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**Children and Young People Department**

## **Equality Impact Assessment**

### **Parenting Support to Families – Penge and Anerley Children's Centres – Bumps to One Group**

**Prepared by:** Nancy Lartey, Head of Centre  
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Debbie Brewer, Community Information/Support  
Worker  
Gwen Edwards, Team Administrator

**End Date:** October 2008

## STAGE 1 – PLAN EQUALITY IMPACT ASSESSMENT

**1a. Title of the EIA:**

Parenting Support to Families – Penge and Anerley Children’s Centres

**1b. What category of EIA is this? Please tick one of the following:**

Part of planned work	Yes
Developing new policies	
Changing/ updating existing policies	

**1c. Timetable for assessment:**

Start Date	
Projected end date	

**1d. Who will do the EIA? Please complete the following table:**

Name	Job Title	Roles & Responsibilities within EIA Team
Nancy Lartey	Head of Centre	Lead Officer – Supervision of Research
Rosemary Norman	Health Visitor	Lead Professional – Parenting Training
Debbie Brewer	Community Information/ Support worker	Lead Professional – Young Parents Group
Gwen Edwards	Team Administrator	Assistance with Research

**1e. Identify any other resources that are needed to support EIA:**

Bromley PCT  
Voluntary organisations  
Community groups

## STAGE 2 – ANALYSE THE POLICY

### 2a. Briefly describe the aim of the policy:

- To provide equal access to parenting advice and support in an inclusive manner for all parents of children aged 0-5 years old.

### 2b. Set out the policy objectives:

- To provide a service that empowers parents to make informed choices about their pregnancy, labour and caring for their babies and children.
- To provide a service that increases parents' confidence in their ability to adapt to parenthood.
- To support and value the importance of the parent-child relationship, commencing in the ante-natal period, recognising the effect on the child's mental health.
- To improve parental mental health during pregnancy and in the first years of parenthood, or at least recognise at an early stage that a parent is depressed, offering appropriate early interventions.
- To offer a service that is inclusive, targeted and celebrates cultural diversity.
- The reputation of the Council as providing services for all is enhanced.

### 2c. Break down the policy into its key areas:

- Access to parenting advice and support to all families with children aged 0-5 years old.
- Targeted/outreach approach to service delivery
- Ability of all sectors of the community to contribute to the development of the service through on-going evaluation.
- Reputation of the council (CYP Service) for all is enhanced.

### 2d. List the intended recipients of the policy:

All antenatal women and parents and carers of children aged 0-5 years old. In the Anerley and Penge area. (Bromley).

**2e. Identify partner organizations and any other departments involved in delivering the policy:**

- Bromley PCT
- Bromley Children’s Project
- Voluntary Organisations:-  
Welcare  
Home Start  
Girls Friendly Society (GFS)
- Community Groups:-
- Somali Well Women’s Project

**2f Identify and list any stakeholders concerned with the delivery of the policy:**

N/A

**STAGE 3 – ANALYSE THE EQUALITY ISSUES OF THE KEY AREAS OF THE POLICY**

Category:	Age	Disability	Gender	Race	Religion/ Belief	Sexual Orientation
Considered in EIA?	Yes	Yes	Yes	Yes	Yes – but not mandatory for PCT to ask	No – not PCT Policy

KEY AREAS:	ALL ASSOCIATED DOCUMENTS: For example: statements, forms, supporting policies ect	EQUALITIES GAP ANALYSIS :
Access to parenting advice and support to all parents of children aged 0-5 years old.	1. <b>Bumps to One Group.</b> This is a universal group for parents who expecting a baby or with a baby up to one year old. It is a relaxed weekly drop-in, where parents can share experiences, build up social support and obtain advice from the professionals who facilitate the group. The group is facilitated by members of the Health Visiting Team, a Midwife and	The group is only open to parents with babies up to a year- so that it is a safe environment for small babies. Therefore parents with older children were excluded. The Centre now offers a limited crèche facility for older children, and consideration may be needed to expand this further, should the need dictate.

<p>Targeted/outreach approach to services delivery</p> <p>Ability of all sectors of the community (parents of children aged 0-5 years) to contribute to the development of the service.</p> <p>Reputation of the council (CYP service) for all is enhanced.</p>	<p>other professionals attend on a rota system, for example Speech and Language Therapist, Dentist, Dietician and Real Nappy Service. It is an open access group to all parents in the locality. The group is advertised by the Health Visiting Team, who give parents a leaflet at the new birth visit. It is also advertised in the Centre bulletin.</p> <p><b>2. <u>Incredible Years Parenting Groups</u></b></p> <p>This is a twelve week evidence based parenting course (Webster Stratton) to offer early support and advice to parents to facilitate the parent – child relationship, and to prevent or ameliorate child behaviour concerns, focusing on families with at least one child aged between two and five years. It aims to provide a non stigmatising service to all parents, with either self referral or professional referral with parental consent. A free crèche is provided. The courses are offered mainly by the Health Visiting Service; but also some multidisciplinary working. They have run every term in the Penge area since June 2005. The programme has been rolled out this September, so that there are three courses running concurrently in the Bromley area.</p> <p><b>3. <u>Acorn Group</u></b> is a weekly group for vulnerable families, term time only. The group is based on the model in operation across the Bromley Borough of multi agency partnership between Health and Social Services. Families attending are those identified by Health Visitors, Social Workers or other professionals working with the family as being under stress and in need of extra support and advice. The group is open to any family needing this additional support, provided they have a</p>	<p>Although fathers are welcome to the group, and we currently have two attending regularly (one attending the Midwifery session, the other with his baby) they are very much in the minority. Consideration may be needed how to encourage fathers to access services more, and are designed specifically to their needs</p> <p>Parents were very concerned about what to do when their baby reached their first birthday, and therefore could no longer attend the group. In direct response to this need, the 123 group was formed, for the older children, and is run on a similar basis to the Bumps to One group, but appropriate to the older age range of children.</p> <p>Initially the courses were always delivered from Community Vision, which may have restricted access to some families. The venue and times of the groups will now be rotated around the different Children Centres to give greater flexibility and access to parents.</p> <p>Fathers are welcome; but again are rarely present. A proportion of the mothers attending are single parents, and therefore the father is not a part of the family unit. However timing of the groups may be an issue for working fathers. The issue of venues and staffing would have to be considered before offering evening or weekend groups.</p> <p>Once a referral is received, the family is contacted as soon as possible either to invite them to the group, or to inform them of how soon we will be able to invite them to the group. A home visit is offered to introduce ourselves to encourage attendance. If a parent is particularly nervous about attending, we will ask if the referring professional could attend with them on the first occasion. However, despite all these strategies, it is not</p>
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	<p>child between birth and the age of five years. The reasons for referral are extremely varied, from social isolation, parenting difficulties, depression to child protection issues. The aim of the group is to give advice and support in a non threatening and timely manner, to increase the parents own self esteem and confidence in being an active member of the group, helping with making lunch and play activities, and for the parents and children to have fun together.</p>	<p>always possible to engage with the parents, and if this occurs, we will write to the parent encouraging them to contact us and also the referrer will be informed. Sometimes it is the most vulnerable who do not attend, and it is then that the referrer has to decide whether a referral to Social Services is required.</p>
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Category:	Age	Disability	Gender	Race	Religion/ Belief	Sexual Orientation
Considered in EIA?	Yes	Yes	Yes	Yes	Yes – but not mandatory for PCT to ask	No – not PCT policy

KEY AREAS:	QUANTITATIVE DATA: For example: monitoring information, census data, performance indicators, Borough benchmark data, customer surveys	EQUALITIES GAP ANALYSIS :
<p>Access to parenting advice and support to all families with children aged 0-5 years old.</p> <p>Targeted outreach approach to service delivery.</p> <p>Ability of all sectors of the community including parents of children aged 0-5 years old to contribute to the development of the service.</p> <p>The reputation of the council (CYP service) for all is enhanced.</p>	<p><b>1. Bumps to One Group</b></p> <ul style="list-style-type: none"> <li> <p><b>Attendance of Mothers and Babies.</b> The group has grown hugely since it started in January 2005, which has had both positive and negative outcomes. Only approximately 10% of the groups had 16- 20 mothers and babies attending, with therefore 90% having 21 or more mothers and babies (42 and more individuals!!). The largest group had 40 mothers and babies!</p> <p>However, although a large proportion of the mothers obviously enjoy and value the group, with 56% attending 3 or more times, of which 40% attended 6 or many more times; there is a very significant minority of 44% who only attend 1-2 times.</p> </li> <li> <p>The attendance of antenatal mothers is understandably much smaller. 42% of the groups had 1-2 mothers attending and 46% had 3-5 plus mothers' attending. 55% of antenatal mothers attended 1-2 sessions, frequently attending in the last weeks of their pregnancies, having started maternity leave. 45% attended 3- 5 plus sessions, so not only obtaining Midwifery advise and support; but also making social contacts within the group.</p> </li> <li> <p><b>The ethnicity of the group</b> is quite broad. The ethnicity of the mothers with babies comprise 45% White British, 20% Other White background, 20% Black and 15% being a diverse range of other ethnicities. 38% of the antenatal mothers are White British, 16% are Other White Background, with an increasing number from Eastern European countries. 32% are Black (Caribbean, African and Other).</p> </li> </ul>	<p>This is of concern, and from personal observation and verbal feedback from professionals and parents, the very success and size of the group is a disincentive to new parents to attend. It is obviously very daunting for a new parent to come into a room with so many people, and despite our best attempts to welcome and integrate them into the group, they vote with their feet.</p> <p>One suggestion by a parent was to split the group into two – "Bumps to Sitting" and the "Crawlers to Walkers". This would certainly overcome the overcrowding problem, and I think new parents would feel less overwhelmed by the size of the group. However the issues of staffing and venues would need to be addressed.</p> <p>Two more Bumps to One Groups are being developed in the Borough – in areas needing additional services – these being at Burnt Ash and Blenheim Children Centres.</p> <p><b>Ethnicity.</b> There is a large Somali community in the Penge area – however this is a cultural group that has not been represented at the group. However, the Somali</p>

	<ul style="list-style-type: none"> <li>• <b>Age of mothers attending</b> - the group attracts mothers who are in their twenties and above, generally not the young parents. This would be an issue if there was not any other appropriate service – but this gap in service is more than amply filled by the Young Parents Group</li> </ul> <p><b>3. <u>Incredible Years Parenting Groups</u></b></p> <p><b>Attendance at groups.</b> There have been 11 groups delivered including the groups running at present, and a specific group delivered to the Somali community since June 2005. Approximately 60% of the attendees attended 7 or more of the 12 sessions. Generally twelve parents are invited to each course</p> <p><b><u>Ethnicity</u></b></p> <p>Approximately 58% of parents attending the parenting courses were White British, 15% Other White Background, 20% Black or Mixed Race and therefore 7% Other Ethnicities. This is possibly not an accurate reflection of the ethnic range in Penge, where the majority of the groups have occurred to date.</p> <p><b>Acorn Group</b>  <b>Attendance at groups</b> – due to the nature and needs of this group, this is a smaller group. Currently there are ten families on the register, with approximately 6 – 8 families attending each session, and this has been the general trend over the past three years. Of the families</p>	<p>community do have a very active Centre and there has been some outreach work undertaken there and perhaps could be extended as needs the Somali community dictate.</p> <p>To encourage attendance the facilitator contacts all the parents prior to the course to introduce ourselves. If someone does not attend the first session, a follow up call is undertaken to ascertain the difficulties and discuss other choices that may be more appropriate. If the parent has been referred by a professional, than liaison with that professional would be undertaken. We welcome other professionals accompanying the parent initially, should that be appropriate. However, sometimes, one has to accept it is not the right time for the parent to attend, and they are given the information when the next course will commence.</p> <p>Information about the courses is widely distributed before the courses, to the Health Visiting Teams, other professional bodies, including Social Services and also advertised in the Children Centre Bulletin.</p> <p>A specific group was run in the Somali Centre following a request from the Somali Community, and this was well received.</p> <p>Advertising to specific ethnic groups may need to be considered.</p> <p>If a family is longer attending and we do not know the reason, we will try to contact the parent to ascertain the reasons and offer support as</p>
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	<p>attending, 50% attended more than five times, with approximately 15% attending more than 11 times. There are various reasons for parents leaving the group – but encouragingly the majority of reasons are positive – moving, starting work or training, and the child commencing pre-school or school.</p> <p>The group does not generally attract the young parents, who can access the Young Parents Group</p> <p><b>Ethnicity</b> The ethnicity of the group generally is very diverse. Approximately 39% are White British or Other White background, 56% Black (Caribbean, African or Other Black Background) and 5% other Ethnic Groups</p>	<p>appropriate. If this is not possible we will inform the referrer.</p> <p>This group is a high intensity group i.e it requires a high level of professional commitment to be available to talk with parents about their many needs and concerns, while still managing the practical running of the group. The level of staffing is at present able to manage the group appropriately; but should the need arise to increase the size of the group, and then more staff would be required.</p>
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Category:	Age	Disability	Gender	Race	Religion/ Belief	Sexual Orientation
Considered in EIA?						

KEY AREAS:	QUALITATIVE DATA: For example: customer opinion surveys, staff forums, focus groups, "Getting it Right" feedback	EQUALITIES GAP ANALYSIS :
	<p><b><u>Bumps to one Group</u></b></p> <p><b><u>EVALUATION COMMENTS</u></b></p> <p><b><u>What do you enjoy about the group?</u></b></p> <ul style="list-style-type: none"> <li>• Meeting other mums – having that space to get to know each other</li> <li>• Singing</li> <li>• Being able to talk to the Health Visitors</li> <li>• Gives child a chance to interact with other babies</li> <li>• Conversation and learning from other mums</li> <li>• It has been a lifeline – I could not have managed without Bumps to Ones</li> <li>• Access to advice if needed</li> <li>• External professionals helpful</li> </ul> <p><b><u>What do you least enjoy about the group?</u></b></p> <ul style="list-style-type: none"> <li>• Gets too crowded at times</li> <li>• More difficult when baby is older and moving!</li> </ul> <p><b><u>Incredible Years Parenting Courses</u></b></p> <p><b><u>SOME OF THE EVALUATION COMMENTS FROM PARENTS ATTENDING THE COURSES.</u></b></p> <ul style="list-style-type: none"> <li>• Given ideas or handling situations and behaviour</li> <li>• Exchanging experiences with other parents</li> <li>• Child gained more understanding parent</li> <li>• Calmer parent</li> <li>• Not feeling alone and reassured that as a parent I'm not doing anything wrong</li> <li>• Confidence in parenting skills which makes happier children</li> <li>• Self awareness</li> <li>• Positive parenting is the best solution</li> <li>• I'm more in control of mine and my child's behaviour</li> <li>• Using these skills and techniques will make a more relaxed home</li> <li>• The 12 weeks(course) has had a huge</li> </ul>	<ol style="list-style-type: none"> <li>1. Too crowded</li> <li>2. difficulties when babies on the move!</li> </ol>

- impact on my family's life
- Above all I have realised just how important listening is

**Acorn Group**

**WHAT DO YOU LIKE ABOUT ACORN?**

- Very friendly atmosphere. Everyone is very helpful
- Friendly and peace and enjoyable atmosphere
- Very pleasant and considerate staff – welcoming
- Calming and socialising while having a meal with kids and adults – gives me strength to look forward and positive
- I like the atmosphere, welcoming warming environment
- I can come to socialise
- Meeting people
- Meeting new people, the kids playing together. Not feeling so isolated
- Helpful workers, who give me advice on my daughter and other problems I have
- It also helps daughter to learn how to sit at the table and eat with others.
- The kids eat together and play together (nice for them to share food together as my son rarely eats with other kids) and talking to other mums
- A place to go with the children and socialise and adult conversation
- Free lunch, meeting up with friends, the children playing and getting advice
- Daughter enjoys playing – it's good not to stay at home
- Likes her child to make friends and mum gets to meet people
- Getting out of the house and meeting others. Gives a bit of a break as sharing the kids together
- Everything is lovely – group meets everyone's needs
- The staff and lunches are lovely and I can come and chat to other mothers like myself
- I can have a laugh at Acorn
- I like everything!
- **June 2007**: Phone call received from young mother who had attended the group for about a year and had moved away from area about nine months previously. She said how much she had appreciated the group while she had been going through a very difficult time

	<p>in her life (violence from ex partner, intimidation from neighbours, relationship and financial problems). She had found the group very supportive, a place where she was listened to, and where her child could play, and it helped her to get through the week.</p>	
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## STAGE 4 – SET OUT THE ACTION PLAN AND TARGETS

the equality action plan must be integrated into the performance centre improvement & efficiency plans/ service plans.

KEY AREA	EQUALITY CATEGORY	PROPOSED ACTION/TARGETS	KEY MILE STONES/TIMESCALE	WHO IS RESPONSIBLE?	RESOURCES & TRAINING REQUIRED?
Involving fathers		Advertise in bulletin for fathers who may want to set up father's group Consider employing male outreach worker		Nancy Lartey	
Ensure services are reaching Black Ethnic groups		Outreach work to work with local community Groups		Nancy Lartey	
To maintain and increase capacity of groups		To consider recruiting, training and supervising parent volunteers to work alongside the professional staff in group situations			

### STAGE 5 – Feedback From Stakeholders On Draft Action Plan

Stakeholder	Date consulted	Feedback	Impact on Action Plan
Departmental Equality Group			

### STAGE 6 – Submit Draft Action Plan To DMT

<b>Date submitted:</b>	
<b>Feedback:</b>	
<b>Changes made: (If required)</b>	

### STAGE 7 – Integrate Agreed Actions & Targets Into I&E Plans

<b>Date complete:</b>	
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### STAGE 8 – Produce And Publish EIA Report

<b>Date published:</b>	
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