

An exploratory study to consider the experience of participating in a 'safe contact' assessment from the perspectives of the children, parents and social workers involved.

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Abstract:

Divorce and separation now affect more than twenty million people in the UK either through their own relationships or that of their parents and as a result, contact between children and their non-resident parent has become an increasingly important issue. In families who have been affected by domestic abuse, this can be particularly problematic, given the potential safety issues for children who have previously been exposed to violence in this context. The Scottish Government has provided funding for one Scottish local authority to pilot a new 'Safe Contact Model' for families who find themselves in this situation and this paper looks at the reasons why such a model has been devised, how it works and whether it is likely to be effective. It also begins to consider the experiences of family members and practitioners who have been involved in such an assessment.

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Introduction

Divorce and separation now affect more than twenty million people in the UK either through their own relationships or that of their parents (Centre for Separated Families 2007) and as a result, contact between children and their non-resident parent has become an increasingly important issue. In families which have been affected by domestic abuse, this can be particularly problematic, given the potential safety issues for children who have been previously exposed to violence in this context. This report introduces the findings from a recent small-scale investigation of the working of a 'safe contact' assessment model in a children and families' team within a Scottish local authority. Before doing so, however, it is necessary firstly, to define what is meant by domestic abuse, and secondly, to explore the nature and extent of this issue that affects so many children in Scotland today.

Defining domestic abuse

The Scottish Government's definition of domestic abuse is a broad one stating that, 'Domestic abuse (as gender-based abuse) can be perpetrated by partners or ex-partners and can include physical abuse (assault and physical attack involving a range of behaviour), sexual abuse (acts which degrade and humiliate victims and are perpetrated against their will, including rape) and mental and emotional abuse (such as threats, verbal abuse, racial abuse, withholding money and other types of controlling behaviour, such as isolation from family and friends)' (Scottish Executive, 2003).

The Scottish police also have a fairly broad definition describing domestic abuse as, 'Any form of physical, sexual or mental and emotional abuse which might amount to criminal conduct and which takes place within the context of a relationship. The relationship will be between partners (married, co-habiting, civil partnership or otherwise) or ex-partners. The abuse can be committed in the home or elsewhere. (Police Scotland 2013)'

Neither definition is gender-specific and while the Edinburgh Multi-Agency Domestic Abuse Policy states that domestic violence is predominantly a male issue with predominantly female victims it acknowledges that domestic abuse can also be perpetrated against men and that it can involve transsexual people as well as people in same sex relationships. It also suggests that the number of male victims is likely to be under-reported due to gendered notions in society relating to masculinity and help-seeking (City of Edinburgh Council, 2013).

In a memorandum submitted to the Select Committee on Home Affairs in 2008 the charity organisation Families Need Fathers questioned such a broad range of behaviour being described as domestic abuse and also the idea that the perpetrators are predominantly male. It argued that some definitions included 'significantly milder negative behaviours which could be said to belittle the experience of genuine victims, not to mention diverting limited resources from people in real need- female and male', adding that, 'Overall the evidence is clear. Behaviour that is common, if unpleasant, is broadly gender neutral.' (Parliament UK 2008a).

Edinburgh City Council has adopted the Scottish Government definition of domestic abuse and for the purposes of this paper we will also do so as it encompasses all the potential risks which might

necessitate a Safe Contact Model assessment. It is also gender neutral and the Safe Contact Model assessments have been designed as a gender neutral tool and can be used in any relationship context being equally applicable to male or LGBT victims.

Domestic abuse: nature and extent

Governments rely on two ways of gathering evidence about domestic abuse: firstly, through figures produced by the police on reported and recorded crimes and secondly, through crime surveys such as the Scottish Crime and Justice Survey (SCJS) and the English and Welsh equivalent, the British Crime Survey (BCS). Both tell us something about the extent and nature of domestic abuse.

In terms of recorded crime, the murder rate in Scotland has fallen consistently in the last few years, despite the population increasing by around 5% in the last decade (Scottish Government 2013b). Nevertheless, official figures demonstrate that domestic abuse remains an issue that has particularly serious consequences for women. Over the last 10 years, 50% of female homicide victims aged between 16 and 70 were killed by their partners or ex-partners, whereas 6% of male victims were killed by a partner or ex-partner (Scottish Government 2013b). In 2011/12, nine women were killed by their partners or ex-partners, as compared with two men (Scottish Government 2013b).

Recent Scottish Government statistics also give us an indication of the rate of domestic abuse more generally. Figures show there were 60,080 incidents of domestic abuse recorded by the police in 2012-13, compared to 59,847 the previous year. Half of all incidents recorded in 2012-13 (30,259) led to the recording of a crime or an offence, and of these, 78% (23,606) were reported to the procurator fiscal (Scottish Government 2013a). These figures suggest that domestic abuse figures remained relatively static, in spite of the growth in population and a greater police focus on domestic abuse in recent years, which may have encouraged more people to come forward (Scottish Government 2013d).

Crime surveys present more qualitative information to support the official statistics. The Scottish Government Crime Survey for partner abuse in 2011/12 was based on 13,000 face-to-face interviews with adults over the age of 16 in their own homes. The survey found that 16% of those who had at least one partner since the age of 16 had experienced partner abuse since that age. In the past twelve months, 3% of those who had a partner or were in contact with a former partner experienced domestic abuse during that period. Of this group, 2% said that they had experienced psychological abuse in the previous year and 2% said they had suffered physical abuse, figures which were not dissimilar to the previous survey in 2009/10. Surprisingly given the gender differences in the official statistics, the risk of experiencing partner abuse was found to be the same for men and women - 3% - although it was also noted that men and women experienced partner abuse differently throughout their lives. Women were more likely to experience a greater number of forms of partner abuse and in particular, more forms of physical abuse (SCJS 2011).

Looking at a larger sample, in the 2010/2011 British Crime Survey (BCS), 26.6% of women surveyed aged between 16 and 59 said they had suffered some form of domestic abuse during their lives with 5.8% being affected in the previous year (BCS 2011). Women who were separated had the highest risk of domestic abuse - 22.3% - compared with all other groups by marital status. The BCS contains some contradictory data, however. Based on the 'self-completion module' in the 2010/11 BCS, 7% of women aged 16 to 59 said they were victims of domestic abuse in the past year compared with 5%

of men (Table 3.01). It is also interesting to note that the figures recorded for England and Wales are significantly much higher than for Scotland, despite similar cultural circumstances.

Whatever figures we rely on, it is clear that a significant number of children are exposed to domestic abuse, and are at risk of negative outcomes as a result. A consultation paper on women's mental health in 2002 estimated that at least 750,000 children a year witness domestic abuse (Department of Health, 2002) in the UK and, as a result, are at increased risk of behavioural problems, emotional trauma and mental health difficulties in adult life (Scottish Government 2010b). The Edinburgh Multi-Agency Domestic Abuse Policy (CEC 2013) states that 40% of cases added to the Child Protection Register in the city between August 2011 and July 2012 had domestic abuse recorded as a concern.

The Scottish Government has made domestic abuse a priority in recent years and the introduction of the 'Caledonian System', an approach to tackling domestic abuse through supporting victims, perpetrators and their children, has provided a national framework for addressing this (Scottish Government 2010a). Significantly, *the National Guidance for Child Protection in Scotland* states that, 'the impact of domestic abuse on a child should be understood as a consequence of the perpetrator choosing to use violence, rather than of the non-abusing parent's/carer's failure to protect' (Scottish Government 2010b).

Social work and domestic abuse

In an early study of social workers' concern (or rather, their lack of concern) for domestic abuse within their caseloads, Maynard (1985) identified that social workers minimised abuse: when they became aware of it, they encouraged women to change their behaviours in order to placate their partners. Since that time, a raft of studies have pointed out the damaging effects of domestic abuse on adults and children in families; much of this research has focused on women and children's experiences (see, for example, Dobash and Dobash (1992); Featherstone and Trinder (1997); Mullender and Morley (1994)) A persistent theme to emerge within this literature is that social work has inadvertently punished women by focusing on their 'failure to protect' rather than on the perpetrator's behaviour and choices (Hester 2011).

In our practice experience, it remains the case that women may be provided with uncomfortable decisions about what action they will take to prevent their children being viewed as 'at risk' when they themselves have been, or are being, subjected to domestic abuse by a partner, who is possibly also the father of their children or in a step-parental relationship with them. Stark (2013) warns against the conflation of the function of mothering and a woman's personhood since his extensive USA-based research has found that the outcomes for children are worse when the child protection system meets women only as mothers and fails to recognise their own victimhood, in living with domestic abuse.

Stark also highlights that violent partners will often have made ongoing and insidious threats to harm the children which act to keep the woman in fear, and in the relationship. When a woman finally reaches the point of ending a relationship which has been abusive and where there are children involved, she must then negotiate the further question of her children's contact with her abusive ex-partner. This raises many complex questions for her, encompassing her children's safety, her own well-being and the potential for the contact to have positive as well as negative effects for

the children involved, including the very serious possibilities of any contact becoming a site for ongoing abuse of her in ways which may involve the children.

Contact after Domestic Abuse

The Family Law (Scotland) Act 2006 made it a requirement for courts to consider 'the need to protect the child from any abuse or the risk of any abuse which affects, or might affect the child' including, specifically, 'domestic abuse' (Sections 7A, 7B and 7C) when making contact decisions. This issue had not been addressed in the Children (Scotland) Act 1995. The National Domestic Abuse Delivery Plan for Children and Young People (2008) also identified safe contact for children and young people who had experienced domestic abuse as one of its priorities (Scottish Government 2008).

At the same time however, another key Scottish Government policy has been that children have a right to have contact with both their parents as they are growing up (Scottish Government 2010b) which may, at times, sit awkwardly with the above initiatives. There is a similar presumption in The UN Convention on the Rights of the Child and the European Convention on Human Rights which both support the rights of the child - and in the case of the latter, the rights of the parent - to have contact. The Children Act 1989 in England and Wales also redefined parental responsibility, giving legal sanction to shared parenting and embodying a presumption of contact. Critics argue that this is not a good idea. For example, Harrison argues that 'Such implicit ideas about shared and equal parenting, associated with concepts of new fatherhood assume a gender neutrality that is at odds with the reality that women take major responsibility for child care' (2008:383).

Pressure groups such as Families need Fathers and Fathers for Justice have, in opposition, argued that the courts make it difficult for fathers to maintain a relationship with their children following divorce or separation. There is, however, conflicting evidence on this. For example, a study by Hunt and Macleod (2008) found that in a sample of 308 cases in England only 7% ended in a 'no contact' order and in the cases where domestic assault had been alleged, 70% of fathers were still granted some form of contact. The suggestion that most fathers lose contact with their children following divorce or separation seems to be open to question. Estimates, however, vary wildly across the various studies (Hunt, 2004) from less than 10% (Attwood, et al, 2003) to 40% (Bradshaw and Millar, 1991). This highest figure is somewhat outdated, was based on a low response rate, and has not been supported by more recent research. Most estimates of the proportion of children who lose contact altogether conclude that the figure is around 30% (Peacey and Hunt 2008).

This is still an extremely significant number of fathers who lose touch with their children and every effort should be made to reduce this figure in situations where contact is positive for the children involved. However, it also needs to be acknowledged that there are likely to be a number of reasons why these fathers lose touch with their children. Harrison (2008) found that, as opposed to the image of the 'hostile mother' resisting contact, the women in her study were often working hard to facilitate contact with a violent ex-partner and, she argues, 'in such circumstances women and children pay a high cost for the ideological objective of maintaining men in children's lives as they contend with the long-term implications of domestic violence' (2008:383).

Despite the possible risks around contact for children who have been exposed to domestic abuse, the default position appears to remain that contact is usually desirable. There is also research which

suggests that some mothers may feel pressured into agreeing to contact taking place, being persuaded that contact is always in the best interests of the child or that the courts will not support their position. In a recent study, 'Mothers report feeling, or being told, that some form of contact is inevitable and trying to negotiate the type of contact that will keep them and their child safest, even when they do not feel contact is in their children's best interests. They are afraid that going through the courts would produce a worse outcome' (Scottish Government, 2013e:2).

Kelly suggests that children's adjustment after parental separation is affected by a complex interplay of diverse factors and that a number of different variables have to be taken into account (2000). Whilst a key protective factor has been found to be a positive ongoing relationship with the non-resident parent (Pryor and Rodgers, 2001), this can be interpreted as meaning that contact, per se, is a good thing. The weight of research evidence actually shows that it is the nature and quality of parenting by the non-resident parent that is crucial here, not the contact on its own (Gilmore, 2006; Hunt, 2004, Peacey and Hunt 2008).

Holt (2011), in a study of the decision-making process in child contact where young people had previously been exposed to domestic abuse, similarly argues that it is the quality of contact rather than the regularity that matters. Her conclusion, following a three year Irish research study, was that the experience of contact for most children in these situations was not positive. Her findings also appeared to be in line with 'previously expressed concerns about the quality of parenting of abusive fathers, their compromised insight into their children's needs and their capacity to put those needs before their own' (2011: 341).

Recent research conducted in Scotland provides further insight. Morrison (2008, 2013) found that whilst the courts viewed contact as a relationship between the child and the non-resident parent, for children themselves contact has a much broader meaning. A choice about seeing their father or not following separation was often a choice also about visiting old friends, about seeing siblings, and family pets. Morrison found that for the children she interviewed, direct intimidation of them and their mothers in the context of contact was common. Contact in the absence of communication between parents also put children in a very vulnerable position and they were often treated as messengers or mediators between the parties. This often added up to a very unsatisfactory experience of contact for the children who participated in her study.

Safe Contact: background

The idea of a Safe Contact Model which put the needs of children affected by domestic abuse at the heart of the contact process emerged within this context. The Safe Contact Model originated in the English Family Courts system following a need being identified for assessments made by trained professionals with expert knowledge of the effect of domestic abuse on children and young people. Chris Newman and Kate Iwi from Partner Abuse Interventions, an independent organisation which specialises in assessment and intervention where domestic abuse is a child protection concern and which provides training for the Children and Family Court Advisory and Support Service (CAFCASS) workers in England, wrote the training manual and materials. These form the basis for this new method of attempting to assess the potential risks around contact in cases where domestic abuse had been an issue.

‘Domestic violence risk assessments should follow best practice in the field of violence risk assessment; which means they should include information from the victim, draw on multiple sources of information about the subject’s background to establish the presence of risk indicators that have a demonstrated relationship to violent behaviour, and should use a principle method for arriving at risk ratings based on these factors. Risk ratings need to be contextualised and fitted alongside assessments of victim impact and risk of harm to children’ (Newman 2010:1).

Newman concludes in his report commissioned by Respect, the English national umbrella organisation of domestic abuse perpetrator programmes that the best practice would be for court reports to be compiled by trained professionals with expertise in the field of domestic abuse, using empirical risk assessment tools and having a knowledge of the latest research.

The Safe Contact Model assessments have been designed to be undertaken by experienced practitioners who have completed a two day intensive training course which covers all the aspects of how children and their parents can be affected by domestic abuse and particularly with regard to the potential risks contact might entail. As part of the assessment, the practitioner speaks individually to both parents and crucially, the child or children involved and all their views are taken into account. This has been a major failing in the past with research suggesting that the majority of children have not been given an opportunity to express their views when parents have taken a dispute over contact to court.

A 2007 study of 208 contact disputes involving 299 children in two urban courts in England found that only 125 were asked their views by the court reporters. Of these 125 children, 107 expressed a view, which suggests that, given the opportunity, the vast majority of the others would also have done so. The United Nations Convention on the Rights of the Child states clearly that the child is, ‘capable of forming his or her own views (2009:8)’, and has ‘the right to express these views freely (2009:9), in all matters affecting the child (2009:10)’. Section 6 of the Children (Scotland) Act 1995 and Section 22 of the Children’s Act (1989) in England also state that children’s views should be sought regarding decisions which affect them.

Safe Contact: the current study

It is important for social workers to find effective ways of communicating with the children they work with and a key aim of this study was to see if the Safe Contact Model increased the likelihood of children’s voices being meaningfully heard in domestic abuse contact cases.

The main principle behind the Safe Contact Model is to put the needs of children affected by domestic abuse at the heart of the contact process and we wanted to find out to what extent this assessment model achieved this. Some might understandably argue that social workers should already have the skills both to seek the views of children in such situations and to form a view as to whether contact would be safe or in the best interests of the child.

However, it is not necessarily the social worker who will make the final decision as to whether contact will take place and parents - and fathers in particular - might, and sometimes with good reason, hold the view that the allocated social worker is too close to the family to make an unbiased decision. This piece of research will consider whether a Safe Contact Model-trained, independent third party would be able to use these specific skills, where appropriate, to successfully broker a

compromise between parents, particularly in cases where the child wants contact and safety remains an issue.

Moreover, there remains vastly differing views with regard to contact particularly in cases where domestic abuse has been a factor and there is an ongoing debate between different researchers and organisations as to what is in children's best interests. Families need Fathers have stated that,

'Children should be allowed to spend time with both their parents and their wider family unless this presents a risk to the child. If there is thought to be a risk to someone else, other means to protect him or her should be used. Decisions about the benefits to children of relationships with their parents should be based on an assessment of the future risks and benefits and only on what has happened in the past if that is relevant to the future (Parliament UK 2008b)'.

At the other end of the spectrum, Mackay, (2013) has suggested a need to challenge what she considers to be the current pro-contact orthodoxy claiming that,

'The assumption that contact with both parents is the best thing for a child's welfare is becoming increasingly untenable in the light of what is now known about the nature of so many of the cases that come before the courts. Rather what is needed is a more nuanced approach and the acceptance among legal professionals that sometimes, regrettably, no contact between a child and a parent may actually be the best outcome (The Herald 2013).'

Interestingly, in a study of the impact on children of their parents divorcing in conflicted circumstances, Kelly found that,

'Overall, custodial mothers (in this large study) were more likely to be satisfied when fathers were highly involved' adding that, 'More than half of the mothers reporting conflict with the father were still satisfied with the level of fathers' contacts with the children' (2000:969).

One of the questions for research is whether the Safe Contact Model is able to bridge these two positions and find a compromise which is in the best interests of the children involved. Peckover (2013) has argued that improved recognition of domestic abuse by services due to recent policy shifts has not, in fact, resulted in better responses to families. In practice, it feels that one area where a better service could be offered to families is in relation to contact.

Anecdotally, as practitioners in the majority of domestic abuse cases we have been involved in, the mothers have said that they do not want to prevent contact between their children and their fathers but that they do not want to be part of this contact themselves. This reflects a further common theme of fathers attempting to use contact with their children as an opportunity to also see their ex-partners, with implications for the mother's safety and their own and their children's recovery. As Hester argues,

'Research has found that child contact is often the major flashpoint for post-separation violence and provides a context where (mainly male) domestic violence perpetrators may be able to continue to abuse and harass both women and/or children' (2011-847).

Anna Mitchell, one of the three co-authors of The Caledonian System, has stated that,

‘Safe contact is a contentious issue. Some groups think that men who have been abusive should never be allowed to see their children. Some groups focus on men’s rights as fathers.’ However, she argues, ‘Rhetoric about rights versus responsibilities does not help individual practitioners know what advice to give to an individual person sitting in front of them’ (2013).

As social workers, it is often unclear how best to proceed in such situations and difficult to ascertain what is in ‘the best interests’ of the children. We hoped in this study to unpack this further, to consider whether using the Safe Contact Model resulted in more positive outcomes for families, and particularly children, who have been affected by domestic abuse.

As practitioner researchers, we also hoped that this research would be valuable for practitioners in local settings in assessing and planning contact in all cases where domestic abuse has been an issue. The findings of the research may also help practitioners to develop their practice and evidence in a legal context in cases where decisions about contact are being made in court or at children’s hearings. Such ‘process use’ of research can enhance practice as well as improving dialogue between policy makers and practitioners (Nutley et al. 2007: 38).

Aims and methods

This is an exploratory piece of research with only a very small number of participants. The Safe Contact Model has not previously been used in Scotland and a pilot is currently taking place in one urban Scottish setting. The sample was therefore self-selecting and necessarily unrepresentative. A ‘case’ for the purposes of the research will be defined as any child or sibling group referred to the Safe Contact Model between April and August 2013. We had initially hoped to gain access to between three and six cases within the timescales of the research project. Unfortunately only one assessment was completed within the timescales for submission, so we were able only to follow one case for the purposes of the ESRC-sponsored knowledge exchange project between Edinburgh City Council and the University of Edinburgh which was the setting for the beginning of this study.

We are viewing this phase of the research as a starting point and an opportunity to begin evaluating this way of working with families. Ideally we would follow this up in around one year’s time once the contact that has been agreed using the model has been taking place for sufficient time for some evaluation of the effectiveness of the process to take place. At this initial stage we set out to answer the following three questions, which we kept deliberately broad:

- What was the experience of the children, parents and social workers who participated in ‘safe contact model’ assessments?
- Did they find the process useful or helpful and in what ways?
- What might have improved their experience?

Our research questions could only be answered by in-depth qualitative research into children’s experiences of being assessed by the Safe Contact Model. We therefore used one-to-one semi-structured interviews to gather information in an effort to gain really rich qualitative data about the children and their parents’ experiences. The interviews were taped and the recordings provide the main data for analysis. We followed different interview schedules for interviews with adults; one schedule for practitioners and one for family members, and a looser topic schedule for research encounters with children. Art materials and the option of communicating through these instead of

or as well as verbal communication were planned to be offered to children participating in the study. Mason explains what the advantages are in conducting a qualitative study:

‘If you choose qualitative interviewing it may be because your ontological position suggests that people’s knowledge, views, understandings, interpretations, experiences and interactions are meaningful properties of the social reality which your research questions are designed to explore. Perhaps more importantly you will be interested in their perceptions...It is important not to treat understandings generated in an interview as though they are a direct reflection of understandings ‘already existing’ outside of the interview interaction, as though you were simply excavating facts’ (2002: 63-64).

Participants were recruited through the social worker who referred the family to the Safe Contact Model pilot project. The social worker spoke to the main carer about participating in the research in the first instance and once agreement was given, the researchers met with the main carer and child together to explain the purposes and nature of the research in more detail. A further complication for us was that the social worker who had referred the only family who were available to speak to us was also one of the practitioner researchers.

The mother and child who did agree to participate were living in a Women’s Aid refuge where they had moved following a serious assault on the mother by the child’s father. As there were no witnesses to the assault, however, the charges against the father were dropped. Historically there had also been other previous incidents of assault recorded by the police but the father had not been charged on any of these occasions for the same reasons.

The mother and father had been in a relationship for over twenty years prior to the mother and child leaving. This was not the first time that the mother had left her partner but on previous occasions they had always eventually reconciled. The child also had an older brother and sister but they were both over sixteen and remained in the family home with their father. At the time the mother and child agreed to participate the mother and father had only been separated for a couple of weeks but this time the mother did not resume the relationship and they remain separated nine months later.

Ethics

We gained formal access and ethical clearance through the senior manager responsible for the research project within the Children and Families Department. We asked all adult parties to sign written consent forms and explained our research project fully to them, emphasising that participation was optional and they could withdraw at any time. We met with them separately and clarified that their participation did not affect the service they received from the Social Worker who referred them to the project. As we wanted to hear all their views regarding the Safe Contact Model project both positive and negative it would have been preferable if both practitioner researchers had been unconnected to the case but as only one assessment was completed within the research period unfortunately this did not prove possible.

In terms of access to the child we sought parental consent for their participation and also the child’s consent and assent. Phelan and Kinsella suggest there are five main areas of ethical concern need to be considered in research involving children,

'(a) assent or willingness to participate, (b) informed consent and assent using visual methods, (c) issues of disclosure (d) power imbalances and (e) representations of the child... researcher reflexivity on ethically important moments lies at the heart of living ethical practice in qualitative research and the ideals of enabling child safety, dignity and voice serve as useful guides in the quest for ethical practices in research with children' (2013: 1).

The child concerned has a very good working relationship with his social worker, and we therefore made the decision that he be the researcher to interview him, in the hopes of gathering meaningful data, and because this was the child's preference. All other interviews were conducted by the practitioner researcher without a connection to the case, but where the child participating was concerned his relationship with his social worker was a strength and we could perceive no pressing ethical reason not to respect his choice in the matter.

Any disclosures made by a child in the context of a research interview would naturally be followed up immediately by the child's social worker for an appropriate agency response, as would any child protection issue which became apparent through any aspect of the research. This was explained to all participants in the research.

We recognise that a significant issue in this field is that research into domestic abuse has the potential to place victims at further risk. We have given full consideration to this when deciding what it is safe to place in the public domain. Our first concern is the safety and well-being of participants. We have anonymised the names, addresses, schools and places of work of all the participants and all data will be kept secure as per departmental protocols on privacy and data protection. However, due to the very small number of participants there is a risk created for the family participants that any information they chose to share would be identifiable by the other family members involved, or by anyone they had chosen to tell about their involvement in this project.

We have therefore thought carefully about the detail of what we have shared in our findings and made conscious decisions to protect certain information until there is further data and therefore more possibility of genuine anonymity for participants. Once the assessment had been completed, the non-resident parent whose contact with the child was in question was approached for consent to involvement in the research project. Since he does not enjoy parental rights and responsibilities for the child, his consent to researching the child's perspective was not required at the outset of the research. All family members were offered a meeting at a place of their choosing and the researchers again outlined the nature and purposes of the project before requesting signed consent to the interview.

The assessor in this case was also interviewed for his perspective on how using the Safe Contact Model tools had worked for the child concerned and how he as a worker had found using the approach. The assessor is a local authority employee with particular expertise in domestic abuse, who does not have an ongoing role with the family but was involved only to consider contact.

Interviews were arranged only after the Safe Contact Model assessment had taken place and focused on the participants' experience of the impact of the process of the assessment on the child, as well as asking about the parents own experiences.

The main challenge for our project was gaining access to sufficient participants to provide meaningful data in the timescales of the research. We began the process of recruitment as soon as ethical and access clearance had been given by the University and the relevant local authority. However, without completed assessments we were limited in what we could achieve.

Findings

This is an exploratory, qualitative study and as such, we recognise that the capacity to extrapolate from the findings will be very limited. Nevertheless, we believe that the findings offer a glimpse into the workings of the Safe Contact Model and the potential benefits for children of a more structured approach to contact in families where domestic abuse is an issue. Drawing on the themes within the literature described above, we are able to offer the following findings.

The child involved agreed to speak to us, but was ambivalent about the process. However he did clearly say that he had felt listened to and that his views had been taken on board. He was also quite clear that the outcome had been his choice, saying, 'It was my decision, not my mum's. I didn't want to see my dad'. When asked if he was listened to he again said, 'I was listened to in that they said I didn't have to see my dad'. This seems interesting as he was reluctant to verbally respond to comparatively neutral questions about the process showing his agreement or disagreement through hand gestures or nodding or shaking his head.

However, while it was made clear to the child that anything he said to me would remain anonymous, it is explained to everyone taking part in a Safe Contact Assessment that all the parties involved would be able to read the final assessment. The child would therefore already have known that his father would be aware he had told the assessor he did not want any contact. Given his previous long-term exposure to domestic abuse, the child's apparent desire to take responsibility for the outcome of the assessment was interesting and could be interpreted in more than one way.

It is not unusual for children to try and protect their mothers from their abusive partners and McGee's research into children's experience of domestic abuse describes children, 'physically intervening to try and stop the violence and developing safety strategies to protect themselves, their siblings and their mother' (2000: 100). McGee found that, 'Children tried to intervene both in crisis situations and in proactive ways to try and stop the violence on a more long-term basis' (2000: 101). The child may have felt that distancing himself from his father would also distance his mother and reduce the likelihood of the relationship resuming. There is also the possibility, however, that the child now felt safe in the refuge and so was finally able to say how he really felt.

The father declined to be interviewed and when the Working with Men assessor met with him to go over the recommendations in his assessment, the father was clear that he had not found the Safe Contact Model either useful or helpful. He was very negative about both the Social Worker and the assessor and in particular accused the social worker of 'telling lies'.

The mother involved in the process said that she felt the process had been helpful and that she would recommend it to other people in a similar situation, 'Aye, 'cause it helped me. I found it helpful'. It was the mother who told the child the outcome of the assessment rather than the assessor: 'I said to (the child) he (the assessor) said you're not to get any contact and he said "that's good"'.

In terms of her own situation, the mother said that she had no problem with contact taking place as long as it was safely supervised and she did not to be involved in the contact herself. Her view regarding contact in such situations generally was that if the father was able to spend time positively with the child or children it should go ahead, but if they were not able to do this then it should not.

The assessor fed back that while in his view the assessment had been a worthwhile process overall, being from a criminal justice rather than a children and families' background he had found engaging with the child the most difficult aspect. He stated that that there could have been, 'more in the training about working with children' and that it, 'would be useful to have more tools for different ages'. However, he did point out that this had been the first Safe Contact Model assessment that had been undertaken in his local authority and that his skills in this area were likely to improve the more assessments he completed.

Dissemination and Next Steps

It had been our intention to share findings with colleagues and managers within the local authority through producing a research summary, but also by offering briefings and practice conversations through existing training forums. Through local practitioner and management forums we have begun to do this.

In the event the timetable for the knowledge exchange project for which this report was prepared and the launching of the Safe Contact pilot did not allow us to access the range of data and cases we had hoped to analyse. Our findings are therefore limited. However, they do suggest links to the existing literature on the subject. Our hope is to continue with the research over a longer period of time to allow access to sufficient data to better explore the Safe Contact model. Our work so far suggests that the original methodology is sound, and that qualitative interviews will allow us to explore the usefulness of the model.

We are aware that there is already interest at a stakeholder level in any evidence accrued. The assessors' training has been funded by the Scottish Government and it is one part of a wider Safe Contact system which includes the use of specialist domestic abuse risk assessments in the family court. The Safe Contact system has received national interest as it may provide a clear pathway for contact arrangements which can be rolled out in other local authorities. A written evaluation of this pilot may help to inform the Scottish Government on the potential to implement this system nationally.

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