

Pathways Trust



A closer look

A review of Pathways Mother and Child Service

Wellington

"We are mother's first, our children are our highest priority"

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Executive Summary

Pathways is to be commended for recognising the unique challenges faced by women who are experiencing mental health issues. The Mersey Street service was a positive move in providing support to women and after four years of operation it is timely to review the service to ensure needs of the women are clearly identified and met.

This report provides insight into the needs of the women, their children and the staff who provide the support.

The needs of mental health consumers who are parents is an area of mental health that is still to be fully addressed. The Mental Health Commission and the Ministry of Health state this an area that very little work has been done. Maternal Mental Health services and services for young persons have been the current focus of service development. The Health Funding Authority, (Central) has expressed an interest in learning about the issues.

Little research has been conducted within this area, however Australian references suggest that issues raised here are consistent with their findings. (Vicki Cowling, Children of Parents with Mental Illness. 1999.)

This report aims to provide a starting point. The issues raised here are complex and Pathways by itself is unlikely to be able to address all the needs. The key recommendation made is for the Mersey Street service to cease operating under the current level two residential service description. It is recommended that services be provided to mothers and their children within their own homes and for the Mersey street properties to become a service that provides respite and emergency short-term accommodation.

The needs of mothers and children it is felt, would be better met by exploring ways of providing a service that is flexible and keeps families within the communities that they choose to live in.

It is recommended that Pathways develop a new Mother and Child service that is provided in the communities where people live and meets needs of not only the mothers but the children as well. To achieve such a service, collaboration with a family or child focused service is recommended.

The needs of mothers and their children are complex and in order to successfully support them, Pathways is also recommended to explore different ways of service delivery. Working with other agencies and policy makers, to identify and address issues is a key part of this.

Introduction

This project was undertaken to review the residential service Pathways currently provides to women who are parents and consumers of Mental Health services. The service, known as 'Mersey Street', has been in operation since June 1996.

The appointment of a Primary and Secondary liaison worker to Kites, a joint venture between three supported accommodation providers, (MASH, Wellink and Pathways) made this project possible.

This report is divided into four sections; key service issues, issues specific to the service Pathways delivers, statistical background and recommendations.

Review Process

Descriptive data has been collected in interviews with present and past consumers of the service who chose to participate. Eight women with children have accessed the service over the past four years. Four women were interviewed, one declined and three could not be contacted.

Support Workers from the Mobile South team of Pathways who provide support to the women on a day to day basis were also interviewed.

Government organisations such as the Mental Health Commission, Health Funding Authority and the Ministry of Health were contacted by phone.

Service Description

The Mother and Child service is located in Mersey Street, Island Bay. Island Bay is an increasingly fashionable suburb on the south coast of Wellington. It consists of two, two-bedroom and one three bedroom town houses, owned by Community Housing.

The Health Funding Authority contracts for the service (at a level two residential service description) however it is funded at level three. This level of funding is to compensate for the contribution that is made toward rent by the service users. The women accessing the service contribute the same amount in rent as any other Pathways, level two residents and are not

required to contribute more for the extra rooms that are needed for their children.

Pathways developed the service in response to an identified need for supported accommodation for women and their children.

In the recent Pathways publication: *The People of Pathways – a celebration of 10 years service*, the service is described as 'specific small purpose built cluster housing offering services for women and children. This housing recognises the support that mothers can give each other with each other's children; coupled with the benefits of the children having other children to play with. The small groups are near essential services such as schools, shops and transport. 24 hour assistance is available by phone within 10 minutes and every family is visited daily.' (Page 89)

Pathways also provide a residential service to mothers and children in Hamilton.

Section One: Statistics

This section provides statistical data about the women and their children that have accessed the service.

Areas covered are:

- Demographics
- Reason for entering the service
- Length of stay
- Reason for leaving the service
- The children
- Mental Health
- Agencies involved
- Demand for the service.

Who has accessed the service

Eight woman, either pregnant or with children, have lived at Mersey Street since it opened June 1996.

Two women who did not have children accessed the service for a period of six months when one house became vacant and there were no referrals for women with children. They have not been included in the statistics, which cover June 1996 until May 2000.

Ages

The average age of the women accessing the service is 30 years of age and the average age of their children is 7 years.

Ethnicity

Five of the eight women identified their ethnicity as New Zealand European, two as Maori and one as Persian.

Income

All of the women were receiving benefits when they moved into the service.

Domestic Purposes Benefit	3
Sickness benefit	1
Invalids benefit	4

Reasons for moving into Mersey Street

Reasons for accessing the service varied, as the following chart indicates;

Reason	Nos.
To gain more independence, they had been previously living with family.	2
To have more support during pregnancy or with looking after their children.	3
On the recommendation of Child, Youth and Family services.	1
Emergency accommodation following loss of home through a fire.	1
To leave an abusive relationship.	1

All of the women were from Wellington when entering the service but of note is that none of them were from Island Bay.

Length of Stay

On average the women stay for 12 months. The shortest length of stay is 3 months, (a current resident) and the longest length of stay was two years and seven months.

Reasons for leaving the service

Reason	Nos.
To re establish themselves back in the community.	2
To access employment out of the city	1
To be closer to family support	1
Change in support need level	2

Three of the women that left the service moved into rental accommodation, one stayed with family and one woman moved to another provider, without her children.

None of the women remained in Island Bay when they left. Two of the women moved out of area and three moved to Newtown in Wellington.

Key Points

- Women access the service for a variety of reasons.
- All the women were /are beneficiaries.
- None of the women were originally from Island Bay or stayed living in Island Bay when they left the service.

Mental Health

To be eligible to access residential support in keeping with the Health Funding Authority service specifications, the women must have been assessed as having:

- A significant disability arising from disorders in thinking, cognition or behaviour due to a psychiatric syndrome (either intermittent or continuous)

Or

- An identifiable mental illness as defined in DSMIV or ICD-9/10, which is not likely to result in long term (>12 months) disability

And

- A need for supported accommodation / residential rehabilitation.

All the women had a mental health diagnosis at the time of their entry to the service. Of note, is that six of the women had more than one diagnosis.

Diagnosis (At time of entry)	No.
Depression / mood disorder	5
Post Traumatic Stress Disorder	4
Borderline Personality Disorder	2
Eating Disorder	1
Schizophrenia	1
Dissociative Disorder	1
Alcohol / drug dependency	1

Key point

- Many of the women had more than one Mental Health diagnosis at time of entry to the service.

The children

The women who have used the service have 15 children between them, and 1 unborn.

Seven of these children lived full time with their mothers and six in part time care. The following chart gives an indication of the children's ages and if they were living primarily with their mother when she moved to Mersey Street.

Women	No. of children	Children living with Mother full time and their ages	Children living mostly away from Mother and their ages
1	4	1 @ 7months	1 @ 7 1/2 and 1 @ 5 1/2 years Teenager
2	1		1 @ 5years of age
3	3	1@ 8years, 1@ 3years	1@ 12years
4	2		1@ 3months, 1 @ 13 months
5	2	1 @15years and 1@12 years	
6	2	1@6years	17year old with grandparents
7	1	4years	
8	Unborn		

Children not living full time with their mothers were primarily cared for by other family members such as fathers, and grandparents.

In five of the eight families, Child, Youth and Family Services (CYFS) were involved and in situations where the children were being cared by foster or extended families it was based on CYFS recommendations. A number of the mothers had care and / or access arrangements to their children at regular times, for example weekends. Two of the mothers gained full custody of some of their children after they moved into Mersey Street.

Three children were removed from their mothers under child and protection orders during their stay at Mersey Street. This involved two families.

Key Points

- Child, Youth and family services were involved with over 50 % of the families living at Mersey Street.
- With the exception of two situations, the children remained with their mothers during their stay at Mersey Street.

Agencies involved

On average at least five provider agencies were involved with the women at their time of entry to Pathways.

These included Primary care providers such as General practitioners, Newtown Union Health Service, Midwives and Plunket.

Secondary care providers that were involved included Eating Disorder Service, Richmond Fellowship Home-help, Department of Work and Income (DWI), Presbyterian Support Services, Counsellors, ACC, GFS, Wellington City Mission and Mental Health Consumers Union.

A range of HHS services have been involved such as Child and Family (CAFS), Personality Psychotherapy Service, TACT team and the Alcohol and Drug service.

Community Mental Health Teams included Central, South, North, and Maori Mental Health. Examples of agencies specific to the support of the children have been Barnardos, Open Home Foundation and Child, Youth and Family service.

The statistics do not reflect the number of people who may be involved in one person's care and support at any given time. Each agency is likely to have a number of staff involved with the family. For example: A care manager, a psychiatrist and psychologist or social worker may be involved from the one Community Mental Health Team.

Schools, support groups and /or family/ whanau are also often involved. It is not unusual for service users to have 13 –15 people present at a 'case' conference.

Key Point

- Multiple agencies and personnel were /are involved.

Demand for the service

It is difficult to establish the demand for this service, as consumers do not necessarily go through the referral process if it is known no vacancies exist. It is reported that there are a steady number of enquires about the service. It is usual for women to be seeking accommodation urgently, and due to average lengths of stay, waiting lists have not been an effective method in meeting needs as they arise.

Pathways are the only provider of supported accommodation in Wellington that offers a service specific to women and children under the mental health umbrella.

Key points

- It is difficult to establish the demand for the service.
- There are limited supported accommodation options for women and children in Wellington.

Summary

These statistics suggest mothers and their children are moving from their communities to access supported accommodation. Financial constraints and the lack of choices of supported accommodation may influence the women's decision to move to Island Bay over remaining in their own communities. It is evident that all the women have moved out of Island bay when they left Mersey Street. This is after in some cases considerable time being spent in Island Bay developing support networks, settling their children into local schools etc. More research is needed but it is possible to assume that the reason for this would be financial. Island Bay rentals are generally in the middle to the high end of the market and all of the women were beneficiaries.

It is significant that in over 50% of the families, Child, Youth and Family services were involved. This is relevant to issues raised in section two of this report.

The number of personnel working with or supporting these families is also significant. Time factors such as liaising with multiple agencies impacts upon the time available to staff to spend directly with the women. These issues are explored later in section two.

Section Two; Key Service Issues

This section outlines general key service issues based upon what the women have identified as their needs when accessing support services.

Areas covered are:

- Needs as Mothers first
- Needs of the children
- Risks of asking for help
- Advocacy
- Respite services
- Staff availability.

The information in this section outlines the many complex issues involved, and is the basis for final recommendations.

The issues highlighted here are of relevance to all providers that support mental health consumers who are parents.

Needs as Mothers First

The mothers state they are mother's first, then mental health consumers and that their children are their highest priority. In order to be successfully supported, they argue they must receive support as mothers, rather than 'level two mental health consumers'. This issue was consistently raised as being the most important to the women who were interviewed.

The women feel that the name of the service, 'Mother and Child' implies Pathways provides support to meet the needs of the mothers and the children. Pathways current service specifications relate to supporting Adult mental health consumers, therefore funding for child support needs are not currently included. This is a source of concern for the women.

It could be argued that Pathways provides indirect support to the children in terms of access to affordable housing, and supporting parents to access child related services.

Needs of the children

The women feel it is very hard to distinguish their needs as mothers, from the needs of their children. For them, support with childcare is a high priority. Pathways does not provide childcare and because of this the women believe their needs and their children's needs are not being adequately met. For example, they believe their children may need time out from them or that as a parent they may need a rest or sleep to ensure they have the energy to meet their children's ongoing needs.

Finding child-care to attend therapy and treatment sessions can be difficult. They find it very difficult to find services that a) can do this, b) that they can afford and c) can access easily.

Research carried out at the Early Psychosis Research Centre, University of Melbourne in 1993 summarises support needs as identified by mothers. The findings support the points raised by the women interviewed for this project.

'Children's needs as identified by their parents:

- ◆ Continuity of care and less disruption to school when parents are hospitalised.
- ◆ Explanation of events surrounding their parents illness.
- ◆ Someone available for the child to learn to trust and talk to about fears, guilt and confusion.
- ◆ Programmes where children can meet with other children.

Parents needs identified by parents:

- ◆ Continuity of relationships with supportive worker.
- ◆ Reassurance about the quality of their parenting.
- ◆ Quality care for their children.
- ◆ Suitable place for children to visit parents in hospital.
- ◆ Parent support groups.
- ◆ Understanding of mental illness in the community including their own families.' (Page 40, Children of Parents with Mental Illness, V. Cowling.)

Key points

- Mothers with mental illness want to be considered as a parent, rather than a 'mental health consumer'.
- The needs of the children and the needs of the women as mothers are closely related.
- Mothers feel that support services concentrate on their mental health needs and overlook their need for support with parenting.

Risks of Asking for Help

The biggest fear that the women face is that their children may be removed from their care. Many of the women stated that they live with a constant fear that their children will be removed by agencies that exist to provide support, such as Child, Youth and Family Services (CYFS). Some women have had their children placed in CYFS care when they have been unwell and have found the experience traumatic and distressing. The placement of the child can be due

to mainstream services, such as hospitals, being unable to accommodate children along with the mother, and no family or other options being available such as family.

They feel that if they ask for help they may be seen as not coping, and they may lose their children.

Not knowing what would happen to their children if they became unwell creates added stress, *"If I become unwell, who will look after my kids?"*

Childcare is often difficult to find and access in times of emergencies. CYFS will provide accommodation for the children but the women state they fear that CYFS may never return their child and therefore are reluctant to request help.

Agencies such as Barnardos can provide childcare, however the children need to be transported to childcare facilities and there is a cost for the service.

Women become concerned that they may overuse family and friends to look after the children. If they have moved a distance from their support network it can take time to develop new ones.

Key points

- The women are fearful of accessing some support services for fear of being seen as not coping and having their children removed.
- Existing childcare facilities can be expensive, difficult to access or not suited to needs.

Advocacy

Women find dealing with some agencies stressful. It is felt that stigma and discrimination toward Mental Health consumers is a primary reason for this.

They would like Pathways to take on an advocacy role with organisations where discrimination occurs. This may include practical support to access legal advice or for second opinions if a mother's ability to parent is questioned. Women feel they need to be able to trust Pathways.

Positive comments were made about the advocacy role that support workers had given, especially with DWI and CYFA. *"I feel the staff have been my people, when it comes to them and us, they have been one of us".*

Key Points

- Stigma and Discrimination toward Mental Health consumers who are parents exists.
- The women would like practical support and advocacy when dealing with large organisations.

Respite

Time out, in the form of planned respite is not easily accessible for the women. Currently there is no planned respite service that can occur in the persons' home and options for mothers and children to stay together are limited.

Planned respite services are often provided in places where other people live. There is seldom any provision for young children who may therefore cause disruption to residents who live there. This creates stress for mothers who would like to access respite to prevent a crisis but know care of their children will be problematic. This is especially a problem at times when they would like their child to remain with them, for example, when breast-feeding.

The women felt planned respite within their home would be a preferred option. This could either be in the form of the mother and children remaining together at home with support or someone caring for their child while the mother went elsewhere.

Sleep and time out were identified as needs that could prevent crisis situations occurring.

Key Points

- Current respite services do not cater for mothers with children.
- Respite that ensures the children can stay in their own home is the preferred option to ensure consistency for the children.

Staff Availability

Currently the mobile team is staffed from 8.30am until 7.00pm, Monday to Friday and 11.00am until 3.00pm on weekends. The times allocated to Mersey Street women are negotiated between the support worker and individual residents. Support workers can support up to 13 consumers per week at various support needs levels. Support time allocated is determined by the support needs level of the person. For example level one Home-based support equates to three hours per week, level two five hours per week. The women feel that their needs would be better met if the amount of support available was increased and was given at times when they felt they most needed it, such as getting children to school in the mornings and preparing evening meals. The women would also prefer the support to be more flexible. *"It would be better if the times were more flexible, more support available when it is needed and less when it is not"*.

Other comments included:

"Sometimes it feels like we are fitting into support workers time rather than our own time. We need flexibility, opportunities to tackle things when we feel at our best".

"We need practical help with things such as meal preparation, housework, and shopping, getting kids to and from school."

The staff agree that support being available to the women when they have their greatest needs would be better, however current caseloads and hours of work make this difficult. It is difficult to accommodate mothers changing priorities, for example when a child is sick, a mother needing sleep or changing appointments. Workers schedule all their clients in advance to ensure that everyone gets the time allocated to them. A more flexible service would require changes to current caseloads and contracts.

The current service description (Health Funding Authority) for, Residential / Support for Independence level two states 5 to 15 hours support per week is to be provided, which allows for flexibility. On average 10 hours per week is provided in line with Pathways guidelines. This includes face to face contacts,

transport, meetings and record keeping etc. Pathways have developed these guidelines for time in line with what is affordable to provide.

The staff believe that the women at Mersey Street often need more time allocated. It can take more time to liaise with multiple agencies or people, meet the transport needs of the family and to assist in the problem solving and decision making that may arise on a day to day basis.

Transport needs are often a priority, only three of the eight women had their own cars and accessing public transport with young children can be difficult and expensive.

Key points

- Mothers want a flexible service that can provide support when they feel they need it most, such as early morning and evening.
- Current staff caseloads and terms of employment restrict staff in providing a flexible service.
- Lack of independent transport creates problems.
- Current HFA service descriptions and funding do not reflect the unique needs of the women and their children.

Summary

Effective services focus on the needs of the people. In support services generally, there has not been careful consideration of the needs of mothers with mental illness and their children's needs. Mersey Street is a service that has been running under a mental health umbrella, but housing, poverty, single parenting, the needs of the children, employment and recreation are all aspects of the bigger picture that affect these families. The women have highlighted that their mental health needs are only a small part of their over all needs. It seems therefore that service development needs to be explored under a wider context than just mental health.

The fear of accessing existing services has impact when looking to better address needs. Due to the large number of organisations often involved, more co-operation and collaboration between agencies is needed. The issues are too complex for one organisation to address on their own. The women's fear

of some of these agencies however may limit the effectiveness of a collaborative approach.

The women state their children are their highest priority, and so they are unlikely to access services for themselves without first feeling secure in knowing their children will be well looked after. If it means placing their child with strangers or agencies they do not trust, mothers are unlikely to access time out for themselves.

In instances where the mother identifies the need for time out from the children or herself, it would be ideal that the children either remain in their familiar home environment or they stay with care givers that are known and trusted.

The current service descriptions that the Mersey Street service works to are designed for people without children and problems arise when attempting to use them in their current form as a guideline for service delivery.

Service descriptions outline the support that the Health Funding Authority is purchasing and at what price. If the Health Funding Authority chose to develop service descriptions that took into account the unique needs of mothers (or parents) and the needs of their children funding may then become realistic to allow for greater flexibility in the way services are delivered.

Section Three; Pathways

This section explores issues that are specific to Pathways and the service that is currently provided at Mersey Street.

Areas covered are:

- Absence of childcare policy
- Roles and Responsibilities
- After hours support
- Staff characteristics
- Properties
- Financial issues
- Perception of Service

This section includes solutions to the issues suggested by mothers and staff.

Absence of childcare policy

There are currently no policies or guidelines within Pathways relating to childcare.

The staff have identified the need for policies that can give guidance to decision making for everyday situations such as transporting children to school, and supervising children while the mother does the shopping.

Needs for Contingency Plans

Stress could be alleviated if there were clear contingency plans agreed to by the mothers that were in place prior to the onset of acute physical or mental illness. These would need to include situations that can arise outside of the mobile teams working hours and when support during the night maybe required. For example, a sick child needing medical attention and siblings needing to be cared for at home.

Key point

- Lack of clarity and policy makes decision making difficult for staff and residents.

Roles and responsibilities are not clear

The women feel unsure of the roles of the various people supporting them and how these people relate to each other, for example,

"There is a lack of clarity regarding responsibility and accountability between the support worker, mental health worker etc. What are everyone's roles?"

One woman stated that staff seem to have discretion as to what needs are supported. She said she found this disempowering because it felt inconsistent and unclear.

The staff agree that clarity of the roles and responsibilities of support people is needed. This would assist the women, the support workers and the wider community to ensure needs are met by the most appropriate person as well as reducing confusion that can arise.

In very rare occasions, children are removed from the mother's care. In these situations staff can be faced with the dilemma of wishing to respect the rights of the mother, the need to protect the child and knowing that separating a

child from its mother might also be harmful. In these exceptional circumstances the mother needs to know who will take what action, and who will advocate for them and/ or their child.

Key point

- Roles and responsibilities of workers and service users are not clear.

After Hours Support

A) Medical Centre

All the women access General Practitioners (GP). Pathways meet the cost of the GP visits for the women but it is not responsible for the medical or prescription costs associated with the children. After hours medical support is accessed through the After Hours medical centre in Newtown. Pathways pay for this service. It has been requested that a system be in place that the medical service knows to invoice Pathways, as at times there has been confusion and embarrassment when the medical centre is unsure of invoicing procedures.

Key Point

- Mothers have felt confused and embarrassed when accessing this service.

B) Hanson Street

Hanson Street is a Pathways residential complex that is staffed 24 hours a day. If the women at Mersey Street have any problems or concerns outside of normal working hours they contact Hanson Street for assistance or advice. The women report that they are unsure as to what support Hanson Street staff will provide. Transport requests, concerns over visitors to Mersey Street, accessing crisis or medical intervention and support are examples that were raised where there has been uncertainty in the past. One mother asked, *"Who defines the emergency, the client, or staff at Hanson Street?"* Staff at Hanson Street agree that it is not always clear what action they should take. They may not know the caller or have the resources available to provide the support that has been requested.

The women also identified that not knowing the staff at Hanson Street can make calling for support difficult.

Key points

- It is not clear what Hanson Street staff will provide to Mersey Street women.
- Resources may not be available to ensure an immediate response to requests.
- The women may not know staff at Hanson Street and maybe reluctant to access their support.

Staff characteristics

Comments from the mothers regarding the support workers were positive.

One woman made the comment,

"The front line staff are great, they develop good relationships, they are helpful and they like children".

Suggestions made were that the women would like to see staff dedicated to the Mother and Child service, with one request asking for staff to be located on site.

In the past there has been one dedicated worker at Mersey Street, but this raised issues of burn out as they managed their other Home based support case loads. When conflict between residents arises, staff can feel that having different staff supporting the women is positive as it ensures individual support can be given.

The women feel they need and want consistent staff working at Mersey Street to ensure emotional safety, in terms of trusting and regular relationships for their children. They would like the staff to have expertise and experience in dealing with or being around children and families. An essential ingredient that they felt made for a 'good' support worker was that *"they like children."* Having support staff that accepted and believed they can be capable mothers was important. One woman stated

" It is easy to feel undermined as to what you can and can't achieve, we need acknowledgement and acceptance of that. It can feel like support workers are against you rather than alongside you and that can feel unsafe".

Other desired qualities included sensitivity and an understanding of their medical and mental health issues.

Some of the woman stated they felt male staff were inappropriate, given that it is a women only service. Currently all staff at Mersey Street are women.

The inconsistency of weekend staff was raised and that at times it felt like the weekend workers were 'different' and not part of the team. It appears that the recent appointment of two female support workers to work weekends has helped to alleviate this concern.

It was acknowledged that having a woman from the Mother and Child service on the interview panel for new staff appointments was a positive step taken by Pathways.

Key points

- Ideal staff considerations as identified by the women are:
 - Consistent staff
 - Staff with experience of children
 - An understanding of the unique issues parents face
 - Female staff
 - Weekend staff to be part of the team
- Participation by mothers in staff recruitment is seen as positive.

Properties

Location

The close proximity to the beach is seen to be positive, especially for the children. The close proximity to the base of the Mobile team is also identified as being convenient for the staff, as it can alleviate problems associated with having access to cars.

As indicated in section one, the location of the service requires consideration, as the women are not originally from Island Bay nor do they remain living in Island bay. Financial constraints are suggested as a reason for this.

Key points:

- The close proximity to the beach is seen as positive.
- Mothers and children do not remain in Island Bay after exiting the service despite having established support networks.

Communal living verses Privacy

The three houses are located on one property with no fencing between them. This layout is to promote interaction and a sense of 'community'. Some of the women feel this open planned living can be problematic. The open style, 'support each other' concept raises questions for the women.

"When does a neighbour become a support person?"

Situations have arisen that have left the women fearful and concerned. When someone is unwell, the neighbour may be aware that something is not right, but does not have any information that may a) alleviate fears or concerns and b) enable them to understand the situation and be supportive. Staff can not disclose personal information and can therefore feel limited in alleviating fears or concerns.

Other resident's visitors, especially men, can at times cause anxiety for the women. The women also commented that at times it *"can be difficult dealing with other people's kids, especially if you are not feeling 100%"*.

The women have proposed fencing between the properties. This would allow for contact but create a physical boundary that could ensure privacy and would prove helpful for the children to establish clearer boundaries between each house.

Key point

- Open plan layout of properties can be problematic

The environment

The provision of a safe environment for the children is a high priority of the mothers interviewed. The new gates preventing easy access to the street is seen as a positive step taken by Pathways. It was suggested that more consultation with the mothers is required for ensuring the environment is

child-safe. Steps are needed such as safety locks on cupboards and the removal or identification of poisonous plants in the garden.

The houses are fully furnished by Pathways. Some of the women felt this was very useful, however they also feel that this does not encourage them to begin to purchase items for when they move on. There is limited storage facilities for those women who do bring their own furniture. Women who have left the service found the reestablishment grant of \$1200.00 from DWI limiting in meeting their needs. One suggestion is that not all of the houses are furnished and people are encouraged to bring their own belongings. One woman raised that she felt that the houses were institutional as furnishes between the three houses is very similar.

Key Points

- Environments that are safe for children are a high priority for the mother's.
- For some of the women, fully furnished housing removes options and possibilities for progress.

Repairs and Maintenance

Mothers and staff expressed frustration at the present procedure for replacing and requesting household items. The mothers reported that it felt like "*jumping through hoops*" to get things repaired, replaced or purchased. Staff feel that they can be in placed in a compromising situation with regard to requests for expenditure. On the one hand they are the individuals' support person, encouraging them to raise issues that concern them and/or to ask for assistance. Requests for expenditure are made to Pathways management, however, it is the support worker who informs the mother if requests have been accepted or declined. Dealing with the women's disappointment of things being refused is stressful, and the support worker can feel they are put in a difficult position.

It is reported by staff that a lot of time is spent managing 'landlord' type issues, for example; liaising with community housing, organising keys, collecting items from shops, organising painting and repairs. It was recalled

that when Pathways in Wellington had an allocated property manager these things did not appear to be so time consuming.

Light bulbs were raised as an ongoing frustration. The houses require a certain type of bulb that is more expensive than regular light bulbs. When cheaper and affordable light bulbs are used, the system shorts and an electrician is required to repair it. The electrician has also stated that the current wiring is not great and has recommended it be replaced.

Key points

- Current procedures for requests for repairs are time consuming and can be the cause for conflict between support worker and mother.
- Staff spend time dealing with landlord issues resulting in less time to spend with the women.
- The current electrical system is problematic.

Financial

Pathways can take responsibility for paying bills such as rent, power etc if the women wish. Some of the women find this very helpful. It alleviates the stress of budgeting and makes day to day living easier. All of the women stated that surviving on a benefit is difficult. They would like more information as to what the Department of Work and Income (DWI) will and will not provide. One woman stated her benefit entitlements were reduced when she moved to Mersey Street, something she had not been aware would happen. Pathways Trust liaises with one DWI person on behalf of residents. Some of the women have found that this person was not easily accessible to them.

Key Point

- Some of the women are uncertain of their level of entitlement from DWI.

Bond

The women do not pay a bond. This has created difficulty for Pathways in a couple of situations where women have left Mersey Street without notice. Pathways then became responsible for cleaning and furniture removal costs. The women spoken to were not adverse to the idea of a paying a bond on

entering the service as long as DWI could support this. The payment of a bond would more accurately reflect current rental practices in the community.

Key Point

- No bond can leave Pathways to finance cleaning and removal of property if a person leaves the service suddenly.

Perception of the service

The woman felt it was always clear to them or community agencies that Pathways does not provide care of the children. When they approach other agencies requesting support they are often met with the response that "it is Pathways responsibility". Debates, and information seeking then follows to confirm that "Pathways does not do it."

Pathways are to be commended for having identified the special needs of women with children and for taking the initiative to provide a specialised service. Public perception at times is that Pathways meets all needs as they arise. Clear information distributed to other agencies would explain what is and is not provided.

Key Point

- Public perception of the service is that it provides more than it does.

Summary

This section has highlighted some of the issues that can arise on a day by day basis at the Mersey street service. Of note is the difficulties women can experience in dealing with other people's children and when neighbours are unwell.

There is a need for clear information on roles and for policies and procedures. Policies and procedures provide guidelines to staff and consumers. Given that the mothers state that their children are their highest priority they need to know what course of action will be taken if they become unwell etc. Policy and procedures are guides that provide a structure for developing individual action or contingency plans.

The statistics indicate that many people are likely to be involved in the women's lives. These people, within and outside of Pathways, may have differing theoretical frameworks on which they base their practice. They may have different goals, different ways of working and different values. There may be suspicion between workers as to each other's roles. Roles and responsibilities clearly defined can ensure that people are not duplicating services. It can also ensure responsibilities are not passed between agencies, and that the families at Mersey Street receive the services they are entitled to.

If the women are clear as to what each person or organisation's roles and responsibilities are, they are better informed and therefore more empowered when seeking assistance.

The provision of a service outside office hours is to ensure the women have 24 hour access to support. If there is clarity as to what support is being offered requests are more likely to be appropriate. Clarity as to the role of the service would ensure women are supported to access other agencies such as Parent-line, Crisis Intervention team etc. that are more appropriate to provide support.

It is also concerning that women may not access support when it is required because they do not know the staff at Hanson Street.

RECOMMENDATIONS

The challenges for the women and Pathways as the provider of this service are complex. It may appear that the challenges are overwhelming and it would be unrealistic to expect that one agency can address all the problems that have been highlighted. Policy makers, purchasers, service providers and service users will all need to explore ways of ensuring the needs of mothers (or parents) with mental illness and their children's needs are met.

This review is based on a small group of mothers and a service that is delivered locally. However, mothers living with mental illness are not a local phenomenon. There appears to be very little New Zealand research into the needs of this group. Statistically it is difficult to identify how many parents and how many children are affected in New Zealand, or more specifically, Wellington.

In the implementation of any of the recommendations of this report parents who are mental health consumers must be involved in the process.

Appropriate consultation with Maori as Treaty partners must also take place.

Location of Service

It is acknowledged that services specific to women who are parents and mental health consumers are needed. The issues and challenges they face are, at times, different to consumers who are not parents.

A level two residential service however may not be the most effective way of delivering a service. The evidence contained in this review suggests families would be better supported if services were provided within the community in which they live.

It is therefore recommended that Pathways considers

- Disestablishing the current level two residential service at Mersey Street.
- Exploring ways of providing flexible support to women and their children within their own homes.

- Retaining the current properties at Mersey Street and providing a respite service to mothers and their children. This could include emergency short-term accommodation.

The benefits of this approach would be

- Women and their children would not be faced with moving from current support and social networks.
- Pathways would cease to act as Landlord.
- It would compliment the regional move toward the Community Support Work Model.
- Women and their children would retain independence and avoid effects of institutionalisation.

The benefits of providing a Respite Service

This review has highlighted the lack of suitable respite facilities for women and children. Planned respite services are recognised as a positive intervention strategy that can alleviate stress and prevent crisis situations occurring.

Mersey Street being retained as a respite service has the following advantages:

- The close proximity of the beach to Mersey Street has been highlighted as a positive aspect of the service.
- The properties are already fully furnished and some attempts have been made to address child safety.
- The houses are big enough to accommodate various size families.
- It is located close by to other Pathways services including the mobile team.
- It is easy to get to and to find.

Considerations for Service Delivery

Pathways needs to explore ways of providing support to women and their children that results in them retaining the benefits that Mersey Street has offered as well as further addressing their needs.

This would include:

- Systems where the stress of bill payments was removed through the use of direct debit or local budgeting agencies.
- Support Worker staff being able to provide a flexible service of support that goes over and above current Support for Independence service descriptions.
- Support Worker staff working with these families to have reduced case-loads with recognition of the time that is spent liaising with many agencies.
- Transport to and from families by workers to be available, acknowledging the wider geographical area that will need to be covered.
- Support Workers to work flexible hours to ensure support is given when it is most needed, such as meal times and getting children to school.

Cost of providing the service differently

A cost analysis has not been included in this review. The challenge for Pathways is to support women in their own homes, at the level they require, within current funding constraints.

Development of service descriptions that are specific to the unique needs of women and their children is recommended.

Co-ordination

'Service co-ordination for individuals can be particularly challenging when the individual uses the services of more than one agency. Careful planning and clarity about who is responsible for meeting each of the individual's needs, and about how the agencies involved interact on behalf of the individual are required.

There are a number of ways in which responsibilities and interfaces can be arranged, but how it is done is not as important as the fact that it is done; there may be no gaps for clients to fall through.' (Blueprint, page 51)

The statistics in this report demonstrate that the women interact with multiple agencies. Clarity between these organisations is essential.

It is recommended that Pathways as a lead provider in this area consider:

- Allocating time and resources to facilitating collaboration and co-ordination between services that support women and their children.
- In conjunction with Adult Mental health services explore Support Workers taking on the role of care- management. This would allow the clinical expertise to be focused on intervention rather than time spent co-ordinating the multiple personnel.

Accurate Information

It is recommended that an information package be developed for the women accessing Pathways services that outlines:

- What support is provided
- Roles and responsibilities of those people accessing and providing services.
- Location and contact people within various support agencies.
- Location and contact people of support services for children, including toy libraries, childcare services etc.

It is suggested that this task be undertaken jointly by a consumer of services and a Support Worker. Often the process of exploring roles, responsibilities and collecting information is in itself useful in encouraging agencies to work together. The information collected and clarified could then be made available to other providers and service users.

Roles and Responsibilities

Pathways are recommended to explore the roles and responsibilities of staff working with mothers and their children. This would need to incorporate the underlining values and core beliefs of the service. Once Pathways is clear on this, exploration of the roles and responsibilities of the multiple agencies involved could be facilitated. This would ensure services are not duplicated. It is also recommended that the mothers explore their own roles and responsibilities in relation to being service users.

Support for the Children

This is an area that requires further consideration. Support for the children extends beyond child-care, and traditionally Pathways has not been involved with caring for or providing support to the children.

It is recommended that Pathways consider providing support to the children and the mothers.

An option would be for a joint venture between Pathways and an agency designed to support families. This could result in sharing of resources to include support for the children. Consideration to the women's perception of the agency is essential given that fear prevents women accessing services. In conjunction with other services, it would be beneficial to explore current practices used in Australia in an attempt to meet the needs of the children and the parent.

Hanson Street After hours Support

Consideration to the way in which After Hours support is given is required. If Hanson Street is to continue to provide after-hours support to the women, staff there also need to spend time exploring their roles and responsibilities. Contingency plans that can be put in place are needed when Hanson Street staff are unable to respond.

Development of Policy and Procedures

The lack of policies and procedures surrounding the Mersey Street service results in uncertainty. It is recommended that staff and the women receiving a service be assisted to develop policies and procedures. Issues surrounding childcare and support require the most urgent attention. Pathways Quality Manager would be the most appropriate person to facilitate this process.

Properties

It is recommended that Community Housing be encouraged to fence the properties even if the service changes its focus to respite. Fences would provide a boundary and privacy between the families but would not detract from the ability for the women to remain in contact with each other. Community Housing should be encouraged to address the problematic electrical system.

Financial

A breakdown of the entitlements the women can access from DWI be made available to women who are parents. This information could then be shared across agencies that support parents.

Staff

Dedicated female staff that have relevant expertise with children are desirable. Dedicated staff could also develop understanding of the unique issues the women face and could develop effective relationships with the multiple agencies involved.

Training opportunities regarding women, mental illness and children are also recommended enabling the staff to further develop their skills and thus develop a sound knowledge base that could be a resource to other services.

Wider Issues

The needs of parents who are mental health consumers are unlikely to be met by one service alone. Issues associated with poverty, housing,

employment, social relationships, recreation and leisure pursuits, and societal attitudes to single parenting are all areas that impact on an individual's wellbeing.

The issues raised in this report are a starting point to generate discussion highlighting needs and finding creative solutions. It is recommended that the issues in this report be shared with consumers and service providers as a starting point for co-ordinated and effective service development. KITES is a suitable service to present this information and open the discussion.
