Tamworth Sure Start

Evaluation of

Speech and Language Services

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Acknowledgments

I wish to thank all the parents who took part in the Speech and Language focus groups for taking the time to share their experiences and views with me.

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SURE START TAMWORTH
EVALUATION OF SPEECH AND LANGUAGE SERVICES

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SURE START TAMWORTH
EVALUATION OF SPEECH AND LANGUAGE SERVICES

1. EXECUTIVE SUMMARY

1.1 INTRODUCTION
Tamworth Sure Start is a Round Four Programme serving approximately 353 registered families with 448 registered children aged below four living in Glascote Heath and parts of Belgrave and Amington.

The 2001 consultation of parents and professionals which took place during the initial stages of the Local Programme’s development highlighted the need for greater support for the speech and language needs of young children living in the area. Services supporting children’s speech, language and communication development began in 2003, offering (amongst other activities) Advice and Support, Baby Bounce and Rhyme and Baby Gurgles sessions.

Since its inception, the Speech, Language and Communication programme has encountered various changes to which it has had to adapt, with an initial review in October 2004 of attendance figures for Tamworth Sure Start services leading the Evaluation Core Group to request an evaluation of the Speech, Language and Communication programme within the context of reach and engagement of families with the programme’s activities.

Since the Sure Start Main Centre opened, an average of just below 8 children per month have attended Baby Bounce and Rhyme, falling a little short of the target set for 2003/4 of 12 children attending a play session. Monitoring data also highlighted a tendency for families to attend Bounce and Rhyme once only, giving rise to some cause for concern as to why repeat visits are not taking place. This trend (accounting for 14 children from January 2003 to January 2005), in addition to the low take up of the Baby Group / Baby Gurgles activities, led to the decision to focus the evaluation on these particular activities. The evaluation comprised an analysis of monitoring data and qualitative research with parents.

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1 As per local Programme monitoring data as at October 2005
1.2 METHODS
In May 2005 two focus groups were conducted with a total of seven parents (all mothers) who responded to invitations sent to all past and present attendees of Baby Bounce and Rhyme and / or Baby Gurgles. The focus groups were conducted in the neutral setting of a local Community Centre and aimed to explore parents’ experiences of attending the activities with their families and to uncover factors that may be influencing low and inconsistent attendance.

Observations of several activity sessions were also undertaken: two of Baby Bounce and Rhyme - one in January 2005 and another in May 2005; one observation of Baby Gurgles in November 2004 and one observation of Songs and Rhyme in July 2005. Brief notes were written after each observation and included in data analysis as part of the evaluation process.

Due to the absence of Baby Gurgles attendees at focus groups, the Evaluation Core Group requested brief telephone-based interviews with past attendees in a bid to obtain some feedback on sessions. Only one attendee could be contacted. The telephone interview followed a short, semi-structured interview schedule (see Appendix 3).

1.3 FINDINGS

1.3.1 BABY BOUNCE AND RHYME
1.3.2 Awareness and attendance
Parents had learned of Baby Bounce and rhyme in three main ways: Sure Start publicity materials posted in public places (sometimes out of date); flyers delivered by post and, most notably, awareness through word-of-mouth. Direct support and encouragement from staff proved successful in introducing parents to Baby Bounce and Rhyme. However one family new to the area who were not captured by maternity and health visiting services received no direct contact from Sure Start and had learnt about services from neighbours. This highlighted the need for Sure Start to explore direct contact methods to reach families within this group who may not have such supportive networks.
Attendances had increased significantly since the Sure Start Main Centre opened, which the parents attributed to the regular time slot and permanent venue enabling public awareness to spread through word-of-mouth.

Parents’ motivations to attend were mainly social rather than concern for their children’s communication development. Similarly, their perceptions of the activity’s aims were that it ‘brought people together’ and enabled them to ‘get out of the house’. Nevertheless, the sessions’ impacts on speech, language and communication development were brought to light during the course of the focus groups. Given that attendances have largely been through word of mouth, future thought may need to be given to highlighting and promoting Baby Bounce and Rhyme’s benefits to communication development regularly within sessions as well as in general publicity.

1.3.3 Barriers
Parents suggested that barriers to attending Baby Bounce and Rhyme might include:

- Lack of clarity in publicity materials about the activity’s content, target population and charges.
- Lack of confidence among some parents to take the ‘first steps’.
- Perceptions among younger parents of others’ judgemental attitudes.
- Parents’ generational differences.
- Lack of awareness among newcomers to the area of Sure Start’s services, activities and aims.

The sessions’ Monday morning timetabling was also raised as a potential barrier in terms of coinciding with other children’s services, clashing with part time working hours and meeting post-weekend housework obligations. Parents suggested that the availability of more than one session per week might address this issue.

With regard to Baby Bounce and Rhyme’s content and structure, parents highlighted difficulties in keeping children’s interest and maintaining their focus on singing once they reached 18 months to 2 years of age. At this ‘toddler stage’ children would run around and explore, finding it difficult to sit still. Parents disclosed that their toddlers’ behaviour embarrassed them and could account for other parents leaving Bounce and Rhyme.
They suggested incorporating age-appropriate activities such as crafts, music and dancing into the sessions to accommodate the children’s intellectual and physical developmental levels, keep their interest and encourage repeat attendances.

1.3.4 Experiences and programme development
Despite the potential barriers stated above, the parents and their children’s experiences of Baby Bounce and Rhyme were largely very positive. Parents appreciated the social contact with other mothers and the ‘breast-feeding friendly’ environment and took delight at their children’s enjoyment of the sessions. They also emphasised the activity’s cultural role in perpetuating nursery-rhyme singing, which played an important part in family bonding.

The parents noted their children’s enjoyment when playing with glove puppets, toys and percussion instruments and several had noted Baby Bounce and Rhyme’s positive impact on their speech and communication development. Many activities were reproduced in the home and introduced to older children and fathers. However despite fathers’ active involvement in their children’s development, and a high proportion of unemployed and shift-working men in the area, the parents pointed out that few were ever seen to attend Baby Bounce and Rhyme themselves. Reasons for this were suggested to include men’s perceptions of Sure Start being ‘for women’, and lack of male visibility at activities. The parents suggested recruiting male volunteers, including ‘granddad’ figures, to attract more men to the Sure Start Centre and also to familiarise young children to men’s presence, as lack of male visibility in ‘early years’ settings (and indeed in family life) might impact negatively on how children relate to men.

The use of signs and actions during song-singing was perceived as particularly useful, leading the parents to comment on sign language’s increasing visibility in educational and media settings. The parents suggested that signs and signing should be incorporated across Sure Start’s services to enhance communication skills in children of all abilities. The suggestions arose in light of one parent’s personal experience of her child’s early hearing and communication difficulties due to ‘glue ear’; a condition affecting approximately 20% of children aged 2. Parents also expressed a wish to see more children with different abilities attending Baby Bounce and Rhyme and for publicity to extend beyond Sure Start in order to expand such attendances and to help break down barriers.
1.3.5 **Baby Gurgles / Songs and Rhyme**

Observations of Baby Gurgles and Songs and Rhyme, and a telephone interview with one former Baby Gurgles attendee, brought to light some differences in impact of these two activities aimed at 0-12 month olds. Despite offering very similar activities (songs, sounds and play), the more formally structured Baby Gurgles appeared to be enjoyed by those who attended but was felt to be more beneficial to babies over 6 months old who could ‘do more’. Despite the benefits, sessions were not well attended, possibly due in part to its Monday afternoon timetabling which one parent felt may coincide with babies’ afternoon nap times, and also due to the nature of the six-week block sessions which may have required a perceived level of commitment from families.

Songs and Rhyme however, appeared to be much more successful in terms of its reach to the community. Based at a local health centre’s Wednesday morning baby clinic, parents were able to ‘dip’ in and out of the activity without feeling obliged to commit to regular attendances. Nevertheless several parents had begun to attend regularly, taking the opportunity to socialise with other parents while also engaging with their children in the activities. This informal approach and its incidental social dimension appeared to be more popular with families than was Baby Gurgles. Unfortunately the wider reach to local families was not reflected in the attendance lists as the transient nature of parents’ involvement meant that the Therapy Assistant was unable to note down the names and addresses of all those who had attended while she delivered the session. Additionally, later consultation with the Speech Therapy Assistant brought to light some reluctance among parents to take a fuller part in activities. These latter issues may be remedied by appointing additional support, for example enlisting the help of a parent-volunteer to encourage families to join in and to assist in logging contacts.

1.3.6 **CONCLUSION and RECOMMENDATIONS**

- The evaluation brought to light the importance of informal, consistent and socially based activities in attracting families’ participation in Speech, Language and Communication activities. These attributes must be acknowledged further by staff and considered fully during the programme’s future development.
Despite the largely positive outcomes of Baby Bounce and Rhyme, Baby Gurgles and Songs and Rhyme on families’ opportunities to mix and for children’s communication skills to develop, more needs to be done within sessions to stress the activities' benefits to communication development and to acknowledge and accommodate children’s varying developmental needs. Thought therefore should be given to adapting sessions to include activities such as simple crafts and dancing associated with the rhymes, which enable children to develop their communication skills in a variety of ways and to 'let off steam'.

The Speech, Language and Communication programme in particular, and Sure Start more generally, may need to consider developing more pro-active ways of being socially inclusive and reaching new families who ‘slip through the net’ and the hard to reach. The programme might therefore consider collaborating with local housing agencies to share information about Sure Start and the Speech, Language and Communication programme in addition to ensuring publicity materials are up-to-date and clear about who they are targeted at and whether they are free of charge. It might also wish to consider one parents’ suggestion to develop an informal ‘buddy’ system to complement the existing Home Start partnership support.

Men’s absence from Speech, Language and Communication activities was notable despite their contribution in the home environment to children’s development. The parents conflicting views on men’s involvement in Sure Start highlights the need for the programme to explore and develop ways of engaging and supporting men more fully which are both sensitive to women’s experiences but which recognise also the needs of men wishing to take greater responsibility for, and play a greater part in their children’s lives and development. Staff should also consider their own part in challenging gendered assumptions and supporting fathers more fully when they attend sessions.
• The parents’ experiences highlighted the impact that common hearing conditions and other physical difficulties may have on children’s communication skills and consequently social development, and brought to light the need for the programme to publicise more explicitly that its activities are open to all. Consideration needs to be given to developing greater public awareness of conditions affecting hearing and to publicise more fully the benefits to all families of attending Speech, Language and Communication’s activities and where necessary using its support services. Thought should also be given to expanding the use of signs and signing across a range of Sure Start’s other activities and, given the families’ increasing exposure to sign language in other educational and media settings, consideration should also be given to supporting adult learning opportunities in this area.

• Finally, the evaluation demonstrated the importance to families of being heard. The parents’ experiences of the Speech, Language and Communication programme are inevitably located within the context of their everyday lives and therefore issues of wider importance to them have invariably come to light. Children’s developmental needs, social inclusion, gender, generational differences and information awareness were subjects considered important to the parents and the local community and were considered to impact on uptake, engagement and satisfaction with the programme’s activities. In addition to taking on board the parents’ suggestions for the programme’s (and indeed Sure Start’s) development, Speech, Language and Communication activities would benefit considerably from ongoing monitoring development and self-evaluation. To be of benefit, monitoring data must be accurate, and therefore additional support should be provided during community-based activity sessions such as Songs and Rhymes to enable the Therapy Assistant to collect it. Additionally, regular consultation with families is needed if activities are to develop in line with the local community’s needs and if the Speech, Language and Communication programme in both its current and future forms is ultimately to grow from strength to strength.
2 INTRODUCTION

2.1 Tamworth Sure Start Speech, Language and Communication programme
The purpose of this evaluation is to look at the processes involved in the delivery of activities provided by the Tamworth Sure Start Speech and Language programme. The National Evaluation of Sure Start (NESS) defines ‘processes’ as the way activities work in practice (Henderson, Wilkins & Barnes, 2002, p.4). Evaluating processes includes focusing on documenting the uptake of activities and the extent to which they reach those in need. It also involves assessing the quality of services including the degree to which they incorporate Sure Start values such as parental and community involvement in service development (ibid).

Following an initial review in October 2004 of attendance figures for Tamworth Sure Start services, a decision was taken by the Evaluation Core Group to look at the Speech and Language programme within the context of reach and engagement of families with the programme’s activities. A qualitative research approach was considered the most appropriate for this purpose.

This report begins with an initial overview of the Speech Language programme, starting with a brief account of the background to the service’s development. It then examines recent data relating to reach and activity attendance, which indicated some concerns for the Baby Bounce and Rhyme and Baby Group/Baby Gurgles activities, highlighting the need for the evaluation to centre on these two activities in particular. The report then focuses on the evaluation’s methods and resultant findings, which include parents’ experiences of attending activity sessions and their children’s engagement with activities. In light of parents’ comments during consultation it also includes the service’s impact on family life and children’s development. Strategies are then suggested for developing the Speech and Language Programme further so that it better meets the needs of the local community, and Sure Start’s targets.

2.2 BACKGROUND
Tamworth Sure Start is a Round Four Programme serving approximately 353 registered families with 448 registered children aged below four (as at October 2005) living in Glascote Heath and parts of Belgrave and Amington.
The Sure Start area comprises a total of approximately 488 children aged under 4 years old\(^2\), with less than 2% of the total population coming from minority ethnic groups. Lone parents currently head approximately 25% of registered families. The housing is a mix of local authority, social landlords and privately owned dwellings. The majority of housing within the Belgrave and Glascote Heath estates was built at the end of the 1960’s / early 1970’s to re-house “overspill” from Birmingham.

The consultation of parents and professionals which took place during the initial stages of the Local Programme’s development highlighted the need for greater support for the speech and language needs of young children living in the area. Baseline data provided by Burton, Lichfield and Tamworth Primary Care Trust (BLT PCT) in 2001 suggested that although 91 per cent of children aged 2 living in the area had ‘normal’ speech and language development, 19 per cent of children aged 4 exhibited ‘language development delay’, representing a decrease in reported ‘normal’ language development of 10 percentage points between the two age groups\(^3\). The figures suggest that barriers to speech and language development are therefore being experienced by a significant number of children aged under-4 currently living in the Sure Start area. The PCT figures point to speech and language difficulties being a particular problem for families living in this part of Tamworth, where children aged between three and four account for 30 per cent of Tamworth’s entire speech and language support care load.\(^4\)

Further, the initial consultation highlighted difficulties in meeting the support needs of children living in the Sure Start area identified as having speech and language difficulties. NHS speech therapists were in short supply and although therapy sessions were available and based within the local area, gaps of between four and six months between appointments were not uncommon and sessions were short, ranging from between 20 and 30 minutes each. The consultation findings demonstrated that parents of children receiving speech and language therapy felt there to be a problem in the length of time between sessions. The findings also suggested ‘a lack of training for other professionals to follow up work’ and that ‘many parents lack skills to promote language development’ (Tamworth Sure Start Delivery Plan, 2001, p.160).

\(^2\) Based upon local NHS Children’s Health Information statistics  
\(^3\) Figures supplied by BLT PCT Children’s Health Unit, October 2004.  
\(^4\) Figures as per Tamworth Sure Start Delivery Plan, 2001, p. 147
In light of these findings, and the original requirement of Local Sure Start Programmes to meet Key National Target 8\(^5\), proposals to re-shape existing services and to deliver ‘new ideas’ to help reduce speech and language problems were suggested. These included:

1. Preventative strategies to avoid the need for speech therapy – focusing on:
   - Teaching parents / carers and ‘front line’ workers how to stimulate / promote language development.
   - Support for staff in Early Years settings to enable them to follow up the speech therapists’ work on a day-to-day basis.

2. Regular input at parent / toddler groups by the Speech Therapy Service focusing on activities to stimulate language that parents will want to follow up in the home using rhythm, rhyme, puppets etc.

3. Training volunteers and parents for prevention.

As a result of these proposals a partnership agreement was drawn up between Staffordshire County Council (Tamworth Sure Start’s accountable body) and Burntwood, Lichfield and Tamworth Primary Care Trust. The PCT was charged with providing a speech therapist and assistant therapist, each employed at 0.6 time, with the remit to:

1. Provide two play sessions per week.
2. Undertake collection of the Sure Start Speech and Language Measure.
3. Provide training sessions for Early Years practitioners.
4. Develop services to support parents to promote their child’s speech, language and communication development.

2.3 THE DESIGN OF SPEECH AND LANGUAGE SERVICES AND ACTIVITIES

Following the appointment of the Speech Therapist and Therapy Assistant in January 2003, the design of speech and language services and activities for the Tamworth Programme commenced with the observation of speech and language services provided by other Sure Start programmes within Staffordshire and Shropshire.

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\(^5\) Key National Target 8: ‘To achieve by 2004 for children aged 0-3 in the 500 Sure Start areas, a reduction of 5% in the number of children with speech and language problems requiring specialist intervention by the age of 4’ (HM Treasury, 2000).
Several activities and services were considered by the Speech Therapist and Therapy Assistant to have the potential to ‘go down well’ in Tamworth. These included ‘Bounce and Rhyme’ (songs and rhymes sessions for parents / carers and under 4s), ‘Chataway’ (structured play and songs sessions aimed at 0 to 12 month olds and their parents / carers), a telephone helpline, ‘drop-in’ advice and support service and a ‘roving service’ aimed at providing training and advice to pre-school services.

In March 2003, two ‘open days’ were held to raise awareness among local families of the Speech and Language Programme and to elicit their views and opinions regarding the proposed activities and services to be offered by the Programme. One open day was held at the Exley Centre in Belgrave and the other at Glascote Heath Community Centre. Rooms were set up with an information desk, a play bag display, and play-areas for babies and older children. A Chataway play session was also held. A free raffle for a child’s book plus balloons as forfeit prizes were offered as incentives for families to attend, as was the provision of tea and cakes!

The fourteen responses to the open days’ feedback questionnaires suggested that the families would welcome Bounce and Rhyme and Chataway activities. Subsequently these activities, in addition to Advice and Support (‘ad-hoc’ services supporting informal and parental referrals) and Roving Services (play and support activities offered within Early Years settings), were set up and running from March 2003. A ‘drop-in’ service was additionally launched in September 2003 for one hour per week. Baby Bounce and Rhyme sessions took place at Glascote Library while Chataway sessions were held in rotation between Glascote Heath Community Centre and Exley Centre and eventually relocated to the FACE Centre, a community centre in Glascote Heath attached to a primary school.

Since 2003 the Speech and Language Programme has encountered various changes to which it has had to adapt. These have included the cessation of Sure Start’s partnership with Tamworth Library Service in April 2004 and, in March of the same year, the departure of the Speech Therapist with whom the Therapy Assistant had formerly shared the workload on an equal basis. In addition to these changes, the Chataway sessions ceased in October 2003 due to poor attendance, believed to be due in part to the duplication of format in other well-established pre-school community-based activities. The Baby Group also changed format and name in an
attempt to attract greater numbers. Targeted initially at all 6-12 month old babies in the Sure Start area, Baby Group was organised originally as an ‘invitation only’\(^6\) four-week block activity based around weekly topics. This was later modified as ‘Baby Gurgles’ in September 2004, offering ‘open-to-all’ sessions of six weeks duration, but unfortunately attendance remained low and sessions have transferred recently from the Exley Centre to Glascote Health Centre, taking place during the Well Baby Clinic. The drop-in sessions have subsequently ceased due to lack of uptake while attempts to make headway with the Language Measure data collection has been hit-and-miss, with invitations to events for this purpose being of limited success.

However, the arrival in September 2004 of a part-time Speech Therapist supporting and mentoring the Therapy Assistant, in addition to the opening of the new purpose-built Sure Start Main Centre in Glascote Heath, has also impacted on the Programme’s development. Additional activities have been introduced into the Programme since September 2004 including ‘Baby Signing’ (sign language activities held at Exley Centre designed to help develop early communication skills) and a Speech and Language ‘clinic’ which receives formal referrals from Health Visitors of children aged below 5 living in the Sure Start area who require speech and language support. ‘Clinic’ assessments are conducted by the Sure Start Speech and Language Therapist, who refers complex cases for mainstream NHS support and directs children with mild language difficulties and developmental delay to support from the Sure Start Speech and Language Programme. Songs and Rhyme ‘open sessions’ aimed at under-4s have also been introduced on a trial basis at the ‘Well Baby’ clinic during the summer term at Glascote Health Centre, alternating fortnightly with Baby Gurgles sessions. ‘Roving Service’ and ‘Advice and Support’ services have continued throughout and additional efforts to support the collection of Language Measure data are currently being implemented, involving questionnaire administration by the Programme’s Parent Participation Officer during Book Start home visits (aimed at 2 year olds) and increased administrative support.

\[2.4 \text{ REACH AND ATTENDANCE}\]

Monitoring data demonstrates that uptake of Speech and Language services has so far been rather sporadic. In total, the Speech and Language Programme has reached 114 children to date (as of March 2005, excluding seasonal activities shared with other service providers) with a total of 419 visits or contacts made overall.

\(^6\) Details of targeted babies’ families were drawn from NHS New Birth Records.
The percentage of contacts made by children for each of the Speech and Language activities is shown in Figure 1 (below) and demonstrates that the largest single proportion of contacts (44%) has been made through Advice and Support.

**Fig. 1**

The activity receiving the greatest number of visits (27%) has been Baby Bounce and Rhyme. Baby Group and Baby Gurgles are illustrated separately, although they constituted essentially the same service taking 6% of children’s contacts. The chart below (Fig. 2) illustrates the numbers of contacts for each Speech and Language service and activity. The small number of contacts made with the Clinic, Baby Signing and ‘Dump the Dummy’ activities reflect the relatively short amount of time that they have been in existence, although data to April 2005 indicates that Baby Signing may potentially be a popular activity, having already reached 15 children from 12 families since its inception in September 2004 and having received 49 visits so far (accounting already for 10% of children’s contacts with the Speech and Language Programme). Indeed given its apparently ‘instant’ popularity, the Baby Signing service may well provide a useful route through which other Speech and Language activities may be promoted, particularly if these are emphasised in terms of a ‘natural progression’ in babies’ and young children’s speech and communication development.
Monitoring figures taken since the opening of the Sure Start Main Centre in September 2004 have demonstrated that despite an initial leap in attendances during the opening month (see Fig.3 overleaf), an average of just below 8 children per month have attended Baby Bounce and Rhyme, falling a little short of the target set for 2003/4 of 12 children attending a play session. For the year 2004 / 2005 Bounce and Rhyme reached a total of 19 families overall, accounting for 26 children aged under 4. On a positive note, early indications for 2005/6 suggest an upward trend in attendances at Speech and Language activities, which may be due in part to the consistency in service facilitated by the opening of the Main Centre and the increased awareness of its uses among the local population.

The logistical and organisational issues identified earlier have contributed in part to the fluctuations in attendances observed prior to the opening of the Main Centre. However monitoring data has also highlighted a tendency for families to attend Bounce and Rhyme once only, with only a core group of approximately 6 families attending regularly, giving rise to some cause for concern as to why repeat visits from newcomers are not taking place.

This trend (accounting for 14 children from January 2003 to January 2005), in addition to the low take up of the Baby Group / Baby Gurgles activities, led to the decision to evaluate the Speech and Language Programme focusing on these particular activities.
3 METHODS

Due to the exploratory nature of the evaluation, the Evaluation Officer chose to conduct focus groups with past and present attendees as these were considered to be the most appropriate way by which to explore families’ experiences of attending Baby Bounce and Rhyme and Baby Gurgles and to uncover factors which may be influencing low and fluctuating attendances. As the number of families who had attended each activity was relatively small, invitations to participate in the focus groups were sent to all past and present attendees in anticipation of obtaining as representative a sample as possible. The invitations included an information sheet outlining the nature of the focus groups and issues of confidentiality and anonymity (see Appendix One). A contact number was also provided for parents to use if they had any further questions before deciding whether to take part in the focus groups. A total of seven parents responded. All were mothers; six living with their partners and children and one ‘lone’ parent.

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Sure Start Tamworth is currently working towards encouraging parents’ and carers’ fuller participation in all levels of evaluation work. However, at the time of the Speech and Language evaluation this process was in its infancy and therefore the Evaluation Officer took responsibility for managing and undertaking the project.
All respondents had attended Baby Bounce and Rhyme but unfortunately none had attended Baby Gurgles, although one parent had participated in what may be Songs and Rhyme at the local Health Centre a few times when she attended for her baby to be weighed.

The two focus groups were conducted by the Evaluation Officer in May 2005 at a local Church-run community centre. The first focus group was attended by four of the parents and the second attended by the remaining three (see Fig.4). The venue was chosen in anticipation that it would provide a ‘neutral setting’ which might enable the participants to talk freely and honestly about their views and experiences of Baby Bounce and Rhyme (and of Sure Start more generally). Creche facilities were provided where needed and refreshments were served at each focus group. By way of a ‘thank you’ participants were sent a voucher of their choice to the value of £10 each and were offered a copy of the transcript of the focus group discussion and of the evaluation findings.

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<thead>
<tr>
<th>FOCUS GROUP ONE</th>
<th>FOCUS GROUP TWO</th>
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<tr>
<td>‘Sarah’ : Mother of 3 children aged 17 months, 8 and 12 years old. Lives with partner.</td>
<td>‘Anne’ : Mother of one 2 year old. Lives with partner.</td>
</tr>
<tr>
<td>‘Bobbie’ : Mother of 4 children aged 2 months, 3, 5 and 7 years old. Lives with partner.</td>
<td>‘Heather’ : Mother of 2 children aged 3 and 7 years. Lives with partner. Works part time.</td>
</tr>
<tr>
<td>‘Sue’ : Mother of 2 children aged 3 and 7 years. Now employed part-time. Lives with partner.</td>
<td>‘Kim’ : Mother of one 2 year old. Lone parent.</td>
</tr>
<tr>
<td>‘Emily’ : Mother of three children aged 7 months, 2 and 3½ years old. Lives with partner.</td>
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Each focus group lasted approximately 1½ hours and followed a semi-structured questionnaire schedule (see Appendix Two). The focus groups were informal in
nature and the Evaluation Officer followed principles of non-hierarchical\(^8\) (Oakley, 1993) and ‘participatory’ approaches (Brodie, 2003) whereby parents were encouraged to raise issues that they felt were important to them and to engage in conversation with, and ask questions of, each other (and indeed the Evaluation Officer). Due to problems experienced in obtaining adequate digital voice recording and computer transcription software, each focus group was recorded using a minidisk player before which all participants signed a ‘consent to audio recording’ slip and were given the opportunity to ask any questions. Detailed notes were subsequently taken by the Evaluation Officer from each recording, and relevant verbatim transcriptions were taken to present as evidence of views and experiences in the participants’ ‘own words’. All participants’ names were changed to protect their identities. The resulting data was analysed thematically using open coding methods.

In light of the absence of Baby Gurgles attendees in the focus groups, the Evaluation Core Group decided that the Evaluation Officer should attempt to conduct brief telephone-based interviews with past attendees in a bid to obtain some degree of feedback on sessions. Of the 7 families who had attended Baby Gurgles since April 2004, only one could be contacted. The telephone interview followed a short, semi-structured interview schedule (see Appendix Three) and lasted approximately 10 minutes.

To aid the Evaluation Officer in contextualising Speech and Language activities, observations of several activity sessions were also undertaken: two of Baby Bounce and Rhyme - one in January 2005 and another in May 2005 as the activity became better established in the Sure Start Main Centre; one observation in November 2004 of a Baby Gurgles session at the Exley Centre and one observation in July 2005 of Songs and Rhyme at Glascote Health Centre. Brief notes were written after each observation and included in data analysis as part of the evaluation process.

\(^8\) Oakley suggested that such an approach, in which researchers also invest their own identity in the research relationship, is important not just for gaining the level of information required, but also to ensure participant involvement on a more equal basis than that offered in ‘traditional’ approaches where the interviewer directs all levels of the interview process in a ‘detached’ and ‘objective’ manner.
4 FINDINGS

4.1 Awareness, Access and Attendance

The parents had learned of Baby Bounce and Rhyme in three main ways: through Sure Start publicity materials such as posters placed in public buildings including the local health centre and library; through postal flyers; and (perhaps most notably) through ‘word of mouth’ from friends and neighbours who were already involved with Sure Start. Only one parent (Bobbie) had been encouraged directly to attend Baby Bounce and Rhyme by a staff member (the Sure Start Midwife) while attending ante- and post-natal appointments:

“…she was just nagging me to do something with Sure Start” (the group laughed!). She just kept on pointing out everything that everybody was doing. I went to Bounce and Rhyme and Bumps 2 Babies just to get her off my back!” (laughs).

Despite the midwife’s persistence, this approach appeared to prove very successful for this particular parent:

“I’m glad that I went and I’m glad that she did keep nagging … I went just to shut her up but I enjoyed myself anyway”. (Bobbie).

Although staff contacts targeted at parents with new babies may prove successful in encouraging them to join in with Sure Start activities, another parent, Sarah, noted that despite being new to the area she had received no such direct contact from Sure Start. She had started attending Baby Bounce and Rhyme only when Bobbie (her neighbour) had brought her along. Sarah’s indirect introduction to Sure Start demonstrates the importance of community links in raising awareness of local amenities and services. However it also suggests that the Local Programme may need to consider further ways of reaching new families who do not have such friendly neighbours and who, through having slightly older children, would not be ‘captured’ and introduced directly to Sure Start through midwifery and post-natal home visiting and support services.

Of the focus groups’ participants, four were regular attendees at Baby Bounce and Rhyme, two having attended the activity since it was held at its previous venue at the library. One parent had recently started attending when the venue moved to the
Sure Start Main Centre. Another parent, Kim, had attended Baby Bounce and Rhyme regularly while her daughter was little but felt it was ‘pointless’ once her child became a little older and was apt to wander off and not participate fully in the planned activities (the implications of which will be discussed later). Anne also discontinued attending Bounce and Rhyme as it clashed with her working hours, but she was now considering approaching her sister-in-law to bring her son to sessions as she felt he was not speaking much and that “Singing might help him to say things”.

Despite Anne’s apparent understanding of the link between singing and the potential for speech development, the reasons given by the parents for attending Baby Bounce and Rhyme were mainly social and included: an opportunity for children to be with others of their own age; to enable children to mix with others, and for parents to socialise with each other. Apart from Anne, none stated explicitly that they attended Bounce and Rhyme to encourage their children’s speech and communication skills, and only three participants stated their understanding of Baby Bounce and Rhyme’s aims of supporting and encouraging this aspect of their children’s development. However the impact of the sessions on their children’s speech, language and communication development was mentioned by many of the parents during the course of the focus groups, as will become evident.

The parents’ perceptions of Bounce and Rhyme’s aims and purposes largely reflected their reasons for attending, as stated above, and highlighted the value they placed on opportunities for themselves and their children to socialise and to develop the parent-child relationship, as these parents suggest:

“It encourages parents to get them (the children) out of the house and interaction between mother and child” (Emily)

“To bring people together. To bring you close with the children as well”. (Sue)

The parents’ perceptions of Baby Bounce and Rhyme’s aims thus appear to be more in line with Public Service Agreement (PSA) Objective 4 (2003-6) of ‘Improving Social and Emotional Development’ (Sure Start, 2005a), with an implicit rather than explicit appreciation of its role in contributing to children’s speech, language and
Given that attendances at Baby Bounce and Rhyme have been achieved largely through word of mouth rather than through ‘official’ publicity, future thought might therefore be given to further emphasising the activity’s benefits to speech, language and communication development within the sessions as well as through the standard publicity methods.

4.2 Barriers to Access

4.2.1 Publicity

During the course of the focus groups, the parents brought to light various issues relating to awareness (or lack of it) of Sure Start activities and the factors which they felt may inhibit other parents’ access to, and engagement with the Sure Start Local Programme in general and Speech, Language and Communication Programme activities in particular. For example, lack of clarity in Baby Bounce and Rhyme’s publicity materials was stated by several of the parents as an issue they had experienced in the past. Emily shared with the focus group that before deciding to attend Baby Bounce and Rhyme she had been unsure of its target age group. Sarah stated additionally that she was unsure of “what was going on in there” and whether or not she needed to bring refreshments and any other items with her. Once they had attended Baby Bounce and Rhyme for the first time, both Emily and Sarah were pleasantly surprised to find that refreshments were provided free of charge, highlighting the potential of perceived expense to prevent lower income parents from considering attending:

“… they don’t mention there’s no charge, ‘cause some people might think ‘oh, how much is that going to cost me?’ and they’re put off ‘cause they don’t enquire about it.”
(Sarah)

Additionally, the parents discussed Sure Start publicity generally, feeling that more should be done to extend it to the wider domain beyond the Sure Start area. Emily, for example stated that she would like more publicity for forthcoming events to be advertised in the local newspaper, while Heather pointed out further that not all local families access local community and health settings where much of the publicity is placed. Bobbie noted that sometimes newsletters and mail shots go ‘missing’ in the post. None of the parents were aware that the local programme has a website, although most of the parents stated they have access to e-mail and suggested that
they would welcome Sure Start publicity and notification of local events to be received through this medium.

4.2.2 Competing demands
Some parents mentioned competition between employment, domestic and children’s educational commitments as a potential barrier to attending Speech, Language and Communication activities. Heather, for example, noted how play groups and other activities aimed at the 2+ age group often clashed with the Monday morning timetabling of Baby Bounce and Rhyme, thereby limiting the opportunity for more ‘toddler’ age children to attend. Further, she pointed to the obligations placed on parents to ensure their children’s regular attendance at nurseries in order to retain their place, thereby restricting opportunities to attend other organisations’ activities offered at the same time. She suggested adding additional weekly afternoon sessions of Baby Bounce and Rhyme to counteract this problem. Additionally, Anne noted the limitations her part-time work placed on opportunities for her to attend with her son and agreed that additional sessions would help in this regard. Noting Baby Bounce and Rhyme’s early Monday morning time-slot Heather also pointed out that “… after the weekend you just want to get your housework done don’t you?” and suggested this as a further factor influencing other parents’ non-attendances, as indeed a friend of hers had declined to accompany her to sessions for this reason.

Although the parents have identified the Monday morning timetabling of Baby Bounce and Rhyme as posing some difficulties for attendance in some sections of the community, this must be balanced against the potential of the regular and consistent timeslot and venue to increase attendance effectively through word of mouth. However, should Baby Bounce and Rhyme continue to increase in popularity over time, consideration could be given to increasing sessions to improve accessibility across the community.

4.2.3 Confidence; taking the ‘first steps’
In addition to the external barriers stated above, personal issues of confidence were also raised by some of the parents as factors likely to inhibit attendances at Baby Bounce and Rhyme among some community groups. For example Heather and Sarah both suggested that some parents are embarrassed about singing in front of others. As Sarah put it, “What will they think?”. In light of such worries, future publicity material might need to emphasise that parents need not be good singers to
attend! This issue extended further to include the perceived nature of the activity as being ‘for women’ and the potential this perception may have to discourage fathers and male carers from attending Baby Bounce and Rhyme with their children; a factor explored in more depth later.

Further, some of the parents commented on the difficulty they felt many parents, particularly younger mothers, felt in taking the ‘first steps’ to attending Sure Start activities such as Baby Bounce and Rhyme.

Sue: There are a lot of young mums on the estate but none of them come to Sure Start.
Sarah: They think they’re gonna be judged because they’re young”
Sue: But they’re not are they?
Sarah: We’ve all had our children young.
Sue: I had my first at 30 and people are probably gonna look at me and think ‘huh … old hag!”
Sarah: I was 19. I mean it’s still young but people say ‘oh well, not really’. I say ‘well it is to me’.
Sue: There’s no set in stone when you do and don’t have babies. It might be worth encouraging some of the younger ones to come.

That the parents noted mothers’ age differences as a factor potentially influencing low attendances among younger parents in Baby Bounce and Rhyme (and Sure Start more generally), demonstrates the need to consider generational differences in service development.

Women’s age at first pregnancy has risen considerably over the last few decades\(^9\) and it could therefore be suggested that younger mothers and fathers may feel uncomfortable attending activities where the majority of parents may be considered by them to be closer to the generation of their own parents. Sarah illustrates this point herself:

“… you have to lose your inhibitions when you become a mum but at 16 you’re still a child yourself”.

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\(^9\) In 2004, the mean age of women having their first birth was 27.1 years, with subsequent births occurring after age 30. See http://www.statistics.gov.uk/downloads/theme_population/FM1_32/FM1no32.pdf
Therefore the Speech, Language and Communication Programme may wish to explore ways of engaging younger ‘hard to reach’ parents, perhaps by offering additional services and activities designed to attract a younger generation while also supporting their children’s communication development.

Nearly all the focus group participants had mentioned first attendances and ‘not knowing anybody’ as being concerns for them in the past. As Bobbie’s experience with the Sure Start midwife suggested, staff encouragement may be key to supporting new parents reluctant to cross Sure Start’s threshold:

“… I wouldn’t have come through the doors on my own, but she said ‘come and see this, this is such and such’, and she introduced me and was that friendly”. (Bobbie).

However, during the focus groups, parents also commented that involving other Sure Start parents in supporting newcomers might be more appropriate in some cases (and perhaps less intimidating to younger parents). Indeed Heather suggested the possibility of creating a database of local parents willing to accompany newly registered families to activities such as Baby Bounce and Rhyme for the first time:

“I know a lot of people have approached me and said ‘do you do that, and do you do that?’ I says ‘yes’ and ‘Oh, well I’ll go then’. You know, it’s actually finding the person that does that thing. And if you had a list of people maybe like Sure Start parents or something, ‘cause I’ve met not just Sure Start people that say you know ‘would you befriend a new person?’, then you’d say ‘well we’ve just had this mother walk in and she’s a bit depressed, she lives round you, could you befriend her? She’d like to go along to this, would you go with her just to encourage her?’ or something. I think that would help a lot.”

In response to Heather’s suggestion I pointed out Home Start’s partnership role in providing a similar befriending service. Heather pointed out, however, the difference some new parents may perceive between ‘formal’ and less formal methods of support:

“But then you see you’re looking at a worker rather than a parent but if you can do a group of parents … there’s a lot of parents who go to a lot”.

Her comments suggest that although Sure Start partners such as Home Start may contribute a valuable support service for many new families, the development of
additional ‘informal’ support networks involving other parents perceived by newcomers (and particularly younger parents) as being ‘just like them’ might also need to be explored.

Heather’s suggestions highlight also the potential Sure Start might have through such an initiative, to develop a service which would contribute further to the Sure Start objective of ‘Strengthening Families and Communities’. She spoke of her own experience of adjusting to parenthood which led her to realise how disconnected new parents may be from their communities. She pointed out that once they leave work to care for a newborn, expectant and new parents no longer have the opportunities through the ‘traditional’ antenatal care services to form new friendships with other new parents living locally. In the Tamworth Sure Start area women have the choice to attend maternity units at three different hospitals and therefore don’t always meet each other as prospective parents:

“You never meet even if you might only live around the corner from each other. You don’t have those antenatal clinics any more so you don’t know people…You go to work and then you pack up work and you don’t have a clue who lives round your way. It’s not a community any more like it used to be when you’d go to the one hospital or you’d go the one doctor’s. Everyone goes to different doctors.” (Heather)

As one of the first activities accessed by new parents, Baby Bounce and Rhyme may therefore benefit from wider community reach by the development of such a ‘befriending’ service, while also supporting the wider Sure Start target of ‘Strengthening Families and Communities’ through enabling fledgling relationships to develop and flourish between young families brought together this way.

4.2.4 Newcomers to the area: awareness and reach
Some of the parents discussed additional factors potentially inhibiting families from approaching Sure Start more generally. As Sarah highlighted previously, parents new to the area may have little knowledge (and misperceptions) about Sure Start’s services and activities. Although the parents noted that some information about activities was available from posters in health centres and other community buildings, these were often out of date. Indeed Emily’s own route to Sure Start was through responding to a poster in the local Barnardo’s branch window advertising a toddler group. However, at the time of writing, the now out-of-date poster was still on display.
Sarah’s experience of moving to the area when her children were too old to have been supported by midwifery and health visiting services meant that she had no knowledge of the structure, services and venues which make up Sure Start. She had until recently been unaware that the Programme had two centres which could be accessed by any parents of under-5s in the Sure Start area, nor that free transport was available to attend activities. Having recently moved from another part of Tamworth, Sarah felt that it would have been useful for information on Sure Start to have been attached to her tenancy agreement as “that’s the first thing that hits you”. Her experience suggests therefore that further communication between Sure Start and the local housing offices may be needed to enable Sure Start publicity such as that for the Speech, Language and Communication Programme, to be distributed more widely among families new to the area and to encourage them to take the ‘first steps’.

4.3  **Experiences of Baby Bounce and Rhyme Sessions**

4.3.1 **PARENTS**

4.3.2 **Retaining attendances: dedication, consistency and offering ‘something different’**.
Although the parents attending the focus groups had themselves overcome some of the barriers to access discussed above, their earlier experiences of attending Baby Bounce and Rhyme had sometimes been rather daunting, with low attendances at sessions contributing to feelings of self-consciousness. Indeed this was apparent during the Evaluation Officer’s observation in January 2005. Despite experiencing this, Sue demonstrated her commitment to Baby Bounce and Rhyme mainly due to an obligation she felt to the staff for their dedication:

“(They have) … been to the trouble of printing out the sheet, provided the biscuits and drink and all the preparation and I thought ‘if I don’t go, who’s gonna go?’”. (Sue).

However, the parents noted during the focus groups that attendances had improved considerably since Baby Bounce and Rhyme had re-located to the new Sure Start Main Centre. Despite the potential barriers already discussed, the parents attributed the rise in attendances to Baby Bounce and Rhyme’s new ‘permanent home’ and the
predictability of session times which had contributed to greater awareness through ‘word of mouth’. Indeed a considerable increase was noted by the Evaluation Officer to have taken place between the two observations sessions. During the latter observation the Evaluation Officer noted that the session was perhaps a little too well attended, as the Speech Therapy Assistant sometimes struggled to be heard! The rising number of attendees was however perceived by parents to have improved the quality of the sessions:

“You need a roomful really. It was hard with just the two. She (the baby) couldn’t sing, obviously. She’d just sit there and wave her hands. I felt a bit uncomfortable because there was just the two of us – well three of us ’cause there was the two of them (staff) and me.” (Sue).

Emily pointed out further that “you could have been doing the same thing at home couldn’t you?” suggesting that uptake of services and regular attendances may depend partly on being attracted to activities that are ‘different’ to those which parents and children might normally engage in within the home environment. This may have implications for the further development of the Speech, Language and Communication activities both in attracting and retaining family involvement.

In light of the apparent increase in Baby Bounce and Rhyme’s popularity, the Programme may wish to monitor the impact of larger attendances on families’ experiences of the activity and consider offering additional sessions with smaller numbers to ensure that quality is maintained.
4.3.3 The ‘feel-good’ factor

Many of the parents commented positively on the friendliness and welcoming attitude of the staff and on the design of Baby Bounce and Rhyme sessions:

“I think most of the activities are really, really good. They’re always well thought out and they are what they are, aren’t they? I wouldn’t expect anything less from them.”

(Anne)

Some parents expressed additionally the feelings of joy they experienced when participating in activities which supported their interactions with babies and children. Sarah in particular noted the happiness she felt when observing that even very young babies were watching their mothers’ mouth movements while singing, and that “even though they’re small, they know what you’re doing.” When asked how she felt about this, Sarah replied “You’re beaming inside because they’re actually talking and signing with you, aren’t they?” Emily added further that seeing her children enjoying themselves during the sessions was important to her: “If you’re happy, then they’re happy”.

Further, during the observation in July 2005 one parent disclosed to the Evaluation Officer her appreciation of the ‘breastfeeding-friendly’ environment at Baby Bounce and Rhyme sessions which she had found lacking in many other local (non-Sure Start) activities. These experiences suggest that attending Baby Bounce and Rhyme may contribute to parents’ well-being and subsequently the physical and emotional well-being of their children with positive implications for their social and emotional development.

4.3.4 Culture and rhyme singing: rescuing a dying tradition?

A few parents commented also on the value they placed on learning new nursery rhymes to add to their repertoire but also, interestingly, on the cultural importance to them of perpetuating ‘traditional’ nursery rhymes and nursery rhyme singing. Sue, for example, pointed out that some families do not have the tradition of singing rhymes in childhood and that her own partner had not experienced his mother singing to him when little. Consequently he found it difficult to join in with nursery rhyme singing with his own children. Anne pointed out also that her mother-in-law, who is not British, did not know any nursery rhymes to sing with her grandchildren.
The importance placed on these issues by the parents highlights the need to acknowledge the role of the extended family in children’s communication development and that where rhyme-singing traditions are absent, Baby Bounce and Rhyme may be providing an additional, valuable opportunity to fill this gap. As Sue pointed out: “Our children need it to be able to pass it on. It’s a dying thing, isn’t it?”

For these reasons, parents appreciated attending Baby Bounce and Rhyme and welcomed the recent initiative to compile a CD of parents singing a variety of rhymes, which they could then take home with them for all the family to use. Sue however suggested the need for such resources to include signing for deaf children and that a DVD showing songs and signing would be useful. Her point highlighted the need to consider social inclusiveness in service and activity development, which will be discussed later.

4.3.5 Parental involvement

When asked about their level of involvement in decision-making processes in Baby Bounce and Rhyme sessions, the parents disclosed that they felt able to make suggestions and were offered opportunities to choose songs using ‘tick sheets’. However, Kim pointed out that they had little input in terms of consultation on the structure of activities and sessions. Indeed the opportunity to air their opinions during the focus groups was welcomed by all the parents, who wished to see it repeated more often. Although Heather pointed out other ways for local parents to contribute to decision-making processes in Sure Start generally (e.g. joining the Board) the Speech, Language and Communication Programme may wish to encourage greater parental involvement specifically in its own services. By consulting frequently with groups of parents on the structure, focus and impact of sessions, the programme may better gauge satisfaction among the families attending while also exploring ways to keep sessions ‘fresh’ and attractive, thereby maintaining the good levels of attendance which have been achieved since re-locating to the Main Centre.

4.4 CHILDREN

4.4.1 Activities and the importance of ‘family learning’.

Despite their own focus on the social and cultural importance of nursery rhyme singing, the parents’ comments on their children’s experiences of Baby Bounce and Rhyme centred as much on their engagement with the activities accompanying the singing as with the singing itself. Most of the children enjoyed using the percussion
instruments and particularly liked the glove puppets which were used to represent different characters in the nursery rhymes. Sue and Bobbie commented additionally on how their older children had attended Baby Bounce and Rhyme occasionally while away from school and wanted to return to this activity, rather than to school, so that they could join in with the singing! Sarah pointed out the value to her of her older children being able to attend when possible and that this was enjoyable for parents “as you are still teaching your older ones too”. Indeed several of the parents stated that they would like sessions to continue during the school holidays so that the whole family could attend and the older children could then help the little ones, highlighting the importance to parents of the part played by older siblings in younger children’s communication development.

Many of the parents also noted the positive contribution made by Baby Bounce and Rhyme to developing children’s’ confidence when singing in public and, as Emily suggested, having “a head start because they’ve done it since they were 6 months old”. The parents also appreciated the opportunities Baby Bounce and Rhyme presented for their children to learn by copying their peers. This was of particular value to parents with only one child. As Anne pointed out “They like to join in don’t they, when the see all the other kids singing?”.

Additionally, the effectiveness of using actions and signing while singing rhymes during the sessions was acknowledged. Sue noted that “You only have to do the actions and they know what song you’re gonna do.” Indeed the issue of signing and sign language in relation to both communication and social inclusion was considered an important issue by the parents and will be returned to later.

4.4.2 Toddlers: the developmental challenge.

Despite the generally positive feelings expressed by the parents regarding their children’s experiences of Baby Bounce and Rhyme, some difficulties and negative feelings were raised with regard to age-appropriate activities. Although directed at all children aged 0-4, the parents highlighted the need to consider the changing intellectual and physical needs of children as they develop:

“There’s a stage between 14 months and 2 when they just don’t join in. They’re just not interested at all. And then all of a sudden it just clicks and they start. And I think you’ll find that’s when the mothers start to drop off. It’s because the kids aren’t interested”. (Heather).
Indeed Heather’s suggestion is supported by Kim’s personal experience, mentioned earlier, of attending regularly while her daughter was not when she reached the ‘toddler’ stage: “You’re just running after them all the time. It’s a waste of time”. Now that she is older, Kim’s daughter has resumed attending Baby Bounce and Rhyme. Anne expressed her experience of her children’s ‘short attention span’ also at the toddler stage, while Heather disclosed how her two children would often ‘end up fighting in the corner’. Indeed the parents noted that the ‘attention’ issue also impacted on toddlers’ reactions to the Therapy Assistant when ‘talking through’ the words to different songs:

“… if you don’t know the song I think it would be better to have a song sheet rather than others speak through every single song ‘cause I think the kids get distracted and lose the momentum”.

Their children’s behaviour at Baby Bounce and Rhyme during the transition from babyhood was felt by the parents to cause them embarrassment, as it conflicted with the sessions’ structures which depended largely upon focused, group participation which their children were unable to sustain for long. It could be suggested that such experiences may have contributed also to the tendency for some families to attend once only, although this could not be verified during the focus groups which had comprised regular attendees.

4.5 Parents’ solutions
In light of their negative experiences, the parents suggested ways in which activities could be developed in Baby Bounce and Rhyme to support the needs of the older children in the group. Several parents felt that including craft-based activities related to song themes would enable their toddler-aged children to become more focused and enjoy rhyme-singing much more. Of particular interest was Bobbie’s idea that parents and children could make their own glove or finger puppets of nursery rhyme characters so that all children attending would be able to use them during sessions, rather than competing for the few currently available. She suggested that children could choose a song or character to be the ‘subject’ of the following weeks’ session and families could then make and bring their puppet to use at that session: “Just say, one week we’re gonna make puppets and the next week we’ll sing the songs”.

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Several parents noted this suggestion’s potential as an incentive for both children and parents to return to Baby Bounce and Rhyme the following week:

“Kids would nag their mom and say ‘when are we gonna make the bunny ears Mom?’ and then they’d do it and then ‘cause they’ve made them they’d feel they have to bring them back to use the bunny ears!”. (Sue).

Sarah suggested further that the children could wear hats to take on ‘character parts’ during songs: “They do learn more from that. They are actually doing things.” Linking the benefits of simple craft-based activities to nursery rhyme singing led the parents also to highlight the need to consider children’s involvement in decision-making processes. As Heather pointed out:

“They do like certain rhymes. It’s alright you picking them and thinking ‘oh well, they like that’ and then when they come to sing they don’t want to know”.

She suggested that a picture book of songs could be compiled from which children could choose which songs they wanted to sing:

Heather: I mean I know they can’t read but sometimes they like to pick.
Sue: They can recognise them.

Indeed the ability to express wishes and exercise choice may not only improve children’s engagement with activities but it may also serve as evidence of communication development, and could therefore be supported and encouraged more widely within Speech, Language and Communication activities. In addition, several parents suggested including musically-based interludes during sessions which, although not related directly to speech-centred communication, might nevertheless enable the older children to focus more easily on such activities afterwards. Sue, for example, suggested that sessions could occasionally include recorded music, currently not featured during activities and which Bobbie noted may also help parents, as “Some of us don’t actually know the tune”. Sue noted further the potentially positive outcomes of encouraging children to dance during sessions as:
“That would get rid of the silliness … When they start getting a bit silly let them have a little dance and get the silliness out of them and then ‘right we’re all gonna sit down and get our puppet’s’, or…You could dance to just one song every week”.

Indeed Sue’s suggestion reflects recommendations in the Department for Education and Employment’s ‘Curriculum Guidance for the Foundation Stage’ which states that, in light of the role of physical activity in contributing to children’s confidence and well-being, practitioners in Early Years settings should give particular attention to ‘planning activities that offer appropriate physical challenges’ and ‘introducing the language of movement to children’ (DFEE, 2000, P.100). The inclusion of such activities may therefore further enable Baby Bounce and Rhyme to contribute to the Sure Start objective of ‘Improving Children’s Communication, Social and Emotional Development’.

4.6 Impact of Speech and Language activities

Although this evaluation set out to focus on the ‘processes’ of the Speech, Language and Communication Programme’s activities, their ‘impacts’ on children’s development and family life were however brought to light by the parents. Several mentioned how they now sing to their children to ‘calm them down’ and how, in addition to its cultural significance, rhyme-singing plays a part in family fun-time, contributing to family bonding. Bobbie for example noted how she sings with her children when they’re walking along together:

“They’ll march behind me like my troupe, singing songs!”

Further, Sarah disclosed how she had taught her partner rhymes with signs and actions so that he could join the family in singing the songs they had learned in Baby Bounce and Rhyme. These experiences highlight how the Speech, Language and Communication Programme can reach other family and community members beyond the Sure Start Centre’s bounds and impact on family life in ways not captured by attendance monitoring methods alone. Indeed the Speech, Language and Communication Programme may find it useful for ‘mainstreaming’ purposes to consider developing further ways of monitoring and assessing its activities’ impacts on families and on children’s communication development beyond the standard Language Measurement requirements.
Sarah highlighted further the programme’s impact when she spoke of the improvement she had witnessed in her daughter’s speech development since attending Baby Bounce and Rhyme; a concern she held initially in light of her older children’s speech development delay due to hearing difficulties experienced in early life:

“She’s only 17 months but her words are much better than what my boys are and my boys are a lot older.”

Although Emily responded that girls ‘chat a lot earlier than boys anyway’, Sarah commented that her daughter’s language development had speeded up since attending Baby Bounce and Rhyme, while Bobbie noted that parents can tell the difference in their child from before they started attending, to afterwards.

Although ‘anecdotal’, Sarah’s experience demonstrates the value she perceives Baby Bounce and Rhyme to have in contributing to her daughter’s speech development and the awareness she now has of the developmental level her daughter may be expected to achieve at this stage in her life. Indeed their involvement with the programme had enabled two other parents to identify potential speech difficulties in their children and had subsequently sought advice from the Speech Therapy Assistant. These issues may have been particularly important to Sarah, whose partner and older children had a history of hearing problems; an experience which led the participants of Focus Group One to raise the issue of widening access to Speech, Language and Communication activities to include children of different abilities across the local area.

4.7 Communication and Social Inclusion

4.7.1 Children with different abilities

As Sarah’s experience demonstrated, hearing problems may be a factor influencing speech, language and communication developmental difficulties. Sarah identified how children with hearing difficulties may become isolated from the community, which she felt to be detrimental both to hearing and non-hearing children alike. She disclosed the experiences of her own son who had ‘grommets’ fitted while he was small and subsequently encountered speech difficulties while he was aged under 6:
Sarah’s son’s experience may not be rare, as research has shown that hearing difficulties of varying degrees due to ‘glue ear’ (fluid leakage in the middle ear) are fairly common, with most children having at least one episode in early childhood, peaking at 20% of children aged 2 years (Prodigy, NHS, 2004). The commonness of this condition among pre-school age children may therefore impact on a considerable number of local families who, unlike Sarah, may have had no past experience of the condition, and may therefore be unaware of its symptoms and its potentially negative effects on their children’s speech and communication development. The Speech, Language and Communication Programme may therefore wish to consider ways to further raise awareness of ‘glue ear’ and other conditions potentially effecting children’s hearing, both through its activities and services and more widely in the local community, in addition to further publicising the benefits of the programme’s activities and services in supporting families with children experiencing a range of hearing abilities.

During the focus groups the parents expressed how they valued the use of signs and actions during Baby Bounce and Rhymes’ activities and felt they would potentially enable children to better communicate with each other as well as with their parents. The consequences of communication difficulties on children’s well-being was raised further by Sarah who explained how, in the past, her son couldn’t comprehend that other people didn’t understand what he was saying. She suggested that had her son (and also hearing children) been able to sign “it would have been different, but I didn’t know how to sign unless I got a book”. Indeed the issue of using signs and sign language was further raised by parents in both focus groups in light of the increasing visibility of their use in the media and in other educational establishments.

Focus Group One in particular spoke of sign language use on the BBC’s children’s television programmes (e.g. on the Ceebeebies channel) which, Heather pointed out, her own son had learned signs from. The parents noted also that some local primary schools had introduced signing and actions to accompany song singing during assemblies. Sue talked of her own wish learn sign language and to enrol her child in ‘Baby Signing’ classes but that unfortunately her child was now too old. Emily pointed out that enquiries had been made by Sure Start about enabling local
parents to learn sign language at the local college but that it was “too expensive”. The families’ increasing exposure to, and interest in signs and sign language, may therefore have implications in terms of developing their use across other activities offered by Sure Start in addition to potential adult learning opportunities and their role in social inclusion.

Sarah’s experiences of witnessing the isolation and frustration experienced by her son due to his hearing difficulties led Focus Group One to further discuss their desire to see children of all abilities attending Speech, Language and Communication activities. Sarah pointed out how another of her sons had experienced walking problems in early life and disliked other children staring at him, as he didn’t want to be ‘different’ and “didn’t want to be looked on as different”. The parents felt that enabling children of different abilities to mix at an early age might contribute to preventing such difficulties. Although Baby Bounce and Rhyme and other Speech, Language and Communication activities are inclusive, the parents’ perceptions that children with disabilities\textsuperscript{10} are not seen attending them suggests that the programme (and indeed Sure Start more generally) may need to publicise more explicitly that its activities and services are open to all, for example by including pictures of children with a range of abilities. Indeed Sue expressed her feeling that activities should be advertised beyond the Sure Start area and across the town to include children with disabilities and that this would enable children of varying abilities to mix and enjoy singing and signing together. Emily supported these suggestions stated that:

“It would be nice to have other children with other abilities in the groups”

The group all agreed that enabling children of all abilities to enjoy activities together at such an early age would improve their communication skills individually, but more importantly between each other, thereby further breaking down social barriers.

\textsuperscript{10} I had attempted to quantify the population of registered disabled children in Tamworth aged under 5 who could potentially be reached by the Speech, Language and Communication programme (and Sure Start in general). However, due to difficulties in defining the term ‘disabled’ (e.g. do they include physical / learning and or behavioural difficulties) and the lack of national data collection relating specifically to the under 5s age group, I was unable to obtain such figures within the evaluation’s timeframe.
4.7.2 Fathers and male carers

Parents at both focus groups spoke of fathers’ involvement with their children’s care and development, but commented on the relative absence of fathers and male carers in Sure Start generally and at Baby Bounce and Rhyme in particular. Sarah, for example, noted that “… considering that a lot of dads here on this estate don’t work, they could come as well”. Their absence was perceived by the parents to result from a number of factors including fathers’ perceptions of Sure Start’s culture, their perceived fatherhood roles and working patterns.

All but two of the partnered parents felt their children’s fathers showed little interest in attending Baby Bounce and Rhyme with them. One suggested that her partner would only attend in her place if illness or hospital appointments meant that the children would miss out, while another commented that her partner would welcome the opportunity to attend but finished work at 3.30 pm; too late for most Sure Start activities which have ended for the day. Emily disclosed that although her partner also works shifts and could in theory attend with her, they preferred to venture outside Sure Start to do things “together as a family”. However, Sue commented that her partner wouldn’t come to Sure Start under any circumstances “even if he was a single parent”. She disclosed that he would not take his son swimming because he thought it would involve “just a group of women chatting”; a view Emily’s partner held also with regard to Sure Start activities.

Bobbie and Emily stated also that their partners would not feel comfortable “sitting in a room full of women singing”. However, Bobbie did point out that her partner would feel more comfortable attending Baby Bounce and Rhyme if it were for ‘dads only’. These parents’ experiences suggest that despite Sure Start’s efforts to encourage greater participation among fathers in its activities, some men in the area may view local child-centred activities and Sure Start services as being ‘for women’; a means for mothers and children to socialise together during men’s absence at work, rather than offering opportunities for all parents and children to engage in activities together as a family.

However, Sue commented that men who do feel open to engaging in Sure Start activities might nevertheless feel intimated by being overwhelmed in numbers by women. As she pointed out: “the only other men are the children, the boys that go”. She suggested that increasing men’s visibility in Sure Start by recruiting male staff
and volunteer ‘granddad figures’ may help overcome their relative absence at activities. Such a move could better support grandparents like Kim’s father, who care for their grandchildren when the children have no contact with their own fathers. It might also enable children to access male ‘role models’ when there are few significant adult males in their lives. Indeed the possible need for such an approach is exemplified by Bobbie’s daughter’s experience of growing up in a culture of female dominated early-years services:

“I know one of mine had trouble when she went up to school and she’d got a male teacher. She was only ever used to being with females. She was only a five-year-old. She was like ‘it’s a he’. It’s like ‘It’s OK, he’s just your teacher’. But, you know, she’d had a female at nursery, a female at playschool and then it threw her when she got to school and she’d got to relate to a man”.

Sue’s suggestions may have a role in potentially increasing men’s visibility in Sure Start and implications for the Sure Start target of ‘Strengthening Families and Communities’. However, visibility alone may be insufficient in retaining father-involvement in activities such as Baby Bounce and Rhyme unless male inclusion is supported wholeheartedly by staff. Indeed Sarah commented on one awkward occasion where a father had brought his child to Baby Bounce and Rhyme after attending for the first time with his partner the previous week. However this time he was met by wall of silence:

“I noticed it. Not one person spoke to him … Because he was a man nobody wanted to know”.

When asked how the staff reacted to his plight, Sarah stated that they hadn’t noticed, as they were busy making drinks. Emily pointed out however, that mothers might find it strange having men (especially older men) around children:

Emily: It’s looked upon as not the right thing.
Sue: Well, it is the right thing. Why is it a bad thing?
Emily: Well, I don’t know. It’s just the way society’s looking at it, isn’t it?

The comments and experiences expressed above suggest a deeply ingrained view among many local people of women’s and men’s ‘traditional’ roles in their children’s
care and development. They highlight also the culture of suspicion surrounding men’s involvement with children, all of which may act as barriers to participation among fathers and male carers who do wish to take responsibility for, and a greater caring role in, their children’s lives. The Speech, Language and Communication team may therefore need to consider their own part in challenging gendered assumptions and exploring ways of supporting fathers more fully in the care of their children, while also being sensitive to the needs of women and children who might have experienced poor relationships with men in the past.

From their experiences, the parents did however suggest ways that their own partners may be encouraged to participate in activities contributing to their children’s speech, language and communication development. Activities focusing more on ‘practical’ and creative activities, such as painting, cake making, model and robot making were considered to be more appealing to fathers:

“That’s their way of communicating. The actual crafty side of it. They always seem to be making or doing things” (Anne)

The parents also disclosed how fathers influenced their children’s communication development at home by engaging in story reading, gardening, water games, construction and making up counting games with their children. The programme may therefore wish to explore developing activities such as these which may attract more fathers and male carers to Speech, Language and Communication activities, and which support their participation in their children’s development at different stages of the children’s lives and in ways which take account of men’s different working patterns.
4.8 Baby Gurgles / Songs & Rhyme

Due to the lack of focus group participants who had attended Baby Gurgles and / or Songs and Rhyme, and the absence of reliable attendance data for the latter (new) activity, the evaluation of this part of the Speech, Language and Communication Programme has been informed only by the Evaluation Officer's observations and a short telephone interview with a former Baby Gurgles attendee and therefore the findings represent only a general impression with limit evidence of processes and impacts. They do however raise interesting issues in need of consideration for the Programme’s development.

4.8.1 Baby Gurgles

During the observation of Baby Gurgles at the Exley Centre in November 2004 the Evaluation Officer’s impression of the session was that it followed a well-structured plan of songs, play and simple toy making. Only one parent had attended this session with her 9-month-old child. During the course of the session the Speech Therapy Assistant had talked with the mother about speech development and demonstrated ways to encourage her child’s noises and babblings. The family clearly enjoyed themselves and the mother disclosed to me that her child’s concentration had improved tremendously since attending the sessions. She did not understand why more families had not attended but suggested that the afternoon timetabling might coincide with many young children’s nap times.

The only parent able to participate in the telephone interview had attended Baby Gurgles over a year ago and could not remember much detail about the content of sessions. She had attended with her young twins and one other parent with an older child. The parent disclosed that staff had been apologetic for the lack of other families in attendance. The parent felt that the older child attending had received much more attention from the Speech Therapy Assistant than her twins but that this was most likely due to him being ‘more developed’ and therefore more responsive. She felt that her children didn’t really ‘do much’ during sessions other than play with rattles and shakers which they enjoyed, but that they were perhaps ‘too young to get anything from it’. The parent had no suggestions for improving the activity except that children might benefit from attending after 6 months of age ‘because they can do more’.
In light of the focus group findings that parents’ motivations to attend speech and language-based activities are largely social, greater progress may be gained by the Programme in reaching very young children within the existing Baby Bounce and Rhyme sessions and through other less formalised baby-focused activities targeted within the wider community. Indeed the following observation at Songs and Rhyme appeared to support this view.

4.8.2 Songs and Rhyme
The Songs and Rhyme session was observed a Wednesday morning in July 2005 during the children’s clinic at Glascote Health Centre. As the session began, approximately five or six parents were seated around a large play-mat with their babies and toddlers who were either sitting or lying down. Finger and glove puppets and musical instruments were available for the children and parents to play.

During the songs some of the babies and toddlers were very attentive, watching the Speech Therapy Assistant’s face very closely while she sang and signed. Many of the parents, though not all, joined in with the songs and rhymes and all were clearly enjoying it. As with Bounce and Rhyme, the older toddler-aged children loved the puppets and musical instruments. In addition to engaging with activities themselves, the parents appeared to value the opportunity to socialise together, spending the refreshment break chatting to each other and exchanging ideas, advice and experiences on weaning, food and general shopping bargains and their babies’ and older children’s development. Reflecting Baby Bounce and Rhyme, the social side of the activity appeared to be as important to these parents as its language and communication elements.

Since the clinic setting was predisposed to families ‘dipping’ in and out of the session, and parents were apt to chat together, it was sometimes difficult for the Assistant to structure the sessions too formally. The session nevertheless appeared beneficial in that the children were obviously enjoying the songs and play and the activities had appealed to parents; several having become regular attendees.

Additionally, the Assistant had disclosed that Health Centre staff had commented on the clinic’s improved atmosphere since Songs and Rhyme began, while the sessions had also proved effective as an ‘outreach’ service initiating contacts with new
families who might otherwise have lacked the confidence to approach Sure Start themselves.

Songs and Rhyme’s achievements might have been overlooked without the observation session which uncovered the higher level of reach in the community than has been represented on the monitoring contact sheets. The ‘drop-in’ nature of the baby clinic meant that many families who were ‘passing through’ could not be logged on the attendance records, as the Assistant was simply unable to note them down while busy delivering the activities. Additionally, later discussion with the Speech Therapy Assistant brought to light the reluctance in later sessions of parents to participate more fully in activities, leaving the Assistant feeling somewhat disheartened. Future sessions may therefore benefit from additional support (e.g. a staff member or parent volunteer) to encourage and support parents and to help ‘capture’ attendance figures more accurately by assisting with the paperwork.

A comparison of findings from observations of the Baby Bounce and Rhyme and Songs and Rhyme sessions brings to light the greater tendency for the latter to reach a larger number of families and to engage them more fully than Baby Gurgles. The strength of locating such an activity in community and healthcare settings lies in its ability to allow parents to ‘dip’ in and out of the activity without demanding the commitment required of the more structured Baby Gurgles sessions, while still achieving the desired level of engagement and repeat visits among families. Additionally, as with Baby Bounce and Rhyme, it appears that the ‘incidental’ benefits of enabling parents to socialise together should perhaps be recognised and valued more fully and perhaps incorporated deliberately into the design of activities such as Baby Gurgles (and included in the publicity) if more families are to be attracted and regular attendances achieved.
5 CONCLUSION and RECOMMENDATIONS

5.1 The positive impact of social support and informality

This evaluation has brought to light the importance of Sure Start’s informal and social dimensions in attracting families’ participation and maintaining attendances at its activities. The parents attending the focus groups and those present at observations valued the opportunities Baby Bounce and Rhyme and Songs and Rhyme provided for themselves and their families to mix with others in a welcoming and supportive environment, to enable them to ‘get out of the house’ and to engage in activities with their children which were ‘different’ to those they would do at home. They also valued the part played by Baby Bounce and Rhyme in perpetuating the rhyme-singing ‘tradition’ which they felt to be an important cultural part of childhood which contributed also to family bonding. Their experiences demonstrated clearly that the programme’s activities have impacted positively on those accessing them in terms of PSA Objectives 1 and 4 (2003-6), ‘Improving Social and Emotional Development’ and ‘Strengthening Families and Communities’ (Sure Start 2005a).

However, given the programme’s learning and communication aims, and that new attendances are arising through word-of-mouth, thought might be given to emphasising further the activities’ benefits to speech, language and communication development regularly within sessions as well as through standard publicity materials.

Although the parents’ motivations to attend Speech, Language and Communication activities were explicitly social, their experiences and views demonstrated their appreciation of the positive impact the activities had on their children’s speech, language and communication development. Indeed several of the parents expressed positive outcomes for their children, while those experiencing concerns about their children’s speech and communication development understood the need to request further advice and assistance and were confident in approaching the Speech Therapist and Therapy Assistant to do so. The parents’ experiences demonstrated also how the activities offered in Baby Bounce and Rhyme extended beyond the bounds of the Sure Start Centre, with knowledge of songs and signs being passed to older siblings and fathers, highlighting further the part played by the extended family in young children’s development. To these ends, the Speech, Language and Communication programme’s activities were seen to contribute well to PSA Objective 3 (2003-6) ‘Improving Learning’ (Sure Start 2005a) above and beyond the target under-4 age group.
Although some difficulties were experienced in the programme’s ‘early days’, the parents demonstrated a largely positive view of the programme’s activities. In particular they appreciated the staffs’ warmth and dedication and the quality of the activities offered. Baby Bounce and Rhyme’s move to the Sure Start Main Centre was seen to have made a positive difference to the parents’ perceptions and experiences of sessions. The regular timeslot and permanent venue contributed to increased attendances among a wider section of the community, which the parents had attributed to increased awareness due to ‘word of mouth’. Additionally, the informal, social and accessible nature of the health-centre based Songs and Rhyme sessions appeared to engage families more readily than the more formally structured Baby Gurgles sessions, although some assistance from an additional staff member or parent volunteer would enable this activity to reach its full potential. The importance of these attributes to the continued success of the Speech, Language and Communication programme’s activities must therefore be acknowledged by staff and considered fully in the programme’s future development.

5.2 Meeting developmental needs.
Despite the very positive outcomes, parents highlighted some issues regarding awareness, access, social inclusion and children’s varying abilities, which may need the consideration not only of the Speech, Language and Communication programme but also of Tamworth Sure Start more generally. With regard to the former, the parents felt strongly that Baby Bounce and Rhyme needed to do more to engage their ‘toddler’ age children more fully in sessions, suggesting that their inclination to wander off and explore contributed to parents’ embarrassment and consequently failure to maintain repeat visits. The programme may therefore wish to consider seriously the parents’ suggestions of introducing simple song and rhyme-related craft-based activities into sessions, in addition to short music and dance interludes to maintain children’s interest, enable them to ‘let off steam’ and consequently to encourage parents to continue attending. Indeed their suggestions are supported by guidance in ‘Birth to Three Matters’, which states that “Play is a powerful means of experimenting with language as different roles are adopted and new ideas and words are explored”. (Sure Start, 2005b, p.1). They also reflect recommendations in the ‘Curriculum Guidance for the Foundation Stage’ (DFEE 2000), which acknowledge the role of physical activity in learning, and advise its incorporation into early years settings.
5.3 Social inclusion: Public awareness and supporting diversity

5.3.2 Newcomers and young parents

The parents' experiences and their identification of the barriers they felt certain groups in the community faced with regard to engaging with local services, brought to light the need for Sure Start to adopt a more pro-active role in publicising activities and encouraging families to attend. Of particular note was the need to raise awareness of Sure Start among newcomers to the area who may ‘slip through the net’ and those in particular who have toddler age children and would therefore not be ‘caught’ and introduced to Sure Start by midwifery and health visiting services. The Sure Start programme may therefore wish to consider further one parent’s suggestion to collaborate with local housing agencies in disseminating information on Sure Start activities such as Baby Bounce and Rhyme, for example by including leaflets with tenancy agreements. It should also endeavour to ensure that publicity materials such as those used by the Speech, Language and Communication programme are up-to-date, clear about whom activities are targeted at and whether they are free of charge.

The parents also brought to light the relative absence of younger parents in the Sure Start buildings and felt that more needed to be done by Sure Start to support this section of the community. Thought must therefore be given to further developing targeted outreach work and designing activities that will appeal to parents of different age groups, bearing in mind that some mothers may be of a different generation to others. Consideration might also be given by Tamworth Sure Start to the parents’ suggestions to develop a database-supported, informal ‘buddy’ system of local parents willing to accompany newcomers to activities such as Bounce and Rhyme. Such a system might work to complement the existing Home Start service.

5.3.3 Supporting fathers and male carers

Men’s absence from Speech, Language and Communication activities was highlighted by the parents and was considered to arise partly from gendered assumptions of the nature and focus of children’s services as prioritising women’s needs. Indeed the parents themselves expressed conflicting views on men’s involvement with Sure Start. However, it was noted that men’s relative ‘invisibility’ within Early Years settings might contribute to future difficulties in children’s abilities to relate to men, particularly if they have no significant adult male in their lives.
Suggestions were made by some parents to recruit male volunteers and ‘granddad’ figures to increase men’s visibility and attendances and to familiarising children with their presence. However one or two parents expressed reservations on the ‘appropriateness’ of involving men this way, highlighting the culture of suspicion surrounding men’s involvement in childcare, which may need to be addressed. Given that some parents had observed a negative attitude by mothers toward one father attending Baby Bounce and Rhyme, staff may need to consider their own part in challenging gendered assumptions and supporting fathers more fully when they attend sessions.

The complexities of these issues highlight the need for the Speech, Language and Communication programme to consider and explore ways of engaging fathers in their activities more fully. These could involve focusing on inclusive approaches to activity development which might help to break down gender barriers, and/or designing separate communication-based activities aimed specifically at attracting fathers/male carers and their children. Such approaches might ultimately better support men wishing to be more fully involved in their children’s lives.

5.3.4 Supporting children with different abilities

The parents’ personal experiences brought to light the need for Sure Start in general, and the Speech, Language and Communication programme in particular, to publicise their openness to children with a range of abilities and to raise public awareness more widely of common conditions which have the potential to impact children’s development for which support can be offered. Given the relative commonness of conditions such as ‘glue ear’ which may impact on children’s communication development and subsequently their sense of identity and self, further thought should be given to the parents’ suggestions to expand the use of signs and sign language beyond Speech, Language and Communication sessions to include other Sure Start activities and adult education opportunities. As some of the parents pointed out, enabling children with a range of abilities to enjoy activities together at such an early age would not only improve their communication skills individually but more importantly between each other, thereby contributing to breaking down social barriers.

Given the government’s recognition of the link between disability, disadvantage and poverty and their aim to “enable young disabled children and their families to access
‘ordinary lives’ through effective support in mainstream settings” (Strategy Unit, 2005) consideration needs to be given to further developing and publicising an inclusive programme of activities whereby children with a range of different abilities can mix, learn and enjoy participating in activities together. This will be of particular significance as Sure Start services are ‘mainstreamed’ and additional Children’s Centres are rolled out in Tamworth over the coming years.

5.4 Consulting with families
A significant outcome from this evaluation has been the importance of hearing parents’ voices and exploring the issues and experiences that local families feel are important to them. Although the evaluation set out initially to explore parents’ experiences and perceptions of the ‘processes’ of Speech, Language and Communication activities, these are inevitably located within the context of their everyday lives. Therefore wider issues of importance to the parents have invariably come to light. Children’s developmental needs, social inclusion, gender, generational differences and information awareness were subjects the parents considered important to themselves and the local community and were suggested to impact on the uptake, engagement with and attendance of Speech, Language and Communication activities. As such they too should be acknowledged and, where possible, addressed if Tamworth Sure Start is to continue to achieve its aims of improving the wellbeing and life opportunities of young children and their parents.

The parents had welcomed the opportunity offered by this evaluation to express their views and experiences, and although they and their children had been given opportunities in the past to exercise a degree of choice in Speech, Language and Communication activities, deeper levels of input into their design and development had not been experienced. To these ends, Speech, Language and Communication activities would benefit considerably from ongoing monitoring development and self-evaluation. To be of benefit, monitoring data must be accurate, and therefore additional support should be provided during community-based activity sessions such as Songs and Rhymes to enable the Therapy Assistant to collect it.

Additionally, regular consultation with families is needed if activities are to develop in line with the local community’s needs and if the Speech, Language and Communication programme in both its current and future forms is to reach its outcome targets and ultimately to grow from strength to strength.
REFERENCES


http://www.surestart.gov.uk/_doc/P0000479.pdf


HM TREASURY (2000) Public Service Agreements 2001-2004 (Chapter 20)


SURE START (2005a) PSA targets 2003-6
http://www.surestart.gov.uk/improvingquality/targets/psatargets200306/

SURE START (2005b) Birth to three matters: A skilful communicator

SURE START (2005c) Birth to Three Matters: About the framework
TAMWORTH SURE START (2001) Delivery Plan (available upon request from Tamworth Sure Start Evaluation Officer. Tel 01827 45225)
Appendix One

Parents’ Information Leaflet
**Group Talk Information Sheet**

**Frequently asked questions:**

**Q.** What is the purpose of the group-talk?

The group-talk is your chance to say what you think about 'Baby Bounce & Rhyme' or 'Baby Group' / 'Baby Gurgles' (whichever of these activities you have been to in the past). What you tell us will help Sure Start to make changes so that you and your family will enjoy them more and will want to come back again.

**Q.** What will happen at the group-talk?

**A.** You will be able to talk with other parents about what you have liked and disliked about the activities. No staff other than the Evaluation Officer will be present, so you can talk more openly.

The group-talk will be tape-recorded and then typed up so that the Evaluation Officer does not miss anything important that people say. Staff will not be allowed to know who has spoken and no real names will be used when the group talk is typed up.

**Q.** Where will the group talk be held?

**A.** The group talk will take place at St Peter's Community Centre in Hawksworth, Glascote Heath (opposite the Sure Start Main Centre). The Evaluation Officer will contact parents who want to take part to arrange the best time and date for everyone. Food and drink will be provided and crèche places will be available.

**Q.** Will I be allowed to see a copy of the written version of the group-talk?

**A.** Yes. If you would like a typed copy of the group talk, please ask the Evaluation Officer afterwards and leave your name and address so that it can be sent to you.

**Q.** What will happen after the group-talk?

**A.** The Evaluation Officer will look at the things you have talked about and will write a report for Sure Start to let them know what parents have thought about the activities. The report will also contain suggestions about how the activities could be improved or changed so that families will enjoy them more.

**Q.** Will I be able to see the final report?

**A.** Yes. Please let the Evaluation Office know if you would like a copy of the report and we can arrange for one to be sent to you. The report may also be published on a website which other Sure Start Programmes and the general public can also look at. If this happens we will let you know how you can look at the report this way.

A shorter version of the report's findings may also be included in a Sure Start newsletter so that everyone in the Sure Start area will be able to read them.
Q. What do I do now?

A. If you would like to come along to the group talk, please complete the slip on the back of this leaflet giving your name, address and telephone number and return it in the envelope provided by 30th April 2005. The Evaluation Officer will then contact you to talk about the arrangements and to see if you will need a crèche place.

If you have any further questions or would like more information before you decide whether to take part, please call in to the Sure Start Centre or phone:

Julie Cappleman-Morgan on 475225

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Baby Bounce & Rhyme Group Talk

I would like to come to the Baby Bounce and Rhyme / Baby Gurgles group talk.

Name: ...........................................................

Address: ................................................................

...........................................................................

...........................................................................

Phone no: .....................................................

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Staffordshire County Council

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SureStart

Tamworth
Appendix Two

Focus Group Schedule
FOCUS GROUP SCHEDULE

SPEECH & LANGUAGE

MAY 2005

INTRODUCTION
- Who I am, what my job is and what I’ve been asked to do today.
- Ask if there are any questions.
- Ask everyone to read and sign the consent form and to leave contact details if they require a copy of the transcript.

FOCUS GROUP TOPIC GUIDE

• How did everyone find out about Bounce & Rhyme or Baby Gurgles? (probe for knowledge and effectiveness of publicity etc)
• How many have been to either of the activities?
• Had those who had not been to Bounce & Rhyme or Baby Gurgles heard of the activities before?
• How do they think the activities could be better publicised? (e.g. what in their view would make an impact on families and make them want to attend – particularly those who haven’t been before?)
• What reasons and purposes do they think the organisers had for putting the activities on? (probe for awareness of S & L aims etc)
• Why did they decide to come along / not to come along?
• What did they think the activities would be like?
• Did the activities appeal to them? If so, why? If not, why not?
• If they attended the activities, were they in any way different to how they imagined? (If so, in what ways?).
• What did they like about the activities?
• What did they dislike about the activities?
• If they only attended once or twice, why was this? (i.e. why did they no longer attend?).
• How do they feel about the way the activities are presented?
• How do they feel about their part in the activities (e.g. how do they feel about participating in the activities?)
• What do they think their children’s experiences of the activities have been?
• What have their own experiences been like? (*good and bad*)
• Has attending any of the activities made any impact on their and their families lives? (*If so, in what ways?*).
• Have they continued to practice the activities in the home? (*If so, what elements, and are other family members involved at all?*).
• Figures show that men rarely attend these activities. Why do they think this is?
• How do their partners (where applicable) contribute to their children’s speech and communication development? (*e.g. do they sing along with them, talk to them, read to them etc? – ask for specific scenarios and how often these take place – What are the relative proportions, time-wise, that mums and partners do this?*)
• How do they feel that dads and male carers could be supported by Sure Start with their contribution to children’s speech and communication development? (*e.g. what activities would they enjoy; what practical support would they consider using, for example within the home – e.g. tapes, songbooks, games etc – other suggestions?*)
• How do they feel among the group of other families who have attended Bounce & Rhyme and Baby Gurgles? (*e.g. comfortable/uncomfortable with them etc?*).
• How did they feel about the venues and times of the activities?
• Have any of them been involved in decisions on the design of activities offered in Baby Bounce & Rhyme / Baby Gurgles?
• If so, what did they do? If not, how do they feel about it?
• What changes would they make on any aspect of Baby Bounce & Rhyme / Baby Gurgles?
• What do they think could be done to attract other families to come along to Baby Bounce& Rhyme and to keep them coming back?
• Any other comments or suggestions?
Appendix Three

Telephone Interview Schedule
What were your overall impressions of Baby Gurgles?
What were the good things?
What were the bad things?
What did you enjoy?
What didn’t you enjoy?
Did attending the sessions have any affect on your baby? If so, in what way?
What would you have liked Baby Gurgles to do differently?
What things would you like to see changed about Baby Gurgles?
Do you have any other comments or suggestions to make about Baby Gurgles?