Tackling ‘Troubled’ Families in Tower Hamlets

Learning the lessons from a successful inner-city borough

www.towerhamlets.gov.uk
What does public service mean?

Working within the public domain is ever changing, often influenced by a critical press, and lurching from one ‘scandal’ to another.

The global economic downturn is biting into the poorest areas in the UK and Europe. Not only are the local demographics and client group evolving, but the UK Government is attempting to alter the ‘life course’ of families through welfare reform and the Troubled Families Programme. Indeed local authorities including Tower Hamlets have identified a crossover between families caught by the ‘benefit cap’ (a limit set on the level at which the government is prepared to support rent payments) and those meeting the criteria that the government identifies for families as requiring significant intervention and support.

In December 2010, David Cameron stated that he wanted ‘troubled’ families’ lives turned around by the end of his parliament and in 2011 the Troubled Families Programme was launched. The term ‘troubled families’ is prescribed by the government as households who are involved in:

- Crime and anti-social behaviour
- Children not in school
- Adults on out of work benefits
- Causing high costs to the public purse

Crime and anti-social behaviour
Children not in school
Adults on out of work benefits
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As such, FIS, with consultation of other service providers, has chosen the following categories for local discretion in the Troubled Families Programme which are deemed high priority and prevalent in family intervention cases worked with over the years:

- ASB offences e.g. noise nuisance
- Domestic violence: perpetrator or victim
- Gang membership
- Alcohol and drug misuse
- Housing eviction orders or risk of eviction
- Missing or absconded
- Committed a criminal offence which has not been taken further
- Underlying health problems

Criteria four – high cost – is not prescribed in the same way and local authorities use local discretion to identify those families who are deemed to be high cost. Tower Hamlets has chosen to award responsibility to the Family Intervention Service (FIS) in Tower Hamlets to co-ordinate and manage the financial aspects of the programme.

There is no doubt that the difficulties faced by many families in Tower Hamlets and other areas where the population is poorest are complex and multifaceted, with many stressors predominating the everyday life experiences of residents with many of the issues repeating through the generations. It is widely accepted that difficulties in families do accumulate during the lifecycle, however the everyday life experiences may differ for each member of society, as does their response to the problems and difficulties with which they are faced. For professionals, this presents a challenge for service delivery, how, why and to whom support should be directed. This dilemma is further compounded where a payment by result framework is in place.

Clearly, the Troubled Family agenda goes some way to identify those families experiencing a degree of difficulty, although experience tells us that families are much more complex than the given criteria, hence the broad consideration given to the discretionary factors by the London Borough of Tower Hamlets. Historically there has been a notion that resiliency is a universally inherent trait whereby a presenting difficulty is attributed at the individual level. As such, responses to difficulties have for the most part been targeted at individual family members with the support offered directed at the issue of crisis. Often underlying issues such as physical and mental health,
and the impact of these on a person’s ability to meet
their own or their family’s biological, social and
emotional needs are often overlooked.

FIP Tower Hamlets

Since being introduced by the FIS in 2007, FIP Tower
Hamlets has worked on a much broader framework,
utilising systems theory to underpin its intensive work
with families by looking at the whole lifecycle and full
family picture to gain a better understanding why
previous attempts at change have not been
forthcoming. There is a central focus on Maslow’s
hierarchy of need, which ties in with the Troubled
Families agenda and is aimed at supporting adults back
into work, children back into education, reducing crime
and promoting self-efficiency. However what FIP
acknowledges is that some families need more intense
support in order to get to the place where they are able
to solve their own difficulties, meet government
expectations, reach their own potential as individuals
and to become positive role models to their own
children and community more generally.

Principles and ideas

The principles of FIP are closely linked to the ‘Think
Family’ initiative introduced by the Social Exclusion
Unit in 2008 with the emphasis on re-establishing the
focus on the family as a whole. The principles include
listening to the family’s voice, listening to the concerns
of other agencies/professionals, building on family
strengths, key working, a commitment to long-term
work and bridging the gap between different agencies
and services including housing providers and statutory
services. FIP employs a wide range of workers from
many different professional backgrounds and as such
offers many intervention skills such as problem
solving, solution focused and motivation techniques as
well as systemic family therapy.

The interventions are delivered in the home, in schools
and many other locations with a lead keyworker for
every case. The direct work is fitted to individual need
by providing practical, emotional and financial advice
and support to empower individuals within the family
and the family unit itself, to build up their capabilities
with the view to raising personal development and
aspirations. The ultimate aim is to effect change which
can be sustained and passed on through future
generations and to enhance resiliency to lessen the
impact of further difficulty. The lifecycle will not
continue without further challenge at either the societal
or personal level, hence the need for sustainability.

FIP takes referrals from a number of sources as a
traded service and works collaboratively with many
housing providers who currently buy into the
service. This work runs alongside the Troubled

Families Programme or otherwise, may contribute to
better services for families in the future. FIP
continues with the belief that Tower Hamlets
families are not beyond help or hope.

Kineara Ltd

Kineara Ltd is a social enterprise
that provides services to housing
associations and other organisations
that work with communities and
vulnerable people.

Kineara was developed in partnership
with the London Borough of Tower
Hamlets’ Family Intervention Project
(FIP) to reduce the costs organisations
bear and create sustainable social
impact by delivering specialist services. This includes a Rent
Support Programme, community projects, consultancy and
training. Kineara has developed a bespoke cost saving tool
to calculate the financial savings each intervention makes.

The ethos of Kineara and the services it offers is built upon
the legacy of FIPs and their intensive intervention model.
FIPs work with the most vulnerable and troubled families,
providing long-term intervention to those causing
disruption to their communities and their own lives.

The FIP model is based on the understanding that the
most vulnerable individuals and families have internal
and external factors underpinning the disruption in their
lives. This may affect their community, stop them from
accessing universal services appropriately, create a need
for specialist services involvement and cause a financial
strain on housing, the public purse and other services.

Kineara has taken on board seven years of learning and
experience from Tower Hamlets’ FIP and developed
shorter, more cost effective interventions for vulnerable
families, adults and communities. In March 2012, Kineara
Ltd officially became an independent social enterprise.

Families agenda work which has been influenced by
the FIP model in Tower Hamlets as a way of changing the
trajectory for families.

There is no doubt that at times the two strands of
work have different priorities with one stream of
work funded for the most part by outcome
measures, however the FIP team remains confident
through evidence of their own practice that the
family support model is the way forward with
payments by result an added bonus. The Family
Intervention team takes great pride that the success
with families, whether this is under the Troubled
Families Programme or otherwise, may contribute to
better services for families in the future. FIP
continues with the belief that Tower Hamlets
families are not beyond help or hope.
A step in the right direction

While volunteers continue to support the delivery of services in Tower Hamlets, parents and carers are proving they can be a valuable asset to schools by promoting healthy eating and encouraging families to live more active lives.

Parents and carers play significant roles in influencing the lifestyles of their children, making the need for parent-focused interventions paramount. If a child is obese in their early teens there is a high likelihood they will become an obese adult, with related health problems later in life.

The Healthy Families programme contributes to the Tower Hamlets Healthy Weight, Healthy Lives strategy by supporting efforts to tackle the increasing challenges of high levels of childhood obesity, low levels of physical activity and the impacts on mental and social wellbeing.

Healthy Families

The Healthy Families programme has been delivered in schools for three years and supports discussion, advocacy and promotion of health issues by supporting parents of children from birth to 16 and children and young people with special needs (all ages) to make changes at home, which make it easier for the family to eat healthier food, enjoy a more active lifestyle, develop self-confidence and maintain emotional and mental wellbeing.

This universal programme started its life within Tower Hamlets primary schools by providing an opportunity for families to explore their experiences of healthy eating and physical activity within a non-stigmatised range of practical workshops and community activities. Programmes aim to increase parents’ knowledge, confidence and skills to make healthier choices and empower parents to make changes in the home and family life, supporting healthier eating and lifestyle changes. Successful school-based delivery has recently expanded into early years and nursery settings.

Throughout the programme parents have disclosed a range of issues which have a profound impact on their family life. Issues include children identified by school as being overweight, poor diet, lack of exercise and general family health issues such as diabetes, heart attack, depression and ADHD.

Whilst parents felt engaged with health professionals in relation to managing specific conditions many felt overwhelmed and isolated when trying to introduce wider family change. During the programmes parents explored the impact of an unhealthy lifestyle, the perceived financial cost of healthy eating and how they could manage the parenting conflict and tantrums often experienced with children and young people when introducing change.

The Healthy Families evaluation for 2012-2013 found 88% of parents reported positive behavioural changes and 22% indicated they may make changes in the near future. Parents reported increased confidence in tackling unhealthy eating routines.

Furthermore, reports from school staff supported longer-term behavioural changes amongst families and highlighted the impact on children’s knowledge, attitudes and healthy behaviours in school.

Parents have commented: “I have changed simple things in my life but I feel much better, I am cooking fresh food and walking the children to school,” – a parent from a course delivered at Tower Hamlets Asian Women’s Aid.

“It was good to talk about our feelings. Discussing our own wellbeing made me realise that how I feel affects what I buy and cook and how I am with my children”, – a parent from a course delivered at Old Palace School.

Promoting and supporting access to local amenities

The profile of participating families living in small flats, many of which were overcrowded, highlighted limited family use of local parks and open spaces. Reasons include safety fears, limited time and cost, particularly as welfare reforms start to have an impact.

Whilst attending the weekly programme, parents established networks of peer support and for many this extended beyond just the school. Indeed, parents reported this leading to increased use of local facilities with their children, going out onto the estates together so children were able to ride bikes and play ball games.

Parents also became more engaged with physical activity and started to meet without their children for walking and swimming sessions. Several schools
funded parent exercise classes in school and a ‘Boris Bikes’ session.

**The Healthy Family Parent Ambassador Programme (HFPA)**

Demand for this successful programme placed huge pressure on the Parental Engagement Team and it became increasingly difficult to sustain delivery whilst expanding to new schools and settings.

This demand led to the development of the HFPA programme. Linked to the established Parental Engagement Team model of building capacity in locality and community hubs, the HFPA programme quickly recruited an enthusiastic cohort of parent ambassadors to sustain the positive changes that families had made following on from the Healthy Families courses.

On completion of a short training programme to develop parents’ confidence to work with their peers and extend their knowledge gained from the Healthy Families programme, parents started to support and lead health initiatives taking place in their child’s school.

A total of 23 parents have now completed the training and become Healthy Family Parent Ambassadors in their children’s school. This has led to a wider reach of parents accessing health information and support and the role has also provided a pathway to further training and employment.

In many schools, HFPAs have worked successfully with the children, reinforcing the message to parents through their children. This has been especially successful with packed lunches, promoting healthy snacks and drinks.

All parent ambassadors are offered opportunities for support to plan, resource and deliver sessions in school, either in a one-to-one meeting or continued development sessions with other parent ambassadors.

During the last year, the parent ambassadors have undertaken a wide range of activities including:
- Healthy breakfast sessions;
- Healthy packed lunch sessions;
- Healthy eating assemblies;
- Working with school staff to run Sex Relationship Education (SRE) workshops for parents;
- Organising and promoting exercise classes to parents and the wider community;
- Publicising oral health and the dental visits to school;
- Promoting a wide range of health initiatives and local services for parents;
- Supporting parents to access local services; and
- Supporting school develop policy around packed lunches.

However, the Healthy Family programmes were not particularly successful at recruiting fathers. To try and address this, the HFPA programme developed links with an existing fathers’ project and the introduction of ‘Fathers’ Football’ seemed the ideal solution. The focus was to encourage fathers to exercise and engage more with their children, their children’s schools and with other fathers. The project offers an opportunity to get fit, become more active and promote personal, social and community health in their local area.

Currently 65 fathers are actively involved in the Fathers’ Football project, with ten members going on to become Healthy Family Parent Ambassadors in their child’s school, two training to become TAs, and seven enrolled in literacy and numeracy courses.

Additional gains of attending the programme highlighted that many of the fathers did not enter their children’s school at all and were unaware of the impact of such involvement on their children’s learning. Anecdotal evidence showed that many of the fathers felt more comfortable going into their child’s school during the course and some had continued to attend other school activities once the course had finished.

Fathers also expressed an interest in supporting children’s physical activity in school. Possibilities of sports days and after school activities are being discussed.

**Progression into employment**

Skills, experience and confidence gained through the HFPA role has empowered some parents to apply for, and gain, paid employment. Posts obtained include:
- Interpreting for NHS;
- Midday meals supervisor;
- Healthy Living workshop facilitator;
- Teaching assistant;
- Learning support assistant; and
- Breakfast club worker.

As health services move into the local authority, the programme is well placed to further develop partnership working and build upon specialist expertise.
Learning the lessons of previous schemes is vital if local authorities are to provide the best levels of support to their citizens

One of the biggest threats to local communities in the poorest regions of the country, is the government’s welfare reform programme. Large families, where those in a parental role are not working outside of the home, will face the greatest impact, especially if their children are over five years old and they are dependent on the state to pay their rent and living expenses. These families, often with a complex structure, face very significant challenges when their rate of benefit is cut substantially and they face the possible choice between paying their rent and putting on the heating or clothing their children.

London’s rents are extremely high, and many of these families will face the dilemma of finding housing at a lower rent level outside the capital – leaving behind family and friends, support networks, history and culture for an area that is likely to have a bleaker employment profile than the capital. A route out of this double bind of the benefit cap is work.

Communities in East London are responding to the challenge with a real willingness to work. Recent Jobcentre Plus figures for youth employment and returners to work in the adult population are encouraging and exceed the national average. However, for some of the poorest families in East London, not just in monetary terms but also in educational, in confidence and without the basic skills to operate in the workplace, the challenge seems insurmountable.

A range of approaches
For local authorities and social landlords the dilemma is also significant. These are the agencies that will bear the financial load through rent arrears, council tax arrears and pick up those who are vulnerable through the homelessness service, or will take the costly route of enforcement action against families who cannot pay.

Clearly a challenge like this needs a range of approaches; but the Raising Aspirations pilot in Tower Hamlets is one way of bringing the local community together and pooling the skills, expertise and resources of council workers, voluntary sector organisations, housing providers and statutory services – such as Jobcentre Plus and local healthcare provision.

The pilot is responding to the Localism Bill and seeking to provide a range of services to a geographically targeted area in the central part of Tower Hamlets (East India & Lansbury Ward) with the highest levels of intergenerational worklessness and child poverty.

However, in the excitement of a new project, it is easy to get carried away with new ideas and the opportunities to take one’s own ideas about ‘how to fix things’ forward.

Add in the pressure of time limited grant funding, welfare reform and challenges that have taken generations to create – things have the potential to go awry.

There is often a reluctance to reflect and review what has gone before and to follow the real lessons of the past. Most pilot projects don’t make it to a sustainable long-term initiative, especially when grant funded. Services morph and change, often following the money. Therefore it was important to make the time to consider other localised employment facing pilots that had started with similar aims and to see where the lessons lie, with a particular eye to the potential of any initiative to create something sustainable and less vulnerable to getting chopped when the next inevitable financial squeeze comes along.

A useful comparative pilot to consider in this case ran between 2009 until it was prematurely ended in 2011. The stated aim of the project was to ‘provide an holistic approach to working with families facing multiple barriers to employment and to children within families living in poverty’. The pilot served two East London boroughs experiencing similar levels of poverty, unemployment and deprivation. However there were fundamental differences in the two comparative populations that demanded a unique approach in each area.

Mismatch
It is therefore important to know the targeted community and the specific factors that will impact on local people taking up the offer of a different type of service. An example of the mismatch between data and people was that on one estate, the data showed that a high proportion of the population had very little spoken English. The pilot accounted for this by providing ESOL (English as a Second Language) courses. However, the courses were pitched too high in terms of the needs of the local community as residents’ command of English was more rudimentary than estimated.
The comparable pilot provided a flexible range of confidence-building, employment-linked services such as training, group discussion, CV and interview practice and English classes which individuals could move easily between because of an informal referral culture. Take-up of the range of services grew incrementally during the two year programme. One of the explicit targets of the pilot was to move people into employment. The success here was extremely limited and it is important to consider why at this point.

The evaluation cited the lack of involvement and 'buy in' by the hosting local authorities in both London boroughs which meant that the pilot lacked the significant influence and support potential of related council services and undermined its prospects of success.

The pilot was closed 18 months earlier than planned due to unexpected funding withdrawal. This severely compromised the employment opportunities for participants although some moved into employment through their contact with Jobcentre Plus, because their skill base and confidence had been raised by the pilot.

**Disadvantaged**

Another possible contributory factor in the 'slow' journey into work for some participants may have been the approach to working with the families furthest away from the labour market – i.e. the distinct disadvantages experienced by people who grew up in a workless family and also faced the challenge of mental health support needs, substance dependence and family violence.

Work done by the Family Intervention Service and the recent Troubled Families Programme, alongside a wealth of social policy and research aimed at the causes and impact of poverty and worklessness, indicate that these families are also significantly disadvantaged in their health outcomes, life expectancy and their experience of chronically debilitating illness.

The recent addition of the public health teams to the local authority workforce is an opportunity to model a different collaborative approach to this pilot, with particular emphasis on the rise of obesity and Type 2 diabetes in young people and Vitamin D deficiency in women reporting to antenatal services, for example.

Research by the Social Exclusion Unit in 2009 suggested that families with the profile outlined above who are generally badged as 'far from the employment market' need a particularly intensive model of intervention to help them to change direction and to take advantage of local initiatives.

**Operating in unison**

So, can the Raising Aspiration pilot do better? This builds on the valuable lessons of a comparable pilot and closely follows the areas of practice that worked well, such as the level of engagement, training take-up and the flexible referral model that reflected effective multiagency working.

Raising Aspirations is in development and will ensure that it builds on the lessons learned from other similar work. It is grounded firmly in the Local Authority Economic Development team, who are leading the pilot through a dedicated project lead. The borough’s Family Intervention Service has also focused resources into the pilot in order to pick up on the areas of significant vulnerability that will inevitably be a factor in the lives of some of the pilot recipients.

The project represents a new working arrangement that includes the local authority, health service, Jobcentre Plus, Families Intervention Programme and housing landlords and so will present challenges that are already obvious in very different working cultures and a long history of process-driven, policy-laden bureaucracy.

The big players and their obligations to ensure financial probity are balanced by a new train of thought in operating in unison and designing flexible solutions for individual need. This is bridged by the Family Intervention Service (that has operated as a flexible traded service for some time), and a willingness from all parties to try to do things differently. However, some straight talking will be needed along the way to ensure that the multiagency commitment to reaching out to the local people most affected by the welfare reform has a fighting chance.
Kineara Ltd is an exciting new social enterprise founded by a passion to share the social and financial benefits of family intervention projects and their ability to transform lives and develop communities.

Using the methods and ethos of family intervention, the Kineara team has developed a range of cost-effective support services for organisations that work with families and communities.

Please contact the Kineara team to find out more about our:

Bespoke interventions;
Rental support programme;
Training and consultancy.

info@kineara.co.uk / +44 (0) 7950 835 113