

Evaluation Report

Sure Start Hillmarton

Survey of

Registered Non Users

August 2004

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Acknowledgements

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1. Introduction and methodology

Sure Start is a major national government scheme, established in 1998/1999, as a cornerstone of its target to reduce childhood poverty and social exclusion. Sure Start's main aims are to improve children's social and emotional development, health and ability to learn and to strengthen families and communities. Many national objectives and targets have been set to achieve these aims. One objective of the Sure Start initiative is to join up and add value to the existing services for families in a local area. Individual local programmes are expected to involve a range of local service providers, as well as local parents, and work with them to determine how best to provide services to meet the needs of families in that area. The underlying method to achieve this is by providing support and local resources for families with children under four years of age.

All Sure Start programmes are required to monitor and evaluate their work and progress. By Spring 2004 there were over 520 local Sure Start programmes around the country. Currently there are six local Sure Start programmes in the London Borough of Islington, of which Sure Start Hillmarton is one. Sure Start Hillmarton began offering local services in early 2003. Services offered at the time of this study are listed in the appendix.

The National Children's Bureau (NCB) is an independent, not-for-profit organisation, which aims to promote the interests and well-being of children and young people in every aspect of their lives, and challenges disadvantage in childhood. Research and evaluation is one major part of NCB's work. NCB aims to undertake high quality research and ensure that the views and interests of children are listened to and taken into account. These ideas are used to influence policy and to promote good practice.

Sure Start Hillmarton commissioned the National Children's Bureau (NCB) to carry out an evaluation to explore why a number of eligible families who were registered with Sure Start Hillmarton had not used its services to date.

1.1 Evaluation aim

The main aim of this evaluation was to explore parents' and carers' views about why they had not engaged with Sure Start Hillmarton services to date, despite being eligible and registered.

1.2 Key evaluation questions

- What characteristics have families who had not engaged with Sure Start Hillmarton?
- What are the barriers and enablers to accessing services?
- What other services do eligible families feel are needed locally?

1.3 Methodology

It was important that the evaluation could provide useful information for Sure Start Hillmarton in the early stages of programme development. Spring 2004 was opportune as at that stage Sure Start Hillmarton had been offering services for roughly one year and was at the point of expanding its services. Moreover out of a total of 392 registered families only 142 were recorded as actually using Sure Start Hillmarton services.

Sampling

To respect the integrity of Sure Start's data protection and families' confidentiality, Sure Start Hillmarton sent a letter to registered families not using services ($n=250$), explaining this study and inviting them to participate. This letter was also translated into some commonly spoken community languages. Those who preferred to opt out were instructed to telephone the Sure Start office, to this effect. NCB was only given families' names and contact details after they had consented to participate ($n=208$).

From this list of 208 non-users NCB subsequently removed:

- 38 families who had only registered with Sure Start within the previous three months;
- nine people who subsequently opted out when NCB made contact to arrange interviews; and
- fourteen families who, in the course of the fieldwork, were found to have moved.

This left 147 families. Out of this number we interviewed 73. Multiple, unsuccessful, attempts were made to arrange interviews with the other 74 families on the list, including eleven failed appointments.

Methods

A survey using structured interviews offered the optimum method to collect data from as many families as possible in the time available and to allow certain comparisons. Six of the nineteen questions asked were open-ended in order to gather individuals' views in their own words. The questionnaire was drafted in consultation with Sure Start and piloted in the first round of interviews. (See copy of questionnaire in Appendix).

Conducting the survey

Fieldwork was undertaken over February and March 2004 by two NCB researchers: Berni Graham and Amelia Jorgensen. The majority of the 73 interviews were conducted face-to-face in interviewees' own homes and ten were carried out by telephone. Although the latter was not as ideal for exploring personal views, it was the only feasible method for those concerned, usually to fit in with the interviewee's working hours.

As English was not spoken by all families interpreting was needed. In a few cases this was done by other family members and in seven cases professional interpreting was arranged. In some families where only one member of the couple spoke English they answered the questions.

Analysis

The data was analysed using the SPSS computer analysis software.

2. Characteristics of non-users interviewed

The Sure Start Hillmarton non-users interviewed were not one homogenous group, but rather showed a wide and diverse range of characteristics. Many of these characteristics indicate high levels of deprivation and also provide clues as to why people had not hitherto accessed services.

2.1 Areas where families lived

The Sure Start Hillmarton area is spread over quite a large and diverse area, between York Way and Holloway Road in the North Western end of the London Borough of Islington. It is dissected by a mainline railway, industrial areas and several major roads namely: Camden Road, Parkhurst Road and Caledonian Road. The housing is diverse with a high proportion of social housing, much of it in large blocks and of varying quality and often side by side with Victorian street housing. This geography presented distinct localities, also used by Sure Start Hillmarton in planning and developing services. After discussions with Sure Start Hillmarton it was agreed to approach this survey according to these local areas. These areas are shown on the map overleaf.

Table 1 below, shows the number of non-users we interviewed in each area. All the Sure Start Hillmarton areas were reflected proportionately in this survey. Roughly half of the registered non-users in each of these areas were interviewed.

Table 1: Numbers interviewed in each Sure Start Hillmarton area

| Area | Numbers interviewed | Percentage of total (<i>n</i> =73) |
|--|---------------------|-------------------------------------|
| Paradise | 21 | 29% |
| Market | 16 | 22% |
| Camden Road and North of Camden Rd | 16 | 22% |
| Hillmarton | 8 | 11% |
| North east end of Caledonian Road - north of the railway line - to Holloway Road | 6 | 8% |
| South west Caledonian Road – from Brewery Rd to southern SS Hillmarton boundary | 6 | 8% |

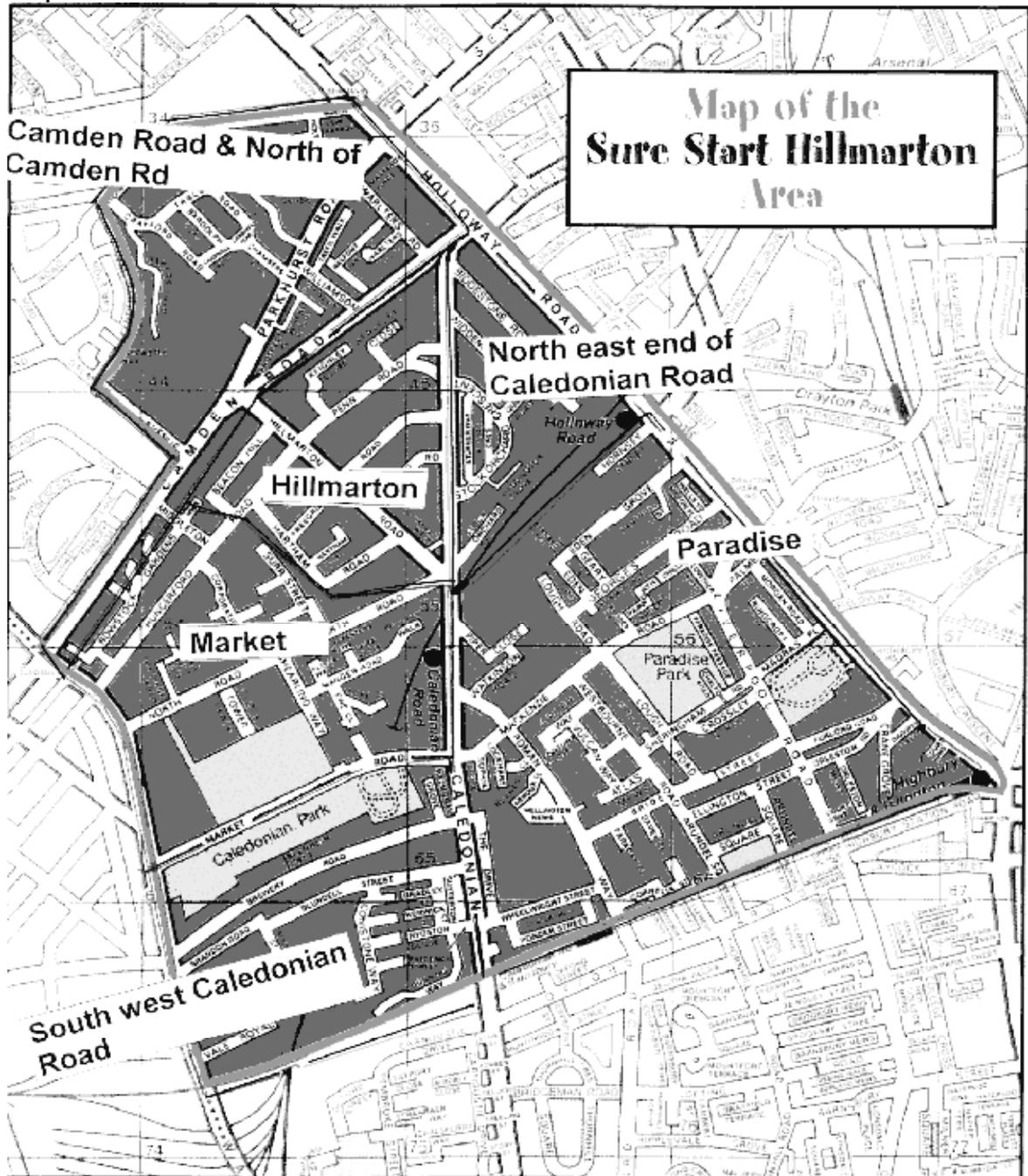
Length of time at same address

We asked how long interviewees had lived at their current address to assess how long they would have been exposed to Sure Start publicity. If they had moved within the previous two years we also enquired if their previous address had been within the Sure Start Hillmarton boundaries.

As shown in Table 2 below, most families (80%) had quite a stable accommodation history, having lived at the same address for two years or more. A sizeable minority, fifteen (20%), had moved within the previous two years. Almost all of these had not previously lived within the Sure Start

Hillmarton boundaries. Only 3% of the families had been living within the Hillmarton area for less than six months. This indicates that almost all of the non-users would have been exposed to Sure Start Hillmarton publicity materials posted to their address within the previous year.

Map of Sure Start Hillmarton Areas



This map is based on the Ordnance Survey mapping with the permission of the Controller of Her Majesty's Stationary Office. All Crown Copyright. Unauthorised reproduction infringes Crown copyright and may lead to prosecution or civil proceedings. London Borough of Islington, LA 066452 2002

Table 2: Length of time living at the same address

| Length of time living at same address | Number | Percentage (n=73) |
|---------------------------------------|--------|----------------------|
| Between four and ten years | 29 | 40% |
| Between two and four years | 16 | 22% |
| Eleven years or more | 13 | 18% |
| Between one and two years | 7 | 9% |
| Between seven and twelve months | 6 | 8% |
| Less than six months | 2 | 3% |

2.2 Family composition

While most of the families interviewed were headed by a couple (52, or 71%), over a quarter were headed by a lone parent (21 families, or 29%).

The vast majority (63 or 86%) of the interviewees were the mothers; seven (10%) were the fathers; and in the three other cases we interviewed the mother and father together (1), the grandfather (1) and a childcare worker (1).

2.3 Children

The 73 families interviewed had 160 children in total. The most common number of children per family was two (32 families, 44%). Nearly three quarters (71%) of the families had two children or more.

Table 3: Children

| Number of children | Number of families | Percentage of all families (n=73) |
|--------------------|--------------------|--------------------------------------|
| 1 child | 21 | 29% |
| 2 children | 32 | 44% |
| 3 children | 14 | 19% |
| 4 | 3 | 4% |
| 5 children | 2 | 3% |
| 11 children | 1 | 1% |

63 families had between them 74 children under the age of four, of which:

- 52 families (71%) had one child under the age of four; and
- Eleven families (15%) had two children under four.

In ten families (14%) the youngest children were aged four, but in two of these families the mothers were also pregnant. Although the other eight families' children were over the official age limit for receipt of Sure Start services, their views were considered important to gather nonetheless as their children had been under four and thus eligible within the previous year and lifetime of Sure Start Hillmarton.

Of the 74 children aged under four:

- Ten children were aged under twelve months;
- Thirteen were aged between twelve and 23 months (1 to 2 years);
- Twenty nine were between 24 and 35 months (2 to 3 years);
- Twenty two were aged between 36 and 48 months (3 to 4 years)

2.4 Ethnicity of children

We used the same ethnic group categories as used in the Islington Sure Start registration form. Over half of the children were from black and minority ethnic backgrounds: 94 (59%) of the children's ethnic backgrounds were given as Asian; or Black (which encompasses Black British, African and Caribbean); or mixed parentage or 'other'. These proportions are well above those for both Islington and England as found by the 2001 Census. Less than half, 66 (41%), of the children were described as white.

Table 4: Ethnicity of children

| Ethnicity categories | Number of children | % of children (n= 160) | % in total SSH registered list | % for LB Islington* | % for England* |
|---|--------------------|------------------------|--------------------------------|---------------------|----------------|
| White | 66 | 41% | 42% | 75.4% | 90.9% |
| Black – includes Black British, African and Caribbean | 43 | 27% | 25% | 11.9% | 2.1% |
| Asian | 26 | 16% | 6% | 5.4% | 4.6% |
| Mixed | 21 | 13% | Not available | 4.1% | 1.3% |
| Other - Chinese | 4 | 3% | 1% | 3.3% | .9% |

*Figures taken from 2001 census

When compared to the total list of families registered with Sure Start Hillmarton (n=392), the proportions of White and Black families not using services are strikingly similar to the rates of total registered families. The most striking differences are the substantially higher proportions of Asian and Chinese non-users interviewed in this survey. From a service-delivery point of view it may be worth noting that Turkish, Kurdish, Iraqi and Iranian families categorised themselves as Asian.

2.5 Languages

Languages spoken

A range of proficiency in speaking and reading English was reported and a large number of other languages were spoken.

Six families (8%) spoke no English at home. As shown in Table 5 below: English was reported as the first language by just over half the families (41, or 56%); and the other 32 families (44%) reported speaking twenty other first languages in total.

Table 5: First language spoken at home

| First language | Number (n= 73) |
|-----------------|-------------------|
| English | 41 |
| Turkish | 4 |
| French | 3 |
| Yoruba | 3 |
| Somali | 2 |
| Kurdish | 2 |
| Portuguese | 2 |
| Ibo | 2 |
| Arabic | 1 |
| Bengali | 1 |
| Greek | 1 |
| Twi | 1 |
| Kosovan | 1 |
| Chinese | 1 |
| Creole | 1 |
| Urdu | 1 |
| Lingala | 1 |
| Farsi - Persian | 1 |
| Russian | 1 |
| Polish | 1 |
| Albanian | 1 |
| Togalo | 1 |

Almost one third of families (31%) spoke English as a second language and eleven families spoke a range of other second additional languages as shown in Table 6 below.

Table 6: Second home language

| Second language spoken at home | Number (n=73) |
|--------------------------------|------------------|
| English | 23 |
| French | 2 |
| Lingala | 2 |
| Bengali | 1 |
| Swahili | 1 |
| Arabic | 1 |
| Spanish | 1 |
| Togalo | 1 |
| Creole | 1 |
| German | 1 |
| None | 39 |

English ranked as the third language for six families (9%).

However, in terms of accessing services it was important to explore people's ease in understanding and speaking English. While the majority, 57 families (78%), reported fluency in English, ten (14%) had some difficulty in communicating in English and six families (8%) could not use English at all. Moreover in a further five couples, who had reported speaking English as a second or third language, only one member could use English. Hence unless they attended all facilities as a couple, they could arguably be counted in with those who could not use English.

Reading English materials

Interviewees were also asked how easy or difficult it was for them to read written materials, to help gauge the accessibility of Sure Start written publicity, especially the regular postal material.

While the majority, 57 (78%), said they found reading materials in English 'very easy' or 'easy', eleven (15%) found it either 'difficult' or 'very difficult'. Five families (7%) described it as 'neither easy or difficult'.

Those reporting difficulty in reading English materials did not access formal translation. Some partially relied on their young children; one woman occasionally used a friend; another used a refugee centre to get major, or official looking letters translated – but not Sure Start materials.

2.6 Employment status

As can be seen from Table 7 below, in over half of the households, 43 (59%), one or both of the parents / carers were in paid employment. In the other 30 (41%) none of the adults were in work. Households headed by couples were more likely to be in employment: 77% of the 52 couples were in employment, compared to 15% of the single parents interviewed.

Table 7: Analysis of employment across families

| Family | Work pattern | | Number | Percentage (n=73) |
|-------------|-------------------------|-----------|--------|----------------------|
| Couples | One partner working | Full-time | 22 | 30% |
| | Both partners working | part-time | 18 | 25% |
| | Neither partner working | | 13 | 18% |
| Lone parent | Not working | | 17 | 23% |
| | Working | full-time | 3 | 4% |
| | Working | part-time | 0 | 0 |

Some relationship was found between language and employment status, in that those who did not speak English, or who spoke it as a second language, were less likely to be in paid employment.

2.7 Studying

Nine (12%) interviewees were studying a range of courses, four of these in addition to employment. These courses were being pursued in order to improve employability.

2.8 Main source of family income

The majority of families were either totally or partially reliant on social security benefits. Earnings were the main source of income for 30 families (41%). An equal number were totally reliant on social security benefits (27) or Asylum Support (3) as their only source of income. Over a quarter of those working (12), had their earnings topped up with social security benefits, namely Working Tax Credit.

Table 8: Main source of family income

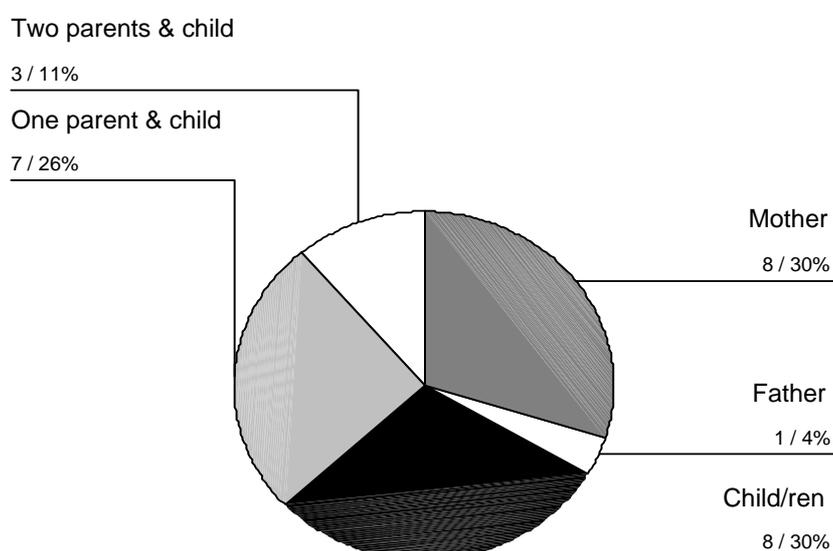
| Income source | Number of families | Percentage (n= 73) |
|--|--------------------|--------------------|
| Earnings | 30 | 41% |
| Earnings plus top-up from Social Security benefits – eg Working Tax Credit | 12 | 17% |
| Social security benefits alone | 27 | 37% |
| Asylum support – NASS | 3 | 4% |
| Other | 1 | 1% |

2.9 Health problems

Just over one third of interviewees, (28 or 38%), reported long-term health problems or disabilities in their immediate family. As shown in Figure 1 below these problems were spread across various members of the family.

In comparison the Sure Start Hillmarton database of registered families shows only one child and no adults as being disabled or having long-term health problems. This most likely indicates under recording at the time of families' initial registration, differences in how such a question is posed and the need to update the database as new information about families' circumstances is gathered over time.

Fig 1: Who has long-term health problems or disability in the family



The health problems reported were wide ranging and included: mental health problems; learning disabilities; communication disorders; digestive conditions; cancer; lung /breathing conditions; eczema; impaired mobility; constant pain; joint problems; heart conditions; stress and migraine. A few had serious medical conditions which required constant medical intervention and regular contact with health professionals. One parent also reported providing daily care for an older disabled relative.

Health or disability issues in the family were reported to impede getting out of the house generally with children as well as limiting families' ability to participate in Sure Start.

2.10 Families' access to local help in a crisis

To assess families' local connections and social support, interviewees were asked if they had anyone locally, such as friends, family or neighbours who they could turn to in an emergency. The examples used included needing emergency childcare in the event of an accident or sudden illness. The response was almost equally divided.

- 36 families (49%) said they had no family, friends or neighbours in the area to whom they could turn in a crisis.
- 35 (48%) said they had, out of which:
 - most, twenty one (29% of total) relied on family;
 - seven (10%) turned to neighbours;
 - six (8%) used their friends; and
 - one (1%) family used their place of worship.

No correlation was found between having help available locally and how long people had lived in the area. However, a relationship was indicated with language. Families whose first language was not English were less likely to have help available locally than those whose first language was English. Nearly three quarters (73%) of those who had some difficulty in speaking English had no-one available, in comparison to 45% of those who reported being fluent in English.

2.11 Previous use of Sure Start Hillmarton

Although this survey was expected to only interview non-users we found that over a third of families (28, or 38%) had previously used Sure Start Hillmarton, of which six were regular users. In addition three interviewees thought that some facilities they had used were possibly Sure Start but were not sure.

Of the 28 families reporting some previous use, this had mostly been quite limited:

- fourteen had only used facilities 'once or twice' to date;
- five had used Sure Start Hillmarton 'a bit in the past, but no longer'; and
- three had only started using recently.

But out of the six regular users:

- four families used Sure Start Hillmarton at least once per week;
- one family used it at least once per month; and
- one family used it most days;

In addition some reported using facilities in other Sure Start areas, or that their child's carer, such as a childminder or relative, had done so.

Satisfaction with Sure Start services used to date

Three-quarters of the 28 families who had already used Sure Start Hillmarton were happy with the services:

- twenty one (75%) reported being either 'satisfied' or 'very satisfied';
- six (21%) were neither satisfied nor dissatisfied; and
- one (4%) was very dissatisfied

Although these 28 families had previously used Sure Start to some extent it was nonetheless interesting to explore why they had not continued to do so, or had not done so earlier as the case may be. For these reasons they remained included in this survey of non-users.

3. Barriers to accessing Sure Start services

Interviewees were asked in an open question to explain in their own words why they had not used Sure Start Hillmarton, or used it more, to date. Diverse reasons were given and some people gave more than one. They have been grouped into the following themes, some of which clearly interrelate. These are discussed more fully below.

Table 9: Reported barriers to using Sure Start Hillmarton

| Barriers | Number* | Percentage* |
|------------------------------|---------|-------------|
| Timing | 54 | 74% |
| Awareness and understanding | 38 | 52% |
| Housing | 20 | 27% |
| Confidence | 20 | 27% |
| Caring for older children | 19 | 26% |
| Sure Start services | 17 | 23% |
| Language | 14 | 19% |
| Personal preference | 13 | 18% |
| Negative previous experience | 11 | 15% |
| Health and/or disability | 11 | 15% |
| Location | 6 | 8% |

* many people gave more than one reason, so the total exceeds 73 or 100%

3.1 Timing

Timing was the most frequently mentioned barrier. Almost three-quarters of interviewees (54) mentioned different aspects of the timing of activities over the week, or over the day, as an important, if not the main, barrier to using Sure Start services.

Roughly one third of interviewees said they could not use Sure Start because their working hours and Sure Start activities overlapped, even for those working part-time. Many of those we interviewed by phone worked very long hours. A few worked nights or started in the very early hours and so needed to sleep during the day.

Five parents who were studying found Sure Start difficult to fit into their hours of college or study, which in some cases was additional to employment.

Some parents said they had not been able to fit Sure Start timings in with the timing of their other caring responsibilities.

There was also a time overlap with the hours of daytime childcare for both working and non-working parents whose children attended nursery or other types of childcare.

In three families, where the fathers were the main carers and the mothers were at work, or studying, it was reported that the men were unlikely to take children to Sure Start facilities, because of their lack of confidence to do so.

Many families said that Sure Start activities clashed with young children's day-time sleep. Those with younger children felt they needed to be able to 'drop-in at any time' and that activities were available for too short a time span to allow for different children's sleep patterns. A few felt that the timing of drop-in and play facilities was too inflexible and that activities seemed over concentrated in the mornings.

Others with older children at school said they needed opening times which fitted in better with their morning and afternoon school runs.

3.2 Awareness and understanding

Over half of the interviewees (38) reported that they had not used services because they had not been fully aware of, or did not fully understand, Sure Start, despite almost all (98%) receiving regular mailings. On top of a very patchy understanding of Sure Start and its services, a wide range of misconceptions were found, mainly concerning eligibility for services and who Sure Start is for.

Nearly everyone (68) said they had previously heard of Sure Start Hillmarton, But four families said they had not. The most common ways people had first heard of Sure Start Hillmarton was via a Health Visitor, or a Sure Start Hillmarton postal invitation to register. These and other means are shown in order in Table 10 below.

Table 10: How families said they had first heard of Sure Start Hillmarton

| How people had heard | Number | Percentage (n=73) |
|---|--------|----------------------|
| Health visitor | 16 | 22% |
| Sure Start Hillmarton postal invitation | 15 | 21% |
| Word of mouth | 7 | 10% |
| Sure Start Hillmarton door to door canvassing | 7 | 10% |
| Sure Start Hillmarton publicity materials | 6 | 8% |
| GP or health clinic | 6 | 8% |
| A mixture of methods | 3 | 4% |
| Sure Start Hillmarton event | 2 | 3% |
| Other | 4 | 5% |
| Can't remember | 3 | 4% |
| Had not heard - | 4 | 5% |

In addition a few people had also learnt about Sure Start, from previous contact when living in, or from friends or family in, other Sure Start areas.

When people had heard*

- Almost two thirds of interviewees (43 or 63%) had heard of Sure Start Hillmarton at least a year prior to the survey;
- Fourteen (21%) had heard within the previous six months;
- Six (9%) had heard between six months and one year previously.

However few of these had had any other contact with Sure Start since their initial registration, apart from postal information.

*(*Four people said they had not heard and six people either could not remember or did not answer this question.)*

Information and publicity materials

Ten people made specific comments about not being able to understand the information received, despite fluency in English. Obviously, those who had difficulty in reading English were totally unable to access written materials.

Others were unsure about certain aspects, such as which activities children and adults could attend together, whether childcare was provided during adult classes and what costs were involved.

One man complained that all the images he had seen in the publicity to date were of women carers and that the language used emphasised 'mothers'. As a result he felt that Sure Start was mainly targeted at women and that he would feel less welcome, although he was the children's main carer.

Many people felt that they got insufficient publicity about events, or that information was patchy, or sometimes confusing. A few said that the publicity materials produced were '*too glossy and a waste of money*'. Many suggested that the information sent out should be simpler, contain more basic explanations and a more comprehensive listing of regular activities. Most felt a personal introduction was needed as well as literature.

Perceptions of Sure Start

Overall nearly everybody was very positive about Sure Start and felt it was a good thing, even if their knowledge was patchy. But many said that they did not know what Sure Start could do for them, nor how or when they should access it. There was a general lack of clarity about services. For instance some people did not know what to expect at drop-ins or playgroups. While this was worst for those who were new to the area or who did not speak English, it was not confined to them. Play facilities for children seemed to have registered most with people, but few were aware of other services such as family support, advocacy, or links with health services. On top of this general poor understanding, many held major misconceptions about Sure Start.

We asked interviewees to explain their understanding of Sure Start and who they thought it was for. While thirteen interviewees (18%) were judged to have

a reasonably accurate understanding of Sure Start, the majority either had no idea or had a variety of misconceptions:

- 32 (44%) had a broadly correct general impression, but with some significant misconceptions, most commonly concerning the eligibility ages for children;
- 21 people (28%) said they had no clear idea;
- Seven people (10%) had major misconceptions - including that it was only for parents who are out of work, or only for single mothers.

Where misconceptions or gaps in knowledge were found the interviewers provided basic information about Sure Start, for example on eligibility criteria, services available and contact details.

How interviewees described their understanding of Sure Start

Interviewees gave an array of descriptions when asked to say in their own words what they understood Sure Start to be.

- The most common understanding, mentioned by interviewees, was that it arranged activities for children (23).

In order, the other perceptions given of Sure Start were that it:

- organised social opportunities for adults and/ or children (14);
- provided information on other services in the area (11);
- gave support to families (8);
- was somewhere to take the children (7);
- ran courses (7);
- provided stress management facilities such as massage (6);
- was 'helpful' (5);
- provided childcare (4);
- helped with parenting (2); and
- assisted parents find employment (2).

Interestingly no one mentioned the potential of having easier access to health professionals via Sure Start and were unaware of this when probed. Only a few were aware of the Family Support Workers' role, or the facility to access advice and advocacy on practical matters such as health, housing or childcare. Few seemed to have perceived that Sure Start was intended to be responsive to local needs, or that they could initiate contact with Sure Start to raise their own issues.

Interviewees' understanding of who Sure Start is meant to be for

When asked in an open question who they thought Sure Start was targeted at, interviewees gave a diverse range of answers in terms of children, adults and families. In terms of which children interviewees believed were eligible:

- Less than one in five (13, or 18%) realised it was for children under four;
- Twenty (27%) thought there was no upper age limit for children;
- Thirteen people (18%) said it was for children under the age of four;

- Thirteen (18%) provided a wide range of age limits, which they believed applied. These included children under five; under seven, and under ten years old; and children aged two to five; three to six; and six months to four years.
- At the other end of the scale some thought they could not first take their child until s/he was over a certain age, variously given as eighteen months; and one; two; and three years old.

Those unaware of the four-year old cut off had believed that they would be able to start, and continue, taking their three and four year olds to Sure Start well into the future.

In terms of which adults were intended to access Sure Start:

- Seventeen interviewees used the term '*families*';
- Nine specifically mentioned it being for '*mothers*' – including three fathers, who were the main carers
- Two felt it was for single parents
- Only four people said both '*mothers and fathers*'
- Five thought it was for families who were not working and many of those who were working felt it was not targeted on them, regardless of their needs
- One said it was targeted on the '*disadvantaged*' – but did not think that it was in reality
- One said that it was '*for all families - not only for those on benefit*'
- Some others said it was for people '*on low incomes – social services type people*'; and '*for families who are struggling*'.

Other misconceptions included that there was a charge for all services and that you had to use all of the Sure Start facilities, or none at all.

3.3 Housing and poverty

Twenty people said that their housing was a factor in their non-use of Sure Start. Eight reported serious housing problems, mostly involving severe overcrowding or homelessness. For example, one family of two adults and two children were in a one bedroom flat and, although the mother was pregnant they were on the fourth floor with no lift. Another family of two adults and three children were also in a one bedroom flat. A family of one adult and two children in a one bedroom flat had waited for re-housing for over six years. We interviewed a few families in temporary homeless accommodation, mostly comprising one room, shared by adults and children.

The condition of some of the housing was very poor, most noticeably on the Market estate, which families reported was causing them great stress. Most of the young families we visited on this estate lived on the top floors. Everyone here was very dissatisfied with the condition of the environment around their flats, especially the extent of disrepair, broken glass, rubbish in the stairwells, lack of security and anti-social behaviour such as people urinating in the shared corridors and walkways. Although there are apparently plans to

demolish these blocks, tenants said that they had been informed that they would not be re-housed for six to ten years.

One family we visited had no furniture in the living room so we sat on plastic children's stools. The mother reported that her cooker was not working either.

3.4 Confidence

Twenty people said that they lacked the confidence to attend Sure Start facilities for the first time alone. Most did not know other people attending Sure Start and some were new to the area. A few had used Sure Start programmes elsewhere because they had friends in those areas. Six said they were afraid of going out alone in the area generally because of fears for their personal safety. Most of the men said they felt uncomfortable going to places, which seemed to them to be predominantly, if not totally, used by women.

3.5 Caring for older children

Nineteen interviewees said that it was too difficult to attend Sure Start because they had children aged four or older, whose needs they found difficult to simultaneously accommodate. Others said they were just too busy caring for the whole family to take time out for themselves or their youngest children. This may be a reflection of the high proportion of families (71%) where there were two or more children.

Many said they would need childcare, or some other facility for their older children to enable them to use Sure Start with their children under four. Equally most Sure Start facilities were timetabled during school hours. So this barrier may also relate in part to low understanding about services and partially to older children having additional needs. A few interviewees reported that their older children had health or substantial behavioural problems, which undermined their scope to concentrate activities and time on the younger ones.

3.6 Sure Start services

Seventeen interviewees said that various other aspects of Sure Start's services, besides timing and issues covered elsewhere, had been the reason for their non, or low, use.

Some said that there were no services appropriate to their needs and disagreed with the priorities selected by Sure Start Hillmarton. The most commonly stated need was childcare, for example to allow for work, study or shopping. Some had experienced great difficulty finding local childcare when they wanted to return to work or pursue studies to allow them to return to work in the future. A number of people were angry that Sure Start seemed to

prioritise expenditure on other services above helping people find childcare, or providing more childcare. Alternative medicine and expensive publicity materials were the two expenditures most frequently mentioned here.

Many people felt that more should be done to improve the general outdoor environment for children in the area and to help families with housing problems.

Some people said that there were not enough appropriate facilities for children of different ages under four and that there was an over- concentration on very young children.

A number of people said there was simply nothing available which appealed to, or suited their needs.

Some said they could not always plan far enough ahead or manage to book facilities in advance and would prefer to be able to turn up when they could.

Some had felt that Sure Start facilities would not be able to cope or assist with their particular needs. This arose mostly where children had health problems or/ and disabilities. Also parents and carers with more than one child under four felt they would need another adult to help them with their children at playgroups or drop-ins.

A few people did not meet, and disagreed with, the eligibility criteria for certain facilities, for example an exercise class which is restricted to those with children under two.

3.7 Negative previous experience

Although the majority of the 28 families who had already used Sure Start Hillmarton said they were satisfied, eleven people reported having a negative previous experience of using or trying to use services. Many of these were aggrieved with being unable to access childcare via Sure Start, which was the only service they had felt they needed in order to return to work or study. Two had tried to access classes but were refused for reasons they did not understand: one apparently because her child was not with her when she turned up for the class – as she had already arranged childcare.

Some people complained of favouritism and that drop-ins were '*hard to break into*' and that you needed '*personal effort to persevere*'. Four people felt that staff were not welcoming enough towards new people, and that cliques developed which made new people feel excluded. One woman said that she had not previously received the support she needed and that this had seemed to be because she was outside a particular clique. This was one of the main reasons why she had stopped using Sure Start for a long time, although she was now planning to try again.

3.8 Language

Fourteen interviewees reported that language was a major reason for them not accessing Sure Start. For those who did not speak or read English this meant that they had not been able to read any of the publicity materials sent and felt unable to use any service without an interpreter. In the couples where only one person spoke English, it was necessary for both to attend facilities together. This was reported as a problem in cases where the other person was working, or other time demands existed and was just not always possible.

Many of those interviewed who spoke English as an additional language had also found the publicity materials difficult to understand and were unfamiliar with many of the terms and services mentioned. For instance two people thought that 'drop-ins' were where you dropped your child off for childcare. Many felt they needed an initial personal explanation about Sure Start in their own language as well as interpreting to access a service..

3.9 Personal preference

Thirteen expressed other more personal reasons for their non-attendance. Eight had felt that their child had been too young to date to take to activities. Four said they had just not got around to it and one said she was 'always busy'.

3.10 Health problems and disabilities

Out of the 28 families reporting health problems or disabilities, eleven interviewees said that their own or their child's health problems or disability had limited their participation in Sure Start. Three women reported experiencing post-natal depression, which had resulted in them not going out. Another two parents said they were occasionally housebound due to other health conditions. Four said that their child's condition required intensive input from themselves and professionals, such as attending hospitals and clinics, which made fitting in other activities very difficult.

Two people felt that it would be too difficult to take their child to Sure Start facilities and that the staff and parents would probably not be able to deal with their child's disability and associated behaviour. Ultimately, they had decided that trying to access these facilities would only create additional stress for them rather than relieving it.

3.11 Location

Six people said that the location of Sure Start facilities were difficult for them to get to. A few did not know their locality and were generally unfamiliar with the names of streets and buildings where facilities and services were based.

As mentioned previously the Sure Start Hillmarton area has its own natural geographical divisions created mainly by roads and railway lines. Some interviewees said that they found it too far to travel to facilities at the other end of the Sure Start district. This mostly applied to unique facilities such as Islington Arts Factory and Freightliners Farm.

A common desire was to be able to use facilities in neighbouring Sure Start areas, especially in the Copenhagen and Holloway programmes. Many said this would combine easier with routes to school with their older children, or allow them to attend facilities with friends or family living in those areas.

4. Factors reported to enable greater use

Interviewees were asked to say in their own words what changes, if any, would encourage or make it easier for them to use Sure Start Hillmarton. Their suggestions were categorised and are shown in order of frequency in Table 11 below. Some people suggested more than one change. As can be seen in the table, timing, getting a personal introduction, information and childcare ranked as the top four factors mentioned.

Table 11: Changes suggested by interviewees to increase their use

| Suggested change | Numbers who said* |
|---|-------------------|
| Timing of facilities and activities | 28 |
| Personal introduction | 27 |
| Information | 19 |
| Childcare | 16 |
| Housing advice or advocacy | 13 |
| Facilities / services for whole family & older children | 9 |
| More for working parents | 6 |
| Improved quality of existing services | 5 |
| Location | 4 |
| More involvement of fathers | 4 |
| More for disabled children | 3 |
| 'Other' | 14 |
| 'Don't know', or no suggestions for change, or felt it was up to themselves | 13 |

* Many people made more than one suggestions, do total exceeds 73

These suggestions have been categorised in the following three groups:

- Adaptations to existing service delivery
- Additional services
- Other enablers

4.1 Adaptations to existing service delivery

Timing of facilities and activities

Many interviewees desired timings which would fit in more easily with their work and/or their childcare patterns. While those at work did not expect any major changes to suit them, they nonetheless wanted to access Sure Start to some extent. Many, especially those working, suggested weekend activities plus activities during school and nursery holidays. Only a few desired activities in the evenings.

A number of people desired a greater choice of times over the day, or over the week, to help avoid clashes with children's day-time sleep. Some suggested having more extended or flexible opening times for drop-ins such as those used by 'one o' clock' clubs. Some also desired the scope to be able to use more facilities without advance booking.

Personal introduction

Over a third of interviewees (27) said that although they had been registered with Sure Start, most commonly by a health visitor, they felt they needed a personal explanation or introduction to the service. They reported that this would help them feel more individually welcome, help them understand what Sure Start was about and how they could use it. Ten interviewees said they would like someone to go with, at least for the first time. Some felt this would address their difficulties in getting out of the house or attending new places alone. Three men said they would like specific encouragement as men to attend.

Information and language

Six people said they needed interpreting to attend certain services, as well as translation of general information. Eleven said that the information needed to be clearer in general and two said that it needed to be sent out earlier. Many wanted to be able to talk to someone individually about Sure Start to ask questions, express their doubts and check their understanding. Those for whom English was an additional language or who did not speak English also expressed this desire.

Over the course of these interviews many people said they had some of their queries and misconceptions about Sure Start addressed and that they felt more confident about trying some services. This echoes the points expressed for a personal explanation.

More for working parents

Those in work commonly felt that Sure Start was not meant for them. Six interviewees said they would like to see some facilities or activities which working parents could pursue with their children. For example activities at weekends and during the school holidays to fit in with their working patterns. Only a few suggested activities in the evenings.

Improvements to the quality of existing services

Some people said that the physical condition and maintenance of certain buildings and premises, where services were provided, needed improving.

A few felt that staff, especially those who were not Sure Start employees, needed more training in making people feel welcome generally and in dealing with children's health conditions and disabilities.

Parents with more than one child under four said they needed assistance at children's facilities, to help them give each of their children equal attention and help each child to play and enjoy the facilities to the full.

More involvement of fathers and male carers

Suggestions were made for more specific targeting of publicity and information towards men and to have more facilities predominantly or only for male carers. Suggestions included a workshop or discussion session where men could make proposals about suitable services for them and classes on parenting and children's nutrition.

One mother said she would like to see more male workers at facilities and events, so that her son could have access to a male carer in that way.

4.2 Additional Sure Start facilities

Childcare

Sixteen people specifically suggested that Sure Start should help families access childcare or provide more childcare itself. In terms of provision some said they needed childcare to allow them to return to work, or to study, which would in turn enable them to return to work. Others wanted more ad-hoc, smaller amounts of childcare to allow them to do certain things such as shopping or attending courses. A few said they needed more help in accessing information about local childcare facilities. To what degree families expected Sure Start to subsidise the cost of childcare was not explored further.

Many desired childcare, or suitable activities, for their older children to enable them to attend Sure Start with their younger ones. One parent suggested that Sure Start could help families establish a mutual childcare support system to enable families to exchange childcare and share information about local childcare facilities.

Housing advice or advocacy

Many people desired advice or/ and advocacy to help them understand and establish their housing rights. None felt they could afford a solicitor and only a few had heard of free advice services such as law centres or Citizens Advice Bureaux.

Facilities / services for the whole family and / or older children

As mentioned earlier many families found it very difficult to attend separate activities with their youngest children and did not have access to childcare for the older ones. Many also mentioned a distinct desire to do things as a whole family, especially at weekends and during school holidays, more so if they spent the greater part of the week apart due to work, childcare and school.

Location

The most common desire here was to be allowed to attend other Sure Start programmes, especially in neighbouring areas, to fit in with school runs or

because families already knew other users. One person suggested that some of the more specialist Sure Start Hillmarton facilities, such as music and arts, should also be held at different venues around the Hillmarton area to allow greater access.

More for disabled children

Parents with disabled children said they would use Sure Start if it was more inclusive. To them the greatest changes needed were improved awareness among both staff and other parents, more support and more active integration. Families said they did not want to feel stigmatised if they attended activities, or feel that it was solely up to them to deal with and explain their child's needs or behaviour to everyone.

4.3 'Other' enablers

A range of other suggestions were made including day trips, targeting of young parents, some facilities just for women, holiday play-schemes, more 'open days', more facilities which did not need advance booking and specific help with post natal depression.

5. Sure Start Hillmarton facilities that families wanted to use

Interviewees were asked which, if any, current Sure Start Hillmarton services or activities they would like to use if any. As shown in Table 12 below a range of desires were expressed. In order, the most frequently mentioned were children's drops-ins and other play activities, training courses and classes, adult stress management, art and music sessions for children, Family Support and childcare.

Table 12: Current services interviewees said they would like to use

| Sure Start Hillmarton Services | | Number (n=66) |
|---|----|------------------|
| Drop-ins and other play activities with children | | 47 |
| Training course or classes* | | 32 |
| Stress management courses and / or treatments for adults | | 26 |
| Art and music sessions for children | | 18 |
| Family Support for advice, support, information, advocacy | | 16 |
| Childcare or/ and advice on childcare | | 14 |
| ▪ Exercise | 12 | |
| ▪ First Aid training | 6 | |
| ▪ Homeopathy | 3 | |
| ▪ Antenatal | 3 | |
| ▪ Parenting skills | 2 | |
| ▪ Men only | 2 | |
| ▪ General (no class specified) | 2 | |
| ▪ English | 2 | |
| Special events, trips, parties | | 10 |
| Access to health professionals | | 6 |
| Social events | | 3 |
| Accident Prevention Loan Scheme | | 2 |

*Training courses and classes desired were in order exercise (12), first Aid (6), homeopathy (3), antenatal (3), parenting skills (2), English (2), men only classes (2) and unspecified (2)

Five interviewees said there was nothing they wanted to use, one person said they did not know at present and one said she would like to use everything.

It is likely that views about what interviewees wanted to use in the future were largely influenced by what they were already aware of. Besides the information provided at these interviews many were unaware of the full extent and nature of Sure Start services.

Also the fact that interviewees said that they would like to attend certain activities is no guarantee that they would do so. Many of the constraints, which families had said had hitherto hindered their participation, may persist.

6. Use of, and satisfaction with, other local services apart from Sure Start

Interviewees were asked which local health, childcare and other services, besides those provided by Sure Start, they currently used for their children under four. In addition they were asked how much they used these and how satisfied they were with what they used. These questions aimed to help gauge the extent to which families were connected to other local services and also identify relevant service needs which fell within Sure Start Hillmarton's remit.

6.1 Health services

Most of the families interviewed were registered with primary health care providers. As Table 13 below shows, all but one family were registered with a GP and all but six reported having a health visitor. Almost one third of families saw another health professional in connection with their children's health, most commonly speech and language therapists.

Table 13: Use of local health services by families for children under four

| Local service or facility | Families using (n=73) | | Not used |
|------------------------------|-----------------------|-----|----------|
| | No. | % | |
| GP | 72 | 97% | 1 |
| Health Visitor | 66 | 92% | 6 |
| Other health professional(s) | 22 | 30% | 51 |

Families were asked how often they used health visitors and 'other' health professionals. Most (70%) reported seeing a health visitor less than once per month. Twelve saw Health Visitors at least monthly.

Most (80%) of those who attended other health professionals also saw these less than once a month. But two families saw them at least monthly and two daily.

Families' satisfaction with local health related services were also investigated and as can be seen in Table 14 below, the vast majority of people (74%) were satisfied with GP and health visitor services.

Most of the dissatisfaction about GP services concerned delays in getting appointments for children, especially in an emergency, and the lack of suitable interpreting facilities. One local practice was reported to have a male Turkish interpreter, one day per week. But two Turkish women said they needed both greater flexibility in the availability of interpreting and needed female interpreters, as they could not disclose or discuss certain issues through a man. Some of the GP practices were also criticised for not being child-friendly.

For example parents complained that some waiting rooms were not child friendly or that they had nothing to help occupy children while waiting.

While most were 'satisfied' (23) or 'very satisfied' (26) with the health visiting service, some were unhappy at not seeing a health visitor more often. Many were unclear about the right to contact the Health Visiting service directly themselves if they had a concern about their child's health or development.

Table 14: Satisfaction with local health services for under fours

| Service | No.s Using (n=73) | Satisfied or very satisfied | Neither satisfied nor dissatisfied | Dissatisfied or very dissatisfied |
|---------------------------|-------------------|-----------------------------|------------------------------------|-----------------------------------|
| GP | 72 | 52 (74%) | 11 (16%) | 7 (10%)* |
| Health Visitor | 66 | 49 (74%) | 12(19%) | 5 (7%) |
| Other health Professional | 22 | 9 (41%) | 7 (32%) | 4 (18%)* |

* In some cases satisfaction levels were not given

6.2 Local play and leisure facilities

Families were asked if they used other local play and leisure facilities with their younger children, which were not part of Sure Start. Categories given were outdoor facilities such as parks, playgrounds and farms, indoor play places, sports facilities and libraries. Most interviewees reported using some or all of these to various extents. But four families had used none.

As can be seen from Table 15 below: most families said they used outdoor facilities; over a half used indoor facilities; roughly a half used libraries and almost a fifth used 'other' facilities.

However, significant proportions were not using local facilities:

- Four (5%) families used none;
- Twelve families (16%) used no outdoor facilities;
- Almost half the families (49%) did not use a library; and
- Almost half (47%) did not use any indoor play facilities.

Table 15: Use of play and leisure facilities for under fours

| Facility | Number Using | Percentage using (n=73) | Number not using (n=73) | % not using |
|---------------------|--------------|-------------------------|-------------------------|-------------|
| Outdoor facilities* | 61 | 84% | 12 | 16% |
| Indoor play | 39 | 53% | 34 | 47% |
| Library | 37 | 51% | 36 | 49% |
| Other Facilities ** | 14 | 19% | 59 | 81% |

* 'Outdoor' facilities mean parks, playgrounds, open spaces and city farms

** 'Other facilities' included outdoor sports facilities, cinema and theatre.

Outdoor facilities

Most (61, or 84%) of the families reported using outdoor spaces and for eighteen families (25%) this was the only facility they used. 'Outdoor' facilities included local parks, open spaces, playgrounds and city farms. Many people used the parks and playgrounds most local to their house, often the outdoor space or playground, if any, on their estate. But some travelled outside of the Sure Start Hillmarton area - typically to Whittington Park, Regents Park, Primrose Hill, Hampstead Heath and Thornhill Park.

Indoor play

Over half (39 or 53%) used indoor play facilities. In order of popularity the most common facilities used were: indoor softplay (21); swimming (19); drop-ins (10); indoor sport facilities (5); and One o'clock clubs (4). The main softplay venue mentioned was the Sobell Centre, but others included Clowntown, the Roundhouse and Zoomaround. Some families used more than one of these. For swimming, families went variously to the Caledonian ('Cally') Road, Archway and Highbury Corner pools.

Libraries

Roughly equal numbers were either using (37) or not using (36) local libraries with their children under four. This was often for story telling and other activities as well as to borrow books. Over a quarter attended less than monthly which for some meant a few times a year. Many felt that their children were too young to take to libraries and other non-users often said they had enough books at home.

Other

Other activities reported included other sports venues not included above; cinema; and the theatre.

Extent of use

A strong correlation was also found between families' frequency of use and the number of combined types of facilities used. Those who used a combination of either two or three types of facility were almost twice as likely to be more frequent service users, than those who only used one service.

The findings indicate that although sizeable proportions accessed local play and leisure facilities with their young children, significant numbers did so only to a very limited extent and some not at all. Furthermore, those who used the most facilities also used these most heavily; and conversely those who used the least facilities also used these facilities least often.

Satisfaction and dissatisfaction with local facilities

As can be seen in Table 16 below, the local outdoor spaces and playgrounds attracted the greatest amount of negative comments, to the extent that many said that this had limited their use.

Interviewees said that there were not enough open spaces for children in any of the Sure Start Hillmarton localities and that those that did exist were in very poor condition. Interviewees complained about the lack of suitable areas for small children, which were free from dogs and separate from spaces used by older children. Many said they were too scared to use local parks or playgrounds with their children because of fears for their own and their children's personal safety. There were many reports of the local playgrounds being in poor repair; or being littered with hypodermic needles, glass and dog mess; of teenagers riding motor-bikes in children's areas; and of prostitutes working around the parks.

Table 16: Satisfaction with local play and leisure facilities*

| Facility | Number Using (n=73) | Satisfied or very satisfied | Neither satisfied nor dissatisfied | Dissatisfied or very dissatisfied |
|------------------------|---------------------|-----------------------------|------------------------------------|-----------------------------------|
| Outdoor *** facilities | 61 | 39 (62%) | 7 (11%) | 17(27%)** |
| Library | 37 | 29 (81%) | 2 (5%) | 5 (14%)* |
| Indoor play | 39 | 31 (80%) | 7 (17%) | 3 (3%)** |
| Other Facilities **** | 14 | 12 (86%) | 1 (7%) | 1 (7%) |

* In some cases satisfaction levels were not given

** Some expressed dissatisfaction with facilities to the extent that they did /could not use them.

*** 'Outdoor' facilities mean parks, playgrounds, open spaces, farms

**** 'Other facilities' included other sports facilities, cinema and theatre.

Percentages given here are out of the numbers using that facility

A number of interviewees also said they were afraid to go out much generally, or go out alone, because of their previous experience of racist abuse locally, including on their estates.

One family had tried to use local indoor and outdoor facilities, but found that none of them were suitable for their child's disability. Both local playgrounds and indoor play facilities were not safe enough and indoor facilities also lacked suitably trained or experienced staff.

Most were happy with the indoor facilities they used, but some found them both too expensive and too far away to use regularly.

In terms of libraries many enjoyed story-telling and similar extra activities when available. Many were happy because the whole family could use them together. But some interviewees said they found libraries difficult to access, due to the clash of their opening times with other commitments.

6.3 Use of, and satisfaction with, childcare

Slightly over half the families (38, or 52%) used **formal childcare**, involving 45 children (61%). Here 'formal childcare' refers to childcare provided by nurseries, childminders, early years centres and in other settings subject to official inspection by Ofsted. These figures include those getting some subsidised provision for three year olds and also nine of the eighteen four year olds, who had not yet started school.

Most of these families (24) were working. Three were working lone parents and the other 21 were couples where either one (9) or both (12) worked. The majority of families (28, or 74%) used formal childcare for three to five days per week and the other ten families used up to two days childcare per week. Within this the hours of childcare varied considerably from two hours to seven hours childcare per day.

Table 17 below provides a breakdown of the ages of children in formal childcare.

Table 17: Analysis of children in formal childcare by age

| Age of child | Number in formal childcare (n=74) | Number not in formal childcare |
|-----------------|-----------------------------------|--------------------------------|
| Under 1 | 6 | 4 |
| Between 1 and 2 | 4 | 9 |
| Between 2 and 3 | 17 | 12 |
| Between 3 and 4 | 18 | 4 |
| Total under 4 | 45 | 29 |

Of the 38 families using formal childcare, the majority (31, or 82%) were either satisfied or very satisfied. Many interviewees reported delays and difficulties in finding childcare places and having quite complicated childcare arrangements. The main sources of dissatisfaction concerned difficulties in finding places; inadequate places locally; long waiting times for places to be offered; inadequate childcare hours and high costs.

We also asked families if they used '**informal childcare**', meaning care they did not have to pay for and typically provided by family or friends. Nearly half the families (34, or 47%) did to varying degrees. Where childcare was provided by relatives, cost was a key factor as well as trust, flexibility and convenience. All said that such informal childcare was indispensable. Many working parents, especially those working early mornings, or evenings, or shifts totally relied on it, often as a supplement to their formal childcare. For instance two out of the three working single parents depended on very complex childcare arrangements, involving both formal and informal childcare. One started work at 4am and the other worked nights.

6.4 Services and facilities reported to be needed locally

Interviewees were asked to say in their own words what other services or facilities they felt were most needed by families with young children in their area, regardless of whether these fell within Sure Start's remit. However some of these echo previous needs expressed regarding Sure Start provision and most broadly match issues in Sure Start Hillmarton's Delivery Plan of October/November 2003.

The most frequently mentioned needs were for more or better outdoor facilities (48); childcare (34); and indoor play facilities (29). These and other needs are shown in order in Table 18 below.

Table 18: Services and facilities which families wanted to see locally

| Service/ facility | Number* |
|--|---------|
| Outdoor parks, playgrounds and play areas | 48 |
| Childcare | 34 |
| Indoor play facilities | 29 |
| Courses and classes | 9 |
| Information about local services and facilities | 8 |
| More facilities for children over four and teenagers | 8 |
| Facilities and services for the whole family | 8 |
| Social opportunities for parents/ carers | 8 |
| Interpretation and translation services | 7 |
| Sports facilities for children | 4 |
| Housing and accommodation assistance | 4 |
| Other | 5 |

* Many interviewees expressed more than one desire

In terms of **outdoor spaces** people said that there needed to be more parks and playgrounds nearby and that these needed to be clean, safe for young children, in good condition and well maintained. Some people also wanted to be able to use paddling pools over the summer, but there are none in the area.

In relation to **childcare** families felt that more places should be available, that it must be local and either cheap or affordable. Also people desired different amounts and periods of childcare: some people just wanted a crèche for short periods; others wanted full-time childcare to allow them to study or work and a few said they would like to be able to access childcare in an emergency.

Many expressed a need for more **indoor play** places including playgroups and soft-play facilities. They felt the latter needed to be similar in style to those in the Sobell Centre or Muswell Hill but more local and also cheaper or free. A further six interviewees said they would like to access swimming lessons locally. A few people mentioned music and art sessions.

Other less frequently mentioned needs for local facilities and services were:

- Nine interviewees desired **courses or classes**, on parenting (4); English in general (3); English literacy (1) and finding work (1).
- Eight said they would like to be able to access more **information** about local services.
- Eight interviewees felt there needed to be more facilities locally for **older children**. They felt that older children and young people needed areas specifically designed for their use and that this in turn might reduce their use of playgrounds and spaces designated for very young children.
- Eight suggested that there needed to be more activities or events suitable for the **whole family**.
- Eight interviewees said they would like to see more **social opportunities** for adults to meet and get to know other families in the area. Some said that they would feel safer going out in the area, or trying out services for the first time, if they had company or knew other parents attending.
- Seven said they would like to have access to **interpreters and translation**, for example to use doctors and other local services.
- Four wanted to see more **sports facilities** for children.
- Four felt more help with finding suitable **accommodation** was needed.
- Other one-off suggestions were made for:
 - advice or support on breast feeding;
 - a clothing exchange;
 - a toy exchange;
 - benefit advice;
 - more male workers at general play facilities in the Borough, to allow children opportunities to play with men, especially those with little contact with their fathers.

7. Conclusion

In commissioning this evaluation Sure Start Hillmarton was keen to discover who their non-users were, why they had not accessed services to date and what facilities they felt were needed locally.

The most striking finding about non-users is their diversity; they formed not one or even a few discrete groups. Instead, a range of characteristics was variously shared across the non-users interviewed. Many of these characteristics in themselves indicate service related needs. Previous chapters have presented these, and other findings, in considerable detail. This section seeks to briefly highlight the key findings in order to inform Sure Start Hillmarton's future plans for addressing the needs of their non-users.

Perhaps the most concerning finding emerging from this evaluation is the lack of effectiveness, for non-users, of existing Sure Start promotional methods and materials. Almost all the non-users had heard of Sure Start Hillmarton and almost all received regular mailings. However, less than one in five had a reasonably accurate perception of Sure Start Hillmarton.

The majority of non-users were unaware of the full range of services available to them and held various misconceptions about Sure Start, most commonly regarding the nature of services and eligibility criteria. Poor awareness and understanding was compounded for around a fifth of non-users who reported difficulties in speaking or reading English.

Sizable proportions of non-users were dealing with multiple life stresses. For example, more than a quarter of families interviewed were dealing with critical housing problems, most typically homelessness, over-crowding and serious disrepair. Over one third of families had a health problem or disability affecting either the adults or the children, or both. Over a half were totally or partially reliant on social security benefits or Asylum Support for their income. Moreover half the non-users reported having no local social support available to turn to in a crisis, even though almost 80% had lived in the area for over two years.

Despite the high degrees of stress and need found, few non-users viewed Sure Start as a source of information and support in dealing with these or understood that it was within Sure Start's remit to be responsive to local families' needs. For example few had realised that they could access information or advocacy regarding their housing, health or other issues via Sure Start.

These findings clearly indicate that the clarity and accessibility of written promotional materials need to be improved. In addition potential users wanted an initial personal explanation of the full range of services available and a personal introduction to specific services. Non-users indicated that they would find such introductions both informative and encouraging. Personal

introductions may particularly enhance the participation of more than a quarter of non-users who said they lacked the self-confidence to visit a Sure Start service alone and for the first time.

The timings of existing Sure Start activities and fitting Sure Start in with other family responsibilities was the most common reason given for non-use. This is not surprising given that more than half the non-users were in paid employment and nearly two thirds of the children were in formal childcare. Indeed, many working parents felt that Sure Start was not intended for them. However, timings were also inconvenient for parents who were not working due to many other daily routines such as children's daytime sleep patterns, appointments and various family caring responsibilities.

Many non-users suggested that having more choices available in daily and weekly timings, weekend activities and minimising the need to book activities would enable their participation. While there are obvious limitations to the extent that Sure Start can respond fully to this issue of choice, there may be some aspects of timing and booking conditions that can be amended to accommodate the different circumstances and needs of non-users.

The local environment and children's play facilities was a common cause for concern among non-users. Although more than half the families reported using local play and leisure facilities with their young children, for many this was only to a very limited extent. Non-users heavily criticised the local area for having inadequate playgrounds and outdoor facilities and that those which existed were in poor condition, unclean and unsafe.

Overall, these findings provide some clear pointers for Sure Start Hillmarton in terms of future areas for action such as:

- improving the accessibility of promotional materials to reach all eligible families,
- ensuring new families are personally introduced to the full range of services through their initial contact with Sure Start Hillmarton staff and developing and consolidating the family support work,
- increasing the accessibility of drop-ins and play activities through more flexible opening times,
- investing in the development of outdoor and indoor play facilities, and
- ensuring a flexible approach to service development and delivery to reflect the diversity of families in the area.

Appendix

Questionnaire for SS Hillmarton Survey Spring 2004

(Note: size and spacing have been reduced for publication)

For interviewer:

- Show ID

"I am from the National Children's Bureau (NCB) and we are carrying out a survey to find out your views about services for families with young children in this area.

We want to find out what services you feel are needed in this area and your ideas about Sure Start. All the information we collect will be put together in a report for Sure Start Hillmarton to help improve the services they offer"

- I don't work for Sure Start
- What you say is confidential & anonymous: your name is not recorded
- There are no right or wrong answers
- You do not have to answer any questions you do not want to,
- and you can stop the interview at any time
- It should take 20 – 30 minutes: – is that ok?
- Are you happy with that?
- Are you happy to go ahead?

About you

1. How many children do you have? _____

What age(s) are they? __, __, __, __, __, __,

(if youngest aged 4 - 5 continue as could have used SS over past yr)

2. Are you the child's / children's

Mother? (circle one)

Father?

Other relationship? specify: _____

3. What are the main languages you speak at home?

First:

Second:

Third:

4. How do you find reading information, leaflets, letters, etc which are written in English? (read out options)

[] Very easy

[] Easy

[] Not easy but not difficult

[] Difficult

[] Very difficult

Probe type or extent of difficulty in using English if an issue

Description of difficulty if any

*Current use of **local** services*

5. Which local services, if any, do you use for your children under 4?

| | Tick if used | How frequently 1. Most days 2. @ least 1 pw 3. @ least 1 pm 4. Less often | Satisfaction 1. V. Satisfied 2. Satisfied 3. Neither sat nor dissatisfied 4. Dissatisfied 5. V. Dissatisfied | * Specify + any comments or details - say if SS (→Q10) |
|---|---------------------|--|--|---|
| GP /local doctor | | | | |
| Health visitor | | | | |
| Other health professional (eg SLT, *specify | | | | |
| Formal or paid child care* (Eg nursery or nursery school, childminder- specify) | | | | |
| Informal childcare, | | | | |
| Outdoor children's play facilities (what/ where?)* | | | | |
| Library* | SS? | Non SS | | |
| Indoor play facilities* | SS? | Non SS | | |
| Other* | SS? | Non SS | | |
| None | | | | |

6. What other services or facilities do you feel you need most in this area (as a family with young children)?

7. Do you have anyone locally who helps you eg in a crisis, or with childcare?

yes /no

→ If **yes** who

(eg family, neighbour, friend, community group, place of worship...?)

Awareness of Sure Start

8. Had you heard of Sure Start Hillmarton (ie before this survey, our letter, my phone call)?

yes /no

→ if **yes** how (1st heard/ main method)?

and

→ when did you first hear

and

→ do you get regular mailings from Sure Start Hillmarton? yes/ no

9. **What do you think Sure Start is?**
(probes: what is your understanding of SS to date, what does it do,...)

→ **who do you think Sure Start is for?**

[At end of Q Info by interviewer: "SS is a national programme to help and support families with children under 4. The services provided by SS Hillmarton include drop-ins & playgroups (where parents/carers go with children); classes for parents/ carers; socialising for children & adults; individual support for families, advice on certain issues; one-off events; easier access to health professionals.... Some of these are directly provided by SS, others provide extra facilities at existing venues – eg Freightliners Farm. Hand out info]

Reasons for not using to date

10. **Have you used Sure Start services/ facilities?** *yes / no/ not sure*
(Show *list* to check; recap on any SS services mentioned earlier)

If 'yes' how frequently overall?

– most days; @ least 1 pw, @ least 1pm; less often, once or twice to date)

and

→ **if used SS: overall how would you rate what you have used so far?**

- V Satisfactory
- Satisfactory
- Neither satisfactory nor unsatisfactory
- Unsatisfactory
- Very unsatisfactory

11. **Is there any particular reason why you haven't used Sure Start Hillmarton, or used it more (as appropriate)?** (*Own words*)

Prompt if necessary: general; Refer to any points made earlier – can you tell me more about...: any other reasons....?

- Any different reasons for different services?

- Access; culture; confidence; illness, caring responsibilities; appropriateness of services; standards; feeling welcome;....

12. **Would any changes encourage you, or make it easier for you, to use Sure Start services/ facilities?**

13. **Are there any particular/ other SS services/ facilities you would like to use?**
(Show *list* again)

yes / no / don't know

If yes specify

Interviewer: "I just need to ask a few simple details about you, so that we know a bit more about families who may use Sure Start in the future"

14. **Do you live**

- Alone (except for your children)?
- Or with a partner?
- Or with other adults?

15. Do you, or your partner (if any), or your child(ren) have any health problem(s) or disability?

yes/ no

→ If **yes** who?

- Mother
- Father
- Child/ ren
- Other.....

→ **Name or very brief description** of condition (optional)

16. How would you describe your child's/ children's ethnic background?

| <u>White</u> | <u>Mixed parentage</u> | <u>Black/British</u> | <u>Asian</u> | <u>Other</u> |
|--------------|------------------------|----------------------|--------------|--------------|
| British | White/Black Caribbean | Caribbean | Indian | Chinese |
| Irish | White/Black African | African | Pakistani | Other |
| Other | White/Asian | Other | Bangladeshi | |
| | Other | | Other | |

Specify 'other'

17. Are you working? yes - f/t or p/t / no

(If appropriate) **is your partner working?** yes - f/t or p/t / no

Is your main source of income

- Wages/ earnings; or
- Social security benefits? (eg income support, job seekers allowance, incapacity benefit); or
- A mix of wages and other benefits - ie working tax credit
- NASS? (asylum support); or
- Other (specify if possible)

18. How long have you lived at this address?

< 6 months; 7 < 12 mths; 1 < 2 years; 2 < 4 years
 4 < 11 yrs; 11 yrs or longer; all my life

→ **if under 2 yrs were you previously at another address within SS Hillmarton area?** (use map)

yes/ no

19. Is there anything else you would like to say about these issues

St / area x interviewer _____

At end interviewer:

- Check over questionnaire - have all questions been answered.
- Is interviewee content with the interview?
- Remind again re confidentiality etc and that this will be put together with other responses into a report to help Sure Start
- Provide leaflet re survey and contact details if any
- Contact SS Hillmarton office for information about SS – 020 7609 9295,
- SS Hillmarton leaflet / handout as an example of what is available.
- Voucher (of choice) + signature for it

Thank again for being so helpful and bye

Current Sure Start services and activities

| | |
|--|--|
| Drop-ins & play sessions & Groups | Toddling Fun -@ Gooding community hall, North Rd |
| | St George's on Tuesdays |
| | 'TOPS' @ St George's |
| | McMorran House (Parkhurst Rd) drop in – |
| | McMorran House Drop-in for fathers and male carers |
| | Fun Things, @ Arundel Playhut, Arundel Sq |
| | Paradise Under 5s (@ Paradise Pk) |
| Freightliners Farm drop in | |
| Ante-natal classes & Mother & baby group- Hungerford SS Centre (side of Hungerford School - North Rd) | |
| Art & /or music sessions at Islington Arts Factory – Parkhurst Rd | |
| Respite childcare for sole carers | |
| Adult stress management | - Course on stress management |
| | - Yoga |
| | - Massage (Reflexology/ shiatsu/ other) |
| Homeopathy training course | |
| Homeopathy sessions / treatments | |
| Keep in Shape exercise class | |
| Parenting Course | |
| Speech and Language Therapist (via Sure Start) | |
| First aid training | |
| Accident Prevention Loan of equipment Scheme | |
| Individual support – Family support workers | |
| Plus other services, facilities and occasional events | |