



Parenting in poor environments stress, support and coping

a summary of key messages for policy
and practice from a major national study

Deborah Ghate and Neal Hazel

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The study described in this summary was funded by the Department of Health under their *Supporting Parents* Research Initiative. Fieldwork took place between 1997 and 1999.

Much more detail about the methods and findings of the study can be found in: Ghate D and Hazel N (2002) *Parenting in poor environments: stress support and coping* London: Jessica Kingsley Publishers
[ISBN 1 84310 069 x](#).

We are grateful to the Department of Health for agreeing to fund the production of this summary. To obtain further copies, contact:
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PRINT Kingfisher Print, Totnes, Devon

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Introduction

Background

According to the most recent statistics available, one third of children in Britain are being raised in poverty. In recent years, we have amassed considerable evidence about the poor outcomes for these children, and we know that their life chances are substantially weakened by growing up in poverty. But how much do we know about their parents? The answer is not much, unless they happen to come to the attention of the authorities, perhaps for child abuse or other serious problems with parenting. We know relatively little about ‘ordinary’ parents in poor neighbourhoods – the many thousands who struggle with the daily hassles of parenting in difficult circumstances but who may never come to the attention of the official agencies.

The research summarised in this booklet is described in detail in Ghate and Hazel (2002). It provides some insights from the perspective of parents themselves into the world of parenting in impoverished circumstances. Based on a major national study, it explores: the stresses parents face at the individual, family and neighbourhood level; how those stresses impact upon coping with parenting; what supports are available to parents both within and outside their personal networks; what parents want from family support services; and how we can improve the way we plan and deliver those services. This summary is intended for all those involved in service planning and management. We hope it will be useful for policy readers in government and the voluntary sectors, as well as those responsible for services for families and children in local authorities and voluntary agencies.

Research methods

The study consisted of two components:

- ★ a rigorous, nationally representative face-to-face survey of 1,754 parents of children under 17 years old across Great Britain, sampled from 10,500 household in 135 areas of the country. Areas were randomly selected according to their scores on a specially created parenting deprivation index. All areas in the country were scored, with higher scores indicating greater levels of deprivation. Households were selected from areas with scores in the upper third of the national distribution, and were therefore representative of the poorest areas in Britain.
- ★ qualitative (in depth) follow-up interviews with forty parents in different types of difficult circumstances.

All the statistical differences between groups that we highlight in this summary were substantial enough to reach statistical ‘significance’. This means they were most unlikely to have occurred by chance.

Characteristics of parents in poor environments

Who are parents in poor environments?

Not all parents living in poor neighbourhoods are themselves poor. Though the average family in the study was surviving on a very low income, within the sample as a whole there was in fact a wide range of circumstances from the very affluent to the extremely poor, and incomes ranged from £1,850 to £71,000. However, the average annual disposable income before housing costs (standardised to take into account family size) was just £7,000 for all families, and was less than £5,500 for lone parents. Half the families had no-one in paid work and were dependent on state benefits.

Other findings may perhaps challenge some of the media stereotypes of parents in poverty. For example, most parents described themselves as White British (89%) and though 92% of the parents who took part were mothers, 8% of families (one in twelve) had a father as a main or joint equal carer. Though two in five respondents were single parents (nearly twice the national average), most parents (61%) were married or living with a partner. Ages ranged from 17 to 69 years but the average age was a relatively mature 33 years old. The average number of children in the family was two. 43% of parents had a part time or full time job. The list below shows the characteristics of the 'average' parent living in a poor neighbourhood:

List 1

The 'average' parent in a poor environment

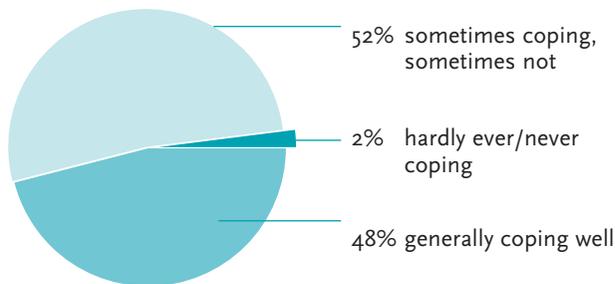
- white
- married or living with a partner
- mature (median age 33)
- around two children, and household size around four people
- an index child aged seven and a half
- living in social housing
- mobile: resident at current address for four years or less
- no or low academic qualifications
- household social class iii (n) or below (skilled non-manual occupation, or lower)
- low median equivalised household income (c £7,000 p.a)
- more likely to be out of paid employment than to be working
- as likely to be reliant on benefits as to have income from paid work
- as likely not to have access to a car as to have access to one

What is it like to be a parent in a poor environment?

Though parents' descriptions of the environmental and social problems in their neighbourhood confirmed that these areas are physically dirty and degraded, crime-ridden, dangerous and generally challenging places to live, parents' overall assessment of the quality of their communities was not nearly so negative. Around three quarters described their neighbourhood as generally friendly and stable, and 55% said they knew neighbours to talk to. Even in the very poorest areas, over half of parents said their neighbourhood was a 'good place to bring up a family'. Many parents felt a substantial pride in their local area.

Despite the fact that many parents were struggling with a low income and a multiplicity of other stressors, parents in poor environments were almost as likely to say they were 'coping well' with parenting as to say they were experiencing difficulties. Given that parenting is frequently described as a challenge even by parents in more comfortable circumstances, this suggests that parents in poor environments are a fairly resilient group.

Figure 1
Coping with being
a parent



As one mother summed up, many parents in poor environments employ pragmatic attitudes to the challenges they face as a form of coping strategy:

Sometimes it gets you, but you accept it really, don't you? You've got to really, because no matter how much you let it get you down, it don't get you anywhere.

In the rest of this booklet, we look in more detail at the problems that parents in poor environments face, and explore what bolsters and what undermines coping with parenting in these circumstances.

What undermines coping with parenting?

Stresses faced by parents in poor environments

Parents living in poor neighbourhoods described a complex set of stressors that made parenting more difficult to cope with. Stressors can be grouped at the level of the individual, the family and the community. Many of the stressors were found to occur with much higher frequency than for adults in the general population, and so point to particular challenges for bringing up children in poor environments.

Stressors at the level of individual parents and children

- ★ Although most parents described their health as generally good, two in five parents had long-term physical health difficulties - a substantially greater proportion than for adults in the general population. More than a quarter of these parents (29%) felt that it affected caring for their children. On the Malaise Inventory, a standardised scale, parents in the study were also three times as likely as other adults in the general population to indicate they suffered from emotional and mental health problems.
- ★ Similarly, two in five parents had a child with a long-term physical health problem. For almost half of them (43%), this meant having to spend more time caring for that particular child. Parents described how this could make it impossible to balance home and work commitments. 13% of children in the sample scored abnormal ratings on the Strengths and Difficulties Questionnaire (SDQ), a standardised measure of behavioural and emotional difficulties, a figure slightly higher than for children in the population as a whole. Demonstrating how problems tend to overlap in poor environments, children with physical health problems were also more likely to have objectively defined behavioural difficulties.

Stressors at the level of the family

- ★ Unsurprisingly, problems relating directly to the widespread occurrence of very low incomes dominated the difficulties reported by parents in poor neighbourhoods. Low or no qualifications limited employment opportunities, and half of families had no adult in paid work. Thus, two-thirds of parents could not afford at least one 'basic' necessity, such as toys for their children or a family holiday once a year. Similarly, parents in poor environments had a lower rate of access to a car (56%) than households in the general population had a generation ago,

with clear implications for access to local services and amenities. Low income also meant substantial financial strain, with one in five parents having problems servicing long-term debts.

- ★ Strongly related to low income, poor quality of housing was a major stress factor. Overall, two in five families suffered serious accommodation problems such as overcrowding or insufficient heating - three times the rate for the general population. Such difficulties were even more widespread for families who were private tenants (53%) or local authority tenants (51%).
- ★ The size and structure of their family corresponded closely with a number of stressors that parents reported. Notably, larger families were hit by the 'double whammy' of having more expenses and smaller household incomes. Lone parents were struggling more than parents with partners on almost all counts, reporting greater frequencies of low income, poor health, poor accommodation and difficult child behaviour. On the other hand, having an unsupportive partner introduced another set of problems, with one in six parents reporting having been made to feel bad or worthless by their current partner. One in twenty had been physically assaulted by their current partner.

Stressors at the level of the neighbourhood

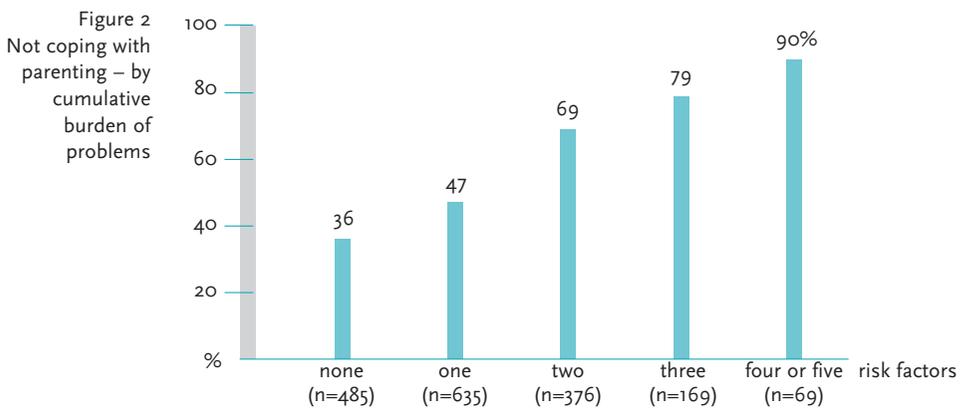
- ★ Environmental hazards in the local area directly impacted on families' daily lives in a number of ways. Dog fouling was the most widespread concern, with the majority of parents (54%) saying this had a direct impact on their family, such as not being able to let children use local play spaces. Similarly, danger from traffic and stray or loose dogs were felt to restrict places where children could play. Other difficulties included pollution from traffic, poor street lighting and the dilapidated condition of local buildings.
- ★ Similar levels of concern were expressed about crime and anti-social behaviour in the locality, although fewer parents felt personally affected by this type of problem. The most commonly experienced problem was property crime, which had directly affected more than a quarter of families (29%). However, almost one in five parents reported the family having suffered from vandalism and graffiti, from noisy neighbours and from having drug users in the neighbourhood. Other problems encountered included joy riding, and disorderly behaviour in the streets by both youths and adults.

What problems have the greatest impact on coping with parenting?

Undoubtedly, poverty was the common thread running through the various difficulties in the lives of parents in the study, underlying and compounding stressors at the individual, family and neighbourhood levels. Consequently, by definition, most parents living in poor environments could be said to be ‘in need’ to some extent. However, many reported coping well with parenting in the face of such difficulties, and so it is important to be able to identify which particular stressors were most likely to correspond to problems in coping with parenting. The study found that while many parents coped well with low income and living in poor neighbourhoods, those experiencing the greatest levels of material deprivation and those living in the very poorest parts of the country were substantially less likely to feel they were coping than other parents.

However, other factors make a difference too. A series of statistical models were built to determine which stress factors contributed most to ‘coping’ or ‘not coping’ with parenting. The results indicated that (in order of contribution), having a ‘difficult’ child (one with a high score on the SDQ), having a high number of personal problems, a high Malaise score, being a lone parent and having a large family (more than two children) were especially associated with coping less well.

At all three levels (individual, family and community), parents’ problems were multiple, overlapping, and cumulative. So, if parents had problems in one area they almost certainly had problems in other areas of their life, further compounding parenting difficulties. The greater the number of stress factors that were reported by parents, the less likely to be ‘coping’ with parenting. As can be seen from the figure below, the proportion of parents having difficulties coping rose dramatically with an increasing burden of stress factors.



To summarise, based on the findings of the study, we identified a number of ‘priority need’ groups – that is, parents whose problems coping suggested they are a particular priority in terms of targeted support. These are shown in the list below:

List 2
Priority
need groups
within poor
environments

- parents living in the very poorest neighbourhoods
- parents on the lowest incomes
- lone parents
- parents with high Malaise scores
- parents with high levels of current problems
- parents with ‘difficult’ children
- parents with accommodation problems
- parents with large families

How well supported are parents?

This section outlines the extent and quality of support available to parents bringing up children in poor environments. Support can usefully be categorised into three main types:

- informal support (from personal social networks, family and friends)
- semi-formal support (from organised community networks, e.g. mother and toddler groups and other services often provided by the voluntary sector)
- formal support (from statutory and professional services, e.g. health and social services)

The study found that each of these sources of support offered different benefits to parents, were accessed for different reasons, and were used by parents in different ways. Gaps and deficits in each of these sources of support, together with negative experiences of services, could leave some groups of parents feeling unsupported.

Informal support

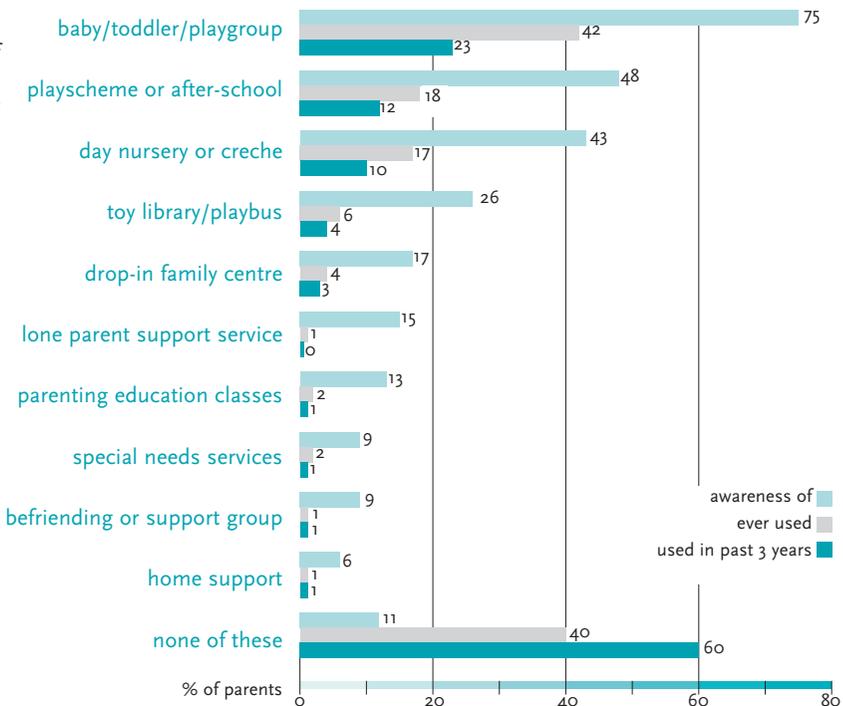
- ★ Parents generally had substantial networks of informal support, with only a small minority (3%) saying that they had nobody to call on for help. Furthermore, these support networks were characterised by close-knit relationships in close geographical proximity, with frequent contact both on the telephone and in person. It is mainly women who do the supporting in poor environments, and parents' own mothers were the most frequently cited source of help. Overall, female friends were more likely to be cited as supporters than partners, although this was in part due to the relatively high number of lone parents living in poor neighbourhoods. However, the make-up of support networks changed at different stages of parenthood. Children themselves can be important sources of support to their parents, so that in families with teenagers, older children were increasingly likely to be cited as supporters. Lone parents and ethnic minority parents reported having smaller networks than others.
- ★ Informal support was generally restricted to emotional support and short-term practical help. Hypothetically speaking most parents felt they could, if needed, find 'someone to talk to', borrow a small amount of money from, or leave their child with for a couple of hours, and at the time of the study, informal supporters had been called upon recently by four out of five parents, most commonly to mind their child (42%) or to talk to about a problem (39%).

- ★ However, one in five parents reported having received no help of any kind in the past four weeks, and certain groups of parents were likely to receive less informal support than others. In particular, parents from the lowest income families and from ethnic minority groups reported receiving lower levels of this kind of support. In addition, more substantial needs were less likely to be catered for by informal support than others. Only a minority of parents felt that they could usually leave their child for a day or over night if necessary (45%), or get a lift to an important appointment (45%), or borrow more than £10 (34%).

Semi-formal support

- ★ Despite the neighbourhood-based nature of most semi-formal support, parents were surprisingly unaware of semi-formal services in their local area. With the exception of playgroups, only a minority of parents were aware of each of the common types of services listed below in Figure 3. Over one in ten parents were not aware of any of the services at all. Correspondingly, take-up of these services was also relatively low, with two in five parents never having used any of the services at any point, and nearly two thirds not having contact in the last three years.

Figure 3
Use of
semi-formal
support

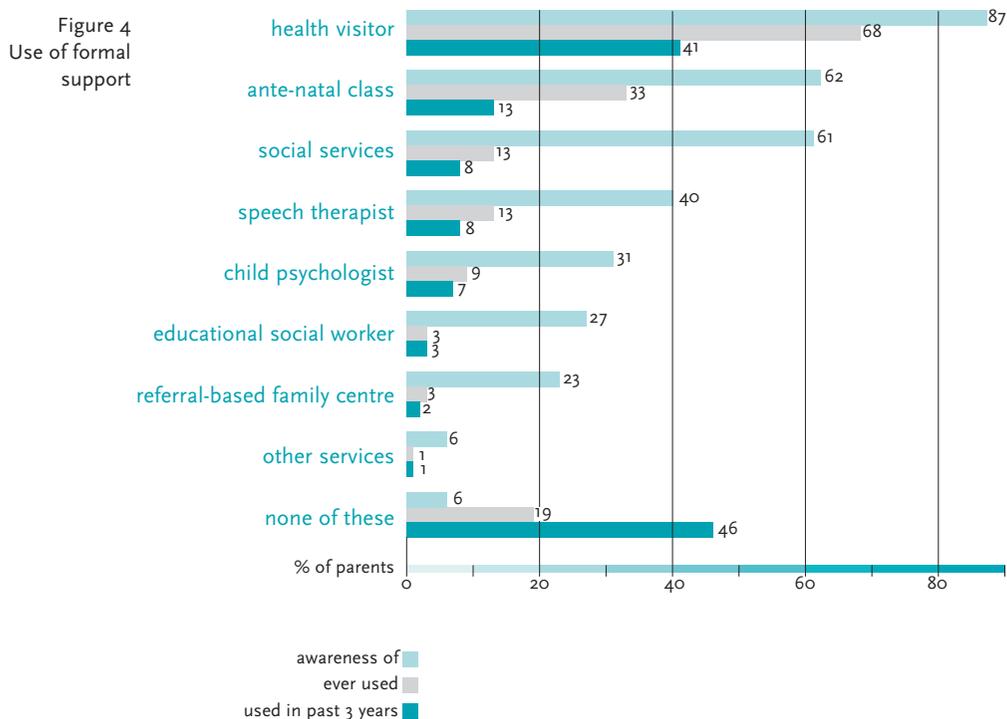


- ★ Reflecting the types of services in Figure 3, parents were much more likely to have accessed semi-formal support if they had younger children, particularly pre-schoolers. Though semi-formal services were also more likely to be used by parents with high levels of current family and relationship problems, and also by parents of children with long-term health difficulties, there was mixed evidence in relation to whether semi-formal support reached the most needy parents. Parents who faced other types of stressors, such as poor emotional or mental health or difficult child behaviour were no more likely than others to access the services. Indeed, families on lower incomes and minority ethnic parents were significantly less likely to have used semi-formal services in recent years than others.
- ★ Parents used semi-formal services for mainly child-centred, social reasons (e.g. for meeting other parents and children) rather than for practical or instrumental purposes. Overall, by far the most common single reason cited by parents for using a service in the past three years was to give their child the opportunity to mix with others of the same age (66%). Instrumental reasons figured to a lesser extent, including access to toys that might otherwise not be available to the family (36%). Parents also used these services for a break from solitary child care (21%). Parents were generally very positive about the services they had used, with two-thirds of parents (65%) who had accessed services in the last three years considering them ‘very helpful’. This was mainly attributed to the child having enjoyed the service, or because it was considered to have helped children’s learning or development.
- ★ However, there was evidence that semi-formal support services may not always offer the kind of help that parents might welcome as appropriate or worthwhile. Over a quarter of parents (28%) who failed to access support felt that none of the services offered anything of interest to them, with a smaller number (11%) considering all the services on our list unsuitable for them.

Formal Support

- ★ Awareness and use of formal support services was somewhat higher than for semi-formal support. Overall, only a small minority of parents (6%) were unaware of at least some of the formal support services listed in Figure 4. Take up of services was also much higher, with only one in five parents (19%) having never used any organised support services at any point, and the

majority of parents (54%) having been in touch with a formal service in the past three years. Nevertheless, both awareness and take-up figures suggested that parents in poor environments are not being reached by so-called 'universal services' intended for all, such as the health visiting service, let alone more 'targeted services', such as social services.



- ★ As with semi-formal services, parents with younger children were most likely to report having accessed formal support in the recent past, although the decline in use as children grew older was not nearly as marked. There was also evidence that formal sources of support were more successful in reaching parents with higher needs, including: parents with poor emotional or mental health, parents of children with health or behaviour difficulties, and parents with high levels of current family and relationship problems. However, there were still specific high-need groups, such as lone parents and families on lower incomes who were no more likely to have accessed services than other parents. As with semi-formal support, ethnic minority parents were less likely to have accessed services in recent years than white parents.
- ★ The reasons for using formal services were much more parent-centred and instrumental than for semi-formal support. Although the majority of parents were directly referred to (or contacted by) services, parents actively seeking formal support tended to do so in order to get specific advice or talk to someone about a particular personal or family problem, rather than for social reasons. Most parents who had used a formal support service were positive about their experiences, with almost nine out of ten parents (88%) saying that they would recommend it to other parents in their situation. Satisfaction tended to relate to the extent to which service providers had listened to, respected and addressed parents' own self-defined needs with practical help and assistance.
- ★ Like semi-formal support, there was evidence that some parents failed to take-up any formal support services because they saw them as irrelevant or unsuitable. Again, over a quarter of parents (28%) who failed to access support felt that none of the services could offer them anything of interest. Moreover, qualitative interviews revealed some important levels of dissatisfaction with formal services. Parents complained of excessively long waiting times to use services (especially health services), and sometimes felt that even when help was offered, it was often insufficient or inappropriate to meet the pressing needs they had. Sometimes it seemed that the help offered 'missed the mark', reflecting professional agendas (and perhaps also resource availability) rather than parents' own self-defined agendas.

Negative support

- ★ The study illustrated vividly that asking for and accepting social support can have its downsides, and the concept of ‘negative support’ emerged as important. In relation to informal support, parents indicated that there was a fine dividing line between ‘help’ and ‘interference’, and some parents were reluctant to ask for or accept help in case helpers ‘took over’ and undermined their own sense of control in family life. Other concerns included fear of burdening others with ones’ own problems; feeling obligated to reciprocate favours; fear of seeming not to be coping; and loss of privacy over confidential family issues. Similarly, in relation to formal support services, a major theme was the threat to autonomy that could arise from involving professionals in family life. Almost a third of parents in poor environments (29%) felt that professionals ‘start interfering or trying to take over’ when asked for advice on parenting issues. Other reasons for reluctance to engage formal support included experiences of being patronised by busy professionals who failed to respect parents as experts in their own lives and made them feel belittled. In the end, some parents felt that these negative consequences of engaging support were too great, and preferred to face the stress of parenting in poor environments alone.

Who needs more support?

Overall, just under half of all parents (47%) considered that they would benefit from more support with bringing up children, and more than one in ten (11%) stated that they often wished for such help. Crucially, parents who felt unsupported were less likely to say they were coping with parenting. Paradoxically, however, parents who felt unsupported were also more likely to be the parents who were receiving higher levels of actual support from informal, semi-formal and formal sources. The perception of being supported therefore emerged as a more critical indicator of coping with parenting in poor environments than the actual level of support received.

In general, those in the priority need groups we identified earlier were the most likely to consider themselves lacking in support: including lone parents, those with mental and physical health problems, those with sick or disabled children, and parents with high levels of relationship and family problems. Parents with pre-school children were also more likely to feel unsupported. Lastly, though parents with partners were in general more likely to say they were coping and to feel well-supported in their parenting role when

compared to lone parents, parents who reported that they had an 'unsupportive' partner had the same rates of not coping as lone parents.

Based on the findings of the study in relation to existing patterns of support, a number of key groups therefore emerged who might be considered a priority for enhanced support with parenting. These 'priority support groups' were those who reported restricted access to support and/or a sense of being inadequately supported, and are summarised in the list below:

List 2
Priority
support groups
within poor
environments

- parents who feel they are 'not generally coping' with parenting
- minority ethnic parents
- lone parents
- parents with high levels of current problems
- parents with high Malaise scores
- parents with pre-school children
- parents with conflicted or unsupportive relationships with partners

How can we better support parents?

What parents say they want from family support services

From the combination of survey and qualitative in-depth information collected for the study, we were able to identify a number of key criteria that make up parents' own self-defined agenda for appropriate and effective support services. Below we summarise these, and in the blue text highlight the recommendations for improving existing service provision that arose from the research.

Practical services that meet parents' self-defined needs

Service agendas for supporting families are sometimes seen as reflecting what is available rather than what is actually needed. Parents want useful, practical services that meet their own self-defined needs. Help that is well-meant, but seen as irrelevant to their actual needs is described by parents as worse than useless. Where formal (statutory) helping agencies are concerned, parents tended to describe largely instrumental, rather businesslike approaches to their use of these services, which tended to be in times of specific need or crisis. They valued clear practical outcomes above 'feel good' qualities like 'friendly' style of delivery.

Recommendation: Family support services need to pay more attention to parents' perceptions of the support they provide in terms of how useful and appropriate it is felt to be. Assessing needs in partnership with parents by asking what they themselves think would be helpful is a good place to start.

Accessible services

Parents want services that are available when they need them. They deplore the long waiting times it takes to access many essential services, and there is a great need for better access to support services on demand. By far the most frequently cited suggestions for improving services were, for semi-formal services, *increase/extend service hours* and for statutory services *reduce waiting lists and waiting times*, and *increase the number of staff*. Many said both types of services could be improved by *increasing the opening hours*; and *increasing the number of staff or volunteers*.

Recommendation: Services need to be structured to provide support to parents when they say they need it, not weeks, months or even years later. In formal services restricted opening hours and overstretched staff limit user access.

Improved range of services

Many parents thought that both semi-formal and statutory services could be improved by increasing or extending their 'reach' in terms of the range of support provided. Where semi-formal services were concerned, *increasing the range of activities* offered and *improving the quality of equipment or facilities* was highlighted as a potential area for improvement. Because parents use these sorts of services for mainly social reasons nearly one third wanted to see a *wider range (and number) of parents and children* using them, and around a quarter of users wanted these services made *cheaper* to use.

Recommendation: Services should consider how to reach more users in poor environments. In semi-formal services in particular, more diverse services in terms of activities, facilities, mix of users and numbers of workers should be considered. Charges for service use should be kept minimal, as they may deter the poorest users.

Demand for information: knowledge is power

Parents expressed a strong demand for more information about parenting and child care issues. When offered a list of thirteen common topics about child care and child development about which parents might seek information, over two thirds of the sample (68%) said they would like to know more about at least one topic, and one in five parents wanted to know more in four or more distinct areas. Needs for information change as parents and children mature, though overall, child behaviour issues topped the list: many parents wanted to know more about *what is and is not 'normal' child behaviour* at different ages (25%), and *how to deal with problems with children's behaviour* (25%). One fifth wanted information on *discipline*. It was striking that when parents said they would like more information, they strongly preferred 'self-administered' methods of accessing information (e.g. leaflets, booklets, videos) to methods that involved face-to-face contact with other people, perhaps because this maximises control and minimises the risks associated with seeking support. However, a substantial minority would attend an informal discussion group with other parents, depending on the topic at issue, and some would consult professionals in matters of children's physical and emotional health.

(The results are shown in more detail in the Figure on the next page.)

Figure 5
How parents prefer
to receive
information about
parenting

Preferred methods of receiving information about
specific topics (% of parents citing method as appropriate)

Topic	most popular method	2nd most popular method	3rd most popular method
What to expect in terms of 'normal' behaviour at different ages (n = 446)	leaflet 57%	video 28%	discussion group 25%
How to deal with problems with children's behaviour (n = 435)	leaflet 46%	home visit 30%	video 26%
Education or schools (n = 379)	leaflet 60%	home visit 26%	discussion group 23%
The pros and cons of different ways of disciplining children (n = 362)	leaflet 49%	discussion group 30%	video 30%
Parenting teenagers (n = 311)	leaflet 50%	video 29%	discussion group 28%
Problems between siblings (n = 290)	leaflet 49%	discussion group 27%	video 25%
How children learn (n = 274)	leaflet 56%	video 32%	TV/radio 29%
How to talk to children about growing up, bodies and sex (n = 271)	leaflet 59%	video 39%	discussion group 23%
Children's or babies' diet (n = 157)	leaflet 63%	visit to professional 36%	video 26%
Problems with children or babies sleeping or crying (n = 141)	leaflet 50%	video 31%	home visit 29%
Children's or babies' health (n = 124)	leaflet 65%	visit to professional 36%	video 24%
The normal stages of baby or child development (n = 101)	leaflet 64%	video 32%	parent class 25%
How parenthood affects relationships with partners (n = 95)	leaflet 47%	home visit 24%	video 23%

self-administered delivery
 semi-formal delivery
 formal delivery

Recommendation: Formal support services in particular should provide written information for parents to take away and consult at their own convenience. Contrary to popular belief, many parents say they do read and keep written materials for future reference.

Services that allow parents to feel 'in control'

A key principle stressed by parents in relation to all services is that seeking support should not leave them feeling they had relinquished control over their own life. Parents said strongly that making them feel listened to and respected, and acknowledging that they are also 'experts' in their own lives is as important, if not more important, as providing access to specific types of help. They described a fine line between 'help' and 'interference', and this applied equally to help from informal sources (friends and family) as well as from organised services. According to the parents we interviewed, 'good' support is that which nevertheless allows a parent to feel in control of decisions and what is happening to them and their families. Parents often felt disempowered by the way they were treated by busy professionals – as if they were over-anxious, inexperienced, or ignorant, for example. Health professionals (GPs, and health visitors) particularly came in for criticism in this respect. Fear of loss of autonomy was a barrier to seeking professional support, and sometimes the more serious the problem, the greater the fear and the greater the disincentive to seek help. This was especially the case where social services was concerned.

Recommendation: Services and professional support staff need to find ways to demonstrate respect for parents' own 'expertise' in their own lives. Parents do most certainly welcome help and support, but not at the cost of their own autonomy. Training in listening and engaging seriously with parents' own concerns, and negotiating in partnership with them about the best course of action may be needed for health and social care workers who support parents.

Key principles in supporting parents

Overall, the findings of the study led us to identify six key principles that underlie the provision of effective and comprehensive support services for families and children in need, from the perspective of parents bringing up children in impoverished environments. These are summarised below.

Diversity of provision

The study showed how different forms of support fulfil different functions for parents. Parents use informal support from family and friends to provide emotional support and every-day practical help. Semi-formal services are used for mainly social reasons, to broaden the social networks of parents and children. Formal services are used more instrumentally, for professional advice with specific problems and sometimes at points of clear crisis. Retaining and supporting a diversity of provision is therefore essential to meet this diversity of need. For parents in poor environments, it is especially important that an emphasis on building up informal and semi-formal support systems should not erode the availability of formal (statutory) services. Despite their shortcomings, these services provide vital support to the families in greatest need, many of whom cannot or do not want to access family or community-based support.

Tackling poor awareness and the poor image of family support services

There are some serious gaps in awareness of what services are available locally in poor environments. Even in the case of universal services like health visiting, some parents were unaware of this service and had never used it. Better advertising and marketing of what is available to parents at the local and national level is required. However, raising awareness is only half the story: justly or unjustly, many services had a very bad reputation amongst parents in poor environments. Primary health care services were often described as rushed, dismissive, patronising; social services were perceived as an agent of social control rather than help. There is a very urgent need to tackle this poor public image, because some needy parents will go to almost any lengths to avoid using these services as a result.

Multiple problems need multiple solutions

The study showed that many families in poor environments are subject to multiple and overlapping stressors. Many parents reported several distinct risk factors at the individual, family or community level, and some 'sets' of stressors were commonly found together (for example poor parental physical health, poor mental health and child

behaviour problems). To be really effective, support to families needs to operate in a number of dimensions. The study adds to the substantial body of evidence indicating the need for comprehensive, ‘joined-up’ services, delivered by partnerships between agencies and across sectors. Single agencies working alone are unlikely to be able to make much impact on the lives of families with such complex and interlocking needs.

Build on strengths as well as tackling weaknesses

Despite living in conditions of considerable stress, parents in poor environments were on the whole remarkably resilient and positive. They often expressed pride in their local neighbourhood, despite a keen awareness of its deficiencies, and were strongly committed to staying and making a good life for themselves and their children. Most felt they had reasonably extensive support networks, despite receiving relatively little actual practical help from external sources. They described resourceful strategies for dealing with day to day problems and were experts in making a little go a long way. Overall, there were as many parents ‘coping well’ with parenting as there were parents who were not. This is not to say that parents in poor environments do not want or welcome services and support – quite the reverse. However, the design of family support at the macro level should try to recognise and build upon existing strengths as well as address weaknesses and deficits. For example, one strategy to boost informal and semi-formal community-based support could involve mobilising parents who are coping well (often those with older children and more experience) to befriend and support those who cope less well. Similarly, when working with parents in poor environments, formal agencies should try to identify and boost parents’ existing strengths as well as address parenting problems.

The concept of negative support

Not all support offered to parents is perceived as wholly positive. An appreciation of the downside to social support is important to help understand the limitations of what can be done to support parenting ‘from the outside’. Again reflecting the fine dividing line between help and interference, many parents felt there were disincentives to accepting informal support from friends and family, including the obligation to reciprocate and the fear of burdening others. On the other hand, fear of loss of confidentiality and control loomed large as issues underlying parents’ willingness to accept support offered by agencies. We should not expect that measures aimed at enhancing support available to parents will always be welcomed by all individuals.

Allowing parents to feel in control

The overriding message from this study was that how parents feel about support is critical, and they feel best about support when it is offered in a way that does not undermine their own sense of personal control. At present, some parents in poor environments feel family support services are pulling against them instead of with them. There is a strong culture of family self-sufficiency within poor communities, and external support that steps over the fine line between ‘help’ and ‘interference’ may actually make things worse, not better, for parents. Asking parents what they want and how they want it therefore has to be the starting point for all family support services, whether at the community or individual family level. As one mother put it:

‘Support’ means that you are still in charge; the parent is still in charge and you are asking for help, advice and whatever - but you are the one in charge. You are not handing over your kids to someone else to take over.

Mother, lone parent, low income, sick child

The **POLICY RESEARCH BUREAU** is a politically independent, not for profit research centre specialising in social policy research on and with children, young people and their families. We carry out research on a wide range of topics including family support, parenting, fatherhood, early intervention and prevention, anti-social behaviour, youth justice, child maltreatment and child protection, and child and adolescent mental health. Our research takes a variety of forms, including large scale surveys, quasi-experimental studies and evaluations, qualitative studies, literature reviews and scoping studies.

Current and recent research projects include: the National Evaluation of On Track; Mental health needs of children in the child protection system; Children who commit serious crimes; a national study of parents, children and discipline in Britain; a review of the international evaluation literature on 'what works' in parenting support; an evaluation of the Youth Justice Board's Parenting Programme; a study of young people's perceptions of the criminal justice system, and an analysis of consultation responses on the education of young people in the public care.

Recent **BUREAU** publications include:

- Moran P, Ghate D and Van der Merwe A (2004 forthcoming), *What works in parenting support? A review of the international evaluation literature*. London: DfES and Home Office
- Ghate D, Hazel N, Creighton SJ and Finch S (2003) *Key findings from the National Survey of Parents, Children and Discipline in Britain*: ESRC Research Findings Summary series London: The Policy Research Bureau
- Ghate D and Ramella M (2002) *Positive Parenting: An evaluation of the Youth Justice Board's Parenting Programme*. London: Youth Justice Board (<http://www.youth-justice-board.gov.uk/publications/research/positive-parenting>)
- Hazel N (2003) *Holidays for families in need: the research and policy context* PRB Briefing Paper 151 London: The Policy Research Bureau
- Ghate D and Hazel N (2002) *Parenting in Poor Environments: Stress, support and coping*, London: Jessica Kingsley Publishers
- Ghate D, Shaw C, and Hazel N (2000) *Engaging fathers in preventive services: fathers and family centres*. York: Joseph Rowntree Foundation and York YPS
- Rutter M, Giller H and Hagell A (1998) *Antisocial Behavior by Young People*. New York: Cambridge University Press

With a unique focus on the effects of poverty, the book this summary is taken from explores what professionals and policy makers can do to support families living in poverty.

The authors examine community-level poverty and its relationship to family and individual problems such as low income, poor mental health and child behavioural difficulties.

Using data from the first nationally representative survey of parents living in especially poor circumstances, they assess the wider help parents receive, both through formal support services and through informal networks of family and friends. Drawing on a study of 1,750 parents carried out by the POLICY RESEARCH BUREAU for the Department of Health, this book shows what service users think of the resources available to them, and how policy and practice in family support services could be improved.

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