



Families, parents and carers

Directors' summary 9 October 2010

Centre for Excellence and Outcomes in Children and Young People's Services

“The overwhelming message from parents was their appreciation of practical support, support to their children, and in particular the warmth and understanding of Family Support projects.”

(Morris, 2007)



C4EO's work on the theme Families, Parents and Carers supports directors of children's services and their partners by providing the knowledge, data and tailored support to help improve outcomes for vulnerable children. This summary provides concise and accessible guidance based on three research reviews. The full and in-depth research reviews can be downloaded by going to www.c4eo.org.uk The reviews set out to answer what works to improve:

- the safety, health and wellbeing of children through improving the physical and mental health of mothers, fathers and carers
- children's outcomes by supporting parental and carer couple relationships and reducing conflict within families, including domestic violence
- children's and young people's outcomes through support for mothers, fathers and carers

What do we know?

Children's safety, wellbeing and achievements are closely linked to the quality of the relationship with their parents and carers. This relationship can be affected when parents or carers are experiencing health issues or relationship difficulties. Research shows that in the UK, couples are generally reluctant to ask for professional help. Barriers to seeking help include the fear of being stigmatised, not knowing what help is available and how to access services. Where parental relationship breakdown occurs, the needs of children and parents/carers can best be met through well co-ordinated education, social care and health services as well as good co-ordination between children's and adult services. Services are more effective when they are sensitive to families' circumstances (such as ethnicity, disability and poverty). Although relationship breakdown can be stressful most children and their parents/carers do recover well and resiliency is the norm.

The research reviews highlight:

Improving the physical and mental health of mothers, fathers and carers

A significant minority of children are young carers of one or both parents who have physical and mental health issues. These young carers may be more vulnerable in adulthood to unemployment, and isolation.

The association between parental health difficulties and children's safety and wellbeing is only partially understood.

Improving parents'/carers' physical and mental health can have positive outcomes on their physical and emotional wellbeing; self-esteem; cultural and ethnic identity; adult/child and partner relationships and parenting competence.

Identifying adult service users who are also parents can help:

- understand better the needs of the whole family plan
- health priorities and interventions.

Early rather than late intervention produces better outcomes for families. However, late intervention is better than no intervention.

Services should focus on a strength-based approach to interventions that build on child and parental resilience.

Good coordination between adult and children's services can have positive outcomes for families. It can also provide potential for cross-service learning and practical approaches towards personalised outcomes.

Access to services and support should not be based solely on thresholds.

A personalised outcomes approach to problems can be highly effective in addressing need and overcoming perceived stigma.

It can also help families to gain access to support at different points in time, as they need it.

Supporting parental and carer couple relationships and reducing conflict within families

Negative outcomes for children (e.g. lower educational attainment and conduct problems) are often associated with:

- non-intact families
- difficulties that pre-date relationship breakdown (where parents are divorced)
- intact families, especially where parental or carer relationships are characterised by conflict and/or violence

Service providers need to encourage couples with relationship difficulties to seek help earlier.

Training is required for frontline practitioners to help identify relationship problems and domestic violence.

Multi-agency and interdisciplinary approaches can help children exposed to parental conflict involving violence.

Teaching children about relationships from an early age may be the best way to effect change in the long term.

Establishing an evidence base on couples with children can help identify:

- incidences of domestic violence (inter-partner violence) and divorce amongst couples with children
- interventions that work best for families affected by domestic violence, conflict and relationship breakdown
- the most effective sources of information and advice for parents/carers.

Anonymised web- and media-based provision has been found to be popular.

Access to good parenting support is more likely to be required in the two or three year period around the time of relationship dissolution. Boys tend to show more signs of disturbance than girls, so may need more targeted support.

Some positive effects are shown with interventions such as marriage preparation, booster sessions or relationship enhancement programmes.

Good outcomes for children following separation are more closely related to quality of contact with the non-resident parent rather than quantity.

Family-focused projects show encouraging results, where there is flexible working from adult services, information sharing and joint commissioning.

A good relationship between professionals and the families they support is crucial.

Supporting mothers, fathers and carers

Needs assessments that include the views of parents and children are important to:

- determine type of support required
- design better support services and interventions
- understand the needs of fathers (especially non-resident fathers) and minority ethnic groups.

The most commonly sought source of support by parents is advice and/or emotional support to help improve their children's outcomes.

Take-up of parent-focused programmes can be increased by:

- promoting the range of support on offer to couples
- being non-judgmental and non-stigmatising
- services being conveniently located
- providing a choice of options (including sessions suitable for fathers and minority ethnic communities).

School-based programmes that work with parents/carers can improve:

- family relationships and stability
- child behaviour, educational attainment and school attendance
- and reduce substance misuse
- and minimise parental fear of stigmatisation associated with referrals to specialists services

Community-based programmes can improve child behaviour and welfare and reduce time spent in care and in juvenile crime.

Policy-based support (e.g., financial supplements or incentives) have no effect on children's outcomes, although they can lead to positive outcomes such as reducing the effects of poverty.

Programmes for child conduct disorders and full service extended schools can be cost effective.

A good relationship between commissioners and schools in their area is important to develop effective strategies.

What do you want to do next?

The following are based on the seven Outcomes Based Accountability (OBA) questions and are designed to be a catalyst to facilitate joint partner action:

Q1 What is your vision for improving the lives of children and young people in your locality? What outcomes (quality-of-life conditions) do you want for them?

For example, the wellbeing of children and young people who have parents with physical or mental health issues or where there is conflict within their families, is at least equal to children and young people who do not experience these issues.

Q2 What would the outcomes look like if you could see or experience them?

(Experience is the bridge between outcomes and indicators)

For example, where parents and carers have mental health difficulties, adult services work alongside children's services to ensure there is multi-agency support; children are supported to enable them to continue their education and achieve as well as their peers; the proportion of young carers achieving five A* – C GCSEs at KS4 is comparable to other children living in your area; school attendance for this group of young people is improving and the take-up of higher education, employment or training by young carers is increased.

Q3 And how can you measure them?

(Qualitative and quantitative measures are needed)

The indicators for measuring outcomes emerge from descriptions of the experience (Q2). Below are some examples of 'outcome indicators' and some 'programme measures'.

- NI 50 Emotional health and wellbeing of children – children and young people user perception
- NI 34 Incidents of domestic violence
- NI 32 Repeat incidents of domestic violence
- School attendance for young carers
- Increased educational attainment
- Hospital admissions for drug and alcohol misuse

Q4 Where are you now? How are you currently doing on the most important measures?

The web-based C4EO Data Tool provides relevant data on the current national indicators and enables you to create charts, undertake comparisons with other areas and monitor progress. You will also need your local data.

Q5 Who are the partners for improvement?

A very broad range of partners have a role to play in keeping mothers, fathers, young carers and children and young people safe and well (see 'Who has the information you need?' overleaf)

You may choose to undertake a 'Turning the curve' exercise on the measures where improvement is needed. This is an exercise from the OBA toolkit which facilitates partnership working.

www.c4eo.org.uk/obatoolkit/default.aspx

This will enable you to identify which partners/agencies should be involved.

Q6 What really works to improve the outcomes you want?

C4EO's three research reviews provide some evidence of what works to ensure that young people develop into settled adulthood. Validated local practice is also available on the C4EO website. This evidence can be used to support the achievement of the outcomes you have identified.

Q7 What do you propose to do next?

Identify with your partners, your vision, the outcome(s) you are seeking to achieve for the group of children and young people you have identified as well as the indicators you are going to use to monitor progress on those outcomes. A report card format could be adopted which is clear and simple for you and your partners and provides a framework for monitoring progress against your outcomes. (This is available in the OBA toolkit on the C4EO website.)

Who has the information you need?

- families and carers, children and young people, especially between the ages of 7 and 19 years
- family centres, children's centres and managers of services providing support for parents and carers (including school and community-based service providers)
- psychologists, psychiatrists, CAMHS workers
- health visitors and GPs
- children and families and adult services staff
- schools and colleges
- police, community safety workers and youth offending teams
- local authority community and voluntary service providers
- support services (e.g. domestic abuse/violence, CAB, homeless centres and refuges).

Directors' summaries

This summary draws on C4EO's current work in this theme for directors of children's services.

Please go to www.c4eo.org.uk to download full and in-depth versions.

How can C4EO support your vision?

C4EO offers wide-ranging support, including:

- validated local practice
- training events
- sector specialists and tailored support
- knowledge and research reviews including key messages from research

Please go to www.c4eo.org.uk to access full information.