As members of the Cross Party Group (CPG) on Adult Survivors of Sexual Abuse, Health in Mind welcomes the opportunity to comment on the Future Pathways model and its progress, in response to the invitation from the Convenor of the Public Petitions Committee.

Health in Mind first developed specialist trauma services fifteen years ago and currently (outside of Future Pathways) works with hundreds of survivors of abuse annually. During those fifteen years, through commissioning and undertaking research and through service delivery, in partnership with others, we have consistently supported and promoted the needs of survivors of childhood sexual abuse.

Our services include Care Inspectorate registered support services (all grade five – very good), including a specialist trauma support team; counselling and talking therapies, with specialist trauma counselling; a day and crisis service; supported self-management, preventative and befriending services; substance misuse and other mental health and wellbeing services. We therefore work with survivors and others who have wide levels of need, from those needing crisis support, through to others needing information. At all levels, we work with survivors with a range of childhood abuse experiences.

As part of the Future Pathways Alliance tasked with oversight of the operation of Future Pathways, Health in Mind is also fortunate to sit alongside other survivors, voluntary sector partners and the Anchor (NHS Greater Glasgow and Clyde). This perhaps gives us a unique insight to drawn upon, complementing our historical and organisational knowledge and experience of working with survivors.

Health in Mind notes the reported discussion of the In Care Survivors Service Petition (PE1596) on 15 March 2018 and the concerns about the approach used and whether it reflects a fixed view and whether this is the best way to deal with trauma. We would like to comment on this.

Future Pathways works with people who have experienced a wide range of trauma experienced whilst in care – physical and emotional abuse, as well as neglect and childhood sexual abuse. The approach is person-centred: the Support Co-ordinator works closely with each individual to identify their needs and agree their unique outcomes ie the differences that Future Pathways can help bring about. Thereafter, the ‘support’ (in the widest sense) that Future Pathways can put in place, purchase or commission is hugely flexible, with a much wider scope than, for example, Health in Mind (and others) would be able to the offer survivors working through more conventional funding sources. For example, where relevant to their agreed outcomes, Future Pathways has enabled some people to return to education, supporting them to gain new skills and qualifications, leading to paid employment in some cases, after years being out of the workplace. For others, Future Pathways has enabled the identification of long lost family members and opportunities to spend time together, strengthening relationships. Practical support, such as providing a mobility scooter or similar aids has been life changing for a number of survivors and their families, enabling them to regain much-desired independence. For others, chronic pain and illness has been lessened through the provision of equipment such as orthopaedic beds. These examples sit alongside therapeutic support, counselling and other services where required.

The majority of support offered to survivors registered with Future Pathways is delivered by community and voluntary sector partners, with the advantage (should people choose to use
it) of access to clinical (NHS) assessment and treatments through ‘The Anchor’ service in Glasgow.

In terms of psychological interventions, NHS uses evidence-based CBT treatments that follow a biopsychosocial model, not a medical model. All clinical psychologists are trained to assess, formulate and treat complex PTSD. Treatments times are based on a range of factors, including individual need, clinical judgement and the evidence base. However, this element of choice is only one small part of an incredibly wide spectrum of support offered to people: choices include services offered by a number of members of the CPG on Adult Survivors of Sexual Abuse.

Cross Party Group members themselves work to a range of different, largely social models, which we may well discuss and debate, alongside statutory provision. What unites us all is the desire to make a positive difference to the lives of survivors and Health in Mind believes that Future Pathways offers this. Future Pathways provides the support and resource to help bring that about for in-care survivors in a flexible and person centred way, offering them choice and control.

As a member of the Alliance I am fortunate to see and hear many positive stories and hear feedback about the difference Future Pathways has made to the lives of in-care survivors, which motivates and encourages me in my support for Future Pathways. I see it not as a fixed model, but a gateway to a wide range of flexible, person-centred supports and services, which complement the more limited choices available through conventional funding. It also helps sustain small and local providers, supporting variation and flexibility, with a strong focus on quality and impact, rather than cost. In the medium to long term, the learning about needs and what works will benefit all survivors and those of us who support them.

I hope that this submission adds further information and insight to the approach used by Future Pathways, highlighting its flexibility and addressing some of the issues raised by the Petition.