation. Four of the children had been assessed as having autism. At the first interview Shane and David were struggling to access their children and this was their main motivation for working with Circle.

#### Source of Referral and Being ‘Timely’

Four parents, namely Shane, Laura, Ryan and Lisa welcomed the referral made by Children’s Services to Circle, recognising that they were struggling as parents. John had been referred by Children’s Services at the beginning of the pandemic after his son Luke was placed on the CPR when he reported feeling unsafe at home to a teacher at school because of parental recreational drug use. John met the Circle worker at the first panel meeting and then in the garden. He said that he had not been aware that his engagement was voluntary but having worked with the service he could see the benefits and wanted to continue. David and Helen were both referred by their drugs support worker and Elaine by her health visitor. All three were also glad of the help. When asked if the support could have been at an earlier point, other than Lisa, who felt it should have been, most were unsure, with both Ryan and Shane feeling that they had not been in the ‘right place’ before to accept it. This reinforces the importance of choice and of those participating exercising their agency. This may seem a small point, but actually for families and individuals who often feel on the margins, this can be significant.

*“I had tried before with other people, but I also think the timing was right, I was in the right place to make changes, and they were able to help me do that.” (Ryan, interview 2)*

All interviewees said that they had never had support like this before. The persistence of workers is striking, particularly in the early stages to enable engagement. For David, Ryan, Elaine, Lisa and Laura, mainly because of substance use there was a lack of engagement in the beginning but the worker continued to come out every week and make them aware of the offer of help. This was viewed as the worker being 'there' for them, not as a form of surveillance but really caring, and considering how isolated they had become this was a contributory factor towards them being able to turn their lives around.

*"She kept coming throughout all of this. I don't think this is just a job to her."*  
(David, interview 1)

*"At the beginning I didn't see him very much, but as time goes on and we really want to change we see him more."* (Ryan, interview 1)

Generally, levels of contact were weekly, and then as time went on reduced to fortnightly. However, for some cases where there were a number of crisis points, support was given daily. For example, for Elaine, when she had to leave her flat and stay in a different area because of threats from the neighbours, the worker was with her and her daughter every day, supporting them through this. In Laura's case, support for many months had been twice a week and in the final interview, four months on, her daughter was no longer on the CPR and the case was about to be closed which she viewed as being really positive. Interviewees also appreciated that the level of contact was down to them, and again meant that they felt in control and were exercising their agency at every stage.

### Whole Family Approach

All interviewees, including the children, really liked that Circle support all of the family and this sets the service apart from others, and is especially important in reaffirming a positive identity as a parent and daughter or son. Individuals within the family also valued meeting with the worker on their own and the opportunity to make sense of how they feel.

*"This is different because with other services they either work with the adult or the child, they don't work with them both, but with this they do. He has helped us to come together and with attending meetings at the school with me he is helping me to understand and to be understood."*  
(Helen, interview 1)

For David, Shane and Ryan, Circle workers helped to be the 'go-between', to keep communication up with their children.

*"I am not used to not being a parent, so my worker helping me to feel like I am still connected and being the go between with my ex and the children has been really good."* (Shane, interview 1)

*"He is also helping me to keep that bond with my kids who now stay with my mum and aunts. The two girls are with my aunts and the older boy is with my mum, and we have had tickets to go to the football from them, and it is good to have that bonding time with my son."* (Ryan, interview 1)

## 4.2 The Stories: Findings from the Qualitative Study

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At the first interview John and his son Luke had only been working with the service a short time and Circle were carrying out one-to-one work with the father and son, before progressing to work with the whole family, and this was really appreciated. Families were also open to being taught about boundaries and improving communication. As well as providing support, Circle highlight the strengths they see too, so for example, emphasising the love and care that exists within the family.

*"My daughter and I get on so much better now than we did before. It is that I am not as anxious so neither is she. We still have our moments, but it is not like it was before."* (Elaine, interview 2)

*"I think I am communicating better with the family too and just have more patience."* (John, interview 1)

Circle help families find ways to keep children active with limited financial resources.

*"He has been good at talking to me about how to parent with the changes, you know not to just plan on taking them to the park but think about other ways to keep them entertained."* (Shane, interview 1)

Shane, David and Ryan also completed the parenting course Parents Under Pressure, which has been successfully evaluated by Hollis et al. (2018). They felt this was really useful in helping them to develop ways of communicating with their children, particularly about their addiction issues.

*"He helped me to complete the parenting course Parents Under Pressure, to be able to speak to my kids about the addiction. You know saying just to a kid 'I'm sick', they then worry that you are going to die. You have to really think about what you say."* (Shane, interview 2, 8 months on)

Circle's support at Children's Panels, to feel heard, but also to process and deal with the information was also very welcomed.

*"When we went to the Children's Panels, there were lots of services there and I find it hard to talk. At one of the meetings people were being really negative about the past and Colin spoke for us about how positive things are now and it changed the way the meeting was going. He helps me to have the confidence to speak too and when I am not good at getting my point across he helps with that."* (Ryan, interview 2, 6 months on)

*"My daughter is under a supervision order so she helps me with the meetings with Social Work. I have a LAC review coming up and Erin always helps me go to those and to support me in what I am saying. I always dread them... With the reviews, in the past they have said that my daughter looks 'unkempt' and that really gets my back up. I have become a bit obsessed, with ironing her uniform every day. When you ask them they then said that she looked tired. It really annoyed me because in that same meeting they had told her that her father was in prison, something I had kept from her for years, so how were they expecting her to be."* (Lisa, interview 1)

### Practical (and Emotional) Support

Circle was regarded as one of the few services that really helped by giving practical support, and this was dependent on what people needed or wanted. For Shane, it was about helping him to make his flat a home and keep up contact with his children when he was not allowed to see them. For David, this was about making contact with a different local authority, helping him move, getting his debts sorted, benefits set up, and to connect with drugs support services in the new local authority.

*“Circle helped me to connect with the recovery groups and the peer support... She took me to a lot of appointments and helped me to make those steps, and I don't know if I would have been able to do that myself in the beginning, it was just having someone there that really helped with my anxiety.” (David, interview 2, 8 months on)*

For Helen it was primarily about getting access to mental health services and at times also getting food parcels. Laura really appreciated being linked into counselling and supported to go to Citizens Advice and getting her benefits set up. She had also been taken to her appointment for the Personal Independent Payment (PIP) and explained that because it was so early in the morning and she was reliant on public transport, without this she would not have been able to attend. Also because of her anxiety issues, going to appointments on her own, or to anything for the first time, were especially daunting, and she found it hard to take those first steps. This was a common theme, with both Ryan and David (related above) also saying that without the Circle worker coming with them initially to recovery groups, and Lisa and Elaine taking their children to school, they would not have made those steps themselves because of their anxiety.

Elaine has had significant practical support to get food parcels and to get her house cleaned and sorted. When she came out of hospital following a serious operation it was the worker from Circle who was there to support her and to take her daughter to school. Elaine has to take two buses to visit her older daughter. After getting off the first bus in Edinburgh the buggy collapsed and she was stranded. She called Mhairi, her worker, who responded immediately, was able to source a buggy, get into town to drop it off and ‘be there’ in a way a close friend or family support would, both things Elaine does not have. The workers at Circle are skilled, reflective and have a lot of autonomy and are trusted to use their time effectively, being responsive to needs and taking time off in lieu where appropriate, with staff wellbeing and boundaries emphasised.

The ‘practical’ ways in which Circle offer support are also bound up with emotional support too, because they are seen as actions which show that the worker cares and have taken real account of their circumstances and been empathetic in their approach. Elaine for example related how this is the first time she has really let someone know how difficult she can find things, and in doing so, her and her daughter are getting the support they actually need.

*“I had all the confidence that I had battered out of me by my son's dad, it was mental abuse, although he did get physical too once. I don't usually ask for help, I don't want folk to think that I'm failing and these are my kids so I should look after them. But with Mhairi (worker), it's different. I think the fact that I feel I can ask her for help says a lot.” (Elaine, interview 1)*

Interviewees also reflected how the workers had really seen them at their ‘worst’, and this is about honest communication, and Circle were seen as providing practical and emotional support to move beyond this.



## 4.2 The Stories: Findings from the Qualitative Study

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### The Importance of the Relationship Established with the Worker and Having Emotional Support

The relationship established between the worker and family really underpins all of the 'good' work that is able to take place, and this is dependent on individuals connecting. There were four particular elements of the relationship emphasised: they found their worker easy to talk to and a good listener; they were non-judgemental; they were someone they had built trust with through being consistent; and they were reliable, responsive and only a phone call away.

The extent of anxiety reported among interviewees amplified how important it is to have another person they can speak to, who is viewed as objective, able to put things into perspective, and help them to feel calm and regulate their emotions. This may also link back to their childhoods where such support was not available.

*"I really value the support and the advice that he gives me. You know he can talk me down. He can help me put things into perspective. He is only a phone call away and he always makes time for me. You can speak to family, but it is almost like it is too personal with them, whereas Colin (worker) can be impartial."* (Shane, interview 2, 8 months on)

*"I find it easy to speak to him... He is like a friend to me... he really listens to me... He always looks at things from my point of view and understands what is happening and is able to read the situation. He has always been here"*. (Ryan, interview 2, 6 months on)

*"I have a really good relationship with Erin (worker) and I would say out of all the workers I have she is the one that I am closest to. I feel I can rely on her. She doesn't bullshit me and she always answers the phone and calms me down."* (Lisa, interview 2, 4 months on)

*"I think the big thing for me was helping me with my bereavement and just having someone to talk to, who can understand and be there. She helps me to not feel overwhelmed with things and to realise that I can do things."* (Helen, interview 1)

*"I feel like I can talk to him and it is good to have someone to vent to."* (John, interview 1)

Another key aspect is that workers are non-judgemental.

*"Colin listened to me and supported me to go to the school and speak to them about my worries and how we could find ways around that. He didn't tell me that I was being silly, he listened, and he has never judged me about my past, and that means a lot to me."* (Helen, interview 1)





Interviewees explained that building trust for them was really quite difficult, but workers, through their actions, taking time, and 'being there', and being thoughtfully reliable, were able to build trust. Laura for example has had many services in the past in her family's life, with her child being on and off the CPR but she had never built the level of trust that she has with Erin, and it was through this that she was able to open up about her past abuse and finally get the help needed, rather than self-medicating using alcohol.

*"I keep a small group of people who I am close to, and find it hard to trust people, but I really trust Colin." (Helen, interview 1)*

Although different to the other attributes, it is worth noting that interviewees, who are struggling on benefits appreciated 'getting out', and the worker helping them to build confidence to be social.

*"The main thing for me with Circle is that they are here for me. Mhairi goes above and beyond and I know this...She takes me out, we go for a coffee, me and the kids and it is just having someone to talk to, who can help you feel alright." (Elaine, interview 1)*

### **Connections to Other Services and Links to Communities**

Crucially Circle take an ecological approach and are very aware of the need to not create dependency and to link families in with appropriate services and local connections. It is important to recognise though that all of the interviewees highlighted how challenging it is for them to access community support alone and their lack of awareness of what they are entitled to is especially apparent. Shane, David and Ryan had been linked in with DadsWork, a local service, providing different types of support to help fathers build confidence as parents, and to meet other fathers. Shane had more recently given a presentation at the Parliament about the work he had been involved in and felt through these opportunities he was building confidence. Lisa, Helen and Elaine would not have accessed support to get assessments for their mental health had it not been for their Circle worker, and they felt this had been pivotal in them finally being able to deal with their substance use. Ryan and David were connected to drugs support services and recovery communities. Ryan was able to get a gym pass through Circle and had been taken there a few times by the worker Colin, and had really been enjoying going on his own and meeting others. All the interviewees explained that they had not known about these services and as already mentioned, without the support of Circle they would not have attended the first sessions on their own without the worker.

*"Colin comes to things with me a few times so I can feel a bit more comfortable and then I am able to go myself. He has also taken me to DadsWork, and I have met other dads and been able to go out for walks and have a chat with them." (Ryan, interview 1)*

### iii) Impact of Support Provided by Circle

#### Impact on Dealing with Trauma and Abuse

Lisa and Helen both highlight how dealing with past abuse is very much an individual process and Circle were supportive of this. For Lisa the 'answer' to dealing with abuse lay in dealing with this head on and she had been supported by Circle to connect with counselling and was about to begin talk therapy before the pandemic began. For Helen and Ryan, it was a case of trying to forget about it, and focus instead on the positives in the present and future.

*"A lot of bad stuff happened...The death of my mum brought it out and I am now learning to focus on the positives in life." (Helen, interview 1)*

#### Isolation

Since the pandemic, as already stated, for most the level of isolation experienced had become worse. Face-to-face contact with workers was as much as possible, as already explained, and the contact with workers was greatly appreciated, particularly by Helen, Lisa and Elaine who were otherwise without adult contact.

*"Throughout this time he has been in touch with me and met me and my son outside. It is just good to see a face. He brought me a package with things for my son and I. The coronavirus has really heightened things for me and my paranoia." (Helen, interview 1)*

*"With Covid I have found this really difficult and she has been calling me twice a week and then coming to visit me to see me outside." (Lisa, interview 2, 4 months on)*

*"It is a different kind of support. I still see her every week but we now go out for a coffee and have to sit outside. I think the main thing is that she gives me that push to get going." (Elaine, interview 1)*

Laura and John felt the pressure of lockdown but were managing through support of family. Ryan had ended contact with the service by the second interview and was managing also with support from family, but he said not being able to access recovery groups had made things challenging. One of the concerns as a result of the pandemic is that with being isolated and not engaging, the confidence that people had taken so long to build to engage in the community could be lost. Shane and David, interviewed eight months on from the first interview, felt less isolated, having connected back with their families which they felt was a direct result of stopping taking drugs. Shane explained that because of the pandemic his ex-partner recognised the importance of the children seeing their father and they were in the process of coming to an agreement about contact. Both had turned their lives around and felt more connected to others than they had in a long time.

### Building and Rebuilding Relationships

Both David and Shane were rebuilding the relationships they had lost with their families through substance use. David had agreed for his parents to apply for a Section 11 Residence Order of his children, because he felt that being with his parents was where they were most stable. He lived just down the road and was seeing them every day, and able to have them stay at his overnight and at the weekends, and although he eventually wants to have full custody, he felt that this was a good step for now. Both Shane and David had also ended contact with all the friends they had known who continued to take drugs and through the different groups were meeting new people. Shane was digitally aware and had been able to keep contact up during the pandemic. David was back working and making new friends and feeling in his own words like he was 'getting back into life.'

### Mental Health Issues and Substance Use

All had reduced their substance use over time through support and being connected to drugs and alcohol support services. Specifically Shane and David were in the process of coming off prescribed medication, having stopped using and also coming off methadone. Shane explained that he was no longer depressed as he had turned his life around, was seeing his children and was in a new loving relationship. David had put a referral in to see a psychiatrist when he moved to the new area but when the appointment finally came around he did not feel like he needed it.

*"I got a phone call from a psychiatrist last week, as when I first got here I asked to be seen, so that is 7 months on now. When I spoke to her I told her that my life is great and I don't think talking about the past would help me and she said that it sounded like I had just got on with it, which I have... I used to have trouble sleeping, but now with working I am out like a log."*

(David, interview 2, eight months on)

Ryan had remained stable on methadone and was now down to 5ml a week. He in turn also felt that this was down to the support, but also that this was the first time in his life where he felt things were going well, with a new home, and focusing on his family. For the first time in her life Lisa was also stable, as she had been recently diagnosed as having bi-polar disorder and accepted that she needed to take her medication. She reflected that it would have been good to have this diagnosis earlier in her life. Both Ryan and Lisa felt that the support given by Circle to overcome their anxiety was especially welcomed.

*"For the first year and a half they really concentrated on supporting me, helping me to get stable. There have been big changes over the past year in particular. I was taking drugs since I was 12 and in the past year I have really been getting sorted... One of the main things is dealing with my anxiety...When I am anxious or panicking the first person I call is my Circle worker."*

(Lisa, Interview 2, Four months on)



## 4.2 The Stories: Findings from the Qualitative Study

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Helen was also no longer using and was now stable on methadone. She said:

*“Before with my drug use I would be good for a while and then have slip ups, and I thought with the coronavirus it would be worse for me, but actually it has meant that I am staying away from it all. Just having that support to ask how I am, and that I can be truthful, it means a lot. I can’t put a percentage on it.”* (Helen, four months on)

Elaine had got herself down from 100ml to 10ml of methadone but when her partner died she was back using for a short time, before going to her GP and getting the help she needed. She recognised that ‘before’, she would have tended to ‘give up’ and be back using again, but she realised she had lots of positive things in her life and was keen to get back on track with support.

Despite in the early stages John feeling he did not really need help, he did think that having the worker to ‘vent to’ helped him feel less stressed and he and his partner were no longer taking drugs.

### Housing

At the final interview Helen was still living in temporary accommodation and the service helped her to source some furniture for her future place. Shane had been helped to get into his flat and was keen to decorate it, and the worker had been looking into getting paint to help him to do this. David had significant support from the worker to liaise with another local authority, and to link him in with a social worker to support his case to move because of the level of threats he was experiencing. When he moved to the different local authority, rather than living in temporary accommodation he opted instead to live with his grandmother, because he was worried what the other option might mean in terms of his recovery. Through Circle, Ryan, his partner and young son got their housing benefit sorted and moved into a house rented from a private landlord. The impact of secure housing is significant.

*“This is the first place that I have felt safe and we can call it a home. This is also the only place I have lived where I am close to family. It is just one bus trip away to see the kids.”*  
(Ryan, interview 2, 6 months on)

### Employment and Accessing Opportunities

Apart from John who has been and remains in full time employment, in the first interviews the idea of employment, training or volunteering seemed very far away for the other interviewees. By the second interview though, David, eight months on, had told his prospective employer his background and after a month’s probation had been offered a full time job. Ryan was volunteering locally in a shop until the pandemic began, something he said he would never have thought possible without the encouragement given by Colin, and it made him recognise his potential. Shane was actively looking for work.

### More Accepting of Help and Awareness of Rights

All related that through the support they have been given and being more connected to their communities and aware of their rights, they are better able to recognise their entitlements. Yet, there was still a long way to go in terms of overcoming the shame and stigma people felt, and for example, it was notable that most still did not go to the Foodbank themselves.



### 'Restored' Identities as Parents and Children

There is no quick fix to interviewees feeling that they are not past judgement, but by getting their lives back, being able to really be there for their children, understanding boundaries and taking advice and the help offered on board, they felt they were no longer struggling and able to be 'good parents.'

*"I have been taking the kids out for days and we went to the museum a couple of weeks ago. I feel like I am getting things back, that time with the kids that I have missed and we are good. They are also able to stay overnight with me which is great... The kids and I, and my parents we are going to the caravan for a holiday. It is just great to get away... I have been taking them to the zoo and all these things I hadn't been doing for years, it is just great." (David, wave 2)*

*"I think my relationship with my son has improved because I am understanding more about him. I have these stickers to try to help him to communicate how he is feeling and that has made a big difference. Colin is also teaching me about boundaries, so it is ok to say to my son that I can't speak to him just now if someone else is trying to talk to me. Colin also models that for him when we are talking to one another and that makes a difference. It is all helping me to feel like I can cope a bit better. I also feel with my son that people are finally listening." (Helen)*

*"Colin has helped me and my partner get a routine with Darren. When we had the first kids we were young and using and it has been good to have this." (Ryan)*

Of the 19 children, through the support provided by Circle:

- two were still on the CPR
- seven were now off the CPR
- six were in Kinship Care but plans were in place for the family members to take full custody and the parents were in agreement and had daily access
- four were now getting access to see their father and a plan was being formally drawn up and made legal.

Elaine revealed that had it not been for the support of Circle her two children would have been taken into care and this was verified by both Mhairi and the family's social worker.

Laura, Lisa and John all specifically felt that through the support of Circle their children were doing better at school.

*"She takes my daughter out for a walk and just talks to her and helps her. I think since they have been working with her, her school work has improved and she is doing much better." (Laura, interview 1)*

The two children interviewed felt that their family were getting on better than ever and they understood more about their parents' situations.

*"She is really nice and I like to talk to her. She helps me understand when mummy is not well and she takes me out." (Fiona, aged 7)*

*"I like talking to Colin and we take the dogs out for a walk together. I feel like I can talk to him and he gives me good advice. I think I am dealing with things better. I think it is good to bring all the family together. It is helpful. It is weird though too now as we can't sit indoors." (Luke, aged 11)*

## 4.2 The Stories: Findings from the Qualitative Study

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This is also reflected in the interview carried out by Media Education with Lewis. [circle.scot/families/family-rights-and-inclusion/](https://circle.scot/families/family-rights-and-inclusion/)

He reflects:

*“Mum was addicted to alcohol and I never really understood why. I was six years old at the time. Circle helped me to know that it wasn't a choice for my mum to drink alcohol, it was a mental illness...I thought it was my fault she was drinking which caused me to have low self-esteem... (now) I know it's not my fault...Because of Circle I talk more.”*

This highlights that through the support of Circle the parents are able to be parents and their children restored in some ways to being children again too.

### Proportion of Positive Change Interviewees Attribute to Circle

On average interviewees reported that 70% of the changes they had made to their lives was down to the support of Circle.

*“Erin did so much for me. They are the best organisation I have ever worked with and a godsend. I feel like they got me here, well me and them, 50/50 each.”* (David, interview 2, eight months on)

*“I think I would put my being calmer and happier as 100% down to Erin as she really helps me to make sense of things.”* (Laura, interview 1)

*“100% down to Circle. I don't know what I would have done without their support as no-one else has really been here for me... I think without their support I might have fell apart.”* (Lisa, interview 2, 4 months on)

### The Ongoing Challenge of Enduring Poverty

Although not something interviewees were very open about, and this is likely to be because of the unnecessary and misplaced shame felt (Walker, 2014; Gupta et al. 2018), the main challenge all face apart from John who is in employment, is poverty and having to manage living on benefits.

*“I do struggle sometimes and Circle have helped me get the odd food parcel now and again. Before pay day it is really tight.”* (Elaine, interview 1)

*“It has been hard, living on benefits...In the past Circle have helped me with food parcels but I have not needed that just yet...I think the problem is that it can be made to seem like it is your choice, but it isn't. The benefits you get just aren't enough, and this is decided by a Government who are probably claiming £30 for their breakfast.”* (Shane, interview 2, 8 months on)

The pervasive impact of poverty as a result of austerity and now the pandemic, and the emotional, physical and psychological impact it has on families is documented in other research (Galloway, 2020). As the pandemic continues, looking to the future the economic situation will be worse. As was highlighted in the beginning of this report, the links between alcohol and drugs addiction, mental health and isolation to poverty is clear, and again likely to increase. Benefits are not enough and definitely not enough to lift people out of their situation. The support of Circle is more important than ever to those families who need it and they are able to reach families, when others haven't.

### Case Study: David

David and Lucy had two children together. Lucy had a traumatic childhood and both became addicted to heroin. Their habit escalated and they ran up drug debts, which also led them to being coerced into dealing. The children were being neglected and were put into David's parents' care. The substance use worker connected them to Circle to get support. David was especially keen to give up drugs, motivated by a desire to get his children back. The Circle worker supported him to access a methadone script, but it was really hard to stay committed when Lucy was still using and didn't want to stop. David stopped engaging and was back using, and dealing. The Circle worker though continued to call, visit the house and let them know that when they were ready the help was there. Lucy and David split up because David wanted to stop taking and selling drugs. The Circle worker supported him to move out and into his own tenancy. His mental health hit rock bottom and he was suicidal. The worker helped him to access a methadone script and see his children every week at his parents', talk to them and explain the situation and engage with Children's Services. Over time David began to open up about the emotional abuse he had been experiencing from Lucy, and how this affected how he felt as a man and a father. He had lost his self-esteem. By telling the worker and talking through the things that had happened, David confronted being heartbroken but also recognised the problems in the relationship and how protecting her and not telling the truth was holding him back, and this was his chance to really make a go of his life and be the father he wanted to be. He was supported to link in with a befriending service and recovery community, with the worker accompanying him for the first few meetings, to help him overcome his anxiety. Meeting others with similar stories helped him to feel less alone. However, he started to receive threats from Lucy's family and drug dealers he owed money to, and was afraid for his life. Through support from Circle, building his confidence and self worth, and sticking to his recovery, he cleared his debts, moved to a different area, close to his parents and children, and began to build a new life. Seven months on he is off methadone, sees his children every day and accepts that his parents having custody for now means that they are in a stable situation and that is all he really cares about. He has even met someone new. He is back working full time after passing his probationary service. David had requested to see a psychiatrist when his relationship first ended, but when the referral finally came through he felt he was now so far on he did not need that help anymore; he also didn't want to look back on the past, when the future ahead is so positive. David felt at the first interview that the change in the right direction was 90% down to Circle because they didn't give up on him, when he had felt he had given up on himself. Seven months on, he feels that it is 50% down to Circle how his life has turned round, because he recognises the effort he made, and he wanted to accept and take the help. David hopes that he can be a peer support worker in the future and has been looking into doing volunteering because he wants to help others like him turn their lives around too.



## 4.3 Findings from Interviews with Workers, Management and Other Services

### Key findings

- The main challenges families face are poverty and issues related to mental health and in particular anxiety which holds them back from engaging with support.
- The main strengths of the service are the time taken, and that workers persevere in helping families engage, emphasising that this is their choice. The support offered is intensive, long term, a whole family strengths based approach, and also crucially the service is delivered on an outreach basis.
- The pandemic has changed the nature of engagement and made it more challenging. With groups and other local services not fully operational, linking people in as had been hoped has not been the same, and it is feared that the time taken to build people's confidence to make connections will be lost. Workers expressed concerns about the future for those they support and them becoming increasingly isolated.
- At present, for some families, during the pandemic Circle is the only service still operational on an outreach basis and making contact.
- Although rarely opened up about, the backdrop of enduring poverty is clear and this is strongly linked to addiction, mental health issues, domestic abuse and isolation. As the pandemic continues the structural inequalities are set to deepen, and Circle's role as an organisation to help families living in deprivation is especially clear.

### Overview

The following presents findings from interviews with the three Circle workers and manager, and two representatives from other services.

### Referrals

The main source of referrals has been through social work and it was observed that when they were sharing the same office this made communication especially easy. Workers and management were really positive about how referrals were now coming from services such as health visitors, which means that the service can be offered to families as a form of early intervention and prevention of risk. Management reflected that the ideal would be that they would have more self referrals and this would mean that families are accessing their rights to support, and moving beyond the stigma they may feel.

### Challenges Families Face

The extent of poverty is a real concern for workers. All felt that the main challenges are also around mental health issues and the extent of anxiety which is a barrier to people accessing support, and these findings echo the interviews with those engaging. Other challenges were overcoming the mistrust families have about services and the fear they have of losing their children, and this coupled with their anxiety emphasises how the initial engagement is the most difficult. The backgrounds of abuse and extent of domestic abuse experienced is an issue for a substantial number of families. The judgement and stigma perceived by service users is also a barrier to change, and Mhairi reflected how she had come across instances where other professionals, particularly those working in health did judge.



*"I had a mum recently who took her baby to the hospital and they immediately were saying that the child is on the register and she felt straight away that she was being judged, but also that her baby of only 12 weeks old is being judged too. That baby has a label now because of her behaviour and she was so upset by this. So it is a cultural challenge that we face too from other professionals." (Mhairi)*

### Strengths of the Service and Workers' Values

The main strengths reported are that workers have time and persevere to help families engage, not sticking to regular 9-5 hours, taking account of the whole circumstances, working with individuals as well as the whole family, approaching them with 'unconditional positive regard' (Rogers, 1959) and promoting their rights. There are very few services that do this level of one-to-one work with children that this project does, helping them to open up about their experience and through time, sharing their emotions with their parents. These are difficult conversations and the manager observed that the workers are all very experienced in this field. The workers' values reported centre around being empathetic, non-judgemental, approachable and caring.

*"I have never given up on a family. I had one family that I got the referral for in December and it took until March for them to engage, and it was a case of me saying 'I am still here. I am still here.' It is about understanding that anxiety and finding ways to help people to engage...All of the families I work with have backgrounds of trauma, abuse and violence. To get them to turn up at a meeting, when you know what they have been through, it is no wonder that they struggle... I think Circle really have human rights embedded as part of the service and to treat everyone with respect and that they are entitled to this support." (Mhairi)*

Crucially, the service is voluntary and one statutory provider reflected on how this in itself changes the dynamics. Although people are referred, workers emphasised how important it is to ask families directly what they want to achieve, as this may be different from the referral. Circle's approach is strengths based and one of the first questions asked of families is what they feel is working well, and it was noted that asking this type of question in itself marks them as being different, where there is a tendency to have more of a deficit model. In research carried out by Circle a year ago they compared the referral reason from organisation to what families want support for, and where the referral organisation focused on the need for support to change the children's behaviour and parenting, for the family it was about getting help with debt, housing, living conditions and poverty. The impact of social inequalities on child welfare is clear, but parents' awareness of child support services in this regard is not (Bywaters et al. 2019). Circle also work closely with other local services, facilitating people to link in. They do outreach work and it was observed by workers that with the restrictions and not being in people's homes it means there is less 'depth' of assessment about how families are progressing, and it was felt for example that sometimes families do not reveal the extent of their issues and so as workers they face new challenges in trying to help families open up as a result of the pandemic.

External services echoed the views of those being supported and praised the workers for the extent of the practical and emotional support given.

*"I have seen Mhairi pick up prescriptions and help to take bin bags to the bin for one woman we are supporting, and other services will not do that. It basically is about supporting families in the way that they need." (External Service)*

They also highlighted how well and frequently Circle communicate with other services and the level of detail they have about the family situation.

### Impact of the Pandemic

Workers have, as already related, continued to maintain contact with as much face-to-face contact as possible. However, they were concerned about moving into the winter and options becoming slimmer and how this would affect contact. They also related how being in the garden or out in public meant that not everyone felt comfortable to talk about some of the most difficult issues. The main concern expressed was around the challenges in people accessing their GP and also in particular mental health services. The closure of groups, such as for recovery and young mothers was also lamented, and they have had some parents relapse. Mhairi related how young mothers not having support networks can make detection and support around postnatal depression for example very difficult. A variable response was reported in terms of statutory services, with some workers going out of their way to support families and others stopping engagement. The significant time taken for the fragile confidence to be built for people to attend groups is also very much at risk. At present for some families, Circle are one of the few services still going out and engaging and this puts pressure on the service but they really see the value of what they are doing. The concerns raised were about the future for families and they related that engaging with 'new' families with all of the restrictions was especially challenging.

### Support for the Support

Circle are a small team and although the pandemic has changed the frequency and nature of interaction, all felt that they are mindful of each other and take time to check in as well as have formal supervision. For some workers, having to take on home-schooling as well as connect with families has been really difficult, but they also related that these are challenges many people have had to face. In short, they are a resilient group too, and it was clear from the interviews that they recognise the difference they make and the most challenging cases related are also often the most rewarding.

### Potential Future Developments

The key learning from this project is that there is a demand and need for the service, with an ongoing eight week waiting list. One external service suggested that Circle create a different leaflet for potential families and a separate leaflet for fathers, because what is currently available is too generic, and they felt this was the reason why they had two families they support turn down the service. They also suggested that the service should create a strand of work which is about supporting families who have mental health issues, and no substance use issues, particularly in light of the impact of the pandemic.

*"I will continue to make referrals as it one of the services which is definitely worthwhile. I also hope that the workers are able to get feedback from those they support and hear about the difference all their hard work is making. They go above and beyond." (External Service Provider)*





## 5. Conclusion

This report has mainly focused on presenting findings from the qualitative study of eight families, which should provide a deeper insight into the breadth of work that Circle do with the 44 families supported in the past year. This highlights the centrality of the relationship between the worker and individuals within the family, as well as the family as a whole. This is dependent on trust being built and good honest communication established which takes time and persistence, to overcome the 'functional' mistrust manifested by families as a result often of past and recent abuse and trauma. The families and workers alike report that the whole family, strengths based approach, level of practical as well as emotional support, and crucially that this is voluntary, sets this service apart from others. This service is able to enact the Independent Care Review's 'The Promise', by keeping families together.

The interviews highlight how isolated people have become through addiction, and the impact of bereavement, loss and also experiences of homelessness, so they feel like they have hit 'rock bottom.' These testimonies highlight the prevalence of mental health issues and how substances have been used as a way of coping. They also highlight that the current system, with the suggestion of mental health services refusing to treat someone if they have an addiction, (and vice versa), is potentially setting up to fail those whom it is meant to help. It is observed in the analysis that women in particular seem to find it especially hard to talk about their substance use and this may be because as mothers they feel doubly judged. The parents feel like they have let their children down and carry a lot of guilt and this in itself creates barriers, affecting their self-esteem. The main referral system to Circle is presently through Children's Services and workers were really encouraged by the increasing number of referrals also from other services and in particular health visitors, so that they could do more preventative work. They also hoped that the number of self-referrals would increase and families would be aware of their rights to have support.

One of the most important things about the work Circle do is reinforcing the positive identity of being a parent, highlighting strengths, offering advice about boundaries, communication, attending panel meetings and reinforcing the identity of 'family'.

The service is shown to have a significant impact on families. It has helped some parents to open up about childhood abuse and link in with appropriate services and support. Throughout the pandemic their connection as a way of breaking down feelings of isolation has been emphasised. Acting as a 'go-between' for parents who have not been able to see their children they have maintained connections. By supporting people to engage with mental health services and finally getting the help they really need, in turn reliance on drugs and alcohol has dropped. All of the interviewees reported greatly reducing their substance use, in two cases stopping taking drugs completely and in another six cases stable on methadone and reducing their levels over time. One other person had reduced their alcohol use. Three people had been supported into housing and one other was in temporary accommodation. The impact of stable secure housing is significant and one young man reported that it was the first time he had felt safe his whole life. Over the past year one man has now also secured full employment and another had been volunteering up until the pandemic began, an opportunity sourced by Circle, and which he said he had not thought himself capable of without the encouragement. Families supported have a high prevalence of anxiety and the emotional support given to help them connect to services is significant, and families feel that without help to take those first steps, it would not be possible. Connections to other services and links to communities are vital, so that when Circle steps away, families have lasting links to rely on and that will help make their lives better. The challenge at the present time is that not only are such connections on hold, but for the future may also be under threat. Workers for example report a number of cases where individuals who had been active in the recovery community have now relapsed.

## 5. Conclusion

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Although there is no quick fix to any of the interviewees overcoming the shame and stigma they have felt for the past, they all felt that with the support they had regained or attained the role of being a 'good parent.' Within the eight families who were a part of this small study, six children had come off the CPR and one woman also would have had her two children taken into care, had it not been for the support of Circle. A social worker interviewed as part of this study reported that there was one other case that they know of where Circle have provided support, and without which those children would have also been taken into care. Although only a small number of children took part in a short interview they reported that Circle have helped them to talk about their feelings, to understand addiction, it is not their fault, and to regain their role again as children. This study also highlights that through supporting families children's attendance at school and attainment is improved.

Circle are strong advocates for a rights based approach and adopt an ecological model that identifies the intersection of inequalities, that is with families' expressions of 'distress': fight (conflict, domestic abuse), flight (substance use), and freeze (anxiety, extreme social isolation). The structural inequalities these families face is stark. Circle for example have helped families access many food parcels when their misplaced shame means they are unable to do so themselves. This backdrop of enduring poverty, where there is a daily struggle to get by with insufficient benefits, and with the ongoing impact of the pandemic, is set to get even worse. The links between alcohol and drugs addiction, mental health issues and isolation to poverty is clear. This reinforces the importance of Circle's support and also the need to address inequalities. Circle are not only reaching those who have struggled to engage with past services, but are sticking by them, and these interviews highlight that actually now more than ever these families need this support.





## 6. Recommendations

It is recommended that this project is sustained and expanded to also work with families who are affected by mental health issues, and targeted towards early prevention and intervention, with referral sources coming from health visitors, early years and schools.

Although only reported by one professional it is suggested that Circle review their promotional material to families to make it more targeted and clear about the support they offer.

It is recommended that Circle use this research and ongoing research to inform policy and practice, highlighting in particular from this report the challenges families continue to face, such as access to mental health services and the impact of poverty.

There is also significant learning around service delivery and design for families affected by mental health and substance use, such as: the need for substantial investment of time for families to engage, overcoming mistrust of services and anxiety; the need for practical support and to help families deal with debt and poverty; the extent of isolation which highlights the importance of outreach; the positive impact of a strengths based approach; and how to meaningfully adopt a whole family approach so that children's and parents' voices are heard in their own right, as well as the collective identity as a family.

This service is making the vision set out by the Independent Care Review to keep families together realised, and is a blueprint for how other services across Scotland can do this too.





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## Appendices: Case Studies

The following sets out the case studies of all the families who took part in the qualitative study.

### **Elaine**

Elaine is pregnant and has two daughters aged 2 and 6 from her abusive ex-partner who is now in prison. Over the year following her ex-partner's imprisonment, Elaine's mother and father pass away within a space of a couple of months and she relapses. She has no family support that lives nearby and is very isolated. The Health Visitor refers Elaine to Circle to get access to support. She opens up about her anxiety and is helped to attend appointments with a substance use service and become stable on her methadone script. Circle give Elaine food parcels recognising that she needs help and is struggling financially. Circle are supporting Elaine to budget because she has told them that in order to prevent her from feeling the urge to buy drugs she spends all her money as soon as it comes in, and not always on things that are needed. Elaine is desperate to see her older son and saves to take the two buses and three hour journey to get there. However, on one trip, at the second bus station the child's buggy snaps. Elaine breaks down, not knowing anyone; alone and desperate, she has no way of getting another buggy, but she does something she has never done, and calls the worker to ask for help. In her own words:

*"I don't usually ask for help, I don't want folk to think that I'm failing and these are my kids so I should look after them. But with Mhairi, it's different. I think the fact that I feel I can ask her for help says a lot."*

The worker is able to source a buggy from a charity and drives into town and helps her to get onto the second bus. Elaine recalls that day being 'rescued' as one example of the worker going 'above and beyond'. Over the course of a week accusations about Elaine on Facebook appear accusing her of relapse and lead to serious concerns from Children's Services. Some neighbours have even threatened Elaine, and the worker, witnessing this, supports her to get away for a couple of nights to a different area, until she feels safe again. Children's Services are reassured by Circle that these allegations are unfounded and that without this they would have been forced to take the children into care. Circle support Elaine to move back home and for the next few mornings to take her daughter to school, and through this she sees that not everyone is against her.

Elaine feels that by speaking to the worker and relaying her fears, being totally honest, she is helped to understand ways of dealing with problems, and to focus on what is changeable and possible and let go of that which is not. She feels her and her children communicate better and her mental health has improved, and this is 70% down to the support provided from Circle and she is very grateful.

### Helen

Helen has a daughter who has just started school and finds it difficult to communicate. Helen also finds it difficult to communicate too, and suffers from anxiety. Helen feels judged by others because of her past substance misuse and this is a barrier to her asking for help. Her mum and dad die shortly after one another suddenly and the impact of the loss brings up difficult memories of abuse she has tried to suppress. She has no family support and has given up all her past connections in the process of recovery and feels really on her own. Her relationship ends and she is made homeless and moves into temporary accommodation, and feels like everything is falling apart. She has been engaging well with her substance use worker and tells them about how overwhelmed she feels and they make a referral to Circle to support her and her daughter. Over the next year the worker initially sees Helen every week and then in the latter half of the year every fortnight. Helen opens up and confides to them about the extent of her paranoia and that she has been keeping her daughter from going to school, afraid that something might happen. The worker listens, doesn't judge and supports Helen to make the journey with her daughter to and from school, and helps her rebuild confidence and to trust that whilst her daughter is in school she is safe. Circle helps Helen to deal with her financial situation and to get food parcels and furniture when she is temporary accommodation. The worker attends meetings with Helen at the school and encourages her to voice her concerns about her daughter, and this results in the school supporting an assessment being made to explore further. Helen appreciates the worker being able to explain to her what has happened in the meetings because at the time she is not able to take all the information in because of her anxiety. She feels like the worker really listens to her and helps her to understand her situation. She does not relapse. Circle take Helen and her daughter out to the park and to go for coffee, and their relationship improves as they learn more from the worker about the importance of boundaries. Helen feels mentally and physically stronger. Lockdown however heightens her paranoia and the visits Circle make, phonecalls and food parcels are important ways of interrupting the isolation she can otherwise face.

*"This is different because with other services they either work with the adult or the child, they don't work with them both, but with this they do. This has helped us to come together I feel like I am getting the support I need and brought us closer together."*





**John and Luke**

John and his wife Emma have two children together, Darren aged 14 and Luke, 11. Both John and Emma work in quite stressful jobs and use drugs recreationally as a way of dealing with it. Over a few months their use has become more common and at one point is every weekend. Luke reveals to his teacher at school that he feels unsafe going home because of the drugs in the house. Children's Services become involved and because of the concerns raised, Luke is placed on the CPR and the family are linked in with Circle. Initially John thinks this is something they have to do, but as the support begins he is glad to have someone to talk to, and in his own words 'to vent'. Darren, his son, does not think he needs any support but Luke meets with the Circle worker every two weeks, takes the dogs for a walk and just talks about how he feels. He thinks the worker gives good advice and as a result is dealing with things better. John and Emma are no longer taking drugs, and although their jobs are still stressful, they are better at talking to one another about this and getting out for family days to take their minds away from work. The next stage of support will involve working with Emma and ideally the whole family. John and Luke both feel that as a result of the support they have had, they are all calmer, deal with stress and are communicating better.

*"I think I am communicating better with the family too and just have more patience."*

**Lisa and Fiona**

Lisa's background has been one of abuse, trauma and addiction, and she began taking drugs when she was only 12. She and her partner have a daughter Fiona who is now aged 7. Her partner was sent to prison and having cut all ties from her family she has become isolated. Contact with Children's Services made her feel like she was constantly under review, but she also recognises that she wasn't coping. She asks for more help and is referred to Circle. Over the past three years Lisa has been connected to substance use services and has engaged well. She opens up about her anxiety issues and the worker supports her to go to appointments and to take Fiona to school. She is now doing really well. It is only now that Lisa has come to accept that she needs to take medication for her mental health issues, and this has also resulted in her doing better. Circle are supporting Lisa to get an assessment with a psychologist, and she is about to begin a programme of talk therapy, which although she is worried about it as it will inevitably bring up the past, she feels she is in a good place to confront this. Lisa is aware of the temptation to buy drugs and when she gets her benefits she admits to spending all her money on things she doesn't really need and then having to rely on food parcels by the end of the month. Circle is supporting her to budget. She feels that 100% of the changes are down to the help given by Circle, and in her own words 'without them I might have fell apart.' Fiona remembers times when the worker had to take her to school and she has appreciated the chance to speak to an adult who talks openly to her about her mum, listens to her and praises her for doing well at school. She is glad though that mum can now take her to school herself and thinks that they are getting on as a family better than ever. Over the pandemic Circle have been the only service in touch with Lisa and Fiona and they have found it hard at times, and just to have a reason to go out of the house to meet the worker has made a real difference to them both.

### Laura

Laura and her partner both struggle with addiction, and their daughter Becky has been on the CPR for years. Laura herself has a background of abuse and trauma and is very distrustful of services. Laura has a long history of abusive relationships and has even been hospitalised. Their daughter's social worker puts them in touch with Circle and it takes many months for Laura to feel comfortable with the support, and to realise that they really do want to help and don't want to take her daughter away. Over the next two years, Circle support Laura to maximise her income, sort out her benefits, to consolidate her debts through the Citizen's Advice Bureau, and also to begin the conversation about her and her partner's substance use. Laura explains that she has always found going to new things difficult and having someone with her helps her to feel less anxious. She realises that in the past she has not been getting access to all that she was entitled to, as filling in forms was particularly daunting. This practical as well as emotional support means a lot to Laura and is life changing. Over time and building trust, Laura begins to open up about her background and using alcohol as a way of making the 'bad' memories disappear, and her partner using heroin to deal with similar levels of trauma. Circle support Laura to connect with a counsellor and begin to deal with the pain she carries. Also, her partner is helped to access a methadone script and engage with a recovery café. Circle help Laura to communicate better with her daughter Becky and over time she begins doing really well at school. Becky is taken off the CPR. Over the pandemic the service support the family to access the food bank and not to feel overwhelmed, and with the recovery café closed, to still feel connected to wider support.

*"I think I would put my being calmer and happier a 100% down to Circle as she really helps me to make sense of things."*

### Ryan

Ryan and his partner are addicted to heroin and are referred to Circle by Children's Services when their two children are taken into foster care. In his own words Ryan is grateful of the support as he realises he needs it. Over the next year Circle support Ryan to overcome anxiety and attend appointments, connecting to the recovery college and substance use services. Although he and his partner have a number of relapses, their substance use significantly reduces. He is supported by Circle to move from temporary accommodation into his own tenancy and to get his PIP claim sorted. He is connected to an organisation supporting fathers, and to attend panel meetings. Ryan reflects on one meeting where he felt everyone apart from the Circle worker was against him and through Circle he is able to look to the future, rather than dwell on past mistakes. Ryan has now regained contact with his two boys who are in the care of his aunt. A year on, he sees them once a week, and before lockdown Circle are able to get them all tickets to attend a football game together, and feel like a family again. Ryan and his partner have just had a baby and through support from Circle they are in a routine, and overall feel like this is a fresh start. Ryan has just started volunteering in the local community in a shop and has been attending the gym when the pandemic hits. This is unfortunate, however his newly found confidence is something Ryan feels is down to the support given, and he believes 50% of the changes made are down to Circle.

*"He (the worker) helps me to do things I never thought I would be able to do, like the volunteering...He always looks at things from my point of view and understands what is happening and is able to read the situation. He has always been here... Before I would have been missing appointments but now I can make them. We are seeing the kids more and our whole lives have changed from how they were."*





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