

Smart Start

Giving Warwickshire's children the best start in life

Engagement and Asset Mapping Project

The voice of 1,127 Warwickshire Parents and Carers



Executive Summary

Warwickshire County Council and its partner agencies have a nationally and internationally recognised reputation for delivering excellent, innovative and evidence-based provision for babies, young children and their families.

Smart start is a three-year programme run by Warwickshire County Council and partners, looking at how families and children aged 0 to 5 are currently supported and how we can work together to ensure all young children in Warwickshire get the best start in life.

This programme comes at a time of increasing financial pressures and challenges to service delivery. In the context of further budgetary constraints, services will need to be redesigned ensuring they are:

- built on our strong foundations
- responsive to the needs of children and families
- effective and sustainable

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The Foundation Project

To ensure the Smart Start programme is informed by up-to-date, comprehensive information, between January – June 2016, the Foundation Project has been running a set of engagement and research initiatives to capture feedback from Warwickshire’s parents, carers, communities and professionals working with families. The findings from the Foundation Project will enable WCC to decide future priorities and use resources to best effect based upon solid evidence.

The Engagement and Asset Mapping Project

This report presents the findings of a team of researchers working with Warwickshire Community and Voluntary Action (WCAVA) which led on the Engagement and Asset Mapping element of the Foundation Project.

Engagement Data Collection

A programme of engagement events with Parent and Carers took place between 1st February 2016 and 2nd May 2016.

Working with partner agencies in their respective localities, attending community events and meeting families in shopping centres and markets, the research team gathered the views of...

1,127

parents and carers gave their responses

377

through individual face to face interviews

176

through 36 Focus Groups run by Locality Coordinators and Community Researchers

574

through the online survey

Asset Mapping

To inform future 0-5's strategy and service planning, information about current assets has been gathered through conversations with parents, carers and service providers and verified through desk based research. Information has been collated for each of the 5 geographical districts in Warwickshire and grouped into eight categories, by provider type - statutory, third sector, community or commercial and by cost whether they are free or low-cost (under £1) or charged for (over £1).

This information has been transferred onto a series of maps indicating patterns of services and activity in each district across the county, to support planning of future strategy and Services. The asset data base will be handed on to Warwickshire Family Information Service (FIS) for transfer to the Warwickshire Directory.

Key findings

Social networks of family and friends are very important in all communities

Nearly 70% of respondents cited family and friends as their most important forms of support however, over 30% respondents do not cite family and friends as most supportive. Those without support from family or friends often struggle to make the first step to access community activities and services leading to isolation and mental ill health.

The importance of having somewhere to go is highlighted, where parents and carers feel they can get the support they need, without having to repeat their story - local, easily accessible, respectful, welcoming and affordable non-judgemental spaces.

The importance of having someone to listen and the opportunity to build relationships with consistent respectful, knowledgeable staff, who parents can learn to trust is highlighted. Staff who listen and are not judgemental, give their time, and seek solutions are highly valued. Positive experiences of services in the early days and months, results in positive engagement in child health and education services – key to improving children's outcomes in the long term.

Children Centres are particularly valued because they have traditionally aimed to offer non- stigmatised services, the range of professionals and services that can be accessed and their ethos of early intervention. There is significant concern about the reduction of children centres as welcoming universal venues. After friends and family, over 40% of parents and carers felt services and activities offered by a Children's Centre had been most useful, being easy to access, local, affordable and offering variety.

Antenatal Support

There is an inconsistency of accessibility to antenatal midwifery care across the county with midwives using children's centres to offer more community based appointments, which are highly valued by parents, in the North.

Access to antenatal and parenting support classes is inconsistent with 20% of parents not knowing what is available.

Third sector providers primarily in the South of the county and in Rugby, offer antenatal classes for parents who are able to pay.



Post Natal Support needs to be reviewed

Nearly 30% of those we spoke to recognised that they needed more support in the early days after their baby was born and adjustment to family life and parents experience a variable professional response to and understanding of postnatal depression.

Parents experiencing anxiety, depression or low self-esteem

are often prevented from making the leap into an 'unknown' group, or felt their mental health would be further damaged by criticism or rejection. In some cases such rejection had happened and parents felt unable to try a different group or return to try the group again.

Living on a low income and reliance on public transport significantly impacts on access to services and activities that support parenting and children's well-being. Free and low cost activities are highly valued.



Transport is really expensive and makes getting around very difficult. A return bus ticket to Nuneaton is £7.00...



The mapping exercise clearly indicates a major problem for parents living on a low income regarding availability including antenatal services, postnatal services, play and learning and child care activities and services which supports mental health. It is very clear that free and low-cost services in all localities are delivered primarily by public sector funded services. Any reduction in funding for public sector services will need to carefully consider the impact in local areas, taking into account those families who face the most challenges.

“ *I think mums need more support especially with little ones and if they don't have a good social network and help from a partner. It can be very lonely and hard work doing things alone.* ”



Living in rural areas Families living in rural areas face an additional barrier to accessing any services and activities including essential antenatal midwifery and health appointments. The mapping exercise clearly indicates that services and activities are clustered primarily in the towns and parents living in rural areas express high levels of isolation.

The needs of fathers and grandparents and parents and carers who speak English as an additional language should be actively addressed when planning and delivering services.

Families with children with additional needs face particular challenges Some parents felt that medical professionals had initially been dismissive of their concerns and often described life as being very stressful and isolating and feeling quite alone.

Time is a common barrier for working parents, many of whom really wanted to attend sessions in the evening or at weekends. However services and activities are currently offered primarily within school hours.

The importance of early intervention

Parents and carers shared significant concerns over any potential reduction of a range of children centre based services. These were seen as highly valued because of the range of professionals and services that can be accessed there and their ethos of helping with queries and problems as they arise. Concerns particularly focused upon wanting to ensure continued access to early year's educators, family support workers, health visitors, speech and language therapists and physiotherapists.

Information Many parents expressed a wish for accurate and up to date information about services and activities

Parent and carers involvement There is considerable interest in the emerging 0-5' agenda, as evidenced by engagement in this project. However, because of the demands of time and energy in parenting young children, the transient nature of this period of parenting and the economic pressure to return to work, there is very little expression of interest or individual capacity to get involved in service or community delivery. Parents and carers are keen to have their voices heard and share experiences of services to better influence their future design.

Executive Summary

Our Key Findings and Recommendations

Parents and Carers value

Parents and Carers in Warwickshire said that they need and value:

- High-quality services which are **local and affordable** *that are*
- Led by **knowledgeable, professional, non-judgemental staff** *which*
- Enable them to **retain and develop protective social networks** which support them in giving their children “The best start in life”

Community Assets

A wide range of community-based services and activities were identified, operated by a range of public, commercial, community and voluntary sector providers. The affordability and welcoming nature of these services were the key consideration of parents and carers and a primary determination of whether these services were accessed.

When focusing upon developing or retaining community based services, Warwickshire’s Smart Start strategy should focus upon the affordability and accessibility of these services.

Community Capacity

Community led activities and services across the county are valued by parents and carers. However North Warwickshire, the Borough of Nuneaton and Bedworth and clear areas of disadvantage in other parts of the county, have the lowest levels of activities and services offered by local communities.

Any investment through the Smart Start programme in Warwickshire to develop community capacity should focus on areas with least community led provision, where parents and carers are most in need of affordable, accessible services and activities.

Consistency of approaches and resource

Many highly valued approaches and resources were only available at a local level, within certain geographical areas and not expanded across the county.

The Smart Start strategy for Warwickshire needs to focus upon extending examples of good and best practice more equitably across the county, especially where this is focused upon providing access for parents, carers and children to a mix of professional and informal support within welcoming settings.

Engagement and Asset Mapping

This report presents the findings of a team of researchers employed through Warwickshire Community and Voluntary Action (WCAVA) which led on the Engagement and Asset Mapping element of the Foundation Project. The research team recruited for the project brought skills and experience in research methodology, early years and community development.

Engagement and Asset Mapping Team Approach

Five Locality Coordinators each focused on one area ensuring that equal attention was paid to each geographical district in Warwickshire. Each Locality Coordinator identified key assets and partner agencies in their area, enabling them to recruit volunteers for the project and develop a programme of engagement events relevant to their locality. This model also served to raise awareness of Smart Start throughout the county.

Community researchers

Since January 2016, 34 people have been recruited to support the Smart Start Engagement and Asset Mapping Project. This aspect of the project has developed the knowledge and skill base of a diverse range of individual participants and has raised awareness of Smart Start across the county.

Community Researchers supported engagement events and focus groups enabling the team to gather the views of more parents and carers. In order to train people recruited for this piece of work, a comprehensive training pack has been developed and tested. This can now be used to train Community Researchers for future projects. Certificates of Participation were awarded to all participants.

The Project Timeline

The Parent and Carer engagement and asset mapping work was undertaken between 1st February 2016 and 2nd May 2016.

Data Collection

The WCAVA research team, supported by volunteer community researchers, worked with different partner agencies in their respective localities, attending community events and meeting families in shopping centres and markets.

The research team gathered the views of:

1,207 parents and carers (with an analysed sample of 1,127).

377 parents and carers gave their responses through individual face to face interviews.

176 parents and carers gave their responses through 36 Focus Groups.

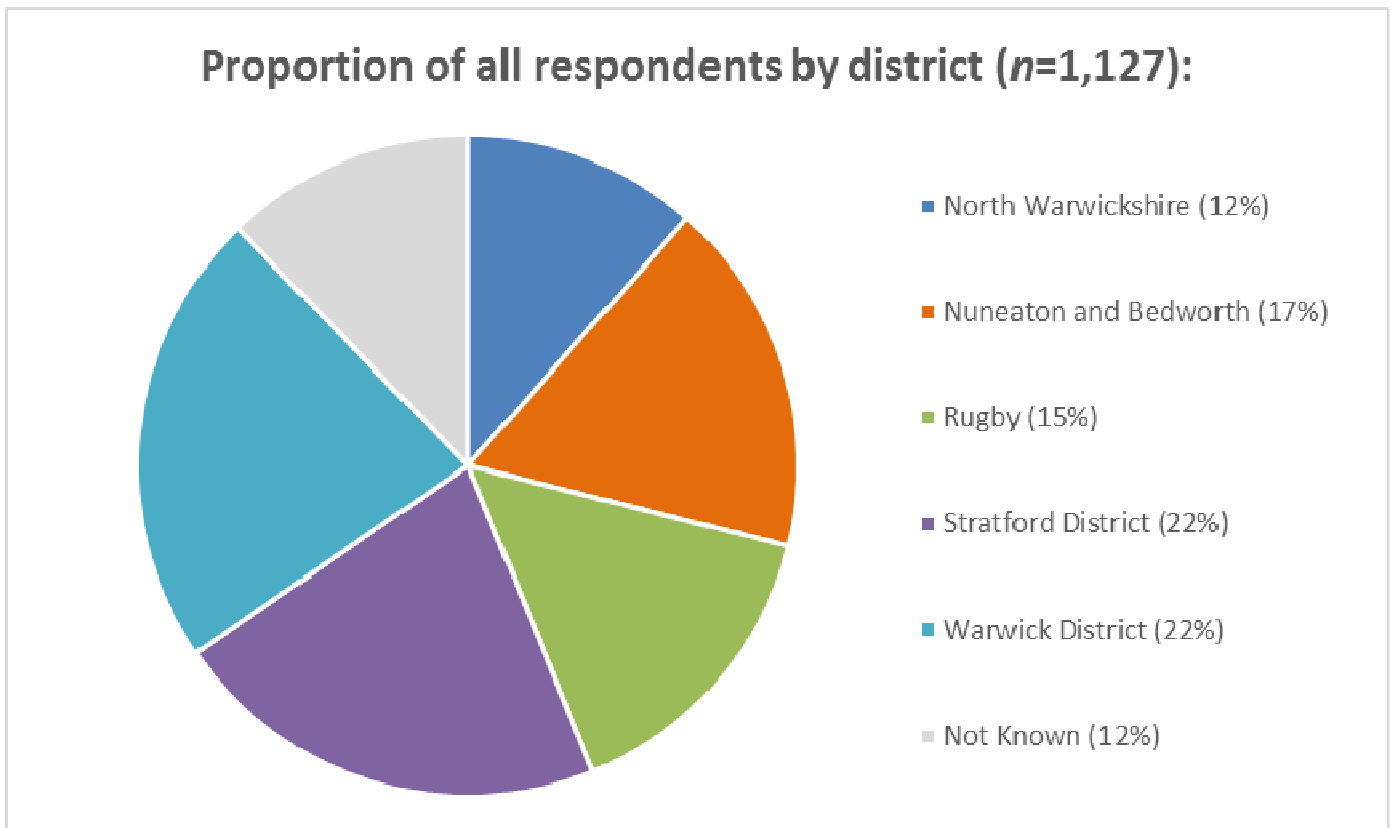
654 parents and carers responded through the online survey of which 574 were analysed (88%).

80 responses were excluded due to non-usable data (41); not parent or carer (22); out of area (14); duplicate response (3).

Diversity of respondents Appendix 1

Profile of respondents

Responses were received from all parts of the county, with each district's representation broadly in line with overall Warwickshire population figures.



Note: 12 % 'Not Known' participants - although the district is not known, it was confirmed that the responses were from Warwickshire through verification of IP addresses. (Through this process we also excluded 14 responses from outside of the area of Warwickshire)

Ethnicity

17% of respondents identified as other than White British, which is higher than the overall Warwickshire demographic (6.6%). The face to face consultation intentionally sought to involve parents and carers from diverse backgrounds.

Language

10% of respondents said that the language mainly spoken at home was not English. This compares with 4.3% of the Warwickshire population identifying their main language as other than English in the 2011 census.

Disability

A total of 6% of respondents considered themselves to have a disability, with 10% of respondents stating that at least one of their children has a disability.

Accurate county figures for direct comparison were not available but this compares with 1.3% of children in Warwickshire aged between 0 and 5 in receipt of Disability Living Allowance. County data for parents who consider themselves to have a disability is not available. This compares with Warwickshire's figure of 6% for 'lone parents with dependent children'.

Employment

When asked '*Is anyone in your household in employment?*' 13% of respondents replied '*no*'. This is broadly in line with the 11% of the Warwickshire working-age population in receipt of out of work benefits.

Lone Parents

The proportion of respondents who identified as receiving lone parent benefits (12%) does not directly provide the proportion of lone parents within the sample. However, this indicates a sample that is broadly in line with Warwickshire figures.

This compares with Warwickshire's figure of 6% for 'lone parents with dependent children'.

Children Centre Users

The contract for the project required the team to engage with 50% of respondents who were not regular users of Children's Centres.

42% of respondents said they had used Children's Centres '*many times*', with 21% having '*never*' used a Children's Centre and 37% having used a Children's Centre no more than '*a few times*'. Respondents generally answered this question in relation to their overall experience, not just their recent experience. As a result, those who had used Children's Centres '*many times*' included a notable proportion of respondents who had used Children's Centres regularly in previous years, but did not currently use a Children's Centre. The available data indicates that at least two-thirds of respondents were not current, regular users of a Children's Centre.

Total analysed sample 1127.

Mothers	932	(83%)
Fathers	79	(7%)
Grandparents	94	(8%)
Other carer	22	(2%)

Methodology

Data was collected via three routes:

- An online questionnaire
- Individual face to face interviews
- Focus groups

An incentive was offered to anyone who completed the questionnaire, attended a face to face interview or participated in a focus group.

The incentive was entry into a prize draw to win £100 (one prize available) or £50 (two prizes available) of multi- store shopping vouchers.

Three versions of the online questionnaire were available for (1) Mothers, (2) Fathers and (3) Grandparents/Other carers. Each version was based on the same set of underlying questions, but adjusted to be relevant to the viewpoint of each group. Quantitative data was collected through questions where participants were asked to select the relevant response category from a list. Qualitative data was collected through free text response boxes. Participants could choose to skip any questions they did not want to answer. An example questionnaire is provided in Appendix 2.

Individual face to face interviews focussed on collecting qualitative data, and followed a semi-structured format based on discussion of the questionnaire's free-text response questions.

Paper versions of the questionnaire were available to interviewers and, where appropriate within the context of the discussion, quantitative questions were also completed. This approach allowed the online and interview responses to be integrated, whilst focussing Interviews on exploring the qualitative responses provided by parents and carers.

Focus groups used a semi-structured discussion format that explored:

- The support that parents/carers accessed when preparing for birth, preparing for parenthood, and or to support them as a parent/carer;
- What support had been most helpful;
- What support was missing that participants felt would have helped/could help.

Quantitative data from the online questionnaire and interview responses was combined, coded and analysed to produce descriptive statistics.

Qualitative data from the focus groups, interviews and online questionnaire free-text boxes was combined.

Qualitative data was analysed using a combination of Content Analysis and Framework Analysis techniques. In the first stage, an independent researcher coded the responses given to each question and calculated the percentage of each response type. This provided an indication of the dominance of particular themes and ideas in response to the questions asked. Coded data was then categorised into an 8 category framework:

- Antenatal care and services
- Postnatal support and services
- Child and Parent Play and Learning Activities
- Child Health and Wellbeing
- Parental Mental Health and Emotional Support
- Parenting Support and parenting courses
- Childcare and Early Years Education
- Money and Housing

Participants' responses were found to naturally fit into at least one of these categories, eliminating the need to add further categories to the framework.

Asset Mapping

To inform future 0-5's strategy and service planning, information about current provision has been gathered through conversations with parents, carers and service providers and verified through desk based research. Information has been collated for each of the 5 geographical districts in Warwickshire and grouped into the following 8 categories:

- Antenatal care and support
- Postnatal care and support
- Child and Parent Community Activities
- Child Health and Wellbeing
- Parental Health and Wellbeing
- Parenting Support
- Childcare and Education
- Money and Housing Advice

To facilitate analysis and service planning each category was subdivided as follows:

By provider type – statutory, third sector, community or commercial.

By cost - whether they were free or low-cost (under£1) or charged for (over £1).

By setting— Whether they are delivered in a statutory setting or a community setting.

1009 assets were identified (excl. childcare)

148 'Commercial Provider'

320 'Community Group'

429 'Public sector funded'

112 'Third sector organisation'

544 locations were identified

(i.e. each postcode included only once)

- *all assets exclude childcare*

Future Application

Information has been transferred onto a series of maps indicating patterns of services and activity in each district across the county to support planning of future strategy and services Appendix 3.

The asset data base will be handed on to Warwickshire Family Information Service for transfer to the Warwickshire Directory which seeks to be a single point of information access for residents of Warwickshire.

<https://warwickshire.gov.uk/directory>

National Policy Context

Since the 1990's there has been a growing recognition by governments of all parties of the crucial importance of investing in services which support families and children in their early years, aiming to ensure all children get the 'best start in life'.



<http://www.1001criticaldays.co.uk> www.1001criticaldays.co.uk

The 1001 Critical Days – Conception to Age Two The groundwork for good citizenship occurs in the first 1001 days. A radical change is required. A holistic approach to all ante, peri (around 20th week of pregnancy to around the 28th day of life) and postnatal services would enable seamless access for all families. This includes midwives, health visitors, GPs, and children's centres, and services should engage with families as soon as possible - ideally during pregnancy. The contacts that all parents have with services before and after the birth of their child, provides a unique opportunity to work with them at a stage which is so vitally important to the development of children.

All Party Parliamentary Group on Children's Centres *Family Hubs: The Future of Children's Centres July 2016*

In recent years, the idea of expanding Children's Centres' provision to provide holistic support that joins up services for the whole family is one which has received an increasing amount of attention.

In 2014, the Centre for Social Justice proposed a model that they termed "Family Hubs", which would see Children's Centres become: the 'go to' place for any parent (including fathers) to access services or information about all family-related matters including: birth registration, antenatal and postnatal services, information on childcare, employment and debt advice, substance misuse services, relationship and parenting support, local activities for families and support for families separating.

'The Government should give full consideration to augmenting Children's Centres into Family Hubs as part of its Life Chances Strategy. Local Authority leaders and Public Health commissioners should position Family Hubs at the heart of their Health and Well Being Strategies'

www.4Children.org.uk

“ Acting to improve the first critical 1001 days is a worthy goal. Giving children and young people a good start in life should surely be more than just an aspiration! ”

Antenatal Support and Services: Helping to get it right from the start

Context

The transition to parenthood, parent mental health and wellbeing and infant mental health and wellbeing are intrinsically linked. Developing evidence* highlights the importance of pregnancy and the immediate postnatal period in the health of the baby and in reducing social and health inequalities. Antenatal education including childbirth education programmes, parenthood education and antenatal classes, are aimed at reducing the complications of pregnancy and promoting the health and wellbeing of mother and child.

*www.local.gov.uk/health/-/journal_content/56/10180/3510094/ARTICLE

It was strongly felt by many respondents that information given by health professionals, online and in books is almost completely focussed on a natural, uncomplicated birth and on successful breastfeeding. They felt more information should be available about common birth interventions, including forceps delivery, caesarean sections, induced labour and pharmaceutical pain relief, common complications such as premature delivery, multiple births, special care baby unit, wound-healing, post-natal depression, breastfeeding problems and mixed or formula feeding.

What parents and carers told us

Midwifery

Antenatal and transition to parenthood preparation Parents said the arrival of a baby had a great impact on their lives, their intimate relationship, relationships with friends and family, working lives or employment options, household finances, leisure time, and emotional state. Several participants explained that they had never been around small children before, so really didn't know what to expect. Parents said that being helped to think about the impact of a baby on the whole family, as well as making practical arrangements for the baby's arrival, would help with adjusting to family life.

A common theme was that parents needed more practical, broad and realistic information about birth and the early days of parenthood in order to prepare for their child's arrival.

"My midwife was brilliant but you could tell they were stretched because appointments were sometimes a bit rushed."

"I felt let down during my pregnancy as I didn't see the same midwife twice and was never offered antenatal classes"

"It was my first pregnancy and I expected more practical support. I went to midwife appointments but they were usually late, really difficult as a working parent. The appointments were short and didn't give time to ask questions"

Antenatal or Parentcraft classes

Many people were upset at not having had the opportunity to have attended an antenatal class or that they did not meet their needs.

“Needed a longer course - 3 evenings isn't enough.”

“Support on how to manage mentally with the change in lifestyle that a baby brings. There was no support offered to me as a dad”

“My husband had never been around children and hadn't a clue, he definitely needed some support.”

“Antenatal sessions should leave plenty of time for questions, and for socialising with other parents.”

“The main focus was the birth. Very little information about actually coping with a baby.”

“Bottle feeding, it was all about breastfeeding. And learn how to bath a baby.”

“I had no information about premature birth to prepare for this possibility.”

“Being told what to actually expect, not the 'Hollywood' version!”

When things aren't straightforward

Many respondents felt they had had a traumatic birth experience, and that this had been made worse by lack of preparation, shock, fear and a sense of failure, loneliness and loss that their experience had not lived up to the expectations or image they had been given.

“Having spent 2 weeks in the high dependency unit and with the shock of an early delivery, I feel I would have liked support around the birth. I had to say to myself it was "horrible, traumatic, but at least I have a healthy baby now!”

“There should be more support for traumatic births. I felt very isolated and unable to share my birth story...Plus you don't feel normal saying how everything went wrong.”

Others felt that, despite knowing in advance that they would have to manage certain challenges, such as premature delivery, caesarean, a twin birth, or health condition, they received little or no specialist guidance or support, as the information was focussed on natural, uncomplicated births and babies without health conditions.

“I knew I would be having a c-section and premature baby. It would have been helpful if the doctor could have prompted my midwife to call and discuss things that might be needed or experienced in the hospital.”

“My daughter was premature and in SCBU. I was unable to attend antenatal classes and had no information about the birth at all.”

Fathers

Dads strongly told us that they need antenatal support too, including:

- Information from professionals on what to expect
- What options for birth exist and which medical interventions are available
- Which natural and pharmaceutical options are available for pain relief
- How they can support their partner during and immediately after birth.
- Access to antenatal classes with their partner.
- Practical arrangements they need to make to bring the baby home, for example buying car seats, feeding equipment and clothes for the baby.
- Practical instruction about feeding, changing and bathing a baby, keeping the house/bedroom at the right temperature.

“I was not allowed to be present at the scan because the room was too small.

Very disappointed and angry as I wanted to be involved.”

“I didn't hear about any classes, I didn't know anything...I hadn't been around kids as I'm the youngest in the family. Any help at all would have been good.”

“Nobody ever said it was this difficult. My wife was really poorly and I didn't really know anything.”

Second time round

Many of those who were already parents felt that they were 'left to get on with it' by professionals. Some did feel they needed less support, but many were quick to point out that they had often

forgotten the information they had received about birth options and baby-care from previous pregnancies, especially if a few years had elapsed.

Parents pointed out the fact that vital safety information, for example about safe sleeping arrangements, weaning, immunisations, paediatric first aid, child car seat regulations and who to contact for help, regularly changes so all prospective parents require the latest information.

Parents also explained that subsequent pregnancies, births and children are often completely different experiences, with different complications and issues to manage, and that every prospective parent therefore requires the full range of information about birth, feeding options and childcare in order to make informed decisions and to be fully prepared for parenthood.

“It was my second pregnancy and they think you're fine as you've done it before you're fine but you still need to know things”

What parents say works?

“It was helpful knowing their help was at the end of a phone line or that I could go and visit my midwife”

“Having regular check-ups helped to reassure me that the baby was ok.”

I'd recommend the Family Nurse Partnership to anyone, especially a young parent. I thought how am I going to cope? ...My FNP keeps in touch. She'll text me or ring me and say 'If you have a question just get in touch'”

“I learned loads at Baby Steps about how your baby develops and how much they can do before they are born and made friends with other mums.”

Antenatal Support and Services

Key Findings

Parents felt a strong relationship with an informative midwife, and access to antenatal classes, would have been helpful preparation for becoming a parent.

17% of mothers wanted more support from midwives in preparing for birth.

30% of parents said they needed more support to prepare for the birth of their baby and the early days of being a parent.

25% of parents said that the midwifery service had been the most useful source of antenatal support.

18% said family or friends had been the most useful source of antenatal support.

8 % partner had been the most useful source of antenatal support.

7% hospital staff or consultant had been the most useful source of antenatal support.

These results show the importance of positive relationships with professional maternity services and of supportive links with friends and family and support from partner.

The fact that only 18% said family or friends were the most useful source of antenatal support highlights the potential vulnerability of families with no close family, single parents, those in difficult relationships and those who experience barriers and problems with the maternity services.

12% said the internet, social media and apps had been the most useful source of antenatal support although there is a significant variation in response with more affluent families using the internet more readily.

7% said antenatal classes had been the most useful source of antenatal support
Third sector and commercial sector providers of antenatal support NCT, Bump to Baby Reality, Bump to 3 are valued enabling parents to develop important peer support networks, but depends on availability and parent's ability to pay.

However

17% of parents felt that better quality antenatal classes should have been offered earlier in the pregnancy, for a longer duration and be free to access.

81% of parents in households without paid work did not attend any antenatal classes.

This compares with 60% of parents in households with paid work.

Appendix 4

Antenatal Support

There is an urgent need for accessible, free or low cost and relevant antenatal and preparation for parenting support for all families. Parents who access group antenatal support e.g. NCT, Baby Steps report benefiting from peer support both antenatally and postnatally, in preparation for birth and the early months of their child's life. However there is inconsistent access depending on family income and availability.

The asset mapping exercise indicates that free and low-cost services for antenatal support and care across the county including midwifery and hospital services, health visiting and Baby Steps courses currently offered in the Children's Centres, are all provided by public sector funded services.

See Appendix 3 Maps D and E

There is a significant difference across the county regarding paid for antenatal care and services. In Warwick District there are 5 private commercial providers and 3 third sector provider delivery points. In Stratford district there are 3 private commercial providers and 2 third sector provider delivery points. In Rugby there are 3 private commercial providers and 3 third sector provider delivery points. In North Warwickshire there are 2 private commercial providers.

There are no commercial or third sector providers in Nuneaton and Bedworth.

See Appendix 3 Map E

Postnatal Care and Support: The first 12 months

Context

The early days after a baby is born can be critical in supporting a positive attachment between parents and their child and in supporting parents to feel confident in their new role.

www.1001criticaldays.co.uk

What parents and carers told us

24% parents said they needed more support after their baby was born.

6% said they needed a lot more support after their baby was born.

What was missing that would have helped

“To be told the truth. That it’s not all wonderful and that it’s OK if you don’t cope too well.”

“Feelings commonly experienced: like, no ‘rush of love’, resentment, boredom etc.”

The need for extra support for managing complications or a child’s needs after birth

Some mothers had found the birth experience itself very traumatic, and felt they needed professional support and understanding in coming to terms with what had happened. A small number had experienced the death or injury of their baby during birth, while for others their child had become seriously ill and required many weeks or months of specialist care.

Parents of children who had been born prematurely said they would have liked more information about the impact of premature birth, the Special Care Baby Unit and on caring for a child born prematurely when they went home. Parents had often received little or no antenatal information about birth or baby care by the time their baby arrived, as this was often attended or given out towards the end of pregnancy.

“There was no support about the huge anxiety I had after the diagnosis of my child’s condition. I was given horrible news and then just left with no support. No counselling was offered.”

“Talking to a mum earlier on about receiving a postnatal diagnosis of Down’s syndrome. It might’ve laid some of my fears to rest in those dark early days”

“I just did all my own research online. Would have liked more information about what to do in first few weeks, especially with twins.”

“More support with looking after children to enable me and my husband to take a break. This would have been particularly helpful as my husband was diagnosed with cancer shortly after our baby’s birth”

“Counselling, as we lost our other son within hours of being born (had twins).”

“When I had the baby I found that I wasn’t prepared as everything I’d done was about the birth. It was a shock!”

Emotional well being

Some parents highlighted antenatal information left them poorly prepared, psychologically and practically, for the arrival of a baby. This impacted on their emotional well-being and their confidence in making practical adaptations post-birth.

“She was born backwards and so early. I was really frightened and I needed more support on how I could try and keep myself and my daughter safe from my ex-partner....”

Feeding

Mothers described the impact of having been unable to access adequate breastfeeding support, and in having to pay privately for this assistance.

“I had some breastfeeding problems with my second child and received support from an NCT breastfeeding counsellor.”

“She was great but her input was too late....my child was starving and we couldn't wait for her to visit so had to resort to formula milk”

“Breastfeeding group that I actually had to start myself because one was no longer offered at our local children's centre. With my first child I had lots of wonderful support at the centre. It was so heavily cut with my second. A terrible decision!!!!”

“I was judged for breastfeeding and there was no support. I moved here while I was pregnant 8 years ago and there was a big push to breast feed in [previous county] but here there was nothing and so I ended up not being able to breast feed either of the youngest 2 even though I would have really liked to.”

“It was quite lonely and I felt everyone was judging me for being really young even though I was 25. I felt really let down in the hospital as had really bad breast feeding support and was relying on that for money saving as well as because it was good for her. They refused to give me a breast pump and then when they did the attachment was broken so i couldn't even use it”

Accessing support

Some parents found themselves struggling with the complete change in lifestyle a child brings; missing work, former friends and activities. Advice and support in managing these changes, support from peers undergoing similar changes and challenges and the opportunity to engage in a range of activities is important to parents adapting to family life. Parents often fail to visit a group or activity because they are feeling tired or overwhelmed by the demands of their child.

“The Children's Centre was a real life line. I live rurally and was completely alone during the week so the services and activities at the Children's Centre kept me sane as well as providing a safe place to escape to when I was feeling low. The staff there are wonderfully supportive and trained to give useful advice.”

What works?

Where parents get their support after their baby is born

As identified in the responses below, parents get their support after their baby is born from a range of sources. Our research found families without paid work are less likely to cite friends, families and partners as their main source of support.

Source of support	Households without paid work	Households with paid work
Internet	8%	24%
Social media	4%	11%
Family	63%	73%
Friends	49%	59%
Partner	40%	73%

Of all the support you received after your baby was born, what did you find most helpful? (all responses)

Health Visitor	23%
Family or Friends	21%
Children's Centre	14%
Partner	8%
Local parent and baby groups, friends from antenatal class	7%
Breastfeeding groups/ counsellors	7%
Midwife	7%

"The Children's Centres are brilliant, they are always willing to help. I would like to move but don't want to move away from the Children's Centre."
'The health visitor was brilliant, and available on the phone at any time'

"I had weekly visits from my health visitor for 4 months and built a really good relationship which helped later when I developed post natal depression (PND). This was a key factor in her picking up that I was trying to hide the PND"

Postnatal care and Support

Key findings

Postnatal support needs to be reviewed

Nearly 30% of those we spoke to recognised that they needed more support in the early days after their baby was born and adjustment to family life and parents experience a variable professional response to, and understanding of postnatal depression.

“It would be nice to go to someone when I'm feeling down or talk to them on the phone at that very time, and to someone who is constant so they get to know you with your problems”

A peer-support network of other local parents, which provides a source of useful information and practical support in the early days helps to reduce anxiety and feelings of isolation.

Services aimed at parents with very young babies were highly valued enabling parents to meet each other, ask for practical advice and participate in activities which support positive attachment e.g. Chatter Matters for babies and their parents designed to encourage early communication as part of the Warwickshire's 'Time to Talk' strategy and Baby Massage which promote positive attachment and infant health and wellbeing

Fathers feel excluded or marginalised from these groups, so the development of dad's groups which used to run in Children's Centres before the reduction in services is needed.

“My partner would like to go where it's for fathers and more fathers can attend, he has been once or twice with us but there were no other dads so feels a bit out of place. He would like to meet other dads and go to dads' groups”

Breastfeeding support is critical for some parents in establishing breastfeeding. Breastfeeding groups were also described as being a useful resource for breastfeeding mothers.

'Nurturing' actions from other people are valued. These ranged from kind words, a listening ear, having a meal cooked for them, baby sitting or a cup of tea.

The mapping exercise indicates that across the county all free and low-cost postnatal support and activity (providing support in the first 12 months after birth) including health visiting is provided by public sector funded services apart from one commercial sector provider in Stratford on Avon District and one commercial provider within Warwick District.

With regard to charged for services (£1 or more) there is a mixed picture across the county.

- In Nuneaton and Bedworth and Stratford public sector funded providers offer postnatal services that are charged for at relatively low cost and Stratford also has two third sector providers.
- In Warwick District there is a mix of third sector providers and commercial providers offering services at relatively high cost.
- Rugby has no commercial providers offering postnatal services but three third sector providers.
- North Warwickshire has two commercial providers.

There is no community provider provision focusing on the postnatal period of the first 12 months after birth.

These findings, although not a comprehensive picture do indicate significant inconsistencies across the county and provide a summary of inequity.

Parental mental health, well-being and emotional support

Context

Between 10 and 15% of women develop a mental illness during pregnancy or within the first year after having a baby. Evidence indicates that stress and anxiety in pregnancy can have harmful effects on the baby and the effects of postnatal depression is associated with insecurity of attachment in early childhood.

* Ref: <http://www.rcpsych.ac.uk/healthadvice/problemsdisorders/postnataldepression.aspx>

Risk factors for poor mental health include:

- Living in poverty.
- Living in isolation.
- Experience of domestic abuse.
- Experience of stigma or discrimination.

Parents living in hardship often experience high levels of isolation and anxiety, experiences of 'not being listened to' by services. A feeling of 'being judged' and not valued can mean people exclude themselves from sources of help and social contact. Often those in greatest need get least support.

What parents and carers told us

Parents gave strong messages about the impact of the birth of a child on maternal, paternal and sibling mental and emotional health.

Of the parents who reported that they had suffered from diagnosed post-natal depression, for some the onset was rapid, debilitating and severe; for others their condition developed slowly over the postnatal period. Some mothers felt that health professionals often lack knowledge and understanding of the condition.

Reported effects

- Feeling exhausted and low in self-esteem and motivation.
- Difficulty bonding with and enjoying their child.
- Impact on family members who care for them and their children.
- Parents reported that the birth of a child often coincided with other difficult or traumatic events in family life, domestic violence, divorce or separation, critical illness and bereavement and felt they needed support, including specialist advice, counselling, and assistance with childcare in order to keep emotionally difficult medical, legal, counselling appointments or to visit a severely ill relative.

Fathers described receiving little/no support from professionals or the community, despite often having to deal with their partner's postnatal illness, alongside caring for the baby.

"Something for Dads. They don't talk to others like women do but I was a total nightmare. I really think my husband should have had some support on dealing with me."

We spoke to several grandparents who have become the main carer of their grandchild. They describe the lifestyle change and feelings of loneliness and isolation. Grandparents often provide childcare throughout the year so that parents can work, and find this can be challenging, particularly when entertaining children of various ages throughout school holidays and over weekends. Grandparents were often on a low income and several noted that services seemed to have reduced.

The importance of having someone to listen

“Because it’s about feelings in the moment. Worries have to be dealt with otherwise I get very anxious.”

‘I felt I was passed from pillar to post and made to feel even worse with my mental health problems’

“I didn't find the IAPT service helpful as after completing the anxiety questionnaire I had to repeat the findings at each appointment. This took up 15 minutes of the 1/2 hour appointments. I would have asked friends with children about where they go but I don't know anyone. We are now moving back up north as I want family support.”

“Something for Dads. They don't talk to others like women do but I was a total nightmare. I really think my husband should have had some support on dealing with me.”

“It would be nice to go to someone when I'm feeling down or talk to them on the phone at that very time, and to someone who is constant so they get to know you with your problems”

“I am a lone grandparent and main carer of my grandson. I am afraid to say I need a day off in case they think I can't cope and take him off me. I had to start all over again and it was like being a new mum. I have lost touch with all my friends as I can't go out anywhere anymore. Babysitting is an issue and I can't afford it as I'm not working and can't start work. Taking on the responsibility of my Grandson was a huge life change. I go to groups, but really miss my own friends and I haven't made any new friends....”

“I think mums need more support especially with little ones and if they don't have a good social network and help from partner. It can be very lonely and hard work doing things alone”

What works?

Parents reported on the importance of supportive partners, family and friends. Contact with others means parents have someone to talk to when they are feeling worried or low, someone to ask for practical help, and that they feel that they are valued and important.

Engagement with services during pregnancy offers valuable opportunities to promote emotional well-being and for the prevention of mental health problems, helping relationships where a mother feels confident to talk about her feelings so she can receive appropriate help and support.

Opportunities antenatally and postnatally to develop social networks e.g. National Childbirth Trust, Bump to 3, Bump to Baby Reality, Baby Yoga, Wheelie Mums proves to be very helpful in supporting parental emotional health. However, this depends on availability and parent’s ability to pay. Parents who had attended Baby Steps courses currently offered through Children’s Centres, also benefited from the opportunity to form supportive social networks.

“The Children's Centre kept me sane as well as providing a safe place to escape to when I was feeling low. The staff there are wonderfully supportive and trained to give useful advice.”

What works? continued

*“weekly confidential support from the counsellor at the Children’s Centre”
(in the south of the county)*

*“Can be lonely/isolating being a mum if no friends or family are around.
The drop in facility at the Children’s Centres is very important”.*

“There are lots of worries as a parent, and “what if?” I would also like to say, social services have been A, when first referred when pregnant for my previous mental health issue, to helping me with an abusive partner. They don't get the credit or funding they need, and have been a lot better”*

“We were victims of domestic abuse and spent some time in a refuge, Families First helped us with counselling for all the family.”

Parental Mental Health, Well-being and Emotional Support Key findings

30% respondents do not cite family and friends as most supportive, and are reliant on services. Those without support from family or friends often struggle to make the first step to access community activities and services leading to isolation and mental ill health.

Parents in non-working households indicate lower levels of social support, with people in this group much more likely to say they don't know where to look for support. Parents with a child with a disability experience significantly less support from partners and family.

23% of parents living in households without paid work and 10% of parents living in households in work don't know where to go to get support if they are feeling low.

Our research led us to a concern that parents on a low income may struggle to ask for help for fear of being judged as failing. A small group of parents admitted to being fearful of admitting that they were struggling in case children were 'taken away'.

Our research also led us to a concern that parents on a low income may struggle to identify and separate their own support needs from those of their children.

Parental Mental Health and Wellbeing and Emotional Support

Summary

Parents experiencing anxiety, depression or low self-esteem are often prevented from making the leap into an 'unknown' group, or felt their mental health would be further damaged by criticism or rejection. In some cases such rejection had happened and parents felt unable to try a different group or return to try the group again.

The importance of having someone to listen and the opportunity to build relationships with consistent respectful, knowledgeable staff, who parents can learn to trust is highlighted. Staff who listen and are not judgemental, give their time, and seek solutions are highly valued. Positive experiences of services in the early days and months, results in positive engagement in child health and education services – key to improving children's outcomes in the long term.

Living in rural areas Families living in rural areas face an additional barrier to accessing any services and activities including essential antenatal midwifery and health appointments. The mapping exercise clearly indicates that services and activities are clustered primarily in the towns and parents living in rural areas express high levels of isolation.

Throughout the research, the importance of having somewhere to go is highlighted, where parents and carers feel they can get the support they need, without having to repeat their story - local, easily accessible, respectful, welcoming and affordable non-judgemental spaces.

Children Centres are particularly valued because they are seen as venues which offer non-stigmatised services, the range of professionals and services that can be accessed and their ethos of early intervention recognising parent and carer's emotional health needs.

Informal Support 20% of parents and carers said groups run by community venues or places of worship offered the 'most useful' support after their baby was born. Services which are accessible, affordable, trusting and respectful, delivered in non-judgemental spaces and recognising people's capabilities need to be retained and developed.

Money Matters

Context

12,307 children are living in poverty in Warwickshire – almost 11% or 1 in 9 of all children.

Warwickshire County Council's Child Poverty Strategy 2015 recognises the importance of tackling child poverty to ensure that all children in Warwickshire get the best start in life and can achieve their potential.

“Giving every child the best start in life is crucial to reducing health inequalities across the life course. The foundations for virtually every aspect of human development – physical, intellectual and emotional – are laid in early childhood. What happens during these early years (starting in the womb) has lifelong effects on many aspects of health and well-being from obesity, heart disease and mental health, to educational achievement and economic status”

What parents and carers told us

Parents felt they would like advice and support around money both before and after the birth of their child.

Parents struggle with money following the birth of their child, and for many the extra expense and impact of being on reduced maternity and paternity pay was unanticipated.

The cost of childcare was the major factor preventing mothers returning to work.

Parents found their income unexpectedly reduced following the breakdown of a relationship or loss of a job, and would appreciate advice on managing on a low budget.

Parents wanted support with getting back to work, or completing adult education or vocational training.

Parents had faced difficulties with housing whilst pregnant or with a young child and appreciated support from professionals in working through this.

“I don't have a clue about maternity pay, and it could be made a lot easier and less stressful than it is.”

“How to prepare for years of reduced income. Long term money planning”

“Childcare for children with disabilities, it is impossible to hold a job. There is little available or very expensive. Wrap around care is not accessible even once they reach school age.”

What parents value

- Citizens Advice (CAB) advice sessions at some Children's Centres.
- Access to low cost children and family activities.
- Access to activities at a local venue (not incurring travel costs).
- Affordable ideas to entertain children at home.
- Help to establish breastfeeding (free way to feed a baby).

What works? continued

- Help to Stop Smoking.
- Healthy Cooking ideas.
- Access to low-cost childcare.
- Advice and support in applying for grants and benefits.

“The children's centres service is free and as a single mum of three it means my children don't miss out on the things more privileged children get.

I have made excellent friends through the centres and used the speech therapy for my son, clinics, stay and plays and accessed WWRAS* to help me make sure I receive the benefits I am entitled to.

All of this will go a long way to ensure my children don't suffer because of their circumstances. I want the best for my children”

*Warwickshire Welfare Rights Advice Service

Key findings

Living on a low income and reliance on public transport significantly impacts on access to services and activities that support parenting and children's well-being. Free and low cost activities are highly valued.

Our asset mapping exercise found that services which directly support families who are experiencing financial and housing difficulties, are clustered within the towns. These are primarily offered by Citizens Advice Bureau and Food Banks. Families living in outlying areas or rural areas are likely to have difficulties in accessing services. Citizens Advice Bureau funding is also often stretched with a high demand on services.

The asset mapping exercise clearly indicates a major problem for parents living on a low income regarding availability including antenatal services, postnatal services, play and learning and child care activities and services which support mental health.

It is very clear when comparing maps A and B in appendix 3 that free and low-cost services in all localities are delivered primarily by public sector funded services. The mapping exercise indicates significant gaps in provision if public sector funded services are reduced, impacting on children most at risk of poor outcomes living in areas of highest deprivation.

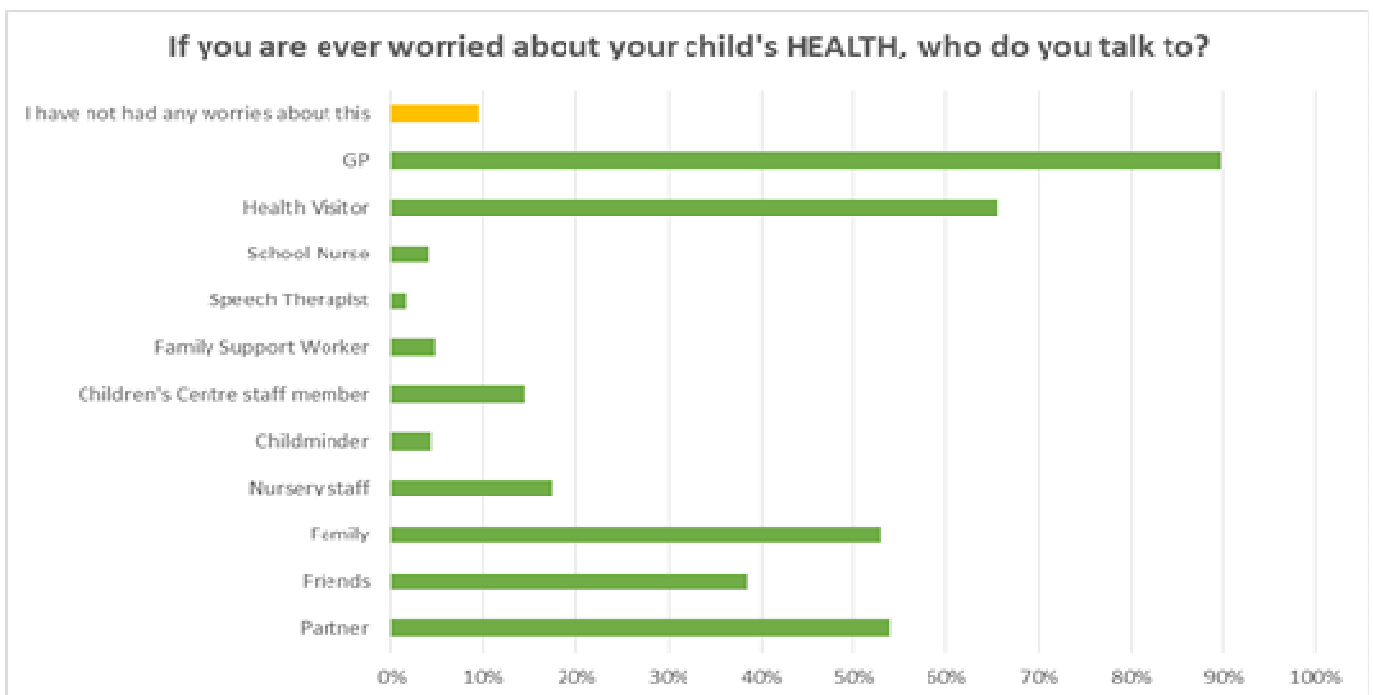
Affordable services and activities are clustered primarily in the towns. Families living in rural areas face an additional barrier to accessing any services including essential antenatal, midwifery and postnatal services and play and learning opportunities.

Child health and emotional wellbeing

Context

Our research showed that parents turn to a wide range of professionals about their child's health or emotional wellbeing.

The critical importance of integrated multi agency practice is highlighted here as well as the importance of facilitating information sharing between services supporting the 0-5 agenda to aid the well-being of young children and facilitate working in partnership with parents who may have contact with a wide range of professionals.



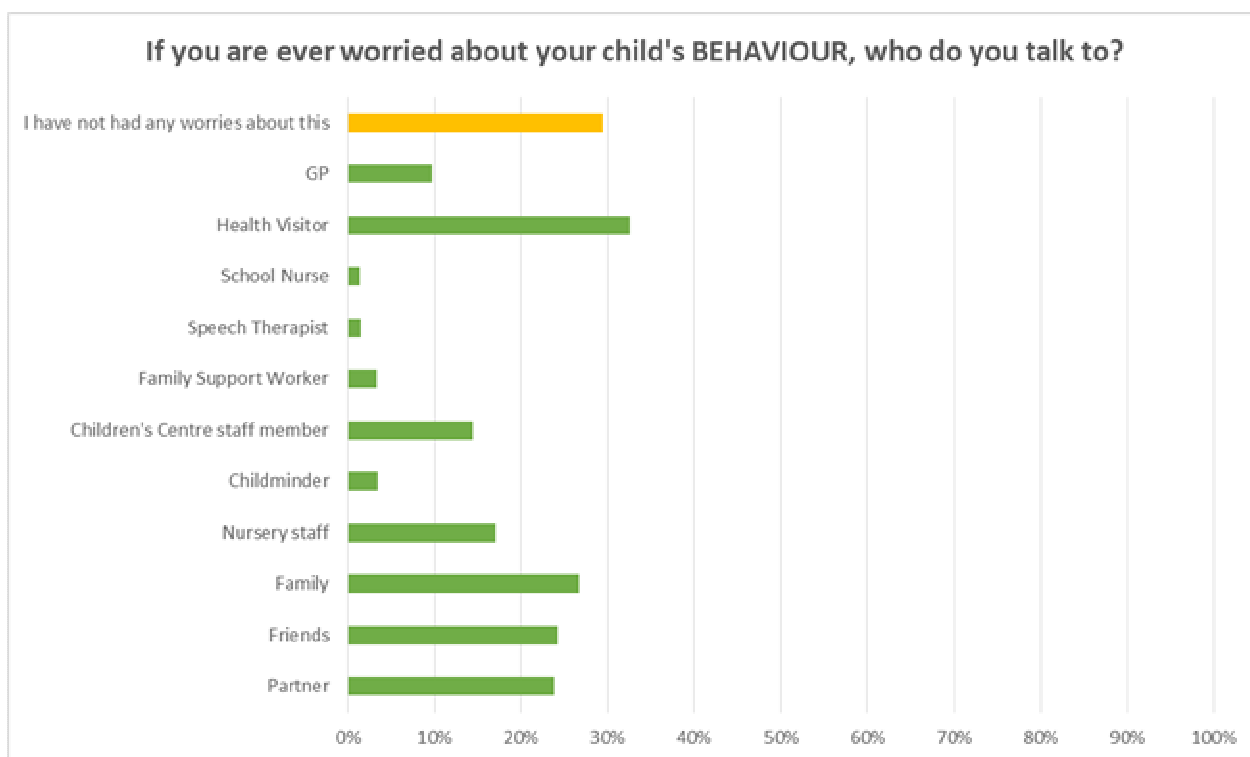
What parents and carers told us

Emotional Well-being

Children's behaviour - not sleeping, not feeding, crying, tantrums, toilet training, often causes significant anxiety for parents.

Having someone to talk things over with can often contain their anxiety and help parents develop positive coping strategies with issues early and as they arise before the situation escalates.

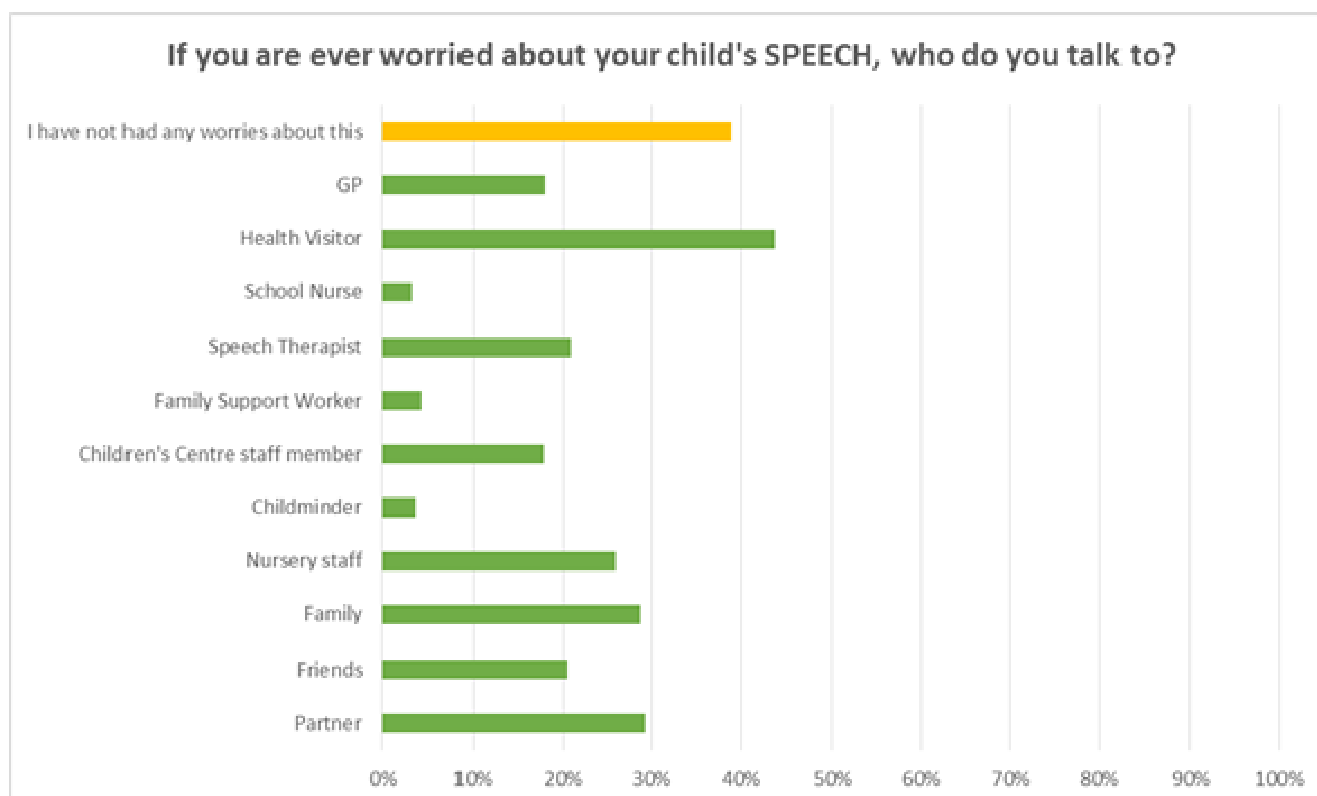
Parents without strong family and friend networks are more dependent upon accessible, immediate support to help them through these challenges.



Speech and Language and communication

Developing effective communication skills in their early years, creates the foundation for children to make relationships and understand the world around them.

We found that over 60% of respondents had had concerns about their child's communication and raised their concerns with a range of professionals.



What parents value

The opportunity to talk concerns over with professional staff eg, nursery workers at drop in advice sessions in children's centres, Chatter Matters groups supporting very early communication, knowledgeable staff e.g. health visitors, children's centre staff, nursery workers.

“It is very frustrating as we have kept hearing "autistic traits" being mentioned but we are going through so many stages to get to a diagnosis. I feel we are "in limbo". It feels secretive and no explanation is given. It's disruptive and unsettling....”

Parents newly arrived from other countries who we spoke to said they need:

Information and advice on how the British health system works.

Who to contact for support and what type of help was available.

Language was also sometimes a barrier to accessing information and filling in forms was often difficult.

Children with additional needs

Parents who had been told they were at risk, or were likely to have, a child with Down's Syndrome felt they had been given little or no information on where they could get support.

Parents with a disabled child felt that they had received little or no information about their child's condition or what support they might receive.

Parents described feeling quite alone, others described the value in receiving specialist information and advice and having the opportunity to network with others in similar situations.

Some parents felt that medical professionals had initially been dismissive of their concerns and gave little information following diagnosis.

Prolonged assessment/diagnosis periods for conditions on the autistic spectrum were often described as being very stressful and isolating.

Some grandparents describe the additional struggles faced by parents and grandparents of children with disabilities who have little support in navigating a complex system and must juggle multiple demands and appointments with other children and work.

Summary

The Mapping process indicates that all free and low cost services across the county supporting children's health and well-being are public sector funded, primarily services offered through the health visiting service, the Time to Talk team, speech and language therapists and physiotherapists offering services either in the children's centres or community venues in some rural villages. The information suggests significant geographical gaps in provision creating barriers particularly in rural areas. See appendix 3 maps a, b and c

Parents have identified commercial sector provision in Rugby and two third sector providers in Warwick District all providing services that support health and wellbeing of very young children as paid for services.

The importance of early intervention There is significant concern about the reduction of children's centre services, which are particularly valued because of the range of professionals and services that could be accessed and their ethos of helping with queries and problems as they arise. Access to early years educators, family support workers, health visitors, speech and language therapists and physiotherapists was highlighted.

Play and learning activities for parents and children together

What parents and carers told us

Parents and carers clearly recognise the benefits for both themselves and their children in participating in group activities which encourage play and learning.

The research indicates that

- Children’s Centres were the most used venues for Play and Learning Activities . 80% families in paid work and 88% families without paid work had used the centres with 42% using the centres many times.
- 60 % families in paid work and 54% families without paid work had accessed activities in other community venues with 40% using other community venues many times.

Location	Families with paid work	Families without paid work
Soft Play Centres	24%	32%
Libraries	21%	11%
Sports Centres	15%	8%
Places of Worship	24%	21%

Barriers to accessing Play and Learning activities

Social unease

18.5% parents highlighted the most common barrier to accessing services or activities was a sense of social unease particularly within group-based activities caused by a number of factors:

- their perception that groups were cliquey or ‘closed’.
- unwelcoming staff or other parents.
- a sense of being ‘different’ to other group members e.g. age - including grandparents and young parents, ethnicity, income, disability, gender or sexuality.
- a child who is ‘different’ may attract unwelcome comments or questions.
- staff or other parents who were too critical, opinionated or judgemental and made hurtful or inappropriate remarks, particularly around parenting.
- parents who are very shy or anxious around strangers and found it difficult to approach strangers. or integrate into existing groups.

Barriers experienced by parents of children with additional needs

- feeling unwelcome at groups or unable to attend.
- noisy environments distressed their child.
- feeling stared at, judged as poor parents or asked awkward questions.
- their child's behaviour attracted unwelcome comments.
- their child could not join in with the activities or was unfavourably compared to other children.

"My son has Downs Syndrome and I was embarrassed to take him..."

"I didn't want to attend groups with my first child as he has disabilities and I didn't want to have to explain to people or have them staring at my child. I found that people are not very inclusive."

Cost

Cost of activities was a barrier for many parents, and Children's Centres were praised for remaining low-cost venues.

The expense of commercial providers, and a pressure to 'block-book' rather than 'pay-as-you-go' which made some activities prohibitively expensive.

"We used to go swimming at Oakfield, but the classes there are VERY expensive. We've tried them at Rugby school and the sports centre and have ended up going to Lutterworth."

Transport

As the maps indicate in appendix 3 travel increased the costs prohibitively for many parents, particularly those living in rural areas. Many parents were unable to travel out of their local area to access activities and services, because they had no car, no public links to the areas they needed to get to, or could not afford the cost of public transport.

"Transport is really expensive and makes getting around very difficult. A return bus ticket to Nuneaton is £7.00..."

"I would like more activities to be available in my local area. I sometimes go to Nuneaton library but it's not easy with twin toddlers. Used to have a singing/dancing toddler group here but it stopped."

Language and literacy

Some parents who had English as an additional language or literacy problems were worried about attending a Children's Centre group where they might be asked to fill out a form.

Timing

Parents and carers who work would like to attend play and learning activities in the evening or at weekends. Other parents were enthusiastic about attending but found sessions clashed with their child's sleep times or with pick-up or drop-off times for other children.

Fear

A few parents avoided Children's Centres and other groups run by professionals because they feared staff would 'see through' them and realise they had difficulties at home or weren't coping well – they were worried social services would be automatically contacted or that they would be singled-out or judged as bad parents.

More than one child

Several parents found they could not attend groups with twins or several siblings because there was not room for large buggies, or they needed some support from staff in managing two or more small children.

Environment

Some parents felt playgroups and soft play centres were unsafe, particular if there is a mix of babies and boisterous toddlers or frequently got overcrowded.

Others felt playgroup toys and equipment seemed unclean, particularly an issue for some parents whose children had chronic health conditions or low immunity.

Some parents or children disliked the noise and crowdedness of groups, or simply felt uncomfortable in large groups. This was particularly an issue for parents with anxiety, or parents or children who were shy or on the autistic spectrum.

Some parents did not wish to attend activities at a church, as they do not consider places of worship to be 'neutral' venues.

Grandparents' experience

Several grandparents who responded, have become the main carer of their grandchild. They describe the lifestyle change and feelings of loneliness and isolation.

Grandparents appreciate and need free, low cost services which are easy to access. Grandparents on a low income noted that services seemed to have become scarcer since 'the cuts'.

Language barriers can be a particular issue when filling out forms and assessments.

Grandparents often provide childcare throughout the year so that parents can work, and find this can be challenging, particularly when entertaining children of various ages throughout school holidays and over weekends.

Grandparents describe the family burden of looking after children alongside frail or ill elderly relatives or a mother with postnatal depression.

Grandparents felt that groups and activities develop children's confidence and ability to interact socially.

Joining in helps grandparents integrate with their community.

Grandparents enjoy the opportunity to be part of a grandchild's life and to help working parents.

What Grandparents said they valued

Grandparents' groups and support for those grandparents acting as guardians or carers.

Support to maintain our own quality of life
Low cost, affordable activities

More activities and groups, including in the afternoon and at weekends.

School holiday clubs and activities for children and teens

Guidance and support in looking after relatives of all ages with physical or mental health problems, including postnatal depression

Up to date guidance on behaviour management (many years since parenting a small child).

Summary

Children's Centres were the most helpful source of activities for 42% of respondents. Around 20% of parents or carers felt a play-group run by another community venue or place of worship was the most useful.

Having groups that were led or attended by professionals, who could provide advice and support in an informal and relaxed setting.

Having group leaders who helped new members, or those who found socialising with strangers difficult, to interact with established group members.

For offering an interesting range of high quality, affordable, local activities open to everyone.

For offering a safe, spacious environment.

Having staff willing to support mothers with the supervision of several young children.

"I felt comfortable attending the Children's Centre groups, and that gave me confidence to go to other groups."

"I like play groups because they are cheap. A lot of classes are expensive when you're on maternity pay."

"Crochet and Knitting Group...They're very welcoming and don't mind the babies being there...It's very caring, as soon as you get there they say "let's make you a cup of tea." It lightens me up, we have some giggles and I think having the different generations from a different era helps. They understand how hard a morning can be and there's no cliques or bitchiness in the group"

Of this 20%, around 6% attended groups based at their local church which were valued for being especially accepting of additional needs, of having a welcoming atmosphere or offering practical support (e.g. providing informal emotional support, help with childcare or providing refreshments).

"The BEC (Bilton Evangelical Church) group for special needs...It's been a lifesaver otherwise we'd have been stuck in the house."

How do parents and carers find out what is going on?

Parents and carers use a wide range of sources to find out what there is to do in their local area though there is a significant difference in where people access information with families who are more affluent searching the internet, talking with other professionals or friends and family.

Summary continued

Parents and carers clearly value welcoming, inclusive play and learning activities, led by knowledgeable staff who they can turn to for advice and support when they need it.

The mapping exercise regarding play and learning activities for children and parents together indicated some significant and interesting differences across the county. This table collates information gathered from parents between February and May 2016 and will not be a fully comprehensive picture of provision. What the information gathered cannot demonstrate, is quality of service or patterns of engagement. We did find however that in Rugby and Warwick there appeared to be higher levels of community capacity to provide play and learning see appendix 3 maps s, t, u and v.

Play and Learning activities for children 0-5yrs

Districts	Free/ Low cost		Charged for	
North Warwickshire District	Public sector funded	6	Public sector funded	2
	Community provider	6	Community provider	11
	Third sector organisation	0	Third sector organisation	0
	Commercial provider	0	Commercial provider	5
Rugby District	Public sector funded	10	Public sector funded	2
	Community provider	4	Community provider	22
	Third sector organisation	0	Third sector organisation	2
	Commercial provider	0	Commercial provider	10
Warwick District	Public sector funded	16	Public sector funded	1
	Community provider	21	Community provider	19
	Third sector organisation	1	Third sector organisation	2
	Commercial provider	0	Commercial provider	20
Nuneaton and Bedworth District	Public sector funded	3	Public sector funded	5
	Community provider	3	Community provider	10
	Third sector organisation	1	Third sector organisation	0
	Commercial provider	0	Commercial provider	8
Stratford District	Public sector funded	19	Public sector funded	11
	Community provider	3	Community provider	29
	Third sector organisation	0	Third sector organisation	4
	Commercial provider	0	Commercial provider	19

Parenting Support and Parenting Courses

Context

What parents and carers clearly value and find supportive, are services and activities which are easily accessible, welcoming and respectful and available when their concerns arise.

What parents told us

A number of respondents said they had not felt confident in their ability to be a good a parent and valued opportunities to get parenting advice from;

- Network of family/friends,
- Group activities
- Talking with other parents
- Professionals to help prevent problems escalating and for parents of children with additional needs or families in crisis
- Books and internet sites

Many people felt that although they had received a good deal of advice managing a baby, there was far less guidance available for coping with the demanding pre-school years (2-5 years).

“No-one talks about the hard times after the baby is 6 months old, how to cope with demanding older babies and toddlers, the long term view, not having a child who sleeps. The long term parenting.”

Several families had found that the birth of a child negatively impacted on the behaviour of an older sibling, and needed support in managing their behaviour and supporting them in their adjustment.

“I had no support from my family when the baby was born and my first child really struggled...the Health Visitor put me in touch with the Children's Centre. A family support worker came to my home to do some Triple P with me.”

Parenting courses

Parents and carers were asked if they had been on a parenting course. Triple P was the most commonly named programme, and several people noted that the programme was more easily accessible. Other programmes named included;

- The Solihull Approach
- The Nurturing Course
- Family Nurse Partnership programme (FNP)
- Baby Steps
- Child Interaction Therapy
- Kids in the Middle
- The Autism course
- Video-interaction guidance sessions run by Warwick University

“Triple P was helpful; I had problems with my child not sleeping, refusing to go into bed and settle and then coming into my bed during the night. The course really helped me with learning how to handle the situation and as a result she sleeps fine now and we don’t have any issues at bed time or through the night.”

“I’m proud I’ve got my own place and can stand on my own two feet...I get support from his Dad and I’d recommend the FNP to anyone, especially a young parent. I thought how am I going to cope? I do struggle with him not sleeping and nobody tells you how hard it is...but I know that I have to sit and try reading with him and talk to him, I have to make sure he has my time, to help his development. My FNP keeps in touch. She’ll text me or ring me and say ‘If you have a question just get in touch.’”

Parenting Support Key Findings

The findings indicate that resources for parenting courses are focused primarily on families facing the most significant life challenges. See appendix 4

33% respondents living in poverty compared to 21% respondents in paid work had accessed a parenting course.

34% parents and carers with a child with a disability compared to 11% parents and carers with a child without a disability had accessed a parenting courses.

The mapping exercise indicates that across the county, parenting courses i.e. Baby Steps, Triple P, The Nurture Program and the Freedom Programme are delivered through public sector funded services are offered in venues in the towns, creating access problems for parents and carers living in rural areas and without transport.

If offered in a spirit of support rather than as a threat or punishment, parenting courses can be very helpful to parents, who can learn new strategies and most importantly develop peer support networks.

Key messages are from Parents and Carers in Warwickshire

Parents and Carers in Warwickshire need and value:

- High-quality services which are local and affordable.
- Led by knowledgeable, professional, non-judgemental staff.
- Enabling them to retain and develop protective social networks which support them in giving their children *“The best start in life”*.
- Our research indicated that parents and carers value and benefit from non-stigmatising, universal services which they can choose to use.
- Parents and carers also highlighted the importance of having access to specialist advice early on to address concerns and to prevent problems from escalating.
- The reduction in children’s centre services is of concern to many parents and carers who accessed centres with a previous child who also highlighted Church and other community groups as important providers of activities.

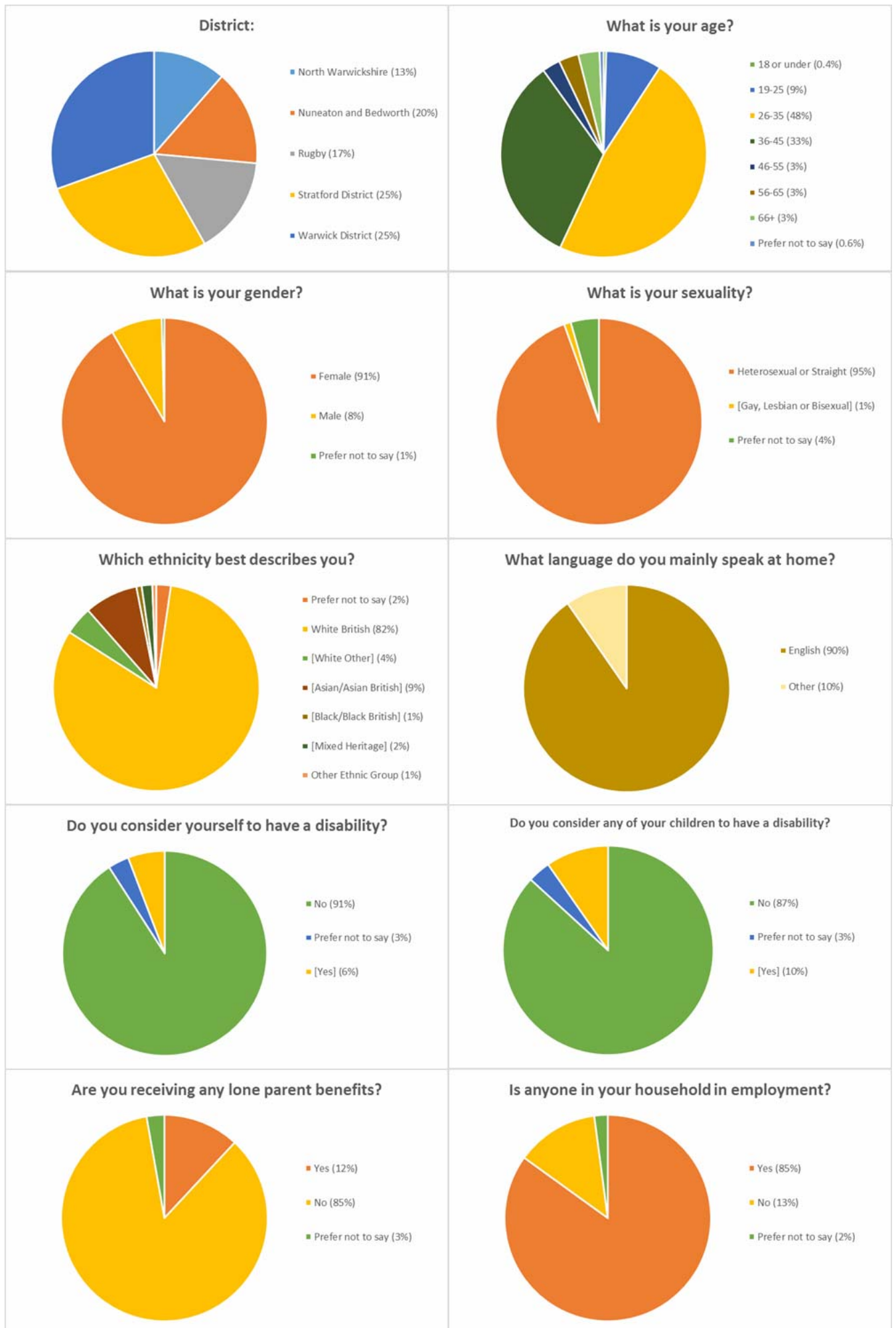
The level of involvement in this research indicates a high level of interest in the developing 0-5’s agenda across the county. Parents and carers know what is working, where the gaps are and have shared some of their service development ideas.

Our Asset Mapping Exercise showed:

- That if publicly funded services are reduced, parents and carers in many parts of the county would be left with no access at all to affordable support, play and learning opportunities unless alternative arrangements are made.
- a significant variation in patterns of delivery across the county suggesting a lack of coordinated overall strategic approach and ‘pockets’ of best practice.

Through listening and honest dialogue, the knowledge and energy of parents and carers of 0-5’s within Warwickshire could be used very effectively to develop and shape the county’s Smart Start Strategy.

Appendix 1: Demographic Profile of Consultation Respondents



1. [mums] During your most recent pregnancy where did you get your support? (please choose as many as you like)

- Partner
- Friends
- Family
- Social media or apps
- Information on the internet
- Online chat forum
- Midwife
- Health Visitor
- Hospital
- GP
- Somewhere else not listed above (please specify)

2. [mums] What did you find most helpful?

3. [mums] Did you go to any antenatal (parentcraft) classes?

- Yes
- No

4. [if yes to Q4] You said that you went to an antenatal (parentcraft) class during your most recent pregnancy. Which one(s) did you go to?

- Baby Steps
- NCT
- Bump to 3
- Community Midwives (Parentcraft)
- Family Nurse Partnership
- Hospital antenatal classes
- Hypno birth
- I went to an antenatal (parentcraft) class not listed above (please specify)

5. [if no to Q4] You said that you did not go to an antenatal (parentcraft) class. Was this because:

- I didn't think it would be for me
- I didn't know what was on offer
- It was too far away
- It was too expensive
- A different reason (please specify)

6. [mums] During your most recent pregnancy, did you get enough support with preparing for birth?

- Yes, I had all the support I needed
- No, I would have liked a bit more support
- No, I would have liked a lot more support

7. [mums] What might have been helpful in preparing for the birth of your baby?

8. [dads] When you were getting ready to be a parent, where did you get support?

- Partner
- Friends
- Family
- Antenatal (parentcraft) class
- Information on the internet
- Online chat forum
- Social media or apps
- Somewhere else not listed above (please specify)

9. [dads] What did you find most helpful?

10. Did you get enough support with getting ready to be a parent?

- Yes, I had all the support I needed
- No, I would have liked a bit more support
- No, I would have liked a lot more support

11. What might have been helpful in preparing for becoming a parent?

12. After your baby was born, where did you get your support? (please choose as many as you like)

- Partner
- Friends
- Family
- Children's Centre (Parent and Baby Group)
- Place of Worship (Parent and Baby Group)
- A community group (Parent and Baby Group)
- Information on the internet
- Online chat forum
- Social media or apps
- Midwife
- Health Visitor
- GP
- Somewhere else not listed above (please specify)

13. Have you ever been on a course to support you with being a parent?

- No
- Yes- Baby Steps
- Yes- Family Links
- Yes- Triple P
- Yes- course not listed above (please specify)

14. Of all the support you received after your baby was born, what did you find most helpful?

15. What was missing that would have helped?

16. Thinking about all of your children under the age of 5, have you been to any of these play activities or groups? (please choose as many as you like)

- Chatter Matters
- Stay and Play
- Story Time
- Toddler Gym
- Parent and Baby Group
- Parent and Toddler Group
- a play activity or group not listed above (please specify)

17. Have you ever been to play activities and groups at any of these places?

Never Once or twice A few times Many times

At a Children's Centre

What is the name of the venue and group?

At a Library

What is the name of the venue and group?

At a Sports Centre

What is the name of the venue and group?

At a Soft Play Centre

What is the name of the venue and group?

At a Place of Worship

What is the name of the venue and group?

At another venue in the community

What is the name of the venue and group?

18. Which play activities and groups have been most helpful?

19. Has anything ever stopped you going to a play activity or group?

- No
- I didn't think it would be for me
- I didn't know what was on offer
- It was too far away
- It was too expensive
- A different reason (please specify)

20. What do you think are the benefits of going to a play activity or group?

- My child gets to try new activities
- My child is able to make friends
- I get to meet other parents
- I get to find out what is going on in the local area
- I am able to get support or advice
- Other benefits not listed above (please specify)

21. If you are ever worried about your child's health, speech and communication, or behaviour, who do you talk to?

	For health worries	For speech or communication worries	For behaviour worries
Partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nursery Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Childminder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Children's Centre staff member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family Support Worker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speech Therapist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Nurse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health Visitor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have not had any worries about this	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. And where do you look for support?

	For health worries	For speech or communication worries	For behaviour worries
Children's Centre	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Library	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School or nursery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical centre	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Out of Hours GP service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A place of worship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I look for information on websites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I use an online chat forum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I use social media or apps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I don't know where to find the support I need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

23. Where else do you go for support about these things?

Health worries

Speech
or communication
worries

Behaviour worries

Other worries

24. Which of these have been most helpful?

25. When you are feeling fed-up or low, who do you talk to?

- Partner
- Friends
- Family members
- Children's Centre staff member
- Family support worker
- IAPT
- Nursery worker
- Health visitor
- GP
- Someone else not listed above (please specify)

26. And where do you look for support?

- A Children's Centre
- A Medical Centre
- IAPT
- A Library
- A Place of Worship
- I look for information on the internet
- Online chat forum
- Social media or apps
- I don't know where to find the support I need
- Somewhere else in the community not listed above (please specify)

27. If you were worried about money or housing, who would you ask for help and advice?

- Partner
- Friends
- Family members
- Children's Centre staff member
- Family support worker
- Advice worker
- Housing support worker
- Someone else not listed above (please specify)

28. And where would you look for support?

- A Children's Centre
- A Housing Office
- A Citizens Advice Bureau
- A Money Advice Centre
- A Library
- A Place of Worship
- Look for information on the internet
- Online chat forum
- Social media or apps
- I don't know where to find the support I need
- Somewhere else in the community not listed above (please specify)

29. How would you find out about activities for your child?

- Ask Friends or Family
- Ask at a Children's Centre
- Ask at a Library
- Ask at a Place of Worship
- Contact the Family Information Service
- Ask a Health Visitor or GP
- Look for information on the internet
- Search the Warwickshire Directory
- In other ways not listed above (please specify)

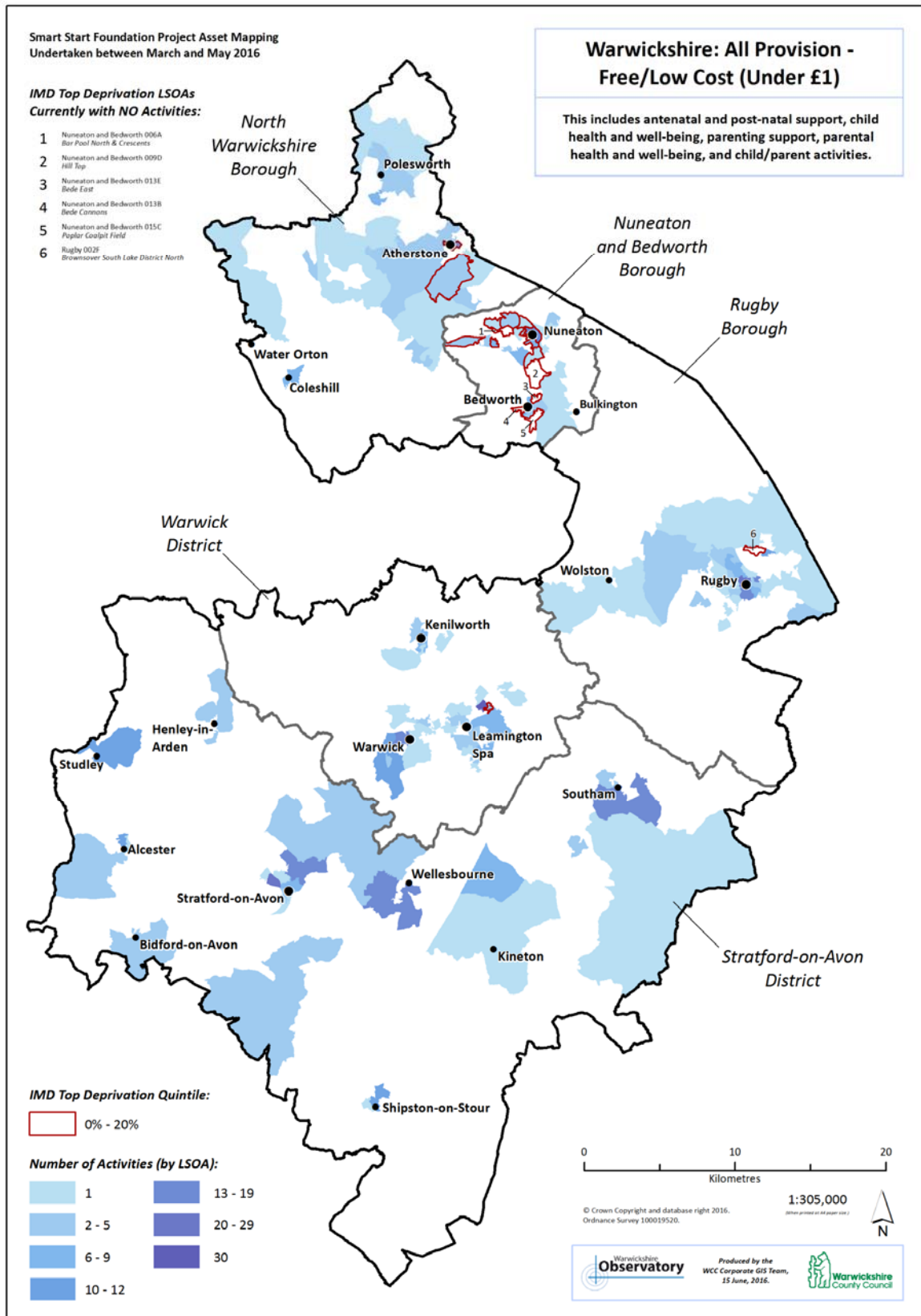
30. If you wanted to find out about local nurseries or childminders, who would you ask?

- Friends or family
- Family Information Service
- Children's Centre
- Look for information on the internet
- Somewhere not listed above (please specify)

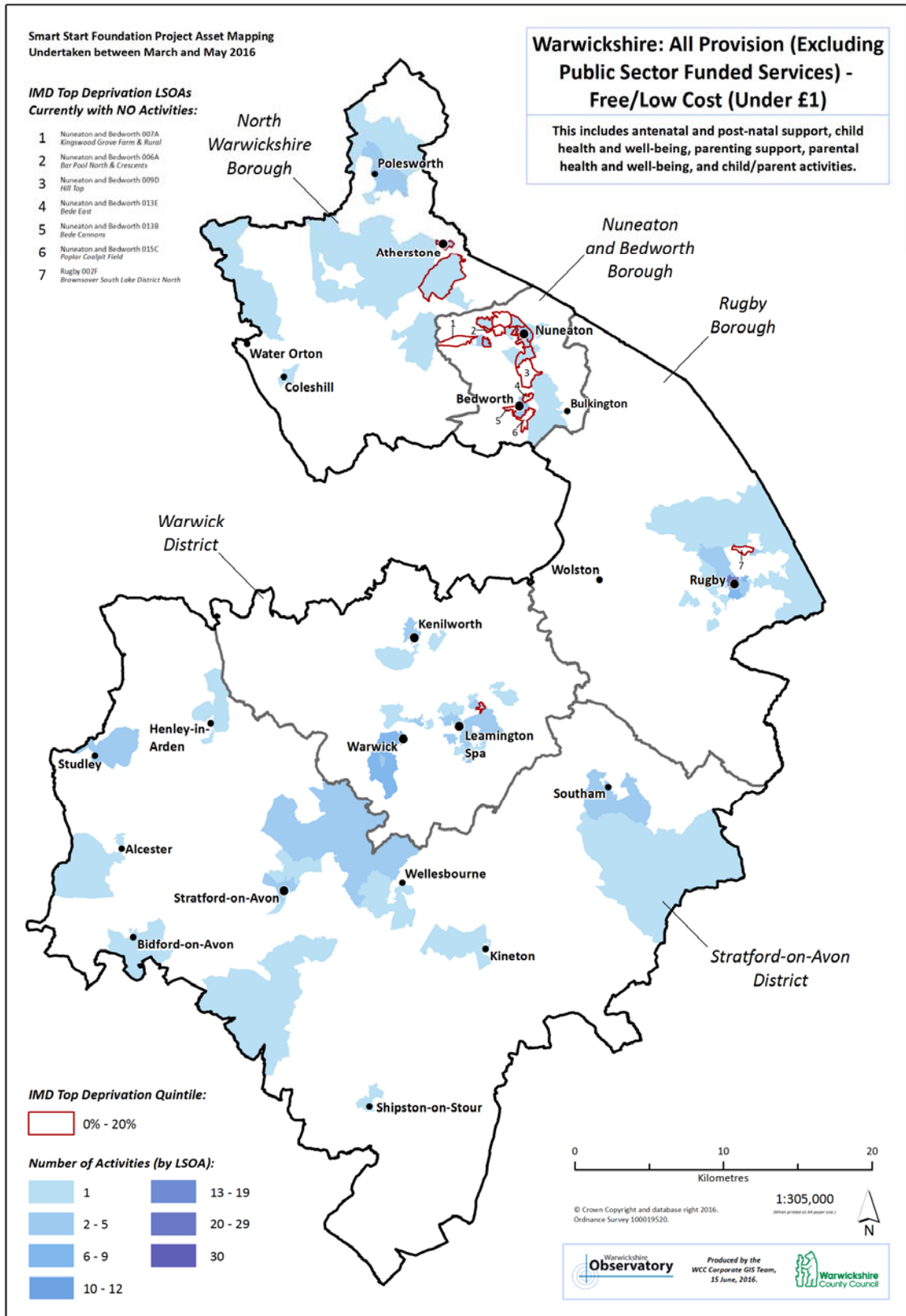
31. And finally, is there anything else you would like to say about what is helpful in supporting you as a parent?

32. Or anything that is missing that would help?

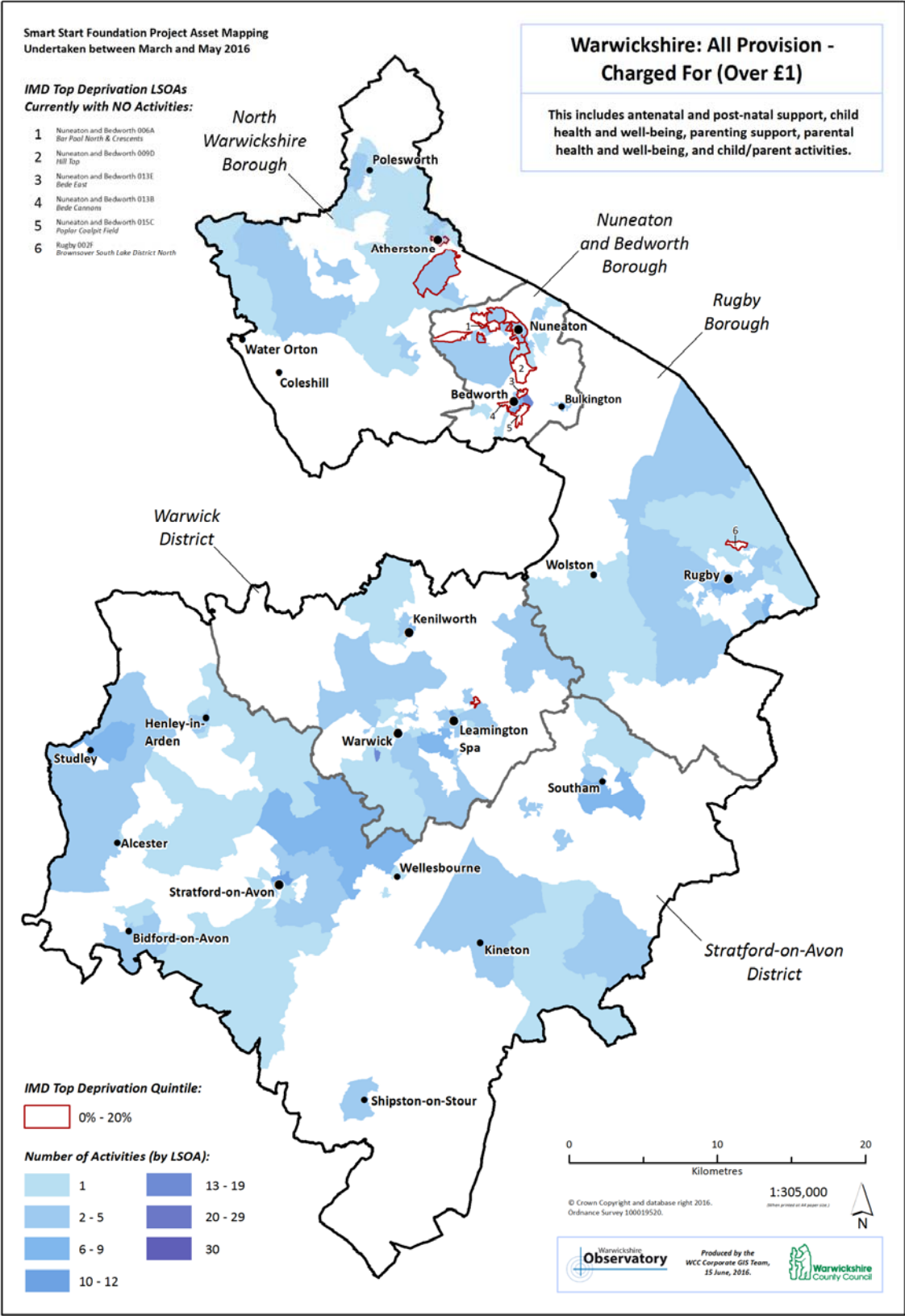
Appendix 3: Maps of Assets in Warwickshire supporting families with children ages 0-5



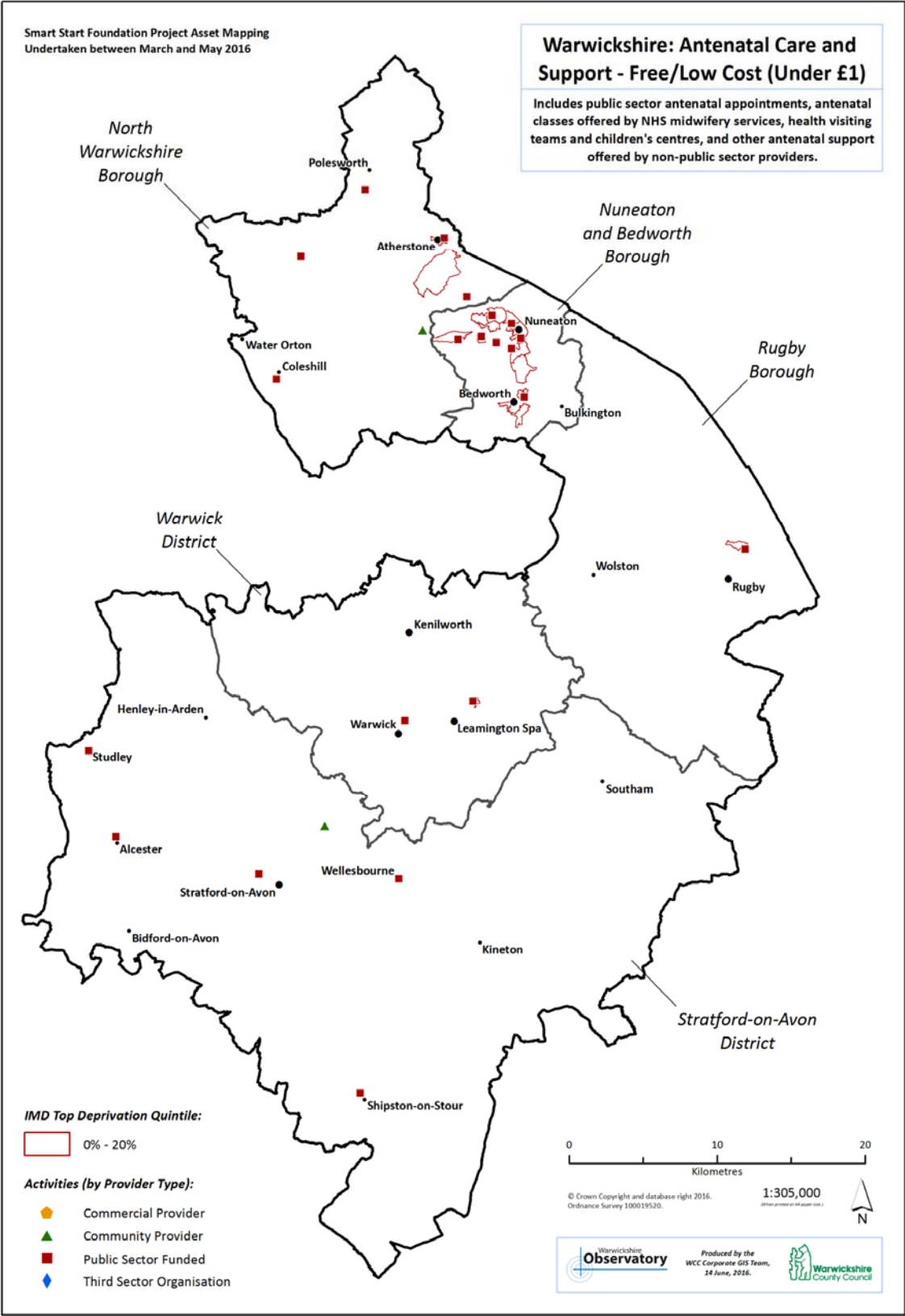
Map A: Overview of all free/low cost support in Warwickshire for families with children aged 0-5



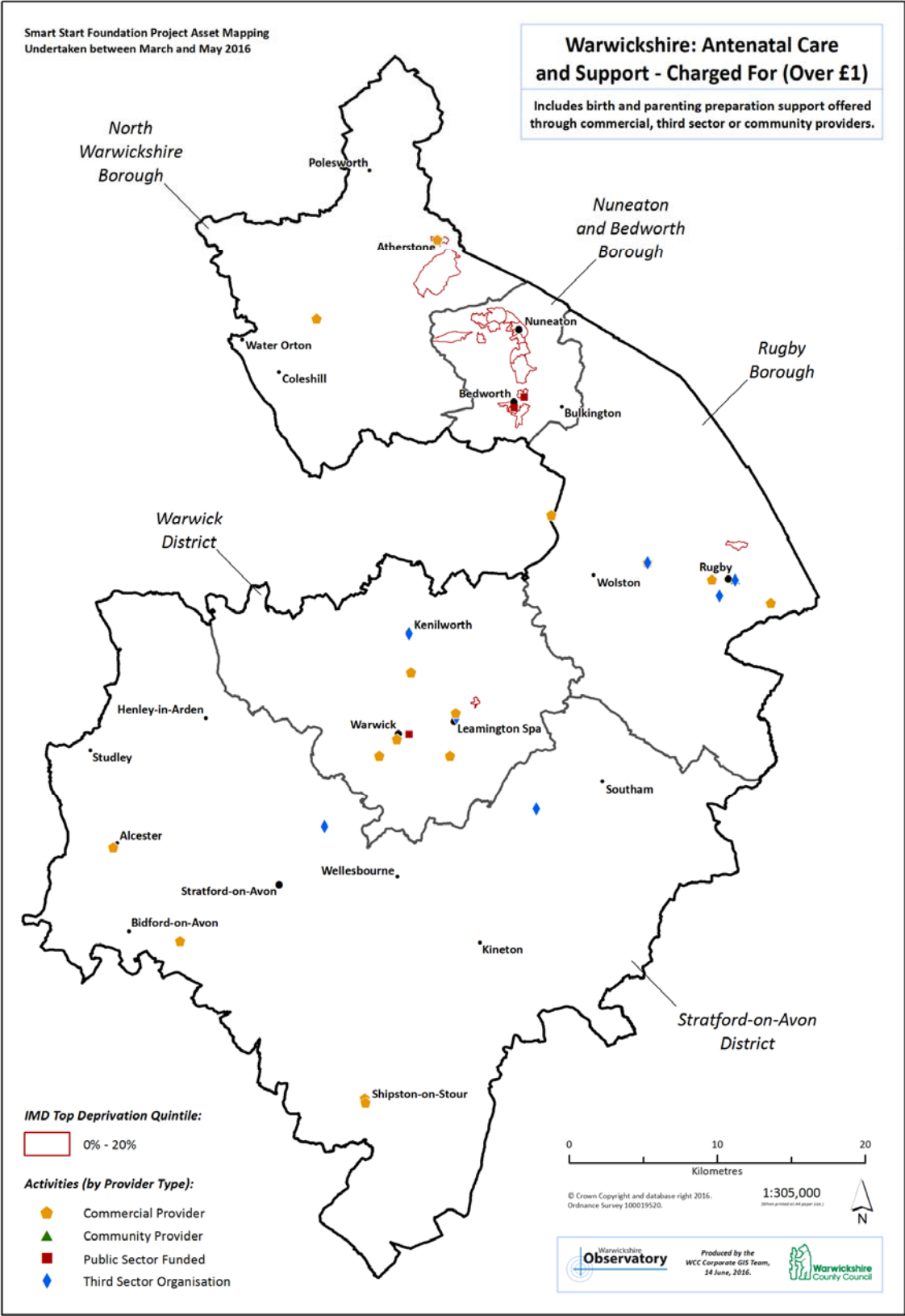
Map B: Overview of all non-public sector funded free/low cost support in Warwickshire for families with children aged 0-5



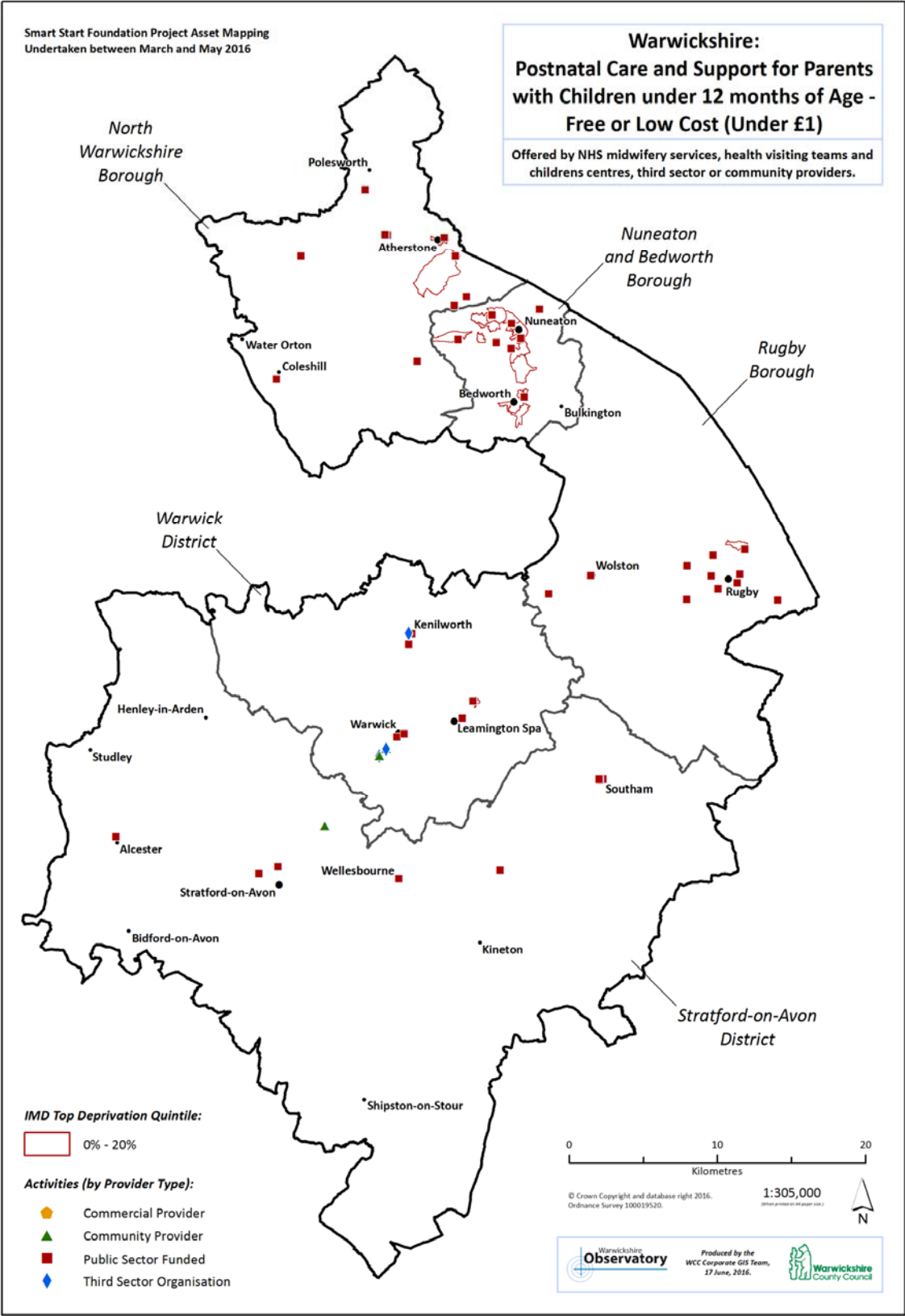
Map C: Overview of all charged-for support in Warwickshire for families with children aged 0-5



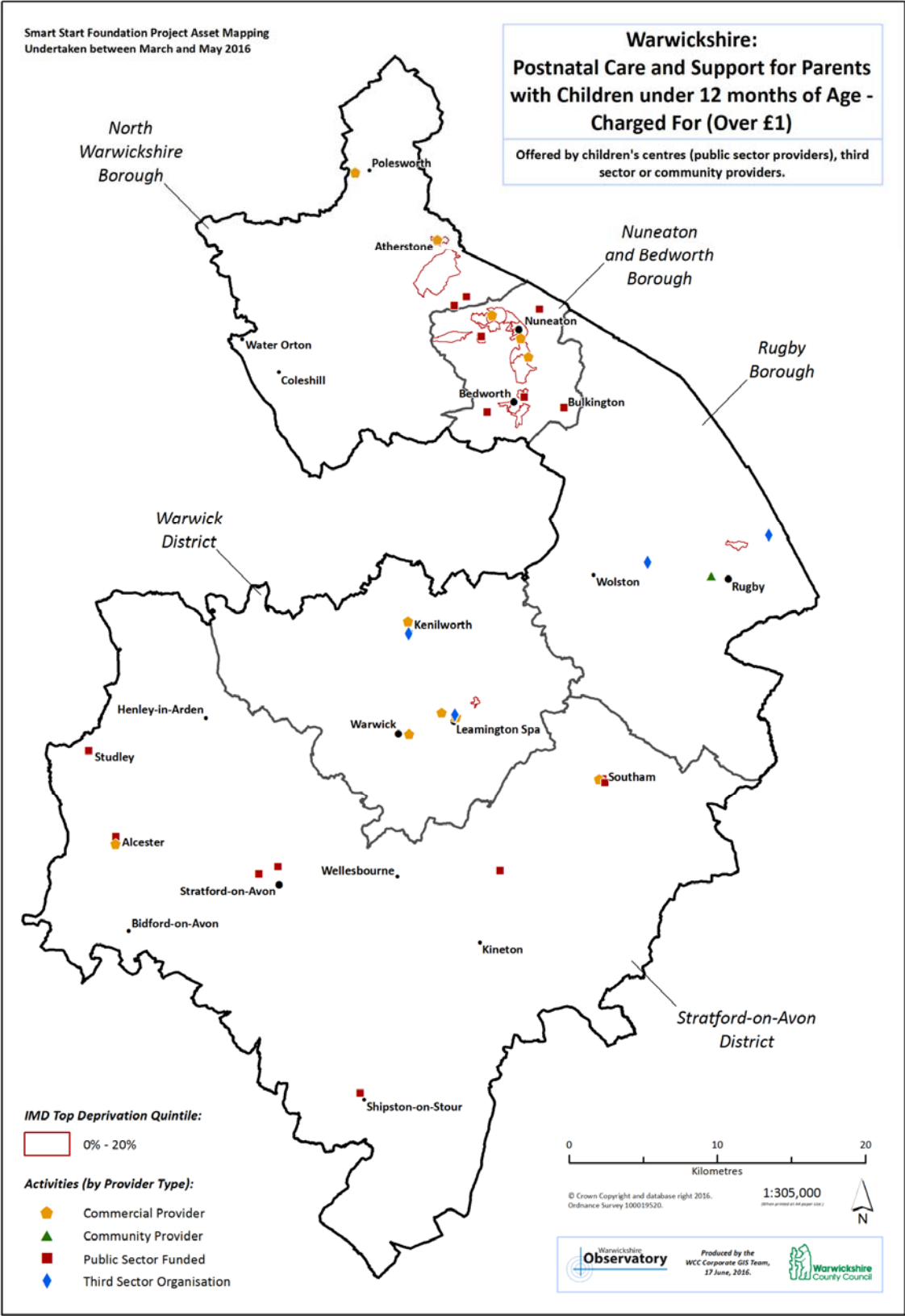
Map D: Free/low cost antenatal support in Warwickshire



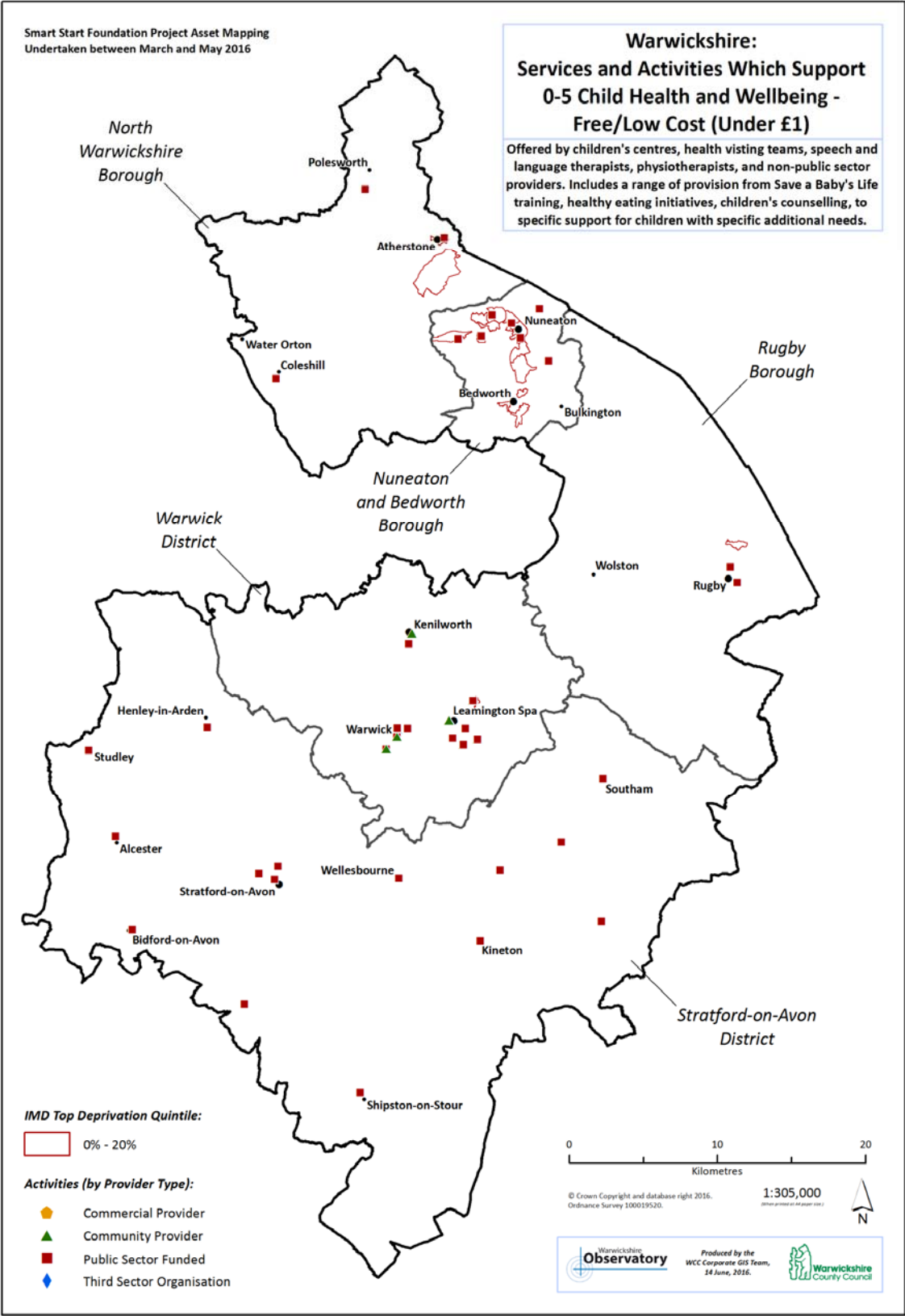
Map E: Charged-for antenatal support in Warwickshire



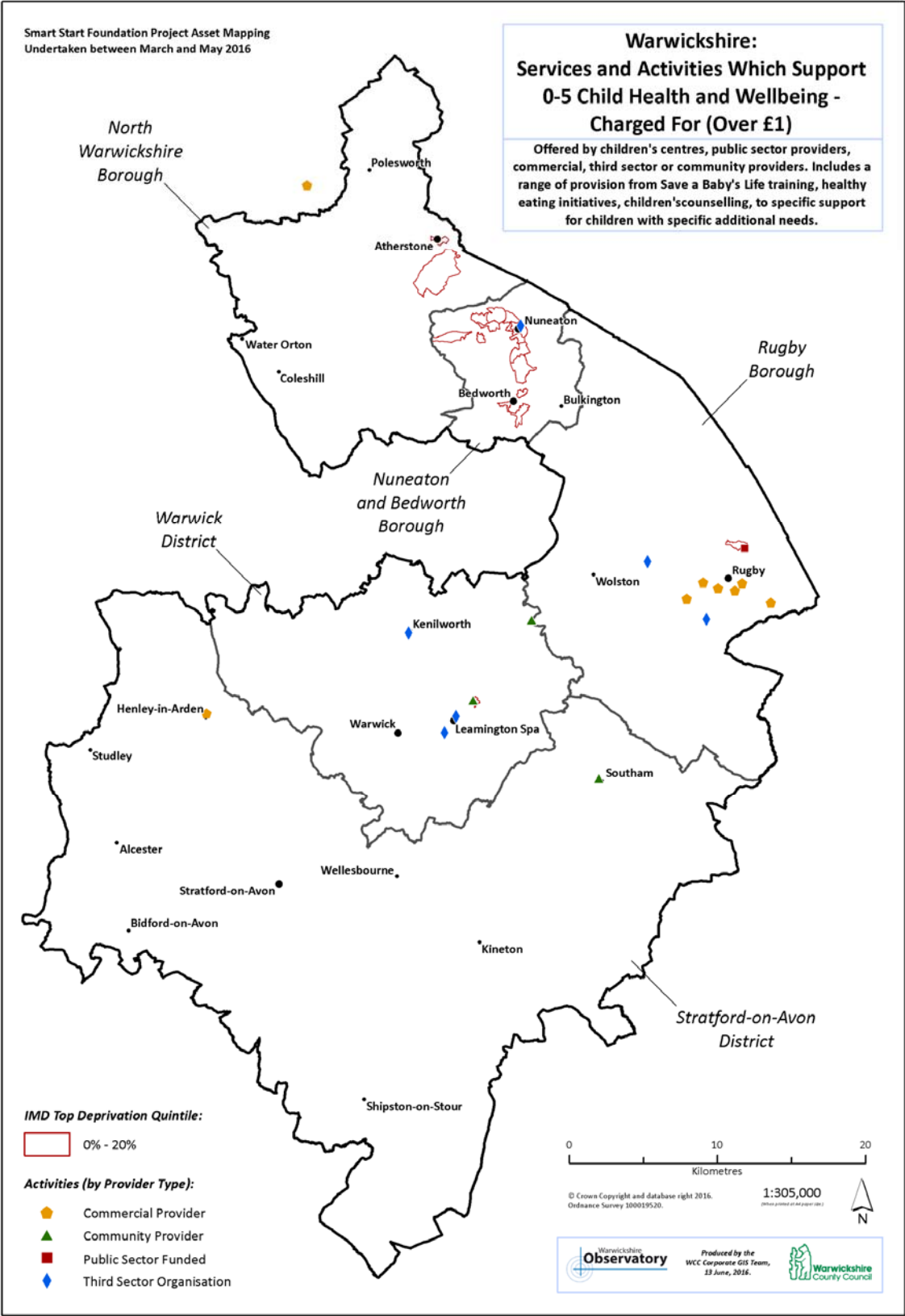
Map F: Free/low cost support in Warwickshire for families with children under 12 months



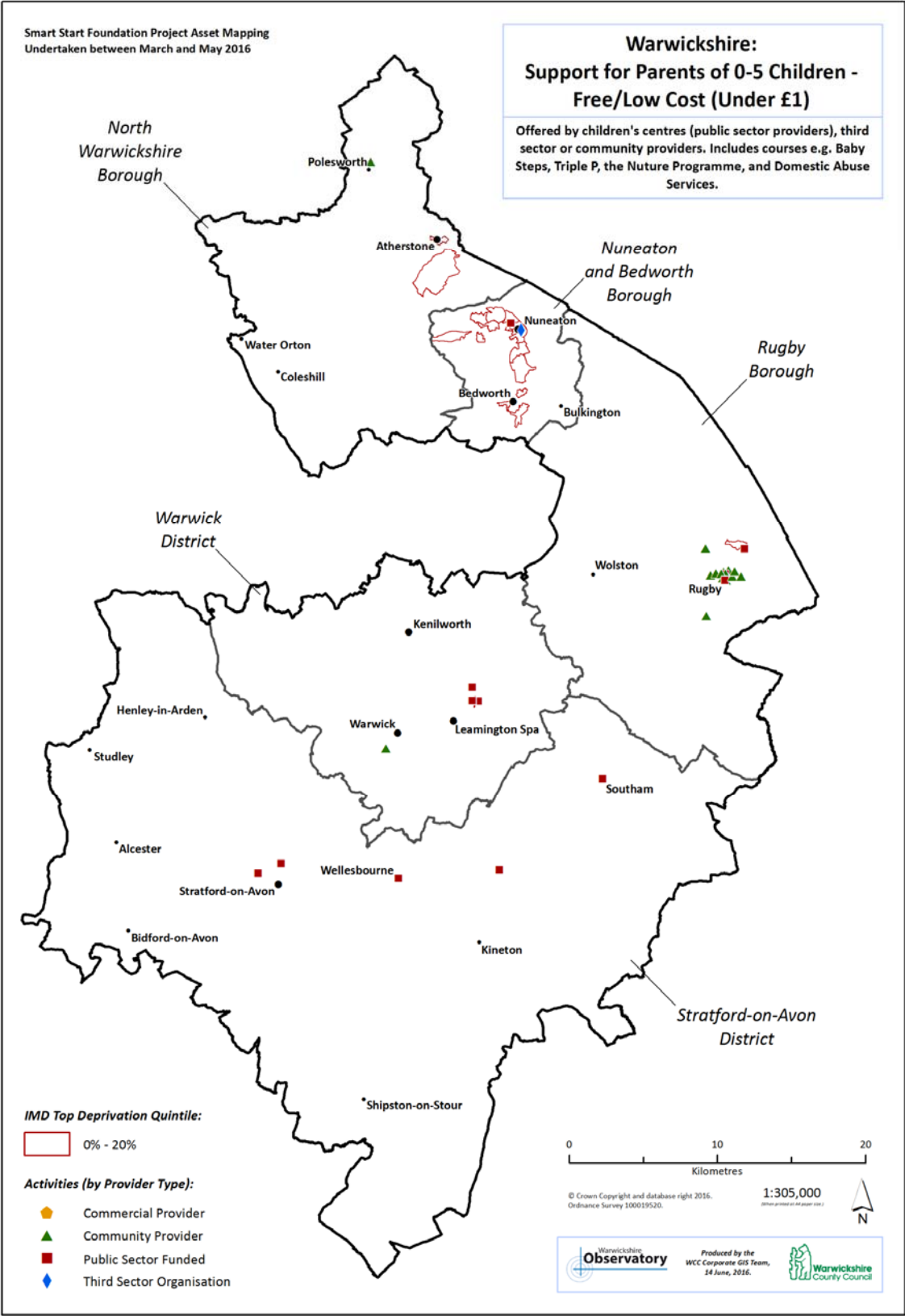
Map G: Charged-for support in Warwickshire for families with children under 12 months



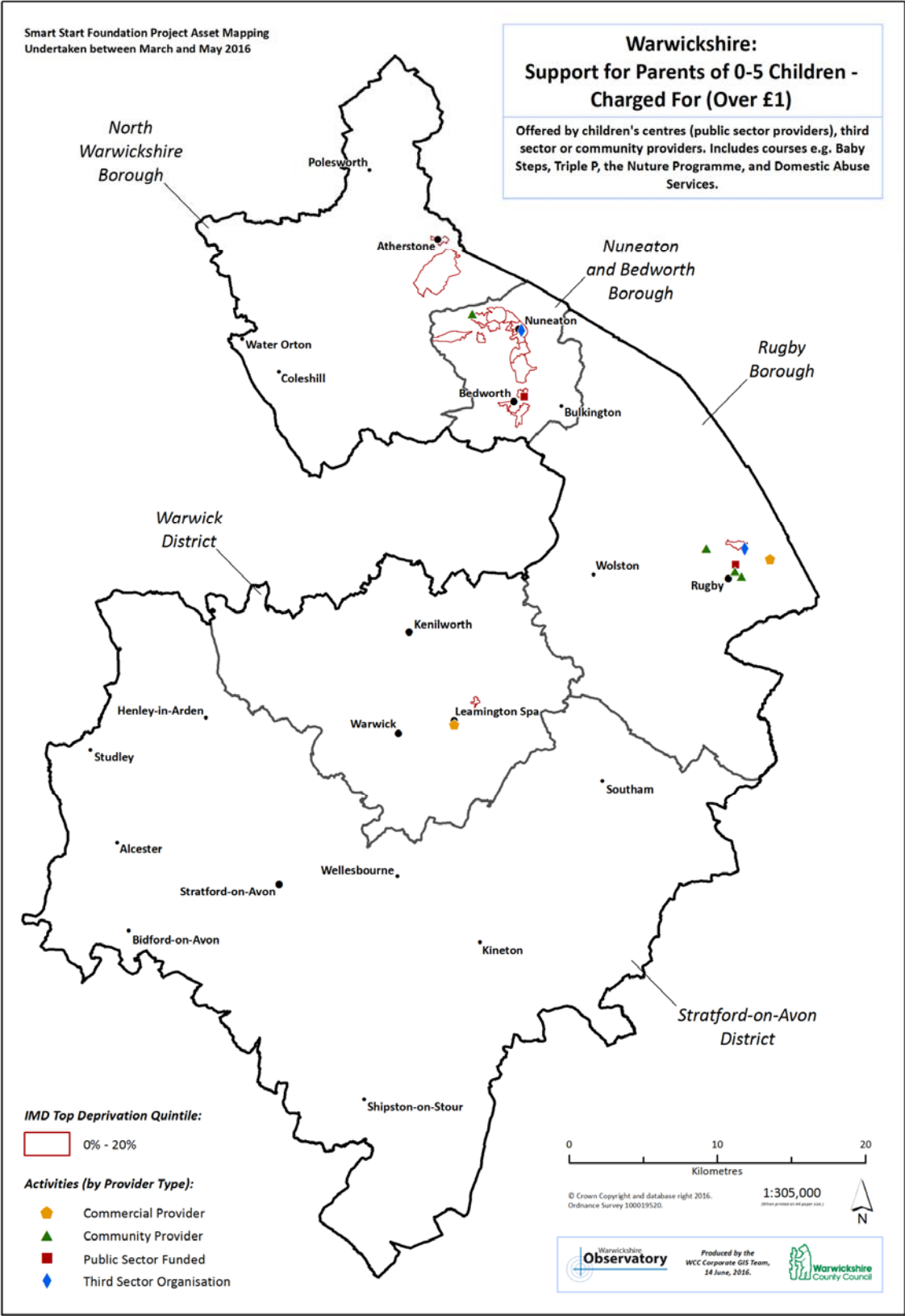
Map H: Free/low-cost support in Warwickshire for health and wellbeing of children aged 0-5



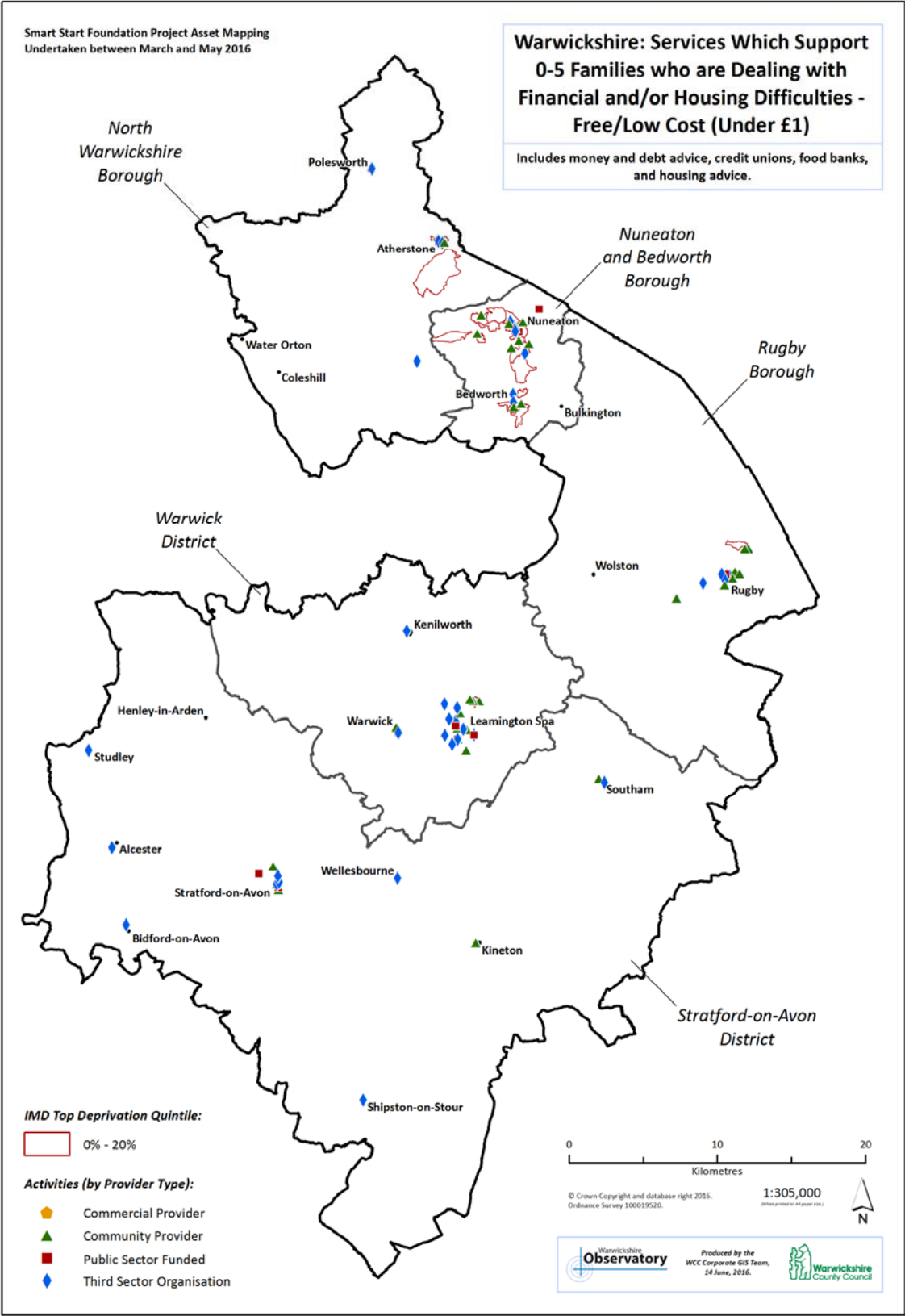
Map 1: Charged-for support in Warwickshire for health and wellbeing of children aged 0-5



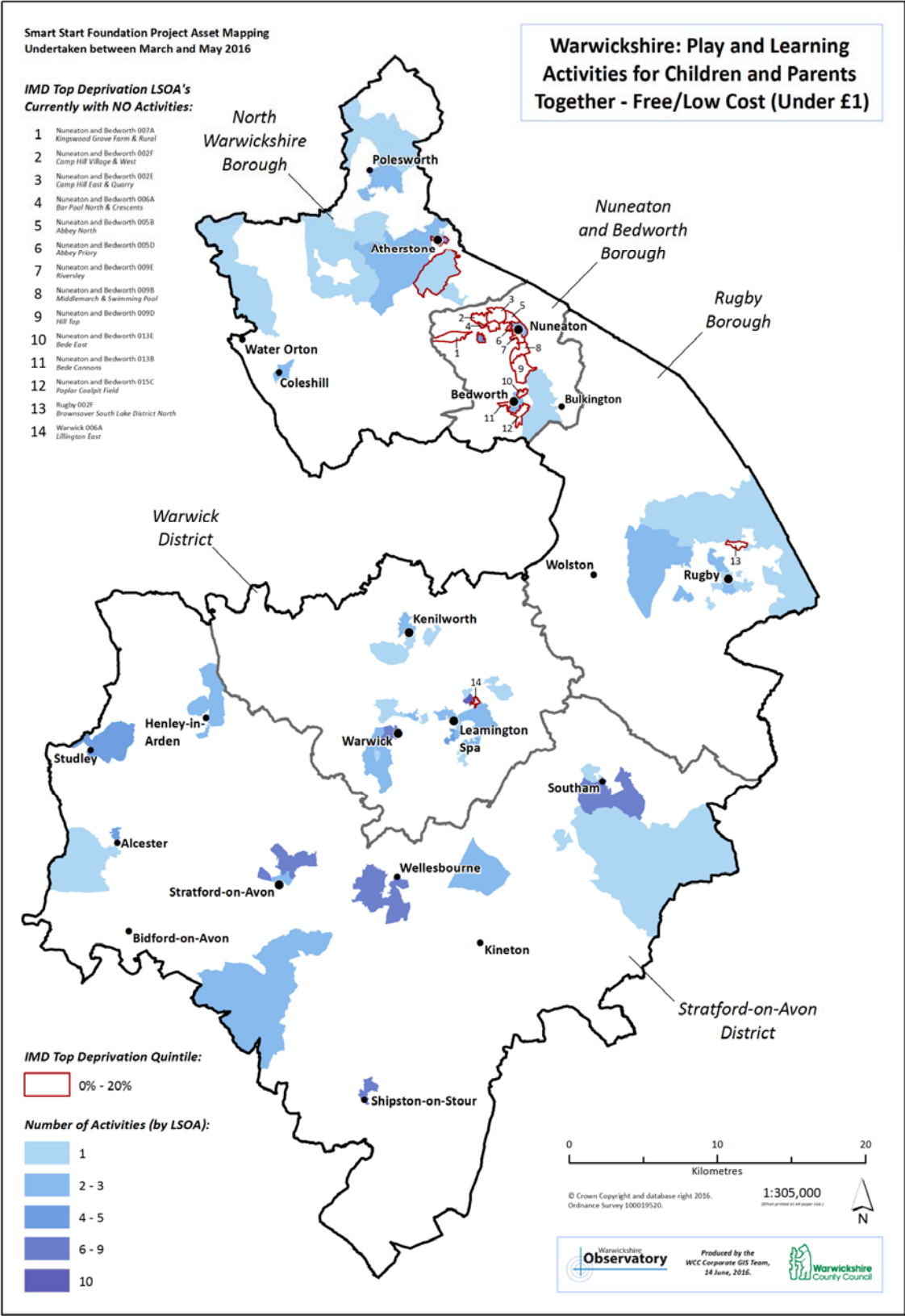
Map J: Free/low-cost support in Warwickshire for parents with children aged 0-5



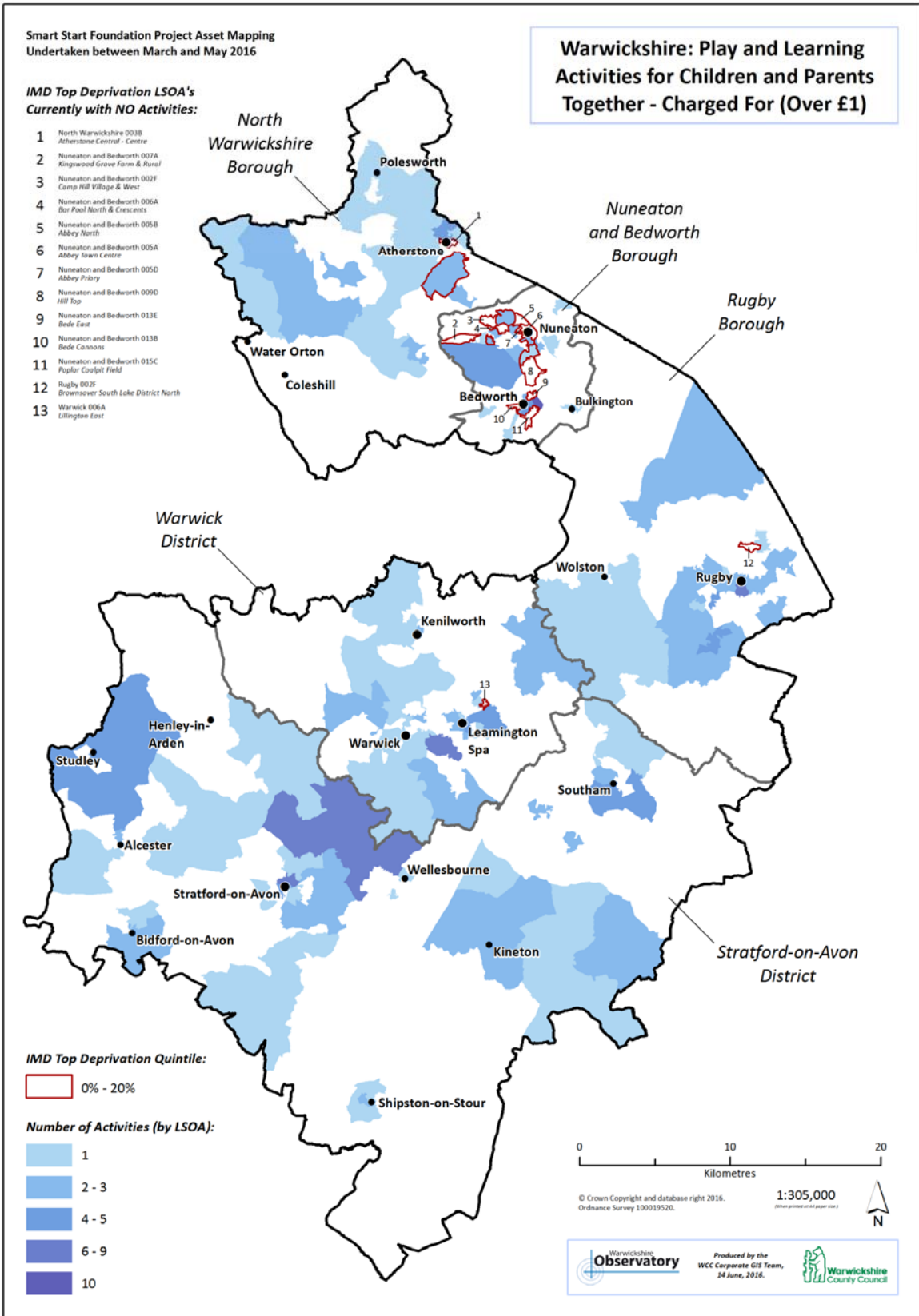
Map K: Charged-for support in Warwickshire for parents with children aged 0-5



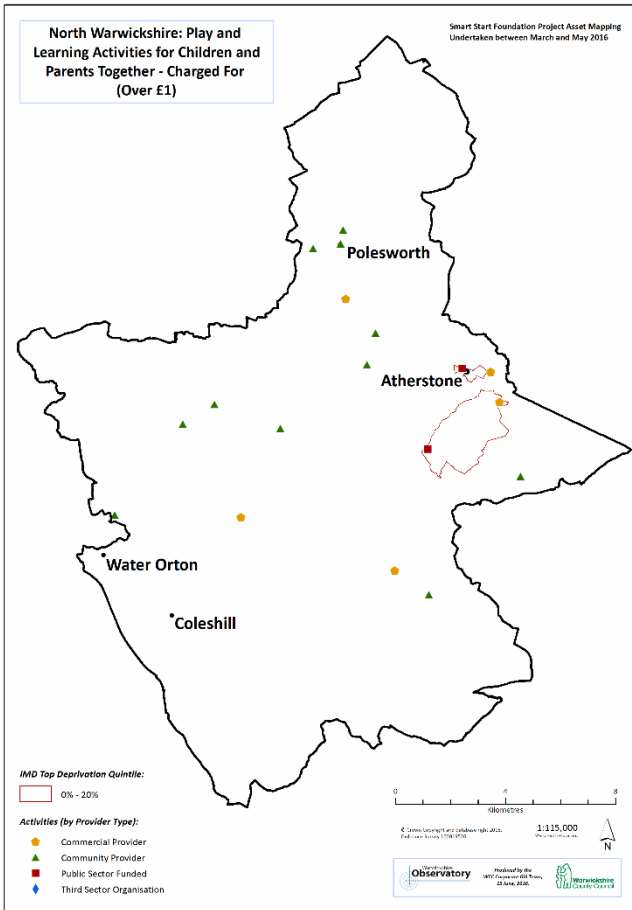
Map L: Support in Warwickshire for families facing financial and/or housing difficulties



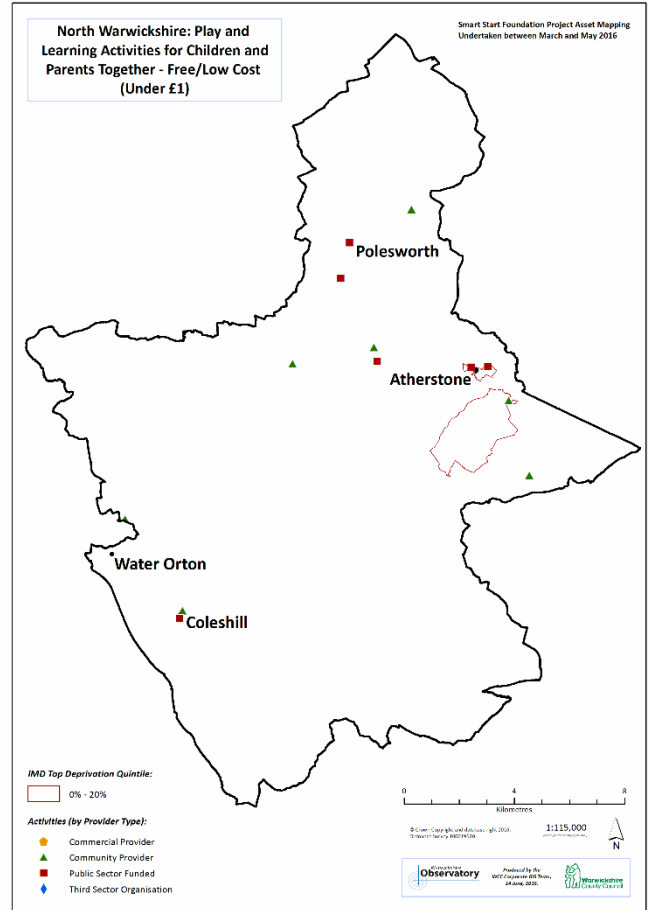
Map M: Overview of free/low-cost play and learning activities for families with children aged 0-5



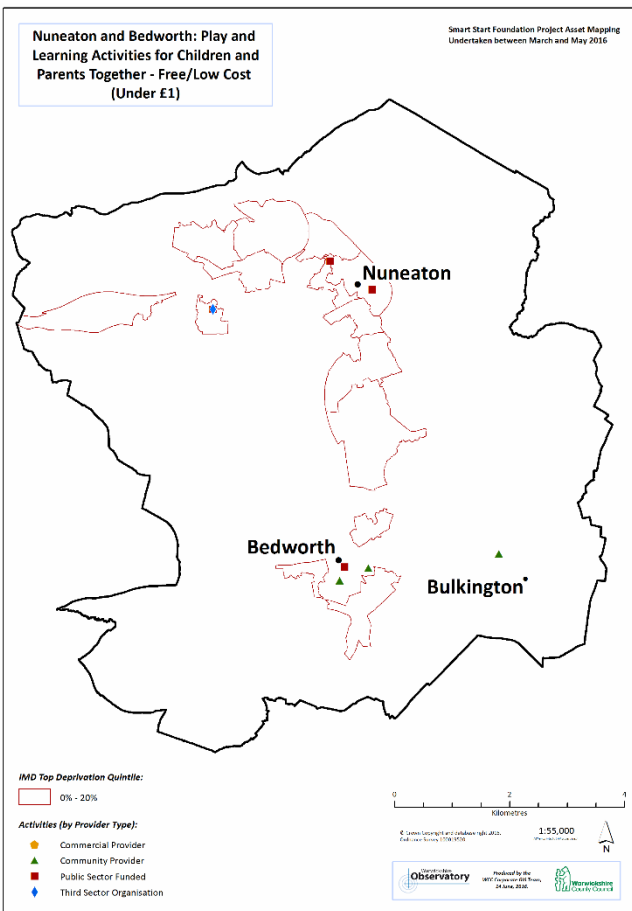
Map N: Overview of charged-for play and learning activities for families with children aged 0-5



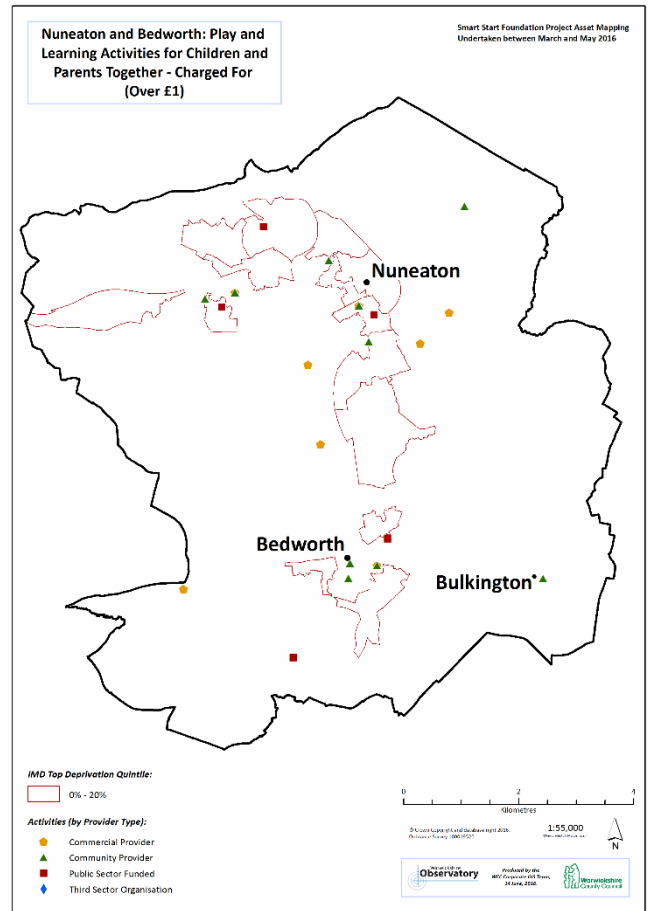
Map O: Free/low-cost play and learning activities in North Warks for families with children aged 0-5



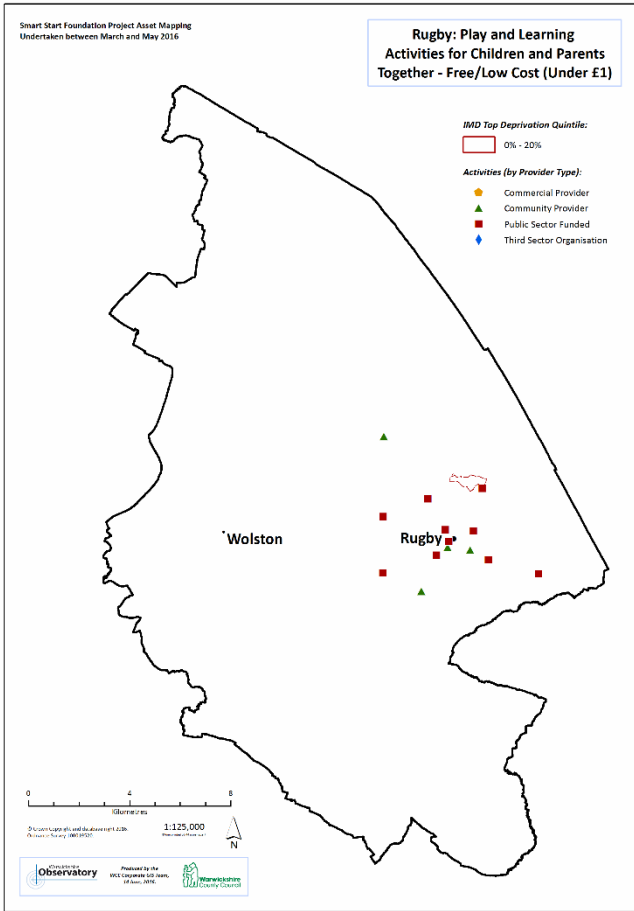
Map P: Charged-for play and learning activities in North Warks for families with children aged 0-5



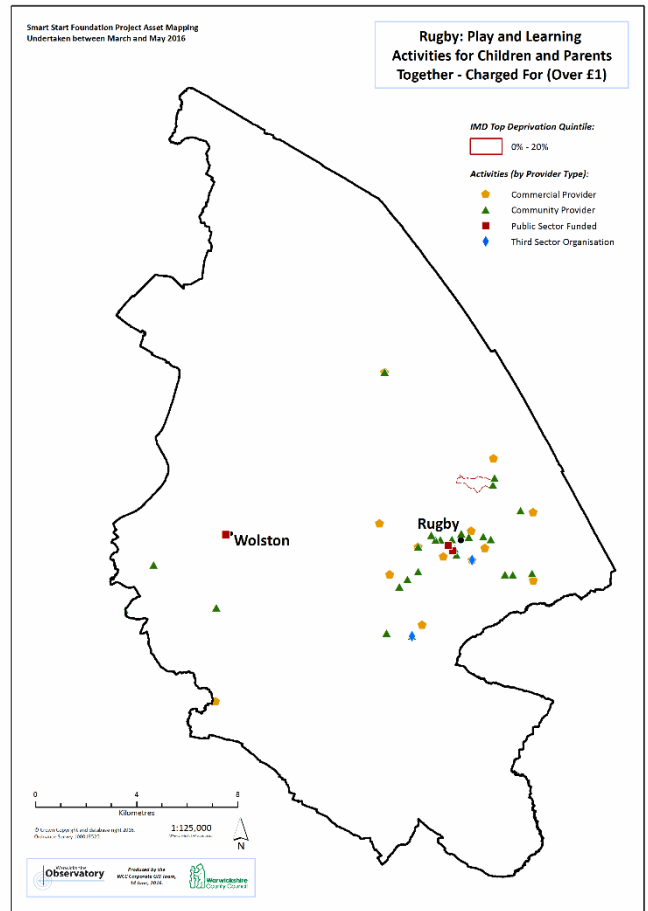
Map Q: Free/low-cost play and learning activities in Nuneaton and Bedworth for families with children aged 0-5



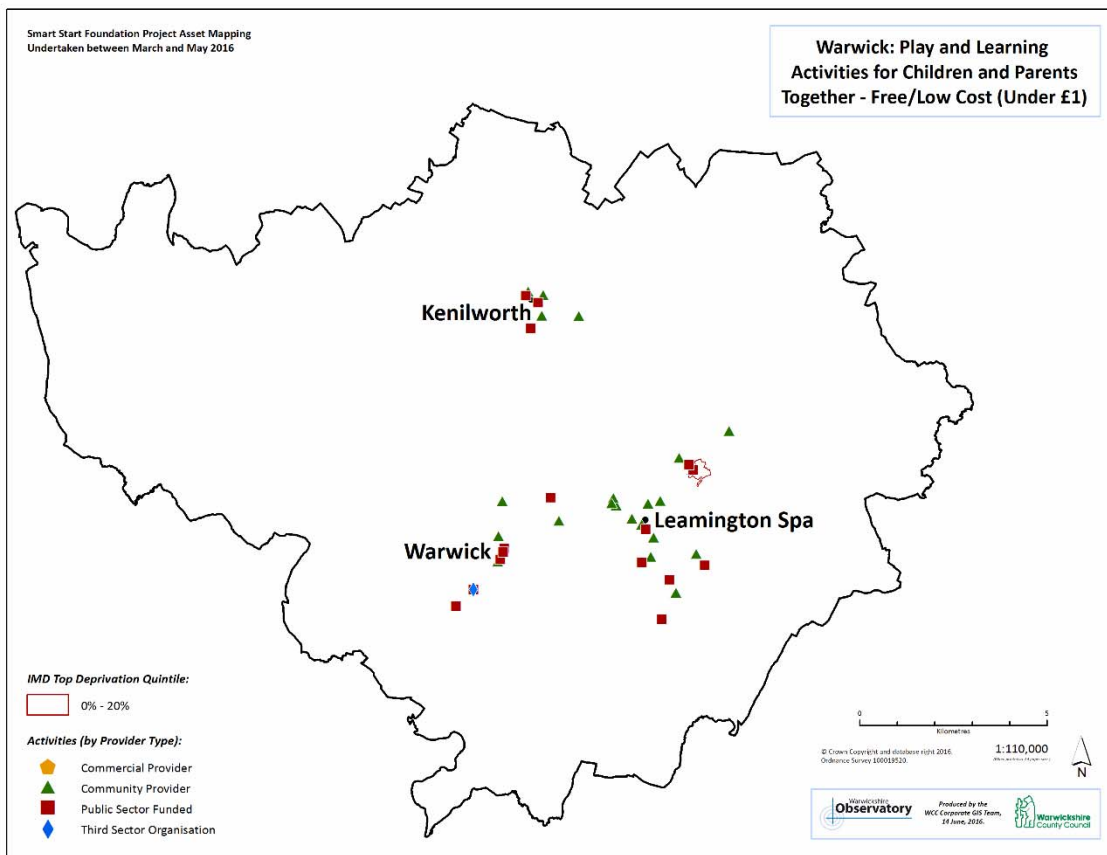
Map R: Charged-for play and learning activities in Nuneaton and Bedworth for families with children aged 0-5



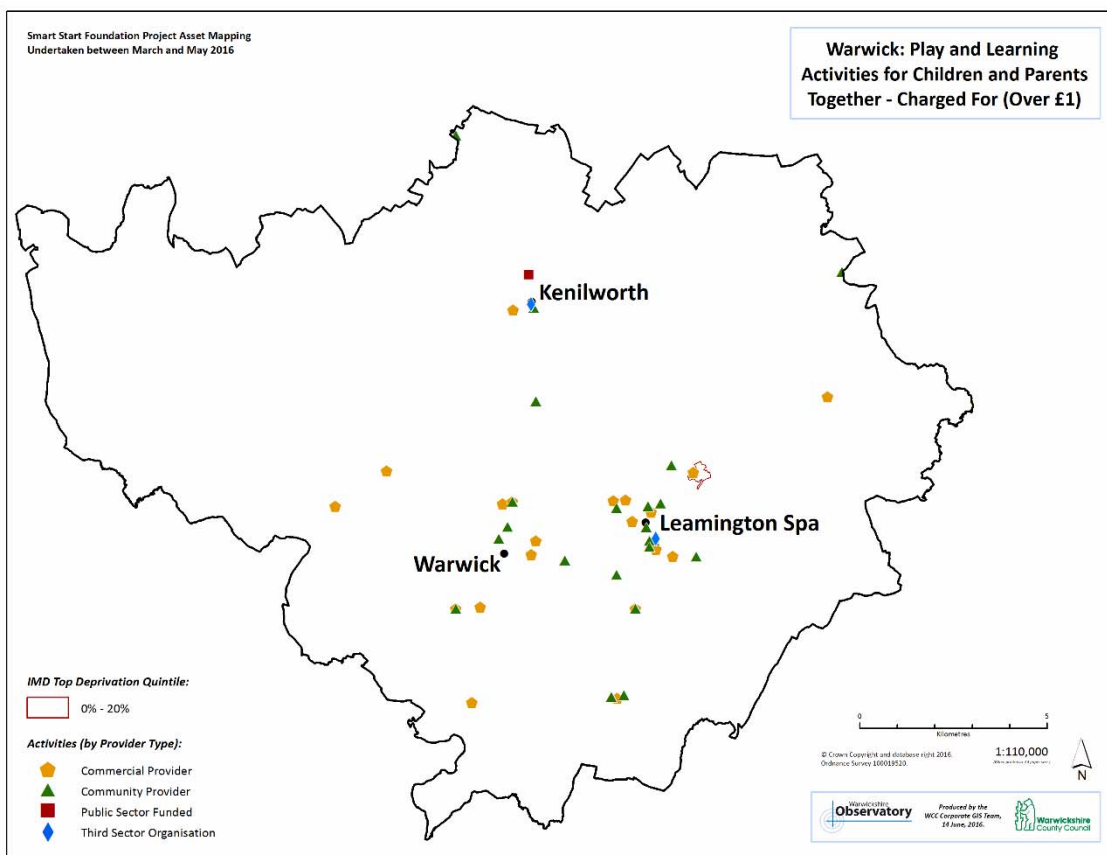
Map S: Free/low-cost play and learning activities in Rugby for families with children aged 0-5



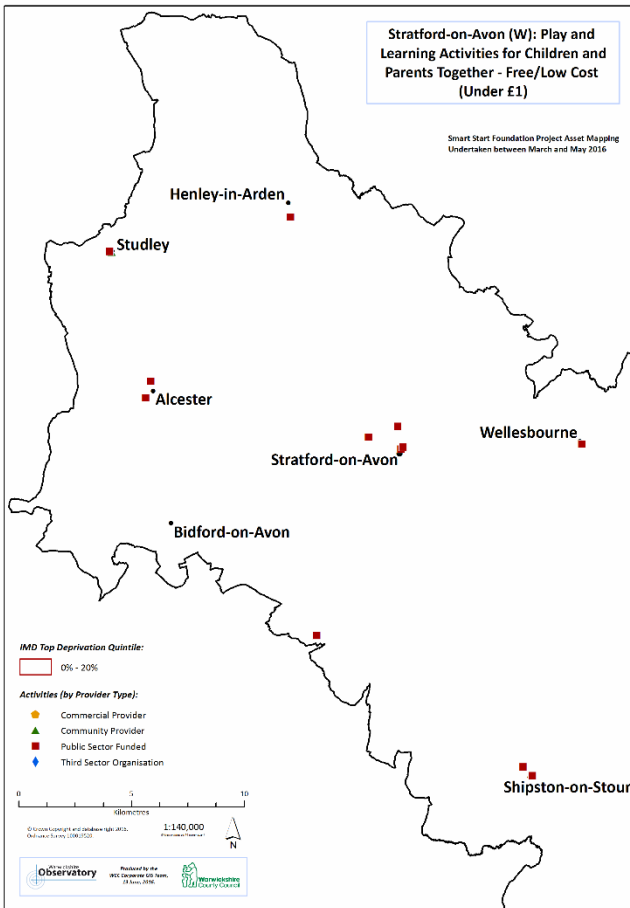
Map T: Charged-for play and learning activities in Rugby for families with children aged 0-5



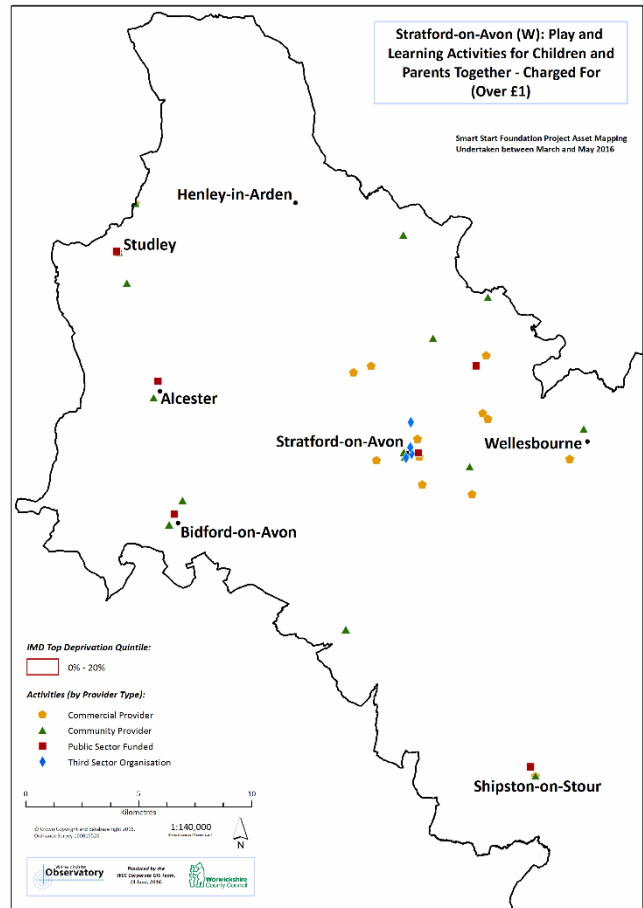
Map U: Free/low-cost play and learning activities in Warwick District for families with children aged 0-5



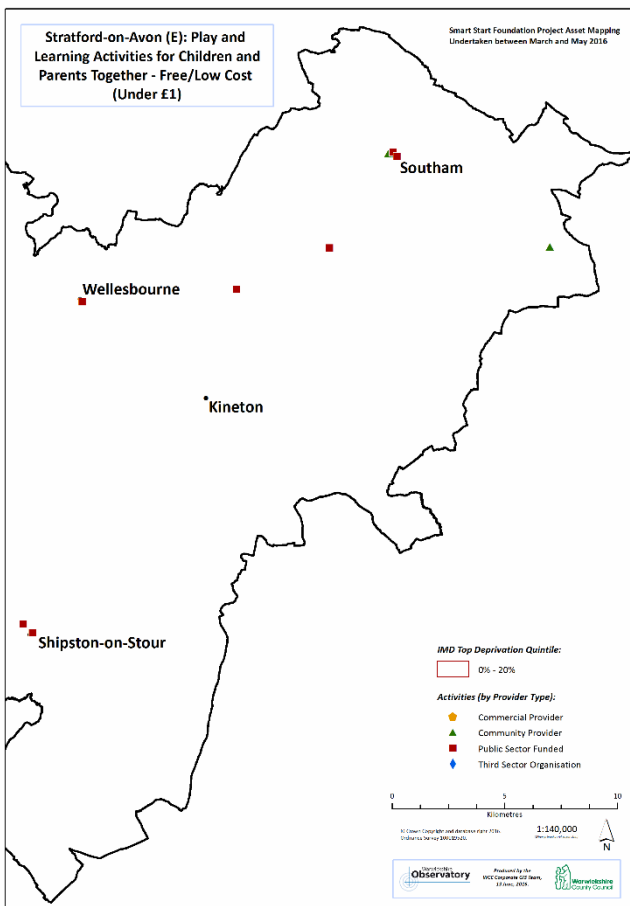
Map V: Charged-for play and learning activities in Warwick District for families with children aged 0-5



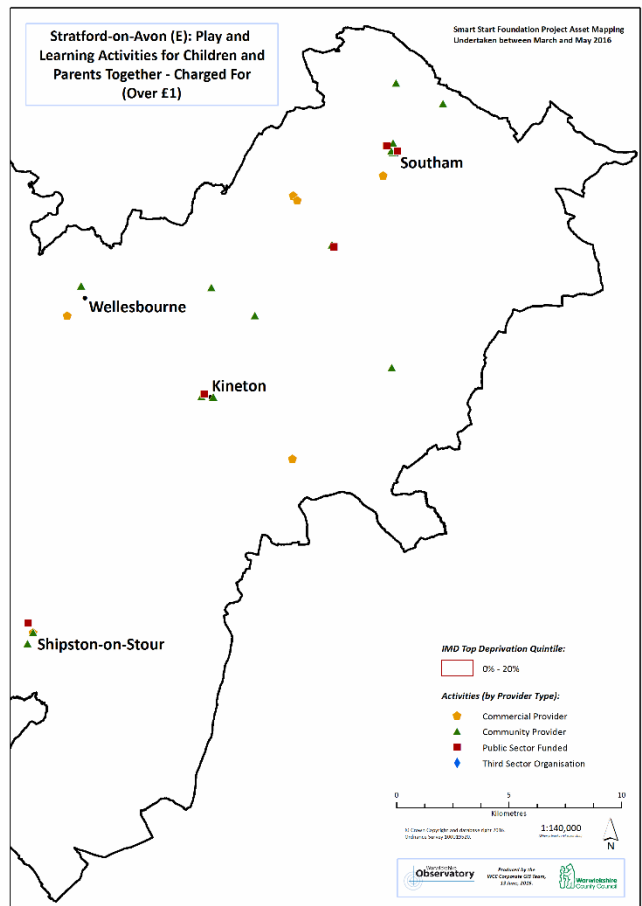
Map W: Free/low-cost play and learning activities in Stratford (W) for families with children aged 0-5



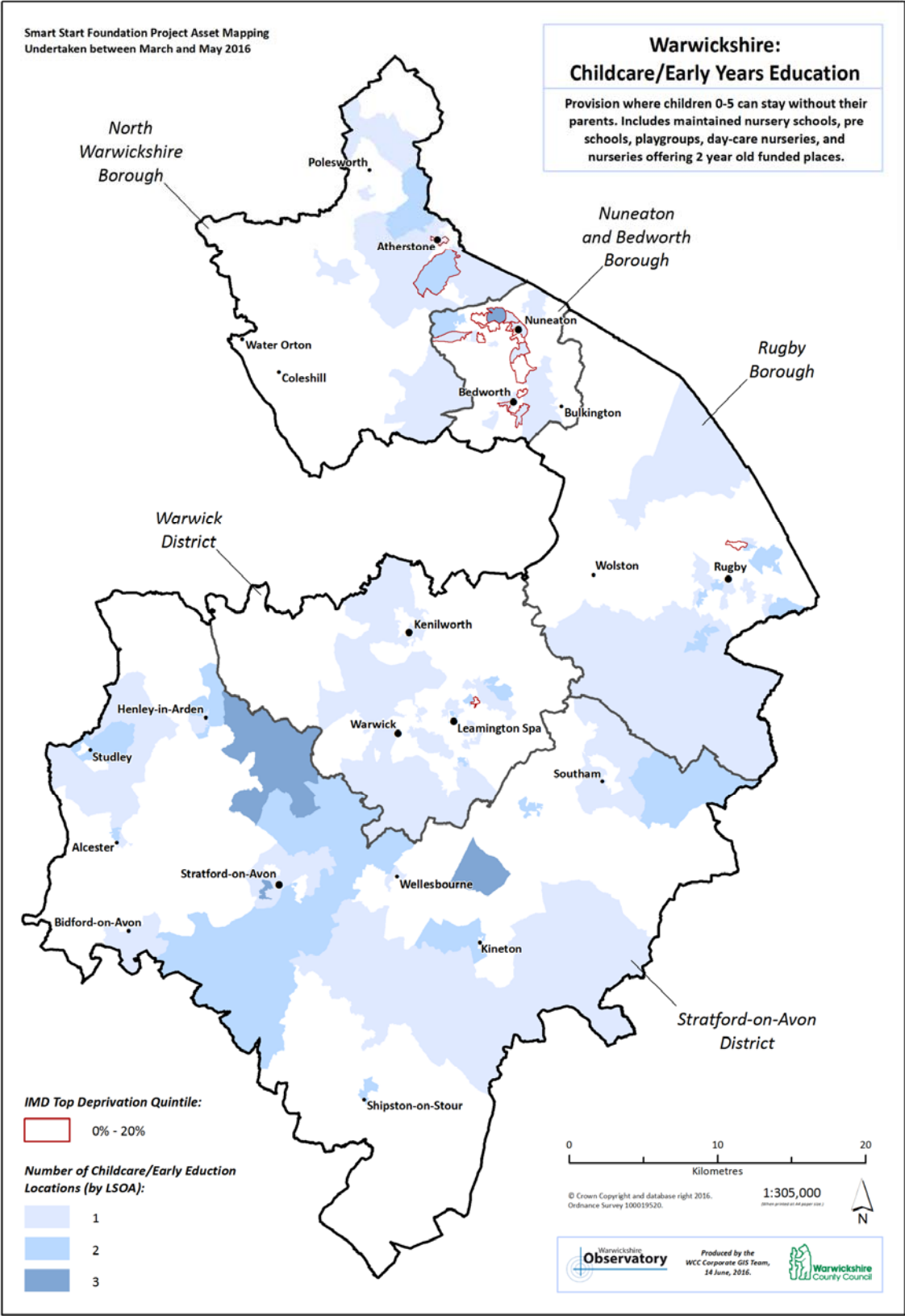
Map X: Charged-for play and learning activities in Stratford (W) for families with children aged 0-5



Map Y: Free/low-cost play and learning activities in Stratford (E) for families with children aged 0-5

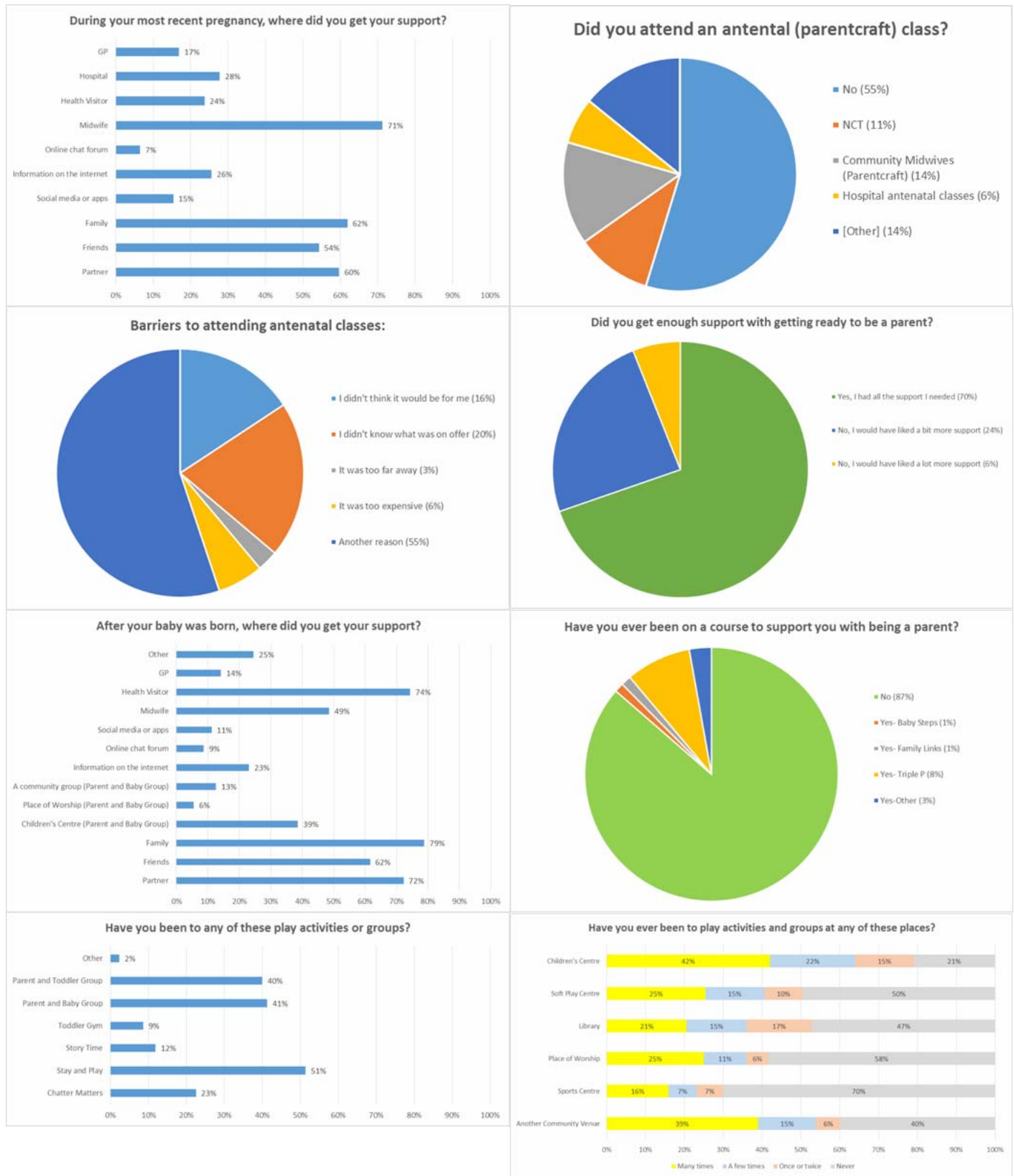


Map Z: Charged-for play and learning activities in Stratford (E) for families with children aged 0-5

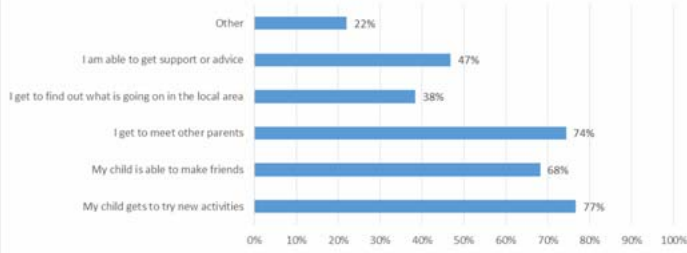


Map AA: Overview of childcare/early education provision in Warwickshire

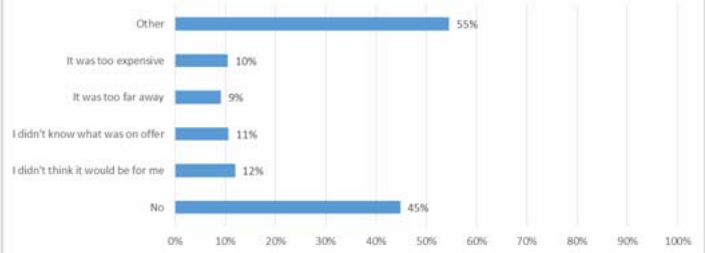
Appendix 4a: Consultation Responses- All Respondents



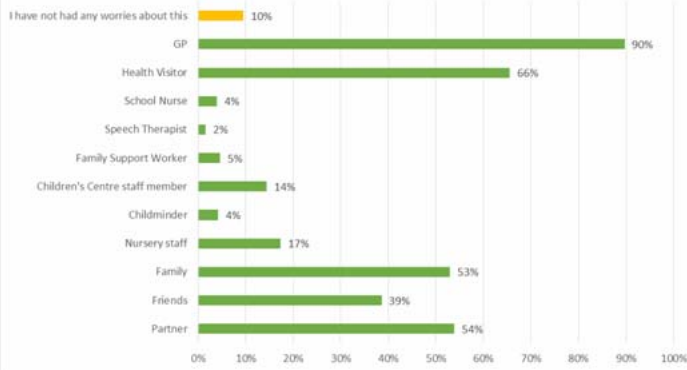
What do you think are the benefits of going to a play activity or group?



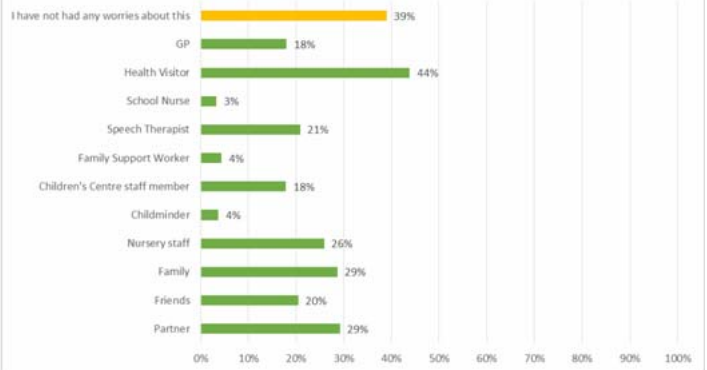
Has anything ever stopped you going to a play activity or group?



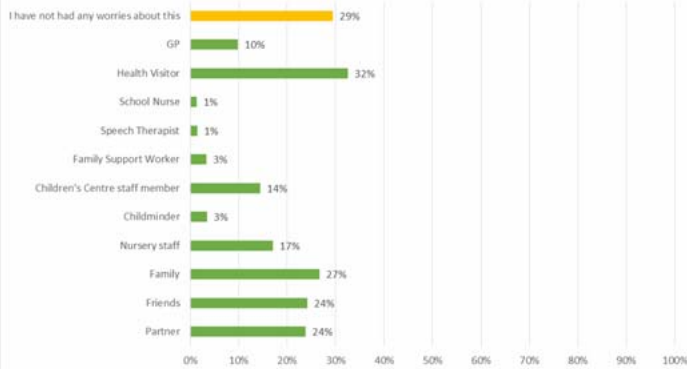
If you are ever worried about your child's HEALTH, who do you talk to?



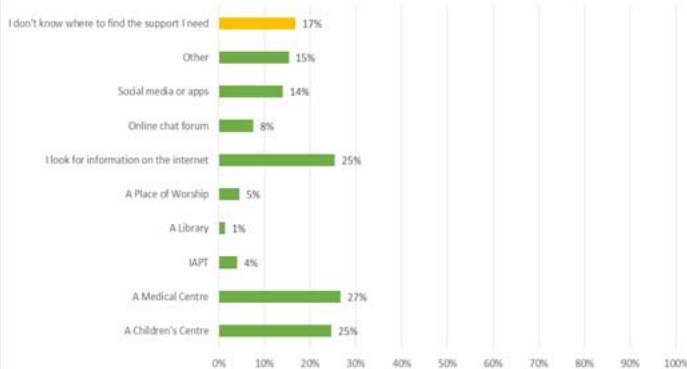
If you are ever worried about your child's SPEECH, who do you talk to?



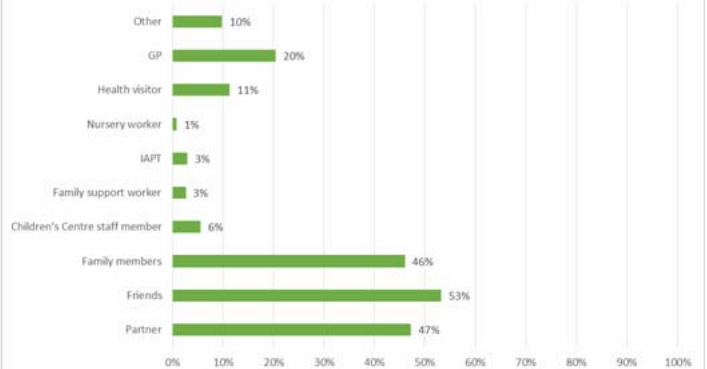
If you are ever worried about your child's BEHAVIOUR, who do you talk to?



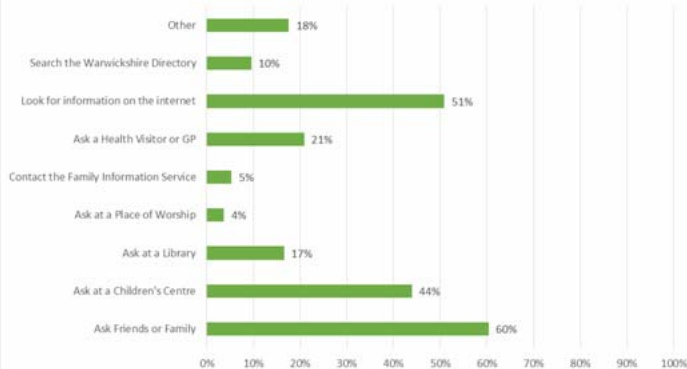
When you are feeling fed-up or low, where do you look for support?



When you are feeling fed-up or low, who do you talk to?



How would you find out about activities for your child?



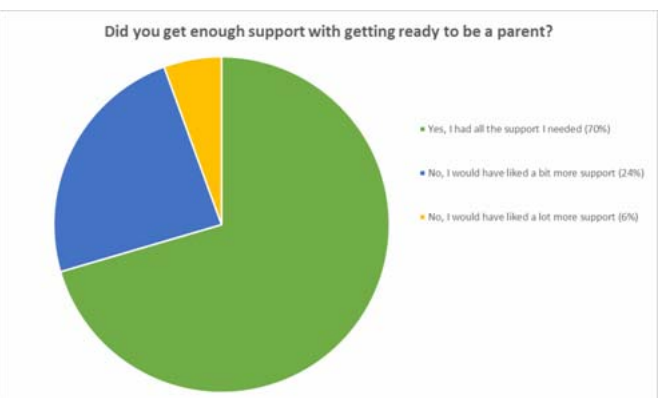
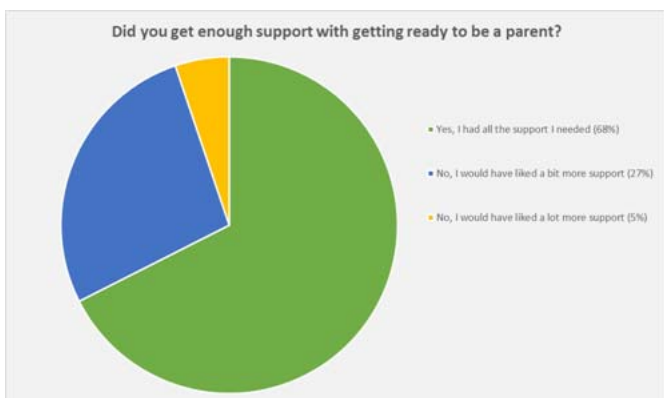
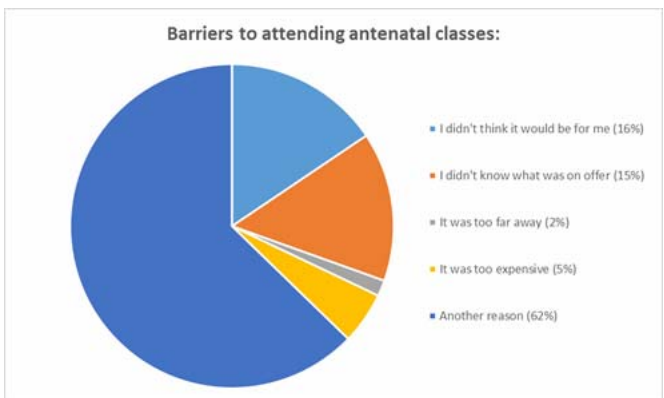
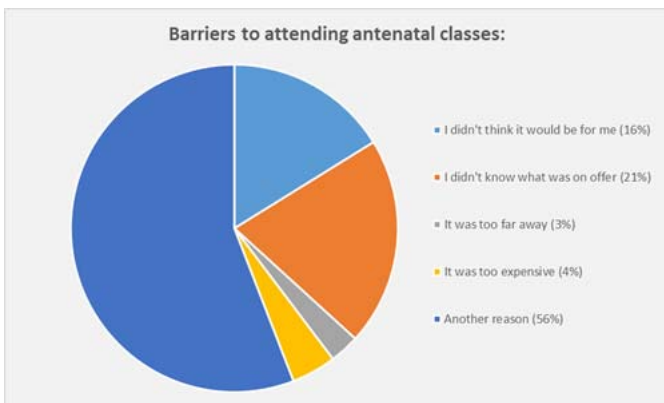
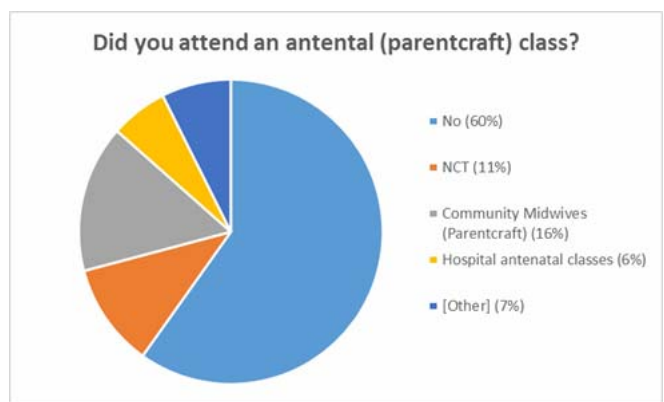
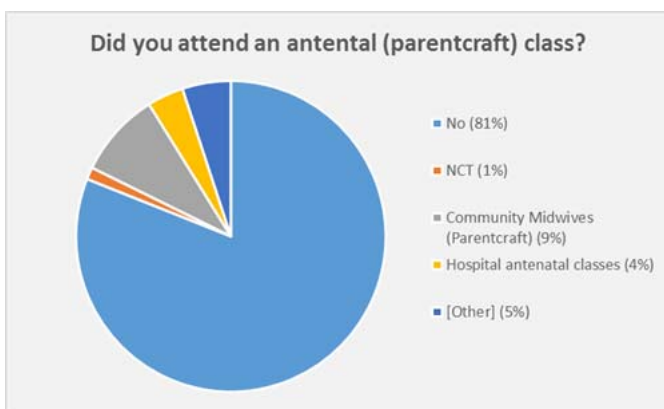
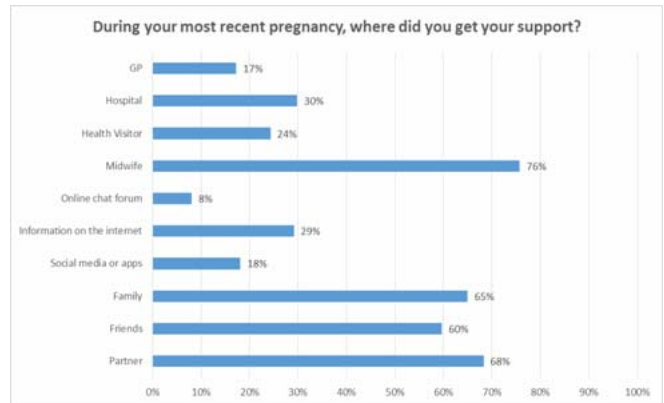
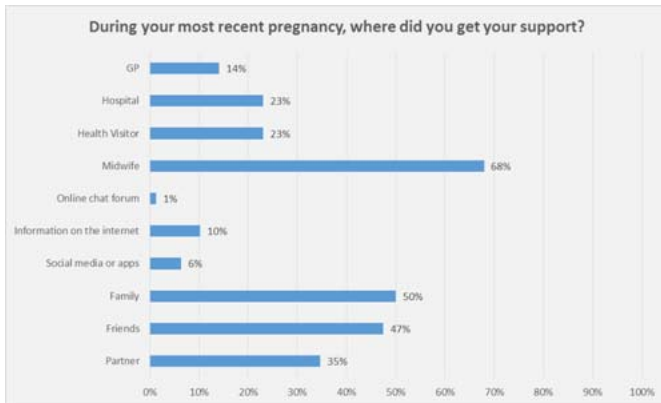
How would you find out about local nurseries or childminders?

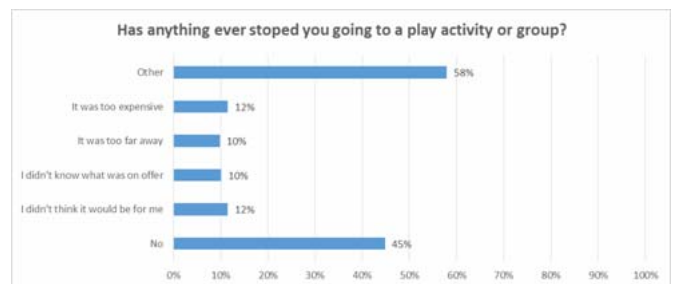
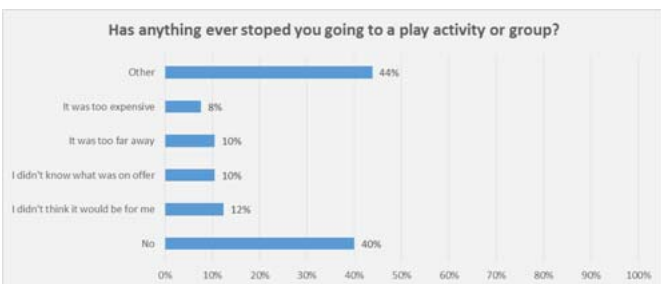
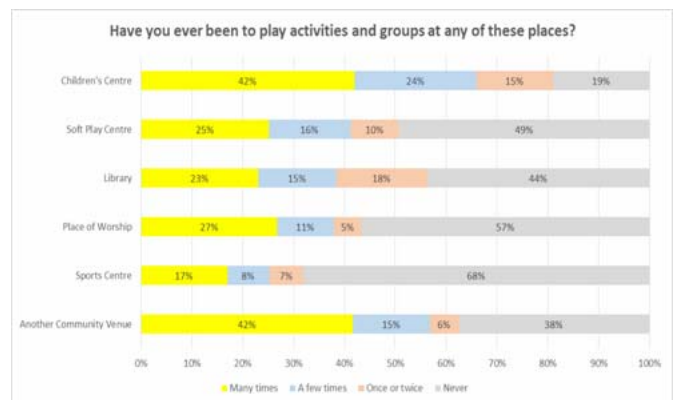
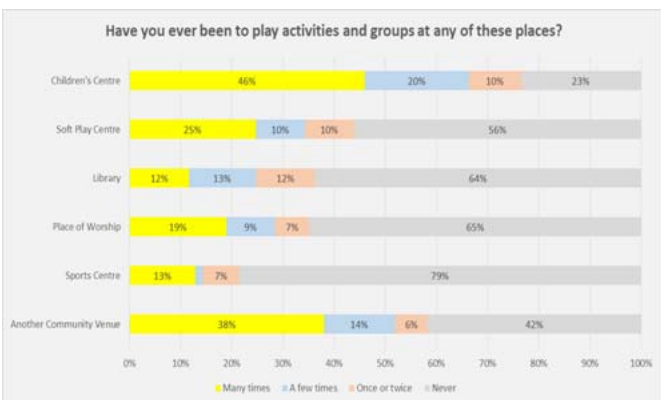
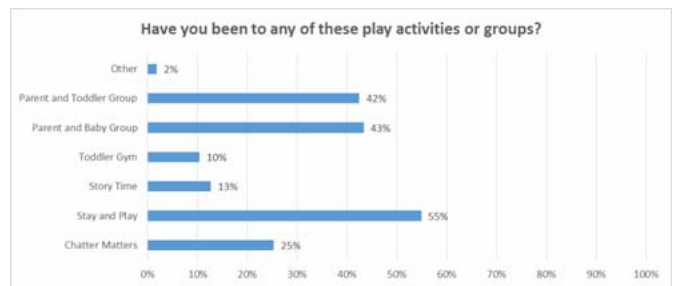
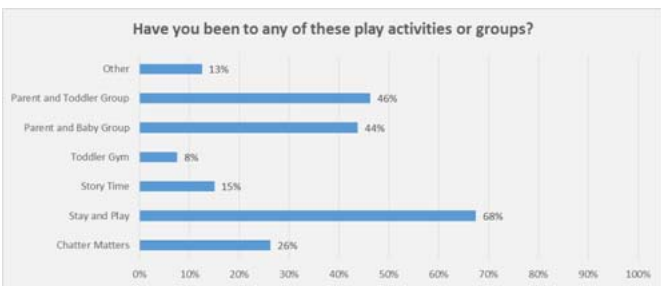
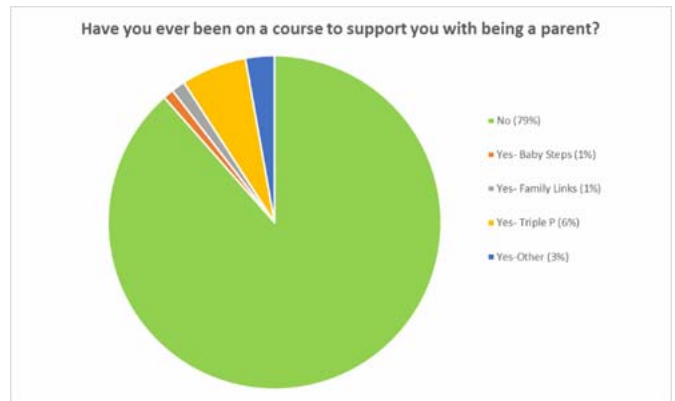
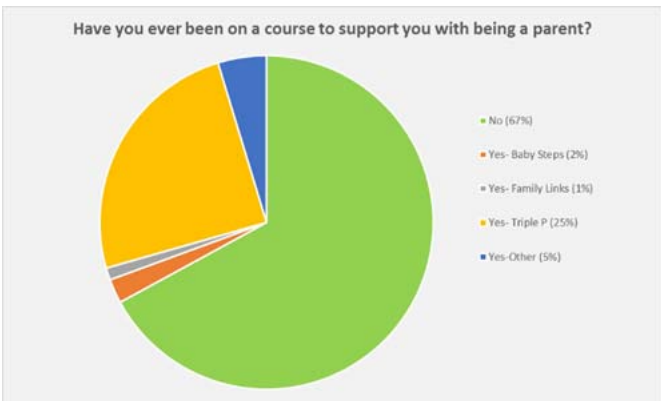
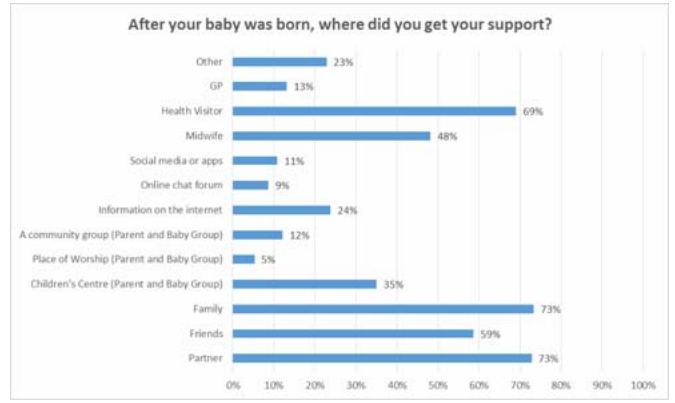
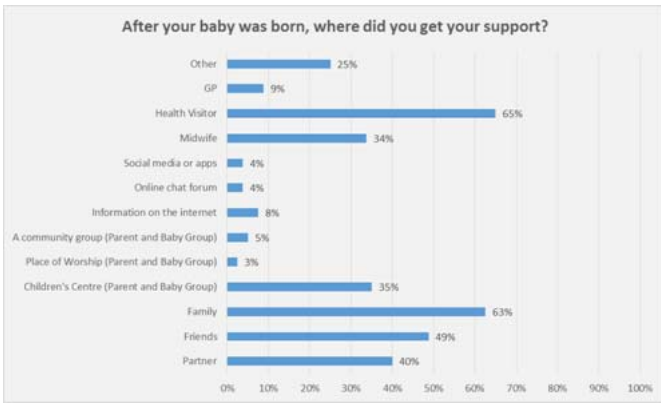


Appendix 4b: Consultation Responses- Workless Households

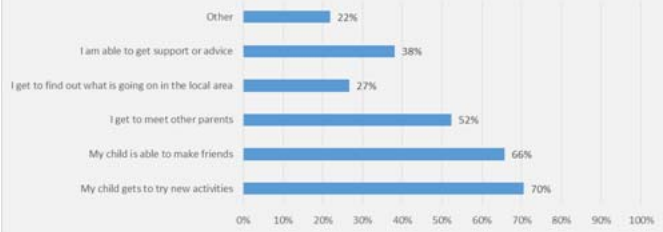
Workless Households (shaded grey)- n=106

Not Workless Households (no shading) n=691

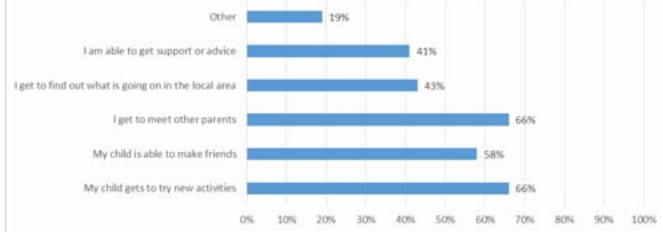




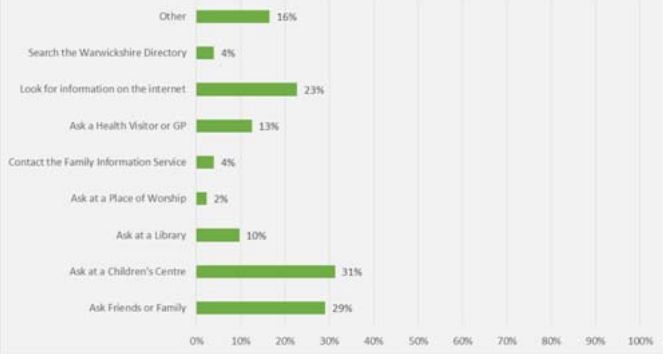
What do you think are the benefits of going to a play activity or group?



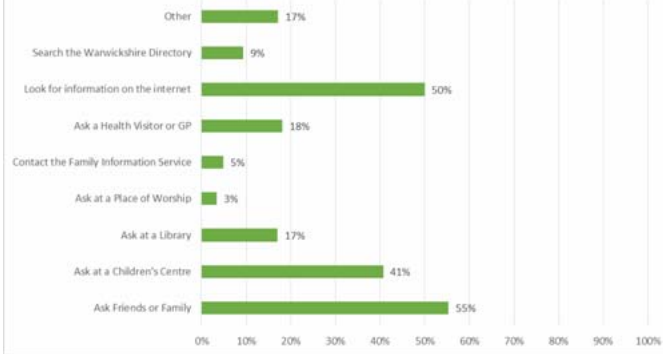
What do you think are the benefits of going to a play activity or group?



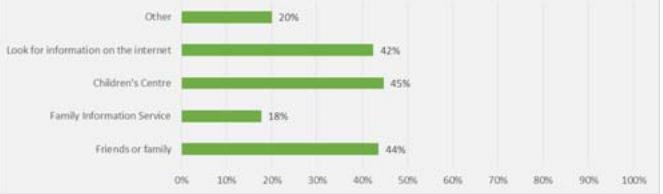
How would you find out about activities for your child?



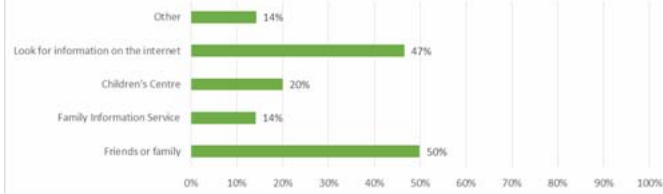
How would you find out about activities for your child?



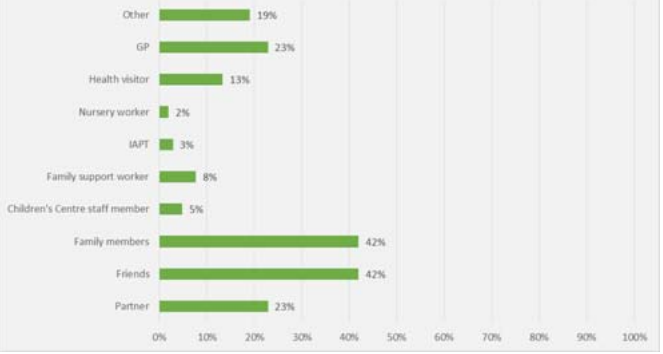
How would you find out about local nurseries or childminders?



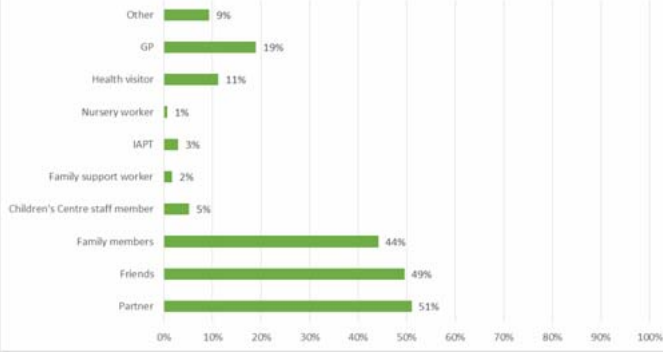
How would you find out about local nurseries or childminders?



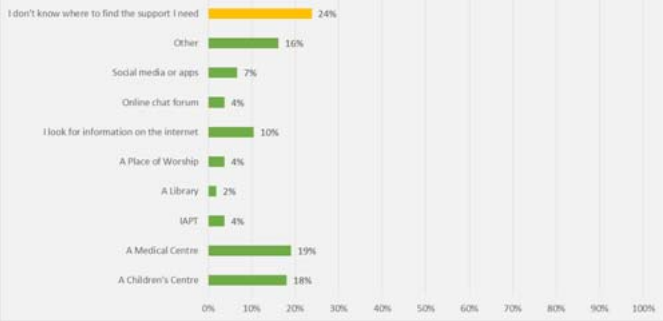
When you are feeling fed-up or low, who do you talk to?



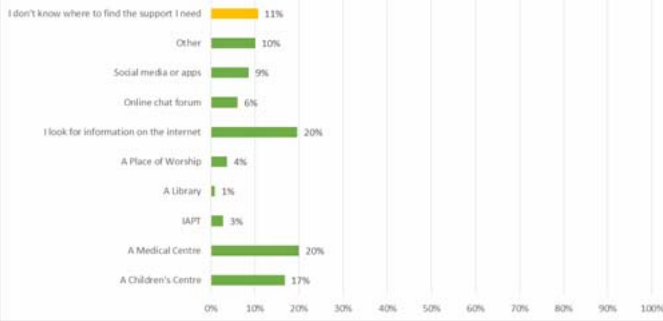
When you are feeling fed-up or low, who do you talk to?



When you are feeling fed-up or low, where do you look for support?



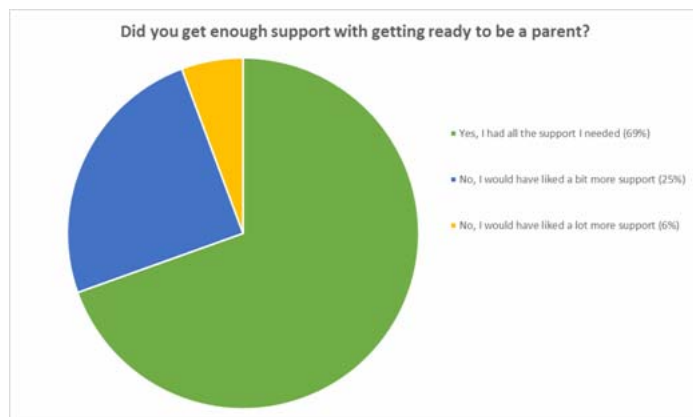
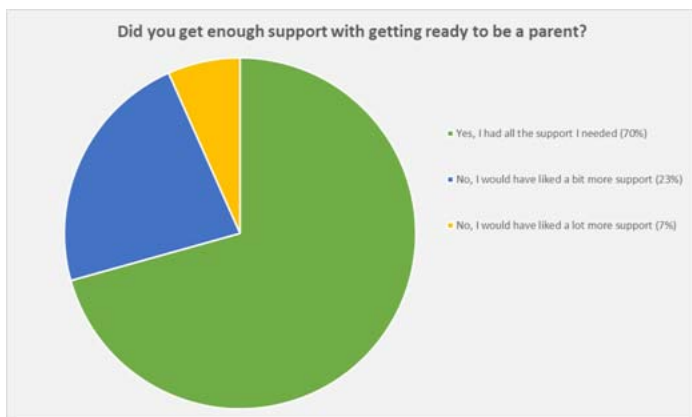
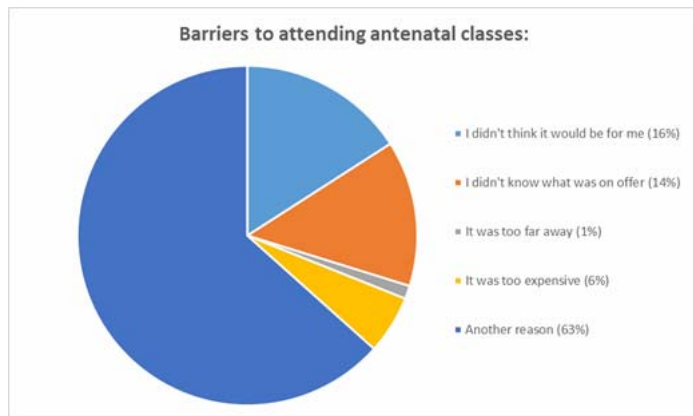
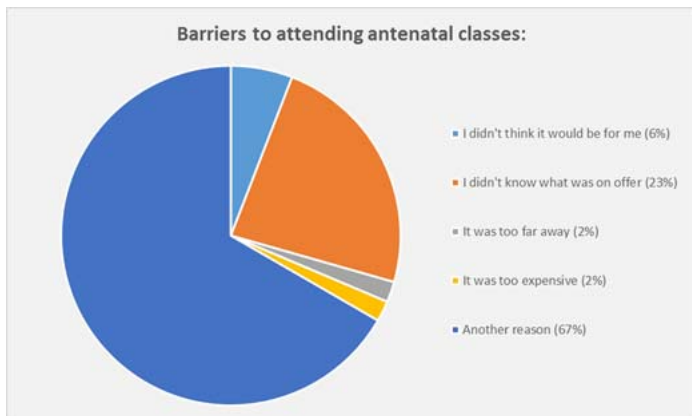
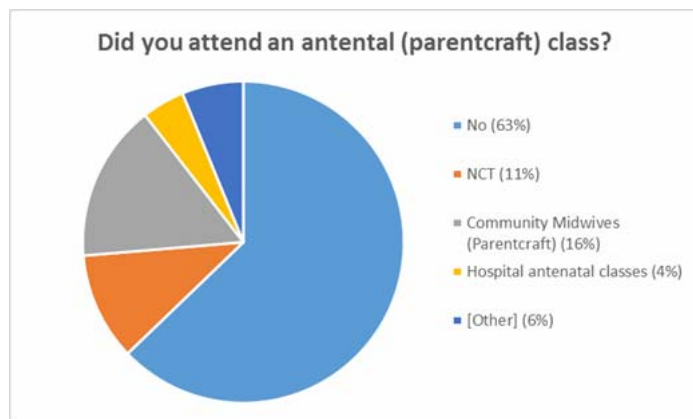
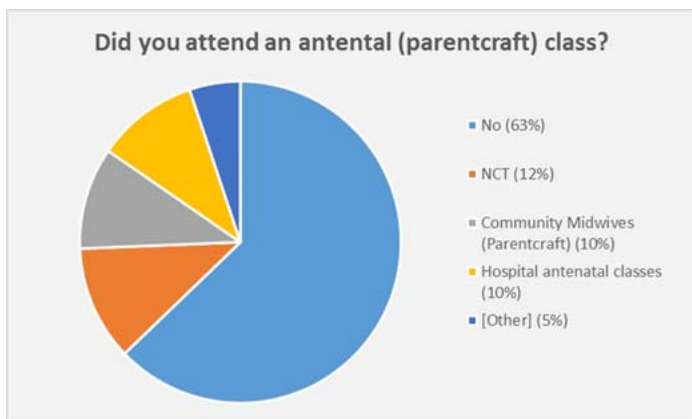
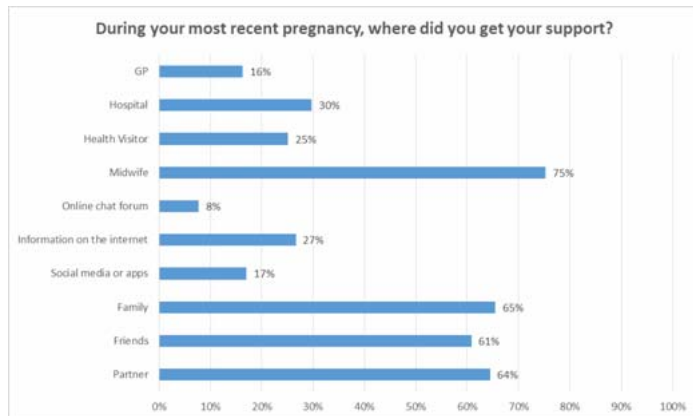
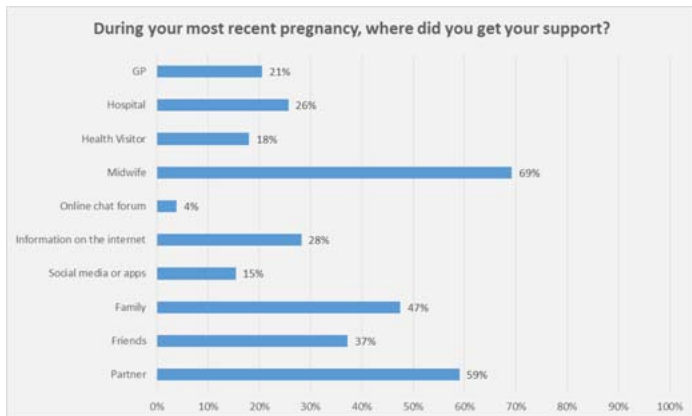
When you are feeling fed-up or low, where do you look for support?



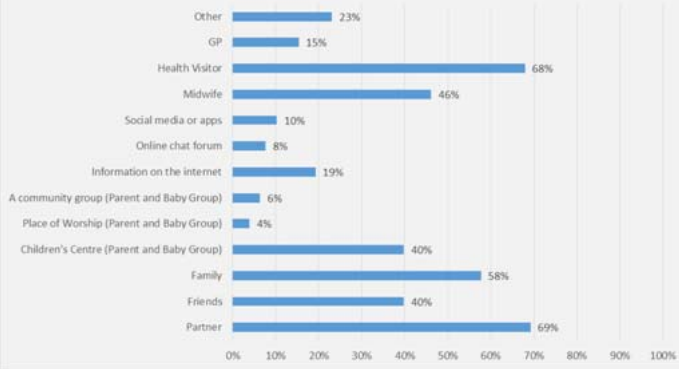
Appendix 4c: Consultation Responses- BAME Respondents

BAME Respondents (shaded grey)- n=93

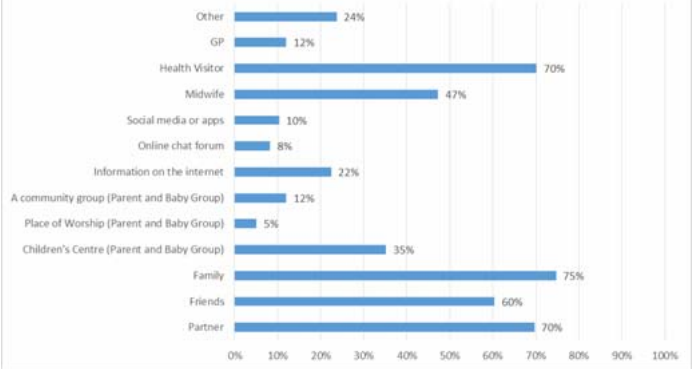
White British Respondents (no shading) n=707



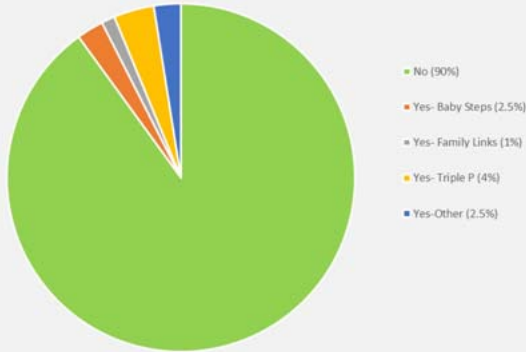
After your baby was born, where did you get your support?



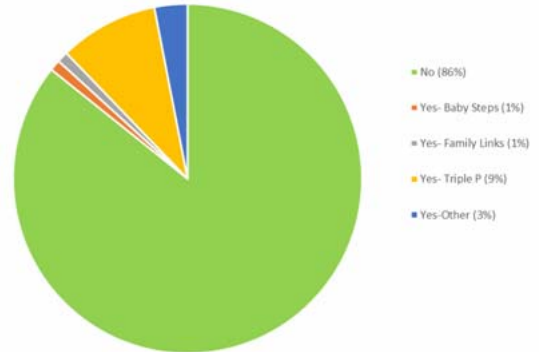
After your baby was born, where did you get your support?



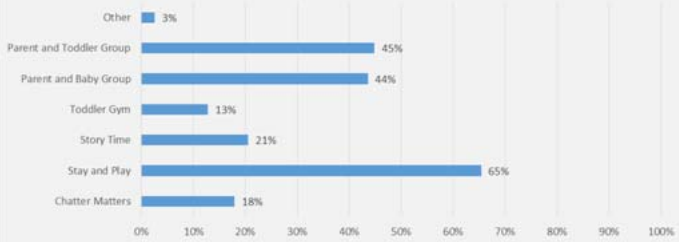
Have you ever been on a course to support you with being a parent?



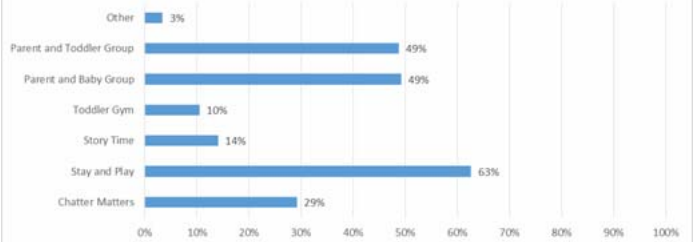
Have you ever been on a course to support you with being a parent?



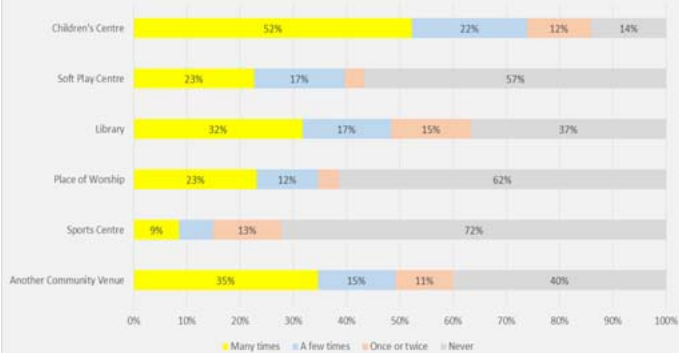
Have you been to any of these play activities or groups?



Have you been to any of these play activities or groups?



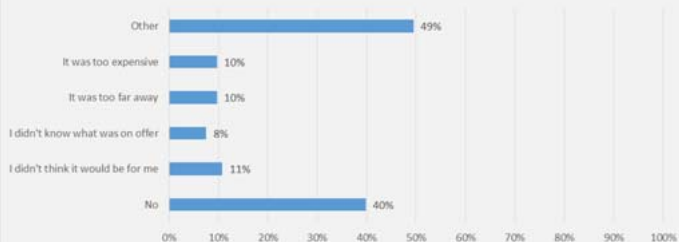
Have you ever been to play activities and groups at any of these places?



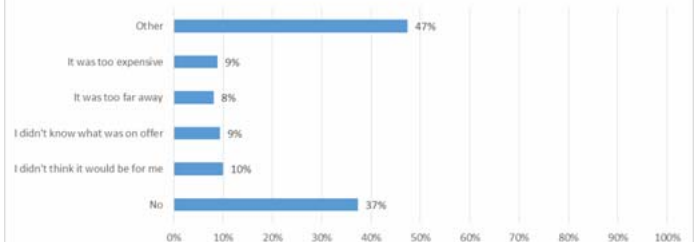
Have you ever been to play activities and groups at any of these places?



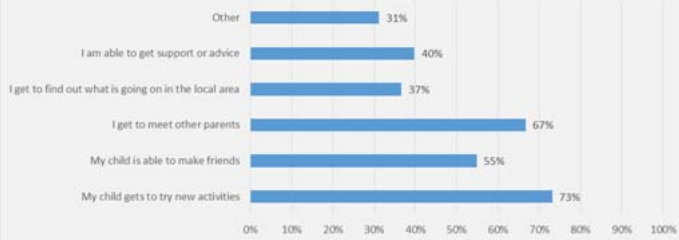
Has anything ever stopped you going to a play activity or group?



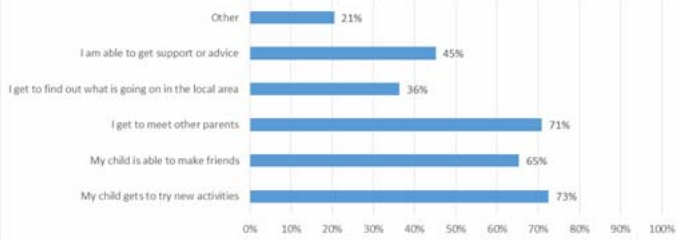
Has anything ever stopped you going to a play activity or group?



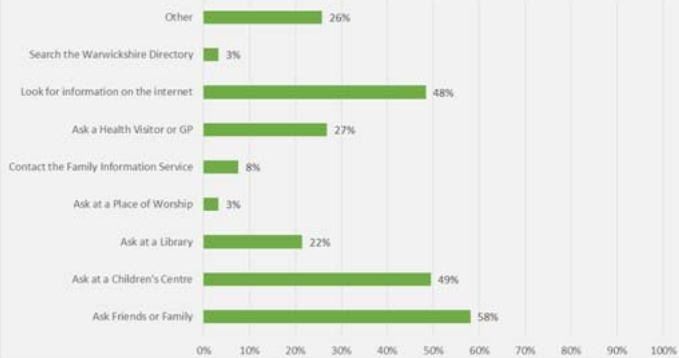
What do you think are the benefits of going to a play activity or group?



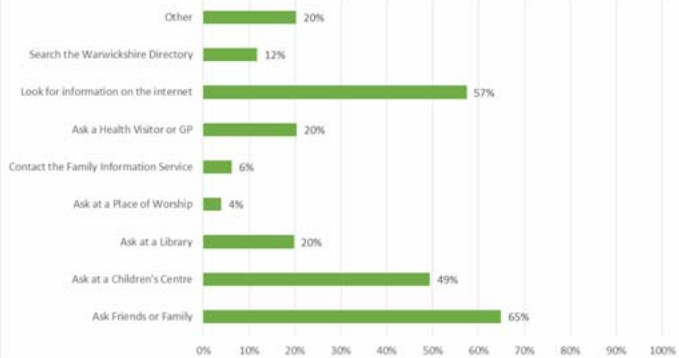
What do you think are the benefits of going to a play activity or group?



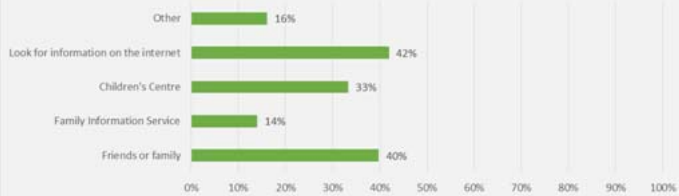
How would you find out about activities for your child?



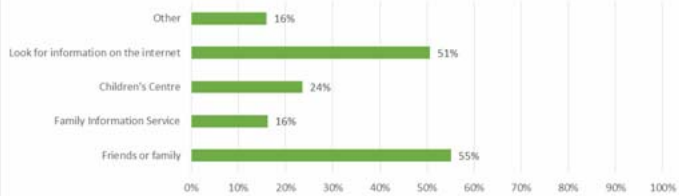
How would you find out about activities for your child?



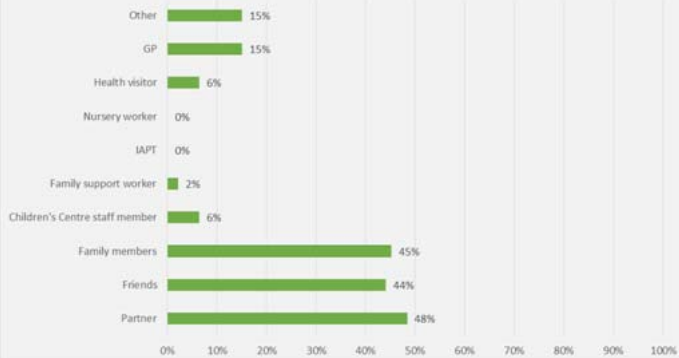
How would you find out about local nurseries or childminders?



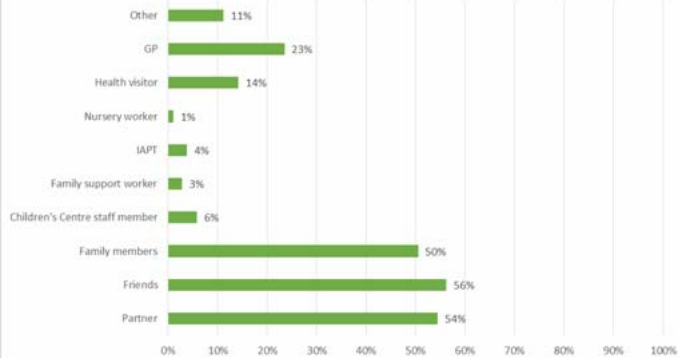
How would you find out about local nurseries or childminders?



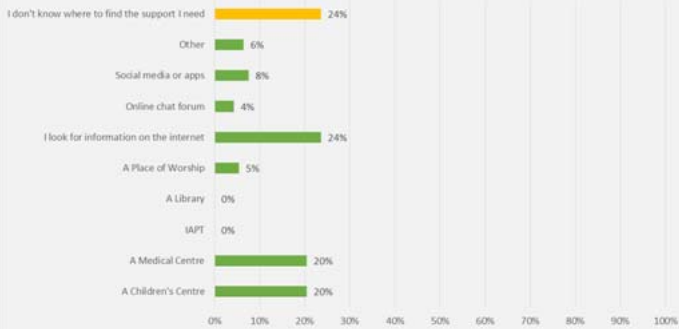
When you are feeling fed-up or low, who do you talk to?



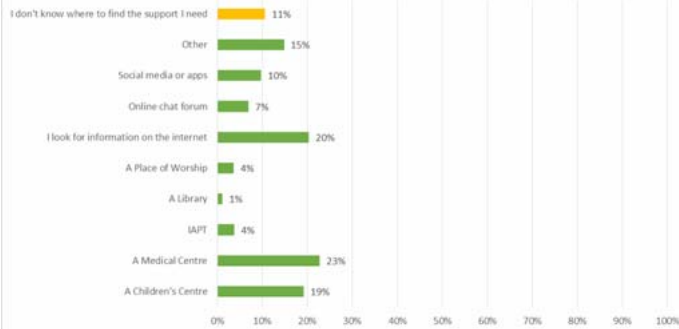
When you are feeling fed-up or low, who do you talk to?



When you are feeling fed-up or low, where do you look for support?



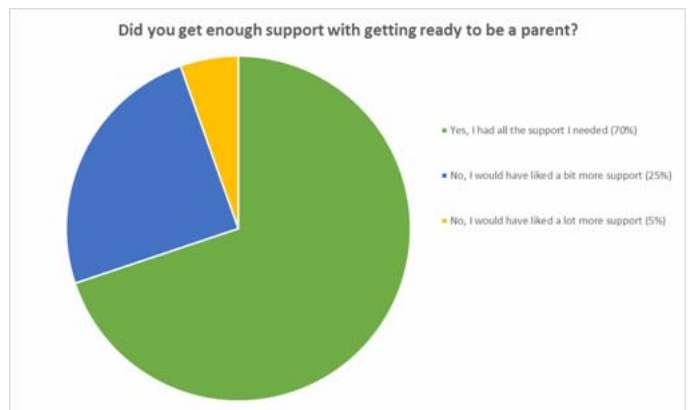
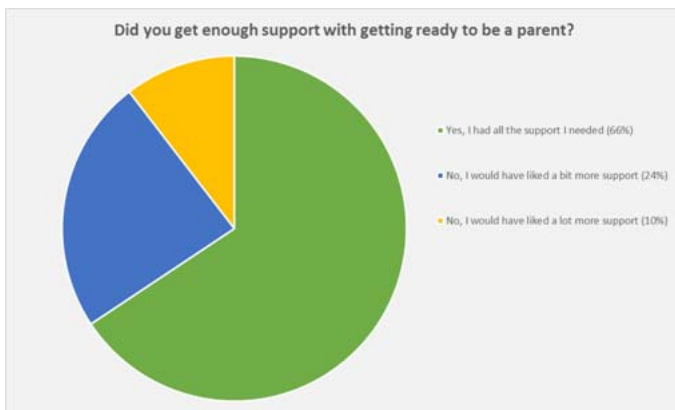
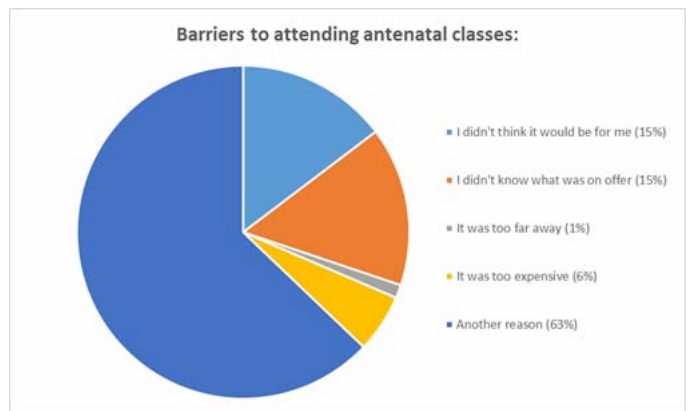
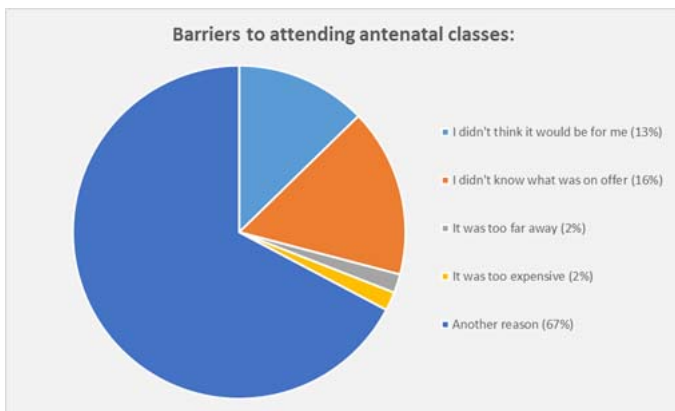
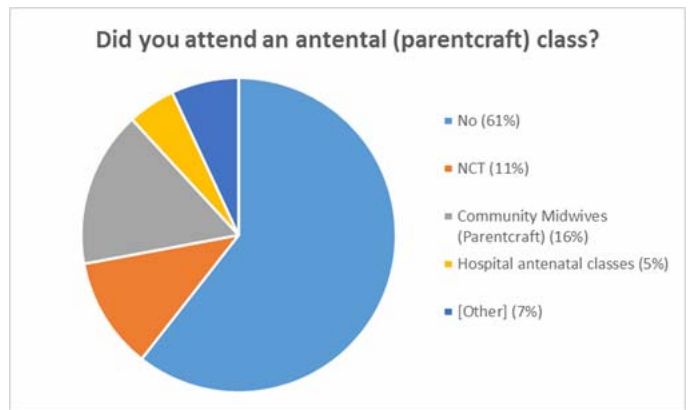
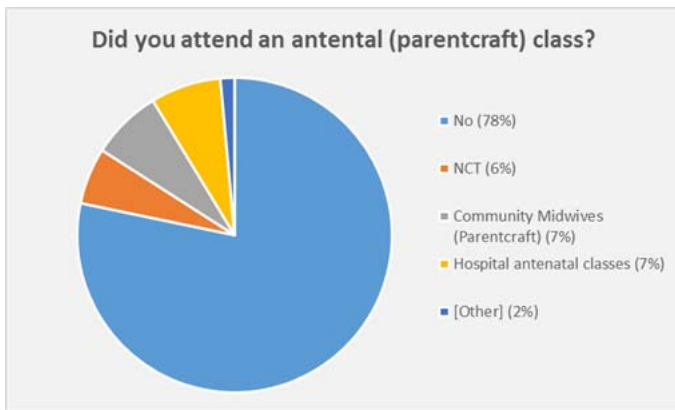
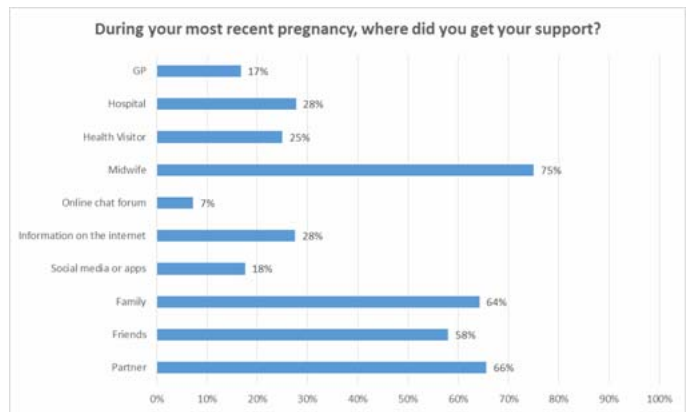
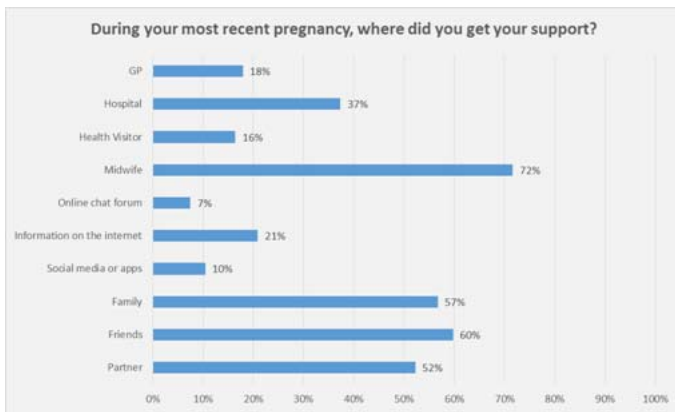
When you are feeling fed-up or low, where do you look for support?



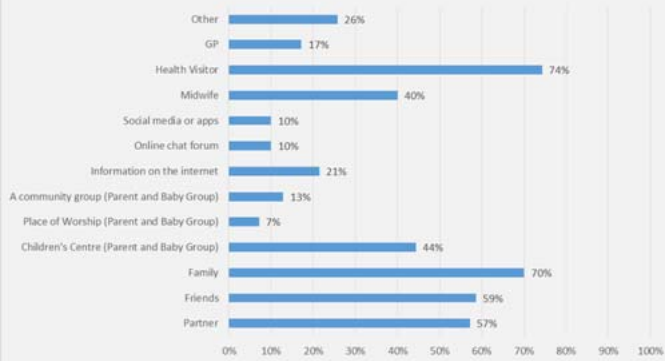
Appendix 4d: Families with a Disabled Child

Disabled Child (shaded grey)- n=79

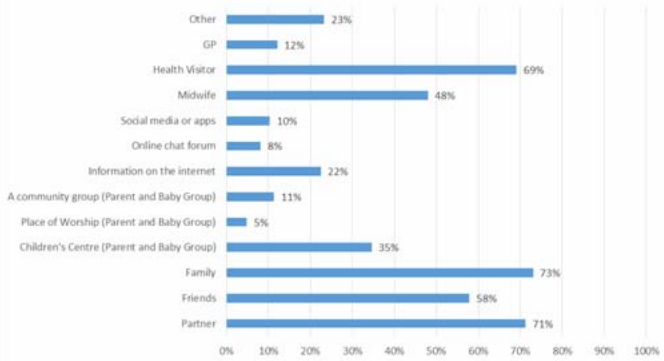
No Disabled Child (no shading) n=715



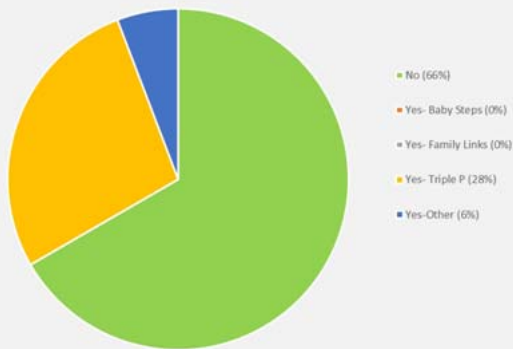
After your baby was born, where did you get your support?



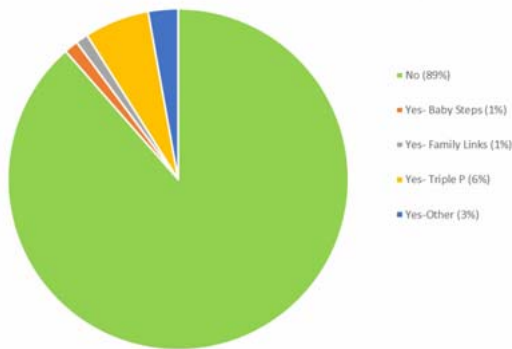
After your baby was born, where did you get your support?



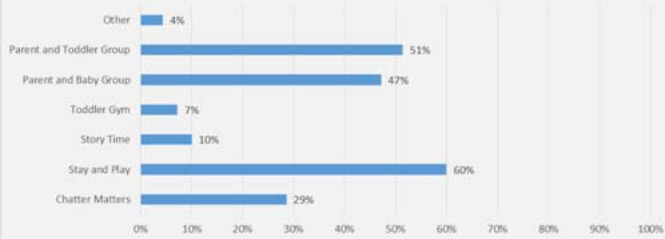
Have you ever been on a course to support you with being a parent?



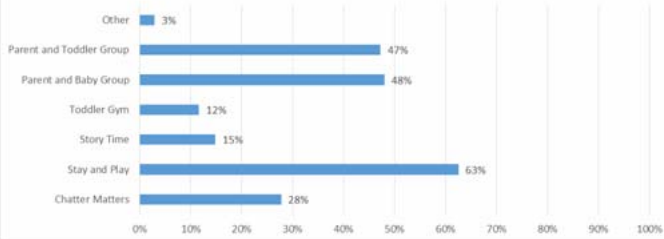
Have you ever been on a course to support you with being a parent?



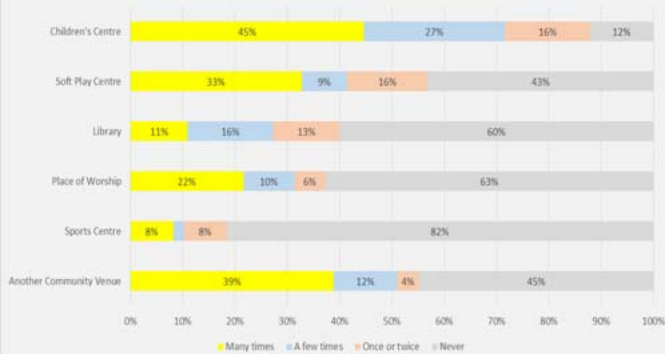
Have you been to any of these play activities or groups?



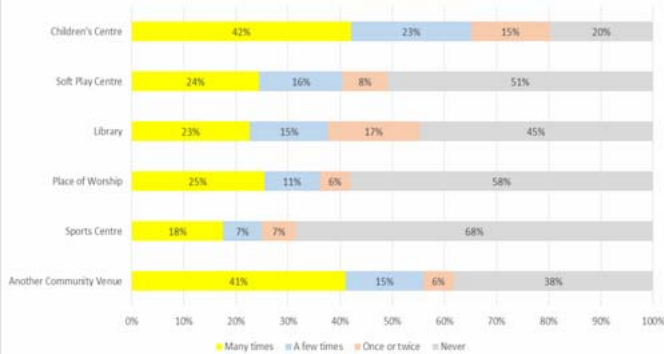
Have you been to any of these play activities or groups?



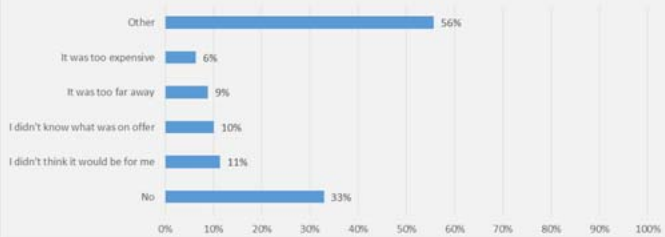
Have you ever been to play activities and groups at any of these places?



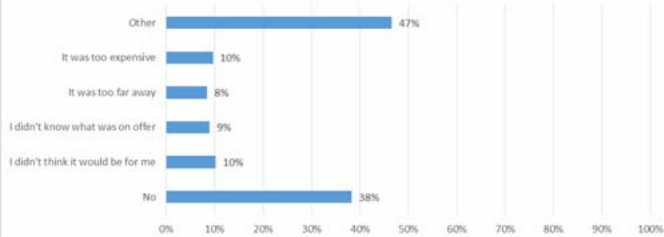
Have you ever been to play activities and groups at any of these places?

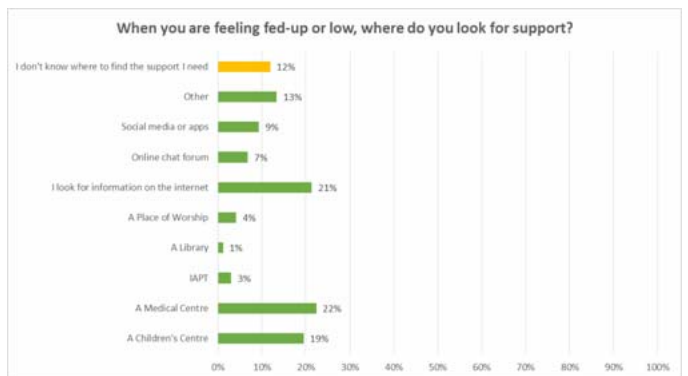
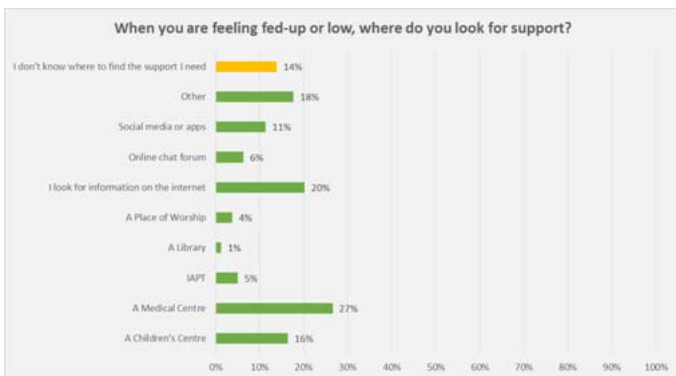
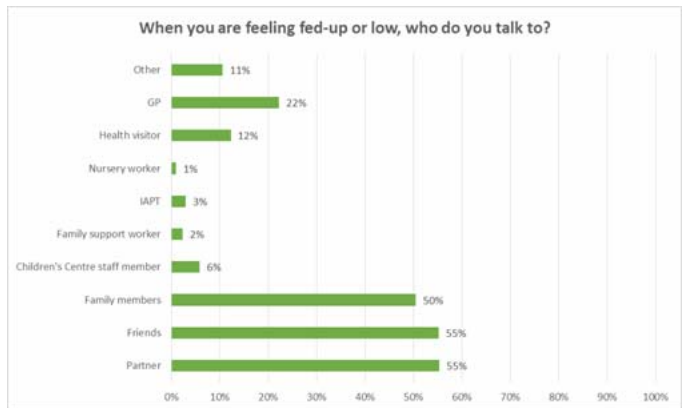
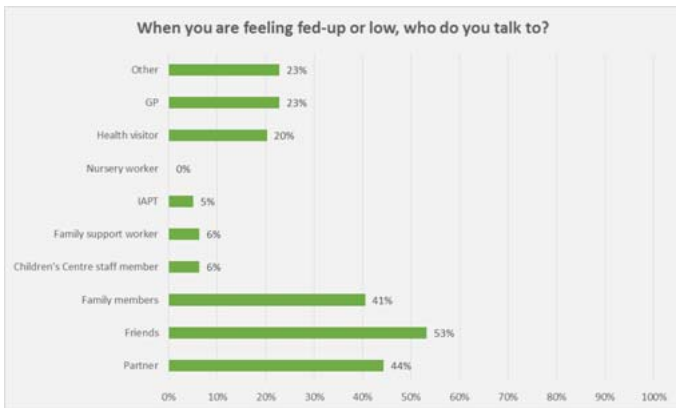
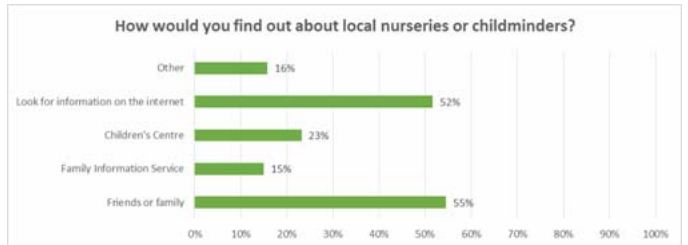
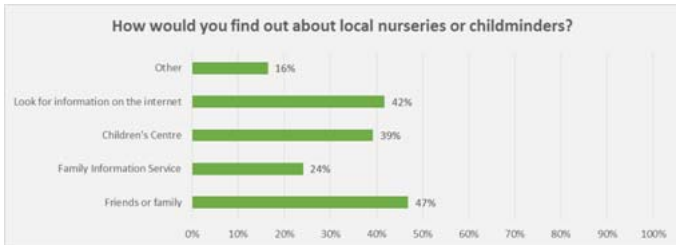
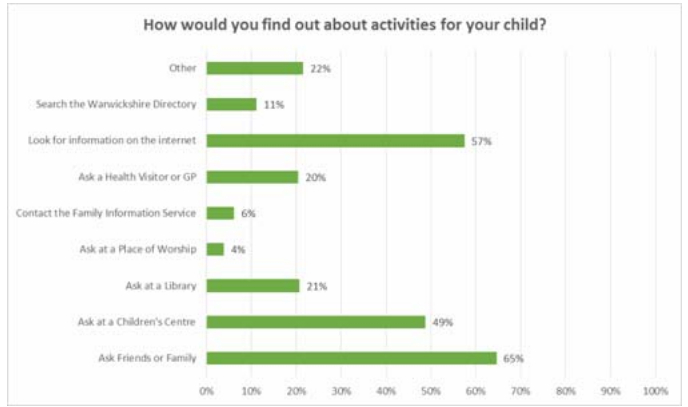
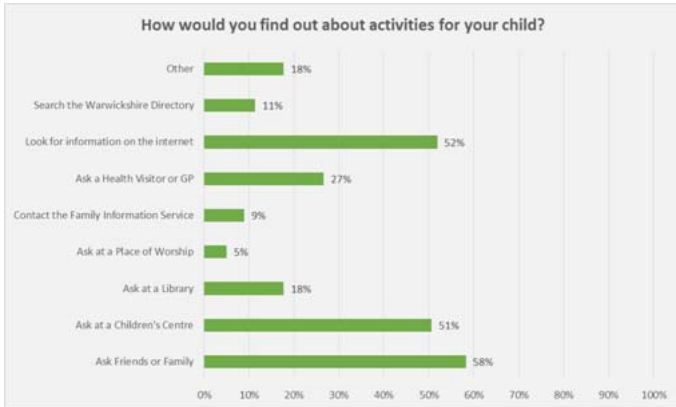
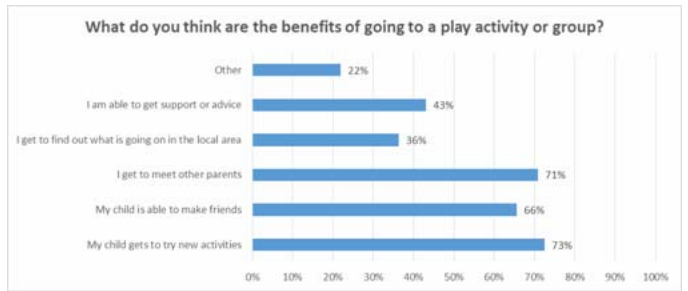
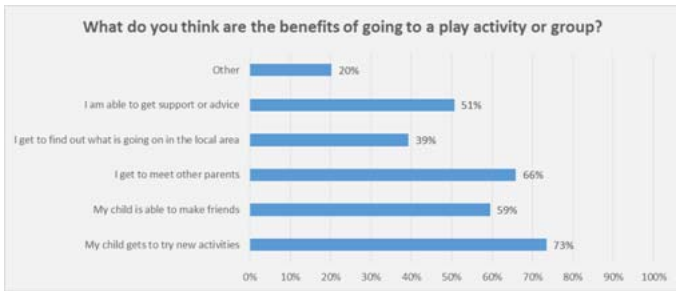


Has anything ever stopped you going to a play activity or group?



Has anything ever stopped you going to a play activity or group?





Acknowledgements & Thanks

Many thanks to all the parents and carers who gave their time to inform this report.

And thanks to the Warwickshire Community And Voluntary Action (WCAVA) research team:

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Nuneaton and Bedworth Locality Coordinator

We would also like to thank Entrust Care Partnership for their office space and support.

And the 34 community researchers who supported the project.



“ *It would be nice to go to someone when I'm feeling down or talk to them on the phone at that very time, and to someone who is constant so they get to know you with your problems.* ”



Smart Start

Giving Warwickshire's children the best start in life



What is Smart Start?

Warwickshire has great services and early years' education, plenty of open spaces and diverse communities, but more needs to be done.

Smart Start is a three year programme, run by Warwickshire County Council which will look at how families with children aged 0-5 years are currently supported, and how we can work together to ensure all young children in Warwickshire get the best start in life.



If you require this publication in a different format or language, please contact us on 01926 477512 or write to the address below:

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