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Sure Start - a template for empowerment?

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Beverley Lawrence Beech comments on two recent reports

Sure Start is a government programme designed to bring together early-years education, childcare, health and family support. The first local programmes were set up in 1999. The Government is committed to delivering a Sure Start Children's Centre for every community by 2010.

A study has just been published1 which looks at different Sure Start Groups to see which elements are important in contributing to successful outcomes, and why the 'hard to reach' groups did not attend.

The quality of Sure Start centres varies around the country, as we know from the telephone calls we receive. Those successful centres demonstrated that empowerment was the only dimension where significant effects were identified for parent outcomes both for families with nine month olds and for families with three year olds. Their actions included progressively involving the users in service planning and delivery through volunteering, targeted training, employment opportunities and competent representation on decision-making committees and boards.

A second notable feature was the element of mutual respect for all parties where the contributions of parents to child development were genuinely respected and valued. This resulted in parents feeling more confident in their abilities to make these contributions. They were also more likely to feel a sense of common purpose with the service providers. Things were not just done to or for them; they took an active role in improving their own lives and those of their children. The mutual respect of Sure Start parents may explain the link with higher maternal acceptance of services.

There were, however, problems highlighted in some Sure Start programmes, for example:

- a women's discussion group which started was frowned upon because the women spent too much time with each other and less with the kids;
- mums wanted a bonfire outing and fireworks party. This was frowned upon because of 'risk';
- sweets given to kids at Sure Start were frowned upon because of risks to health;
- in the first study 'they closed the Sure Start community cafe - where everyone dropped in - because of risks to kids with hot drinks'

These emerge as by-the-by examples, but the ethical implications are not discussed.

Non-users of services, including particularly vulnerable groups, (such as travellers, asylum seekers, those involved in domestic violence, those involved in substance abuse)were asked in semi-structured one-to-

one interviews why they did not use services. They reported barriers:

- fathers' perceptions that centres were a woman's place
- few services were offered outside school hours(between ten and three) for working parents
- language and cultural barriers for black and minority ethnic groups
- feeling that cliques dominated the group services
- associations with the stigma of a service for families in need
- lack of confidence in meeting strangers, entering new spaces
- unwillingness to be patronised
- concern about discussing intimate problems in publicspaces
- already having a network of family/friendship support

The repor t made a series of comments about these issues:

- 'Some non-users told us that they did not need services other than access to traditional pre and postnatal healthcare, citizen's advice for housing and debt concerns and childcare and pre-school for the children. Others told us they simply wanted to retain their autonomy as parents. As one respondent told us when SSLP staff offering "support" approached her, "I thought it was a bit of a cheek. I've already brought up two kids. I found it interfering."... Another parent said, "I already have my family around here to help me. I don't need to go to strangers for help"...'
- 'Other parents with extreme problems such as drug or alcohol related abuse, mental health problems, domestic violence or criminal records were reluctant to be drawn into "systems". They were frightened. They did not want to be on anyone's list. They had learned not to trust professionals, even those with [Sure Start] logos on their T-shirts. They were unlikely to let para-professionals or volunteers into their homes. A long timescale is needed to break down such barriers.'
- 'Confidence to engage in genuinely empowering parents marked out some of the Sure Start programmes as particularly impressive. Where [Sure Start personnel] were less proficient it was too easy for professionals to go through the motions of doing so by setting up parent forums, committees and link meetings to which only the more "favoured" parents were invited and "heard".'

The Report's authors went on to state, 'Our evidence was that these were often the least troublesome and more articulate parents in the communities, and not representative of the majority of local families.'

AIMS Comment

The government is to be congratulated for ensuring that this new initiative was subjected to an evaluation from the beginning. It is clear from the studies that empowering the parents produces the most significant positive effects, however, the study also found, in common with other studies, that among the disadvantaged families living in the Sure Start areas, parents and families with 'better human capital' than those with less human capital (i.e. teen parents, lone parents, parents in workless

households) were more able to take advantage of the services on offer. The approach of 'empowering' parents[2] should be embraced by the maternity services and instead of offering the hollow chalice of 'choice' the services might begin to respond to women and babies' needs and truly respect individual parents and understand the difference between support and control.

References

1. Understanding Variations in Effectiveness amongst Sure Start Local Programmes. Research Report NESS/207/FR/024, HMSO 2007
2. Empowering Parents in Sure Start Local Programmes. HMSO 2006 by Fiona Williams and Harriet Churchill