

Centre for Public Health Research

**Evaluation of services for younger parents at
Halton Lodge Children's Centre**

Frances Mann

Catherine Perry

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Summary

Introduction

In 1999 a report by the Social Exclusion Unit (SEU) identified that the children of younger parents, and indeed younger parents themselves, were more likely to experience poor outcomes. The government's ten year Teenage Pregnancy Strategy marked a renewed focus on teenage pregnancy as a priority area for intervention. Central to its aims are the reduction of teenage pregnancy rates and; the provision of support which will improve the life chances of teenage parents and their children.

Sure Start local programmes are expected to reach certain targets regarding contact with, and registration of, pregnant women in their areas. In acknowledging the 'apprehensions of teenage parents about taking part in activities with older parents' (Sure Start Unit, 2005, p.57¹) the advice for working with teenage parents also highlights the need for centres to adopt a specialised, young person-centred approach to providing services for younger parents. The aim of this commissioned research project was to examine the provision of services for younger parents by Sure Start Jolly Giraffe at Halton Lodge Children's Centre.

Methodology

The principle aim of this research was to explore the processes and outcomes for Jolly Giraffe's services for younger parents through soliciting the views and experiences of those receiving and delivering these services. Focus groups and individual interviews were conducted with key staff and service users attending or facilitating either the 'Little Chimps' group for younger parents or the 'Younger Mums-to-be' group. In considering the objectives for the research the following themes were identified as the focus for investigation:

- role and purpose of Jolly Giraffe's services for younger parents;
- development of strategy and structure of sessions;
- the impact of social exclusion on teenage parents and their children;
- issues for accessing education, training and employment opportunities;
- partnership in service design and delivery;
- benefits of involvement;
- barriers to and incentives for participation;
- issues for future development.

¹ Sure Start Unit. (2005). *Sure Start Children's Centres: Practice Guidance*. Retrieved 7th January, 2006, from www.surestart.gov.uk

Key findings

Jolly Giraffe's services for younger people

- Younger people were clear in expressing their satisfaction with the groups they attended.
- In engaging with services many younger people had forged relationships with professionals. The degree of trust and confidence placed in facilitators was consistently evidenced during discussions with respondents.
- Forming close friendships was considered by participants to be an overwhelmingly positive outcome of involvement in groups.
- A desire to spend time with peer group, a feeling of 'social connectedness' appeared as a key incentive for participation.

Service development

- Systematic informal consultation with services users regarding the format and content of sessions has allowed staff to develop the service in response to service user needs.
- The views and experiences expressed by those in receipt of services for younger parents showed a high level of service user satisfaction with staff's current approach to facilitating sessions.
- Health visitor involvement was consistently highlighted as an incentive for mothers of young babies to attend the 'Little Chimps' group. The loss of this input had been felt by both staff and service users.

Recruitment

- The systems in operation for identifying potential service users are effective.
- Difficulties have been experienced in securing the attendance and participation of referred individuals.
- Responding to the needs of current service users has, to some degree, affected the ability of service providers to attract and maintain the involvement of new participants.
- There is a need for the identification of incentives for engagement and strategies for maintaining contact and participation.

Wider service use

- For many younger participants, reluctant to access mainstream services and activities, Jolly Giraffe was the only place they had regular contact with professionals.
- Facilitators provided young people with advice and information whilst, where appropriate, signposting them to appropriate agencies for support.
- Respondents from both groups expressed a clear preference for attending groups run specifically for younger people. Participants from the Younger Mums-to-be group voiced particularly negative views of attending groups run for 'older' participants.
- For several respondents, unsatisfactory experiences of agency involvement had affected their willingness to access and engage with services.

Social exclusion and support networks

- The themes of boredom, loneliness and friendship emerged as prominent issues for respondents when discussing their experiences of being a younger mum or younger mum-to-be.
- The feelings of 'belonging' to a network, through attendance at Jolly Giraffe groups, was repeatedly cited by respondents as a major factor in reducing their feelings of isolation.
- Group attendance, particularly for the 'Little Chimps' cohort had enabled social networks to be created which were a source of emotional and practical support outside the sessions.
- Respondents in the Younger Mums-to-be group highlighted the effect which feeling stigmatised in both their peer groups and wider society had on their feelings of self-worth and consequent willingness to access activities and services.

Conclusions and recommendations

Jolly Giraffe has succeeded in creating a welcoming supportive environment where younger pregnant women and parents can access advice and information whilst forging their own networks. Whilst systems for the identification and referral of younger people operate smoothly, enhanced information sharing and joint working could do much to secure the willingness of these people to access wider services available in the

community. Whilst evidencing the high level of service user satisfaction with the format and facilitation of groups, this study identified the need for service development to place greater emphasis on meeting the needs of potential service users. In order to address the issue of 'extended' attendance at Little Chimps, consideration could be given to the introduction of age related and time limited eligibility criteria for attendance.

The development of arrangements for multi-agency working will provide a vital opportunity for other professionals to build upon the relationships forged through service users' participation in Jolly Giraffe services. Of added benefit to those delivering services would be a more formalised approach to information sharing amongst partner agencies regarding current and proposed initiatives relating to younger parents or pregnant teenagers.

Chapter 1

Introduction and background

1.1 Introduction to the study

Jolly Giraffe is one of five local Sure Start programmes in Halton. It is a sixth wave programme, established in 2003 and is based at Halton Lodge Children's Centre in Runcorn. Prior to 2004, Jolly Giraffe's systematic analysis of the profiles of individuals accessing their services had shown younger parents to be a consistently under-represented user group. The introduction of services aimed at forging and developing links with younger service users thus formed part of Jolly Giraffe's strategy to widen the scope of their services. The Centre for Public Health Research, University of Chester, was commissioned to carry out an evaluation of these services for younger parents. As background to this work, some of the issues surrounding teenage pregnancy and parenthood will be presented, followed by details about Halton's Teenage Pregnancy Strategy and the response of Sure Start programmes to the issues of teenage pregnancy and parenthood.

1.2 Teenage pregnancy

The United Kingdom has the highest rate of teenage conceptions and births in Western Europe (Social Exclusion Unit [SEU], 1999; UNICEF, 2001). In 1999, the Government's Social Exclusion Unit launched a ten year Teenage Pregnancy Strategy (SEU, 1999). The principle aims identified in the Strategy were:

- to halve the rate of conceptions amongst under 18s in England by 2010;
- to achieve a reduction in the risk of long-term social exclusion for teenage parents and their children, by getting more teenage parents into education, employment or training.

The catalyst, and blueprint, for the introduction of a teenage pregnancy strategy had been the findings of the report produced by the Social Exclusion Unit (1999). This report aimed to provide a more detailed picture of the causes and consequences of teenage parenthood. The subsequent focus of New Labour policy makers on teenage pregnancy as a priority area for intervention reflected the finding that the children of younger parents, and indeed younger parents themselves, were more likely to experience poor outcomes. A more recent report for the Health Development Agency, (Swann, Bowe, McCormick & Kosmin, 2003), as part of their Evidence Briefing series,

reviewed literature relating to the study of teenage pregnancy and parenthood, and introduces its findings thus:

It is widely understood that teenage pregnancy and early motherhood can be associated with poor educational achievement, poor physical and mental health, social isolation, poverty and related factors. There is also growing recognition that socio-economic disadvantage can be both a cause and a consequence of teenage parenthood. (Swann et al., 2003, p.7).

In 2000, the 'Independent Advisory Group on Teenage Pregnancy' (TPIAG) was formed. This non-statutory body, whose terms of reference follow the two principle aims set out in the Teenage Pregnancy Strategy, is charged with the responsibility of monitoring progress on its implementation. The TPIAG, produces annual reports which review progress and make recommendations for government. Their latest report, released in September 2006, announced the United Kingdom's lowest teenage pregnancy rates for 20 years (Department for Education and Skills [DfES], 2006c).

As part of the Teenage Pregnancy Strategy the Government has placed a requirement on all local authorities to identify and implement strategies which will achieve a reduction in teenage pregnancy rates. In July 2006 the government produced 'Teenage Pregnancy Next Steps' a guidance document for local authorities and PCTs (DfES, 2006a). Contained in this document was a progress report on under-18 conception rates for top-tier local authorities. This report also featured examples of good practice taken from those authorities whose rates had reduced significantly. Results were taken from teenage conception rate statistics for 1998 and 2004 provided by the Office for National Statistics and the Teenage Pregnancy Unit. Based on results, authorities were awarded a 'traffic light rating' according to their performance in reducing conception rates. A red rating indicates an authority where little or no change had taken place, through to a green rating awarded to authorities where rates had reduced by over 15%. In a letter from the Minister for Children and the Minister for Public Health to primary care trust and local authority chief executives which accompanied the guidance, the key message was that, 'Areas need urgently to review their strategies in the light of the findings in this guidance and ensure that they develop ways to embed the lessons from successful areas within their Children & Young People's Plans' (DfES & DoH, 2006, p.2).

1.3 Teenage parenthood

Whilst the goal of reducing teenage pregnancy rates forms a central part of the Teenage Pregnancy Strategy, the Strategy places equal importance on the provision of

support which will improve the life chances of teenage parents and their children. The strategic approach to addressing the issue of social exclusion places its emphasis on 'support for teenage parents to reduce their long term risk of social exclusion by increasing the proportion returning to education, training or employment' (Teenage Pregnancy Strategy Evaluation, 2005, p.i).

A study by Hobcraft & Kiernan (2001) questions 'how far are the 'effects' of early motherhood on later outcomes due to childhood pre-cursors, especially experience of childhood poverty' (Hobcraft & Kiernan, 2001, p.495). The findings of this study conclude that there is 'a clear contrast between those who become mothers before age 23 and those who do not. For young women in particular, it is probable that early parenthood is directly implicated in the genesis of adverse outcomes later in life, through limiting opportunities and choices' (Hobcraft & Kiernan, 2001, p.515). However, a central theme in much of the current literature is the need, when referring to adverse outcomes, to consider them in the context of the wider social and economic situations of younger parents (Graham & McDermott, 2005; Bullen, Kenway & Hay, 2000; Kidger, 2004).

In presenting the context for policy and strategy which views teenage parenthood as an area of political and societal concern, it is also important to draw attention to the debate which warns against placing teenage parents at the centre of any moral or economic political agenda. For example, McDermott and Graham made the following comment.

Early motherhood is not a neutral subject – it is embedded in a range of moral, political and economic discourses and structures (Silva, 1996) that construct young parenting as both a social problem and a social threat. (McDermott & Graham, 2005, p.60).

Whilst supporting the evidence of poorer outcomes for younger parents and their children, an argument is also presented for the need to exercise more caution when defining and promoting 'solutions' to the issue of teenage pregnancy (Fallon, 2006).

1.4 Halton's Teenage Pregnancy Strategy

The overall teenage pregnancy rate amongst 15-19 year olds in Halton is 37.8 per 1000. Within the boundary for Sure Start Jolly Giraffe this figure rises to 58.2 per 1000. (Halton Children & Young People's Alliance Board, 2006a). During the 'Next Steps' review of local performance (DfES, 2006a), Halton was awarded an 'amber/red' rating which reflected a 7% decrease in its teenage pregnancy rates.

A key theme of government guidance regarding local teenage pregnancy strategies is the need for a more cohesive, co-ordinated approach to identifying need and delivering services. Halton's Children's Trust, known as the 'Children and Young People's Alliance', has at its strategic centre a 'Children and Young People's Alliance Board'. This body links to a network of sub task groups and boards charged with developing services and improving outcomes for children and young people. The delivery of Halton's Teenage Pregnancy Strategy comes under the remit of the 'Preventative Services Partnership Board' which, in its 2006/07 business plan declares its commitment to 'the development of common processes (which) will help promote better co-operation and integration between universal services such as schools, GP practices, early years settings, youth services and colleges and specialist support services, and across organisations in different sectors' (Halton Children & Young People's Alliance Board, 2006b, p.3).

1.5 Sure Start services for pregnant teenagers and teenage parents

Although many young parents manage very well, children's centres will need to develop strategies to target this group of families because research shows that teenage parents and their children are at increased risk of poor health and social outcomes. (Sure Start Unit: Practice Guidance, 2005, p.86).

In 2001 the Sure Start Plus initiative was introduced. Managed by the Teenage Pregnancy Unit, this pilot programme operates in 35 local authority areas and focuses upon providing one-to-one support to teenage parents. Personal Adviser posts are commonly based within multi-disciplinary teams and work specifically with this vulnerable needs group. Although Halton is not part of this pilot initiative, after 2006 provision of this individualised, targeted support will be the responsibility of mainstream service providers (Sawtell, Wiggins, Austerberry, Rosato, & Oliver, 2005).

Teenage parents are listed in Children's Centre Practice Guidance as amongst the types of families for whom additional support should be made available due to the fact that 'families that are experiencing particular challenges.... mean that their children may be at risk of poor outcomes' (DfES, 2005, p.8). Local programmes are expected to reach certain targets regarding contact with, and registration of, pregnant women in their areas. In acknowledging the 'apprehensions of teenage parents about taking part in activities with older parents' (DfES, 2005, p.57), the advice for working with teenage parents also highlights the need for Centres to adopt a specialised, young person-centred approach to providing services for younger parents.

1.5.1 Jolly Giraffe's services for younger parents

In April 2004, prompted by concerns regarding the low numbers of younger parents accessing their services, Jolly Giraffe's Community Development Worker (CDW) approached Halton Connexions to propose a joint working arrangement. Through working in partnership with the Connexions Teenage Parent Support Worker (TPSW), the CDW aimed to draw and build upon this agency's knowledge of and links with younger pregnant women in the Jolly Giraffe area. Two groups for younger parents were then set up.

1.5.1.1 Younger Mums-to-be group

In keeping with Sure Start guidance and, in order to maximise the likelihood of attracting younger people to sessions, the decision was made to provide a 'tailor-made' group specifically for younger pregnant mothers in the Halton area. In September 2004 the first 12 week workshop programme for under 19 year old mums-to-be was held. The identified objectives for the group focus on providing advice and information on pregnancy, labour and parenting whilst promoting social inclusion through forging relationships with peers and professionals. Facilitated by a community midwife and the TPSW, these two hour, once a week workshops have taken place regularly since and the current cohort is the sixth to go through the programme.

1.5.1.2 Little Chimps

Feedback from those attending the first Younger Mums-to-be group had highlighted the need for a 'follow on' group which these younger people could attend with their babies. Staff were aware that having engaged with this often 'hard-to-reach' needs group it was important to maintain and continue channels for support and communication. An equally important objective was to attract those young mums in the area with no previous involvement with Sure Start. It was felt that these individuals would be more inclined to participate in a session specifically for their age group. An equal impetus for, and principle aim in, providing an exclusive session for younger parents, was the need to promote and encourage greater take up of the support and advice available from a wider selection of agencies such as health or education. The Little Chimps sessions were introduced in April 2005 providing a weekly session where younger parents can access advice and information from facilitators and their children can engage in activities. The main aim identified for the Little Chimps sessions is 'to encourage parents and carers under twenty to access Sure Start and Connexions services, encouraging greater take up of wider service provision' (Jolly Giraffe Halton Lodge Children's Centre, 2005). Objectives set out in this document included: providing a

comfortable and welcoming environment; inviting in workers and/or taking in information about services available; and providing service sampling to reduce the fear of the unknown. The group is facilitated by Jolly Giraffe's CDW, their Play Development Worker and the Connexions TPSW.

1.6 Aims and objectives of the research

Since their inception in 2004, Jolly Giraffe's services for younger parents have, by both service user-led choice and by necessity, experienced several changes in their structure and delivery. In examining the role, processes and impact of their services for younger parents, Jolly Giraffe intend to use the findings of this research to inform the future strategic development of their work with this target group.

The principle aim of this research was to evaluate the approach to providing services for younger parents adopted at Sure Start Jolly Giraffe through exploring their impact and outcomes from the perspectives of those receiving and delivering these services. The objectives for the research were to:

- examine and document the background to and development of Jolly Giraffe's model of provision for younger parents;
- contextualise the rationale for the strategies and interventions which target teenage parents and teenage parents-to-be;
- explore the processes and outcomes for those involved in the receipt and delivery of both Younger Mums-to-be and Little Chimps groups.

1.7 Presentation of research

Chapter 1 of this report presents the background to the research, Chapter 2 describes the research methodology and outlines the theories underpinning the research design. The research findings are set out in Chapter 3, the structure of this chapter reflects the themes set out in Section 2.2, which were the focus for the investigation. Quotations from participants have been used, where appropriate, for the purpose of illustration and clarification. Chapter 4 discusses the research findings.

Chapter 2

Methodology

2.1 Introduction

The objectives identified for the research indicated the use of a qualitative approach to the research design. This in-depth approach to data gathering is aimed at allowing participants the opportunity to offer a comprehensive and detailed account of their views and experiences. The findings from qualitative research, conducted with a small sample of participants, are therefore presented as being representative of the views and experiences of the participants themselves rather than those of the wider subject population.

2.2 Issues explored

In considering the objectives for the research, the following themes were identified as the focus for investigation:

- role and purpose of Jolly Giraffe's services for younger parents;
- development of strategy and structure of sessions;
- the impact of social exclusion on teenage parents and their children;
- issues for accessing education, training and employment opportunities;
- partnership in service design and delivery;
- benefits of involvement;
- barriers to and incentives for participation;
- issues for future development.

2.3 Participants

The principle aim of this research was to evaluate the approach to providing services for younger parents adopted at Sure Start Jolly Giraffe through exploring their impact and outcomes from the perspectives of those receiving and delivering these services. In seeking to gather this information the views and experiences of stakeholders from the following groups were solicited:

- parent users of Jolly Giraffe services for younger parents;
- key programme staff;
- key staff from partner agencies participating in delivery of Younger Mums-to-be and Little Chimps groups.

The research participants were assured that the information they shared would remain confidential to the researcher and would be anonymised for presentation in this report.

To allow a system of verification and accountability for research findings, the researcher allocated a number to each interviewee transcript which follows all quotations which appear in the report.

2.4 Research methods

In addition to a review of literature, policy and guidance relating to the issue of teenage pregnancy and younger parents, examination of Jolly Giraffe's services involved the use of the following methods of data collection: session observation; focus groups; and individual interviews. These are described in more detail below.

2.4.1 Observation

'Observation can be used as a supportive or supplementary technique to collect data that may complement or set in perspective data obtained by other means' (Robson, 1993, p.192). In order to gain a greater understanding of the evaluation subject, prior to conducting individual interviews, the researcher attended a Little Chimps session. This observation, intended as a supplement to data collected during interviews and focus groups, focused upon the following aspects of the session:

- location and lay-out of session;
- facilitation of group;
- group dynamic/structure;
- interactions;
- session content;
- information seeking and sharing.

Prior to the session, parents had been asked by the CDW for their permission for the researcher to attend the session. The purpose of the observation, and its relevance to the evaluation, was explained by the researcher prior to the session.

2.4.2 Focus groups

Focus groups are commonly employed where it is considered that a group dynamic will encourage and stimulate discussion. The researcher facilitates discussion through introducing topics and asking the participants for their views and experiences (Gilbert, 2001). Interaction between group members provides a source of feedback which, by its nature, is absent from individual interviews.

The CDW and the Connexions TPSW discussed the research exercise with Little Chimps parents and participants from the Younger Mums-to-be group prior to

commencement. At the commencement of the focus groups the participant information sheet was read and discussed. This form, which explained the role of participants, should they wish to participate in the research process (see Appendix 1), was read and signed by all parents. With the permissions of all participants the sessions were audio-taped.

In order to facilitate attendance the Little Chimps focus group was scheduled for the same day and time as parents would normally be attending the Little Chimps session with their children. Prior reservations had been made by the CDW for children to attend the Jolly Giraffe crèche and a total of five parents attended the focus group. Similarly the focus group with the Younger Mums-to-be group took place during session time and four parents participated. It had originally been decided that those contributing feedback on the Younger Mums-to-be programme should ideally have experienced the complete twelve week programme. However, following difficulties experienced by the Connexions worker in contacting participants from the previous pregnancy group, the decision was made to conduct a focus group with the existing cohort who were in their seventh week of the programme.

2.4.3 Individual interviews

Interviews were arranged with a selection of key staff from Jolly Giraffe and participating agencies, a selection of parents from Little Chimps group and one parent from the previous Younger Mums-to-be cohort. Interview schedules were designed to offer participants the opportunity to expand on the areas and issues pertinent to their particular experience of involvement in the groups (see Appendices 2 and 3). With the permission of the interviewees, all interviews were audio-taped.

2.4.3.1 Parents

As described above, the research had been explained and discussed with parents and an invitation given to participate. Due to the need to focus the research on a specific, often limited, group of individuals with knowledge and experience of a particular subject i.e. the Younger Mums-to-be or Little Chimps groups, a non-random or purposive sampling method was used (Gilbert, 2002). Thus, following an explanation of the research and contact with the researcher during a focus group, parents were asked about their willingness to participate in individual interviews. Interviews were secured with two parents from the Little Chimps group and two parents from the Younger Mums-to-be group.

Unfortunately, due to an unforeseen change in circumstances, one parent from the Younger Mums-to-be group no longer wished to participate in the research and so a total of three interviews were carried out.

2.4.3.2 Staff

In addition to interviews with two members of Jolly Giraffe programme staff, interviews were also carried out with the: Connexions TPSW who is involved in both groups; midwife responsible for delivering the Younger Mums-to-be programme; health visitor previously involved with the Little Chimps group.

2.5 Data analysis

The data from observation sessions were used to provide a 'thick description' of the functioning of the Little Chimps session at which the researcher was present. This allowed the interview and focus group data to be interpreted in context, and also allows the transferability of the findings to other settings to be assessed.

The interview and focus group data were organised and analysed thematically, whereby pre-selected and emerging themes were identified, explored and presented for consideration (Bryman, 2004).

2.6 Ethical considerations for the research

The ethical issues inherent in this research were covered under an existing ethics application to Cheshire Local Research Ethics Committee (LREC). Ethical approval was gained in June 2004.

Chapter 3

Findings

3.1 Introduction

The feedback gathered during this research exercise was analysed thematically. In order to better examine experiences of particular services, the majority of feedback relating to the Younger Mums-to-be or Little Chimps group is presented separately. Due to commonalities in responses to questions regarding barriers to involvement, issues for younger services users and issues for future development, findings for these themes relate to both groups and are presented together.

3.2 Younger Mums-to-be group

Findings relating specifically to the Younger Mums-to-be group are presented in the sections below.

3.2.1 Role and purpose of group

The group is open to any 13 to 19 year old in Halton who is pregnant. One facilitator described how she viewed the main purpose of both this and the Little Chimps group:

'...a lot of them are isolated that is the main aim that's my main aim to stop them being isolated so they'll make friends. And then whatever comes from that I see that as positive....it gets them trusting workers because we're in the room and we chat to everyone but we're not in every conversation.' (4).

3.2.2 Recruitment and attendance

Processes for referral to and participation in the Younger Mums-to-be group appeared straightforward and effective. In many cases those attending had been encouraged to do so through their contact with facilitators prior to joining the programme. The majority of referrals to the group come from the Connexions TPSW who is also a facilitator, community and hospital midwives, and schools. Potential participants are contacted by the midwife or Connexions TPSW and where possible an outreach visit is made to inform them about the group and encourage attendance. An absence of restrictions on geographical eligibility has seen some teenagers from Widnes accessing the group. In these cases the prompt to attendance has come from a friend already involved with the group.

Of the five respondents from the Younger Mums-to-be group, one had heard about the group through her involvement with the Connexions TPSW, two had heard about the

group through a friend, one had been contacted by the TPSW following a midwife referral and one had been referred by her college tutor. Two of the group had been visited by the Connexions TPSW and one respondent described her experience as follows:

'She phoned me and I thought oh she's like well nice, I'd thought she was going to be a cow and yeah she came in to my college and she says well I'm not going to talk for hours, I'll let you talk and I thought, yeah, she's alright.' (focus group).

Some participants are picked up and taken to the group venue by facilitators whilst others use public transport. Participants are encouraged to bring along a partner or a friend if they feel unsure about attending alone. One particular cohort had been well attended by partners as one staff member explained:

'The last pregnant group we did was really successful and we had four dads come at different times during it and that was just absolutely brilliant, it was really good. So they do come with partners but every group is different it just depends.' (4).

3.2.3 Group format

The group is facilitated by the midwife attached to Halton Children's Centre and Halton Connexions TPSW. The role of this midwife is to facilitate a range of services for parents and pregnant mums which, in addition to Younger Mums-to-be, include baby massage groups, pamper groups and health promotion sessions e.g. smoking cessation. The TPSW has responsibility for working with young pregnant people in the Halton area and referrals to Connexions come mainly from social workers, schools, midwives and GPs. The post is funded as part of Halton's Teenage Pregnancy Strategy and whilst work relates to the wider Connexions remit concerning education, employment and training, the TPSW's targets centre upon engaging with individuals to promote social inclusion. Work also involves addressing service users' more immediate support needs such as housing, health and benefit information.

The group is held from 11.00 am to 1.00 pm, a time settled on to allow for tiredness in the early morning or later in the afternoon. Consequently, staff provide a lunch for participants of sandwiches, yoghurts and drinks. The group takes place in social services premises. Sessions are held in a suite-like set of rooms comprising a lounge with sofas, a kitchen and toilet facilities. Although aware of the need to rotate venues in order to accommodate all service users, participants have repeatedly 'voted' to remain in this venue. Discussions with respondents during the focus group highlighted their satisfaction with the suitability and comfort of the venue. Participants can join at any time of the twelve week programme and if they have missed earlier sessions they can,

pregnancy stage allowing, attend these sessions as part of the next cohort. The current group is the sixth cohort since the introduction of the Younger Mums-to-be programmes.

Whilst key information around the issues of birth, feeding and health is delivered during the course of each programme, consultation with cohorts decides the week to week session content. Through seeking regular feedback and suggestions from participants facilitators felt better informed regarding areas of particular interest or previously unidentified gaps in information. One facilitator observed that consultation was also a way to identify areas where a determined approach to message delivery was important:

'All they can see at the moment is the baby and like most pregnant women they don't want to know about contraception but you know we haven't been able to stop them getting pregnant the one time we should really try it for the second time.' (7).

3.2.4 Development of format

The group format has remained largely unchanged since its launch. In the early days of the programme however a decision was made to discourage young people from bringing their mothers along to sessions due to the effect which the presence of 'older' people had on the group dynamic. Staff were also concerned about the somewhat intimidating effect which these more vocal participants appeared to have on the other group members. Feedback from group members supported facilitators' observations and whilst participants are welcome to bring a parent along to their first visit, continued parental attendance is dissuaded.

3.2.5 Motives for attendance

Although referral sources varied amongst the group, four out of the five respondents had been prompted to attend by a friend. Thus some were persuaded by first hand positive accounts of the group experience. However, the question of motivation to attend also prompted a clear expression of the desire to attend being driven by the opportunity to be with a peer age group experiencing the same issues. One respondent commented:

'...because I knew it was gonna be people my own age not twenty or thirty year olds you know just sat here telling you you shouldn't do that you should do this, I just knew I'd be able to handle it with people me own age.' (focus group).

The following quotation highlights the need which this respondent felt for being with people who were both her own age and in her own situation:

'It was the fact that it was other people my own age going through the same things that I am and I wanted to meet new people who were going through the same as me because when you're on your own and there's no-one else around you who's pregnant you do feel like you're going through it on your own and you come here and you see all this lot and you think, right okay so I'm not on my own going through this.' (focus group).

Respondents were emphatic that they would not have come if it had not been a group for younger mums. One respondent who had come along to the group 'cold' with no prior information regarding its structure or content explained her reasons thus:

'I came because I thought I was the only teenager to be pregnant you know my age but as well it was the pregnancy side I wanted to know about, you know what to do, not to do, what to eat and not to eat.' (focus group).

3.2.6 First experience of the group

All respondents had a positive recollection of their first visit to the group. One had been the sole attendee for the first couple of weeks. During discussions with parents attending the Little Chimps group one participant recalled her first experience of attending the Younger Mums-to-be group. She commented:

'I brought me mum with me to the first one because I didn't know what it was going to be like. There was (name) as well and she brought her mum with her the first time. Some people came on their own but then after, the second week, we all just came on our own.' (focus group).

3.2.7 Benefits of involvement

Respondents from the Younger Mums-to-be group were asked how they felt they had benefited from coming along to the group. All expressed the opinion that their confidence had grown through involvement in the group. This was attributed to the supportive environment which the group offered in addition to the positive effect which making friends and building relationships had on feelings of self-worth. One respondent who spoke about her feelings of isolation prior to joining the group, described her experiences as follows:

'...because I don't know what I would have done if I hadn't had somewhere to go. I would have been sat in probably suffering depressions and stuff because I was in (hostel) and that's really lonely there was nothing else to do just sit there and watch telly or whatever.' (5).

Respondents were asked what aspects of the programme they had enjoyed and learnt most from. Interestingly, each focus group participant identified a different subject, responses ranging from feeding, nutrition, dangers of drugs and alcohol, and

information on the birth itself. Participants were on their seventh week of the programme so their responses were confined to the subjects covered thus far. One interviewee, who had completed the previous programme, identified the group's visit to the hospital:

'It was really good because then you weren't going in the middle of the night thinking oh god. (midwife) showed us all the equipment they were going to use so I didn't feel as nervous when I went in, you knew what was going to happen and you knew what the tools and what things were and that.' (5).

In discussing their responses to this question respondents made the point that the relaxed atmosphere in the group made the majority of sessions, regardless of the subject, enjoyable and interesting. One explained the format thus:

'...but the main thing about the group anyway is the fact that you can have a laugh while you're here it's not just all this information being pumped into you we do have a giggle while we're doing it.' (focus group).

One staff member had taken great pleasure in the decision of one participant from the first cohort who, since having her baby was training to be a midwife. She summed it up thus:

'...and I thought brilliant, so she's got childcare organised, smashing. It's something she'd always thought about doing and when she'd got pregnant she'd thought that was the end of her life.' (7).

The importance of accurate and timely advice regarding childcare and support available was cited as vital in encouraging younger people to consider their future career and education options. This same respondent reflected upon the outcomes from her involvement:

'Now and again you come away from a group and you think have I made a difference there. But then the next week everything seems great because they've remembered and thought about things you said.' (7).

3.2.8 Experience of other Sure Start groups

One member of staff referred to the recent attendance of a fourteen year old girl at the Pamper Group. This visit had been the result of several attempts to encourage this pregnant young person to try a session out. During discussions with respondents from the group a clear condition for participation in other groups whilst pregnant was a restricted age group i.e. younger parents. A distinction however was made when considering participation in groups after their baby's birth, this is explained in the following quotations from focus group respondents:

'I'd only go to a toddlers group (with older mums) after the baby's born because when they're born they don't judge you as much do they? It's just while you're pregnant they seem to judge you a lot more.' (focus group).

3.3 Little Chimps

Findings relating specifically to the Little Chimps group are presented in the sections below. Firstly are the findings from the interview and focus group, followed by the findings from the observation session.

3.3.1 Role and purpose of the group

As previously detailed, feedback from those attending the first Younger Mums-to-be group had highlighted the need for a 'follow on' group which these younger people could attend with their babies. Staff were aware that having engaged with this often 'hard to reach' needs group it was important to maintain and continue channels for support and communication. One staff member explained the purpose of the group thus:

'We've never ever wanted to do a group that will meet all of their needs, its sort of like a stepping stone to build a bit of confidence and let them know, you know that other services are available.' (1).

In considering service users' own perceptions of the role and purpose of the group, focus group discussions reflected a shift in participants' views of the role which Little Chimps sessions played in their lives currently and historically. Conversations regarding past experiences acknowledged the vital source of advice and information, particularly from a health point of view, which the sessions provided when their children were babies. Further comment however indicated that current perceptions of need focused primarily on the social aspect of the group. It is interesting to note however that the social interaction referred to, often included conversations and discussions with facilitators. The informality of interaction between facilitators and parents was identified during the observation of a session.

Discussions with staff also highlighted the role they saw for the sessions to encourage parents to look more closely at the needs of their child, as one facilitator observed:

'A lot of the younger mums are caught up in this thing about what I am and what I'm doing and am I doing it right and are people judging me. I think the group makes them focus more on the child, it's about your child and your child's needs.' (1).

3.3.2 Recruitment and attendance

All seven Little Chimps parents who participated in the research had been attending the Little Chimps group since its inception in April 2005. One participant had first attended the Little Chimps group whilst still pregnant while another joined the group when her baby was eighteen months old. The remainder of the participants had joined Little Chimps when their babies were between two and eight weeks old. The youngest participant was eighteen whilst the oldest was twenty-one.

Respondents were asked where they had first learned about Sure Start's services for younger parents. Responses to this question, both during focus group discussion and individual interviews, revealed a diverse range of information sources, and are illustrated in Table 3.3.2.1 below. Whilst the majority of the group had been registered with Sure Start during ante-natal appointments with their midwives, not all recalled being given specific information regarding their services for younger parents. As would be expected, in many cases the information source and subsequent first experience of services i.e. Little Chimps or ante-natal group, corresponded with the stage at which 'signposting' occurred. For one mother, introduced to Sure Start prior to the existence of the Little Chimps group, her first experience was of the Pamper Group which she attended only once.

Table 3.3.2.1 Source of referral/information on Jolly Giraffe services for younger parents

	Midwife	Health Visitor	Connexions	Postal
1	✓			
2				✓
3				✓
4			✓	
5		✓		
6				✓
7	✓			

Prior to joining Little Chimps, three respondents had also attended the Younger Mums-to-be (YMTB) programme, one of whom recalled first hearing about it from her Connexions worker. Amongst this group, progression to attending the Little Chimps sessions, was felt to be a natural 'next step'. For those who had not attended this programme, information regarding the Little Chimps group had come from a health visitor or through the post.

Since the raised profile of a co-ordinated approach to addressing the causes and consequences of teenage pregnancy, greater expectations are placed on key agencies in identifying and responding to need. One staff member highlighted the importance of partnership work with schools, with whom procedures for referring on are being increasingly followed.

A more recent development in efforts to recruit new members to the group has been the making of home visits to teenage parents by the CDW and Connexions TPSW. This has met with some success in encouraging teenage parents to try the group, however there has been some difficulty in securing continued attendance.

3.3.3 Group format

The group runs from 10.00 am to 11.30 am on Thursday mornings. Activities are planned for a six week rolling programme and the group operates on a drop-in basis. Attendance varies from week to week although the majority of parents have been attending consistently since the group's introduction in April 2005. Parents from the Younger Mums-to-be group were involved in a consultation exercise described by one member of staff as follows:

'The parents from the pregnant group actually formed a sort of task group and helped you know with the name and forming of the programme. We did have a twenty week programme that we worked through and got all the guest speakers and they (parents) told us who they wanted to come in.' (1).

The group is facilitated by Jolly Giraffe's CDW, the Connexions TPSW and Jolly Giraffe's Play Development Worker (PDW). Until February of this year the group was also supported by a Health Visitor, however the workload commitments of the community health visitor has resulted in the withdrawal of this involvement. Facilitation is informal and non-directive with staff providing advice and information as and when requested by parents. One facilitator explained it thus:

'Yes, we don't run the show, they run it. So they talk about their issues, they come to us with problems but they also go to each other.' (4).

Although keen to point out the relaxed nature of interaction between staff and younger service users this facilitator was also aware of a need for staff to remain objective when contributing to conversations regarding the personal lives of participants. She observed that the emotive, more direct advice that often came from fellow group members would not be so well received coming from a professional.

Parents' questions or comments can prompt facilitators to contact guest speakers or visitors to the group as explained by one staff member:

'There's always opportunities for us to ask other workers from different areas to come in where its been identified as necessary for the group....so we might pick up on (questions) and say to each other, you know such and such was on about weaning should we ask (name) to come in.' (2).

3.3.4 Development of format

As previously stated, the core group cohort has remained largely unchanged since its commencement in April 2005. In acknowledging the transition in developmental stage, for the majority of children attending from baby to toddler, the introduction of a Play Development Worker in February 2006 was considered an important step. One staff member described the rationale for this decision thus:

'Previously the group was focused on the needs of younger parents and now the children of those parents have developed into active toddlers that want to do a lot more.' (2).

Discussions with both staff and service users explored the changes which had taken place with regard to the structure and format of the group. The principle aim for Little Chimps group is to promote and encourage the wider use of services amongst its parents. Thus a role was identified for professionals from other agencies as guest speakers at sessions. It was agreed, following consultation with parents, that sessions would be in two parts to accommodate a talk from a professional whilst allocating the other half of the session to the more informal style of a standard parent and toddler group. Problems arose with this arrangement when the first half of the session over ran into the time allocated for the other.

Following difficulties booking slots with professionals it was decided to increase the programme to twenty weeks. This twenty week schedule however proved less satisfactory in meeting the needs of parents, as one staff member remarked:

'People would come and we'd give them programmes telling them about what was going to be on what week. But they'd come the wrong week and say 'oh I really wanted to come to the....' it just seemed like we were disappointing them all the time and the flow just wasn't right.' (1).

In commenting on the subsequent decision to reduce to a six week programme which concentrated more on a user-led approach, she went on to comment:

'I felt we had started to gear the group to fit us, to fit the professionals and meet our targets which you've got to do but it just seemed that the group needed to just lead it themselves. The sort of format we've found works now is to ask them the

week before what they want to do - that fits in with their lives better.' (1).

Parents clearly understood the benefits of having guest speakers at sessions, however accounts of their experiences of these visits were somewhat negative. Many of the comments referred to the impracticalities of listening and participating whilst needing to supervise their children. As one respondent observed:

'They wanted you to sit down some of them and the kids were going everywhere we had to chase after them and then we got shouted at because we couldn't sit down and listen.' (focus group).

A reduction in session time was effected early on in the group's formation due to observations that the two hour slot appeared too long for children and in some cases parents too. The session length was therefore reduced to an hour and a half. Another driver for this reduction was the need to allow time for clearing up after the session in readiness for the next group to use the room.

Discussions with group facilitators also detailed their realisation, as the group developed, of the need to restrict the access of professionals to the group to an invitation only basis. This decision was made in response to the growing number of people 'dropping-in' to observe the groups, in the words of one facilitator:

'...because we found when we first did these groups that everybody wanted a piece of us, people would just be coming in to have a look and the young people were sitting there going "why are all these adults here"? So now we have a strict policy, only if someone's invited do they come.' (4).

Another staff member attributed this development, in part, to poor communication between facilitators and visitors, she explained:

'I think sometimes with hindsight it didn't really work because of our pitch to the organisations, we told them we had this group and it seemed that then somebody would come along with a really strong interest in teenage pregnancy who had come more to see what our group was about than to give them advice and information.' (1).

A more detailed account of the group dynamic is presented in Section 3.3.10 which presents a record of an observation of a Little Chimps session.

3.3.5 Health visitor involvement

The loss of health visitor involvement emerged as a prominent issue in discussions with both staff and parents. This placement had been arranged as a secondment to

Jolly Giraffe for ten months, the purpose of which was for the identification and development of services which would benefit from a health input. At the end of the ten month period another health visitor took over facilitation of the group but due to pressures of work could not continue to provide this support.

Viewed as a vital source of advice and information, parents regarded the loss of this worker in a particularly negative light. Recalling their support needs when their children were babies, most parents recalled approaching the health visitor during the session on a weekly basis. This excerpt taken from the focus group transcript illustrates the value which several parents placed on this health input:

'Yeah, there used to be a health visitor that worked here but she left didn't she.....Oh she was brilliant wasn't she.....She used to come every week.....She was brilliant yeah, she used to come here and she'd, we'd all go to her for advice wouldn't we?.....Yes, I went to her nearly every single week when she was in she was that helpful.' (focus group).

The health visitor had been a source of information on such issues as family planning, minor ailments, sleep, behaviour and parents' mental well-being. Asked if they would not seek the same advice and information from their own health visitors, responses were mixed. Some parents clearly viewed this relationship as poor, whilst others expressed confidence discussing concerns with their health visitor.

Feedback from staff focused on the disappointment experienced by all stakeholders regarding the withdrawal of this health visitor involvement. Staff also reflected upon the impact, towards the end of involvement, which increasingly burgeoning workloads had on the ability of health visitors to maintain their, originally consistent, attendance levels. The remit of the health visitor post was to work closely with health visiting teams to encourage partnership work. One staff member felt that an additional benefit of the health input was its facilitation of a channel of communication between the younger parents and the wider body of health visitors. The view was expressed that the health visitors regular involvement with younger parents ensured that relevant and accurate information was passed back to health visiting teams.

3.3.6 Motives for attendance

In response to questions regarding what prompted them to first try out the group, the majority of respondents identified isolation as a key factor. More specifically, several were keen to join a group which they knew would be attended by people within their own age group. One interviewee commented:

'None of my friends had children and I thought because I'd had a bad experience with going to like a group that was open to anyone I thought it might be nice to make some friends my own age who also were in the same situation as me.' (3).

An illustration of the key role which age played in encouraging attendance is contained in the following view expressed by this respondent in relation to a prior visit to the Pamper Group:

'I felt like people looked down on me and stuff so I wasn't comfortable going there.....yes, they were all a lot older than me.' (3).

Getting out of the house and meeting people was cited as a major incentive for attending the group. One participant told how she had been encouraged to attend by her partner:

'It was him telling me just go, just go to a group and do something because I was bored all the time.' (6).

The effect which prior attendance at the Younger Mums-to-be group had had on feelings of isolation was described by one mother as follows:

'Well I'd been on the pregnant thing and I'd had somewhere to go because of that so I didn't have time to feel lonely because I met friends.' (focus group).

3.3.7 First experience of the group

Respondents were asked about their first visit to the Little Chimps group. The majority had gone along to their first session on their own, not knowing any of the other members of the group. In view of this, respondents were asked how they felt entering the group for the first time. All those who had attended alone described walking through the door as quite a daunting experience. One mother who had first attended when she was pregnant commented:

'I was shaking, me bump was shaking as well.' (focus group).

However responses to this question provided clear evidence of the positive experience this first visit had been. Respondents exchanged memories of their first visit and recalled who they had sat with or spoken to. The key role of the CDW and Connexions TPSW in welcoming participants and facilitating the group was highlighted. Respondents were clear in expressing the view that having taken this step their positive experience of the session had secured their future participation:

'I was on me own and I was a bit scared but everyone was like thatI really liked it and that's why I like it now.' (6).

In considering how the group had been described to them and their subsequent expectations, respondents were asked to consider whether their first visit was what they had expected. Answers to this centred largely on the fact that the key selling point for the group had been the age of fellow participants. In this way, attending and finding themselves with other young mums was a successful yet anticipated outcome from their decision to attend the group. One mother described the meeting of her expectations thus:

'Yeah it was, everyone was really friendly and it was just like sitting with your friends and having the babies playing instead of like dead formal.' (3).

Respondents were asked for their views on how other people attending the group for the first time would feel. Several mums were aware that as an established cohort the group may appear 'cliquey'. Respondents however were satisfied that both they and facilitators made sufficient effort to welcome and encourage new users but recognised that people seldom returned following their first visit. The following observations were made:

'We do try but I think they feel oh well they feel like there's a clique which there is but that's not our fault...when they come in we do like, I go round and say alright but they always seem to stand there and don't talk.' (focus group).

3.3.8 Benefits of involvement

Participants were asked how they thought they had benefited from attending the group. For most, the central theme in their responses was the support network they had built up with fellow group members. As discussed earlier, the majority of respondents had attended since the group's introduction, thus the strength of this network and their cohesion as a group was a key feature in discussions. The majority of parents from this cohort socialised together outside the group, visiting each others houses and going shopping together. All displayed a degree of pride in their identity as a group, illustrated in this excerpt from a later discussion:

'We're terrible aren't we, we go out afterwards and we're like the buggy brigade, walking all down there.....I know like a gang....Do you remember when we went to the city and all of us together people were looking at us like....' (focus group).

Respondents were asked to think about what effect they thought attending Little Chimps had had on their lives. Whilst respondents immediately identified the friendships they had made, a point of equal importance to emerge in this and other discussions was the role of the group as a source of support and advice. This role was particularly identified in responses to questions on the issue of support available to the

group. Again, an exchange between the focus group participants is used to illustrate this point:

'I mean now we've got a network of friends.....we're never on our own, it's like we'll have one round for dinner or we'll go out....We wouldn't have had that if we hadn't come here I mean I used to just go shopping with me mum.....I would have been completely stressed, I know I would have of, I wouldn't have been able to handle it.' (focus group).

One mother attributed her willingness and ability to live independently since the birth of her baby to the confidence which she had gained whilst attending Little Chimps. Another parent who had, by contrast, lived independently since she was sixteen also spoke about her lack of self confidence prior to involvement in the group:

'I never used to be confident at all, I was living in homeless accommodation and my HITS worker used to take me everywhere. I couldn't go to the doctors I couldn't even get on a bus, I hated being around people – now I've been to these groups I never used to talk and I do now and that and I ask questions.' (6) .

Another mother, asked what she thought was the main 'draw' for the group, commented:

'I think it's as much fun for parents as it is for the kids really because again the social aspect, they get to socialise with people in the same situation. It's informal....advice is on hand if you need it or if, like I said, she can tell you where to go and get it.' (3).

With regard to the friendships which the group had formed with each other, one facilitator made the following comment:

'It's a source of fun as well as a fantastic support for each other. Young people enjoy the company of young people and it's a very natural place for that to happen and for their children to be able to have fun as well.' (8).

The positive influence which the sessions could have on parent and child interaction is outlined in the following comment from one staff member:

'Some parents, not just young parents don't know how to play with their children. Some are very very good without knowing how good they are at it. We try to get them to have a look at what really interests their child and think of ways to bring that out...you know to encourage that playing together how important it is that early playing together.' (2).

Respondents were also asked whether attendance at the group had, from their perspective, benefited the children. The main theme in responses to this question was the beneficial effects for children of socialising with other children. One parent whose

child was already eighteen months old when he started at the group described her experience thus:

'He used to have terrible tantrums before we started coming. I think socialising with other children, learning that he has to share and stuff like that has really helped him, I think that's made a difference with him going to school.' (3).

This respondent illustrated the importance which her own child placed on his friendships with other children at the group:

'Knowing that (name) can socialise with other kids because I haven't got any more (children) and all me family's kids are like older. He talks about it a lot, he plays on his little play phone at home and he says, 'oh I'm phoning such and such.' (3).

One facilitator pointed out the importance of positive role modelling for the children's development. She went on to explain:

'Like snack time, which was instigated by the CDW, you know not just standing around having their juice and toast and it was a good opportunity to look at children sitting at the table and enjoying communal eating.' (8).

Of equal importance to several parents was the effect which attending the group had had on addressing 'clingy' behaviour amongst their children. Some parents expressed marked feelings of relief on the progress they had seen their child make in this area. One parent commented on the sense of freedom this gave her. Another mum who had seen her daughter become more independent had started attending the Parent's Forum during which her child stayed in the Centre crèche, she commented:

'She used to cry for me a lot if I walked away from her in there (Chimps group) but she doesn't now, she's getting used to that, it's great. Now I can leave her there (crèche) on her own.' (6).

Reflecting the profile of the majority of children attending, an increasingly popular part of the sessions is the arts and crafts activities. This is illustrated in the following comment from one of the parents:

'For him it's like knowing there's the arts and crafts activities, they're more difficult to do at home. I can do like play dough but its getting all the stuff out and they do it all with him here.' (3).

The benefits of this aspect of the sessions were echoed by the play development worker who, following an introductory messy play session, had provided parents with a handout containing suggestions for, and outlining the benefits of, messy play. The leaflet also gave some advice and information regarding health and safety for home play.

One facilitator observed that, in her view, the Little Chimps group was very much the group of the participants and not the providers. The main benefit of this seemed to be the degree of ease with which parents interacted with professionals. Their familiarity with staff also contributed to their willingness to request advice and share information. In discussing the importance of engaging and maintaining links with young parents one facilitator highlighted their reluctance to access agencies regarding problems with their children due to fears of statutory intervention. She explained it thus:

'They don't want to take their child if the child falls over and bangs their head because they think they're going to have child protection issues and social services are going to be involved. Whereas we can say in this group and we see them each week and we know that this one's come in with a bump on the head because they're learning to walk and they fell over.' (4).

3.3.9 Experience of other Sure Start groups

The principle aim of the Little Chimps group is to promote participants' willingness to access wider Sure Start services. One facilitator highlighted the problems which staff had in assessing performance with regard to meeting this aim due to the lack of robust data available. She emphasised the need for systematic collection of data on parents' use of wider services. This is currently not measured and much outcome information is anecdotal. Respondents were asked about their views on, and experiences of, accessing other groups. A familiar theme emerged in discussions regarding this issue, that of the group's view of themselves as a *unit* rather than *individual* users of Sure Start services. As previously highlighted, the Little Chimps research participants had been attending the group, as a cohort, since its inception nearly eighteen months previously. Their comments indicated that had become accustomed to a certain group dynamic and profile which, unsurprisingly, was not replicated when they participated in other groups. The following comment illustrates this point:

'I don't think I'd like to go to another one and do it all again meeting new people, I'd rather just stay in the same one.' (focus group).

One staff member, in reflecting upon the reluctance of members to move on, made the following observation:

'Mainly the group now its about meeting the children's needs and getting the parents to understand that yes the group initially started out for them but it's time for them to start thinking about what their little ones are getting out of coming to these things, if it didn't have such good workers it would be a bit of a youth club. For as long as we've got this some of them will never go to anything else.' (2).

However, an area into which several of the group had ‘branched out’ was attending in-house courses. Whilst some participants were keen to point out that their involvement in courses was again dependent upon another group member attending some had gone along alone. One such participant went on to detail her experiences thus:

‘It’s definitely improved my confidence. I’ve done dressmaking here, starting nail art. I’m doing the second dressmaking course. I took (name) to the ‘Getting Ready for School’ course.’ (3).

One facilitator had observed the interest that had been shown in an adult learning course in dressmaking and fashion:

‘You know because it was fashion, it really appealed to them being quite young. But there were other mums that went to the group who you know were older mums and as they met them they made a bit of a bond over a number of weeks.’ (2).

Respondents were keen to talk about their experience of a course titled ‘Choices and Consequences’ run by an external provider, Western Spirit. Parents were emphatic in their praise of the course and the valuable lessons and skills they had acquired as a result of participation. The course focused upon promoting confidence whilst providing some life skills training. Participants particularly recalled the message regarding the danger of signing any form or document without first satisfying themselves of its content. The success of this message was evidenced during the pre-focus group read through and explanation of the participant information sheet for this evaluation exercise. In discussing the purpose of this research exercise and the consequences of their involvement, participants observed that before the ‘Choices and Consequences’ training they would have signed the research consent form without reading it.

One interviewee, whilst expressing her enthusiasm for attending other groups, was also keen to point out that she would not go along to anything on her own. Her response ‘only if they will’ (6), referring to her friends at Little Chimps. The following statement from this respondent revealed this ‘dependence’ to be somewhat related to first experiences of groups rather than a long-term need for this support:

‘I come to one on a Monday morning as well, (name) used to go off this group but now I’ve met a couple of more older mums off her. I don’t really talk to them or go round to their houses or that but I know them.’ (6).

Discussions with one staff member highlighted the beneficial effects of introducing other key staff into the group. She explained it thus:

‘If they get to know me, know my face, know what I do they might feel comfortable to come along and access other services

where they might see me. Or you know they might meet other people through the group then they feel like they can go along to their activities as well then.’ (2).

3.3.10 Observation of Little Chimps group session

Attendees: Four parents, four 12-15 month old children.

Facilitators: Jolly Giraffe Community Development Worker, (CDW), Connexions Teenage Parent Support Worker and Jolly Giraffe Play Development Worker (PDW).

3.3.10.1 Facilitation of group

On their arrival at Halton Lodge Children’s Centre parents and children gather in the foyer of the centre. The group is obviously an established one as parents all know each other and each other’s children.

- CDW - Lots of hellos to both parents and children. Enquiries after house moves, college courses.
- Group is taken, by the community development worker, to the session room.

3.3.10.2 Location and layout

- Session room is very well equipped and spacious. Designated areas for home play, craft activities, snack and drink, baby area, outside area. Lots of toys.
- Door to room is coded/swipe card entry so late arrivals have to be let in.

3.3.10.3 Group dynamic

- Dynamic of group is predominantly parent and child-led.
- Parents and children engage in activities and conversations which interest them.
- Staff informally ‘shadow’ parents – joining in the activity or just on hand for conversation/discussions/information.

3.3.10.4 Interaction

Parent - parent

- Talking about who could not attend that week and the reason why, evident socialising outside group and general familiarity amongst the group with regard to each others’ personal circumstances.
- Obvious friendship amongst the group which is reflected in very informal social feel to group.
- Making observations regarding each other’s children – “look he’s trying to....”

-
- One mother talks about imminent first birthday party for her child. All group are to attend.

Facilitator-parent

- Parents comfortable to approach workers and raise questions/discuss issues with them.
- Discussion with PDW regarding speech development – suggested using child's interest in animals to encourage talking.
- Chatting with CDW about new house – break ins in the area, safety etc.
- PDW encouraging parent to let child do activity for themselves – (putting objects in a bottle). Pointing out child's ability to concentrate. Lots of praise.
- Two mothers have conversations with TPSW regarding college and childcare. Mother has brought forms for worker to look at. (Meanwhile another mother occupies this mother's child).
- Showing workers photos (on mobiles) of friend's babies – discussion of pregnancy and childbirth experiences.
- Discussion about recent documentary about single mums (titled Pram Face) mums unhappy about the girls chosen for focus of programme – reckless spending, going out a lot – not representative at all.
- Told about another session 'musical minis' which takes place at another location, Palacefields – worker facilitating sessions described by PDW as very welcoming and friendly. One mum says she will go along if another does – they both agree to do so.
- Connexions worker focuses on parent interaction. Parents approach her for advice/information. CDW and PDW facilitate the group.
- Told about use of the local library and an incentive card for encouraging use. Encouraged by workers to renew their cards.
- Mother of one child who is very active is encouraged to book a session in the soft play area.
- Discussion of courses available, general talk about courses which have been tried and those that the mums are interested in registering for. All given latest programme and two mums are going to register for sewing course when session finishes.

Facilitator-child(ren)

- Children appear happy and confident with workers, approaching them and interacting with them comfortably.

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- Workers display familiarity with children's characters and developmental stages and make observations about developments in these areas.
 - Staff give lots of praise to children and encouragement to parents.

Parent-child(ren)

- Parents are comfortable interacting with each others' children, picking them up and helping them with activities.
- Parents play alongside their children whilst interacting with staff or other parents.
- Obvious enjoyment in seeing children experiment and play with range of equipment.
- Comments are made about one child who is getting more and more confident at letting her mum go out of sight.

3.3.10.5 Structure of session

- Informal – only fixed event seems to be snack time.
- Parents move around the room and engage spontaneously in activities/conversation as they please.
- Parents confident to leave child playing while they go to other area of room.
- Snack time is called half way through the session. Children sit at tables eat toast and have drink which is supplied by parent. Some mums stay with children while others leave workers to supervise.

3.3.10.6 Activities

- Craft activities – making hats, musical instruments, play kitchen, books, mums sitting reading books to child. Mums, CDW and children sitting on floor.
- All parents and children move around the room (large area) engaging in various activities.
- PDW in soft play area with two mums and their children. Several play ideas can be recreated at home.
- Children dressing up – discussion about safety of objects used such as necklaces and belts. Advice from PDW regarding safe and fun play.
- Large bottle used for dropping objects in, PDW suggesting parents do the same at home.
- Highly relaxed atmosphere due to group dynamic and familiarity appears to optimise opportunities for information sharing and seeking of advice/information.

As stated at the beginning of this chapter, responses to questions regarding barriers to involvement, issues for younger services users and issues for future development made by users and facilitators of both groups are presented together in the following sections.

3.4 Barriers to involvement

Participants were asked what they saw as the possible barriers to involvement in the services for younger parents. A variety of responses were made, some referring to barriers to accessing services in general, not necessarily to accessing Jolly Giraffe's services for younger parents.

3.4.1 Self esteem and confidence

The issue of confidence and self esteem figured largely in staff and service users' reflections on barriers to involvement in wider services in general. One member of staff gave the following view of their situation:

'When they are young they think people are looking at them, think that people are making assumptions about whether they're a good mum or not because they're young, so I suppose that there is that.' (2).

This perception of being looked at and judged was particularly echoed in discussions with the Younger Mums-to-be group. In dismissing the possibility of attending a mainstream ante-natal group several respondents talked about people's reactions to their pregnancy. This is illustrated in the following focus group exchange:

'Cos older people tend to judge you don't they if you're pregnant young.....Yeah, I've walked down the street and because people see that I'm young and I'm pregnant I get really dirty looks...you do get judged because you're young.....You can see people thinking you're stupid, you've wrecked your life and it's really because it's up to us not up to other people to judge us.' (focus group).

One facilitator, in response to questions about social exclusion identified the role which the school experience played in reinforcing feelings of low self-worth. She described it thus:

'I know one girl who wouldn't go back to school because she knew she'd get slagged off because she had a baby...I think some of it comes from school and how they're treated in school, they may be stigmatised because it's not an issue that's talked about so no-one wants to address it.' (4).

Another group facilitator referred to the major part which poor emotional and mental health played in causing feelings of low self esteem. She explained:

'These girls have often got a very low self esteem, no confidence in themselves....you know its probably been instilled in them or a self fulfilling prophecy you're thick you've got pregnant, you'll never get anywhere and eventually they start to believe that.' (7).

Discussions regarding barriers and benefits to involvement saw confidence emerging as a key theme. Thus, although participants in the services may have felt lacking in self esteem and confidence before their first visits, subsequently this had become less of an issue.

3.4.2 Group profile and dynamic

As highlighted in responses to questions regarding first experiences of the Little Chimps group, both staff and parents referred to the influence which the group profile may have on deterring new members. Whilst confident that efforts were made to engage with new members many respondents recognised that the impression of a fully formed 'clique' could be intimidating for those visiting for the first time. Some staff commented on the equally significant deterrent which the age of the group presented. One staff member, involved in home visits to recruit new members, explained it thus:

'We met all the new, sort of real teenage parents, you know 15,16,17 and they all came to the group but one thing we noticed when they were there was that ours didn't look like teenage parents any more.....then we got feedback from the others and they said that's not a teenage pregnancy group and that's why I'm not going there.' (1).

Efforts had been made to discuss this issue with the Little Chimps group and the comments of non-returning new members had been fed back. One staff member explained:

'You know, they're 19, there's two of them who are 20 there so we're sort of saying to these parents that all the activities that they like and all the safety and the comfort they have found in the group, they are actually stopping us from offering it to others by not moving on.' (1).

3.4.3 Dependence

Reference was made to the influence which their own parents can have on the willingness of younger parents to access groups. One staff member felt that the stigma of being a teenage parent contributed to a disinclination on the part of parents to support their child's attendance at a group for 'teenage mums'. This response also pointed to the need to understand the issues of dependence which, for some young parents, will affect their ability to act independently. Discussions with another facilitator

highlighted the considerable shift in role which the transition from child to parent entailed:

'I think sometimes when their whole life 'til then has been around school and being told what to do and then they have this child and they're sort of in limbo for a little bit because this getting up and getting ready and taking all your bottles and nappies and attending groups and stuff like that, it's a way of life in itself.' (2).

3.4.4 Travel

The observation was made by staff, and echoed in the comments of some service users, that the practicalities of using public transport to travel to sessions was not a deterrent to attendance. One staff member felt that this seemed particularly true for younger service users, she commented:

'I actually find the younger parents are a lot more keen to travel about. I don't know whether its because they're up and out every day going to school...it's the cost of it because when I rang up one parent to ask why she hadn't been coming and see if everything was alright she said it was too expensive you know she had to get two buses to come here.' (1).

As illustrated in the above comment, the issue of transport costs was highlighted as a determining factor in younger people's attendance at sessions. One facilitator explained it thus:

'The bus passes were a great thing, a fantastic acknowledgement of how being able to get about and have the money to get the bus is an issue in accessing things.' (8).

Younger service users had originally been given free weekly bus passes when they joined either group. After several months a decision was made to ask for a contribution of £5 towards this cost. One staff member recalled the higher attendance levels when the free bus passes were available and clearly felt that these had dropped when a contribution was required. This contribution has now been raised to £7.

3.5 Issues for younger service users

In order to better inform strategy for the development of current services and identification of opportunities for possible joint working arrangements, participants were asked what, in their experience, were the issues which impacted upon the lives of younger parents and pregnant younger people. These are outlined in the sections below.

3.5.1 Housing and finance

One respondent working with younger pregnant mums cited finance, budgeting and housing as the principle issues for concern. These issues, it was observed, were usually the first suggestion from group members when asked what they wanted more information on. She went on to explain:

'If they're under seventeen it's a real problem for them because they get nothing at all. Initially they are told they can get nothing but we have contact with the CAB who will come out and help them to get something.....money is quite a problem for them because that's got a knock-on effect you know they don't eat properly, they're often not living with their parents so then they've got to find accommodation.' (7).

The Citizens Advice Bureau (CAB) input was cited as an invaluable source of support and information. In addition to visiting the group and tailoring advice to the group profile the CAB worker also provided an outreach service to participants whereby she visited them in their homes to discuss their individual situations. In highlighting the benefits of this agency involvement reference was also made to the frequently unsatisfactory outcome for younger people when visiting the Job Centre for advice. This perception was also apparent during discussions with service users whereby a significant number identified the Connexions worker as their source of information for benefit advice. One facilitator felt that certain agencies failed to adopt an appropriate approach when dealing with younger people, she explained:

'And just the way they're treated by other agencies and adults makes them not want to go to them, like I'll get a phone call from someone and they'll say the job centre have said this, this and this and they've made them cry.' (4).

One staff member identified financial concerns as the main issue arising regularly in discussions with and amongst parents at the group she explained it thus:

'Some of them are young and haven't yet had a career or started at college or you know making their money and having a job. They're talking about benefits and how they're making their money work for them as it may or may not do.' (2).

Homelessness had been an issue for three of the five teenage mums who participated in focus groups or interviews. Two of these were still living in Grangeway Court, a homeless facility for pregnant teenagers and young mothers. One staff member had observed a recent increase in the numbers of participants coming from either the YMCA or hostel accommodation. The extent to which some respondents had been affected by several accommodation moves is illustrated in the following account from one focus group respondent:

'I moved to (hostel) and then I had to move my room again, so I moved twice in seven weeks then I moved over to Grangeway and I was put in a family room and so I had to move again so that was four times I had to move in eight weeks and I was like oh I'm knackered don't make me move again.' (focus group).

One facilitator, echoing the profile of mothers in the Younger Mums-to-be group, pointed out the unsatisfactory numbers of younger people either pregnant or with a new baby in emergency accommodation. She reflected upon the effect which the under eighteen housing rule had on the lives of these younger, vulnerable people:

'You know its very hard for them to accept they can't take a tenancy until you're eighteen so you're in emergency housing until you're eighteen and you've got to make a home out of that – for some parents it's not just hostels but B&B accommodation as well. There is the under eighteen rule but there's also a big housing list in Halton anyway.' (8).

All respondents from the Younger Mums-to-be group planned to live independently after their baby's birth. The following point was raised by one member of staff with regard to the effect which becoming a parent can also have on the continued suitability of pre-birth housing situations:

'Quite a lot of them start off living with their parents until it gets to the point where the baby becomes a bit mobile or demanding and then the family relationship sort of breaks down a little bit.' (1).

3.5.2 Isolation and social exclusion

As highlighted in responses to questions regarding motivation for attendance, for the majority of the younger people who participated in this research, the desire to meet and spend time with other, similarly situated, young people had acted as a major incentive to join the groups. The particular issues for younger parents and pregnant teenagers are also presented in those sections of the report which refer to barriers to involvement and education, employment and training. The isolation caused by a breakdown in relationships was also identified as a problem for many young pregnant teenagers. As one member of staff commented:

'...by the time they reach me at 12 to 14 weeks partners are no longer there or they're not reliable, they come and go....it gets to be a problem if they haven't got partners.....sometimes they're completely on their own and they haven't even got a birthing partner to go in with them so isolation is a big thing.' (7).

The group was therefore identified as a place where these individuals can go to make friendships and find support, illustrated in the following interview excerpt:

'If they didn't come to the groups and meet other people they'd probably sit in their room all day or walk round Halton Leigh or the shopping centre to kill time. So there's that element which reduces the chance of depression.' (7).

One respondent explained her feelings of alienation from her previous peer group:

'All like friends from school and that I don't see them any more because they haven't got kids and stuff...I hang around with all these here from Little Chimps.' (6).

3.5.3 Education, employment and training

Some respondents had dropped out of college courses in the early stages of their pregnancy for health reasons. One of these, enrolled on a nursery nursing course, reported being asked to leave as her frequent absences had affected her eligibility to continue her placement. One member of staff pointed to the importance of timely advice and information in encouraging a return to education. She described it thus:

'All I can do is give them pep talks about the importance of getting your education for their own and their child's sake. You know it's like when you've been at school you don't want to see school again do you for a while but often by the end of the twelve weeks when we talk about it again they come round to the idea and sometimes they'll sign themselves up for a course.' (7).

This observation, made by another facilitator, also points to the danger of making assumptions regarding interest and ability in education and training based on an individual's school experience. Her comments also highlight the issue of appropriate childcare options:

'I do believe that for reaching your own potential as a young person, school doesn't always work for you. Getting the opportunity to go to college and experience education in a different way is great but childcare is a massive issue. It's all very well to say it's provided but it has to be in a way that suits that individual family.' (8).

Another staff member felt that the level of support and encouragement given to some pregnant teenagers to remain in education was linked to their academic ability. She expressed the view that there was a degree of complacency amongst some schools when considering the future of those young people whose interest and aptitude was less evident.

A barrier cited by one facilitator was the reluctance of some parents to hand over the care of their child, she described this as a separation anxiety. A lack of parental encouragement and support for a return to education or employment was also cited by

one staff member as influential, particularly for younger parents from workless households. This respondent had drawn this view from conversations during sessions in which parents had recounted the disapproval shown by their parents at the idea them returning to work or college and accessing childcare options to do so.

A contributing factor was also felt to be indecision about exactly what employment or education opportunities they wanted to access and how such a lifestyle change would affect their benefit situation. In this way the advice and information available at groups was felt to be invaluable in providing accurate information and dispelling both fears and myths. Fear of the unknown was felt to be particularly relevant for those younger pregnant teenagers and parents who had never worked. This respondent went on to comment:

'You know its about getting them to realise it's going to benefit them in the long run as an individual and to get them to realise that they were an individual before they were a parent and they can go back and look at what their dreams were before they had a baby and still do them.' (4).

3.5.4 Health and education

One facilitator pointed to the need for more targeted health services for pregnant teenagers in the form of 'one-stop' dedicated clinics providing ante-natal services, contraceptive advice and smear tests. Another facilitator reported that a dedicated evening family planning clinic for under 25s, available at a clinic in the Widnes area, is very well attended. One respondent explained her views on the reasons behind high numbers of this user group failing to attend health care appointments:

'They've got the biggest DNA rates because they might not have the money to get on the bus to get there, they know they're going to be sitting in a waiting room full of women who seem much older and they're going to look at them...they haven't got the confidence when they're in there to talk about any problems they've really got.' (7).

As previously mentioned, several of the group are in hostel accommodation and the point was made that to rely on often unsupported parents to attend clinic appointments was unreasonable. One staff member spoke about the absence of meaningful support for many of this group and thus identified a need for intensified efforts on the part of health visiting teams to engage with this group.

In considering the issue of reducing levels of teenage pregnancy several workers referred to the need for schools to continue developing their PSHEC (Personal Social

Health and Citizenship Education) strategies and programmes for delivering information on sexual health and relationships.

'They need to take more responsibility because a lot of these young people are getting pregnant while they're at school or have not long left. The amount of young people that get pregnant in the summer holidays once they've left school is crazy.' (4).

3.5.5 Attitudes to younger parents

Respondents from the Little Chimps group were asked what they felt were the issues which they, as younger parents, may have faced which their older peers may not have experienced. Many of the parents, particularly those in the focus group, were emphatic in their assertions that their experience of parenting did not differ from that of 'older' mothers. Some participants commented upon the irritation and frustration they felt when encountering the prejudices of others with regard to their age. This view, regarding ability to parent, was echoed in interviews with staff illustrated in this comment:

'I think a lot of the differences are in their perceptions of how they feel about their situation, I think obviously how you feel affects what you're going to access and what you're not going to access. The conversations I have with younger parents don't differ an awful lot to the conversations I have (with older parents) except for their family situations who they live with you know.' (1).

One facilitator made the following observation:

'In my experience parenting capacity or capability is determined more by the person and the support available to them than by their age.' (8).

Another staff member pointed out the absence of any marked difference in parenting skills in relation to the age of the parent. She did however go on to comment:

'But I think sometimes with older parents they've had life skills, you know they've looked after younger brothers and sisters they've had jobs. Some of these parents have been sixteen, been pregnant and they haven't had the experience of even going out to work, meeting people, just life experiences really.' (2).

One new mum who had attended the Younger Mums-to-be programme also felt that the experience of younger parents differed from that of their older peers, she explained it thus:

'I think younger mums are more lonely because I know I was and I know (friend) was....older mums I think they have more of a social life and probably they've got stable relationships and

like most of them have got cars and they can go out but we haven't so we feel more trapped.' (5).

3.5.6 Support

Respondents were asked about access to and suitability of the advice, information and support that was available to them. Those in the Younger Mums-to-be group identified the group's facilitators and their own mothers as their primary sources of information and support. The majority of respondents reported a good relationship with their own community midwives. Only one, at a later stage of her pregnancy, was in contact with a midwife with responsibility for supporting pregnant teenagers. However all identified the midwife facilitating the group as a frequent source of information regarding their pregnancy and birth. Questions regarding housing, finance and in some cases college courses and future childcare were put to the Connexions worker. Respondents were unsure about the likelihood of them either needing or wanting to directly approach agencies for this information and all had the telephone number of the Connexions TPW. One respondent in hostel accommodation also identified her support worker as a valuable source of support and information:

'All I've got to do is go across to the support worker and say I've got this or that problem its like I started bleeding and thought what do I do I had no money on my phone and no money and it all got sorted out by my support worker and I'm so glad she was there for me to be able to turn to her.' (focus group).

However, the comments of one respondent, who had lived in hostel accommodation before and after her baby was born, highlighted the fact that a lack of confidence in approaching practitioners can prevent more vulnerable individuals from accessing much needed support:

'You only get help if you go and ask them for it, we had, they're called support workers but unless you went and spoke to them they didn't come to you. I got more help at the group, I think anyway.' (5).

This was echoed in the following comment from another respondent regarding the availability of advice and information:

'You have to look for it because otherwise I mean you see all these numbers everywhere but then you're like well you know I'm not going to ring them even though you need to talk to somebody.' (focus group).

One facilitator spoke about the need to maintain a presence in the life of the younger person in order to provide timely responses to their needs. This respondent also spoke about the need for professionals to remember that factors, which for some people can

merely conspire to complicate their attendance at appointments can, for younger 'less worldly' parents, pose a considerable barrier. She went on to explain:

'It's important to offer things repeatedly to younger parents and accept the fact that, if they fail to attend an appointment, something may have occurred that, for them took priority on that day.' (8).

Parents also reflected upon their reduced need for support, advice and information with regard to their children due to their transition from baby to toddler. Focus group participants, discussing their current support needs, identified each other as a major source of support. One staff member felt that a particular issue for a number of pregnant young people was a lack of familial support, she described it thus:

'You know a lot of the people I work with are vulnerable, they don't have a lot of family connections or if they do have family connections they aren't positive.' (4).

One facilitator reflected upon the prominent part which support networks, rather than the age of the individual, had on their vulnerability and parenting capacity. This respondent went on to explain the importance of assessing an individual holistically when identifying their support needs. Issues like living arrangements, finances, support networks and relationships were all cited as factors for determining increased vulnerability.

3.6 Issues for future development

In order to identify issues for consideration in future planning and development of services, participants were asked about their views and suggestions for improved service delivery and expansion.

3.6.1 Group format

A prominent theme in discussions with both staff and service users for the Little Chimps group is the placing of an age restriction on group attendance. One participant, pregnant with her second child, was particularly concerned with this possibility:

'Without this I'd probably have been just at home all the time and doing nothing but I really like it and that's why I like it now and when they said I won't be able to go with the two of them I was upset but I'll probably just go round to their house or something.' (6).

Indeed this issue was repeatedly referred to when participants were asked for their suggestions for improving the group. Several participants expressed the opinion that

there was a need to raise the age limit. One facilitator described the negative reaction which mention of imposing an age limit has increasingly provoked:

'When you mention to her that she can't, that she's actually too old or coming to the age where she needs to move away from Chimps she gets really really upset about it.' (1).

This respondent also spoke about the negative reaction from professionals trying to refer to the service when told of the 'aged 20 or under' age limit. She explained that having identified the group as a possible source of support for a twenty year old service user professionals become frustrated at being told that the group is a teenage group for under 20 year olds.

Several respondents suggested the introduction of activities away from the Centre such as walks, visits to the park and picnics. Despite the practical difficulties which parents had experienced with regard to guest speaker visits, interest in having talks by professionals was still apparent. The idea of organising crèche places for occasional talks was suggested by one respondent:

'...if they had a crèche or something for half an hour or an hour and we had a discussion then and then we got the kids back....it would be easier because you know the talks they had in were okay, its because we couldn't hear them.' (focus group).

3.6.2 Extended services for younger parents

One staff member felt that the Children's Centre was the ideal situation and location for providing extra services for younger parents, she explained her vision:

'I think the way the Children's Centres are going you know because they are such visible welcoming and quite informal places....if you've got the right workers there with the right approach you could run things like teenage sexual health advice drop-ins and clinics....working towards reducing teenage pregnancy would be useful in centres like this.' (2).

This respondent, in pointing out the reluctance of younger people to access health information through GP surgeries suggested the setting up of satellite, drop-in evening clinics where quiet rooms were made available for young people to chat with relevant workers. She went on to comment:

'Working towards reducing teenage pregnancy especially with now the extension of the age range to 0-19 years....obviously we can't be putting up big boards in the Centre about STDs and you know handing out free condoms all day but at given times we can have collapsible boards and you know professionals come in and we've got quiet rooms where people can go to and talk to someone if needs be.' (2).

The need to provide dedicated services for younger people was a view reinforced in discussions with all facilitators. One facilitator, in emphasising the loss of health visitor input as a vital source of advice and support, described the problem thus:

'You know one of the problems I find with young people is that they won't go to services because they don't want to look like they're moaning...they think they're not going to be listened to because they're young people. They might think their child has got an ear infection but they're not going to go along and say it just in case.' (4).

One Little Chimps parent, in response to questions regarding support and advice needs during and after pregnancy made the following observation:

'When she was about six months old I was a bit down and just needed someone to talk to. Because everyone's always busy aren't they? I don't know I don't think it really helps if you're stressed, just a bit of help, just more people. Just more people.' (6).

3.6.3 Partnership working

Discussions with one facilitator revealed the view that difficulties in partnership work arose when partner agencies are working to agendas of differing flexibility. In planning for the Little Chimps programme, time had been scheduled pre and post sessions for preparation and de-briefing. One staff member felt that the absence of this opportunity to discuss strategy and approach had resulted in a more fragmented, less structured service than had originally been anticipated. This worker also expressed her opinion that inconsistencies in attendance by staff due to workload or illness affected parents' belief in partners' commitment to the sessions. In pointing out the need for contingency arrangements when staff from one agency cannot attend she continued:

'I mean I think the enthusiasm and the motivation for the group and the commitment to the group are there when the plans are made but then outside forces or whatever sometimes mean that it's not always there.' (1).

Another facilitator pointed out the implications which the Common Assessment Framework would have for formalising and improving partnership working. She felt that their use had already had an impact on working practices and highlighted the difference which placing a duty on practitioners to attend meetings will have on the effectiveness of joint working arrangements.

3.6.4 Couples

One staff member felt that more could be done to provide post-natal groups and support for young couples. Whilst acknowledging that, for several young mums, the

inclusion of partners in the pregnancy or Little Chimps group would be inappropriate the suggestion was made for the provision of a comfortable environment where:

'...couples can come so for example there's the six week and twelve week sessions about you know bathing and weaning your baby and also about looking after one another.' (1).

Further explanation highlighted the fact that, following the birth of their babies, many young mums live with, and continue to be supported by, their parents. It was felt that the support of grandparents can, for some fathers, act a barrier to their involvement in caring for their baby. Sessions designed specifically to include fathers could therefore help to give some men the confidence to become more involved in their child's care.

3.6.5 Recruitment

Participants were asked for their suggestions for engaging with younger parents and pregnant teenagers and encouraging their attendance at the sessions aimed at them. The importance of timely responses to need was cited by facilitators as instrumental in securing attendance. Further explanation pointed to the gaps in provision which can occur if a pregnant teenager has attended the Younger Mums-to-be group from an early stage in her pregnancy and then has four or five months of her pregnancy with no contact until eligible for attendance at Little Chimps. One member of staff suggested an increased focus on the Pamper Group, run by the Sure Start midwife, as a response to the need to avoid a break in contact and to maintain participation. All staff respondents emphasised the need for increased time and resources to be allocated to outreach work. The positive feedback from the Younger Mums-to-be respondents regarding their experiences of meeting with workers prior to attending sessions supports this view.

In highlighting the need for renewed efforts to distribute regular information to service providers, one facilitator also made the following comment:

'I don't give up selling the group because I'm involved in it and I know how good it is – we need to get the message out to referring agencies so they really do get a flavour of what this is about.' (8).

In considering incentives for recruitment this facilitator also emphasised the importance of consulting with young people to ascertain what they think would encourage young people to come to the group. Another facilitator expressed the view that the previous attendance of a health visitor had been used and had indeed acted as an incentive for many young people to go along to the Little Chimps group. She described her experience thus:

'I think if we had the health visitor here again I think that would make a difference because I say to people come for ten minutes then come and have a chat to the health visitor and then go again....because the biggest problem is I have to find something else and I can get them to come to a group if they've got like a health visitor.' (4).

Group members were asked for their suggestions on engaging with younger people and encouraging their attendance at the groups. One respondent raised the issue of help with transport. A lack of information in GP surgeries was observed by one respondent who also felt that publicity for the groups needed to include some comments from current and previous programme participants. A need to advertise and emphasise the relaxed atmosphere of the group was also put forward. One respondent made the following suggestion:

'I'd include some of the information that we get from here but also say that we do have a lot of laughs and that of course, as (name) says, we do get free food!' (focus group).

Asked what they would say to persuade a friend to come along, one respondent put it thus:

'It's a friendly atmosphere, you can have a laugh and its not just everyone sat there waiting for someone to talk cos no matter who's here someone's always going to talk.' (focus group).

3.7 Conclusion

The data generated through observation, focus groups and individual interviews has revealed a broad picture of the working of the services for younger parents provided by Sure Start Jolly Giraffe, from the perspectives of both service users and service providers. The issues raised will be discussed in the final chapter.

Chapter 4

Discussion

4.1 Introduction

In line with the aim and objectives of this study, the approach to providing services for younger parents that has been adopted at Sure Start Jolly Giraffe has been examined through exploring their impact and outcomes from the perspectives of those receiving and delivering these services. This final chapter of the report aims to consider and comment upon the findings presented in Chapter 3 in the light of the literature reviewed, reflecting upon their implications for Sure Start Jolly Giraffe's promotion and development of services for younger parents.

4.2 Jolly Giraffe's services for younger people

Discussions with parents and pregnant young people sought to explore their experiences of the groups they participated in whilst examining what effect their participation had had on their lives. Respondents were clear in expressing their satisfaction with the groups they attended. It is evident that, in line with the aims and objectives of the services, some younger pregnant women and parents have become engaged with the services and relationships have been forged between younger parents and professionals. The close friendships which service users had formed with their peers, particularly those from the Little Chimps group, emerged as an overwhelmingly positive outcome of participation for the majority of respondents. Focus group discussions around motives for attendance at groups repeatedly returned to the desire of many respondents to spend time with others in a similar position to themselves. This is understandable given the view expressed by some respondents that whilst the lifestyle of friends was no longer compatible with theirs, neither did they feel any sense of compatibility with other 'older' mothers. Kidger (2004) refers to this as 'relational exclusion' and highlights the value therefore of the sense of 'social connectedness' which many younger mothers experience through their attendance at dedicated services (Kidger, 2004, p.303).

4.3 Development of services

Consultation with service users has significantly informed the development of existing formats for each group. Consequently, feedback from service users has shown them to be satisfied with the structure of sessions and very positive about the informal tone of sessions. In particular, the function and structure of the Little Chimps sessions has been very much dictated by the needs and preferences of its users. In acknowledging

that current activities within the group reflect the needs of the toddlers who attend it, consideration could be given to the changes which could be made which would attract a wider audience. The issue of health visitor involvement has also emerged as prominent in this evaluation. The reflections of Little Chimps respondents on the health visitor's invaluable role of advice and support is evidence for the re-introduction of this input.

4.4 Recruitment

As teenage mothers and pregnant teenagers are identified amongst the most excluded groups in Children's Centre Guidance documentation (DfES, 2006b), a performance indicator is set for establishing contact with a target percentage from this priority group. Systems in operation between Jolly Giraffe, midwifery and Connexions for identifying potential service users appear effective. However, it would appear that following referral, despite first contact outreach visits, incidences of subsequent attendances at sessions are low. An additional issue for consideration is the unanticipated failure of Little Chimps to attract and secure participants from the Younger Mums-to-be group. A focus of energies in promoting the involvement of this obvious 'feeder' group would appear a worthwhile investment of time and resources. Discussions with some staff highlighted a view that, despite a desire to increase outreach activity, other commitments prevented any increased investment of time. In acknowledging the difficulties which have been experienced securing the attendance of new younger parents at the Little Chimps the role which the profile of the current cohort has played in deterring new members must be acknowledged. Whilst attendance has been an overwhelmingly positive experience for the current Little Chimps cohort, the failure to secure the participation of new members needs to be addressed. The identification of incentives for engagement and strategies for maintaining contact and participation appear a vital consideration in future strategic decision making.

4.5 Wider service use

The degree of trust and confidence which service users placed in facilitators was consistently evidenced during focus groups and individual interviews. Whilst acknowledging the considerable impact which attendance has had on the lives of group members, it is also important to consider the principle aim of the Little Chimps service, namely to provide users with a 'stepping stone' to wider service use. A systematic review of qualitative research carried out with teenage mothers in the United Kingdom identified a recurring problem in accessing services, 'the wider context was predominantly one of barriers, with studies reporting mothers' difficulties in securing the

help they needed from welfare agencies and their experiences of disapproval and hostility when they tried to do so' (Graham & McDermott, 2005, p.31). The review emphasises the important role which 'link workers' played in mediating young mothers' access to welfare services.

As this work suggests, for a number of younger service users, initiating access to services or requesting advice or information from professionals will be an unfamiliar and daunting task. Increasingly apparent during interviews and discussions was the gap which the Jolly Giraffe services fill for younger people who are reluctant to access mainstream services and activities. There was also evidence of Jolly Giraffe service providers 'signposting' younger mothers to other services, or inviting other health and social care professionals to attend group sessions in order to make contact with younger parents. However, feedback from respondents attending the Younger Mums-to-be group delivered a clear message that their engagement with services, while pregnant, would be dependant upon those services being off limits to 'older' people. Participants stated that, in the absence of the ante-natal group for 'teenage parents' they would not engage with any groups at all. Parents at the Little Chimps group were possibly happier to engage with mainstream services, but still very much rated and valued having a service specific to younger parents. Therefore, in considering how to encourage younger parents to use wider mainstream services, for example seeking advice and information from their own health visitors at clinic appointments, consideration needs to be given to the factors which conspire to prevent some individuals accessing available support. These may be practical difficulties, factors to do with the organisation of existing mainstream services or the attitudes of some health and social care professionals, real or perceived, to younger parents.

4.6 Social exclusion and support networks

The themes of boredom, loneliness and friendship were recurrent in both individual interviews and focus group discussion. Kidger (2004) argues for a 'broader understanding of social inclusion which emphasises the significance of social belongingness and community participation, alongside economic self-sufficiency' (Kidger, 2004, p.291). The strength of the relationships within the Little Chimps group was repeatedly evidenced during both observation and focus group discussions. This cohort appeared very much to have formed themselves into a somewhat self-sufficient unit, a source of mutual emotional and practical support which functioned both within and outside the Little Chimps sessions. Observations made by the parents themselves with regard to the feelings of isolation which had led them to try out the group clearly

support a view that, without the Little Chimps sessions, these individuals would not have had the opportunity to create this social network. The comments of the Younger Mums-to-be group also highlighted the effect which feeling stigmatised in both their peer groups and wider society had had on their feelings of self-worth and consequent willingness to engage in groups with 'older mums'. The enormously beneficial effect which 'belonging' to a network can have on reducing feelings of isolation should not be underestimated.

4.7 Partnership working

Whilst the commitment and enthusiasm of facilitators was consistently highlighted during both staff and service user interviews, a need was identified for an increased investment of time in the planning and review of programme activity. Attention was drawn to a somewhat inconsistent approach to formalised communication and consultation between staff which was attributed to time constraints. Whilst there was no evidence that this had affected the actual facilitation of sessions it was identified as a barrier to a more co-ordinated approach to partnership working. Also highlighted in interviews was a need for a more focused approach to tracing referral pathways and monitoring the use of wider services.

Children's Centre guidance (DfES, 2006b) emphasises the increased focus on multi-agency partnership working which will be achieved through local children's trust arrangements. Ideally this increased focus will enable the formalised agreement and planning of the joint and co-working arrangements on which the effective delivery of services for vulnerable younger parents depend. In acknowledging their contribution to the provision of services for younger parents and pregnant young people in Halton, Jolly Giraffe could occupy a central role in the relevant task and steering groups which form part of the 'Children and Young People's Alliance Board'. This inclusion may become more apparent during the on-going co-ordination and cohesion of strategies for services which contribute to Halton's Teenage Pregnancy Strategy. Indeed Children's Centre guidance (DfES, 2006b) referring to reach, highlights the need for local authorities to 'ensure children's centres liaise with the local Teenage Pregnancy Co-ordinator' (p.6).

4.8 Conclusions

In creating a welcoming supportive environment where younger pregnant women and parents can access advice and information whilst creating their own support networks, Jolly Giraffe has delivered an effective and successful service. Through examining the

views and experiences of stakeholders, this report has identified areas which may benefit from a review of strategy and approach, both within Jolly Giraffe and through wider joint working arrangements.

Whilst systems for the identification and referral of younger people operate smoothly, enhanced information sharing and joint working could do much to secure the willingness of these young people to access services. The availability of accurate and up to date information would greatly benefit the planning and review process for both the Younger Mums-to-be and the Little Chimps services. Equally beneficial to the planning process would be a more formalised approach to information sharing amongst partners regarding current and proposed strategies and initiatives relating to younger parents or teenage pregnancy.

The need to engage younger pregnant mothers and young parents in services has long formed a central part of strategies designed to address issues of social exclusion. However, the effect which unsatisfactory experiences of agency involvement can have on younger people's willingness to engage with services is highlighted in this report. In identifying the need to develop the current model to attract new participants, it is important to recognise the satisfaction of service users with the format and approach of Jolly Giraffe sessions. The views and experiences expressed by those in receipt of Jolly Giraffe's services for younger parents show a high level of service user satisfaction with staff's approach to facilitating sessions.

The content and structure of Little Chimps appears to have been very much influenced by its current, long established cohort. Whilst the visible evidence of user involvement in shaping services is to be applauded, a question arises regarding the extent to which responding to the changing needs of a group of individuals has prevented Little Chimps from pursuing some of its original aims and objectives. Whilst facilitators are, understandably, reluctant to exclude anyone from the group it could be argued that the degree of confidence and self sufficiency which the current cohort evidently possess, is adequate evidence of the success of the 'intervention' and sufficient justification to move them on from the Little Chimps group. To support this move and prepare future service users for this eventuality, consideration could be given to the introduction of age related and time limited eligibility criteria for attendance at the Little Chimps group. In considering the future development of the Little Chimps group, an investment of time and resources in identifying and implementing strategies for recruitment would appear crucial to the service's sustainability.

An aim of the research has been to contribute to the discussion on approaches to providing effective services for younger parents or parents-to-be. A significant finding from this evaluation of Jolly Giraffe's services for younger parents has been the success of facilitators in building and maintaining relationships with younger service users. The development of arrangements for multi-agency working will provide a vital opportunity for other agencies to build upon these established relationships thus expanding the current level and nature of support available to younger parents.

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Appendix 1

Participant information sheet

Participant Information Sheet

Evaluation of services for younger parents in the Sure Start Jolly Giraffe programme.

You are being invited to take part in a research study. Before you decide it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish. Ask us if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part.

What is the purpose of the study?

The purpose of the study is to examine the services which Jolly Giraffe delivers for its younger parents and their children. In order to gain and present a clear picture of this it is important to consult with the staff and parents who are involved in delivering and receiving these services. Participants will be asked for their views on, and experiences of, the Little Chimps group and the Young Mums to-be group.

Why have I been chosen?

You have been chosen because you are:

- A parent who is accessing Sure Start services for younger parents.
- A member of Jolly Giraffe staff involved in the delivery of services to younger parents.
- A member of staff from a partner agency involved in the delivery of Jolly Giraffe's services for younger parents.

Do I have to take part?

It is up to you to decide whether or not to take part. If you do decide to take part you will be given this information sheet to keep and be asked to sign a consent form. If you decide to take part you are still free to withdraw at any time and without giving a reason.

What will happen to me if I take part?

All participants will be asked for their views and experiences of involvement with services for younger parents. Individual interviews should last no more than an hour and with your permission will be audiotaped. Focus groups will also, with your permission, be audiotaped. The content of audiotapes and all information shared in the interview will remain confidential to the researcher. No names or details that could identify you will be used in any verbal or written report.

If you are a parent who attends the Little Chimps group or someone who attend the Young Mums to-be group you will be asked to participate in a focus group. In addition you may be asked to take part in follow-up individual interviews. If you decide to participate in the focus group you should keep this information sheet and sign the accompanying consent form.

Key staff from agencies participating in services for younger parents will be asked to take part in individual interviews. These participants should also keep this sheet and sign the accompanying consent form.

What will happen to the results of the research?

A written report will be produced which will present the views and experiences of those involved in attending or delivering Jolly Giraffe's services for younger parents. This

report will be used to inform Jolly Giraffe's strategic development of current and future services for younger parents.

What are the possible disadvantages to taking part in this study?

There are no foreseen disadvantages in taking part in this study.

What are the benefits to taking part?

Contributing your views and experiences to gain a more comprehensive picture of the role of services for younger parents and the outcomes for individuals and families attending its sessions.

Who is organising and funding the research?

The research is being funded by Sure Start Jolly Giraffe, Halton. A senior researcher from the Centre for Public Health Research, University of Chester will be conducting the study.

Who may I contact for further information?

If you would like any more information about the study before you decide whether or not you would be willing to take part, please contact Frances Mann or Cathy Perry on 01244 512059/512029 or write to them at the Centre for Public Health Research, University College Chester, Parkgate Road, Chester CH1 4BJ.

Thank you for your cooperation.

Please read the above information and sign below if you consent to participate in this research exercise.

I agree to participate in (please tick as appropriate)

- Focus group session* *Observation sessions*
 Individual interview

Name:..... **Date:**

Signature:

Appendix 2

Younger Mums-to-be focus group and interview schedule

**JOLLY GIRAFFE
YOUNGER MUMS-TO-BE FOCUS GROUP AND INTERVIEW SCHEDULE**

Introduction. Welcoming participants, thanking them for coming and an explanation of the meaning and purpose of the evaluation. Reassurance of confidentiality and permission to record the group's conversations.

First I'd like to talk about when you joined the group and what you do when you are here.

1. How did you hear about the group? Who or what persuaded you to come along.
2. Did you start going on your own or with anyone you already knew?
Prompt: (for those who came with a friend) would you have come along on your own?
Prompt: (for those who came on their own) how did that feel?
3. What sort of thing do you talk about/learn about in the sessions? What is the best bit about it?
4. Why did you decide to come to the group? What did you think it would do for you?
5. For your baby what do you think will be the benefit of you coming to these sessions, what have you learnt that you didn't know before?
6. Do you think the group is helping prepare you for having your baby?
7. Will you go to any other ante-natal groups? e.g. at the hospital.
If not: Why is that?
8. Do any of you go to any other sessions/classes?
Have you tried any, if so what did you think, if not why not?

This part of the questionnaire is to find a bit more out about what help and support you feel you and your child will need.

9. If you need advice or support, who do you go to?
10. What about where you live, do you think you'll stay there after the baby is born?
11. Do you think coming to this group has made you feel more confident about going to other things?
What about the Pamper Group, do any of you go to that.
If not, why not?

Now this part of the questionnaire is about getting your suggestions for making the group better.

13. Is there anything you would change about the group or anything you'd like them to talk more about or less about even?
14. Jolly Giraffe run a group for younger mums and their babies called Little Chimps do you think you'll go along to that?
15. If you were asked to organise a group like this for younger mums to-be what things would you make sure were included?
16. If you were running the group what would you do to encourage people to come along?
Prompt: what would you say to a friend to persuade her to come?

Thank you for taking the time to talk to me.

Appendix 3

Little Chimps focus group and interview schedule

**JOLLY GIRAFFE
LITTLE CHIMPS FOCUS GROUP & INDIVIDUAL INTERVIEW SCHEDULE**

Introduction. Welcoming participants, thanking them for coming and an explanation of the meaning and purpose of the evaluation. Reassurance of confidentiality and permission to record the group's conversations.

First I'd like to talk about the Little Chimps group.

1. How long have you been coming to the group and how did you hear about it?
2. Did you go to any groups or activities for mums and babies before coming to Little Chimps?
3. Did you start coming on your own or with a friend?
Prompt: (for those who came with a friend) would you have come along on your own?
Prompt: (for those who came on their own) how did that feel?
4. Was it what you expected?
Prompt: What had you been told about it, why did you decide to go along?
5. What do you think you get out of it?
6. What do you think your child(ren) get out of it?
7. Did (any of) you go to the pregnancy group for younger parents here at Jolly Giraffe? What did you think of it?

Now I'm going to ask you some questions about your experiences of being a younger mum. This part of the questionnaire is to find a bit more out about what help and support you feel you and your child need.

5. So tell me about being a young mum, do *you* think its any different for you than it is for older mums?
If so, how?
If not, why?
6. Where or who do you go to when you need some help or advice?
7. Looking back to before you had your baby and knowing what you know now, is there any help or advice which you think you should have had but didn't?
Prompt: what things are harder to cope with than others?
9. Do you think coming to the group has helped you with joining any other groups or activities?
Prompt: confidence can be a big thing with being a new mum has the group helped with that?

If we could go back to talking about the Little Chimps group

9. What do you like most about it and what do you like least about it?
Prompt: is there anything you think they should change/introduce?

10. If you were asked to organise a group like that for young mums what things would you think were important to include?

11. Do you go to any other Jolly Giraffe groups or activities?

12. Again, if you were running the group what would you do to encourage new mums to come along?
Prompt: what would you say to a friend to persuade her to come?

Thank you all for sparing the time to talk to me.

Appendix 4

Staff interview schedule

JOLLY GIRAFFE

STAFF INTERVIEW SCHEDULE – YOUNGER PARENTS' SERVICES

1. What is your agency/organisation's remit concerning the provision of services or younger parents/younger pregnant mums in Halton?
What is the approach to identifying and engaging with this group?

2. What, in your view, are the factors which most affect the lives of the young parents/pregnant young people you come into contact with?

3. What needs do you feel the Little Chimps/Antenatal group service meets for younger people? How do you see your role in the sessions you facilitate?

4. What involvement do the young people you work with have in selecting and reviewing the activities provided for them and their children?
Example?

5. Social exclusion has been identified by the Teenage Pregnancy Unit as a particular issue for young parents – what do you feel are the barriers to inclusion which are experienced by the young parents you work with in Halton?

6. Education, training and employment have also been identified as areas of focus for those agencies working with younger parents. In your experience how do/have these issues affected the lives of the younger people you work with?

7. Encouraging take up of other services is a major aim of strategy for working with younger people. Do you feel there is enough joint working amongst yourselves and other agencies/organisations in Halton charged with meeting the needs of this group? Example?

8. What developments would you like to see in service provision for younger parents/young pregnant people in Halton?

9. How do you feel that those not participating could be reached and encouraged or persuaded to engage?