

## **Coventry Parenting Strategy 2024 – 27 (Draft)**

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#### **Executive summary**

There is clear evidence that good parenting is crucial to a child's development and to their future life chances. In 2018, the Coventry Parenting Steering group (which includes key partners across statutory and non-statutory agencies) was set up to coordinate our approach to parenting, sharing our resources, knowledge, and experience to review current parenting provision and highlight recommendations for future parenting support. Partners have been instrumental in the implementation of the previous strategy and the work on the refresh.

The Coventry Parenting Strategy (2024 -2027) builds on the previous Coventry Parenting Strategy (2018-2023). This strategy offers an opportunity to galvanise partners further to enable better outcomes for children and families through offering parenting support. 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 support on children and young peoples outcomes. A consultation was held with key stakeholders. Partners reviewed the current parenting support which demonstrated that Coventry has a large number of evidence-based parenting programmes and services on offer. There are also a number of locally grown parenting programmes which assist in meeting the diverse needs of the city.

A consultation with parents and carers was also completed. 220 responses were received. Parents and carers were asked about missing help or support or what could have been better; mental health for mother and baby was cited by 36% (46) of parents and carers. Children and young people's mental health was also mentioned by 36% (46) and partners mental health was highlighted by 27% (35) responses. Other areas reported included childs behaviour 30% (39) and toilet training 28% (36). A focus group was held with young people to capture views about what good parenting looks like. Young people mentioned the importance of healthy

communications across and within the family. Young people reported the importance of emotional support, listening and understanding as well as a desire for setting family boundaries.

The Family Hubs and Start for Life Programme has provided additional investment into the city to enhance the universal Family Hub offer and strengthen parenting support further. The Coventry Parenting Strategy (2024-27) references interconnectivity to help ensure a One Coventry approach is taken to support children, young people and families.

## Key priorities

Areas for improvements and key recommendations have been identified, bringing together the views of parents, carers and stakeholders and the evidence. Key priorities include:



## 1. Introduction

Welcome to the Coventry Parenting Strategy (2024 to 27). This strategy gives a broad overview of what we aim to achieve in the next three years based on the national context, local data, consultations, and policies to strengthen parenting support offered by partners in Coventry.

### 1.1 Coventry Parenting Strategy 2018-2023

The launch of the Coventry Parenting Strategy in 2018 recognised the importance of good parenting support and how this is linked to improving children's outcomes. In refreshing our Coventry Parenting Strategy and supporting a One Coventry approach to improve outcomes and tackle health inequalities, our aim is to continue to strengthen the availability and accessibility of information and advice for parents. We want to ensure there is a clear focus on early help and prevention.

The previous Coventry Parenting Strategy (2018-23) progress and implementation has been overseen by the multiagency Coventry Parenting Steering Group. Progress has included further investment into parenting programmes for teenagers, increased online parenting provision, resources being created to coordinate antenatal parent education across the city and resources developed for parents around transition to secondary school. Parenting provision specifically for dads and partners has been increased through the use of apps such as DadPad. Parenting

webinars have been delivered to upskill staff and inform them of the latest parenting support offer for the city. This strategy builds on the previous Coventry Parenting Strategy 2018-2023.

## **1.2 Links to other work happening in Coventry**

Coventry opened 8 Family Hubs in 2018, and since that time the Family Hubs have been supporting children, young people and families. The space and buildings remain at the heart of the Coventry Early Help offer with further aspiration and opportunities to enhance and expand the Family Hub offer.

This is an exciting time for families and professionals in Coventry, as we have been awarded further investment through the Family Hubs and Start for Life national programme which includes strengthening our parenting offer for families in the city. The Family Hubs and Start for Life Programme<sup>1</sup> sets out the vision for providing families with the integrated support they may need to care for their children from conception, throughout the early years and into the start of adulthood. The vision is to enable parents to establish a firm foundation for their children, from which to meet their full potential in life. Coventry received funding through this programme to transform, align and invest in the growth of the support to families with a renewed focus on the best start for life for children from conception to 2 years. Funding has been provided to expand and mature Coventry's Family Hub model, improve the universal Start for Life offer and transform family support. The programme will provide a comprehensive offer for all families with children aged 0 – 19 years and up to 25 years for those with special education needs.

Through the programme, parents and carers should feel supported and empowered in caring for and nurturing their children, ensuring they receive the best start in life. This in turn will improve health and education outcomes for children and support them to thrive in later life.

In addition, the new Supporting Families Programme was launched in March 2021 and builds on the previous Troubled Families programme<sup>2</sup>. As set out in 'Supporting Families 2021 to 2022 and beyond', it is a nationally funded government programme which requires Coventry to co-ordinate early help support and track the impact with families with multiple identified needs. The programme recognises that early help should be delivered through a 'whole family approach' with a range of partners working together with the family to prevent needs escalating, helping to bring about sustainable changes and reduce the demand on services.

As a Marmot City, Coventry is working to address the causes of inequalities by resourcing and delivering universal services at a scale and intensity proportionate to the degrees of need. The Marmot principles, from the Marmot Review, Fair Society, Healthy Lives which aim to reduce inequality and improve health outcomes for all, have been embedded into the core functions of the council and its partners<sup>3</sup>. Improving health and reducing inequalities in Coventry is not only a priority for the NHS and Public Health - it is a priority for everyone who is working to improve the lives of people in the city.

This strategy supports and will work in conjunction with other key local policies in Coventry which impact families. The development of effective systems of support for parents and carers directly links to several key strategic drivers at a local level such as:

- The One Coventry Plan (2022 – 30)
- Family Hubs and Start for Life programme.
- The Supporting Families Programme
- The Coventry Early Help strategy (2023 – 25)
- The Marmot Monitoring tool
- Coventry Domestic Abuse Strategy (2018 – 25)
- Coventry Drugs and Alcohol Strategy (2023-33)
- The Children and Young People Plan (2021)
- The Local Maternity Neonatal Systems Plan
- Coventry Equity and Equality - Local Maternity Neonatal Systems Action Plan
- The Coventry Health and Wellbeing Strategy (2023-26)
- The NHS Inequalities Strategy Core 20 plus 5
- Child Friendly Cov
- #Covconnects
- Coventry Youth Violence Operational Plan
- Coventry City Council's Youth Justice Strategy 21-23
- Housing and Homelessness strategy 2019 – 24
- Economic Development strategy 2022- 27
- Coventry and Warwickshire Joint Strategy for Autistic people (2021-26)

### **1.3 Why is parenting support important?**

Good parenting is crucial to a child's development and to their future life chances. 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. Studies have shown that children who experience a secure and nurturing home environment are better able to withstand challenges later in life because consistent positive parenting helps build self-control and resilience<sup>4</sup>.

There is well established and growing consensus on the importance of the first 1001 days of a child's life and how this sets the foundations for their brain, and emotional and physical development<sup>1</sup>. Parental neglect, poor relationships with parents and inadequate parental supervision are associated with negative outcomes. There is evidence that suggests the potentially damaging effects of 'adverse childhood experiences' (ACEs). These are traumatic events which may result from exposure to poor parental mental health, abuse, neglect and parental drug misuse amongst other risk factors. Research suggests that adults with attachment issues and those exposed to ACEs are at a higher risk of entering into volatile relationships, and having poor parenting skills, behavioural difficulties, and mental health problems<sup>5</sup>. Evidence shows that parental conflict puts children's mental health and long-term future life chances at risk. Some of the other key factors that influence children's outcomes include poverty, where they live, their housing, the local community and the resources available

in the environment. Sir Michael Marmot states it is easier to parent more effectively when social and economic circumstances are favourable and when stress and anxiety are lower<sup>6</sup>.

There are many national policies which recognise the important role of early intervention and prevention and high quality, accessible parenting services to improve outcomes for children and families including the following:

- The Best Start for Life: A vision for the 1,001 critical days (2021)
- 'Fair Society, Healthy Lives' (UCL Institute of Health Equity 2010)
- Health Equity in England: The Marmot Review 10 years on (2020)
- Early Intervention Foundation: What works to support parent child interaction in the early years (2016)

Figure 1 shows the key factors involved in ensuring children are given the best start in life to help reduce health inequalities including areas such as emotional wellbeing and language development<sup>7</sup>.

Figure 1: Giving every child the best start in life – key factors.



There is strong evidence that frequent, intense and poorly resolved parental conflict can have a negative impact on children's mental health and long-term life-chances<sup>9,10,11</sup>. In response to this, the government developed the Reducing Parental Conflict programme to reduce parental conflict and improve children's outcomes. The Department for Work and Pensions (DWP) Reducing Parental Conflict (RPC) programme has published new research showing its positive impacts on families participating in interventions - both for parents and children. The reports

show around half of parents supported by RPC reported improved relationships, even up to a year later. These were parents experiencing regular and intense conflict, and with different relationship statuses – the sample included couples and those separating or separated<sup>8</sup>.

Most parents also found their children’s mental health improved after being helped by RPC, with almost three quarters (73%) receiving relationship support seeing it positively impact their children for the long run even a year later. The funding for the RPC programme was made available to Local Authorities in England, who work in partnership with a range of experts from relationship and family charities<sup>8</sup>.

Coventry Local Authority receives funding for the provision of a range of workforce development activities that supports practitioners from across the children’s workforce who work with families to recognise the difference between Parental Conflict and Domestic Abuse, to provide training on the use of tools that supports families to understand the importance of healthy relationships in order to enhance their children’s lived experiences and to recognize the impact that parental conflict can have on children’s emotional health and wellbeing. In addition, Reducing Parental Conflict has been included in the refreshed Coventry’s Early Help Strategy (23-25)<sup>12</sup>. Further work has been undertaken to increase the focus on improved family relationships. In Coventry, a dedicated working group (Doing it Together - Improved Relationship outcome group) has been established with partners which focuses on embedding the principles of Reducing Parental Conflict Programme across the workforce.

#### **1.4 Impact of COVID 19 on children and families**

The COVID-19 pandemic has brought with it new challenges for families across the world and has had a profound impact on family dynamics, relationships, and routines. Nationally, this has meant a number of ‘lockdowns’, social distancing, periods of school closure, closures of local businesses and childcare and a significant shift into the way services can be delivered and how families have operated.

The Department for Education’s (DfE’s) State of the Nation is an annual report that draws upon a range of sources and reports on children and young people’s mental health, wellbeing, and experiences over the previous academic year – evidence indicated lower wellbeing in December 2020 and February 2021, when schools were closed to most pupils, compared to previous months in the academic year. Reductions in average levels of wellbeing occurred most clearly in February 2021, when schools were closed to the majority of children, before recovering towards the end of the academic year as restrictions were eased<sup>13</sup>.

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 and outcomes can improve for families. It is important that in developing the Coventry Parenting Strategy (2024-27) it is acknowledged the significant impact of COVID-19 on children, young people and families and further consideration will be given to shape plans moving forward.

## 2. Our vision

In Coventry, partners who work with families to support positive parenting have come together in order to develop the following vision in line with various policies to improve outcomes for families:

*Together children and families are at the heart of everything we do*

*We want to reach children, young people and families when their needs first emerge and intervene when we can have the most impact.*

*Opportunities to give every child the best start in life and enable all children, young people and parents to maximize their capabilities and have control over their lives can be provided by intervening early so that collectively together partners can make a real difference to a children's' life.*

The vision will be achieved by:

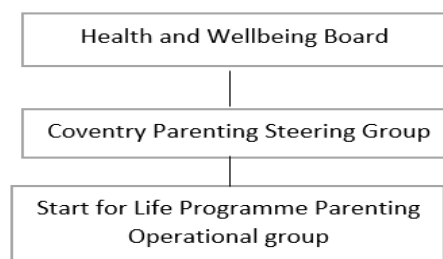
- Ensuring children and young people have the best possible chance of being happy and healthy and achieving their potential through parenting support that is accessible and responsive to individual and community needs.
- Supporting families from maternity services to school age and beyond, which develops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

## 3. Governance arrangements

The Coventry Parenting Steering Group will oversee the progress and implementation of the strategy. The role of the Coventry Parenting Steering Group is to develop the Parenting action plan and overview accountability for the actions delivered as part of the strategy priorities.

Figure 2 shows the current governance arrangements and reporting mechanisms for the strategy's implementation.

Figure 2: How the partnership will work for the Coventry Parenting Strategy 24 - 27



#### 4. Where are we now?

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

Coventry's population is approximately 345,300. Coventry is a young city with a median age of residents of 35 years and is falling over time, this is notably lower than the England median of 40 years. An estimated 68,300 children under the age of 16 live in Coventry, which makes up 19.5% of the population<sup>14</sup>.

The percentage of Coventry neighbourhoods that are amongst the 10% most deprived in England reduced from 18.5% to 14.4% between 2015 and 2019. These pockets of deprivation limit people's opportunities to succeed in life; and transforming life chances requires addressing the social inequalities that are established right from the earliest years. The latest available data, for 2020/21, suggests that 23% of Coventry children aged 0-15 live in relative low-income families compared to 19% nationally<sup>14</sup>.

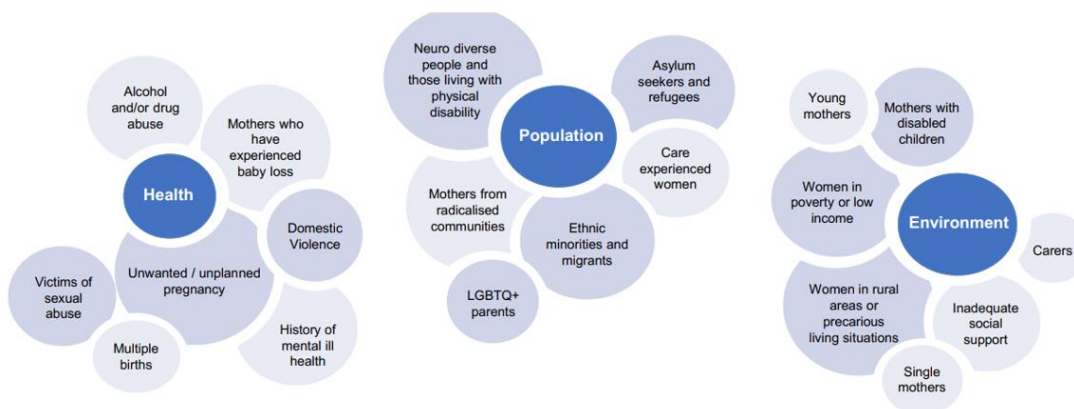
Digital Exclusion adds another dimension to inequalities of access to healthcare and should be a consideration. Digital exclusion impacts healthcare both directly and indirectly. Directly by residents not having the opportunity, skills, and confidence to access healthcare digitally, and indirectly digital exclusion leads to poorer opportunities across the wider determinants of health, such as employment, education and housing<sup>14</sup>.

**Maternal mental health:** In Coventry, there are approximately 4500 births per year<sup>15</sup>. If one assumes that between 10% – 20% will suffer from some form of mental ill health in the year after pregnancy, we can expect between 450 – 900 women requiring some level of care. 581 are likely to suffer from anxiety and 536 are likely to be depressed. There will be an overlap between these as some women will suffer from Anxiety and Depression. Between 5 -10 women are likely to develop psychosis each year. Data quality is poor in this area and so local intelligence of the communities will be critical in understanding the likely prevalence moving forward<sup>15</sup>.

There are many reasons why women develop mental health problems after giving birth, and this can be influenced by a number and often a combination of factors. Some of the risk factors are shown in Figure 3:



Figure 3 Risk factors for maternal mental health<sup>15</sup>



Health inequalities continue to have a marked impact on infant mortality. The risk of infant death increases with greater levels of maternal deprivation, reflecting the social gradient that exists across underlying risk factors such as preterm delivery, maternal health during pregnancy<sup>16,17</sup>.

**Infant Mortality:** The infant mortality rate in Coventry is 5.7 per 1,000. This is similar to the West Midlands (5.6) however more than for England (3.9). The child mortality rate (1-17 years) in Coventry, whilst low in number, is 15.0 per 1,000, has remained persistently high compared to both the West Midlands (11.0) and England (10.3) since 2012<sup>14</sup>.

**Smoking at time of delivery:** In 2021/22, 9.3% of new mothers from Coventry were smoking at the time of delivery. This has been on a downward trend from 15.1% in 2010/11. It is the same as the England average (9.1%) but lower than the regional average (9.8%) and the average amongst Coventry's statistical neighbour areas<sup>14</sup>.

**Breastfeeding:** In 2020/21, 73.8% of Coventry new-borns received breast milk as their first feed, better than both regional (68.3%) and national averages (71.7%). The prevalence of breastfeeding is also measured using data collected by Health Visitors when a baby is 6 to 8 weeks old, in Coventry it has remained around 50% in recent years, so half of babies remain at least partially breastfed by that age. While there is some uncertainty because of missing data for a small minority of babies, we can say the 2021/22 rate of about 51% is higher than the England average of 49.2% and it has been better for the last few years, although the gap has narrowed due to an increasing trend for England overall<sup>14</sup>.

**Children's Oral Health:** The percentage of 5-year-olds with experience of visually obvious dental decay in Coventry is 34.2% which is higher than that compared to national average of 23.7%<sup>18</sup>.

**Inpatient admission rate for mental health disorders per 100,000 population aged 0-17 years:** Coventry 2021/22 data shows 55 admissions, a rate of 72.0 per 100,000 compared to England rate of 99.8<sup>19</sup>.

**Childhood Obesity:** At reception, Coventry's obesity rate is similar to the England average; but by Year 6, the city's obesity rate is higher than the England average. 1 in 5 reception year (aged

4-5) Coventry children were measured as overweight in 2021/22, doubling to 2 in 5 children in year 6 (aged 10-11). There is a clear link with deprivation at age 4-5 and age 10-11 with successively higher rates of obesity in areas of higher levels of multiple deprivation. The general trend over the last seven years is of increasing proportions of 10-11 years being overweight or obese<sup>14</sup>.

**Educational attainment:** By the age of five, fewer children achieve a good level of development (61.1%) than nationally (65.2%) Inequalities in reaching a good level of development within Coventry have already established themselves by the age of 5. Amongst disadvantaged children, 46.3% achieve a good level of development, compared to 63.4% for non-disadvantaged, a 17-percentage point gap. JSNA (2023) states inequalities in attainment persist into Key Stage 4, the gender gap at the end of primary is still present in Key Stage 4 attainment. The average attainment 8 score amongst female pupils was 48.9, better than 43.4 amongst male pupils. Overall attainment levels for disadvantaged pupils are significantly lower, with an average attainment 8 score of 37.7 compared to 49.8 amongst non-disadvantaged pupils in Coventry. Attainment 8 scores indicate that the overall attainment levels of white pupils in Coventry are lower than those for other ethnic groups. Further analysis is needed to understand these inequalities<sup>14</sup>.

**Early Years childcare places:** In Coventry, uptake of funded early years childcare for all children aged two, three and four has increased. The 2 year old take up has increased to 74.8% in 2022 compared to 72% nationally. Similarly, the 3 and 4 year old take up increased from 86% to 88% but was still below national at 92% and 93% averages<sup>14</sup>.

**Special Education Needs and Disabilities SEND:** The number of pupils with Special Educational Needs (SEN) has been increasing, as it has for England overall. In 2021/22 there were 11,054 pupils with SEN in Coventry, making up 18.2% of all pupils compared to 16.5% for England overall. This is divided into two types, those with a Statement or an Education, Health & Care (EHC) plan; and those with SEN support. Between 2015/16 and 2021/22 the proportion of all pupils with a Statement or EHC plan increased from 2.3% to 3.3% and those with SEN support increased from 13.3% to 14.9%, this trend is similar to that for England overall<sup>14</sup>.

**Teenage parents:** Under 18s conception rate per 1,000 is 21.2 locally compared to national rates of 16.7<sup>14</sup>.

**Children in care:** The number of children in care remains above the national average but similar to statistical neighbour's. In Coventry 89.5 children out of every 1,000 are in care. This is higher than England's rate of 70 but is more in line with statistical neighbour average rate of 89. This has been on a slightly increasing trend in recent years<sup>14</sup>.

**Domestic abuse:** There has been an increase in domestic abuse incidents in Coventry. There was a total of 9,280 domestic abuse incidents reported to the Police during 2020. This is a 33% increase on the previous highest number over the period which was 7,000 during 2019<sup>21</sup>.

**Employment:** Across Coventry, more and more people are feeling the pressure from the increasing cost of living. This will disproportionately affect the most deprived families in Coventry. The number of Coventry residents in employment has been increasing strongly for the last few years. In 2022 there were 80% of people in paid work. The balance between male and female is reasonably equitable with 94,400 males and 86,300 females<sup>14</sup>.

#### 4.1 Parent and carer consultation findings

We are committed to listening to service users, encouraging them to contribute and develop the Coventry Parenting Strategy with us. In August 2023, a survey was undertaken using Survey Monkey online and paper-based questionnaires were also completed in face-to-face sessions with parents and carers. 220 responses were received. 11% (14) said they were male with the majority of responses coming from females 87% (115) and 2 % (3) said they would prefer not to say, other respondents did not answer this question.

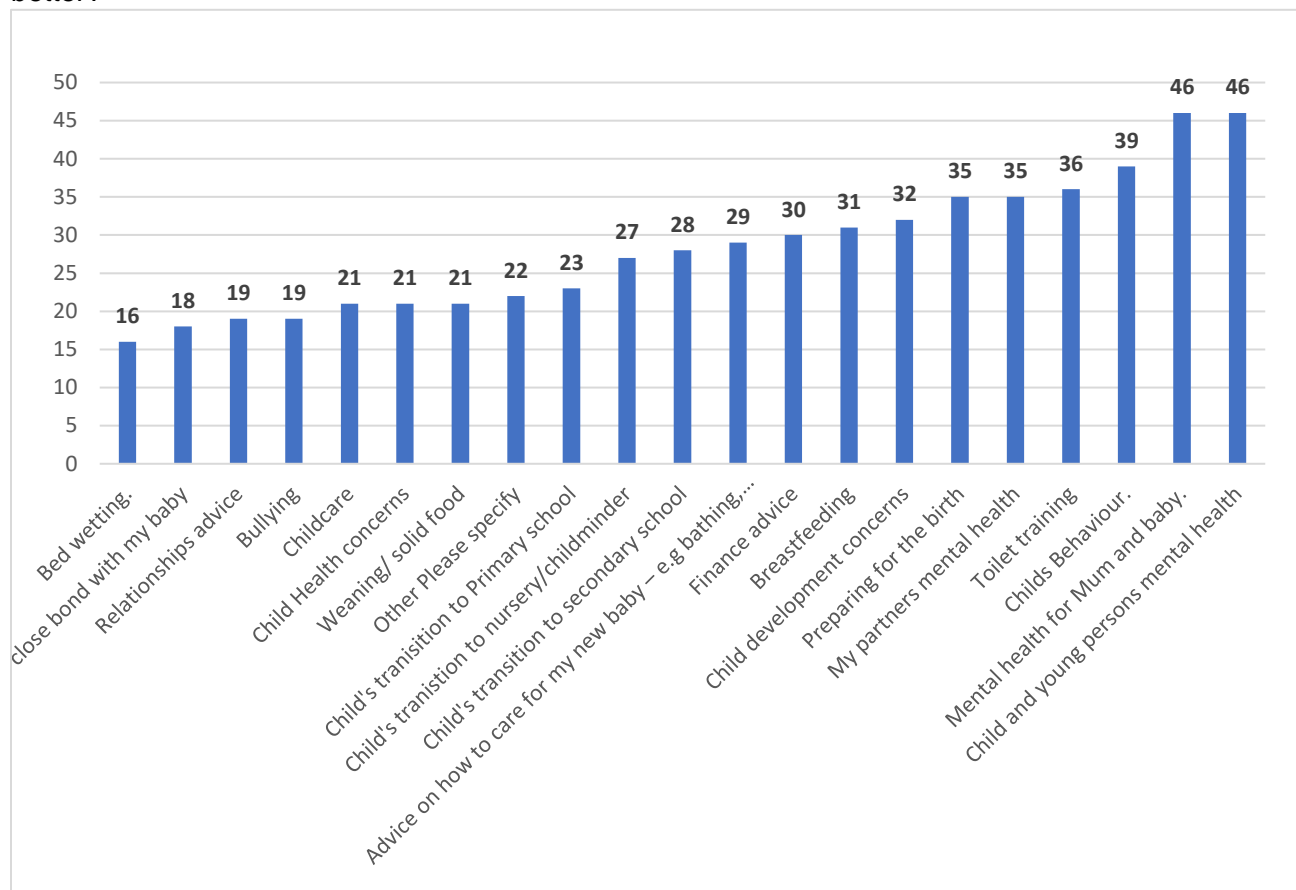
In terms of the age of the child/young person, parents told us 45% had a child in the 12- 18-year age group and 31% said they had a child aged 6–11. However, when asked when help and support was most needed, 56% (76/136) of responses felt that the help and support was most needed when their child was aged 0 – 2 years. Thus, supporting the importance of parenting support in the first 1001 days of a child's life. 30% of respondents felt that help and support was most needed when their child was 2 – 5 years.

Most respondents to the survey said they rely on family members or friends for support. Three quarters told us they rely on family members, while just over half said they rely on other parents within their friendship circle. The least number of responses were received for support from podcasts, only 5 of those responding said they look to the SEND Local Offer however 32 of the respondents said they have one or more children with a disability. 8 of those who responded said they rely on a Parenting App.

Most parents and carers said they have one child (25%) or two children (38%) accounting for almost two thirds of those responding. 18 respondents said they are currently pregnant (less than 10% of those completing the survey). Of 214 who answered, 1 in 5 (20%) stated that at least one of their children has a disability or is awaiting diagnosis. The survey findings showed that more needs to be done to strengthen support when there is a child with a disability.

When asked what services or support could have been better or were missing, there was a range of responses. 36% (46/128) of respondents stated that help with mum and baby mental health could be improved. 36% (46/128) also highlighted child and young person's mental health and 27% (35/128) of respondents felt that partner/dad's mental health was an area that was missing or could be improved. 31% (40/128) of respondents felt help around child's behavior was missing or could be improved and 28% (36/128) of respondents felt that advice around toilet training was missing or could be improved. Preparing for birth was also highlighted by 27% (35/128) of parents and carers. Figure 4 shows a breakdown of the responses received.

Figure 4: Is there any area of help and support that you feel is missing or could have been better?



Parents and carers were also asked about the mode of delivery when receiving parenting support. Table 1 shows responses in relation to the preferred mode of delivery. Face to face was the most popular answer. Online was the least popular (only 12 parents or carers strongly agree they would like online support via YouTube, 26 respondents said they strongly disagree that they like this method). One to one sessions were more popular than group or drop-in sessions.

Table 1: Please tell us how much you agree with the statements I would like to receive parenting advice and support?

Method	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
Face to face	63 (45%)	51 (37%)	18 (13%)	4 (3%)	3 (2%)
One to One	47 (35%)	54 (40%)	23 (17%)	9 (7%)	4 (3%)
In a drop-in session	29 (21%)	64 (47%)	29 (21%)	9 (7%)	4 (3%)
In a group	22 (17%)	59 (45%)	30 (23%)	13 (10%)	6 (5%)

On the Phone	19 (14%)	49 (37%)	38 (29%)	18 (14%)	3 (2%)
Online – live virtual delivery by a professional e.g. Zoom	17 (13%)	51 (37%)	36 (26%)	13 (10%)	19 (14%)
Online parenting course such as Solihull Approach	13 (10%)	34 (26%)	58 (44%)	13 (10%)	13 (10%)
Online support via YouTube	12 (9%)	31 (23%)	36 (26%)	25 (19%)	26 (19%)

Table 2 shows responses to when parents and carers would like to receive parenting support, most parents and carers (65%) said they would like to receive support in the evenings. The numbers reporting whether they would like support on weekends or weekdays were very close with just 2 more responses saying weekends.

Table 2: When would you like to receive parenting support?

Time	Number of responses	%
Evenings	85	65%
Weekends	76	58%
Weekdays	74	56%
School hours	63	48%

**Barriers to accessing support:** When asked about barriers to gaining support there were 82 responses. Information/ accessibility was the key theme receiving the majority of comments. A lack of provision or services only being available to certain groups was second most raised with comments around services geared toward or only available to those not at work or on a low income being the major factor falling within this category. The responses highlighted the need for support to be geared not only to mothers but to consider fathers and LGBT+ Parents.

Parents explained they feel that there is a lack of understanding of how challenging parenting is, especially where there are other considerations and stigma associated with asking for parenting support.

*“Too many people believe a parenting class is linked to doing a bad job-but it shouldn't be. It should be normalised-no one would be expected to start a new job with no training and the same should be for parenting. It's difficult for whoever you are and however educated you are”.*

The importance of continuity of care was also highlighted by parents and carers. Parents and carers also mentioned the importance of being heard by professionals and having a voice.

**MAMTA consultation:** A parent survey was carried out in December 2022 to capture the views of ethnic minority parents in Coventry. This was carried out through Foleshill Womens Training who support specifically with ethnic minority women in the antenatal and postnatal period. The survey was completed by 30 women. 28 (93%) of respondents said that they felt they had received the help and support they needed from the MAMTA service which supports women from ethnic minority backgrounds in the antenatal and postnatal period. Comments included;

- *“Good holistic approach”.*
- *“Very good service referred me to other antenatal support within their partnership”.*

- *“Well trained and multilingual. Peers supported me well in all aspects”.*
- *“A lot of info shared, very engaging, really enjoyed the session”.*

When asked if there was any area of support/advice that was missing or could be better, 24 (80%) felt that there was no area of support that was missing. One respondent said ‘MAMTA is supporting so well, peers are well trained, and they are always there for more support’.

When asked what areas of help they needed when they started working with MAMTA;

- 6 (20%) parents said breastfeeding support and advice.
- 5 (17%) said antenatal sessions/health support and education/antenatal classes cancelled at hospital.
- 4 (13%) said pregnancy and aftercare.
- 3 (10%) said that they felt they needed general support as a result of having language difficulties.

**Parent and Carer forums in Coventry:** To ensure parents voices are heard and help shape the services they receive, Coventry and Warwickshire have a Maternity Neonatal Voices Partnership which ensures the views and experiences of families contribute to the development of local maternity care by collecting feedback and sharing information. There is also a local coproduction and communications workstream to strengthen this work further in the Local Maternity Neonatal System. Additionally, there is also a parent carer panel that has been established to ensure families can provide feedback as part of the Start for Life programme. These forums are essential for ensuring the voices of families and their experiences help improve future delivery of parenting support.

#### **4.2 Engagement with Young People**

**Child Friendly Cov** -Child Friendly Cov is a campaign to make Coventry a child and young person friendly city, ensuring that Coventry is a place where children and young people are valued, supported and enjoy themselves. Together with children and young people the following themes have been identified as priorities for how to make Coventry a child friendly city: Be Valued, Be & feel Safe, Be and feel healthy, have opportunities.

In line with the work completed on Child Friendly Cov, a focus group was held with young people in October 2023 and young people were asked about what good parenting support looks like.

The responses were predominantly around healthy communications across and within the family. Consideration of feelings and emotional support, listening and understanding as well as a desire for setting boundaries. The views of this focus group reflected other consultations in that young people felt that there is a place for digital delivery of support, but the desired method would be a face-to-face offer.

Further work should be undertaken to ensure the voices of young people continue to be reflected in the development of the Parenting Strategy action planning.

### **4.3 Equality Impact Assessment.**

An Equality Impact Assessment (EIA) is a tool to ensure that we consider the effect of the Council's decision-making processes on different groups of people protected from discrimination – 'protected groups' and help us to consider health inequalities and the Marmot Principles.

The EIA shows how equality information and data related to the refreshed parenting strategy has been used to understand the potential impact it will have on protected groups. It has also been used to inform decisions about the recommendation we have made, and, in this way, the Council can demonstrate that it's paying 'due regard' to the Public Sector Equality Duty.

The latest available data, for 2020/21, suggest that 23% of Coventry children aged 0-15 live in low-income families compared to 19% nationally. An EIA was completed for the Coventry Parenting Strategy 2024-27. Some aspects covered in the EIA include the COVID-19 pandemic which accelerated the uptake of digital services nationally, whereby people who are digitally enabled have better financial opportunities, can access new information and are better connected to others. However, for those who are digitally excluded, the digital divide has grown during the last two years, and without intervention people are at risk of being left behind with poorer outcomes across employment, health and wellbeing, education and service access<sup>20</sup>. However, all services do offer appropriate in person services and where appropriate, these services have continued to increase the in person offer since the lifting of COVID-19 restrictions. This supports those that may have a degree of digital exclusion and the problems that digital access may present such as:

- Minority Ethnic service users– language
- Poverty - lack of access to devices
- Education – lack of awareness to access relevant sites
- Homelessness – access to on-line services

### **4.4 Review of parenting support**

In June 2023, a range of partners across statutory and non-statutory agencies were asked to map the offer of support to parents and carers in Coventry. The findings showed there is a variety of evidence-based parenting programmes and informal parenting support currently available in Coventry to empower parents in managing their children's behaviour and promoting their health, education and wellbeing (this includes Triple P, Solihull Approach Online, Five to Thrive, Dad Pad). Family Nurse Partnership and iBumps supports teenage parents, MAMTA support women from ethnic minority background in the antenatal and postnatal period.

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.

The current position for universal and targeted support in relation to parenting programmes identified in Coventry is highlighted in Table 3 and Table 4.

Table 3: Coventry Universal parenting support

Age Group	Name of Programme/ Parenting Support
<b>Antenatal</b>	
Antenatal	Maternity - Padlet and Birth Expectation Classes
Antenatal	Infant Feeding - Antenatal Classes
Antenatal	UHCW Maternity Classes
Antenatal	Family Links Antenatal Programme
Antenatal	Understanding pregnancy, labour, birth and your baby - Solihull Approach (Antenatal) online course
Antenatal	BABH Bump and Me on-line exercise class
Antenatal and Postnatal	BABH Nutrition for Life and Eating for Life
Antenatal and Postnatal	Best Beginnings Baby Buddy App
Antenatal and Postnatal	Infant Feeding web-based resource <a href="https://linktr.ee/coventryift">https://linktr.ee/coventryift</a>
Antenatal and Postnatal	Coventry Information Directory (Website of Services)
Antenatal and Postnatal	Nutrition for Life. Healthy eating for expectant mothers, on-line course
0-6 months	Weaning advice, Health Visiting sessions
0 - 12 months	Bookstart Baby Packs (Library Services)
<b>0 - 5 Years</b>	
0 - 12mths	Baby Godiva. (Baby bank - equipment for families)
0-6 months	Understanding You Baby (0-6months) Solihull Approach, online course
6 months – 19 + years	Understanding Your Child (toddler to teen) Solihull Approach, online course
0-4	Coffee Tots community café sessions
0 – 4	Rhymetimes and Stay and Play - Coventry Libraries
0 – 5	Drop-in Baby Clinic
0 – 5	Infant feeding web-based support <a href="https://linktr.ee/coventryift">https://linktr.ee/coventryift</a>
0 – 5	Healthy Child Programme. Development checks
0 – 5	Infant feeding support (drop-in clinics and helpline)
0 – 5	Family Links Nurture programme



0 - 5	Chat Health text messaging from the Health Visiting Service
0 – 5	50 things to do before 5. (Health, learning and wellbeing app)
2yrs - 4 yrs	One Body One Life 2-4 (OBOL 2-4) includes wider family
Infancy and early childhood	Buggy workout extra (BABH)
2 – 5yrs	Active Tots (BABH) includes the wider family
2 – 5yrs	Easy Peasy early development app
5yrs - 10yrs	Parenting drop-ins for primary school early years within school setting.
<b>5yrs - 11 yrs</b>	
5yrs – 19yrs	Parent line from the Chat Health messaging service
5yrs - 11yrs	Family Links Nurture programme
5yrs – 11yrs	The Power of Positive Parenting online seminar - virtual access
<b>11yrs – 19yrs</b>	
11yrs - 19yrs	Raising Responsible Teenagers (Triple P 90 min seminar)
11yrs - 19yrs	Triple P Teen Group
11yrs – 19yrs	Family Links Talking Teens
11yrs - 19yrs	Family links nurture programme
11yrs – 18 yrs	Parent texting advice line – School Nursing
6months to 19 + yrs	Understanding Your Child (toddler to teen) Solihull Approach, online course
10yrs – 19yrs	Understanding Your Teenagers Brain. Solihull Approach, online course
<b>Other</b>	
For Teenagers	Understanding Your Brain (course for teenagers) Solihull Approach, online course
0 –19yrs	Coventry Information Directory (Website of Services)
For Teenagers	Understanding Your Feelings (course for teenagers) Solihull Approach, online course

Table 4: Coventry Targeted Parenting support

<b>Age Group</b>	<b>Name of Programme or Support</b>
<b>Antenatal</b>	
Antenatal	Family Links Antenatal Programme
<b>Antenatal/Postnatal</b>	
Pre-birth - 3mths and 3mths - 6mths	Carriers of Hope Baby Bundles and Let's Play groups.
up to 2yrs	Family Nurse Partnership (FNP).
Antenatal and Postnatal	MAMTA supporting ethnic minority women.
Antenatal and Postnatal	MAMTA perinatal mental health support (emotional wellbeing support for ethnic minority women)
<b>0 – 5 yrs</b>	
0 - 2yrs	iBumps supporting teenage parents
	Special Education Needs and Disability (SEND) Local Offer
	Community Autism Support Service (CASS)
18mths - 4yrs	Together We Can (SEND) Group
0 - 4yrs	Communication and Interaction (including Autism) Support Service NAS Earlybird.
0 - 4yrs	Early Years Group Parenting sessions SEND
0 - 4yrs	Carriers of Hope - Lets Play Stay and Play
0 - 5yrs	Sleep advice - Health Visiting group
0 - 5yrs	SEND Early Years
0 -25	SENDIASS
0-5 yrs	Bookstart Additional Needs Packs (Bookstart Star; Bookshine Baby and Toddler; Booktouch Baby and Toddler).
1-2yrs	Bookstart Toddler pack 1-2years
1 – 5yrs	Epic group at Aspire Family Hub. Parents of children with SEN
3-4yrs	Bookstart Pre-School packs 3-4years
4yrs - 5yrs	School Readiness - Health Visiting sessions
3yrs - 5yrs	Incredible Years Parenting Programme. Parents of children with ADHD

5yrs – 11yrs	
0 - 12yrs	Triple P Steppingstones
4yrs – 12yrs	Active Families (BABH)
5yrs - 10yrs	Relate – Family Counselling
5yrs - 14yrs	OBOL (One Body One Life) 8–10-week course
5yrs – 17yrs	SEND Complex Communications Team
5yrs – 18yrs (25 SEND & Care leavers)	COMPASS Shine, low-level emotional wellbeing support CYP
0 - 25yrs	CW RISE Child and Family Neurodevelopmental Service
School age	IThrive / Thrive framework.
11 – 19yrs /25 (for SEN)	
0 - 12yrs	Triple P Parenting Plus
0 – 17rs	All Age Disability Service
4yrs – 12yrs	OBOL (One Body One Life) Family
0 - 18yrs	Family Information Service
0 - 18yrs	Domestic Abuse Programme - Surviving Violence
11yrs - 18yrs	Active Teens (BABH)
11yrs – 25yrs	KOOTH On-line support to recognise and support with children and young people and parent’s mental health.
All	Adult Education ESOL
All	Living with Confidence, through Positive Parenting programmes.
All	Coventry Haven Just4me
All	Coventry Haven
All	Coventry Haven You and Me Mum
All	CRASAC Parent/Carer Support Group
All	Coventry Autism Support Service
	SEND Early Years Complex Communication Group
Parents	Change Grow Live Parenting group
Parents	COMPASS Shine. Parental support for childrens emotional wellbeing – workshops in schools and Family Hubs.
Parents	Talking Therapies

Parents	Parents in Mind
Parents	Stillbirth Support Service
Parents and Carers	Workshops for parents and carers of autistic children (CASS)

## 5. Where do we want to get to?

A set of key priorities have been identified based on the national evidence, local data and consultation with stakeholders in relation to parenting support. Table 5 shows the parenting support priorities and recommendations identified.

Table 5: Parenting Priorities for Coventry Parenting Strategy 2024-27

Parenting support priority	Recommendations
<b>Information and Advice</b>	<ul style="list-style-type: none"> <li>• Ensure that universal services are available for all parents in addition to targeted programmes for more vulnerable groups – e.g. domestic abuse, mental health.</li> <li>• Ensure good quality universal parenting support is developed and delivered where there are recognised gaps in provision.</li> <li>• Develop and publicise information and materials related to parenting support across the community to raise awareness of parenting offers.</li> <li>• Continue to 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 voices inviting service users in the development of services and involve families in the decisions made about their support.</li> <li>• Take a coordinated multi-agency approach to the planning and delivery of the Parenting Strategy in Coventry and embed the early help agenda within the parenting offer so issues are identified earlier.</li> </ul>
<b>Accessibility of Parenting support</b>	<ul style="list-style-type: none"> <li>• Strengthen availability of parenting support at times that suit parents and carers needs.</li> <li>• Develop a comprehensive virtual offer in which families can access advice, support, information and help digitally, through virtual platforms. Ensuring that we maximise resources which can reduce digital exclusion and enable families to access virtual parenting offer.</li> <li>• Ensure information is provided in a way that considers those families who are digital excluded.</li> </ul>

	<ul style="list-style-type: none"> <li>• Ensure that the parenting offer is accessible to families from ethnic minority communities including the availability of resources and information.</li> <li>• Ensure resources focus on meeting families’ needs at the earliest point.</li> </ul>
<b>Workforce development</b>	<ul style="list-style-type: none"> <li>• Complete a multi–agency skills audit of current workforce re parenting skills.</li> <li>• Work with partners to build training models which offer sustainability long term for parenting skills.</li> <li>• Take a coordinated and integrated approach to service delivery which will be planned to support parents, carers and families.</li> </ul>
<b>Reduce Health Inequalities</b>	<ul style="list-style-type: none"> <li>• Ensure that the system-wide parenting offer is delivered in a way which progressively provides more support across the social gradient and level of need.</li> <li>• Explore the link between digital exclusion and health inequalities.</li> <li>• Strengthen the intelligence that is shared between partners to help them make informed decisions about resources.</li> </ul>
<b>Targeted Parenting support</b>	<ul style="list-style-type: none"> <li>• Provide Universal parenting support but also include provision specifically to support Special Education Needs and Disabilities, supporting newly arrived communities, Parents with children aged 0-2 and children from ethnic minority communities and where further vulnerable groups are identified.</li> <li>• Improve support for families around mental health.</li> <li>• Consult with young people to understand their views in relation to parenting support.</li> <li>• Consult with fathers and non-birthing partners to understand their needs to help inform further action planning and strengthen parenting support.</li> <li>• Strengthen parenting education antenatally for families.</li> <li>• Review the SEND Needs assessment for Coventry and utilise this to further action plan including the promotion of the local offer.</li> </ul>

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

To determine the success of the actions arising from the Coventry Parenting strategy (2024-27), there are several expected outcomes:

- Short-term outcomes, such as parents and professionals knowing where and how to get the parenting support they need. Increased choice, volume and range of parenting support offered. More parents will access and complete parenting support that meets their individual needs.
- Medium-term outcomes, including positive feedback relating to services and improved parental confidence, as well as improved take-up and completion of parenting programmes. Parents reporting improved confidence in parenting. Ensuring the workforce is skilled, knowledgeable and competent to deliver parenting support to help those with a wide range of needs.
- Long-term outcomes such as increased rates of school readiness and a reduction in children entering the care system, reduced youth offending. Improved child obesity rates and a reduced need for referrals to mental health services for children and young people. Additionally, an increase in collaborative working across health and social care system.

The Coventry Parenting Strategy (2024-27) will have an underpinning action plan. This plan will show in greater detail the actions that will be undertaken to bring the strategy to life. The plan will build on some of the work that has started around parenting as part of the Family Hubs and Start for Life programme. Table 6 provides further detail on some of the measures that have already been developed and will be monitored in the action planning in the short/medium term and have been agreed with partners so far.

Table 6: Key outcomes from the Family Hubs and Start for Life Programme Parenting Support Plan

Why	Outcome	Measure (increase, %)
<b>Increased opportunity for parents to access range of parenting support</b>	Increase the choice, volume and range of parenting support Choice, volume, and availability to meet needs	Increase in type and methods of parenting interventions
<b>Improved Family Relationships and Improved parenting skills and capacity</b>	More parents will access and complete parenting support that meets individual needs - Access and completion	Increase number of parents accessing parenting and completing parenting intervention
<b>Improved Outcomes for Children's lived experiences</b>	80 % of parents who complete a Parenting course report an increase in their parenting confidence OR improvement in family relationships – Impact	Increase in reported parental confidence

## 7. Acknowledgements

We would like to thank the Coventry Parenting Steering Group members for their continued dedication, guidance and hard work which has been instrumental in the development of the Coventry Parenting Strategy (2024 – 27). We would also like to thank the parents, carers and young people for helping to shape our strategy and plans.

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