



Trust for the



Study of



Adolescence

# **Involving Young People in Parenting Programmes**

## **Project Report**

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**2005**

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*'I talk more to my mum now, before all we used to do was argue!'<sup>1</sup>*

The **Involving Young People in Parenting Programmes** (IYPP) project provided an exciting opportunity to extend parenting support work to involve young people. Whilst all Youth Offending Teams (YOTs) should be linking work with young people and their parents (for example through planning and reviews), the key difference between this project and much of the support work currently offered to parents is that the IYPP project sites delivered services **directly** to young people as well as to parents. This work was structured so that young people and their parents addressed key themes such as communication, conflict resolution and relationship building either together or in parallel programmes. The project was funded by the Youth Justice Board and the Treasury's Invest to Save programme, with day-to-day management provided by the Trust for the Study of Adolescence (TSA). The Policy Research Bureau (PRB) carried out an evaluation of the project.

This report is designed to provide a wide audience with the learning from the project – from the project evaluation, from project sites and from their practice. It has been developed by TSA with staff from the five project delivery sites and includes material from the PRB's evaluation.

The five project sites involved were:

- **Parallel groups** - Centre for Fun and Families, Leicester
- **Family Group Conferencing** - West Berkshire Family Group Conferences Project
- **Family Therapy** - Luton Youth Offending Team
- **Parallel Individual work** - East Berkshire Youth Offending Teams
- **Family Skills Training** - Kinara Family Resource Centre, Greenwich, London

One of the key objectives of the IYPP project was to learn from the experiences of implementing these five models of intervention and to make that learning accessible to managers and practitioners who are considering developing their work with parents to involve young people. We hope in the report that follows to provide some useful guidance about setting up and implementing these models of service delivery and about key issues of practice, as well as about the experiences of parents and young people involved in the project.

**Please note: throughout the report names and other details have been changed to make sure the identities of people involved are not revealed.**

**Acknowledgements:** The TSA authors of this report, Cris Hoskin IYPP Project Co-ordinator and Sarah Lindfield Project Leader, would like to thank the parents, young people and families involved in the project for sharing their experiences with us, as well as to the staff from the five project sites for their hard work and commitment to developing this work. We also wish to thank the project Advisory Group members for their valuable input.

Thanks also to the Policy Research Bureau for their work evaluating the project and for the written material included here in Sections 1 and 3, in particular to Aikta-Reena Solanki and Emily Hill and also to Ilan Katz and Sokratis Dinos.

Also thanks to the Youth Justice Board and Treasury Invest to Save programme for the project funding and to the Home Office Juvenile Offenders Unit for sponsoring the project.

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<sup>1</sup> Young person's comment at a consultation day at the end of the project when asked whether they agreed or disagreed with the statement: "I talk more to my mum since going on the programme"

The report is structured as follows:

**Section 1 Overview of the Project** Here we describe the IYPP project structure and summarise some of the differences as well as the similarities between the five models utilised in the project, including material drawn from the PRB's evaluation.

**Section 2 Project Delivery Site Reports** Each of the five project delivery sites have provided a report of their experiences and learning. The five service delivery sites worked with TSA to develop a common format to report on their learning during the IYPP project. Each site has reported their experience of taking part in the project, how they developed their service to involve young people, barriers they met and overcame and their overall achievements.

**Section 3 The Experiences of Parents and Young People** Material from the PRB's evaluation is included here providing information about the experience of participating in the project for parents and young people. This information was gathered through 'Before' and 'After' questionnaires completed by young people and parents taking part in the project and from staff who completed questionnaires at the end of each family's involvement. Individual interviews were also conducted to learn more from parents and young people and from project staff.

**Section 4 Lessons Learned from Practice** Staff from the project sites also came together in learning events organised and facilitated by TSA. The purpose of these multi-site events was to provide a forum for the sites delivering the IYPP project in which they could share their expertise and address key issues of practice together. The content of these events has been written up to form this section of the report.

**Section 5 Conclusion** The overall achievements of the project are summarised, the dissemination strategy is detailed and next steps for taking forward the learning from the project are proposed.

This section provides the context of the Involving Young People in Parenting Programmes (IYPP) Project. It contains the project aims and objectives, a summary of the evaluation element and a comparison of the five different models of intervention.

### **1.1 Project Structure**

The overall aim of the IYPP Project was to develop and test effective practice models of involving young people in parenting interventions, which strengthen parenting protective factors and reduce the parenting risk factors related to the offending/anti social behaviour/truancy of young people.

The objectives of the IYPP Project were:

- To develop practice models of involving young people in parenting interventions.
- To extend parenting interventions by using five models of involving young people.
- To evaluate and compare the effectiveness of the different models (with each other and with parent focused interventions) and their impacts on:
  - young person's offending/anti-social behaviour/truancy
  - parent(s)/parenting
  - parent-young person relationship
- To recommend a strategy for the replication of effective practice.
- To disseminate the findings from the research project.

A range of statutory and voluntary parenting interventions have been developed in response to the provisions of the Crime and Disorder Act 1998, which enabled courts to make Parenting Orders to prevent youth offending, anti social behaviour and non-school attendance from June 2000 in England and Wales. More recent legislation<sup>2</sup> has expanded the range of circumstances in which parenting orders can be made and added parenting contracts to the range of available statutory measures.

The services that have been developed in this field have mainly focused on support to parents independently of interventions with their children. However, research in the US has shown that work with both parents **and** children can be more effective than concentrating on just one or the other (Mitchell et al 1993, Alexander et al 1994 and Kumpfer and Alvarado 1995 & 1998). Given these findings, a challenge faced by parenting providers in the UK was to develop their core work with parents to involve young people. The IYPP Project was consequently designed as a small scale study to learn from the direct experience of implementing a range of models of intervention involving both parents and young people.

The UK Treasury under the Invest to Save Budget funded the Youth Justice Board (YJB) in partnership with Trust for the Study of Adolescence (TSA) to develop practice models for involving young people in parenting interventions. The YJB also contributed funding to the project, which ran from 2002 to 2004.

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<sup>2</sup> The Anti-social Behaviour Act 2003 and the Criminal justice Act 2003 – provisions implemented in February 2004.

TSA provided the day-to-day management of the IYPP project and contracted with service deliverers, Centre for Fun and Families, West Berkshire Family Group Conferences Project, Luton Youth Offending Team, East Berkshire Youth Offending Teams and Kinara Family Resource Centre, to develop and test five models of involving young people in the following interventions:

- Parallel Groups
- Family Group Conferencing
- Family Therapy
- Individual Parents and Individual Young People in Parallel Programmes
- Family Skills Training for Parents and Children - Strengthening Families

TSA also contracted with the Policy Research Bureau (PRB), an independent research centre, to coordinate and manage the evaluation element of the IYPP project and to evaluate its success in achieving the objectives outlined above. This included gathering information about the **experiences** of the young people and parents involved in the project as a whole and on the **process** of implementing the projects. The data collection methods were:

- 'Before' questionnaires completed by parents and young people as they are introduced to a project.
- 'After' questionnaires collected on or near completion of their involvement.
- Questionnaires completed retrospectively by project workers about their perceptions of the experiences of young people and parents involved in the project (whether or not they had 'completed' the project)
- Interviews held with eight young people, ten parents and five project workers (one per site).

The findings from the evaluation are presented later in this section in relation to process (drawn from the individual interviews with five project site staff, one per project site) and in Section 3 in relation to young people and parents' experiences of the programme.

TSA organised multi-site meetings to bring staff from each of the five sites together on a regular basis. These provided the opportunity to share experiences of working within the overall IYPP project, to share practice issues and strategies to address them and take part in training on key issues identified across the five sites.

*That was wonderful to meet with the other projects to see what they were doing. We learnt an enormous amount just through sort of informal networking at those days. (Sunita)*

*PRB Interview with site staff*

The TSA project co-ordinator also met regularly with the five project sites individually, working with them to develop and regularly review project plans and risk strategies. It seems that some sites found this approach helpful and intended to adopt the planning and risk strategy model for other areas of their work. Whereas, for at least one worker this approach *sometimes felt very formal, with the feeling that they were being 'checked up on' in terms of meeting targets.* (PRB Interview with site staff)

## **1.2 Comparing the Five Models of Intervention**

This section compares and contrasts the five models of intervention included in the IYPP Project which the Policy Research Bureau have summarised as follows:

### **1. Parallel Group Work**

*This intervention involves a teenagers group – ‘Avoiding Conflict with Adults’ - running at the same time as the parents group - ‘Living with Teenagers’ - and covering the same core elements. The two groups cover topics including improving communication, boundary setting and discipline methods, problem solving, conflict resolution and being a parent/teenager. The groups interact using a mixture of methods including discussion, role-play and video. Both parents and young people attend seven, 2-hour sessions. They are designed to run in parallel, or slightly staggered with parenting groups beginning first.*

### **2. Family Group Conferencing (FGC)**

*Originating in New Zealand, this intervention brings together the family network in a meeting to decide on future action to support a young person where there are welfare, accommodation, child protection or youth justice issues which require resolution. The conference can include family, friends and other significant people in the life of the young person and/or the family as a whole, including professionals. Where the FGC has been successful, it concludes when a plan has been developed and agreed. This particular project sought to expand the use of the FGC service beyond the parameters of Social Services to test its effectiveness in Education and Youth Justice.*

### **3. Family Therapy**

*Family Therapy involves practitioners working with families either in their home or in an office setting. The aim of the family therapy intervention is to strengthen positive communication and relationship patterns between family members, and between family members and outside influences such as peers, school and the neighbourhood. Issues identified and unhelpful patterns of behaviour become the subject of a problem solving approach to stimulate change. The intervention is delivered by paired family therapists. Families are offered 6 to 8 one-hour sessions. The objectives of the family therapy intervention include exploring with the family appropriate and effective parental discipline strategies, strengthening the family member’s capacity to communicate with each other and supporting family empowerment and capacity to direct change. Factors such as family history, lifecycle events and triggers to offending are explored.*

### **4. Individual parents and individual young people in parallel programmes**

*The emphasis of this programme is to undertake individual work with teenagers whilst covering core elements in tandem with their parents’ programme. The parent and young person are each assigned a different project worker but cover the same themes and issues during their individual sessions, with the parenting worker and young person’s worker liaising in between. Families are offered a 6 to 7 week programme. A mid-point and final review can be held involving workers, parent/s and young person to discuss progress and consolidate their achievements.*

### **5. Family Skills Training for Parents and Young People**

*This programme has been developed in the USA and involves the whole family attending different group skills programmes and family sessions to practice skills learnt. The broad aim of the service is to reduce young people’s involvement in crime and prevent re-offending by providing integrated guidance and skills-based structured programmes for parents and young people. Families are offered a 12-week programme. Parents and their children meet at the beginning of each session and then they spend time in their own groups, coming together for the final hour of the session. Parents’ sessions include behaviour management, communication skills and boundary setting. For young people the sessions include social skills training, communication, problem-solving and coping skills. The family sessions focus on increasing the co-operation of family members by problem-solving and communication skills training.*

### 1.2.1 General overview

In some respects the models were very different, although they all involved the inclusion of young people in work with parents. Two sites worked with the young people in parallel with the parent(s) and three with the young person and parent(s) together. Two of the models were in essence process interventions, Family Group Conferences (FGC) and Family Therapy, whereas the others involved the delivery of programmes, Parallel Groups, Parallel Individual and Family Skills Training.<sup>3</sup> Two of the models were implemented within a Youth Offending Team (YOT), two within a local authority service agency and one within the voluntary sector.

### 1.2.2 Development phase

All of the project delivery sites involved with the IYPP Project were already offering work with parents and the IYPP Project was a development of that existing work. Even though this was the case, each delivery site had a development phase, which varied in length from three to six months, but all the delivery sites felt that they would have benefited from a longer development phase. One of the issues impacting upon this was that of recruitment. Anyone wishing to develop their service in a similar way would need to allow sufficient time for recruitment and development.

The Policy Research Bureau learnt from interviews with a project worker from each site that: *The majority of the project workers felt quite 'rushed' during the initial set up stages of the programme. Staff reported that they had to settle into their roles quite quickly and in an ideal world, if timescales had not been so tight, they would have liked more preparation time to plan and follow ideas through. Staff also emphasised that project set up and delivery could have been improved had they not had to focus on the two simultaneously, but rather focus on set up and then turn their attention to receiving referrals and providing a service. Only one intervention was fully operational before support from TSA began. On a programme delivery front, some project workers also felt that families needed longer to engage with the programme, suggesting that the timescale was 'too rigid'. Where follow-up strategies were not in place, workers suggested that projects make sure they prepare other resources to refer parents and young people onto after they had finished.*

### 1.2.3 Referrals

The IYPP as a whole aimed to work with:

Parents and their children or young people (10 –17 years), where parents have been assessed, or have identified themselves as requiring parenting support and the young people are involved in offending, anti-social behaviour or truancy.

The Policy Research Bureau found from their interviews with a project worker from each site that: *Each project had defined its aims and in the main these were similar across the five projects. It was evident that the referral process for each of the programmes was based on the young person's needs or behaviour, although the programme was open to families. It would appear that the criteria for engagement with the IYPP Project were broad and on occasion rather vague. However; the main criterion for referral was virtually the same across all the projects and designed to cater for referrals aged 10 to 17 years. All the referrals were voluntary and tended to come from*

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<sup>3</sup> **Programme** refers to following a specific programme of work over a specific period of time either in a group or on an individual basis. The programme can be commercially produced or developed in house. For example – 7 group sessions of 2 hours duration on a weekly basis following a planned session plan each week.

**Process** refers to an intervention that is not led by a written programme, but rather explores issues. Such an intervention is driven by the needs of the clients and does not follow a prescriptive programme. For example, a family group conference will explore the issues within the family and look for solutions to the problems therein



*a range of statutory agencies (e.g. YOT, education, health, social services, etc.) most notably social services. It is worthwhile noting that nearly one in four young people were self-referred.*

*The IYPP Project proposal stated that 'each of the five service delivery sites will be expected to deliver services to 24 families during the [IYPP Project] service delivery phase'. It was evident that reaching this desired number was problematic for most of the projects:*

*Its been quite a challenge to keep families coming and engaged ... it just involves such a commitment from the parent and young people, and the parent has to be committed to get the young person along, let alone bring themselves (Frank)*

*It is worthwhile noting that project staff stated that they did not feel the need to change the referral criteria throughout the course of the evaluation period. However; once projects had established themselves all but one found it necessary to make changes to their referral process. The changes came about for a variety of reasons. Firstly, in the early stages of operation when referrals were low, projects attempted to publicise their service provision more widely. This resulted in one project in particular receiving more referrals than it could provide for.*

*Another reason for changing the referral process was to ensure that the families who were referred were 'appropriate' to the specific projects. It was highlighted that initially projects did not undertake their own formal assessment to judge suitability of referral to the programme. Instead they would rely on the referring agency to undertake its formal assessment (e.g. ASSET used by the YOT). This might then be followed up by the project staff with an informal interview with the family. However; this method of working proved to be problematic because in some instances projects received referrals that did not entirely fall into the target population:*

*We were getting referrals that really weren't appropriate for the programme. We'd open a big can of worms and then it'd be like "what are we going to do with this?" Sometimes the family clearly needed more support than we could offer on a parenting course ... our role was just getting messy. (Sunita)*

*According to some project staff, agencies making referrals to each of the five projects were not always aware of the project in terms of its target population, mode and medium of delivery, and content of intervention in the early stages of the operational phase. This resulted in either a lack of referrals or inappropriate referrals being made to the individual projects. In order to address such difficulties many projects embarked upon publicising their specific projects to potential referrers by way of publicity material (e.g. leaflets) or arranging events at which they could discuss the intervention with other agencies.*

#### **1.2.4 Staffing and staff training**

The **minimum** number of staff to implement the delivery varied from one in the case of Family Group Conferences (FGCs), two for Individual parallel work, Family Therapy and Parallel Groups and three in the case of Family Skills Training (FST).

An issue to consider in the case of Family Therapy (FT), Family Group Conferences (FGCs) and Family Skills Training (FST) is that these models require training in the methodology and the model can only be implemented and delivered by trained staff. For Parallel Groups (PG) and Individual Parallel work (IPW) the training element could involve training in a commercially purchased programme if this were the programme of choice. It is, however, perfectly plausible for a delivery site to develop their own programmes for these models. Inexperienced staff would benefit from facilitation skills training and in the case of Parallel Groups in co-facilitation and group work training. In some cases site delivery project staff delivered training to potential referrers, both internal and external to their own service, to raise their awareness of the model and thus ensure appropriate referrals.

The Policy Research Bureau found that:

*Staffing for one of the projects was problematic in the early phase of delivery. The project was faced with having to operate its intervention with only one of two anticipated staff members although it was not clear whether this was a funding issue or due to organisational factors such as references or contracts. Some projects also experienced high staff turnover - those who were responsible for co-ordinating the initial proposal moved on by the time the projects were being implemented. This created a temporary void in knowledge about the rationale for the project, and resulted in inadequate handover instructions, particularly in relation to project design and set up.*

*However; in the main, staff reported coming to their posts having already been fully trained and equipped for their roles. Many stated that they did not receive further training as this was not necessary given that this was a familiar area of work. Only one project reported that it had to provide specific training on the intervention. This is because it was based on a U.S. model. In one instance however; the project worker felt that she was "learning on my own" as there had been 'no time' for official training from the outset.*

*Projects seemed to be able to cope well with the organisational aspects of their programmes, with only a small number of projects coming across difficulties in cases where they lacked support. The project workers we spoke to were responsible for managing the programme as well as working with the parents and young people, and some spoke of the challenge in balancing the two:*

*It's difficult sometimes to balance the needs of the project and the needs of the families, but I think that's a difficulty that project managers who are practitioners face wherever you go.  
(Sheila)*

*Where project workers felt that they did not have a good administrative system in place, this was seen to effect communication between staff. As one project worker advised:*

*"don't underestimate the time admin takes, ensure adequate admin support." (Neal)*

### **1.2.5 Venues and programme resources**

The issue of finding suitable venues was highlighted in several cases. In the Family Group Conference (FGC), Family Skills Training (FST) and Parallel Groups (PG) models, venues were needed to accommodate groups of people, which meant accessing suitable venues in the community. In the case of Family Skills Training (FST) this issue was compounded by the fact that there were two separate group sessions and joint sessions. Therefore a venue was needed that had at least one room large enough to accommodate both groups together in the family sessions. The delivery site implementing Family Therapy (FT) and Individual Parallel Work (IPW) delivered the model in clients' homes. Individual Parallel Work (IPW), however, accessed alternative venues in some cases, as some of the young people felt more comfortable working outside of the home environment.

The Policy Research Bureau found that:

*In terms of the medium of delivery, although a number of 'off the shelf' programmes for running such interventions exist, some projects reported difficulties in finding an existing model that fully met the needs of the parents and young people with whom they were working:*

*[We needed to] make it [the intervention] meaningful in our context because it's a universal programme and we have a very much targeted client group. And so that was one of the challenges was how we fit with our target group. (Frank)*

*This resulted in a 'mix and match' approach in which project workers often took elements of existing programmes and supplemented or modified the material to suit their clients' needs. Furthermore a number of project staff stated how they needed to make changes to the duration of the intervention. Originally some interventions were planned to take place over 6 to 7 weeks, with*

one session a week. However; this was seen to be unrealistic as there was too much material to cover during this time period:

*It can be too short for the young people...because they're telling us that it's a shame that it's ending, and I think we can also recognise that by the end of seven weeks that there is actually more work that can be done. (Louise)*

### **1.2.6 Supervision of staff**

Another key theme for all sites was that of staff supervision. This was considered by the project delivery site staff to be so essential to the effective delivery of each model of intervention and to ensuring the delivery of effective services for clients, that a workshop was organised by TSA at one of the regular multi-site meetings to address the issue. See Session 7 Staff Supervision in Section 4 Lessons Learned from Practice below.

All of the delivery sites had policies and procedures in place regarding staff supervision or line management. In most cases staff supervision was adapted to include new elements, such as clinical supervision, peer supervision, debriefing and consultation. In the case of FT, the therapist must receive some supervision from a trained Family Therapy (FT) Supervisor.

### **1.2.7 Time scales**

The timescales for each model varied from seven weeks to six months. In particular, Family Group Conferences (FGCs) and Family Therapy (FT) were longer interventions. Both of these models of interventions are processes, rather than programmes (see footnote 3 for definitions) and so the length of the interventions was client led, rather than prescriptive. For Family Group Conferences (FGCs) the length of the intervention varied according to the review process. Typically, there is a review approximately three months after the Family Group Meeting, but further reviews may be undertaken, according to the individual need of the family. For Family Therapy (FT), the length of the process is determined by the individual need of the family. In the other three models, the time taken was easier to define, as the length of programmes determined this. In all these models, the time for each family was the programme length, plus home visits (1 or 2) to engage families prior to the intervention or to review progress at the end of the intervention. Sometimes, extra home visits were arranged if there were issues that needed addressing, which were unsuitable/inappropriate to address in the group setting or within the programme.

When working within the youth justice system with young people or parents on shorter statutory orders, the length of the intervention needs to be taken into account in planning. Longer interventions, however, can continue on a voluntary basis once a statutory order is closed.

In the two models that involved parents in groups (Parallel Groups and Family Skills Training), both delivery sites felt that the process worked better if the parents' sessions began before the young persons' sessions. In both cases, the parents' sessions started three weeks before the young persons' sessions. Both sites found that this allowed parents to 'offload', so that by the time the young people were involved, the parents were more ready to discuss their children and issues in a non-blaming way. In the case of Family Skills Training (FST) this issue was also pertinent when parents and young people were referred who had had no previous involvement with the service. Parents were then invited to three group sessions prior to the introduction of the Family Skills Training (FST) programme.

### 1.2.8 Management and partnership arrangements

From their interviews with a project worker from each site the Policy Research Bureau observed:

*Almost all of the projects were run by single agencies which were the YOT, Social Services or a voluntary agency. One was run by a partnership of the two agencies. In addition, multi-agency Steering Groups were generally in place, but the extent to which these were thought to meet regularly and be active in driving the individual project's development was variable.*

*Across the IYPP Project there were both success stories in partnership working, and some that had proved to be less effective. In the majority of cases successful partnership was achieved; however; some projects felt that their attempt to create/integrate themselves as part of an interagency team proved rather difficult. One of the problems related to issues of confidentiality and information sharing within the partner agencies. Representatives from different agencies were reluctant to share information with each other:*

*We've struggled with issues around confidentiality ... you know, get a group of social workers and educational welfare officers together and they don't always see eye to eye about how a child should be dealt with. (Sheila)*

*Difficulties around communication were also highlighted as detrimental to partnership working: "you work very well with one agency, [then] somebody leaves from that agency and the communication has disappeared" (Sheila). In one case a number of teams had planned to form a partnership to implement and deliver the intervention but this did not materialise immediately. Consequently one team felt particularly pressurised as it believed that it had to carry the work forward, not least in terms of investment in resources. It wasn't until much later that the partnership was established.*

### 1.3 Comparative Table of the Five Models of Intervention

	<b>Parallel Groups</b>	<b>Family Group Conferencing</b>	<b>Family Therapy</b>	<b>Individual Parallel Work</b>	<b>Family Skills Training</b>
<b>SITE</b>	<b>Centre for Fun and Families, Leicester</b>	<b>West Berkshire Family Group Conference Project</b>	<b>Luton Youth Offending Service</b>	<b>East Berkshire Youth Offending Teams</b>	<b>Kinara Family Resource Centre, Greenwich</b>
<b>CONTEXT OF PROJECT</b>	<b>Voluntary Sector</b>	<b>Local Authority Social Services</b>	<b>1 YOT</b>	<b>3 YOTs</b>	<b>Local Authority Social Services Centre</b>
<b>STAFFING</b>	Minimum - 2 workers, who can run both groups if necessary. Optimum – 5 workers, 2 for LWT group and 3 for ACWA group.	Minimum of 1 trained Family Group Conference Facilitator. The number of conferences taking place is dependant upon the number of facilitators.	Minimum of 2 family therapists. It is feasible for one to be a trainee.  1 trained Clinical Family Therapy supervisor (see Luton’s project site report on p41 below).	Minimum – 1 parenting worker and 1 parallel young person’s worker. There can be several workers offering individual parallel work in a service.	Minimum of 3 staff – 1 for the parent’ group and 2 for the young people’s group. Experience showed that it may be necessary to have 3 staff for the young persons’ group dependant upon the number of families taking part.
<b>TRAINING</b>	Staff who are inexperienced with group-work would benefit from group facilitation skills training. The CFF can provide training for their programmes. Other programmes could be used, often with accompanying training.	Training in Family Group Conference Facilitation is essential	Workers must be trained Family Therapists.	It may be helpful to have training that is linked to any specific programme used.	This model can only be implemented by staff trained in the use of the programme. Currently the training is available from US developers or “Altogether Now – Supporting Parents in Barnsley”.

<p><b>PROGRAMME RESOURCES</b></p>	<p>Can use commercially produced programmes.</p> <p>Can develop in-house programmes.</p>	<p>NA</p>	<p>NA</p>	<p>Can use commercially produced programmes.</p> <p>Can develop in-house programmes.</p>	<p>A programme pack is available for the US, which includes session plans, worksheets and videos.</p>
<p><b>VENUES AND OTHER RESOURCES</b></p>	<p>Venues with a room large enough to accommodate group-work.</p> <p>Refreshments for the break.</p>	<p>A variety of venues in the community.</p> <p>Food is always served at a conference.</p>	<p>NA</p>	<p>Venues for sessions.</p> <p>Although this site delivered sessions in the clients' homes, many young people preferred an alternative venue.</p>	<p>Venues with at least 2 rooms large enough to accommodate group-work and at least one room large enough to bring the 2 groups together for a social activity, usually refreshments/food.</p> <p>Transport.</p> <p>Child care facilities.</p>
<p><b>TIME SCALES</b></p>	<p>Dependant upon current practice within the service or the programme used.</p> <p>This site had 6 group sessions, with pre group home visits.</p> <p>Sessions were weekly.</p>	<p>Total time scales vary according to individual case. The most important phase is the preparation for the conference and the time taken for this is dependant upon the number of family members and agencies involved.</p> <p>A review of the plan takes place 3 months after the conference, but further reviews can be arranged if necessary.</p>	<p>Varies according to individual families needs. Can be anything from 1 to 12 sessions, but on average between 3 and 8 sessions. These take place over a variable period of time.</p> <p>This site conducted sessions at 3 to 4 weekly intervals for an average time scale of approximately 6 months.</p>	<p>Dependant upon the current practice in the service or the programme used.</p> <p>This site used a 7-week programme, with additional sessions where necessary to meet individual needs.</p> <p>Sessions were weekly.</p>	<p>The model has 7 core 2-hour sessions and 4 x 2-hour booster sessions if they are felt necessary.</p> <p>This site used the 7 core session model Where no previous work had been undertaken with families, the programme was preceded by 3 introductory parents' sessions, which allowed the parents to "offload" before the programme sessions began.</p> <p>Sessions were weekly.</p>

<p><b>SUPERVISION</b></p>	<p>Workers need dedicated time for planning and debriefing.</p> <p>There needs to be an element of joint supervision or consultation to address co-facilitation and process issues.</p>	<p>Family Group Conference Facilitators, will require supervision from a FGC Co-ordinator.</p> <p>If there are several facilitators, this supervision should be supported by a “practice development forum” or peer supervision.</p>	<p>Family therapists must have clinical supervision from a trained Family Therapy Supervisor at least once a month.</p> <p>The Family Therapists need some discussion and reviewing time for the cases they are co-working.</p>	<p>Parenting and Young Persons’ worker need to have some dedicated joint planning and reviewing time to ensure that the programme is addressing issues consistently.</p> <p>As the 2 workers are working within the same family, some joint supervision is advisable.</p>	<p>Need adequate time for staff to prepare and debrief each session. This site implemented a consultation model, with a member of the management team as consultant to the group facilitators at the beginning, middle and end of each group process. If this does not take place in this way it is recommended that there is some form of joint supervision of the group facilitators.</p>
<p><b>SPECIFIC ISSUES</b></p>	<p>Will need to consider when to start young persons’ group. Experience has shown that this model most effective in terms of engaging clients if young persons’ group begins approximately 3 weeks after parents’ group.</p> <p>If the same workers are doing both groups issues, they will need to address the issue of confidentiality with parents and young people at beginning of the intervention.</p>	<p>Many agencies are not familiar with this model. Training and awareness raising sessions can address this and ensure suitable referrals.</p> <p>This model is an empowering process, not a programme.</p>	<p>Needs qualified staff and qualified supervisors. This model of intervention is intensive in nature and can last over long periods of time.</p> <p>This model is therapeutic and not a programme.</p>	<p>This model took place across 3 sites, which raised the issue of consistency across the sites. Strategies need to be in place to address this issue in a multi-sited service, such as practice forums/meetings for staff from all the sites.</p> <p>A joint session at the end of the programme was found to be a good way of resolving some issues and reviewing the progress made.</p>	<p>Requires high level of resources. Sessions are very content driven this model is highly prescriptive, including the facilitator’s role. Some cultural and linguistic issues with the US based session content. A UK version is currently being developed. Kinara staff found the model to be more suited to a younger age range – 10 to 14 years – but some older young people completed the programme successfully.</p>

This section contains a more detailed description of each of the five sites involved in the IYPP Project.

- |                                  |                                 |
|----------------------------------|---------------------------------|
| 1. Centre for Fun and Families   | Parallel Groups (PG)            |
| 2. West Berkshire FGC Project    | Family Group Conferences (FGCs) |
| 3. Luton Youth Offending Service | Family Therapy (FT)             |
| 4. East Berkshire YOTs           | Individual Parallel Work (IPW)  |
| 5. Kinara Family Resource Centre | Family Skills Training (FST)    |

The report from each site was written by representatives of the site and edited by TSA. Each of the following sections was written to a framework provided by the TSA and refined by the site staff together in order to maintain consistency.

Each of the site reports contains information on the following:

1. Context of the Project
2. Model of Intervention
3. Referrals
4. Project Development
5. Resources
6. Case Studies
7. Summary of Achievements
8. References

### **Note**

The site reports that follow are based on the authors' experiences of developing and delivering their service model. They reflect individual and local experiences and are included here to provide some detailed descriptions of what staff from these projects encountered in their local situations. These may or may not be the same issues faced elsewhere.

Additionally, in the Summary of Achievements sections we have included positive achievements. This is obviously not to say that all families involved with project sites experienced these positives, **nor** that the positive achievements described are directly attributable to the services provided by the sites.

Where questionnaires are referred to in the site reports, these are the 'Before' and 'After' questionnaires which young people and parents were asked to complete for the overall IYPP project evaluation as reported in Section 3.





## **Involving Young People in Parenting Programmes Project**

### **Parallel Groups**

#### **Project Workers:**

**Liane Ashberry  
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#### **Project Managers:**

**Rita Nag  
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**Report Writer: Liane Ashberry**

Contributions from Abida Hussain and Rita Nag

## Centre for Fun and Families Summary

- The Centre for Fun and Families (CFF) is a voluntary organisation, based in Leicester
- CFF ran **Parallel Groups**: 'The Living With Teenagers' (LWT) Programme for parents of 11-17 year olds and the 'Avoiding Conflict With Adults' (ACWA) programme aimed at young people who are getting into conflict with adults, peers or authority figures, because of their behaviour
- The Parallel Group programmes covered 7 weeks for both parents and young people. Both groups had sessions of 2 hours duration
- Social Learning Theory and Cognitive Behavioural Approaches provide the theoretical underpinning for the group programmes
- 6 Parallel Group Programmes were run during the project (6 x ACWA and 6 x LWT groups)
- 25 families completed the programme and filled in questionnaires for the research element of the project

# **1. CONTEXT OF THE PROJECT**

## **1.1 Service Context**

The Centre for Fun and Families (CFF) was set up in 1990. The Centre is a registered national charity based in Leicester. We are a voluntary organisation, independent of any statutory or government department.

## **1.2 Aims and Ethos**

The Centre's aim is to offer support and assistance to any families with children aged 0-17 years experiencing difficulties in managing behaviour, in order to avoid or repair relationship or communication breakdown.

The CFF are committed to offering a free service directly to parents and carers from all sections of the community. We take referrals from a wide range of professionals and agencies e.g. GP, Education Welfare Service, Social Health and Care, Community Mental Health Service, CAMHS, Health Visitors, Teachers, etc. Parents can also self refer to us. 80% of our referrals are from disadvantaged families (for example lone parents, parents with mental health issues, ethnic minorities, low income, domestic violence issues etc).

The underpinning ethos of the parenting groups is to make the groups accessible to parents and carers from diverse social, cultural, and economic backgrounds, to encourage parents/carers to believe that they are the experts about their young people and to create a supportive environment with other parents/carers and facilitators so they can be empowered to find their own solutions to difficulties.

The Centre offers 3 group programmes, the Fun and Families, positive parenting programme for parents/carer of 0-10 year olds, the Living With Teenagers (LWT) Programme for parents of 11-17 year olds and the "Avoiding Conflict With Adults" (ACWA) programme aimed at young people who are getting into conflict with adults, peers or authority figures, because of their behaviour.

## **1.3 Parenting Strategy**

In October 1999 as part of the National Parenting Programme, the Youth Justice Board (YJB) agreed to fund a 3 year project, entitled "The Leicester City and County Parenting and Cognitive Behaviour Project". The aim of this project was to:

- a) Train Education Welfare Officers and Youth Offending Team Workers to provide a parenting intervention for parents on parenting orders. The orders were made in either the Youth Court in the interests of preventing re-offending or in Education Proceedings due to non school attendance.
- b) Offer families (i.e. parents/ carers and their young people aged 11-17 years) experiencing difficulties with anti-social and offending behaviour, assistance to reduce these risks. This assistance was provided in the form of the two related group programmes, namely LWT and ACWA. The ACWA programme was designed and piloted as part of this project in response to parent's requests that we undertook work with their young people to help facilitate change. It was intended to be run in parallel with the LWT programme.

This project was independently evaluated by The Loughborough University - Centre for Child and Family Research (2002). The evaluation concluded that the CFF programme had led to a 43% overall reduction in behaviours identified as being difficult to manage by parents. It concluded that it was more effective to start the young people's programme after commencing the parent's programme. It was found to be easier to attract young people to the programme if a relationship had already been established with their parents/ carers. Participation in the 'Involving Young

People's Project' (IYPP) therefore offered a timely way forward for the Centre to develop its established work with parents and young people.

#### **1.4 Over-arching Parenting Strategy in Leicester City and County**

Because of the successful model of interagency partnership and the benefit to families of the Leicester City and County Parenting and Cognitive Behaviour Project, it became apparent to all the agencies involved in Leicestershire that the parenting group work intervention needed to continue. As a result an interagency strategy for improving parenting was established, since parenting was considered to be no single agency's responsibility. The Green paper 'Every Child Matters' had placed emphasis on parenting as an issue of priority for all agencies.

This strategy sought to bring together those agencies whose responsibilities lay in supporting children in conflict with their parents, children at the risk of accommodation, school exclusions and offending activity for e.g. Social Care and Health, Youth Offending Service, Child Behaviour Intervention Initiative, Education Welfare Service, Connexions, Housing and Anti-social behaviour teams, Community and Youth Education Services, Crime and Disorder partnerships and Voluntary Sector providers.

The broad aims of this strategy were to provide diverse parenting provision (both group work and one to one work) across the City and County to meet the needs of the communities. This initiative would be multi-professional and the main focus of the parenting groups would be to provide preventative support, although there would also be a need to establish groups for parents directed by the Courts.

The Parenting Strategy in the County has now been in process and operating with success for over 12 months. The strategy in the City is being established. The Parenting Strategy has been endorsed by the Children's Strategic Partnerships both in the City and County of Leicester.

## 2. THE MODEL

### 2.1 Underpinning Theoretical Principles

The model is based on applying Social Learning Theory (SLT) or Cognitive Behavioural principles to situations in families' lives. Social Learning Theory rests heavily on the theories of vicarious learning, that is, observational, modelling or imitation (Sheldon 1982, Bandura 1969). A great deal of what we learn is achieved by watching other people do things. The Centre's group work programmes are based on these principles and on the work of Herbert (1978 & 1988) who did a considerable amount of work on the behavioural treatment of 'problem children' using the social learning model. Herbert suggested that, as learning occurs within a social context, behaviour modification is not only about changing the behaviour of the 'problem child' but also about changing the behaviour of the adults, who form a significant part of the child's environment, thus placing attention on the 'problem behaviour' rather than the 'problem child'. In practical terms SLT proposes that behaviour is learnt and can therefore be unlearned and an alternative learnt in its place. The model offers two options to parents in the Living with Teenagers parenting groups, to **increase** a wanted behaviour which is currently in deficit and to **reduce** an unwanted behaviour which is in excess.

ACWA, the young person's programme, is also underpinned by Social Learning Theory and the application of Cognitive Behavioural approaches to understanding and changing one's own behaviour, with the aim being to help young people manage their own anger and reduce conflicts with others.

The parents' LWT group-work programme had been running successfully for ten years. The young peoples' ACWA programme was developed in 2001.

### 2.2 Programme Structure

As a result of the Loughborough University Research findings, a model was adopted whereby the parenting group-work started 2/3 weeks prior to the work with young people. The benefits of this staggered but parallel group-work structure were seen to be:

- Parents/ carers would have started to implement a more positive approach to managing behaviour, and could possibly be already having some success
- Parents might be more open to seeing things from the young person's perspective
- Young people might meet with a more positive response when they attempt to try out new skills in resolving conflicts and therefore feel more empowered
- Parents involvement in a programme could avoid the young people feeling targeted or blamed
- Parent's involvement could increase young people's feelings of self worth, i.e. their parents cared enough to commit to the programme and vice versa for parents
- Young people's involvement could give the parents a more optimistic outlook on the potential success of their programme
- Parents and young people would be working together for change and this could kick start future cooperation

### 2.3 Programme Content

Parents are guided through a process where they:

1. Define clearly **what** is the specific behaviour they find difficult to manage
2. Identify **why** it might be happening
3. Explore **how** they can choose from a range of strategies to manage the behaviour or effect change.

This methodical process and framework allows parents/ carers to take a step back and to make choices about their responses.

Similarly young people are encouraged to take a step back and look at:

1. **What** behaviour is getting them into difficulty or conflicts
2. **Why** it is happening and the consequences of it
3. **How** they can change this by developing their skills.

The programme focuses on helping young people develop their skills to resolve conflict, manage anger and find alternatives to previously learnt behaviour. It empowers them to make choices about the changes **they** want to make in their lives.

## **LIVING WITH TEENAGERS GROUP FOR PARENTS AND CARERS**

This is a certificated 7-week programme delivered in weekly 2 hour sessions. The approach is of independent, non-judgemental, supportive facilitation and group work with other parents, which can help remove the stigma of blame attached to parents. The group work intervention follows the following problem-solving process during the seven-week programme. Sessions are added if needed to complete the process. The programme makes use of practical exercises, video clips, role-plays, discussions, etc.

### **Step 1. What?**

This involves parents learning to define what behaviour is difficult and to be clear and precise about what it is they want to change. Parents are encouraged to observe, track and record when, where and with whom this specific behaviour occurs. This will help them to notice patterns in the behaviour and that one behaviour can lead to another and what can influence it. Parents can learn to be more objective in problem-solving the behaviour.

### **Step 2. Why?**

Parents are encouraged to use their observations and recordings to note why the behaviour is happening and what are the triggers for the behaviour, what might be the underlying causes (such as diet, tiredness, poor listening, mixed messages) to explore what happens immediately after the behaviour and what are the payoffs and the reinforcers for the behaviour. Parents share experiences, values, beliefs about what is/isn't normal and acceptable teenage behaviour, increasing their awareness of developmental, social and cultural factors influencing their children's behaviour and their own response to it. Parents explore their own parenting styles and what influences this.

### **Step 3. How?**

This stage helps parents to explore how they can influence behaviour by reducing unwanted behaviour and increasing wanted behaviour. Parents are encouraged to focus on the positive by turning the unwanted behaviour into wanted behaviour. Strategies for parents increasing positive behaviour include the use of praise, warmth and love, listening, giving time and positive attention to young people through a shared activity, etc. Effective and non-effective sanctions and reinforcers (pay-offs) are explored. The negative effects of physical punishment are discussed

### **Step 4. Introducing the cognitive behavioural approach**

Parents are encouraged to explore the relationship between thoughts, feelings, and behaviour and to explore the effect of positive thinking on behaviour. Parents look at how they can look after themselves, cope with stress and overcome adversity. Parents are signposted to a range of support organisations.

The seventh week of the LWT programme usually focuses on evaluations and follow-up support.

## **AVOIDING CONFLICT WITH ADULTS 'GROUNDED' GROUP FOR YOUNG PEOPLE**

ACWA is also a 7 week programme, delivered in weekly 2 hour sessions. The programme makes use of practical activities, group games, role-plays, videos, discussions, problem-solving and team building activities to engage young people.

The seventh week of the ACWA programme includes an outing planned by the young people, but may also include evaluations/endings.

Young people are encouraged to consider the consequences of their behaviour and how they can take control to achieve a more positive outcome. They are supported to consider the links between their thoughts, feelings and behaviour and to develop skills that enable more productive communication and outcomes that give them more control over their lives. Skills include listening, anger management, negotiation, non-verbal and verbal communication, problem solving, conflict resolution and assertiveness.

The sessions are structured as follows:

### **Session 1**

Introductions and relationship building. Introduction to the model of the link between thoughts/feelings/behaviour in relation to getting angry.

### **Session 2**

Triggers for conflict, one thing leads to another, how situations escalate, how to get off the 'escalator'.

### **Session 3**

Listening and verbal and non-verbal communication skills. Understanding own behaviour and consequences.

### **Session 4**

Focussing on alternatives to consequences. Introducing overarching model – TEACA (Triggers, Emotions, Actions, Consequences, Alternatives). Looking at cognitions/perceptions –alternatives. Skills to assist practising of alternatives e.g. negotiation, problem solving, communication.

### **Session 5**

Understanding own situations and what is within and outside personal control. Personal responsibility for actions. Assessing gains and losses. Considering support networks.

### **Session 6**

Recap of all group-work and learning. Bringing it all together by using skills e.g. communication, negotiation, problem-solving to plan a group social activity. Endings, getting feedback and completing evaluations.

### **Session 7**

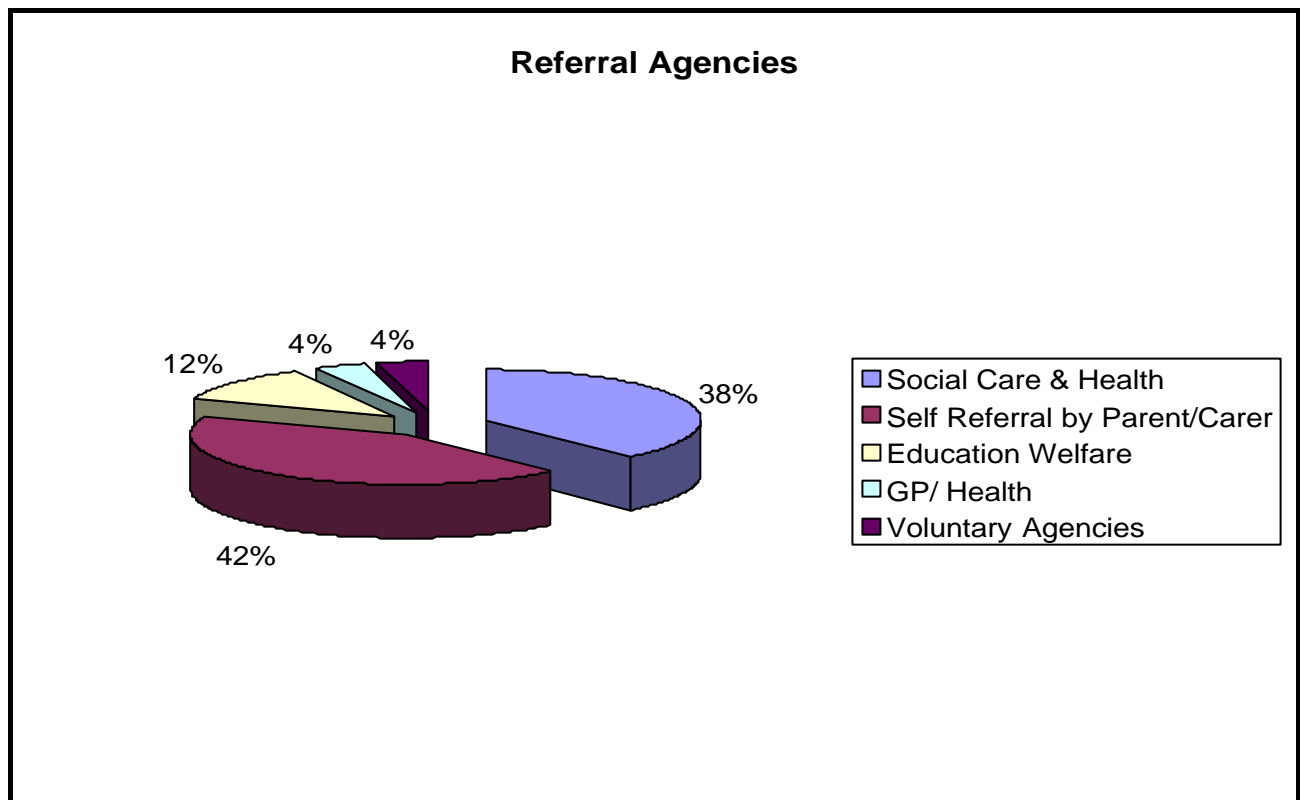
Group activity/ outing decided and planned by the group.

### 3. REFERRALS

#### 3.1 Referral Sources

The pie chart below shows the source of referrals for the 25 families the Centre worked with who were included in the IYPP evaluation. Referrals to the Centre included disadvantaged families e.g. lone parents, low income, health and mental health issues, domestic violence.

Although 42% of the referrals were from parents themselves, many of these had been signposted by other agencies. In addition many of them were already involved with other agencies, e.g. Education Welfare Service, Social Care and Health, Voluntary Agencies and Youth Offending.



#### 3.2 Referral Criteria

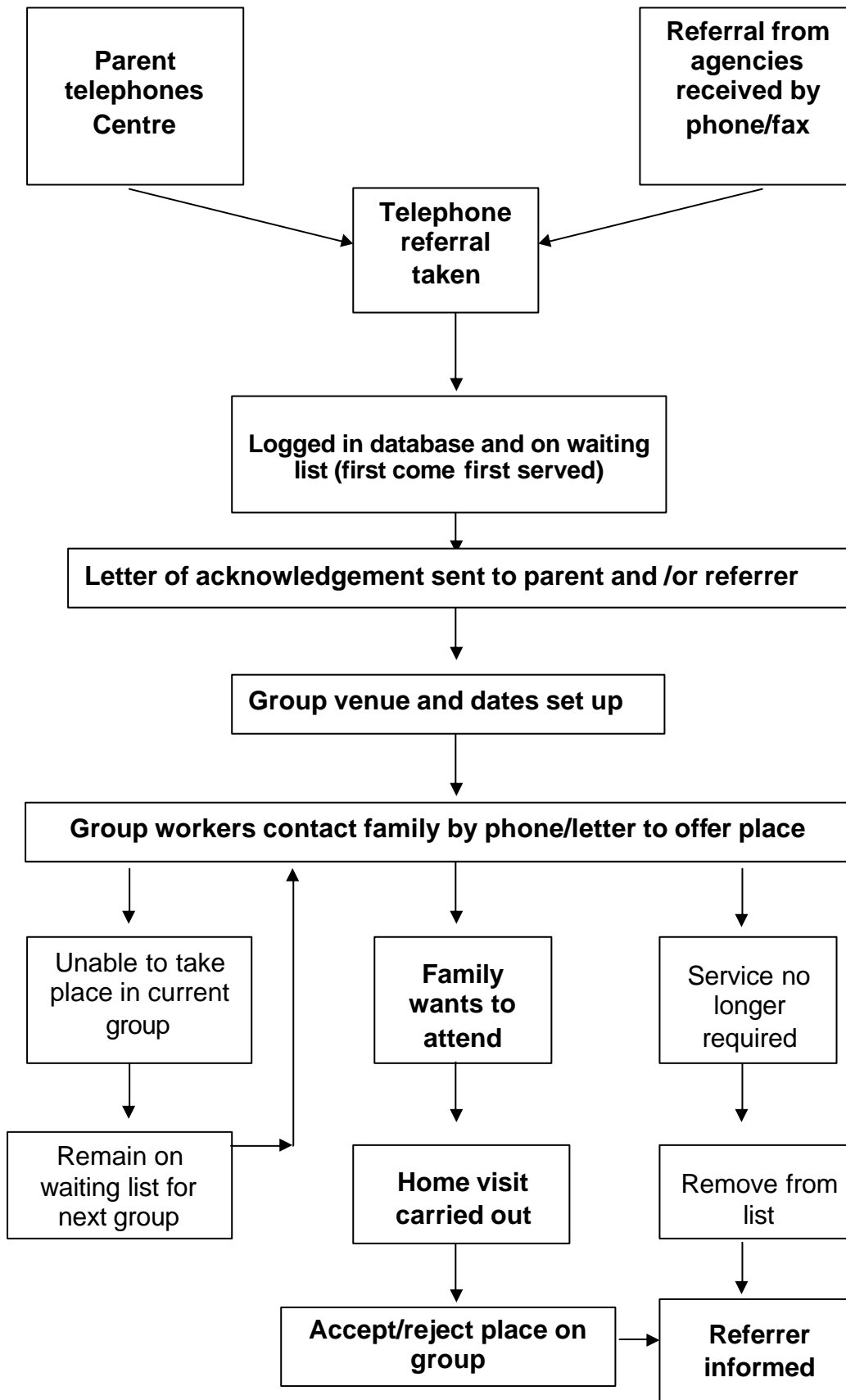
The criteria for referral to the LWT programme is that a parent/ carer is experiencing difficulties in managing their teenager's behaviour leading to communication and relationship breakdown, for example, conflict, violence or aggression, refusal to follow rules/boundaries, school refusal, anti-social behaviour, offending behaviour.

The ACWA programme is aimed at young people who are getting into conflict because of their behaviour, with adults, peers or authority figures. Although the programme is open to any family (and parents/young people may self refer) we particularly target vulnerable families and approximately 40% of referrals come through Social Care and Health.



### 3.3 Referral Process

The following flowchart shows the referral process established for the IYPP Project:



## **4. PROJECT DEVELOPMENT**

Prior to the IYPP Project, we had been running separate groups with parents and young people, only some of whom were from the same family. Parents started a Living With Teenager Group and then 2 to 3 weeks later an Avoiding Conflict with Adults group ran for young people. The challenge for the IYPP Project was to run parallel groups for parents and young people, all of whom were from the same family. This meant that we needed to have referrals for both the parent and their child at the same time.

In the beginning agencies were referring families for both programmes without knowledge of the new parallel nature of the IYPP Project. This led to difficulties recruiting whole families to commit to the parallel groups ie parent/carer and young person. Therefore changes needed to be made to the process to ensure we were able to stay true to the devised parallel model. These changes are discussed in more detail in the following section.

### **4.1 Barriers**

#### **4.1.1 Promotion of the project and recruitment of families**

- The first four IYPP project groups were set up prior to the project workers commencing in post. This led to different approaches by different workers and inconsistencies about the processes needed for promoting the parallel nature of the groups to parents and young people
- To achieve our targets for the number of families agreed for the IYPP Project, families requesting both LWT and ACWA were jumping ahead of the queue over families who either just requested an LWT or an ACWA programme. This was seen as a difficulty for the CFF.

#### **4.1.2 Retaining families on the parallel intervention**

- In some cases the teenager engaged while the parent refused the place or vice versa. This meant that groups intended as parallel, were mixed, with some parallel families and some non-parallel families.
- Sometimes referrals that were not originally for both programmes became parallel after the home visit.

#### **4.1.3 Keeping to the intended structure of the model**

- Referrers and families were not initially aware of the intended structure and model of the IYPP Project and clearer criteria was needed for referring families to it.
- There was a higher dropout rate in the first few groups, because commitment from the whole family to a family intervention was not very high.

#### **4.1.4 Completion of research questionnaires**

- Some families were not aware they were taking part in research until they started the programme and didn't necessarily understand the significance of the questionnaires.
- In some cases we were not able to get commitment from the whole family to take part in the research and therefore got incomplete sets of questionnaires.
- Return of questionnaires from families proved very difficult in the first 4 groups.

#### **4.1.5 Confidentiality**

- The breach of confidentiality became a fear for some parents in the last group, as both staff were co-leading the LWT and Grounded together. Parents were concerned that their young people could share personal information with other young people on their group, which would then reach other parents.
- Young people seemed to be less open to sharing personal information when they knew we were both working with their parents too.

- At times workers struggled with ethics of confidentiality, as they were party to information that they felt may have been useful to share, in order to promote better understanding between parents/carers and young people.

#### **4.1.6 Time constraints of funding**

- Due to the time constraints of the IYPP Project's start dates and delivery phase, the first groups were started before the IYPP Project workers came into post. A longer period of time for development work would have overcome many of the problems encountered in the first few months.

## **4.2 Overcoming the Barriers**

Once the IYPP Project funded workers were in post they were able to evaluate the project processes in order to make improvements.

Through gradual improvement of the recruitment process and the way families were engaged in the research project, a retention rate of 90 to 100% attendance was achieved in the last 2 groups.

Changes made included:

- Producing a flier about the IYPP project so that the referrers, parents and young people were clear about the project, purpose and commitment required
- Sending a letter to families (both parent and young person) explaining about the project and inviting them to take part in the research
- When the first phone contact was made with the family, offering them a place on the LWT and ACWA on the condition that both parties signed up
- Carrying out a joint home visit. Meeting with both the parents and the young person, initially together, but then spending time with the young person on their own to gain their commitment, without them feeling forced by the parent to attend
- Offering an incentive for families to complete the research. i.e. cinema vouchers were given to each family as a thank you for their time, once we had a complete set of questionnaires
- Making time during the first and last session for the IYPP Project to be explained properly, including why and how the questionnaires would be used and to give time to complete questionnaires in the sessions so they could be collected in immediately or the following week
- Reminders by phone to bring in questionnaires
- Offer an extra home visit to give help filling out questionnaires
- The last LWT and ACWA groups were co-facilitated by the two project workers, whereas previously, either both staff had only delivered an ACWA programme together or they had worked on separate groups. The advantage of this was we were able to see the family holistically and bring both perspectives to bear on the work we did in the group
- Working with the whole family, meant we had more insight into and were able to, contradict some of the negative cognitions that parents or young people had about themselves or each other
- Re-affirming the confidentiality issues regularly to provide reassurance to families

## 5. RESOURCES

The initial project proposal was to run 4 parallel groups to achieve the agreed target of delivering services to 24 families. Due to the early difficulties with retention and engagement of the whole family and the return of research questionnaires in the first few groups, additional groups needed to be run. Therefore the costs increased eg room hire, staff time, bringing in sessional staff to help run the groups, transport costs etc.

For the IYPP Project we employed two members of staff. In the beginning they ran groups with other members of staff at CFF. Once fully trained and experienced in the parents' LWT and the young persons' ACWA programmes, these two members of staff ran both groups. Although it is possible for two people to run this model, facilitating both groups, this does require that issues of confidentiality be addressed at the beginning of the intervention and reaffirmed throughout the group process. The advantage of this way of working was that the workers were able to see and work with the whole family holistically. However, in our view the optimum number of staff to facilitate the ACWA programme is three, with an additional two staff running the LWT group.

It is important to note that in the view of project staff the ACWA programme is best run in a young people friendly environment, such as a Youth Centre, to allow for young people to let off steam and build social relationships.

## **6. CASE STUDIES**      Names and other details changed for the purpose of confidentiality.

The following cases have been selected to illustrate both positive and not so positive outcomes for families.

### **Case Study 1 DC**

White, single parent with history of domestic violence. Three teenage children. Self-referral by parent though supported via social services.

Police and social services involved as middle son violent and aggressive towards mother and sister, threatened mother with knife. Son accommodated by paternal grandparents (no contact with father). Contact with mother but still refusal to respect boundaries, and threatening behaviour.

At the beginning of the programme DC was very low, suffering from depression, seeking help from a psychiatrist. She felt very scared and fearful of son, not wanting him to return home, stressed because social services were putting pressure on her to have him back.

Parent attended a LWT group where the majority had experience of domestic violence and/or abuse and this helped her to feel not so alone. The group were all female apart from one man who was very supportive. Because there were a lot of mental health and low self-esteem issues in this group, group workers realised they needed to concentrate on building safety in the group and building up the self-esteem in the first couple of weeks, this meant we had to run an extra session. We encouraged the group to give each other positive feedback and used appreciations at the end of each session to bolster self-esteem. Our aim was to promote resilience and work with the impact of abuse. We wanted to create a safe environment where parents could get support from each other and feel less victimised, as well as demonstrate that praise and positive feedback would help both themselves and their teenagers in overcoming difficulties.

DC was quite reserved in the group at first as there was another member who she knew quite well and was unsure of regarding confidentiality. We addressed this by attempting to build trust between them and re-iterating the ground rule around confidentiality.

DC remained fairly negative that her son could change, and the programme could really help, during the first 4 weeks. Over the course of the programme things seemed to be getting worse for DC, with contact visits going badly and problems with her other son increasing, resulting in him leaving home to live with his grandparents.

As the weeks progressed DC fed back about some situations where she had taken charge and asserted herself with her teenage sons, she received lots of praise from the group about this, which seemed to build her confidence and determination.

Three members of the group had previously attended a Fun and Families group for younger children and were very positive about the programme and this helped to overcome some negativity and hopelessness amongst some of the parents. Parents were not afraid to ask each other for help.

In addition some one-to-one support was given to DC, as group-worker provided transport to and from group and this created an opportunity for DC to be listened to and offload things that were troubling her and disclose previous experiences that were coming up for her as a result of the group-work.

Towards the end of the programme, DC became a lot more positive about the possibility of using strategies from the programme. DC joined a parents support group run by members of the group and also decided to join the parent volunteer programme.

In the meantime her son was attending the ACWA group for young people. Again this was a group where the majority were facing mental health issues and there was a lot of depression in the group.

This group was notable for its lack of fun and sense of humour. S was one of the oldest members of this group and he was not very forthcoming in speaking out in the group, however he did see the programme through and changes were reported by his mother.

DC has since become an active parent volunteer and has successfully helped to facilitate a parents' LWT group alongside experienced group workers. She has reported major improvements to her family relationships. Both sons have moved home, S who attended the programme has stopped threatening and aggressive behaviour and is much more respectful and helpful around the house. Her other son is having some problems due to a disability but generally things are much clearer and previous conflicts around money have reduced.

## **Case Study 2 RM**

An Asian, divorced mother with a history of domestic violence. One 14 year old daughter. Self referral by parent though supported via Education Welfare

Very isolated family, negative relationships with grandparents and relatives. RM reported long history of emotionally abusive relationships resulting in low self esteem and depression. These feelings were mirrored in her daughter who was also depressed, self-harming, over-eating, and not attending school. The relationship between mother and daughter was very negative. The daughter was demanding money and goods from mother, effectively bullying mother. The mother was worried financially regarding debt and was long-term unemployed.

It was difficult for her as the only Asian woman to integrate into the group at first. Her feelings of isolation made it hard for her to approach others and initiate friendships. In addition we found that the rest of the group didn't welcome her as well as they could, perhaps because they saw her as different. The group-workers addressed this by trying to bring her in from the edges, modelling an interest in her and what she had to say, making a point of welcoming her and bringing her into the group when she arrived late and by giving her appreciations in the group.

We also became more mindful of who we paired her up with, choosing one of the parents who was more aware of cultural issues and the skills to offer support and listen well. RM reported finding coming out of the house and being with other parents helpful, and seemed to find the group beneficial for this reason (ie. breaking her social isolation) however she rarely reported trying or having any success with the strategies. There were lots of feelings of blame towards her daughter and an internalisation of herself as the victim, so that she found it very hard to give her daughter any praise, or to stick to boundaries.

At times RM seemed not to be able to take anything from the group on board and reflected a hopelessness that her situation could change. On the other hand she did seem to be gaining some self-confidence from joining the group and this seemed to be helping her in her determination to gain some employment.

RM found it very difficult when the group ended and although we tried to refer her on to a number of specialist support and encourage her to attend the parent support group, she didn't appear to follow this up.

In our view RM would have benefited from attending another parenting group, or some additional one-to-one follow up intervention. To overcome her social isolation a group involving other Asian single parents would have been helpful, as well as access to a culturally sensitive counselling service to address some of the mental health issues. She has contacted the Centre on a number of occasions since to seek advice about her daughter's behaviour or to offload and again has been signposted to relevant agencies, but seems unwilling to follow these up.

Her daughter, despite completing the programme and interacting well with other young people, was not really changing her behaviour. The relationship between mother and daughter was stuck and really needed a longer intervention. The daughter remains at risk from non-school attendance and mental health difficulties.

## **7. SUMMARY OF ACHIEVEMENTS**

- ✓ Approximately 80 families were contacted by phone and letter
- ✓ Around 48 parallel families were recruited onto the programme and received a home visit
- ✓ 25 parallel families completed the programme (or the majority of it - some through one-to-one catch up visits) and the 'Before' and 'After' questionnaires
- ✓ 6 families completed the programmes but not the questionnaires
- ✓ 5 young people completed the programme, but their parent dropped out
- ✓ 4 parents completed their group programme but the young person dropped out
- ✓ A total of 6 parallel groups run (6 LWT & 6 Grounded) in 2003 to 2004

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**West Berkshire Family Group Conference Project**

**Involving Young People in Parenting Programmes Project**

**Family Group Conferencing**

**Project Co-ordinator:  
Sharon Inglis**

**Project Manager  
Paul Nixon**

Report written by Sharon Inglis and Paul Nixon

## West Berkshire Family Group Conference Project Summary

- The West Berkshire Family Group Conference Project (W Berks FGC Project) is a partnership between West Berkshire Social Services, West Berkshire YOT and West Berkshire Education Department
- The West Berkshire FGC Project ran a **Family Group Conferencing Service** for young people at risk of school exclusion, truancy, bullying or behaviour problems at school or at risk of youth offending
- A Family Group Conference consists of preparation time for the young person, their family and professionals involved, the Conference and reviews. The time scales for preparation vary according to the needs of the young person. Reviews usually take place 3 months after the initial conference
- The principles underpinning FGCs were first developed in New Zealand and lead to dramatic reductions of children in public care and in the courts and have since attracted wide international interest
- 16 initial conferences were held
- 11 review conferences were held and five cases were still ongoing at the time of writing

# 1. CONTEXT OF THE PROJECT

## 1.1 Service Context

West Berkshire Children's Service is a statutory agency that provides and commissions services, for vulnerable children, young people and their parents and carers, as the children and families branch of the Social Services Department.

A key service principle is "*participation of children and families* in all aspects of the work. Family-based decision-making is the expected mechanism for all service/support packages: only in situations where this is demonstrated not to be in the best interests of the child will professional decision-making dominate." (West Berkshire Service Principles)

Family Group Conferences (FGCs) were established in West Berkshire in April 2001 under the auspices of the Area Child Protection Committee. The focus of the work prior to this project was primarily about child welfare and protection issues, taking referrals from Children's Services and with only the occasional referral from the Youth Offending Team (YOT).

### **Aims and Objectives**

**Aim:** to improve outcomes for children who are at risk of school exclusion, truancy, bullying or behaviour problems at school, or at risk of youth offending by mobilising their family, friendship network and community in making decisions about the help and support they need.

#### **Key objectives:**

- To adapt existing FGC service to a true inter-agency model of FGC provision cutting across organisational boundaries
- To develop common outcomes measures, shared referral criteria and standards for FGC practice across agencies including a 'one stop shop' for referrals
- To develop strong partnerships between stakeholders (families, communities and agencies) and shared use of resources
- To explore and evaluate ways in which FGCs can be applied in education and youth justice setting, providing a community based service to support parents and help children

This project sought to acknowledge that problems facing children, parents and communities are interconnected. Furthermore these difficulties overlap across agency responsibilities.

The introduction of FGCs into the additional areas of education and youth justice provided an opportunity to test how one unified model can be used to engage families and professionals, in a shared agenda for children.

Therefore this project sought to expand the use of the FGC service beyond the parameters of the Social Services Department's child protection work to test its effectiveness in two additional and interconnected domains:

#### **a) Using FGCs in Education to:**

- Reduce school truancy
- Address problems of bullying and conflict in school
- Manage and address behaviour problems in school that lead to risk of school exclusion

### ***b) Using FGCs in Youth Justice to:***

- Divert children from civil and criminal proceedings
- Encourage young people and their families to take responsibility for and make decisions about offending behaviour and to prevent re-offending
- Develop support for the young people in the community
- Ensure that victims' perspectives are fully heard and valued

These agencies using FGCs for the first time would add to the already established Social Services Department referrals. Many of the families referred by the Social Services Department were already being served by both YOT and/or Education.

## **1.2 Underpinning Ethos**

Family Group Conferences are underpinned by a clear set of practice principles namely:

- Children, parents and extended families are fully involved in all decisions affecting them
- Utilisation of family and community knowledge, skills and strengths
- Partnerships between children, parents, extended family groups and professionals to achieve better outcomes for children
- Children, parents and their families have more say over what they need and how help is provided
- Young people and their families take responsibility for resolving the problems in a flexible and creative way with professionals
- Working in a respectful and culturally responsive way with families

These common principles inform not only the way in which the work is carried out, but also how the project has been introduced and implemented. Therefore policy and practice development and decision making forums were characterised by:

- Participation
- Partnerships
- Mutual respect
- Group decision-making
- Shared power and collective responsibility
- Empowerment
- Cultural sensitivity

## **1.2 Overarching Parenting Strategy**

West Berkshire's current service principles reflect the department's renewed focus upon working with families in a way that builds on their strengths. Asking families to work together means that service providers also need to work in partnership to plan and provide preventative services that meet the needs of children and their families. FGCs in a multi disciplinary context are one way of achieving this.

## **2. THE MODEL**

### **2.1 Underpinning Theoretical Principles**

Family Group Conferences (FGCs) are facilitated by an Independent Co-ordinator whose task is to bring together formal (professional/agency) and informal (family/community) networks in a collaborative decision making process.

'Family' is defined broadly to include children, siblings, parents, grandparents, aunts and uncles, cousins other relatives and family friends. At the conference family out number the professionals and they will always have private family time (without any professionals present) to make a plan for the child. The aim is to empower families to take control of problems facing them and to share collective responsibility with professionals for resolving family difficulties.

The process first developed in New Zealand and led to dramatic reductions of children in public care and in the courts and has since attracted wide international interest (Hudson et al 1996, Nixon 1998). Research on this approach in the UK has demonstrated high levels of satisfaction with the process from families and professionals (Lupton et al 1995, Lupton and Stevens 1997, Marsh and Crow 1998) and victims of crime (Jackson 1998).

Research on FGCs to date is indicating that children and young people are far more likely to be active participants in this type of decision making meeting compared to other forms (Lupton and Stevens 1997, Crow 2000). Furthermore parents are more likely to feel supported and be offered help by the wider family group with the parenting task (Marsh and Crow 1998).

Outcome studies in the UK suggest children are better protected by this approach (Marsh and Crow 1998), it reduces the need for legal proceedings (Smith and Hennessy 1998) and that it can reduce conflict and risk of exclusion in schools (Crow 2000, 2001). There is however still the need to evaluate longer-term outcomes from the perspectives of family members and children in particular (Lupton and Nixon 1999).

### **2.2 The FGC Process Context in West Berkshire**

In practice, the FGC model used for the IYPP Project in West Berkshire was:

An agency worker explains the FGC process to the family. If they are in agreement with a referral taking place, a referral form is completed and sent to the project.

An independent coordinator is allocated to the family and they initially meet with the referrer to discuss their expectations of the process, clarify a bottom line and talk about safety.

The coordinator then works alongside the family to identify who will be useful to invite to the meeting, talk about when and where the meeting can be held and clarify the expectations of family members.

All family members and agency staff attending the conference will be visited by the coordinator to prepare them for the meeting. Baseline information is shared and attendees are asked to think about their role in the meeting and what responsibilities and resources they bring.

## **2.3 The Family Group Meeting**

On the day of the conference, family and staff gather together for the meeting. A meal is prepared for the family and very often this is shared at the beginning of the meeting. The meeting is then held in three distinct stages:

### **1) Information Sharing**

This part of the meeting is facilitated by the co-ordinator. Introductions are made and the agency staff are asked to share with the family the reason why a Family Group Conference was initially called. They then share information about concerns, risk and resources that the family may want to include in their plan. Staff are asked to bring information to the FGC that is jargon free and factual. The family is then given the opportunity to present their own information and to ask detailed questions of the agency staff present. When all the information is clarified the agency staff and the co-ordinator leave the meeting so that the family can be alone.

### **2) Private Family Time**

This is an opportunity for family members to discuss the issues at hand in private. Very little is known about what really happens in private family time, as it is sure to be different for all families. However, this is when the family uses their own skills and resources to produce a plan for change. This process can take as little as five minutes and up to 4-5 hours, depending on how long the family feels they need.

### **3) Agreeing the Family Plan**

When the family has produced their plan, they call the co-ordinator and referrer back into the room. The family are then encouraged to present their plan and provided it fulfils any safety criteria laid down by the referrer, the plan is accepted. This part of the meeting is used for clarification of the plan and the co-ordinator ensures that they have all the information they need to take the plan away and reproduce it for all members present.

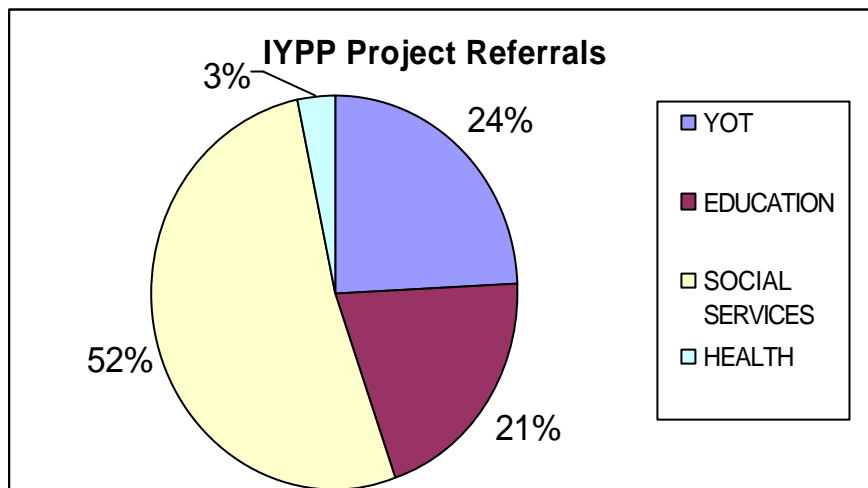
The final part of the meeting is when the co-ordinator asks the family members for a volunteer to monitor the plan and to set a date for a review meeting.

### 3. REFERRALS

#### 3.1 Referral Sources

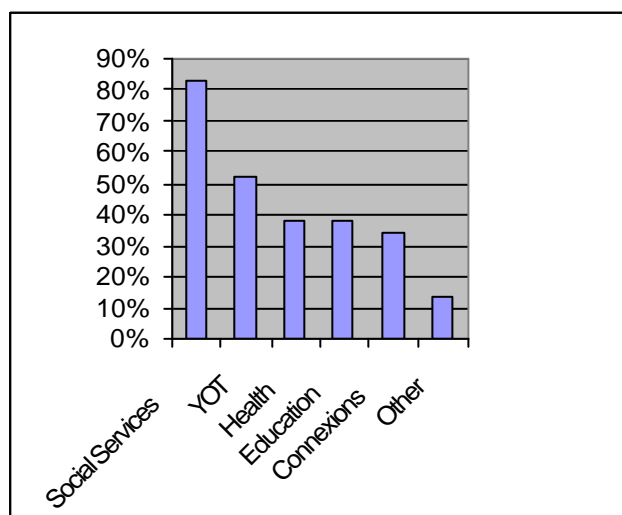
Referrals were sought and taken from YOT, Education and Social Services from around June 2003. Although Health was not targeted as a referring agency, one referral was received when a member of staff working in a multi-disciplinary team heard about FGCs.

Children's Services staff provided the bulk of referrals. It is likely that this is more reflective of Children's Services familiarity with the process and access to it (being co-located in their office) rather than the extent and degree of their involvement, as a wide range of agencies were involved with the families referred.



The project also found that there were many agencies working with the young people referred for an FGC as illustrated in the following diagram:

#### The Percentages of Young People Referred for an FGC Involved with other Organisations



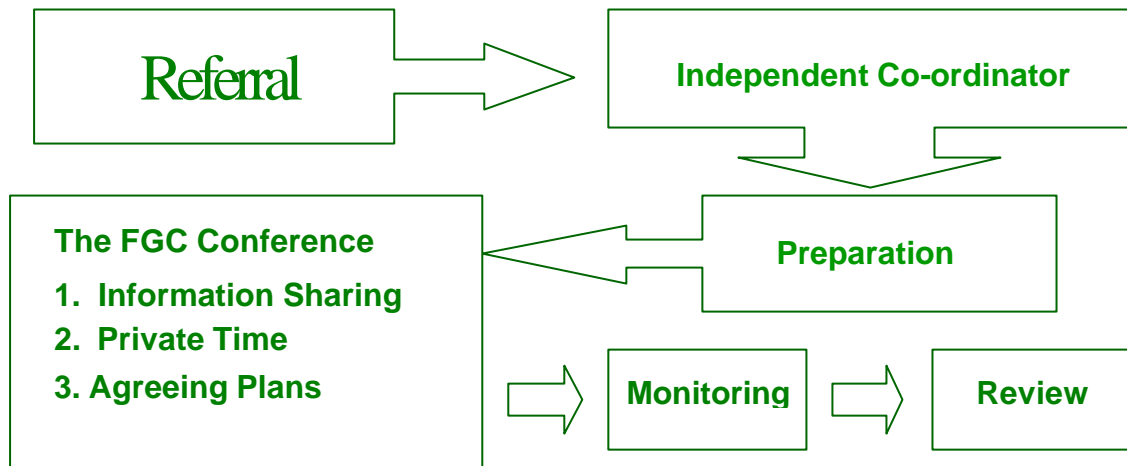
Social Services, for example, were involved with 83% of young people referred for an FGC.

### 3.2 Referral Criteria

The referral criteria mirrored that of the project as a whole, which was young people, aged 10-17 at risk of school exclusion, truancy, bullying or behaviour problems at school or at risk of youth offending.

### 3.3 Referral Process

The following diagram illustrates the process stages of the FGC service from referral onwards:





## 4. PROJECT DEVELOPMENT

### 4.1 Barriers

#### 4.1.1 Referrals

It became clear quite early on in the project that the referral process was not as good as it could be. Several referrals were received and on the first visit to the family, the co-ordinators were told that they did not really like the idea of a Family Group Conference, but that they had been told to have one by the agency worker. On other occasions, referrers had given the family incorrect information about the process of the FGC.

These examples gave us the message that we needed to think again about:

- a) what information the referring agencies had about the project
- b) referrers understanding of when an FGC would be helpful
- c) how to ensure that families were empowered through the process, not forced to do something that they did not want to do
- d) how referrers felt about their role in the process

#### 4.1.2 Referrer's concerns

Another issue highlighted during consultation with staff was the issue of professional resistance to the FGC model. Historically, social welfare services have been driven by a political agenda, which is paternalistic in its approach. Services are often planned and delivered in this way, which puts the focus on the social worker as the 'expert' and families being 'told' what to do to resolve their difficulties. Family Group Conferences seek to share the responsibility for a situation between the formal and informal networks around a young person. However, the decision-making is given back to the family in recognition that they are the experts. This turns the role of the social worker on its head.

In discussion with workers, it was clear that the role of being the only representative of their organisation in a meeting with a large – sometimes angry family - is very difficult. Unsurprisingly then, some workers are uncomfortable in this new role and this has led to referral reluctance. One service user stated:

*I think that social workers offer FGCs to families who are like them or that they like.*

Family Group Conference training had been undertaken during the first six months of the project, but with high levels of work, many other projects to offer to families and turnover of staff, agency workers seemed reluctant to refer.

#### 4.1.3 Family concerns

Family resistance to the model was also an issue. Many families did not wish to take part in the process for a variety of reasons, such as:

- they did not feel it was "for them"
- parents did not wish to share their difficulties with wider family
- families were "fed up" with meetings and felt that nothing was going to help their situation
- suspicion of new approaches from agencies
- concern about conflict or safety at meetings

All of these concerns are understandable and many families discussed these issues and went on to have a successful FGC.

#### **4.1.4 Multi-agency working**

Working with a range of agencies has many positive benefits, both for workers and families alike. In the view of project staff the sharing of information, resources and responsibility involved in the FGC process should increase the likelihood of positive outcomes for children. However, some of the organisational difficulties of working in this way have been that:

- agencies had their own criteria for working with the project
- other decision making meetings running alongside the FGC process
- a wider group to engage with and a wide range of diverse agendas

#### **4.2 Overcoming the Barriers**

The following changes and strategies improved the effectiveness of the service:

- At the beginning of the IYPP Project a multi-agency steering group was set up. The group included the IYPP Project Co-ordinator, the local project co-ordinator and representatives from the YOT, Education Welfare and Social Services. This group met every three months and had an overview of the work undertaken. They were able to guide the direction of the project, as well as offer help and support to the project staff.
- Five co-ordinators undertook all the referrals and subsequent conferences. This group met as a practice development forum every six weeks during the life of the project to share experiences, develop their practice around working with this specific group of families and identifying training needs both for them and training for potential referrers.
- The initial months of the project were seen as a development phase. Building partnerships between the agencies was key to ensuring that everyone had a clear understanding of what a Family Group Conference was, how it worked and in what circumstances they could be used. An important element of this work was visiting each agency to discuss their needs and the outcomes that they wanted from the project. This was done at all levels of each organisation. Whilst time consuming, it became apparent as the project developed that this groundwork had been very worthwhile.
- In order to empower people, our co-ordinators gave information to families, talked through the issues and let them make their own decisions about whether to go ahead.
- The coordinator practice group talked through the issues regarding low levels of referrals. It was agreed to visit agency teams to talk about this reluctance to refer, and to listen to what they had to say about some of the practical difficulties they were facing when talking to families about a Family Group Conference.
- Following that consultation, it was agreed that we would change the referral process and ask agency workers to contact the project direct to talk the case through with a co-ordinator prior to referral. Following that meeting, the referral was pursued by the co-ordinator, who visited the family and filled in the referral form with them. Not only did this save a lot of time and effort for referrers, but it also enabled families to be involved in the discussions around the question for the Family Group Conference. Several family members considered that they had referred themselves, rather than having been referred by an agency and they felt this was the start of an empowering process.

## 5. RESOURCES

Implementing Family Group Conferences requires a significant investment of time in bringing different agencies around the table, financial investment in training programmes and resources for the new independent co-ordinators to deliver the practice. It is important to find ways of building on existing strengths and structures within established services.

West Berkshire Children's Service has an integrated structure incorporating Education, Social Care and Youth and Community, which is in line with the Children Act 2004.

The following are the key resource implications for setting up a Family Group Conference service or project:

- 1. Inter-agency Steering Group** with representatives from YOT, Social Services, Police, Education, Health, the Voluntary Sector and Service Users is needed to support and design the service.
- 2. FGC project manager** is needed to lead the project, develop information policy and procedures, commission a training plan and promote the practice of FGCs. The project manager also provides a point for receipt and allocation of referrals and supervision of coordinators.
- 3. Independent FGC co-ordinators** are needed to deliver the conferences. A mixed economy of 'in-house' co-ordinators and an external team or 'pool' of session co-ordinators can take referrals from different agencies, or direct from families themselves. Co-ordinators need regular supervision training and support.
- 4. A training program** is needed to help professionals think about different ways of working with families and the skills they need to perform well at the conferences. Training is also needed for co-ordinators to prepare them for this new role.
- 5. Local policy and practice guidance** have to be developed to assist different professional groups to work in this new way and to assist their thinking about how FGCs can work along side existing systems. This includes the specific criteria and process for referral to FGC.
- 6. Information 'tools' for children and families** are needed to explain the process and what people, can expect of their Family Group Conference. This can be provided in form of a leaflet, web site or video.
- 7. Research and evaluation instruments** are required to gather baseline data on outputs and outcomes from the FGCs. Questionnaires can be used to elicit feedback from parents, family members and children and young people and referring professionals who are involved in practice.
- 8. A Children's Advocacy Service** is sometimes needed to provide advocacy and support for young people involved in the FGC process.

## **6. CASE STUDIES** Names and other details have been changed to maintain confidentiality.

The following two cases are examples of good outcomes achieved and we also chose the studies on the basis that they represented cases we received. They demonstrate that young people are clearly involved and "own" the process and that with the right preparation; families can come together to plan for young people effectively.

Both of the young people in the case studies are white, British males.

### **Case Study 1 Tony**

Tony was 11 years old and first referred to the project by a worker in the Referral and Assessment Team within Children's Services. Tony was temporarily living with his older sister in a town in the South East of England, but concerns were being raised about her care of him and about the temporary nature of his accommodation. His mother, who lived in a neighbouring county, was clear that she could no longer care for him and his father's family in the South West of England had tried to rally round to find him a home. As a result he had lived at three different addresses in the previous four months and attended three different schools. He had also come to the attention of the Youth Offending Team following a serious incident at school.

The social worker felt that the family needed to come together to decide where Tony should live and to ensure that his transition into secondary school was well planned and supported.

Tony was very happy to engage in the process once he was assured that he would have an opportunity to give his opinion. He was very unhappy about living with his sister, and was clear about wanting to go home to his Mum.

The co-ordinator drew up a list of family members that Tony wanted to invite to the meeting and visited them all in preparation. During preparation, it became clear that a return home to his Mum was not an option. This was discussed with Tony prior to the meeting and other possibilities were explored.

The family met in the father's county of residence one Saturday afternoon. Tony's brother, who had also been put into foster care when he was 11, attended the meeting with his carer. His Mum came, as did his Dad and his family. It was a difficult meeting for all involved, but everyone agreed that some decisions needed to be made for Tony. After long deliberation, the family agreed that Tony could stay with his sister. Social Services were asked for parenting support for her and to assess her as a kinship carer. A school was identified for Tony and the family agreed to get back together for a review a couple of months later.

The review has not yet happened, as it has been cancelled several times. However, Tony continues to live with his sister and has now settled well. He is having regular contact with his extended family and is just beginning to get to know his brother again. His sister is attending a parenting programme where she is developing her skills in dealing with teenagers. Tony is now attending his secondary school on a regular basis and despite his special needs, is progressing better than had been anticipated. There have been no further incidents of offending.

Tony's sister believes that without the Family Group Conference, Tony would now be in foster care and would not be nearly as settled as he is now.

## **Case Study 2 Peter**

An Education Welfare Officer referred Peter (age 15) for a Family Group Conference. The referral focussed upon his non-attendance at school. However at the time of referral there were also concerns expressed about his offending. There were nine service providers working with the family but their joint plan was felt by the family to be uncoordinated and Peter's mother was struggling to cope with the practicalities of getting her reluctant son to all the appointments with his workers. She was very concerned that Peter's life was spiralling out of control and was "going off the rails".

Peter was keen to have an FGC. He worked well with the co-ordinator in planning his meeting and deciding who would attend. Twelve family members came to the Family Group conference and worked in partnership with two of the service providers in creating a plan. As part of the process, the family talked through with Peter his strengths and some of his more concerning behaviours.

Their plan focussed upon Peter attending college and having greater support from family members. He has had three subsequent review meetings which have addressed his relationship with his family, supporting his new placement with wider family, reducing the likelihood of further offending behaviour and co-ordinating the support from the professional network.

Peter is very pleased with the improvement he and his family have made in his life. When he was recently interviewed about the experience, he said "Seriously, I think I'd be in prison if it wasn't for this."

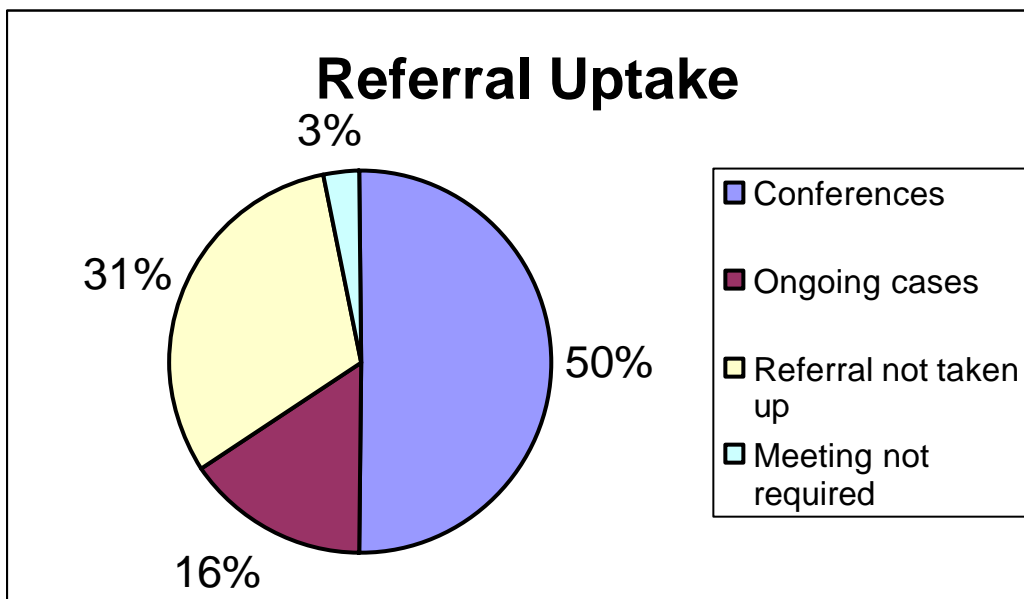
## 7. SUMMARY OF ACHIEVEMENTS

### 7.1 Families Provided with Services

The project received 32 referrals in just under a year. Of those referrals, 16 initial conferences were held, 11 review conferences and five cases are still ongoing, awaiting their initial conference. One of the cases did not end in a conference but through the preparation process, the family made a plan and did not feel they needed the meeting.

### 7.2 Referral Uptake

The following chart demonstrates the uptake of referrals for a FGC:



### 7.3 Examples of Some Positive Changes for Young People and Families

For some children and families there were positive changes following their Family Group Conference. Clearly these positive changes were not experienced by all families following their FGC, nor can we say that they were a direct result of the FGC. However, we include them here simply to provide some examples of what some young people and families achieved:

- Some children returned successfully to school after long absences
- Robust family support packages were designed and implemented
- Some young people addressed their offending behaviour
- Some children were placed with their kinship group instead of being accommodated by the local authority
- Some children were accommodated by the local authority with clear contact plans and reunification plans with their families

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LUTON



YOUTH OFFENDING SERVICE

## **Involving Young People in Parenting Programmes Project**

**Family Therapy**

**Project workers:**

**Carole Wren, Stephanie Tenwick, Janice Cusick,  
Denny Gordon Jackson and Chris Hannah**

**Project Manager:**

**Mike Thomas**

Report writer: Carole Wren



## Luton Youth Offending Service Summary

- Luton YOS ran **Family Therapy** for clients of Luton YOS following a parenting assessment or from referrals from the Magistrates Court when consideration was being given to prosecuting parents for the non-school attendance.
- The therapy varied from 1 to 12 sessions, but on average was from 3 to 8 sessions, depending upon each individual young person and family's needs
- The Luton YOS Family Therapy Project is based on the principles of systemic practice
- Although 15 families received an intervention, only 8 were included in the evaluation figures for the research study as the others were still engaged with family therapy as the data collection phase ended.

# **1. CONTEXT OF THE PROJECT**

## **1.1 Service Context**

The Family Therapy Project was initiated by Luton Youth Offending Service (YOS) in 2001. It was initially funded by money from the Intensive Supervision and Surveillance Programme (ISSP). Further development has been possible by pooling YOS resources from the local Health Trust, Children's Fund and Involving Young Peoples Project. The Family Therapy Team currently consists of two Qualified Family Therapists and one Family Therapy Trainee who dedicate one day a week to family work.

The aim of the project is to explore and strengthen positive communication and relationship patterns between family members and between family members and outside influences such as peers, school and the neighbourhood etc.

A joint initiative with the On Track project provides a specialist resource working with South Asian families, who make up 20% of Luton's population.

## **1.2 Underpinning Ethos**

At Luton YOS parenting interventions are offered as a support and not a punishment. We actively seek to provide equal access to the interventions by countering potential barriers created by issues of difference such as language, gender, financial position, 'race' and mental health etc. Many families have asked for help over a number of years but have not felt able to access support offered until they find themselves in a situation that forces them to. Our practice is child centred in that the child's needs are paramount and Child Protection procedures are activated if there is any doubt.

In partnership with parents and young people, we explore and strengthen positive communication and relationship patterns between them and other family members. Some families are better equipped to deal with transitions/changes than others. The service is provided in the family home and offered at flexible times enabling families under financial pressure to access it more easily. All families will be offered the service who meet the referral criteria.

The underpinning premise is that there is a direct relationship between crime and patterns of family behaviour through generations and unresolved issues/traumas, such as bereavement.

## **1.3 Overarching Parenting Strategy**

Family Therapy is one of three parenting interventions provided by Luton YOS, the other two being Parent Mentoring and one to one parent counselling. A 'Positive Parenting Group' has run in the past but to increase efficiency it is planned to develop a multi agency service provision in the future. As the Youth Justice Board's aim is to increase parental involvement in youth offending interventions we routinely offer all three interventions to each parent/carer. Through a collaborative process between parent /carer and parent coordinator, an intervention is selected to suit the needs of the parent/carer and their family.

## **2. THE MODEL**

### **2.1 Underpinning Theoretical Principles**

Family Therapy has become widely used in Child and Adolescent Mental Health Services across Europe and the USA. Key approaches developed in Milan and Paulo Alto during the 1980's culminated in what we know now as Structural, Strategic and Systemic approaches. Widening further we draw upon the Appreciative Enquiry Approach (Cooperrider 1990) the Narrative Approach (White 1988) and Solution Focused Therapy (de Shazer 1982). The wide range of ideas contained within these approaches informed our community approach to working with families (Boyd-Franklin and Bry 2000). The core of our approach has been the Milan Model (Cecchin et al 1987) primarily because the philosophy and methods contained in this approach have been central to our training. However the challenging circumstances of providing a family therapy service outside of the safety of the "clinic" environment has resulted in us developing a flexible and user-friendly approach (Reimers and Treacher 1995).

The Luton YOS Family Therapy Project is based on the principles of systemic practice (Cecchin et al 1987). A basic premise of systemic practice is that change occurring within an individual is influenced by the relationships that that person has with others (Burnham 1986). For example, a young person may experience changes in themselves, like increased confidence or self esteem, but if the significant people around them do not acknowledge or respond to this change, or continue to relate to them in the same way as they always have, then the changes are likely to be short lived. The way that people relate is an expression of their experiences and their belief systems. Family Therapy provides families with the space to talk about ideas that they may not feel safe to talk about in a different context (Dallos 1991).

### **2.2 The Process at Luton YOS**

Luton YOS Family Therapy sessions are delivered by two practitioners one of whom leads the session with the other taking a more observational position. At times throughout the session, which lasts between one and one and half hours, the two therapists may have a conversation in front of the family about their ideas about what has been said (Friedman 1995). In this way the therapists' ideas and thinking are transparent to the family and may serve to allay fears about how others perceive them ie as being faulty in some way. Sessions are usually spaced at three to four weekly intervals and the family decides with guidance from the therapists as to how many sessions are held. In practice this can range from anything between one and twelve sessions but more often is somewhere between three and eight. Interventions on average run for about 6 months.

### **2.3 Session Content**

Content of sessions often focuses on how one member of the family is not doing what another member of the family wants them to do, leading to anger and arguments. Therapists ask questions that explore the beliefs underpinning the expectations. The intention of this is partly to reveal the 'good intentions' of the parent. Detailed exploration of episodes of the behaviour helps others to recognise their part in unwanted repetitive patterns. The intention of the therapist is also to build up the family's appreciation of themselves and each other, reducing the level of blame and encouraging a shared responsibility for co-creating new ways of going forward.

## **3. REFERRALS**

### **3.1 Referral Sources**

All referrals for the Family Therapy Project are internal from Luton YOS. The carers or parents of all referrals to the YOS are assessed for their need for support with regard to parenting skills or emotional help.

We also receive referrals from the Magistrates Court when consideration is being given to prosecuting parents for non-school attendance. In such cases the Court requests Parenting Assessments and consideration is given to whether a Parenting Order is required.

### **3.2 Referral Criteria**

Families accessing the service need to fulfil the following criteria:

- Are caring for a young person (aged between 10 – 18yrs)
- Are an open case to the YOS at the point of referral and do so on a voluntary basis
- Attendance can be a recommendation in either a young person or parent's Court Order but cannot be a statutory requirement as the intervention usually involves others not subject to an Order

### **3.3 Referral Process**

The YOS parenting coordinator is responsible for undertaking an initial parenting assessment with parent/carers. YOS staff referred to the parenting co-ordinator for parenting assessment and the co-ordinator then referred on to the Family Therapy project.

Initially, due to the small scale nature of the project, young people scoring 20 or more on the young person's ASSET assessment tool ([www.youth-justice-board.gov.uk](http://www.youth-justice-board.gov.uk)) were targeted for parenting assessment and possible referral to the Family Therapy project. The thinking here being that a higher need expressed through a higher ASSET score could be suitable for Family Therapy, which is potentially a more intensive intervention. However, the level of referrals received by the Family Therapy project at this ASSET score were low and so the referral criteria was changed to include young people scoring two or more on the 'Family and Personal Relationships' section of ASSET. However, if these scores were not reflected on the ASSET but other factors emerged during the assessment that suggested a referral was appropriate, these referrals were also accepted by the project.

Referrals are accepted regardless of whether all family members initially agree to attend sessions. It is hoped that more than one family member is present at each session, but often in practice, attendance by various members of the family is erratic. There can be different combinations of family members in each session, with one or more family members absent from some sessions during the course of the intervention. If the parent/carer agrees to the take part, but the young person refuses, then the therapist will still work with the parent/carer.

## **4. PROJECT DEVELOPMENT**

The Family Therapy project structure was in place prior to the Involving Young People in Parenting programmes (IYPP) Project. Developmental changes were focused more on the size of the service in that one extra family therapist was recruited and referral numbers increased.

To raise awareness of the project within the YOS we:

- delivered training sessions at away days
- talked about family work at staff induction
- gave regular feedback to the referrer about when contact has taken place
- involved the responsible officer in family sessions as appropriate

### **4.1 Barriers**

#### **4.1.1. Referrals and Communication**

The referrals initially were very low and this is related to the issue of communication. Referrals for the Family Therapy service did increase due to the implementation of the IYPP Project. The Family Therapists felt, however, that better communication could have been achieved if the project had been on a larger scale. For example, due to being restricted to working only one day a week the Family Therapy team could not:

- attend case discussion meetings as it was held on a day that none of the Family Therapy team were available
- the Family Therapy team could only work on the day that the parent coordinator was not available and communication links temporarily became somewhat tenuous

#### **4.1.2 Recruitment**

Initial difficulties in recruiting Family Therapists to the IYPP Project meant that there was a delay to increasing the capacity of the existing Luton YOS Family Therapy service. Although this issue was due to some factors beyond the control of Luton YOS, a problem-solving meeting was held to discuss strategies to alleviate the delay.

#### **4.1.3 Parenting Assessments**

As strategies were put into place to address the issue of referrals and the Family Therapy Project received more referrals, there was an increase in the time taken to conduct parenting assessments.

#### **4.1.4 Engagement**

For those families that did engage we found that often the young person did not join the sessions. Parents would say that they had experienced Family Therapy in the past in other settings and they did not think the service had been helpful and in some cases the experience was described as being traumatic. Often parents did not see the link between the young person's offending and family relationships and were sometimes reluctant to talk about these issues in front of younger siblings.

For these reasons and others we have found that it can take months for some families to engage with the service. They may refuse to even talk to the parenting coordinator initially. If the young person continues to offend they may eventually agree to talk about parenting support and possibly give some kind of intervention a go.

## 4.2 Overcoming the barriers

- After problem solving with the IYPP Project Coordinator we attempted to address some of these issues by:
  1. Developing the role of one of the responsible officers to work with parents and assist with parenting assessments.
  2. Hold one to one sessions with responsible officers to consult with them around family and relationship issues relating to their cases.
  3. Encourage the family therapists to have more face-to-face contact with the YOS staff when liaising with families.
  
- The implementation of the strategies outlined above led to an increase in referrals to the Family Therapy project
  
- In the initial stages of the IYPP Project some existing staff, such as the Family Therapy Supervisor and the YOS Parenting Co-ordinator co-worked cases in order to increase capacity
  
- The Parenting Co-ordinator at Luton YOS joined the IYPP Project. She was able to conduct parenting assessments, thus decreasing the waiting time from referral to intervention
  
- The Family Therapists would continue interventions over longer periods of time and where the parent(s) were subject to a statutory order, beyond the length of the order if necessary

## 5. RESOURCES

To run a viable Family Therapy service the minimum staffing requirements are two qualified family therapists (it is feasible for one therapist to be a trainee). Additionally, it is essential that both therapists have access to regular (at least once a month) clinical supervision by a qualified family therapy supervisor.

Although Family Therapists do not routinely work in pairs, when working in clients' homes and in isolation from a team of practitioners, co-working provides both a safeguard against personal assaults and also a second opinion in often very complex cases.

Whilst most of the work is carried out in the clients' home they are given a venue choice and on occasion the family chose to be seen on the YOS premises in one of the interview rooms.

Staff unfamiliar with the youth justice context would benefit from an induction period to familiarise them with the legal and procedural framework and the terminology used.

Whilst the cost of providing two therapists for each family contact is expensive compared to group work it can be argued that it may be just as cost effective. For example, often families agreeing to therapy in their home would not access a parent group and all members of the family are included in the intervention, although as previously stated sometimes sporadically. Sometimes, other family members, including younger siblings joined in the sessions or became the focus of some of the sessions, which means that the Family Therapy can act preventatively.

## **6. CASE STUDIES** Names and other details have been changed to maintain confidentiality.

Our description of these two cases rather over simplifies the complex and difficult circumstances surrounding the families we have worked with. However, we hope to show how Family Therapy has the potential to reconnect families to their shared wishes to make things work for the better and can give families an increased sense of their resourcefulness.

Both these studies serve to indicate the importance of bringing the wider family, locality and cultural perspective into focus.

### **Case study 1 Brown Family**

The Brown Family consists of father and five children aged 10 to 25 yrs of age. The family is white working class. This family was chosen as a case study because of the clear connection between the unresolved grieving of the mother's death and offending behaviour. Additional reasons for choosing to describe our work with this family were the distinct gender issues in respect to the way the father adopted his parenting role to care for the family and the implications this had for the eldest daughter.

Mrs Brown died 2 yrs ago following a long illness. Colin who is 16 yrs old has had episodes of violence to other young people and was involved in car theft. James aged 25 has a diagnosis of schizophrenia and is due to be released from prison in a few months. He received a six-month custodial sentence for violent behaviour. Kate is currently finishing a course at her local FE College and will be looking for full-time employment. Peter is failing to attend school on a regular basis. Jane is apparently doing very well at school and is not currently showing any signs of distress.

Mr Brown's employer has allowed him time off over the past two years, but he feels increasingly "stressed" and unable to keep control.

Other agencies involved were the Social Services; Education Welfare and Housing departments and Police and mental health services.

Therapeutic session took place over eight monthly meetings in the family's home. Three meetings were with the whole family, one meeting with the male members of the family, one with the female family members and the remaining three consisted mainly of the oldest daughter and the two younger siblings.

The focus of this work was on the way the mother's bereavement had rarely been talked about in the family, but was having an enormous impact on each family member. It could be argued Colin's behaviour finally brought about a context in which the impact of the mother's death could be explored in detail.

In the first session Colin described how his continuing his studies at his local FE College now hung in the balance since Colin had attacked and assaulted another student. Colin described how the student had been "dissing" his mother calling her a "slag" and in an instant reaction Colin found himself hitting out and kicking this student. Until this session Colin had not brought into focus the connection between what the student had said about his own mother and Colin's violent reaction to it. The connection in the moment of this session appeared obvious to Colin and perhaps for the first time he faced how angry he was feeling. This connection proved to be a turning point in helping Colin to recognise his strong feelings and the need for him to work to prevent his reactive behaviour.

The work broadened out to discuss with all family members (except James who was in custody) how they had been differently affected by their mother's death in respect to their ages and stages of childhood/adolescent development. These conversations witnessed the many abilities the family developed and increased their awareness of their strengths and appreciation for each other, especially Mr Brown and Kate in respect to the efforts and sacrifices they had made to support the



family on a day-by-day basis. Kate during this time started to write poems in appreciation of her mother, herself and her family. She hoped to publish them to help other young people who suffered trauma or bereavement.

## **Case Study 2 M Family**

Mrs & Mr M emigrated to the UK from X African country and their two daughters Silvia age 21 and Natasha age 17 were both born in Luton. Mr M died a few years ago. This family was chosen as a case study because of the way the family culture played a large part in the way meaning was constructed in respect to the daughter's offending and the way the extended family played a significant part in restoring the break down of relationship between mother and daughter.

Natasha's behaviour was the reason identified for the referral of this family to the Family Therapy service. She became involved with Luton YOS after being given a Final Warning. The person doing the final warning assessment referred Natasha's mum to the parenting team for parent support. After a more detailed parenting assessment, Mrs M was referred to the Family Therapy team for family work.

The work consisted of two sessions only with a follow up appointment arranged in two months (at the time of writing this report). In the first session Mrs M outlined the current break down in communication between herself and Natasha and their lack of trust and respect for each other. Mrs M was also very concerned about Natasha's friendships and one person in particular who the mother saw as a very bad influence. Natasha had also accrued a very large mobile phone bill and Mrs M was the account holder.

Tracking back in time we explored how there had been a very good and harmonious family atmosphere. The simple action of connecting back to happier times seemed to be like a person suffering from chronic back pain being able to really feel what a pain-free time had felt like and a sense of sadness developed for the loss and pain experienced over the last year and the deleterious effect this had on the whole family. We left this session with a sense that mother and daughter had reconnected and shared a real desire to make things work. We had also asked "who in the family was most likely to help keep things on track" the answer was rather surprising, Mrs M saying how she was now going to invite her mother (living in X African country) to join them for a while and help the family reconnect still further.

The second session lasted only half an hour. As we stepped in the door a new and relaxed atmosphere was very apparent. Grandma had arrived and was currently helping Silvia (Natasha's sister) with her daughter. In the interval between these two sessions Mrs M and Natasha had done a good deal of talking and rebuilt their trust for each other. We wondered as to how sustainable this rapid change could be, so we asked many questions to test out how hypothetical future challenges would be managed. Natasha answered these questions with an assured sense of maturity resulting in Mrs M hearing these responses and openly being appreciative of her daughter's abilities and re-found strength of purpose. Natasha's responses illustrated a different mind set. Our being curious about how this new mindset would be seen in action provided the opportunity for Natasha to describe in detail how she intended to maintain her focus and make good judgements.

In our view our work in relation to the family system and reflecting on the importance of culture and the extended family, played a significant part in the success of this case. Success here being defined as restoration of positive family relationships following a major relationship break down, as well as no further offending. The therapy also seemed to have an empowering effect on Mrs M who developed a greater appreciation and respect for how her daughter manages to keep her self safe and out of trouble. It also seemed to enable mother and daughter to have a greater awareness of their skills, qualities and abilities.

## **7. SUMMARY OF ACHIEVEMENTS**

### **7.1 Number of Families Provided with Services**

Over the first phase of the IYPP Project 17 families were referred 1 family was not seen and one family seen twice during two episodes for two separate children in the family. Although 15 families received an intervention only 8 were included in the evaluation figures for the first research phase as the remainder were still engaged with the service as the data collection phase ended.

### **7.2 Identified Range of Issues Affecting Offending**

During the Family Therapy sessions families were able to identify and discuss a range of issues that affected their young person's offending:

- Bereavement
- Family break up
- Paternal patterns of offending
- Abuse
- General communication skills related to abilities to solve difficulties through dialogue
- Relative poverty
- Poor environmental conditions
- Racism and/or other forms of discrimination
- Young person's mental/physical health – ADHD, Asperger Syndrome or Autistic spectrums, general levels of distress and behaviour related to unresolved or processed traumas ie witnessing violence from a young age

### **7.3 Multi – Agency collaboration**

Most families worked with had a number of other agencies involved resulting in a need for real clarity and collaboration in respect to differing tasks and responsibilities. Other agencies included:

- Social Services
- Medical practitioners – health visitors, psychiatrists etc
- CAMHS
- Education – EWO's, teachers etc
- Housing

Much of the liaison between the Family Therapists and the agencies listed above took place by telephone. In one instance the Family Therapist worked with an independent consultant, who was working with a young person in their school environment.

One example of a positive outcome from multi-agency collaboration was that of a young person who had very poor school attendance. The Family Therapists liaised with the Education Welfare Officer (EWO), who was the case manager for the young person. As a collaborative piece of work, the EWO attended a Family Therapy session in the young person's home. The result of this collaboration was an improvement in school attendance for the young person.

## 7.4 Positive Changes

The Family Therapy Team's experiences and feedback from families and referrers have led to their assessment that outcomes in terms of changes have led to:

- Increased access to education by the young person
- Decrease in family conflict
- Increased confidence in relating to others outside the home

In feedback from clients, many of them said that the relationship between the young person and parent/carer improved.

Five families stopped engaging in Family Therapy because the young person was no longer living at home and was either living independently in a hostel, with extended family or in prison.

From feedback and reviews with family members and the outcomes for the family members, the Family Therapists describe, below, a range of different responses to the service, which they see as falling into four broad categories. They also describe the types of outcomes that in the Family Therapists opinion would follow from these responses:

- **Found it really useful** – changes in patterns of behaviour occurred and were sustained, relationships improved and abilities to communicate openly and effectively increased, regard for self and others improved, families felt confident of being able to manage the future.
- **Found it quite useful** – reduced levels of distress and increased levels of competence, but ongoing complexities mean that only partial effectiveness was achieved and ongoing involvement remains very probable, a general optimism that the process was more helpful than unhelpful and that follow-up studies could reveal more benefits than are immediately obvious whilst a crisis state of living persists.
- **Of some use but circumstances made it too difficult to establish a position of reflexivity** – In the opinion of the Family Therapists the most effective work has probably been with families where there has been a one-off offence and the Family Therapy meetings have provided a point of focus to reflect on the effect of the incident, what has been learnt from it and what will prevent future difficulties. A majority of families worked with are still living in a context of on-going troubles with a family member, the local environment, lack of communication in the family and with external agencies. This kind of work often meant the arrival at the family's home for a meeting coincided with the current event such as an arrest; a child running away; a child being moved to a safe place and so on. The complexity of the moment meant that the best we could hope for was to offer empathy for their situation and attempt to provide a few moments of calmness from which to find one or two things that the family could focus on that would help the situation from deteriorating further and maybe help point towards solutions. It is possible that these interventions have been more profoundly useful than it is possible to observe at the moment, for example, one family reported how they did not see the point of the questions we asked at the time, but later found the question came back to them when things had settled down and on reflection it had proved to be useful.
- **Families belief system made it too difficult or inappropriate to continue meeting** – A number of families had a very strong sense of 'we should be able to sort this out ourselves' resulting in a sense of shame and embarrassment. Most of these families permitted our involvement for a few sessions during which the family's abilities and motivations for change were identified and amplified leaving the therapist with some optimism and trust that things will improve. In a sense this is the essence of systemic practice – making a small intervention that reconnects the family with helpful patterns of communication.

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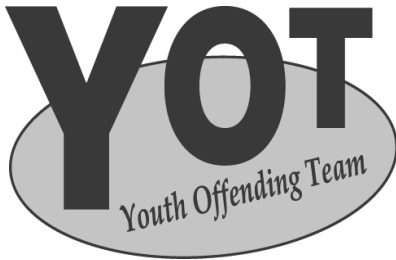


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## **Involving Young People in Parenting Programmes Project**

### **Individual Parallel Programme**

#### **Project Workers:**

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#### **Project Manager:**

**Jo Graves**

#### **Report Writer: Jo Graves**

Contributions from Nicola Johnstone and Teena Larkin

## East Berkshire Youth Offending Teams

- For the IYPP Project, East Berkshire YOTs was a partnership between Bracknell, Maidenhead and Slough Youth Offending Teams
- East Berkshire YOTs ran **Individual Parallel Work** for young people and their parents, where the young person was involved in, or at risk of offending, displaying anti social behaviour/challenging behaviour and/or had been missing from home or truanting from school.
- The individual sessions for parents and young people had a core programme of 6 weeks, with the possibility of extra sessions according to individual need.
- The content of the sessions has Social Learning Theory as their theoretical underpinning.
- 15 families had completed the programme and participated in the research element of the project (all relevant forms returned). A further 10 families had participated in the programme but not fully in the research element of the project (all forms not returned).

# 1. CONTEXT OF THE PROJECT

## 1.1 Service Context

The three separate Youth Offending Teams of Bracknell Forest, Slough and Windsor & Maidenhead worked together as a service delivery site for the IYPP Project under the delivery site title 'East Berkshire YOTs'.

Prior to the commencement of the IYPP project, parenting interventions and support services were jointly commissioned by the three YOTs from the East Berkshire Parenting Service. One Parenting Coordinator and one Parenting Worker provided parenting interventions across the three YOTs. The IYPP Project was set to run within the existing staffing structure of the YOTs with the addition of a Young Person's Parallel Worker, employed on a short-term contract, who would contribute to the development and administration of the programme and then work with the young people whilst the Parenting Workers delivered a corresponding programme exploring similar issues with the parents.

## 1.3 Underpinning Ethos

Help and support for the parents of young people, who become involved in, or who are at risk of becoming involved in crime, is part of a wider programme of action to support families and prevent social exclusion.

*Helping families develop good parenting skills is an effective way of ensuring that problems with a child/young person's behaviour, or development, are not allowed to grow unchecked into major difficulties for the individual, their family and the community.*

Home Office/Youth Justice Board/Department for Constitutional Affairs (2004)

Support for parents, is provided by the YOT with the aim of keeping families together and preventing wider social problems developing.

## 2. THE MODEL

### 2.1 Underpinning Theoretical Principles

The Individual Parallel Programme was based on Social Learning Theory, (Bandura 1977), which focuses upon observational learning and modelling. Social Learning Theory proposes that behaviour is learned and it can either be unlearned, or new behaviours learned in its place. In practice this can be developed by encouraging good behaviour by positively reinforcing or rewarding it and reducing unwanted behaviour by discouraging it and setting sanctions or clear consequences for unwanted negative behaviours.

### 2.2 Programme Structure

The Parenting Worker at Bracknell Forest YOT and the Young Person's Parallel Worker employed to work across the East Berkshire YOTs developed both the parents' and the young person's programme.

The material for the parenting element of the programme was based on the parenting group work programme 'Living with Teenagers', which was developed by the Centre for Fun and Families. Both the Parenting Worker and the Young Person's Parallel Worker had used this programme successfully with parents prior to the IYPP Project. Permission was sought and obtained for parts of the programme to be adapted and used for individual parents from the original authors, the Centre for Fun and Families. The two workers also mixed a number of resources they themselves had used successfully with young people to develop the young person's programme.

When a family was referred for parallel individual work, the Parenting Worker and the Young Person's Worker met to discuss the issues within the family and plan the sessions. The work was then done with the parent and young person separately, but focussing on the same issues for each, as developed in the intervention plan. The completed programme was six weeks long for both parents and young people. The parent's and young person's worker met half way through the programme to review the case and amend the plan if necessary. They also met with the family upon completion to review progress.

### 2.3 Programme Content

The core programme for parents and young people followed the same themes on a weekly basis. The programme was individualised for each parent and young person, according to their individual needs, by selecting the worksheets/methodology best fitted to the family's specific issues and the participants' individual learning styles. Extra sessions for other issues can be added to the core if either an assessment, or work in the sessions, reveals it to be necessary.

The core programme consisted of the following themes:

<b>Week1</b>	Information sharing
<b>Week2</b>	Defining behaviour
<b>Week3</b>	Expectations
<b>Week4</b>	Communication
<b>Week 5</b>	Positives
<b>Week 6</b>	Looking to the future

The other YOTs involved in the East Berkshire project site were invited to add anything to the resource pack that would embrace people's different learning styles, capabilities and cultures so that the programme was flexible and adaptable to individual needs.



## **3. REFERRALS**

### **3.1 Referral Sources**

Referrals were taken from YOT staff, the Police, Education, Social Services and parents were also able to make self-referrals. Referrals were not pursued if there were obvious child protection issues. If it became obvious only part way through the programme then our programme was suspended and a referral made by either the parenting or young person's worker to Child Protection services.

### **3.2 Referral Criteria**

The project was open to any parent/carer and their child /young person between the ages of 10 and 17. The young people referred had to be involved in or be at risk of offending, displaying anti social behaviour/challenging behaviour and/or had been missing from home or truanting from school. Only a minority of the young people referred were already involved in the youth justice system. The majority were on the periphery of offending, perhaps having been reported missing on several occasions, or presenting anti social behaviour at school or within the community, or experiencing major difficulties within the family home.

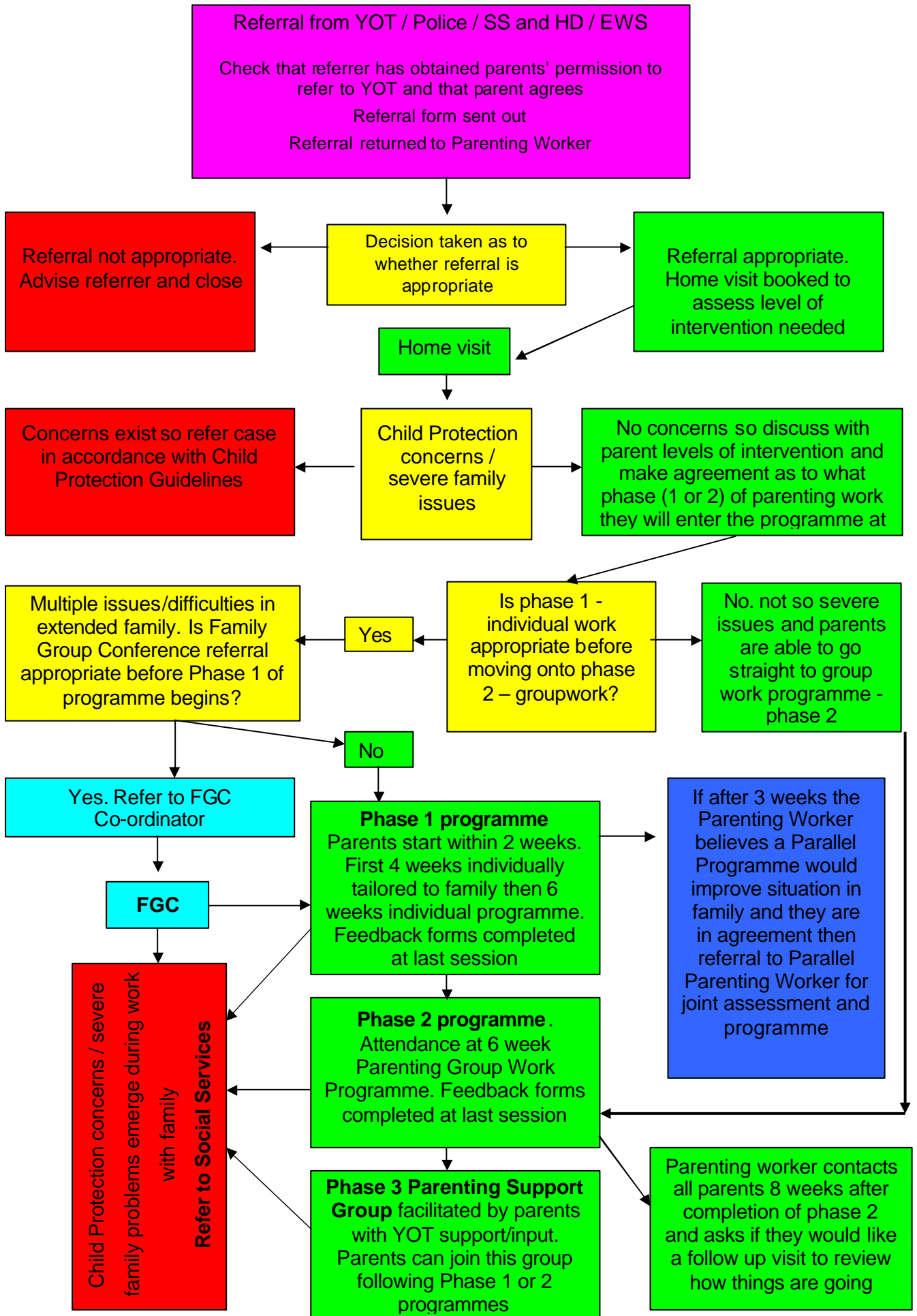
### **3.3 The Referral Process**

Referring agencies filled in project referral forms. The two project workers made an initial joint assessment visit to assess the suitability of the family and establish consent for their involvement with the service as well as the research study. Careful explanation was given to the families regarding the research element of the programmes and their role in completing the questionnaires provided by the independent evaluators, if they were willing to do so.

Any unsuitable referrals were discussed with the referring agencies and alternative ways forward were suggested. Those referrals that were unsuitable were mainly those where there were child protection issues, or where there was already a huge amount of Social Services input. Other unsuitable referrals were those where the presenting issues were not going to be helped by the programme eg parents with addiction or severe mental health problems, where it was felt that this needed to be addressed before any parenting programme could be effective. These parents were referred on to the appropriate services.

A flowchart detailing the referral process can be found overleaf.

## The Individual Parallel Programme Referral Process



## **4. PROJECT DEVELOPMENT**

The project was planned in 3 phases:

**PHASE 1** Development phase

**PHASE 2** Service delivery

**PHASE 3** Completion

The project development and practice barriers and the ways in which they were overcome at various phases are discussed below.

### **4.1 Barriers**

#### **4.1.1 Staffing**

Problems regarding the staffing changes began to surface just after the project agreement was signed, with integral staff leaving and delays in recruiting replacements. The only dedicated Parenting Worker in place during the development phase was the one in Bracknell. So the Young Person's Parallel Worker based herself at the Bracknell Office and together the two worked tirelessly to develop the programme itself and literature advertising the project to possible referring agencies.

The Operational Manager from Bracknell Forest YOT agreed to take over the financial and day-to-day management of the IYPP Project. Unfortunately prior to the commencement of the IYPP Project the Parenting Coordinator left to take up alternative employment and the parenting worker went on maternity leave. This left the YOTs in a dilemma. Later, the Operational Manager responsible for the day-to-day running of the project also left.

#### **4.1.2 Confidentiality**

Clarity regarding confidentiality, particularly for the young people, became an issue for the workers to deal with. Some young people were reluctant to have their thoughts and feelings discussed with their parents.

#### **4.1.3 Time**

The parents' and the young persons' programmes had to run in conjunction with each other. So it soon became apparent that late afternoon and evening visits were going to have to be made to fit in with work, school and teenagers' social lives. Consequently most visits took place between 3.30pm and 6.30 pm. Whilst the majority of work was being completed in Bracknell this was not a problem. However, when Slough YOT later came on board the Young Person's Parallel Worker, based in Bracknell, was often late for appointments because of rush-hour traffic. Whilst it made sense to complete the visits to Slough families during one evening, it was not always convenient for the families. So the Bracknell Young Person's Parallel Worker spent a lot of time travelling, which cut down on the amount of appointments she could manage. This highlighted a problem that one parallel parenting worker was insufficient to cover three geographical areas.

#### **4.1.4 The limitations of a six week programme**

Both original project workers, who initially developed the programme, felt that on occasions the six week intervention was not long enough. This resulted in them having to withdraw from the families before change was established. There were also limited resources available to offer ongoing support.

#### **4.1.5 Factors impacting on the length of the programme**

Some families were unable to complete programmes within 6 consecutive weeks because more pressing issues would often make them lose focus. The programme would have to be picked up after these problems had been resolved which interfered with the consistency of the programme, particularly for the young person. This also meant that delivery of the programme exceeded the six-week plan. Other reasons for this included school holidays, sickness and temporary disengagement.

#### **4.1.6 Consistency across the three sites**

As there were three sites involved in this project, one issue that arose was that of delivering the programme consistently across the three sites.

#### **4.1.7 Completion of research questionnaires**

We found parents and young people were not always very motivated to fill in the questionnaires needed for the research and so some families who took part in the project were not able to be included in the research study.

#### **4.1.8 Achieving the agreed level of service delivery**

Slough were unable to recruit a parenting worker until half way through the service delivery stage of the IYPP project and were therefore unable to contribute to the project at the beginning as they could not deliver the parents' programme. Windsor and Maidenhead suffered extreme staff shortages and were forced to commission parenting services from an outside resource, which only provided group work programmes this prevented them from making any practical contributions to the IYPP Project although they did provide support via the Steering Group.

As Bracknell was the only YOT able to recruit the appropriate staff by the time the IYPP Project was due to start the onus fell on them, not only to develop the programme, but to deliver services as agreed to families within the time scales of the IYPP Project. It was hoped that the recruitment issues could be addressed within the other YOTs so that they would be able to begin to provide families with a service and further contribute to the project as a whole, as had originally been envisaged.

#### **4.1.9 Training**

All the workers involved felt that they needed to gain knowledge around wider issues, for example, better knowledge of bereavement, marriage guidance, Child and Adolescent Mental Health Services (CAMHS), housing services and the benefit system. Training staff from all three YOTs involved in the project also presented difficulties.

### **4.2 Overcoming the Barriers**

A number of strategies were developed to overcome the barriers highlighted above:

- A Steering Group was set up with Parenting Coordinators and Operational Managers from each participating YOT, supported by the IYPP Project Co-ordinator and a representative from the Education Department (as it was felt that some referrals would come from services based in the education system). The Young Person's Parallel Worker also attended. The Steering Group met every 3 months throughout the IYPP Project and was particularly important in developing strategies to overcome the barriers identified.
- When the Parenting Co-ordinator and Parenting Worker who worked across all three YOTs left, it was decided that each YOT would provide its own parenting worker. However, the

Young Person's Parallel Worker would still work across the three unitary authorities as originally intended.

- The Steering Group acknowledged that it could jeopardise the consistency of delivery of the parenting programme if three different Parenting Workers delivered the programme in their own YOTs. Consequently a practice forum was developed. Workers across the three sites met on a six weekly basis to discuss and resolve practice issues and to ensure consistency across the three delivery sites.
- Bracknell Forest YOT were able to recruit a replacement Parenting Worker and, as managers of the East Berkshire YOTs IYPP project site, conducted interviews for the Young Person's Parallel Worker with two members of the Steering Group.
- The Slough YOT team suggested that some of the project budget be used to pay a sessional worker to deliver the young people's programme in Slough. The Steering Group agreed this on the understanding that the programme was strictly adhered to for the sake of consistency.
- The Young Person's Parallel Worker based in Bracknell Forest YOT delivered informal internal training to the sessional worker at Slough who was recruited to deliver the programme to young people in Slough. This not only helped to increase capacity, but was also important for consistency of delivery. Once Slough was delivering the programme to their own clients, the issue of time taken up travelling for the Bracknell based young person's worker was alleviated.
- The IYPP project workers from Bracknell Forest YOT went on a promotional tour of the local statutory agencies within Bracknell to explain about the project and to encourage referrals to the project. This was very successful and they returned with numerous requests for referral forms.
- Young people's concerns about personal information being shared with their parents were resolved by workers clarifying the confidentiality agreement. This meant young people could be confident that information wouldn't be shared without their permission unless child protection issues were involved. However, they were also encouraged to consider when and how it might be helpful to share some information that could lead to greater understanding and to positive changes in their relationship with their parent/s.
- Additionally, the joint session at the end of the programme gave the opportunity for both parents and young people to share issues and information when they felt more confident and able to express their thoughts and feelings to each other.
- The project workers had to develop strategies to ensure questionnaires were completed whilst ensuring confidentiality and anonymity. The workers visited families prior to commencement of the programme to discuss the IYPP Project and how they (family members) would be contributing to the development of a more effective service for families in their community. Consequently 'Before' questionnaires forms were completed before the programme commenced.
- Project staff accessed training on a number of issues, some of it organised by the IYPP Project Co-ordinator and some externally funded. They also attended the quarterly Multi site IYPP project meetings, where staff from all five models met to discuss a range of issues. The workers awareness and knowledge was raised, which allowed the workers to assess need more effectively and refer to other support networks where relevant, so that families could re focus on the programme.

## 5. RESOURCES

On reflection a Parallel Worker in each YOT would have made it much more achievable to provide services to more families as per the IYPP project agreement. A lot of time was lost travelling between areas and communication between the sites was often difficult. If each YOT had worked independently using the same programme but met regularly to share best practice, this would have enabled targets to be achieved or exceeded.

The majority of families preferred to be seen in their own homes. This generally worked well but was complicated if younger siblings were around when sessions took place. Some young people often requested to be seen at the YOT office as this gave them space and freedom to talk away from the family. This did not cause too many difficulties, as on the occasions that this happened rooms were easy to access.

The project was completed within the budget parameters, staffing being the main cost. Again savings could have been made from reduced travelling.

Training was provided by TSA for the project workers. Additional training was given to YOT staff by the Young Person's Parallel Worker on the programme content to cut down on inappropriate referrals. In hindsight this should also have been given to the other referring agencies.

## **6. CASE STUDIES** Names and other details changed to preserve anonymity.

### **Case Study 1 Family Smith**

Mother and Daughter

Problems in this family were very recent. The daughter had got in with 'the wrong crowd' including those already involved in criminal activity and was displaying difficult behaviour at home and school and not abiding by previous parenting boundaries.

The programme worked well with this family in our opinion because:

1. The problems had occurred fairly recently, meaning investment in wanting to change was still evident for both mother and daughter.
2. Only small changes were needed in expectations of each other.
3. It was easy for mum to encourage a more suitable peer group, by encouraging her daughter to pursue a part time job which gave her new friends. Ms Smith was also able to encourage her daughter to re engage with activities that she used to participate in with other friends but had dropped out of and to become more involved with her extended family.
4. We worked mostly on communication between mother and daughter and we mediated for a while until more positive lines of communication were re-established

#### **Changes made:**

- Daughter settled at school
- Communication improved between mother and daughter at home
- Daughter sustained part time employment
- Daughter rebuilt her network of friends

### **Case Study 2 Family Jones**

Mother, Father, and two sons.

Problems in this family had been happening for a long period of time, and both parents felt they had asked for help many times before and had not been given what they had requested. One son was struggling at school both socially and academically. The other son was compounding this problem by bullying his brother at home and he was also very verbally and physically intimidating towards his parents, particularly his mother.

This programme worked well for this family because:

1. All family members took part, also all members were exhausted at how family life had become and all accepted that they needed to make their own individual changes in order for this to be a success.
2. Parents and young people very quickly became trusting of us as workers and this meant there was honesty regarding difficulties and an openness in relation to their feelings.
3. Unresolved issues from bereavement were uncovered and this previously had been a huge barrier/ root cause of misunderstandings and arguments for three of the family members in

some shape or form. Once acknowledged and shared with others the family members were able to seek separate counselling for this issue and move on.

4. Strict boundaries and consequences were put in place, which both parents supported to deal with the aggressive/threatening behaviour of one son, which at one point had led to police involvement.
5. Because we are part of a multi agency team, issues that arose could be dealt with more efficiently. For instance, we could make use of the internal referral system to the education representative within the YOT to address school issues.

**Changes made:**

- Family able to deal with issues of bereavement
- Level of aggression/intimidation from one son decreased
- Parents, particularly mum, able to see changes which increased her self-confidence
- Parents worked more together as a unit once they were honest with each other regarding feelings etc
- Small practical changes made in family home which addressed many of the problems raised by the young people (including separate bedrooms for privacy/less bullying opportunity etc.)

On leaving the last session with this family Mrs Jones said to the parenting worker:

*Thank you so much for helping me to get my family back.*



## **7. SUMMARY OF ACHIEVEMENTS**

### **7.1 Services Delivered to Families**

- By the end of the IYPP project 15 families had completed the programme and participated in the research element of the project (all relevant forms returned). A further 10 families had participated in the programme but not fully in the research element of the project (all forms not returned), but in the view of the project workers they did seem to have benefited considerably from the input.
- The majority of the project referrals came from the Social Services and Education departments. There were 8 boys and 7 girls. There were five families where both parents /guardians took part. In the remaining families only the mother participated.

### **7.2 Summary of Other Achievements**

- In the opinion of East Berkshire YOTs IYPP project staff the families that gained the most from this programme were those where the parents had already reached the point where they were able to reflect on their own behaviours and how these impacted (either negatively or positively) on their children. They were also at a point where they were willing to make changes in their own behaviour as well as having the expectation of change in their children's behaviour. It was possible to start this programme with families that had not reached this point, but in the opinion of the project staff there was less positive change by the end of the programme.
- Again in the opinion of project staff, young people taking part in the programme engaged and worked more effectively if they still had a clear memory of 'a better past' when family life, until a certain time or particular event, had been good. This meant the young person had a longing to get that back and therefore invested in making changes to return to a positive family life.

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**Greenwich  
Council**

**Involving Young People in Parenting Programmes Project**

**Family Skills Training**

**Kinara Family Resource Centre**

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## Kinara Family Resource Centre

- The Kinara Family Resource Centre (FRC) is a borough wide statutory resource - London Borough of Greenwich
- Kinara FRC ran **Family Skills Training (FST)** for young people and their parents, where the young person had previously offended, was at risk of offending, or the young person was having difficulties within school and/or at risk of exclusion
- The programme consisted of parallel groups for young people and parents, followed by family sessions. There are seven weekly 2 hour sessions and 4 later booster sessions
- The theoretical basis of the model draws on theories of social learning such as positive reinforcement, adult learning and child development, reinforced by research into the effective components of parent education
- The Kinara FRC worked with a total of 26 parents and 25 young people

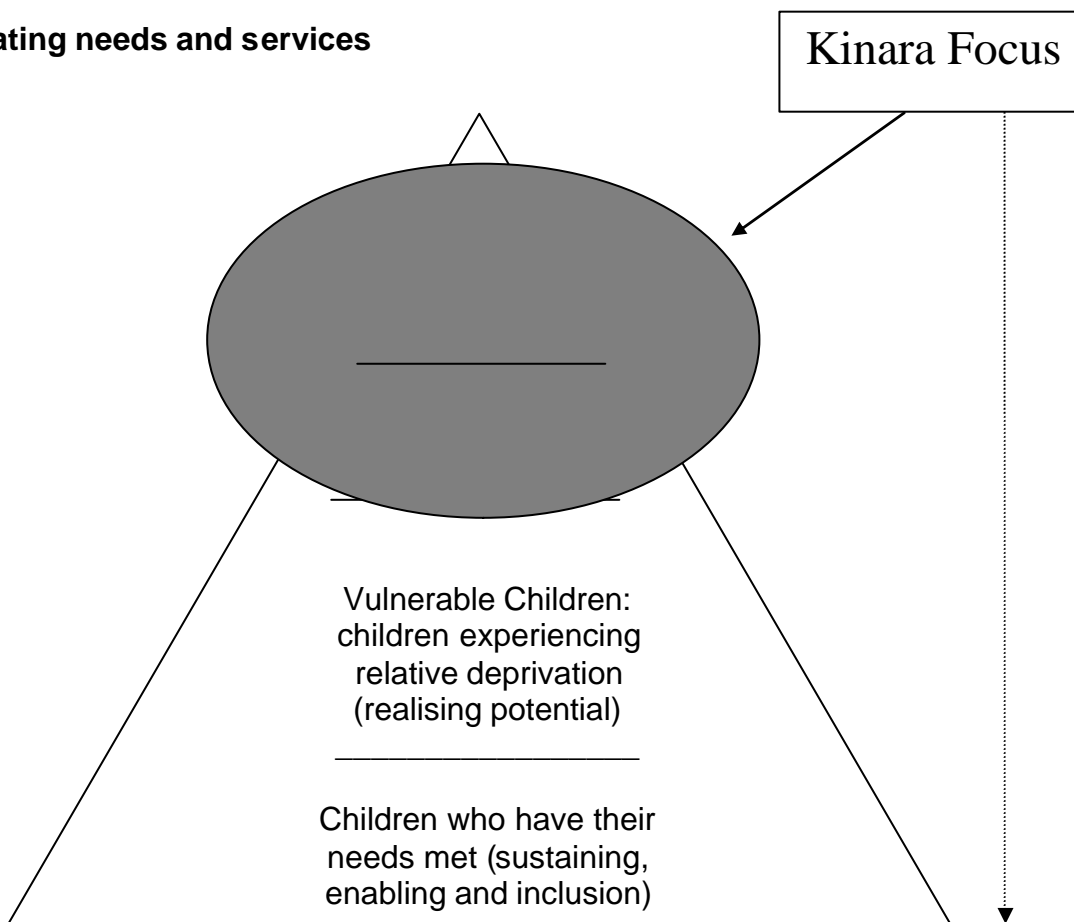
# 1. CONTEXT OF THE PROJECT

## 1.1 Service Context

The Kinara Family Resource Centre is a social services resource for teenagers (13-17) assessed as 'Children in Need' and works in supporting young people and their families in order to divert from accommodation, harm and criminal activity. The Kinara Centre is a statutory resource working across the London Borough of Greenwich. The Centre has developed and provides a portfolio of integrated, inclusive, focused and preventative and empowering services that include a variety of case work and group work initiatives. The Centre is a 'needs led' service in that services have been specifically developed to meet needs that have been directly identified within our work with families. Historically, the Centre has provided parenting groups in order to support parents whose children may be involved, or at risk of being involved, with criminal activity. Additionally, the Centre has developed a number of groups for young people in order to provide them with support and to develop their resilience.

Kinara's services can be mapped using a pyramid to show a hierarchy of needs and services, as illustrated in the diagram below. Those at the apex of the pyramid (the top tier) would be those young people 'Looked After' by the local authority or on the Child Protection Register. The tier below would refer to 'Children in Need' in accordance with the Children Act 1989 – section 17. Targeted and focused services such as those provided by Kinara are geared towards these needs, while young people with lower levels of need would be able to access universal services such as schools, primary health care and Connexions. Kinara's role is to enable young people and their families to access or get the most out of community and universally available services whilst recognising that at times some families have additional needs that require more specific targeted support.

### Locating needs and services



## 1.2 Underpinning ethos

The Kinara Centre attempts to work in an anti-oppressive way and tries to ensure that services that are offered will be undertaken within a culturally appropriate framework, addressing the needs of different groups. Difference is celebrated and service users are encouraged to reflect upon issues of gender, race, ability or disability, sexual identity, class and religious beliefs as part of the process of work. The discrimination, racism or oppression that many families experience is acknowledged in our work and we attempt to address this by the use of positive imagery and materials that are reflective of diverse backgrounds.

Practical support is offered to families on a 'needs led' basis in terms of transport arrangements, childcare, accessibility of venue, for example, and any other support needs will be addressed in order to decrease barriers to attendance. This is also an acknowledgement that the most deprived families are likely to have greater support needs.

Kinara emphasises:

- Working in partnership – promoting user involvement
- Strengthening family relationships & developing resilient young people
- Family centred, systemic and solution focused work – working with young people in their context
- Outcomes focused services
- Supporting parental capacity and motivation

The broad aim of the service is to “reduce the numbers of young people becoming involved in crime and prevent re-offending by providing integrated guidance and skills-based structured programmes for parents and carers”. The specific objectives and content of the existing group work service, based on an eclectic model include:

- Empowerment ethos
- Consolidating and developing parenting capacity and motivation to meet child's needs
- Equipping parents with and consolidating coping strategies in relation to adolescent behaviour
- Improving parenting skills in relation to communication, negotiation, problem solving, boundary setting, handling conflict, managing stress Increasing awareness of self, others and relationships
- Reducing sense of isolation
- Focusing on specific skills: budgeting, accessing training and employability, for example
- Drug and Alcohol awareness

## 1.3 Parenting Strategy

With the implementation of the Crime and Disorder Act 1998, Greenwich Youth Offending Team and Family Support Services developed a parenting support programme for parents of young offenders and those at risk of offending. The service provides group support to parents who are experiencing difficult and challenging behaviour from their children aged 10-16 years old and who may be subject to Parenting Orders.

The parenting service originated as a pathway provision that worked in partnership with Greenwich YOT between 1999-2002. During this time the service was part of national research focusing upon parenting support to parents of young offenders. This research along with local evaluation indicated how parents felt that the service supported them in terms of managing difficult and challenging behaviours. Additionally carers indicated how they felt empowered to address other factors within their lives e.g. feeling confident to study, return to work etc. The service was commended in the 2001 Health and Social Care Awards and received £2,000 in order that the good practice is disseminated.

Additional funding streams such as the Children's Fund and BIP (Behaviour Improvement Plans) in schools have been used to further develop the service in terms of offering the intervention at an earlier stage of a young person's involvement in crime.

The parenting group programme has developed to ensure that information pertaining to drug awareness is included. This developed in consultation with carers. Many families have been and are affected by drug and substance misuse and the parenting groups have been a useful forum to access appropriate information about local resources and advice. There is a drugs session in both the parents' and young peoples' group programmes.

Including young people in the work with parents was seen as the next step in the development of the services. The Centre bid for and was successful in being funded in the Involving Young People in Parenting programmes project (IYPP), implementing Family Skills Training at the centre.

## 2. THE MODEL

### 2.1 Underpinning Theoretical Principles

The intervention model used at Kinara was Family Skills Training (FST) which was developed by Kumpfer and DeMarsh (1983) in the USA to reduce environmental risk factors and improve protective factors, with the ultimate objective of increasing personal resiliency and minimising susceptibility to drug use in high risk young people. Due to its success in this area, FST has been adapted and developed into a family change programme to serve the needs of culturally and geographically diverse families and their children across the nation (Wilson 2000). Research has demonstrated that, for both the parents and the young people, family skills practice helps families make and sustain improvements in their interactions (Kumpfer & Tait 2000).

The model consists of skills training for parents, children and families. Parents and children meet together at the beginning of each session for announcements. Following this, parents and children spend an hour in their respective groups. They then come together again and spend another hour in families. Refreshments are also provided but the timing varies.

There are a number of key themes:

- The theoretical basis of the model draws on theories of social learning such as positive reinforcement, adult learning and child development reinforced by research into the effective components of parent education
- The program emphasises that 'good parenting' requires a combination of showing love to, and setting limits for, children and young people
- The model draws on research and aims to provide strategies to support identified 'protective factors' for children and young people such as promoting resilience and aspirations for young people, encouraging listening and open communication and effective boundary setting, to mitigate against 'risk factors' such as negative peer influence, criminality and drug and alcohol use
- The model was developed to be provided to all young people and their families aged 10-14 on a community basis, acknowledging that this time of transition is a challenge for all parents, care givers and their children
- The model aims to reiterate the above points throughout the program and to be available to all sections of the community. The program is aimed at being delivered not just to parents but also to those adults important to the young person. The model recognises the context for young people and their families outside of the family home and emphasises change in the whole family system rather than simply for individuals within the family



## 2.2 Programme Structure

The Family Skills Training Programme brings parents together with 10-14 year old children/young people by providing seven weekly 2 hour sessions and 4 later booster sessions. The model was designed to accommodate 8-13 families and its emphasis is on positive engagement, incentives, rewards and meals.

A typical **parent session** would include a welcome and raffle, warm-up exercise, video vignette and narrative which is played from start to finish of the hour long session but gives time limited breaks in which to undertake specific exercises such as word storms, discussions, letter writing and questionnaires. The end of each session always includes task setting for the next week, as well as preparation for the family session, which always takes place afterwards.

A typical **young people session** would take place simultaneously with the parents session. There is always an ice-breaking/warm-up exercise. Very often there are several games during any one session, but these usually centre around a theme e.g. goals, appreciating parents, dealing with stress. There is a combination of discussion, video and activities some of which are arts and crafts or role play. There is always preparation for the family session which follows and in some instances task setting for the next week.

The **family session** usually starts with a group game before moving into an exercise which usually takes place in small family groups. There is general format of breaking into family groups to undertake tasks or exercises before coming back into the big group to share how this went. At the end of the session there is usually a closing circle, which ends the session.

Each session is split into 3 subsections – parent group, young people group and family time.

Young people sessions include:

- Strengthening social skills
- Dealing with stress/emotions
- Appreciation of parents/elders
- Increasing responsibility
- Handling peer pressure

Parent sessions include:

- Positive influences on the young person
- Child development
- Nurturing support, sharing
- Setting boundaries
- Appropriate consequences

Family sessions address:

- Listening & problem solving
- Communicating with respect
- Identifying family strengths & values
- Having fun

## 2.3 Programme Content

The chart below shows the content of the seven sessions for the parents, young people (YP) and the family.

SESSION	PARENTS	YOUNG PEOPLE (YP)	FAMILY
1	Identify stresses for YP Your children's qualities The value of parental love Limits to develop the qualities Support goals and dreams	Getting acquainted Making ground rules – setting consequences Visualising goals and dreams	Building positive relationships Supporting the goals and dreams of young people
2	Understanding changes in YP Understand the need for rules Reminding YP about rules without criticising, using "I statements"	Acknowledge own and parents stress Understand the impact of stress on actions Appreciating your parents	Family Strengths Family Tree
3	Noticing good behaviour and giving compliments Using rewards to reinforce good behaviour Using a points system Building a positive relationship	Understanding stress Identify signs and symptoms of stress Learning healthy ways of coping	Value of Family Meetings How to conduct a Family Meeting Privileges and rewards Planning fun activities
4	Staying calm and respectful Small penalties for small problems Saving large consequences for major problems	Everyone has rules and responsibilities Things go better when you follow the rules	Connections between family values, activities and decisions Identifying family values Making a Family Shield
5	Value of good listening Listening for feelings Understanding the basis for misbehaviour	Harm of drugs and alcohol Practising skills for resisting peer pressure	Listening skills Solving problems
6	Protecting YP against drug and alcohol abuse Interacting effectively with schools Monitoring YP	Additional skills for resisting peer pressure What good friends are like	Talking together about drugs and alcohol Talking together about behavioural problems Setting clear expectations
7	Understanding special family needs Accessing support – what and how?	How to help others Interactions with peer role models ( <i>it was difficult to implement this as we were still developing peer mentors</i> )	Reviews & presentations

### **3. REFERRALS**

#### **3.1 Referral Sources**

All referrals were via Greenwich Social Services Department.

#### **3.2 Referral Criteria**

Young person aged 10-14

Young person previously offended and/or at risk of offending

Young person having difficulties within school and/or at risk of exclusion

Parent and young person willing to engage in some joint work

#### **3.3 Referral Procedures**

In order that the families referred met the eligibility criteria, it was agreed at the start of the project that families would be taken either from Kinara caseloads, as a follow on from the parenting group where it was identified that the parent and young person could benefit from some joint work, or from the Youth Offending Team parenting co-ordinators' caseload (including Youth Inclusion Support Panels).

## 4. PROJECT DEVELOPMENT

The Kinara Centre has a history of providing groups for young people and parents. However, these were distinct and not integrated. Feedback from parents and professionals highlighted the need to involve young people in parenting provision or parents in provision for young people.

Therefore we were particularly interested in the Family Skills Training ('Strengthening Families') as it appeared to fit with our reflections on how best to integrate provision for parenting and young people in a holistic way. Our priorities to prevent youth crime and to minimise risk and harm by strengthening family relationships also appeared to be evidenced by the body of research in the USA in relation to this model. We also wanted to test and develop our existing provision and required additional resources to do this. We then submitted a bid to be included in the IYPP Project, were successful...then we actually had to do it!

### 4.1.1 Planning and preparation and early challenges

After negotiating contracts and goals, and initial research it became apparent that in order to effectively implement the model we needed to be trained by the model developers. This required a visit to San Francisco and the Napa Valley, where the next training on the model was scheduled to be held in the local Sheriff's Office. We learnt the model content and context, the resource implications and gained from the first hand experiences of those who had already implemented the model in their communities. We also enjoyed sharing our learning and the enthusiasm of our American counterparts, particularly when the model was translated into Spanish. This highlighted the adaptability but also specificity of the model, particularly the video's, which we felt highlighted cultural issues such as language. While getting over the jet lag we planned our first group in order to meet the tight deadlines...and our realisation that providing services to 24 families (as per the IYPP project agreement) was a lot using this model.

In the development phase of the IYPP Project there were a number of issues that we needed to consider carefully:

- **Referrals** – How to promote the project and ensure suitable referrals
- **Who facilitates?** – In order to facilitate this model, we needed extra staff. Due to the short time scale of the IYPP Project, we felt that we did not have the time to recruit new staff and have them go through an induction period. To resolve this issue, part time staff increased their hours. This gave us more flexibility with existing staff
- **Logistics** – This seemed to be a challenging aspect of this model, as venues were required with more than one room large enough to run two separate groups, one of which needed to be large enough for everyone. We looked around the local community for suitable venues. Another solution was that we got a portacabin for the centre, increasing our capacity. Other resources, such as transport, childcare and food were provided in line with Kinara's existing policies.
- **Engaging with both parent and young person** – We felt that we would need to think carefully about this, as we had been successful in the past in engaging parents and young people separately, but not together. This issue is dealt with in more detail in the next section
- **Staff supervision** – We felt that the staff implementing this model would need more support. In addition to the usual supervision procedures at Kinara, members of the management team, who had undergone the training, offered consultation sessions at the beginning, middle and end of each group process. We had built this into the budget in our funding application

- **Focus on content rather than process** – The FST model is highly structured and tightly timed, using videos and having little emphasis on the group process. This was seen as a possible problematic issue for some staff, as previous parenting groups had focussed more on the group process, rather than the content. Several strategies were employed to address this, such as familiarisation with the course content, discussions in supervision, consultation sessions and extra sessions for parents at the beginning of each group programme to allow some of the processes to occur

As well as these barriers identified at the early stages other barriers emerged as we delivered the service.

#### **4.1.2 Engaging both parent and young person together**

We were already successfully engaging both parents and young people on our existing group work programmes. The engagement of both together for the same group is a vital component to the success of the programme. We also needed to address how we maintained engagement throughout the length of the programme.

#### **4.1.3 Diversity**

Staff needed to ensure that the balance of group members worked, i.e. that there wasn't an obvious group member that may feel isolated, e.g.

- one girl/rest boys
- one 10 year old/rest 13 and 14 year olds
- one black parent/no other staff or parents who were black

#### **4.1.4 The high level of resources required**

The programme is costly in terms of staffing, provision for refreshments, childcare expenses, transport etc...for anyone wanting to implement this model, this would be an issue to consider.

### **4.2 Overcoming the Barriers**

#### **4.2.1 Engagement**

- Effective pre-engagement work. Two workers visiting family at home and meeting young person and parent separately to discuss fears and anxieties
- Involving families that we had previously worked with in engagement sessions. Many had positive experiences of the staff, centre and group-work
- Having a two-week introductory session with parents prior to starting programme to enable parents to 'tell their story'

#### **4.2.3 Diversity**

- We attempted to ensure that the facilitating staff were diverse and reflected the service users. Having a male worker was identified as a major strength when working with young males who very often did not have a positive male role model
- During the home visit staff needed to assess reading and literacy abilities of parents and young people to ensure the programme could meet their needs or whether adaptations were needed

#### 4.2.4 The high level of resources required

- The costs for this were built into the IYPP Project's budget, but for anyone wishing to implement this model, the issue needs to be taken into consideration

### 4.3 Some Lessons Learned from Implementing the Model

Using the FST model required Kinara staff to work in a very different way. Our experience showed that there were some aspects of the US model that staff found challenging to use with UK families as well as some very positive aspects. These are summarised in the following tables in relation to the programme and to the videos that accompany it.

#### 4.3.1 The programme

Positive	Need to consider
Well integrated structure in terms of material and the manual e.g. handouts for homework, samples	Some aspects were culturally specific (eg warm ups and Family Creed Statements)
Emphasis on families working and spending time together	Need to ensure diverse staff group, especially mixed gender facilitation as working with the whole family
Wall chart exercise reinforced negotiations & agreements between carer & YP	Emphasis on content meant that there was limited opportunity for carers to share experiences
General philosophy and ethos allows facilitators to reinforce commitment to change with all family members	Time required for preparation and planning
Enhancing achievements & communication in terms of aspirations (set questions etc)	High level of supervision and consultation required
Questionnaires helping carers to identify their style of parenting	Need to consider how group will gel as this will impact on time
Standard letters are a useful tool	Workers felt that they needed to adapt tools / methodology to make similar points more successfully
Identifies a 'tool bag' of responses that should be attached to specific behaviours i.e. use of 'I statements', giving of chores & taking away privileges - Helping carers to apply age appropriate sanctions	The model works on the assumption that parents/carers are able to prioritise and promote the best interests of their young people. This may not always be the case
Use of communication techniques e.g. 'The Family Tree' that enabled greater awareness of family history/ values & beliefs.	Appropriate assessment as to levels of familial/emotional engagement required. There is potential for a child to experience further rejection
The point system to encourage good behaviour & praise, which in turn could build bridges between YP & carer	Families may miss certain weeks which will greatly hinder their/group learning
The pack has a number of photocopiable resources	Would need to be greatly adapted if a carer did not have literacy skills
Treasure Maps, Family Trees etc. encourage interactive family communication in a focused & safe way	

### 4.3.2 The videos

Positive	In Need of Change/Consideration
Scenarios did spark conversation and debate	Case scenarios appeared to be unrealistic to our client group & incidents of conflict portrayed are minor
Emphasis upon the need to provide 'love & limits' in order to care appropriately	Some material seems old fashioned and aimed at middle classes US expressions/language 'jargon' used
Draws out key discussion points & enables carers to participate & allows facilitators time to reinforce certain core messages	Can be repetitive & may need more time for discussion around specific areas
Help to identify appropriate sanctions for minor & major problems (as oppose to one response fits all)	Christian emphasis may not be relevant to multi-faith communities and could exclude
Understanding the values of good listening & basis for young person's behaviour	Timing of discussions can prevent group cohesion & cut people off mid flow
	YP video could come across as being 'preached to', which may hinder learning
	Age and ability of young people needs to be considered when discussing important issues such as substance misuse
	Video endorsement seems irrelevant

## 5. RESOURCES

Although the resource implications have been mentioned in various places already, a summary follows:

**Staffing Levels** – A minimum of three staff required. The parent group could function with one facilitator, as it relies heavily on the use of videos. The young people group needs to have two facilitators. The number may change according to the number of families involved. Consideration needs to be given to the fact that both groups join together for the last hour.

**Venues** – If existing venues are not large enough to accommodate two groups, then this has implications for the budget, if alternative venues need to be hired.

**Other logistical issues** – If venues are hired out of the local community, then transport may need to be provided and included in the budget. The families eating together is a very important part of this model and so food should be provided and should be appropriate for families attending. This programme is designed for the parents/carer(s) and one of their children only. Childcare needs should therefore be addressed if there are other children in the family.

**Training** – This model cannot be implemented unless staff have had appropriate training. The US developers do visit the UK to deliver training, workers can receive the training in US or there is one service provider in the UK that delivers training. The model manuals and videos are needed to implement this model.

**Video players** – Video players are needed for each group.



## **6. CASE STUDIES** Names and other details have been changed to protect confidentiality.

The case studies were chosen to demonstrate two families who had successfully engaged with the programme and whom it was felt had benefited from the intervention. Additionally, both family's history and background had brought them to the attention of statutory services for very different reasons. To this end the model could be seen to address a variety of social difficulties.

### **Case Study 1:**

The C family attended the FST after mum M had attended the Kinara parenting group because of her older son's offending behaviour. This son, who was 18 received a custodial sentence for drugs related offences, these events took their toll on M and her 11 yr old twins P (m) and Pr (f). The twins had just started secondary school and were struggling to settle in, M was experiencing difficulties managing Pr in particular at home. They were keen to attend FST as a family. The twins were very keen to have some quality time with Mum and discuss their relationships.

The family attended 100% of sessions. The children made links in the young people group and grew in confidence. They especially enjoyed the opportunity to have M's attention and take part in activities with her. M feedback that she had learnt some useful techniques in terms of disciplining the twins at home as well as learning to show love again. This had been neglected previously as her older son dominated her time. We also encouraged M to communicate more effectively with the twin's school so they were able to receive more support.

### **Case Study 2:**

Ms S and her daughter were referred to The Family Skills Training Group via another Family Centre. They had not been engaging very well individually, and it was felt that the group might be more appropriate to give them the opportunity to work together on issues of communication.

This was following a disclosure from the young person that she had been sexually abused.

A home visit was made to Ms S and her daughter, and at this time, they were both feeling quite negative about the group but said that they would attend.

Ms S and her daughter attended 9 out of 10 sessions and engaged fully with the programme. Ms S said she preferred group work to individual work, as she had been able to meet with other parents in similar situations to herself.

Feedback from the referrer following the group was that Mrs S appeared to have grown in confidence as a parent and as a result was more able to identify her responsibilities as a parent. She was also more willing to engage in ongoing work and appeared to have moved from a position of being in denial.

## **7. SUMMARY OF ACHIEVEMENTS**

### **7.1 Numbers of Families Provided with Services**

During the course of the IYPP Project, the Kinara Centre worked with a total of 26 parents, only one of whom was male. We worked with 25 young people, 14 boys and 11 girls.

### **7.2 Other Achievements**

In terms of outcomes for young people we felt that the FST programme offered the following opportunities to:

- Develop a greater sense of attachment with caregivers as the programme promotes positive time and interactions
- Gain enhanced communication with caregivers and siblings
- Develop confidence and self-esteem. The programme promotes aspirations and ambition for young people
- Take away tangible tools i.e. Family trees, Family meetings, Treasure maps etc
- Improve school attendance
- Reduce Anti-social behaviour (during the life of the group)
- Develop self care skills (a young person was refusing to put any medicated cream on for their eczema, this changed during the life of the group)
- Share their knowledge, skills and strengths with others
- Act as role models and benefit from role models
- Disclose sexual abuse

## 8 REFERENCES

**Kumpfer KI & DeMarsh JP (1983)** *Strengthening Families programme: Parent Training Curriculum Manual*. Salt Lake City, Utah: University of Utah Graduate School of Social Work Social Research Institute.

**Kumpfer KL & Tait CM (2002)** *Family Skills Training for Parents and Children*. Washington DC: Juvenile Justice Bulletin, April 2002.

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## **SECTION 3 THE EXPERIENCES OF PARENTS AND YOUNG PEOPLE**

### **3.1 Limitations of the Evaluation Study**

The initial intention of the project evaluation design had been to compare and contrast the experiences of parents and young people taking part in the five different interventions in the five service delivery sites. We had hoped to be able to draw out key themes that could indicate whether particular models of delivery might offer more to parents and young people than others. However, as the project progressed it became clear that the numbers involved were too low to be able to provide any significant or meaningful comparative data. There were also issues in relation to confidentiality in reporting the experiences of a small group of project participants - without identifying the parents and young people to the project workers and without identifying the individual project workers involved when reporting the data gathered. We therefore report in this section on parents' and young peoples' experiences overall rather than by the five different interventions delivered in the five project sites.

We have also had to reconsider our initial intention to identify *impacts* on truancy, antisocial and offending behaviour and on parenting and parents' and young people's relationships, using 'Before' and 'After' questionnaires. Again on reflection we recognise that the small sample size and lack of comparison group prevent us from drawing any conclusions that can be used beyond an understanding of what went on for **this** group of parents and young people taking part in **this** project. Therefore we simply describe below these parents' and young peoples' experiences.

Without a large sample size and without a comparison or control group, we are not able to identify any causal link between any effects found for this group of parents and young people and the interventions they took part in during the project.

The 'Before' and 'After' questionnaires were distributed to parents and young people and gathered up by project site staff. It is also possible therefore, that the information gathered using this method may have introduced a selection bias towards parents and young people who felt positive about the project rather than those who did not. Parents and young people who were still involved with the project at the end of the intervention may have been motivated to complete the questionnaires because of their positive experiences of the project and particularly because they had formed good relationships with site staff. We may therefore have heard more about the positives than the negatives for parents and young people.

In relation to the in depth individual interviews carried out at the end of the project, the initial intention had been to interview an equal mix of families that project staff felt had benefited and not benefited from their intervention. However, not all projects were able to make contact with families who they felt had not benefited from the project. Therefore the interviews involve more families that the project staff thought had benefited from the project and again this may lead to more positive responses than negative.

Bearing in mind these limitations, we report below on what was found by the Policy Research Bureau through:

- 'Before' and 'After' questionnaires completed by parents and young people
- Staff questionnaires completed retrospectively at the end of each young person's and parent's involvement with the project (whether or not they had 'completed')
- Individual interviews carried out with a small number of parents (10) and young people (8).

**Please note: throughout the report names and other details have been changed to make sure the identities of people involved are not revealed.**

### 3.2 Parents in the Study Sample

Although in total approximately 127 families took part in the IYPP project interventions, out of that number 119 parents who completed the 'Before' questionnaires were included in the PRB's evaluation study.

This sample was made up of:

- 101 mothers where only the mothers took part in an intervention
- 5 fathers where only the fathers took part in an intervention
- 13 mothers where fathers also took part in an intervention and completed questionnaires

In relation to this last group, the mothers and fathers who took part in an intervention together, the PRB designated the mothers the main carers in order to maintain consistency with the rest of the families who were represented by the views of only one parent, the majority of whom were mothers. Additionally, because of this small number (13) of mother and father couples completing questionnaires, no analysis was carried out separately on couples' experiences. It is important to bear in mind therefore when reading the findings below that the sample included in the evaluation study does not include all parents and young people who took part in the interventions:

- Some parents and young people chose not to complete questionnaires
- Some fathers who completed questionnaires were not included in the study sample

Just over half of the parents included in the sample were single and not living with a partner ( $n^4=65$ ) with the remaining parents married or living with a partner ( $n=53$ ). Nearly 3/4 of parents were over 35 years old, with almost half being between 35 and 44 years old. The parents were mostly White British ( $n=107$ ) with a small number of parents defining their ethnic group as either Black ( $n=2$ ), mixed race ( $n=2$ ), Asian (6), or other ( $n=2$ ).

The parents were also asked their employment status. Of the 119 parents included in the sample almost equal numbers of parents described themselves as working full time or part-time ( $n=45$ ), as were "looking after family and home" ( $n=46$ ). Of the remaining parents, 14 were sick or unable to work, 7 were unemployed, 4 were in full time education or training and two parents recorded 'other' as their employment status.<sup>5</sup>

Out of the 119 parents included in the sample:

- 119 parents completed 'Before' questionnaires
- 73 parents completed both 'Before' and 'After' questionnaires
- 18 out of the 119 parents (15%) 'dropped out' or did not complete the intervention

Additionally 4 parents completed only 'After' questionnaires

Ten parents were interviewed individually by the PRB at the end of the project (2 from each site), all were mothers.

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<sup>4</sup> 'n' stands for 'number' throughout this text and is used to indicate that the figure given represents the number of...

<sup>5</sup> For one parent this information is missing.

### 3.3 Young people in the Study Sample

Out of the approximately 127 families who took part in the IYPP project interventions there were 104 young people who completed the 'Before' questionnaires and were included in the study sample. Additionally, interventions for 7 families involved other siblings, so 2 or more children were involved. However in these families only the young people whose behaviour led to involvement in the intervention were included by the PRB in their study sample of 104 young people.

The young people sample consisted of 60 boys and 44 girls who were aged between 10-17 years. Most were between 11 and 15 years old. The young people were mostly White British (n=89), with the remaining young people defining their ethnic group as either Asian (n=5), mixed White/Asian (n=5), mixed White/Black (n=2), with 2 young people defining their ethnic group as 'other'<sup>6</sup>.

Of the 104 young people included in the study sample:

- 104 young people completed 'Before' questionnaires
- 61 young people completed both 'Before' and 'After' questionnaires
- 21 out of the 104 young people (20%) 'dropped out' or did not complete the intervention

Additionally 4 young people completed only 'After' questionnaires

Eight young people were interviewed individually by the PRB at the end of the project.

### 3.4 Referrals

As can be seen from the table below the agencies referring young people and their families to the project sites for the IYPP interventions were the agencies most likely to come into contact with young people involved in anti-social or offending behaviour or truancy. However, self-referrals were the second highest referral route which could suggest a group of these families were actively seeking help.

<b>Table 1: Referral route of young people</b>	
<b>Referral Agency</b>	<b>Number (n)</b>
<i>Social Services</i>	34
<i>Self-referral</i>	24
<i>Youth Offending Team</i>	19
<i>Education</i>	11
<i>Health</i>	2
<i>Other</i>	10
<i>Missing data</i>	4

*Base=104 young people*

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<sup>6</sup> For one young person this information is missing

In the **individual interviews** with 10 parents and 8 young people the reasons for referral to the IYPP project were explored further by the PRB:

Both parents and young people were asked why they had been referred to the IYPP.

The 10 parents stated that their child had been referred due to one of the following risk factors:

- Behaviour and truancy issues
- Miscellaneous issues (e.g. absence of a father figure; learning difficulties; and health and psychological problems)
- Offending and antisocial behaviour

Behaviour and truancy issues was the most common reason provided by parents as to why their child had been referred to the IYPP, with offending and antisocial behaviour being the least common reason.

The 8 young people cited multiple reasons as to why they were attending the IYPP including:

- Truancy and other school related issues
- Behavioural problems (e.g. anger management, violent aggression)
- Offending and antisocial behaviour

Most of the 8 young people interviewed stated that truancy and other school related issues may have triggered their referral to the IYPP project, with some reporting that they were being bullied at school at the start of the IYPP intervention. The desire to return to mainstream schooling had led a couple of young people to become involved in the IYPP project.

In addition to truancy and school related issues, four of the young people also stated that behavioural problems were one of the main reasons for participating with the IYPP. Only a couple of these young people stated that offending or antisocial behaviour were the reasons for attending the IYPP project.

Nearly all of the young people interviewed stated that they had previously been involved in similar types of services/programmes to the IYPP intervention they had received. Previous services had included counselling, family therapy, anger management courses, as well as specific government funded initiatives, such as On Track.

### **3.5 Interventions**

Young people who were **interviewed individually** described the interventions they took part in:

*It's fun and helps with communication and family problems (Sam)*

*It was just like a place that you can go to and relax and just get everything out of your system. (Debbie)*

*Helps if you are having lots of arguments it's like an anger management course. (Simi)*

The numbers of young people in the study sample involved in the five different interventions is shown in table 2 below:

<b>Table 2: Young people who started an IYPP intervention by intervention type and by sex</b>			
<b>Project</b>	<b>Male</b>	<b>Female</b>	<b>Total</b>
Family Therapy	7	1	8
Parallel Group Work	16	15	31
Family Skills Training	14	11	25
Family Group Conference (FGC)	9	11	20
Individual Parallel Work	14	6	20
<b>Total</b>	<b>60</b>	<b>44</b>	<b>104</b>

Four out of the five project sites worked with 20 or more young people from the study sample. Luton YOS Family Therapy project worked with 8 young people.

The ratio of young men and young women attending each project was similar in three of the projects, whereas both the East Berkshire YOTs Individual Parallel project and Luton YOS Family Therapy project worked with considerably more young men than young women.

The numbers of parents in the study sample involved in the five different interventions is shown in table 3 below:

<b>Table 3: Number of parents who started an IYPP intervention by project and by sex</b>			
<b>Project</b>	<b>Male</b>	<b>Female</b>	<b>Total</b>
Family Therapy	0	12	12
Parallel Group Work	3	33	36
Family Skills Training	1	25	26
FGC	1	21	22
Individual Parallel Work	0	23	23
<b>Total</b>	<b>5</b>	<b>114</b>	<b>119</b>

Again four out of the five project sites worked with more than 22 parents in the study sample and Luton YOS Family Therapy project worked with 12 parents.

Luton YOS Family Therapy project had a lower throughput of parents and young people involved in the study sample than the other project sites. The reasons identified by project staff for the lower numbers involved are that there were administrative difficulties proceeding with the recruitment process for additional therapists in the early stages of the project, a lack of referrals in the early stages and additionally that the interventions tended to run over an extended period of time.

All sites worked with a far greater number of mothers than fathers. The five fathers in the study sample attended 3 of the sites, with 3 out of the five fathers attending the Centre for Fun and Families Parallel Groups. Two of the sites did not work with any fathers in the study sample.<sup>7</sup>

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<sup>7</sup> However, please note that 5 fathers who were not included in the study sample by the Policy Research Bureau did take part in the Individual Parallel Work programme run by East Berkshire YOTs.



The project staff were asked to report how much contact time young people had with their project and over how many weeks they were involved with the project. This information is shown in table 4 below. The amount of contact time varied across the projects and for different young people. For three of the projects the most contact hours they had with young people was between 14 and 18 hours whereas the most time for Luton YOS Family Therapy was 7 hours and with Kinara Family Skills Training this rose to 35 hours. Similarly the number of weeks of contact also varied considerably, ranging from 1 week, to contact for up to 30 weeks.

The average amount of contact which young people in the study sample had with the projects was just under 11 hours and the average number of hours per week was 1.7.

Variations in the amount of engagement young people had during the IYPP project varied as much within individual projects as between the five project sites.

**Table 4: Young People’s contact time with IYPP intervention (in hours and weeks)**

	Family Therapy	Parallel Group Work	Family Skills Training	Family Group Conference	Individual Parallel Work
Least time (Hours)	1	2	0*	2	1
Most time (Hours)	7	17	35	18	14
Shortest time (Weeks)	0*	1	0*	2	1
Longest time (Weeks)	30	7	10	25	15

\*Where there were ‘0’ hours/weeks recorded the young person did not attend the programme but the parent did attend.

The drop out or non-completion rate for parents was 15% (18 out of 119) and for young people was 20% (21 out of 104).

### 3.6 Young Peoples’ and Parents’ Experiences of the Projects

In this section we will explore a number of factors:

- What did the young people and parents expect from the project?
- Were their expectations met?
- How satisfied were young people and parents with different aspects of the project?

#### 3.6.1 Young peoples’ and parents’ expectations

The ‘*Before*’ questionnaire asked participants to rate their *expectations* of the project on a 6 point scale and the ‘*After*’ questionnaire asked participants to rate the project upon completion using a similar scale. Virtually all (99%) of the 73 **parents** who completed both questionnaires *expected* the project to be ‘very’ or ‘fairly helpful’. The **young people** were slightly more diverse in their expectations, with 44 of the 61 young people who completed both questionnaires expecting the project to be ‘very helpful’ or ‘fairly helpful’, 10 couldn’t say what they expected, 4 thought it would be ‘neither helpful nor unhelpful’ and the remaining 3 young people thought it would be ‘fairly unhelpful’ (n=2) or ‘very unhelpful’ (n=1).

Overall, virtually all the parents (99%), and just under  $\frac{3}{4}$  of the young people reported that they expected the project they took part in to be helpful to them. The biggest other group were 10 young people who couldn’t say what they expected.

Some of the 10 parents and 8 young people interviewed individually help to illustrate what we learnt from the questionnaires about parents' and young peoples' expectations before they attended their project.

In general, the **parents** interviewed (all 10 were mothers and most were lone/single parents) had felt unable to cope before the intervention and reported having felt isolated and a failure when it came to parenting. There were no real anxieties conveyed about the project itself, apart from some apprehension in participating in something new. These parents wanted:

- to help their child 'get better', wanting them to be aware of their own actions and how it affects them as parents

*He needed to see that there was light at the end of the tunnel.* (Leigh)

- to set 'boundaries' with child – learn parenting techniques
- help and support – including reassurance from project workers/other parents.

Most of the 8 **young people** interviewed reported how they had hoped engagement with the project would help establish/improve communication with family members, particularly with their mother. They hoped that involvement with the project would provide the opportunity to talk about family problems and create a basis upon which to establish better relationships.

Some of the young people hoped that their own behavioural problems could be tackled, enabling them to control and manage their anger more effectively:

*Just like calm my temper down and that.* (Debbie).

One young person who cited problems linked to school issues indicated that he was hoping to receive some assistance with his literacy difficulties

*Cos I got spelling difficulties and that* (Jake).

Others hoped that the intervention would help them to return to (mainstream) school:

*To help me get back to school, have an education and just achieve something from it.* (Tracey).

There were no real anxieties conveyed about the individual projects apart from minor apprehensions about interacting with others. One young person also asserted:

*I sort of thought "oh not another one [intervention]", but I thought "yeah this may help"* (Sam)

### **3.6.2 Were young peoples' and parents' expectations met?**

The expectations of parents and young people who completed both questionnaires appear to have been met in the majority of cases. Of these 73 parents and 61 young people all but one parent and 45 of the young people reported that they had found the project either 'very' or 'fairly helpful'. Overall, there was not much change between expectation and final rating. However, one young person who expected the project to be 'very unhelpful', actually found it 'fairly helpful'. Conversely, one young person who expected the project to be 'fairly helpful' found it 'very unhelpful, it was a waste of time'. Three young people found it 'neither helpful nor unhelpful' and of these one had expected the same at the beginning, whereas one had expected it to be 'very helpful' and the other young person had expected it to be 'fairly helpful'.

Of the 10 **parents** involved in individual interviews most spoke of the usefulness of the advice that they had received during the project. This included advice on communication and self-control skills as well as learning useful parenting techniques:

*It taught you how to set boundaries on your children without being over-bearing ... show you how to word things differently* (Ellen)

*I think it's absolutely invaluable ... [daughter] wasn't going to go anywhere, but we did actually get her to go for some time, which was certainly better than what was happening*  
(Linda)

However, a couple of parents interviewed reported that they thought the intervention to be a complete failure and that nothing helped:

*They kept telling me that everything he was doing, it was helping him. Well if it was helping him then he wouldn't have re-offended.* (Kathryn)

One parent specifically commented on how much better informed they were about the service that they were receiving from the YOT via discussions with project staff. Other parents interviewed mentioned how proactive project staff were in obtaining literature for them if they requested help or advice in relation to a particular issue. For many the interventions were seen as an 'outlet' in that the project staff (and other parents where applicable) were available to listen and assist:

*They help you, they understand what I used to go through, and I had someone to talk to, you know, cry to.* (Aisha)

These parents were particularly grateful for support from project staff outside of the official session times. This extra support usually took the form of negotiating with schools and making themselves available to take phone calls.

However, having talked in depth about their own satisfaction with the project, when asked about what they thought their child accomplished during the sessions, it would appear that parents who had been in interventions with separate parent and young people sessions knew little about their child's involvement with the IYPP interventions. They reported that their children didn't really discuss what they had done in their sessions. However, they believed that their children enjoyed their involvement with the project. Other parents felt that the young person had not opened up in front of them or the project worker.

Having completed the project, most of the **8 young people** interviewed felt that it had benefited them and their family because it enabled them to develop a problem solving approach and to learn new techniques to modify their behaviour. Some felt that involvement in the project was useful in the sense that they were able to discuss their problems rationally rather than expressing themselves in the form of aggression:

*I was having a good time... like talking about your problems instead of taking them out on someone like I normally do.* (Sam)

*I can't talk to no one, but there I could talk about everything.* (Debbie)

Interventions which provided an opportunity to bring family members together to discuss difficult issues were particularly valued by some young people. One young person indicated that the intervention enabled his wider family to better understand how he was feeling and what he was 'going through'. Some of these young people considered it to be an excellent opportunity to spend time with their main carer/family members. One young person thought there were some advantages to working with their parents but also that it would have been helpful to have separate time:

*I like it when my Mum's with us because then she can hear what I'm saying, she'll understand it. But there's some things I would like just to talk about with just some other person that actually understands me.* (Sam)

However, other young people did not like being in a group with their parents.

For projects that did not bring together parents and young people, the interviews revealed that parents and young people had different opinions about the mode of delivery for the intervention

which they had received. The parents interviewed who had taken part in these projects particularly expressed that it would have been preferable to have had at least one session with their child:

*Sometimes it's best to work with children as well, to see what they're like. (Aisha)*

These young people on the other hand appeared to feel more comfortable being in a group with peers rather than parents.

### 3.6.3 Parents' and young peoples' satisfaction with different aspects of the project

Both **parents and young people** were asked in the 'After' questionnaires to comment on whether:

- The project was interesting
- The project workers knew what they were doing
- The project workers understood how the young person/parent was feeling
- The project workers listened to what the young person/parent had to say

They were asked to indicate whether they found these statements to be: 'very true', 'fairly true', 'neither true nor untrue', 'fairly untrue', 'not at all true' or 'can't say'.

Over 90% of **parents** who completed this section of the 'After' questionnaire (n=69) found all these statements to be 'very' or 'fairly true'. Over 80% of parents found the statements that project workers knew what they were doing, understood how they were feeling and listened to what they had to say to be 'very true'. Slightly fewer parents found it 'very true' that the project was interesting but this still amounted to 65% of parents.

Although over 80% of the 65 **young people**<sup>8</sup> who completed this section of the 'After' questionnaire found all these statements to be 'very' or 'fairly true', their responses overall were more variable than the parents. Almost the same number of young people agreed that it was 'fairly true' that the project was interesting as felt it was 'very true' (roughly 40% each). A few young people found it 'neither true nor untrue', a few 'fairly untrue' and a few 'not at all true' that the project was interesting and that the staff understood how they were feeling. A couple of young people found it 'not at all true' that the staff knew what they were doing.

Overall then most **parents and young people** who completed both the 'Before' and 'After' questionnaires found the projects interesting and the staff competent, understanding and felt the staff listened to them. However, a few young people did not find this to be the case.

Some of the 10 **parents** interviewed and 8 **young people** help to illustrate what we learnt about parents' and young peoples' satisfaction with different aspects of the projects.

Reflecting back on their experiences some of these **young people** commented:

*It was just like a place that you can go to and relax and just get everything out of your system. (Debbie)*

*I liked the people that I met but sometimes the sessions were quite boring...we just kept going over the same things... listening to the same things...At the end of it most of us thought that the only good thing about it was the break. (Simi)*

*The staff were nice. They were like friends as well, cos you used to have a laugh and cos you used to sort your problems out. (Debbie)*

Almost all of the 8 young people who were interviewed also commented upon their relationship with project staff in positive terms. Staff were considered by some young people to be 'easy to talk

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<sup>8</sup> Except for whether staff 'knew what they were doing' where 64 young people responded

to', 'supportive' and 'trustworthy' when it came to giving out what was deemed to be 'good advice'. It was apparent that some young people's relationships with the programme staff had been different to that with staff from previous programmes. The young people commented upon how the staff had really 'understood children' and looked attentive:

*... as if they understood children... other counsellors, all they did was listen and they didn't ask questions. They [previous counsellors] didn't really understand what you were saying. They [current project staff] were thinking about everything you said. (Sam)*

**Parents** interviewed were also generally very positive about the staff with whom they had interacted. The staff were described as 'trustworthy' and 'helpful' when it came to giving good advice or needing further information. Staff were also considered to be understanding, and caring:

*She's very personable, she's so easy going and relaxed and she doesn't make you feel like you've got someone official sitting there in the chair ... And that makes you open up that much more easily. (Irene)*

Most of the 10 **parents** and 8 **young people** interviewed considered their relationships with staff to have been an important factor in keeping them engaged with the programme and helping them with their difficulties.

### 3.6.4 Summary of young peoples' and parents' experiences of the projects

Of the 73 parents and 61 young people who completed both 'Before' and 'After' questionnaires:

- All parents except one **expected** and **found** the project to be very or fairly helpful
- Nearly  $\frac{3}{4}$  of young people **expected** and  $\frac{3}{4}$  **found** the project to be very or fairly helpful
- 10 young people couldn't say what they expected
- 1 young person found the project 'very unhelpful, it was a waste of time'

Of the 69 parents and 65 young people who responded to these sections in the 'After' questionnaires:

- Most parents found it very or fairly true that the **project was interesting**, that the **staff knew what they were doing**, **understood how the parent was feeling** and **listened** to them
- Most young people found it very or fairly true that the **project was interesting**, that the **staff knew what they were doing**, **understood how the young person was feeling** and **listened** to them – however they were not quite as positive overall as the parents
- A few young people **did not** find the project interesting, nor feel that the **staff knew what they were doing**, nor think that the staff **understood how the young person was feeling** nor that the staff **listened** to them

### 3.7 Parents' and Young Peoples' Perceptions of Change

Two key objectives of the IYPP Project were to improve parenting skills and family relationships. Parents and young people were asked questions to find out their perceptions about how things had changed in these dimensions over the course of their intervention. The five dimensions were:

**Communication**<sup>i</sup> between the parents and young people

Parents' **supervision and monitoring**<sup>ii</sup> of young people's movements and activities

**Handling conflict**<sup>iii</sup> between parents and young people

**Warmth and hostility**<sup>v</sup> between parents and young people

Parents' **confidence and sense of coping**<sup>v</sup> with their parenting tasks.

Young people were also asked to report on the numbers of times they had **been involved in offending, anti-social behaviour and truancy**.

Parents' and young peoples' perceptions of change in these areas by the end of their intervention were explored using 'Before' and 'After' questionnaires and individual interviews. We describe below what young people and parents said about each of these areas. **However, it is worth remembering here that these findings are relevant to this group of parents and young people only and we do not know what in particular influenced any changes whether positive or negative.**

#### 3.7.1 Communication

Parents and young people were asked (in their separate questionnaires) how much they talked to one another, whether they listened to the other's point of view and how much they thought that the other understood how they were feeling.

Sixty-seven **parents** responded to this section in both 'Before' and 'After' questionnaires and there was a statistically significant improvement for these parents in their perception of the degree of communication with their child/young person<sup>vi</sup>. For example, parents who felt they now 'talked a lot' with their child increased from 45 to 56 parents. Although this area of communication changed significantly, it's also interesting to note here the high starting point where a majority of parents already felt they talked a lot with their child at the beginning of the intervention.

However, the 59 **young people** who responded to these questions in relation to their mother showed a minimal deterioration in communication, although boys showed a greater deterioration in communication with their mothers than girls did - the boys' deterioration was statistically significant<sup>vii</sup>. The 30 young people who responded in relation to their father showed a slight deterioration in communication, although communication with father was rated higher than communication with mother at the beginning of the intervention and was still higher by the end.

Of the 10 **parents** (all mothers) and 8 **young people** who were individually interviewed most thought that communication had improved:

*I'll listen where before I'd say I wouldn't listen. You know, I'd just jump in at him sort of thing. But now I'm more relaxed and I don't shout at him as much. (Kerrian)*

*Me and my mum, we talked more, and if there's a problem we won't argue about it. Well we will argue but we won't argue as much. It has helped a lot. (Kylie)*

These young people also said that they were now more likely to talk through any problems with their mother whereas previously this would have been communicated to peers. However, some of the young people interviewed felt little had changed and still found it hard to communicate with their parents.

### 3.7.2 Conflict

Parents and young people were asked how often they found themselves in situations of verbal and physical conflict, and how they had tended to respond to these situations in the recent past and after the intervention.

Sixty-nine **parents** responded to these questions and overall there was some improvement. However, most areas of conflict with their child had stayed the same or had deteriorated. The one exception to this was that having had an argument there was a substantial decrease in parents who 'sulked or refused to talk about it' by the end of the intervention and the degree of positive change here outweighed the other areas to create an overall modest improvement. This was the only dimension of parenting in which there was not a statistically significant change<sup>viii</sup>.

For 57 **young people** who responded to these questions, there was less conflict with mothers by the end of the intervention, particularly for girls where the decrease in conflict was statistically significant<sup>x</sup>. Conflict with father stayed much the same for the 28 young people who responded to these questions in relation to their fathers.

*Me and my mum and my sister can actually talk about things now...I understand what they're saying. And I realise, basically if I've done something wrong and my mum shouts at me, I realise why she's doing it...I didn't really see that before so I'd just shout back! (Sam)*

### 3.7.3 Supervision and monitoring

Parents were asked how often, when their child was absent from home, they knew where their child was, who the child was with and what he/she was doing. They were also asked if they knew at what time their child would return home.

Sixty-nine **parents** responded to these questions in the 'Before' and 'After' questionnaires and they were statistically significantly more likely to believe that they were able to supervise their child/young person at the end of the intervention than they had been at the beginning<sup>x</sup>. However, it is important to note that only 5 parents reported that they knew what their child was doing '*most of the time*' at the beginning of the intervention and this only increased to 7 parents by the end of the intervention.

### 3.7.4 Warmth and hostility

Parents and young people were asked how often parents praised the young person or said she/he had done something well, or criticised or said she/he was bad. They were also asked how often parents lost their temper with their child and how often they told their child they loved or cared for him/her.

Overall for the 69 **parents** who responded to this section of the questionnaires their perception of the warmth between themselves and their children had improved statistically significantly<sup>xi</sup>. For example, the numbers of parents who reported losing their temper 'very often' or 'fairly often' with their child decreased from 25 parents to 6 parents.

For the 59 **young people** who responded to these questions in relation to their mother there was some improvement in warmth, more so for boys where there was a statistically significant improvement<sup>xii</sup>. Whereas warmth with father stayed the same for the 29 young people who responded. Overall, therefore there was little change for young people in relation to their view of their parents' warmth and hostility towards them.

### 3.7.5 Confidence and sense of coping

Parents were asked in the 'Before' and 'After' questionnaires how well they thought they had been coping with their child over the past month, taking everything into account.

Sixty-six parents answered this question and the proportion of parents who felt they had coped well in the last month rose from 28 parents at the beginning of the intervention to 51 parents at the end of the intervention. This improvement in sense of coping well was statistically significant<sup>xiii</sup>.

*I used to be sort of constantly on the edge, I used to feel like a little time bomb ticking all the time ... where now I feel a lot calmer in myself. (Ellen)*

However, 3 parents felt they were coping 'very badly' at the end of the programme.

### **3.7.6 Young peoples' offending, anti-social behaviour and truancy**

Young people were asked to record both in their 'Before' and 'After' questionnaires how many times in the previous 4 weeks they had done a list of 13 things including committing particular offences, anti-social behaviour and truanting from school. Between 41 and 50 young people responded to each of the 13 items.

Overall, there was a slight reduction in the average number of young people in this group involved in the offending, anti-social behaviour and truancy listed in the questionnaires. However, there were a few more young people involved in particular offences by the end of the programme than there had been at the beginning.

There was also a slight reduction overall in relation to the average number of times young people in this group got into trouble in these ways. However, again there were a few items where the average number of times particular offences were committed increased.

Three of the 8 young people interviewed individually had committed offences before beginning their intervention. One young person reported that he had re-offended since completing his involvement with the project. Moreover this person didn't believe that the programme had tackled his offending behaviour. Another young person reported that she hadn't reoffended since completing the intervention. One young person commented that although he hadn't yet reoffended he did think he may yet do so because that's what young people of his age did.

### **3.7.7 Different experiences for different groups of young people**

Although a majority of young people who completed 'Before' and 'After' questionnaires expected (44 out of 61) and found (45 out of 61) the project 'very helpful' or 'fairly helpful', this does not appear to be reflected in significant changes for them, as described above. To unpick this a little further the Policy Research Bureau looked at whether there were differences in the experiences of different groups of young people where these were substantial enough to compare:

- a. Those who had different levels of difficulty as reported by their parents
- b. Those who lived with two parents and those who lived with one
- c. Boys and girls
- d. Age of the young person

#### **a. Those who had different levels of difficulty as reported by their parents**

Parents were asked to report on young peoples' difficulties with their emotions, concentration, behaviour or ability to get on with others. Where difficulties were identified these were split into three categories minor difficulties, definite difficulties and severe difficulties. Among these groups of young people, it was found that for young people with definite difficulties (as reported by their parents) conflict with their mother significantly<sup>xiv</sup> declined after the intervention. Whereas, no significant change in any of the constructs was found for young people with severe difficulties.

#### **b. Those who lived with two parents and those who lived with one**

An analysis was undertaken based on whom the young person mainly resided with at the time of the IYPP Project. This was usually with either both their mother and father or with a lone parent. Young people overall felt there was some improvement in warmth from mothers. However, warmth from mother improved significantly<sup>xv</sup> for young people who lived with both their mother and father **or** with one of their parents and that parents' partner. This is not to say that warmth with father did not change, but rather warmth with father was already significantly<sup>xvi</sup> better at the start of the intervention than warmth with mother and there was not much change.



Also for those young people living with their mother alone, conflict with their mother had declined significantly<sup>xvii</sup> by the time the 'After' questionnaires were completed.

### **c. Boys and girls**

For boys warmth with mother appeared to significantly improve, whereas for girls' conflict with mother appeared to have significantly reduced.

### **d. Age of the young person**

The age of the young people did not relate to differences experienced in perceptions of change.

In **summary** then it would appear that there were some different experiences that linked to particular groups of young people in relation to their characteristics. Young people that had definite difficulties with their emotions, concentration, behaviour or ability to get on with others (as reported by their parents), as well as young people who lived as part of a lone parent family and girls in general, all experienced greater reductions in conflict with their mother than other young people. In addition, young people who lived with either two parents or their mother/father and partner and boys in general, all experienced a greater improvement in warmth with their mother than young people overall.

### **3.7.8 Summary of parents' and young peoples' perceptions of change**

Between 66 and 69 parents and between 57 and 59 young people responded to these sections of the questionnaires, as detailed above, except that between 41 and 50 young people responded to questions on changes in their offending, anti-social behaviour and truancy. These parents and young people stated that:

- Parents' **communication** with their child/young person had improved
- There was a slight deterioration for young people in communication with their parents
- Parents' **conflict** with their child had slightly improved
- For young people there was slightly less conflict with mothers, but it had stayed the same with fathers
- Parents' **warmth** towards their child/young person had improved
- For young people there was little change in warmth overall although some improvement in warmth from mothers
- The average numbers of young people who had been involved in **offending, anti-social behaviour and truancy** had slightly reduced
- The average numbers of times young people got in trouble in these ways had slightly reduced
- Parents were more likely to feel they were able to **supervise** their child/young person
- Parents' overall sense of **coping** with their child had improved
- Overall the results suggest that there was no statistically significant change in young peoples' relationship with their parents, nor in any of the specific dimensions (conflict, communication and warmth)<sup>xviii</sup>.

### **3.8 Project Staffs' Perceptions of Young Peoples' and Parents' Experiences**

Ninety-seven questionnaires were completed by staff across the projects sites in order to give their views on young peoples' and parents' experiences of the project.

Project staffs' perceptions of **young peoples' attitude to involvement** to the intervention before it started and **satisfaction** after the intervention were lower than young peoples' reports. This may be because the staff completed questionnaires on a larger group of young people than those that completed 'After' questionnaires, and so it is possible that young people who dropped out or did not complete the questionnaire may have been less satisfied than those who completed, thus staff perceptions were more negative at the 'After' stage. They may also have been less confident about young peoples' satisfaction levels.

Project staff perceived that a majority of **parents** were 'very' or 'fairly happy' about their **involvement with the intervention** before they started it. Moreover, when asked how **satisfied** they thought the parents were after completing the intervention, staff were even more positive, reporting that they thought over three quarters of parents were 'very' or 'fairly satisfied'.

Staff were also asked to report on their perception of **how beneficial the project** had been for **parents and young people**. Again they reported on young people and parents who had completed the intervention as well as those that dropped out. Staff felt there were some benefits overall for young people, for families and for parents. They thought that parents had benefited slightly more than young people had overall.

**Five project staff**, one from each project site, were **interviewed individually** to learn more about their views. These staff felt that the project was important for parents in finding support from others and helping them feel as though they were 'listened to'. Support came from both professionals, whether it was direct advice from the IYPP project workers or help to access other support services, as well as through the solidarity that they had found with other parents, decreasing the parents' sense of isolation. Parents were also seen to be learning new techniques through the project, including practical ideas such as managing conflict situations with the young person or ideas on compromising. Staff also felt that their work with families reinforced the importance of communication. One project described this as focusing on positive reinforcement, for example by using 'I' statements such as 'I would like' rather than 'you will'.

These staff also felt that they could see an improvement in parent's relationships with their children. As a consequence of this perceived improved communication, staff felt that some parents were taking more of an interest in and praising their children, which saw a 'growth' and 'warmth' in some relationships. As with the parents, staff believed that young people were beginning to feel listened to and valued as an individual – *"you really see the satisfaction they have, that they have turned their life around and things are so much better"* (project staff at IYPP Project Consultation workshop). Some staff took the view that although it did not necessarily change behaviour the project was helpful in building self-esteem and helping young people: *"peer pressure, school difficulties, bullying etc. meant the behaviour didn't always change"* (project staff at IYPP Project Consultation workshop). Other project workers commented on young people becoming calmer and managing their anger better, though did not make specific judgements on issues such as truancy, offending and anti-social behaviour.

The five project workers interviewed felt that they could see positive differences in young peoples' relationships with their parents. They stated that young people were receptive to trying out new ideas, such as how to communicate in a situation of conflict. For those who attended groups with their parents, some of the staff reported that young people would comment on how nice it was to be spending time with their parent(s). Sessions would also give young people a chance to 'moan' about home life and get their feelings off their chest.

When asked about the benefits of involving young people in parenting programmes these project staff were uniformly positive about this way of working:

*It's ideal really ... We can't take a young person away and make them better, you can't take a parent away and make them a better parent. You can do some individual direct work but make that meaningful by bringing them together. [Frank]*

Some staff members were 'amazed' by how things had improved for some families. In group work, parents were more likely to engage when the young person was present as there was "less emphasis on their role as parents, more on their relationship with the young person". Staff would notice changes as the sessions progressed, pointing out these differences to the families too. Where parents and young people were seen individually (in a group or on their own), project workers could see them improving in parallel – "your working with a young person and mum's getting a positive response, so mum's trying more. And the more mum tries, the young person is getting a positive response" (project staff at IYPP Project Consultation workshop). Through the IYPP Project, young people were given the chance to spend time with their parents (group work specific), to look at family relationships and be given a voice in the process. Staff commented on how this was very 'empowering' for the young people.

Although these staff promoted the involvement of young people in such programmes, where parents and young people worked together (Family Therapy; Family Skills Training; Family Group Conferences) they still recognised the need for both user groups to have 'built in space' to have time out to talk to someone by themselves. Where parents and young people worked separately (Individual Parallel Work; Parallel Groups), staff felt the need for at least one meeting at the end for both parent and child to talk about what they have learnt from the programme. Project workers also spoke of the inevitable issues around the commitment of young people from such an at risk group:

*The young people found it difficult to participate when there were lots of other issues going on for them at the same time, or if they were up for a court appearance they felt "what's the point." Although when we did catch up sessions with them, on a one-to-one, they engaged a lot better.*

All professionals were in agreement that to make these interventions work, both the parent and the young person needed to demonstrate commitment. In the project staff's opinion the project was seen to be most effective with families that made the investment to attend.

### **3.9 Overall Summary of the Study**

- 104 young people were included in the study sample, just over half were male and most were white. Just over half were aged between twelve and fourteen
- 61 young people completed 'Before' and 'After' questionnaires
- 21 out of the 104 young people (20%) 'dropped out' or did not complete the intervention
- 8 young people were interviewed individually
- 119 parents were included in the study sample, most were White mothers. Just over half of the parents included in the sample were single and not living with a partner. Nearly 3/4 of parents were over 35 years old, with almost half being between 35 and 44 years old. Just under half the parents described themselves as working full time or part-time, just under half were 'looking after family and home'
- 73 parents completed both 'Before' and 'After' questionnaires
- 10 parents took part in individual interviews – all were mothers
- 18 out of the 119 parents (15%) 'dropped out' or did not complete the intervention
- The vast majority of parents who completed the 'Before' questionnaires expected the programme to be helpful in addressing a range of issues including the young person's behaviour, emotional wellbeing and self-esteem, school attendance and attainment and family relationships

### 3.9.1 Experiences of young people who completed 'Before' and 'After' questionnaires:

- About ¾ of these young people expected and found the project to be very or fairly helpful
- Most of these young people were positive about aspects of the project finding it interesting, that staff knew what they were doing, understood and listened to young people – a few young people did not find these things
- Overall there was not much change for these young people at the end of the project - communication had slightly deteriorated, warmth from mother had slightly improved and conflict with mother had slightly reduced. The average numbers of these young people who had been involved in **offending, anti-social behaviour and truancy** had slightly reduced and the average numbers of times young people got in trouble in these ways had slightly reduced

### 3.9.2 Experiences of parents who completed 'Before' and 'After' questionnaires:

- Nearly all these parents expected the programme to be 'very' or 'fairly helpful' and found it 'very helpful' or 'fairly helpful'
- Most of these parents were positive about aspects of the project finding it interesting, that staff knew what they were doing, understood and listened to parents
- At the end of the intervention these parents reported significant improvements in communication with their child/young person, warmth towards their child young person, in their ability to supervise their child young person, in coping with their child young person. Conflict with their child/young person had improved somewhat.

## 3.10 Overall Conclusions

Overall, parents who completed the 'Before' and 'After' questionnaires appear to have experienced greater changes than the young people involved. Parents were remarkably positive about the project itself, the staff, and the benefits that the intervention had for their family and their parenting capabilities.

From the point of view of these young people who completed the 'Before' and 'After' questionnaires, there was overall a high level of positive expectation of, and satisfaction with, the project. The majority of young people were also positive about the intervention and about the staff they worked with. There were a few young people, however, who did not find the project interesting or helpful and did not rate the staff positively. Overall, young people seemed to experience fewer positive changes than parents and in some cases their behaviour deteriorated during the course of the intervention.

As stated above, the changes that did take place for these parents and young people cannot be said to be **as a result of** their involvement in the project, as there are other factors which may have influenced these changes. However, the project may well have contributed to them.

One issue that emerged from the qualitative depth interviews with parents and young people was that some families were facing long term multiple issues – including school refusal, anti social and offending behaviour and difficult relationships with siblings and parents. It could be argued that the IYPP Project may be more intensive than the interventions received by many young people who come to the attention of YOTs or Social Services, but it was not designed to offer a comprehensive package of interventions to tackle all of these major issues. It is likely that the benefits of the interventions could be enhanced if they were seen as part of a wider and longer term programme to support the considerable changes which many of these families are seeking.

Like many other parenting initiatives, the IYPP Project was much more successful in engaging mothers than fathers. Because of the low numbers of fathers who did attend the data do not allow

us to analyse the significance of this on outcomes, but where both parents are involved with the young people, more effort should be made to involve both of them in the intervention<sup>9</sup>.

Finally, the study showed that the involvement of young people clearly presented numerous challenges to project staff around confidentiality, training and accommodating the sometimes-conflicting wishes of parents and young people. On the other hand this project looks as if it provided an opportunity for parents and young people to work together on the difficult issues confronting their families, and for a large number of young people and their parents, this seems to have been a worthwhile and valuable experience.

### 3.11 Next Steps

- Projects piloting or developing new initiatives need a lengthy project development phase built in to ensure issues such as recruitment and the flow of referrals can be addressed
- A larger scale project working with many more families, as well as the inclusion in the project design of comparison or control groups, would enable robust conclusions to be drawn about the benefits, or not, of directly linking work with young people and parents, rather than working separately with just parents and/or just young people
- Additionally, this larger study could also include the interventions piloted in this initiative being tested in a number of different locations with a large enough throughput so that each of the interventions can be separately evaluated and compared to each other. This would mean that the effects of the different interventions could be analysed to see whether there are particular benefits of different types of interventions
- A future study could also explore whether these interventions provided as part of a more intensive package to address multiple issues would be beneficial to families
- A longer term project would allow for the systematic follow up of families to study longer term outcomes
- Projects offering interventions that work separately but in parallel with parents and young people should explore the benefits, or otherwise, of holding some joint sessions as part of the programme
- Conversely, projects involving young people and parents in groups together should explore the benefits of providing separate individual time for parents and for young people

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<sup>9</sup> see Ghate, D., Shaw, C., and Hazel, N., (2000) *Fathers and Family Centres Engaging Fathers in Preventive Services*. Joseph Rowntree Foundation: York.; and also O'Brien, M. (2004) *Fathers and Family Support Promoting Involvement and Evaluating Impact*. NPFI: London.

### **3. 12 The IYPP Consultation Day**

TSA arranged a meeting in October 2004 with workers and family members from the delivery sites. At this meeting the participants were asked to reflect upon their experiences and to offer some advice for anyone following in their footsteps and attending or running a similar project. Three parents and three young people attended from the Centre for Fun and Families, one parent from East Berkshire YOTs and one parent and one young person attended from Kinara Family Resource Centre. Staff from each of the project sites also attended. Below are some of their comments made during a feedback exercise when each participant was asked to write their advice for others on post it notes. These were then displayed for the other participants to read.

#### **Delivery Site Staff Advice**

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##### **Advice for anyone considering delivering similar interventions:**

*Have a follow up strategy to do development work with both young people and parents together.*

*Have a good administration system set up beforehand,  
especially when working with a multi-disciplinary team.*

*Have multidisciplinary strategies for supporting young people outside of the programme  
- to do follow up.*

*Start off with clear aims and objectives that all those involved in the project agree to.*

*Be realistic with families.*

*Don't underestimate the time admin takes. Ensure adequate admin support.*

*Prepare resources to refer parents/young people onto after project finishes  
e.g. support groups, counselling, advise groups etc.*

##### **Advice for young people:**

*You can make your parent/carer aware of how you feel, stating what you want through your  
worker, without the possibility of an argument.*

*It can be helpful to hear what others have to say. If you don't like talking you can do more listening  
– there should be no pressure on you to talk.*

*Give it a go, what can you lose?*

*It may help to change some of the things you feel angry about.*

##### **Advice for parents:**

*Commit yourself to the programme and see it through.*

*Your contribution could be helpful for others.*

*Ensure you ask for what support you really want, rather than only what you think can be offered.*

*It is often difficult to talk about things with others that are regarded as private. If you can overcome  
the fear of being judged as a bad parent the rewards can be great.*

*This is a good opportunity to more clearly gauge your young person's level of understanding,  
giving you a chance to meet the problems exactly where they present them.*

*Be open minded, treat this project as a 'new' concept.  
Just because other interventions may have failed, give this a chance.*

*Listen to others / share experiences.*

**Advice for families:**

*An opportunity to enjoy time together.*

**Young People's Advice**

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**Advice for other young people:**

*My advice would be, even if you feel it is not helping and is pointless, keep going to every session because it probably is working even if you cant just see it.*

*If my mum didn't go to the Living with Teenagers group,  
I wouldn't have gone to the Grounded group because I wouldn't have thought it was fair.*

*Make the sessions fun by having a laugh with the other young people and the staff, and always join in the activities.*

*Just try it out. It helped me.*

**Advice for parents:**

*Listen to your child and try to understand them.*

*Support the young people.*

*Try and help your child with his/her problems.*

**Advice for parents and young people:**

*Try and understand each others opinion.*

*Be confident*

*Have fun.*

*Talk about your differences.*

**Advice for project staff:**

*I would suggest that the workers should do groups with just the same age group.*

**Parents Advice**

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**Advice for other parents:**

*Go on the course, it will change your attitude.*

*Keep the parallel groups running as they helped our relationship so much.*

*Listen to your child more.*

*Don't be afraid to go on a group.*

*You get a lot of good advice from other parents.*

*Try and stay calm, even when your feeling upset.*

*Show that you love them.*

**Advice for young people:**

*Communicate with each other.*

*You might learn something, you might be surprised. You might like it.*

*Give it a go. You'll enjoy it.*

**Advice for project staff:**

*Offer extra support for parents who need it.*

*Allow more time for groups.*

**Advice for agencies:**

*Get more groups going – parents need support and help to understand youngsters.*



## **SECTION 4**

## **LESSONS LEARNED FROM PRACTICE**

One of the objectives from the original IYPP project implementation plan was to develop learning from practice to share with others, who may be interested in involving young people in parenting programmes. TSA facilitated IYPP project multi-site meetings, which were attended by staff from all five delivery sites. The IYPP project Co-ordinator facilitated some of the meetings and some had external facilitators. The nature of the meetings varied according to the issue addressed and took the form of discussion groups, workshops or training events.

At the first multi-site meeting of all the five sites, staff identified themes in their work that were common to all the models, despite the fact that the models were very different.

As well as exploring common themes, the staff from the project delivery sites shared their knowledge and experience on a number of issues that emerged in their practice during the delivery phase.

The following section focuses upon the learning shared by the IYPP Project site staff. A series of workshops were held on the following themes:

- Session 1 Working with Diversity
- Session 2 Engaging with Families
- Session 3 Consulting with Parents and Young People
- Session 4 Confidentiality
- Session 5 Working with Young People who have Suffered Abuse/Neglect
- Session 6 Promoting Resilience in Young People
- Session 7 Staff Supervision
- Session 8 Common Practice Issues

The content which follows relates to each of these sessions and is drawn from the contributions of the participants. It follows the format of each session and includes material presented at the sessions as well as the ideas, views and experiences of the staff from each site participating in the IYPP project. Some of the material is written up as 'notes' from the session.

## SESSION 1 - WORKING WITH DIVERSITY

The five project delivery sites explored together how they worked with families in relation to their diverse needs. All of the delivery sites had a diversity statement and these formed the basis for a discussion session, the content of which follows.

A concern for the effective practitioner is: 'does the rhetoric match practice?' The site staff considered how they, as professionals, could ensure that diversity statements are made live, forming an essential part of their work and underpinning all practice. The discussion focussed upon the worker's approach or attitude and the actions that we take as professionals.

**Approach/Attitude** – participants felt that the most fundamental aspect of this issue is that workers must acknowledge and examine their own beliefs and values. One of the issues discussed was the use of lists in diversity statements, such as 'equal opportunities for all regardless of gender, race, culture, religion... etc'. Workers often carry this list around in their heads, but how do you make these types of equal opportunities statements real? Participants discussed how crucial it is to consult with and involve parents (mothers and fathers) and young people at all stages of the services that are offered to families so that we base our services and how we deliver them on what they can tell us about what works for them. Family members input and feedback should be acknowledged and used to inform present and future work with families. In discussions with families, workers need to be careful of the language used, avoiding jargon. Finally, it was felt to be important that the mix of staff should mirror that of the client group wherever possible.

**Actions/Activities** – This referred to the actions or activities that workers take part in as professionals. Workers should address the issue of diversity in supervision and/or consultation and when planning and debriefing sessions. Organisations need a menu of services/programmes to address individual needs of families as a whole, parents and young people. It is important to ensure that the materials used take into account the issue of diversity, such as being jargon free, in different languages including sign language and Braille and the use of positive images of people of different ethnicities and cultures as well as men and women. Procedures need to be in place for the use of interpreters and signers where necessary. When working with families, there are practical issues to consider, such as the types of venues used, what food is provided and how transport and childcare are arranged to take into account different families' needs.

The Key Indicator of Quality in the YJB's Key Elements of Practice (KEEP) for Parenting pertaining to individual needs (opposite) highlights the importance of working with diversity.

Details of the Parenting and other KEEPs can be Found on the Youth Justice Board's Website [www.youth-justice-board.gov.uk](http://www.youth-justice-board.gov.uk)

**Programme material** should be relevant to each **individual's background, culture, ethnicity, literacy levels, family structure and gender**

### Developing Cultural Competence

Cultural competence was a key area of diversity identified by site staff. Clearly, staff need to develop cultural competence when working with parents and when working with young people. The difference here for the IYPP site staff is that they were working with more than one family member and therefore needed to take a whole family approach. Site staff realised that being culturally competent is essential to engage with, and provide effective services to families. This means that, as professionals, we need to find out the unique culture of each family worked with, including those traditionally termed as 'difficult to reach' or 'difficult to engage'.

The following quote was used as a starting point to discussions about being a culturally competent practitioner:

*As helping professionals, we are frequently asked to assist families. Often because we do not learn the unique culture of a family, our interventions effectively ignore how this family operates. We then are sometimes puzzled why the family does not respond to services or why their “buy-in” or co-operation is low. Culture is about differences ... legitimate, important differences ... If we are to be family culture competent, we need to find out how a family operates.*  
(VanDenBerg and Grealish 1999)

Often professionals focus on the fact that families are ‘resistant’ to services/interventions, but should there be a shift of emphasis? Professionals need to ask themselves, ‘What else can we do to engage these families?’. This can be a difficult thing to do because it shifts the emphasis from the service user to the service deliverer and asks ‘How can we get it right for families?’.

The site staff discussed what helps them to get to know the unique culture of a family and focussed upon those aspects that are within the control of the worker. They then discussed the qualities of professionals, who are culturally competent. To assist staff to assess their cultural competence, the workshop members adapted a framework originally devised by the Institute of Educational Leadership in one of its ‘Toolkits for Systems Improvements’ (1999). The box below contains the adapted checklist for the qualities of culturally competent practitioners:

**Culturally competent practitioners:**

- Seek to learn as much as possible about the family’s culture and be open and honest with families. Ask families about any cultural issues that may impact upon the way they work
- Find out about and observe religious/cultural holidays or times of worship
- Understand and acknowledge the impact of your own cultural background on your responses and actions
- Find out about community and neighbourhood involvement, including community leaders
- Work in the sphere of each family’s configuration, including grandparents, other relatives and friends
- Acknowledge, accept and, whenever possible, incorporate the role of the family’s natural helpers from the individual’s culture
- Endeavour to understand the diverse expectations individuals may have about the manner in which services are offered eg eating together may be an important element of services provided in the home, a social exchange may be necessary before each contact or discussions in a family may need to be agreed through an elder
- Understand that tangible services may be needed and expected as part of the service eg obtaining clothing, help with housing or transportation or helping with a young person’s educational problems
- Work with community and other agencies to help ensure that expected resources and/or services are made available
- Work within traditions relating to gender and age that may be important in particular cultures eg such as consulting first with elders
- When it is felt necessary to challenge aspects of a family’s life, do so with respect to their culture and clear explanations, especially where legislation is concerned eg rights of the child within law, child protection procedures etc
- Find out how different cultures demonstrate respect

*Adapted from ‘Toolkits for Systems Improvements’ (1999) Institute of Educational Leadership.*

## SESSION 2 - ENGAGING WITH FAMILIES

Fundamental to this process of engaging parents and young people is the fact that when professionals work with families there is an imbalance of power in the relationship. There are a number of ways in which professionals can work to address this imbalance:

**Worker's approach to the family** – Workers need to ensure that a strengths based approach is used, which means acknowledging the parents as experts regarding their own children. In discussions with the family, it is important to accentuate the positives of both the parent/s and young people. As part of this process it is also important to acknowledge the parent/s' feelings about the need for interventions, either voluntary or statutory. As the IYPP Project involved young people, it was also important to acknowledge their feelings regarding the need for parenting interventions.

**Necessary skills** – The most important skills are good everyday social skills, which are needed to utilise fully in the process of getting to know a family. The most important of these skills is listening skills, but also important are advocacy, negotiation, flexibility and the ability to build up a relationship of trust with all family members. This means that workers need to meet with the family as a whole and with individual members of the family.

**Strategies to break down barriers** – There are many things that can be done to break down initial barriers and help to build up a relationship with families. Workers need to fully involve the family from the start. When working with a family it is important to be very clear about the worker's role, responsibilities and expectations with all family members involved and the roles and responsibilities of family members. The intervention needs to fit in with the family's routines.

**Home Visits** – It was felt by the site staff that home visits are an essential element in getting to know a family. It is also useful to send a letter and/or information leaflets about your service so that the family have some clear information before you visit, but obviously this will only be useful if you have already ascertained the best way in which to communicate with the family e.g. language/literacy needs. When visiting clients' homes, workers should be conscious that presentation is important including dress code. It may be helpful to be accompanied by a parent or young person who has already used and benefited from your service if this has been discussed and agreed with the family beforehand. A video or leaflet with quotes from other parents and young people can also be useful. As a visitor, workers should be aware of issues such as seating arrangements and ask the family members where they would prefer to sit. It is important also to give family members an option to meet elsewhere. This was found to be particularly important to young people in one of the sites.

Traditionally, the site staff had engaged with either the parent/carers **or** the young person. The challenge for, and fundamental aim of the IYPP project was to engage both the parent/carer and the young person at the same time. The site staff had identified this as an important issue to discuss, as their work with families was dependant upon the successful engagement of the family as a whole. Fundamentally, the issues were the same as engaging with **either** parent(s) **or** young people, but site staff felt that they had to be aware of the differences when engaging both at the same time.

Staff from the Barnsley 'Altogether Now, Supporting Parents in Barnsley Project' facilitated a workshop during which they described their experiences of engaging with whole families. Effective engagement strategies for their project were divided into 3 stages – prior to provision, initial stages of provision and maintaining engagement once families are attending the provision.

The definitions of the stages of engagement were:

**Phase 1** – Underpinning factors of effective engagement (stuff that needs to happen BEFORE families come to the provision)

**Phase 2** – What is involved in the initial stages of engaging families (from referral and up to but not including the first session of provision)

**Phase 3** - Keeping families engaged – (in the provision and till termination)

The strategies to employ at each of the stages of engagement can be seen in the diagram overleaf.

**All Phases** - There are some issues that cut across all three phases and these issues need to be considered carefully at all stages of engaging and working with families. They are as follows:

- Confidentiality
- Information giving
- Interpersonal skills
- Modelling
- Holistic Approach
- Initial engagement skills
- Consultation
- Evaluation

The discussion during this session highlighted some specific points to consider for engaging with families:

Often young people are more engaged with a family group process if their other needs are being addressed. For example, a young person with school attendance problems can be more motivated just by their Education Welfare Officer asking them how it's going and giving them encouragement.

Workers often focus on our engagement skills at the beginning of the process, but those skills are important throughout the process and should be used at all times. Workers should not let them take a back seat once someone has agreed to join you. This was seen as very important to keep the whole family engaged.

It is also important that workers do not underestimate the power of modelling at all stages. If facilitators are positive and enthusiastic attitudes parents and young people can pick up on this.

Staff need to use interpersonal skills at all stages and with everyone involved – other professionals, referrers and families.

Supervision is a vital component in this process as it allows time to reflect and improve practice. Group or peer supervision is useful in allowing workers to share ideas and problem-solve any issues that emerge.

Gaining young people's and parent's confidence in your approach to confidentiality is crucially important. This seemed to emerge particularly as an issue where the work was structured in parallel – how could young people be confident that what they shared with the worker in their group or individual sessions was not passed on when the worker, or a colleague, also worked with their parent/s and vice versa. Staff from the sites where they had separate sessions with parents and young people therefore had to work hard to be clear about confidentiality and to gain the trust of each family member. Clearly, one way of doing this is to establish with each person agreements that are created early on and referred back to, such as no information shared outside joint sessions, or information shared only on specific agreement etc. Any confidentiality agreement will obviously need to include clarity about the exception in relation to child protection concerns when the welfare of the child, or young person, is paramount. This is discussed further in Session 4.

The diagram overleaf includes a range of tips that came from this session.

## TIPS FOR ENGAGING FAMILIES IN ALL THREE PHASES:

### PHASE THREE

#### **Keeping Families Engaged**

Be sensitive to parents and young peoples' needs, provide ongoing support throughout the programme, allocate personal worker who relates to each individual group member, establish values, engage peer support, incentives, humour, genuine ground rules, collaborative working, language, expectations, keep them fresh and stimulated, resolve logistical and practical issues such as transport and childcare, good refreshments, good relationship between facilitators, highlight positives and strengths, celebrate success, give families choices – to have power, learn from your mistakes and try to learn from families who disengage, model positive communication.

### PHASE TWO

#### **Initial Stages of Engaging Families**

Make contact by telephone/letter, provide user-friendly leaflets, home visits, explain services clearly, use video testimony/video clip of provision to show at home visits, address possible feelings of stigma, meet with young person and parents separately and together, strengths based and non-blaming approach, home visit with referrer, learn from referrer about the family for eg appropriate language, family culture, think about allocation who's most appropriate – pre existing positive relationships, home visit with young person or parent who has completed provision, use parent mentors, develop inter-agency network and good communication and referral systems, pay attention to and be clear about confidentiality, lots of listening to, and learning about the family.

### PHASE ONE

#### **Underpinning Effective Engagement**

Advertise and market services, educate referrers, provide information, publicity leaflets, run workshops, hold open meetings, coffee mornings, network meetings to share good practice, stalls or displays at local events, provide services for particular groups eg. Minority ethnic groups, fathers, ensure management support, develop partnerships and a multi agency strategy, use the steering group to problem solve and develop, use supervision both group and personal, take time to plan, involve young people and parents who have been through the process in a range of ways, use learning from evaluation and consultation to inform the service.

## SESSION 3 INVOLVING/CONSULTING WITH PARENTS AND YOUNG PEOPLE

This theme was raised as part of the discussions in the multi-site project meetings on working with diversity and engagement. The session to address this issue took the form of a workshop to explore and share project workers' experiences.

One of the main concerns of site staff was that consultation and/or involving both parents and young people can be tokenistic if not addressed adequately. The box below shows some tips provided by site staff.

### Tips for consulting/involving families

**Parents** – Parents who have completed an intervention can be engaged as mentors for new service users. This is particularly useful at the initial stages of engagement with prospective families and to maintain engagement during the intervention (especially during holiday periods) and to relieve any specific anxieties of families. Other examples are parents acting as co-facilitators in awareness raising and training of other professionals and as a resource for parents' support groups established after the programme has ended.

**Young People** – Similarly, young people, who have completed a programme, accompanied staff to initial visits to families to help with the initial engagement process with the family's agreement in advance. One project site involved young people on the interview panel for the posts available for the IYPP Project.

**Focus Groups** – Both parents and young people can be invited to take part in focus groups – separately and together. Focus groups can be used to help to plan services and to review and evaluate services for families. For example, by helping to design evaluation questionnaires by highlighting what were the important elements of the process and programme for them.

**Promotion** – Both parents and young people can be the best advertisement for services for families. They can take part in meetings, project launches, conferences and local events. Alternatively, both parents and young people can help to design and devise promotional products such as leaflets and videos.

When planning to involve or consult with parents, young people or both, there are some issues to consider:

- Be sensitive about where and how you involve parents and young people to ensure it is an affirming experience for them
- Don't overuse willing participants
- Use incentives as a way of rewarding the use of their time and their experience
- Ensure the language you use is not full of jargon and is readily understandable
- Let parents and young people know what will be done with what has been learned from them
- Show how you have put into practice what you have learnt
- Acknowledge when any changes you make have come from your learning from families

## SESSION 4 - CONFIDENTIALITY

Clearly, confidentiality is an important issue when working with either parents or young people. For the IYPP project, however, it was even more important because of the complexities of working with both parents and young people at the same time. This issue arises whether there are different or the same workers with the parent(s) and young person. The breach of confidentiality became a fear for some parents at one site, as staff were working with both the parents and the young people in parallel. Parents were concerned that their young people could share personal information with other young people on their group, which would then reach other parents. Young people also seemed to be less open to sharing personal information if they thought that site staff were working with their parents too. Sometimes parents wanted to know what their young people were saying, if the work was done in parallel. At times site staff struggled with ethics of confidentiality, as they were party to information that they felt may have been useful to share, in order to promote better understanding between parents and young people.

This issue was the focus of a workshop at an IYPP project meeting, where site staff discussed and shared ideas.

**General issues** – Service providers should have protocols and procedures regarding confidentiality and should make sure that all staff, including new staff, are aware of them. Protocols need to be very clear regarding child protection procedures, which should be identified as a non-negotiable area when establishing agreement about confidentiality at the beginning of work with families. It is a good idea to have a generic project confidentiality statement and to share it with all family members taking part in the intervention. This can lead on to a discussion about how each family and individual family members want to operate. Information sharing protocols should be in place and family members made aware of them. If the confidentiality issues are addressed at the beginning of interventions, it makes it easier for workers to address whether and how information can be shared later in the intervention, if they feel it will be useful to promote a better understanding between the parent/s and young person.

**Working with parents and young people together** – It is important to address confidentiality when you begin to work with family members together and when working with a number of families. In the first joint session ground rules need to be agreed by all parties. It is useful to have some practical examples to illustrate points that need to be made, ensuring a clear understanding by all.

**Working with parents and young people in parallel** – Some of the issues here have been addressed above. However, the lessons learned from the IYPP project have shown that workers do need to be very clear about confidentiality when working in parallel and separate sessions with parents and young people as their concerns about confidentiality can be greater than if they were the only family member working with the project. Experience from the IYPP project suggests that workers should address confidentiality separately with each family member as well as together. For example, by addressing confidentiality clearly in a session with parents before the work with the young person started, it seemed to deal with the issue of parents expecting to be able to hear from workers what young people had been saying in their sessions.



## **SESSION 5 - WORKING WITH YOUNG PEOPLE WHO HAVE SUFFERED ABUSE AND/OR NEGLECT**

As the IYPP project progressed it became apparent that a number of the families referred to the delivery sites had past experience of either abuse, or neglect, or both. The site staff felt that these issues cropped up frequently enough to request additional training input. They were concerned that they were enabled to effectively address the legacy of families' past experiences. Having some training in these areas would enable them to address the issues with more confidence with both parents and young people, whether working with parents and young people together, or in parallel. It was acknowledged that, even when working with parents and young people together, there is a need for some separate work to take place with the young person to address these issues.

A workshop was held to provide training input and to enable site staff to explore the issues. The definitions of abuse and harm are enshrined in legislation, such as the Children Act 1989, which defines harm in Section 31 (9) for example and site staff should follow their local Child Protection Procedures if there are any current and/or outstanding concerns. The focus of this workshop however, was to consider how past experiences of abuse and/or neglect could impact upon the young people with whom we work. Perry (1999) states that:

*Traumatic experiences can have a devastating impact on the child, altering their physical, emotional, cognitive and social development. In turn, the impact on the child has profound implications for their family, community and, ultimately, us all.*

In the training and workshop, site staff looked at ways in which to work with such young people and used as a basis for the following list of principles adapted from one generated by Perry (2001)

### **Principles of Working with Traumatized Children and Young People**

- ❖ Do not be afraid to talk about the traumatic event
- ❖ Provide a consistent, predictable pattern for the day
- ❖ Be nurturing, comforting and affectionate (appropriately)
- ❖ Discuss your expectations for behaviour and consequences
- ❖ Create opportunities to talk
- ❖ Watch closely for triggers/signs of distress/re-enactment
- ❖ Protect child/young person
- ❖ Give choice and sense of control wherever possible
- ❖ Ask for help

**Adapted from Bruce Perry (2001) [www.childtrauma.org](http://www.childtrauma.org)**

It is important that any intervention should be planned to suit the individual young person or family and that there are some important principles to be aware of, which fall into a number of categories, as outlined below. It is also important that issues of safety and confidentiality are addressed immediately, if these issues emerge in any session. Group facilitators should plan strategies for dealing with this in advance of any group work. This is because the impact on and the needs of other group members will need to be responded to, as well as the individual who has disclosed.

**Workers' issues** – It is important for workers to be aware of and acknowledge their own feelings about abuse and neglect, as these are emotive issues. Workers should address their own feelings in supervision and seek support if necessary. When working with these issues, it is important to have a joint or common approach with other services/professionals, who may be working with the young person or family. Before embarking upon work in this area, workers need to ensure that they are aware of any legal issues (including the outcomes of any child protection procedures) and the possible impact that they may have on discussions with the young person or family.

**Information gathering** – When a young person and/or family are referred and there is an indication of abuse or neglect, a sensitive information gathering process is needed. This will establish if there are current and/or outstanding child protection concerns, in which case the relevant procedures must be swiftly followed. When a disclosure is clearly about historical events workers have the opportunity to contribute to recovery. They will need to know what young people want from workers and the key steps for recovery.

**Relationship with the young person** – When working with a young person who has suffered abuse or neglect, it is important to create an informal and relaxed environment. The most important aspects of developing the relationship is that workers create an open door (opportunities) for the young person to discuss the event (but never push the young person) and that the work needs to move at the young person's own pace. Young people appreciate workers who:

- Are honest
- Give straight forward answers to questions that are raised
- Discuss rather than talk at
- Provide clarity
- Give explanations that are easily understandable
- Provide opportunities to participate
- Engage them in a range of ways – not just talk about problems
- Help them to feel they are a priority

Workers can show that they are trying to understand and support the young person by making a statement of empathy. One strategy to use is to convey to the young person that you are a non-abusing adult and intend to be an effective protector (see box below). It can be helpful to think about long term healing as a series of smaller steps and to plan and look for small changes:

- I know what has happened to you
- I am sorry that it has happened to you
- It should not have happened to you. The abuser was wrong
- You were right to tell
- If you want to talk about it, I am here to listen
- I understand if you don't want to talk. Many young people find it hard to talk about, but you may want to talk at a later time. I am still here to listen

**Working with the family** – Make sure that everyone understands the issues of confidentiality. If working with the family, it is important to acknowledge the impact of abuse and neglect on the rest of the family at an appropriate opportunity and identify how best to support each family member.

### **Characteristics of an Effective Protector**

A protecting adult:

- ❖ Believes a child/young person has been abused
- ❖ Understands who has been responsible for the abuse
- ❖ Can talk to the child/young person about the abuse and indicate they can manage the discussion
- ❖ Can empathise with the child/young person, including positive feelings for the abuser or feelings of loss
- ❖ Can receive and give feedback to the child/young person about what is right/wrong and appropriate/inappropriate
- ❖ Takes responsibility for their behaviour towards the child/young person

**From Gerrilyn Smith 1993**

## SESSION 6 - PROMOTING RESILIENCE IN YOUNG PEOPLE

Project staff were keen to explore how to promote resilience as they have an opportunity to do this in their work directly with young people and through their work with parents. A workshop with training input was held to explore this issue.

Gilligan (2001) describes resilience as follows:

*Resilience refers to the qualities which cushion a vulnerable child from the worst effects of adversity ...which can help a child or young person cope with, survive and even thrive in the face of great hurt and disadvantage.*

The workshop explored how professionals can promote resilience in young people within their work with young people, parents and families. The site staff felt that this should be addressed at all stages of the intervention, from initial assessment to case closure summaries. It is important to start in a small way to avoid being overwhelmed by a young person's past experience, but that staff should 'keep at it' because they can never know when they will help to make a difference for a young person, parent or family.

### **Tips for Practice:**

**Workers' issues** – It is important for workers to consider and develop their own resilience. If necessary, seek support in supervision or from colleagues. Workers should prioritise or give prominence to the idea of resilience within their places of work. In order to do so, workers should be creative.

**Assessment** – Include resilience factors in any assessments of young people and parents. They can be powerful protective factors for young people. See Appendix 1 for an assessment chart, which has been adapted from a Department of Health Framework of Assessment for 'Children in Need' and domains identified by Daniel and Wassel (2002). When closing a case, include a summary statement regarding the level of resilience of the young person, parent or family.

**Checklists** – Create/use checklists - see below for an example of a checklist for resilience. The experience of site staff for the Parallel Group Programme in the IYPP project was that parents working in a group in parallel to their young people's group found these checklists really helpful in supporting their development of resilience in their sons and daughters.

**Other strategies** – Give young people and parents constant 'drip, drip' aids to resilience, such as praise. Remember that praise can start in a very small way – recognise the little things, be sincere and constantly look for improvements. Finally, create opportunities to laugh with your client group.

### **Checklist to Indicate Resilience**

1. The young person has someone who loves him/her totally (unconditionally).
2. The young person has an older person outside the home she/he can tell about problems and feelings.
3. The young person is praised for doing things on his/her own.
4. The young person can count on her/his family being there when needed.
5. The young person knows someone he/she wants to be like.
6. The young person believes things will turn out all right.
7. The young person does endearing things that make people like her/him
8. The young person believes in power greater than seen.
9. The young person is willing to try new things.
10. The young person likes to achieve in what he/she does.
11. The young person feels that what she/he does makes a difference in how things come out.
12. The young person likes himself/herself.
13. The young person can focus on a task and stay within it.
14. The young person has a sense of humour.
15. The young person makes plans to do things.

**Grotberg E (1999a) The International Resilience Project**

See also Countering Depression With the Five Building Blocks of Resilience Edith H. Grotberg  
<http://resilnet.uiuc.edu/library/grotb99.html>

## SESSION 7 - SUPERVISION

The supervision of site staff in the IYPP project was felt to be a very important issue because:

- This was an innovative project involving complex models
- Staff co-worked in most of the sites
- Working with more than one family member raised a number of issues

A workshop was held to explore the key components of supervision for work with families. Supervision has been recognised as an important part of service delivery in social care for some time. The origins can be traced back to the use of volunteers in charitable organisations in the nineteenth century (see Peters 1967). There are differing definitions of supervision in a number of professions. A general definition of supervision is suggested by Tony Morrison (2001) as:

*A process by which one worker is given responsibility by the organisation to work with another worker(s) in order to meet certain organisational, professional and personal objectives.*

However, there is a range of types of supervision:

- In house
- From an external agency
- One to one
- In a group
- From a line manager
- Non managerial
- Clinical

See Appendix 3 for advantages and disadvantages of different types of supervision.

Supervision Contracts or Agreements should be devised to provide structure to supervision sessions. The contract/agreement can aid the supervision process. According to the Social Care Institute for Excellence (SCIE) (2003):

*Contracts set out what either party can expect from supervision and gives the agency an opportunity to audit and monitor supervision performance. They can also encourage innovative and thoughtful work.*

A Supervision Contract/Agreement, should identify:

- Frequency of supervision sessions
- Approximate length of sessions
- Location of sessions
- Main areas for discussion/agenda items
- Confidentiality issues
- Agreement re notes and when they will be produced
- How personal issues will be addressed
- What type of approach will be taken re supervision? e.g. 2 way process/group/peer/line and non line management supervision
- Any other points included by agreement
- Procedure for complaints/reconciling differences

Social Care Institute for Excellence aims to improve the experiences of people who use social care by promoting knowledge and good practice in the sector. SCIE develops resources, the aim of which is to support those working in social care and empower service users. Their guidance on supervision contracts provide a useful framework for Supervision Contracts/Agreements and can be found at [www.scie.org.uk](http://www.scie.org.uk)

The box below represents a model of supervision for work with families.

### Supervision Model

Site staff agreed that the following elements of supervision should be in place:

1. **Line management** – agency driven and dealing with accountability etc
2. **Clinical/reflective supervision** – could be done within line management or as a separate process and with a different person
3. **Additionally** (and depending upon the intervention model) one or more of the following supervision methods should be available:
  - a) **Consultancy** – for groups, beginning, middle and end of each group, for individual work or workers at an agreed frequency. One of the project sites delivering groups, had consultation sessions at beginning, middle and end points of the group process.
  - b) **Planning and debriefing sessions** – as co-facilitators of a group or as separate workers working with the same family, as in individual parallel work
  - c) **Peer supervision/practice forum** – Can be within own agency/service or across agencies

## SESSION 8 - COMMON PRACTICE ISSUES

As the IYPP project progressed site staff noticed that they seemed to experience the same or similar practice issues, regardless of the model of intervention. One of the multi-site project meetings, therefore, was used as a practice forum for staff to share issues and explore solutions together. The following five practice issues were addressed:

### 1. How to respond to parents who ask: 'What should I do in this situation?'

It was acknowledged in the discussion that some parents might see it as the workers' role to solve their problems for them. It was felt that this issue can feel easier to deal with in a group situation, as the facilitator can instantly turn to the group and draw upon the combined experience of both facilitators and group members to provide a range of problem-solving examples and to encourage the parent to think about what fits them and their situation best. In both individual and group work there are a number of other strategies that can be employed:

**Expectations** – It is important for workers to be clear about their role and expectations at the beginning of any intervention, as well as discussing parents' expectations. As part of these initial discussions, parents need to be reassured that there are often no right or wrong answers to a number of questions, but that together the parent and worker can problem solve issues. Workers need to help the parent(s) understand that the intervention will include looking at options together and discussing a variety of ways to handle a number of scenarios so that they can develop a greater range of strategies to address different issues.

**Ownership** – It is important when working with the parents to allow them to acknowledge their ownership of the issues raised within their family. In order to this, it is a good idea to begin with the focus on the positives for the parent(s). Workers need to look for these positives (strengths) and build upon them. As parents are experts with regard to their own young people, workers should encourage parents to use their expert knowledge to help them. If parents have resolved another issue, refer back to this and help them to transfer the skills they used then to the new situation. This can also help to build their confidence.

**Programmes** – Workers should ensure that the programme has a number of tools within it, including analytical tools, such as problem solving, reframing and using 'I Statements', that can enable parents to feel more confident in dealing with a range of situations. By practising these skills in different situations they can then build up their own 'toolkit' of skills and strategies that work for them.

**Relationship with the parent(s)** – Take time to build up a relationship with the parent(s), which will help with this issue. Once a trusting relationship exists entrenched ideas and negative thoughts can be challenged in a non-threatening way. As good relationships are built on honesty, then workers should be honest that they don't have the one answer that would solve things. Instead the worker can suggest that they and the parent can work on an issue together, by discussing options and then supporting the parent whilst they test out the options. It is sometimes a good idea to take time out to think about an issue that arises. If this is the case and the issue is not an urgent one, then let the parent know this and return to the issue later in the session or in a later session.



## 2. How can I be sure that I am getting things right when I am working with a parent one to one?

When working with parents in a group, part of the process is the joint discussion with your co-facilitator regarding the group process, individual parents and issues arising. When working individually you are not able to reflect with a colleague who was in the session. It can be a difficult situation, especially for a less experienced practitioner. Ideas from site staff included:

**Supervision** – Workers should play an active role in supervision and take any practice issues to your supervisor. If there is a peer supervision group or practice forum in your area, then join it. Discuss the case with colleagues and use techniques such as role play.

**Assessment and Planning** – In the initial stages of an intervention, it is vital to ensure that an intervention plan is based on a thorough assessment of the risk and protective factors within the family. The intervention plan should be developed with and agreed by the parent(s) and regularly reviewed – this can help to ensure that you're making progress and covering useful ground.

**Relationship with the parent(s)** – Working in partnership with parents will help to establish a relationship where you can check out with them how useful they find particular exercises or sessions and the material you are using. Be sure to ask for feedback from parent(s) at regular intervals.

**Parenting programmes** – If workers are using a parenting programme then they should make sure that they are thoroughly familiar with it. The use of a structured programme, containing all the elements that the worker and the parents agreed need addressing, can be reassuring. A programme can be a commercially bought or developed in-house.

## 3. When couples are referred for parenting intervention, should they attend together or separately, especially in groups?

There is clearly no right answer here as it will depend on each family's circumstances as there can be positive and negative aspects to both situations. It is fundamental that this issue is discussed **prior** to any intervention taking place and that decisions are based upon information gathered at the assessment stage. It will be important to consider during the assessment process with the couple and individually how they operate together, for example, is there a high level of conflict between them, will they both get the opportunity to contribute if they are in the same group, or will one tend to be the 'spokesperson'. Ultimately the decision will rest on whether it will be more beneficial for their family if they work together or separately and on practical considerations such as whether they can both be available at the same time. In some circumstances it may be appropriate to work individually, or in separate groups before coming together either in a group or in joint or family sessions.

Site staff felt that a significant aspect of the inclusion of couples as well as single parents in a parenting group is that it can lead to 'secretive sub groups' or a couple dominating a group, but that this can be avoided. The following points will help to avoid this situation arising:

**Assessment** – Make sure that a thorough assessment is completed prior to the group (or other intervention) starting and use the information gathered in the group selection process. If there are any uncertainties, then have some individual sessions first before recommending that parents attend a group.

**Expectations** – Workers need to be clear about their expectations for the way people behave in the group and address this at pre-group meetings and in the first session. This should include a discussion regarding confidentiality and ground rules and the issues should be revisited regularly.

**Session Planning** – Plan the sessions carefully and make sure that there is a variety of activities in each session, with group members working individually, in pairs, in small groups and as part of whole group discussions. This will allow workers to split couples up for part of the time. It is possible to use some activities to explore stereotyping with the group. Plan facilitator roles carefully, as well as the programme. Debrief each session and use lessons learned to help plan the next session.

**Make changes** – Workers should acknowledge when something needs to change later on, as it is not possible to find everything out at the assessment stage and they may not have been aware of behaviours or factors that later emerge.

**Single parents** – It may be helpful to encourage single parents to bring someone else with them to the group – a friend or family member.

NB Although we did not cover domestic violence in this session, it is clearly vital that the question of domestic violence is addressed when working with couples. For more information on this see the following resources:

<http://www.bbc.co.uk/health/hh/>

<http://www.crimereduction.gov.uk/dv01.htm>

Hester, M. Pearson, C. and Harwin, N. 1998 *Making an Impact children and domestic violence* A Reader. Essex: Barnardos, NSPCC, University of Bristol.

Respect, 2000 The National Association for Domestic Violence *Statement of Principles and Minimum Standards of Practice*.

Walby, S and Myhill, A. 2000 *Reducing Domestic Violence What Works? Assessing and managing the Risk of Domestic Violence* Briefing Note Crime Reduction Research Series Policing and Reducing Crime Unit: London: Home Office.

#### **4. Addressing discriminatory behaviour in parenting groups.**

This issue arose as a consequence of the previous discussion regarding the inclusion of couples and single parents in parenting groups and ensuring groups are inclusive. As before good assessment and planning are fundamental to ensuring a positive mix of participants within groups. However, there were some specific aspects, which are contained in the following discussion:

**Role modelling** – Group facilitators should lead by example and not underestimate the power of positive role modelling.

**Assessment** – As before, use the information from a thorough assessment to inform decisions about who should be included in a group and whether this is the most appropriate intervention for each individual parent. Discuss with parents their needs. Have a variety of options for working with parent(s).

**Expectations** – How the group will work together should be part of the discussion when establishing ground rules and at pre-group meetings. How participants communicate with each other should be agreed, for example the language used, how respect for a person can be conveyed even if you disagree with their view and so on. This not only helps to create a positive environment for the group, but should be useful in establishing some of the key messages about how we can work together even when we have different views, feel angry or upset and so on.

**Dealing with an incident in a group** – How to respond to any incident will in part be determined by the nature of the incident as well as the stage of the group process and the relationships between facilitators and participants, as well as between the participants themselves. You may have had some warning signs that if not responded to appropriately can lead to an incident occurring.

Sometimes it may be appropriate to have a discussion in private at the next break, for example, with each individual involved as an initial way of addressing an issue. However, it may be necessary to address incidents straight away in the whole group setting to support group members affected by an incident and to ensure that the group remains a safe and supportive environment. When preparing for group work co-facilitator will need to explore their roles and agree strategies to respond to any incidents of discrimination within the group. If one parent acts against another, group workers should ensure that the parent subjected to the discrimination/prejudice is well supported at the time of the incident and their ongoing support needs identified with them. Depending on the nature of the incident, consideration will need to be given as to how/whether the group should continue with the same participants.

In the Key Elements of Effective Practice Parenting Source Document (YJB) the role of facilitators is highlighted:

*Facilitators should be ready to take the decision to exclude a parent from a group, and this applies not just to disruptive parents but... to those parents who are not benefiting from group work and who would probably gain more from one-to-one work. Supervision will assist staff to make this type of practice decision, and to feel supported when dealing with potentially difficult issues.*

With respect to **parenting group facilitators** there are some skills that have appeared to be particularly valued by parents:

- *Facilitators that enable group participants to work together*
- *Facilitators that are good listeners*
- *Facilitators that are sensitive to the concerns of parents 'in trouble'*
- *Facilitators that are proactive in maintaining respectful and participatory group dynamics: everyone feels encouraged to take part and 'ego trips' are under control, for example*
- *Facilitators that can work positively with anger and conflict*

Key Elements of Effective Practice Parenting Source Document Youth Justice Board  
[www.youth-justice-board.gov.uk](http://www.youth-justice-board.gov.uk)

**Session content** – Use ice breaking exercises to address the issue with the group. This can be in the form of assumptions/stereotyping exercises. Facilitators should acknowledge with the group that we **all** have some prejudices and through identifying and understanding them we can help to ensure that they don't hurt ourselves or others.

Group facilitators have the chance, when working on ground rules and communication within groups, to create the opportunity for participants to develop strengths and skills which will benefit the group experience as well as their other relationships.

## **5. As a practitioner, how can I solve the dilemma between ensuring that I go through the programme as well as facilitating the group process?**

This issue arose as some site staff found that their model was very prescriptive about session content to be delivered to tight timescales each session. It was acknowledged that this could be difficult for some practitioners, especially when implementing such a programme when their previous experience has been to focus more on the process with parents, with flexible content. Site staff discussed some strategies that can be used to ensure a balance between process and content:

**Assessments** – At the assessment stage, be clear with parents about the model of intervention and take into account their expectations. Workers need to be clear about the criteria for referring to this programme when carrying out an assessment.

**Expectations** - It is important for workers to be clear about their own expectations as well as those of parents and how comfortable you are delivering different types of programmes.

**Creating the time for the process to take place** – This can be done in a number of ways, such as including extra sessions at the beginning or end of the intervention or lengthening each session to allow some time beyond the programme content before, in the middle, or at the end of the session. Experience from the IYPP project has shown that building in a reasonable amount of time for refreshments is useful. This allows time for relationship building both between members of the group and staff relationships. As professionals, we should not underestimate the power of this relaxed time.

**Individual issues** – Extra individual sessions can be offered to those parents who need them either to help them build parent/staff relationships or to address specific individual issues that arise.

To end this report we bring together the achievements of the IYPP project as a whole and conclude with the next steps.

### **5.1 Overall Achievements**

The IYPP project has been an interesting and useful project in several ways:

- As an innovative project it supported the development of five models of intervention for parents and their young people for the first time in the UK
- It adds to the body of learning regarding working with parents in the youth justice context
- All five models of intervention were successfully implemented
- It drew together the learning of site staff from all five models
- It provided training for a number of site staff
- It provided services to approximately 127 families
- 119 parents/carers and 104 young people took part in the independent evaluation of the project
- A majority of parents and young people expressed high levels of satisfaction with the services that they received
- The learning from the project is being disseminated in a range of ways

### **5.2 Next Steps**

All of the five service delivery sites will continue to implement some of the learning from their model of intervention, although to different degrees.

1. **Parallel Groups** – Site staff from the Centre for Fun and Families feel that they have learned a lot about the engagement process when working with a young person and their parent at the same time in parallel groups. Although they will not currently offer parallel groups at the frequency that they did during the IYPP Project, it will remain a focus for further development.
2. **Family Group Conferences** – Due to the success of the IYPP Project, FGCs have become part of a multi-disciplinary provision, with posts funded by the Local Authority. At the end of November 2004, a conference took place, which was attended by the IYPP Project Co-ordinator, Site staff, international speakers and workers and managers from West Berkshire services.
3. **Family Therapy** – The Family Therapy service was already operating in Luton YOS and will continue to do so, but will incorporate lessons learned from the IYPP project.
4. **Individual Parallel Work** – All of the three East Berkshire YOTs involved in the IYPP project will continue to use this model of intervention, though to different degrees depending upon staffing issues. As the funding for a specialist parallel young person's worker is no longer available, the plan is to train staff in each YOT to deliver the young person's programme, where it is considered appropriate to do so from a parenting assessment.
5. **Family Skills Training** – Kinara Family Resource Centre are unable to continue to deliver this model without additional funding. They will, however, continue to incorporate some of the theoretical principles and exercises from the programme and their learning from the IYPP Project into their work with parents and young people. They are currently exploring funding options and particularly the possibility of providing this model in the future in different settings.

This report has detailed the learning that has taken place during the Involving Young People in Parenting Programmes project. It has done so in three ways. Firstly, the learning from practice from the experience of each of the individual five models of intervention included in the IYPP project has been reported. Secondly, the findings from the evaluation have been reported. Thirdly, it has described the learning from the multi-site IYPP Project training/workshop sessions.

We hope that the learning from the IYPP pilot project described in this report can now be used to inform:

- The further development of each of the five delivery models
- Projects that aim to develop services to involve young people in parenting interventions
- The structure and content of a further service delivery and research programme in the UK

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## **APPENDICES**

**APPENDIX 1 – Promoting Resilience – Assessment Chart**

**APPENDIX 2 – Promoting Resilience – Factors**

**APPENDIX 3 – Elements of Supervision**



## APPENDIX 1

### Promoting Resilience in Children and Young People - Assessment Chart

<b>Domain</b>	<b>Individual</b>	<b>Family</b>	<b>Community</b>
<b>Secure Base</b>			
<b>Education</b>			
<b>Friendships</b>			
<b>Talents and Interests</b>			
<b>Positive Values</b>			
<b>Social Competence</b>			

Adapted from Barnardos & University of Exeter Review of Child Care Services (2002)

## APPENDIX 2

### **Promoting Resilience in Children and Young People Factors Promoting Resilience in Adolescence and Early Childhood (Barnardos 2002)**

- ❖ Continuity of teacher-child relationship
- ❖ Programmes that encourage emotional literacy
- ❖ Inclusive philosophies that promote positive motivational styles, problem solving and discouraging 'learned helplessness'
- ❖ Opportunities to develop valued skills through broad based curricula
- ❖ Programmes that encourage peer co-operation and collaboration
- ❖ Avoidance of unnecessary labelling, a role for young people in negotiating family rules and the support of external role models and mentors
- ❖ Connections with cultural or faith communities
- ❖ Where parental separation occurs, opportunity to maintain familiar social rituals
- ❖ Reduction of moves, if in care
- ❖ Positive peer relationships
- ❖ Opportunities for young people to influence their environments
- ❖ Valued contributions in household tasks or roles, part time work outside the home or volunteering
- ❖ Involvement and engagement in post school opportunities – work, study or an alternative
- ❖ Where family support is weak, the involvement of supportive adults or mentors throughout and beyond the transitional period
- ❖ Supportive social networks, prevention of social isolation
- ❖ Good medical and health care

## APPENDIX 3

### Advantages and Disadvantages of Elements of Supervision

#### IN HOUSE SUPERVISION

Advantages	Disadvantages
<p>Maintains agency responsibility</p> <p>Policies and procedures in place provide clarity for supervision contract</p> <p>Parenting work supervised within context of overall workload</p> <p>Line management structures should provide support and the opportunity to take issues further</p> <p>Development of parenting support can be reviewed in relation to YOT policy</p>	<p>Supervisor or agency agenda may be dominant</p> <p>Day to day demands may influence the quality of supervision</p> <p>Supervisor may not have enough relevant experience of parenting support work to provide in depth practice elements of supervision</p> <p>Lack of specialist knowledge may also mean supervisor does not value parenting work</p>

#### EXTERNAL SUPERVISION

Advantages	Disadvantages
<p>Can be a specialist who offers high level of skill, experience and knowledge of the field</p> <p>Offers independence and an unbiased view/approach</p>	<p>May be a supervisor with a 'clinical' approach. Practitioner may prefer more of a 'community' approach</p>

#### ONE TO ONE SUPERVISION

Advantages	Disadvantages
<p>An opportunity to address individual needs in depth on a regular basis including professional and practice development</p>	<p>If practitioners only receive one to one supervision they miss the opportunity to learn from colleagues or a supervisor experienced in their field</p>

#### GROUP SUPERVISION

Advantages	Disadvantages
<p>Can provide wider opportunities to gain support from and share information with colleagues</p> <p>Commonality of issues to be addressed and a range of practice experiences can enhance learning and professional development</p> <p>Can reduce isolation in work role</p>	<p>May not suit the practitioners learning style</p> <p>Time pressures may make it hard to address all participants' needs</p> <p>Some group members may dominate</p> <p>Some issues may be hard to address in a group setting</p>

(TSA 2002)

**Measuring Five Key Dimensions of Parenting:**

ii To measure communication, parents and young people were given a list of four statements about communication and negotiation, and asked to say to what extent the statements described their own relationship, on a 5-point scale ranging from 'very true' to 'not at all true'. The statements covered talking together, listening, mutual comprehension, and discussions that ended in conflict. By plotting the extent to which individual parents moved up or down each scale between 'Before' and 'After' using a statistical technique known as the Wilcoxon Signed Ranks test, we are able to assess the extent to which there were significant improvements (or deterioration) in these aspects of communication. We were also able to calculate an overall 'constructive communication' score by combining these four items additively within a single scale, where a higher score indicated a greater number of 'positive' responses overall, and a lower score more negative responses. Overall scores give us the capacity to identify mean (average) scores for the sample, and to test the significance of changes in average scores between 'Before' and 'After'.

ii To measure supervision and monitoring, respondents were asked to report on the frequency with which parents knew the details of their child's movements and activities, on a scale ranging from 'always' to 'hardly ever/never'. The four questions in this group included knowing where the child was, whom they were with, what they were doing, and when they were due home when they went out independently of the parent. In the same manner as the constructive communication scale, we combined responses to these items into an additive 'overall supervision and monitoring' scale, with higher scores indicating greater levels of supervision of the child.

iii To measure conflict between parents and children, we asked parents and young people to tell us the frequency with which they had arguments, and how often in the previous week they had employed a range of responses to conflict, abstracted from the well-known Conflict Tactics Scales (Straus et al 1975). These ranged from calm discussion through shouting and swearing to physical punishment. We combined these into 'miniature' scales comprising verbal conflict; conflict 'avoidance' (sulking, stomping off); threatening violence; and actual violence.

iv To measure warmth and hostility in the parent-child relationship, we asked respondents to tell us generally how often they praised or told their child that they loved or cared for them (warmth) and how often they lost their temper or criticised their child (hostility).

v To measure confidence in parenting skills and coping with parenting, parents were asked to self report on their sense of understanding and empathy with the child (knowing how the child is feeling; understanding the child's behaviour); sense of efficacy in influencing the child's behaviour (solving problems without conflict; setting and maintaining boundaries and ground rules at home; feeling respected by the child); and coping with parenting (trusting the child to behave responsibly; feeling stressed by child; knowing where to find help with problems and sense of coping in a global sense).

**Statistical Tests:**

- vi N=67. Mean T1=13.7463 (SD=5.1); Mean T2= 16.3582 (SD=2.9); t= -4.652, p=.001
- vii N=30, Mean T1=18.2333 (SD=4.1); Mean T2= 15.8333 (SD=4.9); t= 2.562, p=.05
- viii N=69, Mean T1=15.8551 (SD=21.2); Mean T2= 12.3188 (SD=3.7); t= 1.391, p=.169
- ix N=29, Mean T1=14.7586 (SD=5.7); Mean T2= 12.1379 (SD=3.7); t= 2.394, p=.05
- x N=69, Mean T1=13.1159 (SD=5.1); Mean T2= 16.5362 (SD=9.3); t= -2.668, p=.05
- xi N=69, Mean T1=13.8406 (SD=2.6); Mean T2= 15.4493 (SD=2.7); t= 6.195, p=.001
- xii N=30, Mean T1=10.1 (SD=2.9); Mean T2= 11.9667 (SD=2.6); t= -3.080, p=.01
- xiii N=69, Wilcoxon, z=-3.517, p=.001
- xiv N=23, Mean T1=16.4348 (SD=6.5); Mean T2= 12.1304 (SD=2.8); t= 3.567, p=.005
- xv N=28, Mean T1=10.5714 (SD=2.1); Mean T2= 11.5357 (SD=2.2); t= -2.540, p=.05
- xvi N=60, Mean of warmth with Mother T1 =10.7 (SD=2.2); Mean warmth with Dad T1=12.2667 (SD=3.2) T= -3.567, p=.001
- xvii N=29, Mean T1=14.4483 (SD=6.5); Mean T2= 11.1724 (SD=3.2); t= 2.823, p=.01
- xviii Paired sample T tests

Dimension	t	df	Sig. (2-tailed)
Conflict with Mother	0.380	56	0.705
Communication with Mother	0.242	58	0.810
Warmth with Mother	-1.704	58	0.094
Conflict with Dad	0.117	27	0.907
Communication with Dad	1.365	29	0.183
Warmth with Dad	0.000	28	1.000