**Accessible version: Supporting Healthy Parental Relationships**

**Good Practice Guide**

**November 2024**

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# **Introduction**

This is a practical guide for anyone promoting healthy parental relationships for the benefit of children’s well-being. Most of the content has been extracted from the lessons shared by those delivering the service across the country. The term 'parental' relationships is used throughout, but family structures are often very different. This general term also refers to anyone with parental responsibility, such as grandparents, special guardians, kinship or foster carers.​

The Guide can be used at a variety of levels: for those making decisions on where healthy parental relationships sits in strategy; those trying to identify local needs; those deciding on which approaches to use in the community; those wanting to show that it works; and those working on the front-line with the families that need it. ​

It can be taken as a whole, or as a ‘pick and mix’ for specific areas of interest. There are links and references to additional resources that were in operation at the time of publication (Autumn 2024), with snapshots of good practice bringing the concept to life. The resources links and the guide itself are not exhaustive and any of those included carry no endorsement. We encourage you to look around for further resources. ​

Just like families, what works for one may not work for all. Take from the guide what fits best to help bring about strong, healthy, and happy relationships with your families. ​

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# **Strategy**

## Healthy Parental Relationships: Taking a strategic approach to Service Development

Healthy Parental Relationships: Taking a strategic approach to Service Development Senior Leaders are key drivers to formulating a vision and developing a road map to support healthy parental relationships. A well-defined strategy allows for diversity of thought and innovation by involving stakeholders in defining the strategic approach and setting achievable but ambitious aims and objectives.

The most effective strategies are communicated to the wider workforce and stakeholders and weaved into actionable plans, policies and procedures. Governance arrangements are in place to keep the focus on this area of work and drive forward the agenda. The critical eye of key partners and stakeholders ensures effectiveness of the programme. Strategic documents and policies are brought to life through services and the support offered to families. Impact can be measured, and the effectiveness of the strategy is monitored and adapted against objectives, changing needs and cost effectiveness.

## Local snapshots

1. In Bradford, RPC is part of the local Supporting Families Outcomes Plan, Early Help Strategy, and became a key element in the Domestic Abuse/Sexual Violence prevention strategy. It is prominent within the Early Help and Transformation Service Plan. The service reports to these boards with regards to progress and updates on data: downloads/web access, Early Help assessment flags, parent course data, training numbers and evaluation of training impact. Bradford's Relationships Matter Leaders ensure prioritisation and sustainability across a range of agencies, significantly extending the training and practice development offer across partner organisations. They continue with monthly progress updates to a wide range of stakeholders and leaders such as the Lead Member for Children & Young People and Council Leader, and wider boards such as Community Safety. They take responsibility for implementing actions arising from a local RPC strategic needs assessment.
2. The 10 Local Authorities that make up the **East Midlands** region decided that by working together they could extend resources and capacity and achieve more for families.

Each Local Authority in the region has an RPC lead and they come together to plan joint activity across the region. Examples of collaboration include:

* Purchase of Reducing Parental Conflict resources
* Training programmes & 4 regional conferences
* Regional Evaluation including theory of change and needs assessment

The Directors of Children’s Services in the East Midlands are the strategic sponsor for the programme and the group also report to the Regional Improvement and Innovation Alliance Group. These governance structures ensure that information is shared at a strategic level with those involved in prioritising workstreams, decision making and planning. By taking a joined-up approach to regional evaluation, not only has this been found to be a more efficient use of funding but this provides strategic leads with the evidence they need to consider sustainability and inform the future of RPC across the region.

## Think About

1. **Leading through policy**

* Planning any new activity or provision using Theory of Change. Using evidence to identify how and why your local activities are expected to achieve your intended outcomes, gives you a basis on which to evaluate them. Ask why, who, how and what.
* Putting in place strategic arrangements to steer the RPC strand of work, such as establishing a standalone multi-agency board or identifying an existing board to provide governance and oversight of a plan for healthy parental relationships/Reducing Parental Conflict.
* Partnering healthy parental relationships with other directives, such as Safeguarding Partnerships, Early Help Strategy, Family Hub Offer, and Self-Evaluation Forms for Ofsted preparation.
* Having a dedicated lead or champion responsible for implementing the healthy parental relationships Strategy that reports into established governance arrangements.
* Developing a clear and robust healthy parental relationships /RPC strategy aligned with national and regional policies.
* Keeping Healthy Relationships on the agenda for contracts and commissioning.

1. **Maintaining standards**

* Building on an existing quality assurance framework or developing a stand-alone quality assurance framework for healthy parental relationships.
* Auditing existing policies for children and families and ensuring all include a section on healthy parental relationships. For example, Safeguarding, Domestic Abuse, Early Help, Family Hub, Community Safety, Youth Justice Service, Public Health.
* Putting in place new recording systems or updating existing ones to incorporate measures for collecting data and performance indicators e.g., data on referrals and data that measures impact.
* Measuring the social return on investment using tools such as Cost Benefit Analysis to quantify savings and benefits of the programme.

1. **Raising the profile**

* Organising a launch event and events throughout the calendar year that keep the profile of healthy parental relationships high on the agenda for staff and partners.
* Raising public awareness via campaigns to reduce stigma and encourage take up of support by the local community.
* Producing a workforce development plan to strengthen the skills and knowledge of the workforce to be able to signpost or provide timely, efficient, and effective support to parents and children.

## Resources

1. Commissioner guide: Reducing parental conflict | Early Intervention Foundation (<https://www.eif.org.uk/resource/commissioner-guide-reducing-parental-conflict>)
2. When planning any service, consider using Theory of Change Step 1: Creating a theory of change (<https://evaluationhub.eif.org.uk/theory-of-change/>). An example is Walsall: Developing a theory of change for local reducing parental conflict support (<https://www.eif.org.uk/resource/walsall-developing-a-theory-of-change-for-local-reducing-parental-conflict-support>)
3. For further information about building a quality culture in children’s servicesQuality in child and family services (<https://www.researchinpractice.org.uk/children/publications/2018/april/building-a-quality-culture-in-child-and-family-services-strategic-briefing-2018/>)
4. For guidance on Cost Benefit Analysis for Early Help, there is ‘Making an early intervention business case: Checklist and recommendations for cost-benefit analysis’ (<https://www.eif.org.uk/resource/making-an-early-intervention-business-case-checklist-and-recommendations-for-cost-benefit-analysis>)
5. For a range of free templates and customisable forms including meeting agendas and minutes search the web, or take some ideas from (<https://eforms.com/meeting-minutes/>)

# **Workforce**

## Workforce strategies for supporting healthy parental relationships

Developing the confidence of the workforce to have the skills to ask questions about relationships and offer effective support requires access to relevant learning and development (L&D) opportunities. A varied L&D offer, with different aims and objectives is key to stimulating interest and engaging professionals and teams in a way they can realistically apply to their practice. From compulsory induction about healthy parental relationships for new staff and refresher activities to embed new learning, to training aimed at more experienced staff and managers, there are a range of different types of L&D activities to consider. Objectives that focus on recognising what healthy relationships are and supporting staff with skills to signpost families to appropriate support, to providing direct advice, information and support to families, all play an important role in promoting and supporting healthy relationships. The page that follows offers some ideas for developing a workforce development strategy and/or designing a healthy parental relationships L&D offer.

## Local snapshots

1. **Barnet Council** are committed to ensuring that Healthy parental Relationships is embedded as part of their strategy for achieving positive outcomes for families. Key to this is investing in workforce development. They have developed the workforce by training up all Early Help Practitioners to be able to provide 1:1 interventions to parents as part of their case work and when visiting families. All practitioners are provided with a healthy relationships toolkit and have access to the digital version of the materials including bite sized training videos. These resources are provided to support practitioners working with lower-level parental conflict. They have inhouse Healthy Relationships Train the Trainers who cascade training to others across the service, offer refresher training and facilitate RPC practice bring and share sessions. To ensure ongoing support, an experienced Couples Counsellor was commissioned to facilitate RPC Practice Conversations for the workforce including Social Workers and Integrated Clinical Team. These sessions aim to support practitioners dealing with more complex parental conflict situations, using a mentalization based therapy approach.
2. In **Surrey**, the Police Training Development Officer agreed to include healthy parental relationships in the compulsory learning and development offer for new staff and as ongoing learning for the wider workforce. Over the course of a year, 1,878 custody police Sergeants received training on identifying destructive parental conflict, responding to police call outs and exercising professional curiosity when speaking with parents and children. During the training session, police sergeants explored unhealthy parental conflict, possible indicators and support that could be put in place for parents and children impacted. The training reinforced the importance of the existing pathway for responding to Domestic Abuse (DA), but also enhanced the knowledge of the support available to children and families when DA has been ruled out but where children are still negatively exposed to destructive parental conflict.

## Think about

1. **How to deliver training**

* Bringing on board partners/practitioners with specialist knowledge to plan and co-facilitate training and agree a training plan for the year.
* Collaborating with domestic abuse services to be clear on the difference between domestic abuse and parental conflict.
* Incorporating RPC as part of domestic abuse learning and development.
* Including information about DA and what to do where there are concerns in all RPC training.
* Including online healthy parental relationships training as part of induction and introducing mandatory training for all staff with additional in-person specialised training for frontline staff and managers.

1. **Workforce training needs**

* Creating a survey to assess the healthy parental relationships training needs of the workforce and/or individual teams – what are the gaps?
* Who will lead on workforce development? Is there an existing structure that healthy parental relationships can be integrated into e.g., Safeguarding Board, Children & Families Learning & Development, Family Hubs or added to an existing role?
* Shadowing teams to learn more about their day-to-day practice and to have a clearer understanding of the role they could play in supporting healthy parental relationships before designing training with the team in mind.
* Defining clear objectives for training/workforce development to meet the holistic needs of the whole workforce e.g., awareness raising, identification and referring, direct intervention and support, supervising staff, quality assurance.

1. **Quality assurance**

* Continuously capturing attendance data, feedback and measuring the impact of workforce development activities to support the development and quality of the offer.
* Encouraging ongoing peer support and forums for sharing good practice.
* Providing ongoing and continuous professional development opportunities to embed into daily practice.
* Providing recognition for learning and development achievements, such as certificates, accreditation for CPD.

## Resources

1. This resource provides training and tools to support managers and practitioners to have conversations about parental conflict, it includes guidance on identifying relationship distress, starting conversations about healthy relationships and providing support (<https://www.gov.uk/guidance/reducing-parental-conflict-training-and-tools-for-practitioners-and-their-managers>
2. You Tube Video providing six key tips [for talking with families about parental conflict (https://www.youtube.com/watch?v=tISoKMD46KU](https://www.youtube.com/watch?v=tISoKMD46KU))
3. Session Lab is one of many workshop planning tools that help facilitators design and run effective sessions with a vast library of resources, templates and articles [A Better Way to Design Workshops | SessionLab](https://www.sessionlab.com/)
4. A short guide for professionals working in family hubs that provides practical steps for integrating Reducing Parental Conflict into Family Hubs including workforce development <https://www.eif.org.uk/resource/putting-parental-relationships-at-the-heart-of-family-hubs>

# **Community**

## Understanding your community: Tailoring your approach to meet local needs

Understanding the diverse needs of the community, including the lived experiences of those that are under-represented or don’t currently access services is an effective first step in planning an inclusive service. Once there is an understanding of who makes up the community, a tailored approach to engaging different groups may be necessary and an effective strategy could be to make use of the resources that already exist within the community. Community organisations and leaders, the voluntary sector and individuals are all resources that can provide rich insight beyond population data about different groups they work or live with. This approach of working with the community can be educational, break down stereotypes and enable the sharing of responsibility and ownership with those with the right knowledge, experience or influence. By adopting strategies that maximise engagement and provide a more equitable service, can lead to better outcomes for the whole community.

## Local snapshots

1. Gypsy and Traveller communities are often marginalised with a history of prejudice, stereotypes, and discrimination which has led to a mistrust of authorities. **Leicestershire County Council** have taken steps to be inclusive in their approach by partnering with Leicestershire GATE (Gypsy and Traveller Equalities). Leicestershire GATE staff have been provided with RPC training, resources and toolkits which they have been able to adapt to the needs of the community using their own knowledge and expertise of culture, language and how best to engage and support this community. Leicestershire GATE staff have used RPC resources to raise general awareness of unhealthy relationships and integrated into the one-to-one family support work they provide to parents. Leicestershire is keen to ensure that this traditionally ‘invisible community’ is heard and seen through this partnership arrangement. They are also represented on the Relationships Matter Strategic Planning Group to provide insight and advocate for the needs of this community.
2. Every football club in the English Football League has its own charitable Club Community Organisation. **Bradford** linked up with Bradford City Community Foundation with the intention to deliver Relationships Matter awareness and signposting training to their staff, share materials, such as booklets and posters to display them across the Hub/office, with a view to showing the Dudley video on the big screen ahead of every home game. This has been seen as a positive way to engage fathers in talking about healthy relationships.
3. **Birmingham Children’s Trust** (BCT) have partnered with the Nishkam Centre, a Sikh faith-based organisation in a diverse part of Birmingham. The centre is inclusive, provides a range of services and support for the common good of the whole community and works closely with other community and faith leaders. BCT worked with the Nishkam centre to learn more about the Sikh community and what is important to families. 40 participants from different community and faith organisations were trained in the healthy relationship toolkit used in Birmingham and the training was used to encourage reflections from a faith perspective about the materials. The training provided a wealth of information and was used to develop a bespoke toolkit. The toolkit offers a religious and cultural perspective and aims to address family values and reduce stigma about relationships. The next stage of the work is to work with other faith leaders and community groups to roll out the approach and support.

## Think about

1. **Understanding your local community**

* Who is the community made up of and which sources of data could inform your knowledge e.g., Census data, NHS data, Local Authority data, Super Output Areas, data/info held by other programmes or partners.
* Conducting surveys, setting up a focus group or attending already established community forums to learn more about the community and the specific needs of the community.
* Learning from the community about their history, any barriers they have experienced and differences that exist such as cultural norms, and use of appropriate and respectful terminology e.g. how do particular groups prefer to be known.
* Using Community Participatory Appraisals (see Resources) to co-create services and gather information from varied user groups, identifying gaps in provision to meet local needs and to consider how this can be addressed.
* Workforce development and regular training for staff in cultural competence, diversity and working with groups/families with varied backgrounds and needs.
* Accessible services – are services physically accessible as well as accessible in terms of language and logistics?
* Having the systems and processes in place to monitor and review data to gain a clear picture of who is accessing services, and which groups are underrepresented. This can help to create a plan specific to engaging and providing support to underrepresented families.

1. **Engaging local organisations**

* Identifying community leads/champions to support in a range of different ways e.g., with planning services, supporting engagement with different communities known to them, co facilitating/ facilitating healthy relationship support, supporting workforce development.
* Having publicity and information available in community languages for local groups to distribute.
* Increasing knowledge and building awareness of the work amongst local stakeholders at partnership meetings.
* Presenting healthy parental relationships to the local NCVO (The National Council for Voluntary Organisations) to promote with potential partners.

1. **Meeting local need**

* Taking services and support to venues and places that communities are already engaging with rather than expecting communities to come to you.
* Providing training to community workers to deliver appropriate services to their users.
* Translating materials in community languages.
* Regularly reviewing services and adapting according to community feedback and the changing needs of the community.

## Resources

1. The Early Intervention Foundation developed a series of guides for specific target groups, such as new parents, parents with mental health difficulties, and parents from minority ethnic groups (<https://www.eif.org.uk/resource/series-reducing-parental-conflict-evidence-guides>)
2. The faith and belief forum website includes ideas and projects to support social cohesion and inclusion (<https://faithbeliefforum.org/>)
3. The Diversity Trust supports minority and marginalised people and communities (<https://www.diversitytrust.org.uk/category/podcast/>)
4. This is one of many sites that offer toolkits, guidance and practical ideas for engaging your community in a meaningful way (<https://mycommunity.org.uk/engaging-your-community-in-a-meaningful-way>)
5. An example outline of Community Participatory Appraisal can be found here (<https://www.intrac.org/wpcms/wp-content/uploads/2017/01/Participatory-learning-and-action.pdf>)
6. For information on support for parenting for LGBTQ+ families, see Intercom Trust (<https://www.intercomtrust.org.uk/>)

# **Early Help and Social Care Referrals**

## Identifying support needed at the Front Door of referral

From the Front Door to children on the edge of care, parental conflict can be a part of any universal, targeted, or specialist assessment and intervention. The aim is to ensure that the impact family relationships may be having on a child is considered as a potential factor at all stages of Local Authority involvement, including referral, screening, allocation, and intervention.

To make sure this happens, it’s important to think about how this can be embedded into decision-making at all levels of provision, particularly when differentiating between parental conflict and DA.

The following are some ideas as to how this can be made a natural part of day-to-day practice within Early Help and Children’s Social Care along with all the other key factors deliberated when making decisions about family support.

## Local snapshots

1. **St Helen’s Borough Council** have set up a ‘Families in Harmony’ panel to review and make recommendations on next steps for all referrals for parental conflict intervention. The multi-agency panel meets fortnightly and comprises representatives from the local Drug and Alcohol service, the local Domestic Abuse service, Early Help Partnership Co-ordinators, Programmes team, Police and the RPC Co-ordinator. Where the panel agrees there is parental conflict a recommendation will be made on the most appropriate response. Responses cover the full spectrum from providing access to a digital healthy relationships programme or self-help materials which are accessible to parents via Relation Kit - pages on the website for low level conflict situations, through to referrals to healthy parenting relationship courses such as Triple P Enhanced, Triple P Transitions or the Thriving Families Programme. If the panel feels the situation reflects abuse, they refer in line with the Domestic Abuse pathway.
2. In **Waltham Forest**, to ensure that survivors of domestic abuse are not inappropriately placed on RPC programmes, they work closely with the VAWG and Safe and Together team. The Safe and Together team provide workshops in the Early Help team meetings on the differences between parental conflict and DA. In collaboration with the Safe and Together implementation Lead, they developed a screening tool to ensure referrals are appropriate for RPC. In addition, all members of the parenting team receive full safe and together training so that they can spot referrals which are DA and not RPC. Waltham Forest also has a Parenting Programmes steering group to share information and contribute to the borough's vision for parenting provision. The VAWG team is represented on the group, ensuring that wider partners, not just Early Help and Social Care, are aware of the differences and how to refer and signpost families.

## Think about

1. **Having a clear referral process**

* Considering ‘relationships’ as part of the referral helps any referrer think about the well-being of a family as a whole and helps in decision-making when a referral comes in for screening.
* Referrers being aware of what constitutes parental conflict as opposed to DA. Has there been training on this or information produced with guidance that is clear and consistent? Are referrers asking the right questions?
* Consistency across all the Front Door professionals in what is parental conflict. Is it being considered by the police, health, DA Service, YOS, Early Help, or any other contributors. Would more training help?

1. **Decision making**

* Inclusion of parental conflict in the screening process. When a referral comes into Front Door or MASH, ensure parental relationships is one of the criteria considered when deciding whether the threshold has been met for Children’s Social Care. In the Duty Team, is there a clear differentiation between parental conflict and DA and are they asking the right questions of the referrer?
* What could be the options after screening? If it’s primarily parental conflict, would the family benefit from virtual support or direction to online services? If more help is needed, consider referral to parenting programmes inclusive of RPC. Explore any external agencies offering support for stronger relationships, such as children’s centres, Home Start, or other local voluntary sector organisations.
* Reviewing the impact of parental relationships on children at Step Down meetings. Is it being included as goals to work towards following closure to Children’s Social Care?
* Considering grandparents and other relatives with caring responsibilities who may be able to contribute positively to reducing conflict in the family home.
* Involving social care providers, such as the Children with Disabilities Team and Adult Social Care. Training in RPC can help them associate common factors such as adult mental health or children’s complex needs with a disruption to family harmony and an increased risk of parental conflict. Can they incorporate this into their work?

1. **Assessment and intervention**

* Any additional issues for the family leading to a referral to Early Help. Is family relationships included in their assessment? Are they trained in RPC and can they incorporate relationship work into their intervention?
* Families who meet the threshold for social care assessment and short-term intervention. Are their social workers incorporating healthy parental relationships into their work with the family, shaping their decision-making for future recommendations? Ensure inclusion of health parental relationships in case conferences.
* Whether couples, either together or apart, identified as benefiting from intervention to build stronger relationships are being referred on to Mediation or Family Group Conferencing, where more direct work around family relationships can be provided?
* Providing training to Special Guardians, Kinship and Foster Carers, or potential adoptive parents in preparation for the pressures and challenges of co-parenting.

## Resources

1. See Measurement Pathway for Reducing Parental Conflict for an example of options of assessment tools to use for parents together and apart. (<https://lscpbirmingham.org.uk/learning-zone/learning-resources/reducing-parental-conflict/measurement-pathway-for-reducing-parental-conflict>)
2. Tower Hamlets produced a one-minute guide to define parental conflict and domestic abuse Mediation for parents in conflict (<https://www.towerhamlets.gov.uk/Documents/Children-and-families-services/Early_help/RPC-One-Minute-Guide-ONLINE.pdf>
3. Foundations has information on Family Group Conferencing Family Group Conferencing at pre-proceedings stage (<https://foundations.org.uk/our-work/publications/family-group-conferencing-at-pre-proceedings-stage/>)
4. The charity Kinship Care, offers advice on reducing conflict in relation to contact arrangements for Kinship Carers or Special Guardians and the children’s birth parents (<https://kinship.org.uk/for-professionals/working-with-kinship-carers/key-elements-of-a-special-guardianship-support-service/support-with-contact-arrangements-and-managing-family-relationships/>)

# **Intervention**

## Deciding which approach is best suited to family needs

There is research to evidence that direct support for stronger relationships has a positive impact on both parents and children. The challenge is deciding what kind of intervention to offer. The types of provision can vary widely. This is not necessarily a disadvantage, as one size doesn’t fit all, but deciding what’s best for families requires careful consideration; what to use for one-to-one support, appropriate parenting programmes when running a group, general awareness-raising for the public, working with specific target groups, and online intervention services.

This resource gives some ideas as to the type of provision that may work for you and your families, without giving preference to any single approach. There is also a list of potential providers in a separate section of the Guide. These are programmes that were considered appropriate as being inclusive of varying degrees of parental relationships in the content.

## Local snapshots

1. In **Havering**, Reducing Parental Conflict was prioritised at a strategic level, with direct impact on the quality and value of the service provided for families. The Early Help Partnership Board oversees RPC Governance, feeding directly into Strategy, Operation, and Implementation through staff and community in partnership with Community Safety and domestic abuse services. They identified the Front Door as a gateway into RPC support services. Havering trained frontline workers in MASH in RPC. When Early Help and Social Care referrals have been screened, if parental conflict is the primary concern, brief intervention is offered to explain the impact persistent and intense conflict can have on children, including strategies to reduce this. This has been highly successful, with families supported not progressing to Early Help or CSC, and not being re-referred within a year for additional support, preventing an escalation to more costly services.
2. In **Merton**, the RPC lead is the Early Help Development Manager who oversees a team of Early Help Coordinators. The Early Help Coordinators provide information, advice and guidance to families as well as professionals across the borough at a Universal Plus level. Part of their role is also promoting / raising awareness of the RPC offer and supporting families on a 1:1 basis with accessing and completing OnePlusOne digital resources. Merton increased the team capacity to deliver group workshops within family hubs. Embedding RPC within existing resources supports sustainability.
3. With the DWP Challenge Fund, the **Race Equality Foundation** delivered **Stronger Relationships**; an online intervention over six individual sessions, with weekly facilitated online group discussions looking at parental conflict and its impact on children. This was to support Black, Asian and minority ethnic parents experiencing parental conflict, with one course for parents together and one for parents apart.  They achieved a take-up of 448 parents in just over a year. Examples of feedback from participants were “*The course helped us understand our differences and to respect them*” and “*It was useful to understand the cause of conflicts on a scale that was beyond our knowledge and understanding*”

## Think about

1. **Identifying the right services**

* When deciding where to allocate a family for relationship work, consider any additional factors in the referral. Do they have other needs? Are these complex enough to warrant a referral for one-to-one family support to address additional factors? Use the Supporting Families criteria (or equivalent) to help decide.
* Developing a flowchart to guide thinking on which service offering support for relationships best suits family need.
* Encourage discussions about referrals where parental conflict is evident at allocation meetings to engage other partners and consider broader options.

1. **Targeted support**

* When starting work with families around parental conflict, consider the language used. There may be other more positive descriptions to engage families, such as healthy or stronger relationships, positive co-parenting, or parenting together and parenting apart.
* Offering specific parenting programmes that target stronger relationships where this is the primary need. Consider any other parenting courses your LA provides. Can they include stronger relationships in the programme? Could this be added, either as part of the course or as an extra session at the end?
* Evidence-based parenting programmes have been shown to be effective. Does your LA already provide one? Would they consider training staff to deliver it or commission a course externally?
* Specific courses for different target groups. It could be for parents together or parents apart, parents of children with Special Educational Needs and Disabilities, expectant parents, post-natal families, fathers, Special Guardians and foster carers, families speaking community languages and many others.
* Creative ways to meet the needs of local target groups, including community organisations that can provide direct support. With training, healthy relationships could be included in existing support groups that families can relate to.
* Directing families to online services where you don’t offer any specific parenting programmes locally. There are some free online courses, as well as some requiring subscription. There’s a list of possible providers in Resources, but this is not exhaustive and there may be new developments.
* Asking other local authorities what they currently provide for families. Would it work for your population? Could you share resources?
* The inclusion of children as part of a whole family approach to intervention. Do you have developmentally-appropriate materials to help children express their feelings about their parents/carers relationships and the emotional impact this can have on them?

1. **Universal support**

* The information shared on your website for those who can access universal support. Relevant resources such as short videos, advice leaflets, and links with related organisations can be helpful for any family wanting to know more about how to manage conflict. Posters and leaflets can be powerful in community locations, such as GP surgeries, libraries, police stations, bus stops, Family Hub sites, schools, and any other places frequented by parents and carers.
* Considering Universal Plus; adding direct support and advice to families on site in Family Hubs, children’s centres, and other community locations. Offer a weekly/monthly drop-in session.
* Using external websites for useful information and advice on the causes and impact of parental conflict on families and children. These can be used to direct families for guidance suited to their needs.
* Using your LA Family Information Service (FIS) to share information on stronger parental relationships resources in your area.
* Apps designed to support families in conflict. These can be easily accessed and offer straightforward guidance on addressing and resolving persistent parental disagreements.

## Reducing Parental Conflict: A Continuum of Services for Levels of Need

1. **Child protection** - Social Workers, Family Group Conference, Permanence teams, support for Foster Carers, Kinship Carers, Special Guardians, and adoptive parents, CAFCASS.
2. **Universal** - Posters, videos, info screens, public advertisements, leaflets in GP surgeries, job centres, family hubs, relevant websites, council offices, libraries, school curriculum, police stations, sports clubs.
3. **Universal Plus** - Registry office, midwives antenatal classes, health visitors, GPs, Family Hub drop ins, childminders, nurseries, after-school clubs, youth centres, voluntary sector, SENCos, faith groups, school nurses, online sources of information and advice, apps.
4. **Targeted** - Early Help, children's centres, Family Hubs, voluntary sector services, virtual support, health visitors, CAMHS, mediation services, parenting groups, MASH/Front Door, Education, Welfare, Family Group Conference.
5. **Child in Need** - Children with Disabilities Teams, Social Workers, Early Help, Family Support Workers, CAMHS, Adult Mental Health, Adult Social Care, Drug and Alcohol services.

## Resources

1. When considering a referral and intervention pathway for RPC, look atFoundations Support Pathway Model(<https://foundations.org.uk/wp-content/uploads/2024/03/rpc-support-pathway-model-beta-v2-Feb-2024.pdf>)
2. For ideas on how to engage families with relationship support, look at Foundations practical tips and guiding questions (<https://foundations.org.uk/wp-content/uploads/2024/03/talking-about-parental-relationships-v2-Feb-2024.pdf>)
3. Examples of engaging specific groups (<https://www.eif.org.uk/resource/series-reducing-parental-conflict-evidence-guides>)
4. For general advice on RPC interventions, go to ‘What interventions have been shown to improve child outcomes?’ (<https://reducingparentalconflict.eif.org.uk/interventions/>)

# **Education**

## Bringing Healthy Parental Relationships into Educational Settings

Evidence shows that repeated, intense, and unresolved parental conflict in the home can impact on children’s attendance and behaviour in school as well as their subsequent educational attainment. All schools are now required to have a Relationships Education policy to give young people the information they need to help them develop healthy, nurturing relationships of all kinds. The DfE guidance says that ‘children should understand the positive effects that good relationships have on their mental wellbeing, identify when relationships are not right and understand how such situations can be managed’. This should be promoted by schools in partnership with parents to emphasise what is acceptable and unacceptable behaviour in relationships.  This guide gives ideas on how local authorities can work together with local educational settings to support them in recognising the impact of parental conflict on children’s emotional well-being and educational achievement.  It also suggests ways to promote healthy relationships in school policy, planning, and day-to-day practice.

## Local snapshots

1. In **Bournemouth, Christchurch and Poole**, Navigators are linked to all the primary and secondary schools. The Navigators are all Healthy Relationships trained and disseminate and promote Healthy Relationships information, resources and workforce development opportunities across all the schools. This model ensures that communication can be efficiently and effectively cascaded. Schools receive different packages of support based on the needs of individual schools. The offer includes support/workshops for school-based staff, drop in for families and direct work with children and parents. Over a period of six months, 15 schools received One Plus One training with additional RPC information built in, with another 8 schools signed up to participate.
2. In **Herefordshire**, **Vennture**, an independent charity helping individuals and families, worked on a Challenge Fund project to raise awareness and provide support on healthy relationships in a rural community. They saw schools as key providers, reaching families otherwise geographically isolated from additional support services. They took an individualised approach, initially asking for just an hour of a school's time to talk to staff about parental conflict and helping them decide how they could best promote this to meet the needs of their community. This community-led approach led to over 220 teachers and school staff being trained in reducing parental conflict across the county. They now refer families for individual support from Vennture when needed.

## Think about

1. **Getting school buy-in**

* Contacting schools individually. Each school may have a different governance, sponsorship, and status in terms of confederations, independent, maintained, academy, special needs providers, schools with different faiths etc. Discussions based on their specific needs can be more productive than a blanket approach.
* Communicating through Children’s Social Care meetings with Headteachers. Most local authorities meet on a termly basis with Headteachers to discuss issues such as admissions, funding, and major policy areas. Could Healthy Relationships be included in a session? This can help raise the profile and encourage buy-in at a higher level with schools.
* Speaking with the School Improvement Team in the local authority. They provide schools with a quality assured range of in-school support for school improvement. Could you give them a briefing on RPC? Could RPC be included in their discussions with schools?
* Inclusion of Healthy Relationships and differentiation from Domestic Abuse in training for Designated Safeguarding Leads in schools. Is there a network in place? Can RPC be on the agenda for discussion at DSL meetings?
* Offering in-house training for all school staff to raise awareness and address the impact of parental conflict on children. Could an RPC Champion attend an inset day?
* Speaking to the schools' governing bodies. They act as the critical friend for schools with responsibility for looking at policy and practice. Can they add parental relationships to their portfolio?

1. **Inclusion in the syllabus**

* Discussing the schools written policy for Relationships Education. Does it include Healthy Relationships and is it included in PHSE/ RHSE? This can address acceptable and unacceptable behaviour in relationships with children and young people, as well as being a useful way to share the value of healthy relationships with parents.
* Emphasising the link with parental conflict and children’s emotional well-being. As part of their pastoral role with children, are schools exploring family relationships for children with emotional/behavioural difficulties?
* Linking with Education Welfare Service. Discussions around poor school attendance and punctuality might need to touch on parental conflict. Could this be included in discussions at Education Legal Planning meetings? .
* Including discussion about parental conflict resolution in Team Around the Family meetings in school.  Are they aware of other external support for parental conflict, such as Early Help or Family Group Conferencing?
* Highlighting the association of families with children with SEND and parental conflict. Family disagreements often arise over the appropriate approach to children with additional needs regarding, among others, behaviour management, care provision, educational support, and funding. Are SENCos trained in RPC?

1. **Ongoing support**

* Using the Team Around the School meetings to discuss children exposed to parental conflict, including opportunities for advice and possible referrals.
* Inclusion of discussion of parental conflict resolution in Team Around the Family meetings in school.
* Making the school aware of other external support for parental conflict, such as Early Help, Mediation, or Family Group Conferencing.
* Highlighting the association of families with children with SEND and parental conflict. Family disagreements often arise over the appropriate approach to children with additional needs regarding, among others, behaviour management, care provision, educational support, and funding. Are SENCos trained in RPC?
* Promotion of other external support for parental conflict, such as Early Help, Parenting groups, or Family Group Conferencing.
* Offering to attend a coffee morning to talk to parents about parental conflict.
* Designing an information sheet/leaflet for RPC in schools, including information about external RPC support and how to access this.

## Resources

1. The EIF sector briefing on *Why reducing the impact of parental conflict matters for schools* gives good examples (https://foundations.org.uk/wp-content/uploads/2024/08/reducing-parental-conflict-schools-briefing-v2-Feb-2024.pdf)
2. A section of the DfE’s statutory guidance can be used to highlight the importance of the inclusion of relationships in the National Curriculum. (<https://www.gov.uk/government/publications/relationships-education-relationships-and-sex-education-rse-and-health-education>)
3. Looking after your relationship is specifically designed by a charity for families with children with SEND. (<https://contact.org.uk/help-for-families/information-advice-services/your-child-your-family/looking-after-your-relationship/>). Their relationships guide gives practical information and advice on the impact on relationships for families with children with complex needs. (<https://contact.org.uk/wp-content/uploads/2021/03/relationships_guide.pdf>)
4. The NSPCC gives tips for promoting healthy relationships to children and young people with special educational needs, additional needs and disabilities on promoting healthy relationships in schools. (<https://learning.nspcc.org.uk/safeguarding-child-protection-schools/promoting-healthy-relationships>)

# **Healthy professionals**

## Healthy Parental Relationships in Community Health

Health professionals play a key role in working with parents/carers to support the overall health and wellbeing of children and young people. Research tells us that parental conflict can significantly impact the physical and mental well-being of children. There is a strong body of evidence that damaging inter-parental conflict can put children at more risk of physical health problems, mental health and wellbeing challenges.

As children pass through milestones from conception into adulthood, families are likely to meet a range of frontline health professionals (see resources for a list of some of the different NHS professionals that provide services to families).

All these interactions with families present opportunities for health professionals to ask a few simple questions to have a greater understanding about parental relationships, family dynamics and to offer support where needed.

## Local snapshots

1. In **Worcestershire**, the Reducing Parental Conflict Co-ordinator was successful in spreading good practice with universal health services to reach more families at the early stages of parenting together. They provided RPC training for over 120 staff from the Health Visiting and School Health Nursing workforce; services that engage with a significant volume of parents across the locality. Health now includes Reducing Parental Conflict within the parenting courses offered, meaning that parents will also be supported with any conflict they are experiencing. This is an example of how RPC has been effectively integrated into the day-to-day practice of professionals working with families in the local community.
2. **Blackpool** offers an ‘Early Parenthood Service’ for vulnerable people who are expecting a baby, providing support bespoke to the needs of each parent or couple to ensure their baby can thrive. Formally a Family Nurse Partnership, one of the Nurses with the service joined as the programme was being decommissioned and the Early Parenthood Service was under development. She attended training and immediately saw the value of addressing RPC with parents. As the new service developed, RPC has been weaved in as part of the bespoke offer to enable the prospective parents to reflect on their relationship, communication styles and understand the impact these can make on children. The nurse ‘loves the toolkit materials’ and finds their flexibility really supports her work with vulnerable parents.

## Think about

1. **Make connections**

* Including senior health leaders in governance arrangements and/or steering groups
* Partnering with NHS workforce development or Safeguarding boards to take the lead on advertising, promoting and/or facilitating Healthy Relationships Training.
* Linking the importance of services to support Healthy Relationships to Health Key Performance Indicators (KPI’s) such as Mental Health and SEND and NHS health strategies when trying to engage or present information to Health Leaders
* Who is already part of your network that has links to health that can support you to navigate the health arena and develop your own network. Can you liaise with the health representative at the Front Door/MASH?
* Shadowing health professionals (if appropriate) or finding out more about how frontline teams work with families with a view to developing a plan, designing bespoke training and making suggestions about how Healthy Relationships can be easily incorporated into day-to-day practice.
* Sending Senior Health Leaders briefings, information, newsletters and case studies that evidence the importance and impact of reducing parental relationships.

1. **Upskilling health professionals**

* Engagement approaches for the full range of health teams/professionals. Who do you want to target? What works for health visitors may not be the same for GPs. Do you need a plan that prioritises and works through different teams? Think about what is relevant to their practice.
* Using existing team meetings, staff forums, case discussions as a platform for sharing information about Healthy Relationships
* Offering Healthy Relationships awareness raising training to the workforce that is tailored to health or specific health roles taking into account current practices, such as Social Prescribers in GP Practices.
* Providing training on recognising the signs of destructive conflict and effective communication strategies including practical examples about how to engage families in conversations about relationships using sensitive, non-stigmatising language to use to ask questions.

1. **Working together**

* Supporting health colleagues with integrating relationship questions into routine health visits and assessment forms/recording
* Developing clear referral pathways and clear thresholds to support staff in making decisions about how to support families experiencing relationship difficulties and where the thresholds lie for appropriate action where there are DA/safeguarding concerns.
* Identifying Health champions or existing NHS Health and Wellbeing Champions to train in Healthy Relationships and to support with upskilling others and disseminating information.
* Identifying and making use of communication channels for NHS health staff e.g. Staff Forums, NHS websites, newsletters
* Encouraging NHS health staff working within multi agency teams e.g. Family Hubs, Children’s Centre’s, Schools, Children’s Services, GP Surgeries, Health Clinics to circulate information with both their host and home agencies.

## Resources

* Through NHS Service Finder, health and social care professionals and the public can access a variety of service information, including comprehensive contact details. (<https://digital.nhs.uk/services/nhs-service-finder>)
* The EIF Sector Briefing**:** Why reducing parental conflict matters for the NHS can be useful when talking with local NHS leads by integrating this within the wider system of family support for health and wellbeing. (<https://www.eif.org.uk/report/why-reducing-parental-conflict-matters-for-the-nhs>)
* RPC resources designed particularly for Public Health England by the Race Equality Foundation for use by public health nurses, including, midwives, health visitors, school nurses, general practice nurses and other professionals working with families. (<https://raceequalityfoundation.org.uk/parentalconflict/>)
* The guide by The Mental Health Foundation charity, emphasises the importance of nurturing good relationships for mental wellbeing. (<https://www.mentalhealth.org.uk/sites/default/files/2022-08/MHF-guide-to-investing-in-your-relationships.pdf>)

# **Judiciary**

## Reducing parental conflict through the justice system

There is a correlation between people going through the judiciary system and experiencing conflict within relationships.  Family relationships can be exacerbated by subsequent disputes over contact arrangements and child maintenance, both of which result in legal proceedings. For a parent under police investigation, in custody, or on probation, relationships with their partner can also be affected, with an inevitable impact on children in the family. There is a much higher risk of relationship breakdown and divorce. Strained relationships can impact on the maintenance of contact with the incarcerated parent and their child. This impacts on family life post-release/during re-settlement. The quality of the relationship between the imprisoned parent and those caring for their children is critical to the parents’ ability to maintain contact with their children. This guidance offers some ideas as to how your work around parental conflict can support families going through judiciary process, as well as ways to avoid this happening in the first place.

## Local snapshots

1. **HMP Nottingham and Nottingham City Council** worked together to pilot healthy relationship education for prisoners who are Dads. The Family Engagement Manager, Family Support Workers and Student Placement within PACT at HMP Nottingham have now received training on parental conflict and have been provided with resources to enable them to have conversations with Prisoners and families about relationships.  Nottingham City Council Staff will be going into the Prison to deliver a variety of parenting courses including Triple P and parental conflict. **Nottinghamshire Police Force** is raising awareness of the support and help available for parents who are arguing regularly and intensely, as part of the national campaign to help families resolve their arguments and prevent any potential harm to children. This is included on their [website](https://www.nottinghamshire.police.uk/news/nottinghamshire/news/news/2024/june/reducing-parental-conflict/) for the general public.
2. Police may often be the first contact for a family experiencing conflict if a loud argument has been reported. **Walsall** produced a short video to emphasise the role of police in recognising, exploring, and providing advice on additional support for parental conflict. This is a tool used to train police officers to demonstrate the important part they play in addressing conflict and the impact it can have on children, potentially leading to isolation, exploitation, and self-harm.
3. **Surrey** built a strong working relationship with Police in the Children's Single Point of Access [Front Door/MASH]. Their training development officer provided RPC training within the force for Custody Sergeants and new staff. The half-day training was held online. It included identifying destructive parental conflict,  teaching vigilance in recognising the subtle signs of DA, exploring grey areas between DA and Parental Conflict, and strengthening their existing knowledge and promoting curiosity when speaking with parents and children. The training reached almost 500 Custody Sergeants and 1,400 other staff.

## Think about

1. **Police**

* The first port of call for many families into the judiciary system is via the police. Have you delivered RPC training to the local force? Are they aware of the services you provide? Do they know how to make a referral to your service?
* Giving the police clear information they can share with a family about your service.
* Capitalising on the police’s role in the MASH or the Front Door when referrals come in for children’s social care. Is there a discussion over the referrals relating to conflict? Are the police differentiating parental conflict from domestic abuse and reporting on this? Consider how this is classified on receipt of Merlin reports.
* Being ready to persuade officers to add context on relationships in conflict into their reports which can be identified at MASH meetings so the most appropriate help can be offered.
* Whether crime or anti-social behaviour referrals are being considered for allocation for relationship support?
* The role of the Youth Offending Services. Disruptive home environments can lead to online exploitation, suicidal ideology and self-harm, radicalisation, and homelessness, particularly for teenagers. Can the police pick up on these potential risk indicators? Has the Youth Offending Team been trained in RPC so that their work with young people can include the value of stronger relationships.

1. **Court**

* Where to direct a referral to prevent a family escalating into legal proceedings. Do you have a mediation service for couple work? Do you offer Family Group Conferencing for families not open to social care? Both can address the impact of parental conflict on children.
* Keeping children’s interests at the heart of family courts. How are children involved in the judiciary process? Is their voice being heard when decisions are being made about their contact with both parents? Is this contributing to decision-making?
* Raising the profile of your services within the criminal justice system. When there is a dispute over contact arrangements, has there been any support around resolving conflict prior to court? Has this been a recommendation made in court hearings? Is working on healthy relationships being included in Parenting Orders?

1. **Prison**

* How parents can be supported to maintain contact whilst serving a prison sentence. Relationships are more likely to continue if contact is kept during imprisonment. Is there any preparation for family life in place prior to release? There are a range of services offering family support for prisoners you can involve (see Resources). Could you offer them training in RPC?
* The HMPPS ‘Families Ties’ performance measure, which is designed to support and encourage proactive and dynamic approaches to working with prisoners’ families. Contact the Head of Reducing Reoffending (each prison has one) and offer ‘free’ support.
* Post custody support. Probation will be working with ex-offenders. Are they aware of the impact of parental conflict on the people they work with? Can they direct people to your service?

## Resources

1. Depaul is a charity that works with young people (11-25 years old) who are at risk of or experiencing homelessness due to family problems. ([https://www.depaul.org.uk/projects/mediation/?\_gl=1\*jxui6h\*\_up\*MQ..&gclid=EAIaIQobChMIoYmjqv7BhgMVM5FQBh29qw5nEAAYASAAEgIUnfD\_BwE&gclsrc=aw.ds](https://www.depaul.org.uk/projects/mediation/?_gl=1*jxui6h*_up*MQ..&gclid=EAIaIQobChMIoYmjqv7BhgMVM5FQBh29qw5nEAAYASAAEgIUnfD_BwE&gclsrc=aw.ds))
2. For an example of police guidance on gaining the voice of the child (<https://library.college.police.uk/docs/VKPP-Voice-of-the-child-practice-briefing-2022.pdf>)
3. PACT provides support to prisoners, people with convictions, and their families. (<https://www.prisonadvice.org.uk/>)
4. Key4Life is a social venture and charity creating innovative solutions to help reduce youth offending and gang warfare. (<https://key4life.org.uk/>)
5. Independent legal charity Prisoner's Advice Service offers information to prisoners, to those within the prison sector, and responds to Government Consultations (<https://www.prisonersadvice.org.uk/about/how-we-do-it/>)
6. Prisoner's Families Helpline are contracted by HMPPS to offer support for families who have a loved one in contact with the criminal justice system. (<https://www.prisonersfamilies.org/>)

# **Fathers**

## Healthy Parental Relationships: Keeping Fathers in mind

Fathers are often faced with unique challenges and expectations when attempting to access essential guidance and support from family services.

This section serves as a starting point to consider the multifaceted aspects of fatherhood and the pivotal role fathers play in reducing parental conflict, contributing to healthy relationships and supporting healthy child development and positive outcomes for their children.

The following page will provide some key considerations and actionable steps for setting up a fathers friendly, inclusive service that considers some of the common hurdles fathers may encounter and empowers them to contribute towards healthy relationships with their partners and children whether together or separated.

## Local snapshots

1. Several local authorities saw football as a medium through which to engage fathers in conversations about stronger relationships. **Newham** in East London used part of their RPC grant to set up a fathers’ group which included a trip to West Ham Utd at the London Stadium. *The Family Well-being Community Project* created an opportunity for Dads to break barriers, redefine fatherhood, and build strong, connected families through sport. This brought into the conversation issues around co-parenting and navigating relationship challenges with resilience.
2. **Lewisham** chose to invest part of their Grant into engaging fathers and preparing them for the responsibilities of parenthood. They teamed up with Future Men, a specialist charity that supports boys and men along the path to becoming dynamic future men, whilst addressing the stereotypes around masculinity and engaging in the wider conversation of what it means to be a man. Future Dads is a course to prepare expectant fathers for the birth of a new baby. Research shows that fathers’ early engagement is linked to positive child health outcomes, such as improved weight gain in preterm infants, improved breastfeeding rates and increased language. The programme covers a range of topics, including:

* Practical skills: How to hold, feed, bathe, change and bond with your baby
* Being a dad: Why dads are important and what kind of dad you want to be
* Relationships: How having a baby can have an impact on relationships with your partner, friends and family
* Self-care: How to look after your physical and mental health and wellbeing

Over 100 fathers have now benefited from attending this course, with healthy relationships an integral part of the discussions.

## Think about

1. **Inclusion and engagement**

* Consulting with a range of fathers at the early stages of planning to identify needs and test out ideas. Think about the places fathers already access and whether you can access these places to consult and develop partnerships.
* Tailoring communication to be father friendly and free of jargon, using platforms and mediums that resonate and organisations that already engage well with fathers e.g. Social media platforms, sports clubs, local football clubs, barbers, community centres etc.
* Providing training to practitioners about the important role fathers play and practical strategies for inclusion and engaging fathers e.g. creating a welcoming environment, outreach, introductory calls to fathers, welcome packs etc
* Scheduling services/support at times that are convenient for fathers to access, have you considered piloting/testing out services before rolling out wider and using feedback/attendance data to review and shape the service offer.
* Selection of any venues or environments to meet e.g. Is it inclusive and neutral (not a barrier for men), are there facilities men can use, and does the venue and environment consider the diverse backgrounds and experiences of fathers. Consider offering services in multiple locations and virtual platforms.
* Acknowledging and celebrating different types of fathers including biological, stepfathers etc and ensuring programme material and communication reflects this diversity. Highlight stories of positive fatherhood through various media such as videos, podcasts, speakers etc
* Highlighting to fathers’ helpful data and research that recognises the positive contribution that fathers make to family life and achieving positive outcomes for children.
* What your offer of support/services will be for fathers that address the specific needs and concerns of fathers and considers diverse needs e.g. fathers only RPC course, One to One RPC support, Online Courses, Signposting to services, counselling etc

1. **Evaluation**

* Having a system for fathers to provide feedback on services and to make suggestions for improvement.
* Having in place ways to monitor and evaluate the impact and outcomes of services on fathers and children.
* Gathering data from referrals into the service on the proportion of fathers agreeing to support and those taking it up

1. **Ongoing support**

* Putting together a directory or resource list of other organisations/further reading that provide support for fathers seeking further information or ongoing support.
* Establishing an ongoing peer support network for fathers, led by fathers that have accessed services and support.
* Developing partnerships with local voluntary sector organisations and faith groups working with fathers

## Resources

1. A comprehensive resource offering tools, research, and policy workstreams focussed on fatherhood by fathers charity. (<https://www.fatherhoodinstitute>[.org](https://www.fatherhoodinstitute.org/))
2. Anna Freud, mental health charity for children and families have published: – Supporting Dads. (https://www.annafreud.org/resources/under-fives-wellbeing/working-with-families-facing-challenges/supporting-dads/)
3. Community organisation, Dope Black Dads aims to inspire and educate black fathers for better outcomes for black families. (<https://dopeblack.org/dopeblackdads/>)
4. Norfolk safeguarding children partnership produced a good practice guide for engaging and working with fathers. (<https://norfolklscp.org.uk/keeping-fathers-in-sight-good-practice-guides>)
5. The Future Men charity offer fathers' groups that include information on healthy relationships. (<http://www.futuremen.org/future-dads>)
6. A useful advice pack for expectant fathers is provided by the Healthy London Partnership. (<https://selmind.org.uk/wp-content/uploads/2022/10/Partners-Packs-PDF-1.pdf>)

# **Voice of a child**

## Listening to the voice of children and young people in decision-making

The primary aim of reducing parental conflict is to better the lives of children and young people. The question is, how can their experience, needs, and feelings be included in the planning and delivery of any work to reduce parental conflict and strengthen family relationships? If we want any relationship services to be effective, looking at the positive impact this may have on children is a key indicator of success. The UN Convention on the Rights of the Child states that children and young people have a right to say what they think should happen, when adults are making decisions that affect them, and to have their opinions considered. One way we can measure success is by hearing the voice of the children at various stages of our involvement. Did it make things better for them and, if not, what can we do to get them involved in improving our service? This guidance gives ideas on how to gain the voice of the child and use this to contribute to effective work around strengthening healthy relationships.

## Local snapshots

1. **Barnsley** worked with a group of 11-18 year-olds who provide support and influence to organisations/policy makers from a young person’s point of view. The Barnsley Young Commissioners Group reflected on the experience of Barnsley’s young people in relation to parental conflict. Over 3 sessions, they shared their own experiences and helped to develop a booklet of activity and support aimed at young people who may be also be exposed to parental conflict at home. This included the style, content, and strategies to cope, to be made available on the ‘Teen Hub’ section of Barnsley’s Virtual Family Hub. A summary of the young people's experiences is also included in the muti-agency RPC training of Barnsley professionals. The booklet of activities is designed for independent use by young people. This goes alongside the young people's tools in Barnsley’s RPC toolkit designed for practitioners to use with young people.
2. London Borough of **Bromley** created a “Grab Bag” – a kit made available for staff working directly with families, including Health Visitors and Family Support Workers, giving children the opportunity to talk about their experience of parental conflict. Each of the “grab bags” is packed with fully reusable and very practical resources to prompt discussions with children around parental conflict. This includes:

* A set of Relationship Thought Prompt cards, used for work with teenagers to encourage them to express their emotions. ​
* A set of creative relationship prompt picture cards for both children and their parents used for assessments, intervention and strengthening relationships. ​
* Children’s books, such as “The huge bag of worries” by Virginia Ironside and Frank Rodgers to enable discussions on feelings with children.​

The “Bromley RPC Child Viewpoint quiz” enables children to be listened to by parents and professionals.  Parents reflection on the results of the Child Viewpoint quiz is important in the process of identifying the steps for parents to take to make changes to their relationship (<https://bromleyparentinghub.info/quiz1>​)

## Think about

1. **Child-centred assessments**

* Encouraging the voice of the child to be included at the first opportunity. How do they see the current situation in the family and how does it make them feel? Is there a section for the voice of the child included in any referral forms or as part of the referral process to identify the issues affecting them?
* Making sure that the child contributes to any assessment. Is the child’s view of the family taken into account to reflect their experience? Does it ask the child what they would like to see their parents do differently?
* Using the right tools appropriate to the child’s level of development. Are there ways to gain the voice of the child through play, art, storytelling, writing, non-directive conversation, or, for pre-verbal children, observation? Are you using available resources specifically designed to help children articulate their feelings around relationships?
* Gaining third party accounts of the voice of the child. Many professionals form positive relationships with children, building a sense of trust. Can they give you valuable information on the feelings a child may have expressed to them more openly? Nursery workers, Lunchtime Assistants, Childminders, Health Visitors, Teaching Assistants, other family members, and anyone else with an important role to play in a child’s life.
* How you agree goals to work towards with families. Are you including what the child would like to see being different? Is this recorded so you can refer to it when the work with family is progressing?
* Child-to-child support. Can you provide a safe peer-environment to allow children the opportunity to express their feelings with other children with similar experiences? This could be through play-based interventions or, for older children, groups designed to allow for open discussion of relationships in a welcoming environment.

1. **Measuring impact**

* Ways to demonstrate the impact of parental conflict on children in your interventions. There is nothing more powerful than observing the effect of parental conflict on children’s well-being through their emotional and verbal responses to their experiences. Facts from research on the impact of children can help, but using videos showing the voice of the child can be far more effective than an adult description. Check out the links given in Resources for short films you can incorporate into your work to show children talking about parental conflict and some showing the anxieties this can create.
* Whether when interventions finish, are children being asked if they’ve noticed any changes since their parents started attended the group or working with the professional?
* Allowing children and young people to help improve your service. Are you asking for feedback from children on what they thought of your help? Is there a Young People’s forum? Can you speak with Young Advisors in the Community Safety Team? Are you linked with other voluntary organisations working with young people who can gain their views independently?
* Finding RPC Champions. Consider nominating young people to talk publicly about the changes they’ve seen in their parents following your support and the benefits this has on their lives.

1. **Taking a holistic approach**

* Trauma-informed practice. Are you considering other life-time experiences a child may have that is impacting on their emotional well-being? Is this being exacerbated by parental conflict. Could aspects of the family history be impacting on parental relationships? Could you consider a referral on for more additional support to address these factors?
* Considering the level of need. Would the family benefit from a whole family approach through one-to-one work or would group work be more effective for the child. Could the child be included in any Family Group Conferencing?

## Resources

1. For assessments: The Children’s Perception of Interparental Conflict Scale (CPIC) or The Child Outcome Rating Scale (CORS).
2. Ways to gain the voice of the child toolkit. (<https://www.buckssafeguarding.org.uk/childrenpartnership/wp-content/uploads/sites/2/2020/10/FINAL-VOICE-OF-CHILD-BOOKLET.pdf>)
3. Dudley’s videos depicting children’s exposure to parental conflict which allow addition of local details. (<https://dwphdd.glasscubes.com/share/s/vtvcsve9hni7cfm9hvjqlk2q50?0>)
4. Cartoon of children talking about parental conflict. (<https://www.youtube.com/watch?v=xXCJ9qsxVtI>)
5. Children talking about their experience of parental conflict. (<https://dwphdd.glasscubes.com/share/s/8a5h58568re5lr5e1pbhilhtic>) and (<https://dwphdd.glasscubes.com/share/s/9ilfrl68cqhoberq8ki4kseoi1?4>)

# **Monitoring performance**

## Measuring Progress

A well-defined approach to evidencing impact on healthy parental relationships is crucial in supporting future provision. This means showing how the service can meet local need effectively and efficiently, while being cost effective with a significant social and economic return on investment.

This is a practical guide to help think about what evidence can be gathered at low cost to measure levels of output and reach where limited time is available for data collection and analysis. Local Authorities already collect data for a variety of reasons, the question is how to tap into this to evidence output for any work to promote healthy relationships.

This guide is not exhaustive, so links have been made with other useful information sources on outcome measures for further guidance.

## Local snapshots

1. **Havering** is a London Borough that uses existing data sources to analyse output regarding families presenting with parental conflict. Utilising the information recorded on their system, Mosaic, they gain reports on the number of referrals coming into the service where parental conflict is identified as one of the Supporting Families criteria to measure progress. They have used this data to record output, as in the number of referrals coming in, as well as the number having improved their parental relationships at the point of closure. In addition to this, they also use the data to report monthly on how many families having received support to reduce parental conflict have been referred back to the service within the next six months. The results showed that more than two thirds of families require no additional support. This is an example of using the local authority data in the context of the Early Help System Guide, without a need to create another data source solely for reporting on parental conflict output.
2. **Tower Hamlets** used the Theory of Change model to plan their use of the grant to fit in with their local provision. This helped them identify what they wanted to change and how they would measure its success. Based on a summary of researched evidence, they used this in the design and delivery of reducing parental conflict through Mediation. They have produced quantitative data to monitor performance. This included comparing the number and proportion of reach across a range of stakeholders, the comparative referral sources, the age range of the children of the parents, and the output in terms of numbers successfully completing the mediation, those in process, and those closed with no plan. This can be employed to measure efficiency and productivity based on the resources used.

## Think about

1. **Working with existing data and processes**

* Using what data is already there. If you use a case management system like Mosaic or Liquidlogic, there’s information sitting there waiting to be analysed. If one of the reasons for referral is identified on the system as being the parental relationship, there’s a baseline from which to measure against when the case is closed. This can be set up as part of your Business Reports.
* Comparing your user data with local demographic data to demonstrate an accurate representation of your outreach to meet local need.
* Using national data to make comparisons with local data, are you doing better or worse than the national average?
* Putting in place new systems or updating existing systems to incorporate measures for collecting data and performance indicators e.g. data on referrals and data that measures impact
* Using the Supporting Families or other outcome indicators specifically relating to parental relationships as a pre- and post-intervention measure. This has added value as it carries a cost-benefit analysis. You can also link parental relationships with other criteria, such as financial hardship, adult mental health, and disability, to identify and report on potential contributors to parental conflict.
* The Data collected through Family Hubs. The minimum expectation is that staff are aware of the evidence on the impact of parental conflict, can identify it, can distinguish it from domestic abuse, and provide universal level support and initial early support, providing or connecting to moderate support. What data is held on this?
* Measuring re-referral rates. How many families who received relationship support have been re-referred after closure in the next six months/year? If they have, was it for the same reason?
* Including healthy relationships in case auditing to give an indication if it is being considered in screening, assessment, and intervention.

1. **Distance travelled and reached**

* Where you’re starting from. Having a baseline measure is always helpful to use as a comparator with where you end up. For example, a year ago, no-one from schools was trained in RPC, but a year later, 50 Designated Safeguarding Leads were trained; At the beginning of training, 70% of Health Visitors said they were less than confident in managing parental conflict, but afterwards, 80% said they were quite or very confident. ​
* Using output measures from parenting programmes inclusive of healthy relationships. How many started, how many finished, what was the retention rate, who ran them, what venues were used, what was the breakdown of the attendees (gender, ethnicity, language etc.)? ​
* Take-up rates of any online publicity or guidance to show levels of reach. ​

1. **Return on Investment**

* Demonstrating cost effectiveness. If you ran a parenting group, calculate how much it cost per parent/child. If it met the Supporting Families criteria, how much was awarded as a result?​
* Efficiency. For the amount invested, how many people took up the service, how many finished, what did it end up costing per person/child, and did they get referred back? ​
* Completed a Cost-benefit Analysis, including the services that you prevented being used and how much you saved on this? If it reduced re-referrals, what did this save the LA?​

## 

## Resources

1. RPC Measures Selector gives a choice of tools to use for measuring service performance. (<https://www.eif.org.uk/resource/rpc-measures-selector>)
2. Demographic information that considers the population groups which may be of greater risk of experiencing parental conflict risk factors and parental conflict is included in EIF’s needs assessment guidance. (<https://www.eif.org.uk/resource/conducting-a-needs-assessment-on-parental-conflict>)
3. The useful sources of local demographic data in local statistics (<https://www.ons.gov.uk/help/localstatistics>) provided by the Office for National Statistics and the Childhood Local Data on Risks and Needs provided by the Children’s Commissioner. (<https://www.childrenscommissioner.gov.uk/chldrn/>)
4. For specific guidance for Cost Benefit Analysis for Early Help. (<https://www.eif.org.uk/resource/making-an-early-intervention-business-case-checklist-and-recommendations-for-cost-benefit-analysis>)

# **Evidencing Outcomes**

## Taking an Outcomes Based Accountability approach to demonstrate impact

Using output data can be valuable for efficiency, but it is the outcomes, the difference it made to the professionals, families, and children, that carries the most value.

There are many tools that can be used to measure positive change, working backwards from a set of desired outcomes. The use of indicators and performance measurement can capture this. The output may tell us ‘What did we do?’, but it is the outcomes that tell us 'How well did we do it? ' and 'What difference did it make?’.

An evidenced Social Return on Investment can be a strong determiner to justify further investment. This gives ideas of how to record and report on quantitative and qualitative data to demonstrate the effectiveness of reducing parental conflict in your area.

## Local snapshots

1. **Devon County Council** initiated a project to incorporate the voice of the child into their RPC programme. Devon introduced child assessment measures into their routine practice with families where parents are taking part in parenting conflict programmes. They gained parental consent to involve their children in programme evaluation. Devon also hosted practitioner workshops to build confidence amongst staff in administering questionnaires with children and young people designed to capture their views of parental conflict. Several steps were taken to embed measures of the child's voice. To galvanise buy-in from service leads and practitioners, Devon Council arranged a series of meetings to discuss the benefits of child involvement in programme evaluation as well as embedding child-focused screening measures within existing services.  They connected with their data teams to provide expertise in data capture and hosted workshops for practitioners to gain insight and develop confidence in administering questionnaires aimed to capture the views of the child. It was important to select the right measures and ensure all child-facing documents were accessible for practitioners to administer and children and young people to complete. The process has helped to develop a strategy to empower parents and practitioners to listen to the lived experience of parental conflict for the child.
2. A parent attending a Family Transitions workshop in **Sheffield** was asked "Has attending the parent programme affected family relationships in any way?". The reply was *"It has helped because it helped me organise my thoughts and look at other avenues that I had not originally looked at and how to discuss how to effectively co-parent with my ex-partner. I’ve stopped mentioning in front of my children anything bad relating to their mum and focus on the good times with their mum and it has made it easier for the children to talk about the people in their life and the effect they have on them. Which has made our conversations more open and more relaxed, which has benefited how my children feel. I have also spoken to my family and explained about not saying anything negative about my co-parent in front of my children due to the negative impact this was having on them, and I have learnt about this through the course."*

## Think about

1. **Measuring the impact of workforce development activities**

* Relating back to your Theory of Change. What key intended outcomes have you achieved? What you are doing and how you are going to achieve them? This can be measured at different levels such as incorporation into Early Help services or Family Hubs, or one specific service or intervention.​
* Working with your Workforce Development Team (or equivalent). Are they collecting pre- and post-learning information for online RPC courses or any other internal RPC training in the local authority? ​
* Follow-ups – other professionals may have enjoyed the training and found it useful, but did they use it? Follow it up 6 months to a year later, either using a survey, a focus group or attending a meeting of the profession that’s been trained to find out how they’ve used it so you can report on your findings. ​
* Has it led to trainees becoming RPC champions? Are external organisations you've trained now delivering their own training?​

1. **Capturing outcomes for families**

* For families, did it make a difference to their lives? Interviews 6 months later give evidence as to what, if any, progress has been made and sustained. You can interview family members individually to hear their views or bring families together to share their thoughts in a focus group. Would they recommend it to other families? Would they be a Healthy Relationships Champion? ​
* For parenting courses, what difference did it make demonstrated by pre- and post-evaluations built into the programme? ​
* Case studies. These can give a real-life narrative, telling a story about where you started, what you did, and what difference you made. ​
* For other organisations you've trained in RPC, can they demonstrate the difference it's made for the families they work with? They may be willing to share feedback they've gained with examples of the impact it's had for their families.

1. **Reflective practice and dissemination**

* Regularly revisiting your strategy or Planning Tool. Think of the strategic cycle – find out what’s needed, plan, deliver, evaluate, and bring it back to what’s needed depending on the outcomes. Monitoring progress helps keep track of what’s working and what needs changing.  ​
* Ensuring you’re talking to the right people. Who’s included in your evaluation and are you asking the right questions? Are they a representative sample of the workforce or local population? Are you meeting local need? What else would those using or delivering the service like to add or change? Would people say something different to an independent evaluator?  ​
* Demonstrating failure. Examples of things that haven’t worked can be just as useful for further improvement and development. ​
* Proving value for money. Demonstrate how funds have been used to evidence a Social Return on Investment, including any matched funding as well as any additional staffing/resources used.  ​
* Have there been any incidental benefits not necessarily related to your initial targets.​
* Present data in different ways with different people. Consider the audience when presenting your findings and what you want it to achieve. Ensure that it shows how your objectives were met. ​

## Resources

1. Lots of useful research and evidence on Foundations under Parental Conflict. (<https://www.eif.org.uk/resources?issues%5B%5D=parental_conflict&apply=>)
2. General guidance on evaluation of early help services can be found on Foundations and can be tailored to include healthy relationships. (<https://www.eif.org.uk/resource/evaluating-early-help-a-guide-to-evaluation-of-complex-local-early-help-systems>)
3. Using validated tools to measure parental conflict and its impact on children gives useful guidance and options of tools to use for outcome measures. (<https://www.eif.org.uk/resource/using-validated-tools-to-measure-parental-conflict-and-its-impact-on-children>)
4. 10 steps for evaluation success (<https://www.eif.org.uk/resource/10-steps-for-evaluation-success>) with a video on developing a good theory of change (<https://www.youtube.com/watch?v=zZEvwA4_ifc>)
5. An example of using Theory of Change with RPC is Walsall. (<https://www.eif.org.uk/resource/walsall-developing-a-theory-of-change-for-local-reducing-parental-conflict-support>)

# **Interventions**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Providers** | **Intervention** | **Description** | **Target audience** | **Type of delivery** | **Website** |
| **4Rs2Ss** | 4Rs2Ss | 4Rs2Ss is targeted at families who have a child between 7 and 11 years old who are diagnosed with oppositional defiant disorder or conduct disorder. All children over six years of age in the family are invited to attend the programme. | Children (age 7-11) and families | In person | <https://mcsilver.nyu.edu/4rs-2ss/> |
| **Action for Children** | Early Help | Advice on family relationships affected by arguments, separation, divorce, co-parenting, child contact arrangements. | Separated and separating parents | Online | <https://parents.actionforchildren.org.uk/home-family-life/family-relationships/> |
| **Altogether Human** | Altogether Human | Work on reducing family conflict informed by the Non-Violent Resistance (NVR) model, which is based in non-violent principles including peaceful protest. | Couples and Separated | In person | <https://parents.actionforchildren.org.uk/home-family-life/family-relationships/> |
| **Amity** | Amity | Amity produces toolkits and structured sessions for frontline practitioners working with families. They provide strategies and tools that are key to supporting families achieve good outcomes. | Professionals  Couples and Separated | Virtual and In person | <https://www.weareamity.co.uk/> |
| **Anna Freud** | Family Ties | Three-day training delivered using the framework of ‘Family Ties Online Help’. Therapeutic assessment and treatment of high conflict separated parents and their children. Each parent receives 10 online sessions, delivered as a combination of 1:1 sessions and co-parent sessions. They are provided with short videos introducing key concepts to watch in-between sessions which they then apply to their own family situation. They also work on other tasks, such as a parenting agreement. | Professionals  Separated | Virtual | <https://www.annafreud.org/training/family-ties-therapeutic-assessment-and-treatment/> |
| **Approachable Parenting** | Approachable Parenting | How to develop a healthy relationship with your partner by establishing your family values. Techniques to bond better during pregnancy and with baby to promote brain development. Differentiate between baby blues and post – natal depression.  Dealing with changes in the family and methods to increase emotional health and wellbeing. | Parents (incorporates Islamic principles  to cater to the needs of Muslim parents and their families) | In person | <https://approachableparenting.org/nservices/> |
| **Cafcass** | Planning Together for Children (previously Separated Parents information Programme) | Combines e-learning, group work and online support for parents involved in private law family court proceedings. Encourages parents to consider how they can communicate and work together to agree parenting arrangements without the need for more court hearings and to understand how disagreements and arguments can worry their children and impact on their wellbeing and development. | Separated | In person and Virtual | <https://www.cafcass.gov.uk/parent-carer-or-family-member/my-family-involved-private-law-proceedings/help-planning-together-children> |
| **Caring Dads** | Caring Dads | Caring Dads and Dedicated Dads promote the safety and well-being of children by working with fathers who are alleged to have abused or neglected their children or exposed them to abuse of their mothers. | Dads must have regular supervised/ unsupervised contact with at least one of their (0-16 year-old) children. | In person | <https://caringdads.org/> |
| **CAOS conflict management** | CAOS conflict management | * Mediation - for difficulties in the workplace, family, community, and for complaints and other disagreements * Conflict Coaching - 1-to-1 support for individuals involved in unresolved conflict in any situation or context * Group Facilitation - for creative problem solving, teambuilding, group disputes - bespoke service, please contact us to request this.   Training in Mediation Skills, Conflict Coaching, Managing Conflict in Teams and other Groups - for organisations and individuals. | Professionals  Couples and Separating/Separated | In person | <https://www.caos-conflict-management.co.uk/parental-conflict.html> |
| **Centre for Parent and Child Support** | Empowering Parents, Empowering Communities (EPEC) | EPEC courses offer a blend of small and large group discussion, role play, demonstrations, information sharing and reflection.  Baby and Us is thinking about relationships within the family and how these affect you and your baby  Being a Parent Together is for co-parents and carers who want to become a more effective parenting team, are at risk of parental conflict and are living together and/or separately. | Professionals  Couples and Separated | Virtual and In person | <https://www.cpcs.org.uk/epec/epec-in-practice/> |
| **Changing Futures NE** | Parenting When Separated  MBT-Parenting Under Pressure  Family Check Up | Parenting When Separated supports separated parents to re-focus on the needs of children, helping them to manage the stress of separation and to improve communication between co-parents.  MBT-Parenting Under Pressure is for parents with children of all ages to help focus on their feelings and look at how the challenges in their relationship impact on the other parent and the wellbeing of the child.  Family Check Up is a programme for parents of children aged 2-14 years to support parents to communicate more effectively and develop a positive relationship with their child/children. | Couples and Separated | In person | <https://www.changingfuturesne.co.uk/support-for-families/relationship-support/> |
| **Circle of security** | Circle of security | Circle of Security is a parenting programme using the attachment theory to increase caregivers’ self-reflection about the fearful, angry and disengaging emotional triggers that impact on children’s emotional well-being. Sometimes the programme is delivered with a focus on caregivers with particular risks such as substance abuse or perinatal depression | Caregivers who may have widely varying levels of risk, including parents, foster carers and childcare providers. | In person in settings such as children's centres, CAMHS units, early help teams, fostering and adoption units, perinatal mental health teams, and schools. | <https://www.circleofsecurityinternational.com/> |
| **Collective Space** | Collective Space | Work with professionals and families in both assessment and intervention. | Social Care | Range of training and intervention with families | <https://www.collectivespace.org.uk/> |
| **eNew Beginnings** | New Beginnings Programme for Divorced and Separating Families (NBP) | A programme designed to promote effective parenting following family  separation or divorce, and to specifically helps parents to support their children to adjust. The programme is delivered in ten group sessions of up to eight parents each, by two practitioners. | Separated or  divorced  parents with  children (aged  3- 18 years) | Online | <https://divorceandparenting.com/> |
| **Family Foundations UK Fatherhood Institute** | Family Foundations | A programme, delivered to individual families from pregnancy up until the first year of the baby’s life. The programme has an online adaptation of the group-based face-to-face programme, Family Foundations (FF). | Couples expecting their first child. | Delivered in a range of community venues and online. | <https://32980588.isolation.zscaler.com/profile/f6e8a363-4dec-424a-9d6d-a48a283caeaf/zia-session/?controls_id=5583ce07-f579-49a1-9a6a-df76dc0e55aa&region=lon&tenant=7bca888a946e&user=a79da8184ff0375ff46a48a0a9ad189f29e64cbfd8db5d272a0ca57b23a0bb6e&original_url=https%3A%2F%2Ffamilyfoundationsuk.org%2F&key=sh-1&hmac=e932e45d01067db6abc9336cc320598d3628fd80f134b543eafae856da819a44> |
| **Fatherhood Institute** | Becoming Dad and Staying Connected | Becoming Dad offers groups of expectant fathers the opportunity to learn  caregiving skills and navigate the practical and emotional challenges of  early fatherhood.  Staying Connected is a short programme for fathers who don’t live with their children full-time, helping them navigate the challenges of staying involved in hands-on fathering after separation or divorce. | Training Facilitators working with Couples and Separated | Both can be delivered through maternity and health services, early years, and voluntary sectors, Family Hubs, and schools. | <https://www.fatherhoodinstitute.org/_files/ugd/efff1d_9c0b9d4d3a274de29040d2ac8fee53b3.pdf> |
| **Incredible Years** | Preschool BASIC + ADVANCE Parent Training Curriculum | Incredible Years ADVANCE is an add-on programme to the Incredible Years Preschool BASIC and School Age BASIC programmes. It is designed to be delivered to families after they have received the BASIC programmes, particularly where child risk factors (oppositional or aggressive behaviours, ADHD, poor social skills or autism spectrum disorders) or parent risk factors (mental health problems, poor communication skills, social isolation, marital conflict or emotion regulation difficulties) are present. | Preschool & Primary School | •Children's centre or early-years setting  •Primary school  •Community centre  •Out-patient health setting | <https://www.incredibleyears.com/early-intervention-programs/parents> |
| **Nishkam Centre** | Values & virtues led approach to reduce parental conflict | A programme designed to support professionals to support loving, safe and caring relationships in the home, through a values and virtues led approach to reduce conflict | Professionals | Virtual and in person | <https://ncauk.org/> |
| **Northwest Prevention Science** | Family Check-up for Children | The Family Check-up (FCU) for Children is a strengths-based, family-centred intervention that motivates parents to use parenting practices to support child competence, mental health and risk reduction | Couples or separated | Face to face | <https://welcome.thefamilycheckup.com/> |
| **OnePlusOne** | Me, You, and Baby Too,  Arguing Better, and Getting it Right for Children. | RPC Digital Courses for parents and training packages for staff to help parents together or apart understand the impact of their arguments on their children, and learn techniques to communicate better, handle stress, and manage conflict more constructively. Free use of videos to demonstrate parental conflict on [See it differently](https://www.seeitdifferently.org/) | Separated and separating parents  Couples with babies | Online | <https://www.oneplusone.org.uk/what-we-offer/digital-resources> |
| **Parents Plus** | Parents Plus Parenting when Separated | Parents Plus Parenting when Separated is a parenting programme. It is a targeted selective programme for children between the ages of 0 and 18 whose parents are preparing for, going through, or have gone through, a separation or divorce. | Preschool  Primary school  Preadolescents  Adolescents | •Children's centre or early-years setting  •Out-patient health setting  •Primary school  •Secondary school  •Community centre | <https://www.parentsplus.ie/parents-plus-programmes/the-parenting-when-separated-programme-training-for-professionals/> |
| **PREP** | Within My Reach | Within My Reach aims to equip low-income and at-risk individuals with relationship skills, and to promote healthy relationships. | All adults (don’t have to be a parent) | Face to face | <https://prepinc.com/collections/within-my-reach> |
| **Race Equality Foundation** | Stronger Relationships programme | The programme offers specialised support for families navigating external challenges. The co-parenting strategies aim to enhance relationships, positively impacting family dynamics, while considering various aspects, including race, gender, sexuality, and different types of parents. | Couples and Separated | In Person | <https://raceequalityfoundation.org.uk/blog/new-programme-to-help-parents-manage-conflict/> |
| **Race Equality Foundation** | Stronger Relationship courses | 6-week online and virtual courses to develop better family relationships and reduce parental conflict based on the Strengthening Families, Strengthening Communities approach. | Couples and Separated | Online and virtual | <https://strengthening-families.net/reducing-parental-conflict/> |
| **Relate** | Co-parenting every day (COPE) | Strengthening parents programme for serving Armed Forces personnel (or veterans within last 12 months) and their co-parents. | Armed Forces personnel | In person | <https://www.relate.org.uk/what-we-do/supporting-parent-relationships> |
| **Relate** | Mediation | Stronger Relationships online course for co-parents living apart, including virtual group sessions. | Separated and separating parents | Online, virtual and face to face | <https://www.relate.org.uk/what-we-do/mediation> |
| **Relate** | Counselling | Relationship counselling, individual counselling (whether related to relationships or not), Sex therapy and Family Counselling. Relate has local centres across the UK. The services each centre provides varies. | Couples and Individuals | In Person | <https://www.relate.org.uk/what-we-do/counselling-services> |
| **Restored Lives** | Restored Lives | Supporting adults through separation or divorce, to reduce the negative effects on individuals, children and communities. | Separated and separating parents | Virtual and face to face | <https://www.restoredlives.org/> |
| **Tavistock** | Better Conversations App | Better Conversations is a web-based, role-play tool created by Tavistock Relationships to help parents and co-parents have better, less conflicted, conversations with their partner or ex-partner. | Couples and Separated | Mobile app | <https://tavistockrelationships.org/images/PDFs/RPC_Brochures/TAV1115_Tavistock_RPC_brochure_DIGITAL_APPROACHES.pdf> |
| **Tavistock** | Tavistock Relationships - Parents as Partners (PasP) | 16 session group (2hrs pw) evidenced based programme aimed at couples who are separated or together, but they must attend together. It requires a male and female facilitator. | Couples and Separated Perinatal and families with children with global developmental delay | In person | <https://tavistockrelationships.org/blogs-and-resources/how-to-listen?view=article&id=700:parents-as-partners&catid=29&gad_source=1&gclid=EAIaIQobChMIrYHtqaaLiAMVi4BQBh0_-yyPEAAYASAAEgJvA_D_BwE> |
| **Tavistock** | Mentalization Based Therapy (MBT) | For separated or intact couples experiencing high levels of interparental conflict to gain more perspective so that they can start to put the needs of their children first. It is based on a model which comprises an initial phase of preparation and assessment, meeting with each parent separately | Couples and Separated | In Person | <https://tavistockrelationships.org/training-for-organisations/mentalisation-based-therapy-training> |
| **The Centre for Emotional Health** | Nurturing programme | A 10- week parenting programme that improves the emotional health of both adults and children and strengthens family relationships. | Couples and Separated, including parents in prison  Training professionals as facilitators | In person | <https://www.centreforemotionalhealth.org.uk/what-we-do> |
| **The Parenting Apart Programme** | Parenting together, parenting apart | A programme dedicated to supporting families through the complexities of separation, divorce, and parental conflict, with children at the heart of every decision. | Couples and Separated | In Person and Online | <https://parentingapartprogramme.co.uk/helping-parents/> |
| **The Solihull Approach** | Antenatal online course | An online course that gives parents practical information about pregnancy and birth whilst at the same time introducing them to their baby. | Couples and Separated | Online | <https://solihullapproachparenting.com/> |
| **Triple P** | Enhanced Triple P (Level 5) | Adjunctive interventions (alongside a Level 4 Triple P programme) to address family factors that may impact upon and complicate the task of parenting, such as parental mood and partner conflict. | Couples and Separated | In person and online | <https://www.triplep.net/files/7614/0851/3116/Triple_P_Practitioner_Info_Sheet_Enhanced.pdf> |
| **Triple P** | Triple P Baby | A course to promote baby’s development, build a stronger bond, improve communication with your partner and other family members, and support their emotional and physical health. | Parents with babies | In person and online | <https://www.triplep-parenting.uk.net/uk/get-started/triple-p-online-for-baby/> |
| **Triple P** | Potential Parenting - Level 5 Family Transitions Triple P | Five group or individual sessions of two hours each. If they haven't already, the parent may then go on to complete a Level 4 Triple P intervention (Group or Standard, or Teen or Stepping Stones variants). Parents may attend alone or with their new partner but should not attend with their ex-partner as this is not a mediation programme. | Separated or Divorced parents | In Person | <https://www.triplep.net/files/9514/2233/6244/Triple_P_Practitioner_Info_Sheet_Family_Transitions_Canada_2014.pdf> |
| **Video Interaction Guidance** | Video Interaction Guidance (VIG) | Videos of parents/carers and children in everyday situations to improve communication, and to find ways of getting on better. It highlights and builds on attuned moments in parent-child interaction. | Parents | Virtual | <https://www.videointeractionguidance.net/parents-carers> |

# **Glossary**

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| **Term** | **Definition** |
| **CPD**  (Continuing Professional Development) | A record of ongoing training and education that may be gained formally or informally beyond any initial training to ensure that professionals continue to be competent in their profession. |
| **CSC**  (Children’s Social Care) | Services provided by local authorities for children and families 0-19years and up to 25 for young people with special educational needs to support and protect children and young people in need and/or in need of protection. |
| **DA**  (Domestic Abuse) | Any form of abusive behaviour used to control, intimidate, or harm a partner or family member. This can include physical, emotional, psychological, sexual or financial abuse. The goal of the abuser is often to exert power and control over the victim. |
| **EHA**  (Early Help Assessment) | A process to analyse the needs of children and families and put in place a plan to intervene earlier, provide support and reduce the need for statutory services |
| **FGC**  (Family Group Conference) | A family-led decision-making process in which the family and friends network come together to make a plan for a child. |
| **Family Hub** | The programme’s objective is to join up and enhance services delivered through transformed family hubs in local authority areas, ensuring all parents and carers can access the support they need when they need it. |
| **Front Door**  (also known as MASH) | A team of professionals from key agencies such as children’s services, police, health, probation that facilitate timely information sharing, analysis and decision making to safeguard children and vulnerable adults. |
| **Home-Start** | Home Start is a charity that provides support to families with young children 0-5years. Volunteers offer regular support, friendship and practical help to families under pressure to try to prevent family crisis/breakdown |
| **L&D**  (Learning and Development) | Activities designed to improve the skills and knowledge of individuals and the workforce. |
| **MASH**  (Multi-Agency Safeguarding Hub) | A team of professionals from key agencies such as children’s services, police, health, probation that facilitate timely information sharing, analysis and decision making to safeguard children and vulnerable adults. |
| **MBT** (Mentalisation- Based Treatment) | A type of therapy that helps individuals understand and interpret their own and others’ mental states |
| **RPC** (Reducing Parental Conflict) | Where conflict is seen as being frequent, intense, and often left unresolved, as opposed to domestic abuse, where there is an imbalance of power with one parent using coercion and control against the other. |
| **Step down meetings** | Step down meetings are part of a process where a child or family transitions from a higher level of support (such as statutory or safeguarding services) to a lower level of support (such as targeted early help or universal services) |