

Pause - Written evidence (CPF0003)

Background and introduction

Pause is a national charity that works with women who have experienced or are at risk of having children removed from their care. We offer an intensive, trauma informed model of support to women, so the removal of a child should never have to happen more than once. There are currently 30 Pause Practices across the UK and since 2013 Pause Practices have reached around 2,300 women who have had over 7,000 children removed from their care. You can find out more about the experiences of the women who work with Pause and our work in our short animation [The difference a relationship makes](#).

We welcome the Committee's inquiry into the impact of COVID-19 on parents and families and would be happy to support the inquiry with further written or oral evidence. Throughout the COVID-19 pandemic Pause Practices continued to stay connected and support women as much as they could but we know that the pandemic had an impact on women's relationships and connections to their children, their mental health and their access to digital support.

"The individual isolation of the COVID-19 restrictions has left some of the women desperate for help in many areas of their lives including finances, accommodation, physical and mental healthcare and symptoms of poverty, such as no food, gas or electric. Pause practitioners have found ways to support women facing adverse impacts of the lockdown. An example is Practitioners who visited women each week with welfare parcels of food, essentials, and activities to do at home, with one practitioner conducting a socially distanced baking class with a woman who wished to bake a cake for her daughter's birthday."

A Pause Practice talking about the impact of COVID-19 pandemic on women we support.

Two women who work with Pause talked about their experiences of the COVID-19 pandemic in an episode of Pause and Listen, the podcast from Pause: [2020 – a year in review](#).

Relationships with children

For women who work with Pause maintaining relationships with their children who are no longer in their care is a top priority. Our report into relationships with children published last year, [Knowing They're OK](#)¹, found women had a range of contact with their children, including face to face contact, phone calls and letterbox contact. Maintaining relationships with their family can be vital to the wellbeing of children who are no longer in their birth parents' care and is important to the wellbeing and outcomes of their birth mothers as well.

¹ Knowing They're OK, Pause (2020) <https://www.pause.org.uk/wp-content/uploads/2020/07/Pause-Relationships-with-Children-report-DIGITAL.pdf>

The COVID-19 pandemic changed so much about how children and their birth families keep in touch and have contact with each other. The Nuffield Family Justice Observatory commissioned a rapid research review into contact during lockdown.² Some of the key findings included:

- Almost all face-to-face contact with birth relatives has been suspended for all groups of children – often replaced by video calls.
- Letterbox contact remained the plan for most adopted children. Some additional letters had been sent in some cases— but in others, letters continued as previously planned or were delayed because of logistical problems.
- The quality of the child’s relationship with birth family members was an important factor. Where the children in the study felt at ease with their parents (or other relatives such as brothers and sisters), they tended to enjoy the contact—though some missed the physical contact.
- Some parents had received good support, and others less so. As well as needing help with the issues described above, for some parents, the most basic problem was digital poverty—not having access to a smart phone, computer, data or good Wi-Fi, for example.³

The changes to contact and relationships with their children during COVID-19 has definitely had an impact on the women that work with, as well as their children and families. It is also something that Pause Practices have supported women a lot with as well. For example, one Pause Practice purchased mobile phones and credit top-up to reduce isolation through lockdown and enable telephone contact with children in the absence of face-to-face contact.

Another Practice has been supporting women with their child contact, re-establishing contact, improving attendance, discussing what makes a quality contact, allowing women to plan for face to face or virtual contact, all whilst holding the age and needs of the children in mind.

Mental health

85% of women who choose to work with have experienced, or are experiencing, mental health issues when they first start working with Pause. Access to the mental health support they need has often been challenging and they haven’t been able to deal with the trauma of losing their children. These issues have been exacerbated and worsened by the COVID19 pandemic.

"Due to the pandemic, face to face contact with women suspended and relationship-based practise which is fundamental to Pause’s model of working meant new and existing relationships could not be nurtured. Practitioners expressed challenges to support women to access mental health service as women struggled with telephone and online support causing an increasing in

² Contact during lockdown: how are children and their birth families keeping in touch? Nuffield Family Justice Observatory (2020)
[nfjo_contact_lockdown_rapid_research_main_report_revised_20200522.pdf](#) (nuffieldfjo.org.uk)

³ Ibid.

substance misuse, a relapse in drinking and a decline in mental health in some cases.”

A Pause Practice talking about the impact of COVID-19 pandemic on women’s mental health.

“In some women’s situations COVID-19 has had an impact on achieving their goals and plans, particularly if their area of change relies on other services input and resources. A woman named S who worked with Pause expressed wanting to build on their self-esteem, becoming less isolated and involved in the community. However, due to COVID restrictions, dental appointments for S were cancelling and joining community group proved more difficult as classes moved online but S had sporadic access to WIFI and did not feel confident using the internet so continuing online was not possible during lockdown.”

A Pause Practice talking about the impact of COVID-19 pandemic on women’s mental health and access to services.

Digital poverty

Digital poverty and the digital divide is a huge issue for many of the women we work with at Pause. Being connected and having the right devices and software to do this, remains essential to support women’s wellbeing, maintain relationships and to access the services and help they need – including access to benefits. Several Pause Practices expressed concerns with remote and hybrid hearings and supporting parents to engage with a hearing that was fully or partially remote. These concerns included accessing the necessary technology when it came to partaking in complex care proceedings, those who have cognitive or hearing impairments unable to engage in phone hearings and no one to provide any pre or post-hearing explanations or support.⁴ Pause Practices across the UK are providing women with phones and other devices, supporting them to use online platforms like Zoom, and advocating for them to access the services they need. Digital poverty can lead to already vulnerable women becoming even more marginalised and lost.

⁴ Remote hearings in the family justice system: a rapid consultation Nuffield Family Justice Observatory (2020)
https://www.nuffieldfjo.org.uk/app/nuffield/files-module/local/documents/nfjo_remote_hearings_20200507-2-.pdf

"During the pandemic, my team have seen many services move to online and virtual methods of engagement. This is great for members of the public who have access to technology and can afford regular data. Digital poverty for one woman we work with means that each month she pawns her smartphone to be able to pay her bills. For another woman who sold her phone to pay for food, she was discharged from a crucial service for missing their zoom calls and phone consultations. We are now re-referring and trying to fight for a service for her. It feels very unfair and I would urge all services working with vulnerable people to consider the impact of digital poverty when reviewing their service offer and referral processes."

Kelly Cox, Pause St Helens Practice Lead

Summary and conclusion

The COVID-19 pandemic has had a potentially devastating impact on many parents and families across the UK – including parents who have had children removed from their care. Being able to maintain relationships with their children, struggling with their mental health and not having access to technology needed to stay connected has had a huge impact on the women who work with Pause. We call on the Committee to consider these issues, and women who have had their children removed from their care, as we come out of the pandemic.

26 April 2021