



PARENTING AND WELLBEING: KNITTING FAMILIES TOGETHER



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THIS REPORT

This report is part of the parenting strand of the Local Wellbeing Project. It aims to explore the practical steps that local authorities can take to improve the wellbeing of parents and carers as well as children. It tries to establish how and when these interventions boost wellbeing and how they might be further strengthened, and it speculates on the potential impact such changes might have on individual parents, their children and the local communities in which they live.

The findings and recommendations in this report are those of the authors and do not necessarily represent the views or policies of any of our funders.

This report has been written by Young Foundation staff Yvonne Roberts, Marcia Brophy and Nicola Bacon.

The report draws on published research and group discussions, as well as extensive interviews with children and young people, parents, facilitators, parenting commissioners, volunteers and other professionals implementing the parenting strategy in the Local Wellbeing Project's partner local authorities of South Tyneside, Manchester and Hertfordshire.

The report includes quotes from parents and carers, and staff employed in delivering parenting programmes. *The names of all the parents have been anonymised.*

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SUMMARY

OVER THE PAST 30 YEARS, BRITAIN'S GROSS DOMESTIC PRODUCT HAS MORE THAN DOUBLED, YET THERE HAS BEEN NO CORRESPONDING INCREASE IN LIFE SATISFACTION. THIS SITUATION, MIRRORED ACROSS DEVELOPED COUNTRIES, HAS COMPELLED ACADEMICS, POLICY MAKERS AND POLITICIANS TO QUESTION THE ROLE OF ECONOMIC GROWTH IN IMPROVING HAPPINESS.

Good parenting is at the heart of a child's wellbeing and development. Over the last decade the Government has tried to build a system of support so that parents and carers can find help when they need it to raise their children to be happy, healthy, ready to learn, able to make a positive contribution to society and to achieve economic and emotional wellbeing.

What is less well-recognised within parenting policy is the additional need to address the wellbeing and mental health of the adults themselves and the relationships they have with each other as a couple, as well as the different needs of mothers and fathers.

Intuitively, improving levels of wellbeing should be an outcome of parenting support, yet this is rarely articulated within the design, delivery and evaluation of these initiatives. All political parties are beginning to voice the belief that wellbeing is an increasingly important indicator of successful governance, and there is cross-party concern about the difficulties of parenting and the need for effective and diverse parenting support programmes.

This report explores the background to the government's parenting strategy and the scope for local government to promote and develop the wellbeing of both parents and carers and their children, through the delivery of their current parenting programmes. It discusses how the wellbeing of adults can become a stronger part of parenting strategies and the potential rewards of this approach. It suggests a new approach for parenting programmes, placing wellbeing at the heart of strategies to improve the wellbeing of parents, children and local communities.

This project draws on the experience of the Local Wellbeing Project's partner local authorities – South Tyneside, Manchester and Hertfordshire – to explore the implications of their current activities and to consider the potential for future action.

Government has traditionally intervened in family life to protect the interests of children. In extreme cases, it removes children from their families to save them from neglect and abuse. In recent years a raft of programmes has been developed to offer guidance before situations become acute and to take action to improve family relationships. This is done for the sake of the children and in the interests of the wider community. On occasions, for instance when a child or young person is considered to have broken the law or to be out of control, these interventions are compulsory.

Hertfordshire, Manchester and South Tyneside have offered parenting support for a number of years. In step with the government's recent Every Parent Matters strategy, each authority has recently consulted with its local community before publishing a three-year strategy on parenting support.

The three local authorities offer a range of support, from 'light touch' to intensive, targeted at very complex problems requiring specialist intervention. All three implement parenting strategies that:

- rejects the one-size-fits-all approach
- are attuned to the individual requirements of a family
- are non-judgemental and strive to reduce the stigma around parenting support.

The type of intervention required in different situations depends on the level of need. Where needs are universal – for information, advice, low-intensity parenting courses – then services need to be flexible, responsive to local needs, and accessible and attractive to all. Where needs are more acute, the appropriate response becomes more intensive and targeted at individuals. In these cases the wellbeing and even safety of children and parents can be under threat. Services have to be proven in value and effectiveness. Here

there is a clear role for the well-evidenced international programmes such as Webster Stratton, Triple P, and Strengthening Families Strengthening Communities.

There is evidence that parenting programmes increase wellbeing, but only in localised pockets. For example, data from Manchester shows that participants on one course showed statistically significant improvements in terms of parental depression and child behaviour. Approximately 60 per cent of parents were in clinical ranges for depression, stress and child problem behaviour before the course. At a three-month follow-up this had fallen to 10 per cent.

While wellbeing is not a widely used measure in the outcomes for parenting support many of the changes recorded by parents and carers who are graduates of this kind of help tie in with the indicators of wellbeing. These include:

- improved social relationships and networks
- trust in oneself and others
- improving the couple's relationship
- building links with the community and a sense of belonging
- a capacity for enjoyment
- breaking the cycle of harsh parenting.

Among practitioners, there is a need for more systematic understanding of the links between wellbeing and parenting support, and this needs to become a more explicit aim of programmes. The scope for innovation is greatest where the needs are universal or preventative rather than acute. Future evaluations should focus on the 'flourishing' outcomes of programmes such as increasing wellbeing, resilience and other positive attributes, as well as the more traditional outcomes, for example reducing anti-social behaviour, or attendance at school. Evaluations should incorporate not just the views of the parents and carers, but also those of the children.

EMERGING THEMES FOR PARENTING SUPPORT PROVIDERS AND COMMISSIONERS

Three key themes have developed through this work. These emphasise the need to:

1. make the wellbeing of parents, carers, and grandparents, as well as children, central and explicit objectives within parenting programmes and strategies
2. design services that boost parents', carers' and children's wellbeing
3. encourage a new diversity of approaches to design and impact assessment of parenting programmes.

This can be supported by:

1. **Making wellbeing an explicit objective within parenting programmes and strategies**
 - Mainstream and universalise parenting support.
 - Provide easy to access appropriate services early before a crisis is reached.
 - Ensure that facilitators are of the highest quality. They should demonstrate sensitivity, tenacity and empathy, and be attuned to parental anxiety, depression, mental ill health and lack of confidence.
 - Ensure ring-fenced long term funding.
 - Allow services to organically build and adapt to meet changing demands in a community.
2. **Designing services to boost parents', carers' and children's wellbeing**
 - Focus on the emotional needs of the whole family including grandparents, who are often an overlooked and undervalued asset in family life.

- Develop parents' understanding of appropriate parenting styles and validation for efforts they make to improve their family relationships.
 - Build a sense of belonging and connection to others to reduce social isolation through links to the wider community.
 - Encourage peer mentoring.
 - Offer through parenting support a long term route to further improvements in the quality of life – for example, employment, volunteering, training and skills opportunities and activities.
 - Ensure the wellbeing of staff and volunteers involved in the delivery of parenting support.
 - Involve parents, carers, children and teenagers in the design and evaluation of parenting support courses and workshops.
 - Develop a national media or social marketing strategy to encourage the view that 'accessing' help is as normal as obtaining child benefit.
3. **Encouraging a new diversity of approaches**
 - Support local authorities to twin and share experiences, and come together to discuss how to put wellbeing at the heart of their approaches to parenting.
 - Evaluate parenting interventions to assess their impact on wellbeing and resilience, as well as social deficits.
 - Set up a parenting innovation fund to finance and develop new ways of providing parenting support, targeted at universal and preventative services, that is inclusive of carers such as grandparents, to complement the intensive evidenced interventions aimed at the highest levels of need. This could be open to new ideas from the public sector, non-government organisations (NGOs), social enterprises or parents themselves.

THE LINKS BETWEEN PARENTING PROGRAMMES AND WELLBEING

GOOD PARENTING IS AT THE HEART OF A CHILD'S WELLBEING AND DEVELOPMENT. AND PARENTS' AND CARERS' WELLBEING IS KEY TO THEIR ABILITY TO RAISE THEIR CHILDREN. WHEN MOTHERS AND FATHERS HAVE POOR WELLBEING, THEY ARE LESS ABLE TO BE GOOD PARENTS TO THEIR CHILDREN.

Over the last decade, the government has tried to build a system of support for parents and carers that spans the spectrum of help, from a friendly chat with a volunteer or health visitor about a temporary problem (for example, a baby who has trouble sleeping) to the provision of intensive sustained parenting programmes, delivered by a range of services. The aim is that parents can obtain the appropriate help they need to raise their children well. Ideally, their offspring are happy as a result, healthy, ready to learn, make a positive contribution to society and achieve economic and emotional wellbeing.

Over the past 30 years Britain's gross domestic product has more than doubled, yet there has been no corresponding increase in wellbeing and life satisfaction. This situation, mirrored across developed countries, has compelled academics, policy makers and politicians to question the role of economic growth in improving happiness and to look to other factors - such relationships within the family and wider community - to better understand what improves quality of life.

This section explores the links between parenting and wellbeing, and the link to social capital. Social bonds are a powerful predictor of life satisfaction. The lessons in forging social networks and social bonds are best learnt under the love and tutelage of a 'good enough' parent or carer.

A growing body of academic research has sought to explore the relationship between national prosperity and reported levels of life satisfaction within the population. Over the past thirty years, while national prosperity measured by traditional economic measures has grown, there has been no parallel increase in people's satisfaction with their lives. Britain fares particularly poorly. A report published by Child Action Poverty Group in 2009 ranked the UK 24 out of 29 European countries when it measured the wellbeing of children and young people.¹ Additionally, in a report published by UNICEF in 2007 which also measured wellbeing of children and young people, the UK was ranked bottom of the league table, with children's subjective sense of wellbeing markedly lower in the UK than in Netherlands, Spain and Greece.²

It has been suggested that this wellbeing deficit could be a result of high levels of individualism in the UK.³ Two pieces of recent research by The Children's Society and the Joseph Rowntree Foundation argue that the UK has become focused on 'excessive individualism' alongside a reduction in a sense of belonging and connection to our local neighbourhoods and communities that can enhance our wellbeing.⁴

All political parties are beginning to voice the belief that wellbeing is an increasingly important indicator of successful governance, and there is also cross-party concern about the difficulties of parenting and the need for effective parenting support programmes. Common sense suggests that improved levels of wellbeing should be a core aim of parenting support, particularly if the aim is to sustain this in the longer term.

As part of its review to examine if parenting has changed over recent decades, a briefing paper by the Nuffield Foundation points to a paradox. While parenting appears for instance to have improved in terms of monitoring and supervision and spending quality time, and parent's expectations of good behaviour have risen, this has happened at a time when youth problem behaviour has worsened.⁵ The paper presents a number of theories as to why this has happened. These include the impact of the local neighbourhood and social norms and expectations and the collapse of youth employment leading to an extended adolescence. However, a major factor appears to be parental

mental health and wellbeing and the evidence that it has declined more in the more disadvantaged groups.

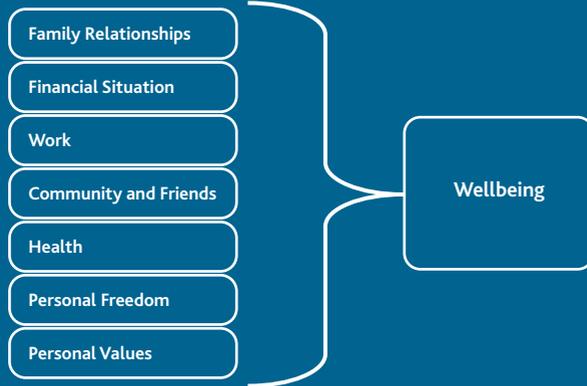
Where parents have poorer mental health this is associated with more behavioural problems in young people. The review asks whether there is a sub-group of parents who are more vulnerable to stress and consequently pass this on to their children. The review points out that trying to be a better parent could have an adverse affect on adult wellbeing. It states: "Parents are suffering a 'time squeeze'; while spending more time with their children they are also spending more time working. The cost of trying to do too much could have greater effects on the mental health of mothers in more disadvantaged families."

Good parenting is at the heart of children's wellbeing and development. When mothers' and fathers' own wellbeing is under threat then their capacity to parent successfully diminishes. Their enjoyment of the experience of raising children is hampered. Ultimately, children suffer. If the connection between parent and child is good enough then practical and psychological benefits should accrue to both individuals and the wider community. Even when families live in poor housing with inadequate income and experience unemployment and multiple deprivations, finding ways to enhance adult wellbeing can have positive repercussions on the whole family, giving all its members a better chance of constructing a different kind of future.



WHAT DO WE MEAN BY WELLBEING?

Definitions of wellbeing and happiness generate wide ranging debate. Whatever definitions are used, it is clear that wellbeing is influenced by a myriad of factors. Academics have attempted to categorise the most significant influences. Lord Richard Layard, a leading British economist specialising in the study of happiness and public policy, has identified seven factors.⁶



Each of these factors represents a web of other influences and experiences. For example, personal values are frequently shaped by upbringing, the educational experience and the political and cultural climate of the time. This in turn then influences other factors such as family relationships or working life.

In 2008 the new economics foundation (nef) was commissioned by the UK government's Foresight project to review the inter-disciplinary work of over 400 scientists from across the world. The aim was to identify evidence based actions to improve wellbeing that individuals could be encouraged to build into their lives. The five actions are:

1. **Connect:** developing strong relationships and social networks

2. **Be active:** more exercise and play improves wellbeing
3. **Take notice:** including self-awareness and the importance of developing social and emotional literacy
4. **Keep learning:** nef proposes that learning 'encourages social interaction and increases self-esteem and feelings of competency'
5. **Give:** studies in neuroscience show that co-operative behaviour activates the reward area of the brain. Individuals who actively engage in their communities report higher levels of wellbeing. Research by nef shows that building reciprocity and mutual exchange through giving and receiving is the simplest way to build trust and create positive relationships and resilient communities.⁷

THE LINKS BETWEEN WELLBEING AND PARENTING

It was rubbish really. I haven't got good memories. Dad used to just smoke weed and my mum used to drink, just wrapped up in their own little world, didn't notice what we were doing so we could just do what we wanted.

It was good at the time but now I wish it wasn't. We never got punished.

Young person, reflecting on their parents

Happy parents are more likely to raise happy children that thrive in the future. However, parenting is not gender neutral. Mothers and fathers tend to play different roles in their children's lives. For instance, a study by Videon reported that while relationships between adolescents and their fathers are more volatile, it nonetheless concluded that an adolescent's satisfaction with their relationship with their father had significant influence on the wellbeing of the child.⁸ And although this is gradually changing, mothers still are more likely to work less, do more caring, and be the primary carer in the early years, and if the parents' relationship ended. A significant number of studies⁹ have confirmed that maternal depression (and poverty), can have a negative impact on the relationship between a parent and child, and on a child's cognitive development. Maternal depression is also strongly related to whether or not children exhibit behavioural problems. However, the mental health of a father can modify the impact of poor maternal mental health,

acting as a buffer for a child's emotional and behavioural problems where the father experiences better mental health but resulting in more severe problems where the father also experiences poor mental health.¹⁰

Key changes in family life over the past forty years have also shaped levels of wellbeing. This includes the increase in cohabitation that appears more fragile than marriage; the impact of family restructuring on children introducing step-parents and siblings and lone parents; the increase in maternal employment and the sharp rise in child poverty between the mid-1970s and early 2000s. Also, the UK has 13 million grandparents, with one in three of the population over the age of fifty having one or more grandchildren. Many grandparents are the only carer or have their grandchildren several days a week.

It seems logical that a parenting course that initiates a sustained improvement in the relationship between parent or carer and child ought also to improve the overall wellbeing of both individuals. We may also expect that the better parents feel about themselves and their role in the family and society, the better equipped they will be to engage with their children in an encouraging and supportive manner. Studies have shown that this kind of positive parental investment has the potential to influence a child's conduct, educational achievement and health and reduces the likelihood of police contact.¹¹ It can also yield a long-term gain for children in terms of employment, housing, income, relationship stability and a child's own parenting skills in the future.¹²



If parents or carers are poor, workless, in ill health, or experiencing other forms of disadvantage, this can limit the external and internal capabilities they can draw on to support their children appropriately. Help from the wider community or family may be more difficult to access; there may be fewer positive role models in their lives to inspire them or their children to seek better futures; and multiple deprivations in themselves can cause or contribute to poor mental health. All these factors tend to reduce wellbeing.¹³

Conversely, if a sense of wellbeing and resilience can be maintained, then in spite of the huge handicaps created by deprivation, parents can still make positive impacts on their child's life and future prospects. One recent study in Glasgow involving 231 parents and 259 children and young people underlined the significant efforts parents made to do their best by their children.¹⁴ "Parents described parenting styles that were open, democratic, sophisticated and tenacious in working alongside their children to keep them safe," the researchers pointed out. "This challenges views that parenting problems are rife in areas with high levels of antisocial behaviour."

This work, among others, also tells us that warm and supportive parent-child relationships can protect against some of the adversity encountered by children growing up poor.¹⁵

The quality of family relationships also has an impact on how wider communities function. Alejandro Portes¹⁶ defines social capital as 'the ability of actors to secure benefits by virtue of membership in social structures and other social networks'. Robert Putnam in 'Bowling Alone the Collapse and Revival of American Community'¹⁷ describes social capital as the product of communal activity and community sharing. A key element of social capital – in other words social relationships within the community – is linked strongly to wellbeing.¹⁸ It appears that wellbeing and resilience¹⁹ can shore up social capital and inoculate against the worst effects of deprivation and social exclusion.

WELLBEING AND THE 'PROBLEM' OF PARENTING

Everything I see on television and everything I read makes parenting sound such a nightmare. I love my son I really do but as soon as he hit his teens, I decided the nightmare was happening in my own home. I completely lost all sense of perspective. I thought everything I was doing was wrong. I blamed myself and I blamed him, for making me feel like a bad parent. Then a friend pointed out that the way my son was behaving was normal. That's what teenagers do. I can't say that's all it took – but it was an enormous help. I phoned a helpline and the woman gave me a bit of advice at just the right time. My mum says in her day, parenting was something you just did. Now, it's a commando course.

A mother, 43, from Manchester

She doesn't shout as much as she did – but I didn't really mind it when she did. That's what all my mates' mums do.

Her son, 15

In the public narrative, the growing recognition of the importance of wellbeing²⁰ is frequently overshadowed by the unduly pessimistic and apparently dominant view that the 'family is in meltdown' and we have 'collectively lost the art of raising children'. Parenting has often become a matter of public concern and punitive policy, seen mainly through the lens of antisocial behaviour, crumbling communities, the decline of respect, the impact of poverty and fears of 'feral children'.

"I picked up a leaflet in our children's centre about the terrible twos and I immediately felt as if everyone was pointing me out as someone who couldn't cope. It's ridiculous I know but that's how I felt."

A mother of one from Hertfordshire

Raising children can bring much joy, love and a rich sense of wellbeing, but this can be suffocated if parenting is always seen in negative terms.

Talking about parenting in heavily negative terms can also make people think that nothing less than extreme intervention will do. For many, a phone call to

a helpful person, a brochure picked up in the library, or a conversation with a health visitor will suffice. For others, a workshop and the right information at points of transition in a child's life – for instance from primary to secondary school – makes a difference. A minority require more intensive help, including initiatives like the Family Intervention Projects where parents involved in anti-social behaviour receive intensive, sometimes residential, programmes to address their multiple needs, an approach which has been positively evaluated.²¹ These intensive interventions are sometimes compulsory. When it comes to parenting support, one size does not fit all.

Against the backdrop of rising prosperity and improved outcomes for the majority of families, over the past decade around 140,000 families – two per cent of the population – allegedly experience complex and multiple problems that are deeply entrenched and mutually reinforcing.²² The problems that can build up from the cumulative impact of generations of unemployment, mental ill-health, substance abuse, and chaotic life styles require a tailored, flexible, holistic approach that is multidisciplinary and lasts over time. The recession and the increasing pressures the recession is putting on many families may well increase the number of families needing intensive support to manage the often numerous difficulties in their lives.

Former chief executive of the charity Parentline Plus Dorit Braun offers a reminder of the positive elements. Braun states:

Parents and carers bring up children because they love them, and they want the best for them. They don't do it because the state asks them to, and they don't do it because it is an investment in the future of society. Anyone working with parents directly must engage with the love that parents have for their children and acknowledge this as the key motivator.

All parents need help some of the time. Some parents need help all of the time. Services need to be available to meet a diversity of needs, a diversity of parents and a diversity of problems.

Dorit Braun²³

Research tells us that regardless of whether help is one-off, short-term or prolonged, parents seek support that is given in a non-stigmatising way that encourages self-efficacy, that retains a parent or carer's sense of control and respects his or her parental expertise and that treats a parent as an equal and a partner.²⁴ All of which can improve family wellbeing.²⁵

*For families to be resilient, they must be empowered. Empowerment models support families in proactively identifying needs, mobilising resources, and accomplishing goals through the development of personal capacities, strengths and abilities. This is contrasted to expert models which often lead to dependency on the professional, fail to produce personal resources and positive belief systems, and result in limited skills in assessing personal needs and mobilising familial resources in the future.*²⁶

Sheridan et al, 'Families as context for children's adaptation'

Support for parents needs also to recognise the ecology of parenting – the role of the extended family, friends, the community, wider society. In a seminar given at 11 Downing Street²⁷, Mary MacLeod, then chief executive of the Family and Parenting Institute, said:

Parents don't raise children in a family vacuum. The whole environment is involved and the environment over generations. It is a deep challenge to identify causal pathways and processes when effects are multi-directional and emerge from both the intimate sphere of values, aspirations, relationships, conversation and play, as well as from outside circumstances like poverty, inequality, mental health."

And just to complicate things further, parenting quality in any one person is not stable. It fluctuates, affected by circumstances and, of course, by the children and their particular inheritances and their developing personalities, aptitudes and aspirations. Children are not blank slates – as I, a parent of two, knows.

DIFFERENT PARENTING STYLES

In the US in the 1960s, Diana Baumrind proposed a four types of parenting styles: authoritative, authoritarian, permissive and neglectful.²⁸ Baumrind argued that children need to have limits set on their behaviour and require guidelines on what is and is not appropriate, but the ultimate goal is for children to develop their own set of internal controls, rather than be constantly under the control of others. What is needed in 'good enough parenting', she said, is not the imposition of a standard pattern, but recognition that children differ in their characteristics and vary in how they should be treated.

'Authoritative' parenting is characterised as attentive, caring, responsive, cooperative and warm, with child-friendly age-appropriate methods of discipline. Out of Baumrind's typologies, authoritative parenting is the style most associated with beneficial outcomes for children. According to Churchill and Clarke, this balance of care and control promotes 'children's self-esteem, social skills and competencies which in turn help children to develop a positive self-image, form friendships and do better at school.'²⁹ In adolescent development and wellbeing, researchers have identified three other features that are important in addition to an authoritative style of parenting. These are family relationships and adolescent-parent communication, parental support for education, and parental wellbeing.³⁰

In *Parenting in Ordinary Families, Diversity, Complexity and Change*, Andrea Waylen and Sarah Stewart-Brown investigated aspects of parenting not covered in many other studies.³¹ They focused on the quality of the relationship between parent and child, and concluded that across cultures, parents are doing a good job in most circumstances and, while a move out of poverty and increased parenting support will help, "greater benefit may be seen if parenting policy were to emphasise the promotion of parent's mental and physical health."

WHAT SHOULD BE THE ROLE OF THE STATE?

Government, whether local or national, cannot legislate to make parents or their children happy. It cannot enact laws that eliminate the complexities involved in parenting in the UK in the 21st century. We live in a time when the rate of family break up is high.³² Many more mothers are in paid work than in previous decades and there is an increase in families that have two parents in employment.³³ The internet and technology makes the supervision and safety of children more challenging. In addition, parents have to deal with the ripple effect of the celebrity culture and the sexualisation of the young. Alcohol and drug abuse and the fear of street and knife crime can make some parents very protective, reducing their children's chances of developing resilience. Other parents, for a variety of reasons, may give their children very few or no boundaries, and lack consistency in their approach. These differences in approach cut across social class, but intensive scrutiny and disapproval tends to fall disproportionately on families from lower income groups.

What government can do, however, is to try to mitigate some of the negative effects of modern-day living. For instance, by espousing flexible working and ensuring that there are more secure, safe, recreational places for the young. It can also offer support that improves rather than undermines the autonomy and confidence of a parent and that respects the balance required between the need to respect the privacy of family life, and the need to take action in the best interests of parents and children.

Government has traditionally intervened in family life to protect the interests of children, in extreme cases removing children from their families to save them from neglect and abuse. In recent years a raft of new programmes has been developed to take action to improve family relationships in the interest of the wider community. These have aimed to help parents who want to stop their children behaving badly at school and in the neighbourhoods where they live.

The government's Respect task force states: "It is crucial to work with young people in the context of the whole family. Parents are the major influence on their children's behaviour and play a major role in promoting positive

behaviour and tackling anti-social behaviour."³⁴ A range of initiatives aimed ultimately at reducing youth crime and anti-social behaviour have proliferated, including parenting contracts and orders, and various parenting support services.

As government moves ever further into this traditionally private domain, it is even more vital that it is clear on what constitutes 'good enough' parenting, how and when support is required, and what criteria indicate when it is appropriate for parents to be forced to take up that support.³⁵

Parenting interventions often aim to do two things: to change behaviour (of parents or children), and to increase understanding and improve family relationships to ensure that positive change becomes deep rooted and sustained. When interventions are triggered by an urgent or serious issue – for example serious anti-social behaviour in the community or their school – then the initial motivation will be to tackle the immediate problem. But this needs to be reinforced by a longer term approach. Ideally the outcomes should be to reduce the risk factors and increase longer term wellbeing.

So how does the government's current strategy on parenting support affect not just adult and child behaviour but also the wellbeing of parents and carers, including grandparents? If adult levels of wellbeing improve, does that necessarily correlate with a change in parenting? The government's parenting strategy, delivered by local authorities, is still in its infancy but nevertheless it has already reached a significant crossroads. What barriers impede its effective implementation and, conversely, what policies might ensure its chances of success?

POLICIES AND PARENTS AND CARERS – A BETTER FIT?

Government's desire to influence parenting, particularly working-class parenting, has a long tradition. In the 1960s and 1970s, there were attempts to foster a positive attitude to schooling in parents. While in the early 1990s,

the government's Parent's Charter set out parental responsibilities ranging from attending school events to supporting school policies on homework and behaviour.

The references to the importance of the wellbeing of adult and child are however relatively new. In 1998, a year after Labour came to power, the government published a green paper called *Supporting Families*.³⁶ It promised amongst other policies, a better work-life balance and greater practical support for parents. Three years later, a national exercise to identify services that provide support for parents was undertaken by the charity then called the National Family and Parenting Institute (now the Family and Parenting Institute). It identified over 6,000 services (statutory, private and voluntary) providing various forms of parenting support, qualifications and training of varying quality.

In 2006, a report by PricewaterhouseCoopers (PwC) commissioned by the government identified considerable gaps in the provision of parenting support caused by weak or poorly co-ordinated commissioning processes.³⁷ It found a "significant amount of unmet and latent demand [...] particularly true at lower tiers of need where many families complain that the services that they want are not available to them [...] In future, demand for preventative support is expected to continue to rise as public attitudes change, awareness of services grow and services become increasingly mainstream." PwC suggested that a strategic approach would lead to less duplication of effort and services in local authorities.

In 2007, the government published *Every Parent Matters*. It pulled together a raft of initiatives to create a scaffolding of support for parents of children aged up to 19. "Families bring up children," the document stated. "The role of government is to ensure that all parents not just those for whom it comes naturally are able to make confident, informed choices which they feel are right for their family; shape services to respond to their family's needs; and work in partnership with services to reinforce the benefits for their children's outcomes and access additional support when they need it.'

Every Parent Matters also announced that local authorities would receive £7.5 million in the period 2006-2008 to map provision and design a parenting support strategy. Since March 2008, each authority has appointed a commissioner to champion services for parents, two parenting 'experts', as well as expanding a parents' information service and recruiting facilitators and course leaders for a range of services based in venues such as children's centres, extended schools, and village and community halls. A recent mapping exercise has revealed that while 70 per cent of local authorities have published a parenting strategy, many expressed concerns about a range of issues including the lack of capacity to run programmes; insufficient funding; questions around the sustainability of provision; the lack of ring-fenced funding and inadequate evaluation of outcomes.³⁸

The National Academy for Parenting Practitioners (NAPP) has also been established with three main areas of work: training, development and support for the parenting workforce; acting as a national centre and source of advice on high quality academic research; and supporting the government's parenting agenda as it develops.

NAPP has had a turbulent and difficult beginning, and its future autonomy is uncertain, but it is developing award-winning research. The scale of the challenge it faces is laid out in *Reaching Out: Think Family*.³⁹ It provides a list of what it terms 'challenges to engagement' around parenting support for the most disadvantaged families. Among the challenges are hard to access information services, services not relevant to needs, staff not treating individuals with respect, fragmented services, and a system that is more interested in policing than support, making parents reluctant to seek help.

I had tried a few courses before this one but they just made me feel more crap. It was like I was always putting together this jigsaw puzzle and it was the wrong picture on the box. Now I get on great with my daughter now. Don't get me wrong – she's moody, she's eleven. But we're getting there.

Mother of three who was helped by a parenting course offered through her daughter's school

REVIEW OF LOCAL PRACTICE IN THREE LOCAL AUTHORITY AREAS

THE LOCAL WELLBEING PROJECT WORKS WITH THREE LOCAL AUTHORITY PARTNERS: SOUTH TYNESIDE METROPOLITAN BOROUGH COUNCIL, MANCHESTER CITY COUNCIL AND HERTFORDSHIRE COUNTY COUNCIL. THIS SECTION EXPLORES THE ACTIVITY THESE THREE COUNCILS ARE ENGAGED IN WHICH BOTH SUPPORT PARENTS WITH THEIR PARENTING PRACTICE AND IMPROVE THE WELLBEING OF PARENT AND CHILD. IT EXAMINES HOW MANCHESTER, HERTFORDSHIRE AND SOUTH TYNESIDE HAVE INTERPRETED GOVERNMENT DIRECTIVES AT LOCAL LEVEL AND HOW PROMINENT WITHIN THEIR PARENTING SUPPORT ACTIVITIES IS THE GOAL OF ENHANCING NOT JUST THE WELLBEING OF CHILDREN, BUT ALSO ADULTS.

Hertfordshire, Manchester and South Tyneside have offered parenting support for a number of years. In step with the government's recent Every Parent Matters strategy each authority has recently consulted with its local community before publishing a three-year strategy on parenting support. All three offer help across the spectrum of support, promoted well in the local community in libraries, Sure Start projects, children's centres and extended schools, along with other venues. All three are trying to implement parenting strategies that are attuned to the individual requirements of a family, non-judgemental and strategies that strive to reduce the stigma around parenting support.

I felt isolated. And then I began to realise that others in my group had gone through very similar stuff. I found myself giving a bit of advice. Gradually I've begun to think a bit more positively. Gradually I've begun to tell myself I'm not all bad.

Parent taking part in Parenting Your Teen in Manchester (PYTIM)

Services for parents are often described as those that are 'light touch' (level one) support, through to 'acute interventions' (level four).⁴⁰ The table below describes these four stages. It relates them to a hierarchy of need and the response from policy and practice.

The hierarchy of need flows from 'basic needs' at the bottom; through 'coping needs' to 'flourishing' at the top. The hypothesis is that as parents receive support and their requirements shift from 'basic' through to 'flourishing', the emphasis on service provision can move more explicitly to wellbeing and resilience.

Alongside this we can map the need for support from the broader parenting support system provided by government, and how different interventions fall into the various categories of need.

A TYPOLOGY OF SERVICE PROVISION	TYPE OF NEEDS BEING ADDRESSED	RESPONSE NEEDED FROM POLICY AND PRACTICE
<p>Level 1 is a 'light touch'. It addresses universal need and offers information and advice for parents and carers on specific issues and on more general aspects of parenting. Services here are not targeted; they are available for all.</p>	<p>Flourishing needs</p> <p>Enables parents to 'top up' on their skills and knowledge on an informal 'light touch' basis.</p>	<p>Universal services: including information on parenting; Children's Information Service and other sources of advice; advice on key choices and transitions (for mothers, how to return to work; childcare; starting school; primary to secondary transition), encouragement of support groups; flexible family friendly working practices for mothers and fathers</p>
<p>Level 2 is for parents with additional needs who are referred by other professionals or who self refer. Services here are targeted but still at relatively large populations. Parents have to overcome few hurdles to access services. Attendance is voluntary.</p>	<p>Coping needs</p>	<p>Targeted specialist preventative services: This may include visits by specialist parenting support outreach workers, voluntary attendance on an evidence-based parenting programme, or intensive individual and family support. This can include different interventions for mothers and fathers.</p>
<p>Level 3 addresses more complex needs that may be addressed through specialist services, often provided by professionals. This includes more intensive one to one support, and parenting interventions that may be compulsory.</p>	<p>Enables parents and carers to do more than 'just get by', on a short-term basis where parents can dip in and out of support as needed.</p>	<p>More complex targeted services: This could include referral to an educational psychologist or a child psychiatrist for ongoing support; parenting support services tailored to meet individual needs; some parenting interventions which are attached to parenting orders that require attendance on a course.</p>
<p>Level 4 is for acute needs that may involve statutory intervention, the threat of custodial sentences, intensive and often sustained intervention. The principal that there should be 'no wrong door' is important in the approach; also a focus on the whole family and acting holistically, building on family strengths and providing tailored support.</p>	<p>Basic needs</p> <p>Enables parents and carers to become resilience and begin coping with difficult life circumstances. Using a holistic intervention to foster various life skills that impact on parenting.</p>	<p>Targeted, intensive expensive, services: this includes services that are carefully targeted to families and individuals within the family. This can include Family Intervention Projects, or evidence based parenting interventions delivered as part of wider packages addressing different needs of the people involved.</p>

Under 'level 1' in this typology, the three local authorities offer a range of imaginative courses and workshops, often 'home grown' and intended for every parent and carer, a universal audience. Some of these courses are geared for a certain phase in a child's life, for example weaning, the terrible twos, the first day at nursery, or the arrival of a sibling. Others offer guidance around specific aspects of parenting such as creative play, baby massage, making the summer holidays fun, or the importance of consistency and boundaries. They are also supplemented by information via help lines and literature, including government funded Children's Information Services.

The 'second and third tiers' stress preventative rather than remedial support. Hertfordshire, Manchester and South Tyneside offer courses such as Barnardos Parenting Matters, the Family Caring Trust programmes and sessions designed specifically for parents and carers of adolescents. In Manchester, for instance, the local authority's Educational Psychology Service has developed a course employing Webster Stratton called Parenting Your Teen in Manchester (PYTIM). It runs for eight weeks and has groups of up to six parents. The course covers issues such as 'strong feelings', 'how not to murder your teen', 'ending the shouting match', 'communication and problem solving', 'praise and reward', 'say what you mean and mean what you say' – and a concluding session called 'look what we've achieved'.

If a parent has more complex needs – falling into 'levels three and four' - then the choice of parenting programmes may become more restricted. The government has endorsed three evidence-based programmes:

- Webster-Stratton programme also known as Incredible Years
- Triple P (the Positive Parenting Programme)
- Strengthening Families, Strengthening Communities (SFSC).

All three use tools and techniques that are also associated with evidence of wellbeing (the programmes are described in more detail in Appendix 1). At these levels, interventions are personalised to meet the needs of individual mothers and fathers, allowing individual problems that are affecting parenting to be addressed. These can include mental health, drug and alcohol misuse and violence.

The movement from level one to four is reflected in the type of interventions provided by the wider parenting system. At levels 1 and 2, interventions are less costly per parent or per family, and a range of different types of information and support are available. However at level four, interventions need to be sustained and intensive and are therefore resource intensive. Agencies and public policy makers need to be sure that there is the best possible chance that these will work. This is because of their cost, and because attendance can be made compulsory under the law, but primarily because, by this stage, the wellbeing and even safety of children, mothers and fathers is under real threat. The three evidence-based programmes are used here, often supplemented by further specialist support for individuals needs. Newer services, like Family Intervention Projects, which provide intensive support in residential settings, have been developed in the last decade, and have been evaluated and endorsed by government.

A good parenting course will consider issues of parental self-esteem and confidence and the consequent outcomes for the children in the family. One difficulty is that we are hard pushed to define wellbeing but it has to be part of a holistic approach.

In parenting support, we are dealing at a micro level with the child and family. What also impacts is what's happening in the community and wider society.

[David Silverman, Parenting Commissioner, Hertfordshire County Council](#)

THE THREE LOCAL AUTHORITIES

MANCHESTER CITY COUNCIL

Manchester is a city with 437,000 inhabitants, lying at the heart of the Greater Manchester conurbation. The city has experienced sustained regeneration. However, in the 2004 Index of Multiple Deprivation, the city was ranked the fourth most deprived area in the country.⁴¹

The 2001 census showed that Manchester had 107,000 children and young people aged up to 19 years (27 per cent of the city's population). Almost 28 per cent of children and young people in Manchester are from a black and minority ethnic group. Research suggests that as many as 20 per cent (6,000) of children under five in the city are at risk of developing antisocial behaviour in later life.⁴² A third of households with dependent children are headed by a lone parent. Rates of unemployment, disability and sickness are significant.

The local authority's aim is early identification of risk factors such as aggressive behaviour, poor parent-child relationships, developmental delay and parental depression, in order to target evidence-based interventions. *Positive and Responsible Parenting in Manchester*, the city's parenting strategy states: "the majority of parents in Manchester are doing a great job and some of them are doing so in very challenging circumstances. The parenting skills of these parents can be an invaluable resource to support other parents. However, for some parents, their own level of difficulties and needs make it very hard for them to meet the needs of their children [...] If we are to improve outcomes for children in Manchester, working to support parents to meet their responsibilities will be crucial."⁴³

The roots of Manchester's current parenting strategy can be traced back more than a decade and lie in the city council's growing concern about the ways in which the behaviour of adults and children were causing difficulties for others in the local neighbourhood.

In 2004, a multi-agency Positive and Responsible Parenting Board was established with representatives from the children's services department, health, housing, youth offending team, the voluntary sector and others. It is now called the Parenting and Emotional Wellbeing Board and has strong links with work on behaviour and emotional wellbeing in schools.

Extensive consultations resulted in an agreed definition of what constituted 'good' parenting. It includes consistency, praise and play, warmth, caring and nurturing and ensuring a child attends school regularly. The parenting board also established a number of shared assumptions that underpin work with parents in Manchester. They include the belief that parents and carers must take responsibility for managing their child's behaviour, and all services must ensure that parents are valued, respected, well informed and consulted about their child.

At the heart of the Manchester Parenting Strategy is the delivery of services led by the Children and Parent Services (CAPS), a multi-agency team that includes facilitators of parenting courses, clinical psychologists, family support workers and a coordinator of volunteers. A second arm – Children and Parenting Services Training in Partnership (CAPSTIP) – delivers the parenting programmes, and trains facilitators.

Staff from a range of agencies have been trained to deliver the Webster-Stratton Incredible Years programme, the Pathfinder Parenting Your Teenager in Manchester and the Strengthening Families, Strengthening Communities (SFSC) parenting course. Voluntary sector partners have largely been trained in either SFSC or Webster-Stratton.

"We are seeing a loss of parenting skills in a generation," Parenting Commissioner Shirley Woods-Gallagher says. "Some of our children are in highly chaotic families. We shouldn't wait until there is a crisis and the mother goes to the GP for Prozac and the child is referred to child and parent services with a conduct disorder. The parent is medicalised and the child pathologised. We have to offer the right kind of help much earlier."

The most deprived area of the city, the North West, has been particularly targeted for early intervention. It also has an active parents forum, and that in itself may enhance adult levels of wellbeing. “We keep in contact with parents who have been through courses. We try out new ideas, ask their views, offer refresher courses and keep them hooked in,” explains Melanie McGuinness, north-west regional manager of Family Action (formerly the Family Welfare Association and part of a multi-agency partnership between Early Years and Play, Family Action, the Educational Psychology Services and Health [Child and Adolescent Mental Health Services]. ‘We want parenting support to lead to other possibilities such as volunteering, training and activities. If a parent feels better about themselves they may feel better about their child.’

Outreach is a vital element in the strategy. Family support workers build a rapport with parents and carers, including grandparents. Parenting courses have a notoriously high drop out rate (between 40 to 60 per cent) but with intensive one-to-one support when necessary, CAPS courses show that 72 per cent of those who begin a course also complete it.⁴⁴ This outreach and home visiting is seen as essential to engaging the families who are most in need of intervention. Phone calls to parents and the development of a relationship with the support worker play an essential role, as the following example provided by one family support worker illustrates.

I first met Lisa while recruiting for a parenting course at a local toddler group. I saw her there twice before she agreed to meet me. Lisa was really unsure about groups, and was quite prickly towards me at the pre-course meeting. I had to really reassure her that this was a course for any parent and that no one had targeted her just because she was a teenage parent with three kids.

I sat next to Lisa on the course but she didn't want to speak at all [...] I visited Lisa at home after every session so I could support her with the content. It was really important to listen carefully to [her] and acknowledge her fears and worries.

Lisa really warmed up when I normalised some of her experiences with

some of my own. It wasn't all plain sailing, at one point Lisa walked out of the session after she had felt put on the spot, but as time went on she grew in confidence, eventually speaking herself. I phoned Lisa each week before the course to remind her about coming but also to get an update on the ups and downs of the week.

It took a long time to build a trusting relationship, but [...] eventually I got to know her very well.

She has a better relationship with her children now and understands the value of play. In her words, 'we are looking forward to a brighter future'.⁴⁵

HERTFORDSHIRE COUNTY COUNCIL

Hertfordshire covers 643 square miles. The authority's main challenge in addition to its size is that it is the most densely populated shire county in the country with over a million residents.

Twenty per cent of the population is made up of parents and carers with dependent children. One in ten residents belongs to a minority group. Approximately six per cent of children in the county are identified as having special educational needs. Hertfordshire's apparent affluence masks pockets of disadvantage – eight per cent of the population live in income deprivation.

The local authority first became involved in providing parenting support in the 1990s. Since the latest tranche of government initiatives, a parenting strategy has been formulated by the Parent Support and Information Strategy Steering Group, a multi-agency steering group. It includes managers responsible for extended schools, children's centres, family learning, disability services, psychology services, Youth Justice, child and adolescent mental health services and the primary care trust. It is led by David Silverman, the Parenting Commissioner.

The mission statement of the strategy states: "Parents and carers in Hertfordshire will receive the information, services and support they need to help them care for their children and equip them with the skills they need to ensure that their children are healthy, safe and have the best opportunities in life."⁴⁶ Wellbeing is an articulated aim of the strategy but only in terms of children's needs. It continues: "The role of parents is vital to the safety, wellbeing and life chances of all the country's children and particularly those who, for whatever reason, are especially vulnerable."

Hertfordshire, like Manchester, includes services targeted at four levels of need with more resources focused on the most deprived families, identified by those living in defined geographical areas. In addition, a 'passport' to a range of parenting services is available to all. The county is divided into 10 districts. Each has a parenting and information officer responsible for commissioning services, channelling referrals, and providing information. Each district also has a parenting forum for professionals working in parenting support.

Approximately 550 schools and extended schools and 82 children's centres (by 2010) working through parenting coordinators provide the main conduits for parenting courses, workshops, information and advice. The budget for the provision of parenting courses is not large – around £200,000 in total – and allows for only eight to 10 formal courses in each district, accommodating 12 parents at a time.

Shorter courses, workshops and a helpline are commissioned from a range of organisations in the third sector and paid out of a patchwork of local authority budgets. These organisations are both national and local, and include Homestart, Parentline Plus, and ADDvance. They are commissioned either at a district level or by local children's centres and schools, to deliver workshops, drop-in or information sessions, or accredited courses with a specific focus. Examples of the latter include 'What a Dad Can Do!', 'Living with Teens', '123 Magic' and 'Raising Confident Children', or sessions focusing on sibling rivalry, or being a teenage parent.

The charity Parentline Plus trains teaching assistants to deliver parenting courses in schools, using volunteers. Hertfordshire Practical Parenting (HPP) began four years ago in response to a need to support parents of teenagers, and particularly parents of youth offenders, those at risk of exclusion from school, and families who are threatened with eviction because of antisocial behaviour. Some of the features of the programme include weekly discussion groups; courses covering sibling rivalry, improving inter-family communication, and understanding children's feelings; and meetings with other agencies such as Youth Justice.

Children's centres have drop-in sessions run by an educational psychologist. Families in Focus, a community interest company, also offers a range of accredited courses, while children's centres and extended schools also offer courses for dads and separated parents.

"This course helped me to think about what I do and the patterns of behaviour I was teaching my children," said one parent on the Confident Children course. "Changing my approach has meant my children have changed too. They now behave better and we are having much more fun."

The use of such courses also opens up another opportunity to improve adult wellbeing. Parents and carers are encouraged to train as facilitators. This increases their self-confidence while also addressing the desperate shortage of parenting practitioners.

Liz Aplin works for the charity Hertsmeare Leisure Trust, delivering leisure services. By 2010, she will head eight children's centres working in partnership with Hertfordshire County Council. Children's centres in the area vary hugely in size from a room in a village hall to Boreham Wood and Elstree Children's Centre (BECC), the £2.5 million newly-built children's centre, opened in September 2008. She is a former nursery nurse, district nurse, hospital nurse and health visitor, and knows that health visitors are the 'canary in the cage' when it comes to signalling a parent is in difficulties, but are in chronic short supply across the UK. Aplin, based at BECC, is an accredited facilitator and trainer, a parenting support coordinator – and a talent spotter.

“When coordinators run a course they guide us to parents who they think might make good facilitators. We know whether a person has it or not. It’s not about metrics, it’s about observation, experience and intuition. We give adults encouragement. It’s the fundamental element that’s often missing, especially for parents. It’s surprising how many people receive no encouragement at all.”

“But what we don’t want”, she adds, “is people going off on their own whims, setting up courses based on their own little mission. All our parenting provision has to be accredited, evaluated and properly delivered.”

Aplin says the facilitator’s intuitive approach, based on experience and empathy, is critical to the success of any course. “At a baby clinic we might say ‘let’s talk about sleeping problems. This is what worked for me but it might not work for you. You know your own family, tweak this for me.’ It’s just a group of us learning together. We don’t use the word ‘expert’, it doesn’t belong in parenting support.

“A stigma still exists but at the end of the day it’s how you sell it. I say to a parent ‘this is two hours for you. You’ll really enjoy it, and you’ve got plenty to give. Every child matters but so does every parent.’ We are trying to normalise seeking just a little bit of help at certain times in a child’s life. We don’t want people to wait until they are struggling and in crisis.”

In Hertfordshire, a Parent Early Intervention Pathfinder Pilot for 8 to 13-year-olds ran until March 2008. The scheme has now been extended for another three years. The original budget was £250,000 a year. Once the pilot ended, it was cut to £100,000 annually. The government stipulated that Hertfordshire’s Pathfinder pilot should implement the Strengthening Families, Strengthening Communities (SFSC) programme. The pilot and the current three-year strategy is managed by Emma Allen.

The parenting strategies of both Hertfordshire and Manchester are hampered at times because facilitators are seconded from other posts to train and then run parenting support courses. Some line managers, for understandable reasons, object that this diversion to parenting support is time-consuming

and a drain on what they see as mainstream resources. It takes five days to train an SFSC facilitator and costs just under £1,000. Each session of the course requires three facilitators. 20 courses costs just over £69,000 to run plus transport, crèche, venue and refreshment costs for parents taking part, along with follow-up support to allow those parents who are interested to remain in touch.

“What we are doing is very new,” Emma Allen says. “I’m glad we’ve got as far as we have but there’s a lot more work to do. Parenting courses are still seen as something separate, an ‘add on’. They need to be part of mainstream services. They need an adequate budget. They also require facilitators who have the opportunity to attend ‘top up’ training to make sure the programme do not become diluted and lose their value. Delivering high quality parenting support with an increased recognition of the importance of a family’s wellbeing for the development and happiness of a child should be the driving force behind all the work we are doing.”

SOUTH TYNESIDE

South Tyneside is the smallest of the three local authorities and, like Manchester, it faces the challenge of significant deprivation. It covers 64 square miles and has a population of 151,300. Around three per cent of the population are from black and minority ethnic groups. Six out of ten residents live in neighbourhoods ranked in the 25 per cent most deprived in England.

South Tyneside has over 38,570 children aged up to 19 and at any one time 30 per cent may be vulnerable.

The parenting strategy is part of an entire local authority approach to wellbeing encapsulated in *Spirit of South Tyneside*, a sustainable community strategy, regeneration strategy and local area agreement.⁴⁷

Among the *Spirit of South Tyneside*’s top 10 ‘must shift’ priority objectives over the next three years is one listed as ‘promoting culture and wellbeing so that everyone in our communities can be the best that they can be’.

One of the benchmarks of the local authority is the approach signified by the lines 'We asked. You said. We Did'. It applied the same approach to the formulation of its parenting strategy. In November 2006, it began a year-long consultation with the entire community. The result was the Families First (Parenting) Strategy (2008-2011). It has three key principles: prevention, partnership and participation.⁴⁸

Mapping has led to an expansion of services – the goal is to resist using punitive measures such as parenting orders and ASBOs. Instead, what is preferred are tools such as family group conferencing, mediation, and encouraging families to take part in shared activities. These include weekly family cookery courses, the special needs integrated play scheme run by parents, and holiday outings for families. Parenting skills are also taught within football coaching courses run with Sunderland Football Club.

The objectives for the Families First (Parenting) Strategy are holistic and linked to the wider community. The message that is constantly repeated and woven into the main theme is that what you do for an individual parent and child, you do for the benefit of the whole of South Tyneside. The goals laid down by the local authority include jobs and enterprise; independent and healthy lives; safer and stronger communities; a high value placed on culture and wellbeing; and environment, housing and transport, which reflects upon the lives of our children and young people.

In the parenting strategy, the four tiers of need are delivered through children and young people's services, adult services, neighbourhood services and some are provided or commissioned by the primary care trust and offered through voluntary organisations. A parenting reference group meets to adopt a joined-up approach to the provision of parenting and family support across the borough to end 'the silo mentality'. There is a promise that an audit of support for parents and carers will be undertaken annually.

Margaret Welch is the parenting commissioner. She is based at the South Tyneside Early Excellence Children's Centre (STECC) situated in the Hebburn North Ward, which is categorised as one of the worst 20 per cent of all wards

in England. In addition to parenting courses, the centre offers a nursery, day care provision, a crèche for parents taking training and outreach.

If you try and tell parents what to do; if you believe it's all about issuing a set of instructions, that's completely missing the point. The aim is to help parents to understand themselves and their own children better. They have to lead the way.

"I believe parenting support matters because I know it can and does turn lives around. What makes the difference is how it's delivered and the skill and sensitivity of the facilitators.

Margaret Welch, parent commissioner for South Tyneside metropolitan borough council

Parenting support is seen as a door to a better future for both parent and child. So far, 95 per cent of the families who begin with some form of parenting support progress onto other training courses, some returning to work or moving on into further education. In 2008, 70 per cent of the parents and carers who came through the centre were the hardest to reach – half of those have been assessed as having dyslexia or dyscalculia. Sue Ford, adult services officer, reports: "We see impact every day. Parents who begin to encourage their child, to listen and value what their child says and does. Parents involved in family learning. Parents and children enjoying a healthier lifestyle.

We see children, adults and families grow in self-confidence. They no longer see themselves as disadvantaged, but someone to be valued and respected, taking responsibility for themselves, having belief that they can make a difference and implement change in their lives.

In this one children's centre, the spread of parenting support was reflected in the following snapshot at the time of the visit:

- 25 parents attending Positive Parenting courses
- 40 adults attending baby massage
- 32 attending family learning programmes, Early Start and Step by Step to Literacy

- 14 parents attending Parentline courses and 14 attending stress management and confidence building courses
- 20 parents act as volunteers and two monitor and support lower level learners and facilitate support groups.

"If you're a parent with a 14-year-old who smashes the house up on a regular basis, what happens to you when your six-week course comes to an end?" asks Margaret Welch. "We hope to see lives changed, so we continue to offer support long after a course ends. We aim for more than just making things a little better. This is about the wellbeing of the whole family."

In terms of the early years, the Families First strategy is unequivocal about the importance of adult wellbeing in parenting support. It states: "For our children to get the best start in life, their families must be given genuine choices: to look after their children full-time, or to combine work, education or training with parenting in a balanced way. Therefore, our early years work will be focused as much on the wellbeing of parents as it is on their children."

TWO CASE STUDIES

A single mother of five, diabetic and has had several partners. Her youngest child is seven and the oldest is 20. All of her children have seen her beaten by previous boyfriends. She and one of her sons, aged 17, have always been 'at loggerheads' she says. A year ago, he moved in with his grandmother, next door. "He's been in court loads of times. He crashed a motorbike, no licence, no insurance. I got a parenting order," his mother says.

"It was a case of him going to jail or me going on a course. It was the Triple P [course] and my mother came too. At first I didn't like it one bit. Why should I go on it, when he was the problem? I thought 'this isn't going to work'. But it has and it's brilliant. I wish I'd done it years ago.

"I've realised my son is very well mannered. I've learned that I don't have to have the last word. The other day my son asked me if I can buy him a bed. That means he wants to come back. I was really happy to hear him say that. We're going to be alright."

Margaret Welch adds: "Most parents who need a bit of advice or help or more sustained support aren't looking for a service. They are looking for a relationship with a person they can trust. Services are only as good as the people who are doing the delivery."

One father, aged 34, has been unemployed for three years as a result of illness. He and his partner, aged 26, have three children under seven. The family have debts that add to their stress. Both parents have been on a Triple P course – Ian because he was given a parenting order after he hit his seven-year-old, bursting her ear drum. "I was sorry but social services kicked us out of my own home," he said. The father has been on a number of parenting courses that he says were less than helpful but says the Triple P course is different. Its effectiveness is in part due to the support of Zubeena, one of the facilitators on the course who is on secondment from the youth offending team.

Zubeena, herself a single parent of a teenager, successfully worked with this father to encourage his continuing attendance. He has also now completed an anger management course and is involved as a volunteer at his Sure Start project, as well as running a regular dads' group.

"I lived with my gran and I only had to look at her the wrong way and I'd get a smack," he says. "I've still got the scars from my dad too. I used to be angry all the time. The kids would play us off against each other. Looking through the [Triple P] manual, I realised what was going on. It's not just about how we handle the kids, it's about how me and my partner live together. Our relationship matters to us and it matters to the kids. I've tried other courses but Triple P is top of the pile. It's changed our lives. Will it last? I'm intending that it will."

HOW CAN PARENTING PROGRAMMES INCREASE WELLBEING?

THIS SECTION EXPLORES THE FINDINGS FROM THIS PROJECT THAT SUGGEST THAT PARENTING PROGRAMMES CAN INCREASE WELLBEING. IT THEN LOOKS AT THE WAYS IN WHICH PARENTING PROGRAMMES ARE TRADITIONALLY EVALUATED, AND SUGGESTS SOME NEW WAYS OF APPROACHING THE ASSESSMENT OF IMPACT TO BETTER CAPTURE IMPROVEMENT IN WELLBEING.

WHERE ARE THE CLUES THAT PARENTING PROGRAMMES INCREASE WELLBEING?

While wellbeing is not a widely used measure in the outcomes for parenting support, many of the changes recorded by parents, carers, and grandparents resonate with key indicators of wellbeing.

- **Improved social networks and social relationships**

Parenting support enables participants to begin to build a partnership with others - possibly an outreach worker, group facilitator and other parents and grandparents - creating a new and potentially positive series of social networks.

At the most intense end of parenting support, a reluctant and conflicted adult who attends a course spanning three months also begins to see that he or she can exercise control over a family situation and initiate improvement. As part of that process, the parent may begin to tell a different story about herself. A story in which she and her children are no longer 'done to' but are active agents in their own lives - a vital element in resilience and wellbeing.

"If the court is going to impose a parenting order we first try to encourage a parent to attend voluntarily. Sometimes a parent is told that she has to attend a course before her child is given an appointment at the child and mental health services. A fortnight after the start of the course the parent can still be angry. 'Why am I here? It's not me who's done anything. I just want my kid on Ritalin.' We get parents referred by social workers but I don't think some social

workers understand what a huge commitment it can be when the rest of a parent's life may be very chaotic. Last time, we had 30 referrals and only nine adults turned up but they eventually did become a very supportive circle for each other, and continue to stay in touch."

A nurse with the Hertfordshire Youth Offending Team

■ Trust in oneself – and others

Parents report that the opportunity to hear the views and experiences of fellow parents allows a perspective that 'normalises' parenting problems. It permits them to restore or develop a faith in their own judgement. This is especially evident if the facilitator treats a parent as an equal, a fellow problem solver.

"It was good to meet other parents, and hear about them having similar difficulties to me," said Sadie. "A lot of it was about gaining confidence that I was doing some things right. I'd also been let down by social services in the past but the facilitator on my course was like one of us. She was a single parent and she didn't blame me. She knew what it was like."

A mother from Manchester

■ Improving the relationship of the couple

Research indicates problems in a couple's relationship can have negative effects on the development and wellbeing of children and adolescents.⁴⁹ As charities such as One Plus One⁵⁰ and Relate point out, this is not given much direct and sustained attention in parenting support, and they argue that it's time that this area of need was mainstreamed.

■ Links with the community and a sense of belonging

The decline of the extended family and increase in isolation and atomisation of the modern family may mean that some families and children lose their sense of belonging. When parenting support is linked to opportunities in education, employment and engagement in the local community this can help build social networks – for parents and children – and give access to families who may model different, more positive, styles of parenting. For grandparents it can also validate their contribution to their grandchildren's wellbeing.

■ A capacity for enjoyment

A successful parenting workshop, a timely piece of advice, or a sustained parenting course can remind a parent that children are a source of fun, love and huge emotional rewards, and that awareness also enhances wellbeing, especially as an improvement in behaviour and interactions begin to be seen.

"As soon as he gets home from school, he [sits with me and] talks about school. Before, it was him going upstairs and out of my way."⁵¹

A father from Hertfordshire

■ Breaking the cycle

Some parents were themselves reared harshly as children, and mothers and fathers may replicate their own treatment as children by their parents. Parenting support that encourages them to understand their own childhood better, helping them to stop repeating the pattern of their own lives, can support self-efficacy and open the door to other opportunities. Grandparents may also welcome a second chance. For instance, one mother and daughter who herself had a five year old had attended a parenting course together. The grandmother acknowledged that she had found it hard to show her daughter affection but the course had given her greater understanding about the importance of showing love. She said: "I'm trying hard now with little Emma and it's coming good."

Effective local parenting strategies will make sure that wider opportunities for training, education, volunteering and employment are available to parents to help reinforce what is learnt through parenting initiatives, and will help parents find long term solutions. The aim is to build on adults' growing reserves of resilience, self-esteem and optimism, and ensure that adults and children are anchored in the wider community; making connections, expanding horizons, so they are able to access more support if they need it.

THE DIFFICULTIES IN MEASURING WELLBEING

Although some local data suggests increases in wellbeing as a result of parenting interventions, little is known systematically about wellbeing and parenting programmes. Causality is often unclear: a parent's sense of wellbeing may be improved, but that doesn't necessarily make him or her a better parent, or the child better behaved (although intuitively this would be an expected outcome). Interviews with facilitators and parents give a glimpse of the ways that parenting support enhances wellbeing, but equally these changes could be connected with other circumstances. For instance, some parents have worked with social workers and family support workers for years before attending a parenting course. Has this investment prepared the ground? Or perhaps, a parent has struck up a positive friendship or relationship that has changed the context in which they parent?

The majority of evaluations of parenting programmes focus on a 'deficit model' - examining what negative 'symptoms' in the families' lives have been reduced or removed. But these also show positive gains - for example of perceptions of family relationships - even in families beset by problems beyond their control such as poverty and unemployment.

One trial, for example, involved vulnerable families experiencing severe problems with parenting-child maltreatment and behavioural difficulties. Families of two to nine year olds were referred by health visitors, social workers, teachers and GPs. Parents attended a 14-week programme in their local area and childcare and food were provided to encourage attendance. The results showed marked improvements in child problem behaviour and parenting skills. This was according to parents self reports and the ratings of independent observers who assessed parent-child interactions in the home. Parent satisfaction was very high, and gains were maintained after an 18 month follow up.⁵²

Currently, Professor Stephen Scott, director of Research at the National Academy for Parenting Practitioners, is devising and evaluating parenting programmes mainly through randomised control trials (RCTs), uncovering the mechanisms through which interventions work. However, Dorit Braun,

former chief executive of the parenting charity Parentline Plus, suggests caution in adopting this method, stating, "Randomised control trials are a very medicalised model. They can tell you something works but they can't tell you why."⁵³

Melanie McGuinness, from Family Action in Manchester, agrees and says "You have to be clear what you are trying to measure." "It's pointless using clinical tools when you are not trying to achieve something clinical. We need to find the right intervention that meets the need. We have to make room for a range of models of support. It's a balance, sometimes it's only a light touch that's required but local authorities are so locked down in evidence base, the targeted and high risk, they sometimes can't think through other forms of prevention."

Helen Barrett of the Family Parenting Institute argued for thinking 'out of the box' on evaluations in *Evaluating Evaluations*.⁵⁴ She writes: "Numerous evaluations and meta-analyses of evaluations have been carried out on the assumption that the appropriate questions to ask about intervention programmes are a. whether they work and b. which programmes work best. Premised on the understanding that the RCTs are the most appropriate form for evaluation, they elicit information about how groups of participants perform on certain outcomes which are assessed, usually with the use of standardised measures.

Almost inevitably this kind of evaluation repeatedly demonstrates that most interventions work to some extent for most parents. They provide very little information about which elements of programmes have worked best for which parents, which have worked least well, or what may be needed to help parents who are in difficulty but who, for various reasons, do not manage to engage with or benefit from interventions

The evaluations required will be more likely to use a mix of qualitative and quantitative methods with a strong emphasis on comprehensive delineation of individual target and needs [...] If the emphasis continues to be on 'quick fixes' rather than on the complex support needs of families in widely differing circumstances, answers to these more difficult questions may take a long time to find.

FINAL THOUGHTS

The goal of increased wellbeing should be emphasised in the aims and objectives of parenting support services. A wellbeing focus - what it means, why it matters and how it can be encouraged - could shift the emphasis from a 'deficit' to a 'plus' model. Parenting support could then be viewed as a way of maximising the benefits of having a family and embracing the challenge of becoming and being a 'good enough' parent.

The amount of parenting support offered in the UK has grown significantly in the past decade, largely due to government funding and encouragement. The majority of programmes follow international models, such as Webster Stratton, Triple P, and Strengthening Families Strengthening Communities. The advantages of these courses are that they are tried and tested, well evaluated and evidenced. Their original creators often put a high premium on sticking closely to the proven model. These work well for the parents at the highest end of the need spectrum, where intensive evidenced models are what is needed to help support mothers, fathers and children coping with very difficult lives.

However, in parallel to these interventions for families with the most extreme needs, there is also a need to support the range of imaginative models for families with less pressing problems. These 'home grown' approaches are just as useful as the evidenced models, their value is in providing locally appropriate, flexible and imaginative approaches to support mothers and fathers to cope with the challenges of raising their children.

We suggest that the government establishes a parenting support innovation fund which would nurture parenting interventions that also aim to build wellbeing and emotional resilience for parent and child. The fund could provide financial and practical support to encourage a range of new approaches – either developed by the public sector, or by NGOs, social enterprises or parents – that widen the horizons of parenting support. This has proved a highly effective tactic in New Zealand. The country-wide Strategies with Kids Information for Parents (SKIP) project has been recently evaluated and judged to be reaping rich rewards on a number of fronts including child

and parental wellbeing, improved relationships, community regeneration and increased social capital.⁵⁵

Ultimately, as former chief executive of the Family and Parenting Institute Mary MacLeod has pointed out, parenting is not a profession, it's a relationship. MacLeod explains: "Specific interventions with parents must be part of a policy ecology alongside those directed at teaching and schools, at income levels, employment, housing, neighbourhoods and communities, health and mental health services. Part of that must be services that focus on family relationships – [but] not as an add-on benefit 'if you are lucky'.

*Building, sustaining, repairing, holding, frail and fractured relationships is what this work is all about [...] Relationships that are not only 'social contracts' but about that most contradictory thing: the completely prosaic everyday business of living together and about our deepest feelings of love and commitment.*⁵⁶

After twenty years as a mother, often fraught and further complicated by domestic violence, debt, poverty, illness and unemployment, this mother believes she has finally become a good enough parent.

"I'm going to become a volunteer. I'm going to do something with my life," she says. "I never thought I could have fun with my children because I was always so stressed. But I know now that I can. We've all moved on, and that makes me proud of what I've achieved – and even more proud of my children. Even the neighbours say now what good kids they are."

A mother of three in her late thirties



EMERGING THEMES FOR PARENTING SUPPORT PROVIDERS AND COMMISSIONERS

Three key themes have developed through this work:

1. **making the wellbeing of parents, as well as children, central and explicit objectives within parenting programmes and strategies**
 2. **designing services that boost parents' and children's wellbeing**
 3. **encouraging a new diversity of approaches to service design, with the involvement of parents and children.**
- 1. Making wellbeing an explicit objective within parenting programmes and strategies**
 - Mainstream and universalise parenting support.
 - Provide easy to access appropriate services early before a crisis is reached.
 - Ensure that facilitators are of the highest quality. They should demonstrate sensitivity, tenacity and empathy, and be attuned to parental anxiety, depression, mental ill health and lack of confidence.
 - Ensure ring-fenced long term funding.
 - Allow services to organically build and adapt to meet changing demands in a community.

- 2. Designing services to boost parents', carers' and children's wellbeing**
 - Focus on the emotional needs of the whole family including grandparents, who are often an overlooked and undervalued asset in family life.
 - Develop parents' understanding of appropriate parenting styles and validation for efforts they make to improve their family relationships.
 - Build a sense of belonging and connection to others to reduce social isolation through links to the wider community.
 - Encourage peer mentoring.
 - Offer through parenting support a long term route to further improvements in the quality of life – for example, employment, volunteering, training and skills opportunities and activities.
 - Ensure the wellbeing of staff and volunteers involved in the delivery of parenting support.
 - Involve parents, carers, children and teenagers in the design and evaluation of parenting support courses and workshops.
 - Develop a national media or social marketing strategy to encourage the view that 'accessing' help is as normal as obtaining child benefit.
- 3. Encouraging a new diversity of approaches**
 - Support local authorities to twin and share experiences, and come together to discuss how to put wellbeing at the heart of their approaches to parenting.
 - Evaluate parenting interventions to assess their impact on wellbeing and resilience, as well as social deficits.
 - Set up a parenting innovation fund to finance and develop new ways of providing parenting support, targeted at universal and preventative services, that is inclusive of carers such as grandparents, to complement the intensive evidenced interventions aimed at the highest levels of need. This could be open to new ideas from the public sector, non-government organisations (NGOs), social enterprises or parents themselves.

APPENDIX

PARENTING PROGRAMMES

The government has endorsed the following three parenting programmes:

The Triple P – Positive Parenting Program was founded by Matthew R Sanders, Professor of Clinical Psychology, Director of the Parenting and Family Support Centre at The University of Queensland. The program employs a multi-level, parenting and family support strategy. Focusing on cultivating knowledge, skills and confidence of parents, the programme aims to reduce behavioural, emotional and developmental problems in children. Triple P incorporates five levels of intervention, which can be used across an entire population or targeted at high risk children aged 0 to 16.

Like the other two programmes listed below, Triple P 'small changes, big differences' aims for self-regulation. The goals are for children to develop 'emotional self-regulation' and for parents to become, 'resourceful, independent problem-solvers'.

As one study of Triple P pointed out, "Parenting programmes have considerable potential to improve the mental health and wellbeing of children, improve family relationships and benefit the community as a whole."⁵⁷

Webster Stratton was developed in the US by Dr Carolyn Webster-Stratton. It follows a similar format to the Australian Teen Triple P course. Parents attend a 12-week course with a group of fellow parents, for three hours a session, led by two or three facilitators. The courses discuss principles and

strategies around the importance of clear and consistent rules, standards and boundaries; the value of communicating with care and authority; the use of rewards and reinforcement behaviour; and an examination of a parent's own emotions and concerns.

The third programme, Strengthening Families, Strengthening Communities (SFSC) was also designed in the US by Dr Marilyn Steele and was brought to the UK by the Race Equality Foundation (REF) in 1999-2000. SFSC was originally more focused on the black and minority ethnic communities in the US but has since been used with all communities and cultural backgrounds. It includes a focus on parents' own childhood and experiences of being parented, within their unique family cultural context. It also encourages parents to become involved in community activities. Again, this approach echoes the five ways to wellbeing advocated by nef: connect; be active; take notice; keep learning; and give to the wider community.

The aim of the SFSC course is to help parents to 'utilise a process of discipline, enhancing their ability to respond as opposed to react to disrespectful behaviour.' Course material is highly visual so literacy is not required, which makes it particularly relevant to parents without English or who have it as a second language.



(At the time of writing the National Academy of Parenting Practitioners has added several more accredited courses to these three founding courses but it is too early to gauge their effectiveness in the three local authorities in the Local Wellbeing Project.)

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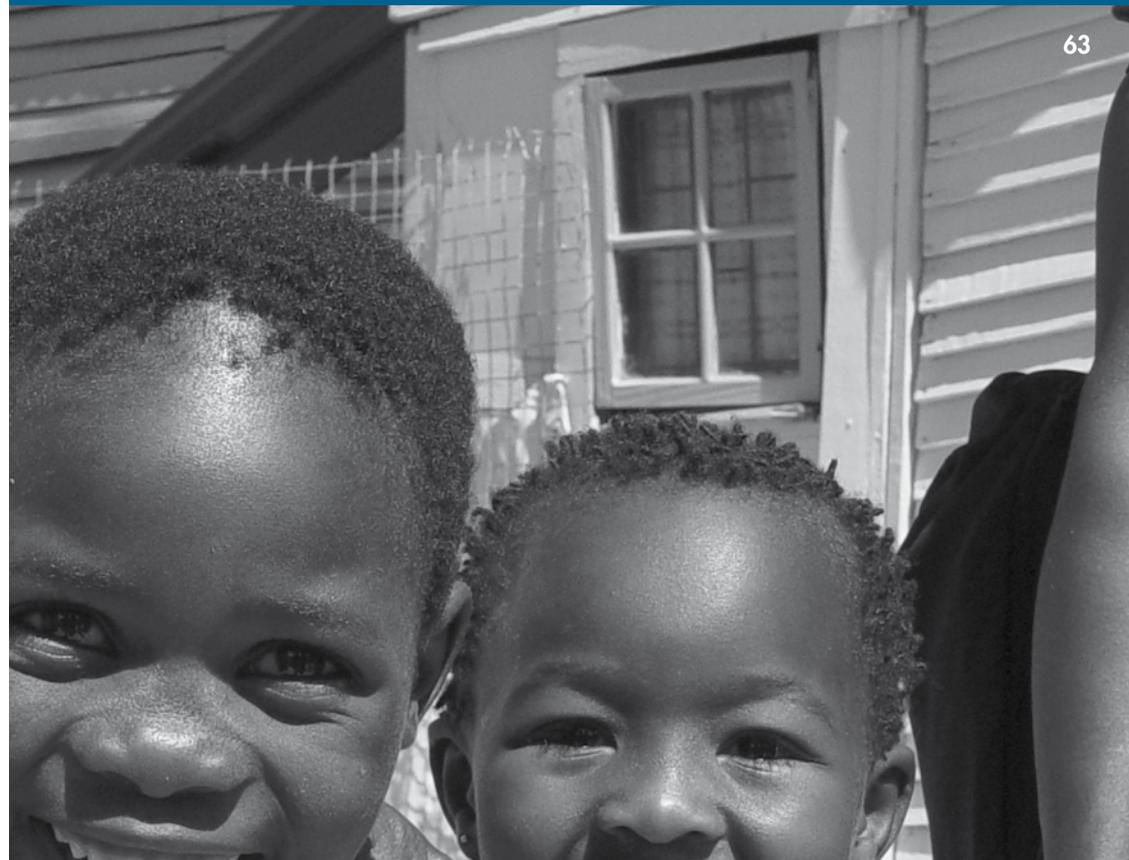
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ABOUT THE LOCAL WELLBEING PROJECT

The Local Wellbeing Project is a unique initiative to explore how local government can practically improve the happiness and wellbeing of their citizens. This project brings together three very different local authorities – Manchester City Council, Hertfordshire County Council and South Tyneside Metropolitan Borough Council – with the Young Foundation; Professor Lord Richard Layard from the London School of Economics (LSE), who has led much of the debate around happiness and public policy; and the Improvement and Development Agency (IDeA), who are leaders in local government innovation.

The project is funded by the Department of Communities and Local Government (CLG), Department for Food and Rural Affairs (Defra), the Department of Health, the Audit Commission, the Young Foundation's Health Launchpad, and the National Apprenticeship Service.

The project covers five main strands:

- emotional resilience for 11 to 13 year olds
- wellbeing of older people
- guaranteed apprenticeships
- neighbourhoods and community empowerment
- and parenting.

In each of these areas it is testing out new approaches; measuring their impact; developing replicable methods and looking at cost-effectiveness. Two underpinning themes are to investigate the relationship between wellbeing and environmental sustainability, and how best to measure wellbeing.

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