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Article

Do Parents/Carers Feel Supported? Evaluating the Landscape of Parent/Carer Services in a City in North West England

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Abstract

There have been many evaluations of specific parent programs, but there is minimal evidence of evaluation of the broader landscape of established advice or support services for parents of children under 18 years old. This paper investigates parent/carer perceptions of support services in their case study city. We explore and examine their perspectives on existing support services and how far they are meeting their needs. Through a thematic analysis of semi-structured interviews with parents and carers from across the city, a range of key themes emerged. These included the supportive environment and positive ethos of services accessed, lack of trust in some professionals, and perceived gaps in provision, highlighting the need for more activities, support, and accessible information, especially for families with special educational needs and disabilities (SEND). These findings underscore the complexity of navigating the landscape of support services and advocate for more coordinated, accessible, and trustworthy support systems for parents and carers.

Keywords: parenting; local; community; landscape of practice; boundaries

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1. Introduction

Knowledge about what is effective in the field of parenting support services is often sporadic due to funding for evaluation often being linked with policy agendas (Moran & Ghate, 2005). There have been many evaluations of parent programs, but there is minimal evidence of evaluation of established advice or support services. Yet Barlow and Stewart-Brown (2001) highlighted the need for evaluation of these services. This paper investigates provision of services for parents in a case study city from the perspectives of parents and carers, to illuminate the process and outcomes of such consideration. Our purpose is to explore how agencies or stakeholders could examine perspectives of parents/carers as to whether their support services are meeting their needs in this case study city.

With this purpose in mind, the aims of this paper are to explore the following: What are the perceptions of parents/carers about existing services? And what are the gaps and opportunities for enhanced service provision?

The findings can be used by local organisations and services, including city councils, to inform ongoing strategies to support parents/carers, since they indicate how authorities can evaluate the broader landscape of provision, rather than focussing on individual programmes or activities, and evaluate whether they are fit for purpose. Research into family science is developing and revealing more about how families function and operate

(Gkoulemani & Giannakopoulos, 2025; McGregor et al., 2025) and how support services may connect into this more effectively (Churchill et al., 2024; Stolz & LaGraff, 2025). The Levels of Evidence-Based Intervention Effectiveness (LEBIE) scale (Jackson, 2009) is often used to evaluate parenting programs or interventions based on their research design. However, rather than evaluating individual programs, this paper seeks to investigate parent/carer perceptions of the landscape of provision and support services in a case study city in North West England.

2. Background

2.1. The Need for Parent/Carer Support in Contemporary Times

Becoming a parent brings significant challenges (Lévesque et al., 2020), and a myriad of constantly changing factors often result in parenting being very stressful (Crnic & Low, 2002). The loss of sense of personal individuality can cause emotional challenges to parents (Lévesque et al., 2020). Burgdorf et al. (2019) found that the psychological well-being of parents and children is compromised where there is increased parenting stress, and Lévesque et al. (2020) highlighted that parental stress is often intensified by fatigue, lack of sleep, feeling socially isolated and alone, and the balancing act between work, school, and family. Conversely, mental health and well-being are key to navigating parenting stress and adjustment to parenthood (Rollè et al., 2017). It is therefore key to explore this interplay.

Most parents welcome support and are satisfied by services provided (Barlow & Stewart-Brown, 2001; Ghate & Ramella, 2002). They usually find support programmes to be helpful, including parents who were ‘forced’ to take part (Stone et al., 1999). However, significant proportions of parents do not access support or help offered (Moran & Ghate, 2005). Either they may never seek out the services or they are not referred to them despite accessing health care, education services, and other community services. The needs of parents and families are often multi-faceted and overlapping, such as living in conditions of poverty, poor housing, social isolation, marital conflict, poor physical or mental health, and reduced educational attainment (Moran & Ghate, 2005). This is further compounded by the recent cost of living crisis (Skinner et al., 2023).

Families with children who have special educational needs and disabilities (SEND) face additional pressures. According to Holland et al. (2018), such parents face a range of unanticipated challenges, which in turn have a significant psychological impact, often affecting well-being and relationships. These include not only the behaviours and limitations presented by their children, but also financial stress, difficulties in gaining a diagnosis, and lack of support following a diagnosis. As Green’s (2003) research highlights, parents often feel that friends and family members do not understand the behaviours of their children or the additional difficulties they face. Holland et al. (2018), also identified incidences of stigma and a refusal to accept diagnoses and concerns from wider family, leading to an experience of social isolation, anxiety, and a sense of guilt. Many parents face challenges and barriers from being involved in the special education process for their child (Rios et al., 2020). According to Herwegen et al. (2018), parental involvement in decision-making is low, and when surveyed on their views, parents expressed concerns regarding educators’ level of awareness of specific disabilities, the level of support for their children’s mental health, and the lack of in-class specialist intervention such as music, language development, or physical education. In recent years, there has been an increase in SEND children being educated at home (Ludgate et al., 2021). Nevertheless, there seems to be a need for parents to experience increased levels of support. As Holland et al. (2018, p. 393) point out, they ‘need opportunities to express and clarify their feelings’ concerning the challenges they face as well as a chance to input into decisions made that will affect their family life.

Similarly, parents and children who have English as a second language face a certain degree of challenge. In the past decade, the population of the case study city has seen a growth of 66% in relation to numbers of non-UK born migrants taking residence; therefore, there is an increased need for parenting support for those for whom language is a barrier. In their study involving refugee families, Dolan and Sherlock (2010) identified language and communication issues as significant challenges for parents, resulting in a sense of isolation and a reluctance to be willing to culturally engage with the local community. This is exacerbated if children's services and the networks built from their activities are not meeting their social and family support needs.

Economic pressures also impact family stress (Conger et al., 1994). Aside from its direct impact on parental well-being and functioning, economic pressure can also lower parents' capacities to use positive parenting approaches and affect children's development (Masarik & Conger, 2017; Polizzi et al., 2021). For example, emerging evidence has revealed how economic pressure may negatively predict children's cognitive skills and school readiness (e.g., Dilworth-Bart, 2012; Fung et al., 2023; Micalizzi et al., 2019). Therefore, it is important to examine policies and practices which may impact parental psychological distress. Drawing on the Bioecological model (Bronfenbrenner & Ceci, 1994), parent and carer services can be the vital protective factors that support parents and families to cope with the difficult circumstances. Since parenting stress is the result of a perceived imbalance between the demands on parents and the resources available to them (Deater-Deckard, 2008), it is key to explore this balance amongst the parents of the case study city alongside consideration of what occurs within the city to support parents in light of this.

2.2. Provision of Support for Parents/Carers

It is clear that the perceived trustworthiness of the service provider is a critical element in the recruitment and retention of parents in parenting support programmes, particularly from some ethnic groups (Gross et al., 2001). Nevertheless, Lin (2014) argues that emotional support groups cannot resolve the needs of families for concrete services to care for their children. Many parenting support services are designed to have multiple components and tend to be more effective than uni-modal designs (Moran & Ghate, 2005). Whilst legislation (Education Act, 1981) states that parents should be partners within a multi-agency team overseeing their children's education and care, the reality is that many feel devalued, excluded, and disempowered in regard to decision-making processes; their views, which should be sought and encouraged, are often ignored (Armstrong, 2020). Professionals such as social workers act as a 'gatekeeper to declining resources' (Armstrong, 2020, p. 8), which again can result in increased stress and anxiety, especially when the need is acute, and as highlighted in Armstrong's (2020) research, it is often only the most articulate and well-supported parents who are able to argue for the resources their children need, resulting in working-class parents and non-English speaking households being disproportionately disadvantaged.

In the light of these challenges to providing support, Lévesque et al. (2020) recommended support in the form of sharing and distribution of tasks between parents, and an adjustment in the gendered nature of maternity. Whilst Burgdorf et al. (2019) found that parental mindfulness interventions reduced parental stress and improved outcomes for families, Fonseca et al. (2020) highlighted the important role of psychological flexibility within parenting as a self-regulatory skill. Lin (2014) emphasised the need for modes of evaluating formal services to be developed. Such analysis may examine usage levels, the degree of social support provided to users, development of coping strategies, and increased knowledge of and access to child-related services (Lin, 2014). In terms of well-being outcomes, support services also helped improve caregivers' mental health and children's self-esteem, behaviours, and school performance.

2.3. Communities and Landscapes of Practice

To gain a wider perspective of the organisations supporting parents and carers, Wenger's work on Communities of Practice (CoP) and latterly, Landscapes of Practice (LoP) was considered. CoPs are communities of mutually engaged practitioners who share interest in the same practice. This is suggestive of a practice-based view of organisations (Corradi et al., 2010; Nicolini, 2013). Wenger (1998, 2010) understands professional occupations as being a complex Landscape of several Communities of Practice, all involved not only in practising the occupation but also in learning and innovating. CoPs are groups of people, such as in an organisation, who regularly learn together and from one another because they share the same real-life problems (Wenger, 1998). Wenger (2010) suggests that as each has its own regulations, routines, language and histories, it is at the boundaries of these CoPs that innovation and new thinking can happen. A LoP is a much wider concept than a CoP. LoPs are the totality of all CoPs and practitioners, and rather than focusing on the plurality of social formations which can sustain a practice, in LoPs the emphasis is 'on the multiplicity of practices involved, the importance of boundaries among them, and with problematising, identification and knowledgeability across these boundaries' (Wenger-Trayner et al., 2014, p. 27). Boundaries occur when CoPs within the landscape do not have shared practices, histories, or regulations and are therefore potential sites of confusion, challenge, or differences. Boundaries between practices can be harmonious, collaborative, and filled with potential for new thinking. Or they can be points of conflict, difference, and competing practices. Boundary encounters and crossings are an essential aspect of understanding a LoP.

Pyrko et al. (2019) explore the implications and conceptualisations of LoPs for organisations. They argue that the LoP perspective helps various communities to be seen within the same landscape as being accountable to one another in terms of their respective practice-based knowing. This suggests that the support of communities within LoPs requires legitimisation at three distinct levels, not only at the levels of community and organisation, but also by paying attention to the changing epistemic characteristics of the landscapes. We seek comprehensive understanding of LoP of services available to parents and carers in one city, in North West England. This includes the organisations involved within the landscape, the gaps and potential sites of development, as well as perceptions and trust that parents/carers invest in the organisations.

3. Methodology

This explorative study sought to uncover the perceptions of parents/carers about the services provided in a case study city. The aim was to identify gaps and opportunities for enhanced service provision in the case study city. Aligning with the approach of Moran and Ghate (2005), qualitative evaluations were sought to provide a rounded picture of the landscape of services in this city. Consequently, semi-structured interviews of parents and carers (n = 202) were carried out by the research team using the following set of questions:

1. Please tell us about this setting (in which we are carrying out the interview). Have you been before? Do you find it a helpful/supportive setting? Why?
2. Are there any other organisations which help you as a parent/carer?
3. If you knew a parent who wanted to find help or support, where would be the best place to send them?
4. Do you think parents/carers can trust formal services? Why/why not?

5. Do you think there are any gaps or opportunities in services provided for parents/carers in this city/area?

The questions were intentionally open-ended to authentically explore participants' views and experiences without the present agenda of the research team, and probing was used to garner insights to match our objectives. In order to access a broad range of participants and access the target groups of parents/carers of SEND children, those with English as a second language, kinship carers, and low-income families, the research team visited partner organisations ($n = 8$) around the city during their regular sessions and activities, circulating amongst the parents and carrying out interviews. This naturalistic nature of the interviews enabled the participants to feel at ease and comfortable in their usual surroundings, although the interviews were challenging due to the child usually being present at the activity, resulting in parents/carers being required to continue supervising their child while simultaneously being interviewed. Nevertheless, this was considered to be a beneficial technique since it enabled time-pressured participants to take part in the study, diversifying the self-selecting sample. Interviews, which typically lasted between five and ten minutes, were successful at probing the interviewees on these topics and enabling their insights to be captured, whilst keeping them at a reasonable length that was acceptable to increase willingness of participation. The length and pace of the interviews were controlled by the participants, since they followed a natural conversational style, so that when participants had said all they wished on one question, with some probing, the next question was asked. This interview length seemed optimal and appropriate for this project. Increased length of interviews would not have yielded more information since interviewees seemed to say all they wished on this topic. The interviews were audio recorded to enable subsequent analysis.

Those who were parents or carers of children under 11 years old and living in the city of interest were invited to take part in the research interviews. No demographic or identifiable information was requested from the respondents to assure them of anonymity and confidentiality. However, it was observed by the research team that the sample was approximately 60% female and 40% male. About 70% of the participants were approximately 25 to 40 years old and were parents/carers, with about 30% being aged 55–70 years, and these were often grandparents. Despite the settings being located in low-income areas, the service users and research participants were estimated to be mainly those working in middle-class jobs and were well educated. There were about 25% for whom English was an additional language. The lack of demographic data collection did marginally impede interpretation of the results and could be an area for future development. However, the main aim of the project was to gather insights from parents/carers across the area, so demographics were not of primary importance. Participants were provided information and asked for consent before the interviews took place. They also provided consent for the interview to be recorded to aid transcription and analysis later.

The interviews were analysed using thematic analysis (Braun & Clarke, 2019), to identify codes in the responses, cluster the codes, and then identify the themes within the data. Thematic analysis was selected due to a desire to listen with no preconceived agenda or framework. As with Barlow and Stewart-Brown (2001), illustrative quotations have been selected from the data and included below, since the objective was to be aware of as many different perspectives as possible within the sample of parents/carers. Whilst this project sought to limit selection bias by visiting a range of play spaces around the case study city, it was found that there were very few low-income families who participated since they seemed to not be present in these play spaces but also were often less willing to participate in the research. This was a disappointing limitation of the project, and future efforts need to incorporate more creativity to capture the interest and participation of these wider groups.

Similarly, it was very difficult to make contact with parents/carers where English was an additional language. These are areas for future development.

4. Findings

4.1. Perspectives on Existing Provision

The reasons given for attending services varied across the participant groups. There were 307 initial codes generated in response to this question, in which six themes were identified. Firstly, the environment of the provision was cited by 48% of the responses. Of these responses, half talked about the activities or resources provided. In the play-based settings, this included a range of age-appropriate toys, stories and books, singing, and crafts. In the kinship carer group, information courses and advice alongside an advocacy service were cited as the attraction to the service. In the cohort of SEND families, there was a similar appeal to attend provision which provided targeted information and support. All sectors included refreshments or food in their descriptions of the positive environment. The other main aspects of the provision's environment were regarding the structure and atmosphere of the setting (39% of the environment codes). This included aspects such as it being safe, clean, spacious, calm, relaxed, well-organised, and flexible. Some aspects of the environment which were mentioned less often (the remaining 13% of the environment codes) were entertainment of their child, supporting their child's development, and multiculturalism.

The second theme identified in responses regarding reasons for attending was the ethos of the activity (23% of the codes). This was primarily about the supportive nature of the service, particularly the staff. In the SEND families, there was specific mention of supportive teachers or teaching assistants. The third theme (14% of the responses) related to the social aspect of the activity, with parents/carers appreciating the fact that both children and parents could socialise and interact with other children and parents. The kinship carers and SEND parents/carers specifically talked about the value of peer support from others who were in a position or experience similar to theirs. The fourth theme identified in the responses (6%) was about convenience of the activity, such as close proximity to home, local to other services they used (such as park, library, or dance class), suitable for different age groups, and being open during school holidays. A few of these responses said that it was a 'break for parents'. The fifth theme identified was financial (3%), as these participants said that the setting was 'affordable'. The participants who included this aspect in their response were all interviewed at the pre-school playgroups and said that many other groups for young children were deemed expensive. The final theme in these responses was religious, in that one participant stated she attended the setting because they had a good understanding of Eid.

When participants were asked what other services or activities they attend with their child across the city, the broad categories were free of charge (such as libraries, museums, children's centres, church groups), chargeable activities (music groups, toddler groups, playgroups, dance or swimming lessons), and commercialised settings (mainly soft play). A significant portion mentioned children's centres, but participants generally indicated a preference to attend groups either to entertain their child and give the parent a break, or to attend activities of a specific or specialised nature, such as parenting courses, sensory course, breastfeeding, baby led weaning, yoga, and toddler music or dance. In addition, settings which were purpose-designed for children were popular, such as the playgroups and soft play environments.

4.2. Signposting Parents/Carers for Support

Parents interviewed were asked where they would signpost a fellow parent/carer who was struggling. This generated 20 initial codes, which were clustered into five themes: firstly, professional or formal routes such as GP doctor, health visitor, the city council, children's centres, and speech and language therapist (41%); secondly, informal routes such as friends and family, Facebook groups, or Google (20%); and thirdly, 15% suggested the group that they were attending during the time of the interview (such as toddler singing, playgroup, or play centre). The fourth theme identified (14% of the responses) stated that participants did not know where to signpost a parent or carer who was in need of support. The final theme identified in the data was that their child's school or nursery would be the best place to go for support (10%).

Participants reported a change in who they would signpost for support as their child grows, so that, in the early years, professionals such as health visitors and 'Children's Centres' would be the first port of call, and then, as their child began attending nursery or school, many stated that they may go there for help or advice regarding their child. In addition to these services, not surprisingly, parents of SEND children exhibited heightened awareness of services to support those with children with specific needs and listed many web-based or local services, particularly for autism.

Grandparent interview participants responded slightly differently, whereby they tended to signpost more to professional services, such as health visitor, GP doctor, or hospital, council, social services, and Citizens Advice Bureau, with many suggesting school. One grandparent comment epitomises this:

> 'For me the school is the first port of call. I think the schools are absolutely wonderful with the children. I think if you had a problem they would sort it out. Teachers are very approachable'.

In addition, the grandparent respondents all said that family and friends were the ultimate first port of call for support. Five grandparents stated that they did not know where to signpost for support.

Participants who had English as an additional language tended to signpost more via formal or professional channels, including to Children's Centres (32% of responses), health visitor or doctor (18%), the City Council or Citizens Advice Bureau (9%), and their child's school or nursery (9%). Some mentioned informal channels such as Google, the play centre they attended, or the local church. Of these participants, 18% did not know where to signpost parents or carers needing support.

Many interview participants commented about issues with signposting, such as the comment below:

> 'I feel like there is not much information available about services and things like that really. Some parents have no clue about children centres, and they are really good. The advertisement is just very poor. I know about them because of my job'.

Many expressed a sense that they did not need support, but if they did, they made comments such as the following:

> 'Health visitors came regularly during the pandemic. They did everything they were supposed to. I have got no complaints about the health visitors. I am sure if I wanted to get hold of them I could'.

However, some stated that they were less sure of where to go for this help, such as in this example:

> 'I would not know where to go if I needed to weigh my baby. They called me [GP] and asked me: Is everything okay? and I said yeah, and that was it'.

4.3. Trust of Support Services

Interview participants were asked about whether they felt they could trust official services, such as the City Council, and often strong feelings ensued in the responses. Seventeen of the respondents gave an outright no, asserting that they could not be trusted, accompanied by the following responses which were typical from the parent participants:

> 'I would never give them my name [to governmental organisations] because I could not trust anybody. People have this stigma around social services that without looking at anything they come and take your kids off you. You know as a mother you work hard, we are just at times not mentally or financially not coping. There is a lack of understanding. I would rather ask my family'.
>
> 'Do not trust local authorities and do not trust the teachers because they all back each other up'.
>
> 'The local authorities did not care'
>
> Many spoke of fears of the unknown or sporadic nature of official services:
>
> 'People often associate social service with being like in trouble'.
>
> 'It depends on who you ask for help. If you are advised by somebody that says they will give you help and they will listen, but it is a very scary thing having social services come out, but if you know somebody who is already getting the help, it helps you to understand that they are not gonna come out and take your children away. That is not what it is about. It is nice to know you can actually talk to somebody before it erupts. I always call my social worker, especially if it is an emergency'.
>
> 'When you get somebody who knocks on your door your immediate reaction is, 'go away!' Because you are afraid your child or your grandchild is going to be taken away. This is a very close community here and you will find that people will react to people being nosy'.

Some talked about issues of responsibility for their child, stating that the Council was not responsible for their child, but suggested that there was a fear that they would 'take them away', such as this parent with English as an additional language:

> 'The social worker [...] was very approachable. I think I am doing a good job because they have not sent a social worker because someone told me your kids here are not really yours they belong to the government. That is what I was told'.
>
> 'You hear stories, don't you? My friend has got a social worker, and she is alright she does her job, but there is a lot of stuff that she cannot do because of funding'.

Many expressed similar frustration at the limited funding or lack of ability of official channels to follow through on support, particularly in families with children with SEND, such as this mother:

> 'The first assessment was in nursery school, but they just refused me without giving me any reason, but later I found out it was against the law to do that. I asked for help from the local authorities using his first diagnosis, and they did not help me. Every time I went there...they would just ignore me for months. I contacted my local council, and they contacted the council education services and that was how I could get a response to my emails......We hardly made any progress. In the end I appealed the case in a court'.
>
> Similarly, another mother felt that financial cuts were impacting on services:

> 'I think people trust Children's Centres. Most of the people are volunteers and they are trying their best. I do think cutting down on the children's centre has made a huge impact, especially for young mums'.

In contrast, others told success stories of how 'the authorities' had helped their child, such as the following:

> 'You need to work with the professionals. Go to the Children's Centre. Go to the school. They will do the assessment and help you with your kid'.

Some respondents highlighted that some professionals could be trusted more than others:

> 'People trust the health visitors more because there is a false perception about social services. But some social workers are not there to take their children away. They are there to keep them at home. If the health visitor goes to the home they [mother] say a lot more because the mothers are more themselves at home. So, you can help with more things. Now mums might feel a bit isolated'.

On one hand, many parents reported the GP doctor to be a trusted first port of call for advice, shown by the typical comment below:

> 'For us the GP has been the main thing because we had concerns about emotions and stuff [related to being a first-time parent during the pandemics]. Even now during the transition from nursery to school and they [the GPs] have been great'.

However, some expressed a sense that professionals were not always able to listen to the exact needs of parents/carers, and there was often a feeling that they have agendas to achieve, such as getting children vaccinated, as shown in this response:

> 'I would not go to the doctors about her. I think GPs are a bit rubbish. I breastfed her for a long, long time, three and a half years and every time I went I could say anything like she has got an itchy elbow. They [the GPs] would go like you need to stop breastfeeding. I have never had to go unless she is getting the jabs'.

Others explained the lack of continuity of service providers as an issue:

> 'We never ever answer social workers because you start putting your trust in your social worker thinking that they are going to help and support you alongside the boys and then they go: Hello! I am the boy's new social worker [pause] and what happened to the world I have just explained to you?'

These interview responses reveal a varied picture of trust in parent/carer support services.

4.4. Perceived Gaps in Provision

Participants were asked for their views on what gaps or opportunities existed for provision of support for parents/carers around the area. Of the responses from the parents in the 'general' category, there were 225 codes identified. Of these, 40% were clustered under the theme of availability of activities. Whilst a quarter of these responses were generally conveying the need for more activities for parents/carers to take children to in the area, half of the responses in this cluster related to chargeable activities, and they stated that there was a great need for more affordable or free-of-charge activities, with some referencing the need to commit to a set period (such as 6 weeks) as being a barrier. Other nuances of this were concerning the fact that it would be good if there were more activities available during weekends (for working parents), during school holidays, or suitable for parents/carers to take siblings of different ages to. A small number of these specifically desired more outdoor spaces to take their children to, and two called for more availability of libraries.

Another theme identified in these responses was regarding support for parents/carers (38% of the codes). The majority stated the need generally for support for parents/carers, although some specified support for single parents, first-time parents, working parents, and those with children with behavioural issues. There were also calls for more support with breastfeeding, weaning, and sleep issues and also increased contact with health visitors.

The other main theme identified was concerning information-sharing (13% of the codes). Approximately half of these emphasised the need for greater publicity to notify parents/carers about what is available, and the other half said that it was very difficult to access or obtain information about parent/carer services. A small number of responses related to financial support being required by parents/carers, in part related to the costs of childcare.

The responses obtained from parents/carers of SEND children were distinct from the other categories of parents. There were three main themes identified within their responses. Almost a third (29%) expressed the need for improved provision of services, with many saying that there were minimal support services available for SEND families and they were unsure where or how to find support. Others said that the support was difficult to access. Many also stated that free-of-charge support specifically was difficult to find, explaining that some had found beneficial support or activities for their child, but they were chargeable and hence not fully accessible to all SEND families.

Another third (29%) of the responses related specifically to the process of accessing support services. The majority of these stated that in their experience, mainstream schools were not able to meet their child’s SEND needs, but it had been incredibly hard to obtain a place for their child in a SEND school. Many also said that it had not been possible to gain support for their child’s SEND needs without a referral or diagnosis. Further to this, a quarter of the responses (25%) stated that the process of applying for and gaining support was very slow or complicated and there had been minimal help or guidance for them as parents to navigate this process. Many felt that their concerns for their child had been dismissed as part of the process, and the majority described having to ‘fight’ to gain support for their child’s needs. There were also some comments about lack of continuity within the process, namely the involvement of specific professionals.

Other themes arising in the responses were related to the need for increased support for parents of SEND children (13%), in connection with the challenges and difficulties outlined above. Many felt that there needed to be more guidance provided in order to signpost and support these parents. Some also expressed that there was a deep need for SEND parents to have time out and that the service provision does not often make this possible. A small number (2%) of the respondents said that once they had gained a diagnosis for their child, it had not resulted in any support, and a further 2% identified the need for help with subsidiary issues such as housing, food banks, speech and language therapy, and potty training specific to SEND children.

The responses obtained from parents/carers with English as an additional language were largely regarding provision of opportunities for increased socialisation of the parents and children to combat feelings of isolation, particularly as many of these participant families said that they did not have extended family members living locally. Some also said that they would like a place to ask questions. Many expressed that signposting and publicity of existing services were issues, as they struggled to find support.

5. Discussion

The project reveals how conversations in other western cities regarding evaluating the provision of support services could be facilitated, as it seems that such evaluation is limited in the contemporary literature. Viewing service provision as a broad landscape is highly beneficial because this is the manner in which parents/carers view services. The interview conversations revealed how participants viewed services as linked, overlapping, or distinct in different contexts. For them, boundaries between services were often blurred, although when they felt barriers or were impeded from accessing support, this tended to be because there were distinct boundaries and lack of collaboration between services. Our project findings indicate that services which provide a welcoming, supportive, and positive environment were valued by parents/carers. The importance of peer support and the opportunity to share experiences appear to be fundamental, particularly for families experiencing SEND or kinship carers. This echoes earlier arguments (such as Green, 2003; Holland et al., 2018) about the need for parents/carers to engage with others experiencing similar challenges, to express and clarify their feelings, as well as to gain support or advocacy from those who understand the difficulties they face. Parents/carers engaging with services that they feel are, as seen in the data, 'supportive', 'calm', and 'social' is indicative of different communities of practice operating, as real-life problems are being shared, learning is happening together and from each other, as well as shared languages and histories. It seems clear that parents/carers see the value of being part of these CoPs and the activities, support, and positive environment facilitating engagement within the CoP. Having said this, what was not clear here was how far each of these CoPs interact with each other, or whether these CoPs are operating as discrete units within the landscape. Leaning together and collaborating on issues are seen as valuable (Wenger, 1998), although this was not mentioned by participants. Similarly, whilst the literature highlights the hesitance of many parents/carers to access support services due to perceived stigma (Forrester et al., 2012), none of the participants in our study mentioned this. They referred more to perceptions of trust.

An unclear landscape of provision was also highlighted when parents/carers discussed where they might signpost a fellow parent/carer for support. While the majority of participants suggested a range of health professionals such as doctors or health visitors or some local council services such as children's centres, 18% of participants could not say where they would signpost to. This is surprising given the government's policy and provision of family hubs, which serve to signpost services to parents/carers and their families.[1] However, there are currently family hubs in only 75 of the 386 local authorities across the UK. Other comments from the parents/carers in our study about a general lack of information for parents/carers, such as 'I feel like there is not much information about services. . .some parents have no clue about Children's Centres', suggest that parents/carers have to do some work not only to find out about the landscape of services available but also to determine how suitable they are for the particular family and their circumstances. There is a risk here of parents/carers not being able or willing to seek out the services that would benefit them, as proposed by Moran and Ghate (2005). This is even more pressing when the needs of families are multi-faceted and overlapping. A number of services across the landscape could interact and support a range of challenges, avoiding longer-term issues such as social isolation, reduced well-being, and impacts on educational attainment. The government's 'Supporting Families Programme' (previously the 'Troubled Families Programme') seeks to address this by developing policy approaches to what were referred to as "problem families" (https://webarchive.nationalarchives.gov.uk/ukgwa/20080528123727/http:/www.respect.gov.uk/article.aspx?id=9054, accessed on 29 May 2023).[2] This resonates with the notion of LoPs. Yet the findings of our project indicate that this is not as effective as hoped and does not seem to be meeting the needs of these families. Furthermore, some families are fearful of or distrust child welfare services, particularly immigrant families or others with complex circumstances (Terrefe, 2024), which undermines a sense of mutually engaged practitioners and parents/carers. This can lead to increased parental stress as a result of a perceived imbalance between the demands on parents and the support services available to them (Deater-Deckard, 2008).

Also clear in the findings is the lack of trust parents/carers have in local authority professionals. Comments such as 'they come and take your kids off you', 'do not trust local authorities', and 'they have a social stigma against social services because they come and take off your child' highlight the fear and reluctance that some parents/carers have about engaging with local professional services. These comments echo Armstrong (2020), who notes the increased stress and anxiety when professionals are viewed as being 'gatekeepers' but also suggests parental resistance towards social workers and local professional services. These comments and perceptions are very counter to the notion of LoPs. Forrester et al. (2012) suggest the five principal causes of parental resistance towards social workers are social structure and disadvantage, the context of child protection work, parental resistance to change, denial or minimisation of abuse/neglect, and the behaviour of the social worker. Such factors and the wariness of parents/carers towards local professional services could be barriers to an effective landscape of service provision across the case study city, as the boundaries between CoPs are potential sites of collaboration and new thinking. If parents/carers are resistant to engaging with professionals in any of the CoPs, such as social workers, the transfer of knowledge, practice, and potential for collaboration is limited. It may also reflect a wider lack of trust in the government to meet the needs of families.[3] There is therefore a need for efforts to build the trust of parents/carers (Hummel et al., 2023). Community-based workers seem to be a significant key to facilitating this (Fretwell et al., 2018).

Viewing the LoP enables a broad vantage and hence gaps to be identified. In terms of gaps of service provision in this case study city, the findings highlight that affordable and more timely activities would be welcomed by parents. In addition, parents/carers are seen to want more parenting support with a range of challenges such as behaviour, children's health, and SEND. These suggestions point to more signposting to and provision of free parenting services to support the parenting behaviours and wellbeing of families. This type of provision is something that was offered through England's Sure Start initiative (1998–2012). Findings from evaluations of Sure Start underline the way that such provision benefitted parents most and how the Sure Start impact was greatest for children living in low-income families (National Evaluation of Sure Start, NESS, and Evaluation of Children's Centres in England, ECCE). The data shine a light on the way in which, within the current landscape of services, there may be limited overlap, boundary crossing, and collaboration, as there is minimal coordination of services and few professionals to support parents in navigating the services available.

6. Limitations

Since the participants were self-selecting, there was inevitably a selection bias, as some at each setting opted not to be interviewed for unknown reasons. It was evident in the responses that many of the participants were not significantly struggling as parents and hence had different experiences and perceptions to draw upon. Equally, there was a bias towards those who were already engaged with services since the mode of contact was at these services. This was for pragmatic reasons. Nevertheless, the project was able to gain some insights into why some parents may not access services, and it was successful at accessing some of the target groups which had been previously identified as struggling to access support from established services: those with SEND children, kinship carers, and those with English as a second language. However, low-income families were harder to identify, given the fact that demographic participant data were not collected. Regrettably, it is likely that this data collection has not included many low-income families, so this is an area for future research.

This research was only able to gain a snapshot insight into the experience of parents/carers in the case study city, so a further development would be to monitor over time how these perceptions change as and when they encounter different support services.

7. Conclusions

This paper set out to investigate parent/carer perceptions of the landscape of provision and support services in a case study city in North West England, exploring whether parents/carers think that existing services meet their needs, and what they perceive the gaps and opportunities to be.

The findings highlight the complexity of navigating the landscape of support services, but equally the importance of viewing service provision in this way. Parents/carers value the services that they currently access and feel welcomed and supported. We argue that parents/carers' lack of clarity in where to find additional information, where to signpost other parents to, and need for further support suggest that more needs to be done to coordinate and make services more accessible. Again, this reinforces the need for more collaboration and cooperation between services across the landscape, rather than siloing of provision.

Issues of trust are clear in the data, and this impacts on parental willingness or resistance to support. The implications here are that more work is needed to support parents/carers in navigating the landscape of services available. Building knowledge of mutual participation and working across the landscape will help to build understanding and trust amongst parents/carers. This includes making links across services and finding sites of collaboration between services to support families. This would be dependent on professionals knowing families and being able to tailor support and guidance dependent on the particular needs of the parents/carers and children. This approach could then provide opportunities for collaboration, challenge, and shared understandings across services, enabling parents/carers to have a more connected and holistic experience navigating the landscape of service provision. This is particularly true for groups who may be less confident or less trusting of services, such as low-income families, those where English is not their first language, or families with SEND or similar challenges. We call for local and national government policies and practices to be attentive to landscapes of provision in other cities, and to invest in work at the boundaries of services to foster greater collaboration and visibility to parents/carers, rather than focussing funding on individual siloed services. This will serve to enhance the functionality of appropriate support for parents/carers in other cities, in a way similar to the approach taken in this case study city. Alongside this, there is a need for more research in this sector to identify gaps in service provision and advance understanding of the science of families.

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Notes

[1] https://educationhub.blog.gov.uk/2024/01/family-hubs-everything-you-need-to-know/, accessed on 1 October 2024.

[2] https://researchbriefings.files.parliament.uk/documents/CBP-7585/CBP-7585.pdf, accessed on 1 October 2024.

[3] https://www.independent.co.uk/news/uk/uk-government-people-england-ipsos-mps-b2532953.html, accessed on 1 October 2024.

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