Evaluation of The ‘You First’ Programme For Young Parents
EVALUATION OF YOU FIRST

Carolyn Black, Jane Eunson and Lorraine Murray, Ipsos MORI Scotland

Professor Sarah Cunningham-Burley, Centre for Research on Families and Relationships, University of Edinburgh

Scottish Government Social Research 2012
The views expressed in this report are those of the researcher and do not necessarily represent those of the Scottish Government or Scottish Ministers.
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EXECUTIVE SUMMARY

Background

You First was developed by Barnardo’s and funded by the Scottish Government. It targets vulnerable parents aged 21 and under, with a child under the age of one, who live in the 15% most deprived areas in Scotland. It aims to provide a boost for young, first time parents by increasing the support that they receive from their peers, the community and existing local services. The evaluation explored the benefits of the You First programme and the ways in which these could be maximised through effective delivery.

Main Findings

You First showed positive signs of helping the parents who attended. Sixty-eight per cent of those who started You First, completed it\(^1\). They all appeared to have benefited in some way, at least saying that they had learnt something to some degree, and were pleased that they had attended.

You First parents benefited to differing extents. The three most widespread benefits were: the development of a social network; increased confidence; and greater interaction between parents and their babies. In addition to these, You First also delivered benefits that had a big impact on just a few of the parents (e.g. raising educational aspirations) and smaller benefits that many parents found useful and informative (e.g. home safety).

You First was successful in attracting parents previously defined as ‘hard to reach’. This stemmed from three main features of the referral process:

- Parents were given the choice to attend You First; they were not told they had to attend. This meant that they did not feel they were being approached because they were doing something wrong or were a ‘bad’ parent.

- You First was open to those aged 21 and under, meaning that parents were not intimidated by the prospect of attending a group with older parents. Some reported that they would simply not have attended if they thought that older parents would be there.

- The group was run as a cohort. This helped parents feel less nervous about attending the first session because they knew that everyone would be starting at the same time. Some parents said that they would not have attended an existing group where everybody else already knew each other.

You First created a supportive and caring atmosphere that was greatly appreciated by parents:

- The parents received a high level of encouragement and reassurance from the You First facilitators. The facilitators spent a great deal of time building a rapport with the parents. They took the time to get to know them as individuals

\(^1\) We have defined ‘completing the programme’ as attending at least one of the last two sessions
and showed a sustained interest in their lives. This meant that parents felt welcomed and that the facilitators cared about their welfare.

- You First focused on what parents were interested in and not just what they ‘should’ be doing. This non-judgemental atmosphere helped to increase parents’ self-confidence and their belief in their abilities as a parent.

- Parents also received peer support at the group. Simply knowing that there were others in their situation, and spending time with those who understood what they were going through, helped parents to feel that they were doing ‘fine’; they could discuss their experiences and share any problems that they had.

Overall, the delivery of You First worked well, but was more successful in some areas of learning than others. The methods of learning that seemed most effective were: those involving practical skills and active engagement in a subject; those that did not involve too much paper work; and the explanation of the benefits of doing something rather than simply telling parents that they should do it.

You First was designed to help parents develop in the future and aid their transition into positive future pathways such as work, education or other groups in the community that could provide them with support. The facilitators tried to encourage parents to plan for the future in three main areas:

- In relation to returning to work, the facilitators linked parents to services, such as Working For Families, who could support and advise them. While many of the parents who returned to work had planned to do so before attending, these services were valuable in helping to arrange childcare and providing short-term financial support to aid the transition.

- The facilitators encouraged parents to see education in a more positive light and to give more thought to completing further qualifications. While a small number of parents did take this on board, this was an area for improvement as the qualification offered at You First did not work well. More consideration should be given to introducing a new qualification to You First which would better meet the needs of parents and perhaps help to increase parents’ aspirations in this area.

- Simply attending You First was beneficial to some parents in increasing their confidence to go on and attend other groups. Professionals from other groups and services also came to talk to the parents about what they could offer. A small number of parents had gone on to attend other groups in their local area. However, uptake of such services was not high.
1 INTRODUCTION

1.1 This report presents findings from the evaluation of the You First pilot programme, undertaken by Ipsos MORI Scotland, in collaboration with Professor Sarah Cunningham-Burley. The study was commissioned by Communities Analytical Services on behalf of the Children and Families Directorate and the Directorate for Employment, Skills and Lifelong Learning. It used a mixed method approach involving qualitative and quantitative research with programme participants, professionals involved in delivering the programme and stakeholders. The evaluation aimed to explore the benefits of the You First programme and the ways in which these can be maximised through effective delivery.

Policy background

1.2 The Scottish Government’s Early Years Framework sets out a commitment to "address the needs of those children whose lives, opportunities and ambitions are being constrained by Scotland’s historic legacies of poverty, poor health, poor attainment and unemployment". In order to achieve this, inequalities relating to health, deprivation and social inclusion must be addressed. One of the ways in which the Scottish Government has set out to achieve this is through a greater focus on early intervention schemes aimed at helping the most vulnerable young children and their families.

1.3 Alongside the Early Years Framework, a number of other social policy frameworks have been put in place to develop ways of tackling inequality issues. Achieving Our Potential aims to tackle poverty and income inequality through shorter term measures, such as removing barriers to employment, as well as by providing longer term support to parents and communities to break the inter-generational cycle of poverty. Equally Well recommends creating healthy environments that promote healthy lifestyles for children. GIRFEC, a national approach to supporting and working with all children and young people, and their families, in Scotland is one mechanism used to deliver these frameworks.

1.4 Barnardo’s Scotland were asked by the Scottish Government to look at how they could contribute to the Early Years Agenda in Scotland. A programme to support young parents from disadvantaged areas (You First) was chosen as these parents were under-represented in both Barnardo’s service user portfolio and by public services more widely. You First is an early intervention scheme which offers short-term support to first time parents. It incorporates elements from each of the social policy frameworks mentioned above.

\(^5\) http://www.scotland.gov.uk/Topics/People/Young-People/gettingitright
The pilot

1.5 The Scottish Government provided funding for a pilot of You First to be delivered by Barnardo’s Scotland in East Lothian, Midlothian and West Lothian in three phases during 2010/2011. You First was very much a Barnardo’s programme but they worked in partnership with the Scottish Government and NHS Lothian. While Barnardo’s drove the design and development of the programme structure, there was very close discussion between the three partners in terms of the desired outcomes.

1.6 A total of nine\(^6\) programmes were delivered within the pilot and a further two programmes were delivered in a pre-pilot test phase. Phase 1 programmes ran between June and November 2010, Phase 2 programmes were delivered between January and July 2011 and Phase 3 programmes took place between July and December 2011.

1.7 You First offered parents a financial incentive of £20 per week for attendance and £5 per week towards travel expenses. In order that the effect of the financial incentive could be explored as part of the evaluation, it was decided that two of the programmes would operate without the financial incentive. In these programmes, parents received £5 per week towards travel expenses only. Details of the programmes are shown in Table 1.1.

<table>
<thead>
<tr>
<th>Phase</th>
<th>Programme</th>
<th>Location</th>
<th>Financial incentive?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase 1</td>
<td>Programme 1</td>
<td>Midlothian</td>
<td>Yes</td>
</tr>
<tr>
<td>Phase 1</td>
<td>Programme 2</td>
<td>Midlothian</td>
<td>Yes</td>
</tr>
<tr>
<td>Phase 1</td>
<td>Programme 3</td>
<td>East Lothian</td>
<td>Yes</td>
</tr>
<tr>
<td>Phase 2</td>
<td>Programme 4</td>
<td>East Lothian</td>
<td>No</td>
</tr>
<tr>
<td>Phase 2</td>
<td>Programme 5</td>
<td>Midlothian</td>
<td>Yes</td>
</tr>
<tr>
<td>Phase 3</td>
<td>Programme 6</td>
<td>Midlothian</td>
<td>Yes</td>
</tr>
<tr>
<td>Phase 3</td>
<td>Programme 7</td>
<td>East Lothian</td>
<td>Yes</td>
</tr>
<tr>
<td>Phase 3</td>
<td>Programme 8</td>
<td>West Lothian</td>
<td>Yes</td>
</tr>
<tr>
<td>Phase 3</td>
<td>Programme 9</td>
<td>West Lothian</td>
<td>No</td>
</tr>
</tbody>
</table>

1.8 Barnardo’s Scotland has been awarded funding, through the Inspiring Scotland Fund, to run further programmes in conjunction with health boards across Inverclyde, Renfrewshire, Lanarkshire, Forth Valley, Ayrshire & Arran, Tayside, Grampian, and Highland in 2012. These programmes do not form part of this evaluation.

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\(^6\) The intention was to deliver 10 programmes in the pilot. One Phase 2 programme did not go ahead as there were insufficient numbers of eligible parents in the area who were interested in attending. The 10th programme is currently running. However, it does not form part of the evaluation.
Programme details

1.9 You First aims to support young parents and their children and is intended for first time parents who:

- are aged 21 or under
- have a child of less than one year of age
- live in the 15% most deprived areas of Scotland.

1.10 Although You First was pitched at parents as opposed to just mothers, no fathers attended during the pilot. Thus, where the term ‘parents’ has been used in this report to refer to the You First participants, it should be kept in mind that all participants were mothers.

1.11 Specific areas in which to run the programmes were selected by You First facilitators, in conjunction with health visitor teams, who were able to advise on the most appropriate locations on the basis of their knowledge of the local area. Health visitors were then asked to approach all parents in their caseload who lived in the selected area. You First was presented to parents as an opportunity, rather than something that they should attend because they have done something wrong or because they ‘needed’ it. Parents who expressed an interest in attending were then visited at home by the programme facilitators in order to learn more about the programme and to discuss the topics they would like to cover at You First.

1.12 In total, 77 parents attended the programmes. The average (mean) age of parents when they started the programme was 18 years and 11 months and the average (mean) age of their babies was 6 months. In terms of working status, 52 parents were unemployed, 21 were employed (on maternity leave) and 3 were students. All parents lived with their baby: 32 lived alone with their baby; 25 also lived with their partner; 18 also lived with their own parents and 1 parent lived with her grandparents.

1.13 Each You First programme ran for 20 weeks (group sessions one day a week for 16 weeks with home visits at the beginning and end) and aimed to help participants:

- connect with local and universal services
- access peer and community support
- improve their financial capability
- become more confident, capable parents.

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7 Further information on the selection of areas is provided in Chapter 6.
8 Throughout the report, the term ‘health visitors’ is used to refer to Public Health Nurses. This reflects the terminology used by evaluation participants.
9 Information on working status and living arrangements is missing for one parent.
In attending You First, participants were given the opportunity to complete an SCQF Level 4 qualification, the Youth Achievement Award.

Each group session lasted from 10.30am until 3.30pm with an hour for lunch at 12.30pm. The sessions were designed to be flexible and, as such, the structure changed slightly from week to week based on the parents’ preferred activities. However, broadly, the day was divided into two parts. In the morning, the parents put their baby into the crèche. This time was used to cover the topics that parents had selected at their first home visit and to complete any necessary paperwork for the Youth Achievement Award. The parents then spent the afternoon with their babies. This time was used to encourage parent and baby interaction and incorporated activities such as reading, singing, play and going on outings.

You First employed a person-centred approach designed to be responsive to the wants and needs of the parents. A feature of this approach was that parents were given the opportunity to select, from four predefined areas (health and well-being; finances; stages of development and a personal project), the topics they would like to cover in the morning sessions. In the programmes delivered as part of the pilot, the following topics tended to be covered:

- baby brain development
- baby first aid
- budgeting
- healthy eating (for babies and parents)
- home safety
- managing babies’ behaviour
- meals on a budget
- planning for the future
- relationships
- routines.

Programme outcomes

In designing the Operating Specification for the programme (Appendix 1), Barnardo’s Scotland formulated the following programme outcomes:

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10. The length of the day was shortened in two of the pilots in Phase 3. Further details can be found in section 4.17

11. In one of the programmes in Phase 3, the morning and afternoon sessions were swapped so the babies were in the crèche in the afternoon. Further details can be found in section 4.16
• identify the available supports and networks within the local community (including financial support)
• establish a link between available supports/networks and group participants
• enable group participants to identify barriers that prevent them from engaging in already existing community activities
• create a model of ongoing peer support for group participants
• to offer the opportunity to work towards gaining a qualification at SCQF Level 4.

1.18 Using Barnardo’s Scotland Outcomes Framework, the programme manager identified individual outcomes for each programme participant and devised descriptors for each outcome (Pages 14-18 of Appendix 1). The outcomes stem from SHANARRI outcomes of the GIRFEC well-being wheel\(^\text{12}\).

Evaluation approach

1.19 The evaluation framework approach was designed by Ipsos MORI and was agreed by the Research Advisory Group at the outset of the evaluation. It is shaped around the following key research questions:

• to what extent do parents gain benefits from the You First programme that are likely to lead to improved long term outcomes for children and families?

• what lessons can be learned from the pilot in order to maximise the benefits and ensure the sustainable roll-out of You First in the future?

1.20 These questions were then broken down into the following more specific evaluation objectives:

• evaluate the benefits of the You First programme for parents and families
• identify ways in which the benefits can be maximised and sustained in the short and medium term
• identify ways in which the content of the programme could be improved
• identify ways in which the delivery of the programme could be improved
• evaluate whether the programme is fulfilling its person-centred ideals
• evaluate the selection, assessment and referral system for the programme

\(^{12}\) http://www.scotland.gov.uk/Topics/People/Young-People/gettingitright/practical-tools
• identify ways in which parent engagement can be improved, including exploring the impact of the financial incentive

• assess the effectiveness of the management and support structures in place for the programme

• assess the role of the facilitators and the experience skills and qualities required to fulfil the role effectively

• explore the impact the programme has on other related services.

1.21 These objectives were then further refined into specific questions, detailed in the evaluation framework summary table (Appendix 2). The evaluation framework was used to guide the data collection and analysis throughout the evaluation. The evaluation framework also provides the basis of the report structure, with the objectives forming the chapter headings and the specific questions forming subheadings within chapters. Where appropriate, specific questions have been amalgamated, amended or omitted in the report to reflect the emerging findings and the way in which the evaluation developed.

1.22 Appendix 3 shows how the specific questions in the benefits section of the evaluation framework relate to Barnardo’s programme outcomes and the SHANARRI outcomes of the GIRFEC well-being wheel. When looking at the SHANARRI outcomes included beside each question, it should be remembered that the SHANARRI outcomes relate to children and not to parents. While children were participants of You First, they did not directly take part in the evaluation and, throughout this report, the benefits of the programme are discussed in relation to parents. Therefore, in identifying the appropriate SHANARRI outcomes, it was necessary to consider the anticipated benefits to children which may happen as a result of the benefits to parents. The SHANARRI outcomes are high level and, in many cases, one or more SHANARRI outcomes apply. Only those which are most relevant have been included.
2 METHODOLOGY

2.1 This section provides an overview of the methods used during the evaluation. A more detailed description of the methods is included at Appendix 4. The evaluation employed a mixed method approach comprising both qualitative and quantitative methods. The qualitative research allowed for the issues to be explored in greater depth than would have been possible using quantitative research. The quantitative elements, however, allowed for more parents and stakeholders to be included in the research and provided tools which can be used in the future evaluation of the programme.

2.2 The evaluation included a wide range of individuals involved in You First. Table 2.1 details the research methods used with parents who attended You First while Table 2.2 describes the methods used with professionals involved with the programme.

Table 2.1: Research with programme participants

<table>
<thead>
<tr>
<th>Phase</th>
<th>Number of parents who started programmes</th>
<th>Number of parents who completed programmes</th>
<th>Number of parents who took part in the evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Participants who completed You First</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Paper questionnaire returns$^{14}$ Initial depths/ focus groups Follow-up depths Depths</td>
</tr>
<tr>
<td>Phase 1</td>
<td>30</td>
<td>18</td>
<td>13</td>
</tr>
<tr>
<td>(3 programmes)</td>
<td></td>
<td></td>
<td>Phase 2</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(2 programmes)</td>
</tr>
<tr>
<td></td>
<td>19</td>
<td>12</td>
<td>11</td>
</tr>
<tr>
<td>Phase 2</td>
<td>19</td>
<td>12</td>
<td>11</td>
</tr>
<tr>
<td>(4 programmes)</td>
<td>28</td>
<td>22</td>
<td>25</td>
</tr>
<tr>
<td>Total</td>
<td>77</td>
<td>52</td>
<td>49</td>
</tr>
</tbody>
</table>

$^{13}$ We have defined ‘completing the programme’ as attending at least one of the last two sessions

$^{14}$ Not all of these parents will have ‘completed’ the programme, according to our definition. They may have missed the last two sessions but still have had the home visit at the end of the programme.
### Table 2.2 research undertaken with professionals

<table>
<thead>
<tr>
<th>Phase</th>
<th>Role</th>
<th>Research method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase 1</td>
<td>Health visitors</td>
<td>2 face-to-face paired depth interviews and 1 individual depth interview</td>
</tr>
<tr>
<td>Phase 1</td>
<td>Programme facilitators</td>
<td>A face-to-face paired depth interview and a session to discuss findings and recommendations from Phase 1 research</td>
</tr>
<tr>
<td>Phase 1</td>
<td>NHS Lothian lead for You First</td>
<td>Face-to-face depth interview</td>
</tr>
<tr>
<td>Phase 1</td>
<td>Barnardo’s Head of Development</td>
<td>Face-to-face depth interview</td>
</tr>
<tr>
<td>Phase 1</td>
<td>Barnardo’s You First Programme Manager</td>
<td>Face-to-face depth interview</td>
</tr>
<tr>
<td>Phase 1</td>
<td>Programme contributors</td>
<td>Self-completion questionnaires (11 of 13 returned)</td>
</tr>
<tr>
<td>Phase 2</td>
<td>Other professionals who had been involved with You First in Midlothian</td>
<td>A face-to-face paired depth interview and an individual telephone depth interview</td>
</tr>
<tr>
<td>Phase 2</td>
<td>Programme facilitators</td>
<td>A session to discuss findings and recommendations from Phase 2 research</td>
</tr>
<tr>
<td>Phase 3</td>
<td>Barnardo’s Senior Manager</td>
<td>A face-to-face depth interview</td>
</tr>
<tr>
<td>Phase 3</td>
<td>Health visitors</td>
<td>3 face-to-face depth interviews and self-completion questionnaires (9 of 12 returned)</td>
</tr>
<tr>
<td>Phase 3</td>
<td>Other professionals who had been involved with You First in West Lothian</td>
<td>2 face-to-face depth interviews</td>
</tr>
<tr>
<td>Phase 3</td>
<td>Other professional who had been involved with You First in East Lothian</td>
<td>A telephone depth interview</td>
</tr>
<tr>
<td>Phase 3</td>
<td>You First Facilitators</td>
<td>A session to discuss findings and recommendations from Phase 3 research</td>
</tr>
</tbody>
</table>

### Analysis and reporting

2.3 With the permission of participants, interviews and focus groups were recorded and transcribed for analysis. Internal brainstorming sessions were held throughout the evaluation to identify the emerging themes. The transcripts were analysed by the research team at the end of each phase of the pilot, and in advance of the final report, using a thematic sorting and coding system set up in Excel and based around the questions in the evaluation framework. This involved systematically analysing transcripts for key points and illustrative verbatim comments under each heading. The results of the quantitative questionnaires were analysed and the results considered alongside the qualitative findings.

2.4 Interim reports and presentations to the Research Advisory Group were produced after Phases 1 and 2. While these outputs considered emerging
findings more generally, they had a particular focus on providing recommendations on how the programme could be developed in the subsequent phases. These recommendations were developed by the research team and agreed with the programme facilitators and the Research Advisory Group.

Limitations of the research

2.5 As with any evaluation of this kind, there are limitations to the conclusions that can be drawn. While we can make recommendations relating to the most effective way of delivering You First, we are more limited in the extent to which we can assess the benefits of the programme. Given the methods used in the evaluation, we are making a judgement of the benefits on the basis of the perceptions of the parents and the professionals who have taken part in the research - as opposed to basing them on independent, objective measures of behavioural change. Some of the benefits are simply about whether participants feel better as a result of attending, for example if they feel that it has made them more confident, and are relatively straightforward to assess. Other benefits are more difficult to assess on the basis of participants’ perceptions. Some examples are provided below.

2.6 One of the questions in the benefits section of the evaluation framework is: To what extent is there greater knowledge of child development issues and greater capacity to support children’s learning? This question has been answered using evidence collected from the qualitative research. This evidence is parents' perceptions of whether their knowledge is greater as a result of attending You First, and examples they give of things they have learned, as opposed to being an objective measure of their knowledge.

2.7 Another question is: To what extent have practical childcare skills improved? Once again, it is the perceptions of parents and facilitators that have been used to answer this. We have no measures of factors such as the foods parents feed their babies or the routines they have established. This would entail observation of behaviour within the home and, even if such observation was undertaken, without a control group, it would be difficult to ascertain how much of any change was attributable to You First and how much was due to the parents becoming more experienced or the babies becoming more settled as they got older.

2.8 Given that just two of the nine programmes operated without the £20 financial incentive, and the variation that existed between groups irrespective of the financial incentive, the extent to which we can comment on the impact it has on recruitment and retention to the programme is limited.
3 WHAT ARE THE BENEFITS OF THE YOU FIRST PILOT PROGRAMME FOR PARENTS AND FAMILIES?

3.1 All parents who took part in the qualitative research, and who had completed the You First programme, had benefited in some way from attending it. However, the ways in which they had benefited and the extent to which they had benefited varied. To illustrate the different ways in which parents experienced benefits, the chapter begins by providing case studies of parents’ experiences (details have been changed slightly to protect parents’ anonymity). The remainder of the chapter begins by discussing the benefits parents hoped they would get from attending the programme. It then moves on to consider the extent to which each of the potential benefits of the programme, identified at the outset of the evaluation, was realised\textsuperscript{15}. The benefits are discussed in order of their importance to parents. The chapter ends by considering whether the programme had any wider benefits beyond the You First participants.

<table>
<thead>
<tr>
<th>Caroline: significant benefits across a range of areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caroline was 19 when she went to You First and her baby was 3 months old. She was unemployed and lived with her partner and their baby. She described herself as a quiet person and did not have any friends with babies who lived nearby. You First improved her confidence in many ways. She previously spent a lot of time at home with her baby, but You First had given her the confidence to go out more and do things, for example visiting family and friends. She also felt more confident in her ability as a mother and reported being less stressed than before. The programme also made her feel more confident in a group environment and she has since started going to a local mother and baby group with a friend she met at You First. She learnt about the importance of reading to her baby and passed this on to her partner. Both of them now read to their baby. She has started to put money in a savings account and is using a shopping list as a way to avoid buying unnecessary items, a tip she learnt at You First. She is also now considering going to college as a result of the encouragement provided by the facilitators at You First.</td>
</tr>
</tbody>
</table>

\textsuperscript{15} It should be borne in mind throughout this chapter that the discussion of the benefits is based on perceptions of parents and professionals who took part in the qualitative research as opposed to being based on independent, objective measures of behavioural change. See paragraphs 2.5-2.7 for further details.
**Eilidh: a few specific benefits**

Eilidh was 21 when she went to You First and her baby was two months old. She was on maternity leave and lived alone with her baby. While she still saw friends, she had no friends with babies. She felt she was a fairly confident person and had already started to engage with her baby using activities such as singing. However, she found it useful to learn more about the types of things she could do with her baby, for example, she would not have thought to take her baby to the park at such a young age. Although, in some ways, she appeared to be engaging well with her baby, the programme had not successfully communicated the message that you don’t need a lot of toys in order to do so; she felt that there should have been more toys at You First as it was sometimes hard to keep the babies occupied. As Eilidh’s baby was quite young when she started You First, she found the advice about routines very helpful and felt that her baby slept better as a result. Eilidh also made friends at the group and has been seeing one of them regularly since finishing You First three weeks ago.

**Gail: a few specific benefits**

Gail was 17 when she went to You First and her baby was 6 months old. She was unemployed and lived with her parents and her baby. She was supported by her family but did not have other friends with babies. She described herself as a quiet person. She felt that both her self-confidence in general and her confidence as a mum had increased as a result of attending You First. However, she had not engaged with any other services since finishing You First as she was too nervous to go to a group where she wouldn’t know anyone. You First made her more aware of the influence she has on her baby’s development and she had started reading and singing with him, something she would not have thought to do at this age, had it not been for You First.

**Jenny: enjoyed it but little obvious benefit**

Jenny was 20 when she went to You First and her baby was 10 months old. She was unemployed and lived with her partner and their baby. She spends a lot of time with her family. She went to You First to learn things about how to look after her baby and felt that she did learn a lot. In particular, she enjoyed learning about first aid and home safety. However, she had not enjoyed the parent and baby sessions at You First and the programme had not been successful in helping her to understand the importance of engaging with her baby. She did not think she would stay in touch with others in the group, had no plans to go to other groups and no immediate plans to continue learning or look for employment.
Expected benefits of You First

3.2 Overwhelmingly, the main reason parents gave for deciding to attend You First was having the opportunity to meet other parents of their own age who lived locally. Many of them did not previously know other parents in the area. The fact that all of them would be a similar age was very important. Parents wanted to meet others in the same situation as themselves and some reported having negative experiences, or negative perceptions, of attending groups with older parents as they felt that they were judged or ‘looked down on’.

3.3 Parents also frequently said that they felt their babies would benefit from having the opportunity to interact with other babies. They thought that it would be important for their development, for example, that their babies would learn to crawl or walk as a result of seeing other babies doing so.

3.4 Less commonly, the following were mentioned as benefits parents hoped to experience from attending the programme:

- having the chance to learn things about being a parent
- having the opportunity to get used to leaving their baby with someone else (in the crèche)
- increased confidence (this was specific to one parent who reported that she had been feeling ‘down in the dumps’ and whose health visitor suggested it might help to increase her confidence).

Parents’ social networks and relationships

Meeting other mums of the same age was the main benefit reported by parents:

- some reported having made lasting friendships
- others felt it was more likely that they would remain in contact via Facebook or would stop to chat if they bumped into each other
- there was the potential for friendships to have been formed at all groups - whether or not they had seemed to be linked to personalities within the group

3.5 In line with what parents hoped to get from attending You First, meeting other mums of the same age was the main benefit reported by parents. In the main, parents hoped to keep in touch with some of the others they had met at You First. Some parents felt that they had made lasting friendships and would continue to meet up while others thought it was more likely that they would keep in touch via Facebook or would stop to talk if they bumped into each other. It did not seem likely that whole groups of parents who had attended a programme together would continue to meet as a group. Regardless of the extent to which they had formed friendships, parents
enjoyed having had the opportunity to meet other mums of the same age and felt that this had made them more confident about meeting new people.

3.6 Given that most of the interviews took place shortly after the programmes had ended, it is not possible to say whether or not the parents will stay in touch. However, the three follow-up interviews conducted around five months after the programmes had finished provided some evidence; two parents were still meeting up with three others from their groups, while one was not in contact with others but would stop to speak to them if she saw them. These findings are in line with what the parents thought would happen when they were first interviewed, shortly after the programme had finished.

3.7 Whether or not friendships had been formed seemed to be simply a result of the personalities within each group. Thus, while not all parents had benefitted in this way, there was certainly the potential for this to have happened at each programme.

3.8 There were also a couple of instances of You First having increased parents’ confidence in other relationships. One parent reported getting advice on how to deal with problems she was having with her ex-partner while another felt able to speak up to a family member about the importance of her baby’s routine.

**Parents’ mental wellbeing**

<table>
<thead>
<tr>
<th>The programme had a very positive impact on parents’ confidence:</th>
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<tr>
<td>• almost all parents reported feeling more confident</td>
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<tr>
<td>• this included both general self-confidence and confidence in relation to specific aspects of their lives.</td>
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3.9 Overwhelmingly, parents reported feeling more confident after having attended You First. In part, this was due to feeling a sense of reassurance that there were other parents in the same situation and that they, themselves, were doing ‘fine’. This was very important to parents as they perceived that they were often stigmatised for being a young parent. Some felt more confident in themselves generally while others mentioned feeling more confident in relation to specific aspects of their lives, including:

• confidence as a mother

• confidence about meeting other people

• confidence (and motivation) to leave the house with their babies and go out and do things

• confidence to talk in a group situation

• confidence to speak up for themselves and not to ‘let people walk all over them’
• confidence in relation to their baby going on to nursery or playgroup as a result of having used the crèche at You First.

3.10 For some parents, confidence had increased in some ways but not others. For example, one parent reported feeling more confident generally but not as a mum; she was still worried that people judge her for being a young parent. Additionally, and as discussed in more detail below, many parents still lacked the confidence to attend other parenting groups where they would not know anyone else.

3.11 Health visitors also noticed improved confidence in parents who had attended the programme. They noted that they seemed less anxious, and did not ask for as much support as they would have expected.

3.12 In terms of other aspects of mental wellbeing, there were reports of parents feeling happier as a result of having made friends at the programme and feeling less stressed as a result of the advice received from other parents and the facilitators, as well as the reassurance that other people had experienced similar problems.

Parents’ knowledge of child development

This was an aspect of the programme in which there were widespread benefits:

• parents learned about the type of activities that are important for a baby’s development and the extent to which they, as parents, influence their babies’ development.
• most parents had taken these messages on board. In a few cases, however, the programme had failed to get across to parents the importance of the interaction between them and their baby.

3.13 You First addressed the importance of interacting with babies from an early age and emphasised the influence that parents have on their baby’s development. This was done through a session on baby brain development and a continued focus, in the parent and baby sessions, on activities which would aid the babies’ development, including singing, reading, going to the park and the use of toys which were suitable for the baby’s age (these sessions are discussed more fully in Chapter 4).

3.14 On the whole, parents reported having learnt things about child development while at You First. The messages which resonated varied from parent to parent. For some, the idea of reading or singing to a young baby was new; they had not previously considered doing this as they felt that their baby would be too young to understand. You First, and in particular a session delivered by the Scottish Book Trust, was cited by parents as being helpful in explaining why it is important to do so:

You think that, ‘is she too young for a book or is she going to understand what I’m saying or anything like that?’ But then, like
the Book Trust, they kind of went over it, explained it - it’s not all about you reading a story to them, it’s like you’re pointing out pictures and like the sounds and stuff like that and, [if you] kept reading the book, then they’re going to recognise it and it made more sense when they went over it. But, somebody saying to me, ‘oh, read a book to her’, I would be like, ‘oh, she is still really young and she wouldn’t understand’.

(Parent)

3.15 Similarly, parents initially tended to have been dismissive of the idea of taking their baby to the park on the grounds that they would be too young for any of the equipment. Having done so at You First, some parents could see that this was not the case and that their babies had enjoyed it.

3.16 The influence that parents have on their baby’s development had struck a chord with other parents. They remembered analogies used at You First, such as ‘a baby’s brain is like a hard drive which you have to build up’. One parent recalled being told that her baby would smile because she smiles at him and sees evidence of that as he ‘copies everything we do’.

3.17 The role of toys in a baby’s development had been taken on board by some parents who reported having learnt about the benefits of different toys and, as a result, being more knowledgeable about which ones would be suitable at different ages.

3.18 However, the programme had not managed to fully get across to all participants the importance of the interaction between parent and baby. This is illustrated by comments made by parents that the parent and baby sessions at You First were not enjoyable as the babies were too young for activities such as sitting in a circle reading and singing and that there were not enough toys provided for the babies to play with. In addition, after having gone to the park at You First, some parents did not see any value in this.

Enhanced parent-child relationships

<table>
<thead>
<tr>
<th>This was a key benefit of the programme for many parents:</th>
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<tr>
<td>- several parents reported engaging in activities such as reading, singing, swimming and going to the park with their babies that they would not have done prior to attending You First</td>
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<tr>
<td>- there were, however, a few parents who did not appear to have changed the way in which they interacted with their babies. For these parents, You First had not succeeded in getting across the importance of these types of activities.</td>
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3.19 As discussed above, prior to attending You First, parents were often unaware of the importance of engaging in activities such as reading and singing with their baby from an early age. The extent to which parents implemented what they had learnt at You First in relation to child development varied. At one end of the scale, there were cases of parents who had started to do things with their baby that they would not otherwise
have considered doing. You First had helped to equip them with both the knowledge and confidence to do these things. One parent, for example, who seemed to have really grasped the importance of reading, had also passed this on to her partner and reported that he was also now reading to their baby. Although some parents did not feel comfortable singing with their baby in front of others at You First, they did report having done so when alone with their baby at home. For parents who said that they had already been doing some reading and singing, You First helped to reinforce the message that this was a positive thing to do. They reported doing it more often as a result and getting more ideas, for example, different songs to try. Parents discussed the fact that, had they not attended You First, they would have tended to spend more time at home with their baby as they would not have had the confidence to go out with them to, say, the park, swimming or to meet other mums and babies for lunch.

3.20 While parents generally reported having always played with their baby, there were reports of them doing so more often, and enjoying it more, as a result of learning at You First what toys were suitable for their baby at different ages and the type of toys they enjoyed playing with. Some parents had bought toys used at You First to play with at home.

3.21 One parent discussed how the way in which she interacted with her baby more generally had changed as a result of the advice given at You First to turn everyday tasks into an opportunity to interact with her baby. For example, involving her baby in housework and talking to her about what they were going to buy at the shops.

3.22 Less commonly, there were parents who did not report having changed the way in which they interacted with their baby. In the main, this appeared to be because the programme had not succeeded in getting across the importance of doing so rather than because they were already interacting well with their child.

3.23 Ensuring that parents sustain the positive behaviours they have established at You First is a challenge for the programme. One parent reported that, since the programme finished, she had let things slip slightly and was not reading to her baby as often as she did while at You First.

*I've went off it a bit, hopefully trying to get back on to it because it was fun, but I do... like she has got her wee books and stuff which I read during the day, just like now and again, but I've went off it a wee bit from when I was at the group, I used to do it nearly every day.*

(Parent)
Awareness of and access to sources of support and advice, learning opportunities and careers advice

You First has increased parents' awareness of the supports available to them locally. However, the extent to which parents have accessed these supports has varied:

- a small number of parents were attending other mother and baby groups and making use of services to help them back into work
- several parents, however, had not engaged with other services, with the main reason being a lack of confidence
- further consideration should be given to finding the most appropriate way to support parents after the programme ends.

3.24 As discussed in more detail in Chapter 9, the You First facilitators established links with local services. Representatives of these services were invited to come along to a You First session to talk about the service they provide. These services tended to be either other groups that parents could attend with their babies, e.g. Rhymetime (a library based group involving singing songs and nursery rhymes) or services that can help parents into work or further learning.

3.25 It was clear that parents' awareness of the services that are available in their local area has increased. The extent to which parents had accessed these services, however, varied. There were positive stories of parents who had gone on to attend other things including a community learning course, Jo Jingles (a music, singing and movement based group for parents and babies) and a mother and baby group and those who had used Working for Families (a Midlothian service aimed at helping parents overcome barriers to training or employment) to help them back into work. In addition, parents who were not yet sure whether they would like to work or further their education were confident that they would access the services available should they need to.

3.26 Other parents talked about the fact that they wanted to attend other groups after You First had finished and, in particular, groups specifically for young parents; ideally they would have liked You First to have continued for longer. The facilitators worked with local service providers to try to make arrangements for them to attend other groups, either through identifying existing groups that they could attend or by trying to set up new groups, specifically for young parents, which would be organised by local service providers and designed around the wants of the parents. However, the groups that were discussed were often unsuccessful in engaging the You First participants. There were reports from parents that such groups:

- did not sound appealing (for example, a service provider who came in to talk about her group said that only two people were currently going and parents felt she was not enthusiastic about it);
- did not go ahead or did not continue due to a lack of people attending; or
were not what parents had hoped for (for example, parents who did go to one group reported that they wouldn’t keep going unless it changed as they hadn’t actually done anything at the sessions, they ‘just sat and blethered’).

3.27 The facilitators also encouraged parents to go to established groups, such as Rhymetime, which are for parents of all ages. It was common for parents to say that they had been ‘meaning to go’ to such groups ‘but hadn’t got round to it’. On further probing, it appeared that they were lacking in confidence to go to a group where they would be the newcomer and where they would not know anyone else:

it's all part of being the newcomer… but it's all about confidence, like my confidence, like I don't know if I would go into something brand new again, being the new person.

(Parent)

3.28 The fact that there would be older parents at these groups made it particularly daunting. Parents would be more confident about going if someone else they knew would go with them. However, this was made more difficult by the fact that parents who worked tended to have gone back to work around the time that You First finished and were, therefore, unable to attend. Although none of the parents alluded to this, the fact that these groups tend to be focused on singing and reading with babies, and the fact that parents felt embarrassed doing this in front of others while at You First, may also have put them off attending.

3.29 The issue is not, then, that parents are not interested in some form of continued support. Rather, it is about finding the most appropriate way to support them after the programme ends. During the pilot, there were mechanisms in place to try to ensure that the programme did not end too abruptly and to encourage parents’ continued engagement with other services. Following the final group session, facilitators visited each parent at home. As part of this, they spent time talking to the parents on an individual basis about the progress they had made during the programme and used this to stimulate discussions about what parents’ were planning to do next. A programme reunion was then held around 4 months after the programme had finished. This involved the facilitators and the parents and their babies meeting up for lunch and chatting about how things had gone since they finished You First. This was the last formal contact facilitators had with the parents, although they did tell parents that they could contact them should they ever need to. A small number of parents had done so to find out further information about groups they were interested in attending. As described above, the facilitators had also established links with local service providers and had invited them to You First to talk to the group about what they could offer them.

3.30 Despite having the above procedures in place, the You First facilitators and management acknowledged that the transition period at the end of the programme is an area in which there is scope for improvement. At the same time, however, they felt that it was difficult to find the appropriate level of
support. They noted that they had to be careful not to over-support the parents, partly as they are not based in the local area on a permanent basis and partly because they are not looking to build a dependency; they are aiming to give parents both the awareness and the confidence to use available local services. This tension is illustrated by the following quote from a You First staff member:

_Actually, I think you’ve got to be quite careful because we are not there to build up dependency, we’re there, this is how long we’re here for, we can help you get yourself sorted, but there are other supports to take advantage of. If we were to stay in contact, over contact, then, actually, we’re getting in the way of what can be done locally, which is kind of the opposite of what we’re trying to do, but it’s a really difficult line to balance._

(You First staff)

3.31 That a lack of confidence to attend other groups was a barrier to continued engagement was acknowledged by a member of the You First management staff. She discussed the fact that You First is a very supportive programme in terms of encouraging parents to attend each week (for example, the facilitators phoned parents before each session to check that they were able to make it). She discussed the need to consider how they build up parents’ confidence to attend other groups that may not offer the same level of support and encouragement. She suggested that there may need to be more of a transition period built in to the programme in order to increase parents’ confidence. One of the options being considered was a mentoring system whereby a parent who had been to a previous You First group, and had gone on to engage with other services in the area, would be a volunteer or mentor at subsequent groups in their area. They would talk to parents about the groups they had been to and would offer to go along with them to things they were interested in. Although not mentioned by You First staff, this would not necessarily need to be a parent who had previously attended You First. It would, however, need to be a parent of a similar age to the You First parents, in order that they could relate to them.

**Practical childcare skills**

<table>
<thead>
<tr>
<th>This was not one of the main benefits of the programme reported by parents:</th>
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<tbody>
<tr>
<td>• parents did not tend to report having had any particular difficulties caring for their child prior to attending You First</td>
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<tr>
<td>• first aid and home safety were the two areas in which parents reported having learnt new things</td>
</tr>
<tr>
<td>• a few parents also reported benefits in relation to their baby’s routine and managing their baby’s behaviour.</td>
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3.32 Parents covered a range of topics related to the practical care of their baby at You First, including: routines, weaning, first aid, home safety and behaviour management.
3.33 In the main, parents did not report having experienced difficulties in the practical care of their baby prior to attending You First. In relation to night time routines, it was common for parents, particularly those whose babies were at the older end of the age range, to report that their baby had always slept well or that they had already established a suitable routine. However, there were those, particularly parents whose babies were younger, who reported that their baby was now in a better night time routine as a result of what they had learnt at You First. They valued both the advice provided by facilitators and the experience of the other parents. For one parent, the benefits also extended to day time routines; prior to attending You First, she had not had set meal times or bath times for her baby and had found implementing these helpful. One parent, however, had not managed to overcome the difficulties she was having with her baby’s sleeping. Her baby would not sleep unless in the bed with her and she had concerns that her neighbours would contact social workers if she left her baby crying in her cot. She acknowledged that, despite the advice, support and reassurance she received at You First, she had been unable to resolve this issue.

3.34 Discussions about weaning and healthy eating for babies were woven into various parts of the You First programme. This included formal sessions, such as talks from local infant feeding advisors and facilitator led sessions on healthy eating and cooking on a budget, as well as use of the lunchtimes as an opportunity to promote and discuss healthy eating. Facilitators acknowledged, however, that this was an area in which a great deal of sensitivity was required and one in which limited progress had been made. While there were parents who discussed having found the advice about weaning helpful and having learnt useful tips and ideas about the types of things they could feed their baby, there was evidence that many parents were still choosing to feed their babies foods which are generally considered inappropriate, for example crisps, chocolate and sausage rolls and, as observed by the facilitators, often used these foods in an effort to stop their babies crying.

3.35 Parents found the opportunity to learn about baby first aid and home safety useful and reported learning things that they did not already know, and which they felt might prove to be very important in future. For example, what to do if their baby bumped their head or was choking on food and to use covers for their plug sockets.

3.36 You First also gave parents advice about managing their babies’ behaviour. Some parents reported having implemented these strategies and having found them helpful. The following quote from a parent is an example of a strategy she had learnt at You first and used at home:
If I walked out the room or I went to get something, if my attention wasn't round her, she would go 'off the handle'. They [You First facilitators] were like 'put her in the playpen and come down to her level and tell her you're going to do this and even interact with her, speak to her while you're doing that and always come in and check up on her but also, as well, let her know that she has to sit and play with her toys for half an hour and that's your time'

(Parent)

Financial capabilities

This was not one of the elements of the programme in which there had been significant benefits:
- there had not been a fundamental shift in approaches to budgeting
- a few parents had taken on board money saving tips, such as buying in bulk and using a shopping list, and a few others had started to save money.

3.37 The financial incentive provided at You First was used as a tool to encourage saving. Parents had the option of receiving £20 each week or deferring payment in order to receive a lump sum at a later date. They were encouraged to save all of the money until the end of the programme. Of the 42 parents who completed a programme which offered the financial incentive, 28 deferred payment until the end of the programme and often used it for something specific such as buying birthday or Christmas presents for their baby or buying clothes for returning to work. The You First management saw this as a very positive outcome in terms of improving parents' financial capabilities as they reported that it was the first experience of saving money that many of the parents had had. In contrast, one parent who had instead chosen to receive £20 every week said that she had spent it on 'rubbish that I didn't even need'. She felt that it would have been better for her if they had not been given the option of receiving the money weekly.

3.38 In addition to discussion around the financial incentive, there were more general budgeting discussions in the form of sessions delivered by facilitators (discussed in more detail in Chapter 4). There were parents who did not feel that they had taken anything from the budgeting sessions. They tended to say that they were not good with money and felt that this would always be a weakness. There were also comments that budgeting was not something that could be taught or that should be discussed in front of others.

3.39 As part of the budgeting sessions, parents created a personal budget of their incomings and outgoings over the course of a week. While none of the parents who took part in the qualitative research had created a budget and stuck to it, there were some who had taken on board money saving tips from the budgeting sessions such as buying in bulk, making a shopping list and not buying 'treats' for themselves or their babies every time they were in a shop. Parents also reported having found the session on 'meals on a budget'
useful and some had tried making the meals at home. One parent had also
started to put money in a savings account while another was working out
what she needed to spend each week and was saving the rest to buy
something at the end of the month.

**Future planning capabilities for medium and long term goals**

This was not one of the main benefits of the programme, although it
was more useful for some parents than others:

- some felt encouraged by the discussions about what they could
do in the future
- others did not see the benefit in thinking about what they would
like to do over the coming years.

3.40 You First tried to encourage parents to think about their futures. As well as a
group session on this topic, facilitators worked with parents individually at
the home visits at the end of the programme to create an ‘action plan’ for
their future (discussed in more detail in Chapter 4). In particular, the
facilitators emphasised to parents that having a baby did not mean that they
could not work or undertake further learning.

3.41 As with the other benefits discussed in this chapter, parents varied in the
extent to which they found this element of the programme useful. On the one
hand, there were parents who had found it very helpful to have these
discussions and seemed to have gained encouragement, both from the
facilitators and other parents who were going back to work, that they would
be able to have a career.

… [the facilitators] were telling us that you can go to college and
do all this. Because if it wasn’t for the fact of somebody telling
you, you could go to college or that, I don’t think any of us would
have thought of it, but they have drummed it into to our heads that
we can go to college and we can do other things ...In fact, if it
wasn’t for going to You First, I wouldn’t have thought about
college or anything like that.

(Parent)

3.42 On the other hand, there were parents who did not see the point in
discussing where they would like to be in, say, five years and who were
either unable to recall what was in their ‘action plan’ or were not confident
that they would stick to it.

The SCQF qualification and the impact of You First on parents’ views about
taking further qualifications/continuing their learning

Parents did not view the SCQF qualification as a key benefit of the
programme and parents’ views about undertaking further qualifications
had not changed greatly as a result of You First:

- some parents had enjoyed doing the qualification and were
  pleased to have achieved something.
- others had a more neutral view of it and some were negative
towards it and had not enjoyed it
- one parent was considering going to college instead of returning
to work as a result of the encouragement given by the facilitators.
Professionals who took part in the research saw the fact that parents can receive a SCQF qualification as part of the programme as very positive, particularly as they acknowledged that many of the parents will not have had a positive learning experience at school. Parents, however, did not feel that the qualification was one of the main benefits they gained from You First. Their views on the qualification tended to fall into one of three categories:

- Positive - there were parents to whom the qualification appealed, who enjoyed doing it and who felt that it was good to have achieved something.

- Neutral - these parents didn't mind doing the qualification but were not particularly enthusiastic about it. For one parent, this was because she already had a career and could not see how it would benefit her. There was often a lack of awareness among these parents that they were actually working towards a qualification until late on in the programme.

- Negative - some parents had not enjoyed the qualification due to the amount of paperwork it involved. Some also felt it was badly organised.

The You First facilitators were aware of some of the negative views around the delivery of the qualification and were looking at ways to address this in the future (discussed further in Chapter 5).

However, with one exception, the negative experiences of the qualification reported by some parents had not been detrimental more generally; they had not been put off undertaking further qualifications or continuing their learning as a result. For those who said that they were not interested in continuing learning, this was more likely to be because they already had a career.

Other parents had already been considering going to college prior to attending the programme and, in some cases, You First had made them more definite in their plans. One parent had previously thought that she would go back to work but the encouragement given by the facilitators had made her consider going to college instead.

**Personal health and risk factors**

There was little evidence of benefits to parents in relation to personal health factors:

- there were a few reports of parents cooking more often, instead of having takeaways. However, this seemed to be, at least in part, driven by financial reasons.

There was no evidence of parents who attended You First having issues related to drinking or drug use. While many of the parents smoked, there
were no reports of them having cut down or stopped as a result of attending You First. Facilitators did emphasise the importance of not smoking in close proximity to the babies and would push the baby’s buggy if a parent wished to smoke while on a You First outing. However, we cannot say whether parents had implemented this outside of the programme.

3.48 Parents could choose to cover smoking cessation at You First. The programme employs a person-centred approach (see Chapter 5) which means that, among other things, parents get to select the topics they cover. Insufficient numbers of parents chose to cover smoking cessation so the session did not run in any of the programmes. However, advice and information about how to get further support was provided to the individuals who were interested in covering this topic.

3.49 As discussed above in relation to weaning, You First tried to encourage healthy eating among both the parents and their babies. There were some reports of parents cooking more, rather than having takeaways, as a result of the cooking sessions and the recipes provided at You First. However, this appeared to be driven, at least in part, by the financial savings that the facilitators highlighted. Other parents, however, appeared less interested in learning about healthy eating or in changing their eating habits, as exemplified by requests for less healthy foods to be available at You First lunchtimes and the types of food they gave their babies during the programme.

**Wider benefits**

3.50 There were some examples of the programme having had wider benefits. Firstly, a small number of parents had recommended You First to friends or family who had then gone on to attend the programme. Secondly, there were parents who had passed on bits of advice to friends who had children. This advice included the importance of activities such as reading and singing and more practical tips, such as having the bed at an angle when a baby has a cold. Thirdly, there were parents who reported having talked to family members about what they had learnt at You First. One parent reported having had particular success involving her partner more in their baby’s routine and in encouraging him to play with her. She had also been successful in getting other family members to follow her baby’s routine.
4 HOW CAN THE DELIVERY OF THE PROGRAMME BE IMPROVED?

4.1 A description of the structure of You First sessions is provided in section 1.11.

Programme content

4.2 The person-centred nature of You First meant that the content was shaped by the parents. In the main, they were happy with the topics covered because they were able to choose what was included from four predefined areas: health and well-being; finances; stages of development and a personal project (for a full list of topics in each area, please see Appendix 5). Individuals’ choices were collated to identify the subjects that were most popular in the group, overall. In general, this did not cause any problems as there tended to be a lot of agreement on which topics parents wanted to cover (both within and across groups). There were some specific instances when parents were not enthusiastic about undertaking certain activities at You First, mainly in the parent and baby sessions. Examples include feeling uncomfortable about singing in front of the group, feeling that their baby did not benefit from the baby massage and not wanting to go out to the park when planned. However, parents did not view these things as significant problems and, overall, were still happy with the content of the programme.

Learning and delivery methods

4.3 The facilitators used a variety of methods to deliver the topics and have revised the way in which topics are delivered throughout the three pilot phases to try to make them as engaging for parents as possible. While parents’ favourite topics were determined by individual preferences, two main themes emerged. Firstly, they did not enjoy sessions that involved a great deal of paperwork. Secondly, the most popular sessions were those in which parents had some form of practical input. For instance, in Phase 1 of the programme the baby first aid sessions consisted of a health visitor talking the parents through different healthcare scenarios (e.g. choking, a bump to the head etc.) and what they should do in those situations. While a number of parents found this useful, others were disappointed that there was no practical aspect to the session. In the subsequent phases, facilitators addressed this by inviting staff from St. John’s Ambulance Service to deliver the session instead. This gave parents the opportunity to try out CPR and other practical emergency health care skills, which proved to be extremely popular.

4.4 The influence of delivery methods can also be exemplified through the development of the budgeting sessions. These sessions have posed a particular problem for facilitators as it is an area that the parents do not easily engage with. As previously mentioned, parents did not always find devising a budget plan useful and did not tend to follow it. However, they did pick up some of the more practical hints and tips related to budgeting (see section 3.39 for more details). The facilitators have therefore tried to focus
on practical ways of delivering budgeting messages. For instance, in one exercise they gave parents a catalogue and a budget of £1,000 to decorate a living room. The facilitators felt that this was beneficial as it was fun for the parents, but also helped them to develop the skills required to follow a predetermined budget. They have also looked to other organisations to source stimulating resources for the budgeting sessions such as *Skint!* a money management resource developed by the Scottish Book Trust. Another possibility for improving the budgeting session would be to give parents responsibility over the budget for lunchtimes or, alternatively, a You First group event such as a party or outing. This would benefit parents as it not only moves budgeting messages from the hypothetical to practical, but also involves activities that they will have to budget for as their child gets older.

4.5 Parents generally enjoyed the topics delivered by both the facilitators and external speakers. When an external speaker came to the group they reported that they liked seeing a different face, speaking to someone with expert knowledge and having the opportunity to develop new contacts. While the facilitators were also positive about the input of external contributors, they did have reservations with a small number of the speakers. They felt some did not possess the necessary group work skills to engage with the parents effectively. Although rare, there were also instances of external speakers not following up on offers of assistance or appointments with parents. This suggests that it is beneficial to have other professionals deliver topics to the groups but it is important to ensure that enough guidance is provided to them in advance about what works well in the group and the best way to interact with the parents.

Programme facilitators

4.6 Overall, parents were positive about the facilitators. The characteristics that they valued were that they were friendly, easy to talk to, non-judgemental and knowledgeable. If a parent had a problem, they reported that the facilitators would provide advice and direct them, if necessary, to the correct services. One of the most important aspects for the parents was the consistency of the support they received from the facilitators. This was not only down to the fact that they had the same facilitators every week, but also their sustained interest in parents’ lives and availability if parents wanted to talk to them.

4.7 In Phase 1, there had been a feeling among parents that they were being told what to do in certain situations, particularly when it came to feeding their baby. In response, the facilitators made it clear to parents that they would, on occasion, offer them advice but it was their choice whether or not to take it. In Phases 2 and 3, this was not raised as an issue as the facilitators reiterated the message throughout the programme that their advice was optional and took a more sensitive approach to offering guidance.

4.8 Professionals felt that there was no particular professional background that would be best suited to delivering the You First programme and that an individual’s culture of working was more important than their particular
experience. However, most professionals highlighted that good group work skills were essential and that knowledge of the early years sector and childcare skills would be desirable.

4.9 A member of the You First management felt that as the facilitators work for a voluntary organisation they had a particular emphasis on creating a supportive atmosphere. This helped the parents work things out for themselves rather than prescribing the ‘right’ way to do something. It also meant that as a non-statutory organisation the parents form a less formal relationship with the facilitators. While parents did not specifically comment on this distinction, as discussed above, they were very positive about their relationships with the facilitators.

**Facilitator training**

4.10 At the start of the programme there was no formal facilitator training in place. As the programme was newly developed, it was not clear at that stage what training would be required. Therefore, staff were selected on the basis of their skills and experience in working with young people in a group setting and knowledge of the early years sector. Facilitators who joined the You First team once the pilot had commenced shadowed existing facilitators before taking a group. As previously noted, parents spoke positively about facilitators and thought that they had the right knowledge and skills. On occasions where the facilitators wished to incorporate additional content they were not familiar with, they attended any necessary training courses. One such example is the *Skint!* money management course developed by the Scottish Book Trust.

4.11 Now that the pilot has ended, and You First will continue through funding from the Inspiring Scotland Fund, formal training processes have been put in place. A two day training pack has been developed with the addition of observation of an existing group incorporated where possible.

**The best point in their baby’s development for parents to attend the programme**

4.12 Parents could attend You First if their baby was aged up to one year. Overall, parents were happy with the timing of You First in relation to the age of their baby. Those with younger babies liked having the opportunity to see what they could expect in the future and felt that seeing older babies helped their child ‘come along’ (as discussed in section 3.3). Those with older babies were able to give advice to the other parents which gave them a sense of confidence in their parenting skills.

4.13 The Health Visitors would have liked there to be a little more flexibility in the age range as they had parents they felt could have benefited from You First but their babies were slightly too old. However, facilitators felt that, in practice, it would be difficult to provide activities suitable for a wider age range in the parent and baby sessions.
Programme structure

4.14 The group part of You First comprised 16 weekly sessions. In Phase 1, several parents suggested that it would be better for You First to run twice a week, perhaps for a fewer number of weeks. They felt that it would allow parents to get to know each other more quickly and that they would better remember what they did in the last session, cutting down on the time spent at the start of the day recapping on what they had learnt previously. Other parents did not agree and felt that, in the initial stages, two sessions per week would feel like too great a commitment. In addition, they thought if they needed to take time off (for example, to go on holiday), they would miss a much greater proportion of the sessions. This was explored further in Phases 2 and 3 and, on balance, parents were happy with the current structure.

4.15 While no problems emerged in relation to the initial home visit, the final home visit seemed to be working less well. Parents did not understand what the purpose of this visit was and many did not remember completing an action plan. In Phase 3, measures were taken to try and increase awareness of the plan; the name was changed to ‘Next Steps’ to make it sound less formal and a prepared sheet with You First branding was used as opposed to plain paper. However, the parents in Phase 3 seemed no more aware of the ‘Next Steps’ document than parents in Phases 1 and 2. The main reason for this seems to be that parents perceive the final home visit to mainly involve completing paperwork (a self assessment form, the evaluation questionnaire, the action plan and any remaining paperwork for the Youth Achievement Award). They found this amount of paperwork onerous and had difficulty distinguishing between the different forms they completed.

Session structure

4.16 While some of the parents enjoyed the parent and baby session, others reported that the afternoon felt too long and ‘dragged’. Parents also felt that, because their babies were more likely to sleep in the afternoon than the morning, they were not getting the most out of the time that was meant for interacting with their babies. When the evaluation team fed back this emerging finding, the facilitators were aware that some parents felt they were not getting as much as they could from the afternoon sessions and, in discussion with the evaluation team, it was agreed that it would be beneficial to swap the morning and the afternoon sessions in one of the Phase 3 pilots to see what impact this would have. In Phase 3, the parents tended to favour whatever structure was in place in the group that they attended (whether the crèche was in the morning or afternoon) and there was no clear indication of which was better. Facilitators had a stronger opinion on the issue, feeling that the session worked much better with the crèche in the afternoon. While they plan to use this structure in the future where possible, in some venues this would raise some practical issues in terms of the availability of crèche workers as it overlaps with after school clubs at which they also work.

4.17 There were also parents who felt that the day was too long overall. They thought that the day could be shortened by half an hour without a great deal
of impact on the programme. However, there were those who felt that this was not the case and that the day passed quickly. Again, facilitators were aware of this and it was decided that, in two of the Phase 3 programmes, the day would be shortened by half an hour to see what difference this would make. Across all Phase 3 programmes, parents tended not to have strong views about the length of the day; they were happy whether they had a longer or shorter day. The facilitators shared this view and had not seen any differences between the groups due to the length of the day. It is clear that the parents in Phase 3 who attended the shorter sessions were happy with the day length. However, those who felt that the day was too long in the previous phases mainly mentioned this issue in relation to the parent and baby sessions. When considering the impact of the shortened day, it must be borne in mind that improvements made to the parent and baby sessions (more outings and activities) may also have influenced perceptions of the length of the day.

4.18 Parents tended to think that the size of their group was good. However, in groups where the number of parents was particularly low, those who attended felt that the sessions suffered as a result. Facilitators felt that in a session led by two facilitators the ideal number of parents was eight or nine and that in a session led by one facilitator the ideal would be five or six.

Programme facilities and equipment

4.19 On the whole, parents were happy with the venues that were provided. However, in certain pilots there were some concerns about the temperature of the venue or whether the room that they spent time in with their children was suitable for babies. Parents generally reported that they found the venues easy to get to. However, in one programme, one parent had difficulty getting to the group without a taxi. The £5 travel expenses provided did not cover the cost and, consequently, the parent could not attend the group. While accessibility has rarely been an issue in the three pilot phases, it must be borne in mind that they have been situated in semi-urban areas and that if the programme runs in more rural areas it may require further consideration.

4.20 In Phase 1, parents felt that it would be useful if You First could provide high chairs for the babies to sit in at lunch time. This was addressed and in Phases 2 and 3 parents were generally satisfied with the equipment/facilities available at lunchtimes. The exception to this was a particular venue that did not allow the You First group to use the kitchen to make their lunch (although they were able to do a session on cooking skills). In this venue there was a cafeteria but the parents felt the food provided was not of a high standard. As a result, the facilitators began to bring in cold food (e.g. sandwiches and baguettes) that the parents could eat in their room in the venue. Parents were satisfied with this solution.

4.21 Again, overall, parents were positive about the crèche facilities. However, there were one or two specific problems in a number of the venues. One issue was the position of the crèche in relation to the room in which the parents were located. When the rooms were close together, the parents
could hear their babies crying in the crèche and found it hard to concentrate. The You First team are aware of this issue and, in any future groups, plan to ensure that the crèche is a sufficient distance from the room in which the parents are working. The other problem that arose was parents’ concerns that the crèche workers were not fulfilling their duties properly. There were reported instances of babies not being fed when requested and that babies came back from the crèche with soiled nappies. The facilitators addressed this issue by talking to the crèche providers and it was felt that this was successfully resolved. Facilitators used this as an opportunity to try and demonstrate how to resolve a difficult situation. It may be beneficial to take this one step further and allow parents, with proper guidance, to handle the situation themselves.

Support provided to parents between sessions

4.22 The main source of support for parents between sessions was the phone call or text reminder they received from facilitators the evening before their group session. The predominant view was that this was a practical measure for the facilitators to confirm numbers for the group and take lunch requests. However, it was also felt that this contact showed that the facilitators cared about what was happening to the parents outside of the group and that they attended. In addition to the reminders, parents had the facilitators’ phone numbers and felt that, if they needed to, they could call them to discuss any problems they were having outside of the group sessions. Although parents didn’t tend to contact facilitators between sessions, they appreciated the fact that they could. Whether parents felt that the contact they had with the facilitators between sessions was practical or emotional, the continuity of the contact was viewed positively. Communicating with parents via their mobile phones was successful at You First because all parents had mobile phones. This might not always be the case in future.

4.23 The idea of facilitators expanding the use of text reminders was explored in the follow up parent interviews. There was support for texts reminders of when other groups were running (e.g. Jo Jingles) but less so for text reminders to do things like reading a bedtime story as it was felt that this encroached too far into the parents’ personal lives.
5 IS THE PROGRAMME FULFILLING ITS PERSON-CENTRED IDEALS?

Parents’ involvement in the design and development of the programme

5.1 At the first home visit, parents were given the opportunity to select the topics that they wanted to cover at You First from four predefined areas (health and well-being; finances; stages of development and a personal project). They also had the option of adding topics that were not listed (although this rarely happened). As previously noted, the facilitators then collated these results and the most popular choices were covered at the group sessions. If a parent selected a topic that was not taken on by the group, facilitators would provide them with further information on that topic or provide the contact details of a local service that could help them.

5.2 In Phase 1, parents felt that they did not have much say in the order in which the topics would be covered. It was necessary for facilitators to schedule some of the sessions due to the availability of external speakers so, in the subsequent phases, they explained this to the parents. In Phases 2 and 3, this seemed to be less of a problem and parents felt that they were able to choose the order in which they would cover the topics.

5.3 In addition to choosing the topics in the parent only sessions, parents were able to choose what they had for lunch. Parents were generally happy with the choice that they were given but there were some exceptions to this. Some parents wanted to eat crisps and chocolate, or purchase their lunch from a fast food outlet, but felt that they were only allowed to choose healthy options. Others thought that the choice, usually wraps or baguettes with various sandwich fillings, was limited.

5.4 While parents could choose which activities they did in the parent and baby sessions, in practice this was mostly at the suggestion of the facilitators. As a result parents sometimes took part in activities that they might not have chosen themselves (e.g. singing).

Flexibility of the programme in adapting to the wants and needs of parents

5.5 Flexibility was built into You First throughout the duration of the programme. As previously mentioned, as long as an external speaker was not involved, the parents could change the order of the topics week by week. There was also scope to introduce new topics that had not occurred to parents at the start of the programme, although this did not happen often.

5.6 The ‘planning for the future’ session was designed with this flexibility in mind. The facilitators used this session as a platform to uncover any wants and needs parents may have found difficult to articulate in front of the group. This was used to provide parents with information, link them to local services or deliver a session on a particular topic (for example, if there were a number of parents interested in studying for qualifications they could ask an adult learning advisor to come to the group to discuss this).
Uncovering the needs and wants of parents

5.7 Generally, the programme did seem to be effectively uncovering the needs and wants of parents. As discussed in section 4.2, parents felt that the topics that they wanted were being covered in You First. In Phases 2 and 3, a tick list was introduced so that parents could keep track of when the topics they selected were covered. This helped them as, not only could they see week to week that their topics were being covered, but they could remember what they had originally chosen.

5.8 In a broader sense, facilitators developed relationships with the parents that enabled them to gain insight into what they needed. They did this by building a rapport with parents, by spending time getting to know them as individuals and by making themselves available if parents needed to speak to them privately (see section 5.9 below).

Asking private questions in the group environment

5.9 Parents felt that, if they needed to, they could go to the facilitators and speak to them privately. Around half of parents had done so and those who had were confident that the information remained confidential and found the facilitators’ advice helpful.

SQCF requirements and the person-centred approach

5.10 Undertaking the qualification at You First is optional. However, there was a lack of clarity over what the Youth Achievement Award involved. As parents did not fully understand the qualification and its administration, it is unclear whether they were aware that it was not compulsory. Also, it is currently a ‘one size fits all’ qualification and is not tailored to parents’ individual needs and abilities. Taking these issues into consideration, the qualification appears less person-centred than other aspects of You First. However, it is not a barrier to the person-centred approach to the programme as a whole. Facilitators were aware that the qualification was not working as they had hoped and explored different options to improve this. They planned to introduce the Dynamic Youth Award as this contains much less paperwork than the Youth Achievement Award. The facilitators had originally planned to introduce the Dynamic Youth Award in Phase 3 but due to resourcing and timing issues this was not possible. The award will now be introduced in future sessions.

Professionals’ views on whether the person-centred approach leaves gaps in programme content

5.11 Overall, professionals supported the person-centred approach and had few concerns about potential gaps in programme content.

5.12 Facilitators reported that some professionals felt that it would be beneficial to cover sexual health, in particular, contraception and family planning. This is available on the list of topics parents see at the first home visit but none of them have expressed any interest in covering it. The facilitators felt that, if
the parents do not want information on this issue it would go against the ethos of the programme to cover it.

The impact of the strength-based approach on parents’ experience of the programme

5.13 You First is a strength-based programme, which means that parents are not selected because they are perceived to be doing something wrong or are a ‘bad’ parent. It aims instead to help parents develop their strengths, identify areas that they want to build on (whether parenting skills or wider life skills) and provides them with the tools to do so. While there were some specific incidents when parents felt that they were being told what to do by facilitators, it was clear that they did not feel that they had been invited to the group because they had done something wrong or were not coping. This suggests that the messages communicated to parents at the recruitment stage have been successful in conveying the culture of the group to parents. However, the greatest influence in this regard came from the ethos created at the group by the facilitators. Parents commented that going to You First made them feel like they were a better parent than they had previously thought and that it was the facilitators that helped them to see this. They reported that the facilitators gave them the confidence to believe that being a young parent did not mean that they were any less capable of providing their child with a good life.
6 IS THE PROGRAMME SUCCESSFULLY REACHING ITS TARGET GROUP?

The target group

6.1 You First is intended for first time parents who:
   
   - are aged 21 or under
   - have a child of less than one year of age
   - live in the 15% most deprived areas of Scotland.

6.2 Broadly speaking, health visitors and other professionals involved with You First felt that the target group was appropriate and that this group of parents stood to benefit from the type of support provided by You First. However, all health visitors who took part in the research felt that there were people on their caseload who would have benefited from attending the programme but who were ineligible in relation to one or more of the above criteria.

6.3 In terms of the parents’ age, health visitors talked about parents who were aged 22-24 who they felt were no more mature than some of the younger parents and who needed as much support. The risk of increasing the age range is that younger parents are discouraged from attending. Health visitors did not envisage this being a problem as they felt the older parents did not look or act any older than those aged 21 or under. However, one professional commented that, from her experience of running groups, having a wider age range can mean that the group doesn’t ‘gel’ so well. The You First management were willing to trial delivering the programme with parents aged 25 and under. The 10th programme, which is currently running in Midlothian, and is not included in this evaluation, is being run on this basis.

6.4 Health visitors also discussed the fact that many of the parents in their caseload who were aged 21 or under already had one or more older children. While the health visitors felt that they would still benefit from attending, the You First management did not feel that they could be flexible in relation to this. This was partly due to practical considerations, such as having to accommodate a greater number of children in the crèche, but it was also related to the focus of the parent and baby sessions being on the interaction between the parent and the baby; they did not feel these sessions would be successful if a parent also had an older child or children with them. One possible solution would be to have a crèche that ran all day for the older children.

6.5 Offering greater flexibility in terms of the age of the child was also suggested by health visitors. Specifically, they mentioned that the age limit could be increased to 2 years of age. For some parents, there simply may not have been any similar groups available when their child was younger. However, health visitors did report that some parents are not interested in attending groups straight after becoming a parent but that they may be when their
child is a bit older. They also commented that parents were less well supported in general after their child had turned 1 as they no longer see their health visitor. Again, the You First management did not feel that they could offer more flexibility in relation to this criterion. This was due to the emphasis placed on encouraging interaction with babies from a young age. Another professional also cautioned that parents with young babies prefer to go to groups where other parents also have young babies as they do not tend to feel as confident as parents with older children.

6.6 Finally, although You First was pitched at parents as opposed to just mothers, no fathers have attended. You First staff and other professionals commented that, on reflection, the programme would have been very different with fathers there and felt that it may be better to look separately at what support could be provided to young fathers.

Referral to the programme

6.7 As mentioned above, the programme is intended for parents living in the 15% most deprived areas of Scotland, based on the Scottish Index of Multiple Deprivation (SIMD). Local health visitor teams advised You First facilitators on the most appropriate locations in which to run the programme. Health visitors were then asked to approach all parents in their caseload who lived in the selected area.

6.8 SIMD is a classification which takes into account a range of factors in order to provide a measure of deprivation for a given area. As it is calculated at the individual postcode level, it is possible for neighbouring streets to have different SIMD scores. The SIMD scores of the individual postcodes of parents approached to take part in You First were not considered in the referral process; once an area had been selected, health visitors could approach all parents who lived within reasonable travelling distance of the venue. As part of the evaluation, the research team reviewed the SIMD classifications of the postcodes of all parents who had been approached about attending You First. This analysis showed that the vast majority of parents did not, in fact, live in the 15% most deprived areas of Scotland; just 9 of the 85 parents approached about You First did.

6.9 This is a consequence of fact that the referral process used in the pilot involved the selection of broad areas of deprivation as opposed to the selection of individual parents whose postcodes were in the 15% areas of Scotland as defined by the SIMD classification. This issue was only identified by the research team at the end of the evaluation. Therefore, You First facilitators were unaware of this issue throughout the pilot. Nonetheless, it is unclear what could have been done differently. If the criteria had been strictly adhered to, there would not have been sufficient numbers of eligible parents to allow the groups to go ahead. Furthermore, as discussed in more detail below, the parents who attended did, on the whole, need the support provided by the programme. One of the potential problems with the use of SIMD data to target services/resources is that, while the most deprived areas may have the highest proportion of individuals in need of the
service, many (even most) of the target group may live in other areas\textsuperscript{16}. So it is entirely possible for an individual living in a relatively non-deprived area to be vulnerable in the sense that, for example, they have a low income, are isolated or lack access to services.

6.10 Should You First decide to try to impose the 15\% most deprived criterion more strictly, the way in which suitable areas are identified would need to change. Instead of areas being selected on the basis of local knowledge of which broad areas are deprived, eligible parents would be identified. These parents would have to meet all of the eligibility criteria, including that their postcode was in the 15\% most deprived areas. On the basis of where these parents lived, a suitable location for the group to be held could be selected.

6.11 However, in an interview conducted prior to this issue being identified, the You First Senior Manager did acknowledge that there had been some challenges related to the 15\% most deprived areas eligibility criterion. She alluded to the fact that they would be open to trialling the programme in an area that was not in the 15\% most deprived areas of Scotland and she noted that she would not want the requirement to become a 'silly rule' that stopped vulnerable people accessing the programme. She gave the example of parents who had moved to temporary accommodation, such as a private let in a less deprived area, but who were originally from, and would most likely return to, an area which was within the 15\% most deprived parts of Scotland.

6.12 Apart from this issue of deprivation, the referral process was straightforward. Health visitors were provided with information about the programme and were asked to mention it to all eligible parents in their caseload. They were also provided with flyers containing information about the programme to give to parents. Parents who expressed an interest in attending were then visited at home by the programme facilitators in order to learn more about the programme and to discuss the topics they would like to cover at You First. Occasionally, when the health visitors thought it put the parent at ease, they would attend the home visit along with the facilitators.

6.13 With the exception of a small number of parents who had been recommended the programme by a friend or family member, all referrals in the pilot were done through health visitors. While the process was effective, You First staff were conscious that being over-reliant on one referral source had the potential to cause problems, for example if a health visitor was off sick during the referral period. Other potential sources of referral, suggested by You First staff and other professionals, were lone parent advisors at Job Centres, schools, other voluntary organisations in the local area and self referrals (e.g. parents who have been recommended the programme by a friend or family member).

\textsuperscript{16} For example, recent mapping Ipsos MORI conducted of child poverty data against SIMD data showed significant areas of child poverty outwith the most deprived areas. \url{http://www.ipsos-mori.com/Assets/Docs/Scotland/SRI_Scotland_Newsletter_Winter2011_Small_Area_Estimates_IN\%20Child_Poverty_Data.pdf}
Parents who choose not to attend the programme

6.14 Health visitors reported that the main reason given by parents who chose not to attend You First was that they were not interested in going to any groups. Sometimes, this was due to a lack of confidence, sometimes they just did not see why they might benefit from this support and other times parents had concerns that there might be particular people whom they knew from school, and didn't get on with, at the programme. Health visitors commented that those who chose not to attend tended to be among the most vulnerable parents, who they felt had the most to gain from attending. They did, however, note that some very vulnerable parents had attended. One health visitor suggested that a buddying system, whereby a parent who has already been to You First visits those who are unsure about attending, could be effective in encouraging them to go.

6.15 In terms of assessing the unmet need within the pilot areas, the You First Senior Manager discussed the fact that they do not know the number of eligible parents within the pilot areas who were not invited to attend a programme. This is linked to the way in which areas are currently identified, described earlier in this chapter. As well as ensuring that parents met the deprivation criterion, the alternative method of first identifying eligible parents and then selecting a suitable location in which to hold the group, would also be more effective in establishing unmet need.

Parents’ levels of need

6.16 As discussed above, the vast majority of parents did not, in fact, live in the 15% most deprived areas of Scotland. However, the general consensus among professionals involved in You First was that, although level of need varied from parent to parent, on the whole, they did need this type of support. As discussed in Chapter 3, the ways in which parents benefited and the extent to which they benefited varied. Examples of parents who were well supported by their own parents, but who did not necessarily have any peer support, were cited by facilitators and health visitors as parents who may not have immediately appeared to need support but who stood to experience benefits, particularly around the social aspect of the programme. However, facilitators and professionals involved in running one of the programmes, in which none of the parents lived in the 15% most deprived areas, did pick up on the fact that these parents did not seem to be ‘deprived’ and felt that that they had less to gain from attending the programme as they were already generally doing well.
7 HOW CAN PARENT RETENTION RATES BE IMPROVED?

Attendance rates

7.1 Table 7.1 and Figure 7.1 show the variation in attendance across the nine programmes. At the top end of the scale, in Programme 8, 94% of the 80 potential sessions (5 parents multiplied by 16 weeks) that could have been attended were attended. In contrast, only 46% of sessions were attended in Programme 2 and Programme 9.

7.2 Programme 8 also had the highest completion rate. All 5 parents who started the programme completed it. In contrast, just 3 of the 9 parents (33%) who started Programme 2 went on to complete it. The variation in attendance at the individual parent level is shown in Figure 7.2. It shows the number of parents who attended all 16 sessions, the number who attended 15 sessions and so on. As illustrated, several of the 77 parents were regular attendees: 6 parents had attended all 16 sessions and 10 attended 15 sessions. Others attended fewer sessions (31 parents had attended 10 or fewer sessions), sometimes stopping before the programme had finished and other times attending throughout the course of the programme, but not regularly. Parents who completed the programme attended an average of 13 sessions while parents who did not complete it attended an average of 5 sessions.

Table 7.1 Attendance rates

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<th>Programme</th>
<th>Financial incentive?</th>
<th>Overall % of total sessions attended</th>
<th>Number of parents</th>
<th>Number of parents who completed</th>
<th>% who completed</th>
<th>Average number of sessions attended by those who did not complete</th>
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17 We have defined 'completing the programme' as attending at least one of the last two sessions
7.3 The main reasons reported by parents for missing a session were that they were ill or their baby was ill. Other reasons included going on holiday, going back to work or having other important things to do. Facilitators were unsure as to why some programmes were better attended than others. However, there may be a link to the deprivation status of the parents attending, discussed in Chapter 6. None of the parents attending Programme 8 lived in the 15% most deprived areas and facilitators noted that they were the group who appeared to be least in need of the support provided by You First. This supports the discussion in Chapter 6 around ensuring that the programme is targeted at those who need it most. Furthermore, there appeared to be a link between the extent to which the group bonded and the attendance rate. Evidence from the facilitators and the parents suggested that parents in Programmes 2 and 9, the two programmes with the lowest attendance rates, had not formed close friendships, as parents in other programmes had. As discussed in Chapter 3, spending time with other parents was one of the things that parents most enjoyed about attending You First. While the
direction of the relationship between attendance and the extent to which the group bonded is unclear, it may become a vicious circle; if attendance is low at the beginning, parents may be less likely to form friendships and then be less inclined to attend each week as there is not the same incentive of seeing their friends.

7.4 The impact of the financial incentive on recruitment and retention is discussed below. However, it is worth noting that the programme can be well attended without it, as illustrated by the attendance rate of 70% in Programme 4, the fourth highest attendance rate of the 9 programmes.

7.5 Despite the inconsistent attendance across the programmes, the You First management felt that the attendance was, on the whole, pleasing and was higher than they would have expected on the basis of their previous experience of similar programmes. They commented that the effort that it takes for a parent to get organised and out of the house to attend the programme should not be underestimated. They suggested that the higher than anticipated attendance may be linked to the fact that the level of engagement that the facilitators have with parents, for example phoning them in advance of each session, is higher than it would normally be.

Parents’ motivation for attending You First

7.6 As mentioned in Chapter 3, the main reason given by parents for choosing to attend the programme was the opportunity to meet other parents of a similar age. The fact that everyone would start and finish the group at the same time also appealed to parents. As discussed previously, even after having a positive experience at You First, parents lacked confidence to go to other groups that were already established.

7.7 To a lesser extent, parents reported that they were also attracted by the crèche. One parent commented that being able to have a break from her baby for a short time was appealing while another thought it would be good for her to have the experience of leaving her baby in the crèche so that she knew she would be able to do so in future.

7.8 Health visitors and other professionals also identified factors that they thought had played a part in parents’ decisions to go to You First. These were:

- the fact that the facilitators had visited each of them at home before the programme
- the way in which the facilitators described the programme and the fact that they focused on elements which would appeal to parents - one professional commented that if it was advertised it as a programme about healthy eating and budgeting parents would not have wanted to attend
- that parents can choose what to cover at the programme
that referral is undertaken by health visitors who know each parent and know how to approach it with them.

7.9 The You First management also felt that it was important that the programme was presented to parents as an opportunity, rather than something that they should attend because they have done something wrong or because they ‘needed’ it.

7.10 Parents continued to attend You First because they enjoyed it. In particular, they enjoyed getting out of the house and seeing people each week. They also felt that their babies were enjoying it and that it was good for them to be interacting with other babies.

Reasons for not completing You First

7.11 As Table 7.1 above illustrates, around a third of parents did not complete the programme (defined as attending one of the last two sessions). Facilitators were aware of the reasons why some parents did not complete the programme. These tended to be positive reasons (e.g. returning to work or starting a college course) or practical reasons (e.g. parents moving out of the area). They also mentioned that one parent, who was very nervous about attending as she did not like group environments, did attend the first session but was clearly very uncomfortable and did not return.

7.12 However, there were also parents who stopped attending You First without informing the facilitators that they were going to do so. Although, the facilitators would try to contact these parents after they had missed a session to see why they hadn't attended and to encourage them to return, they were sometimes unable to make contact with them and were, therefore, unclear as to why they had stopped attending. Three such parents were interviewed as part of the evaluation and each had different reasons for stopping attending.

7.13 One parent reported that she had missed a few sessions for personal reasons. Although she had received a text message from the facilitators to see if she was going back the next week, she had not spoken to them on the phone. She did not respond to the text message and said that, after a while, the facilitators stopped texting her, making her unsure whether it was okay for her to return. This illustrates the importance of parents feeling wanted at the group. This parent was neutral about the programme. While she enjoyed it to an extent, she had not become particularly friendly with the other parents and already felt well supported by family and friends.

7.14 The other two parents were more negative about the programme. One felt that the group was for parents who required a higher level of support than she did. She was already attending other groups, with mums of all ages, had already established a good routine and felt that she was managing well. Neither of these parents had become particularly friendly with the other parents in the group and both felt that there was a lot of ‘bitching’ at the group. In terms of the delivery of the programme, one parent commented that the morning, parent only, sessions were late in starting as other parents
were late, and that this left little time to actually do anything. She also reported finding the programme ‘a bit boring’. The other parent felt that the sessions involving both parents and babies did not work particularly well; they were too long and the other parents didn’t really do what the facilitators wanted them to do, they just did their own thing. She also reported that the finish time of the group kept changing and that this caused problems for her getting home. Both parents reported that they were made to feel that they were doing things wrong. For one, it tended to be the facilitators who made her feel this way; she felt that, if her way of doing something wasn’t exactly what they advised, she was made to feel that her way was wrong. For the other parent, it was the advice of other parents that was unwelcome; she didn’t like the fact that they questioned the brands of things such as nappies and baby food that she chose to buy. Both parents reported that the only benefit they had experienced from attending was that, as a result of using the crèche, they felt more confident about leaving their babies in the future.

**Practical barriers to attendance**

7.15 During the pilot there was little evidence of practical barriers preventing parents from attending the programmes. Parents received £5 per week to cover any travel expenses. In the vast majority of cases, this was sufficient and parents had no difficulties getting to the venues. However, one parent, who lived in a more rural area, was finding it difficult to attend due to the fact she had to take two buses to get to the venue. In the event, she moved to another local authority before the situation was resolved. The programmes delivered as part of the pilot were in predominantly urban areas. Should programmes run in more rural communities in future, there may be more issues related to travel.

**The impact of the financial incentive on initial recruitment/retention**

7.16 As discussed previously, parents attending programmes offering the financial incentive were given £20 per week for attending (which many deferred until the end of the programme). All parents were also given £5 per week to cover any travel expenses incurred. This section considers the £20 payment only; the impact of the travel expense payment on attendance was not specifically explored.

7.17 As discussed in section 3.37, the financial incentive played an important role in giving parents experience of saving money. In terms of recruitment and retention, however, it appeared that the financial incentive was an ‘added bonus’ of attending the programme rather than a reason for deciding to, or continuing to, attend it. Parents reported deciding to attend You First for the reasons described above in this chapter and continuing to go because they enjoyed it. If anything, the money was more of an incentive at the initial referral stage and became less important as parents started to experience the other benefits of the programme. However, health visitors and facilitators made sure that they did not make this the main selling point of the programme and only mentioned it at the end of the conversation, by which time parents tended to already be interested. Both parents and health visitors felt that there were some parents for whom the financial incentive
was the reason for going but they were considered the exception rather than the rule. That parents were not turning up each week simply to collect their £20 is supported by the fact that many (28 out of 42) chose to defer payment of the financial incentive until the end of the programme.

7.18 The extent to which it is possible to use the programme attendance rates to consider the effect of the financial incentive is limited by the fact that just two of the nine programmes were delivered without the incentive and that the groups differed in other ways, for example, different locations, different facilitators, different programme structures and so on. As shown in Table 7.1 above, one of the programmes delivered without a financial incentive was the fourth best attended programme. This shows that it was possible, in this case, to deliver a well attended programme in the absence of the financial incentive. The other programme to run without a financial incentive was less well attended. In fact, it had the lowest attendance rate in terms of the overall number of sessions attended. However, this group was also one in which the parents did not seem to 'gel'. This, and other individual or group factors that we are not aware of, could also have contributed towards the poor attendance of this group.

7.19 Given that the financial incentive comprises a substantial proportion of the cost involved in running You First, it is our view that there is not sufficient evidence to justify the expense of providing it.
8 HOW EFFECTIVE ARE THE MANAGEMENT AND SUPPORT STRUCTURES IN PLACE FOR THE PROGRAMME?

The effectiveness of the management and support structures in place for the programme

8.1 Management of You First followed the standard structure in place for any Barnardo’s programme and sat within the development team while it was being designed and tested. As the pilot progressed, management of You First was moved from the development team to Children’s Services operations. The structure included an Assistant Director, a Children’s Services Manager and the facilitators. The transition that took place as You First moved from a developmental project to a fully-fledged programme appeared to work smoothly both at management level and at a facilitator level. Facilitators felt supported by You First management and felt they were given all the resources they required both before and after the transition. The change in facilitators made no detrimental effect on the running of the programme.

8.2 Beyond this standard management structure, a new element was introduced to You First as a consequence of the partnership between Barnardo’s, the Scottish Government and NHS Lothian. A project review board was created to provide overall leadership of the programme, to oversee any significant decisions and for the You First team to feed back their progress. You First management found this process extremely useful. As the board brought together many different types of professionals, it stimulated discussion and provided the You First team with learning they could use to improve the programme. A senior stakeholder also spoke positively about the project review board. She felt that there was a real commitment from all partners to make the programme successful and that they all shared the same goals. She also thought that it was beneficial that there was local, as well as national, representation on the board.

Measuring the objectives and outcomes of the programme

8.3 In the pilot stage of the You First programme, the main measure of the objectives and outcomes has been this external evaluation. However, it is important that the You First team ensure that there are appropriate self-evaluation mechanisms in place to continue to measure progress in the future. Although parents complete self-assessment questionnaires, these are only short term measures and we have some reservations about the effectiveness of these as an objective measure of outcomes (for more details please see section 1.11 of Appendix 4). Another option is to use existing objective measures. For example, the Warwick Edinburgh Mental Wellbeing Scale (WEMWBS)\textsuperscript{18} could be used to look at the effect of the programme on parents’ mental wellbeing. Local areas could also explore

\textsuperscript{18} The Warwick-Edinburgh Mental Well-being Scale was funded by the Scottish Executive National Programme for improving mental health and well-being, commissioned by NHS Health Scotland, developed by the University of Warwick and the University of Edinburgh, and is jointly owned by NHS Health Scotland, the University of Warwick and the University of Edinburgh.
what they want the programme to achieve in their area and identify short/medium/long term outcomes. Examples of how these outcomes could be measured include uptake of local services, feedback from local stakeholders or longer term monitoring of parents’ destinations.
9 WHAT IMPACT HAS THE PROGRAMME HAD ON OTHER RELATED SERVICES?

Fitting in with relevant local strategies and plans

9.1 The strategic involvement of NHS Lothian in the project review board acted as a starting point for You First to link into the relevant local strategies in each of East, West and Midlothian. The link to local strategy was provided by the Chief Nurses from each of the three programme areas, who were also members of the project review board. They linked the You First facilitators with the relevant health visitors and co-ordinated with them when selecting the areas for the programme.

9.2 While the programme was linked in to local strategy for the health visiting team, it seemed that this happened to a lesser extent with the local multi-agency parenting strategy as a whole. This is highlighted by the fact that some stakeholders felt that the project had been ‘parachuted’ in with little consultation. This was particularly the case in one of the three areas. The You First management were aware of this and efforts were made to try to improve the links. They tried to engage with different groups and services to explain what the You First programme was aiming to do and how it differed from existing provision. In addition, by the end of Phase 3, there was a You First representative at parenting strategy groups for each of the three areas. Stakeholders did concede that once they understood the programme, and what it set out to achieve, they were reassured that it did link sufficiently with local plans. However, they still felt that the way in which the programme was originally introduced in their area could have been better.

Taking account of the local context and particular local needs

9.3 In advance of the pilot phase, informal scoping exercises were carried out in each local authority in order to get an idea of the local context and what provisions were available to parents in the area. You First management felt that their representation on the aforementioned parenting strategy groups did provide them with a view of the local context and need. However, this representation did not happen in all three areas until the later stages of the programme.

9.4 In terms of selecting the pilot areas, the You First team liaised with the Chief Nurses and the health visiting team to take into account local context. This meant that detailed local knowledge was used during the process of choosing particular areas (for more details see section 6.7). However, the facilitators selected the venues.

9.5 There were still concerns from some stakeholders that the facilitators did not know enough about local geography or the transport links available to parents. This may be down to the practicalities of finding a venue that is suitable for every parent in a group. However, it did cause one parent to stop attending the group altogether.
9.6 In working with local service providers, the co-ordination of provision is key; in the test phase, one of the programmes ran on the same day as a local young mothers group. At the time, this caused some tension between You First and other local services as those from the local services felt that the facilitators should have taken into account the timing of other local groups. Lessons were taken from this and the tension has been resolved.

**Linking in to other initiatives/services in the area**

9.7 You First linked in to a number of initiatives and services in the three areas in which it was operating. The majority of these have been used to provide inputs during the sessions but others have been identified as services that parents can go on to use once they have completed You First.

9.8 Throughout the three phases, facilitators have attempted to build upon their available contacts and find new ways of working with other initiatives. A good example of this was that, in one of the programmes, You First was co-facilitated with a member of the local Sure Start team. This ran smoothly and the parents at that particular group were as happy with the facilitation as those in the other areas. It was a good opportunity to share best practice between Sure Start and You First. Working with an established local service was also beneficial in providing the facilitators with further links to other services in the area.

9.9 There were two main things that hindered the programme in terms of joint working. Firstly, as previously discussed, there was a feeling from some stakeholders at the start of the programme that the group was simply ‘parachuted’ into areas without much consultation. Secondly, stakeholders had reservations about the use of a financial incentive. While some simply disagreed with paying parents to attend a group such as You First from an ethical standpoint, others felt that other services might be put at a disadvantage. They felt that, as the You First parents were offered money and were therefore more likely to attend, any comparison of service uptake would be unfair. Once stakeholders had more information about You First and what it involved or saw it in practice, they became much more positive about what it was trying to achieve.

9.10 As with any programme of this type, in order to improve joint working, facilitators must communicate with local stakeholders as much as possible and as early in the process as possible.

**Child protection requirements**

9.11 You First established appropriate procedures in relation to child protection requirements. In order to ensure consistency of approach with local procedures, it followed the protocols set out in the Edinburgh and Lothians Inter-Agency Child Protection Procedures. It was agreed that the health visitor would act as the liaison point for facilitators if they had any child protection concerns. At the first home visit, facilitators informed parents of their responsibility to report to the health visitor anything that caused them concern. They also explained that they would try to make this process as
open as possible and let the parents know that they were going to speak to the health visitor.
CONCLUSIONS

Main benefits of You First

10.1 Although the parents have benefited from different aspects of You First to differing extents, three major benefits emerged. These were: the development of a social network, increased confidence and greater interaction between parents and their babies. While we discuss each of these benefits separately below, they are all interlinked and the combined influence of the three is greater than the sum of the individual benefits.

Enhanced social networks

10.2 The benefit that had the most widespread impact was the opportunity to meet other young parents. Nearly all of the parents enhanced their social networks to some degree, whether that was by forming lasting friendships, establishing a peer network through texting and Facebook or simply having a ‘friendly face’ they could chat to if they bumped into them in the street. While not all parents made lasting friendships, You First did have the potential to facilitate this.

Increased confidence

10.3 A strong theme to emerge from the research was how conscious the parents were about their age and the extent to which they felt stigmatised and judged by the rest of society. One parent felt so strongly about this that, before attending You First, she would not leave the house with her baby because she did not want people to see her. Meeting other young parents was key to improving confidence in this area. Simply knowing that there were others in their situation, and spending time with those who understood what they were going through, helped parents to feel that they were doing ‘fine’.

10.4 While not all parents overcame their concerns about being stigmatised for their age, almost all felt more confident in some respect. A number of parents felt their self-confidence in general had increased, but for others it was related to specific areas. This included feeling more confident as a mother, more confident meeting new people and more confident about talking in a group or speaking up for themselves.

Increased parent-child interaction

10.5 One of the areas in which some parents’ confidence improved was feeling more able to leave the house with their babies and go out and do things such as going swimming. Not only did this mean that parents were interacting more with their babies, but it helped them to get more enjoyment from doing so. One of the other main aspects that helped increased parent-baby interaction was the focus on the role parents play in their child’s development. While parents had previously thought that their babies were too young to benefit from reading or singing, they did seem to take on board messages about the importance of these activities for their child’s
development. This proved successful as, rather than simply telling parents they should read or sing more, the reasons why this aided their babies’ development were explained.

**Other benefits**

10.6 In addition to the three major benefits discussed above, You First has also delivered benefits that have had a big impact on just a few of the parents. For example, it raised one parent’s educational aspirations. Through encouragement from the facilitators she realised that going to college was still an option for her, despite having had a baby. Another example was that some parents felt that becoming accustomed to using a crèche was of great benefit to them. It helped one parent make the decision to return to work, having previously been unsure about doing so. There were also aspects of You First that many parents found useful and informative but were not highlighted as major benefits. For example, learning about home safety or baby first aid.

10.7 The extent to which parents’ uptake of local services increased was mixed (discussed in more detail below). However, there were instances of parents attending other groups in the area or using local services. It was clear that You First helped to increase parents’ awareness of what was available and gave at least some more confidence in using other services. While not all parents had accessed these services, they knew what was available and reported that they would go if needed. For example, while there were parents who were not yet ready to go back to work, when they were, they knew that they could go to Working For Families for help with finding a crèche or short term financial assistance.

**Areas for improvement**

10.8 As discussed above, You First provided some clear benefits for parents and their children. However, there were some areas for improvement.

**Financial capabilities**

10.9 While some parents were picking up money saving tips and acting on them (e.g. buying in bulk, making a shopping list and not buying ‘treats’ for themselves or their babies every time they were in a shop), on the whole, they were not implementing a wider budget plan or improving their core financial capabilities. One of the reasons that You First was less effective in changing parents’ attitudes towards budgeting as opposed to other aspects of learning was that they felt that they were just ‘bad with money’ and nothing could change this. Therefore, one of the main challenges in improving financial capabilities is breaking down this fatalistic attitude towards budgeting. There were some aspects of the delivery that could be changed to make the subject more engaging for parents. The learning methods that have been successful in other topics have been those in which parents are actively involved. The facilitators are continuing to explore new ways of delivering budgeting messages and have already implemented changes such as using the Scottish Book Trust’s *Skint!* money management
resource. In terms of making things more practical and relevant to parents, consideration could be given to involving them more in the budgeting of the group sessions. For instance, planning and controlling the lunch budget or being in charge of the budget for a You First event such as a party or an outing. This would not only give parents a chance to try out their budgeting skills but these are activities that they will deal with as their child grows up.

**Health improvement**

10.10 The facilitators tried to weave in health improvement messages (healthy eating messages in particular) in different contexts throughout the sessions. For example, during lunchtimes the facilitators would bring in different fruits and vegetables for the babies to try. There was little evidence of these wider health messages filtering through to parents. Some parents did report doing more home cooking but this tended to be for financial rather than health reasons. There is a tension between facilitators providing health information that they think parents should know and the person-centred approach of You First. This stems from the fact that the parents are resistant to some of the messages and feel that they are being told what to do (which is not an untypical reaction from the public in general to health improvement messages). It may be beneficial to put the even more of the focus of health improvement on the baby’s diet rather than the parent’s. When discussing child development, explaining to the parents why it was important to do things a certain way had more resonance than simply telling them what they should do. It may be that this approach could help to increase engagement with healthy eating messages. In addition to providing a more detailed explanation of why babies need particular foods or should not have particular foods, it may also be useful to try to incorporate more visual elements to keep parents engaged. Examples of this could include demonstrating how many teaspoons of sugar there are in a fizzy drink or showing a lump of fat equivalent to the amount in a sausage roll. Highlighting the impact that a healthy diet can have on a child’s performance at school would also be a big motivator for parents in this area (this had already helped to motivate parents in relation to engaging with their child’s development).

**Deprivation criterion**

10.11 Although not an area for improvement as such, there needs to be more clarity over the ‘living in the 15% most deprived areas of Scotland’ eligibility criterion. While many of the parents were not, in fact, in living in the 15% most deprived areas of Scotland, they were vulnerable and benefited from attending You First (as discussed in Chapter 6). If a different area strictly adheres to selecting only those living in the 15% most deprived areas in Scotland, parents who are in need may be missed. To avoid this ambiguity, it may be best to stop using this criterion altogether and use another method to identify deprived/vulnerable parents.
Transitions

10.12 You First is a booster programme designed to help parents develop in the future and aid their transition into positive future pathways such as work, education or other groups in the community that could provide them with support. Success in this area was mixed and was one of the main areas for improvement. Parents, for the most part, talked positively about the future planning elements and had goals for the future. However, the extent to which this would translate into action was not clear. While wider efforts were made to improve transitions, the three areas which require further consideration are the final home visit, improving educational aspirations and encouraging parents to attend other groups which would support them and their family.

Final home visit

10.13 The final home visit is intended to consolidate parents’ future plans and aid the transition. However, parents gained little from this visit. They thought that the visits involved too much paperwork (the final self-assessment, qualification paper work, the action plan and the evaluation questionnaire) and did not really understand what they were for. Given that it is very time-consuming for the facilitators to make all the required home visits (especially when two visits are required to complete the paperwork, as happens on occasion, or when the facilitator makes the journey but the parent is not there/cancels), there may be a better way to use the time and resources. One possibility could be to replace the home visit with an extra group session. This would mean that the parent and facilitator one-to-one discussions could be completed across the final two sessions (in order to cover the self-assessment and the action plan) but that the parents would also have more time in the group environment and feel they have gained something from the additional session.

Educational aspirations

10.14 The Youth Achievement Award currently offered through You First is one of the less successful aspects. The parents felt that the qualification involved a great deal of paperwork and found this off-putting. There was also a lack of clarity among parents over what it involved; while some did not know what the Youth Achievement Award was, and consequently how they could use it in the future, others simply did not know that they were doing it until the later stages of the group sessions. In addition to these problems, the fact that it is a ‘one size fits all’ qualification means that it is not as person-centred as the rest of You First. There were a small number of parents who felt You First did encourage them to see education in a more positive light and think about completing more qualifications. However, this was mainly due to the encouragement of the facilitators rather than completing the qualification. If a more effective qualification could be found, it may increase parents’ educational aspirations more widely. More consideration should therefore be given to finding a qualification that better meets the needs of the parents.
Attending other groups

10.15 A small number of parents have gone on to attend other groups in their local area. However, the uptake of such services has not been high. To some extent, this was due to parents still not having the confidence to go to something on their own, particularly if there would be older mothers attending. In terms of increasing uptake of services, it may be worth using ‘mentors’ to come and speak to the You First parents about a different group. The mentor would need to be a young parent and could then accompany the You First parent if they wished to go along and try the different group. Another possibility could be to ask a small group of You First parents to ‘test out’ another group and report back to the wider group. There were also a number of parents who had gone back to work and did not have time to go to groups. Low service uptake may also be due to the fact that what is available in their area is not appropriate for this group of parents. The nature of the groups available may not be what this type of parent is interested in (e.g. singing) or lacking in focus/activity (e.g. groups based purely on socialising/‘meeting other mums’).

Wider Learning

10.16 One of the most consistent characteristics among this group of parents was their fear of being judged or looked down on, especially by older mothers. It is clear, therefore, that the age range of You First was vital in its success. As previously discussed, attending group sessions with their peers is a benefit in itself for parents. It provides them with the opportunity to see that they are not alone in their situation. Perhaps more importantly, some parents would simply not have attended You First if they thought that older parents would be attending. This suggests that, if a service is trying to engage with young parents, it is important to have a separate provision.

10.17 Another successful aspect of You First has been the fact that it runs with the same cohort of parents. Almost all parents reported that they were nervous about attending the first session of You First. However, they felt less nervous knowing that everyone would be starting at the same time and no-one would know anyone else. Some specifically said that they would not have attended an existing group where everybody else already knew each other. Running a group as a cohort is, therefore, a useful way of encouraging young parents to attend a group, particularly those who have never attended a group before.

10.18 The most successful learning methods used in You First appeared to be those that involved practical skills and gave parents the chance to actively engage in a subject. They did not engage with subjects that involved a great deal of paper work. In terms of learning methods for this group of parents, practitioners should try to find ways in which information can be delivered to parents that has relevance to their lives and is enjoyable.

10.19 Finally, and perhaps most importantly, the person-centred approach has proved successful. Allowing the parents to become involved in the design of You First helped them to focus on the things they were interested in, took
the emphasis away from what they ‘should’ be doing and helped build self-confidence. The ethos created at You First helped many to overcome their insecurity and believe in their abilities as a parent.