



# EVALUATION OF THE BUTTLE UK ANCHOR PROGRAMME NOVEMBER 2017

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## **FOREWORD**

# David Farnsworth Director, City Bridge Trust

Whilst our decision to provide support directly to individuals through the Anchor Project was a first for City Bridge Trust, we had every confidence that our partnership with Buttle UK would make it successful. Through our work in the domestic abuse field, we were acutely aware that the needs of children affected can all too often be overlooked or can become a side issue to the needs of the affected parent. We are proud that Buttle UK's child-centred approach has gone such a long way to address this. Thank you to Buttle UK and to all the referring agencies for all you have done to help us to deliver these funds to survivors of domestic abuse.

### Gerri McAndrew Chief Executive, Buttle UK

Recently in The Times a senior police officer, Chief Superintendent John Sutherland, describes his experience of policing in the capital. He tells the story of the case of a murdered 16-year-old boy:

"Within days, the team has made a number of arrests. Almost all of them are children and some of them are as young as 11 years old. One fact stands out clear from all the others. Every single one of them has grown up in a home where domestic violence has been a reality. Not a single exception. Now try telling me there's no link. Domestic violence is terrorism on an epic scale, a disease of pandemic proportions and the single greatest cause of harm in society."

Over the years I have seen the devastating affect domestic abuse can have in a family home, in particular on the children who are exposed every day to the vast issues connected to the abuse. Not only is there the direct impact of witnessing an abusive relationship, but there are the consequences of never being given the chance to flourish in a home controlled by the perpetrator. This lack of self-esteem that results can manifest itself in a number of behavioural issues that will impede the child or young person's ability to engage in learning and building relationships with their peers. What John Sutherland describes is the terrible place where this exposure can end.

At Buttle UK, over the last three years, we have been piloting an innovative new approach to supporting children affected by domestic abuse. Through the Anchor Project, we have developed our grants to specifically help children and young people who have been affected by domestic abuse. These grants are given at a point in their journey to recovery from an abusive relationship where they are moving into their first independent accommodation, or have been in it for a short time. Where this accommodation is empty of any essential items, we provide the families with household items required, to help ensure this move can be sustained. But also, critically, the funding is targeted specifically at children to help them overcome their experiences and settle into their new surroundings.

This report is an independent evaluation of the Anchor Project. While there is plenty for us at Buttle UK to learn from it, about how we can make these grants even more effective, the report clearly demonstrates the benefits of this type of direct financial support.

Buttle UK makes a total of 10,000 grants a year, directly reaching nearly 30,000 children. Sadly, we have seen a 22% rise in grants given to families affected by domestic abuse in the last year. I was shocked to see that 34% of our grants awarded last year were to support babies and children under four years old, having increased by 35% between 2015-2016. Our experience would seem to reflect a growing and very troubling trend in domestic abuse cases. The Office of National Statistics figures from 2016 show 1 in 10 crimes recorded by police are domestic abuse cases.

We hope, therefore, that the both the government and the social care sector will find the learning in this report helpful in thinking about their own strategy, policies and practice in relation to the families, and specifically children, that are affected by domestic abuse. In the meantime, Buttle UK will continue to provide for these families, by giving flexible and timely grants that are tailored to the needs of the children and young people. Our Chances for Children campaign aims to raise £10m over the next five years, to allow us to keep offering potentially life-changing grants to these vulnerable children, at a time when they need it most.

## **ACKNOWLEDGEMENTS**

A big thank you to all the parents, children and professionals who have taken part in the interviews carried out for the evaluation. Within Buttle UK I would like to thank all the staff who gave up their time to help with the research. I am particularly grateful to Sonja Forbes for the information she has provided about the Anchor programme and for her help in recruiting research participants. The evaluation would have not been possible without the help of Rosario Piazza who has: patiently answered my numerous questions; provided the data for sampling and analysis; helped to recruit research participants; and, provided valuable feedback at every stage of the study.

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## 1. INTRODUCTION

The report presents the findings of the evaluation of Anchor, a Buttle UK programme that supports children in London who have been affected by domestic abuse. In this chapter, we provide a brief introduction to Buttle UK and the Anchor programme, discuss the aims of the evaluation and describe how evidence for the evaluation was collected.

## 1.1 Background

For over 60 years, Buttle UK has been providing practical support to children who cannot afford necessities, such as a fridge, a cooker, a bed or a table, the kind of things that require a small investment but can make a big difference to children's lives. More recently, Buttle UK has also been providing an 'enhanced' package of support, which combines material help with support to meet children's educational, social and emotional needs. Given its track record of working creatively and nimbly, and making timely and tailored interventions in partnership with other agencies, it seemed appropriate for Buttle UK to develop programmes that could make an even bigger difference to some of the most disadvantaged children in the country.

Anchor is one of a number of Buttle UK projects testing a different model for working with families, a model that can have bigger and longer lasting impacts than the more typical Buttle UK small grant of around £300. With funding from City Bridge Trust, Anchor provides a grant of up to £2,000 to families in London who are in the recovery stage after fleeing domestic abuse. The grants aim to help families to set-up a new home and to support children's educational, social and emotional outcomes by funding services such as therapy, counselling, after-school activities and tuition. Grant applications are made on behalf of families by statutory and voluntary agencies, who are also responsible for administering the grant.

Anchor was launched in March 2014 and by the end of March 2017, 515 grants had been awarded with an average value of £1,500.

#### 1.2 Evaluation aims

An evaluation of Anchor was commissioned to address three key questions:

- Do Anchor grants achieve the intended beneficiaries?
- > Are Anchor grants delivered as expected?
- Do Anchor grants make a difference as envisaged in Buttle UK's vision?

## 1.3 Evaluation methodology

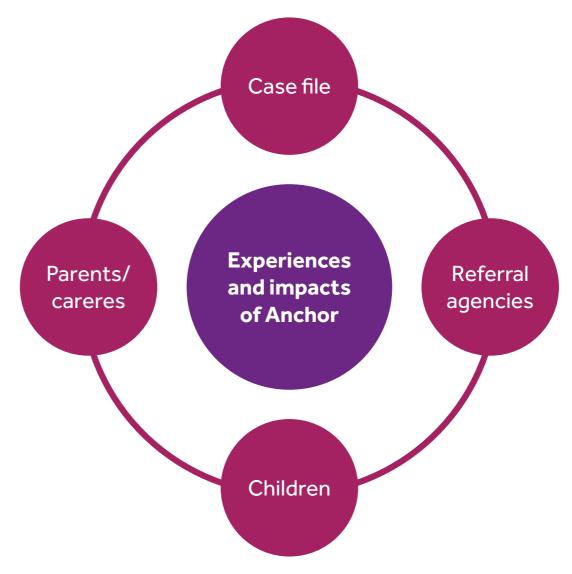
Evidence for the evaluation was gathered from several sources.

The evaluation started with a scoping exercise involving a review of relevant Buttle UK documents and interviews with those responsible for developing and implementing the Anchor programme, as well as its funder.

Statistical evidence on Anchor beneficiaries and some key features of the programme have been provided from the Buttle UK database.

Most of the evidence for the evaluation has been collected from 20 case studies of children who were awarded an Anchor grant in 2016. As illustrated in **Figure 1.1**, case studies involved analysis of Anchor's case files, interviews with families (mainly mothers, but in some cases children were also involved) and referrers who submitted the Anchor applications and administered the grants. The 20 case studies were selected to reflect the social and demographic composition of Anchor beneficiaries, different levels and type of support provided, and a range of referral agencies. In-depth interviews with families and referrers were carried out between November 2016 and April 2017.

Figure 1.1 Case study design



The evaluation findings were 'sense checked' with two key groups:

- Buttle UK senior managers and staff involved in the delivery of Anchor, who
  commented on the emerging findings, highlighted further lines of inquiry and
  provided feedback on the initial conclusions from the evaluation findings;
- A focus group with 11 referrers with experience of submitting Anchor applications was carried out to explore views on the findings of experiences and challenges of applying for and administering an Anchor grant.

## 1.4 Report outline

**Chapter 2** sets out a theory of change for Anchor and outlines the expected outputs, outcomes and impacts from the project, and through which mechanisms these can be achieved. The Anchor theory of change provided the framework for the collection and analysis of the evaluation data.

**Chapter 3** we provide a description of Anchor beneficiaries and consider if they reflect the groups the project was intended to reach.

**Chapter 4** provides an in-depth investigation of how Anchor is implemented: what inputs and delivery mechanisms are required to deliver the grant, and what can support or undermine its effective delivery.

**Chapter 5** explores if and how Anchor is generating the expected outputs and outcomes. The chapter also considers under what circumstances Anchor is more and less likely to make a difference, and the sustainability of outcomes achieved with support from Anchor.

## 2. ANCHOR: A MODEL FOR CREATING CHANGE

A theory of change for Anchor was developed to provide a framework for the evaluation. The starting point for developing this was Buttle UK's own theory of change (see Appendix 1), which was expanded with evidence on the Anchor programme collected from Buttle UK staff and documentation.

In **Figure 2.1**, the last column addresses the ultimate question for any evaluation: **if and how Anchor is having the intended impacts**. In line with Buttle UK's theory of change, Anchor's ultimate aim is to create opportunities for transformational change that can provide children with the best chances of financial security and avoid poverty in adulthood through educational achievements.

The penultimate column in **Figure 2.1** shows the **expected outcomes from Anchor**. In line with Buttle UK's theory of change, Anchor is expected to support children to: grow up in a healthy and well-equipped home that meets their needs; and, avoid exclusion from education, educational activities and other activities that support their development. In addition to these primary outcomes, it is also hoped that Anchor may have a transformational effect on referral agencies by: encouraging them to become more child centred; improving their relationships with clients; and adding value to the work they do with families.

When evaluating a programme, it is also important to establish whether the programme generates any **unintended and undesirable consequences**, possible ones from Anchor have been listed in the penultimate column.

The third column shows Anchor's **expected outputs**. The primary expected outputs are grants of higher value than a typical Buttle UK small grant to provide an enhanced support package including not only practical help, but also services that can provide emotional, social and educational support for children affected by domestic abuse. An additional expected output is new learning on two areas: i) if and how an enhanced support package can increase the impact of Buttle UK; ii) best practice in supporting children affected by domestic violence.

The second column shows **through which mechanisms Anchor grants are meant to be delivered.** Buttle UK's role in delivering Anchor is limited to providing advice and information to referral agencies, arranging payments, as well as the promotion of the scheme and monitoring the grant expenditure. The delivery of Anchor relies heavily on work done by referral agencies to:

- Assess children's eligibility and needs
- Develop and cost enhanced support packages to meet these needs
- Administer the grant in line with Buttle UK's requirements
- · Arrange and monitor the delivery of the enhanced support package
- Ensure the support provided to children is effective

The first column shows what **inputs Anchor requires**. Anchor was set up with funding from City Bridge Trust. Because of its wider scope (i.e. an enhanced support package) than a typical small grant, Anchor is considerably more resource intensive to administer for both Buttle UK and referral agencies, and so it requires a new way of working on both parts that can raise some challenges.

Finally, the two boxes at the bottom of **Figure 2.**1 show:

- The assumptions underpinning Anchor. Like all Buttle UK grants, Anchor is child-centred and aims to 'work creatively and nimbly, making timely, practical and tailored interventions in partnership with other agencies'. A review of what works in supporting families affected by domestic violence has also informed the development of the Anchor programme.
- · External influences that can support or undermine the effectiveness of Anchor.

## **INPUT**

#### **Buttle UK**

- £1m from City Bridge Trust.
- 1 full -time project officer.
- · Central service resources

#### Referral agencies

• Staff time for application, grant delivery & monitoring

## DELIVERY MECHANISMS

#### **Buttle UK**

- Promoting Anchor
- Advice on assessing needs, grant application & administration
- Arrange payment by cheque, pre-paid card & direct deliveries
- Monitor grant expenditure



### Referral agencies

- Assess needs
- Develop & cost an enhanced support package
- Administer grant in line with requirements
- Arrange & monitor delivery of support
- Ensure support is effective

## **OUTCOMES**

#### **Children outcomes**

- Children & Young People grow up in a healthy & well-equipped home that meets their needs
- Children & Young People not excluded from education & educational activities due to financial barriers
- Children & Young People not excluded from activities that support their development due to financial barriers

#### **Agency outcomes**

- · More child centred
- Improved relationship with client
- Improved effectiveness of their work



## **OUTPUTS**

515 grants with average value of £1,500 to deliver an enhanced support package

#### Learning:

- How to increase impact of Buttle UK
- Effective practice in supporting children affected by domestic abuse

# POSSIBLE UNINTENDED CONSEQUENCES

- Negative effects when grant ends
- Damage to client-agency relationship
- Grant not spent as intended
- Grant replaces other funding
- · Grant delivers ineffective support
- Enhanced part of package very small or not delivered



## **IMPACT**

Opportunities leading to transformational changes that can provide the best chances of financial security and avoid poverty in adulthood through educational achievement

### **Assumptions**

Project is child centred, evidence informed and underpinned by Buttle UK's model i.e.: work creatively and nimbly, making timely, practical and tailored interventions in partnership with other agencies

#### **External influences**

Availability of funding, changes in family/children services

## 3. WHO ARE ANCHOR BENEFICIARIES?

In this chapter, we first explore to what extent Anchor is reaching its intended beneficiaries and then look at the profile of children supported by Anchor and how they compare with children supported by Buttle UK small grants.

## 3.1 Eligibility criteria

The case study findings show that Anchor is targeted at intended beneficiaries in line with the programme's eligibility criteria:

- Children included in the case studies had recently experienced domestic
  abuse, which had been protracted and very severe, with some abusers jailed
  for violence towards their families and in some cases outside their families too,
  and families having to flee home under police protection.
- Anchor is targeted at children in families at the re/post-housing stage, as the evidence that informed the programme's design indicated that the kind of help Anchor provides can be more effective when a family has reached some stability. The case studies show that this rule is applied flexibly but in line with the supporting evidence: some families had not been re-housed as the abuser had left and measures had been put in place to keep him away from the family. However, these families were at a similar stage as re-housed families combining the positive feeling of a 'new beginning' with the daunting task of 're-building their lives', and faced considerable challenges relating to financial and practical issues, as well as emotional difficulties.
- Anchor is meant to help children in families who are experiencing financial hardship and the case studies show that all families fitted this category, but routes into this varied:
  - Some mothers had never worked outside the home or were in very low paid
    jobs, the abuser had been the only/main income earner and they were living
    on a very low income even when they lived with the abuser. These families
    seemed likely to remain very dependent on benefits and living on a very low
    income for some time.
  - Other mothers had found themselves in financial hardship, including debt, because of the domestic abuse, typically because the abuser was providing no or very little financial help following the breakup, and the costs associated with living in temporary accommodation and/or re-housing. These mothers had better earning potential than the above group, but because they were working, access to financial support was very limited. For example, they could not get legal aid and had to cover the costs of staying in the refuge.
- The delivery of an Anchor grant requires a considerable input from the referrer
  and there is therefore an expectation that a family is receiving on-going and
  regular support from an agency. The research found that level and nature of
  agency's involvement varied considerably and was not always what would have
  been required to ensure the effective delivery of Anchor support.

• Anchor is not meant to replace public funding. The typical answer referrers gave when asked if other sources of funding had been considered was: 'What other sources of funding?' Reflecting the recent financial squeeze on public services, local authority welfare provision schemes were reported to be allocating very little funding. In some cases, funding was not available to meet the needs of vulnerable children with a plan (i.e. Children in Need or Child Protection) to cover, for example, tuition and after-school activities. Support that required the involvement of Child & Adolescent Mental Health Services (CAMHS) was also seen as very hard to access: it could take months just to get an assessment, and then several more months to get a service, even when a child was in obvious need of therapeutic support to overcome the trauma of having witnessed years of domestic abuse.

Box 3.1 Whether cases study families met the Anchor eligibility criteria

Criteria	Eligibility
Recently experienced domestic abuse	Yes
Re/post-housing stage	Yes
Financial hardship	Yes
On-going, regular support from professional organisation	Not always
Exhausted other sources of funding	Yes

In addition to meeting these eligibility criteria, Anchor beneficiaries were severely disadvantaged in other ways:

- Some families were isolated having been re-housed in new areas where they had no support networks, in some cases in housing which was meant to be temporary, but with no idea of when and where they will be permanently re-housed.
- Virtually all children were affected by one or more of the following: behavioural problems, a range of stress symptoms, language development delays, emotional difficulties, problems at school, substances abuse, inappropriate friendships.
- Mothers were still recovering from years of domestic abuse, some still suffered from depression and other mental health issues, which could negatively affect their parenting skills.

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#### 3.2 Anchor beneficiaries: The stats

In this section, we look at the analysis of Buttle UK data on families supported by Anchor since it started, and when relevant compare them with families in London who have received a Buttle UK small grant in the same period.

As shown in Table 3.2, families who have been supported by Anchor are almost exclusively single parents. They do not differ greatly from small grant beneficiaries in terms of family size, and they include a considerable proportion (26 per cent) of large families (i.e. with three or more children). Compared with small grant beneficiaries, Anchor families are less likely to include children under the age of five (21 per cent and 27 per cent respectively). While lone parent families are less likely to have younger children, as we will see later, this result could also reflect the fact that Anchor is seen as less suitable for families that only have very young children.

Table 3.2 Profile of Anchor and small grant beneficiaries

	Anchor beneficiaries	Small Grant beneficiaries in London
Type of family:		
Lone parent	99%	70%
Estranged young people	1%	7%
Two parents	0.2%	20%
Guardian	0.2%	1%
Other	0	2%
Family size:		
1 child	38%	42%
2 children	35%	29%
3+ children	26%	25%
Estranged young people	1%	4%
Children's age:		
Under 5	21%	27%
5-10	46%	35%
11 and over	33%	38%
Ethnicity:		
Asian	12%	9%
Black	25%	40%
Mixed	22%	12%
White British	25%	34%
White other	12%	5%
Irish Traveller	0%	0.1%
Did not disclose	4%	0.4%

Source: Buttle UK data on grants approved between April 2014-March 2017

There are some considerable differences between the ethnicity of Anchor and small grant beneficiaries (Table 3.2). These differences could perhaps reflect different referral routes, as Anchor is much more reliant on referrals from voluntary agencies catering to specific groups, while a large proportion of small grants are from statutory services (Table 3.3).

Table 3.3 Type of referral agencies for Anchor and small grants

Referrer type	Anchor beneficiaries	Small Grant beneficiaries in London
Voluntary organisation	43%	23%
Social Services/Children's Trusts	28%	43%
Other Local Authority Services	14%	6%
Local Education Authority	4%	6%
Tenancy Support Services	4%	5%
Housing Association	2%	2%
Sure Start/Children's Centres	3%	8%
Other	2%	7%

Source: Buttle UK data on grants approved between April 2014-March 2017

## 3.3 Summary

The case study findings show that Anchor is targeted at the intended beneficiaries in line with the programme's eligibility criteria and it is reaching children facing many challenges and disadvantages. The only criterion that was not always met related to the requirement for an agency to provide on-going and regular support to a family applying for Anchor, this issue is further explored in the next chapter.

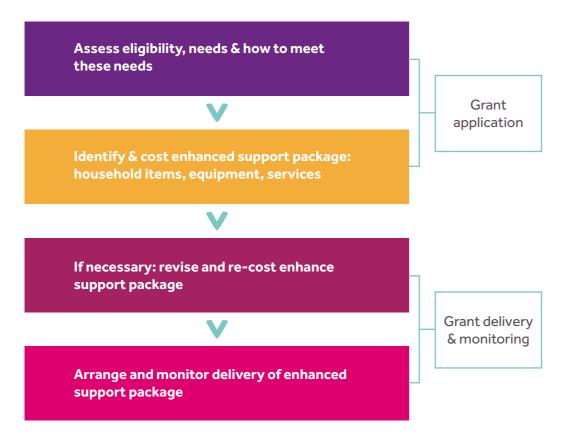
The statistical evidence shows predictable differences between Anchor and Small Grant beneficiaries, and points to the possibility that Anchor may be less suitable to meet the needs of families that only include very young children.

## 4. HOW IS ANCHOR DELIVERED?

In this chapter, we consider how Anchor is delivered. **Figure 4.1** shows the grant delivery processes envisaged by the Anchor theory of change. These are explored in this chapter by looking at:

- Issues around assessing families' eligibility for Anchor
- How children's needs are assessed and an enhanced support package developed to meet these needs
- What can influence the effective delivery on an Anchor grant

Figure 4.1 The Anchor journey



## 4.1 Assessing eligibility for Anchor

Assessing children's eligibility for the grant was reported to be straightforward, as typically agencies had been working with families for some time and they had most of the information needed to decide on a child's eligibility.

Anchor's eligibility criteria were reported to be clearly explained in the application pack, and typically, referrers did not need to contact Buttle UK to discuss if a child would be eligible, particularly when referrers (and their agencies) had previous experience of applying for an Anchor grant. However, some referrers had, recently or in the past, contacted Buttle UK for clarifications and they were unanimous in their praise for the rapid, efficient and helpful response they received.

#### As one referrer put it:

'It's such a human response... you are talking to a person not a machine... that tries to fit you into a box... it's a person who is trying to understand... and that makes such a difference.'

While overall the process of assessing and gathering the evidence to prove children's' eligibility worked well, referrers reported difficulties in the following circumstances:

- Children who had been seriously affected by domestic abuse and needed support but did not qualify for Anchor because they had not experienced domestic abuse recently. Some argued that serious negative consequences can emerge sometime after children suffered the abuse, and these children are in need of support, as much, if not more than children with more recent experiences.
- It was harder to make a case for an Anchor grant for toddlers as it was
  difficult to evidence in the application the impacts domestic abuse has
  had on very young children. Moreover, the range of interventions available
  to address their social and emotional needs is more limited. As discussed in
  the previous chapter, Anchor beneficiaries were less likely to include families
  with younger children, compared with small grants.

## 4.2 Applying for Anchor

#### Assessing what needs Anchor can meet

In this section, we discuss how it was decided what needs children had that could be addressed with an Anchor grant. We explore in turn the role of referrers, other professionals and parents.

The adequacy of the needs assessment was crucially dependent on a **referrer**'s knowledge of the family's circumstances. The assessment for the Anchor application typically relied on information referrers (and other agencies) had already gathered, as limited time could be devoted to the application. Grant applications based on a comprehensive needs assessment were more typical when an agency had been involved with the family for some time (e.g. several months, even years in some cases) and/or the level of support was intense. Agencies that had been supporting families with a wide range of issues (e.g. parenting; financial, benefit and legal issues; parents' and children's mental and physical health; problems at school) had a very good picture of what were the children's more immediate and longer term needs, and had a fairly good idea of how Anchor could help meet some of these needs.

On the other hand, when agencies had had more limited involvement and knowledge of the family, the interviews with the parents highlighted needs that could have been addressed with support from Anchor but were not identified in the application. It was also typical for these applications to include mainly or only requests for practical help (e.g. household items). Discussions with both the referrer and the parent indicated that while activities for the children were included in the application, these were not central to the package of support and possibly added on because Buttle UK suggested it and there was a concern that without these activities the application might have been rejected.

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Other agencies were also involved in some cases in identifying needs that Anchor could meet. For example, if a child had Child Protection or Children in Need plan, or families were receiving a family support intervention (e.g. Troubled Families), inputs from other agencies would typically be via the regular multi-agency meetings arranged to review cases. Schools also had an input in some cases, particularly if a child had had some behavioural difficulties or problems with their schoolwork and attendance, and there had been discussions with the parent and/ or the referrer on how support from Anchor could help to tackle these problems.

**Parents** were always consulted about children's needs. Even when a referrer had a very good understanding of the families' circumstances and needs, parents said they had had a meeting with the referrer to discuss the Anchor application.

**Children** were in some cases directly consulted about the kind of after-school activities they would like to do, but it was more typical for children's wishes to feed into the application via their mother.

The level of parents' involvement in assessing what needs Anchor could meet seemed to depend largely on their wellbeing and mental health at the time of the application. Some mothers were still recovering from very prolonged, violent and traumatic experiences, suffering from depression and other mental health issues. In these cases, most decisions regarding the application were delegated to the referrer, as a mother explained:

'At the time, I was very confused and I'm not sure I would have known what was good for the children'.

Limited parental engagement, however, could also be linked to:

- Lack of understanding of what Anchor could offer: mothers did not know about Buttle UK until this was mentioned by the referrer. They were given very limited information about Anchor, with hindsight some said if they had had a better understanding of what Anchor could offer, there were other needs they would have wanted to highlight in the application.
- Lack of motivation to apply: parents had been turned down for so many funding applications that they did not really believe that they would ever get any help.
   As one referrer explained: 'Mum couldn't quite believe she got the grant, she had to pinch herself.'

There were some mothers, however, who were very active and involved in identifying their children's needs, in fact it could have been concerns that mothers raised with referrers that prompted the latter to apply for Anchor, as illustrated in the box to the right.

#### Box 4.1 Examples of parental involvement in identifying children's needs1

- 1. Last spring was a very difficult time for Pedro as the non-molestation order against his dad came to an end and the dad tried to contact him. Pedro became aggressive, very withdrawn and emotional, and didn't want to go to school because that's where his dad had tried to contact him. The mother was very worried and was getting a note from the school every day. She tried to find activities to occupy Pedro's mind with positive things, but they all costed money and she had no money at all; it was painful not to be able to afford things that could help her child at a time when Pedro had a desperate need for help. She mentioned these concerns to the worker from a women's rights service who had been working with the family, and the support worker mentioned Anchor. Mum could not even imagine that such help existed.
- 2. Natasha had to move into a refuge as social services said it was not safe for her daughter to live with her violent father who was schizophrenic. The family struggled financially and got into debt because while Natasha was working she received no financial help from her ex-husband and had to pay for the refuge, as well as all her legal expenses. She had previously been paying for her daughter, Rosa, to have play therapy, which had been very important to help her overcome the trauma of living with a violent dad, but was no longer able to pay for it. Similarly, Natasha could not pay for Rosa's piano lessons and was really worried because given what they were going through, the piano lessons helped to keep Rosa occupied with something positive and gave her confidence. She discussed these concerns with the support worker from the domestic violence unit who suggested they could apply for an Anchor grant to pay for the therapy and piano lessons till Natasha was able to pay off her debt.

 $^1\!$ All names have been changed to protect the identity of individuals concerned.

### Putting together an enhanced support package

Predictably, the support package included in the Anchor application was crucially dependent on the quality of the needs assessment. When the referrer, other professionals and/or the parent had made an adequate assessment of what children needed, there was a strong base for deciding how Anchor support could help children and complement other services the family was receiving. On the other hand, a weak assessment tended to result in unmet needs (that could have been met by Anchor) and a request for support that looked more like a Buttle UK's Small Grant, rather than the enhanced support package that should be provided by Anchor.

The enhanced part of the package was highly praised as providing vital support for children at a time when it is increasingly hard to access this kind of help. However, it could be very time consuming to put together this part of the package, as it required: considering what children were interested in and would benefit from; researching the availability of suitable local options; and, finding out about the costs of these services. Even when mothers helped with these tasks, they could still be very time consuming, particularly as some referrers had very large caseloads (e.g. up to 35 families).

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While highly valued, the enhanced part of the support package could raise considerable challenges for referrers. For example:

- When referrers were not expected to work for much longer with a family, there was sometimes reluctance to apply for support that would require a longer-term involvement, as it would mean keeping a case open for longer and the agency may not have the resources to do that. It was noticeable in some cases that the support package had been shaped by this consideration. For example, it was mainly focused on practical support, such as household items, that could be quickly delivered. Even if activities for children were included, the request was for one term only, while the children could have benefited from these activities for longer and the mother did not have the financial resources to pay for these activities in the near future. These were grants well below the £2,000 funding limit and where mothers said they and the children would have liked these activities to continue for longer.
- When applications were made on behalf of families in a refuge it was standard practice to wait to apply for Anchor till the family had been re-housed, as only then it would become apparent what the family needed in terms of household items. Families did not know in advance where and when they were going to be re-housed and once this decision was made, they typically had only a few days to arrange the move. Under these circumstances, it was hard to combine a request for practical support with support to meet children's social, educational and emotional needs because the latter required time to research services in the new area, while the family urgently needed the practical help.
  As referrers explained:

'When you are moving out of a refuge you need a bed, you need a fridge and you need to sort out these things before you can start thinking about the therapy and the activities for the children.'

'I found myself running around trying to find out about after-school activities for the kids and how much they costed, meanwhile this client was sleeping on the floor with her chid because we had to have this information to submit the [Anchor] application.'

- Some referrers had concerns about applying for children therapy and counselling. While these were considered very valuable, some referrers felt they lacked the knowledge, as well as the time, to identify a suitable service. They pointed out that one needs to be confident the service is of good quality and right for the child, and one cannot just do a Google search to find a therapist or a councillor. Even when they could get advice on suitable services from colleagues, it could be very time consuming to find a service as they tend to be oversubscribed. Deciding how many sessions a child needed was also difficult: it was important to get this right as therapy is very expensive, while there was a concern that an 'incomplete course of treatment' may have negative consequences for a child.
- Awareness and misconceptions about the upper grant limit also shaped decisions about the type and amount of support requested. Some referrers who had applied for a grant well below the £2,000 limit did not seem to be aware that they could have applied for more. Others were aware of the upper limit, but believed the chances of success would be better if they stayed well below that limit:

'It was the first time I applied ... and I wanted to go for £2,000 but then I thought if I went for that my application would be denied... and it was my first time... it wouldn't have been a good introduction to the charity.'

As practical help was needed and family could not really do without things like a cooker, a fridge, a bed or a wardrobe, it tended to be the enhanced part of the package that was limited to keep the grant application well below the £2.000 limit.

## 4.3 Delivering and monitoring the grant

Arrangements Buttle UK has for transferring Anchor grants to agencies featured quite a lot in discussions about the grant administration and these are discussed in the first part of this section. We then discuss the challenges in delivering Anchor support and what is done to ensure that the support delivered with Anchor funding is effective.

#### Payment arrangements

Anchor grants are transferred to agencies in three ways:

- Cheques made payable to the referral agency; these are the most popular
  way for Buttle UK to transfer funding to agencies. In 2016-17 just under half
  of Anchor funding (46 per cent) was delivered by cheque.
- Pre-paid cards in the name of the client, but which are sent to the referral
  agency so it can still control how the funding is used to deliver the support.
  Cards were introduced in March 2016 on a trial basis to deal with some of the
  difficulties created by cheques (see below). In 2016-17 16 per cent of Anchor
  funding was delivered by cards.
- Direct delivery of the most common household items. This is a very cost-effective way for Buttle to deliver the grant as suppliers offer discounted pricing to Buttle UK. In 2016-17, direct delivery comprised 38 per cent of Anchor funding; this is substantially lower than the equivalent figure for small grants (72 per cent).

Cheques have been a more popular and easier way to pay cash grants in the °past although with their inevitable demise in the not too distant future, alternative forms of payment such as prepaid cards are being tested. Payment transaction costs are always kept to a minimum wherever possible.

**Cheques** created a lot of work for referrers due partly to internal procedures for processing them, which could involve considerable time, form filling and different levels of authorisation. When the grant was delivered by cheque, referrers had to make all the payments to service providers and liaise with families to select and buy goods on their behalf. Not only was this time consuming for the referrer, but it could considerably delay the delivery of support to children.

Some agencies took the view that they could judge if their clients could be trusted and they transferred the money to families, emphasising that the money should be spent as specified in the grant letter and all receipts should be provided. These agencies had never had any problems with this approach, money had always been spent as intended and all receipts provided. As a referrer who worked with refugees explained:

'They are people who have suffered and they don't try to play the system.'

This approach minimised the work for the agencies, and more importantly it speeded up the delivery of support, empowered families and made the 'grant experience' even more positive. As this mother explained about using a small lump sum she was given to buy household items:

'The children were so happy to be able to choose things to buy, we had not been able to do that for a long time and we had three fun weeks deciding what we needed, looking for things, finding out what prices were and what was the cheapest.'

**Pre-paid cards** were less time consuming as they avoided the internal bureaucracy. However, if the agency's rules did not allow the transfer of money to clients, the referrer could still spend a considerable amount of time liaising with the family to arrange all the purchases, and again this could lead to delays in the delivery of support.

From the agency's perspective, **direct delivery** was the easiest way of administering the grant, as it did not involve them in helping and guiding families in making purchases. Not only did this save time, but it also avoided some tricky conversations referrers needed to have with some parents about the choice of some items that were too expensive or did not reflect what was specified in the grant agreement. Families were very grateful for the household items that were delivered directly from Buttle UK and were reluctant to highlight any ways in which this help could work better for them. However, referrers noted that giving the opportunity to choose what to get, even within price restrictions, could be empowering for families and very important for children choosing items for their bedroom.

The version of the Anchor application forms completed by referrers in the case studies required them to indicate if they wanted the grant to be delivered by cheque or direct delivery (cards were not mentioned, possibly as they had not been introduced when they applied). However, not all referrers recalled making this choice or were aware that they could indicate a preference, and they assumed Buttle UK would determine how the grant would be transferred.

#### Challenges in delivering a grant

Some grants reviewed for the cases studies were not fully delivered to families and this section explores the circumstances that led to 'partial' delivery.

- Competing demands: When urgent household items could not be secured quickly (due to the time it took the referrer to prepare the application and/or Buttle UK to process it) families found other ways of getting some of these items (e.g. from friends) before the grant was awarded. These were all cases where the grant was delivered several weeks after urgent practical needs had been identified. As discussed earlier, there is a tension between the fast response required to address urgent practical needs and the longer time required to put together the enhanced part of the package to address children's emotional, social and educational needs.
- A small grant in Anchor's clothes: When the main reason for applying for a grant
  was to get practical help, the enhanced part of the support package (e.g. activities
  for the children) was not central to the application and had been added on because
  it was believed that without it the application would not be eligible for Anchor or
  would have a lower chance of success. In these cases, there did not seem to be a
  great deal of motivation on the part of the referrer nor the mother to arrange for
  the delivery of the enhanced part of the package.

- Revising the support package: In some cases, after an application was submitted, circumstances changed which meant the support package had to be revised. For example: some children changed their mind about the activities they wanted to do; services identified at the application stage were no longer available or prices had increased; a service was tried but was not considered suitable to meet a child's needs. Revisions to the support package could involve considerable more work for a referrer who sometimes may simply not have time to review and re-cost the support and get the changes approved by Buttle UK.
- Case closed: In some instances a family case was closed before the whole grant could be delivered, although some mothers worked directly with Buttle UK to get the remaining funding delivered (e.g. arranged for Buttle UK to pay for the services). As we have seen, when considering what support to apply for, some referrers took into consideration whether the grant could be delivered before the case was closed. This was not an easy assessment as the timing of the case closure and/or grant award was not certain, nor could referrers know with any degree of precision how long it would take to deliver the grant. In trying to get the best possible help for their clients, referrers may be somewhat optimistic in making these judgement calls.
- The referrer-parent team is not working: A poor relationship between the referrer and the mother could mean that not all the support was delivered as communication had broken down. Referrers talked about some mothers not engaging or being difficult; mothers talked about some referrers no longer being interested or having time to support them. Some mothers were only vaguely aware that not all the grant had been spent and only remembered about this when probed during the interview. Others were disappointed and angry because they were aware that there was more funding available to help their children, but without the referrer's collaboration they did not know how to access it.

#### Assessing the effectiveness of the support

The question of whether the services children received were the right services and of the right quality to meet their needs did not typically feature in discussions of grant delivery, as referrers' time was taken up with the grant administration. It was implicitly assumed that it was down to mothers to make this judgement and raise any concerns with the referrer.

There were cases when mothers arranged for services to be changed because they were not suitable. For example, a mother who received a grant for tuitions for her daughter thought that the first teacher she found was not right for her daughter and after a discussion with a referrer, replaced him with another teacher. There were mothers who reported to their referrer that children were no longer enjoying the after-school activities they had initially chosen, and the referrer agreed to a change or asked Buttle UK to approve the change – perceptions of what changes did or did not require Buttle UK's approval varied.

However, there was also evidence of 'drift', when referrers had not monitored and did not seem to be aware that children were no longer attending Anchor funded activities and the mother had not raised it. There was a real danger in these cases that no other options would be explored to meet a child's needs and the support provided by Anchor will not be effectively used or will not be used at all.

## 4.4 Summary

The extent to which Anchor was used to deliver enhanced support to meet a family's practical needs, as well as children's emotional, social and educational needs, depended on:

- The nature of the referral agency's involvement with the family;
- A referrer's understanding and capacity to deliver the enhanced part of the support package;
- · The extent to which referrer and parent worked as a team.

The support delivered to families was more likely to be aligned with the Anchor model when referral agencies had a substantial involvement with the family before and after the grant's award. While limited involvement with a family prior to the grant application could mean that the support required was not based on a good understanding of the family's needs, limited involvement with a family after the grant was awarded could undermine the ability to deliver the enhanced part of the support.

Some referrers did not seem to have a good understanding of how Anchor differed from a Buttle UK small grant or had limited resources to deliver the enhanced part of the support package. In these cases, the support delivered could look more like a small grant in the sense that it consisted mainly or only of practical help, while providing considerable more funding than a small grant would.

Parents and referrers working as a team to put an application together was more likely to result in the kind of enhanced support package envisaged by Anchor. However, parents' ability to play an active role partly depended on their understanding of what Anchor could offer them. The information referrers passed on to parents varied and was not always sufficient to enable them to be more proactive in informing the grant application and delivery.

It should be noted that all agencies involved with the study had been affected by substantial cuts in resources, which could considerably limit their ability to be as involved with Anchor as they would have wanted to. For example, as caseloads were growing they did not have enough time to be as involved as they were in the past with a family and may therefore not have a full picture of children's needs when making an Anchor application. Similarly, they were under pressure to close cases according to pre-determined deadlines, even if a family still needed support. This could create tensions in the relationship between the parents and support worker and make it more difficult to deliver Anchor, and as we have seen some cases had to be closed before all the Anchor grant was delivered. Lack of time also prevented some referrers from making Anchor applications. Some mentioned having several families in their caseload with children very likely to be eligible for Anchor but neither they nor their colleagues had time to make the application and administer the grant, as they had decreasing resources to cater for a growing number of clients.

## 5. IS ANCHOR MAKING A DIFFERENCE?

The first part of the chapter discusses if and how Anchor made a difference to children by exploring how it met their practical, educational, emotional and social needs and explores the sustainability of these outcomes. The second part of the chapter considers the effects of Anchor on referral agencies and possible unintended consequences from the programme.

## 5.1 A healthy and well-equipped home

The research has found that a key effect of Anchor was to improve family functioning. As illustrated in Figure 5.1 this was achieved in a range of ways.

Anchor helped to **reduce the household management difficulties** families were facing, giving mothers more time and energy to focus on the children. For example, a washing machine saved a family £10-12 a week in laundrette bill and the considerable time it took to get to the laundrette, a 30-minute journey that involved changes of two buses. A cooker meant a family could have proper meals again, having lived for weeks only on the kind of food that could be cooked on a slow cooker.

Anchor helped to reduce the stress associated with financial difficulties and this helped to **support mothers' wellbeing**, which in turn improved their ability to care for to their children. For example, a psychologist referred a mother to a mental health agency so they could help her to get assistance with the financial difficulties the family was facing, which were exacerbating the mother's mental health problems. The Anchor grant provided essential household items when the family was re-housed and meant the mother did not have to increase her debt; this greatly helped to improve her mental health. In addition, Anchor funded activities for children helped to reduce some mothers' isolation particularly if they had been re-housed in a new area away from family and friends. Working with the referrer to research options for children's activities and then taking the children to these activities helped mothers to get to know other parents and become familiar with community venues where they found other activities the family could engage with.

Anchor also helped to **reduce family tensions** associated with the lack of household necessities. For example, Anchor support was used to buy beds for children who were sleeping on the floor or had to share single beds with siblings. As a referrer explained about the vital practical help Anchor had provided:

'Without Buttle help there would have been a build-up of tension and stress among everybody in the family that could have tipped mum, who suffers from PTS, over the edge.'

For families who had been re-housed or when the abuser had been removed from the family home, mothers felt that Anchor support helped to consolidate the sense of a new beginning. While there were still many obstacles ahead, Anchor equipped parents with some of the resources they needed to build a new life. As these mothers explained:

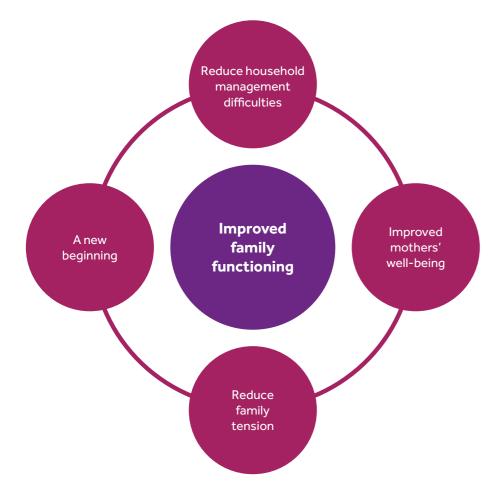
'Some people don't realise the effects of domestic abuse and how devastating it can be. I'm very grateful to Buttle for understanding that and helping us, it has been a very

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difficult journey but I now feel I'm coming through it and I'm very grateful to my support worker who convinced Buttle of what a difference the grant could make to us.'

'[Being awarded the Anchor grant] was amazing and my English is not good enough to describe how I felt that day. I wish there was an interpreter so I could find the words to tell you what's in my heart.'

Figure 5.1 How Anchor supports a healthy and well-equipped home



#### 5.2 Educational outcomes

The case studies show that Anchor supported children's educational outcomes in a range of ways, as illustrated in **Figure 5.2**.

Anchor funded tuition for some children who had missed school due to the frequent moves before they were finally re-housed, for example, children in one family had changed school three times in a year. As the mother explained:

'The lessons helped them to make up for what they had lost through a period of upheaval, when they had to leave their old school and we moved to the refuge, without the lessons they would be behind while teachers are pleased with their progress.'

Figure 5.2 How Anchor supports educational outcomes



Even when children's schooling had been stable, the trauma suffered could result in children disengaging from school and poor school performance, particularly, but not exclusively, when they entered adolescence. For example, a mother who applied for tuition for her son said that while he had done well in primary school, when he started secondary school his attitude to learning changed, he had low academic confidence and the school was not doing anything to support him. In year 9 he got completely demoralised and started 'misbehaving tremendously', that's when the support worker suggested Anchor. With Anchor funding the son had been receiving extra tuition for several months and the mother reported that:

'He used to think he was no good but he has now discovered that he can learn with his new teenage brain... now he has a chance to make some progress. The [tuition] didn't make miracles. It's not that he is going to have all As and Bs, but he will have a chance to get some decent results... And his attitude has changed, his opinion of himself and confidence have risen. The other week I was impressed with his coursework, he got A in chemistry, biology and physics and he told me "Mum, and I didn't even cheat".

While children were not as enthusiastic as their parents about tuition, they also seemed to recognise their value, as these primary school children explained:

'Now [that I've had the tuition] I know all the stuff and I can raise my hand more often in class.'

'[The tuition] kind of helped, made you smart.'

The research found that **after-school activities** could also help to improve school's performance among children who had disengaged from school. A mother whose child's school behaviour had deteriorated as the child had become really unsettled by her father's attempts to contact her, explained that:

'Since September she has had no detentions, while before [starting the performing arts course and swimming funded by Anchor] she used to have 3-4 detentions a week.'

The case studies show that another important way in which Anchor supported educational outcomes was by providing funding for a computer. Children who did not have a computer at home really struggled as much school related work required access to a computer, and accessing public computers (e.g. at the local or school library) presented considerable logistical difficulties (e.g. coming home late when it was already dark, or having to wait a long time for a free computer).

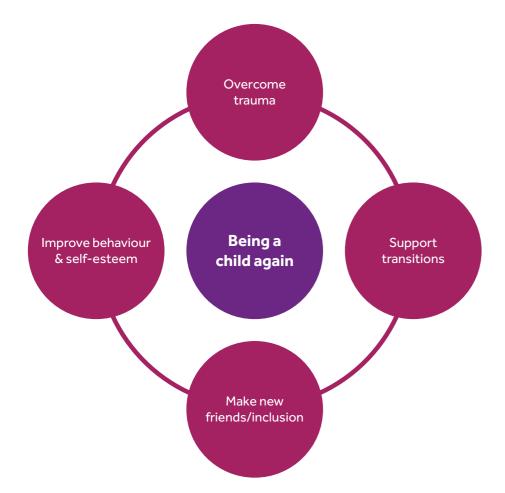
#### 5.3 Emotional and social outcomes

The range of children's emotional and social outcomes Anchor supported could be summarised as enabling children to be children again, thus giving them back their childhood after they had experienced very traumatic events in their lives (see Figure 5.3).

Anchor funded after-school clubs were reported to have helped to engage children's minds in positive activities, increase their confidence, give a sense of 'normality' to their lives and help to make friends when they moved to new areas. As a referrer explained:

'If the children hadn't had the piano or football lessons they would still be alive but they wouldn't be so happy and it's very important that someone cares about these children's happiness.'

Figure 5.3 How Anchor supports emotional and social outcomes



A mother explained what it meant for her daughters to have had drama lessons:

'It gave them the opportunity to express themselves after what they had been through, shout and get out of their system the violence they had seen.'

Predictably children enjoyed these activities, as these primary school children explained:

'[Football lessons] made me play football even better, made me very happy and the best part was when we went to the Arsenal stadium to play there, I even saw two Arsenal players and got an autograph from one of them.'

'[Asked what she liked about the swimming lessons] I like floating in the sky.'

Therapy was reported to be very impactful and a 'lifeline' as CAMHS services have become very difficult to access. As a mother explained:

'The Buttle help was a lifeline for us. I was very thankful I was given the opportunity for the girls to have play therapy because it would worry me now if they didn't, if they were not able to express their feelings when they really needed it at a crucial time and to be able to talk to someone not connected to us at all (not a friend or a relative) and they could say whatever they wanted.'

Another mother used to pay for play therapy herself, but she got into debt, and was unable to pay for the therapy at a time when her child needed it most to support the transition back to 'normal life':

'I don't know what I'd have done if Buttle hadn't paid for the therapy, as she really needed to get over the domestic abuse, having witnessed her father's attempted suicides, and had to get used to see her dad again ... and the therapy has helped her not to hate her father anymore ... The therapy has helped her to overcome the negative experience of being in a refuge, she was so scared when we were in the refuge that she wanted me to be with her all the time, even when she went to the toilet.'

Children were not so keen on (talking) therapy, as the quote below from a child illustrates, although they were reported to enjoy more activities based therapy (e.g. play therapy, drama therapy).

'I had to talk about my life story but it [therapy] was boring.'

## 5.4 Sustainability of children outcomes

Anchor provides support for a limited time (typically up to a year) to help families to become resilient and equip them to stand on their own two feet. The implication of this is that after Anchor ends, either families no longer need the kind of support Anchor has provided; or, they find other ways to get long-term services their children can benefit from.

There were cases when Anchor provided the kind of one-off support that is likely to be needed only once. Household items were obvious examples of this, but even some children's activities were only necessary for a limited period, for example, tuition was only needed till the child had been able to catch up after missing a lot of schooling. Similarly, if tuition was provided because the child's school performance

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had deteriorated, they were only necessary until children re-engaged with learning and became more confident. In these cases, the length of the support was important, if it lasted several months, typically a school's year, it worked as intended, if it was only for a term it was unlikely to be sufficient.

In other cases, children could have benefited from continuing to receive support after Anchor ended, the extent to which this happened depended on mother's ability to secure this support:

- Some mothers were very resourceful and used the breathing space provided by the grant to look for other activities for the children that were free or cheaper. Others were hoping to find work, earn more and/or pay off their debt so they could eventually pay for the services Anchor funded. Some mothers were encouraging the children to save so they could pay a contribution towards the cost of activities they were hugely enjoying.
- In other cases, however, mothers were not able, or it seemed unlikely that they
  would be able, to continue to secure the kind of support Anchor had provided.
  These were mothers who would struggle to find a job and even if they entered
  work their earnings would be very low. They did not think there were free activities
  or activities they could afford to replace what Anchor had funded. It is difficult
  to say whether these views reflected the lack of free or very cheap children's
  activities in the area or the fact that these mothers were still recovering from
  very traumatic experiences and had not fully regained their parenting capacity.

Even when support had to stop because mothers were not able to secure it in other ways when Anchor ended, there was no evidence that the end of the support had had or was likely to have any negative effects (e.g. by raising expectations that could not be met in the longer term). Children simply enjoyed what they had while they had it and then moved on, as children live 'in the here and now'.

## 5.5 Agency outcomes

Anchor was reported to be making an important contribution to the support package some agencies were delivering to families. Unprecedented funding cuts meant that some agencies could not afford some of the services for children identified in formal plans, such as Child Protection or Children in Need plans or plans developed by family services. Anchor was seen as vital to fill the widening gap between the needs identified in these plans and the resources available to meet these needs. As a local authority referrer put it:

'We do have in the local authority other pots that we can access and we do try and exhaust everything before we come to the Buttle Trust. But for us it's literally, if it [Buttle UK funding] goes I don't know, I think we'd just be stuck. It's literally ... a massive crutch to our service, I mean the entire children and young people's services right across the board all departments are accessing the Buttle Trust.'

Essential support secured from Anchor helped in some cases to improve trust in and engagement with the referrer agency, as mothers were very grateful to referrers for the Anchor grant (particularly as they had had so many rejections in the past).

Anchor was reported to have helped to overcome some major 'hurdles' in families'

lives, which then allowed an agency to engage the family more effectively. For example, practical support which reduced the stress and tensions associated with financial and domestic management difficulties meant that mothers were better able to engage with other services (e.g. mental health, parenting support).

Some referrers working in family services that largely focused on parents, noted that Anchor had meant that they had sat down for the first time with mothers to consider the effects of the domestic abuse on the children. Since then referrers said they had become more aware of the needs of individual children, as distinct from the needs of the parents and the family as a whole.

But Anchor could also play a key role even for agencies with a child focus, as this referrer from a refuge explained:

'My job is to try to give children their childhood back and Buttle helps with that, for example, by giving them a bed they like, a bedroom with things they like, and get them out of the house to do things other children take for granted.'

## **5.6 Unintended consequences**

As mentioned in chapter 2, in evaluating Anchor, it was important to identify possible negative consequences that could undermine its effective delivery. These are outlined in **Box 5.2**.

#### Box 5.2 Possible unintended consequences of Anchor

- Negative effects on children when Anchor support ends
- Grant delivery/administration damages the client-agency relationship
- · Grant is not spent as intended
- Grant replaces other funding sources
- · Support funded with the grant is not effective
- The enhanced part of the support package is very small or not delivered

There was no evidence that Anchor did any harm in any way. As we have seen, even when families needed longer-term support, Anchor benefited children at least in the short term, with no evidence of adverse effects when Anchor support ended. While relationships between some referrers and mothers were difficult and this made it difficult to effectively deliver Anchor support, Anchor was not the cause of these difficulties.

Anchor seemed to have been spent as intended, as referrers' and parents' accounts of how the funding had been used closely matched the Buttle UK grant letter setting out how the funding should be spent.

There was no evidence that Anchor support could have come from other sources. As we have seen in some cases it was providing support that in the past it would have come from statutory services (e.g. children's social care and CAMHS), but now was unlikely to have been delivered without Buttle UK's contribution.

No mechanisms appeared to have been put in place to monitor the effectiveness of Anchor-funded services. Mothers were key to ensuring that the quality and type of support funded by Anchor met their children's needs. However, not all mothers were sufficiently engaged to do this, and this may be an area Buttle UK may wish to explore with referrer agencies.

For the reasons outlined earlier, the 'enhanced' part of the package (i.e. services to support children's educational, emotional and social needs) was in some cases rather small or not delivered. Again this is an issue Buttle UK may want to explore with referrer agencies to see how some of the delivery difficulties outlined earlier could be overcome.

## **5.7 Summary**

The research has found that Anchor resulted in the range of outputs and outcomes envisaged in the programme's theory of change:

- Anchor enabled children to grow up in a healthy and well-equipped home by providing practical help and services that improved family functioning.
- School behaviour, engagement and performance were supported with funding for tuition, after-school activities and computers.
- Therapy and after-school activities helped children to overcome the trauma of having experienced years of domestic abuse, supported the transition back to 'normal life', helped children to make new friends and improved their behaviour and self-esteem.

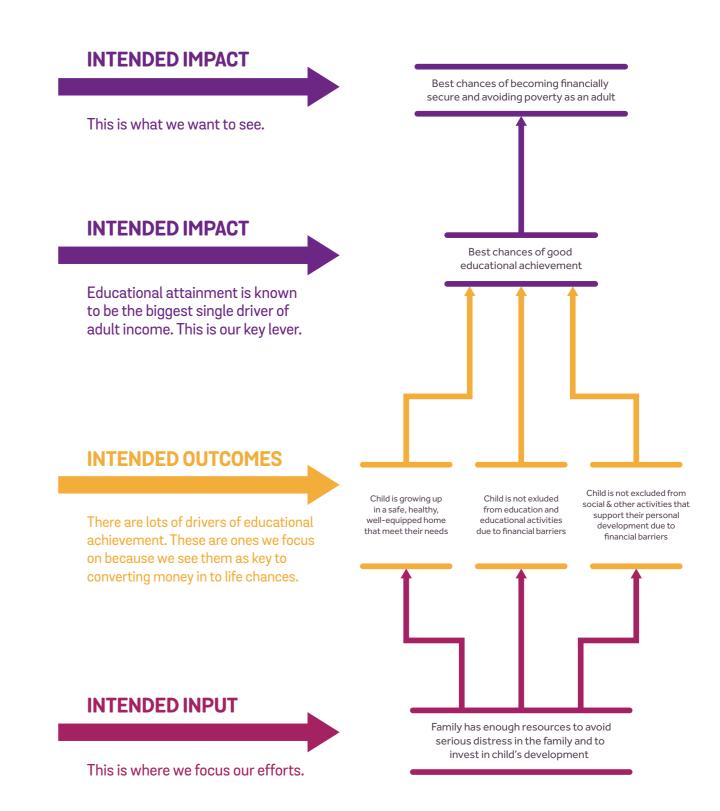
As envisaged by Anchor's theory of change, the effects were reported to be stronger and potentially transformational when an enhanced package was provided that supported children's educational, emotional and social needs as well as their practical needs. When only or mainly practical support was provided, outcomes for children were still positive but possibly not as intense as when a more comprehensive package of support was provided.

Anchor worked as intended for some families by building resilience and supporting parents to regain their confidence and ability to support their children. In these cases, Anchor was likely to have indirect long term benefits, beyond the more immediate impacts achieved while the support was delivered. Anchor was also likely to have long-term benefits when the support had been sufficient to tackle some underlying problems and intervention was no longer required. However, when mothers were not yet in 'a good place' and had not built sufficient resilience to parent without support, the benefits tended to be short term, and longer-term effects were likely to require support over a longer period.

Anchor was reported to be making an important contribution to the support package some agencies were delivering to families, as without Anchor some would be unable to deliver some essential services to children. Anchor was also reported to have raised awareness of the need for domestic abuse support to be more child-centred.

There was no evidence that Anchor resulted in the kind of unintended consequences that could harm those receiving support or that there were serious flaws with the programme's design and implementation. However, some referral agencies may need support to overcome difficulties in using Anchor to fund services for children and in monitoring the effectiveness of these services.

## **APPENDIX 1: Buttle UK's theory of change**



## **APPENDIX 2: Case studies**

These case studies were compiled by Buttle UK staff and were not part of the evaluation. However, they do reflect the range of experiences and circumstances of children supported by Anchor as they were identified in the research.

Please note that names have been changed to protect the identity of individual's concerned.

#### Case 1

Rachael is a single mum with a 6 year-old son, James. Rachael suffered extensive physical, emotional and sexual abuse from her ex-partner. Her son witnessed some of the abuse and on one occasion was 'kidnapped' by his father from school. Eventually the police became involved and upon his return to her care, Rachael took her son and fled to a refuge. They moved there in February of this year.

Upon arrival at the refuge James was very withdrawn, frightened and shy. He would cling to his mother and cry if spoken to. When he heard people talking loudly he would hide under a table or the bed. He would be scared to play with other children in the playroom, preferring to stay in his room. He also constantly feared being kidnapped whenever in public or when he started his new school and needed constant reassurance that he is safe. He also bed wets.

He and mum have received art and play therapy and have attended workshops. James also receives one on one support from his special educational needs coordinator (SENCO) at school. Rachael has been offered permanent accommodation but will be moving into an empty property, which needs furnishing. She has very little family support as her ex-partner forced her to cut off communication with family and friends. This will be her first time living independently in the community. Rachael has been refused help from the local authority welfare provision because she is working part time, but despite this she is still on a very low income and needs support. James would feel more settled being able to move into a comfortable home with a bedroom set up for him.. He also requires new school uniform as he has had to change schools. A request has also been made for him to attend a football club to help him with his confidence and social skills. Whenever he gets upset, all he wants to do is play with his football so a football club should be a good outlet for him.

The Anchor Project was able to step in and fund football and swimming lessons for James as well as school uniform, a bed and bedroom storage, a sofa and kitchen items for the family. In total the Anchor Project provided £1,538 to help give the family the fresh start they desperately need.

#### Case 2

David is 5. From a very young age he witnessed his mother, Diane, being abused. Even though she and David have now moved to a different home from where the abuse took place, he still talks about his feelings toward the home in a negative way. He still gets very anxious if they go to an area that is near his old house. His father is serving a prison sentence but is due to be released next year.

Mother and son currently live with Diane's older daughter. Prior to this they had been moving between hostels. Diane has had trouble with her homelessness application and was initially classed as intentionally homeless by the council. They have now retracted this decision and she is due to be rehoused soon. This is wonderful news for mother and son as they were living in cramped conditions.

David has not had his own space in years. He has speech and language delay and is very attached to his mother. He has been referred to the Child and Adolescent Mental Health Services (CAMHS) because he has begun speaking of death every day. His behaviour has become increasingly aggressive toward his peers. He also eats consistently and has

been referred to a paediatrician to establish whether this is due to anxiety or a medical condition.

He will be receiving counselling support from CAMHS, whilst the Anchor Project have agreed to put aside a grant for household and bedroom items to help set up their new home once they move. So far we have released £542 of initial funding for, amongst other things, a years worth of swimming lessons and after school activities so David can begin to socialise with his peers in a healthier manner.

#### Case 3

Sara came to the UK in June 2010 to live with her husband on a spouse visa. Her son, Amir, was born 2 years later. Both of them were subject to abuse at the hands of the father - with Sara being both physically and emotionally abused. She left when her husband began to hit Amir and on the final occasion tried to strangle him, leaving marks around his neck.

Sara moved in with a friend and has lived with them since July 2016. They do not charge her any rent or living expenses. She has no recourse to public funds and no income. She is permitted to live in the UK but cannot work or claim benefits until Amir turns 7 years-old in September 2018. Her support worker offers help with the Home Office and immigration status and Amir's school is supporting them with food parcels.

Amir is 5 years old and began school in September 2016. He is very quiet and withdrawn. He is very anxious around other children and will not speak up if he is hurt by one of the other children. There have been incidents of bullying. He has frequent nightmares and refuses to sleep in his own bed. He prefers to sleep with his mother plus his bed is very old and has bed bugs so it is not fit for purpose. He has attended a 10-week group for children who have experienced domestic abuse. Although he listens well, he is not finding it easy to speak or join in with the other children. He will continue to receive therapeutic support from a children's group.

Sara has tried to get him to socialise with his peers but he is very shy and attached to her. However he does enjoy swimming and dancing. These are the only times he seems to open up. The Anchor Project has given a total of £1,349 in order to help Sara and Amir get back on their feet. We have funded a year's access to drama and swimming lessons for him as well as a summer club as he seems to lose a lot of his confidence over the holidays. We have also replaced his bed and given him a desk and wardrobe for his room. Funding has also been given for Sara and Amir to attend 'day out' activities to help them build positive memories together.

#### Case 4

Jane has two children aged 6 and 4. The two boys grew up in a house where violence and abuse was frequent. They overheard verbal abuse and witnessed physical violence to the extent of having to watch their mother being run over. As a result of this Jane, suffers with undiagnosed anxiety which support workers suspect may be Post-Traumatic Stress Disorder (PTSD).

Eventually, Jane and her boys fled to a refuge where they currently reside. However the younger son has started presenting behavioural problems and can even be physically violent toward his mother at times. Both boys can lose control of their emotions and the younger one in particular displays extremes of emotions with limited triggers. The older boy has been a victim of bullying. He has moved school a lot and struggles to form friendships.

Both boys have become accustomed to their mother's anxiety and erratic behaviour. However she is now accessing counselling to help support her mental health. The Anchor Project has funded three terms enrolment at theatre school for the younger boy to help build his self-confidence and help him to express himself in more constructive ways. It is hoped horse-riding lessons will help develop his capacity for empathy as well as to help calm him. Fencing has been thoroughly researched for the older child. In total the Anchor Project has awarded £1,173 to help Jane's sons break the cycle and normalisation of abuse that they have experienced.



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