



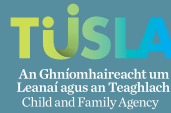
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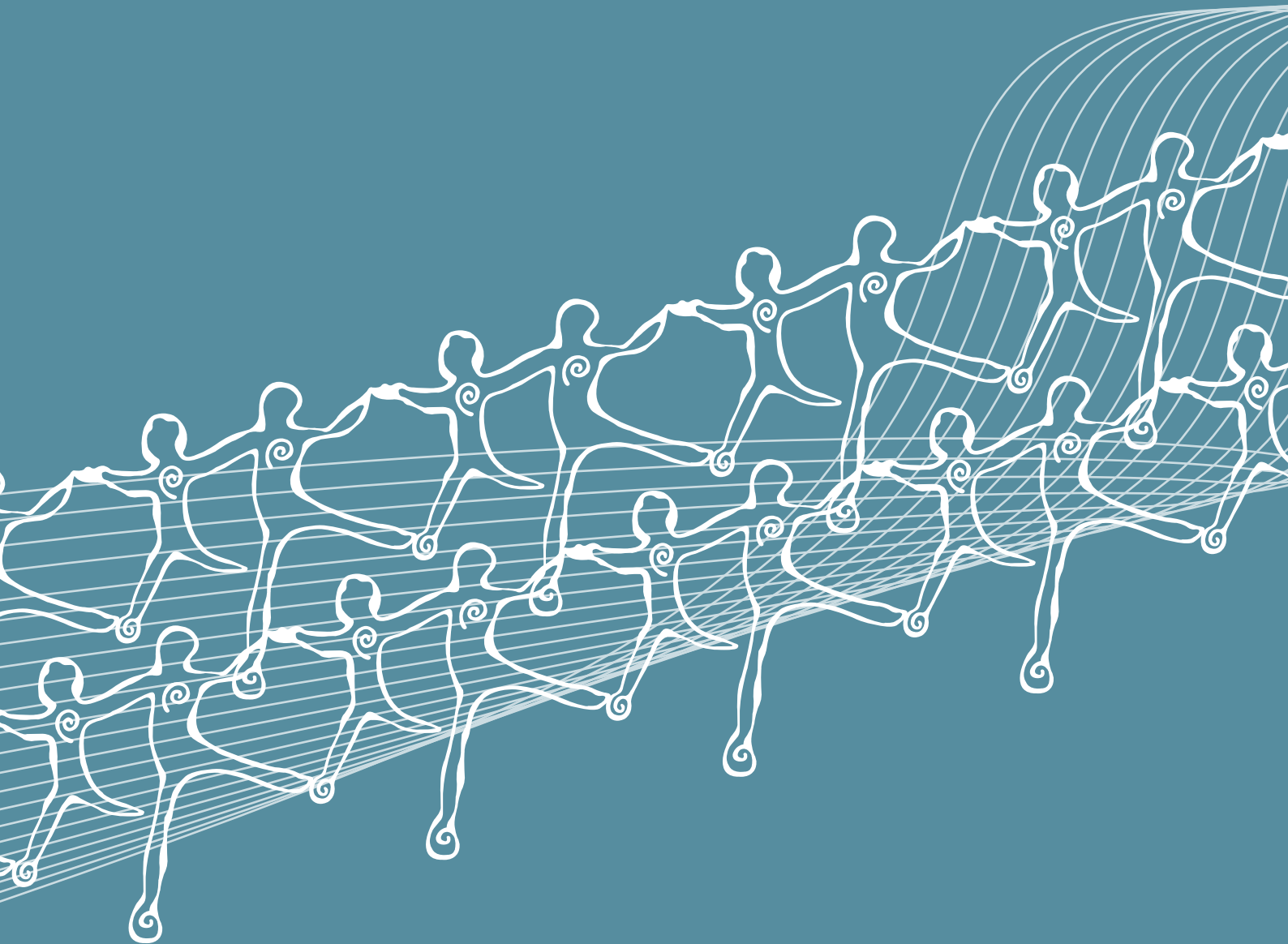
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# Parenting Support and Parental Participation

## Parenting Support Champions Questionnaire Report

BY  
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JULY 2017

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# The Development and Mainstreaming Programme for Prevention Partnership and Family Support



The research and evaluation team at the UNESCO Child and Family Research Centre, NUI Galway provides research, evaluation and technical support to Tusla's Development and Mainstreaming Programme for Prevention, Partnership and Family Support (PPFS). This is a new programme of action being undertaken by Tusla, the Child and Family Agency as part of its National Service Delivery Framework. The programme seeks to transform child and family services in Ireland by embedding prevention and early intervention into the culture and operations of Tusla. The UNESCO Child and Family Research Centre's work focuses on research and evaluation on the implementation and the outcomes of Tusla's Development and Mainstreaming Programme and is underpinned by the overarching research question:

... whether the organisational culture and practice at Tusla and its services are integrated, preventative, evidence informed and inclusive of children and parents and if so, is this contributing to improved outcomes for children and their families.

The research and evaluation study is underpinned by the Work Package approach. This has been adopted to deliver a comprehensive suite of research and evaluation activities involving sub-studies of the main areas within the Tusla Development and Mainstreaming Programme. The work packages are: Meitheal and Child and Family Support Networks, Children's Participation, Parenting Support and Parental Participation, Public Awareness and Commissioning.

**This publication is part of the Parenting Support and Parental Participation Work Package**

## About the UNESCO Child and Family Research Centre

The UNESCO Child and Family Research Centre (UCFRC) is part of the Institute for Lifecourse and Society at the National University of Ireland. Founded in 2007, through support from The Atlantic Philanthropies and the Health Services Executive, with a base in the School of Political Science and Sociology, the mission of the Centre is to help create the conditions for excellent policies, services and practices that improve the lives of children, youth and families through research, education and service development. The UCFRC has an extensive network of relationships and research collaborations internationally and is widely recognised for its core expertise in the areas of Family Support and Youth Development.

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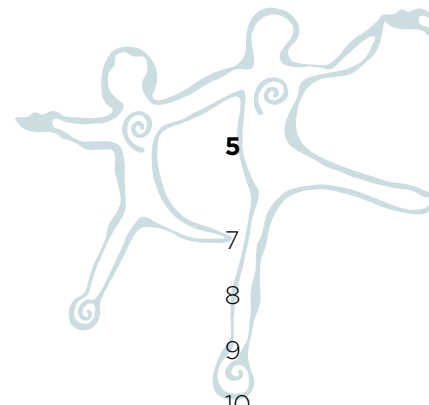
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# 1

## 1. Introduction

This research is part of a study to examine the process, implementation and outcomes of the Parenting Support Champions Project, which is one element of the Parenting Support and Parental Participation work stream. This research is part of a wider programme of work to research and evaluate the Tusla Development and Mainstreaming Programme for Prevention, Partnership and Family Support being undertaken by the UNESCO Child and Family Research Centre in the National University of Ireland, Galway.

The purpose of the research is to ascertain the expectations for the role of Parenting Support Champions (PSC) from those who have volunteered for the position. Reasons why respondents volunteered for the role of PSC, aspects of the role that are of most interest to them, their views on ways in which the role will enhance parenting support, and their opinions on induction and training for the role to date are all detailed in this report. Respondents were also asked for suggestions and ideas for the PSC role and were given an opportunity to provide other comments should they wish to do so.

Answers provided via a questionnaire distributed at the PSC project planning and networking day on 8 December 2016 contribute to the process, implementation and outcomes study of the PSC project, informing in a formative way the development of activities in this area. For the purposes of this report, responses are divided into two groups: those given PSCs and those given by others,<sup>1</sup> which are outlined in section 4 of this report.

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<sup>1</sup> Others in this case are those who classified themselves as PPFS Manager, CFSN Coordinator, Meitheal Network Coordinator and Triple P Mentor.

# 2



## 2. Description of Participants

This section describes the respondents in terms of their employment profile, their geographical location, the length of time spent in their specific area of work, and their gender profile.

### 2.1 Employment Profile of Respondents

The Parenting Support Champions questionnaire was completed by 29 respondents, including 25 who described themselves as PSCs, one Prevention Partnership and Family Support (PPFS) manager, one Child and Family Support Network (CFSN) coordinator, one Meitheal Network coordinator, and one Triple P Mentor.

*Table 1: Profile of Respondents*

<b>Role</b>	<b>Number of Respondents</b>	<b>% of Respondents</b>
Parenting Support Champion	25	86.2%
PPFS Manager	1	3.4%
CFSN Coordinator	1	3.4%
Meitheal Network Coordinator	1	3.4%
Triple P Mentor	1	3.4%
<b>Total:</b>	<b>29</b>	<b>100%<sup>2</sup></b>

<sup>2</sup> All percentages are rounded to the nearest figure.

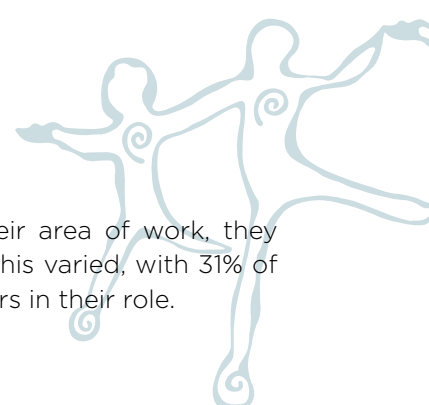


### 2.1.1 Respondents by Geographical Area

There was a nationwide response to the questionnaire; no particular region was over-represented.

Table 2: Tusla Respondents by Geographical Area

<b>Geographical Area</b>	<b>Number of Respondents</b>	<b>% of Respondents</b>
Cork	2	6.8%
DSW	1	3.4%
Kilkenny	1	3.4%
Kildare	1	3.4%
Galway	1	3.4%
Mayo	1	3.4%
Dublin	3	10.3%
Sligo	1	3.4%
Donegal	2	6.8%
Dublin SE Wicklow	1	3.4%
Donegal	1	3.4%
Dublin North (Fingal)	2	6.8%
Clare	1	3.4%
DNCIT	1	3.4%
DNC	1	3.4%
DSE Wicklow	1	3.4%
Dublin South Central	1	3.4%
Dublin South	1	3.4%
Longford	1	3.4%
Waterford	1	3.4%
DNE	1	3.4%
Louth/Meath	1	3.4%
No Answer	2	6.8%
<b>Total:</b>	<b>29</b>	<b>100%</b>



### 2.1.2 Length of Time in Role

In order to ascertain the level of experience that the respondents have in their area of work, they were asked to indicate the length of time that they are employed in their role. This varied, with 31% of respondents being less than a year in the role and 31% employed for over ten years in their role.

Table 3: Length of time in role

Length of Time in Role	Number of Respondents	% of Respondents
< 1 year	9	31%
1-4 years	4	13.7%
5-9 years	4	13.7%
10-19 years	9	31%
No answer	3	10.3%
<b>Total:</b>	<b>29</b>	<b>100%</b>

### 2.1.3 Gender

The gender profile comprised 60 female and 2 male respondents.

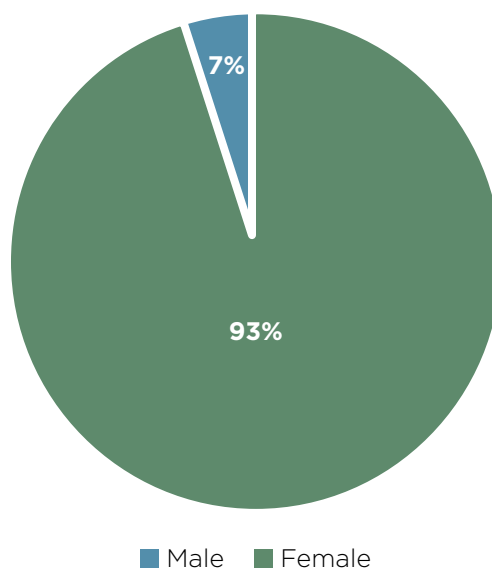


Figure 1: Gender of respondents

# 3

## 3. Parenting Support Champions

### 3.1 Reasons for becoming a Parenting Support Champion

Respondents identified a variety of reasons for volunteering to become a PSC. Many viewed the PSC role as being aligned to their existing role (16.2%); others viewed the role as an opportunity to support and empower parents (14.7%) and enhance both knowledge and practice (16.2%).

Table 4: Reasons for becoming a PSC

Reasons for becoming a PSC	Number of Responses	% of Responses
In line with role	11	16.2%
Personal interest in parenting support	4	5.9%
Enhance knowledge and practice	11	16.2%
Latest best practice/evidence-informed	7	10.3%
Keep domestic abuse on the agenda	1	1.5%
Networking	5	7.4%
Integrate local PS <sup>3</sup> into Tusla parenting plan	4	5.9%
Support/empower parents	10	14.7%
Facilitate access to support services for parents	2	2.9%
Improve outcomes for children	4	5.9%
Access supports for early years	1	1.5%
Signpost key messages/discussion on PS	3	4.5
Work collaboratively with parents	1	1.5%
PS is key to child welfare	1	1.5%
PS is key to early intervention	1	1.5%
Train others in PS	1	1.5%
Advocate for parents	1	1.5%
<b>Total:</b>	<b>68</b>	<b>100%</b>

<sup>3</sup> PS = Parenting Support.



### 3.2 Aspects of the Parent Support Champion Role that are of Most Interest

Respondents were asked to list aspects of the PSC role that were of most interest to them. Answers very much reflect respondents' expectations for the role, with the majority citing supporting parents and giving parents a voice as primary reasons for becoming a PSC (23%).

Table 5: Aspects of the PSC role of most interest

Aspects of PSC role of most interest	Number of Responses	% of Responses
Active participation of practitioners	1	1.5%
Be part of a nationwide initiative	5	7.7%
Supporting parents/give parents a voice	15	23%
Identify needs of parents	2	3%
Develop parent learning communities	1	1.5%
Networking with professionals and agencies	9	13.9%
Need for local implementation of PS	5	7.7%
Identify what works/best practice	4	6%
Shared learning experiences in PS	1	1.5%
Further professional education and training	3	4.5%
Identify services and supports in the community	2	3%
Improve outcomes for children and families	3	4.5%
Investing in early years	1	1.5%
Promote PS (key messages) with parents	6	9%
Collaborative mapping	1	1.5%
Promote PS 'buy-in'	1	1.5%
Parenting 24/7 and toolkit/key messages	2	3%
Corporate Commissioning in Tusla	1	1.5%
Advocate for parents	1	1.5%
Identify services available	1	1.5%
<b>Total:</b>	<b>65</b>	<b>100%</b>

### 3.3 Enhancing Parenting Support through Parenting Support Champions

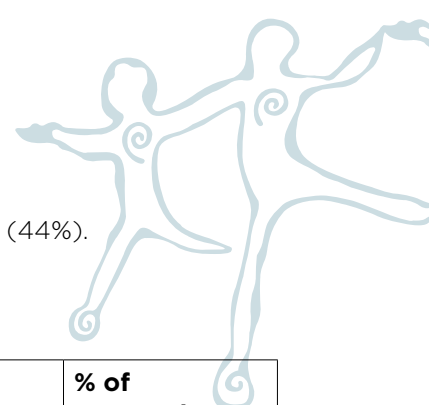
There was a mix of views on how parenting support could be enhanced through the role of PSC. 13% were of the view that parenting support could be enhanced through increased knowledge of effective, evidence-based programmes.

Table 6: Views on how parenting support will be enhanced through PSCs

<b>PSC Enhancing Parenting Support Through:</b>	<b>Number of Responses</b>	<b>% of Responses</b>
Share expertise/networking	4	7.5%
Maximise implementation of parental participation	2	3.7%
Tailor initiatives to identified needs	2	3.7%
Listening to the voice of parents	3	5.5%
Support/respect/empower parents	5	9%
Identify gaps and strengths/plan services	3	5.5%
Promote same messages nationwide/universal approach	3	5.5%
Promote parenting support with other organisations/ policy-makers	4	7.5%
Putting parenting support as key priority	3	5.5%
Multidisciplinary approach	1	1.9%
Improve services and outcomes	4	7.5%
Identify what works/evidence-based	7	13%
Strengths-based/participatory practice	1	1.9%
Engage parents in parenting programmes	3	5.5%
Coordinate PS service already in place	2	3.7%
Engage parents in services available	1	1.9%
Recognition of role at a local and national level	2	3.7%
Enhancing communication and create awareness	2	3.7%
PS crucial part of Family Support	1	1.9%
Increase PS knowledge within organisation	1	1.9%
<b>Total:</b>	<b>54</b>	<b>100%</b>

### 3.4. Experiences of PSC Induction and Training

Respondents were asked to rate and comment on their experiences of induction to the PSC initiative and on their experiences of training received as part of the programme to date.



### 3.4.1 Experiences of Induction

In relation to experiences of induction, the majority rated the experience as good (44%).

Table 7: Induction rating

Induction Rate Scale	Number of Respondents	% of Respondents
Very Good	6	24%
Good	11	44%
Unsure	4	16%
Poor	2	8%
Very Poor	-	-
Not Applicable (4) <sup>4</sup>	-	-
Did not Receive Induction	2	8%
<b>Total:</b>	<b>25</b>	<b>100%</b>

Comments on induction were varied, with 27% of responses suggesting that there was confusion on the role of the PSC, and 15% maintaining that their experience of induction was pleasant.

Table 8: Experiences of induction

Experiences of Induction	Number of Responses	% of Responses
Vague explanation of the project	2	7.7%
Confusion about the role	7	27%
Clear purpose of training	1	3.8%
Good overview of role	1	3.8%
Disconnect between national and local level	1	3.8%
Induction/training was pleasant	4	15%
Possibility of networking	2	7.7%
Layout of room is unsuitable	1	3.8%
Learning opportunity/reflective process	3	11.5%
Parenting support highlighted and prioritised	1	3.8%
Content was poor/not new/repeated	3	11.5%
<b>Total:</b>	<b>26</b>	<b>100%</b>

<sup>4</sup> This question was not applicable to those who described themselves as a Prevention Partnership and Family Support (PPFS) manager, a Child and Family Support Network (CFSN) coordinator, a Meitheal Network coordinator, and a Triple P Mentor.

### 3.4.2 Experiences of Training

In relation to experiences of training, similar to experiences of induction the majority of respondents rated their experience as good (48%).

Table 9: Training Rating

Training Rate Scale	Number of Respondents	% of Respondents
Very Good	6	24%
Good	12	48%
Unsure	3	12%
Poor	2	8%
Very Poor	-	-
Not Applicable (4) <sup>5</sup>	-	-
Did not Attend	1	4%
Other <sup>6</sup>	1	4%
<b>Total:</b>	<b>25</b>	<b>100%</b>

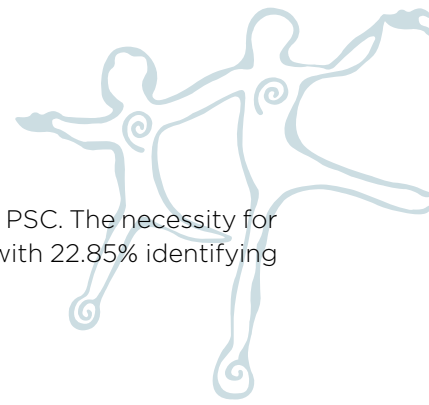
Comments on respondents' experiences of training were also varied. Once again the issue of confusion about the role of the PSC was to the forefront of responses given, with 17.24% commenting on this.

Table 10: Experiences of Training

Experiences of Training	Number of Responses	% of Responses
Training dates not suitable	2	6.89%
Training materials are suitable	3	10.34%
Training is good, concise, focused and evidence-led	4	13.79%
Training on key messages was good	1	3.44%
Videos are not suitable for vulnerable families	1	3.44%
Uncertainty on what is expected/role	5	17.24%
Information overload/additional work	3	10.34%
Trainers were approachable/professional/good atmosphere	1	3.44%
Plans to implement key messages	1	3.44%
Need for resources	1	3.44%
Training could be shorter	2	6.89%
Training was very basic	1	3.44%
Too soon to evaluate accurately	2	6.89%
24/7 training was interesting	2	6.89%
<b>Total:</b>	<b>29</b>	<b>100%</b>

<sup>5</sup> This question was not applicable to those who described themselves as a Prevention Partnership and Family Support (PPFS) manager, a Child and Family Support Network (CFSN) coordinator, a Meitheal Network coordinator, and a Triple P Mentor.

<sup>6</sup> 'Other' in this case refers to one respondent who rated their experience of training as both very good and good.



### 3.5 Ideas/Suggestions for the Role of PSC

The respondents put forward a number of ideas and suggestions for the role of the PSC. The necessity for local area structures for parenting support was a common theme in this section, with 22.85% identifying this as a need.

Table 11: Ideas and suggestions for the role of PSC

<b>Ideas and Suggestions for the PSC Role</b>	<b>Number of Responses</b>	<b>% of Responses</b>
Emphasise advocacy role	1	2.85%
Networking with champions	4	11.42%
Need of a clear definition of role of PSC	4	11.42%
Dissemination of role of PSC with other professionals (Tusla/non-Tusla CYPSC)	4	11.42%
Local area structures for PS are needed	8	22.85%
Include practical examples of PSC at a local level	1	2.85%
Funding opportunities/availability of resources	2	5.71%
Support for staff around parenting projects	1	2.85%
Standardise nationwide practice	1	2.85%
Additional learning for parental participation	1	2.85%
Input of PSC in learning groups	1	2.85%
Parental participation in PSC training activities	1	2.85%
Prioritise parents' needs and wants	1	2.85%
Dissemination of PS and key messages with parents	1	2.85%
Mapping local available services for parents	1	2.85%
Understand the impact of commissioning and corporate plan	1	2.85%
Advocate for parents	1	2.85%
Develop quality controls	1	2.85%
<b>Total:</b>	<b>35</b>	<b>100%</b>



### 3.6 Other Comments

Respondents were given an opportunity to provide additional comments at the end of the questionnaire. The comments were varied, with local area needs analysis highlighted as a necessity (16.6%) and CYPSC practitioners and coordinators seen to have a crucial role in the PSC process (16.6%).

Table 12: Other comments from PSCs

<b>Other Comments</b>	<b>Number of Responses</b>	<b>% of Responses</b>
Identify needs at a local level	3	16.6%
Role is understood differently by Tusla and non-Tusla staff	1	5.5%
Disconnect between national and local	1	5.5%
CYPSC practitioners and coordinators crucial role to play	3	16.6%
Public awareness campaign on all elements of PS needed	1	5.5%
Information on examples of what works needed	1	5.5%
Improve availability of PSC event locations nationwide	1	5.5%
Aim to normalise parental issues	1	5.5%
Promote prevention-focused measures	1	5.5%
Potential of social media for parental engagement/support	1	5.5%
Information on how to advocate for parents appropriately	1	5.5%
Level of training and activities seen as unnecessary	1	5.5%
Role of PSC unclear	1	5.5%
Query if parents have been involved in design of the PSC	1	5.5%
<b>Total:</b>	<b>18</b>	<b>100%</b>

# 4



## 4. Respondents other than PSCs

This section contains the findings pertaining to those who are not classified as PSCs and have identified themselves as: PPFS manager, CFSN coordinator, Meitheal Network coordinator, or Triple P Mentor.

### 4.1 Enhancing Parenting Support through Parenting Support Champions

Respondents identified a number of ways that the role of PSC could enhance parenting support. The scope that the role has for multidisciplinary and inter-agency work was identified by 14.2% of respondents as enhancing parenting support work more generally.

Table 13: Other views on ways in which parenting support will be enhanced through the role of PSCs

<b>PSC Enhancing Parenting Support Through:</b>	<b>Number of Responses</b>	<b>% of Responses</b>
Scope for multidisciplinary/inter-agency work	2	14.2%
Standardising evidence-based parenting programmes	1	7.1%
Share resources/information relevant for parents	1	7.1%
Listen to parents' needs	1	7.1%
Mapping and dissemination of PS	2	14.2%
CYPSC	1	7.1%
Parental Participation projects	1	7.1%
Subgroups	1	7.1%
Train parents to deliver programmes	1	7.1%
Signposting	1	7.1%
Coordinating	1	7.1%
Inspiring and Energising	1	7.1%
<b>Total:</b>	<b>14</b>	<b>100%</b>

## 4.2 Ideas/Suggestions for the Role of PSC

The respondents put forward a number of ideas and suggestions for the role of the PSC. Such suggestions and ideas were varied across a number of areas.

Table 14: Other ideas and suggestions for the role of PSCs

<b>Ideas and Suggestions for the PSC Role</b>	<b>Number of Responses</b>	<b>% of Responses</b>
Best practice in parenting support	1	14.28%
Opportunities to learn/network	1	14.28%
Disseminate key messages	1	14.28%
Area-based and regional meetings on PS for PSCs	1	14.28%
Identify gaps in service provision	1	14.28%
Ensure parents' voices are heard	1	14.28%
Utilise CFSN meetings	1	14.28%
<b>Total:</b>	<b>7</b>	<b>100%</b>

## 4.3 Other Comments

Respondents were given an opportunity to provide additional comments at the end of the questionnaire. As with the PSC responses, these comments were varied.

Table 15: Comments from other respondents

<b>Other Comments</b>	<b>Number of Responses</b>	<b>% of Responses</b>
Include parents' expertise to identify needs	1	20%
Support services in local area	1	20%
Ensure resources are available for innovative responses	1	20%
PSC networking day - interesting	1	20%
Promote positive parenting supports that are available in local areas	1	20%
<b>Total:</b>	<b>5</b>	<b>100%</b>

# 5



## 5. Conclusion

This research is part of a study to examine the process, implementation and outcomes of the Tusla Parenting Support Champions Project formed as part of the parenting work stream of the Prevention Partnership and Family Support Development and Mainstreaming Programme. This questionnaire is one element of the evaluation of the Parenting Support Champions project, with further research planned.

### 5.1 Key Messages

- Respondents identified a variety of reasons for volunteering to become a PSC. Many viewed the PSC role as being aligned to their existing role; others viewed the role as an opportunity to support and empower parents and enhance both knowledge and practice. Moreover, the opportunity to support parents was an aspect of the role of most interest to the respondents.
- There was a mix of views on how parenting support could be enhanced through the role of the PSC, with increased knowledge about effective, evidence-based programmes being the primary method identified for such enhancement.
- A number of respondents who did not identify themselves as PSCs maintained that parenting support could be enhanced by increasing multidisciplinary and inter-agency work which could be achieved by the scope of the PSC role.
- Experiences of induction were rated highly by the majority of respondents, and for many the experience was pleasant. However, most comments on experiences of induction maintained that there was confusion around the role of the PSC.
- Experiences of training were rated highly by the majority of respondents, and once again confusion around the role of the PSC was to the forefront of comments, as were concerns around information overload and additional work. However, many saw the training itself as good, concise, focused and evidence-led.
- The most common suggestion proposed for the role of the PSC was the need for local area structures for parenting support. For others, a clear definition of the role of the PSC is required, with dissemination of the role to other professionals seen as being needed. Respondents who did not identify themselves as PSCs also put forward a variety of suggestions for the role of PSC, including area-based and regional meetings on parenting supports for PSCs as one example.
- Additional comments by PSCs were varied in nature, with CYPSC practitioners and coordinators seen to have a crucial role in the PSC process. Local needs analyses are seen as a necessity for some respondents. Additional comments provided by respondents other than PSCs were also varied, with one example being the need to ensure that resources are available for innovation in this area.



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