

Implementation of Parenting Support Policy: Reflections and Recommendations from the Parenting Network

This is the third and final briefing paper in a suite of three produced by The Parenting Network to help inform decision-making and policy development and implementation on the island of Ireland, in relation to supporting parents in their parenting role. The aim of this paper is to reflect on, and respond to, the implementation of parenting support actions within *'First 5: A Government Strategy for Babies, Young Children and their Families 2019 – 2028'* (First 5) in Ireland.

What is the Parenting Network?

In 2010, the Centre for Effective Services (CES) established 'The Special Interest Group – Supporting parents in their Parenting Role'. This group was re-branded in 2015 to become The Parenting Network (which will henceforth be referred to as 'The Network'). The Network is an all-island group including agency Directors, CEOs, professional bodies, practitioners, academics and researchers in the relevant sectors.

Along with promoting the value of parenting support in its broadest sense, The Parenting Network has had a crucial role in advocating support for parents in their parenting role as a policy specific area since its inception. In Ireland, The Network has welcomed, *'First 5 – A Government Strategy for Babies, Young Children and their Families'* (First 5) and subsequently its implementation plan. Equally its members in Northern Ireland have been actively involved in consultation processes contributing to the finalisation of the Family and Parenting Support Strategy (FPSS) NI.

Further information about the Parenting Network is available on the website – www.theparentingnetwork.net

First 5 – An Overview

First 5 is an ambitious, complex and detailed 10-year whole of government strategy which adopts a systems level approach aimed at consolidating all the services which a child and their family may encounter in the all-important first five years of life. The strategy has a strong focus on Early Learning and Care (ELC), child health and parenting. While it is not a dedicated parenting support strategy, it marks a key milestone for the parenting sector with the commitment to build a national parenting support infrastructure in Ireland. The strategy has 170 actions organised across four main goals:

- Strong and supportive families and communities
- Optimum physical and mental health
- Positive play-based early learning
- An effective early childhood system.

The strategy proposes that parenting support actions be delivered across different Government Departments, such as Health, Justice and Children. This paper will reflect on:

1. The 'First 5' Implementation Plan
2. Those 'First 5' actions that have specific relevance to parenting support including:
 - Establishing a parenting support infrastructure
 - Integrating supports for parents on the ground
 - Disseminating parenting information
 - Integrating service delivery
 - Researching and learning
3. Those recommendations which are highlighted for consideration during the first review phase of the Implementation Plan, in advance of the second phase of implementation which is due to take place between 2021 and 2024.

As also outlined in our previous two Briefing Papers, parenting support is defined¹ as “*a range of information, support, education, training and counselling and other measures or services that focus on influencing how parents understand and carry out their parenting role*” (Daly, 2012).

1. First 5 Implementation Plan

Governance

'First 5' will be governed through the existing Better Outcomes Brighter Futures (BOBF) Implementation Structure. At a local level, the governance structures proposed are:

- Children and Young People's Services Committees (CYPSCs)
- Local and Community Development Committees
- Early Learning and Care (ELC) infrastructures

The structures outlined above have a considerable workload and some, specifically the CYPSC infrastructure which is already in place, has minimal supports and resources. There are no additional resources described in 'First 5' to support either national or local implementation infrastructures.

¹ 'First 5' proposes many progressive wider supports to parents such as parental leave, family flexible working, breastfeeding at work, family-friendly community planning etc.

Whole of Government Strategy versus Policy Integration

'First 5' has a range of government departments and statutory agencies responsible for different actions. In this way, the implementation process itself could promote a silo effect, with the risk that parenting support services could become compartmentalised. Whole of government actions could be viewed as an 'add-on' to business as usual for government departments. Alternatively, they may be identified as 'belonging' to only one agency or government department rather than the premise that *'parenting and family support is everyone's business'* (Department of Children and Youth Affairs, 2015).

Effective policy integration ensures that policies are adopted and integrated into each government department or statutory agency's strategy. The movement towards 'Health in All Policies' (World Health Organisation, 2014) is one example which illustrates that health policies cannot be addressed solely by Health Departments and agencies, but must be embedded in other policy areas such as education or employment.

If 'First 5' is to be successfully implemented, then parenting actions will require an effective policy integration approach so that Health, Education and Children and their reciprocal agencies, align with the policy position of First 5.

Funding

There is, as yet, no commitment of whole of government funding to support the implementation of the actions outlined in 'First 5'. The resourcing of each action is to be sought by the relevant Government Departments. Many actions involve:

- A continuation of existing funding
- Scoping of funding costs
- A commitment to a new model of funding
- Actions being dependent on funding.

In the event of competing for departmental priorities, there is a risk that some actions could be side lined with others moving ahead in an uncoordinated way.

The Community and Voluntary Sector as key implementation partners

The community and voluntary sector² is named as a partner in only 3 of the 170 'First 5' actions. This sits in stark contrast to the broad and diverse range of parenting services, supports and information that it provides. The community and voluntary sector has frequently been an innovator in developing parenting services in response to

² The NGO sector is referred to in two additional actions, this is not as partners but as part of a network to disseminate parenting information during the final year of the 3-year implementation plan.

population need. For example, they have established parenting supports through the prison services, for lone parents and families experiencing homelessness. It also has a strong track record in enhancing learning in the field by combining on the ground expertise with international evidence-based practice to introduce and evaluate - often in partnership with Third Level institutions - new programmes and supports in the Irish context. For example, areas such as infant mental health have grown exponentially due to the commitment of the community and voluntary sector. Furthermore, the sector leads in the delivery of community based parenting supports, complementing the work of, and collaborating with, statutory sector partners such as Tusla, within child and family networks. It also supports the work of the Health Service Executive (HSE) by delivering many health promotion supports (e.g. weaning, breastfeeding, and infant mental health) to parents in community settings.

Review process

'First 5' commits, in its structure and design, to an ongoing process of reviewing and planning in three yearly cycles. This enables learning, reform or even discontinuing actions if necessary and is much welcomed. However, it is unclear as to how stakeholders and those implementing the actions on the ground can feed into this review cycle. Equally unclear, is how the views of parents and children will be incorporated into the review process. A review process will also be necessary to address any unanticipated external events, such as the current COVID-19 pandemic. Not only is it likely that this crisis will have significant repercussions for the implementation timetable, but priorities, funding, and structures may also change. Furthermore, the COVID-19 experience has shone a light on areas of profound inequality. It has highlighted the need for changes in priorities in both policy and practice as well as the additional pressures and demands on many families and, in particular, one-parent families, those families who have children with additional needs, parents with health needs and those whose circumstances have changed financially in light of the crisis. Access to virtual ways of connecting with services has now become essential for parents, thereby creating potential barriers to accessing, or engaging with, supports and information.

Parenting Support System: Is the current system adequate to deliver on the actions of First 5?

While 'First 5' addresses many foundational building blocks to support an early childhood infrastructure, it relies on existing services. Here, we will explore the current interagency working context and the capacity of the community and voluntary sector (a primary delivery mechanism) to respond to, and deliver, actions outlined in 'First 5'. Both of these are elements of a complex system of services, structures and legislation which provide parenting supports.

Interagency working

Interagency working is essential for the delivery of effective parenting support. 'First 5' outlines some progressive actions to enhance how our services work together. However, these are largely bottom-up actions which, while helping to promote integrated delivery, cannot address broader national challenges and structural barriers to

service cooperation. At present, there are four separate joint working protocols³ supporting service cooperation, indicating that integrated service delivery requires guidance and shared agreements at a national level. Nationally and locally, the CYPSCs have led the way in the promotion of service cooperation and joint working with considerable success. However, it is important to build on this and a review of integrated working nationally – as well as consideration of comprehensive national guidance for service cooperation – is needed to ensure the actions of ‘First 5’ are successfully implemented.

The community and voluntary sector

The community and voluntary sector is a primary delivery mechanism for parenting supports. ‘First 5’ positively identifies the need for interagency early childhood workforce training and the creation of quality standards to guide the delivery of parenting supports. Additionally, ‘First 5’ proposes a future with enhanced data sharing⁴ across sectors and agencies. This will significantly improve our learning both in terms of the needs of parents and children and also in service planning and delivery. However, such developments require adequate resourcing for all involved in delivering services to children and their families.

Community and voluntary services range in size from large national bodies with considerable economies of scale to smaller local structures. Nonetheless, both have the same requirements to deliver competent services and to respond to growing quality improvement, training, IT and data management demands.

Over the past 5-10 years, the community and voluntary sector has seen a significant withdrawal of statutory representation from their governance structures. This has reduced connectivity between the statutory and voluntary sector. Previously, this promoted the sharing of knowledge, resources and often supported joint training. More recently, the impact of COVID-19 has placed additional pressures on the sector. The current pandemic has limited the sector’s ability to generate income while also increasing the needs of the families being served.

2. First 5 Actions with specific relevance to parenting support

Establishing an infrastructure for the delivery of parenting supports in Ireland

The establishment of the Parenting Support Policy Unit within the first year of the Implementation Plan of First 5 was a significant policy milestone. Providing a framework for, and consolidating how, parenting supports are

³ Joint Protocol for Interagency Collaboration between the Health Services Executive and Tusla to promote the best interests of Children and Families (Tusla and the HSE, 2017)
Framework for Collaborative Working between Education and Health Professionals (Progressing Disability Services Education and Health Subgroup, 2013)
Joint Working Protocol Primary Care, Disability & Child and Adolescent Mental Health Services (HSE, 2017)

Hidden Harm: Seeing through Hidden Harm to Brighter Futures – A Strategic Statement (HSE / Tusla, 2019)

⁴ While this will include all sectors in the future the initial actions focus primarily on the Newborn Clinical Management systems(HSE), National Immunisation Information Systems(HSE) and National Childcare Information System (Tusla)

provided in Ireland, has been a central recommendation of The Parenting Network. The Unit's role in building inter departmental links and embedding parenting support across Government policy, will also support and enhance policy integration.

Additional actions which contribute to a framework to support the delivery of parenting supports in Ireland are listed below and they include the community and voluntary sector as partners in implementation:

- To develop a tiered model of parenting supports based on progressive universalism for all families which will include a national approach to home visiting
- To align commissioning, funding and performance monitoring of parenting support services with quality standards.
- To develop quality standards for parenting supports and services.

The Parenting Network has advocated for progressive universalism supporting parents in all contexts, and the commitment to develop a tiered model of parenting supports as well the exploration of a national approach to home visiting, is very welcome.

The development of quality standards should incorporate the learning from research and on the ground best practice evidence. The papers [‘A Collaborative All-island Approach to Parenting Support’](#) and [‘An Action Plan on Parenting’](#) developed by The Parenting Network, expand on some of the fundamental principles for delivering parenting support on the island of Ireland. A unique opportunity now exists to promote cross sectoral ownership of parenting supports by embedding parenting standards into routine practice for all services working with children, parents and families.

Supporting parents on the ground – how to ensure integration

Parenting support actions within ‘First 5’ fall into child health specific or more general information and other support categories. There is a risk, however, given the division of implementation responsibility, that these become siloed. The community and voluntary sector has a crucial role in supporting health promotion through its delivery of parenting and other community health supports, for example, the development of a ‘weaning programme’ in partnership with a local community dietician. This model has now become embedded in many communities, sometimes led by the community and voluntary sector or delivered in partnership with Public Health Nurses or dieticians.

Additionally, community and voluntary groups support breastfeeding and infant mental health such as Cuidú, Le Leche League, Area Based Childhood Programmes and Community Mothers Programmes. Ensuring inclusion of the community and voluntary sector in the design and implementation of these actions, would provide essential on the ground expertise. Co-designing and co-delivering on these actions will also strengthen interagency working on the ground between statutory and voluntary agencies.

Information dissemination to parents – coordinating parenting support information

The Implementation Plan has a range of parent information actions, some of which are noted above and which include:

- Child health and wellbeing specific information actions with targeted public information campaigns
- Maternal and infant mental health information action and public information campaign
- Parents' role in early learning information and public information campaign
- Positive Parenting information and public information campaign
- Supporting transitions to school information

While there is an action exploring the development of a single platform where parenting information can be accessed, it is not clear how this will interface with the HSE's mychild.ie website. Additionally, many of the information actions are the responsibility of different statutory agencies or government departments. This could result in information being service specific rather than being properly disseminated by, and across, all sectors. In an age of information overload for parents, it will be more important than ever for parents to have one point of contact for all relevant information.

Integrated service delivery actions

'First 5' outlines several actions which explicitly support integrated service delivery from a bottom up perspective:

- Commission and undertake research to explore the potential of Early Learning and Care (ELC) settings to become a 'hub' for collaborative working with families.
- Explore and pilot Family and Early Childhood Centres that bring together a range of services to support parents and children.
- Develop an Early Childhood Workforce which will develop opportunities for all professionals working with babies, young children and their families to learn together and develop collaborative working approaches.
- Pilot the development of "No Wrong Door" policy in services for babies, young children and their families which will be delivered in conjunction with Child and Family Support Networks and CYPSCs.

'First 5' also outlines several additional parenting support actions⁵ which address the need for supports to be embedded in local communities and within services – an approach which is well supported by evidence promoting the engagement and participation of parents. While these actions are to be welcomed, there may be a

⁵ Exploration of family and early childhood centres and development of a family 'hub' model for ELC settings; Enhancing the role of libraries as sources of information and resources for parents; Building on the parenting and toddler group initiative; Provision of 'Book Bags' and 'Baby Boxes' to all new parents

risk that without national/regional integrated leadership and 'buy in', these 'bottom-up' approaches will not deliver the kind of integrated working required to effectively support parents.

Research and learning

Importantly, 'First 5' also outlines research actions to build on ongoing national government commitments to the lives of children and their families such as *Growing Up in Ireland* and the *What Works* initiative. The commitment to support data sharing between agencies is a welcome first step. 'First 5' commits to a dedicated Research Observatory and Research and Evaluation Programme, which will significantly add to our knowledge of the lives of children and their parents in the early years.

3. Our Recommendations

1. **Governance:** Adequately resource all implementation structures to ensure the success of First 5.
2. **Whole of Government policy versus policy integration:** During the second three year phase of implementation, promote policy integration across government departments and statutory agencies. This will ensure that all Government Departments, statutory agencies, sectors and disciplines have shared ownership and responsibility to support consistent and positive parenting information and supports.
3. **Funding:** Provide a dedicated ring-fenced budget to implement the strategy, ensuring cross-departmental agreements and shared accountability in terms of implementation.
4. **The Community and Voluntary Sector:** Recognise and value the role of the community and voluntary sector and establish a 'networked governance'⁶ approach for relevant parenting support actions during the next phase of implementation.
5. **Review Process:**
 - a. Outline a mechanism for consultation with all stakeholders, including parents and children, to inform the evaluation of the strategy and the three yearly review process.
 - b. In light of the recent COVID-19 crisis, consider the need for universal and targeted additional parent and family supports with new creative and flexible delivery mechanisms.
6. **Strengthen the current Parenting Support System:**
 - a. Collate the learning of 'what works' for integrated service delivery in an Irish context - identifying structural barriers.
 - b. Review the use of existing service cooperation protocols and the learning from other jurisdictions such as the Services Co-operation Act (2015) NI or 'Duty to Co-operate' (2014) UK.
 - c. Strengthen integrated service delivery by enhancing resources and building on the work completed to date by the Children and Young People's Services Committees' infrastructure
 - d. Ensure that the community and voluntary sector is sufficiently resourced and supported in its delivery of parenting supports.

⁶ Networked governance is a concept applied across different sectors bringing together all relevant stakeholders, public and private who work collectively to design and implement actions under shared outcomes in a non-hierarchical collective network with shared responsibility. This network can be actively steered by Government or it could be self-steering (Huppé, Creech, & Knoblauch, 2012).

- 7. Parenting Support Structure:**
 - a. Ensure that the Policy Unit is resourced and protected during future Government formations and in the longer-term. It is essential to oversee a robust, progressive, parenting support infrastructure which is cross-sectoral, interdisciplinary, inter-agency and community-based.
 - b. Consider expanding the quality standards for parenting supports to quality standards for all services working with children, parents and families.
- 8. Integration of parenting supports:**

Include the community and voluntary and health sector in the design and implementation of all parenting actions, (including child health and general actions) during the next three year phase of implementation planning.
- 9. Parenting Support Information:**
 - a. Coordinate all parenting information to ensure consistency and clarity for parents.
 - b. Ensure shared access to the same health promotion and wider parenting information for all services working with parents. Consider extending the 'Making Every Contact Count' (HSE, 2016) policy to all services.
 - c. Engage stakeholders in the development and implementation of health specific parenting information actions in order to maximise impact.
- 10. Integrated service delivery:**
 - a. Establish from the earliest stage, shared accountability from all relevant government departments and statutory agencies. These should include health, education, youth, justice, ELC and the community and voluntary sector to support bottom up integrated service delivery with integrated national leadership.
 - b. Ensure that the 'No Wrong Door' policy is implemented across all government departments, statutory agencies and the community and voluntary sector with national, regional and local leadership support.
- 11. Research and learning:**
 - a. Build on the early childhood research commitments in 'First 5' to include research and evaluation of what works in terms of parenting supports.
 - b. Enhance the existing Better Outcomes, Brighter Futures' indicators⁷ by promoting data sharing across sectors to increase the range of indicators reflecting the lives of children from pregnancy to 5 years of age. Include indicators reflecting parenting implications during this life stage.

⁷ BOBF outlines 70 indicators 25 of them cover the early years life stage, but only 9 of them are specific for children aged 0-5.

Next steps for Parenting Support Policy in Ireland

'First 5' marks a significant step in establishing parenting support infrastructures in Ireland. Its early years focus, however, limits the development of a Parenting Support Strategy for all children. Many European countries⁸ have developed a dedicated national strategy on parenting support, and NI is due to launch their *Family and Parenting Support Strategy* in 2020. The Parenting Network advocates for an interdepartmental, whole-system parenting support strategy for all children at all stages of their development, building on the strong foundations established in 'First 5'. This strategy should clearly outline how parenting supports will be addressed across a wide range of different Government Departments, statutory agencies and the voluntary sector. This should include education, all relevant health services, youth, justice, ELC and welfare and family support.

Conclusion

First 5 was a long-awaited early years strategy with its origins in 'Right from the Start' (Department of Children and Youth Affairs, 2013). It is comprehensive, ambitious and carefully considered in terms of implementation. It has recognised and identified a number of key structural and foundational 'building blocks' which are necessary to deliver on the aspirations contained within the many actions. The strategy was widely welcomed, primarily because it outlines for the first time, the breadth of actions, services and agencies involved with a child and their parents during the first five years of life.

The recommendations outlined above are not to detract from the aspirations outlined in 'First 5', but are reminders that implementation is a challenging and complex process. Research has indicated that there are many factors required for successful implementation including; attention, time, resources, whole child/whole system change, shared accountability and leadership and commitment to policy integration at all levels.

This paper highlights the critical role of the community and voluntary sector in the delivery of parenting and advocates for a more significant and collaborative role for the sector within the context of a networked governance approach to implementation.

The clear commitment to parenting support and the establishment of a dedicated Parenting Support Policy Unit in 'First 5' is much welcomed, and its clear commitment to parenting support is something for which The Parenting Network has been advocating over the past 10 years. This, along with the many other actions outlined, will contribute to the development of a systematic infrastructure to provide accessible, effective and timely supports to parents and their families. The Network remains committed to its goals and is looking forward to supporting the work of the Parenting Support Policy Unit and all Departments and agencies with a role in parenting support.

⁸ Malta, Scotland and Sweden

References

- Ahlers-Schmidt, C., Schunn, C., & Redmond, M. e. (2017). Qualitative Assessment of Pregnant Women's Perceptions of Infant Sleep Boxes. *Global Pediatric Health*, doi: 10.1177/2333794X17744948.
- Daly, M. (2012). Parenting Support - A New Policy Domain in Northern Ireland and Elsewhere. *Knowledge Exchange Seminars* (pp. 1-7). Stormont: Northern Ireland Assembly.
- Department of Children and Youth Affairs. (2013). *Right from the Start: Report of the expert advisory group on the early years strategy*. Dublin: Department of Children and Youth Affairs.
- Department of Children and Youth Affairs. (2014). *Better Outcomes Brighter Futures: National policy framework for children and young people 2014-2020*. Dublin: DCYA.
- Department of Children and Youth Affairs. (2015). *High-Level Policy Statement on Supporting Parents and Families*. Dublin: Government Publications.
- Department of Children and Youth Affairs. (2018). *First 5 - A Whole of Government Strategy for Babies, Young Children and their Families 2019-2028*. Dublin: Government of Ireland.
- Department of Health, Social Services and Public Safety. (2010). *Healthy Child, Healthy Future. A Framework for the Universal Child Health Promotion Programme in Northern Ireland. Pregnancy to 19 years*. Belfast: DHSSPS.
- HSE / Tusla. (2019). *Hidden Harm: Seeing through Hidden Harm to Brighter Futures*. Dublin: Tusla/Hse.
- HSE. (2016). *Making Every Contact Count A Health Behaviour Change Framework and Implementation Plan for Health Professionals in the Irish Health Service*. Dublin: Health Service Executive.
- HSE. (2017). *Joint Working Protocol Primary Care, Disability and Child and Adolescent Mental Health Services*. Dublin: HSE.
- Huppé, G., Creech, H., & Knoblauch, D. (2012). *The Frontiers of Networked Governance*. Manitoba: International Institute for Sustainable Development.
- Ministry for the Family and Social Solidarity, The Government of Malta. (2016). *National Strategic Policy for Positive Parenting 2016-2024*. Valletta: Government of Malta.
- Progressing Disability Services Education and Health Subgroup. (2013). *Framework for Collaborative Working between Education and Health Professionals*. Dublin: Issued by the Education and Health Sub-Group of the Progressing Disability Services for.
- Scottish Government. (2012). *National Parenting Strategy Making a positive difference to children and young people through parenting*. Edinburgh: Scottish Government.
- Socialdepartementet. (2009). *Nationell strategi för ett utvecklat föräldrastöd: En vinst för alla*. Stockholm: Socialdepartementet.
- Tusla and the HSE. (2017). *Joint Protocol for Interagency Collaboration between the Health Services Executive and Tusla*. Dublin: Tusla / HSE.
- World Health Organisation. (2014). *Health in all policies: Helsinki statement. Framework for country action*. Helsinki: WHO.