Sure Start Preston East
Local Programme Evaluation

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Acknowledgments

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Residential Street beside football stadium where some community courses were located

Examples of course work produced on the play work with children course.
**Background to evaluation proposal**

Sure Start Preston East (SSPE) is a fifth wave Sure Start operating within the Brookfield and Deepdale communities of Preston. The programme as it is currently organised has been in place since September 2003. This local Sure Start initiative is made up of a variety of services, some organised and facilitated by identified health and social care professionals and others by local parents with the assistance of Sure Start employees. Contact with families in the local community ranges from one-to-one to group based support. In addition, facilities and venues for groups are located variously across the ‘geographical patch’ to accommodate the differing cultural and social needs of residents.

Local evaluation is a key element in the development of Sure Start programmes and as such, SSPE is required to provide the national office with annual data to illustrate the range of activities and progress in meeting the objectives and targets so far. In addition to this, the unit also require evaluation of the setting up, delivery and effectiveness of service delivery. This local evaluation was developed through consultation with key stakeholders to the SSPE programme, namely the programme manager, employed team members, the management group and parents. The short-term goals that were identified from working with stakeholders are listed below. These were the need to identify:

1. key service elements
2. key evaluation questions
3. strategies for answering questions
4. resources available for actioning the evaluation
5. the contributions to be made by stakeholders.

These goals were covered during three separate workshop events and from this the evaluation purpose and specific questions were identified (see study protocol).

This evaluation concentrated in the main on developing an understanding of how key services have produced outcomes. However as the first local evaluation of SSPE is provides some baseline data for ongoing evaluative work. The involvement of Sure Start team members in this process has been important not only for the thoroughness of data collection, but also for normalising the practice of evaluation. This in turn has been helpful and several team members believe that it has encouraged them to ask different questions of their own practice. It is hoped that this has made a helpful contribution to the development of professional expertise within the team.

All names have been changed to protect individuals and maintain confidentiality.
Study protocol

The protocol for Sure Start Preston East evaluation was developed over three workshop sessions with the local Sure Start team members. Collectively decisions were made about the purpose of the evaluation and specific study questions were identified. A plan for and methods of data collection were agreed with a view to commencing the study once ethical approval had been obtained.

Evaluation purpose
To investigate how Sure Start Preston East has contributed to “making life better” for families with pre-school aged children living within the target areas.

Evaluation questions
1. Do Sure Start Preston East participants of parenting support (one-to-one or group based) feel more self-confident with regard to their childcare roles?
2. Do Sure Start Preston East participants gain an improved sense of social well-being?

Evaluation study design
Sure Start services are complex in both nature and delivery. With this in mind the study was guided by the realistic evaluation framework (Pawson & Tilley 1997), which places an emphasis on examining the contexts, mechanisms and outcomes of service provision. By sampling parents and carers accessing group and one-to-one support a variety of SSPE contexts were considered. The longitudinal study of these participants allowed for a variety of data collection methods to be used. Repeat measures were used to generate outcome data, whilst interviews and observation methods influenced by the ethnographic tradition were used to provide an insight into the different contexts and mechanisms.

Data collection methods
Data was collected from parents accessing specific services over a 6-month period from January – June 2005. Methods included:
- Questionnaires containing parenting outcome measures
- Audit forms to record types service access and partnership arrangements
- Observation notes to describe behaviours of group participants
- Interviews to explore stakeholder perspectives of service provision
Questionnaires
Pre and post service questionnaires were distributed to all parents/carers accessing courses, topic specific groups and one-to-one family support (see Table 1) available from January to June 2005. These were:

- Courses
  - Smile (positive parenting course)
  - Make a Book
  - Play Work with Children
  - Access All Areas
  - Baby Massage

- Topic Specific Groups
  - Grandparents
  - Dads and Grandads
  - Health and Well-being (Women’ only exercise group)

Parenting outcome measures were included within questionnaires. These were the Parenting Self-Agency Measure - PSAM (Dumka et al 1996) and the discipline, play and routine subscales from the, Self-Efficacy for Parenting Tasks Indexes-Toddler Scale, SEPTI-TS (Coleman & Karraker 2003). The former can be categorised as a domain general measure of self-efficacy and the latter task specific measures that consider particular aspects of the parenting role.

For those accessing groups the questionnaires also included the Parenting Daily Hassles Scale and whereas those accessing one-to-one support were offered questionnaires with the addition of the adult well-being scale. Both these scales are available from the Framework for the assessment of children in need and their families pack (Department of Health, 2000).

Audit Forms
Parents or carers accessing other Sure Start supported services were invited to complete a short audit form (see Appendix 1). These were typically open access groups for parents/carers and their children, operating at a variety of venues in the Deepdale, Holmeslack and Brookfield communities. A separate audit form was offered to those working with other community services and organisations to record the type of contact partners had had with SSPE.

Observation notes
Whilst distributing audit forms the researcher made observation field notes of group activities. These notes were compiled to describe the behaviours observed in the different Sure Start contexts.

Interviews
Parents who completed the questionnaires were also invited to participate in a group interview at the end the course or group. Single interviews were organised with Sure Start staff and parents receiving family support or who had been a helper/volunteer at Sure Start supported groups. Interviews were tape recorded with permission from the participants. Members of the parents’ forum participated in an open discussion and were invited to write comments on a partnership audit form. The number of participants interviewed is detailed in Table 2, page 11.
Analysis of evaluation data

Each questionnaire was given a serial number and responses to each question were coded. This was inputted into SPSS version 10 and analysed using descriptive statistics. In particular the frequency, typical scores (mean, median and mode) and spread (standard deviation) of scores for the different scales were identified. With only 3 of the participants recruited using the home visiting support service (see table 2,) there were only 3 parent responses to the adult well-being scale. It was therefore decided that it was not possible to do any meaningful analysis of this scale.

Interviews were audio taped, fully transcribed and transferred to the scientific software package ATLAS-ti suitable for qualitative data analysis. At group interviews a note taker who documented key topics raised by participants and any notable behavioural responses. ATLAS-ti computer package was used to manage data reducing it into codes, categories and themes. For verification purposes note takers also independently coded and categorised the transcripts. Themes identified represented the issues common across all the cases.

User Involvement

The research team recruited two parents who assisted with data collection, inputting and analysis. These parents were reimbursed for any expenses incurred during the time they gave to the study.

Research Governance

Midway through the study an update of progress was made separately to SSPE management board (made up of lay and professional members) and the SSPE team. To protect the rights of those participating with the study attention was given to a variety of ethical issues. These were detailed for participants in a study information sheet (See Appendix 2). No concerns arose during the study to require breach of confidentiality.

Ethical approval

The evaluation only proceeded once the NHS Local Research Ethics Committee and the University Faculty of Health Ethics Committee had granted permission.
Study population and sample

Eligible study participants were those accessing the courses or groups at the beginning of a new programme of delivery. This included parents accepting a new episode of family support home visits starting in January or February 2005.

Questionnaires

In total 57 parents were eligible to take part in the pre and post service questionnaire survey. Of this population 48 (84%) participants were recruited and completed the pre-service questionnaire. Thirty-six parents also completed the post-service questionnaire. Each service delivery period typically lasted for 6-8 weeks and during this time there was a study dropout of 25% from the sample of 48 parents recruited.

<table>
<thead>
<tr>
<th></th>
<th>Number accessing service and invited to complete questionnaire</th>
<th>Number consented and completing 1st questionnaire</th>
<th>Number completing 2nd questionnaire</th>
</tr>
</thead>
<tbody>
<tr>
<td>Courses</td>
<td>31</td>
<td>25</td>
<td>19</td>
</tr>
<tr>
<td>Groups</td>
<td>22</td>
<td>20</td>
<td>15</td>
</tr>
<tr>
<td>Home visit</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td><strong>57 (100%)</strong></td>
<td><strong>48 (84%)</strong></td>
<td><strong>36 (63%)</strong></td>
</tr>
</tbody>
</table>

Table 1. Numbers of questionnaires distributed and returned

One difficulty when collecting data was the inconsistent attendance of many parents at programmed groups or courses. It was common for parents to miss a few sessions and then return to the group or course. Courses were particularly prone to participant dropout due to the more formalised nature of the sessions that typically followed a sequential programme, leading towards a specified end point and goal. By comparison the groups, which were less formal, were easier for parents to miss and return to later. Whilst the activities within the group session followed a pattern, these were repeated each week, with the main purpose of each session being an opportunity to socialise, seek mutual support and identify with others facing similar life events.
Interviews
Of the 48 parents who consented to complete the questionnaire, 28 participated in either group or individual interviews. Other interview participants included SSPE workers delivering the services and members of the parents’ forum. The number of interview participants is shown in Table 2.

<table>
<thead>
<tr>
<th>Respondent type</th>
<th>Type of service</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sure Start workers</td>
<td>Delivering groups/visits</td>
<td>4</td>
</tr>
<tr>
<td>Parents</td>
<td>Receiving home visits</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Attending courses</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Health and well-being</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>• Play work with children</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>• Make a book</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Attending groups</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Grandparents</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>• Dads</td>
<td>5</td>
</tr>
<tr>
<td>Forum members</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>44</td>
</tr>
</tbody>
</table>

Table 2. Number of participants interviewed.

Audit
The numbers of parents and carers completing the audit form and the services they were using are illustrated on the bar graph below (Figure 1.).

Figure 1. Type of service used by respondents completing the Spring 2005 audit.
Sure Start Preston East Services
The parent and child groups (drop-in type) sampled included: ‘Kool Kidz’, ‘Little Tinkers’, ‘Teenie Weenies’, ‘Catherine Beckett’ and ‘Tiny Tots’. These were the least formal groups where parents themselves were sometimes the group facilitators.

Other drop-in type groups were the women only ‘Health and Well-being’ and ‘Aqua natal’ groups, the mens’ ‘Dads’ and Grandads’ group’ and the ‘Grandparents group’. Courses for parents included ‘Access All Areas’ (AAA), ‘Play Work with Children’, ‘Make a Book’ and ‘Story Sacks’. One-to-one support was offered by the smoking cessation, speech therapy and family support services. Those accessing family support received weekly home visits from a family support worker. The programme of support was loosely based on principles used within the ‘Smile’ positive parenting course.

It is worth noting that in addition to the above Sure Start services, parents would still have been able to access other statutory health services. This would have included home visiting and clinic services delivered by local midwifery and health visiting teams.
Evaluation findings

The findings from all the different data sources are presented collectively under the heading of the four major emerging themes. These themes represent the different phases in the participants’ relationships with Sure Start. The themes and sub themes are as follows:

- Finding out - knowing
  - Messages from others
  - Reinforced messages
  - Messages from partners
  - Impact of messages

- Accessing services - Getting there
  - When
  - Who
  - What
  - How
  - Why
  - Why not

- The experience
  - Being there
  - Staying there
  - Upshot of it

- What next
  - Moving on
  - Moving out
  - Continuing, but wishing
Finding out - knowing

Data source: service audit and focus groups

Messages from others
Both those using the services and the partners working alongside SSPE were asked in the audit how they acquired information about the Sure Start services. For both groups information was generally acquired social contact with others already connected or involved. For partners this typically involved attending SSPE away days or monthly networking lunches. For parents information was more commonly received directly from a SSPE worker or friend than from other sources (Figure 2.).

Figure 2. Information sources used by parents and carers.

This was particularly the case for those with no reason for contact with a midwife and who due to the age of their children were less likely to have regular contact with a health visitor. Grandparents were often in this situation

R: Would you have come if your friend hadn’t have brought you?
P3: I wouldn’t have known about it. (Grandparents’ group, 2:177)

P6 I don’t think a lot of people know about you (the group) and until they do, they’re blind, they’re just not gonna see anything. I didn’t know anything like this went on and my friend fetched me. (Grandparents’ group 2:169)

Where respondents had had early information from the midwife during the postnatal period, finding out about and eventual participation in groups only resulted following cumulative contact with others already involved. Susan’s story explains this:

R: so how did you get introduced to Sure Start?
P: it was through er the midwife, my midwife couldn’t come, you know I was just out of hospital, so Petunia came who’s the Sure Start midwife and unfortunately I’d missed her, I’d gone shopping. But my partner was here with my Mum and Dad, and he said “oh she’s great” and she’d had a right laugh with me Dad, who’s really a character you know. So he said she’s great and she’s left this information, this stuff, so I think she said Oh I’ll fill it in for you while you’re here and er, I didn’t hear anything for a while and it was about when she were about 4 months old and I was really pulling my hair out thinking, I’m gonna go back to work, I just can’t do this (laughing) they’ll need to go into full time foster care! (laughing) and then I got a letter askin did I want to go to the AGM as a parent……and I went and they were lovely, everyone was really nice, friendly. So I got into this meeting, but it was really weird for me leaving the children and being with adults and discussing all this and thinking great, you know. (Susan P25:4)

For Susan even after this ‘big step’ she did not become immediately involved in attending groups or using services. She goes on to explain that it only through a chance meeting 2 months later with some of the workers she had met at the AGM that she became aware of one of the groups that she might like to attend as a parent with her children

P: ….not a lot happened after that to be honest. I bumped into one of the Sure Start workers and he said “do you want to come to this parent child group it’s on a Thursday”. (Susan P25:17)

Like the grandparents the specific information about the groups had come through a face-to-face contact with a friend or acquaintance. What Susan’s case illustrates is how the birth of a baby can create the opportunity for early exposure to information about the existence of Sure Start services. This experience had gone beyond information exposure as she and indeed her family had experienced first hand the friendly nature of the service prompted by the first positive contact with the midwife. Whilst this experience alone did not prompt the mother to use the groups, it had arguably paved the way for the mother to engage further when having subsequent chance encounters with workers reinforced messages about Sure Start.

Reinforced messages
It was less common for respondents to mention that they had seen an advert or received written information through the post. Although these methods of advertising and recruitment may be most useful when parents’ have already had prior contact with the service. Like in Susan’s case, other parents have given examples of responding to written communication, but they too had already had prior contact with Sure Start. In explaining how they found out about the health and well-being group they commented:

P3: well we come to the hall for the other group and saw a flyer
P4: umm.. yeah and I got a letter from Sure Start (Womens’ group, 10:78)

Whereas other members of the same group had found out through attendance at a neighbouring Sure Start parent child session facilitated by a worker with a joint appointment across the Sure Starts. Here the worker was proactive in helping parents receive the information:
P1: I found out from Rose (worker), she told me. ....I just got roped into it (laughing). She said, “you are coming aren’t you”, I said, “yeah fine” (laughs) (Womens’ only group, 10:102)

Some workers would also telephone parents as a means of ensuring accurate information was being passed on and reinforce messages to parents.

P5....Cindy (his ex partner) rang me. Initially about the football thing on Tuesday night, but didn’t know I knew about, but in passing also told me about this week and next week, she said “its (the group) tomorrow”. So I said oh right...... ....The football thing on Tuesday, Cindy told me about it, but I already told the lass here, Rose (SSPE worker) had rang me during the week to clarify it. So yeah Cindy (ex partner) doesn’t have to tell me, I do know. (Dads’ group 1:41)

This father was claiming that he didn’t rely on his partner for information and that the worker had contacted him. Nevertheless the comment does reveal the important part that family and friends can play in imparting information and reinforcing messages. For men, female partners may have a central role in finding out about services:

P3 ...people don’t know, but also the thing with blokes is it can be quite bad; most of us have got the information through the ladies. (Dads’ group 1:125)

P4 I don’t think that the fathers are a lot involved, I just think - do they actually know where to go that’s social? When it’s actually a lot easier because there are a lot more social things. If you go to them it’s a lot easier to pass on information, you go to one and then another one. (Dads’ group 1:137)

Prior contact with other community or Sure Start activities seemed for the parent/carer an important means of accruing information

P2: We got to know about it cos my husband took Holly (granddaughter) to the Saturday Grandparent group. We heard about that from school when we had to fetch her from school and we said oh I’m going to take her. Holly said, “excuse me miss but I’ve no daddy”, so she said “but you can take your granddad”. (Grandparents’ group, 2:217)

For the worker prior contact was a chance to reinforce messages, as seen in the next example where a worker was observed encouraging two Womens’ to try out the exercise class by also emphasising that she would be present and would therefore be a familiar face if the Women decided to attend.

She invited two mothers who were hesitating in their response. So she explained more about it and encouraged them to give it a go. He then said, “I tell you what I’ll go tomorrow, so you will have a face that you know. If you don’t come that fine, but I promise you I will be there if you want to give it a go. Remember there is no commitment, you don’t have to go again if you don’t like it, but if you don’t give it a try you’ll never know.”
One replied: “Oh well if you’d be there then I might go (laughing).”
(Fieldnotes 21:162)

Messages from partners
The importance and value of others knowing about the work of Sure Start for the sake of the individual in need is illustrated by the cases where the service was initiated by a referral. Here help and assistance provided by one agency was the link for a referral and therefore contact with Sure Start. In the first example the parent had been a victim of domestic violence and who may never have engaged with Sure Start support without the referral made by the partnership agencies.

R Had you heard of them (Sure Start) before?
P No
R Nothing at all?
P No…..I suffered domestic violence. ….. I had the baby and got post-natal depression. So when the Police came out they sent Social Services, and they sent Sure Start. (Home visiting support, 6:31)

The second was a grandparent with full time care of her grandchild.

P2 Yeah, it was the nursery that rang me and said about the grandparent worker, and could she come and see me and I said yes. An she came, and then she said she was starting these meetings. (Grandparents’ group, 2:212)

Finding out about Sure Start as a result of a referral is another form of receiving the message or knowing through others. Here it is the Sure Start partners who are delivering messages and helping people find out about the services.

Partnership members identified within the audit what they believed would be opportunities for increased joint working between SSPE and other community organisations. Some felt that more could be done to reach vulnerable groups through special arrangements with community associations that were more deeply routed within the housing estates. Some specified that they felt SSPE could be more visible to typically isolated families if their involvement in established community groups, including those generally targeted at older children was more explicit. This they felt would not only assist families in finding out about services, but would provide SSPE with an improved understanding of need.

Well resources do exist, it is more a case of recognising how these can be best used and accessed. (Parent Forum 15:13)

The example was given of the Church of Ascension Church hall, where it was claimed the Vicar was more than willing to engage with the community and encourage use of the space by the community. When discussing experiences of creative community projects that had then been undermined and vandalised by local youths, parents identified solutions that included involvement strategies. Parents’ forum members supported the creation of projects that would involve young people and believed that this was an area where partnerships with SSPE needed to be stronger.

More specifically the parents forum reached a consensus that achieving a balance in partnerships was difficult partly due to the different resources that are available
in each of the communities (Deepdale, Holmeslack and Brookfield). There was an appreciation that each of the three communities was unique, and so accommodating all needs was a real challenge.

A notion also separately supported by a Sure Start worker, who was particularly concerned that the resources should be used in such a way that they were able to be more responsive to need. There was a perception that professionals would deliver services based on their own definitions of need. This approach although not believed to be satisfactory, was rationalised however as a means of simply getting started and beginning the process of interacting with a pool of people.

\[ P \ldots \text{to some extent what I'll be doing up there will be my thoughts of what people are going to be interested in. And that's really the wrong way to be doing it. But the reason that I'll do it — is initially we'll be to try and get people's interests and, you know, an interaction with what we're doing. ...but I think we need to be looking more at, you know, sort of supply and demand really.} \] (Sure Start worker, 8:34)

The pie chart in Figure 3 shows the different proportions of responses that identified different opportunities for joint working. A third of partnership respondents gave no comment at all, which possibly reflects the challenge that partnership working faces. Some simply stated that the existence of the children centre would be an opportunity for more partnership working, and sadly did not explain how. Others were quite specific about a desire to do more joint activities with Sure Start workers either through delivering specific services and projects or through closer liaising when school children displayed difficult behaviour.

Figure 3. Partnership member's views on opportunities for joint working.

![Pie chart showing suggested opportunities for joint working](image)

The desire for more joint delivery of parenting support/training course was the commonest activity cited by partners
Impact of messages

Decisions to attend
When information about services was received verbally the social nature of the exchange had the potential to increase the impact of the message on the parent’s/carer’s subsequent decision making about whether to take the next step towards service access.

\[P: \ldots \text{so I’d gone there and I met Ivy (new friend) and she’s great you know} \ldots \text{she said “are coming into town?” and I said well I’ve got to feed um and she said, “Oh well you can feed um at drop-in” and I knew nothing about the drop-in before that and my baby was 6 months old now. (Womens’ only group, 25:21)}\]

Another parent explained that it was through talking to a worker at an open access parent child group, referred to here as a drop-in centre, that she came to know about the course:

\[P1 \text{ I went to the drop in centre with my daughter and was talking to one of the Sure Start workers there and she mentioned the course to me because I was telling her what I wanted to do. That’s how I found out. (Course for parents, 4:40)}\]

For others the familiarity with going to courses and prior contact with a parent child group had been a means of finding out and accessing subsequent courses.

\[P2 \text{ I’ve done a course like this, so I knew a bit, what it was. R You’ve done a course like this. What was the other course?} \]
\[P2 \text{ We’ve done first aid and food hygiene, story sacks. R Were they here?} \]
\[P2 \text{ No, they were at the mum and toddler group.} \]
\[P3 \text{ I used to go to the mum and toddler group, and I did a course with Fern (Sure Start worker). (Course for parents, 4:21)}\]

Here there is a hint that the prior experience had helped influence these Womens’ decisions about coming to the course. In particular familiarity with the context and the worker seemed to be a positive influence in the decision to respond to information about this new course.

Decisions not to attend
In order to identify reasons why some groups or courses may be more popular than others and any other reasons why parents may choose not to attend SSPE services an additional audit was circulated (see Appendix 3) at three parent and child groups (Gutteridge Church Hall, Brookfield Methodist Church and Westview Sports Centre). Forty parents completed this audit. They were asked to identify from a list of reasons for not using particular SSPE services those relevant to themselves and add any additional reasons not already listed. A total of 80 responses were given.
The pie chart (Fig 4) above illustrates the different proportions of these responses. It would appear that some respondents were not in a position to make a decision about whether to attend a service, since they had no prior knowledge of them. Not knowing about the particular service made up a third of the responses. The bar graph below (Fig 5) also illustrates this data, but shows the numbers of respondents identifying particular reasons for non-service use. Here it is apparent that more than half of the respondents (27, 67.5%) claimed that they did not know about particular SSPE services. However if they had known they might not have been interested as a prominent proportion of respondents (20, 50%) also claimed that they had no interest in the services listed.

Figure 5. Number of respondents citing reasons for service non-access.
Very few respondents cited personal reasons such as disliking or feeling uncomfortable with the other people attending as a reason for non-service use. Instead they were more inclined to comment that they were too busy.

The attraction of parents to services is an important part of Sure Start activity. With this in mind an attempt was made to identify which services parents felt particularly disinterested in or too busy to attend. There is also a concern to know which service parents feel least informed about. The next bar graph (Fig 6.) details each of these services listed on the audit form and show the number of respondents claiming each of the three dominant reasons.

Figure 6. Services with identified reasons for non-access.

<table>
<thead>
<tr>
<th>Group or course</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>grandparents</td>
<td></td>
</tr>
<tr>
<td>teenagers</td>
<td></td>
</tr>
<tr>
<td>dads</td>
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</table>

Reassuringly the topics of no interest tended to be the gender and topic specific groups e.g. grandparents, teenagers and Dads. This was to be expected given that the sample of respondents for this audit included 39 women aged between 20 – 45 years. However the services that these respondents tended not to know about were the courses i.e. the Smile parenting course, Make a Book (mab), Story Sacks (ss) and Play Work with Children (pwc) course. It is also of concern that a sizable proportion (14, 36%) of this, albeit small sample, claimed not to know about the Womens’ only keep fit group.

Some of the respondents made some comments as a way of explaining their responses. These are listed below and support other qualitative data acquired during group and individual interviews.

- don’t want to go on my own, I don’t know anybody there
- I work night shifts and my wife works opposite me, so have little time, and so too busy to attend Dads’ group.
- I am interested in keep fit but the time and venue are not good for me.
- interested in the parenting course but my child won’t settle without me
- my partner is too busy for Dads' group
- I am very busy because I live in a joint family
- sometimes there are other older children at home, like those not in full time school, who will not be able or suitable to stay in the crèche. I am interested in keep fit but don’t want a male instructor

From interviews with parents/carers there is some evidence that the disinterest in parenting related course might be due to the belief that there is little to be gained from learning about this topic. Those holding such views did not experience a readiness to learn alternatives about how to parent, or appreciate that more could be learnt.

P4 Some people will think what’s there to it, you don’t want to be taught anything about it.
P2 We all have our own rules and regulations. We all have different ways of dealing with things, there is no straight line in parenting so what’s the course about. We are all different parents. (Course for parents, 4:618)

Combined with the above there was a sense that ignorance and a failure to appreciate potential benefits was a real problem to expanding increased use of services.

P2 We know and enjoy coming here, it’s the people who don’t know. (Dads’ group, 1:318)

This is perhaps not helped whilst there also existed for some parents’ negative experiences when interacting with the professionals who might be involved in delivering such programmes. Such experiences damage the prospect of respectful relationships between professionals and parents and therefore a willingness on the parent’s part to trust professional opinion.

P She (health visitor) was making me feel like it was terrible, that my son was still having a bottle. So I thought ‘well I’m not seeing you again’. (Sheila, 6:593)

Some of the grandparents were disillusioned about the genuineness of services and the true ability and willingness of agencies to help. There was a feeling that agencies only expressed an interest when they might be failing as parents and primary carers.

P1….I think, going back to what that man said before about carers, if we all stood up, everybody in our situation, if we all stood up and say they didn’t want any help they’d be knocking on your door asking you what you don’t want any help? You just carry on. Don’t get me wrong no disrespect to you people; you just do what you got to do, you know every day things. But there’s nobody (Grandparent’s group, 2:154)

P2 No, nobody turns up at all. I don’t think. Until, you know, something happens, goes wrong. I didn’t know anything about this club. (Grandparents’ group, 2:163)
The impact of messages that resulted in decisions to not use a service contribute to what we understood to be “bad press” and are highlighted further by these comments:

P1 Yeah, because some of them don’t think its cool.
P2 ………and they think like, I’m not going to there, it’s geeky, but its totally the opposite..... You are looked as a geek, and it’s just that stigma attached to it which is a shame.
P1 And I think sometimes with some fathers it may be apprehension, anxiety, lack of confidence, being uncomfortable in that situation. (Dads’ group, 1:104)

Not only was there this concern, but there was also a feeling at the audit also inferred, that people simply don’t know what is on offer. These men felt there was a need for explanation about what the Sure Start services are about.

P2 How many people do you know that have heard of Sure Start, but they don’t know what they do!
P1 Mmm (nodding)
P2 Yeah, right well a lot of my mates, know now, cos I tell um, but a lot of them didn’t know.
R So If you weren’t telling them?
P2 and P1 They still don’t know! (Dads’ group, 1:303)

A perceived solution to this problem was to put on events or activities that are targeted specifically at men

P2 …..so your obviously you are not reaching them and you are not getting to the right places with um. You know er Dads’ Den they run a mens’ health check and a lot of people, a lot of dads turn up for that. Blokes are now taking their health more seriously aren’t they…
P1, P3 and P4 Yeah, yes (nodding)
P2 ….so doing more things that are like that, so things that men are interested in (Dads’ group, 1:312)
**Accessing services – getting there**

Data source: service audit, focus group, individual interviews and non-use of service audit.

It was clear that knowing about the service was not necessarily enough to ensure that parents and carers made use of what was available. Within this section the business of accessing services could otherwise be referred to as “getting there”. This theme has been sub-divided into the categories: when, who, what, how, why and why not.

**When**
Parents completing the audit form noted *when* they had first started to use that particular service. Service use typically peaked during school term time. Spring appeared to be the busiest season, although this result was probably also reflective of the time of year at which data was being collected (Jan – May). What was surprising was the length of time that some parents had been using SSPE, as some had been active service users since the outset of the programme.

All courses and groups with the exception of the Saturday Dads’ group were offered during the week. One father who was separated from his partner commented that these sessions tied in with when he had access to his children

*P4: I have the children on a Friday one week, Saturday the next, so it always falls that I have the children on the Saturday I come to the group, its almost routine…. (Dads’ group 1:48)*

Another view was that whilst fathers typically had access to their children at the weekends, they did not necessarily get the information about Sure Start. It was felt that because the ordinary chain of communication usually went via the women (mothers), the men with poor relationships with their child’s mother would be disadvantaged, despite the ideal weekend timing of the group.

*P3: I know others who basically, well they still do stuff with the kids over the weekend. But….. they never really get involved because as soon as they have lost that link (with their child’s mother), cos everyone here is saying about links with the other half, but some of um don’t speak. (Dads’ group 1:300)*
Who – demographic details

The demographic details of who was accessing SSPE service were particularly sought in the parental self-efficacy questionnaire. Those attending a variety of courses for parents, selected topic specific parent groups and who were accessing family support during January and February 2005 were approached and invited to complete the questionnaire.

The numbers of respondents completing the questionnaire are detailed in Table 1. A summary of the demographic details for the 48 respondents completing the questionnaire is provided in Table 3.

<table>
<thead>
<tr>
<th>Demographic variable</th>
<th>Yes</th>
<th>No</th>
<th>Missing Data</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N (%)</td>
<td>N (%)</td>
<td>N (%)</td>
</tr>
<tr>
<td>Female gender</td>
<td>40 (83)</td>
<td>8 (17)</td>
<td>-</td>
</tr>
<tr>
<td>Have a partner</td>
<td>41 (85)</td>
<td>7 (15)</td>
<td>-</td>
</tr>
<tr>
<td>Lives with partner</td>
<td>36 (75)</td>
<td>12 (25)</td>
<td>-</td>
</tr>
<tr>
<td>Household with more than one adult</td>
<td>38 (79)</td>
<td>10 (21)</td>
<td>-</td>
</tr>
<tr>
<td>Currently working</td>
<td>10 (21)</td>
<td>38 (79)</td>
<td>-</td>
</tr>
<tr>
<td>Member of ethnic minority community</td>
<td>11 (23)</td>
<td>37 (77)</td>
<td>-</td>
</tr>
<tr>
<td>Anyone left house in 6mths</td>
<td>6 (12.5)</td>
<td>41 (85.5)</td>
<td>1 (2)</td>
</tr>
<tr>
<td>Child with disability</td>
<td>1 (2)</td>
<td>47 (98)</td>
<td>-</td>
</tr>
<tr>
<td>Child with special needs</td>
<td>3 (6)</td>
<td>45 (94)</td>
<td>-</td>
</tr>
</tbody>
</table>

Table 3. Summary of demographic details from questionnaire sample.

The sample was typically made up of women who were living with a partner or another adult. Almost a quarter of the sample was identified as being members of the ethnic minority community. Ten percent of the sample identified that they had a partner but did not live with them and only 10 (21%) were in paid employment at that time. Only 6 (12.5%) respondents had had people leaving their household in the last 6 months and even fewer had children with a disability or special needs.

Only gender was recorded on the audit form. Here too female service users dominated with 104(91%) Womens’ and 10(9%) men completing the audit forms.

The interview sample was made up of 35 women and 7 men. Twenty six of the parents interviewed described their ethnic origin as White British and 12 as Indian. All the Indian interviewees were women.
The age of respondents has been broken down into 5 year age bands (Fig 7).

**Figure 7. Age of questionnaire respondents**

<table>
<thead>
<tr>
<th>Age categories</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>16-20</td>
<td>2</td>
</tr>
<tr>
<td>21-25</td>
<td>1</td>
</tr>
<tr>
<td>26-30</td>
<td>6</td>
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<tr>
<td>31-35</td>
<td>8</td>
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<td>36-40</td>
<td>10</td>
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<td>41-45</td>
<td>12</td>
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<td>46-50</td>
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<tr>
<td>51-55</td>
<td>16</td>
</tr>
<tr>
<td>56-60</td>
<td>12</td>
</tr>
</tbody>
</table>

The typical age of those accessing groups was between 21-35 years. The peak again in the 51-55-age band reflects the numbers of grandparents starting to access services.

The ethnicity and religion of respondents are illustrated in the pie charts below (Figs 8 and 9).

**Figure 8. Ethnic origin of questionnaire respondents**

- Other: 4.2%
- Indian: 16.7%
- Black Caribbean: 2.1%
- White: 77.1%

A quarter of respondents completing outcome measures and therefore accessing more formal groups/courses were from the ethnic minority community. These were predominantly Indian parents (6, 17%).

Although not specifically recorded during the audit, it was apparent during fieldwork that many more ethnic minority group members attended the less formal drop-in parent child groups.
What
The different forms of service offered by SSPE varied in formality, structure topic and therefore target audience. Loosely they can be described as courses, groups (controlled and open-access sessions) or one-to-one sessions.

- The courses included those that were:
  - For parents and were relevant to their childcare roles e.g. the, Play work with Children, Make a Book and Access All Areas.
  - On the topic of parenting and focused on personal positive parenting practices e.g. the Smile course

- The groups were regarded as drop-in services included those that were topic specific and controlled as well as those that were general and more open.
  - Topic specific groups had controlled access by virtue of the participants’ gender or child caring role. These included support and social engagement groups specifically for men, women and grandparents.
  - General groups by contrast had an open access policy regardless of the gender or care roles. These included the variety of child/parent groups frequently referred to as mum and toddler sessions.

- One-to-one sessions included those provided by the family support team, visiting parents in their own home as well as topic specific sessions different health care professionals. The latter included support with child speech and language development, smoking cessation and maternity care.

The services accessed by parents completing the audit form are detailed in the bar graph (Fig 1.) on page 11.

Those completing the parental self-efficacy questionnaire were accessing the courses, the topic specific groups or the one-to-one family support services. To understand who was attending what, demographic variables for respondent
gender and ethnicity were each cross-tabulated with the types of SSPE service accessed by parents (Tables 4 and 5).

The gender cross-tabulation shows that it was typical for men to only access drop-in type groups as opposed to the more formalised courses facilities.

<table>
<thead>
<tr>
<th>type of group</th>
<th>respondent gender</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>female</td>
<td>male</td>
</tr>
<tr>
<td>drop-in group</td>
<td>12</td>
<td>8</td>
</tr>
<tr>
<td>course for parents</td>
<td>17</td>
<td>17</td>
</tr>
<tr>
<td>course on parenting</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Home support</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>group and home support</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>40</td>
<td>8</td>
</tr>
</tbody>
</table>

Table 4 Cross-tabulation between service type and gender

The cross-tabulation data for ethnicity suggests that ethnic minority group members typically used the formalized courses.

<table>
<thead>
<tr>
<th>type of group</th>
<th>ETHMINOR</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>yes</td>
<td>no</td>
</tr>
<tr>
<td>drop-in group</td>
<td>2</td>
<td>18</td>
</tr>
<tr>
<td>course for parents</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>course on parenting</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Home support</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>group and home support</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>11</td>
<td>37</td>
</tr>
</tbody>
</table>

Table 5 Cross-tabulation between service type and ethnic minority status

It should be noted however that the questionnaire was not used within the less formal general parent/child drop-in groups and was only used within the topic specific drop-in groups. As such this questionnaire data is at odds with what was observed when visiting the general parent child groups, which within the Deepdale community were predominantly used by Islamic Indian women. Furthermore a limitation of the audit form was that it failed to capture the ethnic origin of respondents and was therefore unable to report whether various ethnic groups used groups differently.

For some of the interview respondents a feature of their first access to the service was that another person accompanied them. For the groups often this was a friend who was perhaps already attending.

P6 A friend actually brought me to this group. (Grandparent group, 2:139)

R …some people don’t like going to things for the first time by themselves.

P2 No, not for the first time, she fetched me. (Grandparent group, 2:185)
P ....really Ivy (new friend) has just really shown me everything. Yeah I went to the mum and toddler group with her and then this group (health and well being). (Susan 25:27)

For Susan the introduction to another parent already using a range of Sure Start groups and courses, was an important part of her means of doing the same. This mother particularly recognised the value of this new friendship, which made it possible for her to re-enter and participate in the social world of mothering younger children. This otherwise felt alien and inaccessible to her as her own peer group had moved on and returned to work.

I only went cos Ivy (new friend) said come along, because I'm in the position where all my friends are all back at work you know, so I was in the position where I didn't know anybody who was at home in the day... ...so I felt really out of it you know, cos my own peer group had moved on. (Susan 25:32)

The workers were also quite aware of the benefits from having someone to go with when first attending a group. Having this in mind family support workers who also had a active role in facilitating some of the drop-in open access groups would make a point of offering to attend groups with parents. One mother receiving family support had recognised this and appreciated that her goal was to feel confident in eventually attending community groups independently.

P She said that she'll come to the nursery with me, but I mean, when I've got my own house I want to be able to just wake up in the morning and think 'Oh it's nursery today, come on let's go'. You know on my own, without having to get Lilly to come and keep saying "Come on, let's go, come on, let's do this, let's do the other".

R Yeah, so you hope not to be feeling as reliant on her, is that what you mean?

P Yeah. (Home visiting support, 6:807)

Taking personal action however was understood to be a difficult thing to do. Going independently for the first time took courage for some.

P1 ........We've had one who isn't here this week, he said he really had to build himself up, it was a great effort to come he was telling me the other week and it can be hard for some people who are not used to it coming to this sort of environment and its such a large group. That sometimes can over awe people.

........he was very apprehensive about coming but found it alright, that it wasn't as bad as he thought. (Dads' group 1:111)

In acknowledging the difficulties of making the first steps in starting to attend a group these parents discuss the example of one of the members of their group who was particularly shy. This woman felt reluctant to attend without her friend.
P1 But particularly, I think she worries that she hasn’t as much confidence. She didn’t come before because she hasn’t got as much confidence as I have, ...but in other areas she has.
P2 I’m shy in nature.
P1 Yeah.
P2 I’m shy and don’t like it when I don’t know people.
R Your shy?
P3 yeah and when your shy you need somebody with you, don’t yer? P5 (talking to P2) Yeah, and she’ll (p1) talk you (p2) out of it, won’t she.
P1 and 2 Yeah (Womens’ group, 10:128)

What is heartening from this conversation between these women is the open acknowledgement that they can be a resource for one another. Here it is clear that the action of particular members had been able to challenge and counteract the reasons normally used for not attending, which in this case were: being too shy and fearful of mixing with others.

Some parents and workers believed that was a need to ‘dangle a carrot’ to attract attention to encourage people to access Sure Start services. Parents mentioned this with reference to trips or special events.

P1 I think in time if you have like trips you could generate a lot of opportunities for socials where people would come and then again meet other people at those venues. (Dads’ group, 1:165)

R Some talk about wanting trips and activities and things.
P2 Yeah, well they are being sorted anyway, there is one next Tuesday.
R What’s going on, …on Tuesday?
P2 Football
R Is there a need for more of that though.
P2 Mmm, if you do that then I think you will get more people involved to a degree and once they are involved hopefully they will continue.
P1 Yeah, you’ve got to get them into it, to like dangle a carrot (laughter). (Dads’ group, 1:408)

The ability to attract the attention and then engage with potential service users was felt to be an important first stage in preparing them for future involvement. One father likens this to early childhood when preparation for the next stage in life is repeatedly offered through social experiences at nursery, pre-school and then school.

P3 I think in time if you have like trips you could generate a lot of opportunities for socials where people would come and then again meet other people at those venues.
P5 You used to be put in a situation, like, when you were at school, pre-school, nursery. You were artificially put into a nursery so you were used to it from an early age. (Dads’ group 1:165)

Certainly the prior attendance at an open access parent/child group was common for those accessing the more formally organized courses. Indeed these could be important first steps in making use of Sure Start services. This is because they allow the parent to develop some degree of familiarity with what Sure Start does which serves as useful preparation when accessing other services.
I mean like the first step of the courses like a lot of the ladies that were on my course come from groups. None of them were new faces, so then because they've gone through this sequencing in one way or another, it's like progression isn't it. They've gone through the initial sequence and then they're progressing onto something even bigger, but then starting again. It's like a circle, it's just going to keep going, isn't it (Sure Start worker, 9:117)

The visibility of Sure Start was arguably supported by the existence of a drop-in centre within the main shopping area of the city. This had supported several of the respondents in their efforts to find out about and access services.

P Yeah, because I was in the town and I went in that Sure Start in St. John’s, so I popped in there to ask like, how can I find a nursery or something for him? Because like I say, at the time I had really bad depression, and a lot of things were going through my life as well, you know what I mean? So I went in there and within about 2 weeks I got a letter saying Lilly was going to come and see us, so she came and filled everything in and that. (home visiting support, 5:3)

The business of how the service was accessed, in this example, was supported by the speedy response from the family support team. Here the mother had had follow-up contact about the service two weeks after her initial enquiry and then with subsequent follow up in her own home.

Why
This sub theme revolved around the reasons respondents gave and the decisions they made for why they had made use of SSPE services. Earlier we noted that the main source of “finding out” about SSPE service had been through speaking to another person, either a friend or a worker. However the reasons for taking the next step and accessing services appeared to be child as opposed to be adult motivated.

From the audit it has been possible to categorise the different reasons parents gave for choosing to make use of SSPE services. Parents each noted several reasons but also picked out the most important reason (top reason). These are both illustrated in the figures below (Figs. 10 and 11).
It appears that for the 95 parents completing the audit, an opportunity for their child to socialise dominated the reasons given for use of services (Figure 10). Convenience factors such as location and time of sessions were rarely identified as a primary concern. In total 95 parents/carers gave 276 reasons (Figure 11). Two thirds (65%) of these reasons were child welfare motivated.

For the 20 parents/carers who attended a SSPE course, their reasons for attendance moved away from a child focus (Fig 12.). Instead there was greater tendency to acknowledge their own needs and the practical consideration of childcare provision that would make personal time out possible.
During the focus group interviews similar reasons were also expressed, with the child often cited as a key reason for going out.

During each of the group interviews parents and grandparents were asked why they came to the group. The reasons were identified within the categories: ‘child as priority’, ‘child anticipates’, ‘gets you out’ and ‘child as vehicle’.

\[P1\text{ Mine would be for the group, my son or my grandson, whoever brings him. (Dads’ group, 1:4)}\]

\[P1\text{ At first it was good for Nazeem to be able to interact with other children going to a crèche. For me also, to be able to do something whilst she was in the crèche. (Course for parents, 3:7)}\]

There was a belief that attending courses also gave children the opportunity to learn how to be separated from their parents. This was felt to be helpful to the child and even a useful form of preparation for nursery and school.

\[P3\text{ Yes, he’s got to realize that I’m in the next room and I will go back to him. He has become, I think he is becoming more confident, will sit and play. I can go off when he gets settled somewhere. I thought I have to start somewhere and maybe next time it will be better. (Course for parents, 3:61)}\]
But this depended on the confidence of the parent in the suitability of the crèche. When a child failed to settle in the crèche, it was common for these children to join the parent in order to support continued course attendance.

*R Are there any features about the crèche?
*P3 The staff, they welcome, they are really nice, and the children get on well with them.
*R So the fact that the children know the workers. Is that important?
*P3 Yeah. Plus it’s next door and its better they are there and they are safe.
*P2 And it’s because we are in this setting, if one of our kids were playing up or anything we could actually come out of the setting and go and get them and bring them in because none of us mind the kids being in here. (Course for parents, 4:61)

What was also apparent was how parents were not only concerned about whether they knew other adults attending the groups or courses, but they were also concerned about whether their child knew the crèche workers

*R So does Nathan know a lot of the girls who run the crèche?
*P2 He does know quite a few of them, but there are only certain ones he will settle with and there is a couple of them that he doesn’t settle with as well. He doesn’t settle as well as with others. (Course for parents, 3:67)

A feature of the Dads’ group was that it gave an opportunity for fathers or male carers to interact with their children. These informal sessions did not use crèche facilities and the men retained primary responsibility for any of their children attending. The children attending this group seemed in the mens’ view to enjoy coming and would anticipate it as a weekend activity

*P3 They do know about it.
*K Do the children remind you about it?
*P1 Yeah
*P2 Yeah, my children already (inaudible) on the weeks when it’s on because they attend the nursery here, that’s how, I refer to it. “Are we going to nursery today”, and it’s “yeah, lets go”. But if it’s a week when it’s not on you don’t mention it. They ask and yeah you say “we are going next week” and they get excited.
*K So do they associate this positively?
*P2 Oh yeah, they are both very excited when we turn up. (Dads’ group 1:91)

*P1 He (friend) said he was glad he came, he said his children really enjoyed it. (Dads’ group, 1:117)

But it also seemed that children can act as vehicles for parents to seek the benefits of socialising for themselves.

*P1 I think more importantly for my grandson, although its nice to get together with other people and socialise with them. (Dads’ group, 1:7)
Many of the mothers speaking to me commented that they came because of the opportunity to get out of the house and have a chat, catch up with mate and even a gossip. It was local and there were things for the children to do so they were happy as well. (Field notes, parent/child group 24:69)

P1 We would be stuck at home.
P3 Gets you out the house.
P2 Gets the kids out as well. (Course for parents, 4:317)

For some it legitimised spending quality time with their children

P4 ……It's a joy coming here so that's part of the reason for come but also for me it breaks my Saturday up, a bit of time away from the house with the kids where I’m not tempted to do jobs around the house, a couple of hours where I can spend quality time with the kids. (Dads’ group, 1:23)

When probed about their own needs as adults and parents, one response was that since becoming a mother she felt her own needs had changed since they were now governed to some extent by the needs of her child. This response is congruent with the idea that for new parents priorities can change and satisfaction of personal needs are to some extent dependent on the satisfaction of their children's needs.

R That’s the children’s needs, but what about you?
P1 Well ours just revolves round children’s really, don’t they, when you think about it, you don’t think about your own needs, when you’ve got little ones, like I figured out. It’s like this time last year I wouldn’t have cared; I didn’t have a care in the world. You know I just went to work, come home, went to the pub. It were just a day’s routine (laughter). Yeah! Now, its... phew, you have to watch them constantly.... You don’t think about your own needs. (Womens’ group, 10:484)

Why not

Some respondents raised concerns about the difficulties men face in society, if getting involved in community activities for children. Here the “bad press” was directed at men in general. This grandparent suggested that men could easily face questioning from local community members if taking an interest in children.

P2 I think there should be more things for men. I mean some men are frightened of approaching children, because of what other people outside think. They are all tarred with the same brush. A man might get on well with children go up to a child but if he went outside; they would say what are you doing? (Grandparent group, 2:561)

What is more, some of the men interviewed acknowledged this and even expressed their own discomfort when their own child was in the care of a male worker. These men were referring to the ‘bad press’ not of the service specifically but rather of men involved with those services.
The following discussion emerged when it was mentioned that one of the workers was due to leave the group as her responsibilities within Sure Start had changed. At the same time a new male worker had recently joined the Sure Start team.

*P3* it’s a problem about continuity isn’t it, cos when you get to know someone you... well you’ve got to start all over again

*P4* Yeah and the children know them as well

*R* Yes so is it about the children also getting to know the staff that is important?.

*P3* I don’t think its just that, ......it’s a safety factor. ......cos blokes are portrayed as just about the worst members of society. And to be perfectly honest if you go in somewhere (parent/child groups) you can virtually see the glare of “what are you doing here?” I mean, that’s not being funny, cos its doesn’t matter if your reasonable or anything, but *blokes involved with kids!* Well.. you get dirty looks from everyone.

*P2* I’ve had that! Yeah and I’ve had that, er working with Childsplay, and you know working in nurseries er... I’ve had so much of it. Where they seem you know “what you doin here?”

*P3* and *P4* Yeah (nodding)

*P2* I’m on management group for Childsplay, and at one of the nurseries we were havin a few problems with, so I had a couple of days off work and went to monitor it for 2 days. And the amount of people, you know.......that said “what’s he doin here.” I had to wear a uniform, you know so people could see. People know me now. but at first....

*K* So do you think people are far more wary then if it’s a man working with children?

*P3* Mmm, very.

*P2* Yeah er, well my girls are out there now and with a man, he’s alright, don’t get me wrong, perfectly alright, but if Jane (worker) weren’t out there now... (shaking his head)

*R* ..you wouldn’t be happy?

*P2* No, and so I understand were a parent is coming from when they see me at nursery. Cos blokes have got a lot of bad press haven’t they? *(Dads’ group, 1:344)*

Others agreed with this and went on to explain how it can put men off from getting involved:

*P3* Yeah I think that’s majorly the problem. I mean I actually think, I’m less bothered that there’s a problem out there, the risk, it’s exceedingly slim. But it makes you think and it happens that much, so often it happens outside. It makes yer scared. You’ve almost got ter have somebody there to say “he does have a right to be here”.

*P4* And I think some men are reluctant to do that because they don’t want to put themselves in that position, they know what people maybe thinking. *(Dads’ group, 1:357)*

It is clear how such attitudes can be powerful de-motivators to encouraging male involvement in Sure Start services especially if the events and activities are interpreted as child oriented. There were fears for the safety of the children, but also the safety of the men from false accusations. Local cultural perspectives about male roles with children could then generate a taboo that discourages
fathers from attending Sure Start events not only as volunteers, but also as parents.

Other sub themes relevant to ‘why not’ use the service were concerned with practical arrangements that might mean more effort had to be made to actually get there. Having to pre-book the crèche place was one example.

> R What do you do if you don’t remember.
> P2 well then you’ve had it, you can’t go.
> P5 No, you can’t go
> P1 It’s like if you say you can’t get in then its... tuff! (Womens’ group, 10:228)

Another sub theme was the desire felt by the parent to stay with their child. Here this mother explains that going to the parent child groups was acceptable, but because she wanted to spend time with her child, she wasn’t happy to attend courses where he would have to go into the crèche. This perspective challenges the popular assumptions of workers that parents and particularly mothers are desperate for “time out” and away from their children.

Yeah well I wanna be with my baby! Cos it means he has to go in the crèche and I wanna do things with him. You know like I go to cheeky monkeys and that’s good, but the other things, I don’t want to do lots of things where he isn’t with me. (Womens’ group, 12:41)

This next woman had similar thoughts, but had been persuaded to come to a course when she discovered that the crèche arrangements were very flexible and that her son could sit beside her if he was too distressed to be separated.

> P1 Yes but I do prefer them being with me than away from me, there is this fear that what if something happens to them. (Course for parents, 3:40)
The Experience

Data source: service audit, focus group and individual interviews.

The experience of being there was particularly explored during group and individual interviews. This theme was characterised by two sub themes: ‘being there’ and ‘staying there’. The former particularly concerned the thoughts and experiences of parents and carers once they had done the ‘getting there’. These were important because they informed the reasoning and the decisions about maintaining contact with the service and essentially the ‘staying there’ experience.

Being there
Here parents spoke of the qualities of SSPE workers, what they gained from other group member and the factors that influenced their experience whilst they were there. The ‘being there’ categories identified included: ‘able to talk’, ‘being honest’, ‘respectful’ and ‘support’.

Able to talk
The atmosphere was sufficiently comfortable to feel able to talk and contribute and that it was safe to do so:

P2 Whenever we think we are going to say something we just say it. P3 Yeah (Course for parents, 4:371)

P2 That’s it, because you were in that sort of setting with other mothers we were all saying, I’ve done this and I’ve done that and we got feedback off each other, but as soon as you come out of that room it was dropped. There was no oh you’ve done this, you’ve done that. (Course for parents, 4:644)

A common descriptor used and valued by many of those interviewed was that of friendliness

P Yeah, it is relaxed, plus it was in my own home. It wasn’t like I had to go to a meeting and meet her there. She came to my house and sat down, and she drank cups of tea, so it was more like a friend coming round rather than an official.
R Yeah, so sharing a coffee with someone, sort of thing.
P Yeah, just someone to phew, get my stress off. (Home visiting, 6:161)

P3 I think it’s just because she’s bubbly and friendly, she’s not like a teacher like come on nag, nag, nag. (Course for parents, 3:232)

This was also characterised by demonstrating caring through making concerted efforts to listen and as the second example suggests share.

P1 If it wasn’t for the Sure Start staff yesterday and some of the others..., yesterday I’d have gone home and cried to death, because I was having a bad day with him; he’d not slept days and you know silly things like that.
R So what did the Sure Start staff do?
P1 They offered to come to the house to talk to me and stuff and discuss stuff, you know what I mean, ...they reassure you.
So is it the fact that somebody else is willing to listen?

Yeah and care. (Womens’ group, 10:515)

She talks about her own family, and I talk about my family. She’ll say her boys did this, and her boys have done that. So it is like a friend. (Home visiting, 6:175)

The powerful nature of skilful listening is suggested here where those being listened too then felt sufficiently comfortable to continue talking and sharing.

she just was, I was comfortable with her, I could talk to her.

What is it though about people when they are like that?

Well its like Rose (worker), it’s being like her. She listens and you know, she cares. I know they are all meant to care, but there is a difference when you really mean it. It’s caring, being really concerned and interested.

yes meaning it, when it’s genuine.

she gave me time, I realize now I could talk to her about anything.

(Grandparents group, 18:17)

Being honest
Some expressed that because they felt sufficiently comfortable they were then able to be honest. This woman demonstrated that the ability to be open about what she hadn’t been able to achieve with her son meant that she could then enter into a productive discussion about how she proposed to tackle the difficulty.

Just like, if there’s anything I need to discuss, to talk about it, you know I don’t feel I’ve to come round, I just come out with it. And like she’ll suggest we do something, and then she’ll come back “Have you done it?” And I say to her, I don’t lie, I say “No”. I got him into his own room, and then he was alright for a couple of days, and *****, you know, and now he keeps getting out of it, so I’m going to try and tackle his sleeping next. (Home visiting, 5:280)

Similarly honesty displayed by workers helped support respectful worker/parent relationships.

Yeah, you can tell that it’s honest. It’s not like ‘Oh I’ll just make this up and she might copy this’. (Home visiting, 6:189)

Being respectful
Clear demonstration of respect for the client shown by workers even when not in the client’s company:

The worker was observing who was out and about in the community as she drove through the estate. She made a point of not getting out the car when seeing that someone else she knew from the community was crossing the road to go into their own home. This she explained was to make sure the neighbour didn’t see her going to the mother’s (client) home, in order to protect the confidentiality of the client. (Field notes from observation of client home visit, 21:3)
This manner and style of behaviour continued when in the client’s home.

_The worker listened and asked some enquiring questions regarding her concerns and didn’t introduce the agenda of the visit until the mother's momentum had slowed. When she had done the listening and given opportunity to acknowledge concerns, she then tried to focus the mother’s attention on some of the issues they had been working on._ (Field notes from observation of client home visit, 21:73)

Equally importantly was the sense that the parents and carers were quite alert to their own ability to weigh up the worker by observing their behaviour.

_P3 Best ones are those with the memory_  
P2 Take an interest in you. You know what they are like by their actions; people generally show an interest in you, what you doing. Things like that.  
_(Dads’ group, 1:360)_

_P Like I said, I know who I can talk to and who I can’t, from meeting them. If I feel I can’t then I’m sorry, I can’t, you know what I mean. But the day I met ***** and then the first time she come on her own, she seemed sound. I could blab on and that._ (5:298)

_The example from health visiting_  
Whilst explaining about the contact they had had with Sure Start workers, some of the women interviewed started to make comparisons with their experiences meeting health visitors. For one woman the ability of the health visitor to be friendly and willing to talk about the mother’s concerns made her very acceptable and in her words ‘wicked’. Another however felt that whilst the health visitor was ‘nice’ she had still been able to undermine her mothering when raising the topic of her son’s language development. These womens’ views about their health visiting experiences have been included here as an example of how relationships with individual professionals can inform parents’ views of services.

Whilst there appeared to be real variations in how individual health visitors were perceived, there was more consistency in how parents started to refer to the health visitors as ‘them’ and ‘they’ as if referring to the whole service as opposed to individuals. This is important to note since it suggests how encounters with individuals can, for the service user, become representations of the whole service. Hence service image can become closely linked to individual encounters.

_R You’ve mentioned the health visitor, are you in contact with your health visitors?_  
P4 I don’t see mine.  
P3 Mine’s really nice,  
P1 well, mine she’s not bad. But even I’ve had three health visitors since I’ve had him.  
P2 Yeah, you just start getting used to _them_ and then all of a sudden, you get another one. Best one was Poppy. She was one wicked health visitor!  
_R What made her good then?_  
P2 You could talk to her, she was just like friendly, she’d speak to you about anything. If you wanted her she’d be there._
P3 I thought I was doing a brilliant job, but then she turned round at the age of two, and said he should be saying 30 words and he wouldn't talk. She suggested he might be deaf and I just thought... (shaking her head). It really knocked my confidence.
P1 Yeah basically they think they know better than what you do about your kid.
P5 I've never had a good experience with me health visitor, I've had Snotty ones, yeah.

R what's makes them snotty?
P5 they're just um, er... just totally unapproachable. ......And then they were insisting that one of um had a hearing problem, because he wouldn't respond in the way they wanted them to. But I knew he was alright. So I don't bother with them. (Womens' group, 10:586)

The above examples indicate how the type of experience when accessing a service had given them reason to either reject or make more use of the service. Where the experience had been less positive there was a sense that the service had earned a ‘bad press’ for itself, which was heightened when the parent was later able to make comparisons with other service providers.

P5 Yeah and you know what I mean you can get some health visitors and they're in La La Land aren't they (laughing). I remember he (pointing to her baby) was asleep and she got my cardigan and put it over him and she went "Oh yeah the mother's scent, the mothers scent" and I said "what are you talking about, what are you talking about?" You know, I just grabbed it off her and said, “you're not in the real world”. And the difference is that Sure Start staff really are you know. (Womens’ group, 10:559)

An Asian mother completing the non-service use audit form gave a similar example of earning ‘bad press’. Here Sure Start had earned a reputation as a result of the behaviour of other parents using particular Sure Start parent/child groups This mother had explained that she was happy to use groups but only within the certain areas of the community. This decision was based on an unwelcoming experience she had had whilst attending a group in what she described as a non-Asian community.

often there is little or no welcome for Asians to groups in non-Asian areas (from other parents rather than staff). ......courses etc are not a priority to many Asian mothers, they just want somewhere to go for an hour where they can play with clean toys and in a safe environment (Additional comment taken from non-service use audit)

The example from health visiting and the illustrations of how parents will ‘weigh up’ workers, emphasizes the importance of competence in a wide range of communication skills as well as an ability to demonstrate respect with those using the service. These interactions would appear to help shape the experience of being there and therefore the likelihood of staying there.
Support
A consequence of the informal and comfortable atmosphere where people felt free to talk meant that for many the groups were recognised as having a support function.

P1 Its lovely just to get out and meet others, and find out somebody else is same as you. (Grandparent group 2:166)

Support, when recognised to be of value was perhaps one of the important motivators to stay as these parents suggest when they were offered guidance and helped to overcome their fears.

P3 The first day it was like, mmm, but once we got onto it. (Course for parents, 3:227)

P2 I was a bit worried because I’m not very practical. ……..I feel that I was worried that I wouldn’t be able to think of something to do but I found it really easy. Rose and Fern helped me think about ideas. Once I got the ideas I could get on with it. (Course for parents, 3:252)

The combination of the categories for the ‘being there’ experience was observed during visits to the different groups and courses. This next exert is an example of how during one of the interviews the members of the group were not only talking freely and honestly but were proffering suggestions whilst trying to respect other’s feelings. The conversation started with one grandparent sharing difficult emotions and being honest about her frustration she felt for her own daughter.

P1 I feel so guilty…. I feel ashamed that that… is my own daughter. She wasn’t brought up to live like that, she had everything she wanted, she had holidays every year, she had loads and yet she can’t love her own children. (Grandparent group, 2:319)

Other members of the group listened and offered their own thoughts:

P6 Your daughter could actually grow up one day,
P1 No, she won’t,
P6 She could do. I’ve never been through this, but I couldn’t see me hating my own children, I know I’ve not gone through what you have gone through. P5 Unless you’ve lived through the same thing it is difficult…. P1 But she could have got her little boy back. She is now living with a man…… and she was told that if she got rid of him then she would more than likely have him (her son) back. P4 Maybe she needs to grow up? P1 Mmm, maybe she does (Grandparent group, 2:349)

One of the workers interviewed explained how she had witnessed this type of sharing and support in the group she regularly facilitated.

P …..they just came out with, “Well my son, or my daughter used to do this”. You know, and then the discussion would be amongst them, so I’d step back and just listen, you know, and just intervene if I felt it necessary but let them lead the conversation. (Sure Start worker, 9:31)
For some initial ‘being there’ experiences were indeed as stressful as others had anticipated.

P3 Yes it was, it was the first thing I brought him to really where I have tried to leave him with somebody else and when I first came it was really stressful because I didn’t want to leave him, and I left him crying for the first 2 weeks I’ve left him crying. (Course for parents, 3:69)

Some parents identified that their child’s distress caused by separation was a difficult but inevitable step if they were to reap any benefits from future nursery places.

P3 ….I thought the longer I left it and the older he got the further it would get. Whilst he hasn’t settled in the crèche so well I do think it’s been good for both of us because I want him to see other children playing and mixing. (Course for parents, 3:80)

What seemed crucial here was how these stress events were handled. In the same way that the crèche was a significant feature in ‘getting there’, it remained an important part of ‘being there’ and ‘staying there’.

The negative, (of the group experience) is having to leave them in the crèche, …cos they’re not happy, no (laughs). That’s why they’re cryin now. …it’s with having no continuity with the care staff, they’ve had different people haven’t they most weeks, and your own shame they can never get used to anybody, you know. (Womens’ group, 10:151)

P2 Bobby (child) likes that blond haired one, but not the other one.
P1 Yeah, they do know the difference.
P3 Yes I think that is a good point
R Does that put you off?
P5 Well it does. (Womens’ group, 10:161)

Staying there
Continuing to attend a course through to the end, or by regularly attending a group, parents not only had the experience of ‘being there’, but also ‘staying there’. The positive being there experiences when developing relationships with workers and other parents assisted parents in staying. This was particularly the case for those who were able to recognise resources within the service and who had been provoked to think more deeply about what they were able to gain from the experience. The categories relevant to ‘staying there’ included: ‘recognising resources’ and ‘stimulate thinking’.

Recognising resources
This included the recognition of new friendships and acquaintances as a resource, which not only provided entertainment, but helped participants feel safe and avoid embarrassment when joining in.
P2 ...you build relationships as well, you know, as you see we started coming here and got to know everybody else. You start talking about football, who are North End playing, that’s how relationships start. That’s the good thing about it, it’s not just for the kids, it’s for the dads as well. (Dads’ groups, 1:61)

P2 ...and we know everyone so nobody’s gonna be like ....all embarrassed. SSW But you didn’t know each other at the beginning; P1...well some of us did but not all of us, and we’ve been coming so we do now. (Womens’ group, 10:58).

The unique nature of a group might also be picked out as an important reason for coming back, because the service was perhaps offering something that other facilities lacked. For the men it was the opportunity to take their sons to a male oriented parent/child activity session. This offered a contrast to mother other parent/child sessions that were generally dominated by women talking to other women.

P3 It’s all talking to women....If you go to any of the groups its mostly female. The little lad ...he really does want to see a fella’s side, kick a ball... (Dad’s group 1:375)

For the grandparents it was somewhere to go where they met others sharing their own peculiar and challenging circumstances of being the primary carer for their grandchildren. The consequence of which meant they were denied traditional grandparenting roles.

P5 Your not really allowed being the grandparent because you’ve got to be the mother. P4 Yeah yes I different role isn’t it. P3 Mmm, that’s the biggest thing. P6 Yeah, you only saw your grandparents ever so often didn’t you. Maybe at the weekend..... on a Sunday. So being with them every day you’re not really the grandma. You’re not a grandma really. (Grandparent group, 2:245)

Added to this the grandparents then had to deal with the uncertainty of others when they didn’t know how to refer to the child’s non-typical relationship with their grandparent:

P6 They say he’s your son, he’s your lad. They assume I’m mum, although others ....they know, but they call you Mum. I say, “no it’s alright....” (Grandparent group, 2:272)

Stimulate thinking
A belief that there was value in the involvement with the service was also an important reason for staying with the service. Once a relationship was formed with the worker or facilitators of a group, the parents had worked out how they were getting a return for their own personal investment of sharing, giving trust or even their time. From this they could anticipate what to expect and therefore what they could continue to gain from staying with the service.

P .....they helped me get him in nursery. So from doing that I got to do things for myself, like I say I started with my depression, so I was able to
sort that out, and I also, while he goes to nursery, to have time for myself to
go to acupuncture, and to go to college.
……it’s like they want to give me time for me. I’ve never seemed to have
time for myself, you know what I mean? There has been a big change in my
lifestyle since being involved with Sure Start. (Home support, 5:8)

This woman explained how the course had helped her think about how she can
care for her child to learn.

P2 It is really, because I think when you get older you don’t realise that you
have got to break it down to their level and you don’t realise how much they
have got. I don’t know, we forget about it don’t we, we think just give them
something to play with and they will be fine, but you have got to give them
the words to express how they feel and things like that. We have learnt that.
(Course for parents, 4:260)

Outcomes and ‘upshot of it all’
An extension of the ‘staying there’ sub theme was the evidence of outcomes for
both children and adults staying with services.

For children
Within the interviews there were numerous occasions where parents and carers
quickly identified how they believed their children had benefited from involvement
Sure Start services. This included managing separation, improvements in
behaviour and learning

P3 Yes, he’s got to realise that I’m in the next room and I
will go back to him. He has become, I think he is becoming
more confident, will sit and play. I can now go off when he
gets settled somewhere. (Course for parents, 3:88)

P: Because he was really tantruming all the time, not listening at me.
Jumping all over you when you’re just sat there, and he just changed. Not a
lot, but a little difference. I’ve seen the difference. (Home visiting support,
5:62)

Within the audit the parents were asked to identify any changes experienced as
result of their regular attendance at Sure Start groups. Figure 13. illustrates these
for the 41 parents who stated they had felt a change. These findings suggest that
parents believed their children had benefited through the development of social
skills.
Figure 13. Types of child changes identified by parents

<table>
<thead>
<tr>
<th>Changes parents see in their children, n=41.</th>
</tr>
</thead>
<tbody>
<tr>
<td>more clingy</td>
</tr>
<tr>
<td>improved speech</td>
</tr>
<tr>
<td>better behaviour</td>
</tr>
<tr>
<td>happy</td>
</tr>
<tr>
<td>learnt more</td>
</tr>
<tr>
<td>mixes more</td>
</tr>
<tr>
<td>more confidence</td>
</tr>
</tbody>
</table>

**Frequency**  
0 2 4 6 8 10 12 14 16

For parents and carers

Even when parents were asked to identify if they had had any opportunities since attending the Sure Start groups, they most commonly referred to the opportunity to see a change in their child. Figure 14 illustrates how this was more frequently mentioned than any of the other adult focused opportunities. Although a quarter did identify that they had been able to either start or find out about a new course for themselves.

Figure 14. Opportunities from attending groups

<table>
<thead>
<tr>
<th>Opportunities parents identified since attending group/course, n=94.</th>
</tr>
</thead>
<tbody>
<tr>
<td>see change in own child</td>
</tr>
<tr>
<td>deal with family issues</td>
</tr>
<tr>
<td>take time out</td>
</tr>
<tr>
<td>take up personal study</td>
</tr>
<tr>
<td>take up employment</td>
</tr>
<tr>
<td>start/find out about a course</td>
</tr>
<tr>
<td>be a helper</td>
</tr>
</tbody>
</table>

Many of the parents interviewed felt that that an outcome of their involvement with Sure Start was that they felt they had experienced personal changes and were
more able to deal with life challenges. This ranged from those receiving home
support feeling emotionally stronger and more confident and better equipped to try
new experiences.

***** (worker) just helps me, like things I’m not sure about like she helped
me do a letter for ***** to school to change her name. She finds out things
for me, like now she’s done some notice for me to help the kids to do
housework, because like I just gave into them all the time, I was.
R So is it helping you be a bit stronger?
P Yeah, a hell of a lot stronger. (Home visiting, 5:29)

Being able to realise benefits, a sense of achievement and pride

P2 There’s something to show for it later on to say look
I’ve done this.
R right, so this is what you have produced.
P2 yeah, I’ve done this and given the children something as
well, when they go to school. (Course for parents, 3:86)
P4 I never thought there was quite a lot that could have been done, but in
fact there was so much done with the books, and everyone’s done a book
that’s different which is really good because everyone’s got their own
personal touch, personal ideas of what to do. (Course for parents, 3:164)

Having a goal and purpose

P1 I actually looked forward to coming, getting it together, because we
knew we had a target it was like sort of work and finish it and work towards
the end of the deadline. (Course for parents, 3:156)

Motivated and organising self

P1 Its like, some days you can go home really feeling refreshed. Normally I
don’t have that confidence and I’m at home answering the door, seeing to
the child, and there is no time for yourself, whereas when you have
something to look forward to you’re more organised so you do everything
before you come out. Generally you find yourself more organised, you get
more out of your time. (Course for parents, 3:280)

Finding and valuing the social and emotional networks

P5 ....and we talk to one another and I get the best nights sleep when we’ve
been out for lunch (laughing).
P4 Yeah we say we should go out every day!
P5 and it’s been the best thing.... the best thing for both of us because we
can now relate and understand.
P4 Ooh it has, yes. We can really relate, big style (Grandparent group
2:382)
P1 These groups are very important! Very important. Sometimes before
you got to these meetings I don’t know whether you feel the same ladies,
but whom can I turn to, who can I turn to?
P4 Yes I know, cos there’s a lot of lonely people.
P6 There is yeah, cos you’re just stuck in with that child aren’t you.
P4 Mmm, yeah (Grandparent group, 2:577)
Yeah, Sarah and Sheila (two other parents) helped me achieve my group to the way it is today. (Parent volunteer, 4:231)

Being able to confide and off load

It helps get your mind fresh, you know clear. So if you don't have your own family to talk to probably lending an ear, its good.

But sometimes even when you have your own family to talk to, you don't want to, sometimes they are the cause of the stress, yeah.

(Parent volunteer, 4:231)

Outcome measure results

The results from the outcome measures used within the questionnaires are shown in Tables 4 and 5. No differences in PSAM or SEPTI scores were found for any of the demographic variables detailed in Table 3 on page 25. Where it had not been possible to collect a repeat measure from those leaving the groups or courses, the last known score was carried forward. This assumed that there was no change for these individual scores and allowed the cases to be included in the calculations. Higher scores indicate greater self-efficacy.

The results for the PSAM indicate a very small difference, but not a statistically significant difference in mean scores between the applications.

<table>
<thead>
<tr>
<th>1st Completion</th>
<th>2nd Completion</th>
<th>Difference in scores</th>
</tr>
</thead>
<tbody>
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<td>Number</td>
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<td>47</td>
</tr>
<tr>
<td>Missing</td>
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</tr>
<tr>
<td>Mean</td>
<td>18.98</td>
<td>20.30</td>
</tr>
<tr>
<td>Median</td>
<td>20</td>
<td>20</td>
</tr>
<tr>
<td>Mode</td>
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<td>20</td>
</tr>
<tr>
<td>Std. Deviation</td>
<td>4.3112</td>
<td>2.92</td>
</tr>
</tbody>
</table>

Table 4. PSAM results from 1st and 2nd questionnaire completions

Likewise for the routine subscale of the SEPTI-TS. The discipline and play subscales showed an even smaller difference between applications.

<table>
<thead>
<tr>
<th>Discipline subscale completion</th>
<th>Play subscale completion</th>
<th>Routine subscale completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st completion</td>
<td>2nd completion</td>
<td>Diff</td>
</tr>
<tr>
<td>Number</td>
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<td>43</td>
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<tr>
<td>Missing</td>
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<td>5</td>
</tr>
<tr>
<td>Mean</td>
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<td>19.35</td>
</tr>
<tr>
<td>Median</td>
<td>18</td>
<td>19</td>
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<tr>
<td>Mode</td>
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<td>16</td>
</tr>
<tr>
<td>Std. Deviation</td>
<td>5.82</td>
<td>5.92</td>
</tr>
</tbody>
</table>

Table 5. SEPTI-TS results for the discipline, play and routine subscales

These results do not provide any notable evidence of improved parental self-efficacy within the tasks of discipline play and routine for the domain of parenting. Similarly the evidence of altered parenting confidence as a result of PSAM scores is limited.
Thirty-seven respondents completed the Parenting Daily Hassles scales within the questionnaire. This scale produces frequency and intensity scores for hassles identified by parents.

Again the scores for the parents failing to repeat the measure were carried forward. The possible range for the frequency scale is 0-80 and for the intensity scale 0-100. Lower frequency scores indicated fewer hassles and lower intensity scores indicated that child behaviours were less bothersome to parents.

<table>
<thead>
<tr>
<th>Parenting Daily Hassles Scale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency scale completions</td>
</tr>
<tr>
<td>1st</td>
</tr>
<tr>
<td>------------------</td>
</tr>
<tr>
<td>Number</td>
</tr>
<tr>
<td>Mean</td>
</tr>
<tr>
<td>Median</td>
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<tr>
<td>Mode</td>
</tr>
<tr>
<td>Std Deviation</td>
</tr>
</tbody>
</table>

Table 6. Frequency and intensity parenting daily hassles scale scores

Like the results for the PSAM and SEPTI-TS scales, the change in scores might indicate a positive trend, but the differences are very small.

Events that parents noted occurring either ‘a lot’ or ‘constantly’ are detailed in Figure 15. This provides an insight into what activities parents perceive to be dominating their roles. The top three were cleaning up toys and food, facing child’s demands to be entertained and having to keep a constant eye on what children were doing. Other prominent hassles were being nagged and whined at, facing mealtime difficulties and having little opportunity to gain some privacy.

Figure 15. Hassles that parents identified as occurring a lot or constantly

![Items identified as a parenting daily hassle, n=37.](chart)
What next

Having had the experience of using a Sure Start service, whether it was a group, course or one-to-one support at home parents appeared to be able to approach aspects of their live with a fresh vision and ‘move on’. When parents appeared to ‘move on’, there was to some extent a withdrawal of contact from Sure Start workers as they ‘moved out’ of individual parent’s lives. However ‘moving out’ was also a feature of parents’ behaviour when services experienced some level change or when being their experiences had not been satisfactory. Finally there were a number of parents who expressed satisfaction with the way service were currently organised and were happy to continue to use them in the same way they had done previously.

Moving on

It appeared that the availability of different types of services within Sure Start, made it possible for parents to journey through the programme. When exposed to new experiences either through attendance at course or participation within a group, a degree of ‘moving on’ seemed evident, as this parent infers.

P2 it’s a stepping stone for something that you want to do, if its like just doing the course, like Sheila (another parent) said, for confidence, it’s not really that much of an issue if you have a certificate because you have done the work each week anyway, so you know you can do it. (Course for parents, 4:344)

Some of the workers recognised this and were proactive in their attempts to support parent progression

…..because they’re showing real potential, and they’re really wanting to do it, and they’re really into it, and everything, and I’ve said well “Do you know, you could run this group. We might need to look at this, this and this, but you could do this”. And then once they’ve got over that initially scary thing “Aah, could I actually do that?” I said “Yeah, do it with our support, and when you’re ready you’ll go off on your own and do it”. And you know, and that’s the progress. (Sure Start worker, 9:102)

Having prior experiences was understood to have a ‘priming’ effect, which enabled parents to ‘move on’ as they acquired increasing confidence and possibly social competence.

P They’re primed, they’re ready, they want to do it. They’ve been through it once so next time they can go through it again but get even more out of it. Deeper interaction if you see what I mean. (Sure Start Worker, 9:135)

However ‘moving on’ was a personal experience that did not necessarily require the individual to attend new services. There were examples of several parents who continued to attend the same group, but had altered the way in which they participated with that group. For example some women became parent helpers at specified parent/child groups, whereas others stepped out of Sure Start to try something new by planning attendance at a local college course. One woman who was particularly proud of her achievement commented how her involvement
with Sure Start had given her access to training courses that had enabled her to seek and gain employment as well as be an active participant in a community forum.

*When Sure Start East first arrived I didn't have any certificates, I now have 18-20 and these have enabled me to do what I'm doing and more.*

*(Additional comments made on audit form)*

This suggestion of priming was also applied to children as well as the adults using services. As described previously when considering the experience phase of service use, it was reported that children had benefited socially from attending parent/child groups. Parents believed that these social experiences were useful and important for preparing themselves and their children for later challenges. In essence the children would be primed for attending nursery or school and the parents would be more prepared for letting them go.

*P1* Yeah, if they don't mix, you end up with like at some of the groups that we to go to, some of the kids can’t be left because they don’t want to be left in a crèche, they are 2 and 3yr old children, its like getting them ready for school if you will.

*P5* Oh yeah, and you can see the ones that haven’t been left and what they do and what they think about school. We need to let them go a bit. *(Course for parents, 10:479)*

There was also a strong belief that that children would be enabled to move on academically, given the educational value of many of the activities they had been exposed to within groups.

*P3* Makes them more academic.

*R* So does that mean it helps them more at school?

*P3* Definitely. And their vocabulary.

*K* So could this course be a bit of preparation for helping you help them?

*P1* Yes, like I told you, I make my children do a little bit of the course, so the teachers think they are clever! *(Course for parents, 3:278)*

This mother went on to give the example of how she had recreated the “make a book” activity with her own children. Her son had taken the completed book into school to show the teacher, who then used it as part of a class activity where the other children had a chance to make their own books.

One of the key aims of Sure Start is to support the development of social well being within communities. The generation of informal support networks can positively contribute to social well being and improve community sentiment. Examples of developing informal networks were evident in most of the groups visited during the data collection period. Networks involved participants making new friendships that they maintained either independently or as an extension from the group.

*P5* well that's what's happened with Suzy and myself. We're in identical positions really..... and we now go out to lunch,..... *(Grandparent group, 2:378)*
The latter involved offering assistance that enabled each of them to make the most of the group. This was either by sharing resources as this woman suggests about the story sacks that they hoped to make following the make a book course.

\[P4\] You know it would be nice if once we all made them, we all swapped, you to have a go on one another’s. I mean I don’t know if we will see one another again, but it might be nice to have the chance to benefit from one another’s (Course for parents, 3:595)

Other offers concerned helping maintain attendance by either by offering help with transport, walk the same route or make a reminder telephone call before the next session.

Moving out

Group facilitation

One of the less favourable outcomes that may arise from the development of closer bonds within groups is that the outsider status of the group newcomer is emphasised. Without careful facilitation, groups may appear closed and unintentionally exclude newcomers

She voluntarily explained that she didn’t normally feed him like this as he would be in a high chair at home and wouldn’t have these kinds of foods, so much sticky stuff and jam sandwiches. She then pointed out that her young child had even managed to knock his head and bruise his eye shortly after they had arrived, by pulling a baby gym onto him.

...There seemed here to be a cultural divide, in both tastes, ways of doing things and also being part of the crowd. This woman had no wish to be part of the crowd, but wanted the activity and something to do with her child. (Field notes, parent/child group 23:54)

Although this was not directly commented on by any of the interview respondents, excluding behaviours were observed when visiting open access groups. These behaviours included persistent use of a mobile phone, observing others in their activities, standing up when others are sitting down, and occupying key spaces such as the kitchen where there was access to the refreshments.

I was uncomfortable with some of the parents’ behaviour. In particular the walking about whilst speaking on the phone, keeping coats on and not interacting with anyone other than themselves and those that approached them. It felt as though they were asserting control. ... One parent wandered about during the song, coming in and out the room whilst singing. Their body language was powerful in that it was hard to ignore. Almost like a tiger that prowls up and down the side of a cage. It felt domineering and to the onlooker uncertain as to its purpose. The only other people that were moving about were those helping to tidy up. (Field notes, parent/child group, 23:44)
These were within groups where the Sure Start worker had taken a back seat position in an attempt to let the parents manage their own groups. In some circumstances workers were only seen to ‘pop in’ on and only occasionally visit groups, leaving parent helpers to manage sessions. When a parent helper was asked about the contact she had with workers she explained that this had reduced as the parents had become more practiced at organising sessions.

Contact by telephone, well yeah, more at the beginning. But now because we're such an advanced group I think they think we're all right. ...we never usually see them that much, they just turn up if they've got something to bring, or because they are doing something on the programme. (Parent helper, 7:379)

A difficulty with this very loose style of supporting or ‘moving out’ from the delivery of parent/child groups is that workers may be unaware if helpers start to feel disillusioned by the regular challenges that group facilitation brings. This parent was very positive about her role as a helper, but also felt frustrated by the challenge of encouraging other parents to share the workload. This was indicated by her repeated examples of what she trying to do as a parent helper.

P It's a bit – I tried to and we couldn't. The children wouldn’t get involved because the parents weren't getting involved. (7:426)

P Yeah. I try to get them more involved and stuff, but they don't really bother. They just want to come for a chat and a drink. (7:449)

P I try and get them more involved. Have a say in what they want to do. What trips they want to go on, what courses. But they just say "Erm". Usually half the time I'm like “Look, it's your group. If I come back and it's wrong, and you don't want it, I think it's my fault because I've done it wrong". (7:467)

P Yeah. Because I tried to get them onto a rota. I thought it was better having a rota for activities on the table, and setting up and stuff, but it doesn’t work. It's just that they've got to remember and then people don't turn up. (7:524)

Assumptions may also be made about how parent helpers might uphold principles and rules that employed workers are contractually required to maintain. In particular these may include those concerning non-discriminatory practice or health and safety regulations.

....she wasn't completely satisfied with what was available because felt the activities were for older toddlers and the toys were more for younger babies (infants), she explained whilst pointing to the baby gym. She also pointed out the health and safety concern over the bringing of hot drinks into the main room and leaving these on a tray where young children could reach them. (Field notes, parent/child group 23:30)

When visiting groups, workers did not always communicate in an engaging manner with newcomers and missed opportunities for recruitment to other groups and courses. With the above example the failure of the Sure Start worker to
maintain closer contact with the group meant that this woman’s concerns went unheard. She was left with unsatisfactory first impressions of the service and what is more, there was nobody available to redress these. If workers fail to act in an opportunistic manner, some parents will continued to be disengaged from the main group and may even ‘move out’ from what they had been trying to access.

The worker explained about the course, but only by responding to questions. There was limited effort in "selling" the course to encourage these parents to attend. She did sit down whilst explaining it, but made no enquiries about what they were interested in, and no questioning about what they were currently doing if anything. I commented that there was a crèche and she responded by saying “ah but my crèche is full up, its booked up already”. No enquiry was made about taking the names of these parents to follow them up or make suggestions about other groups. I continued by telling them about the health and well-being group and commented looking at the worker who it was who organised that. She did not take my lead and did not explain how to contact the worker and find out whether other crèches were full. (Field notes, parent/child group, 16:80)

Location and barriers
The nature of the venue and its location were perceived as relevant factors that can interfere with the ability to either attract new or maintain existing parents using services. One parent/child group noted a reduction in attendance when a new fence (as shown below) was built around a shopping complex located close to one of the housing estates. Previously parents living on the housing estate would use this as a short cut to the local church where the group was held.

The new fence considerably increased the walking distance to the group.

This was one of the prompts for parent volunteers to seek an alternative venue at a local school. Some parents completing the audit form identified particular groups that they were interested in such as keep fit. However when the location of these groups was outside the immediate community the travelling distance was generally perceived to be too great for those without personal transport.

There used to be like a gym and aerobics class at Ascension Church. A lot of them went, and as soon as it had finished a lot of them said "Oh, I would like to do that again". It's because it's at Gutteridge. It's too far for them really, because a lot of them have got double buggies and they can't be on the bus. (Parent helper, 7:154)

Similarly when one exercise class changed from aerobics to line dancing a significant proportion of the previous attendees stopped going. The change in
type of class had been made in response to a request from a core group of women who were regular attendees. When asked why other women had stopped going, several commented that the new type of session was culturally inappropriate with a male instructor and explicit focus on dance.

_I am interested in keep fit but don't like a male instructor or any kind of music (can't dance to music) (Parent Comment on Audit form)_

This was an example of workers assuming that the wishes of a select group of parents, who had successfully formed a cohesive group, represented the majority view. When the parents on the fringes of this cohesive group, the outsiders, clearly had alternative views about how the exercise session should be organised. The outsiders to the cohesive group stopped attending and 'moved out' of the sessions.

**Continuing, but wishing**

A proportion of parents did not appear to move on or out of the Sure Start groups they were attending. For some the provision was seemed sufficient, although not necessarily very engaging.

_A lone woman commented that she had been for the last 4 weeks. She had been directed to the group after enquiring at space place. Her child was 9-10 months, she seemed a little withdrawn, didn't mix with any of the other parents, but had come with her toddler and primary school aged daughter. When I asked whether she had met new people and made friendships, she implied in her response that she wasn't looking for that and that she was happy to keep herself to herself "Oh no, I just keep myself to myself really". (Field notes, parent/child group 23:42)_

Fifty-nine of the 144 respondents completing the audit made comments about what other activities they felt Sure Start could be involved with. Thirteen of the 59 commented that that they were happy with what they were already doing.

_Many of the mothers speaking to me commented that they came because of the opportunity to get out of the house and have a chat, catch up with a mate and even a gossip. It was local and there were things for the children to do so they were happy as well. (Field notes from parent/child group, 24:69)_

Parent/child groups particularly met their need to get out the house on a regular basis and meet friends, as also noted by a parent helper (see page 53). Forty-six respondents made comments that have been compiled as a wish list (Fig. 16.) of the type of services and activities they would like Sure Start to deliver.
Figure 16. Services audit respondents believed Sure Start should provide.

Some of the descriptive comments referred to behaviours of Sure Start and these included: being inclusive, being welcoming, providing a safe environment, preparation for school, and offering transport between groups.
Discussion

The data collected in this study has made it possible to identify different phases to the journey that parents/carers made with SSPE. The journey regardless of how long or short was characterised by the common theme of communication. The type, nature, consistency and amount of communication appeared to have an impact on each phase of the journey from finding out to deciding what was next. The phases of the journey are illustrated in Figure 17. Page 62. The circles suspended from the line of skilled communication increase in size to suggest the parent/carer’s increasing involvement and contact with Sure Start. The continuous arrow of communication has been used to illustrate the need for participants to be repeatedly exposed to skilled communication to maintain their involvement and support positive journeys through sure start services. The arrow that returns back from ‘What Next’ to ‘Accessing’ illustrates how part of the journey has already been completed for those already fully engaged with Sure Start and ready to try something else on offer.

Phases to the Sure Start journey.

Finding Out
The initial contact with Sure Start information sources can be defined as the ‘finding out’ phase. Here the type of communication appeared to influence the receptiveness of the parent/carer to messages given. Messages that were acknowledged appeared to be characterised as: face-to-face, friendly and responsive to the parent/carers circumstances. Moreover repeated communication that served to reinforce earlier messages were important mechanisms to encourage the outcome of accessing the service.

Accessing
Taking the first steps to actually access a service was often a social experience, with the newcomer being accompanied by another adult, but the reason for going was often the child. Hence the child became the vehicle, but the first steps were made possible by adult support. Here, communication was not just verbal as the availability and actions of an adult companion could signal to the parent that they were not alone. When positive, these actions helped the parent to engage and develop experiences. Again the social interactions were the most pressing feature of ‘being there’ and using the Sure Start service. Less positive communication when accessing services were described as group members being unfriendly and not specifically welcoming. The failure to be inclusive when making decisions about the activities of the group meant that some parents did not continue to access the service and as a result only had a very short experience of ‘being there’.

The Experience
Positive social exchanges where communication from others and in particular the workers was skilful, encouraged parents to stay and continue to regularly use the service. Skilful communicators demonstrated a positive regard for the parents and carers, indicated by acknowledging and responding to individuals. Parents also noted a sense of genuineness when workers would go all the way and actually follow through on offers of support. Staying and becoming a regular user was in fact the second important outcome since without regular attendees, there was no identifiable service for other newcomers to explore. Also the more time parents
committed to using a service the more opportunity there was for workers to get to know understand and respond to their needs.

Outcomes identified by the parents and carers themselves would appear to have developed as a consequence of regularly accessing support in the home or attending a group/course. Specific outcomes included a sense that there was a purpose to the day, an improved ability to organise themselves and recognition that personal goals could be achieved. The context for these outcomes had also evolved as this was characterised by contact with new acquaintances and friendships. Exposure to changed social experiences complemented the parents’ primary desire to support the growth and development of their child. Indeed seeking social experiences for children, allowed the adults to develop their own social worlds and in some instances develop new social skills for themselves. This was particularly apparent for those attending courses with specified goals. In essence the child was a vehicle for adult development. But children also benefited according to the parents, who identified improvements in child behaviour, confidence, language development and ability to mix with others. Furthermore having the opportunity to witness these improvements in their child was felt to be a bonus for parents and reinforced their commitment to the Sure Start activities.

What Next
Finally following either of the ‘being there’ or ‘staying there’ experiences of a service parents and carers would either continue as they were, ‘move on’ or ‘move out’. Those who were continuing, were motivated by the desire for adult company, a need that could be legitimately met by also accommodating their child’s needs to socialise with others. Typically open access parent child groups were used to meet these parent and child needs. Those continuing with the service played an important role in defining the group to onlookers and as such the public image of Sure Start. Parent child groups also offered an opportunity for newcomers to ‘dip their toe in the water’ and become familiar with what Sure Start was. Such experiences appeared to have a ‘priming’ effect and helped parents to ‘move on’. The worker clearly had an important role here too, since groups lacking guidance risked presenting a negative public image if regular group attendees did not always uphold positive Sure Start principles of respect, inclusiveness, fairness and safety. In these circumstances newcomers’ ‘being there’ experiences were not characterised by social engagement and so did not maximise chances that encouraged continuing with services.

‘Moving on’ meant engaging with something else, but doing so from a different starting point. This was made possible because the ‘staying there’ experience had given the parent/care exposure to new messages about alternative activities provided by Sure Start. In addition, they had had the opportunity to get to know and trust the workers and therefore any new information that these workers might bring to the attention of parents. Here the workers were more able to rely on written messages or telephone calls as a means of communicating and reinforce information, whereas earlier personal face-to-face contact had been more imperative. There was also evidence of ‘moving on’ outside the parameters of Sure Start as parents decided to take a step towards accessing local college courses or even employment. However the communication from the Sure Start worker and other group members remained important, since it was as a result of ‘staying there’ that parents/carers were exposed to verbal discussions about options available.
By contrast parents/carers ‘moving out’ had encountered a barrier of some kind. In some cases this was physical in the form of a new fence or change of venue that prevented access to the group activity in the same way. In other cases the nature of the activity had changed and thus altered some of the views about what there was to be gained from continuing to attend. Again communication on the part of those representing Sure Start could make a difference to whether parent/carers continued to engage with services. A passive stance taken by workers meant that opportunities for exposure to information and hence ‘finding out’ were damaged. In these cases mechanisms that prompt service access were not activated.

Other outcome evidence
Repeat measures for parental self-efficacy and hassles were used with parents first starting and finishing a group programme. The scales used within the questionnaire were the Parenting Self-Agency Measure (PSAM), subscales from the Self-Efficacy for Parenting Tasks Index Toddler Scale (SEPTI-TS) and the Parenting Daily Hassles Scale. Only three respondents receiving home visiting completed the Adult Well-being scale providing insufficient data for meaningful analysis.

It had originally been anticipated that much of the data could be collected from parents attending the group parenting training course (SMILE). One cohort of this type of course was run successfully, but a subsequent course had to close due to insufficient parent attendance. Simultaneously other courses for parents although not directly on the topic of parenting were being offered. These other courses (Play work with Children, Make a Book and Access All Areas) were offered as an alternative to parenting training and were considered by the workers to be important arenas where they could prepare parents for attendance at the more emotionally challenging parenting training. This meant that many of the interventions (type of parenting group or course) used were not so explicitly focused on improving parenting practices. Instead they concentrated on particular interactive activities that adults might have with children, such as reading books, or play activities. These courses did not purposively deal with parenting hassles or challenging behaviours unless specifically raised by participating parents.

The difference in the nature of the interventions used by SSPE could have been part of reason why the outcome measures used in this evaluation failed to identify any notable changes in parenting self-efficacy and parenting hassles. The duration of time allowed between the measures (immediately at the beginning and end of the course/group) may have been too short since self-efficacy is a generative ability that takes time to develop and many of the courses only lasted for 6 - 8 weeks. The problem however with repeating the measures at about 3 months after the end of the course, is that many of the Sure Start participants will have started a new course, and would therefore be receiving a second or even third intervention. The real world of the Sure Start programme therefore makes accurate use of outcome measures against particular interventions difficult. Particularly with the multi-modal levels of service provision and the ad hoc nature by which many parents make use of services.

Despite these shortcomings parents after attending groups were able to identify their own outcomes citing benefits for their child and opportunities for themselves. They also reported slightly fewer parenting hassles in the form of difficult child behaviour and claimed that those that existed were less intense. The identity of parenting tasks that parents’ found particularly difficult was useful as these are in
part a reflection of parenting support needs. The difficulties that parents commonly faced were: cleaning up toys and food, facing child’s demands to be entertained and having to keep a constant eye on what children were doing. Other prominent hassles were being nagged and whined at, facing mealtime difficulties and having little opportunity to gain some privacy. This information can be used to inform the development of existing and new SSPE services.

Conclusions

SSPE operates a wide variety of services, aimed at reaching families in different ways. The evidence that illustrates a phased journey taken by parents/carers engaging with Sure Start also indicates the need to repeat messages to parents that are engaging and welcoming to maintain their involvement. Skilful communication delivered by individuals’ remained at the centre of services successes. Equally the provision of services that invited different degrees of user participation and likewise offered varying levels of support appeared to be important for helping individuals maintain a relationship with Sure Start. This allowed parents to become familiar with what to expect and in many ways become primed for greater involvement. Thus the open access parent child groups and the one-to-one home visiting supports provided important routes into the more focused peer groups that concentrated directly on parenting challenges.

The delivery of groups/courses for parents as opposed to groups focusing on parenting training meant that the scales for parental self-efficacy and parenting hassles were less suitable outcome measures. These outcome measures are more suitable for measuring the effectiveness of interventions aimed specifically at altering parenting behaviour.

Qualitative evidence does demonstrate that when skilful communication was used SSPE did make a positive contribution to making life better for those accessing services. Parents completing the audit report believe that their children have benefited from access to parent child groups as a result of mixing more and learning to socialise. Recognising this change was a benefit to parents who also felt their own personal routines had improved and they were more confident to engage in other community courses or activities.
Figure 17. Phases of the journey parents had with Sure Start.
## Recommendations

### Table 7. Recommendations mapped against Every Child Matters Key Outcomes (Department for Education & Skills 2004)

<table>
<thead>
<tr>
<th>SSPE services</th>
<th>Every Child Matters Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current provision as evidenced in research evaluation</td>
<td>1. Be Healthy: Exercise class, Aqua natal class, Smoking cessation support, Parenting training – managing difficult behaviour, Parent/child groups</td>
</tr>
<tr>
<td></td>
<td>3. Enjoy and Achieve: Regulated pre-school childcare provision, Accredited adult learning courses, Speech therapy, Exercise class, Aqua natal class, Parent/child groups, Dads sports events</td>
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<td></td>
<td>5. Achieve Economic Well-being: Accredited adult learning courses, Employment of local parents</td>
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<tr>
<th>Contribution made</th>
<th>Every Child Matters Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical health via exercise and healthier habits (smoke free homes), Mental and emotional health via supportive social networks</td>
<td>1. Be Healthy: Minimising risk and anti-social behaviour, Learning new skills in respectful communication, Learning to recognise risk</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Recommendations</th>
<th>Every Child Matters Outcomes</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>5. Achieve Economic Well-being: 5.1. Continue to work with local colleges to provide access to adult learning.</td>
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<tr>
<td></td>
<td>1.2. Provide culturally appropriate exercise options.</td>
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<td></td>
<td>1.3. Maintain regular communication with parent led groups.</td>
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<td></td>
<td>1.4. Develop more joint health activities/initiatives with local community children's nurses, health visitors and school nurses.</td>
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<td></td>
<td>2.2. Invest in initiatives that develop child and adult safety awareness</td>
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<td></td>
<td>2.3. Continue joint initiatives with partners.</td>
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<tr>
<td></td>
<td>2.4. Maintain regular contact with parent volunteers and helpers</td>
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<td></td>
<td>3.2. Work with local schools to introduce to parents to school setting i.e. via provision of parenting support groups</td>
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<tr>
<td></td>
<td>3.3. Develop protocol for follow-up of parents/carers who have expressed an interest in specified groups or courses</td>
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<td></td>
<td>4.2. Explore opportunities for engaging with pre-existing community groups.</td>
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<td></td>
<td>4.3. Map out services to identify how parents can be prepared for accessing groups aimed at promoting positive parenting behaviours.</td>
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<tr>
<td></td>
<td>4.4. Workers need to be proactive and opportunistic to maintain regular and continued parental/carer involvement.</td>
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<tr>
<td></td>
<td>4.5. Introduce a system of peer appraisal for workers and volunteers to support development of communication skills.</td>
</tr>
<tr>
<td></td>
<td>5.2. Work with local schools to explore the development of joint parent/child learning events.</td>
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<tr>
<td></td>
<td>5.3. Work with parent volunteers and helpers to develop personal development and career plans.</td>
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</tbody>
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APPENDIX 1.
Sure Start Preston East Audit
Playgroup/Nursery/Parent and Child Groups

1) Name of group/playgroup/nursery ..............................................

2) Are you: Male Female

3) How many times a week does your child attend? half days ........ full days ........

4) When did they start attending? Month ............................... Year ............

5) How did you find out about the group/playgroup/nursery? (tick any)
   a) Friend
   b) Relative
   c) Sure start worker
   d) Local advert
   e) You were invited to attend/apply

6) Which of the following reasons were important to you when deciding to bring your child to playgroup/nursery? (tick all that apply)
   a) Needed time for myself
   b) For your child to mix
   c) For your child to play
   d) For your child to learn
   e) Location and time of the sessions
   f) Because you were encouraged by a professional (e.g. GP, HV, SW)
   g) Which was the MOST important reason to you? Pick only one. ...........

7) Since bringing your child to the group/nursery have you had the opportunity to:...
   a) Be a helper with Sure Start East
   b) Start a training course of any kind
   c) Take up any form of employment
   d) Take up any form of personal study (e.g. distance learning)
   e) Take time to rest following illness/pregnancy
   f) Deal with any difficult family circumstances
   g) See a change in your child If so, how? ...........................................
   h) Other (please specify) .................................................................

8) Have you ever attended any other Sure Start groups? YES or NO
   a) If YES what is the name/location of group? ...............................
   b) Are you still going? YES or NO
      i) If NO, why not? .................................................................

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9) What types of services do YOU believe Preston Sure Start should be providing in order to make a difference to the lives of families in your community?

9a. Services for children

9b. Services for parents

9c. Services for families

Thank you for your patience and time to complete this form. This will help us with our review of Preston Sure Start East Services.

If you wish to make another comments about your contact with sure start please make these below in the space provided.

If you have attended any sure start groups and are interested in taking part in the Sure Start East Evaluation study, please give your name to the playgroup/nursery manager and they will arrange for a member of the evaluation team to contact you. Alternatively call Caroline Burnell on: 01772 277 300.

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APPENDIX 2.
Sure Start Preston East Local Evaluation of Parent Experiences
An Information Sheet for Parents

You are being invited to take part in this evaluation of Sure Start Preston East services. Before you decide it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with friends, relatives and your health visitors if you wish. Ask us if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part. Consumers for Ethics in Research (CERES) publish a leaflet entitled ‘Health Research and You’. This leaflet gives more information about health research and looks at some questions you may want to ask. A copy may be obtained from: CERES, PO Box 1365, London N16 0BW

To help you in your decision to be involved in this study some common questions and their answers are listed below. Thank you for reading this and we hope you find the following information helpful.

What is the purpose of the study?
This study will collect information about parent’s experiences of the Sure Start Preston East services. The aim of the study is to look at parents’ views and beliefs of their experiences when using Sure Start East services. This information will help those providing services to have a better understanding of how parents can be best supported in raising children. It will also be useful when making decisions about how future services are planned.

Why have I been chosen?
All parents making use of the family support home visits and parents’ groups from November 2004 to April 2005 will be invited to take part in the evaluation.

Do I have to take part?
It is up to you to decide whether or not to take part. You will be contacted one week after receiving this information sheet to ask if you are happy to take part in the Sure Start Preston East study. If in agreement you will then be asked to sign a consent form before completing the questionnaire. Even after agreeing you are still free to withdraw at any time and without giving a reason. This will not affect the standard of care you receive.

What will happen to me if I take part?
If you agree to take part the usual care and support offered by Sure Start Preston East will not be altered in any way.
Taking part will mean agreeing to complete a questionnaire before starting the group or home visits and once again 6 weeks later. You will also be invited to speak to the researcher about your experiences of the service once the group or home visits have come to an end. The research interview will be organised at a location convenient to yourself. If attending a parenting group the interview will be organised as a group interview at the end of the parenting course.

You will be informed of the name of the researcher before they visit and they will carry an identity card with them.
**How many times will I need to meet the researcher?**

*If you are receiving home visits or having one-to-one contact with a Sure Start worker you will be contacted once during the period of contact and once again when the contact/visits have been completed. Those attending the 6-8 week parenting groups will only meet the researcher once at the end of the group.*

**What sort of questions will I be asked?**

The researcher will talk to you about:
- what aspects of the service have been helpful and unhelpful to you,
- how confident you feel as a parent,
- what being a parent is like and
- the community activities you have been involved with since having contact with Sure Start.

**Will my taking part in this study be kept confidential?**

All information, which is collected, about you during the course of the research will be kept strictly confidential. With your permission the researcher will tape record each interview. During interviews you will retain the right to stop, listen to and edit the tape at any time. The tape recordings will then be written out and the tapes will be destroyed. The transcripts will not have any names attached to them and you will be given the opportunity to read them through and comment on them if you wish.

Only members of the research team will have access to the transcripts, questionnaires and computer database, which will be used to store questionnaire information. Each questionnaire will be given a serial number and responses to each question will be coded. The actual questionnaires and interview transcripts will be stored in a locked Sure Start East cabinet for a 10 year period, after which they will be shredded.

The rights of confidentiality would only be breached if any concerns arose about the protection of children. In this situation the researcher would be obliged to follow Local Authority, Health Trust and professional child protection policies. However information would not be shared without the parents’ knowledge.

**What if I change my mind?**

You have the right to change your mind about your involvement in the study and can leave at any point, by contacting Susan Smith (details below).

**What will happen to the results of the research study?**

The results from the study will be written up in a formal report for the Management team of Sure Start East Preston and will be submitted to Regional Sure Start team located in Lancaster. If parents would like a copy of this report one can be obtained by contacting Susan Smith.

**Thank you for your interest in this study**

To find out more about this study please contact:
Susan Smith at: *Sure Start Preston East, Watermark Building, Preston*
Tel: 01772 277300

or Karen Whittaker at: *Department of Nursing, University of Central Lancashire, Preston.* Tel: 01772 893786
Sure Start Preston East offers a number of groups and courses. The numbers of parents attending these has varied and we are interested in the reasons why people might not attend. You can help by answering some of the following questions. We do not need to know your name, but it would be helpful if you could tell us whether you are a mother or father, your age and which area you live in.

10) Are you: Male Female

2) How old are you? 

11) In which community do you live? a) Deepdale b) Holmeslack c) Brookfield d) Other

12) From speaking to parents who have attended sure start groups and courses we have some ideas about why other parents may not come along. We want to know if any of these reasons would be true for you. Please tick your reasons for each group/course.

13) Are there any other reasons why you would choose not to go to a sure start group or course? YES or NO

If YES, please tell us below what these are:

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References


