

**FAMILIES MATTER: SUPPORTING FAMILIES IN NORTHERN IRELAND**

**Response by NSPCC Northern Ireland to the DHSSPS consultation**

**March 2007**

## **INTRODUCTION**

1. The NSPCC is grateful for the opportunity of responding to the *Family Matters: Supporting Families in Northern Ireland*. We see the development of the Strategy and the associated funding as an important investment in and preventative services for children and their families.
2. The NSPCC has a significant interest in family support development in Northern Ireland and it plays an important role in prevention of child abuse. Aside of the range of services the Society provides across Northern Ireland, we have a number of family support teams based in Belfast, Ballymena and Foyle that specialise in providing a range of supports for families with particular needs. In compiling this response we have ascertained the views of our practioners who work in this area. In the main our services are directed at families and children in need who would usually fall into Hardiker levels 3 and 4 although there is a lot of overlap with elements of this strategy and early prevention.
3. We have commented, as appropriate, under each set of consultation questions with more general comments at the end.

## **CONSULTATION QUESTIONS**

### **Q1 Do you agree that the aims of the strategy are the right aims?**

4. The aim of the strategy seems admirable although it may be helpful to be explicit that it is primarily aimed at both universal services that will assist all parents as well as targeted help to a number of constituencies. We also suggest that the aim includes the word 'safeguard' and should include reference to the empowerment of children and families thorough active parental participation.
5. Given the complexity of family support as a concept, it would be helpful to both define and be very clear that as a term it covers all 4 levels in the Hardiker's model and so elements of the Strategy may apply to children in levels 3 and 4. NSPCC would also suggest that the document makes clear that many family support services will be provided as part of sub-regional commissioning and planning process (Children's Services Planning, the HSSA etc) and to set out the relationship between this Strategy and those processes and bodies. The Hardiker model in the back of the document is probably a useful

way of seeing this split between generalist provision and more specific interventions to families experiencing problems.

**Q2 Do you agree that the vision stated is the right vision?**

**Q3 The document lists 10 principles that underpin the strategy. Do you agree with the principles stated?**

**Q4 The document lists 7 outcomes from the Children and Young People's Strategy, 'Our Children and Young People – Our Pledge'. Do you agree these are the right outcomes for this strategy?**

6. Provided clear linkages are made with other forms of family support that fall into levels 3 and 4 of the Hardiker model, this seems an appropriate place to focus the thrust of the Strategy. It may be helpful grounding the Strategy at an earlier point in any final document in relation to the other related government strategies as set out in paragraph 4.7. It would be also useful to link measures to funding. It is far from clear in the document how proposals link to the recent announcement by the Minister for Children and Young People in regard to additional funding for parenting measures under the Children's and Young People's fund.
7. Staff had some reservations as to what the principles meant in places and it might be easier to simply these. NSPCC were also of the view that the Strategy needed to more clearly articulate what measurements will be used to define the success of outcomes.

**Q5 The focus of this strategy is primarily on preventative and early intervention to support parents at particular times of need and at particular stages in the development of their child. Do you think this is the appropriate scope for the strategy?**

8. Overall the NSPCC felt that the Strategy by its focus on certain types of need, excluded other families and problems. We refer to some of the gaps we noted below. Staff commented that they felt that education and public awareness should be a key component of its focus.

**Q6 Do you agree that Theme 1 – Parental Support is an appropriate theme?**

**Q7 Do you agree the actions suggested in Theme 1 are appropriate actions to take under this theme?**

9. We are very supportive of parental support as a theme within the strategy indeed it is our view the most important pillar of the Strategy.

10. NSPCC would have various comments on the actions and would like to make a number of suggestions:

### **The role of HVs**

- a. We welcome the attention given to the role of Health Visitors in the document recognising the universal preventive role that they play with children aged 0-4. Given the ethos of Hall 4 is more targeted provision we would suggest that more specific actions could be set out for health visitors including promoting awareness of the signs and symptoms of post natal depression. It would be helpful to in particular to adopt a regional-wide agreed approach to two issues: i) the importance of safe handling of babies and ii) the issue of physical punishment and positive parenting. The Assembly Inquiry into Child Protection in 2002<sup>1</sup> was undertaken following the death of Jasmine Magowan who suffered shaking injuries. NSPCC NI undertook research into SBS<sup>2</sup> at the time and made recommendations about the need for HVs to advise parents routinely about the risks and dangers of shaking babies. In addition at a time of legal reform in relation to physical punishment of children and commitments given in parliament to a strategic approach to awareness raising and positive parenting, health visitors are key in this regard. **We would strongly recommend that as part of the Strategy the Nursing Directorate of DHSSPS issues regional guidance to HVs in raising these issues routinely with parents in conjunction with the use of the Safe Parenting handbook.**

### **Role of Midwives**

- b. The Strategy should reference the role of midwives and support for new parents in particular. NSPCC would like to see universal and ante-natal support services being strengthened with specific targets relating to promotion and uptake of these.

### **Positive Parenting**

- c. We welcome the steps that have and are being taken to raise positive parenting as an issue and the work of the OLR Inter Disciplinary Group on Positive Parenting (IDGPP). The NSPCC would query the absence of adequate Department of Education input to this initiative and the absolute need for action points to

---

<sup>1</sup> NI Assembly 2002

<sup>2</sup> Bunting L. Shaken Baby Syndrome: An overview of Research and Policy Implications NSPCC Northern Ireland

reflect curriculum development as part of Personal Development (PD) in this area as well as reference to how positive parenting can be promoted in Extended School areas. This is an issue we return to later.

### Parent Education

d. We are very supportive of the actions proposed in this section of the consultation document. However the Strategy should set out linkages and interfaces with specialist services that include domestic violence, substance misuse and therapeutic services for adult survivors. Research to be published by NICCY, NSPCC and Barnardos later this year will emphasise the need for an ecological approach in relation to parenting programmes. Research has also shown that for preventative programmes to be effective, it is not enough to provide parents with the knowledge of the alternatives (to physical punishment) but that parental attitudes and attribution for child behaviour need to be targeted<sup>3</sup>. The NSPCC endorses the concept of a quality standards framework for the provision of family support services. This would help to regularise and standardise where possible interventions and to drive up quality. We were of the view that this could be used to improved standards of information sharing (see Paragraph 12 below). NSPCC would further suggest that:

- i. More specific Actions and measurable outcomes are developed in relation to the provision of parent education programmes;**
- ii. Consideration is given to a funding stream being made available to promote Parenting Education Programmes aimed at professionals and parents who are themselves providing parenting training or working with children and families. Some recent research by Save the Children in relation to the Alternatives to Physical Punishment Training project<sup>4</sup> has indicated the cost effectiveness and success of these schemes;**
- iii. Standards would usefully cover, inter alia, supervision, information sharing and communication; and**
- iv. In addition to the standards framework that DHSSPS produce an endorsed or accredited list of what works**

---

<sup>3</sup> Ateah, C., & Durrant, J. (2005) Maternal use of physical punishment in response to child misbehaviour: implications for child abuse prevention. *Child Abuse & Neglect*. Vol 29. pp169-185

<sup>4</sup> Monteith, M. Promoting Positive Discipline An evaluation of the alternatives to physical punishment training programme September 2006 Save the Children

**in parenting support. The DfES Research Report RR574<sup>5</sup> could be easily made available in NI.**

### **Family mediation and parental support**

- e. Proposals appear sensible although again we would suggest specific targets are set and more detail as to the work with the Court Services is included in the final document.

### **Sure Start**

- f. It would be helpful to spell out the location of Sure Starts in Northern Ireland as staff felt that there was not equity of provision across the region. Some discussion would be welcome about the future location of Sure Starts in NI as a deprivation measure may not capture need. The NSPCC would like to see further research done on effectiveness and outcomes from Sure Start provision in Northern Ireland. Recent evaluation of Sure Starts in England<sup>6</sup> showed mixed results in terms of early impact evaluation.

**Q8 Do you agree that Theme 2 – Access to Information is an appropriate Theme?**

**Q9 Do you agree the actions suggested in Theme 2 are appropriate actions.**

- 11. The NSPCC is supportive of the proposal in the document to implement a regional database. Staff felt that it needed to be kept up to date to work successfully. It was felt that the timescale was unrealistic.

**Q10 Do you agree that Theme 3 – Assessment of Needs in an appropriate theme?**

**Q11 Do you agree the actions suggested in Theme 3 are appropriate actions to take under this theme?**

**Q12 Do you agree that Theme 4 – Information Sharing is an appropriate theme?**

**Q13 Do you agree the actions suggested in Theme 4 are**

---

<sup>5</sup> Morgan, P., Ghate, D., Van der Merwe A. What Works in Parenting Support? A Review of the International Evidence Research Report RR574 DfES 2004

<sup>6</sup> Early Impact of Sure Start Local Programmes on Children and Families: Report of the Cross-sectional Study of 9 and 36 Month Old Children and their Families DfES 2005

**appropriate actions to take under this theme?**

12. We are strongly of the view that the Chapter on UNOCNI is misplaced and should not be in the final document. While assessment is important, UNOICNI will probably be relevant to families in need of Hardiker levels 3-4 and more specialist help so it does not sit well here with the aims of the Strategy. In regard to Theme 4 and Information Sharing we are unclear as to the Chapter's inclusion here. **We would suggest that the proposal around a 'quality standards' framework should pick up on these issues by ensuring that good information exchange is the cornerstone of service provision. It was suggested however that the Threshold matrix which accompanies the UNIOCNi documentation could usefully be made available in the Appendix to the final document.**

**Q14 Do you agree Theme 5 – Integration and Multi –Agency working is an appropriate theme?**

**Q15 Do you agree the actions suggested in Theme 5 are appropriate actions to take under this theme?**

13. The NSPCC have major difficulties with this Chapter. The lack of integration and input from DE is very concerning. There is no reference to extended school developments or some of the initiatives that DENI has supported in Boards in relation to parenting initiatives. Apart from reference to Sure Start there is no link made between school setting, early year's initiatives such as DELTA, Webster-Statton and parenting programmes. The complete absence of reference to PD and curriculum development in the document regarding parenting is unhelpful and weakens completely the whole document. **NSPCC would suggest major revision to this Chapter by the Department of Education.**
14. We welcome in principle investment in Children's Centres but the strategy is bereft of detail in terms their purpose, outcome, geographical location as well as an evidential base for their development. **We would suggest more detail is included in the final document, including how the centres will integrate with other initiatives and service provision and that further research is carried out into outcome and effectiveness.**

## **GENERAL COMMENTS**

### Additional theme

15. NSPCC would have a number of further suggestions to make brought out in consultation with our staff group. There was a widespread view that the Strategy needs to develop an additional theme relating to hard to reach groups or measures aimed at promoting social inclusion. In particular parenting education and support aimed at fathers, non nationals/new citizens and those whose first language is not English, those with mental health problems and disabled people.

16. The NSPCC would suggest that the document could helpfully be restructured and rewritten to improve its layout.

### Implementation

17. The disparate nature of family support provision across a range of strategies and government initiatives makes co-ordination and interagency development very difficult. We would suggest the Department consider some form of co-ordinating group. The OLR IDG appears to have worked well and an implementation body may assist in rolling out the strategy.

#### Contributions from:

Clanna Family Support Team  
 Old Lodge Family Support Team  
 Foyle Family support Team  
 Ballymena Family Support Team  
 Policy and Research Unit

#### Contact details:

Policy and Research Unit  
 NSPCC NI  
 Jennymount Industrial Estate  
 Northern Derby Street  
 Belfast BT15 3 HN

E mail [Creid@nspcc.org.uk](mailto:Creid@nspcc.org.uk)

National Society for the Prevention of Cruelty to Children, Weston House, 42 Curtain Road, London EC2A 3NH. Incorporated by Royal Charter. Registered in England, charity number 216401. Registered in Scotland, charity number SC037717.