

COVENTRY  
**Parenting  
Strategy**  
2018-2023



**Contents page**

Executive summary

**1. Introduction**

1.1 Why is parenting important?

**2. Our vision for Coventry**

2.1 Strategy aims

**3. How was the strategy developed?**

3.1 Governance

3.2 Work undertaken to develop the Parenting Strategy

3.3 Links to other work happening in Coventry - service developments and strategies

**4. What do we understand about the needs of parents in Coventry?**

4.1 Population of Coventry

4.2 Deprivation in Coventry

4.3 Key risks and outcomes for children and families

**5.0 Where are we now?**

5.1 Review of parenting support

5.2 Findings from consultation with parents

5.3 Findings from consultation with young people

**6.0 Where do we want to get to?**

6.1 Key recommendations

6.2 Next steps

**7.0 How will we know we have got there?**

7.1 Expected outcomes

**8.0 Conclusion**

9.0 Acknowledgements and contributions

10.0 Appendices

11.0 **References**

**Foreword** *(to be completed by members of the steering group, this will also include an organisation pledge board with signatures from partners)*

## **Executive summary**

There is clear evidence that good parenting is crucial to a child's development and to their future life chances. In the development of this strategy, the multi-agency Coventry Parenting Steering Group aimed to raise the level of awareness about the importance and impact of parenting on children's outcomes. This multiagency group, which included voluntary organisations, statutory agencies and parents, developed Coventry's vision for parenting which is to have "More Coventry children and young people grow up within supportive families and communities".

The Coventry Parenting Steering group sought to bring key partners together across statutory and non-statutory agencies to develop a more co-ordinated approach to parenting, sharing our resources, knowledge and experience and to review current provision and highlight recommendations for future parenting support. The Coventry Parenting Steering Group were also particularly aware of the reduction in resource across the system and the need to ensure that the provision of ongoing support and advice to Coventry parents, carers and families was maximised through joint working.

A consultation process was a key part of the development of this strategy. The steering group mapped out and reviewed the current parenting support which showed that Coventry has a large number of evidence based parenting programmes and services on offer. There are also a number of locally grown programmes which help meet the diverse needs of the city. A consultation with parents confirmed that access to parenting support needs to be strengthened and further awareness raising is required around the parenting provision.

Areas for improvements and key recommendations have been identified, bringing together the views of parents and stakeholders and the evidence.

### **Key Recommendations:**

1. Strengthen availability and accessibility of general information and advice to parents
2. Harness technology and the developing digital systems across agencies to strengthen the parenting offer
3. Ensure there is a systematic approach to ensuring the quality and effectiveness of the parenting offer across the whole system
4. Ensure that this system-wide parenting offer is delivered in a way which progressively provides more support across the social gradient and level of need
5. Ensure there is a clear focus on early help and prevention
6. Improve cohesiveness of parenting support across Coventry
7. Build parenting capacity in specific areas where gaps have been identified

### **Next steps**

Multi-agency task and finish groups have been set up to take forward the first four recommendations, with the remaining recommendations acting as cross-cutting themes. A detailed delivery plan for each of the work streams will be developed in partnership with key stakeholders.

Parenting will also be strengthened in the future through the Family Hubs: the new Family Health and Lifestyles service has an increased focus on the delivery of parenting support, especially through the Health Visitors in the early years and the monitoring of this contract will provide levers to ensure parenting capacity is strengthened; there is an opportunity to

strengthen our parenting offer through the training and development of workers within the Family Hub.

By bringing parents and partners together in developing this strategy, we have achieved a comprehensive vision and approach to improve outcomes for children and families through strengthening parenting across the city. Partners are committed and ready to take the next steps towards achieving our vision.

## **Introduction**

### **1.1 Why is parenting important?**

The relationships that mothers, fathers and carers have with their children are strongly linked to children's outcomes. When children/young people are parented in a positive way, they are likely to grow up feeling nurtured, safe and secure. Parental neglect, poor relationships with parents and inadequate parental supervision are associated with negative outcomes. Good parenting, however, has a substantial positive impact on a child's behaviour, educational attainment, emotional and physical health<sup>1,2,3</sup>

As children and young people develop, families may face a number of challenges and the extent to which they are able to cope with these will differ from person to person. External factors such as unemployment, poor housing or poverty may negatively impact on a person's ability to parent well. However, good mental wellbeing and high levels of resilience can work as protective forces in these situations. Having good parenting support available from the very beginning of parenting, the antenatal period, up to adolescence, is essential to ensure people are able to navigate life's challenges and parent well at the same time.

Effective early help can have a positive impact, not only on the outcomes of children, young people and families, but it can save public money in the long run. When families reach crisis point, support is needed at a much more intensive level which costs more. By investing in early help to prevent difficulties from escalating, the need for these more costly services is reduced.

The Early Intervention Foundation (EIF) 'Cost Of Late Intervention' report found that nearly £17 billion per year – equivalent to £287 per person is spent in England and Wales by the state on the cost of late intervention<sup>12</sup>. A key way of reducing these costs is to prevent adverse childhood experiences (ACEs) from occurring. ACEs are potentially traumatic events that can have negative, lasting effects on health and wellbeing and lead to higher rates of crime, antisocial behaviour and poorer mental health and wellbeing<sup>13</sup>.

Good parenting\* plays a key role in preventing some of these issues from escalating and having a negative impact<sup>12</sup>.

\*In this strategy, good parenting is defined as safe, warm, secure home life, helping the child/young person to learn the rules of life..

There are many national policies which recognise the important role of early intervention and prevention and accessible parenting services<sup>5,6,7,8,9,10,11</sup> to improve outcomes for children and families including:

- Early Intervention Foundation: What works to support parent child interaction in the early years (2016)
- The First 1001 Days All Party Parliamentary Group (2015) Building Great Britons
- Annual Report of the Chief Medical Officer 2012 Our Children Deserve Better: Prevention Pays (2012)
- The Wave Trust (2013)
- The Marmot Review Fair Society, Healthy Lives (2010)
- The Foundation Years: preventing poor children becoming poor adults: Frank Field (2010)
- NICE guidance Postnatal Care (2013)

Sir Michael Marmot, has outlined the importance of investing early to support families and children recommending that the proportion of overall expenditure allocated to the early years should be increased and ensuring the provision of “ *high quality maternity services, parenting programmes, childcare and early years’ education meet the needs across the social gradient*<sup>11</sup>”

## **2. Our vision for Coventry**

In Coventry, partners who work with families to support positive parenting have come together in order to achieve the following vision

### ***More Coventry children and young people to grow up within supportive families and communities***

- This will be achieved by ensuring children and young people have the best possible chance of being happy and healthy and achieving their potential through parenting support that is accessible and responsive to individual and community needs.
- Support will be provided from maternity services to school age and beyond, which develops nurturing family environments.
- Parents will feel empowered in their communities to support each other and build capacity to encourage and promote positive parenting.

### **2.1 Strategy development aim and objectives**

The overarching aim was to develop this strategy using a Coventry-wide approach, where everyone working within this area, including voluntary organisations and statutory agencies, clearly understood where their support fitted into the overall parenting support system.

The following objectives were used to achieve this:

1. Bring together key partners across statutory and non-statutory agencies in a more co-ordinated approach, sharing resources, knowledge and experience to improve outcomes for children and families;

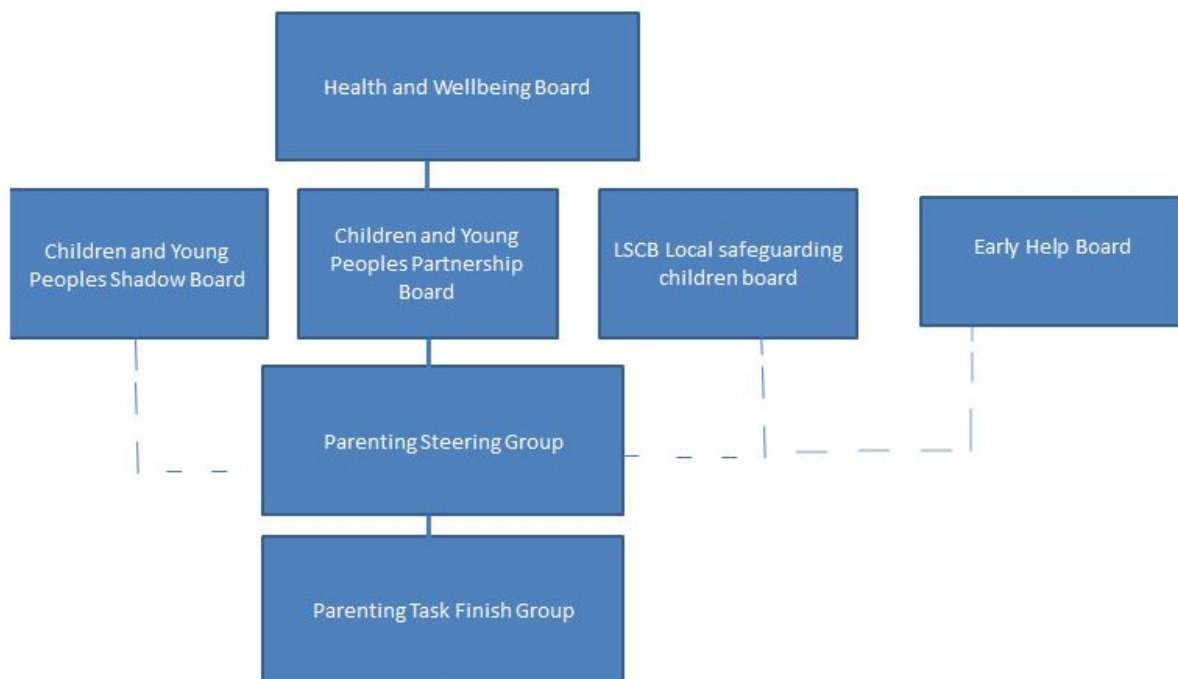
2. Raise the level of awareness about the importance and impact of parenting on children's outcomes;
3. Provide ongoing support and advice to Coventry parents, carers and families about parenting projects including the role of technology;
4. Review current provision and highlight recommendations for future parenting provision

### 3. How was the strategy developed?

#### 3.1 Governance

In June 2017, a multiagency steering group was set up with parents and key statutory and non statutory partners. (Appendix 1 provides a full list of members). Parents were a key part of the Coventry Parenting Steering Group. The role of the Coventry Parenting Steering Group is to develop the Parenting Strategy and to maintain overview and accountability for the actions delivered as part of the strategy recommendations. The Coventry Parenting Steering Group will report progress updates to the Children and Young People's Partnership Board. Figure 1 shows an overview of how the partnership will work:

Figure 1: How the partnership will work for the Parenting Strategy



#### 3.2 Work undertaken to develop the Parenting Strategy

The Coventry Parenting Steering Group was instrumental in leading a consultation process that included mapping out the current parenting support offered in the city and identifying areas for improvements. In undertaking a consultation the views of those who used the current services were captured and this helped identify where improvements needed to be made. An online survey was developed to capture the views of parents more widely (paper copies were made available in public spaces and 364 responses were received). Previous Parenting Strategy work was also reviewed by the Coventry Parenting Steering Group.

### **3.3 Links to other work happening in Coventry - service developments and strategies**

Despite there being significant challenges in Coventry, there are some excellent opportunities to give our children the best start in life. The recent launch of the Family Hubs will deliver locally based early-help services, including services around health and wellbeing, benefits advice, employment and training.

The Family Hubs are in the eight most deprived areas of the city and include services for 0-19 year olds (0-25 for children with Special Educational Needs and Disabilities) including Children's Services, School Nursing, Health Visiting and Police. In addition, seven Public Health services that support families are currently being redesigned and brought together into one service, this includes services such as Health Visiting and School Nursing.



The new redesigned service called the Family Health and Lifestyle Service will have a greater focus on parenting and family support, with early intervention at the heart. There is an opportunity to strengthen our parenting offer through the training and development of workers within the Family Hub.

There are many other local policies which have links with the Parenting Strategy. The Coventry Steering Group has ensured the Parenting Strategy is developed in line with these local policies. This includes The Health and Wellbeing Strategy which drives the plan for reducing health inequalities and improving health and wellbeing for Coventry residents<sup>18</sup>. The Coventry Early Help Strategy sets out the aims to deliver effective early help to children, young people and their families, it aims to strengthen our parenting offer with a focus on group as well as individual work, bringing together parents and families to work effectively<sup>19</sup>. The Coventry Early Help Strategy set out that effective early help will deliver against a range of outcomes including maximising school readiness and minimising the number of referrals to social care<sup>19</sup>.

The new Domestic Abuse Strategy for Coventry sets out the important role of parents in recognising the signs that their child may be a victim or perpetrator of domestic abuse and know where to seek help to ensure that they receive the necessary support to prevent further abuse and/or achieve behaviour change.

In addition, The Children and Young People's Plan (2016) sets out the outcomes organisations in Coventry will work towards to deliver the best support to children and families with a key focus on early help, which includes the role of parents and their ability to demonstrate positive parenting skills that promote resilience in children<sup>20</sup>. Also, the Parenting Strategy developed takes account of the corporate parenting responsibilities local authorities and partners have<sup>22</sup>. The parenting provision provided by Coventry's Special Education Needs Disability (SEND) local offer has also been considered. Key members of the Coventry Parenting Steering Group are represented on these boards to ensure the parenting strategy aligns with this work.

### **4. What do we understand about the needs of parents in Coventry?**

In order to consider the parenting support required in Coventry, it is essential to understand the current level of need in Coventry.

## **4.1 Population of Coventry**

Coventry's population is 352,911 and children and young people make up approximately 25.04% (88,372 ) of the population<sup>24</sup>. The future for our young people is not as good as others across the West Midlands and the country as a whole, particularly for our poorest children.

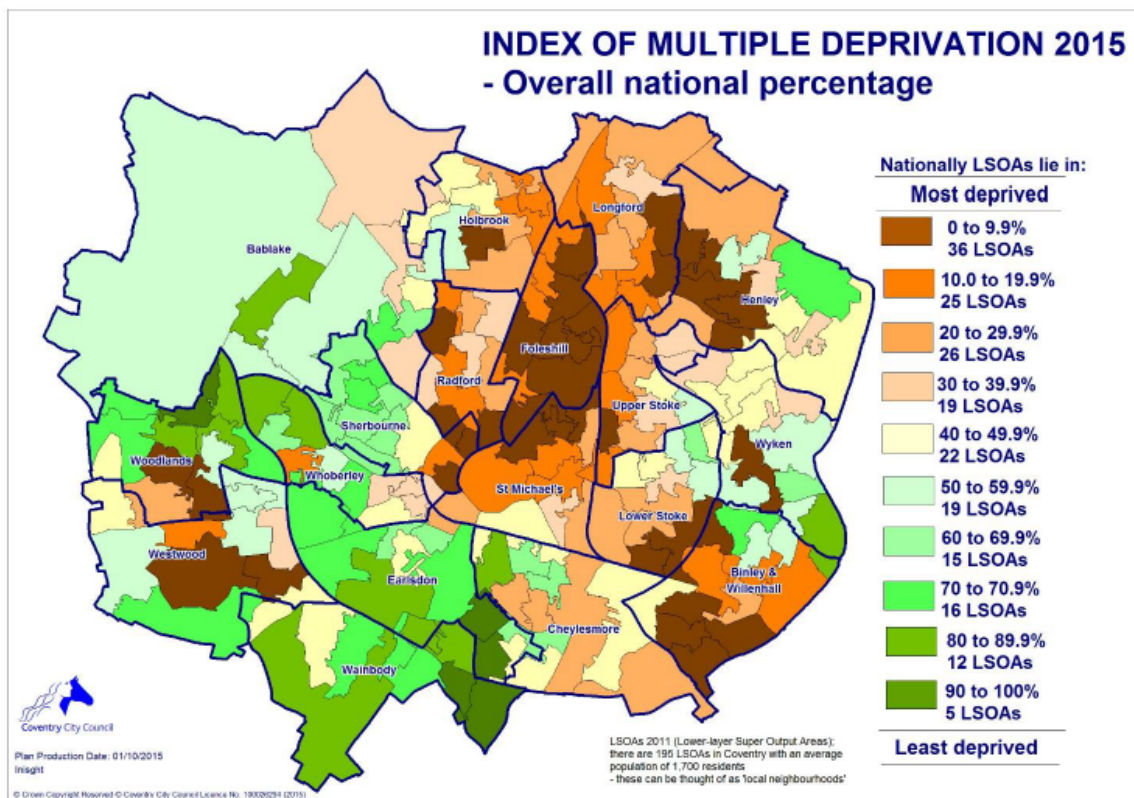
Given the diversity in the city, one size doesn't fit all and the impact of cultural beliefs on parenting also needs to be considered. Coventry has a growing percentage of residents of Black and Minority Ethnic Groups. 46.9% (21,470) of school children are from a minority ethnic group. The Migrant Health Needs Assessment identifies that over 100 languages are spoken in Coventry and 9% of households do not have a single person within the home who speaks English as a first language. This brings challenges but also opportunities to delivering parenting support<sup>15</sup>

## **4.2 Deprivation in Coventry**

According to the Indices of Multiple Deprivation (a measure based on income, education, housing, employment, crime, health, access to services and the living environment) Coventry is in the most deprived fifth of all local authorities in England, and some wards in Coventry are among the most deprived in the country. Figure 3 provides a map showing the deprivation across Coventry. Deprivation is linked with poorer outcomes for children and, therefore, the challenge to improve health and wellbeing for children in Coventry is significant. Additionally, the evidence is clear that the first two years of life is a critical period for child development and in Coventry, areas with the highest population levels of 0-2 years correlate with the higher levels of deprivation<sup>16</sup>. There are relatively more households with dependent children in Foleshill – and in particular, one in 10 children in that ward are aged under five. Radford, Henley, Holbrook and Longford wards are also noted to have higher populations of children aged under five and the wards with higher populations of under five years tend to be in those wards with higher levels of deprivation<sup>16</sup>



Figure 2: Index of Multiple Deprivation across Coventry



### 4.3 Key risks and outcomes for children and families

Domestic abuse, mental health illness and substance misuse are significant issues for some Coventry parents, which impacts on their children<sup>19</sup>.

Approximately 1 in 6 people in Coventry are estimated to be affected by a common mental health condition at any one time. This means many children will grow up with a parent who at some point will experience poor mental health, which can negatively impact on outcomes for children and families. The Mental Health and Wellbeing Assets and Needs Assessment for Coventry and Rugby estimated that there are over 67,000 noted common mental health disorders in the Coventry population in people aged between 16-74 years<sup>15</sup>. However, it is expected that the total number of people who are affected by a common mental health condition will be lower as there may be an overlap as it is possible that someone could experience more than one mental health disorder. In 2015/16, the rate of domestic abuse related incidents and crimes recorded by police in Coventry was 23.5 per 1,000, similar to the West Midlands' rate of 23.6 per 1,000, with both higher than the national rate of 22.1 per 1,000<sup>13</sup>. However, the rate of parents in drug treatment per 100,000 children aged 0-15 (11/12) was lower (84.1 per 100,000) than the regional (109.8 per 100,000) and national rate (110.4 per 100,000).

In terms of under 18 conceptions, Coventry has a higher rate than the national average and West Midlands figure. When comparing Coventry to its statistical neighbours (Chartered Institute of Public Finance and Accounting (CIPFA) nearest neighbours\*), Coventry has a higher rate of teenage parents compared to many other local authorities with similar

characteristics. Teenage parents are more likely to experience poor antenatal health, lower birth weight babies and higher infant mortality rates. Their health, and that of their children, is likely to be worse than average, therefore, the needs of teenage parents need to be considered<sup>16</sup>.

When considering Looked After Children (LAC) per 10,000 in under 18 population, Coventry is ranked 7<sup>th</sup> highest (77.2) out of 16 statistical neighbours where the highest is 112.2 and the lowest is 45.8, the national average is 60.6 per 10,000 <18 population. In terms of Child Protection plans per 10,000 in under 18 population, Coventry is ranked 4<sup>th</sup> highest (29.2) compared to 16 statistical neighbours where the highest is 37.9 and the lowest is 11 and the national average is 19.8 per 10,000 <18 population<sup>14</sup>. In 2014, there was a higher percentage of children in low income families than the national average and there has been a slight increase over the past few years. With regards to health outcomes, nationally the rate of young people aged 15-19 admitted to hospital as a result of self-harm is increasing, and this is the case for Coventry<sup>14</sup>. In Coventry there is a higher percentage of children who are obese at Year 6 (23.1% in Coventry 2015/16 compared to 19.8% for the national average). This has increased over the last few years, with the percentage of obese children at Year 6 in 21.3% back in 2013/14. There are higher rates than many of our statistical neighbours.

In 2016, there was an improvement compared to previous years in the proportion of children aged five at a good level of development with 65.4% of children achieving this level. However, Coventry's performance remains worse than the national average and regional average<sup>14</sup>.

Table 1 shows that in general, Coventry's key risks and outcomes indicate a greater challenge than experienced either regionally or nationally. There is a clear need to support parenting across our population and in particular to ensure that the level of support is proportionate to the need; this means ensuring those who are most vulnerable and have higher needs have access to higher, more intensive, levels of support. We should work to maximise the benefits of our resources, ensuring the highest possible level of benefit is provided to our children and families.

**Table 1:** A comparison of key risks and outcomes for children and families in Coventry compared to national and regional rates<sup>14</sup>

		Coventry	West Midlands region	National average	Comparison to statistical neighbours* of Coventry 1 = Best 16 = Worse
<b>Safeguarding</b>	Rate of children looked after by the local authority (rate per 10,000 u18s)	77	73	60	10 out of 16
<b>Poverty</b>	Percentage of children in low income families (under 16 years) 2014	25.4%	23.5%	20.1%	7 out of 16
<b>Education</b>	Percentage of children achieving a good level of development at the end of reception (2015/16)	65.4%	67.1%	69.3%	7 out of 16
	Percentage of children with GCSEs achieved (5 A*-C inc. English and Maths) (15/16)	54.3%	54.8%	57.8%	6 out of 16
<b>Health</b>	Percentage of Year 6 obese children (2015/16)	23.1%	22.1%	19.8%	11 out of 16
	The rate of young people aged 15-19 admitted to hospital as a result of self-harm per 100,000 15/16	861	658.9	648.8	13 out of 16
<b>Domestic abuse</b>	Rate of domestic abuse related incident and crimes recorded by police per 1000 (15/16)	23.5	23.6	22.1	5 out of 16 (joint fifth)
<b>Substance misuse</b>	Parents in drug treatment: rate per 100,000 children aged 0-15 (11/12)	84.1	109.8	110.4	Requires more investigation
<b>Teenage parents</b>	Under 18 conception rate per 1,000 females aged 15-17 years (2015)	29.9	23.7	20.8	13 out of 16

\* Statistical neighbours refers to the Chartered Institute of Public Finance and Accounting (CIPFA) nearest neighbours. This attempts to relate Local Authorities by their traits, by using descriptive features of the area each authority administers such as population, socioeconomic, household and mortality characteristics, rather than the services it provides - The CIPFA statistical neighbours used for comparison are: Derby, Bolton, Medway, Sheffield, Oldham, Kirklees, Rochdale, Bradford, Peterborough, Walsall, Stockton on Tees, Sandwell, Dudley, Wolverhampton, Swindon.

## 5. Where are we now?

### 5.1 Review of parenting support

In July 2017, a range of stakeholders, for example the National Society for the Protection of Cruelty to Children (NSPCC), Child and Family Services (Coventry and Warwickshire Partnership Trust), and Midwifery (University Hospitals Coventry and Warwickshire NHS Trust) were asked to identify the offer of support to parents in Coventry. A total of 21 organisations responded (see hyperlink 1 for further details). The purpose was to understand what was working well and what changes needed to be made to strengthen the parenting provision. The Coventry Parenting Steering Group used this information to decide what the future parenting support should look like. This involved taking into consideration the evidence base for the different parenting support, reviewing the parenting provision on offer from universal through to targeted support and reviewing the needs of local families.

The review has found that there is a variety of evidence-based parenting programmes currently used in Coventry to empower parents in managing their children's behaviour and

promoting their health, education and wellbeing (this includes Triple P, Helping the Non Complaint Child and Incredible Years). A range of parenting support is offered to parents universally such as Health Visiting and School Nursing, as well as online parenting support such as the Solihull Approach and the Baby Box University syllabus. The libraries also offer a range of valuable resources, such as community support and information through the Rhyme time sessions offered to 0-4 year olds. Children are also helped with literacy and language development skills that come from the freely accessible books and intervention schemes such as Book start baby and Book start Treasure.

Stakeholders identified there were many services designed to support parents with specific needs such as The Family Nurse Partnership (FNP) service offering support to teenage parents aged 19 or under who are first time mothers and provides regular visits until the baby is two years old. The Family Nurse Partnership (FNP) service works closely with the iBumps service, which provides support to young parents who are not eligible for, or decline, FNP and work closely with maternity and health visiting services. Stakeholders identified that the Foleshill Women’s Training Centre provided peer support, prevention and intervention to parents through a range of ongoing projects such as MAMTA, a service offered in the antenatal and postnatal period working closely with early years services. In addition, parenting support is offered to families who are asylum seekers in the city. Given the diversity in the city it is crucial to ensure the needs of the communities are met. As part of the Special Educational Needs and Disability (SEND) local offer there are a number of targeted parenting programmes such as support offered by Communication and Interaction (including Autism) Support Service and the EYSS (Early years support service) SEND offering parent/carers of children with complex needs city wide support.

Through the Coventry Parenting Steering Group, 55 different parenting support initiatives were identified. The current total number of practitioners trained to deliver a targeted parenting project is approximately 302 with approximately 163 professionals trained to deliver a universal parenting project. The Coventry Parenting Steering Group recognises that strengthening the parenting offer in the city is vital to improving the outcomes for children and young people. A full breakdown of parenting projects identified by the Coventry Parenting Steering Group can be found at insert hyperlink 1. Table 2 provides a summary of the universal and targeted parenting offer in Coventry.

Table 2: Coventry parenting support offer across 0-19 years

	<b>Universal parenting support (Level 1)</b>	<b>Targeted support (level 2 -4)</b>
<b>Pregnancy – Antenatal offer</b>	<ul style="list-style-type: none"> <li>• Solihull approach (online)</li> <li>• Baby buddy app - promoted at booking and at intervals during pregnancy</li> <li>• Antenatal classes – Birth Expectations, Hands On</li> <li>• Family links antenatal programme</li> </ul>	<ul style="list-style-type: none"> <li>• FNP young parents and iBumps</li> <li>• Domestic abuse programmes surviving violence</li> <li>• Just for me</li> <li>• You and me mum</li> <li>• Coventry mind – befriending</li> </ul>

<p><b>Postnatal offer</b></p>	<ul style="list-style-type: none"> <li>• Solihull approach(online)</li> <li>• Baby buddy app</li> <li>• Baby box syllabus (online)</li> <li>• Family links nurture programme</li> <li>• infant feeding support groups</li> <li>• Postnatal 0-12 months Book Start Baby</li> </ul>	<ul style="list-style-type: none"> <li>• Jigsaw</li> <li>• Let's play carriers of hope</li> <li>• Special Educational Needs and Disability CASS Communication and Interaction (inc Autism) Support Service</li> <li>• Living With Confidence</li> <li>• Women As Protectors</li> <li>• Young Smiles</li> <li>• Adult Education</li> <li>• Triple P Stepping Stones</li> <li>• Parents under pressure NSPCC</li> <li>• MAMTA</li> <li>• Coventry MIND befriending</li> <li>• Baby Bundles</li> <li>• Domestic Abuse programme Surviving Violence</li> <li>• Parents Under Pressure</li> <li>• Just for me</li> <li>• You and Me Mum</li> </ul>
<p>0-5 years</p>	<ul style="list-style-type: none"> <li>• Solihull understanding children's behaviour (online)</li> <li>• Infant feeding support groups</li> <li>• OBOL one body one life 2-4 years</li> <li>• One stop shop – health visiting</li> <li>• Strengthening Families Strengthening Communities</li> <li>• Family links nurture programme</li> <li>• Book Start Treasure</li> <li>• Rhymetimes sessions</li> </ul>	<ul style="list-style-type: none"> <li>• Special Educational Needs and Disability EYSS (0-5)</li> <li>• Living with confidence</li> <li>• NAS Early bird (0-4)</li> <li>• Women as protectors</li> <li>• Special; Educational Needs and Disability CASS Communication and Interaction (inc Autism) Support Service (0-4)</li> <li>• Jigsaw(0-4)</li> <li>• Young Smiles</li> <li>• Coventry MIND befriending</li> <li>• Adult Education</li> <li>• Triple P Stepping stones 0-12</li> <li>• Parents under pressures NSPCC</li> <li>• MAMTA</li> <li>• Incredible Years (3-5 years)</li> <li>• Domestic Abuse programme Surviving Violence</li> <li>• Parents Under Pressure</li> <li>• Circles Of Security</li> <li>• Just for Me</li> <li>• You and Me Mum</li> </ul>
<p>5-19 years</p>	<ul style="list-style-type: none"> <li>• Solihull Approach understanding children's behaviour (online)</li> <li>• Family links nurture programme</li> </ul>	<ul style="list-style-type: none"> <li>• Group Teen 11-16</li> <li>• Triple P Stepping Stones 0-12</li> <li>• Triple P Teen 11-16</li> <li>• Triple P Standard 11-16</li> <li>• Living With Confidence</li> <li>• Women as protectors</li> <li>• Young Smiles</li> </ul>

		<ul style="list-style-type: none"> <li>• Adult Education</li> <li>• Cyrenians alcohol mediation (13-18 yrs)</li> <li>• One Body One Life (5-14 yrs)</li> <li>• Incredible Years(6-12 years)</li> <li>• Coventry MIND befriending</li> <li>• Domestic Abuse programme Surviving Violence</li> <li>• Relate (5-10 years)</li> <li>• Just for Me</li> <li>• You and Me Mum</li> <li>• Circles of Security</li> </ul>
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**What worked well?**

Through the mapping exercise, those who deliver parenting support to parents in Coventry were asked what aspects were currently working well for parenting. Their responses included; evidence based programmes offering tailored support e.g. for teenagers such as Teen Triple P and Stepping Stones, opportunities for peer to peer support, partnership working between agencies and skilling parents to improve their self-esteem.

**What did not work well?**

We also asked what was not working so well. The findings showed that we need to do more to help break down barriers with certain communities and find ways of encouraging commitment from parents to attend parenting support sessions.

**What would make it even better?**

We also asked what would make the parenting support even better. Stakeholders said there needed to be more time for follow up with parents, that more staff were needed to deliver sessions and that there needed to be improved communication with partners. Stakeholders also said that having the same venues (including crèche facilities) would be helpful.

Key areas of importance were identified, including: providing a range of parenting support in a timely way to meet parent’s individual needs, promoting positive coping strategies and showing that it was normal to ask for help. Stakeholders also said we needed more joined up approaches from professionals to reduce duplication across the system; stakeholders also said programmes needed to be delivered efficiently, ensuring quality and fidelity.

Through discussions with the Coventry Parenting Steering group the value of enhancing the digital parenting support offer has also been highlighted.

**Assessing a family’s journey:**

Stakeholders have also made reference to use of the ‘Steps to Change’ evaluation tool which is currently being used by professionals as a model to assess the progress for a child. The tool can be used at the start of the early help or Child and Family (C&F) Assessment (tools used by professionals to achieve a co-ordinated approach to supporting families or to assess the needs of a family) to provide an overview of family needs and assets<sup>22</sup>. The tool can then be used at the end of the evaluation, when the family has met their targets in order to show the progress made. It also identifies any changes where a higher level of support

may be required which could include referrals to other agencies (including Social Care). The Steps to Change tool focuses on the four assessment areas of early help and Children & Families assessment.

Appendix 2 provides information about the four assessment areas which can be divided into nine areas of family life.

## **5.2 Findings from consultation with parents**

We are committed to listening to service users, encouraging them to contribute and develop the Parenting Strategy with us. During September 2017, parents and the Coventry Parenting Steering Group designed a survey to capture the views of parents and carers in Coventry, to better understand their perspectives and what they would most value from parenting support.

364 responses were received and a full report of findings can be found at ([insert hyperlink 2](#))

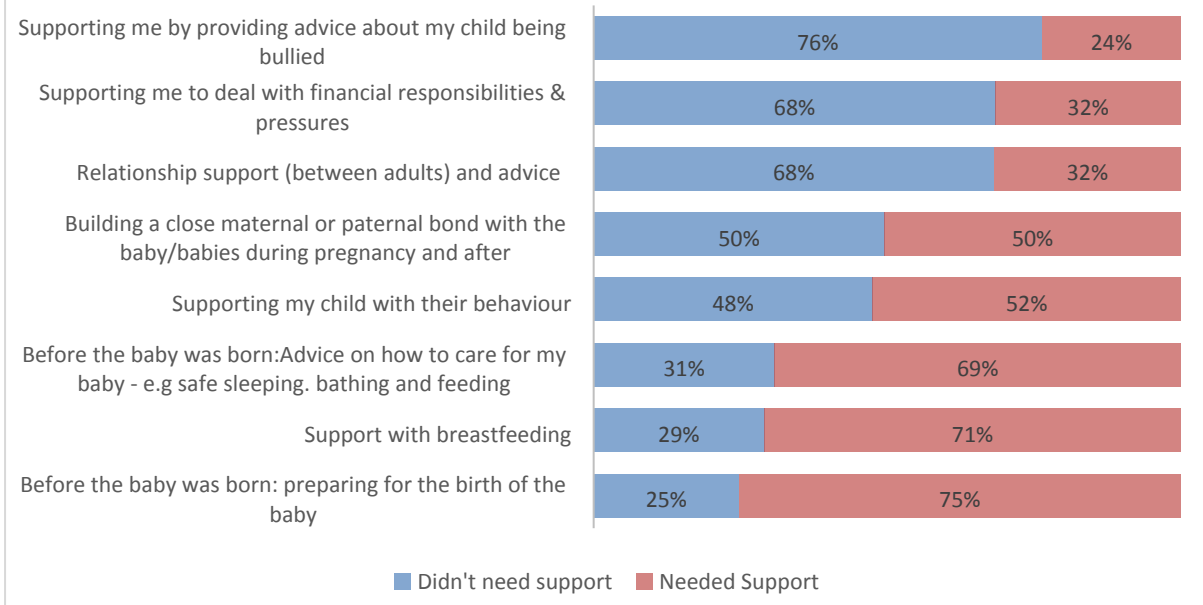
### **Demographics of parents**

41% (202/493) of parents said they had children aged 0-4 years, more than a third (35% 171/493) said they had a child aged 5-11 years.

There was a lower percentage of parents with older children- 15% had children between the ages of 15-19 years and 9% had a young person aged 19 or above. Therefore, the sample may not be a truly representative sample. 19% of parents were from an ethnic minority group which is slightly lower than the Coventry population figure of 33%.

The consultation with parents confirmed that access to parenting support needs to be strengthened; further awareness raising is required around the parenting provision. The findings show that a high percentage of parents needed support before or after birth such as preparing for the birth of the baby (75%), breastfeeding (71%), how to care for the baby - e.g. safe sleeping, bathing and feeding (69%) and supporting child behaviour (52%). A smaller proportion of parents reported needing support in areas such as relationship support between adults (32%), dealing with financial responsibilities (32%) or their child being bullied (24%). A summary of the findings is provided in Figure 4.

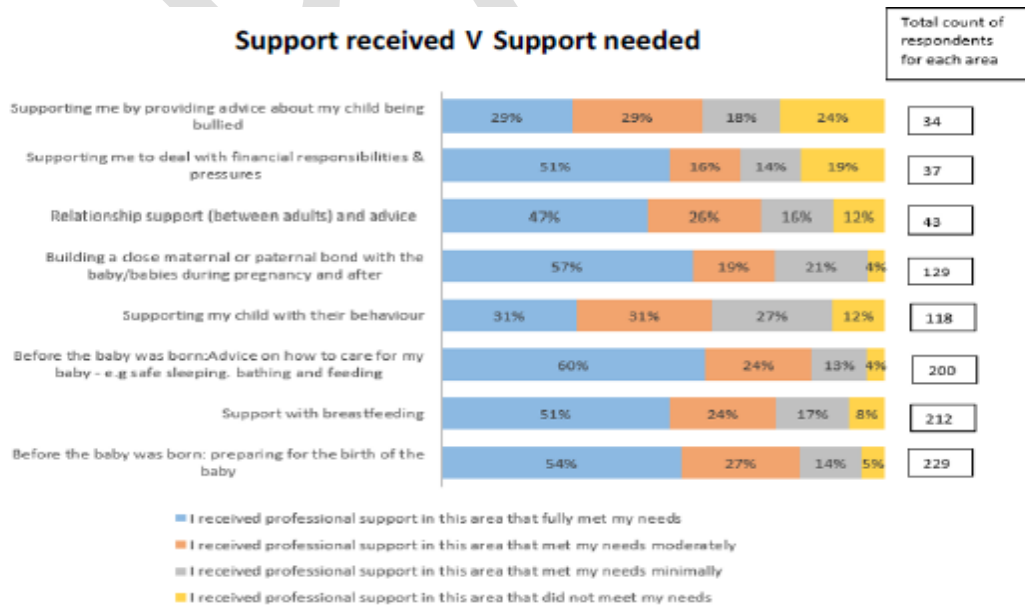
## Didn't need support V Needed Support



**Figure 4:** Summary of consultation findings – Didn't need support v Needed support

The findings show that the majority of parents received support that fully met their needs or moderately met their needs. A summary of the results is provided in Figure 5:

**Figure 5:** Support received by parents versus support needed





## How parents would like to receive support

Thinking about the method in which parenting support is offered, 86/272 (32%) said they prefer to receive support one to one. 99 out of 279 (36%) parents said they would like support at home. 74 out of 272 (27%) preferred receiving advice online.

## Barriers to receiving support

### Stigma

The consultation with parents identified a number of barriers to them accessing help, such as stigma. Some of the comments highlighted included:

*“Felt self conscious and failure if I admitted I was struggling” (infant feeding)*

*“Made to feel that because I am well educated and from a reasonably affluent background and not a young mum, that the support wasn’t for me”*

**Not knowing how to access parenting support:** Access to parenting support needs to be strengthened in the following areas:

- Breastfeeding
- Advice on how to care for my baby - e.g. safe sleeping, bathing and feeding
- Supporting my child with being bullied
- Support around transition points
- Ensuring parents are provided with support around their relationships with their partner

### **Not knowing that help was available:**

The consultation identified that more needs to be done to promote professional support with building a close maternal or paternal bond with the baby during and after pregnancy, support to deal with financial responsibilities and pressures and relationship support (between adults) and advice.

### **Role of social media:**

The survey was promoted online via social media forums during the first six days. Nearly 40% of the total responses received (143 responses) were completed during this time period. It is likely that social media was instrumental in achieving this high response rate and demonstrates the effectiveness of social media providing information to parents in Coventry. Parents were asked how they would like to receive parenting advice; 32% said one to one support was their preferred method, the second most popular answer was online (27%) which shows the importance of using technology as a platform to provide parenting advice.

## 5.3 Findings from consultation with young people

### **Defining good parenting:**

As part of the consultation with young people, we asked 15 young people how they would define good parenting?

Young people raised a number of interesting points, the main findings are shown below:

- The importance of feeling safe, being cared for, having parents who listen to them (19)
- The vital role of parents in teaching and educating their children (8)
- That good parenting was about putting their child's needs before their own (2)

### **Support around technology and building parenting capacity:**

We asked young people to focus on two areas which were recommendations identified by the steering group; technology and parenting capacity.

#### **Technology:**

To strengthen technology and its role in providing parenting support, young people felt the use of a portal providing information on areas such as health, special needs and first aid would be very beneficial. Young people also raised the importance of disseminating information in a range of settings such as libraries, schools, GP surgeries etc. Some comments made reference to the crucial role of social media e.g. Instagram and Facebook in promoting parenting support and the use of online chats to speak to advisors about parenting support.

#### **Building parenting capacity:**

In terms of building parenting capacity, young people highlighted the central role professionals play in breaking down the stigma associated with parenting support; they also felt strongly about the need for support groups and buddying up schemes.

#### **Support for Coventry parents in the future:**

We then asked young people to think what support they would value if they became parents in the future.

Young people stated the following as essential areas for support:

- Information about finance
- Mother and father support groups
- Being able to access support on emotional health
- Knowing what sources are reliable for parenting advice
- Support for multiple births

## **6. Where do we want to get to?**

### **6.1 Key recommendations**

In order to drive action across Coventry partners to achieve the aims of the Coventry Parenting Strategy, a set of key recommendations have been identified:

#### **Strengthen availability and accessibility of general information and advice to parents:**

Our ambition is that agencies and parents will be clear about where they can find information and advice about parenting support. Parents will have access to information in a variety of formats. Parents and agencies will be clear about the type of parenting support on offer.

#### **Harness technology and the developing digital systems across agencies to**

**strengthen the parenting offer:** Our ambition is that parents will feel empowered through peer to peer support and will have access to a range of online support linking parents and communities.

**Ensure there is a systematic approach to ensuring the quality and effectiveness of the parenting offer across the whole system:** Our ambition is that parenting support will be offered in a way that meets the needs of families, providing those families with more complex needs with more support.

**Ensure that this system-wide parenting offer is delivered in a way which progressively provides more support across the social gradient and level of need:** Our ambition is that partners delivering parenting support will feel confident in their skills and abilities to drive parenting support universally and targeted at the most vulnerable families

**Ensure there is a clear focus on early help and prevention:** Our ambition is that support will be provided to families from professionals working with 0-19 years at the earliest possible opportunity to prevent issues from escalating to crisis point.

**Improve cohesiveness of parenting support across Coventry:** Our ambition is that professionals will work together to share information regularly so parents don't have to keep repeating their stories; clear referral pathways will be in place for both young people and families requiring additional health or social care services, with good communication between all agencies involved

**Build parenting capacity in specific areas where gaps have been identified:** A robust offer to support parents to build parenting capacity including evidence-based programmes will exist. Parents will be able to access a range of parenting advice available through a variety of methods which are easily accessible. A range of courses, group sessions, online provision, will be available appropriate to the family's needs, this will help improve parents' confidence levels in their parenting abilities. Parents will be supported with wider issues such as employment, housing, income, relationship advice taking a whole family approach. Peer to peer support will exist, encouraging community resilience.

Importantly, Coventry partners represented on the Coventry Parenting Steering Group, have committed to delivery of parenting support as outlined in Table 2 (section 3). This clear continued focus is significant given the financial challenges currently faced by statutory and non-statutory services. Table 3 provides the key recommendations and emerging actions for the parenting strategy:

Table 3: Key recommendations for the Parenting Strategy and emerging actions

Key recommendations	Emerging actions
<p><b>1. Strengthen availability and accessibility of general information and advice to parents</b></p>	<ul style="list-style-type: none"> <li>• Ensure all staff are working with families to promote consistent positive messages about parenting support that is on offer with professionals being clear about referral processes.</li> <li>• Strengthen parent leadership forums to support parents</li> <li>• Harness the opportunities to integrate a newly designed parenting portal within current development of digital platforms across partners, providing information and advice to parents</li> </ul>
<p><b>2. Harness technology and the developing digital systems across agencies to strengthen the parenting offer</b></p>	<ul style="list-style-type: none"> <li>• Promote safe use of social media as a route for advertising / awareness raising around parenting support across all partner agencies.</li> <li>• Steps to Change be made available to parents via a protected online portal for parents to control.</li> <li>• Support access to online services via community centres linking in with other digital offers. Consider Youtube as a tool for communicating parenting information to parents who struggle with resources written in English.</li> </ul>
<p><b>3. Ensure there is a systematic approach to ensuring the quality and effectiveness of the parenting offer across the whole system</b></p>	<ul style="list-style-type: none"> <li>• Offer a wide range of formal and informal support for parents that is accessible, reflecting the diverse needs of parents of Coventry such as support at transition points or parents who are asylum seekers.</li> <li>• Train staff and offer ongoing peer support, particularly in steps to change and signs of safety to adopt a collaborative approach. This must be offered to voluntary, private and partner agencies and schools. There is an expectation that all partner agencies will use these tools in part or whole.</li> <li>• Ensure parenting support includes face to face and one to one services alongside online provision</li> <li>• A continual process of assessment and improvement to ensure it meets the needs of Coventry parents into the future.</li> </ul>
<p><b>4. Ensure that this system-wide parenting offer is delivered in a way which progressively provides more support across the social gradient and level of need</b></p>	<ul style="list-style-type: none"> <li>• Early help managers to complete asset mapping for local needs and resources in their communities.</li> <li>• Strengthen the intelligence that is shared between partners to help them make informed decisions about resources</li> <li>• Strengthen delivery in areas where the resource currently does not meet the demands of the population(further in-depth analysis is needed considering each parenting projects impact in relation to resource)</li> </ul>

<p><b>5. Ensure there is a clear focus on early help and prevention</b></p>	<ul style="list-style-type: none"> <li>• Strengthen antenatal parenting support – availability of antenatal classes e.g. birth expectation classes and antenatal support groups is increased.</li> <li>• Improve continuity and consistency throughout important transition periods e.g. starting school particularly for vulnerable families.</li> <li>• Early years’ staff (including maternity, health visiting, voluntary agencies, children services) to promote closeness and sensitive parenting, by training staff in parent infant attachment and improve their ability to identify attachment disorders early.</li> <li>• Equip the workforce to be better placed to work together, identify problems early and share information with professionals.</li> </ul>
<p><b>6. Improve cohesiveness of parenting support across Coventry</b></p>	<ul style="list-style-type: none"> <li>• Working with partners to build training models which offer sustainability long terms e.g. train the trainer models</li> <li>• Identify workforce development needs and train key partners including Family Hub staff</li> <li>• Build knowledge, confidence and trust between professional disciplines (e.g. through the Family Hubs) to ensure parents are provided with consistent advice around parenting offer.</li> <li>• Improve relationships between those providing parenting programmes, whilst encouraging signposting and referral pathways between services</li> <li>• Professionals delivering parenting support to develop constructive relationships with parents with effective communication systems between the school and the family.</li> <li>• Professionals working with families will have face to face multiagency meetings to discuss concerns about families with unmet needs.</li> <li>• Align the Parenting Strategy implementation with the Special Educational Needs and Disability (SEND) local offer</li> </ul>
<p><b>7. Build parenting capacity in specific areas where gaps have been identified</b></p>	<ul style="list-style-type: none"> <li>• Build parenting capacity and help normalise parenting support in local communities</li> <li>• Wherever possible involve families in decision-making in respect of services that they benefit from</li> <li>• Strengthen parent relationship advice - This should include brief targeted interventions for more vulnerable families where there is increased parental conflict and universal support during the antenatal and postnatal phase to prepare parents to transition into parenthood</li> <li>• Train staff to support fathers more confidently.</li> </ul>

- |  |  |
|--|--|
|  | <ul style="list-style-type: none"> <li>• Strengthen parenting provision universally for school aged children ( 5-19 years)</li> <li>• Strengthen support for parents with a learning disability</li> </ul> |
|--|--|

## 6.2 Next steps:

A crucial part of the implementation of this strategy will be the development of a clear action plan owned by partners and managed within a governance structure which provides robust processes to assess progress. The action plan will be developed to set targets, identify organisational leads and individuals.

Multi-agency task and finish groups have been set up to take forward the first four recommendations, with the remaining recommendations acting as cross-cutting themes. Key partners have signed up to lead the task finish groups such as Grapevine and those responsible for parenting in the council. A detailed delivery plan for each of the work streams will be developed in partnership with key stakeholders.

The Parenting Strategy Steering Group will oversee the task and finish groups in developing action plans for each key area of development. The Coventry Parenting Steering Group will be responsible for monitoring the progress against the general and specific action plans and measuring the outcomes of the strategy (see below).

## 7. How will we know we have got there?

In order to ascertain if delivery of the key recommendations above is having a positive impact on Coventry parents it is necessary to identify a range of information/data that can be used to indicate positive progress. Drawing on a range of outcomes/data already collected, or due to be collected, will ensure there is a co-ordinated and consistent approach across the city to measuring impact on families.

### 7.1 Expected outcomes

Parenting will also be strengthened in the future through the Family Hubs. The Family Hubs outcome metrics and Children and Young Peoples Plan will be used to measure the impact of positive parenting support on children and families' outcomes in Coventry. In terms of measuring the child's and family's journey, the Parenting Strategy identifies that the 'Steps to Change' model is a key evaluation tool measuring the family's journey over a period of time to show the progress they are making. This includes impact in areas such as the child's health, education, relationship with parents and family life. Appendix 2 provides the 'Steps to Change' model which has many areas it measures for family life. Also, questionnaires will continue to be used pre and post parenting support to measure the impact of the support.

## 8. Conclusion

There is strong evidence that supporting parents to develop good parenting skills will have significant impact on children's lives as they grow up. Coventry is a young, diverse city, therefore, investing in our children and young people and their parents benefits everyone in Coventry. We are using many evidence based parenting programmes in Coventry which are embedded into practice and we have good data showing significant impact. Delivering the

parenting support will require creative thinking around how resources will be used most effectively across the deprivation gradient, to improve family wellbeing and build resilience within our communities and encourage early intervention and prevention. We need to look at the way we support families, with professionals spending time developing trusting relationships with children and families, building community capacity. We must strengthen our efforts to work with partners, parents, children and young people, tapping into the city's future ambition for its children and young people.

#### **8. Acknowledgements and contributions**

This strategy relies on the time and talent of colleagues whose contributions and comments are acknowledged with grateful thanks. These include stakeholders, partners, providers and members of the Coventry Parenting Steering Group.

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## 10. Appendices

### Appendix 1: Membership of the Coventry parenting steering group:

1. Sue Frossell, Public Health (Consultant in Public Health)
2. Harbir Nagra, Public Health (Programme Officer)
3. Angela Harley Coventry City Council, (Early Help Manager West)
4. Pat Grainger (Lyng Hall School)
5. Sarah Tambling (Police)
6. Sheila Bates, Coventry City Council (Children's Champion)
7. (Alan Butler, Coventry City Council (Joint Commissioning Manager Childrens joint commissioning team)
8. Mary Haidar, Health Visiting Service Manager (Coventry and Warkwicksire partnership trust)
9. Taffy Nyatanga (Out reach Acts)
10. Sue Sampson (Carriers of Hope)
11. Tim Jacques (Wild Earth )
12. Dawn Nicholls (Parent leader)
13. Hamida Khalifa (Family Hub Youth Worker, Coventry City Council)
14. Nicky Murphy (Family Nurse Partnership, FNP Supervisor)
15. Emma Beckett (Senior Practitioner, Coventry City Council)
16. Katie Mcginty/Tracy Standbridge Boyle (Midwifery iBumps)
17. Head of SEND (Chris Firth: Coventry City Council)
18. Andrea Mbarushimana (Grapevine)
19. Gillian Broomfield ( Parenting, Coventry City Council)
20. Vicki Finlay (Parenting Coventry City Council)
21. Lesley Cleaver/ Carmen Baskerville (Health Visiting)



**Appendix 2: Steps to Change evaluation tool** <sup>23</sup>

<i>Assessment Area</i>	<i>Building Blocks</i>
① Health	1 Children's physical wellbeing
	2 Children's mental health and emotional wellbeing
② Learning	3 Achievement, attainment, attendance and aspiration
③ Parents and Carers	4 Safety and security
	5 Family attachment and relationships
	6 Guidance behaviour and positive role modelling
④ Family and Environmental	7 Family life
	8 Accommodation and money
	9 Parental mental health and physical wellbeing

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