

### Start where mum is:

# Reducing loneliness in young mothers

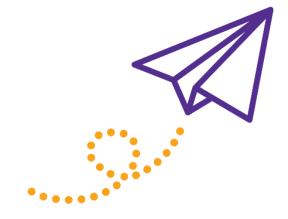
# **Home-Start UK**





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#### **Executive Summary**

In early 2018 Home-Start UK (HSUK) launched a project to reduce isolation in young mums. Worth £215,000 over 18 months, the project was funded by a British Red Cross and Co-op Community Connectors grant.

HSUK commissioned 13 local Home-Starts to run support groups for a total of 345 young mums. The University of California, Los Angeles (UCLA) Loneliness Scale was used alongside Home-Start's in-house monitoring system, MESH, to evaluate the impact of the project.

#### **Key findings**

- Most project beneficiaries were living in social housing and a significant number were in temporary accommodation. The majority had no access to a car.
- Two thirds of young mothers showed a positive change in relation to their UCLA Loneliness Scale score, with half of these changes meaning they were classed as 'not lonely' by the end of the project.
- More than half of project beneficiaries had increased levels of engagement with wider services by the end of the project e.g. GP, dentist, housing advice & children's centres.
- Developing trusted relationships required a significant time investment from local Home-Starts but this was ultimately key to successful beneficiary engagement.
- Non-judgemental, peer-to-peer support was cited as an important reason why young mums felt able to come to Home-Start, as opposed to other agencies.

These findings demonstrate our progress towards the project outcomes of young new mums reporting feeling less isolated, less lonely and more connected within their community.

#### Main recommendations

- Start where mum is. We found it important to meet mums on their terms, often at home
  or in public spaces, and not to expect their involvement in groups and activities straight
  away.
- Take time to understand the detail of wider service provision and provide a bridge between young mums and other important services.
- Put beneficiary feedback at the heart of your service design so that a real sense of ownership and belonging can evolve.
- Create safe and non-judgemental spaces for support. The young mums involved in our project said they often felt judged and that this stopped them from engaging with other services.

Young mums are a unique group that face significant challenges as they come to grips with parenthood. This includes an increased risk of isolation, which can have profound effects on their health and well-being as well as on their children's development. In setting out the learning of Home-Starts involved in this project, we hope that this report offers Home-Start and other organisations a valuable insight into ways of reducing isolation among young mums.



#### Introduction

Home-Start overview

Home-Start is a charity that offers volunteer support, friendship and practical help to young families in their own home and helps them reconnect with their local community.

Every year over 27,000 families ask for Home-Start help. Every day, around 200 local Home-Starts and a network of 13,500 volunteers are working at the heart of local communities to help these families develop the skills and confidence to counter isolation, build confidence and learn to cope. Over the last 44 years, the charity has helped over 1 million of the UK's most isolated and vulnerable children and their families. This is done via the federated network of 'local Home-Starts', with HSUK at the centre.

Home-Start's work with families shows us that loneliness is a key area of need. In recent years public attention has also been drawn to the widespread experience and impact of loneliness, driven largely by the Jo Cox Commission on Loneliness. A cross-government Strategy on Loneliness was launched in October 2018, and an All Party Parliamentary Group on Loneliness is supported by the Red Cross and Co-op Loneliness Action Group. Home-Start UK attend the action group, representing the case for parenthood being a potential trigger for loneliness.

HSUK's research with families shows that in 2016, 44% of people supported came to Home-Start because they were lonely or isolated.

In 2006 HSUK commissioned 'Overcoming Isolation – A study of Isolated and Lonely Families Supported by Home-Start', a study involving 140 families from 39 areas across the UK. When this study took place, feelings of isolation and Ioneliness was the biggest single need of the families being supported, and Home-Start's offer saw 92% of those receiving help reporting a significant improvement. While 10 years later the impact of Home-Start's support is still critical (94% reporting an improvement in 2016), 12 years on, the effects of wide spread funding cuts to family support services are evident. Lack of funding has led to the closure of an array of services including hundreds of children's centres and other agencies whose main purpose was the provision of social networks and health support to new families. Local Home-Starts report in some cases that they are able to support families as other services disband, but sometimes the report is that the families simply seem to have disappeared. This is altogether more worrying.



#### **Project outcomes**

While each participating local Home-Start was able to create specific local targets, HSUK's overall outcomes as stated with British Red Cross (BRC) and Co-op were:

- Young New Mums report feeling less isolated
- Young New Mums report feeling less lonely
- Young New Mums report feeling more connected within their community

#### Project timeline overview

Following an internal news article early in 2018, HSUK received 16 expressions of interest from local Home-Starts keen to work with isolated young mums.

On February 27<sup>th</sup> 2018 and as part of their grant commitment, HSUK held a co-design workshop in Birmingham attended by representatives of most of the interested local Home-Starts. After the event attendees were asked to submit a concise project plan.

A panel of HSUK colleagues made up of the Deputy CEO, Director of Strategic Development, project manager and a fundraising officer met to discuss the proposals. Seven local Home-Starts were offered funds at this stage. Project summaries were sent to BRC and on to Co-op for agreement. This stage took longer than expected, leading eventually to the offer to extend the project end date to the end of May 2019.

There was still funding capacity available, so HSUK invited further project plans from the network, and in early May 2018 a second HSUK panel was held. A similar amount of interest was attracted, and a further 5 sets of project funding were awarded as 'wave 2'.

One local Home-Start withdrew from the project in late September 2018. After discussions with BRC their funding, plus some that had been left over, was reallocated to two more local Home-Starts who joined the project in mid December 2018 as 'wave 3'. These two were approached directly by HSUK as they are in the top 6 of local Home-Starts by number of young mums supported.

Two local Home-Starts completed the project at the end of March 2019, having chosen not to continue beyond the original timeline. One of these found some local funding to run for another 6 six week block and submitted more UCLA data in June. The remaining 11 completed at the end of May.



#### **Delivery partners**

Wave 1:

**Home-Start Angus** 

Home-Start Caerphilly

Home-Start Crawley, Horsham and Mid Sussex (CHAMS)

Home-Start Glasgow North

**Home-Start Kirklees** 

Home-Start Slough (withdrew)

Home-Start York

Wave 2:

Home-Start Croydon

Home-Start Ealing

Home-Start Oldham, Stockport and Tameside (HOST)

Home-Start Knowsley

Home-Start Wirral

Wave 3:

**Home-Start Stroud District** 

Home-Start Deveron

#### Geographic spread

Projects from this funding have been delivered by Home-Starts in three of the four nations of the United Kingdom. Although no local Home-Starts from Northern Ireland were awarded funding from this project, there was a submission which was considered in wave 2.

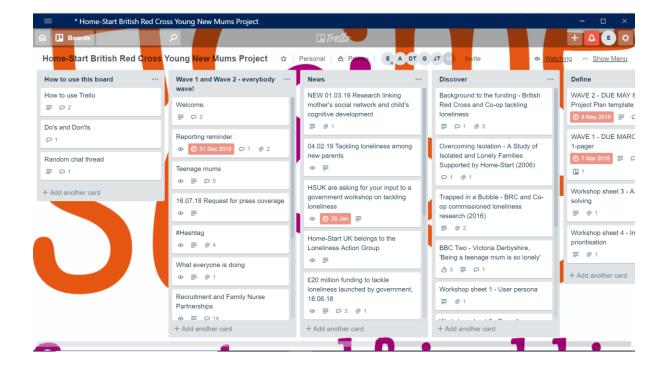


#### **Project Methods**

#### **Project support**

The HSUK project manager facilitated two group Skype calls with the local Home-Starts, one on 14.06.18 and one on 10.01.19. While these appeared to be appreciated, not all local Home-Starts are equipped for/ experienced in online conferencing and there were various issues with microphones, audio and connections in both calls. Group Skypes were not therefore a key feature of project support.

A Trello board was set up for the project in February 2018. Although the board was populated and maintained by the HSUK project manager and had 17 members, activity from the group was minimal. All local Home-Starts involved in the project were invited to join, four did not. Most local Home-Starts contributed only once or only on one topic. Four of the local Home-Starts who joined did not post at all.





#### Project promotion and recruitment of mums

There were some concerns around recruitment to the project after the first formal reporting took place. Home-Start Slough had withdrawn, and provided a helpful report on the challenges they had faced, primarily with recruitment of mums.

To try and both monitor numbers more regularly and foster some context and peer support, the project manager at HSUK also gathered interim numbers from each local Home-Start in early November, early December, and mid February. To avoid overburdening with reporting, these numbers were just how many mums had been engaged, not their UCLA scores, and were circulated internally only around the group. All except one local Home-Start participated in this.

A document was prepared summarising ways in which local Home-Starts were promoting the opportunity to engage. The following were some of the pathways that were being followed to promote and recruit to the project round the UK at that point in November 2018:

Children's Centres
Practitioner Partnership
Facebook
Talking to Teachers and Heads of Year Supermarkets
Family Nurse Practitioner / Family Nurse Partnership
Quarriers
Health Centres
Reach Health Centres
Reach Health Chiasgow (BME organisation)
Self Referrals
Rainbow Families

Direct Promotion to Mums
Careers Fayres
Mush (social media)

Women Asylum Seeker Housing Association
Who Cares Scotland
Health Visitors

Positive Action in Housing Existing Case Load Terrence Higgins Trust

Community Centres

National Youth Advocacy Service (NYAS)

Amina Muslim Women's Resource Centre
Rainbow Lifelong Learning Job Centres Hindu Temple
Hostel For Young Mums
Visiting other local groups

Indeed (job website)

Local Weigh Clinic

Various external organisations are invited to run an activity
Large Least Posters

Large Least Posters

Amina Muslim Women's Resource Centre
Rainbow Lifelong Learning Job Centres Hindu Temple
Hostel For Young Mums
Visiting other local groups
Libraries
College Open Days



#### Quantitative data

The project outcomes were to be measured as specified by BRC and Co-op using the UCLA 3-item Loneliness Scale. This scale was provided by the BRC to HSUK and in turn to the local Home-Starts.

This scale comprises 3 questions that measure three dimensions of loneliness: relational connectedness, social connectedness and self-perceived isolation. The questions are:

- 1. How often do you feel that you lack companionship?
- 2. How often do you feel left out?
- 3. How often do you feel isolated from others?

The scale generally uses three response categories: Hardly ever / Some of the time / Often

See Appendix C for the scale and responses in full.

#### Using this scale: how to score and interpret your results

In order to score somebody's answers, their responses should be coded as follows:

Response	Score
Hardly ever	1
Some of the time	2
Often	3

The scores for each individual question can be added together to give you a possible range of scores from 3 to 9. Researchers in the past have grouped people who score 3-5 as "not lonely" and people with the score 6-9 as "lonely".



Measuring Your Impact on Loneliness in Later Life, Campaign to End Loneliness

In addition to the UCLA scale responses, data was extracted from Home-Start's internal Monitoring and Evaluation System, MESH. MESH is used by 12 of the 13 sites who completed the project, and 11 of these entered data against this project.

Whenever a family access support from Home-Start a family record is created. The family will usually have what is known as an initial visit from a member of the local Home-Start staff, who will start to get to know them and help them to think about how they could work together with a Home-Start volunteer. During the initial visit the member of staff will gather a range of information about the family. With their consent, in local Home-Starts who use MESH, this will later be entered into the system. This information includes demographics,

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but also asks the family to give themselves a 'coping score' against each of a set of 15 factors (see appendix 1). For this project factors 5 and 13 were identified as being especially relevant, and a number of participants were able to provide this information. 5 asks about how, in this case mum, is coping with feeling isolated, and 13 asks about her use of other services. Her answer will be about her level of coping today and will be a number between 0 and 5, where 0 = not coping very well and 5 = coping very well. The local Home-Start teams are very experienced in working through this information with families and take as much time as is necessary for the family to understand and feel comfortable.

The family's overall level of need is also recorded at the initial visit using the Hardiker scale (see appendix 2). This is a 4 level model where level 1 is universal service, moving up to level 4 which is intensive and long term support and protection.

The following information was extracted from MESH for this evaluation:

- Scores against factors 5 (coping with feeling isolated) and 13 (use of services). A
  minimum of two sets is required to make a comparison between start and end of
  project
- Hardiker scores again at least 2 sets
- Housing information (from initial visit form)
- Access to transport information (from initial visit form)





#### Qualitative data

Figures described above are supported by a range of qualitative data gathered from reports, case studies and during the evaluation phase.

Three broad question areas were developed by HSUK to steer the evaluation:

- 1. How does Home-Start reach lonely isolated young mums?
- 2. What activities were most successful in tackling loneliness and isolation?
- 3. Learning from the project

Each of these areas had a number of sub questions – see appendix 3.



#### **Findings**

#### Quantitative Evaluation

HSUK reported to BRC approximately every quarter, at the end of September 2018, December 2018, March 2019 and June 2019. These reports included each mum's anonymised UCLA scores and a brief narrative from each participating Home-Start. Table 1 shows the UCLA score totals. There was some complexity to understanding the project from the scores, as some mums would only have one set of UCLA data at the point of reporting. This may be because they had disengaged with the project, or because they were still receiving support and hadn't provided a second set of scores yet. Reporting only the quantitative UCLA scores would not therefore give a full picture of activity.



Table 1 - Figures provided to BRC at quarterly reports (cumulative)

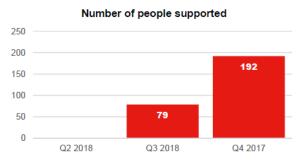
Local Home-Start	Sept 18 Number of	Sept 18 Number of	Dec 18 Number of	Dec 18 Number of	March 19 Number of	March 19 Number of 2	June 19 Number of	June 19 Number of 2
	UCLA initial scores	UCLA 2 or more sets	UCLA initial scores	UCLA 2 or more sets	UCLA initial scores	or more sets	UCLA initial scores	or more sets
Angus	18	6	20	13	23	17	28	21
Caerphilly	8	5	19	6	23	13	33	31
CHAMS	8	4	13	7	19	13	21	19
Glasgow North	0 (planned development time)	0	14	6	23	7	24	13
Kirklees	5	5	20	11	20	18	20	18
York	8	4	10	10	18	15	20	17
Croydon	9	0 (by agreement)	22	12	28	20	31	22
Ealing	0	0	5	0	17	8	20	11
HOST	7	5	37	24	38	26	38	26
Knowsley	8	8	17	17	26	24	35	32
Wirral	8	0 (by agreement)	15	12	29	18	36	27
Deveron	Not s	tarted	Not s	tarted	16	11	16	16
Stroud	Not s	tarted	Not s	tarted	14	7	23	15
TOTAL	79	37	192	118	294	197	345	268



Table 2 - BRC analysis of figures. Provided February 2019

#### **Home Start**

#### Q4 reporting: April 2018 - December 2018



People supported by the programme

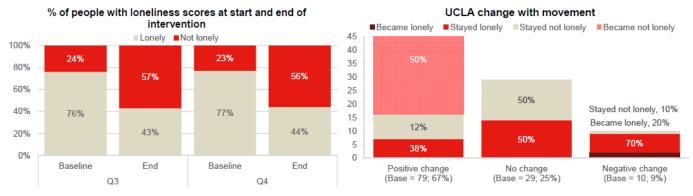
	2017	Q1	Q2	Q3	Q4
All people supported to date				79	192
All people supported by quarter				79	113
Notes:		•			

All people supported were Young Mums. People supported in Q4 is up 43% from Q3.

Note: this is a cumulative figure

#### **UCLA** scale

	2017	Q1	Q2	Q3		Notes:
Number of people with a baseline UCLA score recorded				37	192	End scores are available for 61% of
Number of people with a final UCLA score recorded				37	118	people supported to date.



Base: Q3 = 37 people with baseline and end UCLA scores; Q4 base = 118

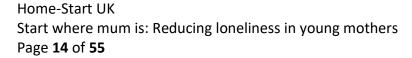




Table 2 was created by British Red Cross in February 2019, using Home-Start's UCLA figures to date.

From the breakdown in table 2 we can see that 76% of mums were classed as lonely based on their UCLA scores when they first joined the project. However, some mums were producing scores which classed them as 'not lonely'.

In their September project report the team in CHAMS note:

Although the scores do not evidence a huge degree of loneliness, discussion with the mums did reveal how limited their social circle was...

Right from the start Home-Start Angus also saw not all their mums scoring as lonely, and had opinions on where some of the issues may lie:

Feedback from mums involved about UCLA form – they find it difficult to understand as doesn't use language they familiar with. We were asked by 3 young mums what the word "companionship" meant. In our opinion form more suited to the elderly and not an effective tool to measure loneliness in young women.

Young mums offered a group place who had already engaged with our home visiting service had higher UCLA scores than those new to our services. We believe that once a relationship of trust has been established young mums are more likely to be honest about their feelings. Using the tool over a 12 month period therefore, may evidence young mums feeling more lonely and isolated despite our support!

Young new mums, like everyone, are complex individuals.

In the first part of the project (Q3 in table 2) we see a reduction in loneliness between the beginning and end from 76% to 43%, and similar figures in the next quarter. Because of the range of scores possible on the UCLA scale a mum may improve her score but still be classed as lonely. The effectiveness of the groups in reducing UCLA scores was impacted by many factors, not least accessing mums most in need in the first place.

Our project team in HOST gave this feedback in their September report:

During the visits to existing groups we have created some new relationships with mothers, however they tend to be more confident and have less need for the groups and support (ie. lower scores). Mothers in the most need for the project are the most difficult to bring along and are not currently attending groups in the area.



Home-Start Caerphilly made a series of pertinent observations in their first report to HSUK:

We have to take into consideration the lifestyles of the young women that we are having referred to us. Some are in relationships with controlling partners where it has proven that the control has stopped mums from joining a particular group.

Throughout the summer, attendance was also sporadic due to holidays, children's illnesses and birthdays.

Mental health is the biggest factor, the anxiety that the mums are feeling before they come to group is overwhelming. I have been communicating with them on a Sunday night before group on a Monday to re-assure them. Some Sunday nights and Monday mornings they are cancelling with excuses, but once they get to group they are great, it's the thought of getting themselves there.

Mums do not always remain engaged, for very many reasons. Of the 345 young mums who completed a UCLA score with us, 268 of them stayed on and completed scores at least once more.

Even when mums stay with us, based on the feedback about initial UCLA scores, we may consider that not improving their loneliness score at the end of project does not necessarily mean that mum is feeling more isolated than before. She may only now feel able to share her true position, or realise what she had been missing.

Table 3 was provided by BRC using Home-Start's full record of submissions of UCLA figures from across the project.

We can see that the trend from earlier submissions (table 2) continued, and consistently around 75% of young mums were classed as lonely when they first joined the project.

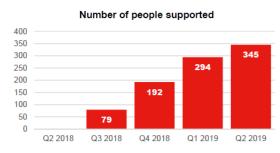
Overall, 66% of young mums (176 of 268 who submitted 2 or more UCLA scores) showed a positive change in those scores. Of those, half of the changes meant that they were no longer classed as lonely. 40% improved their scores but were still classed as 'lonely' on the UCLA scale, while 10% improved their scores from a base of being 'not lonely'.



Table 3 - BRC analysis of figures. Provided June 2019

#### **Home Start**

#### 2019 Q2 reporting: July 2018 - June 2019



 People supported by the programme

 2017
 2018
 Q1
 Q2

 All people supported to date
 192
 294 (300)
 345 (300)

 All people supported by quarter
 113
 102
 51

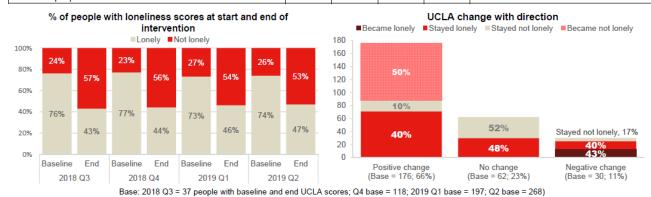
 Notes:

 All people supported were Young Mums.
 115% of target achieved.

Note: this is a cumulative figure

#### **UCLA** scale

	2017	2018	Q1	Q2	Notes:
Number of people with a baseline UCLA score recorded		118	197	340	All people supported have start scores, 78% of
Number of people with a final UCLA score recorded		118	197	268	people supported have end scores.



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#### Case Study - JL

This case study from Home-Start Knowsley gives a real life example of some of the things some young mums are dealing with.

JL is 18 years old

Her daughter was 2 months old when she first attended our Great 2 b Me Course

'My life has always been a mess and I've never really fitted in'

'My heads all over the place and I'm not very organised'

I'd like my daughter to have a better childhood than I ever had'



JL was brought up in the Care System after her mother gave her up when she was a baby. She had several placements with foster carers. 'I always felt like no one really wanted me'.

'School wasn't a good experience and I played-up rather than listening'.

'I had friends but they weren't real friends and encouraged me to misbehave and it was always me who got into trouble and was in detention'.

At the age of 14 JL's foster carers withdrew their support as they couldn't cope with her attitude, rudeness and disobedience which impacted on the rest of the family. JL was placed in temporary care once again and limped through until she was housed in Supported Living accommodation.

There was no plan for the future and she had a 'the World owes me' kind of attitude.

'I'd thought about college, enrolled but didn't actually get myself there'.

JL had baby daughter, father unknown, and is reluctant to talk about it. Concerns have been raised by Social Care as to the circumstances of the conception.

JL was referred to Great 2 b Me by her Social Worker, who is supportive. She attended from week one and has not missed a session. At the stress-busting session, JL became upset and disclosed she had a court date pending regarding her daughter's future and the court will make a decision as to whether JL is capable of bringing the baby up. Home-Start have provided emotional support through this difficult time and a final decision will be made in 3 months as to where baby will be best placed. JL will fight to keep her baby.

'Meeting these other girls has helped me get my head together a bit and think about what comes next, although I'm not sure what that is yet. I have been able to relax a bit during the group sessions and the set-up has been good knowing that baby is in the crèche and I don't have to worry about her. I feel I can look forward a bit now and Home-Start has kept me sane'.

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#### MESH data

A total of 200 families from 11 local Home-Starts had data entered against the queries for this project. A number of the data sets were incomplete, as response is optional and not all mums stayed on the project long enough to complete second sets.

Coping score against factor 5 – feeling isolated

121 mums had scores entered. 62 of them reported coping scores in the bottom half of the range the first time the met Home-Start.

Coping score on	0	1	2	3	4	5
feeling isolated	Not					Coping
at initial visit	coping					very well
	very well					
Number of	9	16	37	35	17	7
mums						

74 mums had 2 or more scores. Of these, more than half (54%) improved their coping score on feeling isolated. 38% did not show any change in this score over the course of the project.

Coping score against factor 13 – use of services

99 mums had scores entered. 52 reported being in the bottom half of the range at their first visit.

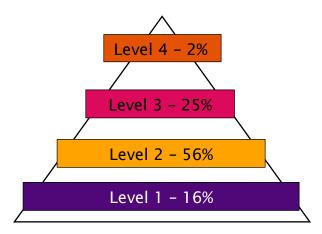
Coping score on	0	1	2	3	4	5
use of services	Not					Coping
at initial visit	coping					very well
	very well					
Number of	8	15	29	26	14	7
mums						

63 mums had 2 or more scores. Of these, over half (57%) improved their score on use of services. 38% showed no change in this score over the course of the project.



#### Hardiker levels

135 mums who took part in this project had at least one Hardiker level score. This score is not focussed solely on mum, it includes her children. The 135 scores were distributed across the four levels (see appendix 2 for level descriptors):



Of the 135 who had Hardiker data, only 16% were part of mainstream services. Over half required additional support, and a quarter had chronic or serious issues. 3 of the 135 families we have this data for were receiving intensive statutory support and/or were part of protection programmes.

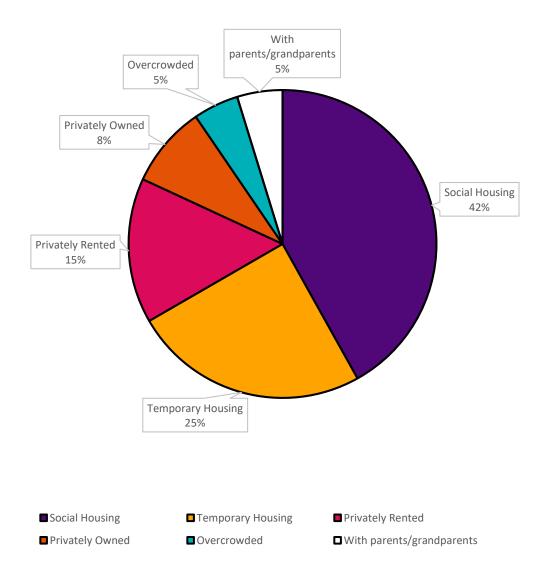
There were 61 family records where 2 or more Hardiker scores were recorded over the course of this project. These showed that 20 of the 61 moved levels during the project. 16 went down at least one level, marking a decrease in their support needs, and 4 families increased by one level.

#### Housing

There were 105 records about the housing mums were in, reported by mums the first time they met Home-Start.

Some of the temporary accommodation, which makes up a quarter of the records, was defined. We had one record each for Women's Aid accommodation, a looked after placement, and Serco accommodation (accommodation for asylum seekers), and two records for mother and baby units. While it may be less surprising that mums in temporary accommodation are experiencing loneliness, we also supported those who lived with parents or grandparents, and those who lived in overcrowded accommodation, where it is still possible to feel isolated.





#### Transport

Home-Start also routinely ask about transport options available to the families we support. 135 mums involved in this project provided some data on transport when they first met Home-Start. 20 had access to a car, while 48 reported having no car. 67 used public transport. These fields are not mutually exclusive, but give an indication of how the participants in the project get around. If activities are not located, and timed, around public transport there is likely to be an impact on attendance. If no public transport (or support from Home-Start) had been available, 67 of the mums who told us about how they travel may not have been able to access our support.



#### **Qualitative Evaluation**

We can see that the figures require narrative to explain and give a true picture.

Information was collected throughout the project via reports and case studies. In addition, in the first quarter of 2019 an evaluation phase took place with local Home-Start's staff and volunteers. The evaluation utilised face to face focus groups, a questionnaire sent via email and a structured Skype call. All three of these methods used the same questions (see appendix 3).

Home-Starts Croydon and CHAMS met with the HSUK project manager at Home-Start Croydon on February 21<sup>st</sup> 2019. Home-Start Ealing joined the group by Skype.

Home-Starts Knowsley, Wirral and HOST met with the HSUK project manager at Home-Start Knowsley on February 28<sup>th</sup> 2019.

Glasgow North took up the offer of a Skype call to discuss the questions. The remaining local Home-Starts responded by email.

#### Results from the focus groups

#### 1. How does Home-Start reach lonely isolated young mums?

#### Promoting the group

Everyone had flyers, all designed internally.

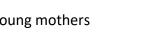
These were distributed around libraries, given to other Home-Start staff and volunteers, the Family Nurse Partnership (FNP), children's centres, coffee shops, local events/fairs, GP surgeries, through direct contact with mums in parks, to Health Visitors, Health visitor neighbourhood groups, midwives, the YMCA, to young mum's hostels, specialist midwives, and the early start team.

HOST particularly made a lot of phone calls following up on referrals from the infant feeding team.

Visits were made to other groups and to professionals such as health visitors to promote the new groups. Knowsley promoted their group during attendance at multi agency meetings such as the Sexual Health Forum, Children's Centres Advisory Board, Probation Service meetings and the FNP.

Wirral report that no referrals came from the flyers, although when asked later in the programme, mums report that they did see them. When it was felt the flyers weren't working, they attended the teenage parent steering group. All relevant professionals were there.

Social media was used, especially Facebook. Nothing on social media was paid for. Netmums and Mumsnet were also used as was WhatsApp and Mush, an app to encourage meeting up.





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The groups were promoted both to mums directly and to professionals.

Mums could join through referral by a professional or self-referral, although Ealing did not have any self-referral, and Wirral had only one. CHAMS experienced peer referrals – mums bringing friends / other mums they knew.

The following table shows main referral routes, with those who referred the most listed first. Two sets of email responses are also included to expand the range.

Croydon	CHAMS	Wirral	Stroud	York
FNP	Lifehouse (hostel)	FNP	Midwives	Health visitors
Christian Family Concern (hostel)	Youth Offending Team	Breastfeeding team	Bump-Start co- ordinator (mum went there first and got referred on)	Local area teams
Children's Centres	Facebook (closed group)	Health visitors	Health visitors	Community development workers
	Peer referral	Self referral	Self referral	Librarians
			Infant MH nurse	Community Development workers

Routes varied. Health visitors and also Family Nurse Partnerships were key in several locations. Referral routes were also influenced by the location of the group meetings — those based in or near hostels had referrals from there, and York, whose groups ran in libraries were supported by librarians. Some Home-Starts already ran other very active groups, for example Stroud's Bump-Start antenatal group, who were able to refer in.

Promotional material featured the terms young mum (Croydon), and under 25 (CHAMS and Croydon). The Northern focus group had included lonely / loneliness. Other terms related to the project brief such as companionship, left out or isolated were included less often.

The discussion around this in Croydon was that "young mums are busy surviving" – identifying themselves as one thing or another isn't high on their agenda, although they do consider themselves to be young. They do also have a fear of judgement.

At the Knowsley group it was shared that initially a Facebook post had gone out for 'lonely young mums'. One response was that it was patronising to use the term lonely, other responses were from mums who were over 25 but also felt lonely. The post was removed

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and future advertising stopped using ages – the groups were opened up to all but only the under 25's complete the UCLA. In the end only 2-3 mums who were over 25 attended.

There was also some feedback from Wirral that mums would not attend if the group was not specifically for under 25's as they have a fear of being judged.

A suggested way around the age issue is to post adverts to Facebook groups which are already set up for under 25's.

#### **Pre-group support**

Everyone offered support to the mums before they attended their first group session. Ealing reported "a lot of effort and around 80% of the funding went into this stage".

This support took the form of home-visiting or, in the Southern focus group, other off site meeting. Croydon particularly found that meeting up for coffee was an incentive for the mum. However, HOST offered coffee shop meetings twice, both were no shows. Wirral tried to home-visit in the same week as the mum's first group session, to avoid her having too long to worry about it. The worker took pictures and videos of the venue to show the mums to alleviate nerves. Text message reminders to mums were used by everyone, the day before the group, and the hour before! Social media contact was also used, and mums were invited to online groups. Phone calls were not so common.

#### Judgement and experience

Feeling judged and the importance of the Home-Start peer to peer approach to a lonely young mum was discussed. The mums benefit from shared understanding, but there is also a comparing/competitive/judgemental element – my baby can crawl, my baby can say mama etc. There were also some instances of pre-existing angst/knowledge of each other from school or growing up in the same area.

Having an older person available for advice if wanted was successful, especially as the peer group in this case may have poor practice or just lack experience.

Mums have told us they do feel judged. They must feel relaxed to continue attending, gain the benefits and combat isolation. Sharing stories on weaning, feeding and birth has "helped me get to know other mums like me". This creates the atmosphere where they can share and support each other every week. (CHAMS)

The worker at HOST valued having been a teenage mum herself, while the worker from Knowsley felt a peer in age wasn't important. The conclusion was that the main point is to not be 'another professional'.

#### **Getting to group**

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The groups looked at whether transport was provided for mums attending the groups. Ealing does not provide transport support as normal practice, but have gone out and travelled to group with mums on this project. This is also wider confidence building. They did not allow a £1.50 bus fare to be a barrier, although this was assessed case by case, not an advertised feature of the project.

CHAMS and Croydon both accompanied mums during travel, on the bus and walking.

HOST offered taxis, but only 2 were used in the end. It was felt that mums liked knowing they were there if needed – the offer was important - and this helped them to push themselves to make their own way to the group.

In Wirral 90% used taxis.

Individual taxis were used in the first week in Knowsley and then the mums worked out who lived near who and shared taxis from then on. Their main catchment for the groups was an area about 7 miles from the venue, so transport was an issue. The mums did a similar spontaneous pairing up and supporting each other in Croydon using the buses.

All three of the local Home-Starts in the Southern group and HOST felt that transport support helps, but the mums would come anyway. For Knowsley and Wirral transport support was vital.

The Southern group reported Hostel managers were also supportive, in some cases providing travel accompaniment.

#### **Changes of plan**

Each local Home-Start were asked, thinking about your original project plan, were there any significant changes along the way?

#### Croydon:

- target numbers have been hard to reach, but we are not far off
- programme has adapted slightly, responding to evaluations
- adapted to weather, although sessions run generally to plan

Ealing: Had a change of staff after the plan was accepted. This had a number of impacts

- A late start
- Original target numbers were found to be impossible
- Original programme was very rigid. It is now more free-flow
- Integration into existing Home-Start family group was added. Mums do not feel judged here



- Lots of time spent in engagement. Previous engagement with 'services' has been medically focused

#### CHAMS:

- Other organisations running groups have closed CHAMS may pick these groups up
- Mum may go to children's centre group, but 'relaxes' at HS young mums group
- This group has seen quite a big evolution from the original plan bound to Lifehouse. It is now running successfully in a church hall, meaning other young mums can also attend.

#### Wirral:

- Thought self-referral would be higher
- Originally planned 'buggy fit'. With hindsight, this is what the professionals wanted. Mums were never going to do this over the Winter
- In the year prior to this project only 1 mum under 25 had attended a Home-Start Wirral group. This shows a change in Home-Start Wirral more broadly, because of this project.

#### HOST:

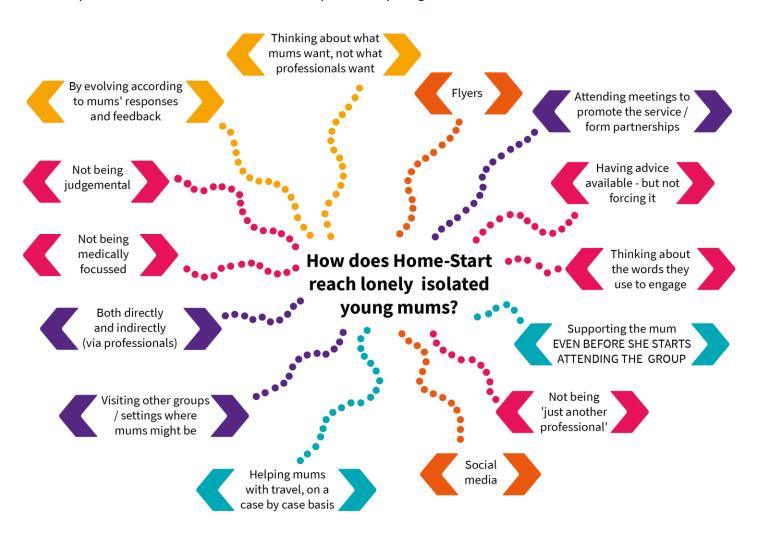
- Adapted their project as it proved more difficult to recruit than expected. Thought referral from professionals would be higher, although the infant feeding case load referrals did happen.

#### Knowsley:

- Project has gone as expected or better – no major changes.



#### Summary – How does Home-Start reach lonely isolated young mums?



## These can be divided between five themes:

- Building design around mum's feedback
- Bridging with and to professionals and other services
- Home-Start values and style
- Starting where mum is
- Practical actions/activities

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Feedback from local Home-Starts via email backed up these themes.

Building design around mum's feedback:

We initially thought that we would structure the sessions with the mums on a weekly basis, we organised for external agencies to attend, but due to mental health and attendance this was not going to be maintained. We then decided after the first group finished at the end of last summer to change the dynamic and make it a more fluid approach. I introduced arts and crafts and from here the basis began for our weekly activities. The mums really engaged in the sessions, bringing their own ideas to the table and it was their time to talk and be creative. There were no expectations made, everyone's ideas were listened to, they helped support each other and from this, we have a strong and thriving group.

We adapted ourselves to meet the needs of the mums so that we had regular attendance and because of this they come every week. We have also extended the time session so that mums can drop in even if it's for an hour, as some struggle to get up in the mornings, others may have appointments or need to pick up from school or drop off, this has enabled them to still come and have an hour, which could be the only hour they have all week. —

- HS Caerphilly

Bridging with and to other professionals and services:

I delivered talks to health visitors at meetings, stopped into their offices to talk to them, used multi-agency meetings to promote the project, liaised with other community groups that we have links with for eg church groups, cab, social services, supporting family change, NYAS, foster agencies that are looking after young people leaving care. I have walked in the local communities, asking local communities to put up leaflets and posters.

HS Caerphilly



#### Home-Start values and style:

Peer to peer approach is Mum led – it's taking those in similar situations and facilitating support and relationship development. I feel it is vital, as it promotes confidence, increases self esteem but takes away an immediate barrier that usually exists where a professional is working with the family. I feel professional support should complement peer to peer, not the other way around, this is the approach taken by us. — HS Deveron

#### Starting where mum is:

All young mums involved had a mobile contact number for their group worker and/or Home-Start volunteer. Most communication took place by text messaging rather than phone calls or email – young mums preferred this.

We believe it (peer to peer approach) is very important – but also important that the groups had input from group workers and volunteers that weren't at the same stage of parenting...some of the mums under the age of 20 had felt bullied at school and were initially mistrustful of their own peer group. We found it was essential to develop a relationship of trust with the young mums before they were able to start coming along to our groups. — HS Angus





#### Case Study – Shannon

Young mum Shannon's story demonstrates some of these themes: the importance of a non judgemental style, bridging with other professionals and services, and starting where mum is.

Shannon, 20 years old.

Shannon has two children, one aged 19 months the other is four weeks old.

I felt really isolated when I had my baby. I didn't really go out of the house, because I didn't really know anybody. I didn't have anyone to talk to about how I felt or if I was struggling with a certain issue."

"If Angie hadn't come out to visit me I wouldn't have come to Home-Start at all. I was really scared just to go out of the house, I had really low self-confidence".

"If it wasn't for Home-Start I wouldn't be the person I am today. I would still be isolated. My confidence has gone through the roof. I'm a completely different person to what I was before.

Shannon is 20 and has just had her second baby. She had her first son when she had just turned 18.

Being a young mum can be a lonely experience, especially if you don't have close family around to support you. The fear of judgement – the stares and disapproving comments – makes many young mums like Shannon nervous of leaving the house.

This is why Home-Start Kirklees run a special group, just for young mums, each week in Dewsbury.

"I felt really isolated when I had my baby," say Shannon. "I didn't really go out of the house, because I didn't really know anybody. I didn't have anyone to talk to about how I felt or if I was struggling with a certain issue. No one comfortable enough to explain stuff to."

After she had her baby, Shannon found that most of her friends distanced themselves from her. She had a new baby, no one to talk to, and was scared of leaving the house.

That's when Shannon first found out about Home-Start. Like most mums at the group, Shannon was referred to Home-Start Kirklees by her health visitor.

"My health visitor referred me because I was speaking to her about my isolation. I had postnatal depression and I just felt like I needed to get out there."

Shannon knew that her isolation was having a big impact on her son too. "It's not fair on the kids as well. If you're isolated and you're not going out, then how are the kids supposed to learn?"

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But the process of getting mums comfortable enough to attend the group is an intensive process.

Angie, the group organiser visits each mum at home and lets them know about the group and the other ways that Home-Start can help them. She asks them to assess how they are feeling about their level of isolation, their ability to cope, and their mental health.

For the first few weeks Angie will offer to pick up new young mums and take them to the group to make sure they get there and know a friendly face when they walk through the door. It removes a big barrier stopping mums from coming for that first time.

"If Angie hadn't come out to visit me I wouldn't have come to Home-Start at all," says Shannon. "I was really scared just to go out of the house, I had really low self-confidence".

This time spent getting to know the mums and making them comfortable with the idea of coming to the group is a key factor in its success. The other is that the group is just for young mums.



The women at the group are often put off going to other sessions in the town where the mums are a bit older. They are afraid of being judged, and often they just have less in common with the other women there.

"With us all being the same age, we get each other and we get how each other feels. Meeting other mums here who've gone through the same you've been through and felt the same as you, completely changes things."

Mums chat about everything from haircuts, to where to buy the best baby clothes, to relationship advice, to tips on feeding.

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"There's people at the group that don't go out at all during the week," says Shannon. "They don't have any family to talk to or friends. Then they come here and they can let off and be themselves. They don't have to worry about being judged and someone turning round and laughing at them for a certain issue".

Shannon is a confident, articulate young mum, happy to talk about the challenges she's faced. But she is quick to talk about the role that Home-Start Kirklees and their young mums group has had in that.

"If it wasn't for Home-Start I wouldn't be the person I am today," she explains. "I would still be isolated. My confidence has gone through the roof. It's amazing. I'm a completely different person to what I was before."

Shannon has now completed training to become a peer educator. She'll be able to start providing support to other young mums sharing her experiences with other women going through the same thing.





#### 2. What activities are most successful in tackling loneliness and isolation?

Everyone loosely followed a pre-set plan from the start – eg week 1 craft, week 2 cookery, week 3 nail art etc.

Mums chose to join the group which has a pre-set, pre-advertised programme – but with design your own week at Croydon. Even where it's set it's informal.

Activities are also provided as they are available; mums choose whether to attend each week.

There has been an element of handing over to mums as their confidence grows. Mums bring bakes to the final session at Croydon – underlining that they have something to contribute.

HOST ran groups in two locations. Tameside was initially unstructured, which worked well. Structure was introduced and all the mums left. Oldham started later with a structure and this worked. Having finished with the structured sessions, Tameside are having 'meet ups' with around 3-4 mums attending each time. A goal across the project is for mums to feel confident to take themselves to other places, access other services and potentially meet up without support, forming natural friendships. While this cannot be forced, it has spontaneously developed from some groups. For example, a small group of the mums at Glasgow North arranged to meet up at the local soft play area in the city as the group meetings at Home-Start began to wind down.

It is important to note that HOST reported the FNP wanted a structured group, and promoted and referred heavily. It was also felt that mums wanted to support/please/be loyal to the FNP and what they wanted.

Knowsley are following the programme of their 'Fit for Life' programme, minus 2 weeks (FFL is 8 weeks).



This project has measured outcomes primarily using the UCLA scores to indicate impact on the mum. Other impacts reported from across all the local Home-Starts involved (not just those in the focus groups) included:

#### Benefits to young new mums:

- Feedback via Parent Infant Partnership (PIP): change in 17 year old mum "I feel like a mum rather than a big sister"
- Willingness to 'pitch in' playing with another's child, getting self a second drink evidence of mum relaxing into the safe space
- Confidence increase in meeting new people and joining in discussions
- Confidence in engaging with other services
- Less anxious regarding their children around other babies and their child's behaviour worries about bad behaviour and dealing with it in front of people at the group have faded
- Meeting new people and enjoying doing so have referred onto friends
- On phones less! Gaining more confidence as a capable mother by spending quality time with their children
- Previously attending nothing, now using universal groups (eg HS stay and play, and other external)
- Continued breastfeeding when they might not otherwise have done
- Taking more care of themselves, eg their appearance
- Going on to become volunteers themselves
- Supported bonding with new baby
- The feeling of being included
- An opportunity to see that other mums share their concerns, regardless of age
- Opportunity for role modelling
- Access to other support legal, budgeting, housing, health etc
- Increased baby development awareness (eg importance of early interaction)
- Learning about people with different backgrounds and experiences; seeing the other's perspective





Home-Starts York and Glasgow North were supported by our project partners to make videos about the difference the project made to young mums they worked with, with the mums themselves:







#### Benefits to children:

- As above! If mum feels better it benefits the kids. If mum hasn't left the house, in many cases neither has the child
- Increased confidence with others adults and children
- Benefits of massage from their mother
- Spending more time with mum on activities such as crafts, playdoh, messy play and floor play
- Opportunity to try different foods
- Range of indoor and outdoor activities
- Reading more books

#### Benefits to local Home-Start:

- Generally, increased work with FNP
- Experience of working with young mums, whether it was a new area for them or not all are different
- "Mums under 25 are now part of our Home-Start."
- Reaching out into the community and finding a need for a service from residents in the area
- Providing a good group to combat issues identified with parents under 25
- Working in partnership to provide a service which had proved to be in need
- Mums self-referring to other HS groups parent and toddler, Holiday Allsorts
- Further funding or evidence for it
- Some referrals for home-visiting are no longer needed, as mums feels the need has decreased since attending groups
- The benefit of having a group which is visible in the community, rather than a service only delivered in the home and therefore invisible to other service providers

#### Benefits to Volunteers:

- The group is a "Breath of fresh air"
- It's a new experience being out of the home environment not just 1:1, having more babies all together
- Volunteers have shared positive stories between themselves
- Seeing mums take the next step out of the home
- Used to visiting slightly older mums, who are possibly more complex?
- Giving back to community, feeling valued, giving advice
- It's a different kind of communication in a group
- Even where volunteers were already from group settings they still valued the experience
- Broadening communication skills with younger people and adjusting their interactions with them
- Learning the current going's on in the local community and what life looks like for a young person today as a mother and a young person in their own right
- Volunteers were not used in the end at HOST, and only 2 were used in Wirral. This was because although they were offered the opportunity and some showed an interest they could not commit for the whole programme. It was felt that consistency of support was important



- All volunteers at Wirral were offered '5 ways to wellbeing' training
- Gave those volunteers whose skills are best used in groups an opportunity. They increased their knowledge of isolation
- It is part of 'building a portfolio of life experiences'
- They found a new forte



Volunteers at Home-Start Glasgow North

Everyone at Home-Start Glasgow North's Nurture Group has different experiences to share; mums, staff and volunteers included. They come from diverse backgrounds and the group has been a great opportunity for all to learn and extend knowledge about all aspects of life including culture, values, beliefs and of course parenting! Our volunteers have shared their journeys which included negotiating a way through the complex asylum process, student life and the isolation and loneliness of being new in Glasgow.

## Benefits to other agencies:

• Generally, more partnership.

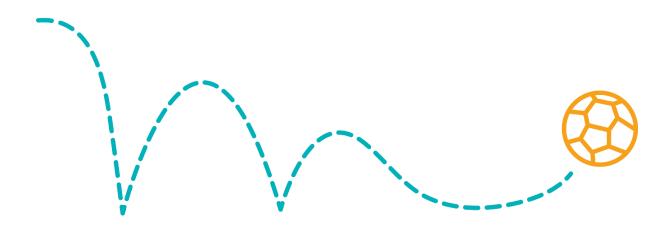


- Lead professionals invited themselves to the new group
- Activities to refer young new mums into
- An increase in young new mums accessing local services
- Opportunity for shared learning
- Support to meet local engagement targets

### Wider Benefits:

- Wider benefits to the community when younger people are becoming more involved in it

   example of one mother who joined the group situated in the local church hall now
   attending messy church there with her 6 month old. She has since involved her cousin and
   2 year old to join them
- Being confident to get involved is a great life skill to learn for later job gaining and studies to better the economy and their own sense of wellbeing and mental health
- A local Children's Centre where one group ran is now re-establishing a young mums group which had been dwindling
- Helped to evidence work in key areas such as improving mental health and well being
- Encouraging dads to join a dads group
- De-escalation of child in need/ child protection plan issues





In May 2019 British Red Cross and Co-op hosted a national conference on behalf of the Loneliness Action Group entitled "From policy to action: where next for loneliness?" The event brought together over 100 people from charities, funders, business and government, working on reducing loneliness.

Anna, a young mum from the Home-Start Croydon group, took part in a panel discussion on the day. She spoke of her experience of creating an identity for herself after her baby was born, and raised the profile of the isolation facing young mothers. This benefited Anna, Home-Start and hopefully those listening to her story from other agencies and in the wider community.



Anna, third from left, participating in the conference panel



### Summary - What activities are most successful in tackling loneliness and isolation?

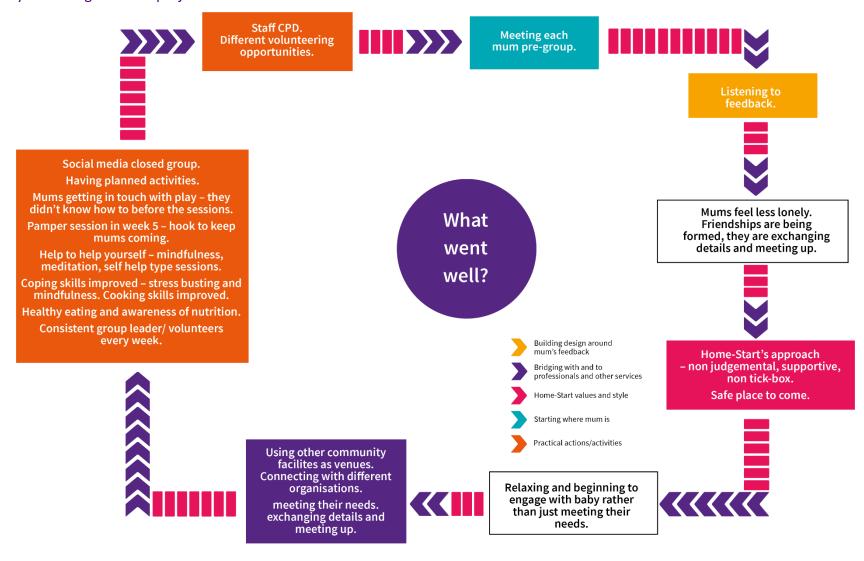
Some of the local Home-Starts involved in this project were running a course they had run before, or a variant of it. Others were gaining their first experience of group work, or their first experience of group work with this target group. As a result activities were very varied, and feedback on what worked also differed. Those who were well established in providing groups such as baby massage, Bump Start/Bumps and Beyond or Fit for Life were confident in the activities they offered, and knew from experience that mums would come and take part in them. Others tried different approaches and different activities, taking feedback from mums and adjusting their offers to find what suited them (a theme from question one). Even 'added extras' like offering transport or a crèche were considered vital by some while not making any difference to others.

Overall, there wasn't a specific 'most successful' activity. Everyone started with a plan, but in most places these plans were flexible, with the most important factor being the engagement of the mums. Some things worked in some areas and not others – coffee in Croydon was a hit, coffee in HOST was a lonely affair! The successful part was getting to know the mums and thinking about how to meet their needs – and not giving up. This further continues the themes from question one – starting where mum is and using the Home-Start values and style also apply in answering this question.

Engagement with the mums led to a range of impacts, not just for the mums and their children, but the volunteers, the local Home-Start, other agencies and the wider community. These impacts suggest that the activities built confidence, not just in the mums, but across the board. From that confidence mum relaxed and was on her phone less, children joined in more, the Home-Start started understanding young mums better, the volunteers saw a new side to their role and other agencies saw new potential in Home-Start. Young mums with more confidence may go on to go out and about more, meet up with others and have more opportunities to form friendships, which can be a support through loneliness and isolation.

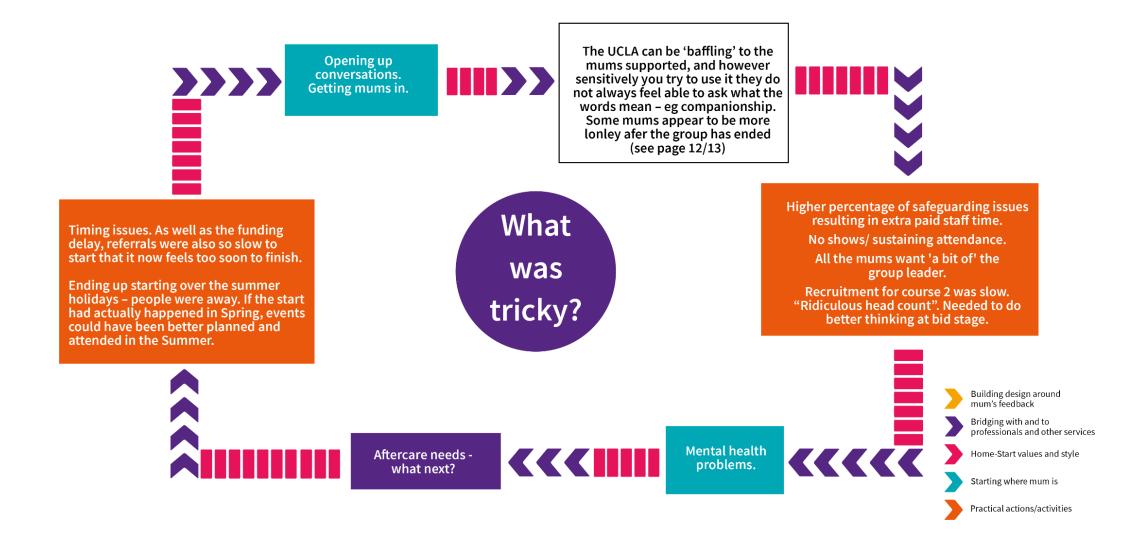


Summary - Learning from the project



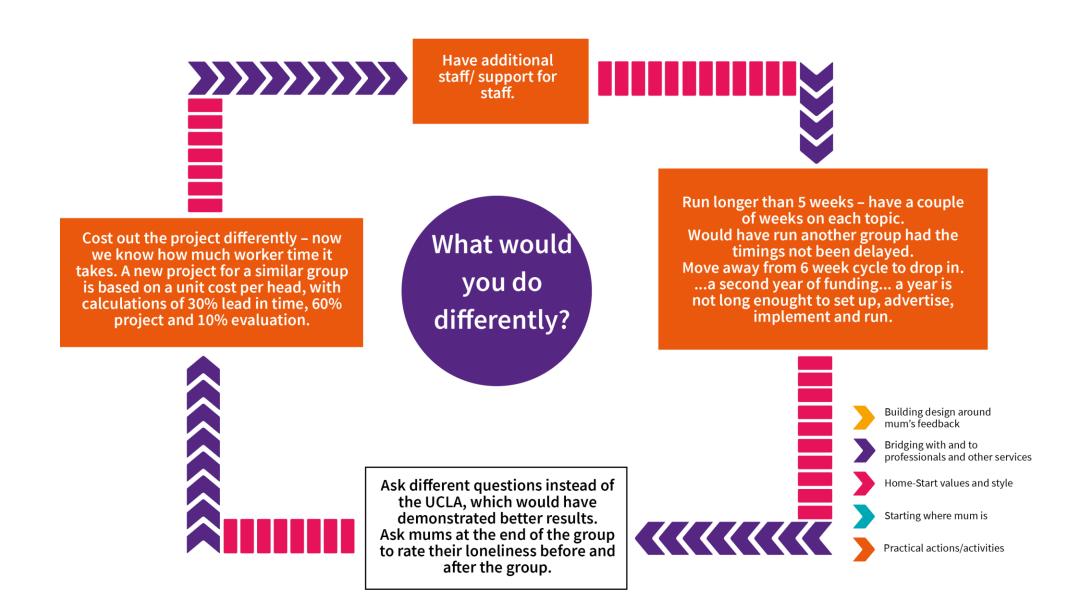
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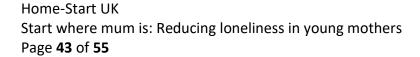




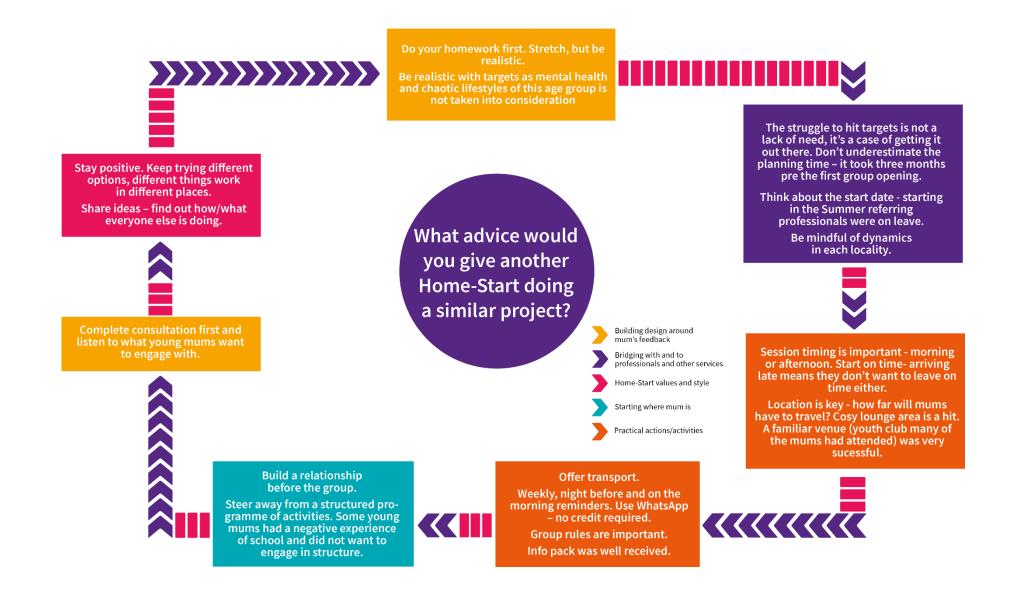
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Most of these points line up with the themes established earlier. One or two were very specific to the project, particularly around the outcomes and outcome measures.

Home-Starts also considered the place this project had in the bigger picture, both for themselves and the mums they were supporting:

✓ Don't expect big changes over night. Be aware that support can be two steps forward and one step back throughout this process. Be mindful to celebrate small changes as they occur.

Positive outcomes can only be achieved by long term investment in building rapport and trusting relationships with young parents. A short term intervention with a quick fix approach will not provide young parents with what they need in order to strive towards their future aspirations and goals.

And a final piece of advice asks that we think again about the focus of our service:

For us, we believe in having inclusive groups rather than providing separate exclusive groups for young mums. In the past our Home-Start staff have been involved in helping to run a local young mums group, including 'pop-up' versions of the group, travelling around to other areas. The attendance of young mums was so inconsistent that the service had to be withdrawn as take-up was so poor. Since then, we have done all we can to encourage young mums to access existing groups that we run. We find we are told similar stories by dads – they don't necessarily want a separate group, they just want to know that they are welcome and included at other existing groups.

Our focus groups discussed this too. The Northern group thought the focus on mums was good. Partners sometimes came to events/meet ups, but the observation was that the mum then stuck to their partner. The feeling was (from mums and staff) that it was good to be independent from dad.

In the Southern group feedback was "It goes against the grain to target mums rather than parents".

Three local Home-Starts independently gave the same response when asked 'what advice would you give another Home-Start doing a similar project?' - 'Do it!'



#### Recommendations

### Start where mum is

Allow relationship building time. In this project, with the most vulnerable mums, even after we found them they weren't ready to just come to a group. Some mums had weeks of individual support before attending their first group.

Know what engagement looks like. Are you meeting mum in her home before the group / as well as the group? Will you meet in a public place? Will you send her reminders about the group? How? When? Who will take the time to do this and respond to any replies?

### Build design around mum's feedback

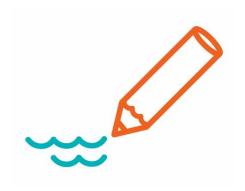
Consult. What do your target audience want? Think about the difference between what they want and what they may 'need'. Are you considering what they want or what others around them want? In this project there were generally activity plans which mums contributed to as their confidence grew. They weren't ready to "co-produce" from day 1, but they still had opinions, and responding to those increased their ownership of the groups as time went on.

If you have a funder, what do they want? Can you satisfy both them and the target audience?

Build in realistic targets. Have you worked with this specific group before? Can you talk to others who have? What were the challenges?

### Bridge with and to professionals and other services

Research. What else is out there for this group? Does a lack of other similar groups mean unmet demand or no demand? Even if there are young mums experiencing loneliness in your area, that doesn't mean they want to join a group. Could you support people who fall through the gaps in other services? Why are there gaps in other services? How are you going to make sure your group members can continue to flourish after your project?





## Values and style

Young mums told us they felt judged, and this stopped them engaging with services. Create a safe space that is different to others, by tailoring your support and proving your investment in the relationship.

Think about the words you use and way you offer advice. Young mums may not identify with the terms 'lonely' or 'isolated', particularly before they begin engaging. Some terms can also carry stigma and judgement – does a young mum want to tell a stranger they feel lonely?

## **Practical actions/activities**

This isn't just about the activities you will offer. Can you offer transport or a crèche (what will happen if you do/don't), what time of day you will run, how long your sessions will be, how many there will be, will they be drop in, how do people move on and where to?

Allow planning time. Lead-in time in this project was much longer than anticipated, meaning early numbers were low and at the end of the funding some sites felt they had just begun. Besides time to build relationships with vulnerable young people; do you have a venue, do you have to get in to meetings with referring professionals, do you need to run a recruitment campaign and training for staff/volunteers?



# Appendices Appendix 1 – MESH factors

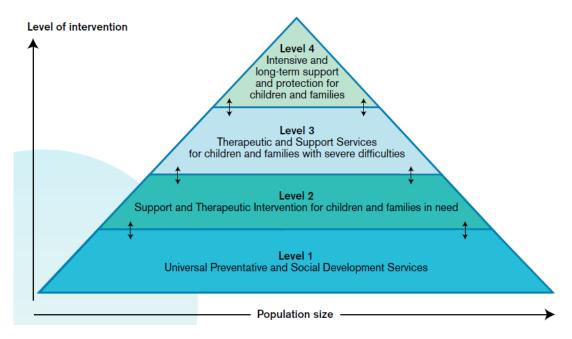
### A. PARENTING SKILLS

- 1. Managing children's behaviour, listening to children and respecting their rights
- 2. Being involved in the children's development/early learning and socialisation
- **B. PARENTING WELL-BEING**
- 3. Coping with physical health
- 4. Coping with mental health
- 5. Coping with feeling isolated
- 6. Parent's self-esteem
- C. CHILDREN'S WELL-BEING
- 7. Coping with child's physical health
- 8. Coping with child's mental health
- D. FAMILY MANAGEMENT
- 9. Managing the household budget
- 10. The day-to-day running of the home
- 11. Stress caused by conflict in the family
- 12. Coping with extra work caused by multiple birth/children under 5
- 13. Use of services
- 14. Other
- 15. Parents own learning needs



### Appendix 2 – The Hardiker Model

Hardiker, Exton and Barker 1991



The Model outlines four levels of intervention as follows:2

Level 1: refers to those mainstream services that are available to all children — health care, education, leisure and a range of other services provided in communities. It also offers the potential for targeting resources through community development initiatives such as parent and toddler groups, community houses and women's groups which may be available to the whole community but particularly targeted at disadvantaged communities.

**Level 2:** represents services to children who have some additional needs. Services at Level 2 are characterised by referral, and full parental consent and negotiation. Examples would be Behaviour Support, Parenting Support, additional Educational services, and support for children who are deemed vulnerable through an assessment of what their need is, and via targeted specific services provided by education, health, social services, law enforcement and the voluntary sector.

**Level 3:** represents support to families or individual children and young people where there are chronic or serious problems. Support is often provided through a complex mix of services which usually need to work together well in order to provide the best support.

State intervention can have a high profile at this level. Examples would be child

<sup>&</sup>lt;sup>2</sup> Centre for Effective Services (2010). An introductory guide to key terms and interagency initiatives in use in the Children's Services Committees in Ireland. CES Reference Paper 1<sup>st</sup> Edition, June, 2010.





<sup>&</sup>lt;sup>1</sup> Department of Children and Youth Affairs (2012). Working Together for Children. Toolkit for the Development of a Children's Services Committee. 2<sup>nd</sup> Edition. Government Publications, Dublin.

ren on the Child Protection Register or who have come before the Courts.

**Level 4:** represents support for families and individual children or young people where the family has broken down temporarily or permanently where the child or young person maybe looked after by social services. It can a lso include young people in youth custody or prison or as an inpatient due to disability or mental health problems.



# Appendix 3 – The evaluation questions

## 1. How does Home-Start reach lonely isolated young mums?

- 1. How did you promote your new group?
  - Flyers Who designed them?

Where did you put them?

- Visits Who by?

Who to?

- Phone calls Who by?

Who to?

- Social media Which channel?

Paid or free?

- Other Please give details
- 2. Did you promote your group:
  - To mums directly
  - To professionals
  - Both
- 3. How did mums get to join the group?
  - Self referral
  - Referral by a professional

Please list the job titles of all those from whom you received a referral, with those you had the most from at the top:

- 4. Did your promotional material feature any of the following words (please indicate all that apply):
  - lonely / loneliness
  - young mum
  - under 25
  - companionship

Home-Start UK

Start where mum is: Reducing loneliness in young mothers

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-	- left out				
-	- isolated				
5. Did yo	you offer any support to any of the mums be n?	efore they attended their first group			
-	- Yes - No				
6. If yes,	s, what form did this support take?				
-	- Home-visiting (beyond an initial visit)				
-	- Phone calls				
-	- Text message reminders				
-	- Text message/Messenger/WhatsApp chat				
-	- Social media contact				
-	- Other – please provide details				
	understand young new mums feel judged. H eer to peer approach is to a lonely young mu	-			
8. Did yo	you offer any kind of support with transport	to/from your group meetings?			
-	- Yes - No				
9. Whet worked	ether you offered it or not, how important is d with?	transport support to the mums you			
_	- Makes no difference				
-	- It helps, but they'd come anyway				
-	- Its vital				
10. Thin way?	nking about your original project plan, were	there any significant changes along the			

2. What activities are most successful in tackling loneliness and isolation?

H<sub>G</sub>ME START

1	Was v	/Our	groun	programme	structure.
Τ.	vvas	youi	group	programme	structure.

- planned week by week, one week at a time
- following a pre-set plan from the start eg week 1 craft, week 2 cookery, week 3 nail art etc.
- 2. Which best describes the choices mums made in relation to the activities?
- mums chose to join our group which has a pre-set, pre-advertised programme
- activities are provided as they are available; mums choose whether to attend each week
- mums met at the start and we created the programme together
- mums choose week by week what to do next
- 3. This project has measured outcomes primarily using the UCLA scores to indicate impact on the mum.

Please note any other impacts you have experienced/witnessed:

Benefits to young new mums:	
Benefits to children:	
Benefits to local Home-Start:	
Benefits to Volunteers:	
Benefits to other agencies:	
Wider Benefits:	

# 3. Learning from the project

- 1. What went well?
- 2. What was tricky?
- 3. What would you do differently?
- 4. What advice would you give another Home-Start doing a similar project?



# **About Home-Start**

Home-Start is a local community network of trained volunteers and expert support helping families with young children through their challenging times.

Without a stable, loving and nurturing environment, a very young child will not develop the vital foundations they need. Home-Start is there for parents when they need us most us the most, because childhood can't wait.

## www.home-start.org.uk

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