

Citation:

Bradley, A (2020) A Qualitative Evaluation of The Nelson Trust Griffin Programme. Other. UNSPEC-IFIED. (Unpublished)

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A Qualitative Evaluation of The Nelson Trust Griffin Programme

Final Report

February 2020

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Acknowledgements

This research would not have been possible without the stories of bravery, honesty, healing and strength. Thank you to all of the women who took the time to speak to me, you are all inspiring and I am honoured that you shared your experiences with me.

A special thank you to all of the supportive and dedicated staff who shared their stories with me. You are changing lives and you do such a wonderful job, in such a loving way. You are all a credit to your organisation.

Thank you to Leeds Beckett University and The Nelson Trust for funding this research project.

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Evidenced-Based Trauma Specific Practice: The Griffin Programme

Recognising and responding to the needs of women who have experienced trauma does not always promote healing from trauma. To support healing, services should provide an approach characterised by both trauma-specific and trauma-responsive programmes, within a trauma-informed approach and environment. However, it is essential that the setting is capable of supporting healing and positive long-term outcomes for women (Jennings, 2004). A trauma-informed approach alone, simply supports services to recognise the role that violence and trauma plays within the lives of people seeking support for addiction and mental health (Harris and Fallot, 2001). However, the combination of an evidence-based trauma-informed environment and a gender and trauma-specific programme, have been identified as an emerging international best practice approach, when working with trauma (Jennings, 2004; Prison Reform Trust, 2013; Petrillo, Thomas and Hanspal, 2019).

According to Najavits (2007), trauma-specific programmes vary in terms of their approaches and objectives. For example, some are past-focussed, present-focused or combinations of the two. Present-focussed approaches consider an individual's current coping mechanism to support better managing of triggers and behaviour. Whereas past-focussed approaches concentrate on an individual's trauma story, to highlight the impact that their experience has had on their emotions, triggers and thinking. Although there are diverse variations of treatment models available as inspiration (SAMSHA, 2014), the Griffin Programme was designed from an evidence-based research project (Tate, 2015) which focussed on how to improve support services for women with histories of sex work, and the complex patterns of needs that are often consequential to such experiences.

The research conducted by Tate (2015) highlighted the unique and overlooked multi-faceted needs of sex-working women within residential drug treatment. The research highlighted significant challenges for sex-working women to disclose their histories and in turn, have their needs understood and supported. For example, the research highlighted that at least half of the women interviewed experienced negative experiences of disclosure, which highlighted an additional layer of trauma for sex-working women. Ultimately, this research indicated that this resulted in the needs of women in recovery not being met. The results further highlighted the pervasive aspect of shame which exacerbates the sexual trauma experienced by women with sex-working histories.

Several recommendations were produced from Tate's (2015) timely research project. Notably, the recommendations encouraged services to sensitively allocate support staff where sex working women would feel safe and understood to encourage reduced shame in disclosure. In addition, this research

indicated that gender-responsive provisions should be made to combat barriers experienced by women with sex-working histories and that there was no trauma-specific safety-based group programme which women with such experiences could attend.

In 2017, Kirsty Tate (Learning and Development Lead at The Nelson Trust), designed and developed the nine-week Griffin Programme. The combination of past and present focussed approaches supports women to recognise their past in their future behaviours, to promote reconnection of the body and mind following sexual trauma. The programme is a triad of theory, experience and practice to provide a meaningful and transformative intervention for women. The theoretical underpinnings of the programme include addiction theory, trauma theory, and relational theory, to acknowledge genderspecific adversities within a holistic health model (Bloom and Covington, 2008; Covington and Bloom, 2007). The Griffin Programme is one of the first evidenced-based trauma-specific programmes to provide a safe and relational environment, where women with sex-working histories can recover through their shared resilience, empowerment, honesty and strength. The first cycle of the Griffin Programme takes place while women are in residential rehabilitation. Once the women have resettled back into their community, they are then able to come back onto the programme for a second cycle. This process enables women to revisit some of their learning once that they are living outside of residential services. Women are encouraged to return to the Griffin programme for a final third cycle, should they need further support within their life outside of rehabilitation services, where they will put the learning from the programme into practice. Following this, women can engage with the Phoenix programme. This is an extension of Griffin and is a follow-up 10-week intervention for women in the community, who still experience the effects of sex working.

Aims and Objectives of the Griffin Programme Evaluation

The evaluation used a qualitative methodology and aimed to hear the voices and experiences of Griffin programme participants, facilitators, and stakeholders, focussing specifically on the quality of the programme, the impact of the programme and potential areas of improvement.

Using semi-structured interviews, the evaluation aimed to identify the nuances within trauma-specific evaluations to understand the impact of such interventions on staff training, challenges experienced, and support provided.

Using post-programme focus groups, the evaluation aimed to examine participants experiences of the Griffin Programme to explore its value and limitations from the perspectives of women who have completed at least one of the nine-week intervention.

Evaluation Methodology and Analysis

This research was given ethical clearance through Leeds Beckett University. The Nelson Trust provided organisational consent and access to services.

All of the women and staff were provided with information sheets, informed consent forms, informal discussions about the research and full debriefs. All of the respondents were given the opportunity to see full transcriptions and either fully withdraw from the research or retract any information provided in the interviews. Staff were asked to create a pseudonym to avoid vicarious recognition.

The purpose of the research was to hear the experiences of the women who are currently participating/have participated in one or more cycles of the Griffin Programme. Furthermore, staff experiences were collected to explore the facilitator role and the specialism involved with managing and delivering group work within the programme.

Interviews with Women: Focus group interviews were conducted with two groups of women. The first focus group included four women who had completed at least one full cycle of the Griffin Programme who called themselves the 'Veterans'. The second focus group included three women who were currently completing a cycle of the Griffin Programme.

To draw the focus group interviews to a close, all of the women were asked if they would like to create a collage to represent their experiences of taking part in the Griffin Programme.

Interviews with Staff: All five staff members who took part in the semi-structured interviews had a variety of experience with the Griffin Programme. Some had direct strategic involvement in the design and development of the programme, and others had previously facilitated or were currently facilitating cycles of the programme.

The interview data was analysed using thematic analysis to reveal the themes which are discussed in the report below.

Limitations of the Research

This research is a small-scale qualitative study. As such, it provides a platform for individuals who have direct experience of the programme and is therefore limited in its range of participants. It was beyond the scope of the study to conduct a longitudinal and quantitative study. Therefore, the findings provide short-term outcomes of the programme. Future research is required to conduct a full

evaluation of trauma-informed, trauma-responsive and trauma-specific organisations, utilising a mixed method longitudinal approach to identify long-term outcomes for justice-involved women.

Hearing Women's Voices: The Griffin Programme Experience

All women interviewed agreed that the Griffin Programme was transformative within their healing journey. In interviews, women discussed their experiences on the programme, the support they had received from the staff as well as some of the challenges and personal journeys they had faced. The key themes that emerged from the data focussed on 'Shame, Association and Healing', 'Innovation within the Programme', 'Interaction with Staff' and 'Areas of Growth'.

One of the biggest successes to derive from the research is The Nelson Trust's ability to recognise and understand trauma behaviour in an advanced, reflective and responsive way.

"Cos what does trauma-informed mean? It means it gets dealt with in a way which is kind and loving and understanding and you're hearing people that are kicking off and seeing beyond that and seeing it not just as an anger thing but actually that's a trauma response and I'd never known anything like it. Yeah, I think it's quite incredible".

"It feels like it's healing a wound that I didn't even know that I had or a wound that I knew that I had but didn't even look at".

All the women talked about this programme being a safe space. This safe space was crucial, for women to be honest and share their lives with others, to fully participate in the group discussions and to promote healing, strength and an environment where trust, respect and love could flourish. All women discussed rules and boundaries. As women were sharing a recovery house, they considered a rule whereby they could not enter a relationship while they were in recovery and this would result in potentially negative consequences. However, in the programme, the staff recognise the likelihood of women entering relationships and instead of consequences, they look beyond the behaviour and work directly with the woman.

The relationships developed within the group profoundly impacted on the women's engagement, as they all agreed that they felt seen and heard by the staff facilitating the group. The majority of women agreed that through the safe space created, encouraged women to be truly honest with themselves and the group.

"Yeah, because you couldn't talk about it in any group because you're given a boundary contract and that sort of thing. They don't punish you; they try and work with you. You don't get kicked out or anything but, yeah, Griffin's the one place where you can talk about that stuff, 'cos generally women who've got sex working history

easily get sucked into relationships with the sex because it's the only thing we know. It's almost like it's ingrained in a way to engage in relationships like that to get a bit of validation and a bit of self-esteem".

Although the staff work diligently to evoke safety in all aspects of the programme and environment, the recognition of trauma-responses and behaviour is also embedded within their approach.

Shame, Association and Healing

All of the women shared their feelings of shame. They all stated that this had held them back from being honest in traditional rehabilitation or recovery women's groups. However, through shared experiences and associating with other women who have sex-working histories, this promoted a healing, safe and honest environment.

"I mean, I've blurted things out, and I've felt full of shame and I've thought, 'Oh my God. Can't believe I've just said that!' and then they'll go, 'You ain't alone! We've done that too!' and all of a sudden that shame is lifted and you think 'Ahhh. Okay. I'm glad I'm not the only one".

"It's like you get vulnerable and then everyone else meets you there, and we all hold that vulnerability together".

"Because you never talked about anyone you think that you're the only one and that carries a lot of shame. Especially the topics that we talk about. For me it was massive, really massive hearing not just one, not just two but three other women identifying with this stuff that I've never been able to tell anyone. Stuff that literally makes me curl up in shame because I feel disgusting. I feel dirty but actually speaking to women who'd had the same experiences as me, it's sort of like, okay. It's not just me and I think that's invaluable. Absolutely invaluable".

"I felt so disgusting and so bad about myself I just literally wanted to unzip my skin and throw it on the floor and it was like, almost like shame and it was horrible, and I went in there and literally I'd kept all that feeling all day and not knowing what to do with it anywhere else, not wanted to share it with anyone and I just kind of broke down and the other women in there were just so amazingly supportive and I was allowed to get those feelings out, say what it was without feeling all that shame and it was like just shedding off a load of bricks that I'd been carrying around with me all day".

The women all talked about individual and shared experiences of shame within the programme. However, the connection between identifying with others, and being identified with, directly reduced feelings of shame for all women. This connection between shame and they described as invaluable and transformative in their healing journey.

Innovation within the Programme

All of the women shared their highlights of the programme. This theme focusses on some of the areas of good practice within the Griffin Programme, identified by women

"It really is a full package, down to the programme content and the staff who deliver it, it's the room and the space, the welcome, the silence, the holding with love and the bean bags".

"It's taught me how to have a lot more compassion and love for other people, therefore you "can't help but to start giving that to yourself. And the stuff that I've learned here continues to help me".

"It just feels like it's intimate on another level and I think that connection between a group of women is so powerful... there's something so powerful about having, maybe, been hurt by men and looked for healing in men, misguidedly, to then find it in a group of women, there's something really powerful about that".

"I've never been in a group before where you have an emotional bond. I quite like the word 'transcend', I feel like this group transcends in every way. It's just deeper and further, and it is holding a space of love".

"I loved the first session where people who'd been through Griffin came and told us about what they'd got from Griffin, so that was quite reassuring and powerful".

The innovation within the programme design and the staff involved supported opportunities for growth, reflection and healing.

Due to the honesty and trust built within the group, women felt relational development, respect for one another and love as the programme developed. Love is not terminology that many people readily associate with recovery or rehabilitation. However, the Griffin Programme has developed an environment where healthy relationships between women can flourish.

Interaction with Staff

All of the women considered the impact of the Griffin Programme facilitators. They all agreed that they felt like the staff went the extra mile to support them. Half of the women discussed the approach at The Nelson Trust was completely different when they compared it to previous experiences in alternative recovery services.

"You can just tell by the way that she talks, you know. She doesn't share any experience, but it's almost like you feel like she's had the same experiences or similar because she just gets it on a level that you almost wouldn't be able to get it if you hadn't experienced something similar".

"I find that the relationships are much more personal here and it's not just like, 'right, it's five o'clock and I've finished work, so I don't care about your problems anymore', it was really like, yeah, personal relationships and if you were feeling a certain way it's not so strictly regimed and I think that really helps 'cos it's real people it's not just somebody in a role in a job. It's somebody who's got experience and then doing it because they have so much passion for this stuff. And I think that really makes a difference it's not just a job and a role. We're not like client and whatever; it's equal".

"On every level of this organisation, there are women not with just lived experience but that seem to really understand the importance of the process".

"If it wasn't for the staff that manage it and I think they're very careful as to what staff they get to facilitate it. Not every member of staff would be able to facilitate this group".

All of the women identified the strength in relationships and connection with staff. They felt respected and equal throughout their recovery. Moreover, they recognise the embedded culture and hierarchy within The Nelson Trust as understanding and women-centred. This further emphasises the advanced and successful implementation of being trauma-informed and trauma-responsive, as the women recognise the high standards of care and good practice within the organisation.

Areas of Growth

All women agreed that they would like contingency after the cycles of the Griffin Programme. Although the Griffin Programme allows women to take part in two cycles, the women in the evaluation stated that more could be in place once they have resettled back into their community.

"Yeah, I'd really like a WhatsApp group, and then you could literally post your 'Front page News' and share what has been happening".

"A drop-in group that you could go in, anybody that's gone on the Griffin programme, that there's like this women's group that happens once a week that actually when you need to... 'cos sometimes committing to a whole eight weeks it's not possible when you've got a busy life again, but if there was a women's group that I knew everybody had gone through Griffin, I would definitely go to that. I would definitely go to that from time to time".

The women highlighted two potential avenues for staff to consider. Some of the women discussed having a WhatsApp group which could be ran independently from The Nelson Trust. Alternatively, four women suggested holding a drop-in group for women who have completed the Griffin Programme and who are living in the community. They suggested having this in a more central location for ease of travel.

Women also discussed the importance of there being contingency plans for programme delivery if staff are unavailable due to sickness. In addition to this, women stated that some sessions had been scheduled on a day which they were booked on a day trip (outward bound).

"It has been a little bit bitty at times. It hasn't been an even flow down to staff sickness or it's on a Wednesdays when we have outward bounds every six weeks so there is sessions that we miss sometimes and it would have been nice for just a little bit more consistency with it so that we could get from there to there quicker".

To avoid any conflicts in schedules, alternative rearrangements should be made to re-schedule activities in lower priority to the programme.

Trauma-Informed Approaches

When considering the staff approaches, the design and content of the programme and the overall experience of the Griffin Programme, all of the women provided examples that complement the values of trauma-informed working. It is important to see the values within the experiences of women to contextualise the values and what they represent for women on a relational level.

Safety

•"In the group there's that extra kind of safety where it made it more safe and just the fact that I could tell them even stuff like that makes me feel a lot more safe. It just really felt you could talk about anything and that's really powerful".

Trust

•"I never thought I would be able to in a setting full of women who I found it difficult to trust as well, but the trust that was built in that room was amazing. The level of honesty that you get in there is just second to none really".

Choice

•"Griffin feels like a process or a journey that I'm an active participant in, as opposed to some of the other groups here where the group happens and I go along with whatever it is that week, but with Griffin it feels more like it is a journey, that I have choice in that I actively progressing along it and although it's been planned out and been done before, because it's my journey, it feels transformative".

Collaboration

•"I definitely feel collaboration in the group. I feel people want to help each other out".

Empowerment

•"Whilst we're discussing all this content and all this sticky like stuff, we also have a laugh. There's lots of humour in it and I just think it's amazing when you hear everyone's stories one hour and the next hour everyone is laughing and I think that that's really important because, yes, we have gone through some stuff and yes, we're still going through stuff but we can laugh at it and that was really empowering".

Collage Work



"There's lots of images of women at the top and you can see them smiling and they're obviously sharing something on there. The reason why I've put this camera on here, is that you to go back and almost have to take snapshots of things. It was like. I kept having a lot of memories and images of things. In the bottom there's that, sort of, darkness where you can't really see, it's a bit misty. The hand with the sand coming through is just the recovery journey. The words that I've put on is, 'the Magic starts here', because I do believe that Griffin is where some of the magic is. Bolder than ever, cos you have to be pretty bold. It [the programme] gave me the gift of self-belief. Confidence to be you because too few women seek help because of embarrassment".



"I've got the light bulb moment here. I just had dreams of being the best I could, to shine. With her help I realised what I could achieve. The scars only hold you back, emotional scars, I suppose, worth sharing, hopeful—I got that twice, cos, yes, why not? Keep on going, I have the power and I've realised I'm strong and capable of making a difference".

The collages created by women represent their experiences on the programme. All of the collages considered the notion of empowerment as either becoming hopeful for the future, stronger, more powerful or bolder. The collages further reinforce women's transformative experiences from taking part in the Griffin Programme.

Exploring Facilitator Perspectives: The Griffin Programme

Experiences

All of the staff interviewed attested to the high standards of training and support at the Nelson Trust.

All staff interviewed I had experience of facilitating groups, having strategic management and creative roles within the Griffin Programme. This section will consider three key themes raised within interviews with staff. The themes include: 'Programme Uniqueness'; 'The Role of a Griffin Facilitator' and 'Advanced Understandings of Trauma'.

Programme Uniqueness

The staff interviewed described how this programme differs from anything else they have facilitated previously.

"There's a fusion between the research and theory. So you've got the research and theory that underpins the programme. You've got the practitioner experience of the delivery, but you've also got the lived experience and I think those three components come together that drive forward a programme that people can really connect with...and I think there's something in those reciprocal relationships between the staff and clients, something in the connections like I said, the connections are honouring, empathic, they're kind because we believe, as much as women can... you know, women are very relational and women will diminish within their relationships and, it that is true, equally women can thrive in healing relationships and if you take that as a concept, is how relational can you be with the women that facilitates safety, trust and healing and I think that's really important". (Naomi)

"In the first cycle, they're in treatment. The second cycle they tend to have moved on and then all the stuff, the theory that they've learned suddenly becomes a practical, so they're out in the real world, they're meeting people, they're forming relationships, they're having sex maybe for the first time and then they're going 'Aaargh – the theory is coming up and I need some extra support.' So they come back for the second cycle and it's great for first cycle people to have people on the second cycle along with them

to go, 'this is my experience now, as I'm having it, in the real world', so it's a powerful thing to have both". (Charlie)

"So what it does, is keep them connected to that safe space because who in life do you go and speak to about sexual inadequacy or intimacy difficulties? These women don't have a space to do that, and that's the reason why multiple cycles were made an option.... I think the most anyone has ever done is three cycles. I believe we'd be creating a dependence beyond two really. We normally only agree three if there's been a trigger point that's occurred during the second cycle that we know that a third cycle can address. (Susan)

The women are encouraged to revisit the programme for multiple cycles, depending on their needs and triggers once they have left residential rehabilitation. It is evident that the staff have taken into consideration potential relapse and future triggers for women, to ensure that women always have a safe place to return to for additional support and healing. All of the staff interviewed highlighted that promoting safety and building trust between women and staff are crucial components for the success of the Griffin Programme.

The Role of a Griffin Facilitator

To be a Griffin Facilitator, staff considered the important values and skills required for the role at The Nelson Trust.

"I suppose more than anything... it's about giving these women their voice, their choice... so it's coming from them. There's a framework as such, but the women are doing all the work. So it's coming in for them, it's not me going 'You need to do this!' and 'You need to do that! And if you do that, everything will be fine'. It's not like that. It's built on the group as well. It's built on all of the women' experience, all of the women sharing together and the layers of trust that is built within that and it's quite impressive how much they seem to get into it quite quickly and build the trust.".

(Charlie)

"They haven't allocated a word to it but all the basic stuff like trauma-informed stuff, the passion, the love, the care, but the love of boundaries [laughs]. Yeah, the care. You're equal to them in that place so it's faith. Do you know what I mean? You don't have to have gone through it but you have this thing that you can't teach that lives within you". (Willomena)

"We don't dance around the edges with it; we're right in there. We talk very deeply about sexual experiences, the kind of humour behind certain situations, all that kind of stuff ... it's in there and the person I've got co-facilitating is not afraid to come there. I think that's what it is. You need to be able to go to those places with those women and be alongside them and to be able to hold the space I think is the other thing with it is. There's a saying somewhere around, to be able to be a good facilitator you need to be able to go into the darkness with them and I think that's what makes the people that I know so far that have facilitated Griffin have all had, for whatever reason... doesn't necessarily mean the history stuff... but the ability to go with them and be sideby-side with them... The thing about Griffin is that very few people can facilitate it because of the nature of the subject that we're talking about. You can't really train people to do it – that sounds like a strange thing to say - you've either got it or you haven't, kind of thing with it, because it's different from any of the other groups that we run here, some of the generic addiction groups or even the other trauma groups, it's very different. To have an all-female space that is safe enough for the women to be able to talk about the stuff that they need to talk about is a very unique environment for them and we've had some previous people who've come and facilitated and it hasn't really worked out". (Charlie)

"So someone who knows when to laugh at the right time, cry at the right time, hold space at the right time and just somebody — I don't want to get emotional — someone who isn't afraid to stand at the edge of somebody's darkness and just be there. Just be there. No judgement, no movement, no noise, no sound, no nothing. Just someone who has the ability to stand at the edge and understands what a true gift the women give you when they allow you to witness and doesn't do anything. It's like standing on the edge of a perfectly still pond and not doing anything to cause a ripple. Do you know what I mean? Someone who's not afraid of that". (Susan)

The staff highlighted multiple areas of specialism required to hold the space to provide safety for women to share with honesty. These skills are not aligned with having a lived history. Instead, is is essential that staff have the compassion and strength to sit side by side with women as they revisit raw emotion and trauma to support their healing journey.

Advanced Understandings of Trauma

Interviews with staff indicated that facilitators had a much more robust level of knowledge than is generally expected within trauma-informed or trauma-responsive services. The staff were intuitive and provided multiple examples of how they amend their practice to better support women. In addition, they stated that through their knowledge, this has led to significant changes in the programme delivery. For example, when working with women who have sex working histories, the staff are aware of behaviours connected to sexual trauma.

"In Griffin, the only people that would know, within the grounds of the legal confidentiality policies and stuff, would be us. So, in residential treatment, you are asked to avoid being in a sexual relationship with another client — it's one of our expectations. But the nature of the having a history of sex work means, for some women, that it's quite likely you're going to get into a sexual relationship in treatment and if you can't have the freedom to talk to us about that without consequence, then it's not an open dialogue. So, it's kind of what's said in Griffin, stays in Griffin". (Charlie)

"Don't forget, they've been in competition with each other on the streets, so that wasn't safe, so it is harder for them to trust people straight away, so when they share... I think it's the sharing and what each other share, that makes them feel safe and the caring that goes on in there and there". (Willomena)

"Someone who holds even a basic level of understanding of the horror that sex working is — street-based sex working in particular. Of how normalised dehumanisation and violence is, sexual assault is. So, someone who holds an inherent... not even compassion. Compassion doesn't cut it. Love doesn't quite cut it either, but just a kindness that permeates through all of the schemas and the slightly twisted messaging that they have about themselves and says, 'It's okay to be you, and you can heal from this'. Someone who's savvy enough to be able to challenge those messages as well in a really non-shaming way. With this type of material, people's shame radars are on high alert, so the way that a Griffin facilitator challenges or reframes a thinking process, it's like delivering a hammer blow to a negative messaging but with a feather touch. That's the dynamic". (Susan)

Staff have amended their confidentiality agreements for the Griffin Programme to ensure that they are trauma-responsive for women with sex working histories. If the staff had continued to utilise punitive consequences for a behaviour that was potentially trauma related, this could undermine their trauma-responsive approach and further perpetuate trauma. This is particularly important and is an example of good practice within trauma-responsive work. Another example of good practice is an inherent understanding of the lack of safety and trust, which originates from the competitive landscape of survival street sex-work. This knowledge encourages the staff to ensure high levels of safety and trust-building exercises within the group. Notably, the advanced understanding of trauma present in the staff interviews further enables them to better hear and see the women that they support.

Commendations, Recommendations and Future Directions

Commendations

- 1. This evaluation has highlighted the unique and specialist nature of the Griffin Programme. This programme is the first to draw upon the lived experience and evidence-based research, to support the complex and overlooked needs of women with sex-working histories, who are seeking recovery within residential rehabilitation.
- 2. The women acknowledged the value of the programme. They complimented the design, the content and the cycle format, which further demonstrates implicit knowing and recognition of the lives and experiences of women accessing support from The Nelson Trust. Further, this distinctive programme encompasses the values of The Nelson Trust, which believes that change is possible, to better encourage and empower individuals to overcome addiction and trauma.
- 3. The staff involved in the design and delivery of the Griffin Programme are a credit to The Nelson Trust and provide examples of good practice approaches when working with trauma. The women involved in this evaluation described the care, love and non-judgemental support which they received during the cycles of the programme. The support offered, fundamentally recognises and responds to trauma with a shame reducing and resilience-building approach, to further empower women.
- **4.** All of the programme facilitators working for The Nelson Trust stated that they are provided with excellent standards of training and support. Therefore, this indicates the prioritisation of staff development and supervision needs at The Nelson Trust.
- 5. The Griffin Programme has been one of the first trauma-specific programmes where staff and women have shared their experiences of a loving approach and environment to facilitate healing, respect and greater levels of trust. This is an aspect which requires further consideration within good practice approaches specific to healing from sexual trauma.

6. The staff working on the Griffin Programme have demonstrated an advanced understanding, recognition and response to women with trauma histories. It is, therefore important to acknowledge the potential for best practice approaches when working with trauma.

Recommendations

- 1. Additional support is recommended for women who have completed all available cycles of the Griffin Programme: All of the women agreed that there was a need for a drop-in group and some contingency when they are living their recovery, and they have resettled back into the community, following residential treatment. Staff should consider if this could fit within the current group timetable and the most appropriate location and time for women who are working and living within the area. This could bridge the gap between the Griffin and Phoenix programmes, and act as a more relaxed drop in support, rather than a structured group session.
- 2. Greater transparency is needed when recruiting staff to facilitate the Griffin Programme:

 There is no doubt that sensitive selection is required for the role of facilitator to prioritise the safety and needs of women. In addition, successful Griffin Facilitators demonstrate intrinsic compassion and inherent knowing which are natural and experiential qualities. Therefore, it could be argued that they are not trainable. However, for the long-term and sustainable future of the Griffin Programme, creators and past facilitators should develop screening tools and required skill sets to ensure the inclusion of relevant staff where possible. This will help to increase the number of facilitators, which can mitigate any issues with staff availability and sickness. Additionally, this will enable greater transparency for aspiring Griffin facilitators working within The Nelson Trust.
- 3. Contingency Plans are Required: Due to the healing nature of the programme content, it is important that all of the women have consistency within the delivery. Although the Griffin Programme is an advanced specialist programme that requires skilled and experienced staff, a rota is required to ensure cover is available within the Nelson Trust team. Additionally, advanced planning is required to ensure that the programme does not clash with other important rehabilitation and resettlement opportunities. This will ensure attendance for all women for the nine-week duration.

Future Directions

- 1. There are gaps in the literature, as the traumatic experiences of women who have sex working histories have not been captured. This impacts upon the knowledge of academics and practitioners, to better understand and effectively support women who may be actively sex-working and women who have sex-working histories. In addition to this, although it is a recognised pathway out of offending, this is the first trauma-specific programme to support the needs of women who are also in early recovery within residential rehabilitation. In light of this, additional research is required to consider the nuances and intersections of addiction and sex-working histories.
- 2. A larger mixed- methodological and longitudinal study would be a welcome addition to this field of study, to capture the recovery journeys of women, their initial recruitment onto the programme, their continuous engagement with programmes and their resettlement experience. This would help to establish a more robust evidence-base to understand the outcomes for women and their healing journeys. This would support long-term future developments and measurable outcomes of the Griffin Programme.
- **3.** Research is welcomed to explore the importance of multiple cycles of the Griffin Programme. Although women can do two, it is important to explore which aspects are beneficial long-term for women in their recovery and healing journey. This should be extended to explore the long-term impact of women attending both the Griffin and Phoenix programme.
- **4.** Griffin Programme staff should consider sharing good practice amongst other organisations within the field. The collaboration and sharing of good practice could support the development of trauma-specific programmes in other services for women on a national level. However, care should be taken in the development of resources to ensure that organisations have information relating to the sensitive allocation of staff and the potential for re-traumatisation and shame-inducing experiences, if staff do not possess the required skill set for this programme.

5. Care should be taken if this programme content is shared outside of the organisation to ensure the safety of all women and staff are consistently prioritised in line with the underpinning values of the Griffin Programme.

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