

# FAMILY AND PARENTING SUPPORT THEMATIC WORKING GROUP

## ROUND TABLE REPORT

EINDHOVEN, MAY 2011

### The role of local authorities in parenting support





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## EXECUTIVE SUMMARY

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This report outlines the lessons learned and recommendations from Eurochild's Family and Parenting Support Thematic Working Group Round Table on 'The role of local authorities in parenting support'. This Round Table took place on 19 and 20 May, 2011 and was hosted by the Dutch municipality of Eindhoven and the Netherlands Youth Institute. Delegations from The Netherlands, Northern Ireland, Sweden, Germany and Ireland and observers from Belgium (Flemish community), Italy and Poland attended this Round Table.

On the first day of the Round Table, all delegations gave a presentation on an inspiring practice of supporting parents and families (in their own countries). This included the Centre for Youth & Families in The Netherlands, including the SPIL Centres in Eindhoven; the Family Support Hub in Northern Ireland; the Family Centres in North Rhine-Westphalia, Germany; the New Futures Model from Ireland and a parent support programme for (future) parents in Sweden. The presentations were followed by workshops about several topics, including the role of local authorities and NGOs in parenting support and the implementation and effects of such support. On the second day, all participants went on field visits to two different centres in Eindhoven where parents can go for advice and help regarding their child: a SPIL-centre and the Youth and Family Centre (CJG).

During the field visits and discussions it became clear that the attending countries are all dealing with the same issues and are facing similar challenges, such as integrated working and the need for early intervention. In addition, the importance of positive parenting and the need for "normalizing" parenting support were highlighted. On basis of these lessons learned, recommendations were formulated for providers of parenting support, for local and national governments and the European Commission.

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Eurochild wishes to acknowledge the high quality contribution and enthusiastic participation of all those who took part in this Round Table. This not only includes the participating delegations from Germany, Ireland, Sweden, The Netherlands and United Kingdom (Northern Ireland), but also the observers from Italy, Belgium (Flemish community) and Poland.

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- Caroline Vink (Senior advisor at the Netherlands Youth Institute) for chairing the Round Table;
- The facilitators of the workshops: Vibeke Bing (Backa Läkarhusgruppen, SE); Katherine Bird (AGJ-Committee "Childhood and Family", DE); Stuart Duffin (One Family, IE); Maurice Leeson (Barnados, UK); Caroline Vink & Tijne Berg- le Clercq (Netherlands Youth Institute, NL);
- The rapporteurs of the workshops: Steven Strynckx (EXPOO, BE), Renata Szredzińska (Nobody's Children Foundation, PL) & Sanne de Vries (intern at the Netherlands Youth Institute, NL);
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- Tijne Berg- le Clercq (Senior advisor at the Netherlands Youth Institute) for organising the Round Table.

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This report from the Round Table can be downloaded from Eurochild's website <http://tinyurl.com/6zqxaor>. Printed versions of the report are available on request at Eurochild's Secretariat. Contact: [info@eurochild.org](mailto:info@eurochild.org).



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## CHAPTER1 - INTRODUCTION

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This report contains the results of Eurochild's Family and Parenting Support Thematic Working Group Round Table on 'The role of local authorities in parenting support'. This chapter briefly outlines the background, objectives and the main elements of the programme of this Round Table. The main results of this Round Table are addressed in the next two chapters. Chapter two summarises the five inspiring practices that were presented during the Round Table and chapter three the 'lessons learned'. The final chapter contains the suggestions for follow-up for Eurochild as well as recommendations for providers of parenting and family support, local and national governments and the European Commission.

### BACKGROUND OF THE ROUND TABLE

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In 2010, members of Eurochild's Family and Parenting Support Thematic Working Group took part in a study visit<sup>1</sup> to Sweden and Denmark. These countries were selected as host countries for the study visit because of their low child poverty levels, positive outcomes for children and high levels of female labour market participation. The project was a two-stage project to look at what family support policies and practices give the best outcomes for children and how lessons learned could be used to influence policy and practice in participating countries.

Furthermore, Eurochild's Family and Parenting Support Thematic Working Group recently adopted a policy position on family policies<sup>2</sup> in which, amongst other things, it makes specific recommendations to EU Member States, who ultimately have the responsibility to ensure the development and implementation of coordinated family policies. Many of these recommendations are informed by the experience of the study visit and previous activities undertaken by the group to facilitate the exchange of knowledge and experience.

All Eurochild thematic working groups are keen to develop examples of good practices from across Europe that show what works in Europe in relation to improving children's outcomes and well-being. Members have requested to identify criteria for what constitutes a good practice. There is a strong demand for an evidence-based policy and practice at EU level. Eurochild's strategic plan therefore proposed to develop a database of good practices in each priority area, including in family and parenting support and how it can most effectively contribute to breaking the intergenerational transmission of poverty, and help children achieve their full potential.

In addition, earlier this year Eurochild issued its report 'How the economic and financial crisis is affecting children & young people in Europe'<sup>3</sup>. One of the recommendations of this report called to strengthen early intervention and prevention services for families. According to this recommendation *"It is crucial that families and parents are given the necessary support before problems escalate and children's well-being and mental health is at risk. To support children's growth and development there is a need to put preventive measures in place that strengthen parental responsibility, support and empower families most at-risk and avoid escalation of problems that may push children further into poverty and risky situations. Investment in services to support parents, that helps them develop better coping strategies and understand the importance and value of good parenting, must be strengthened. Services for families with pre-school age children must be available regardless of parents' employment situation. Support services for parents of teenagers are also a crucial social investment"*.

### OBJECTIVES OF THE ROUND TABLE

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In its work plan 2011<sup>4</sup>, Eurochild's Thematic working group on family & parenting support announced its plan to bring together examples of good practice and experts in a Round Table meeting in the Netherlands, with support from the Netherlands Youth Institute. These examples were to be rooted in local authorities / NGOs experience of service delivery to families and parents and had to be able to demonstrate integrated working that give value for money. This round table was mentioned as one of the activities within priority 2 (influencing strategy) of the working group which has several overarching objectives, including strengthening Eurochild's visibility, influence and expertise.

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<sup>1</sup> Eurochild (2010). Family policies that work best for children – Fighting child poverty and promoting child well-being, Report from the family and parenting support study visit to Sweden and Denmark, 26-30 April 2010. Brussels: Eurochild.

<sup>2</sup> Eurochild (2010). Eurochild Policy Position on Family Policies. Brussels: Eurochild.

<sup>3</sup> Eurochild (2011). How the economic and financial crisis is affecting children & young people in Europe. Brussels: Eurochild.

<sup>4</sup> Eurochild (2011). Work Plan 2011 – Thematic working group on family & parenting support.

Several studies, including a literature review on 'The costs of raising children and the effectiveness of policies to support parenthood in European countries'<sup>5</sup> outline the importance of both combining universal and targeted approaches. Therefore, delegations that could demonstrate that both approaches are necessary in parenting and family support as well as member organisations from different countries were invited to attend this Round Table in Eindhoven. The complete list of participants can be found in Appendix 2.

## OVERVIEW OF THE ROUND TABLE

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After a brief welcome by the municipality of Eindhoven, the chair (Caroline Vink from the Netherlands Youth Institute) briefly outlined the reasons for organising this event. This was followed by a brief introduction on the topic of the Round Table: the role of local authorities in parenting support. She also gave a brief clarification on the term parenting support.

Parenting support is a concept that can cover many different things:

- Any universal activity aimed at providing information, advice and support to parents and carers to help them in bringing up their children.
- It can vary by target group, type, how and where it is offered.
- It also relates to support and programmes for parents:
  - with children who have special needs
  - with inadequate parenting skills
  - whose children have been placed outside the home
- Support for parents can be:
  - formal (by voluntary or professional organisations)
  - informal (from family, friends and neighbours and parents own social networks)

This introduction was followed by presentations on an inspiring practice of supporting parents and families in The Netherlands, Northern Ireland, Sweden, Germany and Ireland. This includes:

- the Centre for Youth & Families in The Netherlands, including the SPIL Centres in Eindhoven
- developments in Family Support Practice, including the Family Support Hub (United Kingdom -Northern Ireland)
- the Family Centres (Germany- North Rhine-Westphalia)
- the New Futures Model (Ireland)
- parent support programme for (future) parents (Sweden- Stenungsund).

These inspiring practices are briefly illustrated in chapter three and addressed in further detail in Appendix 4.

In the afternoon, these presentations were followed by workshops about several topics, including:

- the role of the local authorities in parenting support;
- the implementation of parenting support (elsewhere);
- the benefits and shortcomings of universal and targeted approaches;
- the role of NGOs in service delivery to families and parents;
- the effects of parenting support;
- the emergence of progressive universalism.

All participants played an active role in these workshops. Members from all delegations facilitated the workshops. They led the discussion in the workshops of a pre-formulated statement and pre-formulated questions. Observers from Belgium (Flemish community) and Poland, and The Netherlands Youth Institute were the rapporteurs of the workshops. These rapporteurs were asked to report about the reactions to the pre-formulated statement and questions and describe the most fiercely debated issues. On the second day, all participants went on field visits to two different centres in Eindhoven where parents can go for advice and help regarding their child: a SPIL-centre and the Youth and Family Centre (CJG).

After the debriefing of the field visit, the focus of the Round Table was on 'synthesis and lessons learned'. In this section, the chair asked the participants to explain what they had learned and she summed up the lessons learned. These lessons learned are included in chapter four of this report. More detailed information about the programme of this Round Table can be found in appendix 1.

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<sup>5</sup> Letablier, M-T., Luci, A., Math, A. & Thévénon, O. (2009). The costs of raising children and the effectiveness of policies to support parenthood in European countries. Brussels: European Communities.

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## CHAPTER 2 - FIVE 'INSPIRING' PRACTICES OF FAMILY AND PARENTING SUPPORT

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The Round Table in Eindhoven contributed to Eurochild's longer-term exercise of gathering and describing inspiring practice, which will lead to a Eurochild compendium in 2012. This publication will include detailed case studies that show what works in Europe in relation to improving outcomes and well-being of the particularly vulnerable children. This chapter describes the five inspiring practices presented at the Round Table on basis of the information provided by the delegations.

Prior the Round Table, the participants were asked to describe their inspiring practice on basis of a template and they were asked to revise it afterwards. Appendix 3 contains this template, including its sources. This appendix explains how this template was developed and what sources it is based on. The detailed description of the inspiring practices presented by the participating delegations can be found in Appendix 4.

### **THE CENTRE FOR YOUTH & FAMILIES IN THE NETHERLANDS, INCLUDING THE SPIL CENTRES IN EINDHOVEN**

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For parenting support that is close to home and easily accessible, parents in Eindhoven can go to a so-called SPIL centre in their neighbourhood. The name is derived from *Spelen* (play), *Integreren* (integration) and *Leren* (learning) and the Centre is built around primary education, playgroups and childcare. Other services may be added, such as parenting support, child welfare, youth healthcare and social work. Parents can also receive more general support via the virtual Youth and Family Centre (CJG). In case parents do not know where to go for help, they can turn to the municipal Youth and Family Centre (CJG) in downtown Eindhoven. From this central location, the CJG also makes training available to parents and professionals. It also offers more targeted support to families and coordinates the provision of parenting support in the city's neighbourhoods.

There is not only a CJG in Eindhoven. In 2007, the national government required each municipality to set up a CJG by 2011. By law, the Youth and Family Centres should offer the following basic functions:

- Youth Health Care (baby well clinics and local health service – GGD);
- Five areas of support for parenting and growing up: information and advice; 'spotting' potential problems; guidance and counselling; light pedagogical support; care coordination at local level;
- A link with youth care;
- A link with youth education (through School Care and Advice Teams).

A CJG thus combines the local functions and tasks in the area of health, growing up and education. Besides these basic functions there are a number of functions that municipalities could link to the Youth and Family Centres through local 'made-to-measure'. This can include: child care, inspection on compulsory education, general social work, youth work, primary health care (general practitioner maternity care, obstetrics) and debt counselling.

As of June 2011, 370 municipalities in the Netherlands (more than 85% of all municipalities) had a CJG that works according to the statutory criteria

### **DEVELOPMENTS IN FAMILY SUPPORT PRACTICE, INCLUDING THE FAMILY SUPPORT HUB (UNITED KINGDOM -NORTHERN IRELAND)**

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The Northern Ireland Assembly ten year strategy (2006-2016) for children and young people in Northern Ireland set out the following vision: "Our vision is that all children and young people living in Northern Ireland will thrive and look forward with confidence to the future". The strategy established an Outcomes framework with six high level outcomes that set out that children and young people should be:

- i. Healthy
- ii. Enjoying, learning and achieving
- iii. Living in safety and with stability
- iv. Experiencing economic and environmental wellbeing
- v. Contributing positively to community and society; and
- vi. Living in a society which respects their rights

The strategy identifies as a core supporting theme the policy intention of "making a gradual shift to preventative and early intervention approaches without compromising those children and young people who currently need our services most".

This is to be delivered by “working in partnership with those who provide and commission children’s services” .The key policy driver for family support in Northern Ireland is ‘Families Matter’. This strategy picks up the theme of early intervention and sets it in the context of family support. Its focus is on early intervention ensuring that the appropriate assistance is available to families at the earliest opportunity at all levels of need”. A recent Northern Ireland Assembly paper noted that “increasing the effectiveness of public services will help to ensure that, within the established framework, intervention occurs at the earliest point at which people make contact with public services”. The challenge of translating the policy objective of shifting practice to early intervention into planning and commissioning of services has been driven by the statutory Children’s Services Planning process. Children’s Services Planning is promoting the development of a network of local Family Support Hubs in order to drive the shift towards early intervention. The intention of this process is to build on the already established pattern of NGO family support providers and link them more effectively together and with statutory organisations. Interagency collaboration and working together is the key to making this process work.

Family support hubs are intended to:

- Promote parental responsibility through improved co-ordination between providers at local level and enhanced access to family support services for all parents;
- Close the gaps in relation to vulnerable children by better co-ordination between NGO provides and Statutory Social Services.

Hubs are partnerships of agencies both statutory and NGO which provide early intervention services locally. They can be:

- Points of contact locally for information about Family Support
- Points of local and non-stigmatized access to Family Support
- Points of co-ordination for locality assessment of need and for local action planning

A key lesson to date has been that there is no single hub model which can be superimposed on any area. Each locality has unique characteristics in respect of geography, demographics, socio-economic structure, community organisation, local political configuration, informal networks and service history. It is accepted that Hubs need to operate in a way which is consistent with international standards of evidence of best practice in family support. These quality standards have been developed by Children’s Services Planning.

The Hub process emphasises collaboration between statutory and NGO providers rather than overlap and duplication - an important theme in times of reduced public expenditure. In order for Family Support Hubs to operate effectively a core connection is needed to statutory services to ensure that links are made between issues of child protection and family support.

The ability of NGO’s to develop non-stigmatising practice for families is recognised. A key advantage for statutory services in this process is to allow a focus to be maintained on those families that need a statutory intervention whilst ensuring that the needs of families who do not meet this threshold are effectively dealt with in Hubs. This ensures that statutory social services are not inundated with inappropriate referrals and that a referral to statutory social services is not seen as the pathway to family support. It allows NGO’s to develop family support practice. The support of statutory services to the process is critical to ensure that child protection issues can be recognised and responded to.

Early intervention is defined as: “intervening early and as soon as possible to tackle problems emerging for children, young people and their families or with a population most at risk of developing problems. Early intervention may occur at any point in a child or young person’s life”.

## **THE FAMILY CENTRES (GERMANY- NORTH RHINE-WESTPHALIA)**

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The family centres are an important trademark of North Rhine-Westphalia in Germany. Family centres make a substantial contribution towards achieving the aim of turning North Rhine-Westphalia into Germany’s most child- and family-friendly state. The state programme *Familienzentrum Nordrhein-Westfalen* has been launched by the government in order to develop up to 3,000 children’s day-care facilities into family centres by the year 2012. It’s a scientifically accompanied joint project of the state government, local authorities (youth welfare offices) and non-governmental organisations. An ever increasing number of parents benefit from the family centres because these centres offer excellent care and education plus counselling and support to children and parents. Family centres are designed to strengthen parenting skills as well as to improve compatibility of working life and family life. Acting as the hub of a network of family and child welfare services, the family centres offer parents and their children advice, information and assistance in all phases of life at an early stage.

The special combination of the services provided by the family centres enables the development of children to be promoted individually and comprehensively. The programme allows educational work to be intensified and language deficits, especially among immigrant children, to be identified sooner and to be reduced systematically on the basis of



individual tutoring. Children's strengths and weaknesses are identified at an early stage and parents get tailor-made counselling as soon as possible concerning education, training, healthcare etc.

A Familienzentrum Nordrhein-Westfalen...

- ... develops children's day-care facilities into places for learning and gathering experience for children and their parents whose parenting skills get enhanced,
- ...assists parents in resolving everyday conflicts because such assistance can be provided more immediately and smoothly,
- ...helps immigrant families and educationally deprived families to be better cared for,
- ...improves compatibility of work and family life,
- ...provides greater flexibility in terms of day-care service hours as well as the mix of age groups by extending a variety of provision in partnership with families, day-care mothers or fathers,
- ...is a suitable place for exchanges in the neighbourhood.

From the outset, one of the key objectives of the project has been to establish comparable standards for the work of the family centres, thereby ensuring their quality. If you call it 'family centre', it'll have to be exactly that: a centre for families.

First and foremost, the quality seal encompasses features that are crucial to the provision of readily accessible services and opportunities designed to foster and support the development of children and families. The quality seal is awarded by an independent external certification body. The quality seal is valid for four years. Family centres that have been awarded the quality seal are entitled to receive public funds in the amount of € 12,000 annually under the North Rhine-Westphalia Child Education (Promotion) Act.

## **THE NEW FUTURES MODEL (IRELAND)**

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One Family has developed an innovative model of service delivery that requires the support and participation of local partnerships or other regional statutory bodies for successful implementation throughout Ireland. The project is called New Futures and it is designed to be a supportive programme to assist lone parents on social welfare to undergo a transformative process in a short space of time so they can progress quickly on to education, training or employment. The programme is innovative as it brings together three critical elements:

- Needs assessment and key working,
- Specialist wrap around family and parenting supports,
- An accredited training course in career preparation.

Due to new government policy requiring lone parents to be available for work fulltime when their youngest child is fourteen, One Family is concerned that conventional support programmes will not deal with the complex family and personal barriers faced by many lone parents on social welfare. This could then result in parents not progressing well, being penalised financially, not balancing work and parenting/family life, children not receiving the parenting support they need etc.

It is important that this government policy of activation is successful for these families and based on One Family's four decades of experience; they believe that local delivery of comprehensive family support is a critical part of the support required.

Evidence shows some of the situational, dispositional and emotional barriers faced by this target group are unique to them. Specialist wrap-around family support services like parenting, counselling and information contribute to removing specific barriers such as balancing work/education with full-time parenting. Once these barriers have been ameliorated lone parents can then move on to other career and professional development opportunities.

In Ireland local government does not yet commission services but local partnerships may. This model is different, as an NGO has initiated it with funding support from the innovation stream of the national training organisation - FÁS. One Family is now seeking, after piloting and evaluation, to test replication regionally through the Galway City Partnership. Evaluation of this pilot will provide One Family with the necessary tools to provide national rollout at a local level of the project, subject to it being commissioned or funded locally or at national level via government department(s).

Traditionally there has not been strong interdepartmental working in Ireland and so One Family requires agencies and departments normally concerned with training, employment supports, social welfare payments, etc. to think across the range of needs of a lone parent and her/his family to recognise and provide parenting and family supports as part of their work.

## **PARENT SUPPORT PROGRAMME FOR (FUTURE) PARENTS (SWEDEN- STENUNGSUND)**

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The Swedish delegation introduced the Swedish way to organise and carry out a broad based parent support programme from the time of the mother's pregnancy to the time of being parents of teenagers (and teenagers as parents). The local Public Health Board has taken a firm line about family support rooted in several public authorities and services. This started with some temporary project funding from the National Institute of Public Health. Family support is now on the national agenda.

However as a local project is limited in time, the local politicians want to build a sustainable social development to which family support is linked and will continue over time. Researchers from the University of Göteborg are responsible to conduct follow up studies and evaluate the earlier mentioned local programme. The family support activities cover all parents of children and young people in the Municipality of Stenungsund. The head principals from different administrative bodies as the social welfare and school sector (the municipality) are highly involved as well as those in the primary health care sector (the county and private). These organisations cooperate in order to conduct the programme and to link their activities. Before the programme was designed, a study was conducted to find out what kind of support parents prefer. As a result, there now are five integrated working groups:

1. Early years. Target groups are all future parents all parents of children 0-5 years of age. Service providers are prenatal clinics (midwives); well-baby clinics (nurses); day care centres (preschool teachers); open preschools (preschool teachers and social workers); social welfare (social workers) and NGOs.
2. School children. Target groups are all parents with children 6-17 years of age. Service providers are schools (teachers, health nurses) and NGOs. There are universal parents groups as well as special target groups and "active parent meetings"
3. Support and advice reception, family counselling reception and telephone advice. The target group is parents of children 13-20
4. Public lectures. Target groups are all parents, professionals, volunteers, politicians and inhabitants
5. Information. Different efforts are made to reach the target groups including marketing, a website and folders.

Furthermore, the Swedish delegations introduced two examples of inspiring practice:

1. Groups for young parents (teenagers)

A midwife in the prenatal clinic talked about her work with focus on building young parent network and her cooperation with the well-baby clinic nurses and the open preschool teachers. She also referred to group activities and individual support, training in baby care, lifestyle, attachment, sex, relationships.

2. Parent counselling

Parent counselling regards the cooperation between the social welfare office and the after school recreation office. A social educationist and social worker talked about their experiences of counselling parents with children aged 13-20, answering their everyday questions, how to reach the parents and what bothers them. These experiences are from the first year.

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## CHAPTER 3 - LESSONS LEARNED

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This chapter contains the 'lessons learned' from the Round Table, formulated around six main themes:

1. The definition & role of local authorities,
2. The role of NGOs & integrated working,
3. The need for progressive universalism & early intervention,
4. The normalization of parenting support & positive parenting,
5. The central position of parents & children themselves,
6. Evidence-based working.

### THE DEFINITION & ROLE OF LOCAL AUTHORITIES

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During the Round Table it became clear that there is no uniform definition of the term 'local authorities'; what the term 'local authority' entails varies from one country to country. Furthermore, local authorities (or other statutory bodies) - even within the same country - can have different roles when it comes to parenting and family support services. Local authorities can be in charge of the delivery of (some of) these services. In addition, they can also commission parenting and family support services.

During the Round Table, the participants agreed that local authorities (or other statutory bodies) should play a role in mapping:

- the need of parents and families for support services,
- the supply of the existing parenting and family support services offered by various organisations and institutions.

In addition, local authorities need to ensure that parenting and family support should be delivered to families as close as possible, for instance in their own neighbourhood.

### THE ROLE OF NGOs & INTEGRATED WORKING

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NGOs (or other providers of parenting and family support services) can play different roles when it comes to parenting and family support. They play a key role in the provision of these services. Furthermore, they can reach and empower various groups of parents, including those that are harder to reach. In addition, especially NGOs can advocate on behalf of parents.

(Different groups of) parents have different needs. These needs can be met by one or more organisations that work together, including NGOs. The integrated working of these organisations - including local authorities (or other statutory bodies) - in meeting parents' needs can be cost-effective as long as there is no overlap in the services they provide.

#### **Integrated working in the Family Support Hubs in United Kingdom -Northern Ireland**

Family Support Hubs are partnerships of agencies both statutory and NGO which provide early intervention services locally.

These hubs exist to promote more integrated working amongst members. In addition, hubs have developed information sharing protocols/referral processes and other processes to support effective interagency working.

Successful integrated working requires the division of tasks among NGOs and other providers of parenting and family support and the appointment of a leading professional. In addition, all providers of parenting and family support need to inform to whom parents can turn to with their questions.

### **Conditions for successful integrated working**

During the workshops of the Round Table, the participants mentioned several conditions for successful integrated working:

- A clear idea and objectives agreed by every partner should be set;
- A clear definition of the role and tasks of each partner should be established;
- Cooperation should be based on trust and respect;
- The whole partnership of all involved organisations should assume the ownership of the outcomes of the activities;
- The decision on activities to be conducted should be taken on evidence based outcomes;
- A statutory duty to cooperate should be introduced;
- The partnership should be based on mutual trust and respect.
- Each partner should have equal power and position in the partnership.

## **THE NEED FOR PROGRESSIVE UNIVERSALISM & EARLY INTERVENTION**

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When it comes to the provision of parenting and family support, there is a need for progressive universalism and early intervention. Progressive universalism entails universal services for all parents and families as well targeted services for parents and families with more (specific) needs. The referral from universal to more targeted services and vice versa should be facilitated by the providers. Thus, according to a Dutch saying *parents should not be sent from the cupboard to the wall*<sup>6</sup>. In addition, there should be proper signposting for services. Such measures will prevent parents from no longer attending services or dropping out of a programme. Furthermore, targeted services should be offered as early as possible. This means there is a need for intervening once parental needs are identified. It would be even better to anticipate and signal possible needs.

Cutting universal services for parents and families might save money in the short term. However, experience from Sweden – as shared by the Swedish delegation during the Round Table - shows that building them up again after the economic crisis is over will definitively cost more money. Furthermore, cutting universal services will lead to an increased use of – the usually more expensive - targeted services. As such, early intervention will be more cost effective. In addition, several studies show that early intervention can be very effective.

## **THE NORMALIZATION OF PARENTING SUPPORT & POSITIVE PARENTING**

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Nowadays in European countries, it seems that it is not well accepted for parents to ask for support. In addition, once parents do ask for help, parenting support tends to work from a deficit model; it tries to find a 'cure' to fix something bad. What is needed, is the normalization of parenting support. Parents should feel it is normal to ask for help and then receive the necessary support as soon as possible.

By ensuring that services for parents and families are universal, local authorities can play a role in normalizing parenting support. Furthermore, if services are universal, parents consider these services as a good opportunity that they can make use of. All services offered to parents and families should be based on the notion of 'positive parenting' as defined by the Council of Europe. Positive parenting will both enhance children's well-being in the short term and will create positive outcomes for them in the long run.

### **Positive parenting in Eindhoven, The Netherlands**

In the Centre for Youth & Families (CJG) in Eindhoven, the evidence-based intervention Triple P (Positive Parenting Programme) is used as a public health approach to strengthening parenting. This programme consists of media based parent information; lectures; individual parent training; group parent training<sup>7</sup>.

The programme is based on self-regulation. The goals are for children to develop emotional self-regulation for parents to become resourceful, independent problem-solvers. As families determine their own particular goals, the programme is tailored to suit their aspirations. Practitioners consult and guide through active skills training. Parents decide what they wish to take on. In the period 2009-2011, 120 partners involved with the CJG and the SPIL Centres in Eindhoven were trained in the positive parenting programme.

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<sup>6</sup> It can be translated as 'sending someone from pillar to post'.

<sup>7</sup> Commonly asked questions about Triple P. <http://www19.triplep.net/?pid=49>

## THE CENTRAL POSITION OF PARENTS & CHILDREN THEMSELVES

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According to the saying '*Nothing about us without us*' parents and children should have the central role in the design, planning and evaluation of parenting and family support activities.

Furthermore, parenting and family support should be based on what parents – and their children - need as they know best what kind of support is required.

### **Parental participation in the Family Centres in North Rhine- Westphalia, Germany**

The family centres are an important trademark of North Rhine-Westphalia in Germany. Acting as the hub of a network of family and child welfare services, these family centres are in a position to offer parents and their children advice, information and assistance in all phases of life at an early stage. From the outset, one of the key objectives of the project has been to establish comparable standards for the work of the family centres, thereby ensuring their quality. First and foremost, the quality seal encompasses features that are crucial to the provision of readily accessible services and opportunities designed to foster and support the development of children and families. The participation of families in planning and organising activities is directly addressed by the certificate and covered through the quality criteria. Apart from regular enquiries on the wishes and needs of families at the beginning of each kindergarten year, there are several opportunities for participation (such as parents' council, self-organised projects and excursions, etc.).

Parents – and their children - should also be free to choose between services offered by different providers (state, voluntary, churches, etc.).

### **Meeting parents' needs by the New Future Programme in Ireland**

One Family has developed an innovative model of service delivery that requires the support and participation of local partnerships or other regional statutory bodies for the successful implementation throughout Ireland. The project is called New Futures and it is designed to be a supportive programme to assist lone parents on social welfare to undergo a transformative process in a short space of time so they can progress quickly on to education, training or employment.

The New Future Programme shows that parenting and family support should be based on what parents – and their children - need as they know best what kind of support is required as some key successful determinants of the programme include:

- Comprehensive client assessment
- Needs assessment and linking the findings to the provision of individual supporters
- Flexibility to respond to individual needs as they arise

When offering parenting and family support, professionals should enable parents to solve problems themselves. Parents should be empowered by using a strengths-based perspective; they should be able to make their decisions instead of professionals making the decisions for them. In additions, family and parenting support should be delivered in a non-stigmatizing manner.

## EVIDENCE-BASED WORKING

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Evidence-based practice is needed when it comes to supporting parents and families. However, there are some drawbacks on solely relying on the implementation of a few well-known American or Australian evidence-based parenting and family support programmes. If there is evidence about the effects of the programme in the USA or Australia, it is tricky to assume that this evidence also applies to European countries. These countries could have other existing services for families and parents that do not exist in the USA or Australia. In addition, there is no evidence-based programme that meets the needs of *all* parents as there are (different groups of) parents with different needs. Furthermore, parenting and parenting support services are very much coloured by the cultural setting of a country and the different roles that families have in different parts of Europe. Bearing this cultural diversity in mind, a wide range of parenting and family support programmes for different groups of parents is needed.

As mentioned earlier, local authorities should play a key role in mapping this demand as well as the supply of parenting and family support services. Furthermore, NGOs can play an important role in their implementation. Rather than solely relying on the implementation of a few well-known American or Australian evidence-based programmes in different European countries, it would be helpful to learn more about the underlying theoretical principles and the 'working elements' of successful parenting and family support programmes implemented all over Europe.

#### **Using evidence-based programs & meeting needs of different groups of parents in Stenungsund in Sweden**

The Swedish delegation introduced the Swedish way to organise and carry out a broad based parent support programme from the time of the mother's pregnancy to the time of being parents of teenagers (and teenagers as parents). In the municipality of Stenungsund, the family support activities cover all parents of children and young people:

- there are parents groups for future parents and all parents of children 0-5 years of age;
- all parents of school-age children are offered *evidence-based programmes*;
- there is family counselling and telephone advice for parents of children 13-20 years of age;
- for teenage parents, there are group activities as well as individual support and training in baby care, life style, attachment, sex and relationships.

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## CHAPTER 4 - FOLLOW-UP AND RECOMMENDATIONS

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The final chapter contains the suggestions for follow-up of the Round Table for Eurochild as well as recommendations for providers of parenting and family support, local and national policy governments, and the European Commission. These suggestions for follow-up and recommendations are based on the 'lessons learned' presented in the previous chapter and on the discussions following their presentation in the meeting of Eurochild's Family and Parenting Support Thematic Working Group in June 2011.

### SUGGESTIONS TO EUROCHILD FOR FOLLOW-UP

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As was concluded in the previous chapter, "it would be helpful to learn more about the underlying theoretical principles and the 'working elements' of successful parenting and family support programmes implemented all over Europe". Eurochild's Family and Parenting Support Thematic Working Group could play a role in this, for example by:

- Organising a good practice seminar. During such a seminar, good practices of parenting and family support programmes and in particular their 'working elements' could be shared.
- Organizing another Round Table. During such a Round Table, the conditions for successful integrated working could be discussed in more detail as well as its outcomes on children and families. Ideally, this Round Table would be attended by delegations from several member states that are each composed of the different organisations that work together in providing parenting or family support.
- Addressing this topic in the first European Conference on Parenting Support that will be organized by The Netherlands Youth Institute, Eurochild, the Council of Europe, the International Federation for parenting support and the University of Amsterdam on 10 – 12 October 2012.

Eurochild could also consider collecting good practices of (integrated working in the delivery of) parenting and family support. The collected good practices could be published in:

- in an online database on the (member portal of the) website of Eurochild,
- on the web portal of the European Alliance of Families.

Such activities will contribute to the objective of the thematic working group on family & parenting support concerning strengthening Eurochild's visibility, influence & expertise.

### RECOMMENDATIONS

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On basis of all the discussions that took place during this Round Table, recommendations had been formulated. This chapter contains these recommendations for different groups of actors:

#### PROVIDERS OF PARENTING SUPPORT

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- Ensure parental and child participation in the design, planning and evaluation of parenting and family support services;
- Attune the services to the needs of different group of parents and families, for example by ensuring various modes of delivery, including the internet;
- Co-operate with NGOs and other organisations in the delivery of parenting and family support services to create a continuum of care for parents and families and to avoid overlap;
- Make solid arrangements regarding the division of tasks, including who will act as the leading professional;
- Inform parents whom they can turn to with certain questions;
- Ensure proper referral of parents from one provider to the next;
- Empower parents on a strengths-based perspective;
- Invest in the training of professionals to enable them to provide the best possible services to parents and families;
- Make the outcomes of services for parents and children visible, preferably in terms of the positive outcomes for children.

## **LOCAL AND NATIONAL GOVERNMENTS**

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- Develop a policy framework based on the concept of progressive universalism;
- Invest in early intervention;
- Ensure parental and child participation in the design, planning and evaluation of parenting and family support activities;
- Map the demand and supply of parenting and family support services;
- Inform parents and families about the local supply of parenting and family support services;
- Facilitate the accessibility of family and parenting services;
- Commission or execute programmes and services that show evidence of positive outcomes for children;
- Facilitate integrated working of NGOs and other organisations in the delivery of parenting and family support services;
- Invest in research into the 'working elements' of successful parenting and family support programmes and services;
- Raise awareness in order to normalize the need for parenting support;
- Create conditions for positive parenting.

## **EUROPEAN COMMISSION**

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- Address the need for family and parenting support in the future European Commission Recommendation on Child Poverty and Well-being, which is due to be adopted in 2012, and acknowledge the commitment to ensure that children grow up in families with adequate resources to meet their essential needs;
- Raise the issue of family and parenting support during the European Year for Active aging and solidarity between Generations in 2012;
- Strengthen the EU coordination in the social field, including building a common data set and facilitating benchmarking and peer learning across member states in the field of family policies;
- Ensure that the implementation of the European Platform against Poverty and Social Exclusion creates a framework of genuine accountability for member states, not just to share best practices but also to assess the impact of policies and measures before and after their implementation;
- Ensure a coordinated approach to family policies and the child-rights agenda at EU level, as well as a systematic mainstreaming across relevant policy areas;
- Ensure EU funding for the development of family and parenting support programmes across Europe including exchanges of good practices.



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## APPENDIX 1 - FINAL AGENDA

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### WEDNESDAY MAY 18, 2011

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Afternoon & Evening

Arrival participants at Crown Inn Hotel

18.15 Meeting in hotel lobby to walk to restaurant together

18.30 Dinner at Grand Restaurant Le Connaisseur Eindhoven, Kleine Berg 12, Eindhoven

### THURSDAY MAY 19, 2011

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*Gemeentehuis (Town Hall), Verdijkkamer 0.06*

**9.00 - 10.30 Opening session**

**9.00 - 9.15 Word of welcome**

**Cees Volwater**, municipality of Eindhoven

**9.15 - 9.30 Word of welcome**

**Caroline Vink**, Senior advisor at the Netherlands Youth Institute

**9.30 - 9.45 Brief introduction of all participants**

**9.45 - 10.05 Introduction on parenting support in The Netherlands**

**Caroline Vink**, Senior advisor at the Netherlands Youth Institute

**10.05- 10.30 Introduction on parenting support in Eindhoven**

**Leonie Reumers**, Advisor at Eindhoven's Centre for Youth & Families

10.30 - 10.45 Coffee break

**10.45 - 12.45 Presentation of 4 inspiring practices, each followed by round of questions**

10.45 - 11.15 Presentation of inspiring practice by delegation from **Northern-Ireland**

11.15 - 11.45 Presentation of inspiring practice by delegation from **Sweden**

11.45 - 12.15 Presentation of inspiring practice by delegation from **Germany**

12.15 - 12.45 Presentation of inspiring practice by delegation from **Ireland**

12.45 - 13.45 Lunch in the Dommel kamer

**13.45 - 17.00 Workshops**

Each delegation will appoint one of its members to facilitate one workshop & the observers will be rapporteurs.

**13.45 - 15.15 First round of workshops:**

1. The role of the local authorities in parenting support
2. Implementation of parenting support (elsewhere)
3. The benefits and shortcomings of universal and targeted approaches

15.15- 15.30 Tea break

Brief visit by **Marie-Ann Scheurs**, alderman for innovation, culture and public space

**15.30 – 17.00 Second round of workshops:**

1. The role of NGOs in service delivery to families and parents
2. The effects of parenting support

3. The emergence of progressive universalism

**17.00 - 17.30 Concluding comments**

18.30 Dinner at Queen Hotel Café Restaurant, Markt 7, Eindhoven

## **FRIDAY MAY 20, 2011**

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*Starting location: Gemeentehuis (Town Hall), Verdijkkamer 0.06*

**9.00 - 9.30 Introduction to today's programme**

**Tijne Berg- le Clercq**, Senior advisor at the Netherlands Youth Institute

**9.30 - 12.30 Field visits**

**Locations: Centre for Youth and Families (CJG) & SPIL Centre**

The name SPIL Centre is derived from *Spelen* (play), *Integreren* (integration) and *Leren* (learning). The SPIL Centre is built around primary education, playgroups and childcare. Other services may be added, such as parenting support, child welfare, youth healthcare and social work. In case parents do not know where to go for help, they can turn to the so-called actual and virtual municipal Centre for Youth & Families (CJG). From its central location, the CJG also offers training to parents and professionals. It also coordinates the provision of parenting support in the city's neighbourhoods.

**9.30 - 9.45 Travel to location of field visit 1**

The participants will be split up in 2 groups that will each visit another location:

- Location 1: **CJG** - Presentation by **Heinz Faber & Brigitte van de Koevering**
- Location 2: **SPIL Centre** - Presentation by **Lou Bakker & Anneke van Ooijen**

**9.45 - 10.45 Field visit 1**

**10.45 - 11.15 Travel to location of field visit 2**

The group of participants will 'swap locations'. There will be refreshments at both locations.

**11.15 - 12.15 Field visit 2**

**12.15 - 12.30 Return to Town Hall**

**12.30 - 13.15 Lunch**

**13.15 - 13.45 Debriefing of field visits**

**13.45 - 14.45 Synthesis & lessons learned**

**14.45 - 15.00 Closing of meeting**

**Representative of municipality of Eindhoven (Cees Volwater) & Caroline Vink**

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## APPENDIX 2 - LIST OF PARTICIPANTS

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<b>Name</b>	<b>Organisation</b>	<b>Country</b>
Steven Strynckx	EXPOO	BE
Katherine Bird	AGJ-Committee "Childhood and Family"	DE
Andreas Zorn	Deutsches Rotes Kreuz	DE
Detlef Blank	DRK Kreisverband Viersen e.V.	DE
Tim Krüger	Institut Arbeit und Qualifikation	DE
Catherine McGlone	Children and Family Services	IE
Ann-Marie O'Connor	Department of Social Protection	IE
Elaine Harvey	Galway City Partnership	IE
Stuart Duffin	One Family	IE
Karen Kiernan	One Family	IE
Carmela Simbaris	Il Grillo Parlante	IT
Rosangela Bozza	Il Grillo Parlante	IT
Mieke van Schijndel	Governmental inspection authority	NL
Susan Potting	Ministry of Health, Welfare and Sports	NL
Cees Volwater	municipality of Eindhoven	NL
Leonie Reumers	municipality of Eindhoven	NL
Caroline Vink	Netherlands Youth Institute	NL
Sanne de Vries	Netherlands Youth Institute	NL
Tijne Berg- le Clercq	Netherlands Youth Institute	NL
Renata Szredzińska	Nobody's Children Foundation	PL
Vibeke Bing	Backa Läkarhusgruppen	SE
Carina Johansson	Local Public Health Board of Stenungsund	SE
Kerstin Ahlén	Local Public Health Board of Stenungsund	SE
Åsa Garnemyr	Prenatal Klinik Fröja	SE
Berith Olausson	Social Welfare Office of Stenungsund	SE
Maurice Leeson	Barnados	UK
Ann Godfrey	Health & Social Care board	UK
Anne Hardy	Health & Social Care board	UK
Pip Jaffa	Parents Advice Centre	UK
Agata D'Addato	Eurochild	

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## **APPENDIX 3 - THE TEMPLATE DOCUMENTING 'INSPIRING PRACTICE' OF FAMILY AND PARENTING SUPPORT**

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This appendix contains the template documenting 'inspiring practice' of family and parenting support and its dimensions. It also outlines how was developed and what sources it is based on.

### **THE FINAL TEMPLATE**

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The dimensions for the common template documenting 'inspiring practice' of family and parenting support:

### **THE APPROACH**

- Its name
- Its history & underlying (theoretical) principles (why & when was the practice introduced?)
- Its target group (universal and/or targeted approach; if and what specific group of families/ parents are addressed?)
- Accessibility (what is done to reach the whole target group/ promote their access to the services?)
- The objectives (preferably formulated in terms of intended measurable outcomes & make a distinction between short- & long term objectives)
- The activities carried out (what type of family support is provided: informal/ semi-formal/ formal & what kind of support is provided: skills/ information/ training/ material support/ psychological/ social support)
- The way activities are carried out (e.g. face- to-face vs. media-based practices; individual vs. group based; centre-based vs. home-based)
- Participation of parents & children in planning, organisation, developing, executing supporting and/or evaluating the practice)
- Promotion of the approach (how are parents made aware of its existence)
- Quality assurance (e.g. what standards do the involved parties have to comply with?, how do parents know the approach is of good quality?)

### **SERVICE PROVIDERS, THEIR STAFF & INTEGRATED WORKING**

- The agencies, organisations, stakeholders & practitioners (which parties are involved in planning, organisation, developing, executing and/or supporting the practice?)
- Extent to which the practice is rooted in local authorities/ NGOs experience of service delivery to families and parents.
- The involved staff: nature (professionals/ volunteers) and their education & training, guidance & support
- Integrated working (Interdisciplinary co-ordination between the parties involved)

### **POLITICAL CONTEXT & SUPPORT**

- Political context (relation to national frameworks & local policies, in particular those dealing with poverty & social exclusion)
- Funding (duration: permanent/ temporary/ project-based, sources: EU/national/ local/other/ mix & possible changes in relation to economic crisis)

- Other forms of facilitation (e.g. making meeting space available/ providing training materials)

## LESSONS LEARNED

- Set up of the evaluation (e.g. longitudinal study/ user evaluations)
- Main achievements/results/ impact/ output & outcomes (what works, why and for whom?)
- Effects of the practice for integrated working, on breaking the intergenerational transmission of poverty, helping children achieve their full potential & national policies
- Cost-effectiveness
- Possible changes in the practice as a consequence of evaluation
- Obstacles/ Challenges/ Issues & ways these were dealt with/overcome
- Successful elements
- Must do's & Don'ts

## MORE INFORMATION

- Contact information (name; position; organisation; email address; telephone)
- Relevant documents

## THE DEVELOPMENT OF THE TEMPLATE

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### 1. The sources of the template

The dimensions for the common template documenting 'inspiring practice' of family and parenting support were formulated on basis of several sources, including:

- Eurochild's [Policy Position on Family Policies](#)<sup>8</sup>. This position was adopted by Eurochild's thematic working group on family and parenting support in November 2010.

This Policy Position contains seven principles underpinning family and parenting support policies and services:

- frame family policies within a children's rights approach as defined by the UNCRC and recognise children and young people as citizens in their own right;
- create the right conditions for positive parenting to take place;
- invest in early intervention and prevention services for families;
- support parents' empowerment and participation, and ensure that the voice of parents is included in the development of policies;
- recognise and respect diversity in relation to family patterns, family composition and size, cultural differences and gender differences, in keeping with the best interest of the child;
- ensure adequate and universal family benefits coupled with targeted benefits for those most in need;
- respect children's right to be heard and ensure that the views and experiences of children are taken into account in the development of services and policies that affect them.

The recommendations to EU Member States (who ultimately have the responsibility to ensure the development and implementation of coordinated family policies) included in this Policy Position on Family Policies are:

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<sup>8</sup> Eurochild (2010). Eurochild Policy Position on Family Policies. Brussels: Eurochild.

- Promote reconciliation measures and create a favourable policy environment for positive parenting;
- Invest in family and parenting support services;
- Increase public investment in childcare services;
- Ensure an effective governance coupled with effective resourcing;
- Foster evidence-based policy and practice.

• **Documents from international organisations:**

- Recommendation Rec(2006)19 of the Committee of Ministers (of the Council of Europe) to member states on policy to support positive parenting
- ChildONEurope (2007). Survey on the role of parents and the support from the Governments in the EU. Firenze: ChildONEurope Secretariat. This document outlines several international instruments dealing with State support to families, adopted by three international organisations: United Nations, the Council of Europe and the European Union.

• **Relevant (online) reports:**

- Létablier, M.T., Luci, A., Math, A. & Thévenon, O. (2009). The costs of raising children and the effectiveness of policies to support parenthood in European countries: a Literature Review'. This report contains several elements that could be used in the template:
  - In this report, it is argued that a realistic and cost-effective support system needs to be based on two pillars: universal, in-cash and in-kind support to cover basic needs & targeted benefits and/or services to meet specific needs and to supplement support for the population with the greatest need (Létablier et al., 2009: p. 158).
  - Létablier et al. (2009) describe the most effective policies to enhance the well –being of families, including the existence of a continuum of support throughout early childhood and support beyond early childhood.
  - Létablier et al. (2009) also outline several criteria child care service providers have to comply with of which some could also be applied to providers of family and parenting support, such as the recruitment of trained and qualified staff & the definition and control of quality standards that service providers have to comply with.
- Dataprev. DataPrev aims to identify and document evidence-based programmes that promote mental health and prevent mental and behavioural disorders, by identifying programmes currently implemented in the countries of Europe, by appraising their evidence and by identifying best practice programmes. The implementation settings chosen to identify programmes include 'mental health prevention focusing on parenting'. In this section, it is outlined that:
  - Policies to optimise children's mental wellbeing through parenting and family interventions are likely to be most effective if they offer elements of universal and targeted approaches.
  - The guidance, training and support of staff are important.
- The dimensions of other templates that are used to describe inspiring practices or similar 'products':
  - The good practices of the website of the European Alliance for Families that deal with parenting support.
  - The section of the database of policies and good practices from the Mental health compass that deals with mental health and young people, in particular the subsection called 'parents, families and early year'.
  - The Validated Local Practice Submission Form from C4EO.
  - The database Effective interventions of the Netherlands Youth Institute.

**2. The update of the template**

The template was updated after the Round Table on basis of:

- the discussions in the Round Table;
- the information provided to us by the rapporteurs.

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## APPENDIX 4 - DESCRIPTION OF THE INSPIRING PRACTICES PRESENTED BY THE PARTICIPATING DELEGATIONS

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### THE CENTRE FOR YOUTH & FAMILIES IN THE NETHERLANDS, INCLUDING THE SPIL CENTRES IN EINDHOVEN

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#### THE APPROACH

- **Its name**

The Centre for Youth & Families (CJG) & SPIL Centres in Eindhoven, The Netherlands. The name SPIL Centre is derived from *Spelen* (play), *Integreren* (integration) and *Leren* (learning).

- **Its history & underlying (theoretical) principles (why & when was the practice introduced?)**

On 4 February 2002, the Eindhoven city council approved the plan to create SPIL Centres in the city within ten to fifteen years. Currently, there are around fifty SPIL Centres in Eindhoven.

The municipality of Eindhoven has chosen for a family support policy based on multifunctional services directly linked to primary schools in these SPIL Centres. This choice had been made based on the principle of the early detection of children at risk as early as possible and as close to the family as possible. The main reason for this is that schools, day care centres and kindergartens are places with the best access to 'find' children at risk and their parents. Professionals at schools, day care centres and kindergartens meet the children nearly every day and for a longer period. In addition, they meet 'their parents' on a formal as well as an informal basis. So it is easy to communicate with them about the development of their child or beginning problems. Research in Eindhoven revealed that neither the youth care teams at school nor the neighbourhood youth care networks were able to 'do' this detection as early as needed. For children 0 – 2 years of age, the well-baby clinics are a recognizable meeting point, because each child visits this clinic nearly every four months during these years. A second reason to build up the SPIL Centres was based on the notion of an uninterrupted development of children and the need to create full time child day care for children and their parents. The SPIL Centres create an infrastructure that meets the needs of parents and children regarding preschool day-care, education, playing, after school care, sports, educational and cultural activities.

Besides the SPIL Centres, parents in Eindhoven who do not know where to go for help, can turn to the so-called actual and virtual municipal Youth and Family Centre (CJG). In Eindhoven the CJG is a network organisation at city level. The basis of the CJG consists of parenting support and other services that are provided in – among others - SPIL Centres and the city's neighbourhoods. The CJG in Eindhoven was opened in 2007.

According to her research about the development of CJG in The Netherlands, Schnieder<sup>9</sup> (2008) writes that the CJG development in the Netherlands took place through several processes. On the one hand this occurred by central control from the national government and legislation. On the other hand this took place via developments in local authorities that build on earlier initiated reforms and improvements in the local 'youth chain'. The latter includes the presentation of the report from the seven so-called Gideons municipalities (this includes Eindhoven) to the national government in 2006. This report identified several problems of services for families and parents at the local level: the needs of youth and parents are not pivotal; families at risk are reached insufficiently; in complex cases, there is no problem-owner; cooperation of organisations is too loose; there is no shared vision, plan, method. In short: support and help are insufficient (as they are offered neither timely nor close to home and is not tailored). In their report, the Gideons municipalities together developed a vision of parenting support at the local level. In 2007, the national government required each municipality to set up a CJG by 2011.

By law, the Youth and Family Centres should offer the following basic functions:

- Youth Health Care (baby well clinics and local health service – GGD);
- Five areas of support for parenting and growing up: information and advice, 'spotting' potential problems. guidance and counselling, light pedagogical support, care coordination at local level;
- A link with youth care;

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<sup>9</sup> Schnieders, A. (2008). *Het CJG in zicht. Onderzoek naar de ontwikkeling van het Centrum voor Jeugd en Gezin in Nederland*. Groningen: Hanzehogeschool Groningen.

- A link with youth education (through School Care and Advice Teams).

A CJG thus combines the local functions and tasks in the area of health, growing up and education. Besides these basic functions there are a number of functions that municipalities could link to the Youth and Family Centres through local 'made-to-measure'. These functions can include: child care; inspection on compulsory education; general social work; youth work; primary health care (general practitioner maternity care, obstetrics) and debt counselling.

As of June 2011, 370 municipalities in the Netherlands (more than 85% of all municipalities) had a CJG that works according to the statutory criteria.

- **Its target group (universal and/or targeted approach; if and what specific group of families/ parents are addressed?)**

The target group of the SPIL Centre are all children 0 - 12 years of age and their parents and other carers. Specific target groups are based on age: the first developmental stage of 0 - 2½ years of age; the second stage of 2½ - 6 years of age and the third stage of 6 - 12 years of age. The SPIL Centre also offers specific services for children in need. The SPIL Centres are given different profiles for each neighbourhood, depending on the particular group of children and parents for whom they are intended. In short, the SPIL Centres offer universal and more targeted services.

The same goes for the CJG as so-called department 1 of the CJG is directed at everybody who is involved in raising children (parents, caretakers as well as professionals) and department 2 is directed at youth and families at risk.

- **Accessibility (what is done to reach the whole target group/ promote their access to the services?)**

SPIL Centres are located in each neighbourhood which make them easy to reach. In addition, each centre has its own specific identity, reflecting the needs of parents and children. Furthermore, the CJG offers parenting support in various ways; via e-mail, over the phone and in face-to-face appointments. As such, both services are tailored to parents with different needs. This in turn will contribute to their accessibility.

- **The objectives (preferably formulated in terms of intended measurable outcomes & make a distinction between short- & long term objectives)**

The objective of the CJG and the SPIL Centres in Eindhoven is to make sure that all children get the chance to develop positively by supporting parents and youth in their needs, as soon as possible, close to their home, using their strengths and offering them useful assistance.

The objectives of department 1<sup>10</sup> of the CJG: better chances for youth to develop; realising a basic provision by giving the necessary support to everybody involved in raising children (for instance parents, grandparents and (semi)professionals).

In addition, the objectives of department 2 of the CJG: signals of problems in families are known as soon as possible; fast action by responsible professionals according to the idea of 'one plan, one method'; decreasing stress in the family by ensuring a safe environment for the children.

- **The activities carried out (what type of family support is provided: informal/ semi-formal/ formal & what kind of support is provided: skills/ information/ training/ material support/ psychological/ social support)**

Each SPIL Centre offers at least early childhood education; playing and education; primary school; day care; parenting support; child public health care and access to youth care. Heart of the SPIL Centre is the primary school and the day care. In the earlier mentioned first developmental stage (children 0-2½ years of age) there is much attention to upbringing, caring and education. In this stage, the child is especially supported by the well-baby clinic and the day care centre. During the second stage (children 2½ - 6 years of age) the focus is on playing and education and afterwards in the third stage (children 6-12 years of age) on education and learning. Special education and preschool education and/or early childhood education programs are offered to children in need.

The SPIL Centres offer all parents parenting support via information meetings on parenting; lectures; parent training or parent courses and more specific interventions for conduct disorders, developmental or emotional problems. Part of the SPIL Centre is also the well-baby clinic, which can be visited for free and which also offers the service of parenting courses and parenting advice. In some neighbourhoods, the SPIL Centre offers more services, such as special education for adults, safety programs, after school care and youth care. The youth care team has a coordinating role for cases of multiple problems in families and/or children. This team coordinates the professional help of participating professionals

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<sup>10</sup> The departments of the CJG are discussed in more detail in the next subsection.



and work according to the principle “one family, one program, one team”. They are also responsible for the communication with the family as well as with the other professionals.

As mentioned earlier, the CJG consists of two departments. Within department one parenting support is offered. This consists of:

- A physical centre that offers support to everybody involved in raising children (professionals, parents and caretakers). In addition, the CJG offers parents the possibility of e-mail or phone contact with a so-called pedagogical assistant. During opening hours, they can also walk in without an appointment to pick up information or talk to a PA about parenting. They can also make an appointment for specific services.
- Cooperation of professionals: this means improving parenting support by working together, sharing knowledge and by coordination of activities. In short, the CJG offers the following services to professionals: information about raising children, possible problems and disorders; training; support of activities in the neighbourhoods; improvement and innovation of working methods; sharing knowledge and experience; information about the (semi)professional social network as well as a short connection to the partners of so-called department 2.

Within department 2, services and support are offered to youth and families at risk with the aid of a computer system called care for youth. This programme does not outline the problems of these families, but only includes the families and the name of the professionals working with them. Within the CJG, local case meetings can be organised for youth at risk or for parents of children with behavioural problems and/or family dysfunctioning, such as parental depression or stress, addiction, poverty, retardation, no proper housing, unemployment, conflict between parents. Furthermore, the CJG offers several services, including so-called family coaches in case the family needs intensive (practical) help on several issues of life; day care; foster parents for weekends or short period; intensive training in positive parenting skills.

- **The way activities are carried out (e.g. face-to-face vs. media-based practices; individual vs. group based; centre-based vs. home-based)**

As mentioned earlier, the CJG offers parenting support in various ways; via e-mail, over the phone and in face-to-face appointments. Within department 1, Triple P (Positive Parenting Programme) is used as a public health approach to strengthening parenting. This programme consists of media based parent information; lectures; individual parent training; group parent training.

- **Participation of parents & children in planning, organisation, developing, executing supporting and/or evaluating the practice)**

The SPIL Centres are given different profiles in each neighbourhood, depending on the particular group of children and parents for whom they are intended. Each centre thus has its own specific identity, reflecting the needs of parents and children. For each SPIL Centre, a precise survey is conducted to determine what package is needed for the area or target group in question. Key to this is demand from users. Furthermore, within the SPIL Centres parenting support is offered in a friendly way and according to the needs of the parents.

- **Promotion of the approach (how are parents made aware of its existence)**

There is information about the CJG and SPIL Centres on the website of the municipality of Eindhoven. Furthermore, the CJG has its own website that also contains information about the SPIL Centres.

- **Quality assurance (e.g. what standards must the involved parties comply with?, how do parents know the approach is of good quality?)**

The quality range of the SPIL Centres has been set up by the municipality of Eindhoven. The criteria of quality of care are:

- the minimal standards of cooperation between all professional organisations participating in the centre;
- the ideology and policy base of the centres;
- the educational program;
- the minimal standards of the services offered.

## **SERVICE PROVIDERS, THEIR STAFF & INTEGRATED WORKING**

- **The agencies, organisations, stakeholders & practitioners (which parties are involved in planning, organisation, developing, executing and/or supporting the practice?)**

The primary school and the day care centre are the heart of the SPIL Centre. They organise it and select the preferred partners of the centre within their neighbourhood. When necessary, they cooperate with the well-baby clinic, the social welfare agency, youth care or any other organisation that can be helpful in realizing specific support goals.

Within department 1 of the CJG the following organisations work together: GGD (youth health care for 4-19 year olds); Humanitas (specific welfare organisation); Korein (child care centres); Lumens Groep (local welfare organisation); SPIL Centres and Zuidzorg (youth health care for 0-4 olds) and the gemeente Eindhoven as the director.

The partners in department 2 of the CJG: Bureau Jeugdzorg (indication office for youth care); GGD (youth health care for 4-19 year olds); GGZe (mental health care); Zuidzorg (youth health care for 0-4 year olds); Raad voor de Kinderbescherming (Child protection office); Welzijn Eindhoven (local welfare organisation) police; schools; Novadic-Kentron (Addiction prevention and care office); MEE (support organisation for people with limitations) and Compulsory education.

- **Extent to which the practice is rooted in local authorities/ NGOs experience of service delivery to families and parents.**

As mentioned earlier, the quality range of the SPIL Centres was set up by the municipality.

More specifically, the municipality of Eindhoven is the director of all the partners in department 1 of the CJG. In addition, if the partners of department 2 that participate in a case meeting do not keep their commitment to the plan made, a meeting with the director of that organisation can be organised. Eventually the responsible alderman can enforce the cooperation of this organisation; this is called the power to persevere.

- **The involved staff: nature (professionals/ volunteers) and their education & training, guidance & support**

In the period 2009-2010, 120 partners involved with the CJG and the SPIL Centres were trained in the positive parenting program.

- **Integrated working (Interdisciplinary co-ordination between the parties involved)**

All parties collaborating in a SPIL Centre are brought under the control of a single direction team and will work together on the basis of an educational framework plan. Every SPIL Centre has its own manager, who is responsible for the implementation of the centre and its policy.

The partners in the two departments of the CJG signed a so-called covenant that outlines their intent to cooperate. As mentioned earlier, the alderman has the power to persevere in case one of the partners does not fulfil its 'obligations'.

## **POLITICAL CONTEXT & SUPPORT**

- **Political context (relation to national frameworks & local policies, in particular those dealing with poverty & social exclusion)**

Eindhoven is one of the around 450 municipalities in The Netherlands. As mentioned earlier, in 2007 the national government required each municipality to set up a CJG by 2011. By law, all centres should offer prevention, advice, support, signalling and light care/support.

- **Funding (duration: permanent/ temporary/ project-based, sources: EU/national/ local/other/ mix & possible changes in relation to economic crisis)**

The CJG in Eindhoven receives (temporary and permanent and earmarked) funding from the national government. It is also receives funding from the provincial government and local government. The SPIL Centres also receive various sources of funding. This includes budget from the school boards as well as the local government. The SPIL Centre Beppino Sarto receives Objective 2 funds which is part of the European Fund for Regional Development (EFRD) of the European Union.

- **Other forms of facilitation (e.g. making meeting space available/ providing training materials)**

Within the CJG, there are places available for case meetings with families. Furthermore, in the period 2009-2010, 120 partners involved with the CJG and the SPIL Centres were trained in the positive parenting program.

## **LESSONS LEARNED**

- **Set up of the evaluation (e.g. longitudinal study/ user evaluations)**

The Integrated Supervision of Youth Affairs (in Dutch: Integraal Toezicht Jeugdzaken, ITJ) has evaluated the SPIL Centres. In ITJ, five government inspectorates work together: the Health Care Inspectorate, the Inspectorate of Education, the Inspectorate for Youth Care, the Inspectorate for Public Order and Safety and the Inspection Service for Work and Income. In its supervision, the focus is on the child and its basis is the Convention on the Rights of the Child. ITJ concentrates on the problems young people have, face and create.

Examples of these problems are child abuse, obesity, youth criminality, addiction and poverty. It examines how the various youth services involved cooperate to solve and prevent these problems.

ITJ works by first determining the problem it will be investigating. It then performs the investigation in municipalities severely affected by this problem and in which the risk of young people coming into contact with the problem is high. Every ITJ investigation starts by setting down the 'hard facts': How many young people are involved? What have the municipalities and services already done to tackle the problem? What policy are they implementing? Which services are involved in resolving the problem? What do we as supervisors already know about these services? In the municipalities in which the investigation is carried out, ITJ assesses how the cooperation between the services is progressing and what results it has produced for young people. In its investigations ITJ employs different methods and techniques, including questionnaires, interviews, observing meetings, dossier studies and talks with young people and/or their parents. ITJ set downs the findings of the investigation in a report that also contains conclusions, recommendations and a so-called administrative message. This report is intended for the municipality that is responsible for the local youth policy. Based on the report, the municipality draws up an action plan together with the relevant services. This plan lists the measures they will take to tackle the problem in the short and long term. A summary of the findings, the action plan and a response from ITJ are combined in a final report. An ITJ inspector monitors the implementation of the action plan. An agreement is made with the municipality about how long this monitoring will last. After this, the municipality performs a self-evaluation that makes clear what the effects of the action plan are and whether or not the cooperation is leading to improved results. Some local issues may require a solution at the national government level. For instance, some statutory regulations and provisions of the government can make cooperation between local services more complicated. This can have adverse consequences for providing assistance to young people. ITJ therefore reports on any such problems to the responsible national Minister.

- **Main achievements/results/ impact/ output & outcomes (what works, why and for whom?)**

A study of the Integrated Supervision of Youth Affairs in Eindhoven from 2006 showed the following results:

- the youth care teams at school are not working on high level or high speed;
- neighbourhood networks on primary care are not strong organised, logistics are weak;
- the Youth Care Agency (that refers children to more specialized services) has no good access.

This study also revealed that the cooperation and partnership had been experienced as a positive and successful one. However, the chain of care and support had not been realised. Furthermore, not all the services addressed the same goals. In addition, there was a lack of coordination and continuity in care and support. There also was a problem in reaching the targeted groups by all the services, especially children in need do not use the services. Another problem was the weakness of intersectoral information; professionals did not share the access to all the information of one child, one family or one case. This was one of the causes of lack of coordination. In addition, evaluation was not a part of the professional working procedures of the services of the SPIL Centre. That means there was a lack of management information as well. Concluding remarks in this study were that potentially the SPIL Centre is a meaningful concept. However, it was considered absolutely necessary to do some goal attainment research, research on the effectiveness of the centres and monitor the results and its process.

According to a more recent report (October 2010) 72% of the professionals and 92% of the parents are satisfied with the services provision of the CJG and its so-called consultation function. However, not all parents know that they can turn to the CJG for parenting support. Rather, they go to their GP. In addition, the existing services insufficiently reach certain ethnic groups.

- **Effects of the practice for integrated working, on breaking the intergenerational transmission of poverty, helping children achieve their full potential & national policies**

To measure and monitor the effects of the CJG, the municipality of Eindhoven intends to start using the so-called 'basisset indicatoren effectiviteit CJG' (basic set of indicators concerning the effectiveness of CJG) that were developed at the national level.

- **Cost-effectiveness**

No data are available on the cost-effectiveness of the CJG or SPIL Centres.

- **Possible changes in the practice as a consequence of evaluation**

The earlier mentioned study from The Integrated Supervision of Youth Affairs brought forth a plan of action for the SPIL Centres. The main goals of this plan include:

- Better monitoring of the causes and amount of problems. Implementation of the early detection system of children at risk and more case management;
- Offering more and better parenting support by starting a Youth and Family Centre at the city level, offering universal parenting support and social welfare agency in every SPIL Centre; implementation of a youth care team at every primary school. Nowadays, there is a CJG at the city level. Furthermore, as a consequence of citywide implementation of the Positive Parenting Programme universal parenting support is offered in every SPIL Centre;
- Innovation of the cooperation and partnerships by implementation of a well-defined youth care team in the SPIL Centres, professional courses on early detection, more prevention programs and better cooperation with social welfare and the Youth and Family Centre. Also the cooperation with the Youth Care Agency needs a quality push by better logistics of information from and to partners.

- **Obstacles/ Challenges/ Issues & ways these were dealt with/overcome**

As mentioned earlier, the study from The Integrated Supervision of Youth Affairs brought forth a plan of action for the SPIL Centres. This plan included several goals, including offering universal parenting support. This was realized by offering the Positive Parenting Program. Furthermore, the CJG was opened in 2007 to address the detected obstacles (as identified by ITJ). For instance, from the CJG the so-called chain coordination was shaped by the introduction of the city wide case reviews in which all partners work together on basis of the joint vision 'one family, one plan'. In addition, structural consultations on the policy and management level (of the different partners involved in department 1 & 2) take place within the CJG.

- **Successful elements**

What makes parenting support in Eindhoven successful is that the SPIL Centres offer a chain of services for children 0-12 years of age and their parents. On the one hand the offer is care, on the other hand it is education. In both cases these services are very well fitted to the age and developmental stage of children. Furthermore, the transition from day care to primary school is not a topic of special concern as both services are offered in the same building.

- **Implementation elsewhere**

Eindhoven's concept of offering parenting support both at the city level (in the CJG) and in the neighbourhood (in the SPIL) centres can be applied in other countries as parents in all countries will want to have the possibility of asking for support near their home.

- **Which elements are non-negotiable?**

The basic model is non-negotiable: offering support at both central and decentralized locations.

- **Which elements can be adapted to suit other contexts/settings?**

The fact that each SPIL Centre has its own specific identity (and thus offers different services), reflecting the needs of parents and children can be adapted to other contexts. What can also be adapted to suit other context/ settings is the exact partners who work together at the central and decentralized locations.

- **Necessary conditions for application or adaptation elsewhere (e.g. training/ presence of a manual/ protocol/ guidance for transfer or implementation)**

As in Eindhoven, offering parenting support in a central and several decentralized locations requires the training of the professionals in one parenting program.

## **MORE INFORMATION**

- **Contact information**

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- Tijne Berg- le Clercq; senior policy advisor at The Netherlands Youth Institute; t.berg@nji.nl; + 31 30 230 64 74

- **Relevant documents**

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## DEVELOPMENTS IN FAMILY SUPPORT PRACTICE, INCLUDING THE FAMILY SUPPORT HUB (UNITED KINGDOM -NORTHERN IRELAND)

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### THE APPROACH

- **Its history (why & when was the practice needed & chosen?)**

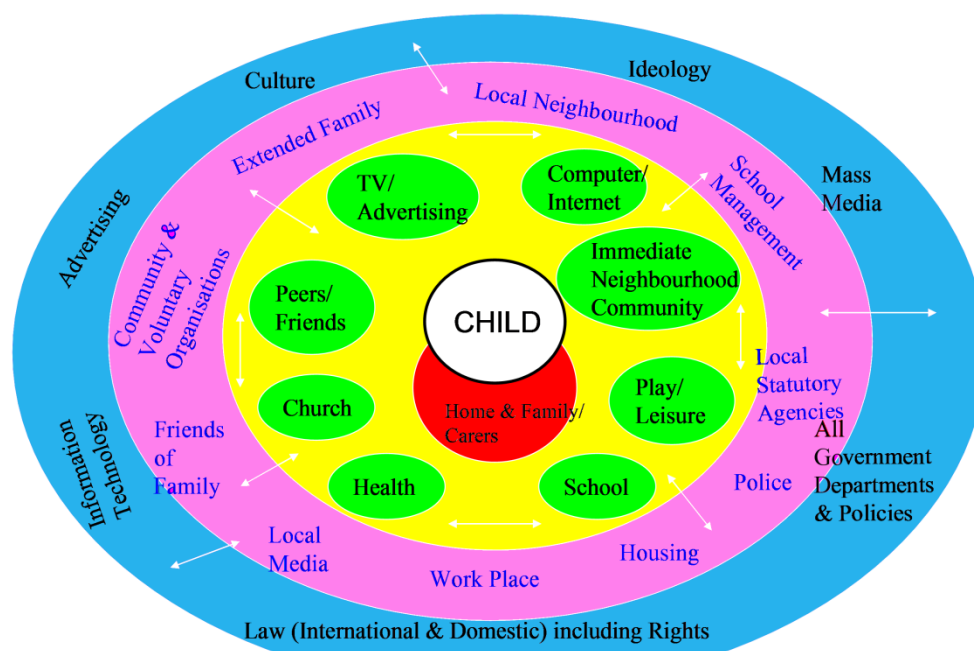
This practice has emerged from the Children's Services Planning process. In Northern Ireland Children's Services Planning is a statutory led inter-agency process designed to produce greater coordination and planning in delivering services to children and families.

- The process is designed to create a strategic framework for developing family support. A number of key changes have taken place strategically to set this framework in place-
- A transition from individual organisational planning to joint planning and eventually to joint commissioning.
- A move from service based planning to needs based planning and from there to rights based planning
- A focus on outcomes bringing rights and needs together

All this has been underpinned by

- The development of the Northern Ireland Family Support Model
- The development of the Whole child Model

## Whole Child Model



The planning process for children and young people in Northern Ireland is overseen by the Children and Young Peoples Strategic Partnership

The **Children and Young People's Strategic Partnership** (CYPSP) has been set up and held its first meeting on 31st January 2011. The CYPSP consists of senior (mostly CEO) representation across all statutory agencies concerned with children's lives, and regional representation of the community/ voluntary sectors and Black and Minority Ethnic Sectors.

The **role** of the CYPSP is to be a cross sectoral, strategic partnership, consisting of the leadership of all key agencies who have responsibility for improving outcomes for all children and young people in Northern Ireland.

The **purpose** of the CYPSP is:

- To put in place integrated planning and commissioning across agencies and sectors, which is recorded through the Children and Young People's Plan, aimed at improving wellbeing and the realisation of rights of children in Northern Ireland, in relation to the 6 outcomes for children:-
  1. Being healthy;
  2. Enjoying, learning and achieving;

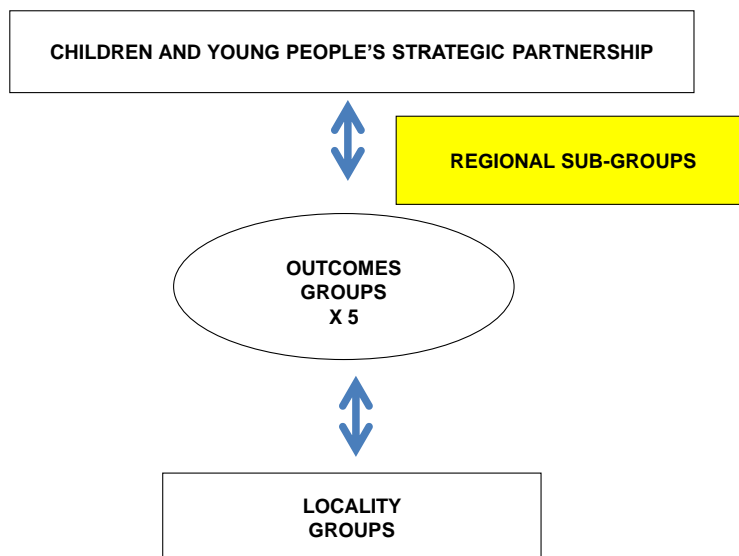
3. Living in safety and with stability;
  4. Experiencing economic and environmental well-being;
  5. Contributing positively to community and society; and
  6. Living in a society which respects their rights.
- To ensure that the CYPSP will be informed by and inform individual organisational business, corporate and community plans.
  - To ensure the participation and involvement of children, young people, families and communities in the integrated planning process.
  - To ensure an effective and efficient, fully mandated structure which is representative of all key stakeholders is in place to carry out the work of the partnership.

The **Northern Ireland Children and Young People's Plan** will set out how the CYPSP will set in place integrated planning and commissioning of supports and services to improve outcomes for children and young people. The Plan will take each of the Outcomes and link them to indicators – ways in which we will know how well all children and young people are achieving the outcomes, and to actions that need to be taken to ensure improvements in these outcomes.

It has now been accepted in Northern Ireland that vulnerable children are best supported and protected when there is integrated planning of all services, from universal to those targeted to address specific needs. The new planning process will therefore address the needs of vulnerable children and young people within the wider planning process. It will support universal services to be proactive in identifying and addressing situations where children or young people would benefit from extra support and ensure that, where appropriate, targeted and specialist support is available when needed.

The Children and Young People's Plan does not supplant or replace the statutory responsibilities, lines of accountability or commissioning responsibilities of individual agencies. Rather it provides the space for agencies to come together - with each other and, critically, with children and young people, families and communities, to make sure that individual efforts to support children and young people ( across the whole range of needs) link up with and work well with other supports and services in the lives of children and young people.

The CYPSP will oversee a planning process which will take place at a number of **levels** – firstly the **Northern Ireland wide level**, secondly planning at the **level of geography of Health and Social Care Trusts** (these boundaries chosen due to the lack of co-terminosity across agency boundaries and the fact that each HSC Trust boundary includes a number of Local Government boundaries), and thirdly at **locality level** – geographies which make sense to local communities.



The approach is underpinned by the UNCRC:

- 'Convinced that the family, as the fundamental group of society and the natural environment for the growth and well-being of all its members and particularly children, should be afforded the necessary protection and assistance so that it can fully assume its responsibilities within the community;
- Recognizing that the child, for the full and harmonious development of his or her personality, should grow up in a family environment, in an atmosphere of happiness, love and understanding'.

Specifically Article 18

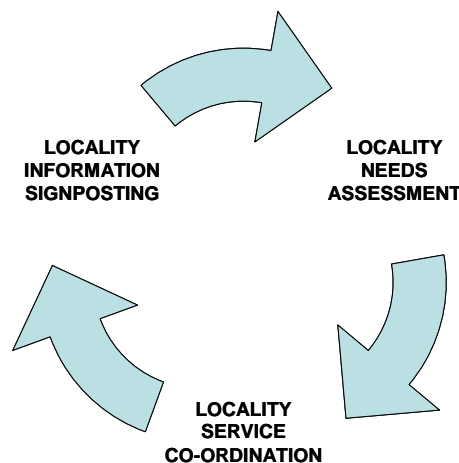
1. States Parties shall use their best efforts to ensure recognition of the principle that both parents have common responsibilities for the upbringing and development of the child. Parents or, as the case may be, legal guardians, have the primary responsibility for the upbringing and development of the child. The best interests of the child will be their basic concern;
2. For the purpose of guaranteeing and promoting the rights set forth in the present Convention, States Parties shall render appropriate assistance to parents and legal guardians in the performance of their child-rearing responsibilities and shall ensure the development of institutions, facilities and services for the care of children.

The specific practice described in this paper is concerned with the development of a network of local Family Support Hubs and Locality Planning. The term 'Family Support Hub' has been used to convey a commonly held view that there needs to be better co-ordination of Family Support services at local level, and has gained currency in recent debate about Child Care provision in Northern Ireland. It is evident that in many local areas there is a consensus that proposals for better local co-ordination of preventative and early intervention services should be positively embraced. The objective of a Hub is to enhance awareness, accessibility, co-ordination and provision of Family Support resources in local areas, with an emphasis on prevention and early intervention.

The concept of a 'Family Support Hub' is of an easily recognizable, non-stigmatized brand or flagship for Family Support at local level.

Coalitions of agencies which provide early intervention services locally

- Points of contact locally for information about Family Support
- Points of local and non-stigmatized access to Family Support
- Points of co-ordination for locality assessment of need and for local action planning



The diagram above should be read as a continuum, and reflects some of the points at which hub development has begun in Northern Ireland. The starting point is recognition that there is no single hub model which can be superimposed on any area. Each locality has unique characteristics in respect of geography, demographics, socio-economic structure, community organisation, local political configuration, informal networks and service history. All of these characteristics will influence the development of a locality hub. Hubs are concerned with the signposting and service coordination part of the diagram and Locality Planning is convened with the needs assessment part.

This approach is consistent with the Northern Ireland policy on family support, 'Families Matter'<sup>11</sup>, the Northern Ireland strategy for family support and parenting.

- The 'Families Matter' policy framework promoted the importance of early intervention and support;
- The intention is to ensure that families who do not meet the threshold for statutory child protection services but who nonetheless have a need for family support services are directed towards the appropriate help;
- The approach is based on harnessing the expertise of voluntary and community sector organisations in supporting families;

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<sup>11</sup> Families Matter: Supporting Families in Northern Ireland, Regional Family and Parenting Strategy', DHSS&PS, 2009



- In a time of significant financial constraints this approach offers the potential of ensuring more coordination of services to vulnerable families and less wasteful duplication of service provision;
  - This approach has the potential to help alleviate the overload in statutory services at the point of intake. This can occur by ensuring that referral to statutory social services is not seen as the pathway to access family support services;
  - This approach can support 'hard to reach' families who may be distrustful of statutory services.
- **Its target group (universal and/or targeted approach; if and what specific group of families/ parents are addressed?)**

Targeted at families with early on-set of problems. These would be families at level 2 of the Northern Ireland Family Support model. The practice also is concerned with the interface between level 2 (early onset of problems) and level 3 (families that need a statutory social work intervention ex. child protection or significant support needs)

- **Accessibility (what is done to reach the target group/ promote their access to the services?)**

Creation of a network of Hubs across Northern Ireland is designed to improve access to support services in two specific ways. Firstly it will improve coordination between services to support families more effectively and secondly it will use the Northern Ireland Family Support Database (a list of all family support providers across Northern Ireland) to ensure that information about support is more readily available to support the signposting of families to support. Locality planning will be used to identify gaps and use this information to inform commissioning decisions by statutory and non-government funders.

Member organisations involved in Hubs and Locality planning already provide services locally and will have a profile in local area.

- **The objectives (formulated in terms of intended measurable outcomes)**

The purposes of the Hubs are:

- To promote parental responsibility through improved co-ordination and enhanced access to services for all parents;
- To close the gaps in relation to vulnerable children by better co-ordination between other providers and statutory social services

*The role of Locality Planning is as followed:*

Locality Planning Groups are well developed in some areas and being developed in others. Some are currently connected to the CYPSP through this structure and some are not as they have been developed for other purposes, for example for planning for the whole population in an area rather than children and young people. Work is on-going to connect such processes to the CYPSP so as to avoid duplication of effort across agency.

Locality planning processes provide the bedrock for the integrated planning process, given that they provide a mechanism through which local children and young people, families and communities can instigate planning based on rights and needs. Prioritising the setting up of new Locality Planning Groups will be addressed through each Outcomes Group, based on need and community capacity.

The **role** of each Locality Outcomes Group is to be a partnership between children and young people, families, communities and representatives of agencies at locality level which will draw up a locality plan to address priorities identified through outcomes based planning, and to mobilize local resources from the statutory, voluntary and community sectors to address these priorities. This work will be carried out within the context of the Northern Ireland Children and Young People's Plan.

The **purpose** of the Locality Planning Groups is to make improvements in the 6 high level outcomes for local children and young people, through local integrated planning. Some of this planning will carried out by the locality group itself, and other parts of the planning will be taken to the next levels, through the Outcomes Group and the CYPSP, as needed.

It will be particularly important to build on the knowledge base of existing locality planning groups, which have demonstrated that it is essential to:

1. listen to children and young people in relation to their views and needs;
2. build on existing social partnerships;
3. develop strong community ownership of the need to improve children's outcomes;
4. ensure that the scope of the Locality Plan is wide enough to include those services that are needed across leisure, social, health and educational, and housing sectors, in locally agreed accessible locations.

The 'Framework for Integrated Planning for Outcomes for Children and Families' developed on a cross border basis through CAWT (Cooperation and Working Together) will be used as the groups are rolled out.<sup>12</sup>

The Groups will examine how well local children and young people are doing in relation to the indicators linked to the 6 high level outcomes, including information provided to Locality Groups by their Outcomes Group, in order to ascertain what actions need to be taken locally to address priorities.

Representation on the Locality Planning Groups will be across statutory, voluntary and community sector agencies working with children and young people locally, together with linkages with other partnerships whose remit links with children and young people's lives. Each Locality Planning Group will work out such membership independently, bearing in mind the need to link the work to the Northern Ireland Children and Young People's Plan, which is likely to mean that the following statutory agencies need to be involved:

- The Health and Social Care Board;
- The Public Health Agency;
- The Education and Library Board;
- Representatives of the District Councils within the area;
- The Police Service of Northern Ireland;
- The Youth Justice Agency;
- The Probation Board of Northern Ireland;
- The Health and Social Care Trust;
- The Housing Executive of Northern Ireland;
- Schools representation.

The representation of the community and voluntary sectors will be that which makes sense locally. Particular attention will be paid to ensuring that all planning work contributes towards a shared future and the equality legislative requirements. In addition, with respect to the effective participation of the community within the planning process, the contribution of community sector representatives on the Outcomes Groups will be strengthened by reference to the Health and Social Care Board's Community Development performance management framework, which is under development at present. This process will help to address the considerable power imbalance between statutory and community sector partners. Children, young people and families will be supported to participate in the Locality Planning Groups.

It will be essential that the planning processes at each level connect and inform each other. Strategic direction will be provided from the CYPSP to ensure that the resources of agencies combine together in a coordinated way, always focusing on ways of improving the agreed outcomes for children and young people. Local and Locality planning processes will be supported to ensure that solutions are informed by the experiences of children and young people, their families and carers and their communities.

• **The activities carried out (what form is family support provided in: informal/ semi-formal/ formal & kind of support provided: skills/ information/ training/ material support/ psychological/ social support)**

- Referral to hub can include self-referral (informal) or referral from statutory service (formal) or from another hub member (semi-formal);
- Statutory services are a key member of Hub. An essential task of the statutory service is to pick up any child protection concerns that might be around for families using the hub network;
- The range of support that can be provided is dependent on which organisations are members of the Hub network;
- Parents and children and young people are feeding into the integrated planning processes and the development of Hubs;
- Supporting parents and parenting is a key part of what the Hubs are about;
- Funding has been directed by the lead commissioning body in Northern Ireland the Health and Social Care Board to underpin this model.

One Hub, in Larne, brings together the local 'SureStart' (covering the age range 0-4), the Larne Parental Support Project (covering the age range 0-8), the Early Intervention for the Prevention of Offending project (covering the age range 8-13), Choices Family Support (covering adolescents 10 to 18) and the YMCA community based family support service.

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<sup>12</sup> Framework for Integrated Planning for Outcomes for Children and Families' Cooperation and Working Together

- **The way activities are carried out (e.g. face- to-face vs. media-based practices; individual vs. group based; centre-based vs. home-based)**
  - Hubs will include organisation that provide a range of services. The exact range of services and the methods of delivery will depend on the make-up of the Hub;
  - Where there are significant gaps in services the Locality Planning process can work to assess need and identify gaps in provision. This information can be used to direct funding decisions;
  - The services can be provided on a one to one or group work basis;
  - They can also be either home based or centre based.
- **Participation of parents & children in planning, organisation, developing, executing and/or supporting the practice)**

A Participation strategy for children and young people as well as a participation strategy for parents has been developed. This is underpinned by Article 12 of the UNCRC:

- ‘States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child’;
- One of the key defining principals of this work is ‘Working in partnership with children, families, professionals and communities’;
- The assessment of the effectiveness of Hubs will include an evaluation of the extent to which the participation of children, young people and their families both informed the development of the Hubs and the on-going operation of Hubs;
- Locality Planning similarly places a strong emphasis on participation;
- The participation strategies address parents and children involvement in all levels of the planning structure.

### **SERVICE PROVIDERS, THEIR STAFF & INTEGRATED WORKING**

- **The agencies, organisations, stakeholders & practitioners (which parties are involved in planning, organisation, developing, executing and/or supporting the practice?)** Both Locality Planning and Hubs are open to all agencies in the statutory and voluntary sector. Locality Planning process will include the following statutory agencies:
  - The Health and Social Care Board;
  - The Public Health Agency;
  - The Education and Library Board;
  - Representatives of the District Councils within the area;
  - The Police Service of Northern Ireland;
  - The Youth Justice Agency;
  - The Probation Board of Northern Ireland;
  - The Health and Social Care Trust;
  - The Housing Executive of Northern Ireland;
  - Schools representation.

The representation of the community and voluntary sectors will be that which makes sense locally. Particular attention will be paid to ensuring that all planning work contributes towards a shared future and the equality legislative requirements. In addition, with respect to the effective participation of the community within the planning process, the contribution of community sector representatives on the Outcomes Groups will be strengthened by reference to the Health and Social Care Board’s Community Development performance management framework, which is under development at present. This process will help to address the considerable power imbalance between statutory and community sector partners. Local voluntary and community sector organisations will also be involved. Children, young people and families will be supported to participate in the Locality Planning Groups.

The lead commissioning body, Health and Social Care Board (HSCB) provides leadership, support and planning expertise

- The statutory provider organisations, Health and Social Care Trusts (HSCT) provide support and funding to voluntary organisations who make up the Hubs;
- HSCT bodies also involved in planning of Hubs;

- Hubs are made up of those organisations in the voluntary and community sector that work with and take referrals from the locality in which they operate.
- **Extent to which the practice is rooted in local authorities/ NGOs experience of service delivery to families and parents.**
  - The purpose of the Hubs/Locality Planning is to ensure more effective access to family support services;
  - Both processes are underpinned by a belief in integrated planning across sectors and organisations;
  - The Hub's are about linking together rather than creating new services. Though if gaps are identified a separate process of Locality Planning can assist;
  - Locality Planning ensures that gaps in provision are picked up and fed into the next level of the planning system;
  - Locality Planning, therefore can be about identifying gaps and organising new services;
  - This is informed by the existing expertise of organisations who are members as well as the participation of children, young people and communities.
- **The involved staff: nature (professionals/ volunteers) and their training, guidance & support**
  - Guidance and support comes from a small team funded by the commissioning and planning body Health and Social Care Board (HSCB);
  - The type of staff in locality planning will vary depending on the type of organisation involved. They will be people who can contribute to multi agency planning and needs assessment. They may be individuals who work directly with families;
  - The type of staff involved in Hubs will be individuals who directly work with families and their front line managers;
  - All staff are supported through their own organisations. The development of Hubs and Locality Planning processes are supported by the HSCB support team.
- **Integrated working (Interdisciplinary co-ordination between the parties involved)**
  - Hubs exist to promote more integrated working amongst members;
  - Hubs have developed information sharing protocols/referral processes and other processes to support effective interagency working;
  - Locality Planning exists to ensure that agencies not only cooperate together in the delivery of services but that they also collaborate on planning.
- **The quality standards that the parties involved have to comply with**

The following template, setting out ten key defining characteristics, of agencies/ projects which can deliver Family Support services, is based on research evidence of best practice, and is recognized internationally (Pinkerton, Dolan, Canavan 2006)<sup>13</sup>. According to this model, agencies which practice Family Support need to display the following core defining characteristics:

- Working in partnership (with children, families, professionals and communities);
- Needs led interventions (strive for minimum intervention required);
- Clear focus on the wishes, feelings, safety and well-being of children;
- Reflect a strengths based perspective which is mindful of resilience;
- Promotes the view that effective interventions are those that strengthen informal support networks;
- Accessible and flexible in respect of location, timing, setting and changing needs, and can incorporate both child protection and out of home care;
- Families are encouraged to self-refer and multi-access referral paths will be facilitated;
- Involvement of service users and providers in the planning, delivery and evaluation of family support services is promoted on an on-going basis;
- Services aim to promote social inclusion, addressing issues around ethnicity, disability, and rural/urban communities;
- Measures of success are routinely built into provision so as to facilitate intervention based on attention to the outcomes for service users to facilitate quality assurance and best practice.

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<sup>13</sup> DOLAN P, PINKERTON J, CANAVAN J eds ; ' Family Support – From Description to Reflection' in 'Family Support as Reflective Practice' Jessica Kingsley 2006

These ten defining characteristics provide an audit framework for assessing agencies (or coalitions of agencies) which set up to provide family Support services. In effect they define the ethos, operational principles and the key standards for Family Support provision.

## **POLITICAL CONTEXT & SUPPORT**

- **Political context (relation to national frameworks & local policies, in particular those dealing with poverty & social exclusion)**

The NI Assembly ten year strategy for children and young people in Northern Ireland 2006-2016 set out the following vision-“Our vision is that all children and young people living in Northern Ireland will thrive and look forward with confidence to the future”<sup>14</sup> The strategy established an Outcomes framework with six high level outcomes<sup>15</sup> that set out that children and young people should be:

- Healthy;
- Enjoying, learning and achieving;
- Living in safety and with stability;
- Experiencing economic and environmental wellbeing;
- Contributing positively to community and society; and
- Living in a society which respects their rights.

The strategy identifies as a core supporting theme the policy intention of “making a gradual shift to preventative and early intervention approaches without compromising those children and young people who currently need our services most”<sup>16</sup> This is to be delivered by “working in partnership with those who provide and commission children’s services”<sup>17</sup>. The aim of preventative and early intervention practice was described as “to improve the quality of life, life chances and living for all our children and young people and reduce the likelihood of more serious problems arising in the future”<sup>18</sup>.

- The key policy driver for family support in Northern Ireland is ‘Families Matter’<sup>19</sup>. This strategy picks up the theme of early intervention and sets it in the context of family support. This strategy published by the Department of Health Social Services and Public Safety defines family support as “the provision of a range of supports and services to ensure that all children and young people are given the opportunity to develop to their full potential. It aims to promote their development primarily by supporting and empowering families and strengthening communities. Its focus is on early intervention ensuring that the appropriate assistance is available to families at the earliest opportunity at all levels of need”<sup>20</sup>.
- The most recent DHSS&PS ‘Strategic Vision for Health and Social Care’<sup>21</sup> confirms the strategic intent to move to early intervention specifically in one of the papers key themes- ensuring more accessible and responsive services. A supporting priority “To improve the health, social well-being and safety of children and young people through preventative, early intervention family support and, where relevant, child protection services”
- The shift in emphasis to early intervention is part of a growing trend on these islands. In the UK a report from the Centre for Excellence and Outcomes (C4EO) and ADCS showed that the best family intervention strategies were:
  - Built on research into supporting families;
  - Created a culture of co-operation among professionals and managers;
  - Developed a strong “outreach” programme to contact families reluctant to access support services;
  - Constructed services around schools and universal services as “hubs” for more specialised support. The paper defined early intervention as: “intervening early and as soon as possible to tackle problems emerging for children, young people and their families or with a population most at risk of developing problems. Early intervention may occur at any point in a child or young person’s life”.

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<sup>14</sup> ‘Our Children and Young People-Our Pledge’, OFMDFM, 2006, p.5

<sup>15</sup> Ibid, p.7

<sup>16</sup> Ibid, p.13

<sup>17</sup> Ibid, p.13

<sup>18</sup> Ibid, p.18

<sup>19</sup> ‘Families Matter: Supporting Families in Northern Ireland, Regional Family and Parenting Strategy’, DHSS&PS, 2009

<sup>20</sup> Ibid, p.18

<sup>21</sup> ‘Strategic Vision for Health and Social Care’, DHSS&PS, 2011

- The efficacy of a shift to early intervention has seen significant support at a government level. A report to the UK government recommended that all political parties “acknowledge that the culture of late intervention is both expensive and ineffective, and ensure that early intervention plays a more central role in UK policy and practice”<sup>22</sup> A paper by the NI Assembly examined the case for early intervention strategies which are designed to reduce the demand for more expensive intervention or treatment at a later date. “The need for preventative spending is the result of market failure and there is a great deal of evidence which suggests that our current allocation of resources is dynamically inefficient. A change in mind-set is required if preventative spending is to be enacted. Additionally, cross-departmental partnership and joined up government are the required foundations for preventative spending interventions”. The paper went on to note that “increasing the effectiveness of public services will help to ensure that, within the established framework, intervention occurs at the earliest point at which people make contact with public services”.

• **Funding (duration: permanent/ temporary/ project-based & sources: EU/national/ local/other/ mix)**

- Funding for services that make up the Hubs/locality is from a range of sources. Mostly statutory sources though some non-government funding is involved;
- A government funding stream, ‘Family Support Funding’ was specifically targeted at developing early intervention services. This funding stream was delivered through the Children’s Services Planning process;
- Hubs are built around existing services;
- Hubs are designed to improve access to services for individuals and locality planning is designed to improve access to services for populations;
- Core staff from the Health and Social Care Board are involved in supporting Hubs and locality Planning. These are permanent positions;
- Some funding for supporting Hub development is time limited. This is funding designed to give additional support at the early stage of the process development. It is envisaged that the need for this intensive support will reduce as the process develops.

• **Other forms of facilitation (e.g. making meeting space available/ providing training materials)**

- The Hub is a virtual organisation with no space of its own;
- The Locality Planning process is similarly a virtual organisation;
- Both processes draw on members to provide support including premises and training;
- Members of both processes have their own funding, premises and expertise. Working together will also promote a greater understanding of each other’s work.

**LESSONS LEARNED**

• **Set up of the evaluation (e.g. longitudinal study/ user evaluations)**

Evaluation protocol is set out below

STANDARD	QUESTIONS FOR LOCALITY SELF SCORE
<p>1</p> <p>Working in <b>PARTNERSHIP</b> is an integral part of Family Support. Partnership includes children, families, professionals and communities</p>	<p><b>1.1 How effective are current arrangements for common purpose, and co-ordination between agencies at local level?</b></p> <p><b>Consider;</b> Is there a history of collaboration in the locality between agencies providing services for children and families? Are there existing partnership arrangements? How well have these worked? Is there a broad consensus about the priority needs in the locality? Are there barriers to collaborative working, and are there opportunities? Would a formal partnership agreement enhance opportunities and help to overcome barriers?</p> <p><b>Rating;</b> How would you assess, on a scale of 1-10 (Underdeveloped 1 to Highly Developed 10), the effectiveness of the current arrangements for co-ordination of Family Support services in this locality?</p>

<sup>22</sup> ‘Early Intervention: The Next Steps’, Graham Allen MP, 2011

	<p><b>1.2 Is there agreement about a mission statement for a Family Support Hub?</b></p> <p><b>Consider;</b> Have agencies considered and agreed on the potential advantages of forming a Hub? Is there a agreed statement of common purpose, to which all participating agencies can sign up? Is there consensus about a lead agency?</p> <p><b>Rating;</b> How would you assess your progress (Underdeveloped 1 to Highly Developed 10) in relation to an agreed mission statement for a Family Support Hub in this locality?</p> <p><b>1.3 Do you have an information sharing protocol?</b></p> <p><b>Consider;</b> What arrangements are currently in place for information sharing within agencies, taking into account confidentiality, data protection, safeguarding etc.? How consistent are these across agencies? Are these shared openly with people who use the services?</p> <p><b>Rating ;</b> What is your assessment, on a scale of 1-10 (Underdeveloped 1 to Highly Developed 10), the effectiveness of current arrangements for sharing information across agencies ?</p> <p><b>1.4 What arrangements for community feedback are in place?</b></p> <p><b>Consider;</b> Are there effective links between Community Development/ Social Economy agencies, and agencies which provide Child Care services? Are there forums in place to facilitate dialogue between local Community representatives and Child Care agencies?</p> <p>Are Community representatives involved in reviewing and tracking Child Care trends? Are children and families on the local Community Development agenda?</p> <p><b>Rating;</b> How would rate on a scale of 1-10 (Underdeveloped 1 to Highly Developed 10) the current arrangements for community input to Child Care?</p> <p>REFER TO 3 (BELOW) FOR CHILDREN AND YOUNG PEOPLE MEASURES AND TO 8 (BELOW) FOR GENERAL SERVICE USER MEASURES</p>
<p>2</p> <p>Family Support interventions are <b>NEEDS LED</b> (and provide minimum intervention required)</p>	<p><b>2.1 Do agencies allocate services on the basis of assessed need? Are there common arrangements for reviewing individual need which are shared across agencies? Are there common arrangements for reviewing need at locality level?</b></p> <p><b>Consider;</b> Does each agency have a framework/policy for needs assessment at individual level? To what extent, if any, is there a common understanding of how individual need should be assessed? To what extent is there agreement that a common assessment framework is desirable? Are agencies explicit about their thresholds? Is there clarity across agencies about thresholds? Are thresholds reviewed with partner agencies? Have agencies worked together already to identify and track community indicators of need and outcomes in relation to children and young people? Has there been community involvement? How accessible is information about community trends and outcomes in relation to children and young people?</p> <p><b>Rating;</b> How would you rate, on a scale of 1-10, (Underdeveloped 1 to Highly Developed 10) progress towards a common framework for assessing and reviewing need, in this locality?</p>
<p>3</p> <p>Family Support requires a clear focus on the <b>WISHES, FEELINGS, SAFETY AND WELL-BEING OF CHILDREN</b></p>	<p><b>3.1 What arrangements currently exist to establish and use information on the wishes and feelings of children and young people?</b></p> <p><b>Consider;</b> What arrangements are in place in individual agencies for listening to children and young people? Are there good practice examples? Is there agreement that this should be a common value across the hub? Are there opportunities for sharing learning in relation to facilitation of children and young people, and for more co-ordinated responses? What arrangements are in place for tracking outcomes re well-being of children and young people in the locality – qualitative and quantitative?</p> <p><b>Rating;</b> How would you rate, on a scale of 1-10 (Underdeveloped 1 to Highly Developed 10), the overall quality of arrangements for listening to children and young people in this locality?</p>

	<p><b>3.2 What interface arrangements are in place between the Gateway service and other service providers in the locality?</b></p> <p><b>Consider;</b> How effective are relationships between Gateway and other Family Support service providers in this locality? Is there a clear understanding of operational thresholds for access to Gateway? How effective is communication in relation to Gateway assessments? Are there opportunities for joint assessments of need and for planning? Are there opportunities for joint review of services?</p> <p><b>Rating;</b> How would you rate, on a scale 1-10 (Underdeveloped 1 to Highly Developed 10), the current quality of interface arrangements between Gateway and other service providers in this locality?</p>
<p>4</p> <p>Family Support services reflect a <b>STRENGTHS BASED</b> perspective, which is mindful of resilience as a characteristic of many children's and families lives</p>	<p><b>4.1 Is there a shared understanding across hub agencies of the value of promoting resilience in children, young people and families? Do Hub agencies use assessment frameworks that measure strengths?</b></p> <p><b>Consider;</b> Do staff in different agencies have an understanding of the importance of resilience? Does the Partnership Mission statement and principles value resilience? How would individual agencies rate their assessment frameworks, when viewed from a family strengths based perspective? To what extent is this approach shared across agency assessment frameworks? What are the differences? Is there a need for joint training?</p> <p><b>Rating;</b> How would you rate, on a scale from 1-10 (Not Recognized 1 to Fully Recognized 10), the extent to which promoting resilience in children and families is a shared and core objective of the hub?</p>
<p>5</p> <p>Family Support is <b>ACCESSIBLE AND FLEXIBLE</b> in respect of location, timing, setting and changing needs, and can incorporate both child protection and out of home care</p>	<p><b>5.1 How accessible and flexible, from an agency perspective, are the services within this hub area? What is known about user feedback re accessibility of services – how family friendly?</b></p> <p><b>Consider;</b> Do all agencies know what are the areas and times of peak demand for their services? Do individual agencies have user feedback about the flexibility and accessibility of their services? Has this been discussed/considered at the level of locality? Do agencies currently have room for flexibility at local level in order to maximise access? Can agencies create greater room for access and flexibility at local level? Are there arrangements for tracking the impact of the thresholds operated by different agencies?</p> <p><b>Rating;</b> How would you rate, on a scale from 1-10 (Underdeveloped 1 to Highly Developed 10), the extent to which agencies use flexibility and co-ordination in order to maximize access to services?</p> <p><b>5.2 How healthy are the interfaces between Early Intervention services and services which work with complex clients?</b></p> <p><b>Consider;</b> Is there a clear understanding of the role and range of services which work with complex cases (LAC, Gateway, PSNI Public Protection Units, CAMHS, FIS, Probation, Sixteen Plus etc.)? How effective is communication in relation to assessment and referral – when cases, for example are being closed? Are there opportunities for joint assessments of need and for planning? Are there opportunities for joint review of services?</p> <p><b>Rating;</b> How would you rate, on a scale 1-10 (Underdeveloped 1 to Highly Developed 10), the current quality of interface arrangements between complex services and other service providers in this locality?</p>
<p>6</p> <p>Family Support promotes the view that effective interventions are those that <b>STRENGTHEN INFORMAL SUPPORT NETWORKS</b></p>	<p><b>6.1 How well is the importance of informal support networks recognized in this locality, and what is being done to help them develop?</b></p> <p><b>Consider;</b> Has there been a review of community networks? How well developed are the links with existing community development groups? Has community asset mapping been considered? Have gaps in service areas been identified locally (community audit), and what are they?</p> <p><b>Rating ;</b> How would you rate, on a scale of 1-10, ( Low 1 to High 10) the priority given to the development of informal support networks in this locality?</p>



<p>7</p> <p>Families are encouraged to self refer and <b>MULTI-ACCESS REFERRAL PATHS</b> are facilitated</p>	<p><b>7.1 How effective are current referral paths (including arrangements for assessment) in facilitating access to services for families in this locality ?</b></p> <p><b>Consider;</b> Have there been any audits of agency referral pathways ? Are there protocols in place between agencies for how referrals should be managed in order to promote openness and access to families? What is the extent of knowledge and use of the Family Support data base?</p> <p><b>Rating;</b> How would you rate, on a scale 1-10, (Underdeveloped 1 to Highly Developed 10) the responsiveness of the referral system in this locality to any family seeking additional services ?</p>
<p>8</p> <p><b>INVOLVEMENT OF SERVICE USERS AND PROVIDERS IN THE PLANNING, DELIVERY AND EVALUATION</b> of family support services is practised on an on-going basis</p>	<p><b>8.1 How developed are current arrangements for the involvement of service users in the evaluation of services in this locality?</b></p> <p><b>Consider;</b> What arrangements are currently in place in individual agencies? Is there agreement that this should be a common value across the hub? Are there agreed, facilitated processes for user input in review of individual agency services? Are there good practice examples in relation to user evaluation? Are there agreed processes for joint review with Partners in relation to user evaluation? Is there openness to challenge across agencies on the basis of user evaluation? What arrangements are in place to seek community feedback about services for children and families in this locality?</p> <p><b>Rating;</b> How would you rate, on a scale from 1-10, (Underdeveloped 1 to Highly Developed 10) the quality of service user involvement in the evaluation of services in this locality?</p> <p><b>8.2 How developed are current arrangements for the involvement of service users in the planning of services in this locality?</b></p> <p><b>Consider;</b> What arrangements are currently in place in individual agencies? Are there agreed, facilitated processes for user input in the planning of individual agency services? Is there any history of user involvement in planning in any agency - are there good practice examples?</p> <p><b>Rating;</b> How would you rate, on a scale from 1-10, (Underdeveloped 1 to Highly Developed 10) the quality of service user involvement in the planning of services in this locality?</p> <p><b>8.3 How developed are current arrangements for the involvement of service users in the delivery of services in this locality?</b></p> <p><b>Consider;</b> Is there any history of user involvement in the delivery of services in any agency - are there models /good practice examples ? How extensive is the use of volunteers in providing services for children and families? Have agencies considered the advantages/disadvantages of user involvement/volunteers in delivery of services? Has consideration been given to the importance of peer led approaches to assessment of need, dissemination of information etc.? Have the governance issues been addressed (e.g. confidentiality, safeguarding etc.)? What opportunities exist where volunteering could enhance the range of service?</p> <p><b>Rating;</b> How would you rate on a scale of 1-10 (Underdeveloped 1 to Highly Developed 10) the current input from volunteers/service users into services for children and families in this locality?</p>
<p>9</p> <p>Services aim to <b>PROMOTE SOCIAL INCLUSION</b>, and address issues around ethnicity, disability and urban/rural communities</p>	<p><b>9.1 How well do the current arrangements in the locality work in order to promote social inclusion and address disadvantage?</b></p> <p><b>Consider;</b> What arrangements are currently in place in individual agencies?</p> <p>Have any audits been undertaken in order to establish baseline position? Do you need to audit cultural sensitivity of services across agencies? Is there user feedback from disadvantaged groups/communities?</p> <p><b>Rating;</b> How would you rate, on a scale of 1-10, (Underdeveloped 1 to Highly Developed 10) the arrangements currently in place by agencies in this locality to promote the social inclusion of all disadvantaged groups ?</p>

<p><b>10</b></p> <p><b>MEASURES OF SUCCESS</b> are built into services to demonstrate that interventions result in improved outcomes for service users, and facilitate quality assurance and best practice</p>	<p><b>10.1 How effective are the current arrangements for measuring the success of services and tracking outcomes for children and families in this locality?</b></p> <p><b>Consider;</b> Are there agreed processes for tracking community outcomes (trends) ? Do agencies track positive changes based on user feedback?</p> <p>Are there agreed baseline measures for tracking the impact of early intervention? Are any arrangements in place to obtain user feedback re resiliency indicators? Are arrangements in place to measure Hub progress towards best practice standards? Is there agreement across partner agencies re common standards to quality assure Hub processes?</p> <p><b>Rating;</b> How would you rate, on a scale 1-10, (Underdeveloped 1 to Highly Developed 10) the effectiveness of current arrangements for measuring success and tracking outcomes for children and families in this locality?</p> <p><b>10.2 Are there processes in place to enable agencies to reflect on learning and the quality of practice with children and families?</b></p> <p><b>Consider;</b> Do agencies have opportunities to review collectively information about the impact and quality of services to children and families? Is there agreement about benchmarking? Are there processes for review?</p> <p><b>Rating;</b> How would you rate, on a scale 1-10 (Underdeveloped 1 to Highly Developed 10) the effectiveness of current arrangements in this locality for reviewing quality and best practice?</p>
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- **Main achievements/results/ impact/ output & outcomes**

This is an early stage in the development of the Hub process. The evaluation is due to begin to roll out shortly. The Hubs are starting to use standards (see earlier section) to establish baselines. Three sub groups of the Children and Young Peoples Strategic partnership have been set up with part of their brief to evaluate this process.

A **Families Matter Implementation Group** has been set up by the Health and Social Care Board, and is now part of the CYPSP structure. This group will oversee a Northern Ireland approach to ensuring that early intervention family support services are available in each area, are easily accessible by children and young people and families and are subject to robust and evidence based evaluation.

A **Research Group** has been set up by the Health and Social Care Board and is now part of the CYPSP structure. The purpose of the Research Group is to provide the CYPSP with research expertise on how best to improve outcomes for children and young people, and how to ensure best practice in relation to early intervention family support. It is envisaged that, for the first period, this Group will concentrate on supporting the implementation of Families Matter, including, as a priority, the evaluation of family support, given the key position of early intervention in the work of the CYPSP.

An **Integrated Commissioning Sub Group** will be set up to start the process of exploring models of joint commissioning, in order to prepare for such commissioning as it becomes required.

Some aspects of the practice has been evaluated in particular a service focussed on the Early Intervention for Prevention of Offending. The outcome of this evaluation was very positive in terms of this approach.

Outcome reports have also been produced at a Northern Ireland wide level which over time will pick up whether the early intervention focus is impacting on the outcomes for children and families.

- **Effects of the practice for integrated working, on breaking the intergenerational transmission of poverty, helping children achieve their full potential & national policies**

- The practice supports integrated working and is working to bring separate funding streams together to draw out added value;
- The impact on intergenerational transmission of poverty based on early access to support to prevent the onset of serious problems;
- The process helps children achieve their potential by ensuring they and their families have the support they need at the point in time which they need it;
- “There is growing recognition of the need to help and support parents who experience poverty in order to have a positive impact on the lives of children and also recognition that child poverty will not be eradicated simply by tax or economic initiatives. The Child Poverty Review commissioned by the Chancellor, has shown that the quality of parenting is critical if we are to eliminate child poverty in a generation. The quality of parenting in the home is

vital. We must therefore shift the balance of family support to those services that assist with early intervention and the prevention of crisis<sup>23</sup>;

- Supported by national policies. Success will ensure these policies endure in the face of significant pressure on budgets.

- **Cost-effectiveness**

This process drives cost effectiveness in two ways:

- Early intervention is designed to divert families from the need for more costly interventions should their problems remain unaddressed and allowed to deteriorate;
- The Hubs and Locality Planning are designed to ensure more effective use of existing investments and avoid duplication through increased collaboration

It is now widely accepted that early intervention works for families and saves money. By early intervention we mean this - children's needs should be met and rights addressed at the earliest possible moment – not when issues have become chronic or disastrous for the child. One example is early intervention programmes to prevent children from offending. The HSCB have commissioned a Northern Ireland wide service for 8-13 year olds who have been specifically identified as at risk of offending.

The return on investment is significant - early intervention helps to prevent children ending up in care or custody – if we compare the cost of providing a child with early intervention for a year ( £5,000) to the cost for one child to spend a year in a children's home (£130,000 ) or £200,000 for one year for youth custody.

The effectiveness of early intervention has also now been endorsed by the Department of Health, Social Services and Public Safety strategy for family support 'Families Matter'.

- **Possible changes in the practice as a consequence of evaluation**

There is growing statutory support for this process which will support the continued development of early intervention services despite the impact of budget restraints.

Statutory social workers in the future could be used differently. They could become more involved in working with local voluntary and community organisations.

The wider adoption of Hub model and Locality Planning across Northern Ireland will occur. Whilst at the moment there is some difference in how Hubs are developing the evaluation should help to identify the core things that all Hubs need to have.

Locality Planning will produce more joined up planning at a local level including with local government.

Pooling resources and eventually joint commissioning is one of the key outcomes being sought.

Early intervention evaluation of some services is already creating interest ex. the Criminal Justice Inspectorate is looking at the Early Intervention for the Prevention of Offending services as part of their work.

- **Obstacles/ Challenges/ Issues & ways these were dealt with/overcome**

Integrated planning-lack of joined up government, challenge for partnership to provide leadership, establish a singular focus on children and coordination of funding streams-children's budget. The key points about the model are that it is:

- Locality sensitive;
- It facilitates evaluation because local development planning stems from an initial baseline analysis which can then be reviewed;
- The ten standards are quality assured;
- It addresses a number of agency and sectoral agendas;
- It has a strong user orientation;
- Safeguarding is implicit in the overall approach.

A number of issues about the leadership, mandate and inclusion of agencies have emerged in the work to date. It is evident that the approach requires to be mandated by the NGO sector – in particular the Voluntary Child Care sector,

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<sup>23</sup> Families Matter page 9

which provides so many of the Family Support services regionally. The Community Health and Safeguarding responsibilities of the five Health and Social Care Trusts require that they both mandate and lead the local processes – and this also requires a more pro-active role for Gateway Teams in relation to other providers in local communities. There is potential for significant added value to, and from, the active involvement of the other statutory partners – extended schools, prevention of offending initiatives are examples. The challenge of supporting children and families in order to strengthen social networks and promote better social cohesion speaks directly to the concept of promoting social capital, and it is interesting that a number of the core standards address areas that have been regarded as the domain of the social economy/community development sector – building informal networks, promoting social inclusion and community partnerships.

Work on pilot sites to date has begun to identify a number of practical steps or building blocks in the action planning phase. Examples of work in progress include:

- Mission Statement with Partners;
- Facilitation of User, Provider and Community input;
- Partner Feedback Processes;
- Information sharing Protocols;
- Active Use of Family Support Data base;
- Co-ordinated Needs Assessment in Individual Cases;
- Clear and Transparent Relationship with Gateway;
- Development of Resiliency based User Evaluation;
- Review Referral Pathways;
- Processes at local level to Measure and Track Community Outcomes;
- Statements of Standards;
- Monitoring of Standards;
- Interfaces with Level 3 and 4 services;
- Piloting Embedded Safeguarding Posts in Local Hubs – interestingly, advocated in the 2nd Interim Munro Report ‘The Childs Journey’ (2011).

Statutory services sign up to this process was hampered initially by the pressure to focus on core business-child protection. However there is now recognition that this process could help with the pressure.

Having information about the available services was a challenge. This has been resolved by the development of the regional family support database which lists all family support providers across Northern Ireland.

At the core of this process is the voluntary and community sector. Protecting the funding of the organisations which are involved was a challenge. This was helped by a dedicated funding stream.

#### • **Successful elements**

- The development of the Children and Young Peoples Strategic Partnership to provide leadership in developing collaboration and aligning funding streams. This has helped to build a consensus that early intervention and family support is critically important.
- Involvement of the voluntary and community sector in all aspects of this process.
- Involvement of children young people and their families in all aspects of this process.
- The development of a process for measuring outcomes at regional level. The development of core outcomes and indicators that developed a shared language that all organisations could identify with and work towards.
- The creation of a specific Family Support funding stream.
- The development of a network of Hubs and Locality Planning groups across Northern Ireland.
- The development of the evaluation tool.

#### • **Must do's & Don'ts**

- Must be Led by Voluntary and Community sector (expertise in prevention recognised, less stigma).
- Must include a statutory person (identify and respond child protection concerns).
- Must be informed by views of children, young people and parents.
- Funding must support the process.

## **IMPLEMENTATION ELSEWHERE**

- **The potential for implementation/ application/ adaptation/ transfer/ of the practice in other contexts/settings**
  - Elements of this process can be used in other areas where there is a strong tradition of voluntary activity in family support as these organisations will make up the Hubs and be part of Locality Planning.
  - It needs to be underpinned by a process of integrated planning across statutory organisations and a commitment to working across agency boundaries.
  - It is helpful if it is accompanied by family support funding or for a strong family support funding base to already exist.
- **Which elements are non-negotiable?**
  - Voluntary-statutory partnership;
  - Integrated planning;
  - Commitment from voluntary sector and statutory sector.
- **Which elements can be adapted to suit other contexts/settings?**
  - Range of organisations that make up the Hub and the types of services provided.
  - The Hub focus can be universal or more targeted. The thresholds for access to Hubs and access to statutory services.
- **Necessary conditions for application or adaptation elsewhere (e.g. training/ presence of a manual/ protocol/ guidance for transfer or implementation)**
  - Training for organisations making up the Hubs to cover issues such as information sharing, child protection etc. all of this is currently being developed across the Hubs in Northern Ireland.
  - Training and support in needs assessment and outcome based planning for Locality Planning members.

## **MORE INFORMATION**

- **Contact information**
  - Maurice Leeson, Assistant Director Children's Services Barnardo's NI (02890672366) [maurice.leeson@barnardos.org.uk](mailto:maurice.leeson@barnardos.org.uk) for Hubs
  - Pip Jaffa, Chief Executive, Parents Advice Centre (02890310891) [pip@pachelp.org](mailto:pip@pachelp.org) for Parenting Support
  - Ann Godfrey, Children's Services Planning Professional Advisor (02890553620) [ann.godfrey@hscni.net](mailto:ann.godfrey@hscni.net) for integrated planning
  - Anne Hardy, Children's Services Planning Officer (02825311208) [anne.hardy@hscni.net](mailto:anne.hardy@hscni.net) for Locality Planning
- **Relevant documents**

Families Matter: <http://tinyurl.com/3jjhrk6>

Outcome Monitoring Report: <http://tinyurl.com/4yfna9h> Early Intervention: <http://tinyurl.com/3vrrzbq>

### THE APPROACH

- **Its name**

“Familienzentren” (family centres) in the German federal state of North Rhine-Westphalia (NRW)

- **Its history & underlying (theoretical) principles (why & when was the practice introduced?)**

Between 2006 and 2012 approx. 3,000 of the total 9,000 child care centres in the German federal state of North Rhine-Westphalia (NRW) are being developed into certified “Familienzentren” (family centres). Family centres are designed to bundle services for families in the local community. The concept of the state programme “Familienzentrum NRW” acknowledges the significance of early support and intervention for children and families and was introduced in the context of the PISA-Shock in Germany but also the growing number of families being challenged in their role as parents and the public debate around high-profile cases of child neglect. A family centre can receive financial support from the state of NRW in the form of a yearly endowment of €12,000, if they attain a certification by means of an external evaluation. As an output-controlled system, the certificate regulates the family centres' provisions in the areas of family consultation and education, the placement of child minders and the reconciliation of work and the family. In spite of limited resources, the introduction of family centres has, after a relatively short time, already led to a high acceptance rate, a considerable increase in service provision and to positive effects for children and families. Within the framework of the state programme, family centres have become an important trademark and make a substantial contribution towards achieving the political goal of turning North Rhine-Westphalia into Germany's most child- and family-friendly state.

- **Its target group (universal and/or targeted approach; if and what specific group of families/ parents are addressed?)**

Family centres are driven by a universal approach and therefore address all parents and their children. In addition, a special focus is set on immigrant and educationally deprived families as horizontal aspects in the quality standards of the certificate “Familienzentrum”. The quality criteria serve as a basic structural framework for the setting up of services while allowing each family centre enough flexibility to develop its own profile of services tailored to the demands of the local community.

- **Accessibility (what is done to reach the whole target group/ promote their access to the services?)**

In Germany, almost all children between 3 and 6 years of age attend a regular child care centre. This is the reason why these institutions are particularly suitable to implement comprehensive support services, since they are easy to reach for children and families and enjoy a high level of trust in their work. Family centres can therefore create low-threshold services for children and families by linking up the existing family support services of the local infrastructure. In addition to offering learning activities for parents, cooperation with the local family counselling agencies is a central element in the context of this integrated approach. To achieve easy accessibility for families, representatives from counselling agencies and other professionals (e.g. from health care) offer regular consultation hours and information sessions in the rooms of the family centre. Furthermore, parents and families are actively involved in the planning and realisation of own activities and projects. Families who are hard to reach are visited at home by the centre staff to identify their individual needs and to get a better picture of their individual living environment. Moreover, the quality criteria ensure that off-site services offered by partner agencies are easy to reach and at a short distance to the families' homes (at a maximum walking distance of 1.5 km from the centre. There are special arrangements in rural areas).

- **The objectives (preferably formulated in terms of intended measurable outcomes & make a distinction between short- & long term objectives)**

The overall objective of the state government of North Rhine-Westphalia is to develop 3,000 of the total 9,000 child care centres into certified family centres between 2006 and 2012. The project was launched in 2006 with a state-wide competition for child care centres to be chosen as the first 250 family centres in a pilot phase. The selection procedure was based on a balanced regional distribution and on the proposals of the applying child care centres which had to correspond to the four conceptual pillars (language & literacy support, local partnerships with other services, cooperation with child minders, developing services according to local needs). After a gradual expansion, 2000 family centres had already been established by summer 2010. For 2011, it is planned that there will be approx. 250 newly certified family centres and also the first 250 re-certifications of the family centres from the pilot phase. Thus, the goal to have 3000 family centres by 2012 seems absolutely realistic.

- **The activities carried out (what form is family support provided in: informal/ semi-formal/ formal & kind of support provided: skills/ information/ training/ material support/ psychological/ social support)**

Family centres are designed to strengthen parenting skills as well as to improve the reconciliation of working life and family life. Acting as the hub of a network of family and child welfare services, family centres are in a position to offer parents and their children advice, information and assistance in all phases of life at an early stage. A family centre should develop child care centres into places for learning and gathering experience for children and their parents as well as enhancing parenting skills. Parents should get immediate and straight-forward assistance in resolving everyday challenges. A family centre should provide greater flexibility in terms of child care service hours as well as the mix of age groups by extending a variety of provision in partnership with families and child minders. At the same time, the centres should function as places for meetings and organising activities in the neighbourhood.

- **The way activities are carried out (e.g. face- to-face vs. media-based practices; individual vs. group based; centre-based vs. home-based)**

The ways of carrying out family and parenting support services are flexible and depend on the individual strategy of the centre, which is usually tailored to the needs of parents and families in the local community. Services can be set up as group seminars, info sessions, face-to-face counselling between parents and the centre leader, specialised staff members or partnering professionals.

- **Participation of parents & children in planning, organisation, developing, executing supporting and/or evaluating the practice)**

The participation of families in planning and organising activities is directly addressed by the certificate and covered through the quality criteria. Apart from regular enquiries on the wishes and needs of families at the beginning of each kindergarten year, there are several opportunities for participation (such as parents' council, self-organised projects and excursions, etc.).

- **Promotion of the approach (how are parents made aware of its existence)**

Families are made aware of the existence of family centres by information material (brochures, flyers, also in different languages) which is available at central contact points for families in the neighbourhood (e.g. paediatricians, supermarkets, partner agencies, local authorities' counselling services etc.) and through word-of-mouth advertising by professionals and by other families who already benefit from the services of family centres.

- **Quality assurance (e.g. what standards must the parties involved comply with?, how do parents know the approach is of good quality?)**

From the outset, one of the key objectives of the programme has been to establish comparable quality standards for the working of the family centres, thereby ensuring the output quality of services.

The quality seal offers the basic framework for the organisational processes and the activities carried out in a family centre. First and foremost, the quality seal encompasses features that are crucial to the provision of readily accessible services and opportunities designed to foster and support the development of children and families. The quality standards are structured as follows:

#### A. Service Areas

1. Counselling and support for children and families
2. Family learning and educational partnership
3. Child minders
4. Work-life balance

#### B. Structural Areas

1. Networking in the local community
2. Cooperation and organisation
3. Communication
4. Development of services and self-evaluation

These features are defined in a total of 94 quality criteria, which are subdivided into basic and additional features. Given this background, centres do not have to match all criteria to pass the certification procedure but are rather flexible to develop an individual service profile based on a set of common basic features. The quality seal is awarded by an independent external certification body. It is valid for four years and is awarded after passing through a comprehensive

certification process, including an internal and an external evaluation. After the first period of validity, the family centre has to pass through a re-certification process to keep the seal.

The relevant activities with regard to family and parenting support are covered by the service areas 1 and 2. Moreover, the quality seal is 'concept-bound', i.e. a bundle of criteria is evaluated that constitute a family centre as a whole. This ensures that the standards cannot be regarded as evidence for the pedagogical quality as such, as they are not meant to define the "core business" of early childhood education and care. Therefore, the quality seal can be understood as a certificate which acknowledges that the certified institution meets a specific number of quality standards.

The quality seal acts as a "trademark", thus every existing family centre is certified on the basis of the quality standards, otherwise it would not be allowed to call itself a "Familienzentrum NRW". The centres see the quality seal as a benefit in two ways: externally, the seal clearly signals accredited service quality with transparent standards to families and other institutions from the neighbourhood. Therefore, it helps to raise public awareness and to gain appreciation for the work that is done by family centres. Internally, the centre staff - together with the partner agencies - are committed to providing comprehensive child care and family support services on the basis of a common framework with binding cooperation agreements. The additional public funding of €12,000 p.a. that family centres receive is another significant incentive.

Family centres use the standards of the quality seal as a basic framework for planning and setting up their services. The relevant activities with regard to family and parenting support are covered by the service areas 1 ("counselling and support for children and families") and 2 ("family learning and educational partnership") of the quality seal.

The first service area encompasses the provision of information on health, counselling and special needs services in the neighbourhood. Other aspects are the cooperation with the local family counselling agency, setting up a playgroup for parents and children or the use of a screening system for documenting child development. This service area is broadly covered by most of the centres and has therefore attracted wide interest of the centre staff right from the start. In many cases, centres could connect this area to services which already existed before the start of the programme.

The second relevant service area (family learning and educational partnership) includes parental training courses, informal meetings for parents (breakfast, café), information sessions on educational topics, language classes for parents, and diverse activities for families with cultural, creative, sports or health related themes. The focus of these services can vary depending on the socio-economic context of the local community. Some of the activities are run by the centre staff, but most of them are realised through partnerships with other education providers.

## **SERVICE PROVIDERS, THEIR STAFF & INTEGRATED WORKING**

- **The agencies, organisations, stakeholders & practitioners (which parties are involved in planning, organisation, developing, executing and/or supporting the practice?)**

The services of a family centre are provided through a network of partners from the local community, with the child care site being the central hub. From there, integrated services are coordinated, e.g. with the primary school in the neighbourhood, the local family counselling agency, with child minders and other child and family related services provided by churches, family education centres, independent associations, etc. In addition, selective cooperation with other institutions e.g. the local library, retirement homes for the elderly, and sports clubs serve to realise varied activities for children and families throughout the year. Integrated working is therefore the key element of service provision in family centres. This requires an intense collaboration and co-ordination between the different stakeholders and organisations at the local level. A growing number of child care centres also makes use of the possibility to bundle their services together with up to five other centres in the neighbourhood, thus being certified together as one "bonded family centre".

Apart from the local practice of each of the approx. 2000 family centres, the overall coordination of the state-wide programme and the scientific programme evaluation is achieved through the cooperation of the state government, local authorities (youth welfare offices) and non-governmental organisations, including the following parties:

- Family Ministry of North Rhine-Westphalia (Ministerium für Familie, Kinder, Jugend, Kultur und Sport des Landes Nordrhein-Westfalen) (programme holder);
- Youth welfare offices on state level (Landesjugendamt Westfalen-Lippe, Landesjugendamt Rheinland (licensing authorities));
- PädQUIS - Pädagogische Qualitäts-Informationssysteme GmbH and Konkret Consult Ruhr GmbH (agencies responsible for the certification process);
- Institut für soziale Arbeit (ISA) (consulting and support for child care centres on their way to become family centres);
- Institute for Work, Skills and Training (IAQ), University of Duisburg-Essen (responsible for the selection and consulting of pilot centres).



- **Extent to which the practice is rooted in local authorities/ NGOs experience of service delivery to families and parents.**

The local youth welfare offices are responsible for choosing a certain number of child care centres in their district as “candidates” to be developed into family centres. The number of candidates is predefined by fixed quotas set by the state government. This process corresponds to the logic of the local youth services planning which is responsible for the local infrastructure: the planning for the provision in the single communities and the co-ordination among service providers is rooted locally. After being chosen, candidates receive additional state funding of €12,000 for one year which should support the process of setting up services and entering the certification procedure. Meanwhile, many of the youth welfare offices see the development of family centres as an important strategic vehicle for local policy making and they actively support this process. In this context, the local authorities are increasingly offering support measures, such as specific working groups, coordination offices, etc. In particular, the partnership with local child minders and the exchange of experience with other family centres in the same district is supported. Youth welfare offices moreover provide relevant socio-economic data and assist family centres to get in touch with potential partners from the community.

- **The involved staff: nature (professionals/ volunteers) and their education & training, guidance & support**

The staff involved consists of trained child care centre staff (educators) who work together with qualified child minders, and professionals from cooperating institutions. Often, parents and families volunteer to carry out projects and additional activities. The quality certificate includes the training for family centre staff (team trainings, coaching, concept development) as a team and also requires individual specialisations from single team members to broaden the scope of activities (e.g. working with migrants, literacy, health & nutrition, sports). Pilot centres received substantial training to develop their concept.

- **Integrated working (Interdisciplinary co-ordination between the parties involved)**

Since integrated working is the centrepiece for setting up comprehensive family and parenting support services, family centres are establishing steering committees with representatives from the partners involved that meet on a regular basis. Thus, a permanent communication flow is guaranteed.

## **POLITICAL CONTEXT & SUPPORT**

- **Political context (relation to national frameworks & local policies, in particular those dealing with poverty & social exclusion)**

The programme corresponds to the political context of nationwide initiatives for the quantitative and qualitative expansion of child care centres. Family centres are intended to raise awareness of the importance of early education and care, to develop it further and to make it more transparent and comparable across regions. Other significant political goals are to support parents for their educational and parenting tasks and to ensure the reconciliation of family and employment.

- **Funding (duration: permanent/ temporary/ project-based, sources: EU/national/ local/other/ mix & possible changes in relation to economic crisis)**

A family centre that has been awarded the quality seal is entitled to receive additional public funds of € 12,000 per year under the Child Education Act of the federal state North Rhine-Westphalia. Since the quality seal is valid for four years and the pilot centres were certified in summer of 2007, the first family centres are being re-certified right now.

- **Other forms of facilitation (e.g. making meeting space available/ providing training materials)**

This aspect is also covered by the quality criteria of the seal. Meeting space should be made available for the child minders who cooperate with the centre. Parents and families should also have the possibility to use the space for self-organised activities and projects.

## **LESSONS LEARNED**

- **Set up of the evaluation (e.g. longitudinal study/ user evaluations)**

In the course of the scientific programme evaluation, a number of surveys were carried out in 2006 and 2008 with parents, family centre staff and with staff from “regular” child care centres as a reference group. A qualitative analysis was conducted with a sample of 26 participants from the pilot phase. In addition, online surveys were carried out in early 2008 with representatives from local youth welfare offices, family counselling agencies, and family education centres.

- **Main achievements/results/ impact/ output & outcomes (what works, why and for whom?)**

The main results from the surveys can be summarised under the following aspects. This section includes possible changes, challenges and first solutions:

- **Centre leadership and team**

The development of child care centres into family centres brings new challenges for the leadership and the working of the centre staff. Centre leaders increasingly see themselves in the position of a manager. This implies an increasing demand on management training, especially to cover aspects of human resources development.

The integrated approach of collaborating with partners from the community requires time for coordination and strategic planning. Though tasks are becoming more complex and time pressures are rising, centre leaders have noticed a growing appreciation of their work. The degree of involvement of the team depends largely on the individual work organisation and the leadership culture of the centre.

- **Counselling and support for children and families**

Partnerships with family counselling agencies are crucial for the support of children and families as a key part of the concept of family centres. Through the integration of professionals from these agencies, services can be centralised and become easily accessible for families. The centres highlight the positive aspects of the partnerships. On the other hand, the capacities of the public counselling agencies are limited – with regard to a growing number of family centres, a major challenge lies in the coverage of the increasing demand for on-site consultation hours in all family centres of a local community. Some of the youth welfare offices have reacted by developing funding models to employ additional professionals in the counselling agencies. It would therefore make sense to assess the experiences with different concepts for family counselling that have so far been developed in cooperation between family centres and the local counselling agencies. Based on such a re-assessment, adequate quality criteria could then be defined and integrated into the standards of the quality seal. It would be wrong to reduce the quality requirements, since the linking up of services and counselling is a significant element in the work of family centres. In fact, additional resources have to be provided through local solutions and through the support of the state government.

- **Family learning and educational partnership**

Partnerships with other professionals and providers of family education provide significant support to family centres, since they can delegate such work to specialised institutions in the local community. This requires, however, an agreement on common goals before the services are set in place so as to be able to offer effective services tailored to specific target groups. During the course of the programme, an increasing number of family centres complained about the fact that parents do not call upon the broad range of activities that are offered. Therefore many family centres concluded with regard to their service planning that often “less is more”. The coordination and management of activities and services is therefore of increasing importance to optimise and regulate the service provision in local communities and to avoid unnecessary competition.

- **Child minders**

The links to the child minders and child care centres (service area 3 of the quality seal) have remained one of the major challenges for family centres. This aspect is not only about placement but primarily includes the processing of information, the development of solid partnerships with child minders, and supporting their training and interconnection. A combination of centralised structures (e.g. qualified agencies in the local community) and decentralised models of cooperation (information and guidance on-site in the family centres) has proved successful.

- **Work-life balance**

The improvement in parents' work-life balance facilitated by the family centres is mostly realised through detailed surveys on the parents' demands for care hours and through the placement to additional care providers in the neighbourhood who offer extended care hours that the centre is not able to cover. The extension of standard care hours by the centre itself (mostly after 5 pm) and the building of partnerships with employment authorities and with local enterprises have only rarely been realised. However, service provision for under 3-year-olds has increased massively in the whole country. The evidence from the surveys shows that the extension of their working hours gains only little acceptance from staff compared to other topics addressed by the quality criteria.

This is mainly due to uncertainties and the fears of the centre staff regarding the development of individual working hours and the pedagogical concept for extended care hours.

Some of the youth welfare offices have started initiatives and projects for extended care hours until 8 pm, but these initiatives have remained isolated in a few local communities and were not spread to other regions. Clear funding structures and innovative working time models are still needed.

- **Effects of the practice for integrated working, on breaking the intergenerational transmission of poverty, helping children achieve their full potential & national policies**

The programme “family centres” fully corresponds to the public debate on early support services for children and families, especially from deprived areas, to break the intergenerational transmission of poverty. The special combination of the services provided by the family centres allows educational work to be intensified and language deficits, especially among immigrant children, to be identified sooner and to be reduced systematically on the basis of individual tutoring. Children's strengths and weaknesses are identified at an early stage and parents receive tailor-made counselling on education, training, healthcare etc. as soon as possible.

- **Cost-effectiveness**

Unfortunately, there is no clear evidence from the programme evaluation on its cost-effectiveness. The effects of cost-effectiveness have not been measured in quantitative data. However, it can be said that the role model of the state initiative in North Rhine-Westphalia has gained widespread recognition all over the country, since it has introduced a region-wide shift in the concept and service provision of child care centres.

- **Successful elements**

A general positive feedback on the concept “family centres” is found in all the qualitative and quantitative surveys, be they among the family centres themselves, among parents, among family education centres or among family counselling agencies. The government objective of a state-wide expansion of family centres is positively recognised by three-fourths of all youth welfare offices who participated in the online survey.

Most of the 2000 parents surveyed were satisfied or fully satisfied with the services of family centres. As a result of this family centres were preferred to regular child care centres. This should not be understood as a criticism of the work of regular child care facilities but as support for the additional family and parenting support services provided by family centres. From the perspective of centre leaders, the development process of becoming a family centre has raised awareness of the already existing services in the local communities by building partnerships and networking with other institutions. Centre leaders feel that their work has become more varied and interesting through these cooperations and that their professional reputation has improved as their work is more transparent for the local community and thus more appreciated by other parties.

## **IMPLEMENTATION ELSEWHERE**

- **The potential for implementation/ application/ adaptation/ transfer/ of the practice in other contexts/settings**

The concept of “family centres” has the potential to be transferred to other contexts or settings. First of all, this requires a clear political will to implement the development of child care centres into family centres. The political initiative has therefore to be set up region wide, depending on the underlying cultural conditions and political context of the region. In Germany, this initiative has been conceptualised as a state programme, but the adaptation to other regional scales is also possible. With the launch of the programme, the permanent and clear communication of the intention and the objective of family centres (namely acting as service hubs in the local community to establish a comprehensive network of support services for children and families) is essential to counter interpretations that regard the concept as an intensification of competition among child care centres or as an additional burden for centre staff.

This aspect might seem to be taken for granted, but the evidence shows that the overall objective is not always clearly transferred between the parties on the different levels involved in the process. This addresses especially the communication flow between the administrative structures on the regional and local level (e.g. among the public authorities and the different provider organisations in Germany). The programme evaluation has shown that these coordination processes between the different levels of administration are very important for successful programme governance. Another significant point is the legal establishment of the concept, thus creating a common binding framework with clear regulations. In doing so, the government of North Rhine-Westphalia introduced and legitimated the additional competences of regular child care centres in the service areas of the quality seal and is able to regulate the funding for family centres.

In addition, the quality seal is the centrepiece for the governance of the programme, acting as a concept bound system for quality assurance. The transfer and the adaptation of this system should be unproblematic, since similar models of output-control are well-established in other countries and there are many international examples proving successful

implementation. With regard to the contents of the quality criteria, an application to different settings should not cause any difficulties, since the criteria do not interfere with different pedagogical concepts or the individual practice in child care centres. The focus is on the range of services and the organisational structures to provide comprehensive support for children and families. The broad set of quality criteria allows family centres to implement their activities and services flexibly, according to the local needs and the working culture of the centre.

For the practical implementation, a pilot phase can foster the process of adjusting and developing the concept with practitioners right from the start. In this context, the scientific evaluation is an important instrument to monitor the process of programme implementation and to develop strategies to continuously optimise the concept.

The consulting and training of practitioners (leaders and centre staff, professionals from partner institutions) is also a central prerequisite for the process of an on-going organisational development and supports centre leaders in coping with the new management and coordination tasks. It is therefore essential for provider organisations and government actors to provide practitioners with adequate resources.

## **MORE INFORMATION**

### **• Contact information**

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### **• Relevant documents**

All relevant publications on the scientific evaluation of the programme are available as downloads on (only in German) [www.paedquis.de](http://www.paedquis.de)

For general information on the programme, visit the official website of the Family Department of North Rhine-Westphalia: [www.familienzentrum.nrw.de](http://www.familienzentrum.nrw.de)

Further reading:

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## THE NEW FUTURES MODEL (IRELAND)

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**Our ambition** is to address the extent to which welfare to work impacts on the goals of national programmes and initiatives aimed at those parenting alone and to also address issues concerning the development, implementation and effects of activation policies. For example, to what extent such policies make a difference; what aspects of them have the greatest significance; is it the provision of necessary skills and qualifications, or is it tailor-made action plans, which increase the person's prospects of finding and keeping a job?

**Our mission** is to foster a culture of excellence in welfare to work policies and initiatives aimed at those parenting alone; promoting methods that encourage active engagement and critical thinking; and to assert One Family as the leading expert in welfare to work for lone parents policy to practice.

### **TERMS OF REFERENCE**

1. The Centre will lead to support the development and delivery of best practice in welfare to work policy and practice and to ensure continuous improvements.
2. The Centre enables strong links between public, private and independent welfare to work research, policy and practice.
3. The Centre fosters a multidisciplinary approach to research and learning and the translation of research into policy and welfare to work practice.

Its priority is to use the wide range of unique opportunities that exist in Ireland with a distinctive approach to integrated welfare to work services and well-connected civic and public sector structures, to research the social, economic environmental determinants of welfare to work and the main causes of inequalities experienced. The Centre is a virtual hub of knowledge and expertise in welfare to work practices. The Centre has a panel of experts (Advisory Panel) which counsel, scrutinize and promote best practice in welfare to work and are drawn from across disciplines and sectors.

### **NEW FUTURES, INSPIRING PRACTICE: ASPIRING IMPACTS**

#### • **Background and Influences on the Inspiring Practice**

In a climate of economic and social pressures strong and robust inter-agency working becomes an essential tool. This is particularly the case in to-day's Ireland as we experience and respond to challenges and pressures of shrinking funding. The critical challenge is to promote and balance the demand for support services targeted at disadvantaged groups and the need for the State to reduce public spend. The Social Welfare (Misc Provision) Bill of 2010 provided for changes to the one-parent family payment. The Government believes that the current arrangements, whereby a lone parent can receive the one-parent family payment until their child is 18, or 22 if in full-time education, without any requirement for them to engage in employment, education or training, are not in the best interests of the parent, their children or society. Despite improvements made to the one-parent family payment over the years and significant spending on supports to lone parents, a large proportion of lone parents and their children are still experiencing poverty. The child of a lone parent is four times more likely to be in consistent poverty than the population overall.

In general, the best route out of poverty is through employment. It is that work, and especially full-time work, may not be an option for parents of young children. However, supporting parents to participate in the labour market, once their children have reached an appropriate age will improve both their own economic situation and the social wellbeing of themselves and their families.

The Department of Social Protection has undertaken a comprehensive review of the one-parent family payment and developed proposals which are designed to:

- Prevent long-term dependence on welfare and facilitate financial independence;
- Recognise parental choice with regard to care of young children but with the expectation that parents will not remain outside of the labour force indefinitely, and
- Include an expectation of participation in education, training and employment, with supports provided in this regard.

Therefore to meet these social policy objectives, the Bill introduced changes outlined to one-parent family payment. For new customers, from 2011, the one-parent family payment will be made until the youngest child reaches age 13 years. For existing customers there will be a tapered 6 year phasing out period to enable them to access education and training,

to prepare them for their return to the labour market. Therefore, the age 13 cut-off point will only come in to effect for existing customers six years from now, in 2016.

If the child is in full-time education there is also a special provision for existing one parent family payment recipients. In this case, payment will continue until the end of the 2012 – 2013 academic years or until the child reaches age 22 - whichever is the earlier. When the youngest child reaches age 13 years if the parent is still in need of income support, they could claim jobseeker's allowance or another appropriate income support payment, or if in employment, family income supplement.

One Family is conscious that many lone parents will need access to education, training and enabling services such as childcare provision in order to acquire the skills they will need to gain employment. With regard to childcare, a revised community childcare subvention scheme was introduced in September, 2010. This new scheme has a labour activation focus and One Family advocate for this programme to strengthen child care supports available to lone parents, after-school services and homework clubs.

Internationally there is a general movement away from long-term and passive income support, for example, in the United Kingdom lone parents are required to seek work when their youngest child reaches age 10. From October 2010, the minimum age will be further reduced to 7. In Norway, Sweden, Germany and Italy there is a work obligation when the youngest child is aged 3. In fact, it was initially proposed in the Government Discussion Paper 'Proposals for Supporting Lone Parents' (2006) that a 'Parental Allowance' would continue until the youngest child reached the age of 7 years. However 13 years is considered to be a more appropriate age for this change as the need for childcare will lessen from that age. This change to the one-parent family payment will bring Ireland's support for lone parents more into line with international provisions where countries achieving the best outcomes in terms of tackling child poverty are those that are combining strategies aimed at facilitating access to employment and enabling services with income support. However the range spread and reach of childcare, parenting and family support services will determine the successes of this programme. The nature and way Ireland has traditionally delivered services to disadvantaged people and communities has been substantially different from advanced European models of parenting and family support services. This difference manifests itself in that traditionally the role of local authorities in commissioning services has been very limited; that the State, through semi-state agencies has delivered an over generic agenda; with financial support for innovative, creative and enterprising practices and partnerships being delivered through short-term funding initiatives, and often through European funding provision.

This has meant that the sustainability and mainstreaming of initiatives focused on disadvantaged people and communities have been sluggish, time limited and has limited reach and measurable impact.

If we review the recent OECD, 'Doing Better for Families' 2011, which is cautious in its recommendations, and is careful not to single countries out for criticism, but the array of data presented in the report shows clearly that Ireland has a long way to go if we are to meet international standards in parenting and family policy.

Therefore, One Family promotes and communicates that:

- Early childhood is the most important time for public investment in human capital, and children's early years should be protected from 'austerity cuts'. At a time of pressure on Government budgets, the report suggests prioritising public expenditure on services and supports for young children. The report notes that public investment in early childhood services is particularly low in Ireland.
- Public support for childcare services should be linked to work-life balance policies and to the timing of parental leave to ensure a continuum of support without 'gaps'. 'A coherent policy approach for the early years would ensure that childcare, (parenting and family) services are available when leave benefits run out.'
- Reducing child poverty requires a carefully designed policy-mix, including both income supports and the provision of services. The report looks particularly at lone parents, among whom poverty rates are high in Ireland , and argues that making benefits conditional on looking for jobs 'can only be expected to work if suitable, reasonably priced childcare (parenting and family) supports are available'. The report notes that childcare costs for parents in Ireland are among the highest in all OECD countries and create a major disincentive to work, particularly for lone parents.
- To promote child development, the quality of childcare is critical (with the greatest benefits arising from 'high quality formal care') as is good parenting.

- **Services Development and Delivery of the Inspiring Practice**

In 2008, the FÁS Social Inclusion Unit and Finglas FÁS Training Centre engaged with One Family to pilot New Futures, an innovative and highly successful cost effective, motivational, interagency progression programme designed specifically for lone parents in Dublin to respond to the Government’s programme of activation.<sup>24</sup> (FÁS is Ireland’s National Training and Employment Authority with the remit to ‘enhance the skills and competencies of individuals and enterprises in order for Ireland to further develop as a competitive, inclusive, knowledge-based economy’. It strives to do this through the provision of tailored training and employment programmes that suit everyone’s needs.)

The uniqueness of this programme is that parenting and family supports underpinned a career and personal development programme geared at those parenting alone. The programme’s objective was to develop a flagship community programme to support those parenting alone or those who are sharing parenting to re-engage with the labour market and/or education, training and skill development. The initiative promotes, communicates (and delivers) the value of parenting and family supports and offers a greater focus on the needs and supports of those parenting alone (and those who are sharing parenting) whilst delivering a step-change in awareness amongst stakeholders.

The New Futures model is based on international best practice for supporting groups most displaced from the labour market and incorporates proactive community-based recruitment, thorough needs-assessment, key-working, a FETAC accredited (and FÁS quality assured) career planning programme with wrap-around specialist parenting and family support services (see the programme model in Appendix I; the programme Underpinning Values Appendix II and the training programme description in Appendix III).

Evidence shows some of the situational, dispositional and emotional barriers faced by this target group are unique to them<sup>25, 26</sup>. Specialist wrap-around parenting and family support services, e.g. parenting, solution focused counselling, relationship problems and information contribute to removing specific barriers such as balancing work/ education with full-time parenting. Once these barriers have been ameliorated lone parents can then move on to other career and professional development opportunities.

One Family works in two main areas: Parenting and Family Support and Progression: Welfare to Work.

We operate an Innovation to Mainstreaming model defined by One Family Services and Policy to Practice that is:

<b>Identification of problem</b>	→	<b>Service Response</b>	→	<b>Mainstream</b>
<ul style="list-style-type: none"> <li>• Client work</li> <li>• Consultation</li> <li>• Evidence-based research</li> <li>• Policy analysis</li> </ul>		<ul style="list-style-type: none"> <li>• Develop response</li> <li>• Pilot response</li> <li>• Evaluate</li> <li>• Revise</li> <li>• Repilot</li> <li>• Develop training products</li> </ul>		<ul style="list-style-type: none"> <li>• Pilot with mainstream agencies</li> <li>• Roll out training products</li> <li>• Quality assurance</li> </ul>

Based on the success of this programme in Dublin, and respecting our innovation to mainstreaming model we partnered with the Galway City Partnerships to build on the previous success, to enhance the capacity of local partner and to extend the tools necessary to mainstream the initiative to specific groups of lone parents. Galway City Partnership is one of 57 Integrated Local Development Companies in Ireland. It is a not-for-profit company which targets the areas of greatest need, to provide an area-based response to long-term unemployment and to promote social inclusion across three measures – Services for the Unemployed, Community Development and Community Based Youth Initiatives.

Galway City Partnership is an implementing body and is a company limited by guarantee, without share capital. Galway City Partnership, in some ways acts as a proxy for and in similar ways to a local municipality in other jurisdictions.

The aim of Galway City Partnership is to tackle poverty and social exclusion through partnership and constructive engagement between Government and its agencies and people in disadvantaged communities. This is underpinned by four high level goals:

<sup>24</sup> Evaluation of New Futures pilot (2010) Eustace Patterson.

<sup>25</sup> One Family (2008) *Lone Parents and Employment: what are the real issues?* One Family: Dublin.

<sup>26</sup> The Nurture Programme. (2005). *Lone Parents in Dublin South Central: Working Towards Inclusion*. Dublin South Central Social Inclusion Task Force: Dublin.

- To promote awareness, knowledge and uptake of a wide range of statutory, voluntary and community services.
- To increase access to formal and informal educational, recreational and cultural development activities and resources.
- To increase peoples' work readiness and employment prospects.
- To promote engagement with policy, practice and decision making processes on matters affecting local communities.
- To enable groups to objectively demonstrate the positive impacts they are securing for local communities.

#### • One Family Ethos in Parenting and Family Supports

One Family believe that by supporting parents to parent well will have positive impacts on both the parent and the child. Through our experience of working with parents we have seen that until the home becomes a positive place for the whole family parents do not engage in other roles within society very successfully. Children's wellbeing will also suffer if parents do not have a supportive and consistent approach in the parenting they offer, or if there is conflict.

Our aim is to sustain parents to form positive and supportive relationships with their children; to support parents to parent in the best way they can; and to ensure that the pressures, which parents experience especially within one-parent families, are seen as a challenge which can be overcome and not an obstacle which can cause negative impact on both the parent, the child and their relationship. One Family's parenting and family support programmes mirror the policy position on family policies adopted by Eurochild's thematic working group on family and parenting support in October 2010. Also, they recognise and respect the recommendations to EU member states, which are underpinned by:

- Promoting reconciliation within families;
- Creating a favourable policy environment for positive parenting;
- Communicating, promoting and investing in family and parenting support services;
- Communicating for an increase public investment in childcare services;
- Building capacity to ensure an effective governance coupled with effective resourcing;
- Fostering and reacting to evidence-based policy and practice.

Therefore, our parenting and family support services promote parent's confidence in their parenting abilities. There is evidence to suggest that while parents often have adequate knowledge and information on parenting strategies, they may lack the confidence in their ability to implement that knowledge.<sup>27</sup>

The New Futures Programme has been selected by One Family as both an example of best and inspiring practice. It employs a methodology which grows and promotes a high degree of co-operation and inter-agency work; is underpinned by access to and facilitation of parenting and family support services; which ensures that professionals and practitioners working within a wide range of family settings have the opportunity to learn and understand the key areas which affect families and in particular one parent families in a unique way. New Futures offers knowledge and skills to support the families they come into contact with by ensuring that more families work through these transitions in a positive way where children's wellbeing is at the forefront: the provision of parenting and family support services with in an activation programme has not previously been seen in Ireland.

#### • Rationale: New Futures Programme with parenting and family supports

The programme answers the following objective rationale concerning the needs of those parenting alone in Ireland:

1. A requirement to address the specific situational and personal barriers faced by lone parents through interagency working;
2. An obligation to address the psychological issues that 'lead to and reinforce social exclusion'<sup>28</sup> for lone parents as a prerequisite to progression exploration and action planning;
3. The need for state and semi-state services to have an improved, shared understanding of client management issues in order to successfully activate clients<sup>29</sup>:

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<sup>27</sup> Children's Experiences of Family disruption in Sweden: differential by parent education over three decades, Sheila Kennedy and Elizabeth Thomson, in Demographic Research, Max Plank Institute, 2010

<sup>28</sup> NESF. (2007). *Mental Health and Social Inclusion*. NESF: Dublin.



4. The limited capacity of the High Support Process (HSP)<sup>30</sup>.
5. Ensuring that both supply and demand side interventions are a part of any progression interventions that are aimed at lone parents;
6. Guaranteeing equal access to progression services as those on the Live Register<sup>31</sup>;
7. The need to combine group career guidance with individual guidance<sup>32</sup>.

#### • Aim, Objectives and Outcomes of the New Futures Model in Galway

To test the New Futures model with parenting and family support services in the context of the Local and Community Development Programme (LCDP) and its successor; to skill develop interagency partners in parenting and family support services; and in its delivery providing the learning needed to ensure the model can be mainstreamed.

#### • Project Objectives

- To raise knowledge, understanding and learning in the value of addressing parenting and family support services.
- To enhance an innovative, integrated, cost effective model of service delivery that can move welfare dependent lone parents in the community towards social and economic independence.
- To create mutually beneficial relationships with and between service providers with whom interagency co-operation is necessary to implement the model.
- To develop a skill development and engagement model to up skill the interagency partners in parenting and family support services to deliver the programme.
- To develop an interagency protocol for a high degree of co-operation between State and Semi-State agencies and relevant partners that can result in the successful progression of lone parents.
- To document changes to the model necessary for its mainstreaming on a national basis as well as the planned and unplanned outcomes for participants.
- To develop quality standards and processes for the delivery of the New Futures model.
- To evaluate, revise and edit the New Futures programme, the dedicated training resource needed to guide providers in the delivery of the group training aspect of the programme.

#### • Project Outcomes

- The processes, knowledge and materials to provide national training to ensure mainstream provision of the New Futures model and training programme.
- Up-skilling agencies, facilitators and stakeholders in their knowledge and understanding of parenting and family support services.
- Partner agencies understand and can deliver the New Futures skill development programme and parenting and family support services.
- Interagency partners understand the inputs, processes, and outcomes of interagency working and the pivotal role played in addressing parenting and family support needs.
- Interagency group has been able to develop individualised service referral and progression pathways for project participants.
- Interagency group says that relationships between all partners were positive and mutually beneficial.
- Interagency group has developed capacity to replicate the programme without guidance.
- Intra-agency learning about the target group has occurred for those agencies represented on the interagency group, particularly in the field of parenting and family support services.

#### • Project Outputs

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<sup>29</sup> OECD. (2009). *Activation Policies in Ireland: OECD Social, Employment and Working Papers No 75*. OECD: France.

<sup>30</sup> Ibid.

<sup>31</sup> Again, both reports make reference to this need.

<sup>32</sup> OECD. (2004). *Career Guidance and Public Policy – Bridging the Gap*. OECD: France.

- A proposed protocol for interagency working which provides a basis for how statutory and NGO collaborators can best support activation and remove barriers to it for lone parents;
- Audit indicating the skills demand in the local area;
- Documented training and engagement model for partners;
- Training of trainers on the New Futures model and a Professional Development;
- Award in New Futures: Parenting and Family Support Services, professional development practice accredited by FETAC and awarded at level 6 on the National;
- Framework of Qualifications;
- Documented quality assurance standards for the programme delivery;
- Set of processes and tools to be able to train others in delivery of overall New Futures model (i.e. parenting and family support services, recruitment, key-working, training course, progression) to ensure mainstreaming;
- Project evaluation report based on internal monitoring processes.

• **Building Capacity within the Local Partner**

The capacity-building part of the project will ensure that the Galway City Partnership who will receive in depth training to ensure they can deliver and/or facilitate delivery of parenting and specialist family support services for those parenting alone. One Family will deliver a professional development, train the trainers New Futures programme to relevant professionals who will benefit from the training and then be able to deliver the New Futures programme.

- Structured Recruitment and Selection Overview

The recruitment and selection process has been designed to assist in the selection of learners for the New Futures Programme. A thorough assessment of the learner’s knowledge, skills, and abilities is carried out. The structured process is an efficient and valid means by which to learn important relevant information about candidates; and the pressures and challenges they face in personal, family and parenting life. The structured questionnaire has been designed to tap the competencies that are necessary for being a successful parent and learner.

- The Role of Galway City Partnership

In order to set-up, manage and monitor the role of the Galway City Partnership in the delivery of the New Futures programme a Service Level Agreement was established based on clear assertions and defined outcomes. The relationship between One Family and Galway City Partnership is underpinned by this service level agreement. If services could not be delivered by Galway City Partnership (Internally) then they had to ensure that there are legally binding Service Level Agreements governing any authorised relationships and that such SLAs had to include all relevant obligations from the SLA between One Family and Galway City Partnership, to ensure efficient and appropriate implementation of the initiative, and must provide copies of the SLA to One Family on request.

The Service Level Agreement can be summarised as follows:

- To project manage the programme locally, as agreed with One Family, in an efficient and appropriate manner, including: (a) delivery of participant recruitment for New Futures Programme and (b) delivery of the following goals and targeted outcomes for the programme.

No of lone parents who have progressed onto the next step of an individualised career plan participants (started)	16%
No of participants completing	80%
No of achieving FETAC accreditation	90%
Participants identify that their self-esteem has improved as a result of taking part in the project	85%
Identify that their sense of isolation has decreased	85%
No of participants report increased motivation and commitment	90%
No of participants say that their quality of family life has improved	85%
Participant attendance rate for the programme	80%

No of participants who have completed an in-depth action plan for home-life, personal development and career.	85%
Participants satisfied with the training programme – facilitators and content	85%
Participants who: <ul style="list-style-type: none"> <li>o Addressed parenting and family support needs</li> <li>o See work as a source of enjoyment</li> <li>o Have identified and practised activities to help them foster self-esteem.</li> <li>o Know the stages of change and how to cope with change crises.</li> <li>o Learned and practiced how to use clear and direct communication to manage anger and role and relationship change.</li> <li>o Demonstrate knowledge of sources of progression information and support.</li> <li>o Identified their transferable skills in the context of today's labour market.</li> <li>o Identified their unique strengths and personalities and can match that to educational/ career opportunities.</li> <li>o Improved their research, decision-making, goal-setting and planning skills</li> </ul>	85%

• **New Futures Efficiency and Effectiveness**

When once-off costs are excluded the on-going indicative cost per participant is €5,370 which compares favourably with other interventions which are targeted at disadvantaged people and communities.

Irish ALMP Cost Per Participant Year (2010) €'000<sup>33</sup>

<b>Measures</b>	<b>Average cost per participant year</b>
Back to Education Allowance	9.2
VTOS	11.5
Bridging Foundation	15.7
Specific Skills Training	13.6
Return to Work	10.0
FAS training Centres and Community Training Workshops	17.6
Local Training Initiative	10.4
Youthreach	18.1
Traineeship	13.4
<b>Average of all training measures<sup>10</sup></b>	<b>15.5</b>
Back to Work Allowance	6.8
Part-time Job Incentive Scheme	6.4
<b>Average of employment incentives</b>	<b>6.7</b>
Community Employment 14.6	14.6
Job Initiative 24.3	24.3
<b>Average of employment incentives 15.2</b>	<b>15.2</b>

<sup>33</sup> Source: OECD, 2009, 'Activation Policies in Ireland', Social, Employment & Migration Working Papers, Number 75, OECD: Paris)

Unemployment Benefit 7.4	7.4
Unemployment Assistance 8.9	8.9
<b>Average of work income supports 9.4</b>	<b>9.4</b>

Monitoring and evaluation is embedded into the programme and includes an extensive set of performance indicators as well as a bespoke attitudinal questionnaire, which produces and yields before and after data that informs the fine-tuning of the programme and maximises stakeholder learning

#### • Success and reflection on New Futures

Overall, New Futures is very successful in achieving its stated performance indicators. We know from previous programmes<sup>34</sup> evaluation that this programme builds a clear, individualised pathway for those parenting alone to sustainable employment by assisting them to develop and reach the first step of their progression action plan. Simply put, our aim of partnership working means all stakeholders: state; semi-state; voluntary; community; and enablers are working together for the benefit of all the participants on our programmes. Partnership encompasses a broad range of actions, behaviours and attitudes that serve to promote change, innovation and productivity. Partnership working has improved quality of life in a manner that delivers mutual through the promotion of the value of parenting and family support services.

In seeking to encourage involvement, understanding and participation we have adopted a range of different practices, such as:

- Increasing learner involvement and engagement;
- Improving two-way channels of communication between all stakeholders;
- Developing more effective learner consultation arrangements;
- Implementing equality and diversity programmes;
- Improving problem-solving capacity;
- Prioritising support for learning and parenting and family support services;
- Fostering continuous improvement and experimentation initiatives;
- Adopting innovative approaches to excite learners and stakeholders on the value of parenting and family support services.

#### • Key Success Determinants

- Comprehensive client needs assessment
- Clear selection criteria and a selection process. Motivation and positive attitudes to training, education and work are key selection criteria.
- Access to parenting supports, e.g., positive parenting and family communication programmes, parent mentoring
- Access to family supports, e.g., social group, building a support network
- Access to independent information, e.g., finance, Free Legal Advice Clinic
- Access to one-to-one solution focused counselling support
- One to one engagement mentoring both formal and informal). The attributes of the coach/mentor are a crucial success determinant and include patience, understanding, flexibility, empathy, responsiveness, sensitivity, active listening, assertive communication and a practical solution-focused approach.
- Proactive, immediate responses to issues in the programme as they arose
- Inter-agency working, trust and relationships
- Researched and thought out programme design
- Clarity over the target profile of participants and communication of this to sources of referral
- Needs assessment and linking the findings to the provision of individual supports
- Induction (both formal and informal) to overcome fears and anxieties, to help participants to get to know each other, team members, facilitators and to build

<sup>34</sup> Eustace, et al. 2010, Evaluation of New Futures

- positive group dynamics
- Accredited skill development that combines self-esteem and confidence building with the acquisition of skills to address parenting and family supports barriers and to develop career plans
- Supporting participants to ensure they do not leave sessions raw, that they remain motivated and focused during breaks or after the course finishes and supporting them to access other supports or services
- Active management of the overall programme to ensure its smooth operation, coordination of internal and external services, on-going monitoring and review
- Flexibility to respond to individual needs as they arise
- Continuous in-depth review of each programme to enable programme enhancement.

Our partnership activities have been customised to meet local needs, and are part of an integrated strategy they are designed to foster trust, improve relations, drive learning innovation, in particular around the value of parenting and family support services in nurturing change. Our approach to partnership working has been as much about organisational culture as it is about processes or structures. Developing effective partnership has necessitated changes in mind sets, relationships and working practices. Indeed, the key to developing more effective partnership and inter-agency arrangements lies as much in the context, manner and spirit in which they are introduced and progressed as in the bundle of practices that are actually adopted.

Our stakeholder-centred philosophy embraces a range of approaches. It recognises that high-participation, high-involvement learning practices are critical for the generation of mutual benefits for learners and facilitators: it increases innovation, higher productivity and provides an enhanced quality of learning, parenting and family support services which are not based on a deficit model of access.

Achieving this has required the development of a culture of stakeholder involvement and participation that encourages experimentation, learning and innovation. There is a clear advantage to be gained from this approach for the learner, e.g. significant social dividends to be realised by improving the quality of life experienced by participating in the New Futures Programme. Our stakeholder involvement tactics function as a driver for change and innovation, which has meant, there has to be a closer integration of stakeholder priorities, facilitator enabling and arrangements for learner relations generally. This has required that a stakeholder centred-style approach becomes the way that business is done, rather than something that takes place periodically.

Our learners in the New Futures Programme tend to be problem-centred in their orientation and problem solving is one of the most beneficial educational opportunities for adults. Therefore, our New Futures programme has been organised around problems rather than subjects with these problems reflecting the concerns that our learners have experienced, i.e. access to and understanding of parenting and family support services. The New Futures programme is always inclusive. In order to be relevant to stakeholders we promote and build on the following:

- Individuals bring multiple perspectives to a situation as a result of their religion, gender, ethnicity, class, age, sexuality, and/or physical abilities and the programme acknowledges these perspectives.
- Reflect the experiences of stakeholders, both as individuals and as members of particular social groups. Value these experiences and use them as a basis of learning and assessment. They are powerful additions to the programme.
- Create an environment that stakeholders are positioned differently in relationship to each other and to the knowledge being acquired. All stakeholders do not bring with them the same ability to think critically, analyse results, etc. we plan together and build opportunities to acquire these skills into the programme.

Within New Futures the learner is in charge of the process. However, there is some control over the process through key-working. The following are a collection of strategies we have used in allowing learner control.

- Create peer learning groups as soon as possible. (Through social and induction programme)
- Determine, through discussion rather than testing, as much as possible about the learner's needs and interests for the programme. (Assessment Process)
- Allow for periodic review of the goals and objectives. (SMART Goal setting)
- Provide access to learning resources and materials. (2 weekly key working)
- Acknowledging the accumulated experiences of learners as valuable educational resources is important. (Space for celebration within the programme)

The outcomes for New Futures are focused around transformative learning and can be summarized as follows:

- The **transition to a confident life** involves personal transformation as learners move from a known environment to take on complex learning, work and social responsibilities. Transformative learning equips learners with the concepts and understanding necessary to make a success of this transition and confidently deal with parenting and family support challenges.
- When learners are led to a deeper understanding of concepts and issues their fundamental **beliefs and assumptions may be challenged** leading to a transformation of perspective. Learners who understand transformative learning may be better able to recognise the common stages of transformative change and have the tools to assist them during this process and constructively manage parenting and family support pressures.
- As we ask learners to develop critical and reflective thinking skills and encourage them to care about the world around them they may decide that **some degree of personal or social transformation is required**. Learners will have the tools of transformative learning in order to be effective change agents, particularly around their ability to make formative decision on parenting and family support demands. Otherwise, they may feel disempowered, become pessimistic about the future, fear change, or develop a degree of cynicism towards those who promote change.
- **We are living through a period of transformational change** in society, economy and culture. Learners are better able to understand and deal with such change if they understand the nature of transformation and the impact it has on them and their parenting and family support objectives.

This can be evidenced through our objective and measurable internal tracking systems and by external evaluations of the New Futures Programme.

There has been no simple 'off-the-shelf' solution. However, our approach coupled with our stakeholder centred tactics has had the potential to make an important contribution to achieving the goal of a dynamic inclusive understanding of the role played by parenting and family supports in effecting change in those parenting alone. Harnessing this potential requires that stakeholders are revitalised around a new commitment to using the New Futures' principles and associated practices to foster and embed innovation and change which supports lone parents as a vital and transformative resource for the economy and society.

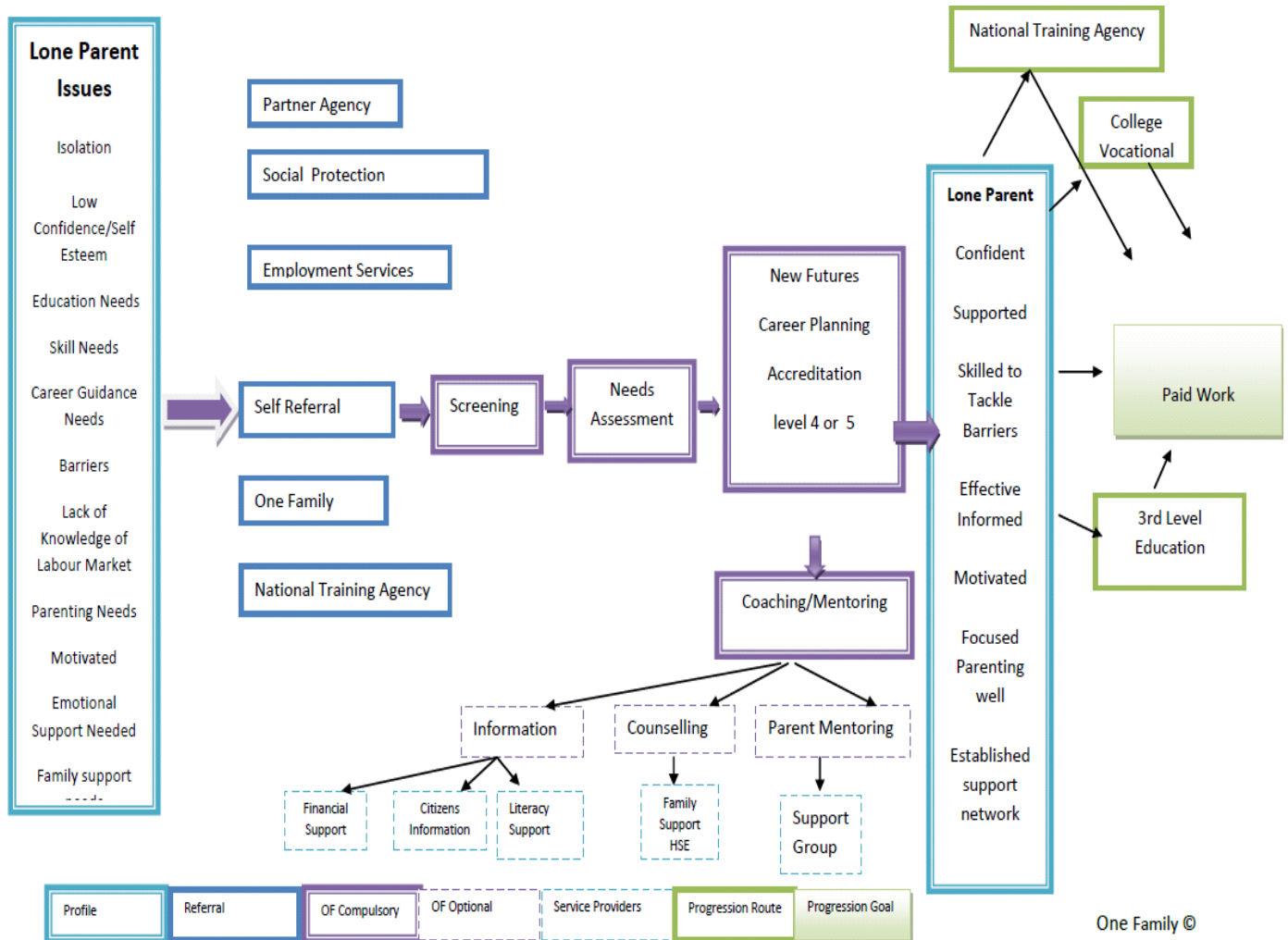
According to the participants the programme was transformative, "*This is one of the most brilliant and motivating courses I have ever come in contact with*" (New Futures pilot participant). The role of the Coach/Mentor was found to be integral to the success of the programme.

## **MORE INFORMATION**

- **Contact information**

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## Appendix I – New Futures Model



One Family ©

## Appendix II

### Underpinning values and rationale

#### *Progressive adult education*

Progressive adult education is the *raison d'être* for training. This philosophy emphasizes vocational and utilitarian training that betters the individual and society. Our programmes are based on progressive beliefs: first, learner-centric (that is, programme design emphasises the success of the learner in achieving the goal rather than the transmission of the content to the learner) and, second, problem focused (that is, programmes are designed around solving problems). Because an assumption underlying this philosophy is that learners are self- One Family's role becomes one of planner, instigator, and arranger of the conditions for learning. *Key influencers* **Jack Mezirow** is called the father of transformative learning theory and he describes transformative learning as the process by which we transform our present mind-sets and ways of thinking (frames of reference) to make them more inclusive, reflective and open to change. This leads to learner empowerment and change in the learner and in the group. This process is based on the ability to question or critically reflect on ourselves and our society.

**Stephen Brookfield** defines critical reflection as reflecting on the assumptions that underpin our ideas and actions. This requires being self-aware, making sense of experience, deconstructing and reconstructing meaning with critique and analysis. Critical reflection focuses on the empowerment and autonomy of the learner to explore alternatives to current ways of thinking and working. Critical reflection means asking "why?" in such a way that the learner questions not only their learning, but also the assumptions that have underpinned their actions to date. This is done in a space that supports the learner to engage in exploring their ways of thinking and their experiences.

## **Appendix III**

### *The New Futures Programme*

The successful completion of the New Futures Programme gives learners a Level 4 or 5 FETAC accreditation in Career Planning (with parenting and family supports). The programme gives learners many tools to assist them to look towards their new future. The topics covered in the programme are:

#### **1. Personal Development**

- Personal Accomplishments
- Self Esteem
- Personal Beliefs
- Personal Values
- Communication
- Managing Emotion

#### **2. Career Exploration**

- Awareness of your personality, interests and skills
- Explore your own values and how they come in to the workplace
- Explore working environments and working opportunities
- Look at learning environments and how people learn easier in different ways

#### **3. World of Work and Education**

- Develop skills to access relevant information
- Become more informed of progression routes
- Observe current labour market trends
- Develop goals
- Decision Making skills
- Develop a personal action plan
- Explore pitfalls in your action plan and how to address these

#### **4. Overcoming Barriers to Progression**

- Parenting challenges
- Stress Management
- Financial Planning
- Conflict Resolution
- Workplace discrimination
- Information and guidance to facilitate making work pay

#### **5. Planning and Securing College or 3rd level Options**

- set achievable goals for future careers
- be familiar with their individual strengths, aptitudes and potential
- develop an understanding of the full range of 3rd level education opportunities
- make informed decisions about their future
- have reflected on their personal learning and life path.



**BACKGROUND**

*Region Västra Götaland*

Stenungsund is a Swedish municipality in the Region Västra Götaland. The largest city is Göteborg. The population of the municipality of Stenungsund is about 24 000. Democratically elected politicians govern the Region. Region Västra Götaland is tasked with offering good healthcare and providing the prerequisites for good public health, a rich cultural life, a good environment, jobs, research, education and good communication. All together these provide a foundation for sustainable growth in the region.

Public Health Policy in the region is directed towards promoting health. The Region wants to be a good place for future and present generations to grow up in. The life situation of the family is important to the child's growing-up conditions and future. The family should be provided with a basis to make it the child's most important resource. Here Region Västra Götaland works together with local authorities, non-profit associations, governmental authorities and agencies.

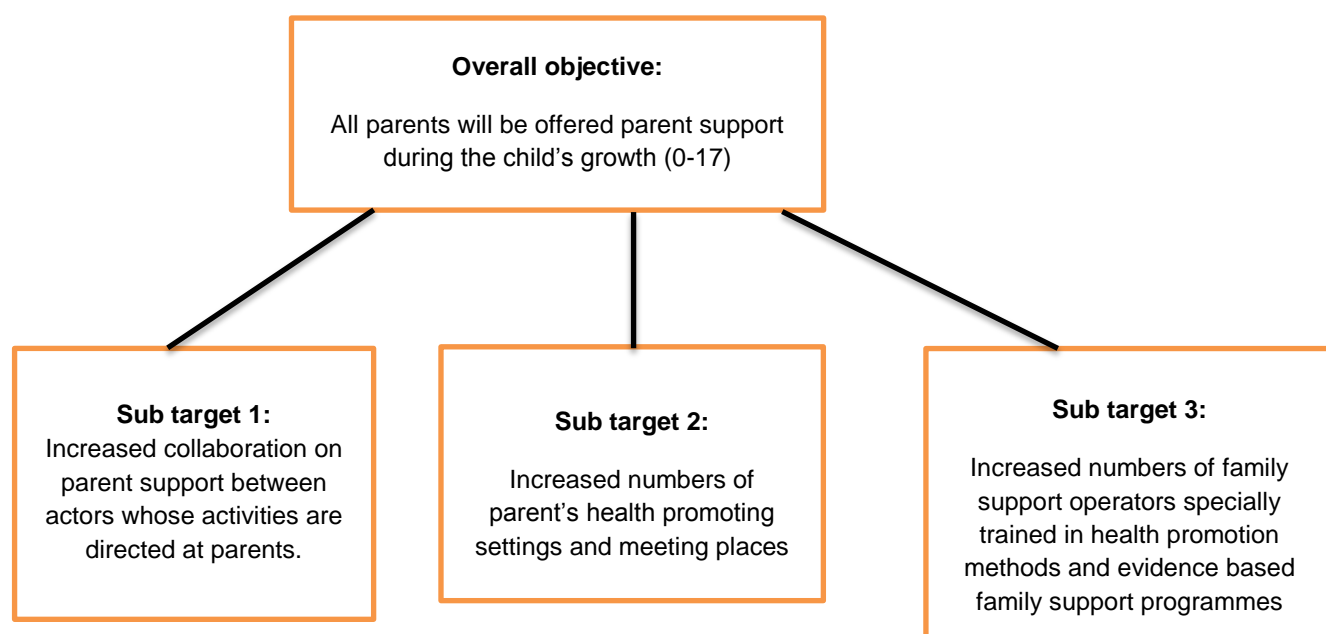
*Stenungsund*

In the municipality of Stenungsund there is a long historical tradition of cooperation and collaboration between local authorities, organisations and different professional groups. The reason is that Stenungsund used to participate in a national project conducted by the Swedish national board of health and welfare for many years. The purpose of this project was to open doors between local authorities in order to make the services more adjusted to the needs of citizens at risk of falling through the safety net.

*The national strategy of family support*

Family support is on the national agenda in Sweden. In 2008 the Swedish government decided to develop a national parent support strategy as a way to promote health and prevent mental disorders among young people and children. It was meant to be a universal strategy. Parent support is defined as *An activity bringing knowledge about the emotional, cognitive and social health of children and/or strengthening the social network of parents*. All parents are to be offered parent support while children growing up (0-17 of age). As a means it is necessary to develop local cooperation between those dealing with parents. The national Institute of Public Health is tasked with implementing different family support activities.

*The Swedish National Strategy of Family Support*



- **The family support programme in Stenungsund**

The local Public Health Board has taken a firm line about a family support programme being rooted in several local public authorities and administrative services. At the beginning, local politicians and civil servants in leading positions agreed to apply for funding from The National Institute of Public Health. The purpose was to implement and develop the national strategy on a local level. Fortunately Stenungsund was selected to take part in one of the national pilot projects, together with four neighbour municipalities. But as a project is limited in time and funding is temporary the politicians wanted to build a sustainable social development to which family support could be linked and continued over time. To start with, a research group from the University of Göteborg became involved. The head principals in different administrative bodies such as the social welfare office (municipality), school sector (municipality) as well as those in the primary health care sector (the county and private) were brought together in order to organise it all.

- **Process group**

The authorization was given to a group of civil servants in leading positions in different welfare administrations. This means the head education officer, all s health care station officers, and the head of the guidance centre for young people, the head of the preschools, the head of the social welfare office, the public health coordinator and the drug prevention coordinator.

**The objective is** to offer all parents in the municipality of Stenungsund universal parent support during the years their children are growing up.

**The purpose is** to cooperate in developing and structuring sustainable innovative parent support achievements in order to create favourable conditions for children and parents in Stenungsund.

- **The way of organising the parent support programme**

The first step in planning the programme was to take stock of existing activities and make an inventory of stakeholders concerned with parent support. The question was: what are the stakeholders doing at present and what needs do they detect? The results of the investigation were delivered to the researchers at the university. Of course even the NGOs made their influence felt. Next step in the process was to listen to the parents. A field survey was carried out. Quite a lot of parents were contacted by telephone and asked what kind of support they preferred or already knew about. As a result five integrated working groups were established working at coordination and cooperation:

1. Early years:

The group deals with dialogue and linking the services to each other in order to offer all parents universal parent groups during pregnancy and the early years. The universal approach is even a good possible way to detect special needs of parents or children. This means that in an everyday work universal parent groups as well as special target groups are offered to future parents as well as parents of children 0-5 years of age. Service providers are prenatal clinics (midwives), well baby clinics (nurses), day care centres (pre-school teachers), open preschools (preschool teachers and social workers), family guidance (social welfare officers). The members of the Early Years working group match the different professions. They meet to develop and coordinate the activities and planning for the future. Right now Family centre and active parent teacher meetings are on the map.

2. School children:

Even the school programme has the universal approach. The group members are the head of the school health services, the head of elementary schools, a drug coordinator and the head of the leisure time activities. All parents of children 4-17 years of age are offered evidence-based parent programmes. These are conducted by professionals from the school health services or by interested teachers. The group is planning and coordinating and linking the programme. In the future more inspiring parent teacher meeting groups are on the want list. Important subjects at the moment are drugs. Target group in this case are parents of teenagers.

Another important subject is how to use the Internet. The challenge is to find ways how the model could be incorporated in regular work, just to be daily routines for long time.

3. Guidance and advisory service:

This group has developed Family counselling reception and telephone information services. Target group are all the parents of children 0-20 years of age. Different professionals, such as midwives and a social educationist from the guidance centre for young people, social workers from the social welfare office and nurses from the well-baby clinics,

work together to develop and find out how the guidance services should expand in the best way to make different professionals and support more accessible.

4. Public lectures:

Target groups are parents, professionals, volunteers, politicians and citizens. The lectures are running already. They are free of charge. They are located in the centre of the municipality. Possible subjects include young people and the Internet and what parents are doing on the Internet or modern family life. The subjects are planned together with professionals, parents and politicians, sometimes together with researchers.

5. Information:

This group deals with public relations and different efforts to reach the different target groups, including marketing, a website, folders and advertisements in the local paper. One of the greatest challenges is to comply with parent's wishes. This means creating a home page with information about parenting and how to meet other parents in a virtual meeting place.

- **Follow up**

The research group is close to following up the project. One year after the first investigation, the researchers repeated the investigation to look for changes according to the stakeholders and parents. University students are involved in some of the data collection by talking with the parents. A candidate for the doctor's degree is also attached to the project.

## **MORE INFORMATION**

- **Contact information**

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