

Tayside Parenting Strategy

Report on the findings of the initial consultations with

1. parents/carers
2. professionals/services

1. Consultation with parents or carers

A two month consultation was undertaken in July and August 2018. This involved an online survey and opportunities for practitioners working with groups of parents/carers to complete paper copies of the survey in a group setting. This resulted in 283 responses.

Demographics of respondents

The majority of respondents were in the 36-50 year old grouping (52%), with those aged 20-35 years making up the second largest grouping (30%). Only 2% of respondents were under the age of 20 years.

A significant proportion of respondents were female (92.3%).

Respondents were predominantly parents; however responses were also received from grandparents, step-parents, step-grandparents, kinship carers and foster carers.

There was a good spread of respondents from the three areas of Dundee, Angus and Perth and Kinross.

Findings

The key findings including response rates and the themes emerging from the free text comments are summarised below.

1. Respondents were asked to comment on whether the draft vision for the Tayside Parenting Strategy reflected what they think is most important for parents in their area.

“Everyone who has or will have a parenting role is supported to secure positive futures for themselves and their families.”

91% of respondents agreed that the vision did address what they felt was most important. Comments provided identified that respondents would like points in respect of the following themes to be considered:

- Families have a right to privacy.
- Support needs to be optional and reach parents most in need, aiming to achieve aspirations set by parents with child at centre.
- Services/strategy need to be non – judgemental, parents need to be valued, supported and listened to.

- Visible/obvious support needed at all ages, including pre-conception.
 - Focus on physical & mental needs and child's learning.
 - Support for parents with children with additional needs/challenges.
 - Equality of support & assessment for all, provided by skilled staff.
 - See difference now not just in the future.
 - Need to address isolation, build community support and safe secure environments.
 - Joined up working & genuine partnership with parents, recognising the importance of relationships.
 - Remove barriers to healthy family life.
 - Accompany with practical actions.
 - Support that meets needs/availability of working parents
2. Respondents were asked to comment on a range of principles that would underpin the Strategy.

93% of respondents felt that these were the most important areas to concentrate on. Comments provided identified that respondents would like the following points in respect of the following themes to be considered:

- Principals should reflect focus on children & young people
- Need to address the feeling parents are not listened to; raising problems creates barriers to working with education/health services in the future.
- Currently there are little or no services in place (ASN) need actions – prevent parents feeling isolated.
- Strategy needs to be non-intrusive / consent based
- Build community capacity.
- Need to consider rural areas

3. A number of draft commitments were outlined and respondents were asked if they felt these were the most important things for the strategy to focus on delivering.

94% of respondents agreed these were the most important things to concentrate on. Comments provided identified that respondents would like the following points in respect of the following themes to be considered:

- Take an assets based approach, recognising parent's wealth of knowledge/understanding
- Services should be respectful and have an open door approach.
- Support positive outcomes for LAC
- Strategy too vague
- Consider poverty issues; fundraising through children is stigmatising for those not able to contribute.
- More (ELCC) information & flexibility around funded.
- Need to ensure it's not intrusive; too many people trying to get involved in family life

- Increase information shared with parent councils
4. A summary of the data that will be considered to inform the drafting of the strategy was provided and respondents were asked to comment on whether this information covers the things that are important to families.

85% of respondents felt that it did. Comments provided identified that respondents would like the following information to also be considered:

Check for relevant info from:

- Library Services
- Homestart
- Barnardos
- AHPs
- Support groups/ parent focus groups
- Maternal and Infant Nutrition Survey 2017

Need more information about:

- Issues affecting parents of children with ASN
 - Attainment
 - Range of disabilities/Single disabled parents with children/parent's physical health
 - Impact of internet on children
 - Breast feeding Diet & nutrition
 - Financial worries, work life balance
 - Availability of free recreational space i.e. greenspace
 - Parents & Children's actual needs; more stories, less statistics; need more community events to gather local info
 - ACEs
 - Parent with drug/drink issues
 - Teenage parents
 - Poverty
 - Availability of services for working parents.
 - Missed appointments
5. Respondents were asked to identify if they had ever engaged in any of the parenting programmes that are evidence-based and available in more than one of the CPP areas.
- Family Nurse Partnership – 23 respondents had been engaged
- Infant Massage – 48 respondents had been engaged
- Peep Learning Together Programme – 44 respondents had been engaged
- Incredible Years – 24 respondents had been engaged
- Five to Thrive – 5 respondents had been engaged
- Strengthening Families – 14 respondents had been engaged

Other – 36 respondents had been engaged

The other programmes that respondents listed as having worked well for them were:

- Bookbug
- Community Cookit
- Eatwellplaywell
- Dundee Carers
- Family Club
- Hand in Hand Parenting
- Learn with Fred
- Little Gym Time
- Nurture Parents
- Parklives
- Rhyme Time
- Baby Yoga
- Ready Steady Go Group
- Small Talk
- Talk To Talk Group
- Breastfeeding Support Group
- Tayside Maternal Health Support Group
- Triple P
- Pre Parenting Classes
- Tiny Talk Classes

6. Draft suggestions relating to four priority areas that parents might want to see improved were listed. Respondents were then asked whether they agreed with each priority area and the improvement aims. Response were as follows:

Priority 1 – access to good quality information – 94% of respondents agreed this should be a priority and 91% felt the improvement aims were the right things to concentrate on. Comments provided identified that respondents would like the points in respect of the following themes to be considered:

1. How should information be communicated?

- People need help to access information or ask for help, parents need help without feeling judged, parents needs support to understand what this information means, a more joined up approach between services is required – prevent isolation
- Provide information but then allow parents to seek it out rather than impose which undermines parents and impacts on their confidence
- How can young people become involved in using the resources – delivery is key
- One size doesn't fit all
- Don't speak down to parents
- Information should be accessible in different formats and delivered in different ways (currently a group called Parent Club providing information online,)BSL for deaf parents and children; Makaton/other communication methods
- Need to consider rural areas
- Information provided across the social spectrum
- Key information should be posted directly to parents rather than word of mouth
- More involvement from Health visitors
- Better opportunities to communicate with teachers/health professionals etc. and make decisions together – impersonal texts/policy booklets undermine genuine communication

2. Content of information

- More information about the services available – parents do not know what they can access
- Make sure to ask parents what they need, examples included: child development/health; information on ASN/complex needs; disability; strategies to support behaviour; basic needs of the family, e.g. access to food, good health, good home environment; mental health support for parents, child poverty, financial support/advice.
- Information to support different age groups of children, including practical support for parents of teenagers.
- Specific support for Looked after young people and their carers, with an awareness of the complex issues.
- Good education information, school and nursery budgets for basic quality items, information about the quality of nursery care – more inspections to help parents make informed choices, early years expansion – changes to funded childcare.
- Guidance for self-help rather than reliance on services and clear signposts or points of contact.
- More examples of parents who are managing well – pro social modelling
- How to overcome barriers to inclusion, involvement and developing more complex parenting skills
- Bereavement, trauma, change information/advice.
- Supporting co-parenting; information accessible to both parents.
- Informal networks where parents can provide support to each other; listening partnerships for parents (i.e. hand in hand parenting).
- Information is not helpful if services are not up to scratch. there needs to be access to useful support services available.

Priority 2 – Communities are inclusive, understand children’s needs and support

families to thrive - 91% of respondents agreed this should be a priority and 93% felt the improvement aims were the right things to concentrate on.

Comments provided identified that respondents would like the points in respect of the following themes to be considered:

1. Information

- Information about activities/service in communities has to be accessible and easy to read and understand, written, digital, app (Parent Club already doing), suitable for parents with disabilities and relevant to parents with children at all ages.
- Parenting helpline
- Promote self-help
- Listening partnerships (Hand in hand parenting) has been my life line.
- Deliver locally (rural communities)

2. What's needed in communities?

- Create places where parent can come together; school as hub.
- Better partnership working between agencies within community
- Need to nurture parents so that they can in turn nurture their children
- Greater recognition of the barriers that stop families seeking or engaging with support, i.e. stigma, mental health
- Child's voice what do they need parents to do
- Outdoor provision
- Change 'parent' to 'families'
- Need for parenting support close to parents homes
- Need for investments in local area e.g community centres

Priority 3 – access to effective services that are delivered by a skilled and confident workforce that value the role of parents - 92% of respondents agreed this should be a priority and 93% felt the improvement aims were the right things to concentrate on. Comments provided identified that respondents would like the points in respect of the following themes to be considered:

1. Delivery of services

- Improved communication between agencies; service priorities should be better aligned and thresholds for service provision consistent. Needs of child at the centre.
- More meaningful, practical and caring communication that makes sure people are more aware of what services involve.
- Better communication with parents; make sure services are approachable as well as accessible.
- Better information about decision making and sharing of information across services, parents must have say.
- Need support for children with additional support and autism; need to recognise some disabilities as profound and enduring and families require respite services for support.
- Deliver services through or with the cooperation of the parent(s), with the right support parents are able to make the right choices for their families freeing up staff in services can concentrate on the smaller number of families whose needs are greater.
- Consider families who are working, including the lack of suitable childcare and out of school clubs in Tayside.
- Support for parents of children with mental health problems. The impact on parents cannot be underestimated.
- Support for parents health and wellbeing.
- Families make our own outcomes to suit our own families with our own children's best interests at heart.
- The strategy seems to be all about the workforce rather than us as parents.

- Parents need to be supported during pregnancy and postnatal, including with breastfeeding and post-natal depression.
- Support for children in older age group e.g. support for bullying
- Lack of access to therapeutic services
- Not enough support for out of hours.
- Easier access to services such as CAMHS, Incredible Years for parents of school age children

2. Staffing/training

- Value staff; make sure there is continuity for families and enough capacity to enable good relationships to be built. Think about it from a family's point of view, reduce need to engage with high numbers of staff due to staff turnover.
- Staff access to continued learning, and to feel not only valued but supported in difficult situations, rather than a culture of blame and isolation.
- Staff training in obstacles parents may face – legal challenges and gaps in the family justice system, criminal law, housing law etc. – knowledge of the practical issues families face, practitioners monitor adverse impact of law/policy on family justice and child health, and influence policy and law change via provision of evidence and advocacy for change.
- Staff should have a real understanding of the challenges faced by parents.

Priority 4 – Policies that affect family life are supportive and deliver positive outcomes for families - 94% of respondents agreed this should be a priority and 94% felt the improvement aims were the right things to concentrate on.

Comments provided identified that respondents would like the points in respect of the following themes to be considered:

- Well paid flexible employment
- More family/child friendly policies in workplaces
- Access to music and arts
- Access to green spaces
- Patchy HV due to staffing
- Lack of support when child moves from Health Visitor to school
- Lack of integration with minority groups
- Lack of funding for childcare places outwith hours and for under 2s.
- Needs to campaign on a local and or national level regarding benefits
- Policies need to be ingrained in need and aligned
- Across boundaries must mean working in partnership with 3rd sector to maximise support and minimise cost to council.

7. Respondents were asked to comment on whether there was anything that was important to them in their parenting role that was not mentioned in the survey.

Comments provided identified that respondents would like the points in respect of the following themes to be considered:

- Ensuring that budgets support the statements within the strategy & are not continually cut which dilutes the services. Don't spreading staff & resources too thinly across services.
- Deliver the policy in a way that is accessible and understandable to all concerned.
- Access to free or cheap local activities for families and children.
- Many Headteachers, teachers, health professionals etc, will need to make major changes to both attitudes and working policy and practice, not just paying lip service to it. There should be a way of celebrating and acknowledging those professional, individuals, groups and organisations who genuinely do value and work in partnership with families.
- Considering needs of the whole family, the separation of adult and child services often mean individual carers assessments lead to lack of continuity, the picture of the whole family not being considered, and a confusing raft of people involved. One key person assigned to the whole family, who can then access the support needed.
- Take a "Growth Mindset" type approach to this strategy and to parenting. This should be made to be a bigger focus. The importance of PLAY at all ages – birth to adulthood should be included in the importance of parenting.
- If someone has mental health and struggles to parent they instantly feel judged by school. Community parenting support could be established like a homestart organisation where parents are befriended or mentored.
- I think there is a lot of misconceptions out there about named person scheme and data sharing between agencies without parental consent, this should be clearly addressed up front in any strategy to make clear everyone's roles and responsibilities.
- The inclusion of religious leaders and organisations and their values and skills would enhance the strategy.
- Engage with the fringe people in society; travellers, people with mental health issues and recidivists in the criminal justice service.
- More information from schools on how your child is progressing and how you can help them succeed is the best thing for such families.
- Prioritise developing kindness and respect and encourage parents to lead by example.
- I think my main concern is not to turn into a 'remedial' service for folk seen to be not coping as I think every single parent goes some period of not coping. I vividly remember being the 36 year old mother of a 2 month old – in a stable relationship, no problems to speak of...well, except for the silent reflux & constant screaming all night. I watched a TV programme about teenage mothers in Dundee and howled as they all seemed to be coping much better than me!

Consultation with professionals and services

Demographics of respondents

There were 65 respondents to the consultation which ran in May and June 2018..

Respondents were from a wide range of services including the three Councils, NHS Tayside, 3rd Sector including Aberlour, RASACPK, SHIP, Perthshire Autism Support, TCA, Cair Scotland, Children 1st, Barnardos, ADP, CAP (Christians Against Poverty) Highland Perthshire, Angus Health and Social Care Partnership, Families Outside, Gowrie Care, Catesbi CIC.

There was a good spread of respondents from the three CPP areas in Tayside.

Findings

The key findings including response rates and the themes emerging from the free text comments are summarised below.

1. Respondents were asked to comment on whether the **draft vision** for the Tayside Parenting Strategy reflected what they think is most important for parents in their area.

“Everyone who has or will have a parenting role is supported to secure positive futures for themselves and their families.”

93% of respondents agreed that the vision did address what they felt was most important. Comments provided identified that respondents would like points in respect of the following themes to be considered:

- vision statement is perhaps a bit too non-specific. I would like to see a bit of understanding/insight as to what the positive outcomes are regarded as being e.g. healthy lives, feeling part of a community, the availability of opportunities.
- Language used is not very family friendly, i.e. ‘outcomes’ is might not be recognised by families; "supported" doesn't reflect the collaborative role or the responsibilities parents have in delivering positive outcomes; empowerment could be included.
- Would Kinship carers recognise that they were included in the statement?
- The vision should highlight a clear inclusion of the wide range that a parenting roles refers to in terms of corporate parenting, fathers, young parents, parents of ASN.
- Equity

2. Respondents were asked to comment on a **range of principles** that would underpin the Strategy.

91% of respondents felt that these were the most important areas to concentrate on. Comments provided identified that respondents would like the following points in respect of the following themes to be considered:

- Supporting reflective practice
- Ensuring children and adult services work jointly
- Empowering communities and individual parents is the current thinking in other areas (particularly rural areas) due to the lack of resources and lack of investment for everyone to benefit. As part of empowerment models such as the Highland Care Co-operative should be considered.
- There needs to be a commitment to strength based approaches that is built into the founding principles of working with parents; participation and working in partnership with parents not just working closely with parents.

3. A number of **draft commitments** were outlined and respondents were asked if they felt these were the most important things for the strategy to focus on delivering.

89% of respondents agreed these were the most important things to concentrate on. Comments provided identified that respondents would like the following points in respect of the following themes to be considered:

- Co-production
- Recognise issues, including domestic abuse and substance misuse, which do the most physical and psychological harm to children.
- Language – feel the statement “Promotion of a nurturing ethos” is patronising.
- Use research, government recommendations.
- There needs to be both a universal and targeted approach to parenting

4. A summary of the **data** that will be considered to inform the drafting of the strategy was provided and respondents were asked to comment on whether this information covers the things that are important to families.

93% of respondents felt that it did. Comments provided identified that respondents would like the following information to also be considered:

- More information on needs of children/young people with autism, ASN or disabilities.
- Neighbourhood disputes
- Information being gathered by SAMHs around families feeling unsupported by CAMHs in regards to children and young people’s mental health challenges.
- number of households affected by domestic abuse or substance misuse
- Adverse Childhood Experiences – parents and children
- Parents own needs of support for disability, mental illness, etc.
- Data from medical services about numbers of children attending with behaviour problems that are as a direct result of poor parenting- eg from paediatrics, GP, H/V and CAMHS
- Employability, experience of education and training.
- Kinship families
- Poverty and nutrition
- Developmental milestones i.e. Speech and language.
- Data in MIN survey 2018 - Maternal obesity at booking ; Child weight Infant feeding

- Parents' views
5. Respondents were provided with a list of **evidence-based programmes** available in more than one of the CPP areas and were asked to identify if they were aware of other parenting programmes that are evidence-based and available in their areas. 44% of respondents were aware of other programmes.
- The other programmes that respondents listed as having worked well for them were:
- Early Bird
 - Seasons of Growth
 - Financial education to improve/teach budgeting skills
 - Safe and Together
 - New Forest Parenting
 - Speakeay T ayside programme
 - substance misuse specific parenting group
 - Managing Children's or Teenager's behaviour
 - Graded care Profile
 - Safe & Together Model
 - Children 1st trauma recovery and resilience hubs
 - Families Connect Cani Coaching
 - Active Under 10's projects
 - Jungle Journeys
 - Splashtots
 - Compass membership
6. Draft suggestions relating to four priority areas that parents might want to see improved were listed. Respondents were then asked whether they agreed with each priority area and the improvement aims. Responses were as follows:

Priority 1 – access to good quality information – 95% of respondents agreed this should be a priority and that the improvement aims were the right things to concentrate on. Comments provided identified that respondents would like the points in respect of the following themes to be considered:

- Access to information that is appropriate and developed alongside parents to ensure it is responding to their needs when they need it
- Disseminate information through third sector agencies, schools and nurseries
- The delivery of communication needs to be fully considered, ensuring families across Tayside can access information, (e.g. those who may not access Internet services)
- Need for good communication from schools and other education providers with parents/carers
- It is important that there is a point of contact for people
- Working with parents early to avoid stigma,
- Avoid educational jargon
- Different formats for health literacy issues
- Parents to shape and invite services into communities

- Joined up approach, including with health and social care, to ensure consistency and equality of choice of access.
- Support, by people, to parents is more essential than access to information.

Priority 2 – Communities are inclusive, understand children’s needs and support families to thrive - 97% of respondents agreed this should be a priority and that the improvement aims were the right things to concentrate on.

Comments provided identified that respondents would like the points in respect of the following themes to be considered:

- Capacity Building
 - universal children’s clubs and youth groups in local communities, community involvement
 - training of local people (children, parents, carers, communities and practitioners have an awareness and understanding of children’s rights)to supporting parents
 - employment to local people and develop capacity
- safe, accessible community spaces with an emphasis on learning and the family facilities
- Parents views being valued, and listened to, involved in decision making, not just lip service
- inclusive language than parent throughout? (this will be picked up with a statement that parents refers to grandparents, aunts etc.
- involves everyone within children’s lives.
- Partnership opportunities with schools and health and social care services
- Intergenerational work
- Kinship Care arrangements

Priority 3 – access to effective services that are delivered by a skilled and confident workforce that value the role of parents - 99% of respondents agreed this should be a priority and that the improvement aims were the right things to concentrate on.

Comments provided identified that respondents would like the points in respect of the following themes to be considered:

- Multi-disciplinary training, learning and sharing practice events to enable staff to feel confident about working with and involving parents
- More professional networks to know what’s going on around Tayside
- Better joined up working between professionals
- Support targeted to those most in need – how to reach those in need
- How support is offered
- Understanding and awareness of conditions that significantly affect the mainstream workforce
- Strength based services
- Use of parental role models

Priority 4 – Policies that affect family life are supportive and deliver positive outcomes for families - 100% of respondents agreed this should be a priority and that the improvement aims were the right things to concentrate on.

- Consult more widely, regularly and meaningfully
- Improve data collection including fidelity and inclusivity
- Support embedding good practice
- Promote achievement of outcomes
- Partnership delivery (I.e. Highland Care Co-operative)
- Be informed by research
- Policies need to be communicated in accessible formats
- Accountability for implementation
- Policy makers need to spend time on the shop floor and see the challenges of real life

7. Respondents were asked to comment on whether there was anything that was important to them that was not mentioned in the survey. Comments provided identified that respondents would like the points in respect of the following themes to be considered:

- Consult more meaningfully, develop the data collection tools and train collectors in their use, help data collectors have the time to collate.
- Ensure that changes/improvement /learning is embedded.
- Ensure data is inclusive and representative of all communities.
- Need dedicated funding to promote the achievement of outcomes.
- A focus on income maximisation, helping families access all the benefits and other sources of income they are entitled to. This will help create the conditions for 'good' parenting.
- There needs to a change in the model of delivery. Open mindedness about partnership delivery beyond the public sector partners such as the equivalent of the Highland Care Co-operative.
- A robust research base in Tayside of ACEs and their potential impact to support service planning and inform policy would direct improvement more effectively.
- Has the Parental involvement Strategy from the 2006 Act been used in discussions to support some of these outcomes?