Sustained Impact Evaluation

The Children's Society Community Hidden Harm Awareness Team

August 2017 – July 2020

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The Children's Society Evidence & Impact Team

The Children's Society

No child should feel alone

COMMUNITY FUND

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Key Findings Summary

1. Sustained Impact Findings		
Key Findings	**Areas of Sustained Impact**	**Evidence Snapshot**
Key Finding 1: Children and Young People have improved mental and emotional health	**Children and young people have sustained improvements in confidence**	*"I feel less responsible, and I feel more like a child. I feel more like a teenager, more like I can express myself and be myself, rather than have to bottle it up and take responsibility all the time….[CHHAT] made you realise that, no matter what your parent was going through, you couldn't fix it, and it wasn't your fault."*
	Sustained shift away from blaming themselves for their parents' substance misuse	
	Sustained improvements in self-care	
Key Finding 2: Children and young people have improved access to support networks	**Peer support sustained**	*"Yeah, we've all got a group chat for if we need each other, or if anything happens at home that we used to speak about in the group, we just message about it, and we just let each other know that we are still there for each other, no matter what."*
	Sustained reduction in feelings of isolation through peer support	
	Sustained improvement in accessing support from family	
	Sustained improvement in perception of professional support, meaning CYP feel more able to access this support	
Key Finding 3: Children and Young People have improved protection from harm	**Sustained protection from self-neglect and self-harm**	*"I was just shutting myself off in my room, not really eating properly, not sleeping properly, I didn't talk to anyone. I was just depressed, and then after I worked with [Worker], I just started feeling so much happier that I could actually get my feelings out, rather than keeping 'em into myself and shutting myself away.*"

2. Systems Change Impact	
Key Finding	**Evidence Snapshot**
Professionals are better able to identify and support children and young people affected by hidden harm	*98% of professionals reported an improvement in their understanding of hidden harm and* *99% reported an increase in their ability to support children and young people as a result of attending the CHHAT professionals' conference in 2019*

3. Critical Success Factors
Having a flexible and young person led approach, especially in the time given to children and young people, the location of sessions, and type of support.
Workers listening to, understanding, and caring about children and young people
Privacy and confidentiality in sessions
Teaching children and young people about substance misuse
Partnership working within the TCS East Hub
Effective working with schools
The uniqueness of the project
Supporting children and young people's families

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1. Background and Introduction

Evaluation Background and Aims

Following the interim report in 2019, this is the full sustained impact evaluation of The Children's Society's Community Hidden Harm Awareness Team (CHHAT) service, covering the project's delivery period from August 2017 to June 2020. The evaluation aims to consider the longer-term impact of CHHAT, what outcomes have been achieved, and provide learning for future work. The evaluation also looks to provide insight on the sustainability of CHHAT's outcomes through interviewing children and young people at least three months after they finish the service.

The evaluation aims to review CHHAT's intended outcomes and impacts, outlined in the project theory of change on page 7, including whether CHHAT has:

- Improved young people's emotional wellbeing,
- Improved protection form harm, :
- Improved access to support networks
- Improved professionals' ability to identify and support young people affected by hidden harm.

The CHHAT project

CHHAT work with young carers in Essex[1] aged 8-19 years who are affected by parental substance misuse, otherwise known as 'Hidden Harm'.[2] The main focus of CHHAT's work is providing direct support to children and young people. This includes one to one support, group sessions and activity days.[3] CHHATs delivery team consists of a service manager, two full-time practitioners providing one to one and group support to young people, and one part-time practitioner. The part-time role has focused on recruiting volunteers as a step down from intensive support, and has also incorporated kinship support. The kinship element involves providing support to family members (e.g. grandparents) who have assumed care of a young person due to their parents' substance misuse.

CHHAT is based within The Children Society (TCS) East, a service hub located in Essex. TCS East provides a range of services to support children and young people, adults and families across Essex. These include drug and alcohol services, and support to children at risk of exploitation, children in care, and young carers. TCS East also offers young people the opportunity to join a participation group.

The CHHAT service was originally funded by the National Lottery Community Fund[4] from 2014 to 2017, and subsequently refunded until July 2020. Additional funding, such as the 'Pot of Gold' from TCS, added to service provision including group activities, materials produced through the groups, and Christmas gifts for the participants.

[1] Excluding Southend and Thurrock

[2] See TCS East website at https://www.childrenssociety.org.uk/east/services/CHHAT

[3] Please see Annex A for details on CHHAT's referral criteria

[4] Formerly the Big Lottery Fund

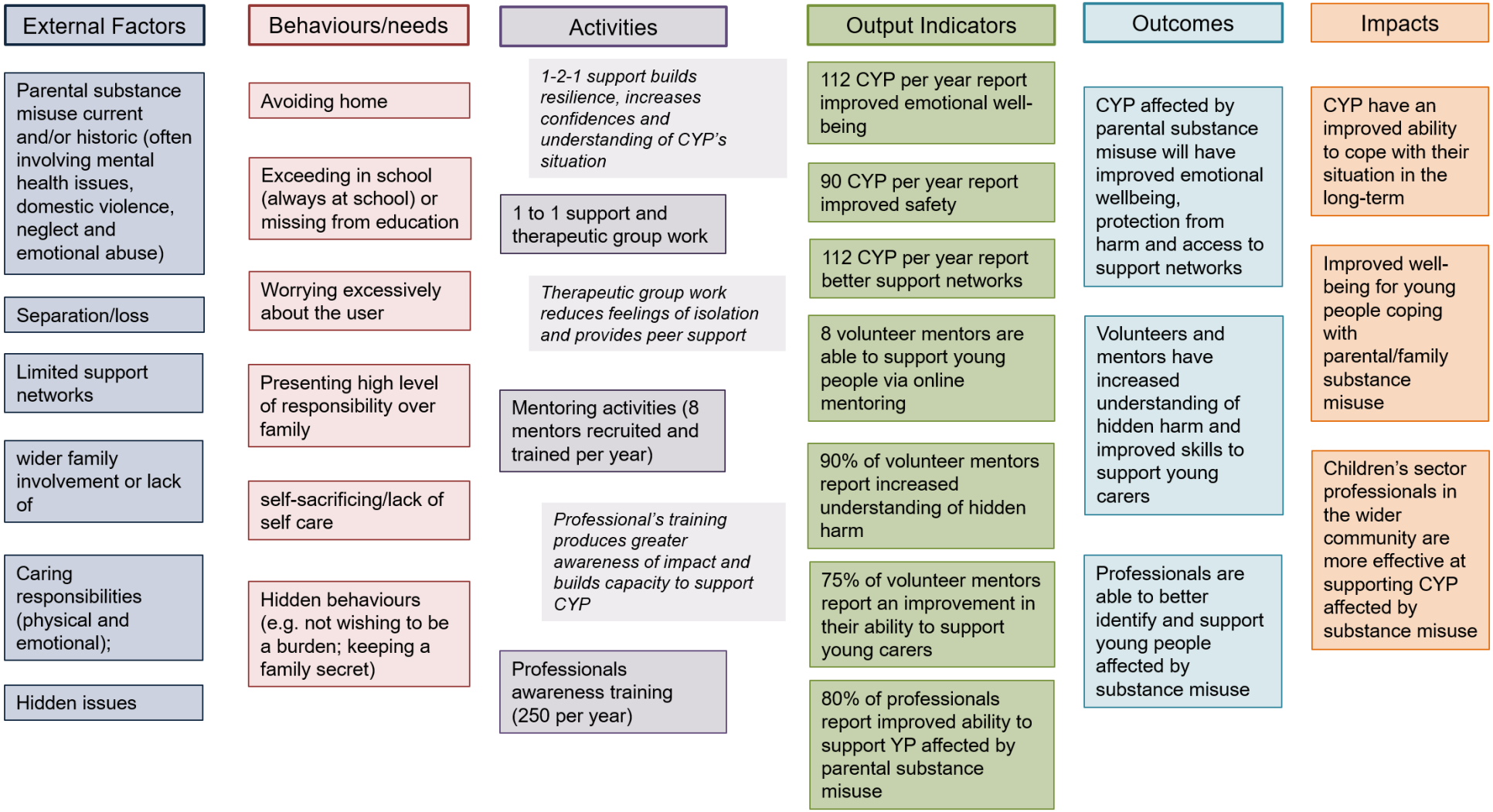

Figure 1: CHHAT theory of change

Social Impact Framework

The CHHAT project aligns to the TCS Social Impact Framework, which sets out the organisational strategy to tackle multiple disadvantage for children and young people. For TCS this means aiming to ensure children and young people are free from risk, are resilient, and have the resources they need. To achieve this TCS works with children and young people directly, the communities they live in and the systems (e.g. influencers, decision-makers, services) around them. The diagram below gives a broad overview of the Social Impact Framework, the full version can be found in Annex B.

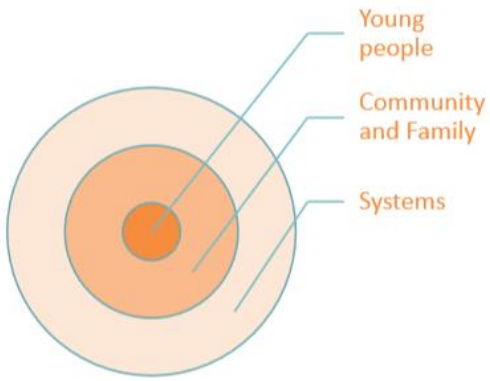

Figure 2: Social Impact Framework diagram

CHHAT links to the Social Impact Framework outcomes for young people and systems. For instance, by aiming to improve young people's resilience and emotional and mental health, and increase their access to support networks. CHHAT also aligns with the outcomes around systems. In particular, in working to improve influencers and decision-makers knowledge about young people by increasing professionals' ability to identify and support those affected by hidden harm.

Systems Change

The project also works with professionals to improve systems for children and young people. The aim of this work is to provide long-term impact that means children and young people are better supported in the future. For CHHAT, this involves:

- Increasing professionals' understanding of the signs of hidden harm,
- Improving professionals' ability to support children and young people affected by parental substance misuse.

To achieve this CHHAT:

- Recruits and trains mentors to work with children and young people
- Provides training to professionals, including an annual conference focused on hidden harm where professionals are engaged from a variety of backgrounds including: police; local authorities (e.g. Essex County Council and Harlow Council); Charities; NHS; and churches.

2. Children and Young People worked with

CHHAT works with young people affected by parental substance misuse, otherwise known as hidden harm. These are young people who, due to a parent misusing substances, often need to undertake caring responsibilities. As a result of living with a parent misusing substances, the young people CHHAT works with can often be at risk of harm. This can take the form of abuse and neglect from the parent. However, due to the detrimental impact of hidden harm on mental health, young people are also at risk of self-harm and neglect. Interviews found that some young people experience depression, anxiety and low self-confidence, and may neglect themselves, for instance, by not eating, drinking or sleeping properly.

Interviews found that young people affected by hidden harm are often quite private about what is happening at home, meaning they are often reluctant to access support from others. This can be due to pressure from family members, who may fear the consequences of professional involvement. It can also be due to the young person not wanting to be judged. This privacy can lead to young people feeling isolated and alone.

Young people engaged

191 children and young people were supported by CHHAT across Essex between August 2017 and July 2020. 191 engaged in one to one youth support, 31 in targeted group support, and 5 were matched with a volunteer mentor.[5]

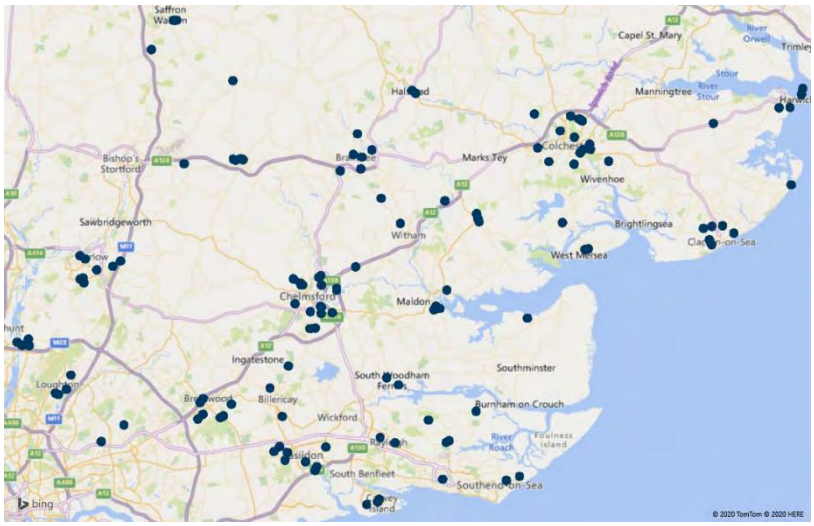

Figure 3: Map of Project Geographical Spread

The graphs on page 10 show the demographic and referral data for young people involved in CHHAT, the majority of whom were:

- Referred to CHHAT by their schools and social workers
- Aged between 10-15 years
- White British (reflecting the population of Essex which is 90.8% white British[6]),
- Predominantly female (61% female to 36% male)

[5] Some CYP engaged in more than one type of support.

[6] 2011 census, Office of National Statistics

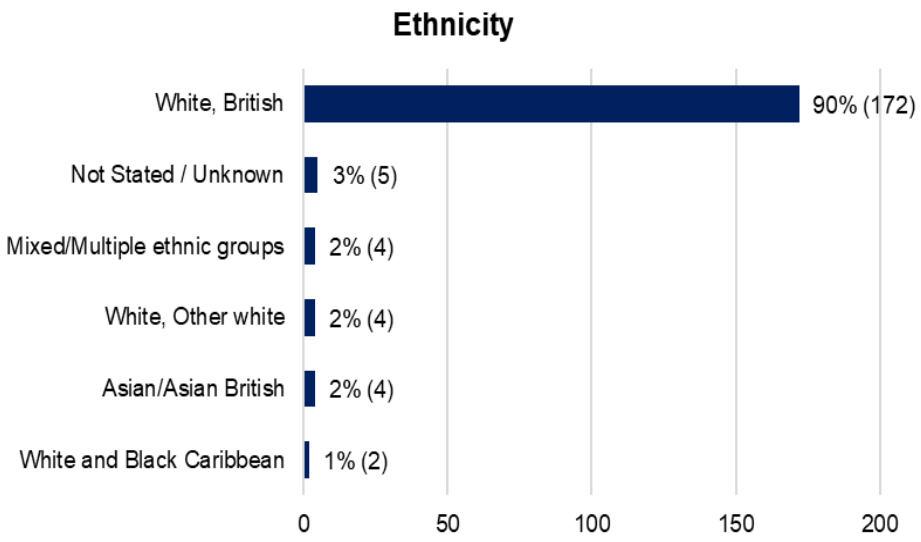

Figure 4: Ethnicity of CHHAT Young People

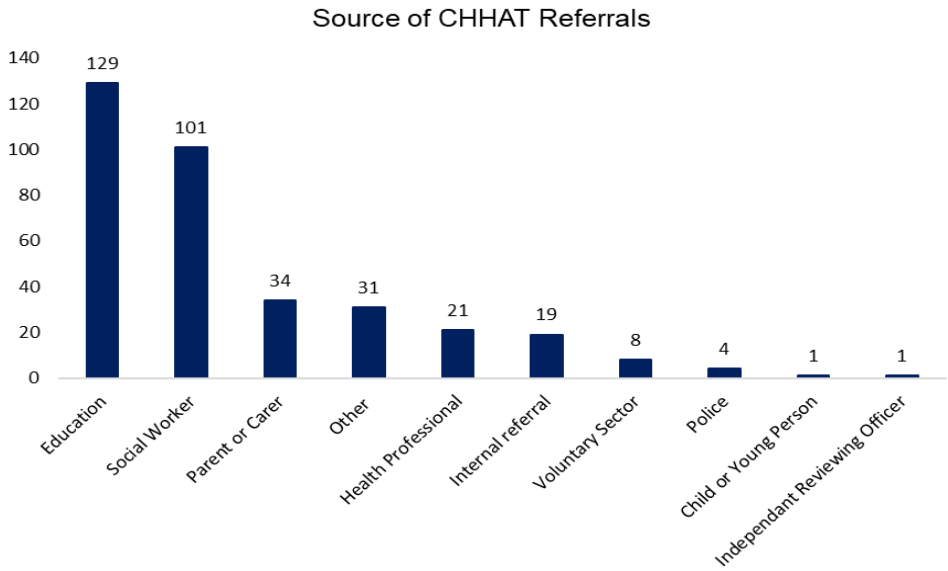

Figure 5: Source of CHHAT Referrals

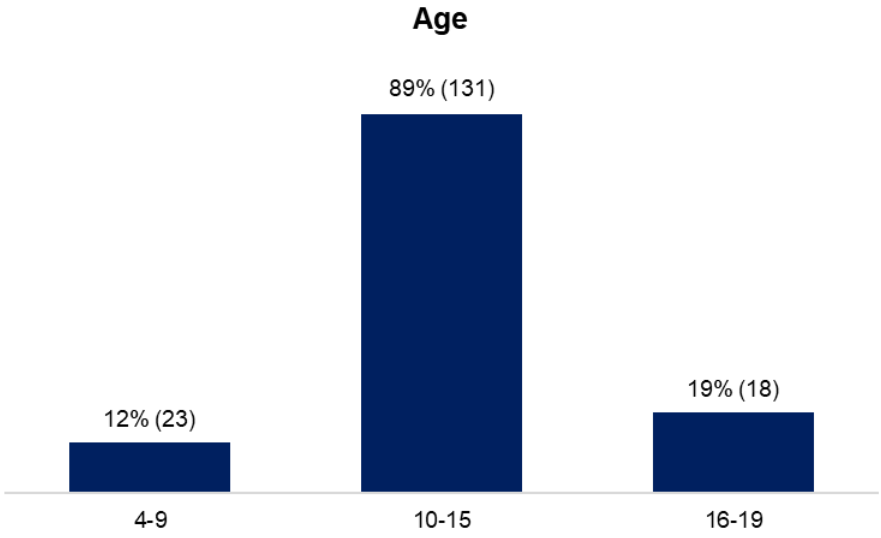

Figure 6: Age of CHHAT Young People

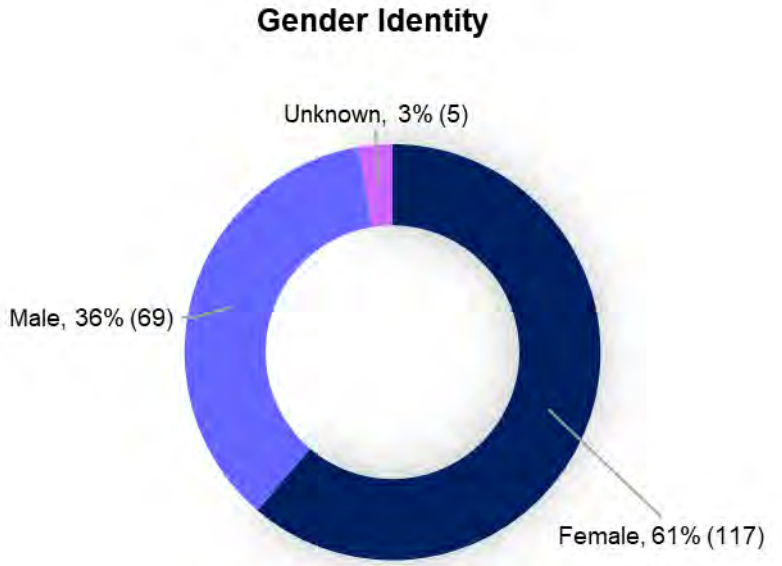

Figure 7: Gender Identity of CHHAT Young People

3. Methodology

Theory based approach

This evaluation has used a theory-based approach that comprised of reviewing the project's intended outcomes and long-term impact, and their assumptions on how their activities would bring these about. This involved developing a theory of change with the service[7], which is presented on page 7. This provides a visual demonstration of how CHHAT intended to achieve its outcomes and long-term impact. It details external factors surrounding children and young people affected by hidden harm, as well as their needs and behaviours. It includes CHHAT's activities, assumptions, indicators, and the intended outcomes and long-term impacts. A theory of change is useful for any project because it allows teams to reflect on and review their service model, and ensure their approach is the most effective way of reaching their desired aims.

This evaluation has been written during the Covid-19 pandemic, and much of the data collection was carried out during this period. However, this evaluation is focused on the entire delivery period, the majority of which took place prior to Covid-19. The evaluation findings are therefore reflective of the entire intervention, with less focus on Covid-19. Nevertheless, the finding touch on learning around Covid-19's impact, and how the service has responded

Mixed methods design

This evaluation has used a mixed-methods approach drawing upon both quantitative and qualitative data. This includes interviews, outcomes monitoring data, survey data, professionals' feedback forms, and project documentation (see Annex C for study limitations).

Sustained impact interviews

The qualitative methods were designed specifically to look at whether CHHAT has had a sustainable impact on children and young people. For this reason **interviews were conducted on an ongoing basis at least three months after children and young people finished the service**. 10 phone interviews, including six girls and four boys.

My Wheel Data

Outcomes monitoring data was reviewed from 150 children and young people for the period August 2017 to July 2019. This data came from TCS' outcomes monitoring tool "My Wheel". This tool is used with young people at regular intervals to record their journey of change as they go through a service. Practitioners must complete at least two for accurate analysis to take place. The My Wheel asks a service user to place themselves between 1 and 5[8] in the following categories: safety; hopes and dreams; where I live; having a say; employment, education and skills; family and carer support; friends; physical health; and mental and emotional health.

[7] Theory of change initially developed in 2018 and later reviewed in early 2019.

[8] The My Wheel is a journey where CYP and practitioners decide where a CYP is out of 5. 1: Not ready; 2: Accepting; 3: Attempting; 4: Doing; and 5: Achieving.

Table 1: Study participants and method of data collection (see Annex D for more details)

List of stakeholders and study methods	One to one interviews	Surveys	Monitoring data (My Wheel Outcomes Tool)	Total
Children and young people	10	62	150	222
Referring partners (Schools and charities)	3			3
Professionals		83		83
Staff	7			7
Volunteer mentors		9		9
Total	20	154	150	324

4. Impact Findings

This section looks at CHHAT's impact on children and young people and draws upon qualitative and quantitative evidence from interviews, My Wheel outcome data, and the satisfaction and evaluation outcomes surveys. Each finding draws out key areas identified through sustained impact interviews.

Key Finding 1: Children and Young People have improved mental health

Evidence from interviews, My Wheel outcomes tool and survey data indicates clear improvements in children and young people's mental health and wellbeing as a result of working with CHHAT.

In My Wheel and evaluation survey feedback, children and young people reported improved mental health and wellbeing, confidence and overall positivity. Of the 150 children and young people with at least two My Wheels, 77% reported improvements in their mental and emotional health.

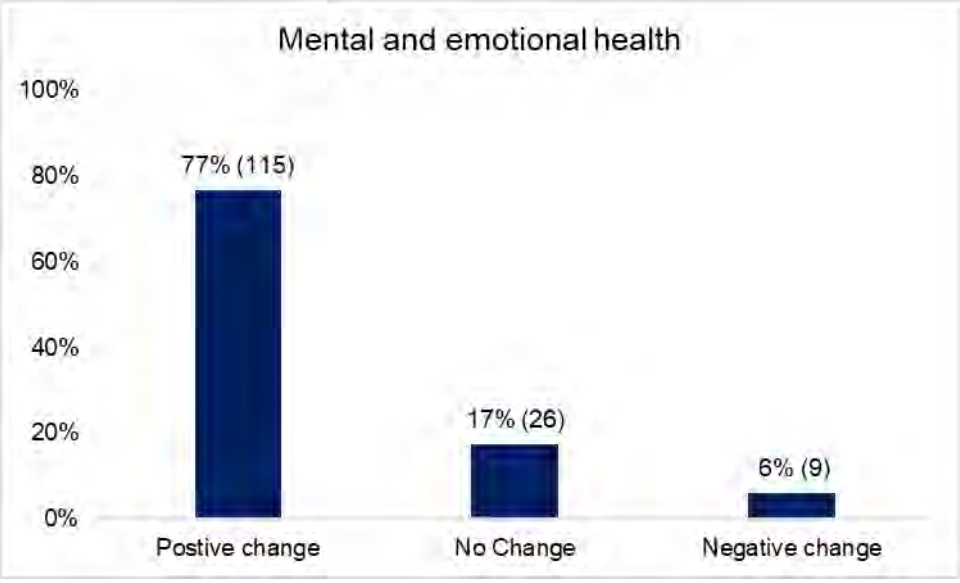

Figure 8: My Wheel Mental Health and Emotional Wellbeing Results

Qualitative evidence from the satisfaction survey, and interviews with staff, children and young people and family members, also indicates clear improvements in children and young people's mental and emotional health. In-depth interviews identified that these improvements manifested in children and young people feeling more confident, taking better care of themselves, and feeling less at fault for their family situation.

"This counselling made me feel a lot more confident in myself and made me open up a lot more about how I feel with people. I knew that not everything was my fault and I've grown a lot as a person! I'd love to be able to work with this group in the future to be able to help other young people!!" (CYP, user satisfaction survey)

"Having [the CHHAT worker] helped [the young person] to realise that it that wasn't her fault…It's her mum's…her mum's the adult and, so, I think that was very good for helping with that." *(Family/kinship interview)*

Statistical test results
Using survey samples to make inferences on outcomes for all CHHAT young people. Statistical tests were undertaken on the data to test the mental health outcomes for validity.

Children and young people feel more confident
Statistical testing was conducted on 57 responses to the question "on a scale of 1-10 with 1 being "no, not at all" and 10 being "yes, a lot", has working with CHHAT raised your confidence?" The results indicate that 95% of any sample mean average taken from the population would fall between 7.6 and 8.7

Meaning that **on average we can estimate the total population of CYP worked with between 2017 and 2020, felt more confident as a result of CHHAT**

Children and young people feel more positive
Testing was also conducted on the results of 58 responses to the question "has working with CHHAT helped you feel more positive?" The results indicate that 95% of any sample mean average taken from the population would fall between 8.24 and 9.07.

Meaning that **on average we can estimate the total population of CYP worked with between 2017 and 2020, felt more positive as a result of CHHAT**

Please see Annex E for full results table.

Key areas of sustained impact in mental health and wellbeing
Improvements to mental health manifested in the following ways:

Children and young people have sustained improvements in confidence
Interview data indicates that CHHAT has had a long term impact on improving children and young people's confidence. Eight out of the 10 of the children and young people who took part in sustained impact interviews reported an increase in confidence as a result of working with CHHAT. This has been maintained at least three months post intervention.

"Talking to both [CHHAT workers] made me more confident as a person, and that's something I've always struggled with."(CYP, sustained impact interview)

"Before I started working with them, I was really anxious and shy and insecure…I'm not the most confident person in the world now, but they helped me know that I don't need to be so anxious and scared and shy of everything, and that I can be more confident." *(CYP, sustained impact interview)*

"[Working with CHHAT] gave me the chance to be more confident, maybe with, like, wearing clothes, or my personality itself, made me feel… I could express myself and just be me, rather than feel like I have to be someone else and cover up the real me." *(CYP, sustained impact interview)*

Interviews also found that, as result of feeling more confident after working with CHHAT young people also feel more positive about, and able to achieve, their future goals.

"Although I'd always wanted to go far in life, I never really had the confidence to say yeah, I am going to do this. But working with the CHHAT group gave me the chance to realise, do you know what, that's actually possible, and I could actually do that." (CYP, sustained impact interview)

Sustained shift away from blaming themselves for their parents' substance misuse

Six out of the 10 children and young people who took part in sustained impact interviews explicitly outlined feeling less at fault for their parents misuse as a key area of CHHAT's impact. Children and young people described having a sustained shift in how they see their parents' misuse, realising that their parents' behaviour is beyond their control. This change in mentality enabled children and young people to feel less responsible for the situation, to be less hard on themselves, and to feel more their own age.

"I feel less responsible, and I feel more like a child. I feel more like a teenager, more like I can express myself and be myself, rather than have to bottle it up and take responsibility all the time….[CHHAT] made you realise that, no matter what your parent was going through, you couldn't fix it, and it wasn't your fault." (CYP, sustained impact interview)

"CHHAT gave you a chance to see that it wasn't your fault. And I think that I really needed that…I was struggling because my brother lived somewhere else, so it was just me, and I was taking care of my mum, and they helped me come to the conclusion that it wasn't my fault, and that maybe I could move on without blaming myself. (CYP, sustained impact interview)

Sustained improvements in self-care

Interviews with children and young people identified improved self-care as a key area of sustained impact. Children and young people reported that they have realised the importance of self-care and adopted techniques that they are still using three months after leaving the service.

"I know not to put myself down anymore and [the worker] taught me a really good way to – if I feel down or something, how I should take myself away from situations and just care for myself and think about myself more often." (CYP, sustained impact interview)

"I think the self-care bit is my favourite bit. I think that really helped me that is the biggest thing that's impacted on myself, like, to this day…[Now] I do it all the time, I always make sure to at least once a week just take time out to relax and make sure I'm feeling okay." (CYP, sustained impact interview)

Children and young people reported that CHHAT's support in helping them to develop and maintain a routine, with self-care built in, has had additional long-term benefits for their overall health, engagement at school, and ability to open up with friends, family and teachers.

"I wasn't in a routine before, so I just felt really unhealthy and just mentally exhausted, because obviously, everything was just inside me. I never spoke to anyone, so I was just crying all the time. I wasn't eating at all. I was constantly ill because of how much I was crying, and how little I was eating, and I was always dehydrated and everything like that. At school, I was just always crying, and I didn't want to go. I was so uncomfortable talking to anyone. I was just a mess back then, and then I feel like now that I'm in a routine, I'm a lot more confident about myself. And I feel like when I said that I would get judged at school, it was more anxiety telling me that I was going to be judged, rather than it actually being a reality. It was just me panicking about if I said something then I was definitely going to get judged, that's just how it was in my head. But now, I do feel a lot more confident, and I feel like I can talk to people, so I do, and I talk to people in school about it more now, like Teachers, and I don't get judged. So, it was definitely all in my head, and I'm in a better place now." (CYP, sustained impact interview)

In their interviews, children and young people related learning about self-care to improvements in their self-esteem and how they feel about themselves.

"She talked a lot about self-care, and she had a lot of sheets where I could, like, draw myself and put things around myself that I thought were good qualities about myself. And she also told me to write down things that she – that I thought other people would think about me, and I think that was really helpful, because it made me realise that actually, people do say a lot of good things about me." (CYP, sustained impact interview)

Key Finding 2: Children and young people have improved communication and access to support networks

Evidence from interviews, surveys and the My Wheel outcomes tool indicates that the CHHAT project improved children and young people's access to support networks. The graph below shows that 57% saw improvements in family and carer support.

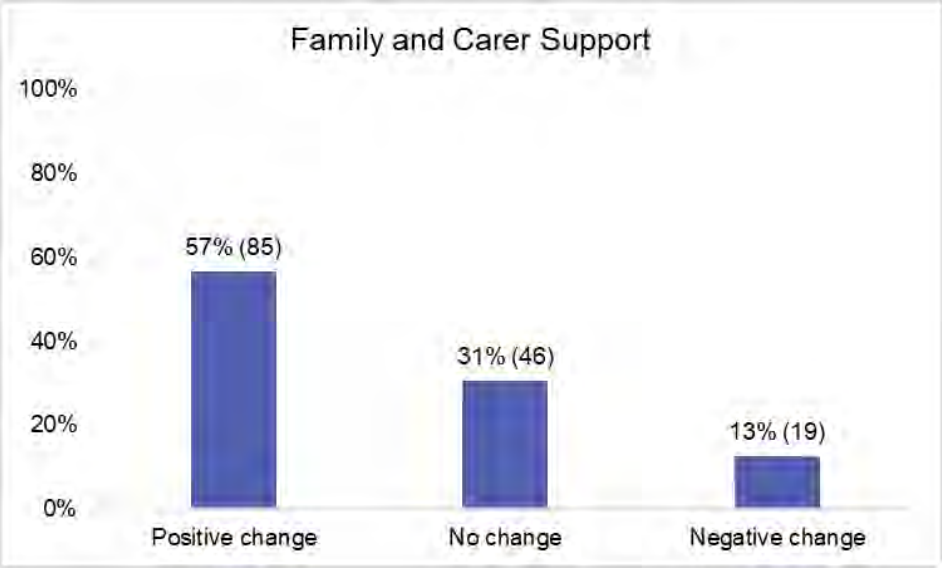

Figure 9: My Wheel Results for Family and Carer Support

The graph also highlights that 31% saw no change and 13% saw a negative change in this area. Analysis of notes around the My Wheel scores show that a key reason for this is that many young people gave high baseline scores. This is either because they felt their family situation was fine to start with, or because later felt they overestimated their initial score. The

data also indicates that, for some children and young people, the lack of movement in 'Family and Carer Support' was due to their circumstances not changing. As CHHAT mainly works with children and young people directly, changing the parents' situation is often beyond CHHAT's control.

"No support from [YP's] parents who have neglected [the YP] and at times been abusive. [The YP] does get support from [their] uncle and aunt and also [their] grandparents." (First my wheel, score of 2, final case note and score mirror the young person's first my wheel)

Qualitative evidence collected through interviews and the satisfaction survey indicates that CHHAT has had a significant impact on children and young people's access to support networks, through peers, family and professionals. Qualitative feedback identified that the CHHAT group gave children and young people access to support from peers going through similar things to themselves, and that this reduced feelings of isolation.

"[The group] was amazing for all of us to experience this and know we know we aren't alone and we built up amazing bonds with everyone." (CYP, user satisfaction survey)

In parallel, individual casework was shown to effectively improve children and young people's openness and access to support. Children and young people reported that their positive experience with the CHHAT worker made them feel more able to speak openly with professionals, friends and family.

"I've had quite a suspicious family, and they never really believed in therapy. I've had quite a tough family growing up, like, "Ooh, you need to be headstrong, you don't need no therapy," and stuff like that. Doing the CHHAT project made me more open to it because it made me realise that it's okay to not be okay, and that that was quite nice because then it was, the feeling that I know that if I do need help, I can always find it, and it is there, I just need to ask for it. And it showed me that I can just ask, and, like, it might take a while, but it does happen, because people do want to help, and that's what [Workers] showed me." (CYP, sustained impact interview)

Key areas of sustained impact in accessing support networks

Improvements to accessing support networks manifested in the following ways:

Sustained reduction in feelings of isolation through peer support

Evidence from interviews and the evaluation outcomes survey shows that CHHAT's group work has had a long-term impact on reducing children and young people's feelings of isolation and providing them with access to support networks. In sustained impact interviews, children and young people identified the group as a non-judgemental, free space, where they could speak openly about their situations.

"I think group is a really good idea as well, because even though it's scary to meet new people, I feel like younger people seeing that they're not the only ones going through it makes us feel a bit more comfortable. It just makes them realise that difficult things do happen to everyone, you wouldn't be human without 'em, and knowing that there are other people makes you feel a lot calmer, and a lot more safe, in a way, because there are people that you can talk to that do understand, because a lot of the time, people say they understand when they don't. But in a situation like that, you know that they do understand, and they're not just saying it for the sake of it." (CYP, sustained impact interview)

"I liked [the group], because then I realised I wasn't the only one, especially, like, when they were talking about their own situations, I thought actually, mine's not as bad maybe and lots of people are going through the same thing. It was quite nice talking to other people. I found it quite difficult to talk to my friends, but because these people I knew wouldn't judge me, because they're going through the same things, it was nice to talk to them. Whereas, like, my friends, I don't think are particularly going through the same thing and wouldn't really understand, whereas these other people really understood me." (CYP, sustained impact interview)

"It was the way that [the group] showed that everyone felt as if it was their fault, just to realise that it wasn't…it was so open and it was such a free space [it] made you realise that you could be open as well, rather than bottling up emotions and taking responsibility where you don't need to." (CYP, sustained impact interview)

"I had always struggled with confidence, and I'd never really had nice things, and I'd never really been given the chance to just express myself in a way where I wasn't being annoying or [feeling] like I was rushed. So, they were there to listen and to make you feel better, and I think that that helps. They wasn't going to judge you, and they just listened to you, which is different to a lot of people these days." (CYP, sustained impact interview)

Peer support sustained

The sustained impact interviews, and interviews with staff, identified that a key area of longer-term impact was that those who attended the group have maintained contact and continue to provide each other with support at least three months after leaving the service.

"Yeah, we've all got a group chat for, like, if we need each other, or if anything happens at home that we used to speak about in the group, we just message about it, and we just let each other know that we are still there for each other, no matter what." (CYP, sustained impact interview)

Children and young people also spoke about having maintained close friendships with others in the group three months after leaving the service. They described these friendships as hugely beneficial, as they were able to meet people who truly understand what they are going through.

"Now, one of the people that did the project with me is one of my best friends… I still talk to her nearly every day, and it's nice, because now I'm not alone. Whereas, none of my friends have been through anything like this, but she has, and it's nice, because I get someone to talk to about it." (CYP, sustained impact interview)

Sustained improvement in accessing support from family

Feedback from children and young people, through sustained impact interviews, indicates a longer term improvement in their ability to receive support from family members. Children and young people related this positive change to feeling more able to share their thoughts and feelings as a result of working with CHHAT, leading to better communication and support.

"I was really scared about the support stopping, because [Worker] is the whole reason I started opening up in the first place. So, I was scared that if she wasn't there to keep making sure I was okay, that I would just suddenly shut myself off again. But now that it has stopped, I feel like I'm still just as open as I was while support was going on. If anything, more now, because I don't have Emma to talk to, so I'm talking to my mum a lot more about how I feel, and making sure she understands, and I just feel so much better now." (CYP, sustained impact interview)

Through improving children and young people's ability to share their thoughts and feelings, and therefore speak to their families when in need, CHHAT has provided them with a sustainable support network, which they are still accessing three months after leaving the service.

Sustained improvement in view of professional support

Sustained impact interviews found that children and young people feel more able to access support from professionals as a result of working with CHHAT. Interviews identified that this sustained openness is a result of children and young people's positive experience with CHHAT workers, and their having observed the benefits of gaining support from CHHAT, which has led to improvements in their overall view of professional support.

"I think people put it off, just 'cause they're like, "Oh, I don't need the help," and I was the same, but as I did the sessions, I did find that it really did help me. So, I think in the future, if I ever did need the help again, I would go and find it, 'cause I know that it actually does help." (CYP, sustained impact interview)

"I know that if there is like a problem I can just talk… she's made me aware there are people to talk to." (CYP, sustained impact interview)

"Now I know what support is like, and I know that people aren't just asking for the sake of it, they actually want to help, I feel like if I ever did need support again, I'd know where to go, and I would be a lot more open than I was to start with." (CYP, sustained impact interview)

Key Finding 3: CYP are more protected from harm

The children and young people who CHHAT work with experience risk of harm in multiple ways. For those still living with a parent misusing substances they can face evident risks such as neglect and abuse. However, many also face less evident risks due to the impact of parent's misuse on their mental health and wellbeing. Interviews with children and young people found that many experience low mood and low self-esteem. Some children and young people spoke about neglecting themselves (such as not eating, drinking or sleeping properly), and some also spoke about having wanted to harm themselves.

With this in mind, CHHAT's work has focused on making children and young people safer by improving their mental health and wellbeing, self-care, and their ability to talk about their thoughts and feelings when they are feeling low. Alongside this, CHHAT has also provided informal support to family members and, through the kinship work, formalised support to those who have assumed care of a young person when a parent is no longer able to care for them.

When looking at the evidence in combination, from interviews, surveys and the My Wheel outcome tool, there is significant data to indicate that, through this support, CHHAT has led to an increase in children and young people's protection from harm,

The graph below shows that 61% of children and young people reported improvements in safety.

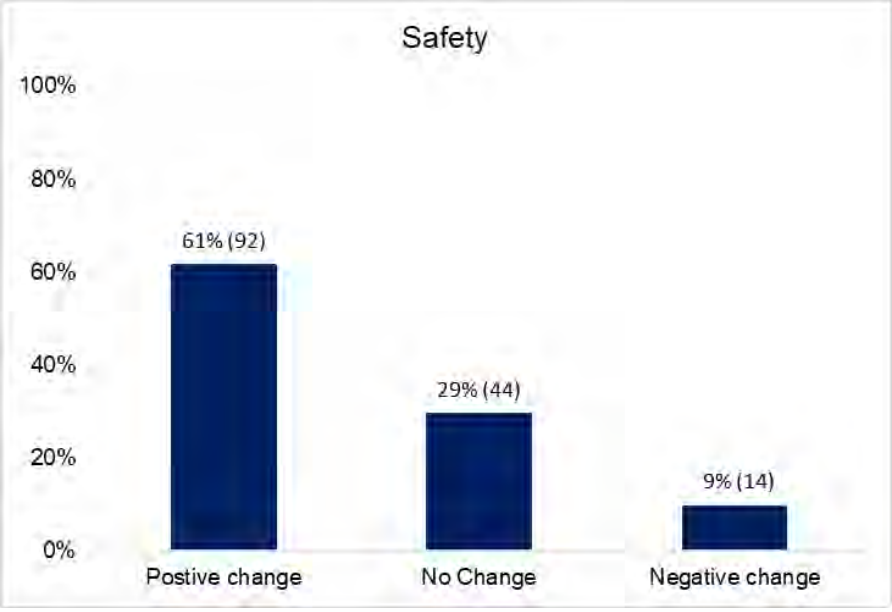

Figure 10: My Wheel Results for Safety

Although the majority reported improvements in safety, according to this data 29% saw no change and 9% experienced a negative change. Analysis of interviews and My Wheel case notes found this was often due to children and young people feeling safe at the start of their work with CHHAT:

"… quite a few of our CYP being in a safe environment to start with, meaning their outcome wheel score was high initially and therefore did not change." (EOY report 2018)

This assessment is supported by the My Wheel data, where the mode first score on 'Safety' was 5. This indicates that most CYP felt they were already in a safe environment at the start of their work with CHHAT. This is reflected in the case notes explaining the My Wheel scores:

"[YP] feels safe at home and at school. Previously when [they] lived with mum she would get angry and aggressive about dad but currently there is no contact with mum." (First My Wheel, score of 5).

In some cases the score did not change or got worse due to there being no change or increased difficulties in children and young people's family circumstances. Staff interviews raised that, as CHHAT mainly works with children and young people, the service does not have direct control over the situation at home. This limits the impact that CHHAT can have in this area.

"We cannot change their situation at home. We'd do safeguarding referrals and things like that, and try and make it as safe as possible for them, [but] there's nothing we can do about that situation, that's not what we're there for. So, that is always going to be one that perhaps doesn't change for us. [It] may even get worse at times, particularly if the situation's got worse and Social Care have become involved and things like that, it's a bit of a tricky one for us to kind of score highly." *(Staff Interview)*

Where CHHAT has worked with family members, evidence indicates that this has led to improvements in safety.

Key areas of sustained impact in protecting CYP from harm
Improvements in safety manifested in the following:

Sustained protection from self-neglect and self-harm
The interviews with young people at least three months after leaving the service showed aspects of safety had been sustained. By improving young people's ability to share their thoughts and feelings with others, instilling self-care, and giving them coping mechanisms, young people now have increased protection from self-harm and self-neglect.

"We focused on self-care quite a lot with [Worker] as well, and I wasn't doing any of that stuff before. I was just shutting myself off in my room, not really eating properly, not sleeping properly, I didn't talk to anyone. I was just depressed, and then after I worked with [Worker], I just started feeling so much happier that I could actually get my feelings out, rather than keeping 'em into myself and shutting myself away. And then, doing that… made me realise that I can talk to other people, like my mum and my sister. So, I feel like now I'm definitely a lot more open about how I feel and as soon as I start feeling like that again, then I go straight to my mum. I did have a few setbacks, while I was with [Worker], because I just felt that low, but then the more I worked with [Worker], the more positive I was getting and the more open I got. So, I didn't really find myself that low again, and I know that if I am that low in the future, I do have people that I can go to."
(CYP, sustained impact interview)

Sustained Impact Case Study – Jessica

When Jessica started engaging with the CHHAT project, she was experiencing low mood, self-harming, struggling with her emotions, and often blamed herself for her parent's substance misuse. She felt isolated, and unable to share her feelings with her friends and family. As a result of this, she struggled to look after herself, and often would not sleep, drink or eat.

Jessica worked with CHHAT for 11 months, engaging in one to one and group support. Through engaging for a long period of time, and receiving consistent and regular support, Jessica reported that she was able to build trust with the worker, and open up about her situation. She developed mechanisms to cope with her emotions, and through learning about the impact of addiction, she gained a greater understanding of her parents' behaviour. This understanding helped her to realise this behaviour is out of her control. Through attending the CHHAT group Jessica was also able to meet others in a similar situation to herself, and as result she felt less isolated.

Three months after leaving the service, Jessica now regularly practices self-care, and is more able to share her thoughts and feelings with her friends and family. She now knows her parents' drinking is not her fault and that it's not her responsibility to change their behaviour. She has also gained new friendships at school, with people she trusts.

Jessica's younger sibling also accessed support from CHHAT after speaking to Jessica about her experience with the project. As a result, her sister has seen many positive changes in her life as well. This shows the preventative work that CHHAT does, when the work they do with one sibling leads to positive change and better life chances for a younger sibling.

After leaving CHHAT Jessica and her family are now receiving support from the Active Families Together service, a service that brings families together to do physical activities. Jessica feels that this has brought them closer together.

"[If I hadn't worked with CHHAT] I think I'd still be in that really dark place where I was before. I wouldn't have had the motivation to get help or change what I was doing with, like, not eating and drinking and sleeping. I feel like I still wouldn't be able to talk to anyone, including my dad, like, I wouldn't know what to say to him. I wouldn't understand a lot about what was going on while he was drunk. I think I would still be just as bad and sad and alone as I was before."

Additional significant outcomes

The following outcomes were not anticipated in the theory of change, but were identified as significant through the evaluation.

Children and young people's participation, volunteering, and voice influences services for the better

Young people reported that as a result of taking part in CHHAT and having experienced improved outcomes themselves, they felt more able to have their say and take part in participation activities through the TCS East participation group.

> *"I know that I'm now helping people, compared to when people were helping me. I felt it was time for me to move on and help people the way that I can." (CYP, sustained impact interview)*

Figure 11: "I Feel…When you Drink"

This includes the booklet "I feel…when you drink"[9], a collection of poems, letters and pictures on how it feels to be a young person dealing with hidden harm. This booklet was shared with the professionals at the conference in 2019. **The professionals' survey results show that the resources provided on the day (including the booklet) increased their ability to support children and young people**. This booklet is now also being used by local authorities in Essex as part of the training pack given to new social workers, a significant system change outcome achieved by the project and the young people. The booklet was also developed into an animation used as part of TCS' national project, CAPE, in 2019[10].

> *"I went into a school recently and [the booklet] was on the Headmaster's shelf, [and he said] "yeah, I've been using it with a family, we're trying to get them some support." One of the young people that helped create the booklet said to me "I never thought this would go anywhere. I thought it was just a thing for us to do and no-one would ever use it." When I explained to him that it had been used as part of the animation and it had been seen by people across the world and that I think, Wandsworth Council were using it for all their new Social Workers, and it was being widely used across TCS, he [said] "that's so amazing," and he was super excited that his artwork and his words had been put out there to help others." (Staff interview)*

This illustrates CHHAT's impact on systems, which is explored further in section four.

[9] https://www.childrenssociety.org.uk/parental-alcohol-misuse/practitioner-resources/i-feel-when-you-drink

[10] The CAPE programme provided advice, guidance, training, and support to professionals working with children and CYP affected by parental alcohol misuse.

Prevention through sustained impact on younger siblings

An area of sustained impact highlighted through the interviews, was also in CHHAT's ability to support younger siblings, and therefore provided sustained positive outcomes for the wider family. This illustrates an area of preventative work, in which CHHAT has been able to identify young people with hidden harm through older siblings and intervene at an earlier age, helping to prevent future issues that may arise.

"My sister's younger than me, and I feel like it was really hard for her before, not having anyone to talk to. She wouldn't even talk to me about it, but once we'd done group, and she realised that there were other people as well, she was a lot more open about it, and felt a lot more comfortable." *(CYP, sustained impact interview)*

4. Systems Change Impact

"System changes" are changes to the people, organisations, policies, processes, cultures, beliefs and environment that surround young people. This is an aim to improve the system response to young people to ensure long term change for children. This section looks at the evidence related to CHHAT's impact on the systems, and includes feedback from the CHHAT professionals' conferences (2018 and 2019) and volunteer mentors hidden harm training.

Volunteer mentors have improved understanding of hidden harm and improved skills to support young carers

CHHAT conducted hidden harm training with TCS volunteer mentors. These are volunteers who can be allocated to any project within TCS East. The training feedback form identified that **as a result of the training:**

- 100% of participants[11]saw an increase in their understanding of hidden harm
- 100% of participants[12]saw an increase in their ability to identify children and young people affected by parental substance misuse
- 78% of participants[13] saw an increase in their ability to support young carers
- 78% of participants[14] saw an increase in their ability to support children and young people affected by parental substance misuse

Volunteer mentors also reported that they would use their learning in their work with children and young people, families, communities and other agencies.

"I will consider carefully the children I teach in my practice but also the children within my family and social groups and look for potential signs of hidden harm" (Volunteer Mentor, Hidden Harm Training Feedback Form)

"I will use everything [I] learned i.e.: the 7 C's when working with children and families" (Volunteer Mentor, Hidden Harm Training Feedback Form)

"[I will] Ensure agencies are considering hidden harm referrals" (Volunteer Mentor, Hidden Harm Training Feedback Form)

"[I will have] confidence in identifying YP who may be suffering with hidden Harm in work settings" (Volunteer Mentor, Hidden Harm Training Feedback Form)

Mentors felt that the training was informative and pair work was beneficial to their learning.

[11] 9 out of 9 participants
[12] 9 out of 9
[13] 7 out of 9
[14] 7 out of 9

Systems Change Case Study - CHHAT Hidden Harm Professionals' Conferences 2018 and 2019

As part of CHHAT's systems change work, the team held a professionals' conference on hidden harm in 2018 and 2019. CHHAT invited representatives from across Essex, included social workers, nurses, midwives, youth workers, the church and police. The day was organised into four workshops covering, children and young people's experiences of hidden harm at different stages of life; Foetal Alcohol Syndrome[1]; multi-agency working and "professional curiosity", and; explaining addiction to a child. In 2019, a number of guest speakers also presented at the conference, including a local councillor, and three young people and one parent who shared their lived experiences of hidden harm and parental substance misuse.

Professionals are better able to identify young people affected by hidden harm

Evidence from the CHHAT professionals' survey identified that CHHAT has been able to improve professionals' understanding of hidden harm. The professionals' conference surveys found that after the conferences in 2018[1] and 2019 over 90% of participants had an improved understanding of the signs of hidden harm.

98% of professionals reported an improvement in their understanding of hidden harm, as result of attending the CHHAT professionals' conference in 2019

Professionals are better able to support young people affected by parental substance misuse

Evidence from the interviews and the professionals' conference survey identified that CHHAT was able to improve professionals' ability to support young people affected by hidden harm. In the 2018 conference survey[1], 92% of professionals reported an improvement in their ability to support young people affected by parental substance misuse after attending the conference.

99% of professionals reported an increase in their ability to support CYP as a result of attending the CHHAT professionals' conference in 2019

Interviews with referrers further showed that the conference improved professionals' ability to support young people affected by hidden harm. One interviewee noted that as a result of hearing a young person with lived experience speak at the' conference, they were able to use this young person's example to reassure and support someone they were working with and reduce their feelings of isolation.

"The young women who stood up and spoke, when I was talking to the girl I referred in, I talked about her, because, the young person I was with [felt] it was all hopeless…[she said] "This is never going to change, and this is going to be my life." She was on a bit of a downward spiral. And I said to her, "we're still learning, we've been to these conferences to try and understand more, to help you…I said, "It's not all lost," you know. I could use some of what the young woman had said, and it made her feel she wasn't alone, because it is very isolating, this whole situation, they always feel they're the only person. When we can say, "Look, we've seen this, and we've heard this, and we've worked with these people as well," it gave her a bit of hope, I think." (Charitable organisation referrer interview)

CHHAT representing the young person's voice within the wider system

Staff interviewers highlighted that beyond CHHAT's direct work with professionals', CHHAT has a beneficial impact within the wider system as a voice for children and young people. Staff noted CHHAT's role in multi-agency meetings, where they are able to represent the voice of children and young people, and put forward the young person's interests. Staff felt that this is due to the CHHAT team ensuring that they speak to children and young people about these meetings, explain them, and ask children and young people what they want to result from them and how they want the worker to put their views across.

"[At multi-agency meetings the CHHAT worker] are the voice of the young person. They are the person that can put that young person's opinion forward. They can do it for them. It's sometimes really scary for a young person to do that. Sometimes you have a meeting where the child's not even invited, when they're talking about them and their lives, and it gives that opportunity for that [young] person to have a voice. To have that opportunity to have their story shared, or what they want shared, to shape how their support is offered, via Social Care, and other agencies. So, it's so important to have the member of the CHHAT Team there." *(Staff interview)*

5. Critical success factors

This section provides insight on the reasons why outcomes were achieved. This is based on evidence from interviews with staff, children and young people, family members, and referrers. The following factors emerged as important to achieving CHHAT's outcomes:

6.1. Having a flexible and children and young person led Approach

Interviews identified that CHHAT's flexibility in allowing children and young people to have a say over the type of support they receive, the location and timing of sessions, and the length of the service overall, has been critical to producing positive outcomes. The following areas, in which a flexible and young person led approach was adopted, were key to producing positive outcomes:

6.1.1. Time

Interviews with staff and young people found that CHHAT's ability to be flexible and young person led in the time it gives to children and young people has been a key success factor. This includes allowing children and young people to access support for as long as they need, and also taking time to allow them to talk about what they want to speak about, not only issues around substance misuse, but any other worries and concerns they may have.

Children and young people noted that the staff taking time to build rapport, allowing for a casual chat dynamic that did not pressure them to talk before they felt ready, enabled them to build trusted relationships with workers and open up more about their thoughts and feelings.

"She would always make it clear that if I didn't want to say something I didn't have to... [The CHHAT worker] would always make it an option if I wanted to say something, she would never make me say anything. It just made me feel comfortable to talk about what I wanted to talk about." *(CYP, sustained impact interview)*

"It was sort of like a friend, it wasn't like Doctor/patient, it was more like a friend. So, I was able to talk to her more openly." *(CYP, sustained impact interview)*

"Well, yes, I think the qualities that she brought to us that she has… that building up of a rapport… you just allow yourself to build up a trust don't you, and I think once you trust somebody, then that's a huge step forward, in terms of how supported you feel."
(Parent/carer interview)

Interviewees reported that allowing children and young people to stay with the service for as long as needed has been critical in building trusted relationships that enable young people to open up about their thoughts and feelings, and work on ingrained issues around confidence and self-esteem.

"I think it was good because I got to know her better as well over that duration, so over time, I could be more open with her. It was nice getting to know her more. [Because] I'd known her for a longer period of time [it] made me more comfortable around her." *(CYP, sustained impact interview)*

"The length of time [meant] she got to know me a bit more." *(CYP, sustained impact interview)*

"It sometimes takes a long time for a young person to open up, to be able to trust, to be able to talk about their situation. They may not have spoken to anybody in depth about it…it takes a long time to build that trust with them. So, it's very gentle the way we would work with them. We'd try and work a lot on self-esteem, and confidence, and sometimes they don't get near talking about the parental drug or alcohol use for a little while, or not a full conversation. It can be quite a delicate process and journey. It is beneficial to them because we build upon that. They trust us." (Staff interview)

Staff also noted that having a flexible service model that allows children and young people to stay with a worker for as long as they need, was instrumental in reducing young people's feelings of self-blame for their parents' misuse.

"With [one young person] it was definitely a lot around a shift in, kind of, blame. So, when I first started working with them… they felt like they were to blame for their parent's drinking, and very much felt like they could control it. They would try and do things to make a difference to how much their parent was drinking, and it was really having an impact on their mental health. They had coping mechanisms that weren't safe... Through being able to support them for a long time, it meant that they've gradually been able to change those coping mechanisms and alter their way of thinking. They have a completely different way of viewing the situation now and viewing their parent's drinking, and that just wouldn't have happened if it had been a couple of months." (Staff interview)

This level of flexibility, enabling CHHAT to adapt to the needs of the young person and give extra time to provide additional support if needed, was also valued by school referrers.

"One student, when things got quite bad with mum, again, I [contacted the service] and said, "Look, can you put some extra support in place for her. Things are quite tough again, and she'd really like to speak to you." Students felt very able [to] come to me and say, "Look, I really need to speak to [Worker], can we arrange something else?" And that was done really quickly… I do remember phoning [CHHAT worker] and saying "Are you able to come in?" and it was like within the next few days she was able to come in and make an appointment, and have a one to one chat with the student." (School referrer interview)

6.1.2. Location of one to one case work

Interviews highlighted that for many young people experiencing hidden harm privacy is incredibly important, and the need to feel that they won't be overheard is vital to enabling them to share their thoughts and feelings. Evidence from interviews with staff, family, children and young people, and referrers, identified that CHHAT's flexibility, in giving young people a say over where they want sessions to take place, was therefore key to enabling young people to open up and experience positive change.

"[Worker] would always give me the nudge, like, the choice to see her in school, like, in a café, or, like, at home, so, like, that was really good." (CYP, sustained impact interview)

"I think that was a very comfortable thing for her, she was in an environment she knew, she would curl up on the settee. She'd often cuddle a cushion…She didn't like anything happening at school because she didn't like her being taken out of class, or anything like that." (Family member/kinship guardian)

Interview evidence indicates that allowing young people to choose the location also enabled them to overcome issues they had around speaking about their thoughts and feelings in public, and by doing so was seen to improve their confidence.

"I used to pick [the young person] up and drive [them] to the Costa… so we knew we had the journey there and back where if there were more difficult things that he didn't want to talk about in a more public place, then we had that journey as well. It really worked for him because he actually had a lot of… concerns around meeting people and being out in public. He chose to have the support in a public place, which I think really helped him overcome some of the other barriers that he had [with] his own self-esteem and confidence." (Staff interview)

Staff interviews identified that the flexibility to allow young people to have time in the car journey was also key to enabling some to open up about their feelings. Staff noted that the side-by-side element provided a more open space without the pressure of addressing someone more directly.

"Sometimes, with those young people, often the car journey will be a time that they feel a bit more comfortable to open up. I think it's also quite a non-direct way of opening up… you're sat side-by-side, I'm not looking at them, they don't have to make any eye contact with me. So sometimes, for young people, that can be the time when they're most likely to open up about those things that are really difficult." (Staff interview)

Allowing young people to choose the location of sessions also allowed for trust to be established, which resulted in young people feeling more able to share thoughts and feelings.

"I'm not an open person, so when I feel uncomfortable about a situation… I find texting and calling a lot easier than talking to someone face to face about how I feel, just because I feel like I won't be able to see what their face is, so at least if they're judging me, I won't know it. I just felt a lot more comfortable doing stuff over the phone, and then when she reassured me to the point where I knew that she wasn't going to judge me face to face, I knew that I could do it, and that we've had a conversation about it before, so I was happy to do it face to face and in person." (CYP, sustained impact interview)

6.1.3. Flexibility/young person led in structure – offering one to one and group work

CHHAT's flexibility in offering one to one and/or group work and giving young people the choice in what they felt would be best of them, was also key to enabling change. The one to one sessions were vital for some children and young people, allowing them to work on ingrained mental health issues, whilst the group work was key for other young people who wanted to meet others in a similar situation to themselves to feel less isolated and gain peer support.

"I liked them both (one to one and group) a lot. Group definitely showed me that there are other people, and that I can talk to other people about it, and then, when it was just me and [my worker], I felt like I could open up a lot more about my personal situation, and we talked more about things that I wanted to focus on, whereas group was a lot more based on the stuff that we all wanted to do, which was really good, I liked them both a lot." (CYP, sustained impact interview)

6.2. CHHAT workers listening to, understanding, and caring about children and young people

Interviews with young people and family members identified that a key enabler of positive change was that CHHAT workers showed young people they were listening, were understanding, and that they genuinely cared. Through this they were able to build strong relationships that allowed children and young people to open up.

"[My worker] remembered everything every time as well. Every session, she'd be like, "Oh, how's dad?" and "How's the girlfriend?" and all this, you know, she'd always remember everything. So, I'd never have to go over anything, and it felt like she was actually listening. So, that was a real – that was really important to me." (CYP, sustained impact interview)

Children and young people reported feeling that CHHAT workers genuinely cared about them and wanted to help. Young people regularly placed this approach in contrast to their previous experience of professionals, where they sometimes felt they were being assessed or analysed.

"I didn't get off the impression that I was being analysed or that they were trying to put me down as a certain person. I got the idea that they truly cared how I felt and they just wanted to do what they could to help." (CYP, sustained impact interview)

Interviews with young people and family members found that the CHHAT practitioners' ability to listen, be non-judgemental, reassuring and encouraging, was key to building a trusted relationship with the worker that enabled them to share their feelings.

"She's always very open, and she never went, "Oh my God, that's a silly thing to say," or, oh, you know, "What on earth made you think that?"...You didn't ever feel silly, or anything for asking something, even if it was really quite simple. I think that's quite important, because Social Services made us feel like – made us feel quite awful at times." (Parent/carer interview)

6.3. Confidentiality and the independence of the worker

Interviews with young people, family, staff and referrers noted that children and young people affected by hidden harm are often incredibly private about their family situation. This is often due to not wanting to be judged by others, and also wanting to protect their families. Interviews with young people highlighted that as a result of these feelings, when it comes to receiving support privacy and confidentiality are key. Interviews noted that this is especially the case for those affected by hidden harm, as some young people do not want their parents, who are still misusing substances, to know they are receiving support. Interviewees noted that this is often due to parents being in denial about their situation, or afraid of the potential consequences of professional involvement.

Interviews with young people and family members found that CHHAT's ability to be private, and reassure children and young people of confidentially, when there is no risk of harm, was key to enabling them to open up about their feelings and situation. Interviewees noted that a key reason for this is that CHHAT is an external organisation that can be kept separate from young people's families. CHHAT's involvement with children and young people's families is at the discretion of the young person, and young people over 13 do not need parental consent to receive support.

"I didn't really know them, so I felt like obviously it wouldn't go anywhere, and the fact that there's the confidentiality in it I felt like I didn't have to hide anything." (CYP, sustained impact interview)

"[Confidentiality] was really important, as there were things that I spoke to [the CHHAT worker] about that I wouldn't want to go anywhere else, and I'm sure a lot of the other people are the same. So knowing it wasn't to go anywhere was really important and helped me to open up about other things that I wouldn't normally speak about. Knowing that it wasn't going to go anywhere else, and that they were only there to help was really reassuring."(CYP, sustained impact interview)

CHHAT's ability to maintain privacy, unless risk of harm is identified, and stay separate from young people's families was also valued by school referrers. Referrer interviews found that schools valued the fact that, unlike school support workers, CHHAT do not have need to be in direct contact with families. School referrers felt this provides young people with someone impartial, which allows them to feel more comfortable sharing their thoughts and feelings.

"I think an independent person to talk to who didn't know the family, so that they felt comfortable to talk as freely as they wanted to, knowing that that person wasn't going to then bump into mum and dad at pick-up time. I think that's the thing that is very difficult for children to have counselling at school. If you have got a relationship with the parent, I think that's very, very difficult, isn't it? Mum is very, very wary about what she lets them talk to us about…." (School referrer interview)

6.4. Teaching children and young people about substance misuse

A critical area of success for CHHAT has been providing young people with a space to learn about the impact of substance misuse, and how it affects their parents. Interviews with young people identified this, among other factors, as a key reason for their realising that they are not responsible for their parent's behaviour and no longer blaming themselves.

"I think [Worker] taught me a lot about how alcoholism is like really effective and it affects people and that I shouldn't put it on myself or blame myself. And so, now I just realise that and she helped me go through that situation… I could understand more what my mum's going through and not to be judging about it, because now I realise how hard it is. It just made me feel better because I know more about it." (CYP, sustained impact interview)

"I definitely thought it was my fault. But then [Worker] explained that… addicts don't want to blame themselves, so they find anyone else they can blame. I feel like I was just the easy target, because I get upset about everything, I'm a really emotional person. So, if he said that it was my fault, I'd believe it was my fault, and I'd get really upset about it. But then, the more I worked with [Worker] the more she taught me that no-one is forcing him to drink, he's doing it by himself. So, it's not my fault at all, and nothing will change until he wants it to." (CYP, sustained impact interview)

In some cases, children and young people felt that this is something they would have liked to learn even more about during their time with CHHAT.

"[I would have liked them to] talk more about what types of drugs there are and how they affect the parent when they are sad. This is because by understanding what they do they might feel less like the way their parent is acting is their fault." (CYP, User Satisfaction Survey)

6.5. Partnership working within the TCS East Hub

The CHHAT service sits within the wider TCS East hub, which includes a variety of different projects focused on alcohol and substance misuse, participation, and tackling exploitation among other areas. This means that CHHAT is surrounded by expertise. Staff noted that having access to this expertise, for instance through the TCS East wide meetings, enabled them to problem solve and gain ideas that contributed to success in the CHHAT project.

"I was talking this morning in the Families and Mentors Team meeting, and we were talking about groups, and we were talking about families in groups, and how, if there's somebody in the background, how safe is that? By going into that meeting, we're able to hear from Safe in Essex, and how they're doing things, and that's all going to be put together and all the learning will come out of that. I think we're very lucky and unique in that way in TCS East that we have other teams to glean information from, and learn from – we all learn from each other, so, it's a great platform to do that." (Staff interview)

In addition to being able to draw on expertise within the TCS East Hub, CHHAT has also been able to draw on other services for referrals and for providing young people with follow on and step-down support. The Service Manager for CHHAT also manages another service that provides follow on support to families through engaging them as a whole family in physical activities and sports. This dual management meant that some young people in CHHAT were able to access additional support that led to improvements in their family relationships.

"[CHHAT Manager] used to come and pick us up and she told us about the Active Family thing, and I went to my mum about it, and I was like, "This sounds really interesting and I feel like this could be good for all of us." I felt like this could be really good for us all to do together. So, we get involved with that, and I think it's actually a really good thing to be involved with, especially in a time like this, where it's hard to get out anywhere. I feel like it's good to keep active, and we're doing, like, the daily quizzes with them and everything like that. I feel like we're a lot closer now, when we do – like, obviously we're doing all the exercises and yoga and everything like that together, and we're just getting out a lot more. Like, we want on, like, a walk together, and made sure that we went somewhere where no other people were, but we've actually been doing exercise and stuff like that together, and I feel like it's brought us a lot closer." (CYP, sustained impact interview)

6.6.2. Partnership working with schools

Interviews with staff and referrers identified that a critical success factor for CHHAT has been its ability to work effectively with schools. Schools have acted as a vital source of referrals for CHHAT. As shown in figure 5, **schools are the main source of CHHAT's referrals, making up 37% of referrals over the intervention period (2017-2020).** This, alongside referrer interviews, indicates that schools have worked effectively with CHHAT by identifying and referring children and young people for appropriate support.

As a referrer, schools have also been able to offer CHHAT workers a safe and private location to hold sessions. Interviews found that for some young people meeting in a private space in school was especially comfortable, and helped them feel more open.

"Our first session was in school… we were in the meeting room and it was just us. It was quite an open space, so I felt like I could actually breathe." (CYP sustained impact interview)

Interviews found that schools ability to offer a private location for CHHAT sessions has also been incredibly beneficial during the Covid-19 lockdown. During this period, CHHAT has worked effectively with schools to ensure some young people have a private location to conduct virtual sessions outside of their homes, where some feel less able to speak openly.

Staff interviews also found that close working with school referrers has provided CHHAT with a way to communicate with young people's parents, without having to be in touch directly. Staff noted that having the school as an intermediary allows CHHAT to maintain their independent position while still being able to advocate on behalf of children and young people.

"Communication [with the school is] always good when we're supporting the young person and if for example, I had a young person [whose] parents weren't letting them attend any of our events because both parents would drink alcohol and they didn't want the young person to be involved. But school were really good, when I expressed these concerns to the Head of Year at the school, they were really good at contacting parents, trying to push for them to allow that to happen, because quite often, the schools have a better relationship with the parents than we can. So, the school might do that for us…that communication was there, and it was helpful to have that. " (CHHAT staff interview)

6.7. Uniqueness of the project

Almost all the interviews with young people, family, staff and referring partners, identified that there is no other service like CHHAT in Essex, and that for most of these children and young people there would be nowhere else to turn for this kind of support. In particular, a flexible service that specialises in hidden harm, and supports young people with the impact of parental substance misuse.

"I mean, they've been very good with the children, excellent support for the children, but, you know, I don't know where we'd have gone [without CHHAT]… (Parent/carer interview)

Referrers noted the uniqueness of the project, and reported that there is no other service like CHHAT that they could refer young people to gain support specifically related to parental substance misuse and hidden harm.

"I wasn't aware of any other organisation that I could have referred to her actually." (Charitable organisation referrer interview)

"What they offer is – it's not offered by other people. To have that specialist service is really important." (School referrer interview)

Referrers noted that although their work does not focus on parental substance misuse, they do regularly see it arising as an issue for the young people they work with. However, as this is not their main focus, they often do not have the relevant expertise to provide appropriate advice and support. For this reason, referrers reported valuing the specialised nature of

CHHAT's service, and knowing that they are getting young people the most appropriate support.

"We've got Learning Mentors, we've got the School Counsellor, but actually, [young people affected by hidden harm] need somebody they can talk to that they can trust, but also, who understands all the nuance of misusing substances. We can talk about all sorts of things, but that isn't in our expertise." *(School referrer interview)*

"Just being able to offer the right thing to the children. It's really, really, really needed. All of my experience with safeguarding, and all the different stories and backgrounds, actually giving kids an opportunity to talk is the one area that's really lacking… Actually having a service that talks to the children about [parental substance misuse] is brilliant. I can't think of anything else that is the same as that… schools do their bit, but it's not the same as proper talking. It's brilliant being able to signpost to something that is absolutely appropriate." *(School referrer interview)*

"I do think it's an essential service. It's great to be able to have someone with the expertise because it really does make a difference. Because what you don't want to do is me sit there trying to – I can talk to them and empathise, and all the rest of it, but I can't actually do anything about it, and that's what's frustrating."(Charitable organisation referrer interview)

6.8. Holistic support

Although CHHAT mainly works directly with children and young people, the service also provides support to parents, carers and kinship providers. This support is provided informally to parents and carers of the young people CHHAT works with on a one to one basis. CHHAT also provides more formal kinship support, which involves supporting those who have assumed care of young people due to parental substance misuse, for instance, grandparents. CHHAT's support to family members takes the form of listening, talking things through, problem solving and providing advice. Interviews with staff, family members and young people found that this support was key to improving family relationships and young people's protection from harm.

Interviews found that young people valued CHHAT's ability to support their family members, and felt this had a positive impact on themselves.

"I think she has talked to my nan and grandad a bit… it definitely helped my nan and grandad. I think they realised that it's not really my mum's fault... I feel like my nan used to be really angry. Not, like, all the time, but I think now she can calm down a bit easier… it's better for me 'cause I don't really get moaned at a lot [anymore]" *(CYP, sustained impact interview)*

Staff interviews also identified that kinship support provided guardians with better coping mechanisms, and helped them to put boundaries in place that protect young people from potential harm from the misusing parent. The quote below shows a situation in which support to the family member, through problem solving and advice, increased children and young people's protection from harm by supporting family members to put boundaries in place that prevent children being subjected to a parent whilst under the influence of substances.

"[One parent], you know, he would just get cross, and we explored, "Let's wait 20 minutes, don't respond in anger." So, he will get a message, and he'll say, "I just want to type something, and ring her, and shout down the phone." I said, "But it's not good for you, and it's not good for the children to hear, so, walk away, turn [the phone] off." I said, "Turn it off, put it to the side," and if she starts contacting the children say, "Right, for the next half an hour, we're just going to not respond to mummy's calls" and I said, "You can explain why. They know that she's been suffering with misuse, and that's why they're living with you," so I said, "You need to just say mummy's a bit angry. She doesn't agree with me at the minute, so she's going to try and ring you, but we're going to ignore it for however long it takes, and then I'm going to rearrange something for tomorrow with mummy." because the children need to know that she's safe as well, 'cause they worry about their parents." (Staff interview)

Interviews with staff and family members noted the importance of this work, and felt it could be expanded to include a peer support group with a set programme of support. Staff and family members felt this would enable families to access peer support, share their experiences and learn from each other.

6. Process learning

This section looks at insight collected through staff interviews on areas of learning on how the service operated and some of the challenges that arose during the intervention.

7.1. Covid-19, the impact of location and non-face to face contact

Covid-19 has had a considerable impact on the CHHAT project, with all face to face sessions now moved online or via phone. Interviews with CHHAT staff identified that the team have worked hard to adapt to the new circumstances, and develop their skills in technology to ensure they can run virtual sessions for children and young people.

"[We were] plunged into COVID, and quickly forced to learn all this new tech. I think it would be crazy not to take that forward with us. I think people's heads are turning towards that anyway, in that they'd be more happy to use that and, I think, using technology more in the future would be really beneficial."(Staff Interview)

Nevertheless, staff also noted some key issues arising from the need to move young people to non-face to face contact. In particular, staff raised that young people who face hidden harm are now having to undertake meetings in their home, where their family is present and they may not want to open up about the issues they are facing.

"I can hear that [some young people are] struggling a lot with how they want the support to go and they kind of don't really want to speak or aren't as comfortable speaking over the phone. I know that they're not able to share as much as they would face to face, maybe because the parent's at home with them [and] that makes them not want to speak over the phone." (Staff interview)

"When we're phoning them, maybe it's that they themselves are struggling with their own mental health because they're spending a lot more time at home, or they [don't want] to talk at home because actually, if they open up at home, they then have to cope with those feelings within the home." (Staff Interview)

Staff noted that for children and young people who aren't living with the parent misusing substances, having the options to phone, text or video call has seen improved engagement, with more frequent contact between the young person and practitioner.

"Some young people [who] are not living with the parent, they're at home and [I'm] maybe just supporting them [with] a little bit more stability. So, for those young people, they might be engaging actually a little bit more over the phone, or text, or video calls." (Staff Interview)

The challenges around bringing feelings into the home was something staff raised not only in relation to young people, but also for themselves. Staff noted that undertaking these calls from their own home, sometimes led to difficulties separating their home and work life and therefore made it harder for them to disconnect from work.

"I've always been quite boundaried around where I see young people and not bringing work home. So then, having those difficult conversations where young people are really emotional, or really struggling with their own mental health, or what's going on in their family. Having those conversations in my own home, for me, has been a real challenge." (Staff Interview)

Staff also felt that having the virtual meetings can make structuring sessions with children and young people harder, as there is more room for distraction when the young person is at home.

"It's more difficult to have a structure, isn't it, because, when you're on a FaceTime call in their home, they want to show me what's going on in their bedroom and the things that they've made that week." (Staff Interview)

7.2. Funding and staff turnover

Staff interviews noted a sector wide issue with funding for services like CHHAT, with short contracts and funding cycles being the "nature of the game", leading to practitioners being regularly placed at risk of redundancy.

"Some workers get put on redundancy. It's really difficult 'cause all of our contracts run out at different times, so you'll – at any period in a year, you could have a few workers at risk of redundancy, and you could have new contracts starting. It's just the nature of the game, unfortunately." (Staff Interview)

For CHHAT, these challenges around short-term contracts and heightened job insecurity have seen staff searching for new roles and leaving the project early.

"[I left] because it meant that I was moving into a three-year contract, whereas, actually, my contract with CHHAT ended at the end of March 2020. Whereas this one ends in 2022, the contract I've moved into, and I've got a very, very big mortgage." (Staff Interview)

Staff turnover has been a key challenge for the CHHAT project. The Service Manager and two practitioners left the project at the start of the final year of the current intervention period. This has impacted on the team's capacity to pick up new referrals.

Interviews with children and young people found that, for some young people, staff turnover did not have a negative impact. This was due to cases being picked up by other workers who were then able to build good relationships with the children and young people. This was especially the case when young people had only had a few sessions with their original worker before switching.

"[The worker leaving] wasn't much of a big deal, because I'd only done a few sessions with [that worker], so I hadn't really got to know her very well… [and] both [were] really nice." (CYP, sustained impact interview)

However, in some cases staff turnover did have a negative impact on the work with children and young people. Interviews with young people and family members showed that in some instances staff turnover meant young people felt they needed to leave the service early, despite still needing support. This was due to young people being faced with the prospect of to re-explaining their situations and rebuilding relationships.

"[My worker] did give me the chance to talk to another person from The Children's Society, but I chose not to because I thought [my worker] was just really good, so I thought if I wasn't going to talk to [that worker], I didn't really want to start the whole process again, and explain everything else to another person again." (CYP, sustained impact interview)

7.3. Funding and capacity

CHHAT is a county-wide service, funded to have two full-time practitioners covering the whole region. This has limited the teams' ability to pick up referrals and meet the need for the service in Essex.

"Two practitioners to cover the whole thing, and if you look at how many people in Essex [use] substances, and have children, that tells you everything you need to know. There's so many children out there that are hidden, as the name suggests, and we're probably seeing a fraction of them. And even the ones that are coming in we're struggling to keep up with them." (Staff Interview)

This is especially considering that staff need to travel sometimes quite far distances to meet with children and young people, and therefore have less time to pick up additional referrals. Staff felt that there is a need to have more practitioners to cover each area of Essex.

"I'd have a practitioner in each quadrant. Family workers to support maybe one that does Mid-North, one that does South West, to support across the quadrants. Just, yeah, as always, [we need] more money, more staff." (Staff Interview)

CHHAT's limited capacity to pick up additional referrals has meant that the team has to develop an informal waiting list, and some children and young people have had to wait for several months before receiving support. Referrers, interviewed for the evaluation, noted that sending additional resources during this time would allow them to better support young people whilst they wait.

7.4. Internal referrals for kinship support

Kinship support was incorporated into the workload of CHHAT's existing part-time practitioner. The aim of this work was to provide support to family members who have taken over care of young people as a result of a parent's misuse. This is often grandparents, who have not been in a parental role for some time, and need additional support to cope with the impact of hidden harm. Staff interviews found that there have been some challenges generating kinship referrals. More evidence is needed to ascertain the reason for this. Staff felt it could potentially have been due to there being few appropriate families for CHHAT workers to refer for support. However, staff noted that since Covid-19 referrals have risen, and the part-time worker has been able to provide advice and support to family members over the phone.

7.5. Volunteer mentors

CHHAT aimed to have volunteer mentors supporting young people, however, there have been challenges around allocating volunteers to CHHAT. Staff raised that this could be due to volunteers being a shared resource for the TCS East hub and therefore having to share the need for volunteers with other projects. Staff also raised that the Mentor Coordinator left in January 2019 and there was a delay in filling the role, which contributed to challenges in allocating volunteer mentors.

Nevertheless, staff reported that volunteers have still been able to support CHHAT by providing CYP with transport to events, without which some children and young people would not be able to attend.

7. Learning and Recommendations

The following learnings and recommendations are based on the evidence presented throughout the report, with a specific focus on the findings on critical success factors and process learning. Firstly, wider lessons on working with young people are presented, followed by service specific recommendations.

Lessons learned

Evidence from this evaluation has identified wider lessons for working with young people, including:

- Relating to finding 6.1 in section 4: Evidence from CHHAT shows that **services that are flexible and young person led are highly effective**. For instance, CHHAT has demonstrated that:
  - Young people value and benefit from the opportunity to engage with different types of support, including one to one and group work.
  - Giving children and young people a say over the length of the service and the location of sessions improves young people's outcomes. Findings show that for CHHAT, allowing young people to engage in longer term work produced sustained improvements in children and young people's mental health and wellbeing, including blaming themselves less for parents' misuse, practicing self-care sustainable etc. Findings also indicate that giving young people a say over these areas was vital to producing positive change and maintaining engagement.

- Relating to finding 6.4 in section 4: **Teaching children and young people about the impact of substance misuse produces positive outcomes**. Findings show that in the case of hidden harm, learning about substance misuse is key to shifting young peoples' self-blame for their parents' behaviour.

- Relating to finding 6.5 in section 4: **A hub model, whereby multiple services work out of the same location, has wider benefits for service delivery**.
  - For instance, CHHAT's ability to draw on TCS East expertise and refer children and young people on to follow on and step down support from other services improves service delivery and outcomes for young people and their families.

- Relating to finding 6.8 in section 4**: The importance of providing holistic support to young people by extending support to family members**.
  - CHHAT's additional ad-hoc and formal kinship support to family members has been shown to be highly valued by young people and effective at producing positive outcomes. This demonstrates the value of creating a holistic support offer that goes beyond the individual level.

- Relating to finding 6.2 in section 4: **The importance of practitioners' skills and qualities in enabling trusted relationships to be built with children and young people**.
  - CHHAT has shown that practitioners' ability to be friendly, non-judgemental, reassuring and to listen effectively, has been key to building trusted relationships that lead to positive outcomes.

- Relating to finding 7.1 in section 5: CHHAT has shown that **Covid-19 has had significant impact on service delivery**, CHHAT's experience during this time has shown:
  - The need for children and young people sector staff to adapt to using technology with young people, to have time for upskilling themselves if necessary, and time for finding creative ways to engage young people in this way.
  - The need to find ways to maintain a boundary between home and work for staff supporting young people virtually or over the phone from home.
  - The need to find safe locations for children and young people to hold virtual sessions if their home circumstances are not appropriate, for instance, by engaging with schools.

- Relating to findings 7.2 and 7.3 in section 5: **There is value in both longer term funding and frontline staff having more secure job contracts for outcomes for young people**.
  - Evidence from CHHAT has shown that short-term contracts lead to job insecurity and staff turnover, which can negatively impact on outcomes for young people.
  - Evidence from CHHAT also shows that limited funding and staff turnover reduces capacity and limits a service's ability to pick up referrals.

Recommendations

The following are areas recommended by the evaluation for discussion and exploration.

1. Relating to finding 6.8 in section 4: **CHHAT, if feasible given constraints on capacity, should consider setting up a peer support group for family/kinship providers**, with a set programme of support.
2. Relating to finding 7.1 in section 5: **Post Covid-19 CHHAT should continue to look for ways to use technology to support CYP**. For instance, setting up a virtual group or up a buddy scheme, which pairs CYP going through the same thing, with the practitioner as an intermediary.
3. Relating to findings 7.2 and 7.3 in section 5: **Funding for additional practitioners would allow better coverage across the geography and for more young people to be supported**
   - Findings show that the number of practitioner roles available from existing funding is not sufficient for demand of referrals. Service staff advised that a staffing structure with a full-time CYP practitioner in each quadrant of Essex, and two family/kinship workers to support across two quadrants each would be beneficial.
4. Relating to finding 7.3 in section 5: **CHHAT, where possible given constraints on capacity, should send resources and information to referrers** when CHHAT is unable to pick up a referral. This is so that the referrer has information on hidden harm and is more able to support CYP while they wait to work with CHHAT. For instance, sharing the booklet created by the CHHAT group.

Monitoring and evaluation

5. **The service should consider reviewing its outcomes and the tools used to capture these.** For instance, as safety has been shown to be a complex outcome for CHHAT, the service may require a different approach to capturing CYP's change in this area. The service could consider adopting TCS' new My Life Wheel, an outcomes tool that allows

both the worker and CYP to write their reflections on CYP safety and provides more space to capture the context around this outcome.

8. Conclusions

Overall, CHHAT has had a great impact on the CYP it has worked with. Quantitative and qualitative data shows CHHAT has had a significant impact on improving mental health and wellbeing, CYP's access to support networks and protection from harm.

The interviews investigating sustained impact have shown that CHHAT has had a long term positive impact on CYP. In particular, sustainably improving mental health and wellbeing, through shifting CYP's blame on themselves for their parents' misuse, building sustained self-care into CYP's lives, sustainable improving confidence, and improving CYP's access to support networks. As a result of this, CHHAT has also been able to put in place increased protection from harm, by improving CYP's mental health, reducing their self-neglect and potential self-harm, and increasing their use of support networks when in need.

This evaluation has further shown that CHHAT is a unique project within the Essex area and that its place within the wider system is highly valued by other professionals and referral partners.

The critical success factors behind these outcomes, have been ensuring the service is flexible and CYP led, giving CYP a say over how long they want to be support, where and when they want support, and they type of support they receive. Other critical success factors included giving CYP a space to learn about the impact of substances, and ensuring effective partnership working, within TCS East and with referral partners, especially schools.

This evaluation has also identified some key process learnings for the service, including the impact of Covid-19 on engaging CYP, and on staff, as well the impact of short-term contracts and funding constraints that lead to staff turnover and a limited capacity to pick up referrals.