

**WHAT PARENTS WANT FROM DIRECT ACCESS TO EDUCATIONAL  
PSYCHOLOGISTS IN A CHILDREN'S CENTRE.**

**by**

**Lorraine. M. Jebbett**

**Submitted to  
The University of Birmingham  
in part fulfilment for the degree of Doctorate in Applied Educational and Child  
Psychology**

**School of Education  
The University of Birmingham  
June 2011**

UNIVERSITY OF  
BIRMINGHAM

**University of Birmingham Research Archive**

**e-theses repository**

This unpublished thesis/dissertation is copyright of the author and/or third parties. The intellectual property rights of the author or third parties in respect of this work are as defined by The Copyright Designs and Patents Act 1988 or as modified by any successor legislation.

Any use made of information contained in this thesis/dissertation must be in accordance with that legislation and must be properly acknowledged. Further distribution or reproduction in any format is prohibited without the permission of the copyright holder.

## **ABSTRACT**

Increasingly, Educational Psychology Services are opening their provision to parents in community settings such as Children's Centres (Davis et al 2008), but, there has been little research regarding what parents want from this provision. Eleven parents who attended a Children's Centre in the West Midlands, participated in semi-structured interviews (including sort card activities) designed to explore what they wanted from the opportunity to meet directly with an Educational Psychologist (EP). Transcripts of interviews were subjected to thematic analysis. Many parents reported wanting support at a community and personal level, (relating to a range of difficulties e.g. behaviour) and appeared to view difficulties that a child experiences as being 'down to' parenting skills. Parents therefore reported feelings of shame and embarrassment and wanted an EP to help build confidence in their parenting skills and to provide advice, information, techniques and direction. Parents valued EPs' training, knowledge and experience and wanted this to be utilised to offer a unique/different perspective and to help them better understand their child. A solution focused consultation approach appears to be most aligned to what parents want. The findings also showed that some parents did not know what an EP does and equated EP work with psychiatry. EPs therefore need to advertise their role and to be approachable and accessible.

## **ACKNOWLEDGEMENTS**

I would like to thank the Children's Centre staff, particularly the centre manager for her support and interest with this research. This includes help in advertising my research and providing a room in which to carry out the interviews.

I should also acknowledge and thank the EP who invited me to undertake this research in a Children's Centre in which she had planned to deliver a service. I also thank her for providing feedback and suggestion to the materials that I had developed.

Many thanks go to the parents who took part in, and showed an interest in this research.

Finally, I am very grateful to my academic supervisor - Sue Morris, for the invaluable active support, and thorough feedback and interest that she has provided throughout.

## Table of contents

<b>CHAPTER ONE: INTRODUCTION AND LITERATURE REVIEW</b>	<b>1</b>
1.1.0: Background	1
1.1.1: Engagement and working in partnership with parents	2
1.1.2: Targeted early intervention	4
1.1.3: The Sure Start programme	5
1.1.4: Context of this research	9
1.2.0: Community and parenting influences on a child's development	10
1.2.1: Bronfenbrenner's theory of child development	11
1.2.2: Parental involvement and environmental/community factors	14
1.2.3: Building effective home-school collaboration	16
1.3.0: EPs' practice in working with parents	18
1.3.1: Parents' views of EPs' work	18
1.3.2: Evidence of EP practice in working with parents	20
1.3.3: Empowerment of parents and the community	22
1.3.4: Power and partnership with parents	22
1.3.5: Community Psychology	26
1.4.0: Parents and Sure Start/Children's Centres	29
1.4.1: Partnership with parents in Sure Start/Children's Centres	29
1.4.2: Factors associated with parental participation in Sure Start/Children's Centres	30
1.4.3: Parents shaping the provision in Sure Start/Children's Centres	32
1.5.0: EPs and Sure Start/Children's Centres	34
1.5.1: EPs working within Sure Start/Children's Centres	34
1.5.2: Feedback from parents informing EP practice in Sure Start/Children's Centres	40
1.6.0: Research questions	43
 <b>CHAPTER TWO: METHODOLOGY AND DESIGN</b>	 <b>44</b>
2.1: Epistemological and ontological position	44
2.2: Choice of data gathering method	48
2.3: Design	50
2.4: Ethical considerations	54
2.5: Procedure	56
2.6: Thematic Analysis	59
2.7.0: What was done and why	61
2.7.1: Phase 1 - familiarise with the data	61
2.7.2: Phase 2 - generating initial codes	62
2.7.3: Phase 3 - searching for themes	63
2.7.4: Phase 4 - reviewing themes	64
2.7.5: Phase 5 - defining and naming themes	65
2.7.6: Phase 6 - producing the report	65
2.8: Responding to threats to validity in data collection and analysis	67

<b>CHAPTER THREE: RESULTS AND DISCUSSION</b>	<b>71</b>
3.1.1: Children's Centre	72
3.1.1(i): Children's Centre is the main community focus	73
3.1.1(ii): Children's Centre provides parents with opportunity to socialise and make friends	73
3.1.1(iii): Children's centre staff are helpful/supportive	74
3.1.2: Community	75
3.1.2(i): Friendly supportive community	75
3.1.2(ii): Plenty of activities and facilities in the community/Children's Centre	76
3.1.2(iii): Difficulties in the community	77
3.1.3: Summary and discussion of themes relating to the community	78
3.2.0.0 Themes relating to EP work	79
3.2.1.1: What parents hope/believe EPs could provide to them	79
3.2.1.1(i): Support for difficulties in the local community	80
3.2.1.1(ii): Support for difficulties of personal relevance	80
3.2.1.1(iii): Parents would like emotional support	84
3.2.1.1(iv): Parents would like advice/information/direction/techniques	85
3.2.1.1(v): Parents would like EPs to provide a greater understanding	86
3.2.1.2: Summary and discussion of what parents hope/believe EPs could provide	88
3.2.2.1: EPs' unique contribution	94
3.2.2.1(i): EPs' training, knowledge and experience is valued	94
3.2.2.1(ii): EPs provide a different perspective	95
3.2.2.1(iii): Improvements associated with EP input	96
3.2.2.2: Summary and discussion of EPs' unique contribution	97
3.2.3.1: Barriers to consulting an EP	100
3.2.3.1(i): Lack of knowledge regarding what EPs do	100
3.2.3.1(ii): EPs deal with serious/psychiatric difficulties	101
3.2.3.1(iii): Need for EPs to advertise their role	102
3.2.3.2: Summary and discussion of barriers to consulting an EP	103
3.2.4.1: Deficit model of parenting	104
3.2.4.1(i): Aversive feelings	105
3.2.4.1(ii): EPs need to be approachable and accessible	106
3.2.4.2: Summary and discussion of deficit model of parenting	108
 <b>CHAPTER FOUR: GENERAL DISCUSSION AND CONCLUSION</b>	 <b>111</b>
4.1: What parents want from direct access to EPs in a community setting	111
4.2: EPs' unique contribution	113
4.3: Impact and limitations of the research	114
4.4: Conclusion	118

<b>References</b>	.....120
Appendix I – Staff information sheet	.....138
Appendix II - Questions prepared for the staff meeting	.....143
Appendix III - Information from the staff meeting	.....146
Appendix IV – Public domain briefing (literature summary)	.....150
Appendix V – Script for EP role	.....155
Appendix VI - Parent interview schedule	.....157
Appendix VII - Information and consent sheet for parents	.....161
Appendix VIII – Poster/leaflet advertisement	.....166
Appendix IX – Sample transcripts	.....168
Appendix X – Sample table of codes/themes	.....180
Appendix XI – Diary of research activity	.....194
Appendix XII – Coded extracts	.....196
Appendix XIII – Public domain briefing (findings)	.....253

## List of Tables

Table 1: The principles of Community Psychology	.....28
Table 2: Extracts regarding lack of knowledge of what EPs do	.....53
Table 3: Parent profile	.....58
Table 4: Extracts relating to fathers' secondary parenting role	.....66
Table 5: Extracts regarding Children's Centre the main community focus	.....73
Table 6: Extracts regarding Children's Centre provides opportunity to socialise	.....74
Table 7: Extracts regarding Children's Centre staff	.....74
Table 8: Extracts regarding the community	.....75
Table 9: Extracts regarding support from family/partner	.....76
Table 10: Extracts regarding activities in the community	.....76
Table 11: Extracts regarding difficulties in the community	.....77
Table 12: Extracts regarding support for difficulties in the local community	.....80
Table 13: Extracts regarding support for difficulties of personal relevance	.....81
Table 14: Extracts of 'other' comments made during the sort card activity (topics)	.....83
Table 15: Extracts regarding formal learning	.....83
Table 16: Extracts regarding little emphasis on learning	.....84
Table 17: Extracts regarding emotional support for parents	.....85
Table 18: Extracts regarding EPs helpfully providing advice/direction	.....86
Table 19: Extracts regarding a greater understanding	.....87
Table 20: Extract suggesting 'within child' factors	.....87
Table 21: Extracts regarding psychologists' knowledge and training valued	.....94
Table 22: Extracts regarding EPs' different perspective	.....95
Table 23: Extracts regarding improvements associated with EP input	.....96
Table 24: Extracts regarding lack of knowledge of EP role	.....99
Table 25: Extracts regarding exceptions to lack of knowledge of EP role	.....101
Table 26: Extracts regarding EPs deal with serious problems	.....102
Table 27: Extracts regarding EPs' need to advertise their role	.....102
Table 28: Extracts regarding changing expectations of EP role (pre-activity)	.....104
Table 29: Extracts regarding changing expectations of EP role (post-activity)	.....104
Table 30: Extracts regarding avoiding aversive feelings	.....105
Table 31: Extracts regarding EPs needing to be approachable and accessible	.....107



## **List of Figures**

Figure 1: Conceptual map of the themes relating to the community	.....72
Figure 2: Conceptual map of the themes relevant to EP work	.....79
Figure 3: Topics that parents reported would be helpful for an EP to cover	.....82
Figure 4: Activities that parents reported would be helpful for an EP to undertake	.....88
Figure 5: Ways of working that parents reported would be helpful for an EP to offer	.....107

# **CHAPTER ONE: INTRODUCTION AND LITERATURE REVIEW**

## **1.1.0: Background**

The role of the Educational Psychologist (EP) has developed in response to government legislation such as Every Child Matters (ECM): Change for Children (DfES, 2004) that specifies five outcomes for children (being healthy, staying safe, making a positive contribution, enjoying and achieving, and achieving economic well-being) that professionals working within children services were required to work towards. The ECM agenda and the Children Act (2004) emphasise early identification of needs and multi-agency working with parents and children being central to the framework for change. Furthermore, they promote improved access for parents to universal services e.g. for information and advice, and to targeted and specialist support for additional needs. The policy envisaged that services would be delivered through multi-agency teams linked with extended schools and Children's Centres.

Since the change in government to the Conservative and Liberal Democrat Coalition in May 2010, there has been some uncertainty regarding the status of the ECM agenda with some speculating that the new government maybe moving away from the ECM agenda as suggested in changes in terminology used by the coalition government (e.g. replacing 'Every Child Matters' with 'help children achieve more') (Barker, 2011). Currently however, information about ECM and the five outcomes for children can be viewed on the DfE website (DfE, 2011a).

### **1.1.1 Engagement and working in partnership with parents**

As well as the ECM agenda, there are a number of government reports and guidance that highlight the importance of working in partnership with parents to support children, including those that relate to provision for children with Special Educational Needs (SEN). The SEN code of practice (DfES, 2001) for example, has a chapter devoted to working in partnership with parents. More recently, the House of Commons Education and Skills Committee published *Special Educational Needs: Assessment and Funding (2007)* that identified parental confidence in the special educational needs assessment system as a key concern. Part of the government's response to this was to establish an inquiry led by Lamb to investigate ways in which parental confidence in the SEN assessment process might be improved. The inquiry (DCSF, 2009a) collected information from a number of sources including a web-based survey that elicited responses from 1,941 parents and the findings from eight projects in different Local Authorities (LAs) that provided an insight into the range of ways in which parental confidence can be increased.

The inquiry (DCSF, 2009a) found that the most successful projects were those that actively engaged with parents in development work, and that the benefits seemed to arise from the engagement with parents, as well as from project-specific characteristics. Other key findings include that parents reported a need to be listened to more, and Lamb proposed a radical overhaul of the system which focuses efforts on better outcomes for children, suggesting the need for a:

“... profound cultural change in the way schools and local authorities relate to parents.” (DCSF, 2009a; P3).

The Lamb report envisages greater engagement with parents and suggests that:

“Parents should be able to access the information that they need, when they need it, in ways that are convenient to them.” (DCSF, 2009a; P3).

and that:

“The system should not be designed around the presumption of failure but support parents in helping children succeed.” (DCSF, 2009a; P5).

The inquiry puts forward a number of recommendations, including the development of a set of principles for engagement by schools and children’s services with parents of children with SEN, and that an evaluation of different models of Educational Psychology Services (EPSs) should be conducted that examines their impact on outcomes for children and parental confidence. The inquiry reports that some EPSs already provide direct access to parents, such as the service in Solihull that has developed direct access to parents (and other community members) through a helpline and consultation request forms. It is reported that this early and positive engagement with parents can increase parents’ confidence that services are responsive to children’s needs.

This is consistent with principles of good practice reported in the DfEE report ‘Educational Psychology Services (England): Current Role, Good Practice and Future Directions (2000)’ that include the recommendation that parents should have direct access to EPs. Davis et al (2008) report that EPs are increasingly involved in community bases as well as school settings (e.g. MacKay, 2006; King & Wilson, 2006; Davis & Cahill, 2006) and that Sure Start /Children’s Centres provide excellent opportunities for new ways of working, and in particular for working collaboratively with parents. This shift in EPs’ practice occurred, in part, in recognition of the importance of early intervention and the role that the family and community play in the academic progress and wellbeing of children and young people.

More recently, the Department for Education (DfE, 2011b) has published a Green Paper inviting consultation regarding a new approach to SEN and disability. Included in the paper are proposed changes to the identification and assessment of Special Education Needs that may be later set out in legislation, and also greater control and influence to parents over SEN processes. The paper also states that:

“Where educational psychologists are deployed to work directly with families, this can help parents to understand their child’s needs and the support that will enable the child to fulfil his or her potential. Increasingly, local services are responding to this by providing direct access to educational psychologists for parents, for example through helplines.” (DfE, 2011b; P105).

The paper further states:

“We want to encourage educational psychologists, as well as local authorities and schools that commission their services, to work in a more flexible manner that is responsive to the needs of the local community.” (DfE, 2011b; P104).

### **1.1.2: Targeted early intervention**

Davis et al (2008) argue that a focus on local need has created opportunity for EPs to contribute early intervention and prevention activities. An example is reported by Bickford-Smith et al (2005) in which an EP with a Speech and Language Therapist undertook research in a Children’s Centre that identified language and cognitive development needs in a cohort of children that led to a borough-wide intervention. Glass (1999) reports that in 1997 the Labour Government undertook a review of services for young children. Part of the review aimed to examine whether the causes of social exclusion, and the ways in which these impacted on young children could be ‘more effectively tackled at the family and community level’ with an integrated service delivery approach. As the review evolved, evidence indicated that intervention would be most effective if targeted at early years. Among the conclusions drawn from the

review was that early development was highly vulnerable to environmental influences and that multiple disadvantage in early years increased the likelihood of social exclusion in later life. The review also highlighted differences in the quality of service provision across localities, and went on to suggest that effective intervention should:

- involve both parents as well as children;
- not stigmatise families (e.g. avoid labelling ‘problem families’);
- target a number of factors (e.g. not health nor education in isolation);
- be locally driven through the involvement and consultation with families and the local community;
- be ‘culturally appropriate’ and sensitive to families needs; and
- be of sufficient length to make a difference. (Glass, 1999; P262).

### **1.1.3: The Sure Start programme**

Glass (1999) reports that in 1998 the Government announced the Sure Start programme as an intervention that aimed to promote children’s physical, intellectual, social and emotional development and facilitate opportunities for early learning by improving services and working for children under four years and their families in areas of need. It was intended to promote long term outcomes (e.g. improved educational performance and less criminality and teenage pregnancy).

Bagley and Ackerley (2006) report that when, in 1999 the Sure Start programme was introduced, expectations were explicit regarding ‘working with parents’, and quote the following terms set out for Sure Start:

“To work with parents-to-be, parents and children to promote the physical, intellectual and social development of babies and young children – particularly those who are disadvantaged – so that they flourish at home and when they go to school, and thereby break the

cycle of disadvantage for the current generation of younger children (Sure Start, 2000; P1).” (Bagley & Ackerley, 2006; P721).

They argue that in relation to Sure Start...

“the policy discourse spoke directly to a ‘bottom-up’ model of working and the fact that partnership working was not simply about the involvement of individuals and families, but an acknowledgement of existing strengths, and their utilization on the planning and delivery of the programme.” (Bagley & Ackerley, 2006; P721).

Furthermore, Avis et al (2007) argue that Sure Start programmes were designed to work in consultation with local stakeholders in order to target local priorities and needs (Glass, 1999) and ensure that parents are attracted to the service because of its relevance to their circumstances (Tunstill et al, 2005).

Sure Start Children’s Centres evolved from Sure Start local programmes. The Department for Children, Schools and Families website (DCSF, Dec 2009b) states that by 2010, every community will be served by a Sure Start Children’s Centre that aims to improve outcomes for all children. The universal provision of Children’s Centres distinguishes them from the Sure Start programmes which offered provision to only the most deprived communities. The roll out of Children’s Centres comprise three phases:

- Phase one, running in 2004 – 2006, targeted the 20% most deprived areas in the country and subsumed Sure Start programmes;
- Phase two, running in 2006-2008, increased the provision to the 30% most deprived communities; and
- Phase three, running in 2008-2010, extended the provision to outside the most 30% most deprived areas (Children, Schools and Families Committee, 2010).

Thus, by 2010 Children's Centres should be available to all families that have children under the age of five years.

Children's Centres may differ according to the service that they provide with centres in the 30% most disadvantaged areas having to provide a full range of services.

Centres outside of the 30% most disadvantaged areas have greater flexibility in what service they offer (above a minimum requirement) in accord with local need and existing provision (DfES/DoH, 2006). Guidance regarding good practice is set out in the DfES/DoH's, (2006) 'Practice Guidance for Sure Start Children's Centres' that aims to promote consistent good practice.

As well as the practice guidance, Children's Centres are to conform to statutory duties set out in the Children's Act 2006 as amended by the Apprenticeships, Skills, Children and Learning Act 2009. The Act refers to Sure Start Children's Centre in law and places duties on Local Authorities to establish and run sufficient provision of centres to meet local need. The statutory duties also include that Centres engage parents and the wider community and represent their views in the planning of service provision and any significant changes anticipated to a Centre. The Department for Education (2010) provided guidance intended to support Local Authorities in how to comply with their statutory duties.

The Children's Act also places a duty on Ofsted to inspect the Children's Centres and Ofsted (2010) produced a framework setting out the principles and processes applied in undertaking the inspections. Areas of inspection include the Centres' identification and engagement with parents who would otherwise be unlikely to take advantage of the service. All Children's Centres in England (with the exception of those which have been established for less than three years) are to be inspected by Ofsted between



April 2010 and Aug 2015, with re-inspection to take place within a five year cycle (Ofsted, 2010).

Local Authorities therefore have the responsibility for the delivery of Children's Centres in relation to planning the development of the Centres to meet the needs of the communities they serve, in consultation with key partners such as parents.

However, a review commissioned by the government in 2010 into poverty and life chances (Field, 2010) recommends that:

“Sure Start Children's Centres should re-focus on their original purpose and identify, reach and provide targeted help to the most disadvantaged families.” (Field, 2010; P7).

The review also recommends LAs...

“open up the commissioning of Children's Centres, or services within them, to the service providers...” (Field, 2010; P7).

and ...

“should aim to make Children's Centres a hub of the local community. They should maintain some universal services so that Centres are welcoming, inclusive, socially mixed and non-stigmatising, but aim to target services towards those who can benefit from them most.” (Field, 2010; P7).

Given the ethos of developing services around the needs of the community and that EPSs are opening their provision to parents in Sure Start/Children's Centres, it is important to explore what parents want from direct access to EPs in such settings. Information gathered from my own research may help shape future provision in a local community and inform the currently evolving role of Educational Psychology within my own employing LA.

#### **1.1.4: Context of this research**

The EPS in which I work has a team of EPs who have a specialism in 'Early Years and Parenting' work. The work undertaken by the team includes the delivery of training packages (along with another early years agency), and community work. The community work is funded through a Children's Centre network in accordance with a Service Level Agreement and includes the delivery of parenting programmes. Other work undertaken within the agreement includes EPs attending Children's Centres to make themselves available for consultation with parents and staff members. The agreement does not cover casework as there is an existing route for referral to the EPS.

I wanted to use my research to inform EPs' work in a Children's Centre and the EPS more generally. I therefore asked the EPs within the team whether they considered that my proposed research would be of value to their work, in which case, I would conduct the research in a centre which was likely to be attended by an EP in the near future so that the research would have direct relevance within the chosen setting.

One EP had told me that she was about to start working from a centre and she invited me to attend a networking lunch to meet the staff who work from the centre. I attended the centre and spoke with the manager about my research and she then invited me to join a staff meeting to talk further about my proposed research. I took the opportunity during the staff meeting to gain some background information regarding the centre and the local community (a list of questions that I had developed for this purpose and information and consent forms can be seen in Appendices I and II). I made notes during the meeting and submitted these to the centre manager to check for accuracy (the information gained from the meeting can be seen in

Appendix III). Of note, were centre staff beliefs that parents may have preconceived ideas about what psychologists do, and believe that there is something wrong with them or their child if they need to speak with a psychologist. Staff also suggested that there was a high probability that parents did not know what an EP does.

The centre is a 'phase two' centre that covers eight wards (ranked as 10%-30% of the most deprived areas nationally - according to the centre's annual report submitted to the LA which cannot be referenced as this will compromise the centre's anonymity) and a population of around 815 children. The centre is situated on the grounds of a primary school and was formerly a nursery unit in a special school before becoming a community facility when the special school moved. The centre also operates some sessions from satellite bases as part of 'outreach' work. Centre staff include a Family Support Worker, Early Years Workers, Sessional Workers and visiting professionals such as a Speech and Language Therapist and a Health Visitor. The centre offers a range of facilities and activities that include a swimming pool, 'Stay and Play' sessions, 'Baby Massage' sessions, and sessions for parents with children less than one year of age and Childminders.

Prior to commencing the research, I circulated a public domain briefing within the EPS in which I work and the Children's Centre that provided a summary of the main literature and rationale for the research (see Appendix IV). The following section presents the literature relating to my chosen field of research.

### **1.2.0: Community and parenting influences on a child's development**

Research into the distinctive contribution of EPs (Farrell et al, 2006) found that EPs contribute in a number of ways, including applying knowledge and skills relating to

the psychological impact of different 'conditions' on the child, family and community. EPs would generally claim to work systemically by recognising these complex recursive influences on a child's development. This section presents the literature relating to external influences on child development.

### **1.2.1: Bronfenbrenner's theory of child development**

The importance of environmental influences on a child's development was recognised by Bronfenbrenner (1977, 1979) in his ecological systems theory of child development. In this work he highlighted four interrelating contexts or systems:

- Microsystem – the face to face settings in which the child directly interacts (e.g. family, pre-school etc) at a moment in time;
- Mesosystem – the connections between two or more microsystems (e.g. the links between the family and school microsystems) at a particular point in life;
- Exosystem – the connections with external contexts that indirectly influence child development. An example that is sometimes given is a parents' place of work that may induce stress in the parent that may potentially impact on their interaction with their child (Bronfenbrenner, 2005); and
- Macrosystem – the socio-cultural context (e.g. government, culture etc). This level influences interactions at all the above levels of context.

The systems are described like a set of Russian Dolls with systems nested within each other (Bronfenbrenner, 1979 & 1994).

The principles of the ecological systems theory include that development takes place through the child's experiences of interaction with contexts such as family and community settings and the theory therefore provides a rationale for adopting a

‘systems’ rather than a ‘within child’ approach in supporting child development.

Bronfenbrenner highlighted the need to work both individually and collectively and for communities to support families to raise children. Indeed, he argued that processes of human development may be applied to policy to promote healthy human development (Bronfenbrenner, 1974; Lerner, 2002) and he was one of the founders of the Head Start program in the United States of America (Lerner, 2005). That is not to say that Bronfenbrenner did not recognise the role of the individual in shaping their environment. Bronfenbrenner continued to critique and develop his theory until his death in 2005.

Bronfenbrenner’s work can be represented in two distinct stages: his early work culminating in the ecological model of child development, and his work along with his colleagues from 1990s onwards (e.g. Bronfenbrenner, 2001; Bronfenbrenner & Ceci, 1993, 1994; Bronfenbrenner & Morris, 1998) culminating in what has become known as the ‘mature’ form or bioecological theory, that adds emphasis to the role of the individual and their characteristics (e.g. biology, psychology and behaviour) in influencing their environment (Tudge et al, 2009; Bronfenbrenner, 2005; Lerner, 2005). In addition to the emphasis of the recursive influence of the individual and the context, Bronfenbrenner’s work in the 1990s defined proximal processes as ‘a key factor in development’. Bronfenbrenner (2001) for instance argued:

“Over the life course, human development takes place throughout life through processes of progressively more complex reciprocal interaction between an active evolving biopsychological human organism and the persons, objects and symbols in its immediate external environment. To be effective, the interaction must occur on a fairly regular basis over extended periods of time. Such enduring forms of interaction in the immediate environment are referred to as proximal processes.” (Bronfenbrenner, 2001; P6965).

The components of the bioecological theory constitute what has become to be known as the Process-Person-Context-Time model (PPCT) (Tudge et al, 2009). The four PPCT concepts in the model are related and are described below:

- Process - the process of development involving the dynamic relation between the individual and context;
- Person – the characteristics of the individual (e.g. biology, cognition, emotion and behaviour);
- Context - the nested systems of the ecological theory as described above;
- Time – multi-dimensions of time such as microtime (e.g. time during a specific activity); mesotime (e.g. regularity of activities during a time period) and macrotime described as a ‘chronosystem’ – which refers to the variation of developmental processes in accord with historical events (Trudge et al, 2009; Bronfenbrenner & Morris, 1998).

Thus, child development is seen as taking place through reciprocal interaction with the environment, principally through proximal processes and the bioecological theory has been construed as a ‘dynamic, person context relational view’ (Lerner, 2005). Bronfenbrenner and Morris (1998) also acknowledge that the characteristic of the person/s with whom the child interacts within the microsystems also play a role as illustrated in the following quote...

“the three types of person characterises outlined above are also incorporated into the definition of the microsystem as characteristics of the parents, relatives, close friends, teachers, mentors, co-workers, spouses, or others who participate in the life of the developing person on a fairly regular basis over extended periods of time.” (Bronfenbrenner & Morris, 1998; P995).

The following section highlights the literature relating to parenting and environmental community factors that can influence outcomes for children.

### **1.2.2: Parental involvement and environmental/community factors**

There is evidence that a parent's participation with agencies and/or in education settings, can promote a child's development, thus supporting Bronfenbrenner's notion that exosystems impact on child development. Desforges and Abouchaar (2003) for instance, report that it is widely recognised that full parental support is required for pupils to maximise their potential.

The English Government's strategy for securing parental involvement was first set out in the 'Excellence in Schools' White Paper (DfEE, 1997). Part of the strategy included encouraging parental partnership with schools. Desforges and Abouchaar (2003) noted that regardless of policies, some parents were already involved in enhancing the educational progress and development of their children through activities such as good parenting, school visits etc. This spontaneous activity was thought to contribute positively to educational progress.

Desforges and Abouchaar report that although there have been widespread attempts to enhance parental involvement, there remains a significant gap in the levels of attainment between children in different social classes associated with different levels of parental involvement. In light of this, the Department for Education and Skills (DfES) commissioned a literature review of the research evidence on the relationship between parenting and pupil achievement/engagement. Desforges and Abouchaar (2003) concluded from the literature review that 'at-home' good parenting has a significant positive effect on the academic achievement and adjustment of children.

The impact of parental involvement was seen as a bigger contributor to attainment than differences associated with the quality of schools. Desforges and Abouchaar suggested that this is due to parenting shaping the child's self-concept as a learner and through setting high aspirations. Furthermore, Desforges and Abouchaar found that:

“Differences between parents in their level of involvement are associated with social class, poverty, health and also parental perception of their role and their levels of confidence in fulfilling it. Some parents are put off by feeling put down by schools and teachers.” (Desforges & Abouchaar; 2003; P5).

They cite Crozier (1999) who interviewed parents regarding home-school relations, and found that many 'working class parents' perceived teachers as 'superior and distant' and that teachers engaged with parents only on their own terms. This was viewed as unhelpful in not encouraging parents to be proactive in partnerships.

Desforges and Abouchaar (2003) therefore argue that...

“whilst there is a broadly held desire amongst parents for more involvement in schooling there are clearly material (time and money) and psychological barriers which operate differentially (and discriminatingly) across the social classes and individual differences amongst parents that operate within social classes.” (Desforges & Abouchaar, 2003; P43).

Raffaele and Knoff (1999) argue that rather than blaming parents for their lack of involvement in their children's schools, the organisational climate and the covert messages that are sent to parents from school should be examined. They advocate that a proactive approach to connecting with parents is required that is based on respect and trust. Furthermore, they argue that meaningful collaboration/partnership with parents is particularly important during the pre-school years when a child is developing basic skills, and for families that experience social and/or economic



disadvantage. However, what parents do (e.g. providing a home environment that promotes learning through activities such as reading, painting, teaching the alphabet etc) is thought to have a greater impact on outcomes for children than parental social class or income (Sylva et al, 2004).

### **1.2.3: Building effective home-school collaboration**

Based on their experiences of working within schools and a literature review, Raffaele and Knoff (1999) suggest effective home-school collaboration:

- is proactive and relates to all families, not just families with children who are experiencing difficulties;
- involves sensitivity to all cultural backgrounds;
- recognises and values the important contributions that parents make, and communicates this message; and
- engenders parental empowerment through meaningful two-way communication. (Raffaele & Knoff, 1999; P252).

They argue that an ecological approach to building effective home-school collaboration is required that involves many people to facilitate a range of support, collaborative values and interactions, and needs to be viewed within the context of the resources and people of the community. Furthermore, they propose a number of phases should form part of a strategic planning process towards effective collaboration that includes:

- an external scan and analysis of the community's human and material resources and existing links;

- an analysis of the stakeholders' perceptions and expectations that identify parents' views of needs or priorities and determines their current involvement;
- an internal scan of the school to identify its strengths, weakness and barriers to collaboration that may inform necessary adjustments;
- a public awareness process that helps to involve all stakeholders and reinforces that the home and community are equal partners from the beginning.

Raffaele & Knoff suggest that these activities define a needs assessment and...

“initiates a process that has a high degree of motivation, commitment, and momentum as well as a high probability of success.” (Raffaele & Knoff, 1999; P460).

Raffaele and Knoff (1999) argue that school psychologists are particularly well placed to guide the planning and implementation process for a number of reasons, including their understanding of child development, the impact of parenting and home-school actions, and their assessment, problem solving and consultation skills.

Thus, there appears to be evidence from Desforges and Abouchaar's (2003) substantial review of the available literature and to a lesser extent from Raffaele and Knoff's (1999) study based on a relatively older literature review and their experience as school psychologists based in the United States, that parental participation is associated with better outcomes for children particularly for families from disadvantaged areas and during the early years. The evidence also suggests the importance of EPs working *with* parents to promote better outcome for children. It could be argued that EPs might effectively promote positive outcomes for children through adopting a 'bottom-up' approach in developing systems of working with parents.

### **1.3.0: EPs' practice in working with parents**

The following section reviews the literature relating to EP practice in working with parents.

#### **1.3.1: Parents' views of EPs' work**

Squires et al (2007) explored parents' views of EPs' contributions to the Every Child Matters outcomes for children as part of a review funded by the Department for Educational and Skills. They collated data gathered through questionnaires that were sent to three hundred parents in ten local authorities that explored the parents' views of EPs' assessment and intervention work with their child. Thirty percent of the questionnaires were returned and parents' responses indicated that they had valued the EPs' contributions towards the outcomes for their child highly. However, some of the parents' comments indicated a need for more information regarding what EPs do, how to access them and more direct work with families. Furthermore, Squires et al (2007) argue that parents might view EPs as being part of schools' bureaucratic system for the provision of additional resources or as part of the school organisational system.

They report that a previous study by Cuckle and Bamford (2000) found that most parents were satisfied with the service they received from an EPS and that it had impacted on one of the Every Child Matters outcomes for their child. However, there were some improvements that could be made e.g. parents would like more involvement with, and information from EPs, earlier EP involvement and thirty percent had expressed that they were dissatisfied with the time taken to see an EP.

Cuckle and Bamford (2000) evaluated parents' views of an EPS, to generate recommendations to ensure that: the service was effective and efficient; the service

was able to carry out its statutory duties for SEN; and psychologists' skills were being used optimally. One of the purposes of the research was to contribute to the implementation of the Department for Education and Employment (1997) recommendations regarding partnerships between parents and agencies involved in SEN. The study group comprised senior members of the local education authority, representatives from a University, head-teachers and members of the Association of Educational Psychologists. The study also aimed to ensure that users of the service were involved in determining the service provided to them.

Five hundred questionnaires that aimed to gather parents' 'general views' of the EPS were sent to a random sample of parents who had accessed different services (e.g. pre-school, parent surgeries, and psychological assessment relating to SEN). The questionnaires asked whether the service was as expected, available when expected, had helped, and whether parents were satisfied with the service. In addition, open ended questions invited comments. The response rate to the questionnaires was relatively low at seventeen percent. Thirty parents, who were randomly selected from those who had answered the questionnaires, were interviewed over the telephone. The interview allowed a more detailed exploration regarding the service they had received (e.g. the time they had waited to see an EP, whether their child was helped etc).

The study found that most satisfaction was associated with early years services and child guidance services. Parents reported having particularly valued professionals' input on alternative ways to interpret behaviour. The principal sources of dissatisfaction related to statutory assessments. The researchers also found that in relation to 'parent surgeries' where parents had the opportunity to have a

consultation session, there was generally much dissatisfaction and frustration.

Cuckle and Bamford report that parents often attended the session because they wanted a statement for their child that was not forthcoming and parents complained about the lengthy wait for assessments and inadequate help in school. Cuckle and Bamford suggested that their findings have implications for EPS practice including:

“Parents need to be helped to understand the limitations of the services in relation to multiple problems (e.g. social, family, marital) that they and their children may be experiencing. Parents need to understand the roles of different services to avoid confusion. Professionals need to understand parents’ expectations so that parents feel they are being helped.” (Cuckle & Bamford, 2000; P369).

This suggests that it is important to find out what parents might want and expect from a service and that they might require a service that works more holistically in relation to the family. Indeed, Squires et al (2007) suggest that:

“It is possible that where there is reduced direct time allocation to schools, and with increased emphasis upon specialist EP posts and paraprofessional roles, EPs may more effectively hold a direct work “caseload” of children and families.” (Squires et al, 2007; P356).

### **1.3.2: Evidence of EP practice in working with parents**

Sykes et al (2007) published research commissioned by the Division of Educational and Child Psychology (DECP) into EP practice in working with parents. The research was undertaken by a working party of EPs who collected a wealth of data using a number of methods including questionnaires for practising EPs, focus groups and semi-structured interviews with parents, an examination of the available literature and service policy documents and leaflets. The findings were presented in a report entitled: *‘Clarifying and Developing the Role of the EP in Relation to all Aspects of Parent and Carer Partnership, Advocacy and Training’* (2008) which stated:

“There is no current and little historical research into how EPs work with parents”. (Sykes et al, 2007; P22).

Questionnaire responses provided by EPs indicated that 33% of EPs described their work with parents as ‘collaborative’ and this was taken to suggest that:

“EPs are aware and keen to work in a systemic manner with parents and schools to enhance the achievement of children and young people, in spite of the pressure of statutory work.” (Sykes et al, 2007; P30).

On the basis of their findings, the DECP developed a framework for an ethical and ‘parent- friendly’ EPS. The framework has a number of indicators such as:

- how the unique knowledge of parents is valued;
- reciprocal relationships where parents are equal agents of change in all consultations and interventions;
- the empowering of parents by building on their strengths;
- parents’ participation in deciding the preferred method of intervention (unless child protection issues prevent this); and
- protocols for evaluating work with parents.

The above studies provide some evidence to suggest that there needs to be clarity regarding parents’ expectations and the EP role. Whilst there is limited evidence regarding how EPs work with parents prior to the Squires et al (2007) study, their evidence would appear to suggest that in order to work most effectively with parents EPs should endeavour to work in partnership with them. However, Squires et al (2007) report that the House of Commons Education and Skills Committee on special educational needs (2006) stated that:

“Too often, however, problems arise because parents feel ignored or that their views and preferences are not being given proper consideration under the current system.” (Squires et al, 2007; P344).

The literature relating to working in partnership with parents is presented below.

### **1.3.3: Empowerment of parents and the community**

The notion of partnership relates to concepts of power. This section presents the literature regarding working in partnership with parents along with literature relating to Community Psychology which is concerned with empowering a community to respond to its needs.

### **1.3.4: Power and partnership with parents**

The notion of power has been discussed in terms of partnership with parents.

Wolfendale (1983) for instance provides a definition of an 'authentic partnership' as a relationship between parents and professionals where parents:

- are active and central in decision-making processes and implementation;
- are perceived as having equal expertise and strengths;
- contribute as well as receive services; and
- share responsibility and have mutual accountability with professionals.

Dale (1996) argues that parents do not always experience equal relationships with professionals because they are affected by power imbalances. Dale (1996) identified a number of frameworks of partnership between parents and professionals that include models where the professional retains the power (the 'expert model' - where professionals are seen as holding expert knowledge and the parent's role is mainly limited to providing information).

From the 1970s the exclusion of parents has been challenged. One of the arguments against the expert model is that a lack of parental involvement may lead to a mismatch between the parent's and professionals' goals (Cunningham & Davis,

1985; Marteau et al, 1987). A narrow focus on the child also excludes aspects of the child's world such as the family members who may influence the effectiveness of any intervention and the wellbeing of child (Dale 1996). This led to what has been described as the 'transplant relationship' model (Mittler & Mittler, 1983), where professionals transplant their skills to the parents so that parents could play a role in intervention and provide feedback to the professional. However, like the expert model – the professional retains the power in decision-making.

In the 1980s, Parent Partnership Schemes (PPS) were introduced that provide information and support to parents who have a child undergoing statutory assessment for special educational needs. Thus, there was a power shift towards parents to get involved in the assessment and intervention process. This led on to the consumer model of partnership (Cunningham & Davis, 1985). Here the parent is given the status of 'expert' in recognition of their knowledge of their child. Parents are also given the right to opt out of and 'buy into' services for their child. The professionals' role is to provide knowledge and options to support the parent in making effective decisions. The professional and parent now engage in a negotiation process to reach mutually acceptable agreements, but the parent ultimately holds the final control in decision-making. Thus, the power in this relationship is held by the parent rather than surrendered to the professional as we see in the 'empowerment' model (Appleton & Minchom, 1991) that combines the right of the parent as a consumer with the recognition that the family is a social system with social relationships within the family and the wider social group (friends, cultural groups etc). This model considers the need of the professional to examine how to empower the parent and promote their sense of control over decisions regarding their child,



and to adopt an approach sensitive to parents' rights to get involved in professional services. Some parents may require services delivered in an expert or transplant model and these options may be put forward by the professional. Hartas (2008) suggests that there is an expectation with this model of working that professionals will identify the strengths and needs of the family and incorporate these into the assessment and intervention process. However, this model assumes that parents and professionals can always work effectively together, unlike the negotiation model (Dale, 1996).

This negotiation model recognises that the parent and professional will often hold different perspectives (ways of construing the situation) when they meet. Dale (1996) defines this model as...

“a working relationship where the partners use negotiation and joint decision-making and resolve differences of opinion and disagreement, in order to reach some kind of shared perspective or jointly agreed decisions on issues of mutual concern.” (Dale, 1996; P14).

The professional strives to bridge the gap between perspectives by learning about the parent's perspective and adopting different roles (expert, facilitator etc) that are to be negotiated with the parent. The professional also offers advice and helps the parent to evaluate their options.

The above models offer useful insights into working relationships between parents and professionals according to the power balance within the relationship. However, the models do not explain the advantages of adopting a partnership over a non-partnership relationship. Why partnership working is seen as holding greater value is explored below. Dale (1996) in her book lists a number of reasons why parental involvement is desirable in working relationships, including that the professional

needs parental cooperation to do their own job effectively (DES Plowden Report, 1967; DHSS Court Report, 1976; DES Warnock Report, 1978) and parents' unique knowledge of the child can be harnessed to make a significant contribution to the child's development. Furthermore, parents can learn new skills to apply in the home setting, and it is more effective to help parents become more able to care for a child compared to focusing on the child alone (Davis & Rushton, 1991). Dale (1996) quotes Quine and Rutter (1994) who argue that:

“Unless professionals work alongside parents supportively, their actions can have a disabling impact on the parent (see DHSS Court Report 1976; DES Warnock Report, 1978). For example, parents may feel undermined in their confidence to care for their child by professional criticisms. Insensitive interactions by professionals have been shown to have a direct bearing on parents' emotional recovery from the initial trauma of diagnosis.” (Dale, 1996; P25).

Working in an authentic partnership includes empowering parents to have control over the decisions made. A study by Melhuish et al (2007) examined the impact on the implementation of the Sure Start principles such as empowerment on child and parenting outcomes. They used a variety of measures of outcomes including data from the British Ability Scales (BASII: Eliot, Smith & McCulloch, 1996) for 36-month-olds; maternal acceptance (described as 'avoidance of scolding/spanking/restraining'); negative parenting (e.g. 'parent/child conflict'); harsh discipline (e.g. smacking, swearing); the home learning environment (e.g. 'reading and learning songs') and social competence (e.g. from Goodmans' 1997, Strengths and Difficulties Questionnaire). They found that empowerment is particularly related to maternal acceptance and the home learning environment. They argue that:

“The enhanced effectiveness for parenting may promote child well-being, given evidence from several countries that maternal acceptance is related to more competent child functioning (e.g. Bradley, 2002) and

research in the UK showing that the home learning environment has comparable beneficial effects.” (Melhuish, 2007; P549).

However, Melhuish et al (2007) do not describe the mechanisms behind how empowering parents promotes better outcomes. Community Psychology principles go some way to address this.

### **1.3.5: Community Psychology**

The principles of empowerment and working in partnership with parents along with the adoption of an ecological stance that has been advocated in the literature above, has commonalities with Community Psychology. Loxley (1978) argues that Educational Psychology was built on Community Psychology principles but that EP practice had become removed from its Community Psychology roots as can be seen in practice that appears to pay little attention to the psychology of schools, and the needs of the community, by contrast with the amount of attention focused on individual children. He argues that Community Psychologists...

“take as problematic, not the question of ‘diagnosis’ but the nature of the relationships between people within communities. It is concerned with the social phenomena of interaction, the implicit rules and symbols of social discourse. One works with a client or a number of clients, in meeting the demands of a particular situation, rather than working on a ‘case’ or problem individual. The community is the field in which the psychologist actually works, located physically by the neighbourhood (of which the home and school are for EPs perhaps the most salient parts).” (Loxley, 1978; P109).

Loxley also argues that living and learning are inseparable and that EPs would be more honest if they highlighted the ecological variables (e.g. living conditions) that contribute to learning and that EPs should be concerned with the school as a

community organisation that is in constant interaction with a larger community. EPs should therefore ask how the needs of a community are met by these organisations. Thus, rather than Community Psychology being a separate branch of psychology, some theorists argue that the roots of Educational Psychology are one and the same as Community Psychology but that these roots have been lost. A reconstructionist movement in the 1970s (Gillham, 1978) called for a reaffirming of Community Psychology within EP practice, and this movement has recently been renewed by a new wave of practitioners such as Jones (2006) who asks:

“Are EPs working in the community already?’ and ‘Can there be a non community EP?” (Jones, 2006; P17).

Furthermore, MacKay (2006) states that:

“The birthright of Educational Psychology in Britain was founded on a vision of the profession as inseparable from Community Psychology.” (MacKay, 2006; P7).

Community Psychology focuses on the interaction between the individual and the social environment on a person’s well-being, and aims to make applied psychology more effective in being responsive to the needs and wants of the community (Bender, 1976). This is reflected in Orford’s (1995) list of principles of Community Psychology (modified from Rappaport’s 1977 list of dimensions of community mental health) that are shown in the Table below.

Thus, Community Psychology recognises the individual as being shaped through interactions with their environment and is also concerned with understanding and being responsive to the needs of the community, building capacity and social capital through empowering members of the community to support each other and help themselves. Furthermore, it emphasises prevention and early intervention through

identifying and reacting to risk factors in the community. Community Psychologists therefore are likely to partake in action research projects in order to promote social justice and likely to be located within the community.

<ul style="list-style-type: none"> <li>• Assumptions about causes of problems: An interaction, over time, between person and social settings and systems, including the structure of social support and social power.</li> <li>• Levels of analysis: From micro-level to macro, especially at the level of the organisation and the community or neighbourhood.</li> <li>• Research methods: Include quasi-experimental designs, qualitative research, action research, and case-study methods.</li> <li>• Location of practice: As near as possible to the relevant, everyday social contexts.</li> <li>• Approach to planning services: Proactive, 'seeking out', assessing needs and special risks in community.</li> <li>• Practice emphasis: On prevention rather than treatment.</li> <li>• Attitude to sharing psychology with others: Positive towards formal and informal ways of sharing, including consultation.</li> <li>• Position on working with non-professionals: Strongly encouraging of self-help and non-professional and seeks to facilitate and collaborate.</li> </ul>
---

**Table 1: The principles of Community Psychology**

EPs working from Children's Centres might be said to conform to the development of Community Psychology through the broadening of the provision to parents and by being located within the community. Booth (2009) highlighted a number of parallels between Orford's (2008) foundations and assumptions regarding Community Psychology and her practice and epistemological stance as an EP. However, Booth argues that EPSs wishing to develop a Community Psychology orientation should develop a number of things, including a better understanding of Community Psychology and a systemic perspective in applying psychology in the community.

Furthermore, Cullen (2004) - an EP working within a team delivering services through a Sure Start programme, describes core principles of Sure Start: co-ordination of services, involvement of families, removal of stigma, continuity of support and participation of clients in programme design and implementation. She states that the central aim of Sure Start is to promote the health and well-being of families, support individual children, families and community change. It is envisaged that this will include improvement in social and emotional development, health and children's ability to learn, and will strengthen families and communities.

The above literature describes empowerment of parents and the community but provides little evidence regarding how this impacts on outcomes. The section below presents the literature regarding the evidence from working in partnership with parents in Sure Start/Children's Centres and the impact this has made.

#### **1.4.0: Parents and Sure Start/Children's Centres**

The following section presents studies relating to the parent participation in Sure Start/Children's Centre provision and planning of services.

#### **1.4.1: Partnership with parents in Sure Start/Children's Centres**

Morrow and Malin (2004) point out that the notion of working in partnership with parents and parental involvement and participation is an important aspect of Sure Start programmes. This is illustrated in the requirement set out in the service delivery agreement that all Sure Start programmes should have parent representatives on the programme board. However, Boot and Macdonald (2006) undertook an evaluation of Sure Start activities in an area of South Wales in 2004 on improvements to child

development and benefits to parents. They collected child development measures as well as parents' views relating to activities within a Behaviour Support Programme, Parent and Toddler groups and Playgroups. They concluded that although there were positive responses to local Sure Start programmes in Wales there is...

“some kind of deficit operating between professionals offering the service and real involvement by parents in developing the service further.” (Boot & Macdonald, 2006; P280).

They argue that adapting the service to develop a parent/professional partnership model would improve the effectiveness of the service both in the short and long term. This is in accordance with Gustaffson and Driver (2005) who drew on evidence from the National Evaluation to explore issues that facilitate parents in the transition from Sure Start user to a partnership role in governance. They suggested that positive interaction between the parent and professional will influence parental involvement and they assume that...

“parental participation in local programmes will ensure that local family services will better meet the needs of young children and their families.” (Gustaffson & Driver, 2005; P534).

#### **1.4.2: Factors associated with parental participation in Sure Start/Children's Centres**

Avis et al (2007) explored the factors that promote or hinder parental participation in Sure Start programmes, and identified methods for improving parental engagement. They conducted semi-structured interviews with sixty parents registered at two Sure Start programmes in the East Midlands in city areas associated with social exclusion and disadvantage. The interviews explored perceptions of the role of Sure Start and factors that influence attendance at events. The parents were categorised as either

frequent or non-frequent users of Sure Start services. Thematic analysis was used to abstract themes that would inform the development of the Sure Start programme and Children's Centres. The data were organised into three main themes: reasons for engaging with Sure Start, reasons for not engaging in Sure Start and unmet expectations. Findings relating to each of these themes are described below.

The main reasons for engaging were making social contact (mediating feelings of social isolation experienced whilst caring for young children), sharing information regarding community resources, and building job-related skills. Parents acknowledged too that they could get advice whilst playing with their children or in discussion groups without feeling that it was 'being rammed down their throats'. Parents reported that by being able to helpfully contribute their experiences to others, they also gained increased self-confidence. Parents also said that they were more likely to attend Sure Start via invitations received in the form of newsletters, phone calls or friendship schemes.

Parents' main reasons for not engaging in Sure Start included lack of social confidence and distrust of others, including staff and other parents: such parents said that they liked to 'keep myself to myself'. Parents were also worried about expressing opinions different from others and getting into conflict. They were also concerned about potential interference by staff and agencies such as social services. There were also practical barriers such as timing of events, inappropriate venues, and transport difficulties. Some parents had unmet expectations regarding Sure Start e.g. the anticipated services did not materialise. The most frequently expressed suggestion for improvement was for more activities for parents.



As well as the practical barriers to participation, Avis et al also report that research has shown that there are psychosocial barriers to participation, including feelings of helplessness and/or fear of authority (e.g. Simpson 2002; Kellingbeck, 2003).

Avis et al (2007) suggest that:

“Local Sure Start programmes need to keep revisiting parents’ motivations for accessing services, exploring the relevance of services to local people, and reflecting on the reasons parents may find it difficult to participate in the local Sure Start programme.” (Avis et al, 2007; P204).

#### **1.4.3: Parents shaping the provision in Sure Start/Children’s Centres**

There is some evidence that Sure Start programmes are engaging parents to take an active role in shaping the provision offered in their community. Bagley and Ackerley (2006) examined the policy surrounding Sure Start programmes and suggested that...

“a major principle underpinning the initiative relates to meaningful ‘parental involvement’ and ‘partnership’ in decisions regarding the planning, administration and delivery of local early years services”. (Bagley & Ackerley, 2006; P722).

Thus, Sure Start programmes are based on the premise that parents would play an active part in shaping the service provided at the centres. Bagley and Ackerley (2006) go on to state that:

“Research suggests that participation of the local community in the planning of community services ensures that new services will more effectively meet the community’s needs (Beresford & Croft, 1992; Barnes & Shardlow, 1996; Forbes & Sashidharan, 1997; Hart et al, 1997; Warren, 1997).” (Bagley & Ackerley, 2006; P718).

Furthermore, they report that:

“Simpson et al, (2003; P277) suggest for local initiative to become sustainable, community capacity building must start with people and not projects, ‘a process that builds on local strengths and promotes

community participation and leadership, as well as ownership of both the problems and the solutions'." (Bagley & Ackerley, 2006; P719).

Bagley and Ackerley (2006) undertook research at the University of Durham to explore the views of parents' registered at a Sure Start programme situated in what is described as a working class community and as one of the fifteen most deprived districts in the country. To do this they gathered attendance data and data from observations at meetings and semi-structured interviews with fifty parents. They observed that the Sure Start team had worked with parents, addressing their concerns and priorities in the planning of the programme and that local parents were involved in all aspects of design and implementation of the programme, including a large number who were involved in developing the local delivery plan. The Sure Start team had also developed individual and family capacity by consulting with them regarding what training they would like and providing corresponding courses. Bagley and Ackerley report that the general perception among parents was one of feeling that the team were accessible and of a collaborative approach in identifying and meeting local needs. This positive attitude of parents in the community towards Sure Start was reported to be reflected in their willingness to participate both in terms of attendance and direct involvement. Shaping the programme to meet the needs of the community rather than having the programme imposed on them was thought to be in keeping with building social capital in the community, promoting empowerment, partnership, and a move away from the notion of the professional as 'expert', and greater parental participation in the programme. This research therefore highlights the value of bottom up research in shaping provision and engaging with parents.

The above studies report mixed evidence with regards to the level of participation that parents had in shaping Sure Start/Children's Centre provision and some anecdotal evidence that parent involvement in shaping the provision is associated greater parental participation in the service. However, the research does not include views regarding potential services delivered by EPs. There is, however, evidence that EPs are working from Sure Start/Children's Centres as described below. How, EPs have worked with parents in developing their service in Sure Start/Children's Centres is presented in the next section.

#### **1.5.0: EPs and Sure Start/Children's Centres**

The following section presents the literature regarding EPs working with Sure Start/Children's centres.

#### **1.5.1: EPs working within Sure Start/Children's Centres**

Davis et al (2008) work within the Community Educational Psychology Service in the London Borough of Barking and Dagenham. They were commissioned by the Association of Educational Psychologists to investigate the role of EPs in undertaking multi-agency work in Sure Start local projects. The research was funded by the Children's Workforce Development Council.

Davis et al (2008) report that Sure Start/Children's Centres provide excellent opportunities for EPs to work collaboratively with parents. Furthermore, they report that a focus on local need has created an opportunity for EPs to contribute to early intervention and prevention activities. They surveyed opinions of EPs (Principal Educational Psychologists and/or senior EPs) from every EPS in England and Wales

regarding their perceptions of the benefits and difficulties encountered in working in Sure Start Local Projects and how they planned to develop this aspect of service delivery in the future. They used a grounded theory approach and found that 55% of the total respondents said that they consulted with parents in Sure Start projects that involved both bespoke (e.g. supporting parents with their child's social and emotional development through focusing on parent interaction) and generic programmes (e.g. The Incredible Years parenting support programme).

They report the opportunities in working this way include:

- greater breadth of work for EPs, including comments regarding moving away from working exclusively with children with SEN towards working with communities and families and the opportunity to work in a systemic, ecosystemic and community-based way; and
- improved relationships with parents.

Davis et al report that individual services had linked with stakeholders to understand the local priorities and position themselves to meet these priorities. An example was given of a London authority in which an EP met with centre managers to inform them of their service availability, consult them regarding the future role of EPs, and provide a menu of activities. However, no further details were given regarding this research or related published accounts and there was no mention of exploration of parents' views.

Barriers identified to EPs' working in Sure Start projects included a lack of a strategic level of agreement concerning the relevance and role of EPs in Children's Centres and a need to know other people's roles so that decisions can be made regarding who does what. Thus, research regarding the division of labour and the

distinctiveness of EPs' roles in working within Sure Start/Children's Centres is likely to be of value. They conclude that:

“Sure Start local projects and their successors are likely to continue to provide a positive context for developing educational psychology practice in the future.” (Davis et al, 2008; P4).

Cullen (2004) provides anecdotal evidence of the usefulness of the EP's role in one Sure Start project. Cullen was a specialist senior EP with responsibility to provide EP input to a Sure Start programme. The Sure Start programme resulted from a successful bid by the local authority to target a socio-economically challenged area. The EPS produced a proposal for an additional EP post to ensure EP input into the programme, based on the premise that there would be benefits associated with support for families with behaviour management and the increasing number of children with social communication difficulties.

Cullen described the rationale, context and implementation of EP input in a multi-agency team that included three EPs, two family support workers and a specialist teacher. The team had a remit of delivering a 'distinctive psychological component and approach'. Cullen reports that she initially struggled with the identification of the roles and functions of team members, but that, although there were challenges in clarification of the roles and functions, each team member had a distinctive contribution to make.

Cullen listed the roles and functions of team members which show that the EPs' role included all functions within the team. The EP role was distinct from the family workers and teacher in that the EPs held the strategic functions (e.g. project planning, financial management) as well as conducting research, supervision and evaluating direct work. All team members undertook direct work with schools and

families and networking. Family workers and the teacher differed in terms of whether their role included training of professionals and undertaking parent/carers groups. Cullen did not describe the psychological approach/es that was/were used, nor distinguish between the roles the EP, teacher and family worker undertook in direct work with families and schools. Furthermore, Cullen did not provide any examples of the type or nature of work undertaken by the team. However, Cullen reports that a model of practice was set out that emphasised a 'case by case' approach in which she considers that the direct work with families was extremely varied, but worthwhile. She states that...

“ethically grounded, theoretically informed and scientifically rigorous professional psychology is an important and distinctive part of Sure Start” (Cullen, 2004; P52).

Cullen reports a number of challenges in setting up the team that include issues relating to the source of referrals (e.g. schools, parents, colleagues) and a need for an agreed intervention plan relating to clients' priority areas. Other reported challenges related to the development of clear, specific and time-limited interventions that families perceived to make a real difference, and the promotion of the team in order to extend the client group and range of services (e.g. to include 'drop-ins' and workshops). Cullen identified areas for service development including the establishment of clear exit and success criteria for casework, and the development of Community Psychology for the EPS.

Similarly to Cullen, Imich (2004) reports on the experiences of four EPs who provided a service to Sure Start in Essex, and early observations of the EP contribution. He advocates that Sure Start has the potential to support children up to 14yrs (16yrs for those with SEN and/or disabilities) as well as parents and communities, and presents

EPs with a new setting in which to apply psychology. At the time of writing, EPs were funded by Sure Start to provide a direct service to three Sure Start programmes with plans for extending this. EPs saw this as an opportunity to work directly with the community and were reported to be working closely with other professionals including speech therapists, specialist teachers and health visitors. EP work included developing speech and language programmes, designing and delivering training, supporting transition to school and attendance at 'drop in centres'. It is reported that EPs recognised a need to gain the trust of the local community and to have...

“appreciated an opportunity to work with, and on behalf of, young children from a more holistic perspective, which can be harder to develop within a school context”. (Imich, 2004; P37).

Furthermore, Imich states:

“In Essex we have already learned from the early experiences of Sure Start that educational psychology can make a powerful contribution to this evolving service, impacting directly upon the local community whilst also providing considerable working satisfaction for EPs working in this new context. To impact upon developments emerging from the Green Paper, [Every Child Matters, 2003] it is essential that EP services are able to highlight an increasing range of examples such as their contribution to Sure Start programmes. The current challenge to services is to rethink and restructure working practices for the future.” (Imich, 2004; P37).

However, Imich points out that there has been 'little objective evaluation' of Sure Start programmes and that EPs within the service were contracted to contribute to a local evaluation. Furthermore, Imich does not report on the psychological knowledge and approaches adopted in the EPs' work (e.g. in drop in sessions).

Warner and Pote (2004) are EPs who provide an example of how they worked with parents within a Sure Start programme in the London Borough of Tower Hamlets. They were asked by a Sure Start programme to provide a service called Early

Behaviour Support to families who had requested help with managing the behaviour of their children at home. Warner and Pote report working eclectically through applying different psychological models responsively, and that intervention used a solution-focused approach that works on a number of premises including: a focus on solutions, and a notion that the client has the inner resources to solve their difficulties.

Warner and Pote adopted social interactionist and behavioural psychological approaches in their work in recognition that behaviour takes place in a context, is learned, has a function, and that patterns of desirable behaviour must be reinforced. Interventions covered a range of areas including difficulties associated with aggressive behaviour, toilet training and bedtime problems, and were dynamic in responding to individual parents' needs. However, Warner and Pote do not report an evaluation of the effectiveness of the interventions or satisfaction of parents who were involved. Furthermore, the access to EPs in this provision was restricted in that it was mediated through the Early Behaviour Support service.

Although research has shown that most EPs report having some dedicated time to work within Sure Start projects and there is some anecdotal evidence that suggests such projects empower parents and the wider community to work with professionals to facilitate change, there has been little published research into what parents want from direct access to EPs in community settings. Furthermore, there appears to be a lack of independent published research examining the impact of EPs working directly with parents and evaluation of different psychological models and ways of working (with the exception of the anecdotal evidence described above) on outcomes for children and families. However, there is some evidence of EPs adapting their



provision in Sure Start/Children Centres in accordance with feedback from parents and this is described below.

### **1.5.2: Feedback from parents informing EP practice in Sure Start/Children's Centres**

An example of EPs shaping their practice in Sure Start/Children's Centres in accordance with feedback from parents is reported in Laffan and Synmoie (2004). Laffan and Synmoie wrote as Senior Specialist EPs from the Lambeth Educational Psychology Service that is reported to be involved in a number of projects aimed at developing ways of meeting needs of communities. Laffan and Synmoie outline the processes undertaken in developing 'tailor-made' parenting sessions. The service consulted with parents regarding what they wanted from interactive play sessions. The consultation sessions were publicised via leaflets delivered through doors and posted in community areas (e.g. doctors' surgeries) and information was sent to relevant agencies (e.g. health visitors). The sessions were held at different times of the day to attract as many people as possible and consisted of a parent questionnaire and several focus groups that lasted for around three weeks. They found that parents:

- were keen to meet together;
- had particular interest in early learning, language development and behaviour;  
and
- expressed a wish for flexibility in sessions, and were reluctant to commit to a block of sessions over a long period of time.

For this reason, parenting programmes such as 'Parent Wise' and 'The Incredible Years' were not considered appropriate as they required a time commitment and focus on behaviour rather than play. Laffan and Synmoie therefore developed and piloted a bespoke programme that had a relatively short time commitment and covered play, learning, language and communication, and behaviour.

An evaluation of the pilot programme indicated that attendance was relatively low, but increased following a change in the location of the sessions to a library that had more room. Feedback from parents who had attended was often very positive (including the feeling of being valued, and increased confidence) but parents still reported that a commitment to attend all sessions was too much and they would have liked to have been able to select sessions to attend. The service therefore developed stand alone sessions that could be complemented by attendance at related sessions. The programme evolved to meet the needs of different parents and at the time of writing, there was good and regular attendance. Laffan and Synmoie report that future directions that the service would like to take included...

“working on ways for parents to be even more active in constructing the sessions and sharing experiences” (Laffan & Synmoie, 2004; P43).

Another example of how feedback from parents was used to develop a service in a Children's Centre is given by Booth (2009) who adopted an action research methodology to explore the usefulness of a 'drop-in' service that was run by an EP. The structure of the drop-in sessions evolved in accordance with feedback from parents and centre staff. The sessions developed from EPs waiting in rooms for parents to access them, to attending pre-existing groups offered by the centre. This was viewed as a positive development in terms of parental engagement, that was

attributed in part to being in situ, developing relationships with the parents and parents being supported by other parents, rather than approaching an EP on their own. Booth states that...

“the research about the drop-in demonstrated that it was more effective for the drop-in to visit the groups rather than to expect the parents to visit the drop-in.” (Booth, 2009; P195).

Furthermore, the drop-in sessions were extended to centre staff members. Feedback gathered through evaluation forms and comments from parents and staff members who accessed the service indicate that the service was highly valued. Furthermore, the solution-focused approach that was adopted in the sessions was seen as contributing to a collaborative and empowering approach in keeping with a Community Psychology orientation. However, the structure of the sessions was not considered appropriate for complex cases or cases in which children had reportedly established ingrained behaviours. As Booth states:

“Complex long-term issues cannot be addressed and might need a different psychological model to address the difficulties. Jefferies (2003) highlighted that drop-ins are not suitable in complex cases and the shortness of the session, in such cases, can do more harm.” (Booth, 2009: P175).

Booth gathered views of parents who might potentially have used the drop-in service to explore the issues they might want support with before the sessions commenced, and identified issues that were important to the local community. Booth therefore argues that the research comprised a ‘bottom-up’ approach to some extent. However, she also acknowledges that the provision of a drop-in service was decided upon independent of parents, and in this sense, the research can also be seen to adopt a ‘top-down’ approach. Booth also acknowledges that it might have been

useful to gather information from parents who do not access the service, as this might have surfaced possible shortcomings of the service. Booth states that Sure Start has funded research to explore the type of service EPs might offer Children's Centres in the LA.

The research examples given here regarding the development of services in accordance with feedback from parents relate to the evolution of existing provision. There appears to be no published 'bottom-up' research regarding what parents want from direct access to EPs in Sure Start/Children's Centres, other than with reference to generic programmes or developments to existing provision. This 'blue skies' exploration is to be the focus of this research. The research aims to inform potential EP provision at a Children's Centre in one Local Authority. Furthermore, the research reviewed above highlights that there may be difficulties associated with delineating a unique contribution of psychologists that is distinctive from other professional contributions. This research aims then to elicit the views of parents in a local community regarding what they would like from direct access to EPs and how this might be distinct from existing provision. The key research questions are noted below.

#### **1.6.0: Research questions**

The policy drivers described in the literature presented in this chapter have led to the development of the research questions:

- What do parents want from direct access to EPs at Sure Start/Children's Centres?
- What might parents view as a unique contribution that EPs' may make to the service provision at Sure Start/Children's Centres?

## CHAPTER TWO: METHODOLOGY AND DESIGN

The review of the literature presented in chapter one led to the development of the research question:

*What do parents want from direct access to EPs at Sure Start/Children's Centres?*

Whilst I had endeavoured to have such a broad research question so that my analysis was 'bottom up' orientated, the literature indicated that such a question may be underpinned by what might parents view as a unique contribution that EPs' may make to the service provision at Sure Start/Children's Centres.

In attempting to answer these questions this research comprises an exploratory study that aims to explore social phenomena without prior expectations (Schutt, 2009). This chapter provides a commentary of the research method and design that were decided upon to answer these questions and also describes my epistemological and ontological standpoint. The chapter also acknowledges ethical considerations and threats to validity.

### 2.1: Epistemological and ontological position

Before discussing the selection of my research methodology, I set out my ontological and epistemological position. This is because it has been recognised that:

"Methodological questions are of course essentially about how the researcher or practitioner goes "about finding out whatever he or she believes can be known" (Guba & Lincoln, 1998, p.201). Methodological questions, which pertain to the theory of how research and indeed practice, are carried out, are therefore in turn predicated upon epistemological and ontological stance. Given the challenges of postmodernity, it seems to be more generally recognised within the contemporary social and educational research literature that methodological questions can no longer be divorced from questions of epistemology and ontology." (Moore, 2005; P107).

Furthermore, Braun and Clarke (2006) state that:

“The research epistemology guides what you can say about your data, and informs how you theorise meaning.” (Braun & Clarke, 2006; P85).

I have an academic background in cognitive psychology that was aligned to a positivist approach to exploring phenomena (a good description of positivism is provided by Robson, 2002) that takes the view that the world exists and can be understood in terms of laws (Cohen et al, 2008). Positivism holds that there are causal laws governing the relationship between variables and objective knowledge of these laws (facts) can be gained through observation and experience (Robson, 2002). Thus, facts can be viewed as ‘value-free’, independent from the observer, so that scientists observing the same phenomenon would see the same thing (Robson, 2002).

Whilst I believe a positivist approach is appropriate to the exploration of some phenomena, I do not subscribe to such a deterministic view of human behaviour. In line with Cohen et al (2008) I believe that:

“Where positivism is less successful, however, is in its application to the study of human behaviour where the immense complexity of human nature and the elusive and intangible quality of social phenomena contrast strikingly with the order of the natural world.” (Cohen et al, 2008; P11).

I consider for example, that complex everyday behaviour is mediated by a number of factors that are not always easily discerned (e.g. previous learning, cultural influences, biological influences). Of particular interest to me is the role of a person’s cognition, (e.g. their thoughts and interpretations) and socio-cultural influences (as for example explicated within Bronfenbrenner’s 1979, bio-ecological theory) on behaviour/action. Thus, I would agree with the criticism of positivist social science in that I believe it...

“fails to take account of our unique ability to interpret our experiences and represent them to ourselves. We can and do construct theories about ourselves and our world; moreover, we act on these theories.” (Cohen et al 2008; P19).

I might be described therefore as adopting an anti-positivist view point, where rather than behaviour being considered as determined by situation, a person’s understanding and meaning are considered to influence their action or behaviour (Cohen et al, 2008).

Positivism has also been criticised for not recognising the influence of the researchers’ subjective perspective (e.g. their background, knowledge and values) on what is observed (Reichardt & Rallis, 1994). Robson (2002) for example, states that...

“it has been amply demonstrated that what observers ‘see’ is not determined simply by the characteristics of the thing observed: the characteristics and perspectives of the observer also have an effect.” (Robson, 2002; P21).

Although I do not subscribe to a positivist approach in relation to social sciences, I also do not fully subscribe to a relativist approach that, as an alternative to positivism, in its extreme form...

“maintains that there is no external reality independent of human consciousness; there are only different sets of meanings and classifications which people attach to the world.” (Robson, 2002; P22).

Within the relativist approach (also termed constructionist, naturalistic or interpretive), Robson (2002) argues that...

“there is a rejection of the view that ‘truths’ about the social world can be established by using natural science methods. This is because of the nature of the subject matter of social science – people. People, unlike the objects of the natural world, are conscious, purposive actors who have ideas about their world and attach meaning to what is going

on around them. In particular, their behaviour depends crucially on these ideas and meanings.” (Robson, 2002; P24).

Thus, Robson (2002) argues that people’s actions should be considered with regards to their ‘underlying ideas, meanings and motivations’. Fletcher (1996) argues that relativist approaches should therefore simply describe accounts rather than evaluate phenomena in terms of ‘predictive power of truth value’ in which ‘reality is presented through the eyes of participants’ (Robson, 2002; P25). However, in common with symbolic interactionist approaches (e.g. Goffman, 1969; Berger & Luckman, 1967) and Bronfenbrenner’s (1979) ecological model, I consider people’s experiences and social context exert some influence over the meaning that they attach to things.

My viewpoint aligns with postulates of a symbolic interactionist approach as set out by Woods (1979) in that people are thought to act according to the meaning they attach to things; the attribution of meaning is a dynamic and ongoing process, responsive to social influence such as social structure and roles; and actions are aligned to appraisals of how others might react and impression management.

Furthermore, symbolic interactionism, according to Woods (1979), holds that people ‘inhabit’ two worlds: the objective world that is independent of them, and the ‘social world’ which includes symbols such as language that allow meaning to be made of things (Cohen et al, 2008). Symbolic interactionist approaches therefore emphasis people’s own accounts of their experience as mechanisms that influence their action. Symbolic interactionism might be said to be aligned to a social constructionism view point (e.g. Berger & Luckman, 1966), that knowledge is socially derived through interaction in which interaction serves to reinforce common ‘socially constructed’ knowledge. Social constructionism therefore, does not deny an external reality, but



argues that our understanding of realities is produced and reinforced through the meanings that we attach to our experience and which we share and reinforce through interaction with others. Thus, knowledge might be viewed as being interpreted experience.

My epistemological stance appears to be somewhere between a positivistic epistemology, in which an external reality is thought to exist and be amenable to objective study, and 'social constructionism' in which collective (with reference to a particular interacting community) interpretation or expressed accounts of experience influence action (observable behaviour). One might therefore expect to see some level of conformity with regards to the views that parents provide in a particular community as Bloor (1997) states:

“Social life contains elements which are generalisable across settings (thus providing the possibility of social sciences) and other elements that are particular to given settings (thus forever limiting the predictive power of the social sciences.” (Robson et al, 2002; P168).

My choice of data gathering method aimed to align with an overall purpose of gathering people's accounts of their experience, and is described below.

## **2.2: Choice of data gathering method**

Given the lack of information relating to the research question (See section 1.5.2: 'Feedback from parents informing EP practice in Sure Start/Children's Centres') this study was intended to be exploratory, rather than theory-driven, and aimed to extend knowledge (Cohen et al, 2008). My aim was to 'give voice' (e.g. Fine, 2002) to parents' expressed wishes regarding what, if anything, they want from direct access to EPs. The method therefore conforms to a phenomenological approach that takes accounts of experience at face value (English & English, 1958).

As I had not hypothesised about what parents would want from direct access to EPs and because my aim was to use the information to empower parents, consistent with a Community Psychology perspective (see section 1.3.5: Community Psychology), I aimed for my research to be inductive or bottom up/data-driven (Frith & Gleeson, 2004).

There are a number of data analysis methods available to generate bottom up research, including grounded theory (McLeod, 2001) and Interpretative Phenomenological Analysis (Smith & Osborn, 2003). I decided to use thematic analysis as I considered this approach to be attuned most closely to my research question and epistemological position because it...

“can be an essentialist or realist method, which reports experiences, meanings and the reality of participants, or it can be a constructionist method, which examines the ways in which events, realities, meanings, experiences and so on are the effects of a range of discourses operating within society. It can also be a ‘contextualist’ method, sitting between the two poles of essentialism and constructionism, and characterised by theories, such as critical realism (e.g., Willig, 1999) which acknowledge the ways individuals make meaning of their experience, and, in turn, the ways the broader social context impinges on those meanings, while retaining focus on the material and other limits of ‘reality’. Therefore, thematic analysis can be a method that works both to reflect reality and to unpick or unravel the surface of ‘reality’.” (Braun & Clarke, 2006; P81).

Given that I hoped to generate ‘bottom up’ data’ and to give voice to parents’ views, I wanted themes to ‘emerge’ from the data. However, Braun and Clarke (2006) suggest the need for caution in using the notion of ‘themes emerging’ from the data because it does not acknowledge the ‘active role’ that the researcher plays in identifying the themes and selecting those that are of interest (Taylor & Usher, 2001). My research question also required an element of deductive or top-down analysis (e.g. Boyatzis, 1998; Hayes, 1997) as I had a specific research question regarding

what parents believed the unique contribution of EPs would be. I describe the process I applied in undertaken thematic analysis later under section 2.6: Thematic Analysis.

### **2.3: Design**

I chose to gather parents' views through interviews. King (1994) suggests circumstances for which 'qualitative research interviews' are appropriate, one of which is:

“Where individual perceptions of processes within a social unit – such as a work-group, department or whole organisation – are to be studied prospectively,” (from King 1994, pp16-17 In Robson, 2002; P271).

One of the advantages of interviews is that they offer a flexible way of finding things out and the non-verbal language during the interview can be useful in helping to understand responses (Robson, 2002). Interviews can be criticised for a lack of standardisation and are open to questions regarding the reliability of their findings. However, measures can be taken to minimise subjectivity or bias that may influence responses and interpretation of responses, including checking with the interviewee. There are different types of interviews: structured, semi-structured and unstructured, that are linked to the depth of response they can elicit (Robson, 2002). I opted to use semi-structured interviews with pre-determined questions that were used flexibly (i.e. ordered, omitted, or reworded and supported by the use of prompts as appropriate), in order to encourage elaboration of response. I also opted to use open ended questions that put 'minimal restraint' on responses (Kerlinger, 1970; Cohen et al 2008). According to Robson (2002), open ended questions have a number of advantages including that they:

- promote richness/depth of responses;
- are flexible, allow more depth and opportunity to clear up misunderstandings;
- encourage co-operation and rapport;
- allow a truer assessment of what the respondent believes; and
- can generate unexpected/unanticipated responses.

Furthermore, a semi-structured method allows participants to 'influence the content of the interview' (Avis et al, 2007) and exploration of emergent themes as they arise (Punch, 1998). Probes and prompts can be used to encourage the respondent to expand on their answers and for the researcher to clarify responses (Cohen et al, 2008). Probes can include the use of a pause, repetition of what has been said, and asking for clarification (Cohen et al, 2008).

Due to the potential sensitivity of the information being gathered, (and because there was the possibility that parents might perceive that they would only see a psychologist if there was something 'wrong with their child'), I decided to use one-to-one interviews, rather than group interviews that could otherwise provide an efficient means of gathering data from a number of people, (Robinson 1999; Robson 2002), because I believed that parents would be less likely to feel inhibited in speaking openly. Furthermore, I considered that there was a possibility that some parents' views would be lost in a focus group (a term used interchangeably with group interview, Robson, 2002), due to group dynamics (e.g. the domination of some group members) and difficulties regarding confidentiality (Robinson, 1999; Robson, 2002). I judged that the efficiency gain of conducting focus groups would be at a cost of collecting individuals' views and therefore, I would not reliably be able to comment on the homogeneity/generalisability of the data obtained.

Interview questions were designed by translating the research aims into questions (Cohen et al, 2008) and undertaking a needs analysis e.g. relating to building on strengths, acknowledging existing resources within the community/environment, exploring participants' perceptions regarding local needs and priorities and effective collaboration as set out by Raffaele and Knoff (1999) (described in section 1.2.3: Building effective home-school collaboration). Thus, the interview schedule included questions designed to gather parents' views regarding needs and strengths within the community, and the Children's Centre and incorporated a question framed to explore parents' views regarding the uniqueness of support that a psychologist could offer.

Given that centre staff had expressed a concern that parents were unlikely to have an understanding of the EP role, I considered that parents might have difficulty in giving views regarding what they would like from an opportunity to meet with an EP. Thus, I also undertook three sorting activities that asked parents to sort cards (relating to potential ways that EPs could work, potential topics that EPs might address, or potential types of activities that EPs might undertake) into piles of 'helpful', 'not helpful' or 'not sure'. Parents were also given the opportunity to add suggestions that had not been listed. They were then asked to show which two 'activities' or 'topics', or which one 'way of working' they considered to be 'most usefully' covered/conducted by an EP and to explain their choice. The purpose of the activities was to allow parents' preferences and priorities to be explored, given the risk that they would be unable to comment due to lack of knowledge relating to the EP role.

During the process of the first three interviews, it became clear that the parents were having some difficulty in answering some of the interview questions because of a lack of knowledge regarding what EPs do (despite the sort card activities). Examples of this are demonstrated in the extracts from interviews given in Table 2. I therefore decided to develop a script (taken from descriptions given on the Association of Educational Psychologists, the Division of Child and Educational Psychologists and the Children's Workforce Development Council websites, see Appendix V) to provide a standard response with limited information about the role of the EP.

*I: What we will do then is.... I have got some cards here each listing some things that psychologists might provide in terms of services and activities. I am not saying that this is what they do, because what I want to find out is whether you think it would be useful here or not and then work from there. Ok? So, 'helpful here', 'not sure' 'not helpful here' OK?*

*So if a psychologist was to work from the centre, do you think it would be helpful for them to work with children here?*

*P: ....Not sure really.*

*I: Not sure.*

*P: What would you say a psychologist does then? You going to get into people's brains or ...*

*P: Yes, I would suppose my reaction, a lot of people would think child psychologists get involved if there are serious issues. Whereas if you, I am still not particularly clear, but it might be, is it true or not? you might be of a much more subtle role to play. Then if that is the case, then, that is something that probably people do not understand. That is where the stigma comes from. But if it is a light touch, you know, you could have a light touch helping children's development and parents understand that, then I am sure they might be much more inclined to.... maybe change your name. Call yourself something else.*

*I: What do you think a psychologist could offer parents that other staff or professionals do not already offer, or might not do as well?*

*P: Again, not particularly knowing what..... Not particularly familiar with what a psychologist does, I do not know, I would say you tell me, I was not really aware of what the potential was really. Difficult to answer.*

**Table 2: Extracts regarding lack of knowledge of what EPs do**

I read the script to parents in the subsequent eight interviews, after having asked the parent about their knowledge of what psychologists do. This was at a cost of forfeiting any claim of a pure 'bottom up' approach to finding out what parents want

from the opportunity to meet directly with a psychologists, but with the benefit that the response that they provided was based on a more informed and realistic view of what EPs could provide.

The interview (see Appendix VI) therefore had a mixed design that comprised a script (interviews 4-11), open ended questions as well as the sort card activities. This is consistent with Robson (2002) who argued that semi-structured interviews can be used as the sole approach to a study, but are often used in flexible designs.

## **2.4: Ethical considerations**

All research has to be approved through the University of Birmingham's ethics research committee before research can commence. This involves the submission of an Application for an Ethical Review to the committee comprising a description of the research proposal and what consideration is given to potential risks regarding ethical practice and how these are to be minimised. The ethical considerations relating to my research are described below.

In accordance with the British Educational Research Association (BERA) (2004) revised ethical guidelines for educational research, all participants were given a clear explanation of the purpose of the research; what they would be asked to do; how the data would be used and stored, and to whom they would be reported. Furthermore, in accordance the British Psychological Society (BPS) (2004) 'Code of Conduct, Ethical Principles and Guidelines' and BERA guidelines, parents were made aware of their right to withdraw from the research at any time and asked for written consent to signify that they understood the purpose, requirements and use of the research and were happy to participate (the information sheet and consent form that I used can be

seen in Appendix VII). This included consent to record the interview (using a digital recorder) so that I could ensure that all the data were captured.

In order to ensure that parents did not feel pressured to take part in my research, I waited in a room adjacent to the 'Stay and Play' session that I attended. Parents were made aware of my presence and my research through leaflets, posters and through word of mouth by staff (see Appendix VIII for an example of a leaflet).

Participants were made aware, prior to interviewing, that any information disclosed relating to illegal activity or that may indicate risk of harm to another, would be passed on to relevant agencies. (This condition is fully congruent with 'routine' expectations and the accepted modus operandi for trainee educational psychologists within the context in which I was undertaking this research. Systems are in place to ensure confidential aftercare for any respondent for whom reporting became necessary within the Local Authority Safeguarding regulations). Otherwise, all data were to be treated in accordance with the Data Protection Act (1998), in that all data would be kept securely and the identity of the participants would remain anonymous (as can be seen in the information and consent sheets in Appendix VII).

An important ethical consideration in conducting the research was the possibility of raising parents' expectations regarding future developments to service provision that may not come to fruition. I sought to minimise this risk by openness and honesty with regards to potential outcomes of the research.

Furthermore, I was mindful that questions regarding what people want from access to psychologists might surface sensitive feelings (e.g. potential distress associated with family circumstances or a child's development). Therefore, I endeavoured to ensure sensitivity in responding to participants, and had planned to terminate any interview if



I judged that a participant was experiencing discomfort as a result of the questions. I also made it clear to participants that they were not being asked about their personal circumstances/needs, but instead examples of what they felt might be useful to parents in the community.

It is also possible that the questioning might generate information that would suggest that the participant might benefit from support relating to psychological or physical difficulties that they may not be explicitly aware of. In accordance with the BPS ethical guidelines, I planned to inform them of this and signpost to relevant support agencies if I believed that their well-being may be endangered in the future by not doing so.

## **2.5: Procedure**

Having developed my interview schedule, I advertised my research through posters and leaflets placed within the centre (an example can be seen in Appendix VIII). I recorded the interviews (with permission from the parents) using a digital tape recorder, as well as took notes during the interviews (written on a printout of the interview schedule) as a fail-safe (Robson, 2002). The treatment of the data generated is described in section 2.6: Thematic analysis.

I attended the centre during nominated 'Stay and Play' sessions and a member of staff advised parents that I was waiting in a room should they wish to take part in my research. When a parent approached me to take part in my research, I gave them an information sheet (see Appendix VII for information and consent sheet) and talked them through the purpose of the research and how the data would be used and reported. I also told them about what they would be asked to do and about their right

to withdraw from the research at anytime. I asked them whether they had any questions and whether they would like to take part and invited them to give written consent.

My sample may be said to conform to a convenience sample (Cohen et al, 2008 and Robson et al, 2002). However, I attended four 'Stay and Play' sessions (over a period of eight weeks) including one for fathers that was run on a Saturday morning, and I also asked staff members to make parents from the local Eastern European population aware of my research to ensure that fathers and parents from Eastern European backgrounds could be adequately represented in my sample. In this respect my sample might be considered to conform, to some extent, to a quota sample (Cohen et al, 2008; Robson et al, 2002) that is, I took measures to ensure that the sample reflected members of the local population (based on the centre manager's knowledge regarding the demographics of the local population and those that attend the centre). Non-probability sampling, which uses selectivity to ensure that the local population is represented means that the data from this sample cannot be generalised to the wider population, and is representative merely of the targeted population. This approach is frequently used in small scale research (Cohen et al, 2008).

Eleven parents were interviewed: a sample which comprised four fathers and seven mothers. One of the parents was Polish and had lived in England for around five years. The centre has been proactive in encouraging the participation of parents who might be described as having a high level of need to attend (e.g. those who may be socially isolated or who live in economically deprived areas). This recruitment was mediated through a process of the Health Visitor or Family Support Worker making

families aware of the facilities and support available at the centre and inviting attendance – sometimes with support. This process is reported to be successful, and a parent who was interviewed reported an initial reluctance to attend the centre, but did so, on invitation from a Health Visitor. Furthermore, the centre runs ‘Stay and Play’ sessions in satellite locations within the community to promote easy access to parents in the catchment area and who might otherwise not use the provision. One of the ‘Stay and Play’ sessions that I attended was at a satellite base (held within a local church) as part of the centre’s ‘outreach’.

The ‘Stay and Play’ sessions varied in how many parents (and children) attended, with attendance at the fathers and outreach sessions comprising approximately six to ten parents, whilst attendance at the other two Stay and Play’ sessions had a considerably greater attendance - perhaps more than twenty-five parents.

Table 3 shows that a majority of parents interviewed were within the 31-40 year age range, have one or two children and work. The centre manager confirmed that the sample of parents was broadly representative of the local population with a good mix of parents who live in private and social housing. Furthermore, three of the parents mentioned in the course of the interview that they have support from specialised agencies for their children (e.g. for social interaction).

Characteristic	Category	Number of Parents
<b>Age</b>	<20yrs	1
	21-30yrs	2
	31-40yrs	6
	41-50yrs	2
<b>Number of Children</b>	1	4
	2	6
	3	0
	4	1
<b>In Employment?</b>	Yes	7
	No	4

**Table 3: Parent profile**

The decision as to the number of participants was made based on the principle of diminishing returns. That is, I terminated the series of interviews when I considered that I had reached a point of data 'saturation' (Robson et al, 2002) in which there was sufficient repetition of content in the responses of successive interviews to lead me to anticipate that additional novel perspectives were unlikely and so that any additional responses would not significantly add to what had already been learned (Robson et al, 2002). This approach is also used in grounded theory development (Glaser & Strauss, 1967), at the stage in a study where additional data are thought not to 'advance, extend or qualify theory development' (Cohen et al, 2008). After conducting eleven interviews, I considered that I had a rich enough data set to analyse (Kvale, 1996) and address my research aims, since no further new data, were being generated within the successive interviews. I then analysed the interview responses using thematic analysis (Braun & Clarke, 2006).

## **2.6: Thematic Analysis**

Braun and Clarke (2006) describe thematic analysis as:

“...a method for identifying, analysing and reporting patterns (themes) within the data.” (Braun & Clarke, P79).

I decided to use the guidelines for conducting thematic analysis in a rigorous way developed by Braun and Clarke (2006), who argue that this can provide a 'flexible research tool' that potentially provides a 'rich and detailed' account of qualitative data. They cite Attride-Stirling, (2001) who argue that this is important because:

“Qualitative psychologists need to be clear about what they are doing and why, and to include the often-omitted 'how' they did their analysis in their reports.” (Braun & Clarke, 2006; P79).

Furthermore, they argue that clarity of the process of data analysis is required as:

“If we do not know how people went about analysing their data, or what assumptions informed their analysis, it is difficult to evaluate their research, and to compare and/or synthesise it with other studies in that topic, and it can impede other researchers carrying out related projects in the future.” (Braun & Clarke, 2006; P80).

Braun and Clarke acknowledge the role of the researcher in selecting areas of interest in their analysis (Taylor & Ussher, 2001) rather than themes passively ‘emerging’ or being discovered within the data. Indeed, they argue that...

“researchers cannot free themselves of their theoretical and epistemological commitments, and data are not coded in an epistemological vacuum.” (Braun & Clarke, 2006; P84).

Furthermore, they argue that ‘researcher judgement’ is required in determining what a theme is, as no ‘hard-and-fast rules exist regarding whether identification of ‘a theme’ should relate to the proportion or length of response. Information relating to a ‘theme’ may appear disproportionately represented within different data sets (e.g. more content relating to a theme in one interview transcript compared to other transcripts) (Braun & Clarke, 2006). However, a theme should relate to the research question. Braun and Clarke would therefore maintain that researchers do not just ‘give voice’ (Fine, 2002) to the participants and that it is important for researchers to recognise their decisions in data analysis. I therefore describe the process of analysis that I undertook below. However, I believe that it is possible that a theme might be identified that does not relate to the research questions or had not been anticipated and therefore, could be described as inductively derived or ‘bottom-up’ (e.g. Frith & Gleeson, 2004). In the section below I describe the decisions made in reducing the data by coding, categorising and abstraction of super-ordinate themes.

### **2.7.0: What was done and why**

Braun and Clarke's (2006) guide to conducting thematic analysis suggests six phases that can be applied flexibly to suit the research question and data (Patton, 1990). I tried to conform to these phases as closely as possible, and describe these below, along with the actions that I undertook at each stage. I found that the stages were not necessarily discrete, nor were they necessarily conducted in a linear sequence. However, the following account gives a general overview of the phases of analysis that I undertook.

#### **2.7.1: Phase 1 - familiarise with the data**

This involves immersion in the data through writing and rereading transcripts in order to search for patterns or meanings. At this phase, notes can be made regarding ideas for coding. Transcribing data has been acknowledged as a good way for researchers to familiarise themselves with the data (Riessman, 1993) and as providing a thorough understanding of the data (Braun & Clarke, 2006). The examples of extracts used in the results section were written according to guidelines identified by Atkinson (1998) in that the participants' own words were used, but with any 'unnecessary' words omitted, and use of correct spelling and sentence structure, whilst endeavouring to retain the original meaning (Avis et al, 2007).

I formed some initial impressions regarding what the data contained as I conducted the interviews. I then transcribed the entire interviews except for:

- discussion that took place during the sort card activities (unless the parents said anything I judged of particular relevance during this stage, such as how a psychologist might be helpful to their personal circumstance);

- discussion that clearly did not have any relevance to the research (non topic-related discussion e.g. where a parent had left her bag);
- where the information might compromise the parent's anonymity (e.g. names and details of the structure of their family); and
- my own reading of the standard script.

These omissions were noted on the transcription records (see Appendix IX for a sample transcript). I checked the transcription records against the recording of interviews for accuracy. I wrote in the margins any points that I initially identified as of potential interest.

### **2.7.2: Phase 2 - generating initial codes**

During this phase, an initial list of ideas regarding what is interesting in the data is generated. Interesting excerpts contained within the transcripts were coded and organised into meaningful chunks (Tuckett, 2005). Braun and Clarke advise coding for 'as many potential themes/patterns as possible', and keeping some of the surrounding text in extracts so that context is not lost (Bryman, 2001). An extract may be coded once, coded many times or un-coded (Braun & Clarke, 2006) and thus, coded transcript extracts can be used to support more than one theme.

Each of the points of interest noted in Phase 1 were examined to see if it might be represented by a code (based on my impression of patterns). I generated a list of provisional codes (as many potential codes as possible) and linked these to excerpts in the transcripts (written in a margin). I then re-read the entire data corpus to see how the codes fitted and to look for further potential codes. Thus, I could see the prevalence of the code across the data set.

Once I had generated codes, I extracted verbatim excerpts relating to all codes from the data corpus and placed them together. However, coding is recursive process and continued throughout the analysis; codes were refined many times to ensure that they encapsulated points made in parents' interview responses. In doing so I was also careful to consider the rationale for coding in this way and tried to ensure that I was responding to patterns in the data rather than trying to fit extracts into codes, retaining my intended 'bottom up' inductive orientation.

Coding was generally conducted at a 'semantic or explicit level' rather than a 'latent or interpretative level' (Boyatzis, 1998). In this sense, the coding represented a description of the content of parents' responses. However, as my analysis progressed, I provided my interpretation of the meaning of the content and the implications for this (Patton, 1990). I believe that this allowed for the face validity of the data to be preserved whilst minimising my subjective interpretation of parents' comments. In this sense I contained the 'double hermeneutic' (Giddens, 1976) in that I did not attempt to interpret parents' comments which were already their interpretation of their world. Thus, I adopted a realist approach (Cohen et al, 2008) in data analysis through not donating any further interpretation of the social/contextual influences that may have shaped parents' views.

### **2.7.3: Phase 3 - searching for themes**

This phase involves considering how codes may be combined to form candidate themes and subthemes. I sketched mind maps and then organised the data into tables (an example can be seen in Appendix X) that included grouping codes into candidate themes and subthemes, adding a further 'holding' theme called



“miscellaneous” (consistent with the guidelines of Braun & Clarke, 2006) to temporarily house codes that did not appear to fit the candidate themes. Coded extracts that did not fit into a theme were later discarded from the analysis. The table was adapted a number of times to ensure codes could be represented well within themes.

#### **2.7.4: Phase 4 - reviewing themes**

This phase involves the refinement of the candidate themes through considering whether the coded extracts which illustrate themes form a coherent pattern, and discarding or ‘re-homing’ extracts that do not fit this emerging pattern. The process of analytic abstraction (Miles & Huberman, 1994) was used where themes with similar content were combined and therefore reduced using diagrammatic representation of relationships between themes and subthemes to form an ‘explanatory framework’ (Avis et al, 2007).

There are no ‘hard or fast’ rules regarding the prevalence or quantity of data extracts that would make up a theme, either within a particular interview or across a whole data corpus (Braun & Clarke, 2006). Furthermore, given that I used prompts in my interviews, I did not judge the frequency of occurrence of themes appropriate.

However, I made the decision that a theme should be represented by data from at least three parents.

When this phase was completed, a thematic map was created that was examined to check whether it accurately reflected the data corpus as a whole. I then left the data for a while and returned to them to refine the themes according to whether the codes I had allocated conformed to a coherent pattern, the discreteness of themes, and

how adequately they captured the coded data. I did this through rereading all the coded transcripts to see how well the themes represented the entire data corpus and to see if any codes may have been missed and require assimilation into the overall thematic map, including assignment of those held within the 'miscellaneous' group.

#### **2.7.5: Phase 5 - defining and naming themes**

This phase involves further refinement of the themes by identifying the 'essence of what each theme is about'. Braun and Clarke (2006) state that for each theme...

“you need to conduct and write a detailed analysis. As well as identifying the 'story' that each theme tells, it is important to consider how it fits into the broader overall 'story' that you are telling about your data, in relation to the research questions, to ensure there is not too much overlap between themes.” (Braun & Clarke, 2006; P92).

I refined the names of my themes so that they captured the essence of the data and fitted with the overall analysis and research question. This included an account of how each theme linked with others.

#### **2.7.6: Phase 6 - producing the report**

Phase 6 of the analysis is writing the analysis so that it tells 'the complicated story of the data' (Braun & Clarke, 2007). The story that my data tell is discussed in the next chapter.

In reporting my findings, I decided not to distinguish between responses made by fathers and mothers. One of the reasons for this was because three of the fathers (out of four) were the first to be interviewed and so did not receive the standard script that provides generic information regarding the EP role. This means that I could not be confident that any difference in views between fathers and mothers was not

simply due to whether or not they had been read the standard script. However, some of the fathers' comments indicated that their wives/partners held the main responsibility for child care and that mothers were the main users of the centre. Fathers appeared to attend the centre to give their wives/partners a break. It appeared that fathers generally viewed their role in childcare as secondary to their partner's, and that work commitments hampered their role as a parent and participation within the community, as illustrated in extracts in Table 4. This offers some support for Bronfenbrenner's (1979) notion of the 'exosystem' and 'macrosystem' given that fathers report that work commitments impacted on their interaction with their child and it appeared that there may be a local cultural belief among fathers that their role was secondary to the mothers. However, how the resultant changes in behaviour impact on child development would need to be explored in order to more fully support these aspects of the ecological model.

<p><i>I: OK, so what is it like to bring up your family here in this community?</i>  <i>P: Yes very good. Obviously it is more, my partner on a day to day basis, but especially coming here, you know, I think she really enjoys it, I know she has got, met a lot of close friends now, you know, from the local area as well I think initially so.</i></p> <p><i>I: I was going to ask how well the support is used. You have mentioned that dads might not want to come in....</i>  <i>P: Well dads I'm sure everybody, you know I am not sure whether there are short time dads here, I suspect if they are full time dads they would probably access it on a day to day, weekday stuff and some of the ones here, their wives have said to them 'get out of the house for a few hours' and go to the blooming centre, so you know. So we probably at first hand would not be aware of the day to day running. Are you coming to do mum's sessions as well?</i>  <i>I: Yes, I am coming on Tuesday and Wednesday.</i>  <i>P: Yes because I am sure you will get a much more, the real users of the, will give you a much better idea I would have thought.</i></p>
---

**Table 4: Extracts relating to fathers' secondary parenting role**

Whilst I coded these comments in the early phases of the analysis, I decided not to search for themes that differentiated parents' views by gender as this did not appear

to have direct relevance to my research questions and no further distinction emerged between fathers' and mothers' views, as I read through the transcripts. A diary of the research activities can be seen in Appendix XI.

## **2.8: Responding to threats to validity in data collection and analysis**

Validity in qualitative research might be described in terms of 'honesty, richness, depth and scope', of the data generated and should be seen in relative terms, rather than something absolute that is to be achieved (Cohen et al, 2008). Thus, validity might be viewed according to the extent to which the data are comprehensive and are reported with fidelity (e.g. Blumenfeld-Jone, 1995) and authenticity (e.g. Guba and Lincoln, 1989; Cohen et al, 2008). Indeed, Maxwell (1992) described threats to validity for qualitative research in terms of: description (the accuracy and completeness or non-selectivity of the account); interpretation (fidelity to the participants rather than 'imposing meaning'); and theory ('the extent to which the phenomenon is explained and alternative explanations sought').

Some would argue that interviews inherently involve co-construction between the researcher and participant, and can be neither 'exclusively subjective nor objective' (Laing, 1967; Cohen et al, 2008). Rather interviews are 'inter-subjective' (Laing, 1967) and emphasise that it is the human interaction that is the mechanism in knowledge production (Kvale, 1996).

There is also the possibility that parents' responses are influenced by 'respondent bias' (Lincoln & Guba, 1985), where participants may withhold information or respond according to what they feel the research would like to hear. Throughout the interview, I endeavoured to mitigate this risk as much as possible, by reminding parents that

the purpose of the research was to help shape a service that would be best suited to their needs and wishes, and by making it clear that parents could use hypothetical accounts rather than having to speak from personal experience.

I also tried to minimise my 'reactivity bias' and 'researcher bias' (Lincoln & Guba, 1985), though presenting an openness to new or unexpected information and accepting contradictions, rather than trying to reconcile them (in accordance with Kvale's, 1996 guidance regarding qualitative interviews) with any assumptions or preconceptions that I may have had prior to interviewing. I also tried to avoid asking leading questions (consistent with Robson, 2002) and endeavoured to control my non-verbal communication so as not to influence the content of the interview (Cohen, et al, 2008) and sought also to verify my understanding of the parents' responses during the course of the interviews (Kvale, 1996) rather than simply interpreting in line with what I expect them to say (Hycner, 1985).

In analysing the comments made by parents I adopted a 'semantic approach' in which...

"themes are identified within the explicit or surface meanings of the data, and the analyst is not looking for anything beyond what a participant has said or what has been written." (Braun & Clarke, 2006; P84).

I did not attempt to 'interpret' parents' comments for deeper meaning (e.g. double hermeneutics - Giddens, 1976) and assumed that parents' actions would be influenced by their phenomenological experience (Hycner, 1985) at that point in time. I also tried to preserve fidelity to content of the interview through reporting contemporaneous non-verbal signals (such as laughing) where appropriate in transcriptions (Kvale, 1996).

Furthermore, I was able to use 'methodological triangulation' (Denzin, 1988) through comparing/combining the qualitative data generated through parents' comments, with the quantitative data generated through the sort card activities, allowing for a 'check' (Cohen et al, 2008). The data generated from the sort card activities are presented in the next chapter with the description of the thematic analysis findings to which they best correspond.

I have endeavoured to follow a systematic approach in order to minimise research bias (Lincoln & Guba, 1985), conforming to the phases set out by Braun and Clarke (2006) regarding conducting thematic analysis as closely as possible; this included examining how the analysis fits the whole data corpus through re-reading, and re-checking transcripts against interview recordings. I applied and declared the selection criteria in deciding whether there were sufficient data to be represented within a theme/code. I have endeavoured to be transparent with regards to what was done and why and acknowledged the active part that I had played in analysing the data. I have demonstrated fidelity to the data through the processes mentioned above to minimise bias as well as adopting a semantic approach to reporting the data.

Thus, I believe that I have demonstrated validity, as described by Cohen et al (2008), in that I have endeavoured to represent the full richness, depth and scope of the data. This included reporting data that I had chosen not to incorporate into the overall story that my data tells. I also declared exceptions to the coded data in the next chapter (the coded extracts can be seen in Appendix XII). However, it should be acknowledged that despite the measures I took to militate against risks to validity, the following results and discussion should be positioned as context specific and as my

own representation and interpretation of the data. My findings are described and discussed in the next chapter.

## CHAPTER THREE: RESULTS AND DISCUSSION

In this chapter I describe the research findings derived from the thematic analysis.

Braun and Clarke (2006) suggest that:

“Ideally, the analytic process [relating to a semantic approach to thematic analysis] involves a progression from description, where the data have simply been organised to show patterns in semantic content, and summarised, to interpretation, where there is an attempt to theorise the significance of the patterns and their broader meanings and implications (Patton, 1990), often in relation to previous literature....” (Braun & Clarke, 2006; P84).

I therefore describe the main themes and accompanying subthemes before summarising and discussing the significance of the findings. Given that there is a relatively large number of subthemes, and that some subthemes link with each other, discussion is structured in order to encompass a main theme and its accompanying subthemes, to allow for a fuller picture to be given.

The data from the thematic analysis have been divided into two key areas, each with its own conceptual map to illustrate how the themes relate to each other. The key areas are:

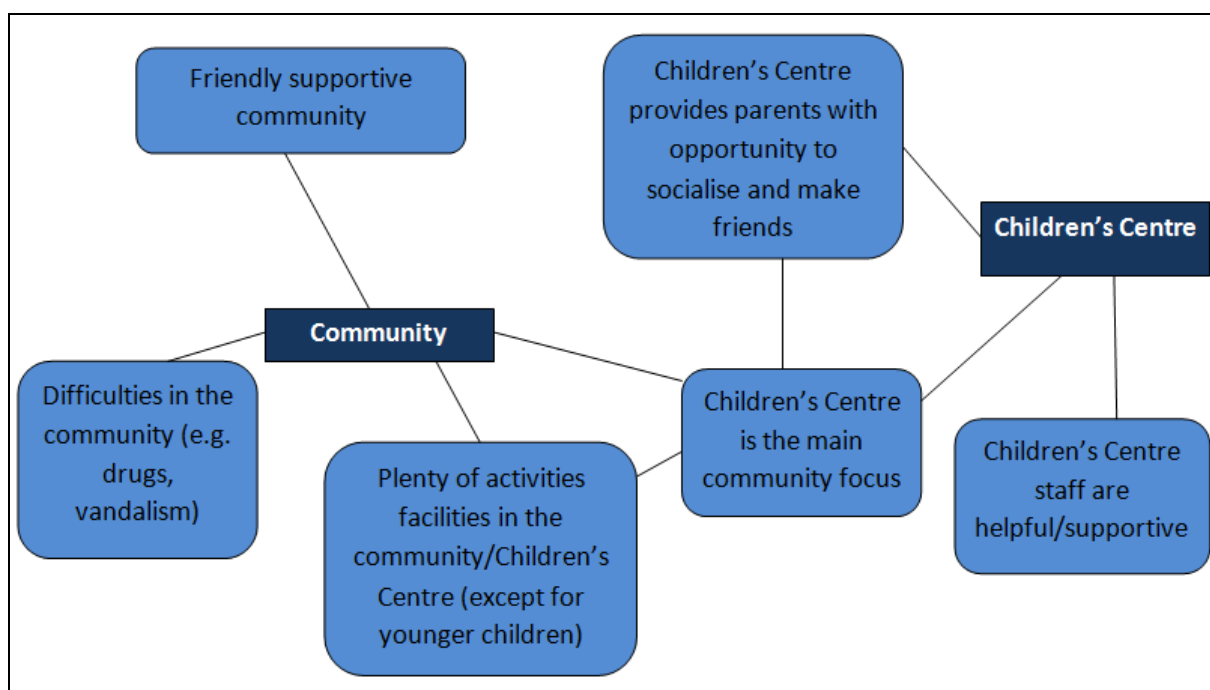
- the community (providing an overview of the current provision and reported needs within this community, so that parents’ wishes regarding what they want from direct access to EPs can be set in context); and
- themes relating to EP practice.

The themes and subthemes relating to each of these two key areas are described in turn with illustrative examples of transcript extracts (consistent with an approach used by Avis et al, 2007) where ‘I’ indicates interviewer speech and ‘P’ indicates a parent’s speech, and exceptions where applicable (all data extracts can be seen in Appendix XII).



The data from the sort card activities (which aimed to find out parents' priorities and preferences regarding particular activities, topics, or ways of working that EPs might provide) are also reported where appropriate (where they are considered most relevant to the subtheme being described). I provide an account of the decisions made (where appropriate) in reducing the data into codes and themes and my interpretation of the data according to my research questions and emergent themes. I also discuss the significance of the overall themes in relation to relevant literature.

### 3.1.0: Themes relating to the community



**Figure 1: Conceptual map of the themes relating to the community**

Figure 1 shows that data were organised into two main themes relating to the community and the Children's Centre, with six subthemes. The two main themes are linked by a subtheme that indicates that the Children's Centre is perceived by parents as the main community focus. For this reason, it was not always easy to distinguish whether parents' comments related to the community in general or

whether they referred to the Children's Centre. Each of the themes and subthemes is described below followed by a summary and discussion.

### **3.1.1: Children's Centre**

There are three subthemes relating to the main theme of Children's Centre and these are described below.

#### **3.1.1(i): Children's Centre is the main community focus**

Parents' comments indicating that the Children's Centre is the main community focus included the comments given in Table 5.

<p><i>I: Can I start by asking you to tell me a little bit about the community.</i> <i>P: I think there are a fairly close community because of the centre mainly. It has brought lots of people together, definitely it is got busier and busier, you know, sort of over the years.</i></p> <p><i>I: So when you say, being here, you mean at the centre?</i> <i>P: Yes.</i> <i>I: Do you see, because you said you get to know the community through running a... do you think the community really revolves or is centred around the centre?</i> <i>P: Yes because there is a lot of people in the community that range from teenagers to like thirty, forty with children. Everybody knows that the centre is here, everybody likes to get involved and...,</i></p>
---

**Table 5: Extracts regarding Children's Centre the main community focus**

#### **3.1.1(ii): Children's Centre provides parents with opportunity to socialise and make friends**

Parents' comments indicated their view that the Children's Centre provides a forum within which parents can socialise and make new friends (as illustrated in the extracts given in Table 6).

*I: I will start by asking you a bit about the community. What is it like bringing up a family here?*

*P: Generally it is OK. It is nice that you have got Children's Centres locally like this, like you can pop down for an hour and speak with others.*

*I: So using the community centres to.... so it was another community centre, library and playground.*

*P: I was a little bit upset that nearly all my friends were from Poland. I think that language is really important here so I liked to improve. That is why I come here, (to the Children's centre) to have opportunity to speak English.*

**Table 6: Extracts regarding Children's Centre provides opportunity to socialise**

### **3.1.1(iii): Children's centre staff are helpful/supportive**

As well as the centre being a place where parents can socialise, there appeared to be a strong agreement that the centre provides a wealth of support, and that staff point parents in the direction of help, if they cannot provide for needs directly.

Examples of these comments can be seen in Table 7.

*I: What facilities are you aware of at the Children's Centre?*

*P: Well, support-wise, you have got the health visitors, and even the centre staff there. They have always been glad to help and you know, if they cannot answer a question, they always point you in the direction. There are leaflets available; there are always flyers and stuff going around. So from that respect, you are always finding out new things and what is going on and if they do not know, they always find out for you so.....*

*I: I will move on to the Children's Centre now. What support are you aware of in the centre?*

*P: Blimey, I think with regards to children there is absolutely everything, any kind of support you need, absolutely anything. They have leaflets about absolutely everything, everything out there and anything there isn't they will always find out for you. Or they will point you in the right direction saying you need to do this or go there, or phone this or you can, you know. So pretty good.*

*I: OK. What is it like bringing up a family here in this community?*

*P: I would say, since the centre has been open, it is been great because if you have any problems or need any help, they are always here to guide you or point you in the right direction.*

**Table 7: Extracts regarding Children's Centre staff**

### 3.1.2: Community

Four subthemes were abstracted relating to the community, and these are described below, with the exception of the subtheme 'Children's Centre is the main community focus' which links with the main theme 'Children's Centre' and was described above in section 3.1.1(i).

#### 3.1.2(i): Friendly supportive community

There appeared to be a high level of agreement in parents' comments that the community is generally one in which people are supportive, friendly and will help each other if there is a need (see Table 8 for examples of extracts relating to this subtheme).

<i>I: What are they good at, what is good about parents in this community?</i> <i>P: We all stick together, you know. We all help each other out if need be, we are, you know. If we are not quite happy with what somebody is doing, then we can say, you know, you should not be doing that. We all listening, you know, we are all there for each other. All friendly.</i>
<i>I: What strengths do parents have in this community, what are parents good at? What strengths do they have?</i> <i>P: Well it is that, looking after their kids they are friendly, you know, a lot of the people we come across, seem willing to help, you know.</i>
<i>I: What are parents good at in this community?</i> <i>P: I do not know, all quite good at being there for each other really.</i>

**Table 8: Extracts regarding the community**

Some of the parents' comments indicated that they received support from their or their partner's family (as seen in Table 9). However, given that these comments were few, I decided to incorporate them into this main theme rather than present them as a discreet subtheme.

*I: What other good points are there about bringing up a family here?*

*P: For me, it is quite, especially where I am, I have got really good neighbours, you know, well my neighbour is going to be my childminder so you know, it is, I have good, really good neighbours, good support in that area. Our family literally, well my husbands' family, my family do not live here, but my husbands' family are up the road so it is very, you know, you rely on if you need a hand and I have got friends that have all got kids so you can sort of bond in that respect. But yes, generally it is not a bad place.*

**Table 9: Extracts regarding support from family/partner**

### **3.1.2(ii): Plenty of activities and facilities in the community/Children's Centre**

*P: There seems to be everything in the community. Obviously we have got places like this, the doctors are close to hand, schools and nurseries etc. are ten a penny. There is plenty of choice which is probably the best thing isn't it, because usually, there is some communities where they have one or two therefore you have not got much choice have you? Whereas here, there is everything really. And there is obviously plenty of parks and play things for the kids, you know, to keep them entertained and things. There are all literally local, in the town or just outside the town so they are, you know, only a few miles away sort of thing.*

*P: Yes absolutely because they do courses here as well. So, they are always full.*

*I: So the courses are quite popular.*

*P: Yes absolutely, they do the 'parenting puzzle' I have done that one, cooking Thursdays, loads, I cannot even, it is always packed. Yeah absolutely loads.*

*I: Do you think there are any needs that parents have that are not being met by the centre?*

*P: I think if the centre cannot meet their needs, they always point you in the right direction. Obviously they cannot do everything here. There are always health visitors available or speech therapist, speech and language therapists and stuff like that you know, they are sort of. It is just making sure that parents are aware when they are available or if they are needed immediately, if they could have a contact number.*

*I: Do you think there are any needs in the community that are not being met?*

*P: With regards to children's parks and things, especially around here. I think a lack of parks. I find, there is one around the corner which is great and has got baby swings. But the big park in town, they have got nothing for babies. Nothing for babies and toddlers it is literally for children over the age of five I would say. For children under five, that would be my only gripe.*

**Table 10: Extracts regarding activities in the community**

Parents reported that there are a number of facilities and activities in the community/Children's Centre, with the exception that there appeared to be a lack of

parks and facilities for younger children (under fives). Examples of extracts can be seen in Table 10.

Parents also reported availability of support from other professionals such as Health Visitors and Speech and Language Therapists. Furthermore, they mentioned courses for parents to help them in shaping a child's behaviour (e.g. "parenting puzzle").

### **3.1.2(iii): Difficulties in the community**

Some parents reported difficulties and/or disadvantages in the community, including drug abuse, vandalism, antisocial behaviour, lack of employment and teenage pregnancy. These difficulties are represented within the combined theme 'difficulties in the community' and not represented as individual themes (e.g. crime; employment) as the specific difficulties mentioned varied between participants. Examples of extracts can be seen in Table 11.

*I: Ok, so long as you have got friends it is good.*

*P: Yes. Sometimes I'm a little bit upset that there is a lot of, I do not know how they call it in English, some person who make, for example, destroy something, some children go outside without any attention and they throw rubbish and destroy something. I find, some places, they have it.*

*I: So they (Parents) help each other out, would it be fair to say that?*

*P: Yes absolutely. .... If anybody has got any problems they are always there. Yes. Definitely. You have kind of got different sections though of people, it sounds awful but you do sort of have that spectrum of people where you get those that do not want to know, do not care, smoke drugs, drinking, fighting, arguing and you have got the others that just want to keep away from it all, you know.*

*P: Some of the older children are a bit antisocial they can be (inaudible). In our area, there is a gang.*

*I: Ok, so there is a gang in the area. Do they make life difficult?*

*P: They do for some residents.*

**Table 11: Extracts regarding difficulties in the community**

### **3.1.3: Summary and discussion of themes relating to the community**

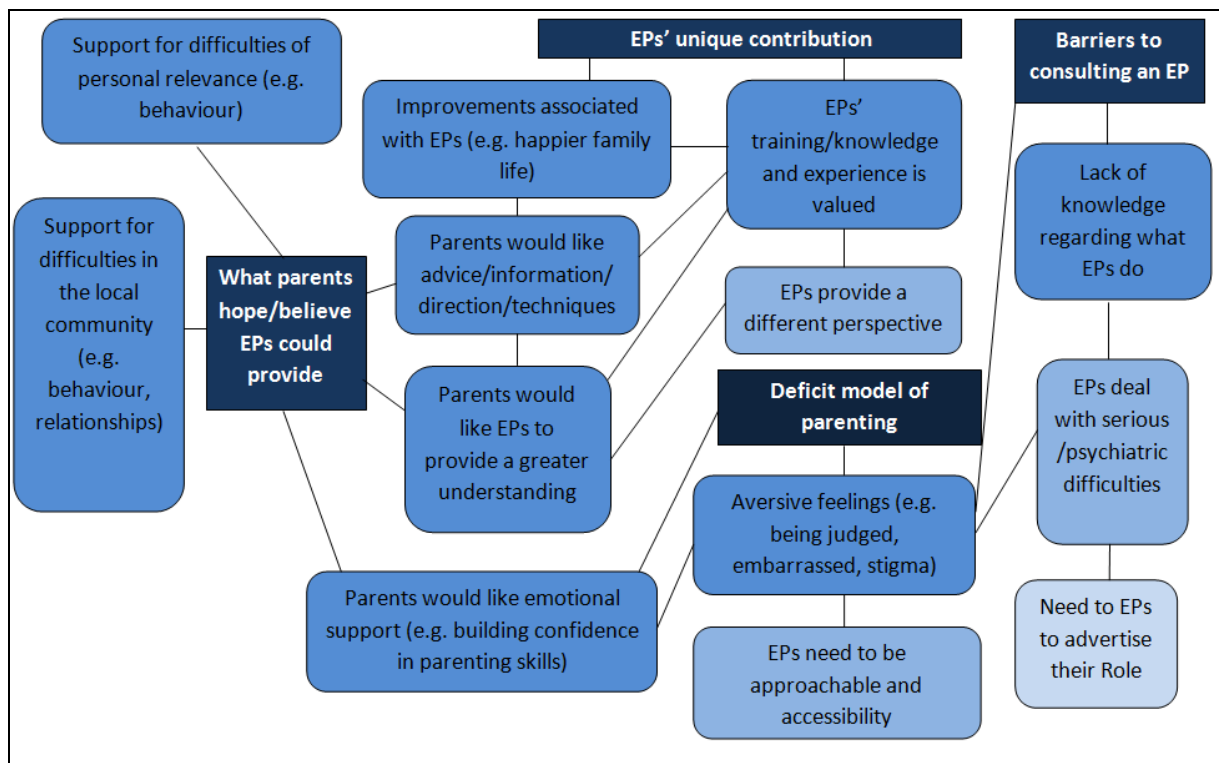
Many parents reported a range of facilities and activities available to families, including parks, but the Children's Centre was positioned by many parents as the main focus of the community. A number of parents reported some difficulties in the local community such as substance abuse and graffiti. Parents' comments indicated that the community in which they live is very supportive and that there is a wealth of support for parents which they can access through the Children's Centre which parents consider has friendly and helpful staff who 'point parents in the right direction'. This is in accordance with the government review into poverty and life chances (Field, 2010) that recommends that LAs...

"should aim to make Children's Centres a hub of the local community. They should maintain some universal services so that Centres are welcoming, inclusive, socially mixed..." (Field, 2010; P7).

Many parents reported that the Children's Centre provides a forum to socialise and make new friends. This is consistent with research conducted into the factors affecting parents' participation in Sure Start programmes conducted by Avis et al (2007) who found that making social contact and sharing information were reasons given by parents for engaging with Sure Start programmes. This militated against a feeling of isolation which parents may otherwise experience in bringing up their children. Avis et al (2007) also report that Sure Start was often the only engagement that parents had with supporting organisations outside of the home, which was all the more important in light of the reported evidence that access to social support was a predictor of positive outcomes for parents and their children (Wiggins et al, 2004).

Despite the wealth of support already available, parents' comments indicated that they would value the opportunity to meet directly with an EP and the themes relating to EP work are reported below.

### 3.2.2.0 Themes relating to EP work



**Figure 2: Conceptual map of the themes relevant to EP work**

Figure 2 shows that there are four main themes relating to the potential role and value of EPs in working directly with parents in the Children's Centre. Each main theme and accompanying subtheme is described, followed by a summary and discussion of the main theme.

#### 3.2.2.1: What parents hope/believe EPs could provide to them

This main theme comprises five subthemes that are described below.



### 3.2.2.1(i): Support for difficulties in the local community

Some parents reported needs in the community which they perceived as relevant to EP work. These included difficulties with children's behaviour, family relationships (e.g. step families and partners) and a need to focus on early learning. An example of extracts relating to this subtheme is given in Table 12.

<p><i>I: Do you think it would be useful to parents to be able to meet with a psychologist in the Children's Centre?</i></p> <p><i>P: Yes one hundred percent.</i></p> <p><i>I: What is it that you.....?</i></p> <p><i>P: I think it would be good as there are a lot of parents with children, if they cannot control their behaviour, or, you know, they have got problems, they are running riot at home and everything.</i></p> <p><i>I: Would that be a lot of parents in this community would you say?</i></p> <p><i>P: Yes I would say so.</i></p> <p><i>I: Anything other</i></p> <p><i>P: Friendships, does that come under like couples?</i></p> <p><i>I: You are talking....</i></p> <p><i>P: Marriages, that sort of thing, like step families that sort of thing, there are loads of problems there.</i></p> <p><i>I: So, shall I put that as another support for....</i></p> <p><i>P: Families, it would be like if there was a marriage, but not like marriage guidance as such in it itself. But there are some problems that couples have that sort of thing.</i></p> <p><i>I: Is that a particular need in the community do you think?</i></p> <p><i>P: I know of a few people.</i></p> <p><i>I: OK no names (laugh).....</i></p> <p><i>P: (laugh), but I know of a lot actually about four or five people that I have known that have split up and got back together this year alone you know it is..</i></p> <p><i>I: Ok so that is something useful that a psychologist could offer.</i></p> <p><i>P: Yes and also their step families, interaction between step families.</i></p>
--

**Table 12: Extracts regarding support for difficulties in the local community**

### 3.2.2.1(ii): Support for difficulties of personal relevance

Although parents were not asked to comment from personal experience, many parents reported difficulties for which they considered they would like to speak with an EP. Table 13 provides examples of extracts relating to personal difficulties.

*I: OK and what is it you think that would be useful with those two (chosen sort cards)?*

*P: Well my daughter is having problems and it may be nice to speak to somebody that was a bit more, ..., might have some more information.*

*I: OK. Do you want to say more about that or not?*

*P: Well she is having some problems with socialisation but she is only three. We have been to the paediatrician, but it would be nice to speak to somebody else that was a bit more in-tune with the way that children develop.*

*I: What could a psychologist offer that other staff or professionals do not already offer or might not do as well?*

*P: I do not know really. Just advice and support really. I would like to speak with somebody about my (children ....) who get me down with their behaviour.*

*P: Educational Psychologists would be good.*

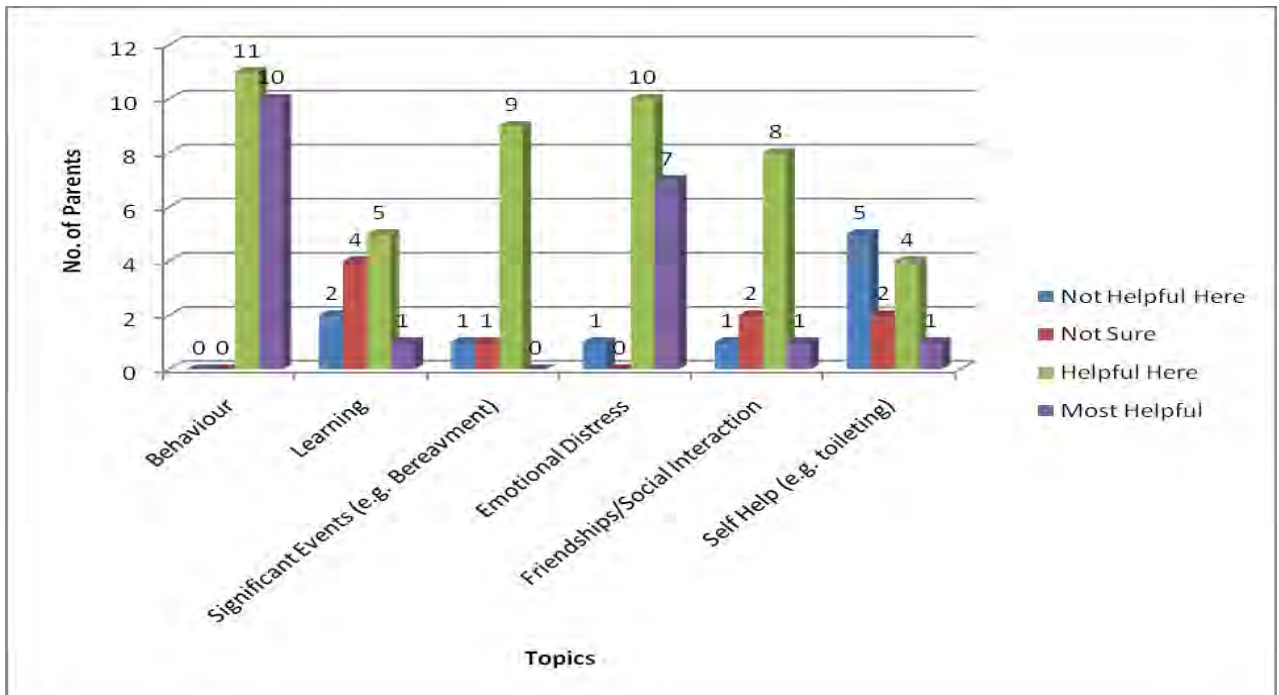
*I: Why do you think that?*

*P: Well my daughter is having some problems and it would have been nice if there had been somebody here to speak to earlier..... For it to have been picked up at nursery. It would have been nice if there was somebody here that could....*

**Table 13: Extracts regarding support for difficulties of personal relevance**

Difficulties parents suggested it would be helpful to speak with a psychologist about included their child's behaviour, and social interaction. The above comments are supported by responses which parents gave to the sort card activity which had asked parents to indicate their preferences regarding 'topics' that EPs might helpfully address. Figure 3 shows the results of the activity.

Figure 3 shows that parents felt that it would be helpful for EPs to offer support on a range of topics. However, most parents felt that EP support would be most helpful for topics relating to the children's behaviour and emotional distress.



**Figure 3: Topics that parents reported would be helpful for an EP to cover**

Three parents offered ‘other’ comments. One of these parents commented that EPs would help provide support when there are difficulties that are ‘out of the ordinary’ or ‘off the scale’ difficulties, rather than ‘everyday growing up’. However, this parent was one of the first three parents to be interviewed (and therefore did not receive the standard script regarding an EP’s role) and appeared to hold the perception that EPs’ work is akin to that of a psychiatrist. Another parent commented that EPs could helpfully support parents to cope with stress, while another parent suggested that support for adult relationships would be helpful, as illustrated in the extracts in Table 14.

*I: Anything other?*  
*P: Friendships, does that come under like couples?*  
*I: You are talking....*  
*P: Marriages, that sort of thing, like step families that sort of thing, there are loads of problems there.*  
*I: So, shall I put that as another support for....*  
*P: Families, it would be like if there was a marriage, but not like marriage guidance as such in it itself. But there are some problems that couples have that sort of thing.*  
*I: Is that a particular need in the community do you think?*  
*P: I know of a few people.*  
*I: OK no names (laugh).....*  
*P: (laugh), but I know of a lot actually about four or five people that I have known that have split up and got back together this year alone you know it is..*  
*I: Ok so that is something useful that a psychologist could offer?*  
*P: Yes and also their step families, interaction between step families.*

**Table 14: Extracts of ‘other’ comments made during the sort card activity (topics)**

It is interesting that ‘learning’ was only considered to be a useful topic by five of the eleven parents. It appeared as though parents equated a child’s learning with ‘formal’ pre-school and curricula, and viewed their child as too young for them to be concerned about learning. Thus, I believe parents equated the term learning with academic learning, rather than to include the incidental learning that takes place through everyday interaction and play, and/or the more formal learning activities that they would support at home. This is illustrated in the extracts in Table 15.

*I: Why did you pick behaviour and emotional distress as your top two?*  
*P: I think when you hear the word psychologist, to me, I do not know why, the words that come into my head are children that have got behavioural problems or learning problems, and that is where I would find someone like you useful.*  
*I: Why not learning as your top two then?*  
*P: No, that as well but those two are the main ones that I would find most useful. Learning would be, but I think you have got other support out there to help with that. I mean teachers and things. Whereas, behaviour, I think psychologists are more trained than a teacher to deal with issues like that. And parents if they cannot deal with their children’s behaviour issues all the time, or they get to the point that their children do not listen anymore, and that is when they might go to you.*

**Table 15: Extracts regarding formal learning**

An exception to this was given by a parent who commented that he felt that there was a lack of emphasis on learning in the centre and that he felt that promoting parental involvement in their child's learning would be a 'most helpful' topic that EPs could address within the community as illustrated in Table 16.

*I: Do parents in the community have any areas of need that are not being met well by the centre?*  
*P: I do think it would be good to have more of an educational kind of theme. I mean, my little boy he has joined the book library and will take books home every single week. I think that would be good if it was encouraged as well. And when he brings his books back, he goes and talks to them about it, what he has read and everything. So I think that is good. I think there should be more of that, more emphasis on.... For example we have a sing song at the end of the session where we all have to sing. But I think it would be good for a member of staff to read as well.*  
*I: So perhaps more focus on the educational.....*  
*P: On the educational, take a theme and then stay with that theme and structure everything around it. I mean I know it is called 'stay and play' but I still think it would be good for the children to learn different things. I know we learn through play but I think it would also be good to do it through reading.*

**Table 16: Extracts regarding little emphasis on learning**

### **3.2.1.1(iii): Parents would like emotional support**

Many parents reported that they would like emotional support from an EP. This included support relating to building confidence in parenting skills as well as talking through the challenges of parenting – as illustrated in the extracts presented in Table 17.

*I: Do you think it would be useful for parents to be able to meet with a psychologist in the Children's Centre?*

*P: Yes because being with small children very often is quite difficult. They are not sure if they do good. Sometimes even me, feel I am not good mum. I lost sometimes, I scream children, it is wrong, I blame myself very often.*

*I: So it is supporting parents because it is difficult sometimes and making them feel better.*

*P: Especially if the children are babies, you cannot talk with a small person, you are alone with your mind.*

*I: What difference would it make to parents and their children if they were able to meet with a psychologist in the centre?*

*P: Support for parents, it might put their mind at rest. They may have some questions you know, behaviour problems or something. It might be the first people they speak to rather than go straight to a doctor or going down that route. To offer parents support help and direction of what they could do with their children.*

*I: If a psychologist was able to come to the centre and parents were able to meet with them, what difference do you think it would make for parents and their children?*

*P: If I got some support from psychologist I would feel more confident, I feel stronger. I can be better parent for my children. For children the best thing is to have good parent isn't it!*

**Table 17: Extracts regarding emotional support for parents**

#### **3.2.1.1(iv): Parents would like advice/information/direction/techniques**

Parents reported that they would like advice, information, techniques and direction from EPs. This is illustrated in the example of extracts presented in Table 18.

*I: What could a psychologist offer that other staff or professionals might not offer or might not do as well?*

*P: Probably a different approach to help with bringing up kids. Just different advice I suppose isn't it really. I would say more specific direction and a different approach really isn't it.*

*I: What difference would it make for parents and their children if parents were able to meet with a psychologist in the centre?*

*P: It would be helpful because they would be able to talk through their problems and unload basically. I think that would be really helpful and it is not something where they would be able to talk to their friends and have the wrong advice. They would be able to talk to somebody, you know a professional, and be given good advice. They would be given advice on how to change, how to change the situation.*

*I: What difference would it make to parents and their children if there were able to meet with a psychologist in the centre?*

*P: Support for parents, it might put their mind at rest. They may have some questions you know, behaviour problems or something. It might be the first people they speak to rather than go straight to a doctor or going down that route. To offer parents support help and direction of what they could do with their children.*

*I: OK. ... What difference would it make to parents and their children if parents were able to meet with a psychologist here in the centre?*

*P: It might help them. Give them some useful advice on how to deal with children problems, before it got out of hand, if you know what I mean.*

*I: So is that like an early intervention?*

*P: Early intervention I think before it escalates.*

**Table 18: Extracts regarding EPs helpfully providing advice/direction**

### **3.2.1.1(v): Parents would like EPs to provide a greater understanding**

Some parents reported that they felt that a psychologist would help generate a greater understanding of their child, as illustrated in the extracts presented in Table 19. That parents would like a deeper understanding of their child indicates that they recognise the external influences on a child's behaviour (e.g. parenting) rather than seeing difficulties from a purely 'within child' perspective. There was however, an exception to this, as one parent described a child's difficulties according to 'within child' factors as can be seen in the extract presented in Table 20.

*I: What could a psychologist offer parents that other staff do not already offer or might not do as well?*

*P: Psychology goes a bit more deeper. Goes under the surface rather than just seeing what is in front of your eyes, which I think helps give you a better understanding of why whatever is going on, is going on.*

*I: What difference would it make to parents and their children if parents were able to meet with a psychologist in the centre? .... If we were to do any of those activities (referring to the ones on the sort cards) what difference would it make?*

*P: I would hope things would get easier with understanding of each other, between me and the child, to know where the child is coming from so that I can use techniques to help the child develop them better.*

*I: I will ask you this question and then I will tell you a little bit about what psychologists do. Do you think it would be useful for parents to be able to meet with a psychologist in the centre?*

*P: Yes absolutely.*

*I: Why do you think that is?*

*P: Some parents do have... I cannot think of the right words to say.... maybe, have a lesser understanding of their child because all children are different, all people are different everybody is you know, sometimes they do not understand why their child maybe behave the way they do.*

**Table 19: Extracts regarding a greater understanding**

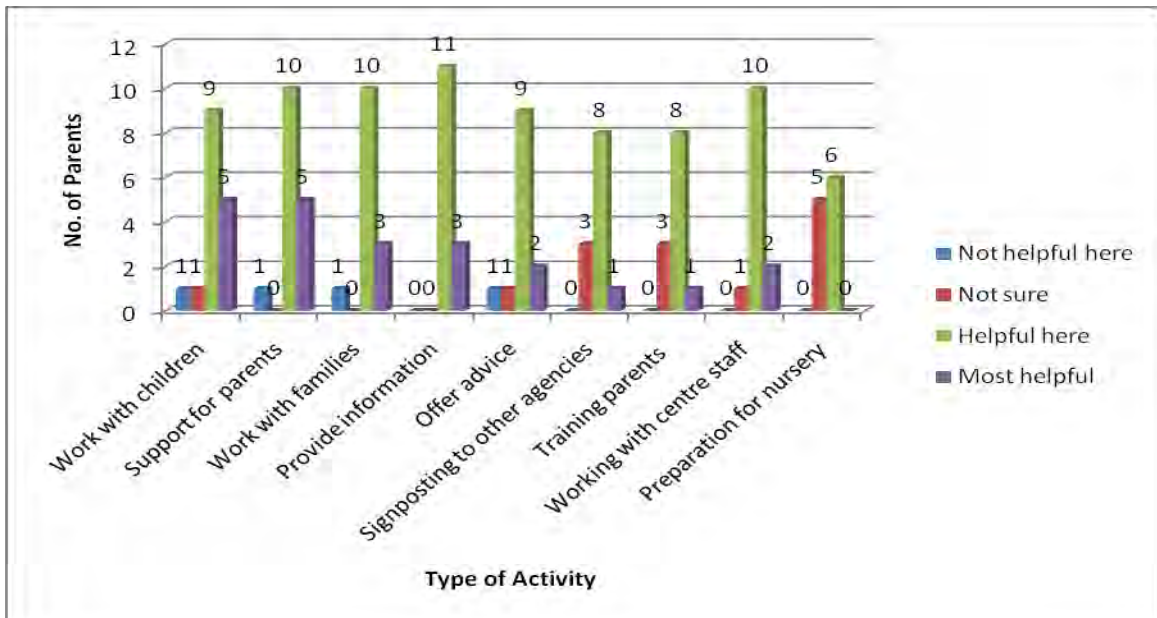
*I: OK. Are there any other people or staff that you think parents might like to be able to talk with in the centre? I am thinking about other professionals really that do not already come along that might be useful/helpful?*

*P: The thing is, even when the children start nursery we are doing a course. You know, there is always as in yourself maybe. You know. It is like a certain person destroys absolutely everything you know, it would be nice to be able to ask somebody who knows why they are doing this. People have asked around and people have said he is bored or it is this, it is that, but you know, it is not boredom it is absolutely is not. It is just a destructive nature I think and I could talk to somebody about that for example, I would find that helpful.*

**Table 20: Extract suggesting 'within child' factors**

That parents appreciated the broader role of the whole family/parents in shaping a child's wellbeing is supported by the results of the sort card activity that asked parents whether it would be helpful for EPs to undertake listed activities.





**Figure 4: Activities that parents reported would be helpful for an EP to undertake**

Figure 4 indicates that parents felt that EPs could offer a range of helpful activities in the centre. However, nearly half of the parents reported that the most helpful activities would be working with children and supporting parents. Interestingly, supporting parents and working with children were more often cited as the most useful activity compared to providing advice. One parent offered an ‘other’ activity that EPs could usefully provide, suggesting that EPs could usefully support relationships between adults and step families.

### **3.2.1.2: Summary and discussion of what parents hope/believe EPs could provide**

Parents’ comments indicated that they felt that EPs might relevantly provide support for needs in the community relating to children’s behaviour and family relationships. In supporting family relationships, EPs may promote better outcomes for children since it has been found (Coleman & Glenn, 2009) that ongoing conflict in the home

and a number of changes in the structure of the family and/or 'unstable or unloving' families, are associated with adjustment difficulties in children and impact on their life chances (Field, 2010).

Given that family breakdown and parental discord are considered to be predisposing risk factors for behaviour difficulties (Brown & Dillenburg, 2004) and the longstanding recognition of features of family interactions which impact positively or negatively on a child's learning and intellectual development (e.g. Dunn, 1989), perhaps family systems approaches (Pellegrini, 2009; Fox, 2009; Dowling & Osborne, 1994) might be appropriate to working with families in promoting positive outcomes for children. Indeed, Pellegrini (2009) provides a case example of the application of a family systems approach. He suggests that despite the lack of 'published evidence' of systems work in EP practice, 'systems theory can contribute to EP work'. However, he acknowledges that many EPs have 'received limited training in systemic theories'.

Parents also reported personal difficulties about which they would like to speak with an EP, and most parents felt that EP support would be most helpful for topics relating to the children's behaviour and emotional distress. This is not surprising as Brown and Dillenburg (2004) report that between 10-15% of pre-school children have 'mild to moderate behavioural problems' (Campbell, 1995).

Parents reported that they would like emotional support from an EP which included building their confidence in their parenting skills. They also reported that they would like advice/information/strategies and direction from EPs. Cameron (2006) acknowledges that providing advice has been recognised as part of EP work (e.g. DfES, 2005). The provision of advice to parents and support in developing their

parenting skills has been described in terms of an 'Expert' or 'Transplant' model of engagement with parents (Dale, 1996; Mittler & Mittler, 1983). These models of working have been challenged for a number of reasons, which include that a narrow focus on the child excludes aspects of the child's world (e.g. family) that will influence the effectiveness of any intervention and the wellbeing of the child (Dale, 1996) (see section 1.3.4: Power and partnership with parents for fuller description of this literature).

Furthermore, Osborne (1994) warns against 'advice-giving' as a 'prevailing technique' because such an approach may potentially undermine the retention of responsibility and independence of the recipient and may damage 'self-esteem'.

However, parents' comments indicated a link between them wanting advice in order to develop a better understanding of their child, and some parents reported that they felt that a psychologist would help generate this greater understanding of their child.

That parents would like a deeper understanding of their child indicates that they recognise the external influences on a child's behaviour (e.g. parenting) rather than seeing difficulties from a purely 'within child' perspective. This is supported by the parents' comments that indicated that many parents hold a 'deficit model' relating to parenting skills (described below in section 3.2.4.1: Deficit model of parenting). That parents appreciate the broader role of the whole family/parents in shaping a child's wellbeing was supported by the sort card activity that indicated that parents felt that EPs could offer a range of helpful activities in the centre and that the most helpful activities would be working with children and supporting parents. Indeed, supporting parents and working with children were more often cited as the most useful activity compared to providing advice.

It appears then, that what parents within the community would value most highly from the opportunity to meet with an EP, is emotional support and confidence-building in their parenting skills. This would suggest, (consistent with a move away from 'advice giving', given the risk of undermining the recipients' self-esteem, Osborne, 1994) that a consultative approach described by Fox as a...

“collaborative process where the EP as a non-expert helps in a collaborative way to co-construct new ways of seeing problems....”  
(Fox, 2009; P255),

may be appropriate. Pellegrini (2009) says that the use of Solution Focused Brief Therapy (SFBT) that builds on parents' strengths (de Shazer, 1994) and focuses on solutions rather than problems (Redpath & Harker, 1999) is likely to be more appropriate in such a setting. Solution focused approaches have roots in family therapy (George et al, 2007) and can be seen as conforming to a Community Psychology approach in empowering and working in partnership with the community/parents (Rappaport, 1977).

A study conducted by Brown and Dillenburg (2004) in a Sure Start centre in Northern Ireland evaluated a behaviour intervention in which a parenting training programme was combined with SFBT (de Shazer, 1994), provided either weekly or fortnightly by a therapist. Some improvement in the children's behaviour and the level of stress experienced by parents was reported. This provides some support for Bronfenbrenner's (1979) ecological theory. That support for parents, impacts positively on child behaviour would suggest influences working at the exosystem level indirectly impact on child development. EPs then, may potentially be considered to be promoting better outcomes for children when working with families systemically. EPs in this respect, would therefore be considered as part of the child's exosystem.

This claim would need to be further supported by evidence of EPs work with families as impacting positively on child development which appears to be lacking.

However, Brown and Dillenburg (2004) found the efficacy of the intervention appeared to be lower for 'multi-problem' families (where parents experienced high levels of stress coupled with low levels of support). Brown and Dillenburg (2004) therefore question whether there should be stronger links between Sure Start and other services because of the need for multi-agency support for families experiencing more complex or compound problems.

Learning was considered to be a useful topic for EPs to cover by just under half of the parents, although parents appeared to equate a child's learning with 'formal' learning that takes place in school settings. It appears then, that parents might not be aware that the home learning environment (Sylva et al, 2004) and parental participation in their child's learning activities (Sabates, 2008; Desforjes & Abouchaar, 2003) are likely to exercise considerable impact on their child's progress. Children from low Social Economic Status (SES) families are less likely to be taught literacy-skills by their parents compared to high SES families (Nicholson, 1997; Snow, 1994), perhaps indicating that parents from low SES families may not be motivated, and/or appreciate the need to engage in home teaching (Macleod, 1996) and indeed that some parents themselves might not be good readers (Handle and Goldsmith, 1994) and so lack confidence in their ability to support the academic progress of their child/ren or be 'unaware of appropriate home-learning activities' (Holloway et al, 1995; Ford et al, 2003).

However, since children who perform poorly in reception class tend to remain behind in academic attainment throughout their school career (Alexander & Entwisle, 1988),

Ramey and Ramey (1998) argue that it is 'crucial that efforts to involve' parents from low SES backgrounds happens as early as possible (Ford, Evans and McDougall, 2003). Ford et al, (2003) state that:

"It has been argued that getting parents involved in their children's education at an early stage should foster an informal learning environment within the family that perpetuates such behaviours over time." (Ford, et al, 2003; P92).

Indeed, Ford et al, (2003) found that a six week early intervention programme (for children of pre-school age), involving activities designed to develop pre-reading and numerical skills, that was delivered by parents from a low SES (as well as other parents and project workers) was found to promote 'immediate and enduring benefits' to the children, and that this may have better prepared the children for school. More recently the early learning home environment has been recognised as an important contributing factor to educational outcomes for children (e.g. Field, 2010). However, parents in this study did not appear to consider support for their children's learning an appropriate area for EPs to address at this stage of their child's development.

Research into the distinctive contribution of EPs (Farrell et al; 2006) found that EPs contribute in a number of ways, including applying knowledge and skills relating to the psychological impact of different 'conditions' on the child, family and community. EPs would generally claim to work systemically by recognising these complex recursive influences on a child's development. Thus, through working with families and communities EPs work is in accord with the concepts of the exosystem and macrosystem (Bronfenbrenner's ecological theory, 1979). In order to further support

these aspects of the theory, research would be required to explore the impact of such work on child development.

### **3.2.2.1: EPs' unique contribution**

There are two subthemes relating to this theme, with a further subtheme linked to one of these.

#### **3.2.2.1(i): EPs' training, knowledge and experience is valued**

Parents reported that they felt that an EP could offer a unique contribution because of their training, knowledge and experience. Examples of extracts relating to this subtheme are given in Table 21.

<p><i>I: Why would you like to see a psychologist rather than someone else at the centre?</i> <i>P: Because you are trained to what we would want and people here are not as trained to do that.</i> <i>I: Can I push you just a little bit... what is it that parents want?</i> <i>P: Someone on a highly professional level. Because it is a Children's Centre it is still quite, nursery work really, it would be nice for us to have a highly professional for us to talk to that would really know and has been trained.</i></p> <p><i>I: Why did you pick behaviour and emotional distress as your top two?</i> <i>P: I think when you hear the word psychologist, to me, I do not know why, the words that come into my head are children that have got behavioural problems or learning problems, and that is where I would find someone like you useful.</i> <i>I: Why not learning as your top two then?</i> <i>P: No, that as well but those two are the main ones that I would find most useful. Learning would be, but I think you have got other support out there to help with that. I mean teachers and things. Whereas, behaviour, I think psychologists are more trained than a teacher to deal with issues like that. And parents if they cannot deal with their children's behaviour issues all the time, or they get to the point that their children do not listen anymore, and that is when they might go to you.</i></p>
--

**Table 21: Extracts regarding psychologists' knowledge and training valued**

The training, knowledge and advice of an EP, appeared, from parents' perspective to qualify them to provide good advice and promote a greater understanding of children.

This subtheme is therefore linked to the subthemes ‘Parents would like advice/information/direction/techniques’ and ‘Parents would like EPs to provide a greater understanding’ described in sections 3.2.1.1 (iv and v).

### **3.2.2.1(ii): EPs provide a different perspective**

Parents’ comments also appeared to indicate that they considered that the training, knowledge and experience of an EP meant that EPs could offer a different perspective. Examples of extracts relating to this subtheme are given in Table 22.

<p><i>I: And what is about a psychologist that would enable them to do that better than somebody else do you think?</i></p> <p><i>P: I suppose because a psychologist will understand human behaviour more so and the workings of how a human mind works basically. I mean there are a lot of things are social as well aren't they and they can affect you emotionally....</i></p> <p><i>I: With what you know about what psychologists do, do you think it would be useful for parents to be able to meet with a psychologist in the Children's Centre?</i></p> <p><i>P: I think if you were worried about your child or thought that they had problems or were not mixing with other children, then yes. I think it would be a good thing. Even if it was like a chat. You might know something that we as parents might miss.</i></p> <p><i>I: What is it that psychologists do, to contribute to enhancing emotional.....?</i></p> <p><i>P: I suppose it is helping people to see that life can be different, changing their perspective, I think.</i></p> <p><i>I: What do you think a psychologist could offer that other people or professionals do not already offer, or do not offer as well?</i></p> <p><i>P: I think you guys have got the training and skills to be able to dig deep in child's minds. Whereas parents know their children but they know them in a different way.</i></p>
--

**Table 22: Extracts regarding EPs’ different perspective**

That EPs provide a different perspective appeared to be linked to parents themselves wanting a greater understanding of their child: this subtheme is therefore linked to the subtheme described in section 3.2.1.1(v).



### 3.2.2.1(iii): Improvements associated with EP input

*I: OK. ... What difference would it make to parents and their children if parents were able to meet with a psychologist here in the centre?*

*P: It might help them. Give them some useful advice on how to deal with children problems, before it got out of hand, if you know what I mean.*

*I: So is that like an early intervention?*

*P: Early intervention I think, before it escalates.*

*I: What could a psychologist offer parents that other staff or professionals do not already offer or might not do as well?*

*P: If you come to the centre it would be unique. To work where people could access you without going through everyone else first. It would be nice to have a direct thing to you so we would not have to be passed from pillar to post I suppose.*

*I: What difference would it make to children and their parents if parents were able to meet with a psychologist in the centre?*

*P: Knowing that they might be able to help you.*

*I: So it is just knowing, it is like having the security blanket. Ok, so if the support was there and was used by the parents, what difference do you think it would make?*

*P: Loads, to be confident. Confidence knowing that you can cope.*

*I: In terms of parents then, it would be better confidence and just knowing, is that right?*

*P: Yes.*

*I: If a psychologist was able to come to the centre and parents were able to meet with them, what difference do you think it would make for parents and their children?*

*P: If I got some support from psychologist I would feel more confident, I feel stronger. I can be better parent for my children. For children the best thing is to have good parent isn't it!*

*P: Educational Psychologists would be good.*

*I: Why do you think that?*

*P: Well my daughter is having some problems and it would have been nice if there had been somebody here to speak to earlier..... For it to have been picked up at nursery. It would have been nice if there was somebody here that could..*

*I: OK, of those....(pointing to the 'useful here pile), which are probably the most useful?... and give some reasons why?*

*P: Friendships, my daughters not forming friendships. I could do with some help with that and behaviour – she, her behaviour is becoming a problem when people are approaching her. So, before they get labelled as naughty.*

**Table 23: Extracts regarding improvements associated with EP input**

Parents reported that they might expect to see a number of improvements if they had the opportunity to meet directly with a psychologist in the centre. Given the variety of

responses and the lack of consistency between the responses of different parents, the responses were grouped together in the subtheme of 'improvements associated with EP input'. Examples of extracts relating to this theme are given in Table 23. The improvements included that having access to speak with an EP could provide parents with confidence in their parenting skills and by doing so would also lead to happier family life. Furthermore, respondents advanced the view that the training, knowledge and experience that EPs have, means that parents would be confident that the advice that they were getting was 'professional' and also that they could access this 'specialised knowledge' directly without being passed 'from pillar to post'. Thus, the opportunity to meet directly with a psychologist in the Children's Centre might be construed as early intervention (e.g. access to the right advice and bypassing a trial and error approach).

### **3.2.2.2: Summary and discussion of EPs' unique contribution**

Parents reported that they felt that an EP could offer a unique contribution because of their training, knowledge and experience, and this appeared to qualify EPs to provide advice and promote a greater understanding of their child. Furthermore, parents felt that because of their training, knowledge and experience, EPs could offer a different perspective.

The application of psychological knowledge and consultative skills by EPs has been recognised as helping to promote a 'deeper understanding of children's needs'.

Cameron (2006) for instance wrote:

"Achieving a transparent connection between psychology and the problems of adults and children will require applied practitioners to utilise sophisticated consultation processes and an in-depth understanding of problematic situations, offer research-based, creative and effective ways of managing these problems, and also promote pro-

active approaches to minimise the occurrence and impact of such problems in the first place.” (Cameron, 2006; P262).

Cameron (2006) argues that EPs’ distinctive contribution includes their capacity to draw upon their psychological knowledge base to ‘uncover mediating variables’ that would enable an explanation of behaviour.

The consultative approach can be used to promote different perspectives as opposed to applying an ‘expert’ model of service delivery. Osborne (1994) for instance argues that...

“the aim of consultation is to look at different perspectives, to shift perceptions and encourage the setting up of alternative hypotheses and possibilities for intervention, rather than in submitting to the pressures to give an expert opinion, which might then be discredited, and may well not be followed.” (Osborne 1994, in Dowling & Osborne, 1994; P38).

Similarly, Fox (2009) also argues that the psychologist’s role is to suggest hypotheses about the situation, coupled with the use of re-framing where the psychologist ‘offered a new way of seeing a problem’ (Fox, 2009; P252). Thus, psychologists might use their consultative skills to promote different perspectives, enabling parents themselves to conceptualise ways in which to address difficulties. Supporting parents to explore different perspectives and therefore change parenting behaviour would mean that EPs would be operating at the child’s exosystem level (Bronfenbrenner’s ecological model 1970). Again, this claim would need to be further supported by evidence of EPs consultative work with parents as impacting positively on child development.

Cameron (2006) recognises that EPs offer a ‘distinctive perspective’ from their application of ‘scientific psychology’ to generate hypotheses regarding behaviour and a ‘commitment to evidenced-based practice’. This might occur for instance, where

psychologists adopt an 'interactive rather than a single-factor view' of a problem situation (Cameron, 2006; P293).

EPs' unique grounding in psychological knowledge and training, and the application of this knowledge to promote a 'deeper understanding' of behaviour is consistent with Farrell et al's (2006) review into the functions and contributions of EPs in England and Wales, which found that EPs' academic background and training were acknowledged as a factor that 'enabled a distinctive contribution'.

Shannon and Posada (2007) provide examples of what EPs working in the early years can offer that is distinct from other professionals within the context of a multi-agency approach that include...

"offering a uniquely psychological slant on the child and the family and developing psychologically-based interventions for parents and carers."  
(Shannon & Posada, 2007; P271).

Thus, improvements that the parents in this research expect as related to EPs' grounding in psychological knowledge and application of psychological skills is consistent with research. Other improvements that parents reported they might expect to see varied, and included building greater confidence in their parenting skills that would lead to happier family life. Furthermore, parents indicated that they would be confident that any advice received would be securely grounded in the EPs' training, knowledge and experience, and would therefore be 'professional', and, due to the direct access to this provision, would constitute early intervention (as demonstrated in section 3.2.2.1(iii): Improvements associated with EP input).

Early years support within the community has been associated with positive outcomes for children and their families. Field (2010), for instance, report that...

“assisting parents with understanding child development and providing a breadth of parenting advice are two of the most crucial aspects of early years support. Support that leads to improvements in parent-child interactions and helps parents to cope with the pressures of parenting was viewed as especially important. Others also indicated that parents require increased support in understanding the behaviours that lead to better outcomes for children, which could be delivered through Sure Start Children’s Centres....” (Field, 2010; P87).

This is consistent with research that reported that a focus on local need had created an opportunity for EPs to contribute to early intervention and prevention activities (Davis et al, 2008). EPs engaging in more work supporting families with children in the early years is also consistent with the early intervention and preventative approach advocated in government reports such as the DfEE, (2000) report into the ‘Current role, good practice and future directions’ of Educational Psychology Services.

### **3.2.3.1: Barriers to consulting an EP**

Parents identified a number of barriers to speaking with a psychologist that comprise a subtheme with two further subthemes that are described below. The theme ‘Barriers to consulting an EP’ and subtheme ‘ EPs deal with serious/psychiatric difficulties’ link with the subtheme ‘Aversive feelings’ that is described under the main theme heading 3.2.4.1: ‘Deficit model of parenting’.

#### **3.2.3.1(i): Lack of knowledge regarding what EPs do**

Parents reported that a lack of knowledge regarding the role of an EP was likely to act as a barrier to parents accessing the support available. Table 24 provides examples of extracts relating to this subtheme.

*I: Ok. What reasons do you think that parents might not speak with a psychologist in the centre?*

*P: Maybe shy, afraid. Afraid to open up. They do not know what you do.*

*I: What do you think a psychologist could offer parents that other staff or professionals do not already offer or might not do as well?*

*P: Again, not particularly knowing what..... Not particularly familiar with what a psychologist does, I do not know, I would say you tell me, I was not really aware of what the potential was really. Difficult to answer. (This was one of the first three parents interviewed and therefore was not read the script regarding what EP do).*

**Table 24: Extracts regarding lack of knowledge of EP role**

However, there were a few exceptions, as some parents did have some knowledge about the role of psychologists, as indicated in the example presented in Table 25.

*I: Moving on now to psychologists. Do you have any experience of psychologists in your own life or through watching TV or have any idea of how we work or what we do?*

*P: No, I probably seen something on the television, a documentary of an interview but it is over my head really. It is not something I have any experience with. It is all new to me.*

*I: From what you have watched on TV, what might we be doing, what were they doing?*

*P: Interviewing children trying to sort of work them out in a way. Trying to find out where they are or what they are thinking. With regards, I saw a programme about a child that had got problems. So you know they were just trying to sort of, dig deep. Find out where they had come from and whether it was down to a sort of family thing or why they have got it sort of thing. If it was down to the family or why they have got it.*

**Table 25: Extracts regarding exceptions to lack of knowledge of EP role**

### **3.2.3.1(ii): EPs deal with serious/psychiatric difficulties**

Some parents appeared to have the perception that psychologists work with 'serious problems' such as those that are relevant to psychiatrists (as illustrated in the extracts presented in Table 26) and thus, parents reported a level of 'stigma' associated with seeking or receiving support from a psychologist. This subtheme is therefore linked to the subtheme 'aversive feelings' described in section 3.2.4.1(i).

*P: Yes, I would suppose my reaction, a lot of people would think child psychologists get involved if there are serious issues. Whereas if you, I am still not particularly clear, but it might be, is it true or not?, you might be of a much more subtle role to play. Then if that is the case, then, that is something that probably people do not understand. That is where the stigma comes from. But if it is a light touch, you know, you could have a light touch helping children's development and parents understand that, then I am sure they might be much more inclined to.... maybe change your name. Call yourself something else.*

*I: What difference would it make for parent and their children if parents were able to meet with a psychologist in the centre?*

*P: I suppose, you might find that they talk to you, people would probably take advantage of it perhaps. They might not because people might see it as stigma, if they think 'well I am going to see a shrink about my kids'.*

**Table 26: Extracts regarding EPs deal with serious problems**

### **3.2.3.1(iii): Need for EPs to advertise their role**

Given the lack of clarity regarding an EP's role, there was considered to be a need for EPs to 'advertise' their role and so ensure that parents are aware of the 'subtle' approach that they can offer (as illustrated in the extracts given in Table 27).

*I: So what do you think could be done differently to make sure that parents feel comfortable speaking to psychologists?*

*P: God! I do not know. I think make sure that the parents know exactly what a psychologist does and make sure the psychologist sits in with the parents and children and not just sit in a little room on their own.*

*I: Is there anything that could be done so that we can offer a service that would encourage parents to come along?*

*P: I would say, I think the word (Psychologist) sometimes does not relax people at all. Again information, a flyer and things.*

*I: So it is about advertising?*

*P: Yes, it is not all about if my child's got difficulties, psychology in their brain or what not. It is not always about that. Sometimes it is also about just having a chat with somebody and making them feel better. So yes, just put more information out there really to reduce fear. A lot of mothers and parents are feared by this.*

*P: Yes it is not about something is wrong, it is about what you do, how you do it and how you can help in some respects, it might be informal but I would say lots of people do not know.*

**Table 27: Extracts regarding EPs' need to advertise their role**

### **3.2.3.2: Summary and discussion of barriers to consulting an EP**

Many parents reported that a lack of knowledge regarding the role of an EP was likely to act as a barrier to their accessing the support offered. Some parents appeared to have the perception that psychologists work with 'serious problems' such as those that may be referred to psychiatrists and thus, parents reported a level of 'stigma' associated with seeking or receiving support from a psychologist. This theme is therefore linked to another theme described below where parents might not choose to speak with a psychologist to avoid aversive feelings such as fear.

Cameron (2006) acknowledges that psychologists' work can range from complex problems to 'unspectacular, ordinary behaviour'. Cameron writes that:

“While applied psychology can often provide insight into those aspects of human behaviour which are unusual, complex, exotic and bizarre, it can also illuminate the common-place by challenging what may appear to many as the obvious links between human problems (and successes) and their antecedents, contexts and outcomes.” (Cameron, 2006; P294).

The general lack of clarity regarding an EP's role indicates a need for EPs to 'advertise' their role and to ensure that parents are aware of the 'subtle' approach that they can offer. It appeared that the process of interviewing parents and asking them what they would like in itself contributed to the erosion of the sense of stigma and created more of a sense that to see an EP was something many parents might do as an integral part of developing their own confidence and skills, in the same way that the involvement of a health visitor is normal during the weeks following the birth of their children: as interviews progressed, many parents noted how helpful access to an EP would be in their own case, despite having earlier spoken in terms of EP contact being reserved for serious concerns. Example extracts are given in Tables



28 and 29 where one parent appeared to change his perception of a psychologist's role following the sort card activities, having initially appeared to equate psychologists and psychiatrists. I decided not to present these comments as a theme (relating to 'Changing expectations of EPs') as they were few, and more interpretive, compared to the themes above that describe rather than interpret.

*P: Yes, I would suppose my reaction, a lot of people would think child psychologists get involved if there are serious issues. Whereas if you, I am still not particularly clear, but it might be, is it true or not?, you might be of a much more subtle role to play. Then if that is the case, then, that is something that probably people do not understand. That is where the stigma comes from. But if it is a light touch, you know, you could have a light touch helping children's development and parents understand that, then I am sure they might be much more inclined to.... maybe change your name. Call yourself something else.*

**Table 28: Extracts regarding changing expectations of EP role (pre-activity)**

*I: Is there anything that psychologists could do to make sure that parents feel comfortable in coming to speak with a psychologist if they wanted to?*  
*P: Well I suppose part of it is what you are doing now? I suppose maybe making people aware of what the services are. Giving people examples of things that you might have helped with where it is not, you know 'you are not nutters' (referring to parents).*

*I: So what do you think we could do to, what could be done to make sure that parents feel comfortable in speaking with a psychologist if they wanted to?*  
*P: Let them know when you are here and maybe like you are here have a room like this for yourself, if you have any problems, or that, come and see her.*  
*I: What about if people are perhaps shy or afraid to open up?*  
*P: I would maybe, you would have to go and speak to them go out on the floor and.....*

**Table 29: Extracts regarding changing expectations of EP role (post-activity)**

### **3.2.4.1: Deficit model of parenting**

This theme comprises a subtheme (aversive feelings) that is linked to a further subordinate theme (approachability and accessibility). These are described below.

### 3.2.4.1(i): Aversive feelings

*I: Do you think there is something that we could do to make them feel more comfortable or...*

*P: Like behaviour for example. Some parents might feel a little bit embarrassed about how their child behaves, they might feel a little bit like it is down to them, a lot of people might point their finger at parents but at the end of the day, it is not always the case. Parents might get a little bit...*

*I: OK can you think of any reasons that a parent might not speak with a psychologist in the centre?*

*P: Fear.*

*I: Fear of..?*

*P: Fear that they are going to be, not on the spot, that they are going to be judged. I think being judged and they might feel that they're inadequate like they feel stupid they feel you know, the problem that they have got maybe, to them, be really simple and everything, they might feel stupid and what have you.*

*I: Can you think of any reasons why parents might not use the support?*

*P: Embarrassment.*

*I: What do you think they might be embarrassed about?*

*P: Actually, making themselves aware that they might have a problem or actually going to that certain person that could help them to say that they have got a problem. It took me a long time.*

*I: Ok so it is coming to terms with ....*

*P: Yes, I realised that,.... I thought it was my son that had got the problems, but then talking to somebody about them, well, actually talking to my friend, that actually went and spoke to the person that could help me, she came, that person came to help me, and then.. She actually made me realise that it is not him, it is me and him.*

*I: OK so what other reasons do you think parents might not speak with a psychologist in the centre?*

*P: They might be embarrassed.*

*I: What do you think they might be embarrassed about?*

*P: They might think the psychologist might think that they were a bad parent.*

*I: Ok. So fear of being judged and they might feel stupid in themselves because of the...*

*P: Yes and shame as well.*

*I: What do think they might feel ashamed of?*

*P: That they're not doing, that they are not good parents you know with bringing up their children. They know that their children are not, you know, good or they are causing problems and they do not know how to change it. It is like a vicious circle sometimes, it just goes round and round.*

**Table 30: Extracts regarding avoiding aversive feelings**

Many parents' comments indicated that they considered that a child's difficulties are related to 'inadequate' parenting skills. That is, they perceived difficulties that a child experiences as being 'down to' parenting. Parents therefore reported experiencing aversive feelings such as shame and embarrassment regarding their parenting skills (as illustrated in the extracts presented in Table 30), and indicated that avoidance of such aversive feelings might act as a barrier to speaking with a psychologist. This subtheme is therefore linked to themes 'barriers to consulting with an EP' and 'parents would like emotional support' described in section 3.2.3.1 and 3.2.2.2(iii). Parents also appeared to report a level of stigma associated with needing the input of a psychologist, and this appeared to be linked with the notion that psychologists deal with serious difficulties. This subtheme is therefore linked to the subtheme 'EPs deal with serious or psychiatric difficulties' described in section 3.2.3.1(ii).

#### **3.2.4.1(ii): EPs need to be approachable and accessible**

Given that parents are sensitive about their skills as parents, and the contingent aversive feelings that they might experience as a result of perceived limitations in their own parenting competence, there is a need for EPs to be approachable and accessible, as illustrated in the extracts presented in Table 31.

*I: What about if people are perhaps shy or afraid to open up?*

*P: I would maybe, you would have to go and speak to them, go out on the floor and.....*

*I: So what do you think could be done differently to make sure that parents feel comfortable speaking to psychologists?*

*P: God! I do not know. I think make sure that the parents know exactly what a psychologist does and make sure the psychologist sit is in with the parents and children and not just sit in a little room on their own.*

*I: Ok. So what do you think we could do to make sure parents would feel comfortable coming to speak to a psychologist?*

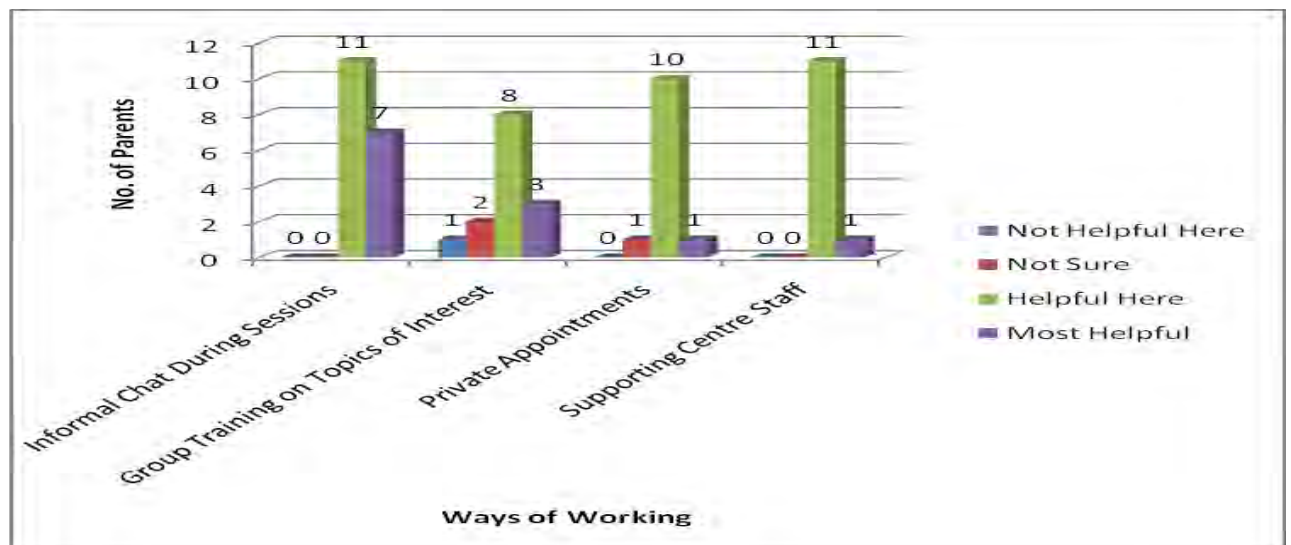
*P: I think coming into the centre would be great and just mingling. I mean it is good to give out leaflets and everything and just give advice and say we are here for you. But then just asking general questions you know, is everything ok? Being friendly that is one of the things. Being approachable really... and I think by doing that, people will have you in the back of their mind.*

*I: Ok so it about being friendly, mingling asking questions..*

*P: and another thing I would say is transparent. Being very open and available.*

**Table 31: Extracts regarding EPs needing to be approachable and accessible**

Some parents reported their view that an informal approach is required; this is supported by parents' responses to the sort card activity which asked parents about ways that EPs could usefully work. Figure 5 shows the results of this activity.



**Figure 5. Ways of working that parents reported would be helpful for an EP to offer**

Figure 5 indicates that parents felt that EPs could usefully work in a number of ways, but a majority of parents felt that EPs could most usefully offer the opportunity to have an informal chat during existing sessions<sup>1</sup> (e.g. 'stay and play' sessions).

### **3.2.4.2: Summary and discussion of deficit model of parenting**

Parents' responses indicated that they hold a deficit model of parenting, which appeared to be linked to aversive feelings such as shame and embarrassment that risked serving as a potential barrier for parents accessing any service offered by an EP. Avis et al (2007) found parents had psychosocial concerns that acted as a barrier to their participation in Sure Start, which included a reluctance to ask for help, preconceived ideas regarding the services offered, fear of authority, lack of confidence and parents reporting not wanting to become involved because they 'felt embarrassed by some aspect of their child's behaviour' (see section 1.4.2 regarding factors associated with parental participation in Sure Start/Children's Centres for a fuller description of the study).

Furthermore, Avis et al (2007) found that:

"...parents acknowledged that choosing to use Sure Start services required some degree of social confidence, especially if they had concerns about their child's behaviour or their abilities as a parent."  
(Avis et al, 2007; P210).

Avis et al (2007) also found that parents might have fears regarding who they might mix with, in Sure Start centres and whether they might be excluded from cliques, resulting in barrier to participation. Avis et al report that whilst many parents had overcome these fears sufficiently for them to attend regularly, for others, these fears

---

<sup>1</sup> One parent opted to choose two 'most useful' ways of working.

meant that they remained reluctant to participate. Avis et al recognised that it takes time to build confidence and trust with parents who may be anxious about the opinions of others and have low self esteem, and state the importance of 'sustained, one-to-one contact with parents in helping parents meaningful participation in Sure Start (Tunstall et al, 2005).

Avis et al also suggest that a communication strategy might help parents understand the provision offered at Sure Start centres and how activities might be relevant to themselves. Parents therefore reported that personal communication would have been most helpful in promoting their participation.

Parents' feelings of embarrassment and 'inadequacy' appear to be linked paradoxically to their wish to gain emotional support from EPs. Indeed, Melhuish et al (2007) found that the 'personal nature of interactions with service providers' (e.g. being treated with respect and nurturing of their self-esteem') was an important factor in parental participation.

Parents' sensitivities about their parenting skills indicate a need for EPs to be approachable and accessible; this was supported by the findings of the sort card activity in which a majority of parents reported that EPs could most usefully offer the opportunity to have an informal chat during existing sessions. Indeed, Avis et al (2007) found that parents did not attend Sure Start programmes 'specifically to learn about parenting', but they appreciated the advice they obtained regarding parenting, and acknowledged that this advice could be obtained informally through playing with their children or through discussion groups without knowledge 'being rammed down their throats' Avis et al (2007). Thus, EPs may wish to strike a balance between inviting parental participation and making themselves available on an informal basis.

Evidence that the accessibility of EPs is beneficial to parental engagement is provided by Booth (2009), where EP practice evolved from waiting in a room for parents to attend, to attending existing group sessions in accordance with feedback from parents (See Section 1.5.2: Feedback from parents informing EP practice in Sure Start/Children's Centres for a fuller description of this study).

## **CHAPTER FOUR: GENERAL DISCUSSION AND CONCLUSION**

This research aimed to explore what parents may want, if anything, from direct access to EPs in community centres such as Children's Centres. The underlying rationale and approach taken to explore this aligns with Bronfenbrenner's ecological systems theory (Bronfenbrenner, 1979) and Community Psychology principles of "bottom up working", empowering parents, and responding to the needs within a particular community (see sections 1.3.5 and 1.2.1 for a description of Community Psychology and the Ecological Systems Theory).

Given that EPSs are developing their access to parents (Davis et al, 2008) and the lack of research regarding what parents want from the opportunity to meet directly with EPs, the research question was exploratory regarding what parents want generally, and also what, if anything, parents view as the unique potential contribution that EPs could deliver (as the literature review identified this as to be an area worthy of clarification - see section 1.5.1: Educational Psychologists working from Sure Start/Children's Centres). The principal findings of the study are described below, followed by discussion regarding the potential impact and limitations of the research.

### **4.1: What parents want from direct access to EPs in a community setting**

My research indicated that despite the supportive community and the wealth of help and support available from the Children's Centre, parents identified areas in which they considered EPs could provide a useful and distinctive service. Parents identified priorities that they considered that an EP could usefully address in terms of ways of working, topics and activities. In particular, many parents expressed that they



considered that EPs could usefully provide support for children's behaviour, family relationships and emotional support more generally that included building parents' confidence in their parenting skills.

The small number of parents in this community who comprised the research sample appeared to hold a deficit model of parenting; that is, parents often took the view that difficulties experienced by a child (e.g. behaviour difficulties) were due to inadequate parenting skills. Parents therefore reported feelings of shame and embarrassment and contingent fear of being judged, as potential barriers to using support proffered by EPs. They wanted EPs to provide advice and strategies they could use to support their child and support their own development of a better understanding of their child. Given parents' sensitivity in relation to their parenting skills, EPs need to be sensitive to parents' perceptions of their skills and to be approachable and accessible. The findings also indicate that parents would find it most helpful to be able to speak informally with an EP during existing sessions – perhaps initially, simply by the EP 'mingling' during 'stay and play' sessions.

One might argue that the findings of this research may be seen as contributing to what Ecclestone and Hayes (2009) describe as the 'therapeutic turn' in culture and policy towards a preoccupation with emotional vulnerability which creates a "need" for professional applied psychology interventions: a "need" created by discourses of vulnerability and deficit, driven as much by these discourse and the ambitions of professionals and service providers to generate demand for consultation and support, rather than by a 'real' inability by people, their families, friendship groups or communities to address these needs effectively themselves. However, Ecclestone and Hayes (2009) argue that few parents and policy makers would question the

notion that the pressures of the modern lifestyle and ‘bad parenting’, among other things are ‘toxic’ to childhood. I did not set out to explore the emotional vulnerability of parents or their children. In conducting this research, my principles were aligned to those of Community Psychology such as building on strengths and an orientation towards a solution-focused approach rather, than a problem-oriented approach (Redpath & Harker, 1999). Therefore, the finding that parents expressed a need for emotional support and that they held a deficit model of parenting was not anticipated prior to commencing the research.

Furthermore, it appeared as though parents viewed EP work as more relevant to their circumstance when they recognised that our contribution could be at a level of understanding everyday behaviour rather than behaviours that might be described as more problematic (as illustrated with the initial confusion with EPs’ work as akin to that of a psychiatrist). Indeed, the misconception of EPs’ role as similar to psychiatry was a potential barrier to parental engagement with the support proffered by EPs.

#### **4.2: EPs’ unique contribution**

Parents considered that EPs could offer a unique contribution and promote a different and deeper understanding of their child because of their training, knowledge and experience and this meant that parents believed they could be confident that the advice would be professional, and reliable. However, Moore (2005) writes...

“a traditional basis for expert practice perpetuates a view in which those we work with are often and implicitly viewed as the “objects” of our practice, rather than as potentially equal participants in a collaborative meaning-making enterprise that practice could otherwise come to represent.” (Moore, 2005; P110).

In the spirit of working in partnership with parents and aligned with the principles of Community Psychology of empowerment and building on strengths it appears that EPs might appropriately adopt consultative and or solution-focused approach (e.g. Fox, 2006; Pellegrini, 2006; Dowling & Osborne, 1994) in their direct work with parents in a shared endeavour to promote positive outcomes for children. Given that consultation helps to co-construct different ways of seeing difficulties (Fox, 2009), a consultation approach would also appear to meet the expressed view that parents would like EPs to promote a different perspective or deeper understanding of their child.

Being able to access EP advice directly in the Children's Centre was viewed as an important dimension of early intervention, as it meant that parents would not be passed 'from pillar to post'. However, my findings of parents' views regarding the unique contribution of EPs would have been strengthened if it had been complemented by comparison of parents' knowledge and understanding of other professional roles, so that distinguishing features of an EPs role could be more clearly discerned.

#### **4.3: Impact and limitations of the research**

My research focused on parents' views, with the assumption that these views would influence their behaviour/action. Aligning a service in accord with parents' expressed wishes would ensure that provision meets need, would be inviting to parents and therefore encourage participation (Tunstall et al, 2005). In this sense the research may be said to have provided 'catalytic validity', defined by Cohen et al (2008) as research that strives to lead to action. However, promoting parental participation is an ongoing process (Tunstall et al, 2005).

The findings of this research were fed back to the staff of the target Children's Centre, the EPS in which I work, and the parents who attend the Children's Centre in the form of a public domain briefing document (see Appendix XIII).

An EP currently attends the Children's Centre and operates in line with the findings of this research, of offering an informal service as she attends 'drop in sessions'.

Furthermore, it appeared that the process of interviewing parents and inviting their views, held utility in advertising the EP role and fostering good relationships.

Future research might follow up the later take up of the service offered by EPs.

Whilst it is possible that the research may impact within the community in which it was conducted with regards to promoting understanding and potential engagement with the service offered by the EPS, the more general application of the findings of the study must be questioned.

Given the small scale, situated nature of the enquiry and the qualitative approach to data analysis, the research is positioned within the specific context of the community and with recognition that the findings represent my own interpretation of parents' accounts. However, it could be argued that acting on the literal content of parents' comments promoted greater fidelity (Blumenfeld-Jones, 1995) to their responses and therefore reduced the potential for my subjective bias (and so strengthen interpretation validity, e.g. Maxwell, 1992) in influencing my analysis. Indeed, a latent level interpretation (Braun & Clarke, 2006) of parents' views would be contrary to 'giving voice' (Fine, 2002) to parents and risk dis-empowering them to some extent. In setting out to explore the research questions, I encountered a problem as parents appeared to have difficulty in expressing views regarding what they wanted from the opportunity to meet directly with an EP because of either a lack of knowledge or

misunderstanding regarding what EPs do. For this reason, generic information regarding the role of EPs was given. Although I believe providing this information was necessary if parents' responses were to be based on realistic and informed knowledge of the role of the EP, this was at a cost to any claim that the approach taken was purely 'bottom up'.

The provision of information regarding the role of EP (albeit designed to be very limited and general) may have prompted parents with regards to what they considered appropriate or desirable responses. However, I had emphasised throughout the interviews that the information parents gave would be used to shape any service according to their expressed needs and wishes. Parents also appeared comfortable in communicating in cases where they were unsure whether the opportunity to consult directly with an EP would be helpful, when they tended to equate EP work with psychiatry. This would suggest that they were not motivated towards responding according to what they considered I would like to hear. Parents did regard EP input as helpful once they were aware of the EP's more 'subtle' role. Furthermore, although I had explicitly pointed out to parents that I was not asking about their personal circumstances, many had volunteered examples of how they considered the opportunity to meet with an EP would be relevant and helpful to them personally.

Despite measures that I took to militate against respondent and reactivity bias (Lincoln & Guba, 1985) (see section 2.8 'Responding to threats to validity'), the possibility of these forms of bias impacting on the fidelity of the data gathered should be acknowledged. I therefore recognise my role in conducting the research as potentially having influenced parents' views regarding the EP role, and perhaps also

influenced the local community discourse: this research cannot fully be detached from my subjective perspectives. As Moore states:

“Clearly, appreciating that a degree of ontological and epistemological relativism is an important first step in recognising others may view the world differently, and that our own is only one among many possibilities of worldviews and rationalities, prepares the ground for working with difference.” (Moore, 2005; P112).

In line with Braun and Clarke (2006) I have attempted to be systematic and transparent in the choices made throughout the analysis and have endeavoured to provided a descriptive record of the ‘whole’ data corpus rather than ‘respond only to the loudest bangs or brightest lights’, which is a criticism sometimes levelled against qualitative researchers (Cohen et al, 2008), whilst I also aimed to answer the expressed research questions. In doing so, I have allowed the reader to form their own judgement regarding the truthfulness/validity of my research and the extent to which my reported findings may generalise to other settings or contexts. In being transparent I have made the study available for synthesis into future meta-analytic studies and therefore allowed its wider generalisability to be judged in accord with either the commonality or distinctiveness of these findings with those of related studies.

Other limitations of the research include that it sought the views of parents who already participate in the Children’s Centre, and may not therefore generalise to other parents in the community who choose not to participate or are unable to do so. However, the Children’s Centre had systems in place to encourage participation of all parents, including those who may have been identified (e.g. through the Health Visitor or Family Support Workers) as having a high level of need or who otherwise might not participate without invitation (e.g. fathers). Future research regarding what

parents want from direct access to EPs would therefore complement this research and extend the confidence that can be placed in the extent to which its findings do, in fact, reflect general trends in the needs and aspirations of parents of young children.

#### **4.4: Conclusion**

The cuts to local authority budgets in 2011 (in response to the national debt) mean that many EPSs have reduced funding for what was considered to be their core work. Consistent with the reported likely impact of the cuts (see the Times Education Supplement report by Maddern, April 8<sup>th</sup> 2011) EPSs such as the one in which I work are offering the services that were once delivered through LA funding as a traded service to schools and other child supporting institutions. Thus, aligning EP work with expressed needs of the community is likely to be an increasing feature of future EP work. The identification of, and responding to drivers and inhibitors of community participation in support offered by EPs is also therefore likely to be of increasing importance. This provides EPs with an exciting opportunity to expand their systemic work and their practice in accord with Community Psychology principles. This is consistent with the DfE paper (2011b) that states:

“We want to encourage educational psychologists, as well as local authorities and schools that commission their service, to work in a more flexible manner that is responsive to the needs of the local community.” (DfE, 2011b; P104).

This research has contributed previously absent knowledge regarding what those parents in the chosen community want from the opportunity to consult directly with an EP. In doing so it has highlighted potential barriers and facilitators to parents' engagement with any such service and has highlighted needs on a personal and

community level that the EP can act upon. In this sense, the research has contributed to the potential of EP work as part of the child's exosystem and macrosystem (Bronfenbrenner, 1979) through working with parents and communities. However, further research is required to explore the impact of such work on child development.



## References

- Alexander, K. & Entwisle, D. (1988). Achievement in the first two years of school: Patterns and processes. *Monographs of the Society for Research in Child Development*, 53(2), 1-157.
- Appleton, P. L. & Minchom, P.E. (1991). Models of parent partnership and child development centres. *Child: Care, Health and Development*, 17, 27-38.
- Atkinson, R. (1998). *The Life Story Interview*. Thousand Oaks, CA. Sage.
- Attride-Stirling, J. (2001). Thematic networks: an analytic tool for qualitative research. *Qualitative Research*, 1(3), 385-404.
- Avis, A., Bulman, D. & Leighton, P. (2007). Factors affecting participation in Sure Start programmes: a qualitative investigation of parent's views. *Health and Social Care in the Community*. 15(3), 203-211.
- Bagley, C. & Ackerley, C. L. (2006). 'I am much more than just a mum' social capital, empowerment and Sure Start. *Journal of Education Policy*, 23(6), 717-734.
- Barker, R. (2011). <http://www.everychildmattersbook.co.uk/every-child-matters-and-the-alliance-government> Accessed Aug 2011.
- Barnes, M. & Shardlow, P. (1996). Effective consumers and active citizens: strategies for users' influence on service and beyond. *Research, Policy and Planning*, 14, 33-38.
- Bempechat, J. (1992). The intergenerational transfer of motivational skills. In T.G. Sticht, M.J. Beeler, & B.A. McDonald (Eds.), *The Intergenerational Transfer of Cognitive Skills, Volume II: Theory and Research in Cognitive Science* (pp. 41-48). Norwood, NJ: Ablex.

Bender, M. P. (1976). *Community Psychology*. London: Methuen.

Beresford, P. & Croft, S. (1992). *Citizen Involvement: A Practical Guide for Change*. London: Macmillan.

Berger, P. L. & Luckmann, T. (1966). *The Social Construction of Reality: A Treatise in the Sociology of Knowledge*. New York: Anchor Books.

Berger, P. L. & Luckmann, T. (1967). *The Social Construction of Reality: A Treatise in the Sociology of Knowledge*. Harmondsworth: Penguin.

Bickford-Smith, A., Wijayatilake, L. & Woods, G. (2005). Evaluating the effectiveness of an early language intervention. *Educational Psychology in Practice*, 21(3), 141-158.

Bloor, M. (1997). Techniques of validation in qualitative research: a critical commentary. In G. Miller and R. Dingwall, (Eds). *Context and Method in Qualitative Research*. 168, 175. London: Sage.

Blumenfeld-Jones, D. (1995). Fidelity as a criterion for practicing and evaluating narrative inquiry. *International Journal of Qualitative Studies in Education*, 8(1), 25-33.

Boyatzis, R.E. (1998). *Transforming Qualitative Information: Thematic Analysis and Code Development*. London: Sage.

Boot, A. & Macdonald, G. (2006). Parents and Sure Start Evaluation; Suggestions for Partnership. *Child Care in Practice*, 32(3), 269-281.

Booth, C. (2009). *Using Action Research to Explore a Drop-in Service at a Children's Centre*. Birmingham: Unpublished Doctoral thesis held at The University of Birmingham.

Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.

George, E., Iveson, C. Ratner, H. (2007). *BRIEFER: A Solution Focused Manual*. London: BRIEF

British Educational Research Association (2004). '*Revised Ethical Guidelines for Educational Research*'.

British Psychological Society (2004). '*Code of Conduct for Ethical Principles and Guidelines*.'

Bronfenbrenner, U. (1979). Toward an experimental ecology of human development. *American Psychologist*, 32, 513-531.

Bronfenbrenner, U. (1979). *The Ecology of Human Development: Experiments by Nature and Design*. Cambridge, MA: Harvard University Press.

Bronfenbrenner, U. (1994). Ecological models of human development. In T. Husen & T.N. Postlethwaite (Eds.), *International Encyclopaedia of Education* (2<sup>nd</sup> ed., Vol. 3, pp 1643-1647). Oxford, UK: Pergamon/Elsevier Science.

Bronfenbrenner, U. (2001). The bioecological theory of human development. In N.J. Smelser & P.B. Baltes (Eds.), *International Encyclopaedia of the Social and Behavioral Sciences*. (Vol, 10. pp. 6963-6970). New York. Elsevier.

Bronfenbrenner, U. (2005). *Making Human Beings Human: Bioecological Perspectives on Human Development*. London: Sage Publications.

Bronfenbrenner, U. & Ceci, S.J. (1993). Heredity, environment, and the question "How": A new theoretical perspective for the 1990s. In R. Plomin and G.E McClearn

(Eds.), *Nature, Nurture, and Psychology* (pp.313-324). Washington, DC: American Psychological Association.

Bronfenbrenner, U. & Ceci, S.J. (1994). Nature-nurture, reconceptualised in developmental perspectives: a bioecological model. *Psychological Review*, 101, 568-586.

Bronfenbrenner, U. & Morris, P.A. (1998). The ecology of development process. In W. Damon (Series Ed.) & R.M. Lerner (Vol. Ed.). *Handbook of Child Psychology: Vol 1. Theoretical Models of Human Development* (5<sup>th</sup> ed., pp. 939-1028). New York: John Wiley.

Brown, E. A., and Dillenburger, K. (2004). An evaluation of the effectiveness of intervention in families with children with behavioural problems within the context of a Sure Start programme. *Child Care in Practice*, 10(1), 63-77.

Bryman, A. (2001). *Social Research Methods*. Oxford: Oxford University Press.

Cameron, R.J. (2006). Educational Psychology: The distinctive contribution. *Educational Psychology in Practice*, 22(4), 289-394.

CampBell, S. B. (1995). Behaviour problems in preschool children: a review of recent research. *Journal of Child Psychology and Psychiatry*, 36, 115-149.

Children, Schools and Families Committee. (2010). Sure Start Children's Centres: Expansion.

<http://www.publications.parliament.uk/pa/cm200910/cmselect/cmchilsch/130/13008.htm> Accessed Aug 2011.

Cohen, L., Manion, L. & Morrison, K. (2008). *Research Methods in Education*. (Sixth Edition). London: Routledge.

Coleman, L. & Glenn, F. (2009). *When Couples Part: Understanding the Consequences for Adults and Children*. London: One plus One.

Crozier, G. (1999). Is it the case of 'We know when we're not wanted'? The parents' perspective on parent-teacher roles and relationships. *Educational Research*, 41(3), 315-328.

Cuckle, P. & Bamford, J. (2000). Parents' evaluation of an Educational Psychology Service. *Educational Psychology in Practice*, 16, 361-371.

Cullen, K. (2004). Working with a Sure Start project: Certainly a good use of Educational Psychology. *Debate*: 110, 48-53. Leicester: The Division of Educational and Child Psychology/The British Psychological Society.

Cunnigham, C. C. & Davis, H. (1985). *Working with Parents: Frameworks for Collaboration*. Milton Keynes: Open University Press.

Dale, N (1996). *Working with Families of Children with Special Needs: Partnerships and Practice*. London: Routledge.

Davis, B. & Cahill, S. (2006). Challenging expectations for every child through innovation, regeneration and reinvention. *Educational and Child Psychology*, 23(1), 80–89.

Davis, H. & Rushton, R. (1991). Counselling and supporting parents of children with developmental delay: a research evaluation. *Journal of Mental Deficiency Research*, 35, 89-112.

Davis, B., Gayton, K. & O'Nions, C. (2008). The involvement of Educational Psychologists in Multi-Disciplinary work: Sure Start local projects. IN *Educational Psychologists in Multi-Disciplinary Settings: Investigations into the Work of*

*Educational Psychologists in Children's Services Authorities*. Durham, UK:. Association of Educational Psychologists.

Denzin, N.K. (1988). *The Research Act: A Theoretical Introduction to Sociological Methods*. 3<sup>rd</sup> Edition. Englewood Cliffs, NJ: Prentice-Hall.

Department for Children, Schools and Families website (DCSF). (2009a). *Lamb Inquiry: Special Educational Needs and Parental Confidence*. Nottingham: DCSF Publications. Ref: 01143-2009DOM-EN

Department for Children, Schools and Families website (DCSF). (2009b).  
<http://www.dcsf.gov.uk/everychildmatters/earlyyears/surestart/surestartchildrenscentres/childrenscentres/> Accessed December 2009.

Department for Education (DfE). (2010). *Sure Start Children's Centre: Statutory Guidance*. London: DfE.

Department for Education (DfE). (2011a).  
<http://www.education.gov.uk/childrenandyoungpeople/sen/earlysupport/esinpractice/a0067409/every-child-matters> Accessed Aug 2011.

Department for Education (DfE). (2011b). *Support and Aspiration: A New Approach to Special Educational Needs and Disability. Green Paper*.  
<http://www.education.gov.uk/publications/eOrderingDownload/Green-Paper-SEN.pdf>  
[accessed 21st April 2011](#).

Department for Education and Employment (DfEE). (1997) *Excellence in Schools: White Paper*. London: DfEE Publications.

Department for Education and Employment (DfEE). (2000). *Educational Psychology Services (England): Current Role, Good Practice and Future Directions – Report of the Working Group*. London: DfEE Document Ref. 0132/2000.

Department of Education and Science (1967). *Children and their Primary Schools: a Report of the Central Advisory Council for Education, Vol. 1* (Chair: Lady B. Plowden). London: HMSO. In Dale (1996) As above.

Department for Education and Science (1978). *Special Educational Needs: The Report of the Committee of Enquiry into the Education of Handicapped Children and Young People* (Chair: M. Warnock), London: HMSO. In Dale (1996) As Above.

Department for Education and Skills (DfES). (2001). *Special Educational Needs Code of Practice*. London: DfES/581/2001.

Department for Education and Skills (DfES). (2004). *Every Child Matters: Change for Children*. London: HMSO.

Department for Education and Skills (DfES) and Department of Health (DoH). (2006). *Sure Start Children's Centres practice Guidance*.  
[http://www.rlp.org.uk/files/prompts/p4/sure\\_start.pdf](http://www.rlp.org.uk/files/prompts/p4/sure_start.pdf) Accessed Aug 2011.

Department of Health and Social Security (1976). *Fit for the Future: the Report of the Committee on Child Health Services, Vol. 1* (Chair: Prof. D. Court), London: HMSO. In Dale (1996). As above.

de Shazer, S. (1994). *Words were Originally Magic*. New York: W. W. Norton and Company.

Desforges, C. & Abouchar, A. (2003). *The Impact of Parental Involvement, Parent Support and Family Education on Pupil Achievement and Adjustment: A Literature Review*. London: DfES Research Report, 433.

Dowling, E. & Osborne, E. (1994). *The Family and the School: A Joint Systems Approach to Problems with Children*. Cornwall: T.J. Press.

Dunn, J. (1989). The family as an educational environment in the preschool years. In C. Desforges (ed.), *Early Childhood Education*. Edinburgh: Scottish Academic Press and the British Psychological Society.

Ecclestone, K, and Hayes, D. (2009). *The Dangerous Rise of Therapeutic Education*. Oxon: Routledge.

Elliot, C.D. Smith, P., & McCulloch, K. (1996). *British Ability Scales: Second Edition* (BAS II). Windsor: NFER-Nelson.

English, H.B. & English, A.C. (1958). *A Comprehensive Dictionary of Psychological and Psychoanalytic Terms*. London: Longman.

Farrell, P., Woods. K., Lewis, S., Squires, G., Rooney, S. & O'Connor, M. (2006). *A Review of the Functions and Contributions of Educational Psychologists in England and Wales in Light of "Every Child Matters: Change for Children"*. London: DfES Research Report, 792.

Field, F. (2010). *The Foundation Years: Preventing Poor Children Becoming Poor Adults*. London: Cabinet Office – HM Government.

Fine, M. (2002). *Disruptive Voices: The Possibilities for Feminist Research*. USA: University of Michigan Press.

Fletcher, G.J.O. (1996). Realism versus relativism in psychology. *American Journal of Psychology*. 3, 409-429.

Forbes, J. & Sashidharan, S.P. (1997). User involvement in services: incorporation or challenge? *British Journal of Social Work*, 27, 481-498.



Ford, R.M., Evans, D, & McDougall, J.P. (2003). Progressing in Tandem: A Sure Start initiative for enhancing the role of parents in children's early education. *Educational and Child Psychology*, 20(4), 80-95.

Fox, M. (2009). Working with systems and thinking systemically – disentangling the crossed wires. *Educational Psychology in Practice*, 25(3), 247-258.

Frith, H. & Gleeson, K. (2004). Clothing and embodiment: men managing body image and appearance. *Psychology of Men and Masculinity*, 5, 40-48.

Giddens, A. (1976). *New Rules of Sociological Method: A Positive Critique of Interpretative Sociologies*. London: Hutchinson.

Gillham, B. (1978). *Reconstructing Educational Psychology*. London: Croom Helm.

Glaser, B. G. & Strauss, A.L. (1967). *The Discovery of Grounded Theory*. Chicago, IL: Aldane.

Glass, N. (1999). Sure Start: the development of an early intervention programme for young children. *Children and Society*, 13, 257-264.

Goffman, E. (1996). *The Presentation of Self in Everyday Life*. Harmondsworth: Penguin.

Guba, E. G. & Lincoln, Y.S. (1989). *Fourth Generation Evaluation*. Beverley Hills, CA: Sage.

Guba, E. G. & Lincoln, Y.S. (1998). Competing paradigms in qualitative research. In Denzin N. & Y. Lincoln (Eds.), *The Landscape of Qualitative Research*. London: Sage.

Gustaffson, U. & Driver, S. (2005). Parents, power and public participation: Sure Start, an experiment in New Labour governance. *Social Policy and Administration*, 39(5), 528, 543.

Handel, R.D. & Goldsmith, E. (1994). Family reading – still got it: adults as learners, literacy resources, and actors in the world. In D.K. Dickenson (Ed.), *Bridges to Literacy: Children, Families and Schools* (pp150-174). Cambridge, M.A: Blackwell Publishers.

Hart, C., Jones, K. & Bairns, M. (1997). Do people want power? The social responsibilities of empowering communities. In P. Hoggett (Ed.) *Contested Communities: Experiences, Struggles, Policies*. London: The Policy Press.

Hartas, D. (2008). Practices of parental participation: a case study. *Educational Psychology in Practice*, 24(2), 139-153.

Hayes, N. (1997). Theory-led thematic analysis: social identification in small companies. In Hayes, N., editor. *Doing Qualitative Analysis in Psychology*. Hove, UK: Psychology Press.

Holloway, S.D., Rambaud, M.F., Fuller, B. & Eggers-Pierola, C. (1995). What is 'appropriate at home and in childcare? Low-income mothers' views in preparing their children for school. *Early Childhood Research Quarterly*, 10, 451-473.

Holloway, I. & Todres, L. (2003). The status of method: flexibility, consistency and coherence. *Qualitative Research*, 3, 245-357.

House of Commons Education and Skills Committee (2007) *Special Educational Needs: Assessment and Funding: Tenth Report of Session 2006–07*. London: The Stationery Office Limited.

Hycner, R.H. (1983). Some guidelines for the phenomenological analysis of interview data. *Human Studies*, 8, 279-303.

Imich, A. (2004). Sure Start: A Sure Start for Educational Psychologist?. *Debate: 110*, 35-37. Leicester: The Division of Educational and Child Psychology/The British Psychological Society.

Jefferies, A. (2003). Dropping-in the unexamined encounter. *Psychodynamic Practice*, 9, 173-186.

Jones, P. (2006). Every child's parent matters: Community educational psychology and the Plymouth Parent Partnership Service. *Educational & Child Psychology*, 23, 1, pp16-26.

Kellingbeck, J. (2003). What works in Involving Parents in Sure Start? A Research Project for Local Sure Start Parents. URL <http://www.ness.bbk.ac.uk/findings.asp>

Kerlinger, F.N. (1970). *Foundations of Behavioral Research*. New York: Holt, Rinehart and Winston.

King, N. (1994). The qualitative research interview. In C. Cassell and G. Symon, (Eds.) *Qualitative Methods in Organizational Research*. London: Sage.

King, E.N. & Wilson, M. (2006). Educational Psychology in Scotland: More community than school based?. *Educational and Child Psychology*, 23(1), 68-79.

Kvale, S. (1996). *Interviews*. London: Sage.

Laffan, N. & Synmoie, S (2004). *Learning through play: Promoting children's access to a Sure Start*. *Debate: 110*, 40-44. Leicester: The Division of Educational and Child Psychology/The British Psychological Society.

Laing, R.D. (1967). *The Politics of Experience and the Bird of Paradise*. Harmondsworth: Penguin.

Lamb, B. (2009). *Lamb Inquiry: Special Educational Needs and Parental Confidence*. Nottingham: Department for Children Schools and Family Publication. Ref 01143-2009DOM-EN.

Lerner, R.M. (2002). *Concepts of Human Development (3<sup>rd</sup> ed)*. Mahwah, NJ: Lawrence Erlbaum.

Lerner, R.M. (2002). Urie Bronfenbrenner: Career contributions of the consummate developmental scientist. In U. Bronfenbrenner (Ed.). *Making Human Beings Human: Bioecological Perspectives on Human Development*. London: Sage Publications.

Lincoln, Y.S. & Guba, E.G. (1985). *Naturalistic Enquiry*. Beverley Hills: Sage.

Loxley, D. (1978). Community Psychology. In B. Gillham, (Ed.). *Reconstructing Educational Psychology*. London: Croom Helm.

Mackay, T. (2006). The Educational Psychologist as Community Psychologist: Holistic Child Psychology across Home, School and Community. *Educational and Child Psychology*, 23(1), 7-15.

Macleod, F. (1996). Encouraging parents' involvement in their children's literacy development. *School Psychology International*, 17, 379-392.

Maddern, K. (2011). Ed psychs set to go it alone in shake up. In the *Times Educational Supplement (TES)* April 8<sup>th</sup> 2011, page 13.  
<http://www.tes.co.uk/article.aspx?storycode=6076724> accessed 06.05.11.

Marrow, G. & Malin, N. (2004). Parents and professionals working together: turning the rhetoric into reality. *Early Years*, 24(2), 164-177.

- Marteau, T. M., Johnston, M., Baum, J. D. & Bloch, S. (1987). Goals of treatment in diabetes: A comparison of doctors and parents of children with diabetes. *Journal of Behavioural Medicine*, 10, 33-48.
- Maturana, H. & Varela, F. (1980). *Autopoiesis and Cognitions: The Realisation of the Living*. Dordrecht: D. Reidel.
- Maxwell, J.A. (1992). Understanding and validity in qualitative research. *Harvard Educational Review*, 62(3), 279-300.
- McLeod, J. (2001). *Qualitative Research in Counselling and Psychotherapy*. London: Sage.
- Melhuish, E., Belsky, J., Anning, A., Ball, M., Barnes, J., Romaniuk, H., Leyland, A, and the NESS Research Team. (2007). Variation in community intervention programmes and consequences for child and families: the example of Sure Start Local Programmes. *Journal of Child Psychology and Psychiatry*, 48(6), 543-551.
- Miles, M. & Huberman, A.M. (1994). *Qualitative Data Analysis. (2<sup>nd</sup> Edition)*. Oxford: Blackwell Science.
- Mittler, P. & Mittler, H. (1983). The adaptation of mothers and fathers to children with cystic fibrosis: a comparison. *Children's Health Care*, 19, 147-154.
- Moore, J. (2005). Recognising and questioning the epistemological basis of Educational Psychology practice. *Educational Psychology in Practice*, 21(2), 103-116.
- Nicholson, T. (1997). Closing the gap on reading failure: Social background, phonemic awareness, and learning to read. In B.A. Blachman (Ed.), *Foundations of Reading Acquisition and Dyslexia, Implications for Early Intervention*. (pp. 381-407). USA: Lawrence Erlbaum Associates.

Ofsted. (2010). *The Framework for Children's Centre Inspection*. Manchester: Ofsted.

Orford, J. (1995). *Community Psychology: Theory and Practice*. Exeter: John Wiley & Sons.

Orford, J. (2008). *Community Psychology Challenges, Controversies and Emerging Consensus*. Chichester: John Wiley and Sons.

Osborne, E. (1994). Some implications of the theoretical framework: An educational Psychologist's perspective. IN Dowling, E. & Osborne, E. (Eds.). *The Family and the School: A Joint Systems Approach to Problems with Children*. Cornwall: T.J. Press.

Pellegrini, D.W. (2009). Applied systemic theory and educational psychology: can the twain ever meet? *Educational Psychology in Practice*, 25(3), 271-286.

Patton. M.Q. (1990). *Qualitative Evaluation and Research Methods: Second Edition*. London: Sage.

Punch, K. (1998). *Introduction to Social Research: Quantitative and Qualitative Approaches*. Thousand Oaks CA: Sage.

Quine, L. & Rutter, D.R. (1994). First diagnosis of severe mental and physical disability: a study of doctor-patient communication. *Journal of Child Psychology and Psychiatry*, 35(7), 1273-1287.

Raffaele, L.M. & Knoff, H.M. (1999). Improving home-school collaboration with disadvantaged families: Organizational principles, perspectives, and approaches. *School Psychology Review*, 28(3), 448-466.

Ramey, C.T. & Ramey, S.L. (1998). Early intervention and early experience. *American Psychologist*, 53, 109-120.

Rappaport, J. (1977). *Community Psychology. Values, Research and Action*. New York: Holt, Reinhart & Winston.

Redpath, R. & Harker, M.E. (1999). Becoming solution-focused in practice. *Educational Psychology in Practice*, 15(2), 116-121.

Reichardt, C.S. & Rallis, S.F. (1994). *The Qualitative-Quantitative Debate: New Perspectives*. San Francisco: Jossey-Bass.

Riessman, C.K. (1993). *Narrative Analysis: Qualitative Research Methods – Series Thirty*. London: Sage.

Robinson, N. (1999) The use of focus Group methodology – with selected examples from sexual health research. *Journal of Advanced Nursing*, 29, 905-12.

Robson, C. (2002). *Real World Research: Second Edition*. Oxford: Blackwell Publishers Ltd.

Sabates, R. (2008). *The Impact of Lifelong Learning on Poverty Reduction: Inquiry into the Future for Lifelong Learning Public Value Paper 1*. Leicester: National Institute of Adult Continuing Education.

Schutt, R.K. (2009). *Investigating the Social World: The Process and Practice of Research (sixth ed)*. California, USA: Sage Publishers LTD.

Shannon, D. & Posada, S. (2007). The Educational Psychologist in the Early Years: Current practice and future directions. *Educational Psychology in Practice*, 23(3), 257-272.

Simpson, A. (2002). *Sure Start Local Evaluation 2002 Summary: Understanding Barriers to Service Inclusion Faced by Local Parents*. URL <http://www.ness.bbk.ac.uk/findings.asp>.

Simpson, L., Wood, L. & Daws, L. (2003). Community capacity building: starting with people not projects. *Community Development Journal*, 38(4), 277-286.

Smith, J.A. & Osborn, M. (2003). Interpretative phenomenological analysis. In Smith, J.A., editor. *Qualitative Psychology: A Practical Guide to Methods*. London: Sage.

Snow, C.E.(1994). Enhancing literacy development: Programs and research perspectives. In D.K, Dickenson (Ed.), *Bridges to Literacy: Children Families and Schools* (pp.267-272). Cambridge: Blackwell Publishers.

Squires, G., Farrell, P., Woods, K., Lewis, S., Rooney, S. & O'Connor, M. (2007). Educational Psychologists' contribution to the Every Child Matters Agenda: The parents' view. *Educational Psychology in Practice*, 23(4), 343-361.

Sure Start. (2000). *What is Sure Start?*. Available online at <http://www.surestart.gov.uk> (accessed September 2000). Cited in Bagley and Ackerley (2006) as above.

Sure Start. (2002). *A Guide for Sixth Wave Programmes*. Nottingham: DfES publications.

Sykes, G., Todd, L., Carson, S., Gilbert, S. & Dhir, G. (2007). *Clarifying and Developing the Role of the EP in Relation to all Aspects of Parent and Carer Partnership, Advocacy and Training*. Leicester: The Division of Educational and Child Psychology – The British Psychological Society.



Sylva, K., Melhuish, E., Sammons, P., Siraj-Blatchford, I. & Taggart, B. (2004) *The Effective Provision of Pre-School Education (EPPE) Project: Findings from Pre-School to the End of Key Stage 1*. Nottingham: DfES Publications.

Taylor, M. & Wilkinson, S. (2004). Exploring the depilation norm: a qualitative questionnaire study of women's body hair removal. *Qualitative Research in Psychology*, 1, 69-92.

Taylor, G.W. & Ussher, J.M. (2001). Making sense of S&M: a discourse analytic account. *Sexualities*, 4, 293-314.

Tuckett, A.G. (2005). Applying thematic analysis theory to practice: a researcher's experience. *Contemporary Nurse* 19, 75-87.

Tudge, J.R.H., Mokrova, I., Hatfield, B.L. & Karnik, R.B. (2009). Use and misuses of Bronfenbrenner's bioecological theory of human development. *Journal of Family Theory and Review*, 1, 198-210.

Tunstall, J., Allnock, D., Akhurst, S., Garbers, C. & NESS Research Team (2005). Sure Start local programmes: Implications of case study data from the national evaluation of Sure Start. *Children and Society*, 19(2), 158-171.

Warner, R & Pote, A. (2004). Early behaviour support provided by educational psychologist working for Sure Start in Tower Hamlets: integrating theory and practice. *Debate*: 110, 13-16. Leicester: The Division of Educational and Child Psychology/The British Psychological Society.

Warren. C. (1997). Family support and the journey to empowerment, in: C. Cannan & C. Warren (Eds.) *Social Action with Children and Families: A Community Development Approach to Child and Family Welfare*. London: Routledge.

Watslawick, P. (1978). *The Language of Change*. New York: Basic Books.

Wiggins, M., Oakley, A., Roberts, I., Turner, I.I., Rajan, L., Austerberry, II., Mujica, R. & Mugford, M. (2004). The social support and family health study: a randomised controlled trial and economic evaluation of two alternative forms of postnatal support for mothers living in disadvantaged inner-city areas. *Health Technology Assessment*, 8(32), 1-120.

Willig, C. (1999). Beyond appearances: a critical realist approach to social constructionism. IN Smith J.A., editor. *Qualitative Psychology: A Practical Guide to Research Methods*. London: Sage.

Wolfendale, S. (1993). *Empowering Parents and Teachers: Working for Children*. London. Cassell.

Woods, P. (1979). *The Divided School*. London: Routledge & Kegan, Paul.

## **Appendix I – Staff information sheet**

**What parents want from direct  
access to Educational/Child  
psychologists in Children's Centres.**

**The University of Birmingham  
School of Education**

**Doctorate in Educational and Child  
Psychology  
Information and Consent Form**

**Lorraine Jebbett – Trainee Educational Psychologist**

The research is being conducted by Lorraine Jebbett (Trainee Educational Psychologist), and forms part of the requirement of a Doctorial Programme in Applied Educational and Child Psychology at the University of Birmingham. Lorraine Jebbett also works as a Trainee Educational Psychologist at XXXX Educational Psychology Service.

**The research aims to gather parents' views about:**

- the needs and challenges they experience in bringing up their children;
- the support that is available to help parents in this community;
- some of the ways in which support for parents could be improved within this community; and
- whether opportunities for contact with educational and child psychologists would be helpful to parents, and if so, how this might be provided. (No understanding of what educational/child psychologists do is necessary).

Prior to inviting parental participation, I would like to build a clearer understanding of the needs of parents of young children within this community, the role of the Children's centre in meeting these needs, and your views about what is working well, and where there are perhaps still unmet needs. This background information will be invaluable in ensuring that any extension of the services offered within the Centre (in the form of 'drop in' sessions by psychologists, for example), take account of existing services and the insights of established practitioners.

I would also like to use this meeting to gain background information that I can use to support recruitment of parents and ensure that the research fits smoothly within the existing day-to-day life of the Centre, minimising risks of potential inconvenience to staff, disruption to Centre activities, or causing any discomfort to parents or other Service users.

**What you will be asked to do:**

- During this meeting you will be asked questions regarding what you see as the main needs of parents within this community and how well these needs are currently being met. Questions are also designed to find out which of the Centre's sessions are well attended by parents, and at what times it may be best to schedule the parental interviews for this study. Your feedback will have value in shaping the interviews with parents: for example, the insights gained will help ensure questions are realistically focused and sensitively framed. The

background information you provide can also be used to inform the prompts I use to support and develop parents' initial response to interview questions.

- In our discussions, I will ask that you **should not use examples of specific people/families by name**, in order to safeguard confidentiality.
- 

#### **How the research will be used:**

- The information given by parents will be used to build a picture of what parents seek from contact with Educational Psychologists in community centres such as Children's Centres. The researcher will use this to inform Service providers, and to try to support developments to the service to address the priorities suggested by parents. However, the researcher cannot guarantee that the evidence collected **will** bring about change.

#### **Confidentiality and Security of Information:**

- The information you give will be held in accordance with the Data Protection Act (1998). This means that it will be kept securely by the researcher and your name will not be linked to the information. Whilst your name will not be used, a list of the designations / roles of staff who attended would be noted and written up in the thesis, and in any other report that is made available to yourselves or the public.
- 

Any queries regarding the research can be directed to:

Lorraine Jebbett  
Trainee Educational Psychologist  
School of Education  
The University of Birmingham  
Birmingham B15 2TT  
Email address: [REDACTED]

Alternatively, my academic supervisor can be contacted:  
Sue Morris  
Director of Postgraduate Programmes in Educational Psychology  
Trainee Educational Psychologist  
School of Education  
The University of Birmingham  
Birmingham B15 2TT  
Email address: [s.k.morris@bham.ac.uk](mailto:s.k.morris@bham.ac.uk)

<b>Consent Form</b>
---------------------

I understand what I will be asked to do and how the information I give will be used.

I am aware that I should not use examples of specific people/families by name.

I understand that the information that I give will be held in accordance with the Data Protection Act (1998). This means that it will be kept securely by the researcher and my name will not be linked to the information that I give. However, if I were to give information regarding illegal or harmful actions this information would be passed onto the relevant agencies.

I understand that I have the right to withdraw from the research at any time and request that the information that I give is destroyed and not used (unless my responses have already been included in the data analysis).

The above information has been explained to me and I give my consent to take part in the research.

---

**Name:**

**Signature**

**Role:**

**Date:**

## **Appendix II - Questions prepared for the staff meeting**



## **Introduction – Purpose of the research**

My research question is....

**What parents want from direct access to Educational Psychologists in community settings such as this CC.**

This information would be fed back to the Centre and the Educational Psychology Service.

I hope to gather this information through interviews with parents here in the centre.

I also hope to ask you some questions that would provide background information about:

- **the provision at the centre and**
- **what you see as the main needs of parents within this community,**
- **how well these needs are currently being met.**

This is to

- find out which of the Centre's sessions are well attended by parents, and at what times it may be best to schedule the parental interviews for this study.
- help shape the interviews with parents: for example, the information can be used to as **prompts** to develop parents' initial response to interview questions.

**The information you give will be written up in the thesis that will be available to the public.**

**Whilst your names will not be used, a list of your roles would be noted and written up in the thesis.**

**Please read the information sheet and consent form.....**

<b>Questions</b>
------------------

1. How many centre staff are there? What are their roles?
2. How many staff from other agencies work in/from the centre? What are their roles?
  - a. How often do workers from these agencies attend?
  - b. What is the nature of the work they do / the support they offer?
3. What are the main needs of families in the community?
  - a. How are these being addressed within the Centre / in other community settings / by other community services?
  - b. What activities / sessions are there for parents and carers / families in the centre? How well are these attended?
  - c. Around how many parents / families attend the centre/sessions?
  - d. What are the most popular activities / sessions?
  - e. Are there any gaps in the provision to meet the needs of parents within this community?
4. What are the strengths of the families in the community?

## **Appendix III - Information from the staff meeting**

**Date of Meeting: 14<sup>th</sup> July 2010.**

**Children Centre Staff members present:**

- Early Years Educator
- Family Support Worker
- Children's centre Worker
- Administrator
- Course Tutor
- Children's centre Manager

**Community profile (strengths and needs)**

There is thought to be two separate communities in the area. There is the 'settled' community where many generations of families have lived for a number of years. This community have strong connections and pass on parenting styles from generation to generation. There is also a strong sense of community with members supporting each other. This community are thought to have built trust in the schools and community centres that they know and are reluctant for their children to attend nursery or school settings that are not familiar to them.

The 'settled' community were described as being 'old fashioned' in terms of their values in bringing up children, with a clear distinction between male and female roles. Childcare is thought to be the role of the mother, with fathers 'taking a back seat'. Fewer fathers than mothers therefore, access the Children's Centre because they feel that they might be judged for attending a predominantly 'female environment'. Furthermore, whilst mothers who attend the centre might be happy to accept the support offered at the centre, fathers often discourage this as they do not share the mothers' views about the need for support and are reluctant for outside agencies to become involved in their families. Another inhibitor to fathers attending the centre is that it is generally the fathers in the community that work, whilst mothers stay at home. However, there are some families where both parents work complimentary shift patterns. This has freed some fathers to attend the centre. The centre runs 'Stay and Play' sessions for Dads on the first Saturday of each month to supports fathers access. There were reported to be six or seven fathers that attended the last session. There is also a 'transient' community that live in area that is described as having the third worst housing conditions in the county and where rent is cheap. There is a population of Eastern Europeans who make up part of this community. There had been reports of racist comments that have been made towards the Eastern European members of the community. Fathers in the Eastern European population are thought to be more confident in their roles as fathers, are more likely to access the children' centre services than other fathers, may encourage the mothers to also attend the Children's Centre and sometimes take on a role as an interpreter.

The two communities generally attended different sessions at the Children's Centre, but now they mix better and are described as being more supportive to each other. Relationship difficulties are thought to be common in the community and conflict may arise between mothers and fathers in terms of how best to raise their children. This is thought to potentially impact on their children. Other conflicts between parents include fathers not paying 'child support' to the mother and mothers' not providing father's access to their children. There is a perceived gap in the provision in terms of

support for these relationship difficulties as there is a waiting list for free relationship counselling services and many parents cannot afford to pay.

Other difficulties within the community include that Childcare Vouchers, that can be exchanged for attendance at nurseries, are not being used. This is because there is a lack of places in the local nurseries, and parents are wary of nurseries that they do not know and trust or have little information about. The centre is on the site of a primary school that is described as having a good pastoral staff and as being trusted by the community. The school is said to have a guidance counsellor on site who works with both parents and children.

Families in the community are described as having high expectations for visual things such as televisions, and mobile phones despite many families having one or no working members and living on tight budgets.

There is thought to be low aspirations for and by younger people in the community. School leavers are purported to aspire to work in low skilled jobs (an example was given of a fast food outlet) that is seen as a way out of the 'gang culture'. Furthermore, there is an expectation that young females will be sexually active and the centre report that mothers have been known to 'put their daughters on the pill' in their early teenage years.

The strengths of the community include that there is generally a strong sense of community with strong levels of support for each other. The population were also described as being open and honest and 'down to earth'.

### **Services provided by the Children's centre and the wider community**

The centre staff said that they experience 'huge pressure' for the service to be a 'one stop shop' and that centre staff were being asked to 'multi-task' and this was diluting their roles. An example was given of how a member of staff had agreed to work with parents on behaviour management strategies to support their child. The parents were separated, but had attended the session jointly. The sessions turned into a 'counselling' session that aimed to facilitate communication between the parents and to try to manage the difficulties from escalating.

Recently, a relationship counselling service 'Relate' had invited some member of the centre to attend training, but there are difficulties in terms of releasing staff over the holiday period and it is thought that this training would add to the pressures that staff already experience in terms of multi-tasking.

Time did not permit to discuss what sessions were on offer at the centre and what other agencies provide a service. However, I have a list of professionals who provide services to the centre from a networking lunch that I attended at centre and information of what courses are on offer is displayed in a activities timetable contained in the centres newsletter.

The sessions at the centre are well attended, partly because of the social opportunities that it offers. Mothers appear to support each other and often chat with

the centre staff about their lives and difficulties that they may experience (e.g. relational difficulties).

The centre runs some sessions in other community locations to support access to families who otherwise might find it difficult to attend the centre.

**Perceived difficulties that I might face in my research:**

Parents may have preconceived ideas about what psychologists do and believe that there is something wrong with them or their child if they need to speak with a psychologist. Parents' who have experience of what Educational Psychologists (EPs) do, are likely to have met with EPs through their child's school, who have asked a psychologist to become involved because 'there is something wrong with their child'. Parents in the community are suspicious of outside agencies becoming involved in the Children's centre as they feel that they are part of the 'State' that impose on them and undermine them. Parents also feel like there are currently many pressures on parents and do not want to be judged.

There is a need therefore, for me to be transparent in terms if my research aims so that parents are not suspicion of the reasons for my attendance at the centre. It was suggested that I could advertise my research through posters, and excerpts in the newsletter and or website to facilitate the communication of my research and dispel any suspicion that I am there to judge, undermine or impose on them. It was also thought that it would be helpful if I emphasised that I hope to speak with all parents (not just parents who might be experiencing difficulties) so as to 'normalise' the service.

Many agencies are hoping to deliver a service from the centre. An example was given of a Speech and Language therapist who will be attending the centre weekly to deliver the 'Every Child a Talker' strategy. There may be difficulties in distinguishing between professional roles and may be 'professional jealousy'. Educational Psychologists would therefore have to 'fight for their role' in the centre. However, centre staff felt that there is a role for Educational Psychologists to support them and that they would value the knowledge from the psychological literature that could be drawn upon.

## **Appendix IV – Public Domain Briefing (literature summary)**

What do parents want from direct access to Educational Psychologists in community centres such as Sure Start Children's centres?

A number of government reports and guidance highlight the importance of working in partnership with parents to support children (e.g. Every Child Matters, 2003 agenda). However, the House of Commons Education and Skills Committee published a report entitled *Special Educational Needs: Assessment and Funding (2007)* that identified parental confidence in the Special Educational Needs (SEN) assessment system as a key concern. Part of the government's response to this was to set up an inquiry to investigate ways in which parental confidence in the SEN assessment process might be improved. Key findings include that parents need to be listened to more, and a radical overhaul of the system was proposed which focuses efforts on better outcomes for children and involves a 'cultural shift' in the way that schools, local authorities and other professionals work with parents and children. It envisages greater engagement with parents and suggests that...

"Parents should be able to access the information that they need, when they need it, in ways that are convenient to them". P3. (Lamb, 2009)

This is consistent with principles of good practice reported by Kelly & Gray (DfEE 2000) that include that parents should have direct access to EP Services that is independent of schools.

Increasingly, Educational Psychology Services (EPSs) are opening their provision directly to parents in community settings such as Sure Start Children's Centres (Davis et al 2008). This shift in EPs' practice occurred, in part, in recognition of the importance of early intervention and the role that the family and community play in the academic progress and wellbeing of children and young people.

However, Bagely & Ackerley argue that in relation to Sure Start...

"... the policy discourse spoke directly to a 'bottom-up' model of working and the fact that partnership working was not simply about the involvement of individuals and families, but an acknowledgement of existing strengths, and their utilization in the planning and delivery of the programme." P721.

Avis et al (2007) report that Sure Start programmes work in consultation with local stakeholders so that they target local priorities and needs (Glass 1999) and ensure that parents are attracted to the service because of its relevance to their circumstances (Tunstall et al 2005). Thus, it is prudent to consider what parents want from direct access to Educational Psychologists in such settings as this might support parent's use of the service.

Similarly, Raffaele and Knoff (1999) argued that rather than blaming parents for their lack of involvement in a service (their children's schools), the organisational climate should be examined. Furthermore, they argue that meaningful collaboration/partnership with parents is particularly important during the pre-school years when a child is developing basic skills, and for families that experience social and/or economic disadvantage. Drawing from their



experiences of working within schools and a literature review Raffaele and Knoff suggest that effective home-school collaboration:

- is proactive and relates to all families, not just families with children who are experiencing difficulties;
  - involves sensitivity to all cultural backgrounds;
  - recognises and values the important contributions that parents make and communicates this message; and
  - engenders parental empowerment through meaningful two-way communication.
- P252

They argue that an approach to building effective home-school collaboration is required that involves many people to facilitate a range of support, collaborative values and interactions, and needs to be viewed within the context of the resources and people of the community. Furthermore, they propose that a number of phases should form part of a strategic planning process towards effective collaboration that include:

- an external scan and analysis of the community's human and material resources and existing links;
- an analysis of the stakeholders' perceptions and expectations that identify parents' views of needs or priorities and determines their current involvement;
- an internal scan of the school to identify its strengths, weakness and barriers to collaboration that may inform necessary adjustments;
- a public awareness process that helps to involve all stakeholders and reinforces that the home and community are equal partners from the beginning.

Raffaele & Knoff suggest that these activities define a needs assessment and:

"....initiates a process that has a high degree of motivation, commitment, and momentum as well as a high probability of success." P460

Thus, incorporating parents views into the development of a service may be associated with its success (e.g. parents use of the service). There is some evidence that Sure Start programmes are engaging parents to take an active role in shaping the provision offered in their community. Bagley & Ackerley (2006) state that:

"Research suggests that participation of the local community in the planning of community services ensures that new services will more effectively meet the community's needs (Beresford & Croft, 1992; Barnes & Shardlow, 1996; Forbes & Sashidharan, 1997; Hart et al, 1997; Warren, 1997)." P718-719

Although research has shown that most Educational Psychologists report having some dedicated time to work in Sure Start projects and suggests that such projects empower parents and the wider community to work with professionals to facilitate change (e.g. Davis et al, 2008), there has been little published research into what parents want from direct access to Educational Psychologists in community settings. However, there is some evidence of Educational Psychologists adapting their provision in Sure Start/children centres in

accordance with feedback from parents. An example is reported by Laffan & Synmoie (2004) - Senior Specialist Educational Psychologists at the Lambeth Educational Psychology Service.

Laffan & Synmoie outline the processes undertaken in developing 'tailor-made' parenting sessions. The service consulted with parents regarding what they wanted from interactive play sessions. They found that parents:

- were keen to meet together;
- had particular interest in early learning, language development and behaviour; and
- expressed a wish for flexibility in sessions, and were reluctant to commit to a block of sessions over a long period of time.

Laffan & Synmoie therefore developed and piloted a bespoke programme that had a relatively short time commitment and covered play, learning, language and communication and behaviour.

An evaluation of the pilot programme indicated that attendance was relatively low, but increased following a change in the location of the sessions to a library that had more room. Feedback from parents who had attended was often very positive (including the feeling of being valued, and increased confidence) but parents still reported that a commitment to attend all sessions was too much and they would have liked to have been able to select sessions to attend. The service therefore developed stand alone sessions that could be complemented by attendance at related sessions. The programme evolved to meet the needs of different parents and at the time of writing, there was good and regular attendance. Laffan & Synmoie reported that future directions that the service would like to take included:

“working on ways for parents to be even more active in constructing the sessions and sharing experiences” p43.

Another example of how feedback from parents was used to develop a service in a children's centre is given by Booth (2009) who explored the usefulness of a 'drop-in' service that was run by an Educational Psychologist. The structure of the drop-in sessions evolved in accordance with feedback from parents and centre staff. The session developed from EPs waiting in rooms for parents to access them, to attending pre-existing groups offered by the centre. This was viewed as a positive development in terms of parental engagement that was attributed in part to being in situ, developing relationships with the parents and parents being supported by other parents, rather than approaching an Educational Psychologist on their own.

This research aims to explore what parents want from direct access to Educational Psychologists' in a particular community and to feed this back to the service. This would help to ensure that the service provided is relevant to the community and that parents find it attractive. It also supports working in partnership with parents.

- Bagley, C., & Ackerley, C. L. (2006). 'I am much more than just a mum' Social capital, empowerment and Sure Start. *Journal of Education Policy*, 23(6), 717-734.
- Barnes, M. & Shardlow, P. (1996). Effective consumers and active citizens: strategies for users' influence on service and beyond. *Research, Policy and Planning*, 14, 33-38.
- Beresford, P. & Croft, S. (1992). *Citizen Involvement: A Practical Guide for Change*. London: Macmillan.
- Booth, C. (2009). Using Action Research to explore a drop-in service at a Children's Centre. Unpublished Doctoral thesis: The University of Birmingham.
- Davis, B., Gayton, K. & O'Nions, C. (2008). The involvement of Educational Psychologists in Multi-Disciplinary work: Sure Start local projects. IN *Educational Psychologists in Multi-Disciplinary Settings: Investigations into the Work of Educational Psychologists in Children's Services Authorities*. Association of Educational Psychologists: Durham UK.
- Department for Education and Employment DfEE (2000). Educational Psychology Services (England): Current Role, Good Practice and Future Directions. The Report of the Working Group. London: HMSO.
- Forbes, J. & Sashidharan, S.P. (1997). User involvement in services: incorporation or challenge?. *British Journal of Social Work*, 27, 481-498.
- Glass, N. (1999). Sure Start: the development of an early intervention programme for young children. *Children and Society*, 13, 257-264.
- Hart, C., Jones, K. & Bairns, M. (1997). Do people want power? The social responsibilities of empowering communities in: P. Hoggett (Ed.) *Contested Communities: Experiences, Struggles, Policies*. London: The Policy Press.
- House of Commons Education and Skills Committee (2007) *Special Educational Needs: Assessment and Funding: Tenth Report of Session 2006-07*. London: The Stationery Office Limited.
- Lamb, B. (2009). Lamb Inquiry: Special Educational Needs and Parental Confidence. Nottingham: Department for Children Schools and Family Publication. Ref 01143-2009DOM-EN.
- Laffan, N & Synmoie, S (2004). Learning through play: Promoting children's access to a Sure Start. The Division of Educational and Child Psychology/The British Psychological Society. No 110, June 2004 p 40-44.
- Raffaele, L.M. & Knoff, H.M. (1999), Improving home-school collaboration with disadvantaged families: Organizational principles, perspectives, and approaches. *School Psychology Review*, 28(3), 448-466.
- Tunstill, J., Allnock, D., Akhurst, S., Garbers, C., & NESS Research Team (2005). Sure Start local programmes: Implications of case study data from the national evaluation of Sure Start. *Children and Society*, 19(2), 158-171.
- Warren, C. (1997). Family support and the journey to empowerment, in: C. Cannan & C. Warren (Eds) *Social Action with Children and Families: A Community Development Approach to Child and Family Welfare*. London: Routledge.

## **Appendix V – Script for EP role**

## What Educational Psychologists Do:

Educational psychologists use their knowledge relating to psychology theory, research and techniques to promote well being and tackle problems with social and emotional development, behaviour and learning difficulties.

Educational psychologists can work in number of different ways:

- **Work directly with children** and young people: this may include assessing their learning and emotional needs using methods such as interviews, observation and testing materials. Interventions are then developed and recommended to support the child or young person with the problems they are experiencing.
- **Work indirectly** (through their work with parents, teachers and other professionals): They may for example, 'enable teachers to become more aware of the social factors affecting learning'.
- **Conducting research**: and advise on educational policy development.
- **Deliver training** (e.g. behaviour management, awareness raising of the needs of children).
- **Liaison with other professionals.**

They work mainly for the Local Authorities in schools, nurseries, colleges and special units, with teacher and parents.

They work with children between the ages of 0-19.

Taken from:

The Children's Workforce Development Council, Aug 2010:  
<http://www.cwdcouncil.org.uk/educational-psychology/what>

The British Psychological Society website Aug 2010:  
<http://www.bps.org.uk.ezproxyd.bham.ac.uk/careers/what-do-psychologists-do/areas/educational.cfm>

The Association of Educational Psychologists, Aug 2010:  
<http://www.aep.org.uk/careers/>

## **Appendix VI - Parent interview schedule**

<b>Parental Interview</b>
---------------------------

**Community**

- Tell me a bit about the local community from your perspective.
  - What is it like bringing up your family here?
  - What is good about bringing up your family here?
  - What is difficult about this community from your perspective as a parent?
- What strengths do parents have in this community?
  - What are parents good at in this community?
- What support is there for parents in this community to address their needs?
  - How well is this support used?
    - Why might parents not use the support?
    - What changes could be made to encourage parents to use the support more?
- Are there any needs in the community that are not being met?
  - What kind of other support/help do you think parents, like you might need or welcome, to help them feel confident they are doing the best for their child / children?

**Children's centre**

- What support is there for parents within the Children's centre
  - Centre staff
  - Professionals working from the centre
- How well is this support used?
  - Why might parents not use the support?
  - What changes could be made to make the support more relevant to parents / to encourage parents to use the support more?
- Do parents in this community have areas of need that are not being met well by the centre?
  - What needs?
- Are there other people/staff that you think parents would like to be able to talk with in the centre?
  - Who?
  - What kinds of support?

**Psychologists**

- Do you have any experience of psychologists (e.g. in your own life; from watching TV, etc – particularly about work they do with children and families?)
- Do you think that it would be useful for parents to be able to meet with a psychologist in the Children's centre? Why....

**Sort Card Activity:**

- How useful would it be for psychologists to offer any of these activities in the centre?

Type of activity	Not useful here	Not Sure	Very useful here	Most useful /Why?
Work with children				
Support for parents				
Work with families				
Provide information				
Offer advice				
Signposting to other agencies				
Training parents				
Working with centre staff				
Preparation for Nursery				
Other				

- Pick two that would be most helpful here. Why have you picked these?
- What reasons do you think people might want to speak with a psychologist in the centre?
  - What kinds of topics?

***If not sure, use sort card activity***

- How useful would it be for psychologists to be able to advise about or help within any of the following topics within the centre?

Topic of activity	Not useful here	Not Sure	Very useful here	Most useful /Why?
Behaviour				
Learning				
Events (e.g. bereavement)				
Emotional Distress				
Friendships/social Interaction				
Self help (e.g. toileting)				
Other				

- What difference would it make to parents and their children if parents were able to meet with a psychologist in this centre?
- What reasons do think parents might not speak with a psychologist in the centre?



- What could be done to make sure that parents could feel comfortable speaking with a psychologist if they want to?
- How might a psychologist best work in the centre?
  - How useful would each of these activity formats be in the centre?

Nature of work	Not useful here	Not Sure	Very useful here	Most useful /Why?
Informal chat during group sessions				
Group training sessions on topics of interest				
Private appointments				
Supporting centre staff				
Other				

- What could a psychologist offer parents that other staff/professionals do not offer already or might not do as well?
  - What do you think the psychologist could offer that is not already being provided?

**Is there anything that you would like to add or ask?**

## **Appendix VII - Information and consent sheet for parents**

**What parents want from direct  
access to Educational/Child  
psychologists in Children's Centres.**

**The University of Birmingham  
School of Education**

**Doctorate in Educational and Child  
Psychology**

**Information and Consent Form**

**Lorraine Jebbett: Trainee Educational Psychologist**

<b>Information Sheet</b>
--------------------------

The research is being conducted by Lorraine Jebbett (Trainee Educational Psychologist) and forms part of the requirement of a Doctorial Programme in Applied Educational and Child Psychology at the University of Birmingham. Lorraine Jebbett also works as a Trainee Educational Psychologist at XXXX Educational Psychology Service.

**This research aims to gather parents' views about:**

- the needs and challenges they experience in bringing up their children;
- the support that is available to help parents in this community;
- some of the ways in which support for parents could be improved within this community; and
- whether opportunities for contact with educational and child psychologists would be helpful to parents, and if so, how this might be provided. (You do not need to have an understanding of what educational/child psychologists do).

**What you will be asked to do:**

- You will be asked questions about this community and how you think a psychologist might be helpful in this centre.
- You **should not use examples of specific people/families by name, and you are not being asked about your personal circumstances (although you are free to refer to these, should you wish to do so).**

**How the research will be used:**

- The information given will be used to build a picture of what parents seek from contact with Educational Psychologists in community centres such as Children's Centres. The researcher will use the feedback to inform Service providers, and to try to support developments to the service to address the priorities suggested by the research. However, the researcher cannot guarantee that the evidence collected **will** bring about change.
- The information will be written up by the researcher as part of her studies at the University of Birmingham and will be published in a report available to the public.

**Confidentiality and Security of Information:**

---

- The information you give will be held in accordance with the Data Protection Act (1998). This means that it will be kept securely by the researcher and your name will not be linked to the information that you give. However, if you were to give information regarding illegal or harmful actions, this information will be passed on to the relevant agencies. Any information that would raise a concern regarding a child's welfare will be passed onto the XXXX's Safeguarding Children's Board. This includes information you give regarding a child who is suffering (e.g. as a result of abuse, neglect or cruelty) or is likely to suffer significant harm to their development.
- 

Any queries regarding the research can be directed to:

Lorraine Jebbett  
Trainee Educational Psychologist  
School of Education  
The University of Birmingham  
Birmingham B15 2TT  
Email address: [REDACTED]

Alternatively, my academic supervisor can be contacted:  
Sue Morris  
Director of Postgraduate Programmes in Educational Psychology  
Trainee Educational Psychologist  
School of Education  
The University of Birmingham  
Birmingham B15 2TT  
Email address: [s.k.morris@bham.ac.uk](mailto:s.k.morris@bham.ac.uk)

---

## Consent Form

- I understand the aims of the research.
- I understand how the information I give will be used and stored.
- I understand what I will be asked to do.
- I understand that I have the right to withdraw at any time.

---

**The above information has been explained to me and I give my consent to take part in the research.**

I do/do not given my consent for the interview to be recorded.

**Name:**

**Signature:**

**Date:**

How many children do you have?

Age (please circle) <20 21-30 31-40 41-50 51-60

Do you work Yes/No

## **Appendix VIII – Poster/leaflet advertisement**



## **Dear all Parents and Carers.**

You are invited to take part in my research that explores what you would like from the opportunity to meet with an Educational/Child Psychologist in community centres. You do not have to know anything about what an Educational/Child Psychologists does.

I hope to find out your views about:

- What support there is already for parents within the community.
- What you think a Psychologist could offer parents in the community.
- How a Psychologist might best work in the centre.

I will use your views to try and make sure that any service offered by an Educational Psychologist is as close to what you want as possible. I will be coming to community centres and asking if you would like to take part in a short interview. If you would like to take part, please speak with XXXXXX- the centre manager, or come along to speak with me at the 'stay and play' sessions at XXXXXX's centre on:

- Sat 7<sup>th</sup> August
- Tue 10<sup>th</sup> August
- Wed 11<sup>th</sup> August

I am looking forward to meeting you.  
Lorraine Jebbett



## **Appendix IX – Sample transcripts**

Key: I = Interviewer P = Parent

Interview 4. Date 07/08/2010 Mother

I: If we start then, if I just ask you to tell me a little bit about the local community, what is it like bringing up a family here?

P: Quite a nice community,... there are areas of poverty. It is generally a nice community, nice green spaces, good facilities.

I: Nice community, it is very nice, green spaces and lots of facilities (*Paraphrasing*). What sorts of facilities are there?

P: The Children Centre mainly.

I: So what is good about living here?

P: Everyone knows everybody, it is close to town, we got the Children's Centre, we got all the shops.

I: OK, anything difficult, what is difficult about the community in terms of being a parent?

P: Some of the older children are a bit antisocial they can be (*inaudible*). In our area, there is a gang.

I: Ok, so there is a gang in the area. Do they make life difficult?

P: They do for some residences.

I: How does that impact on, on bringing up a family?

P: It will not yet, at the moment. It will though, as long as she... when she gets to play out on her own.

I: OK. You have already mentioned that everyone knows everyone, I am just wondering what strengths parents have in this community?..... What are parents good at?

P: (*in audible*).. good at helping each other.

I: Ok, any other strengths?

P: No .... strange questions?

I: (*laughter*) do you think!

P: I'm not an Educational Psychologist though!

I: What support is there for parents in this community to address their needs?

P: In the whole area?

I: Yes

P: We have, go the XXXX centre.

I: What is the XXX Centre?

P: They do the..., health visitors, the paediatricians, speech therapists, Integrated Disability Services, and we have got the Children's centre obviously that is..

I: How do you think, how well do you think this support is used generally?

P: Good, it is good that we have got it.

I: well used?

P: Yes

I: OK. Do you think there are any reasons why parents might not want to use the support that is available?

P: Yes, Yes I think some parents think that they are being judged.

I: OK. Do you think that there are any needs in the community that are not being met?

P: No, I think that everyone is pretty much OK.

I: Lets' talk about the Children's centre then. What is there for parents in this Children's centre that you are aware of?

P: There is a 'quiet group'

I: Quiet group?

P: Yes for children with special needs and parents that find it difficult to ... and we have got family support workers.

I: OK and how well do you think the support here is used?

P: I think quite well.... People do not like asking things even though,..... A lot things, some of the parents probably would not ask.

I: OK can you think of an example?.... Why might parents not use the support why might they not come in..

P: I know some parents I think who think there are being watched

I: OK,

P: ...although they are not being are they... you know what I mean.

I: Is that by other people or...

P: I think by the ...obviously the staff are very experienced and very qualified and everything, but they are being watched but they are not.

I: So what do you think, what could be done differently so that they would feel more comfortable, or to make the services here more relevant or inviting to parents?

P: Do not know. There is nothing that they can do. They have got a parents forum.

I: OK so there are some parents, (*paraphrase*) the centre is generally well used, but there are some who might not want to come because they might not want to ask.

P: Yes Yes

I: and some parents who feel like their being watched

P: Yes

I: But generally the centre is really good and there are doing everything they can to make everybody welcome.

P: Yes.

I: OK. Are there any areas of need that are not being met in the centre?

P: No not that I can think of.

I: OK. Are there any other people or staff that you think that parents might like to be able to meet in the centres.

P: Educational Psychologists would be good.

I: Why do you think that?

P: Well my daughter is having some problems and it would have been nice if there had been somebody here to speak to earlier..... For it to have been picked up at nursery. It would have been nice if there was somebody here that could..

I: OK. So you do have.... oh we can move onto the next section that is about psychologists. We will just move onto there and we might be able to answer some of the questions and give you the opportunity to say something or ask questions. Do you have any experience of psychologists in your own life or through watching TV. or know how we work ....

P: Yes I have seen some.

I: Seen some Educational Psychologists do you mean?

P: I have seen an Educational Psychologist when I was at school.

I: OK when you was at school..

P: Yes it was a long time ago though.

I: What do you remember of that experience?

P: I was just asked questions. I think I was only about 8 or 9, it was 27 years ago so it was.....

I: OK, so do you have an understanding of how we work?

P: Yes, I think so.

I: OK.

P: You go into schools and stuff and ask to see the children.

I: Yes, that is part of what we do, is we support schools – the schools that come to us and if they have got, an identified need, then we will work with the schools and also more broadly as well to see how we would like them to promote positive outcomes or.. on a range of issues .. OK

I: OK, do you want me to say some more on....

P: No that is fine.

I: You say that your daughter has seen an Educational Psychologist as well?

P: Not yet, she is only three. That might be the next step.

I: Alright, OK. I thought you said, no it must have been you.

P: Yes I have seen an Educational Psychologist, Yes.

I: But apart from that no other experience of Educational Psychologists?

P: No.

I: That is fine. Ok then. With that in mind then we will go to the sort card activity.... If I just ask whether you think these things would be useful for a psychologist to do here or not useful or you are 'not sure'. OK. There is no right or wrong answer.

P: Options is it?

I: Yes. Do you think working with children would be helpful here:

P: Yes

I: Yes OK, support to parents/support for parents?

P: Yes helpful

I: Working with families?

P: Yes

I: Providing information?

P: Yes

I: Offer advice?

P: Yes

I: Signposting to other agencies and support?

P: Yes

I: Training for parents?

P: Yes, you are going to end up with a ..... (laugh)

I: (Laughter).. Well everybody is different and giving different responses. Working with centre staff?

P: Yes.

I: Preparation for nursery?

P: Yes

I: Anything else?

P: Do not think so.

I: OK of those (*point to the cards put in helpful here pile*) pick two that you think would be most useful here and then I might ask you to give us an explanation of why.

P: Offering advice and work with children.

I: OK and what is it you think that would be useful with those two?

P: well my daughters having problems and it may be nice to speak to somebody that was a bit more, ..., might have some more information.

I: OK. Do you want to say more about that or not?

P: Well she is having some problems with socialisation but she is only three, We have been

to the paediatrician, but it would be nice to speak to somebody else that was a bit more in-tune with the way that children develop.

I: OK and does that relate to both of them (*the sort cards*) work with children or offering advice or both.

P: Offering advice, well working with children is trying to get a relationship with XXXX as she is having problems. ... (*in audible*)

I: I cannot promise anything as I will not be working here and I cannot give you false hopes.....

P: I know you won't.

I: So you think it would be useful for an Educational Psychologist to.....

P: I think it would be nice to have one here.

I: Yes Yes OK and for them to work directly with XXXXX?

P: With children in general. XXXXX should have someone in September I think.

I: OK

P: What age do you start then, - Educational Psychologists?

I: Sorry, say again?

P: What time do Educational Psychologists start?

I: nine till, you know , normal time really, ...

P: No what time do you start with the ages?

I: Oh sorry, we do the full age range 0-19.

P: Do you? Oh so you work with nought year olds (*laugh*)... sorry

I: (*Laugh*), I must admit that I have not come across, Yes but we do work with early years as well.

Do you think that is something that is surprising then? Do you think that we perhaps work with older children?

P: Older children Yes.

I: Ok. Why do you think that is?

P: I thought that you would have to... ..You would need some sort of interaction. I am not sure what you would get out of a three year old.

....

....

I: OK, right. The next one is - what reasons do you think people might want to speak with a psychologist, these are the topics.

P: You have got a list have you?

I: Yes a list. Behaviour?

P: Yes

I: Learning?

P: Probably not.

I: 'Probably not' (*repeating*). Friendships and social interaction.

P: Yes

I: Emotional distress?

P: Yes,

I: Significant events like bereavement?

P: Yes.

I: Self help/ toileting?

P: No

I: Anything else you can think of?

P: No

I: OK, of those....*(pointing to the 'useful here pile)*, which are probably the most useful?.. And give some reasons why?

P: Friendships, my daughters not forming friendships, I could do with some help with that and behaviour – she, her behaviour is becoming a problem when people are approaching her. So, before they get labelled as naughty.

I: OK, so you have been to the paediatrician.

P: Yes

I: any other support?

P: Yes we got the integrated disability service, they have not gone but we are getting the integrated teaching services, and we are going back to the paediatrician in September and we get lots of support to be fair.

I: OK

P: It is good for a small town.

I: right.

P: you get a lot of support.

I: OK. ... What difference would it make to parents and their children if parents were able to meet with a psychologist here in the centre?

P: It might help them given them some useful advice on how to deal with children problems, before it got out of hand, if you know what I mean.

I: So is that like an early intervention?

P: Early intervention I think before it escalates.

I: Do you want to say any more on that or are you happy..

P: Yes XXXX's is now, when people approach her she sometimes starts throwing things, it would have been nice to have somebody at right, saying this is wants happening now, it is escalating, what do we do?

I: OK

P: ...rather than waiting, to grab somebody to go.... rather than waiting help us to go and ask for psychologists, so it something that you just come down and it like...

I: Does the person want to be accessible...

P: Yes Yes it would be lovely wouldn't it. It would cost a lot of money though. I do not think you would get it with the current government! Laughter..

I: you might want to ask XXXXX about might happen, I cannot say and I cannot make any promises.

I: What reasons do you think parents might not speak with a psychologist in the centre?

P: They might see them more as a psychiatrist. Because when my health visitor mentioned to me the CAMHS, I wasn't happy because I thought it was, I thought she was saying that XXX had a mental health problem, but it is not is it! I know now.

I: So idea of mental health problems.

P: Yes

I: OK so what other reasons do you think parents might not speak with a psychologist in the centre?

P: They might be embarrassed.

I: What do you think they might be embarrassed about?

P: They might think the psychologist might think that they were a bad parent.

I: Ok, Anything else?

P: No.

I: So what do you think could be done differently to make sure that parents feel comfortable speaking to psychologists?

P: God! I do not know. I think make sure that the parents know exactly what a psychologist does and make sure the psychologist sit is in with the parents and children and not just sit in a little room on their own.

I: OK That just moves us on nicely onto the next bit which is, how might a psychologist best work in the centre and again I have some cards.

P: You have given up your Saturday to do this?

I: Yes but you know, getting useful information and it is nice to have a chat with you guys.

I: Ok so, this is how we might best work here and again it is helpful, not helpful or not sure ok? Do you think it would be helpful for psychologists to have an informal chat with parents during sessions?

P: Yes

I: That was what you were talking about..

P:... yes

I: Group training sessions on topics of interest?

P: I do not know, I am not sure.

I: Not sure, Ok.

I: Private appointments?

P: Yes, possibly.

I: Supporting centre staff?

P: Yes.

I: ...and anything else, any other ways you think that we might work that would be useful or not useful?

P: No

I: Which of these (*points to cards in 'useful' pile*) would be the most helpful?

P: (*points to 'Informal chat during group sessions and 'supporting centre staff'*).

I: Why did you pick those two?

P: I think that if you could chat with staff and given them more of an idea of the problems that are out there with children. It would be nice because although they are really qualified they might not always come across things. And parents, I think it would be nice for parents to have someone to speak to. If it was just on a higher level.

I: One last question then, what do you think a psychologist could offer that parents that other staff or professionals do not already offer or might not do as well?.....

I: it is a tough question....

P:.... that is the main one isn't it! I think you are more qualified aren't, you are more..... what is the word?.....your specialised aren't you in children's problems if you know what I mean!

I: OK, so is it the knowledge and the training...

P: I think with the knowledge and training it is a different - the training it is like a nursery nurse would be – it is completely different training.

I: So that would be the main reason, the depth of the knowledge and the training?

P:Yes

I: OK, is there anything that I have not given you opportunity to say or ask?

P: No

I: All that remains then is to say thank you very much for taking part.

P: No problem.

I: I will be in again on Tue and Wed I believe so if you are here I will see you again then and I will be doing the same thing – inviting parents to come along and have a chat and same as today really.

P: I will send my girls through, make sure you get enough people.

I: Oh lovely,

P: Thank you.

I: Lovely to meet you, bye bye.

Interview 3. Date 07/08/2010 Father

I: I wonder if you could just start by telling me a little bit about the local community – what is it like?

P: Do not really see much of it, go to work in XXXX, come home, man the baby, get up, go to work,.

I: Work...

P: Work yes, Saturday go to toddler group, Saturday afternoon, go to the local pub, while it is OK.

I: Ok, so toddler group is that every Saturday?

P: When I'm not working Yes.

I: OK. So quite you know, work, childcare, occasional the pub...

P: yes yes

I: So what is it like bringing up your family here?

P: It is OK, there is plenty to do for us- there are activities everyday, there is stuff to do for her.

I: What sorts of activities are there?

P: (*inaudible*) Monday she goes swimming, Tuesday she goes to the adventure zone, Wednesdays she has a day off, Thursdays she goes to Tree House, Fridays she goes round to her friends, Saturdays she has Dad's group, Sundays she goes out with me and XXXXX .

I: So it is nice that there are a lot of activities.

P: Yes.

I: Ok, so that is the good thing about bringing up your family here?

P: Plus we have both got jobs down here, that is pretty important to.

I: So does your partner work as well?

P: Yes, she works part time. Part time and she is at college too, studying to be a nurse.

I: Is she. That is quite a tough.

P: It is yes

I: Is there anything difficult, or what is difficult about this community in terms of being a parent or father?

P: Nothing really I suppose, set in your own little routine so. Think you just make the most of what you have got.

I: Ok, what do you think might be difficult, if you feel like your not really doing community, there is not really a strong community spirit, I wonder, what strengths do parents have in this community, what is good, (*inaudible*)... how people get on with each other for example, or..

P: Yes XXXX's got a, my girlfriends got a few friends here who all get together and stuff like that, do things together. I work shifts so it is quite difficulty, I work 6-2 one week and 2-10 the other week. So in the morning I am looking after XXXX and when I come home look after XXX because XXX is working or she is at college.. so..

I: Does that prevent you from, really sort of having as much time...

P: I would say yes, yes it does. My girlfriend's mum does live with us so that does help.

I: She does what sorry?

P: Lives with us and that helps a bit.

I: Your girlfriends mum?



P: Mum yes

I: What support is there for parents in this community, do you think?

P: We get quite a lot of help because of XXXX with XXXX (*a specialist support service*) and did have a woman come round who plays with her. Health visitor is really good, she has been really good for the baby. We are being quite well looked after.

I: Ok. So XXX, health visitor, feel well looked after?

P: Yes.

P: Girlfriend might say different though.

I: Apart from specific help that you are getting, do you know what there is for parents in general in terms, in the community?

P: Not really.

I: So you would not be able to say how well the support is being used?

P: No.

I: Ok, or why parents might not use the support that is available?

P: Not really. I suppose I am just a typical Dad who just gets on with it.

I: OK. Do you think there are any needs in the community that are not being met?

P: No, No I wouldn't have thought so.

I: I am going to speak with you about the Children's centre now.

I: What is there for parents in the Children's centre that you are aware of?

P: Dad's group isn't there and they have swimming lessons, they have groups in the week for them, ... there is quite a lot I would have thought.

I: How well do you think the support is used?

P: I think it is well used, apart from the Saturday Dad's group, I think it is a bit of a letdown – the Dad's group, well look at today there is only two of us and I think it is a bit of a waist, a shame like.

P: Why do you think that might be?

I: Well, it could be there working or.. Well I have asked a few dads to come and no they will not come because they play with the playstation on a Friday night and their tired on a Saturday, and you are like, you know, things like that. I work all week I can't, I have to look after the baby on Saturday morning.

I: OK, so generally well attended except for the dad's group?

P: Yes, I think it could be.. Dads could support it a bit more on a Saturday. I have been to the other group and it is only just been me and the baby there. It is a shame.

I: Yes. Why do you think parents might not, dads might not use it.

P: Parents split up too.

I: So dad's might not use it because their tired and have been playing on the playstation or their working or may have split up.

P: Yes.

I: What changes do you think might be made so that parents feel, and particularly dads feel more encouraged to come along and make it more relevant for them?

P: More leaflets or something to go out or something, maybe, you know, more word of mouth that people are here tell more of their friends.

I: I think you have already answered this one but I'll just ask it anyway. Do parents in the community have any areas of need that are not being met by the centre?

P: I do not think so, no.

I: Ok, are there any other people or staff that you think would be, you think parents would like to be able to talk with in the centre or..

P: I do not think so, no.

I: I want to talk a little bit about psychologists now. Do you have any experience of psychologists for example, in your own life or from watching TV. or, particularly about how psychologists work with children?

P: Do you call Jeremy Kyle a psychologist because he is always on ...

I: No.

P: No obviously not.

I: No. Ok that is fine. What we will do then is.... I have got some cards here with some things that psychologists might provide. I am not saying that this is what they do, because what I want to find out is whether you think it would be useful here or not and then work from there. Ok? So, 'helpful here', 'not sure' 'not helpful here' OK?

So if a psychologist was to work from the centre, do you think it would be helpful for them to work with children here?

P: ....Not sure really.

I: Not sure.

P: What would you say a psychologist does then? You going to get into people's brains or ...

I: Ok that is....

P: .....you know I cannot answer it because I do not know what you would do here.

I: Ok I suppose in the general sense, we, it is very difficult to say/encapsulate what we do in a small sentence but we work to enhance, I'm going to give you a very general answer here, I hope you do not mind, we try to enhance well being, we try and make sure that, you know, promote positive outcome, so, we can do that in a number of ways. Is that Ok for now?

P: I suppose so, it does not really answer it though but, you are not giving much away!

I: I know but the reason is what I really want to do is find out from you, what you think might be something that we would do that would be useful rather than me saying to you this is what we do, because this is what the research is about.

P: Yes

I: So support for parents would that be..

P: I would say support for, yes I'd say support for parents then.

I: Provide information, do you think it would be useful for (*inaudible*).

P: If you knew what you did yes.

I: You'll have to interview my girlfriend on Tuesday, she will have a different opinion.

I: Really,

P: Yes she will be here on Tuesday.

I: Brilliant.

P: She will be here at 12 actually.

I: Will she, what today?

P: Yes she comes down, usually 12 o'clock.

I: I do not know whether she wants to..

P: She will yes.

I: Maybe you want to have a chat with her and see if she wants...

P: I would have thought so.

I: Ok, working with families, would that be useful here, not useful here?

P: I would say Yes because your working with the parents so..

I: Offer advice?

P: Not sure on that one.

I: Not sure ok. Signpost to other agencies/support agencies?

P: I would say Yes.

I: Ok. Training parents?

P: Not sure on that.

I: Not sure, OK. Working with centre staff?

P: Yes

I: Yes ok. Preparation for nursery?

P: Not sure.

I: Anything that you think psychologists might do that would be helpful here or would not be helpful here.

P: No.

I: No, ok. Of these ones you have got here (*points to the cards in the 'useful pile'*), which would you say would be the most helpful, the two that would be the most helpful?

P: I would say working with families.

I: Working with families. Can you expand on that a little bit how might...

P: Because, if I think what you do then you would obviously be able to talk to the parent and like, if they had problems and work with them.

I: So that is one of them.

P: Now, what did I say, working with families and support parents.

I: Ok right. Brilliant.

P: OK so, I think we will use the sort cards again, I have got a list of topics here, and I wonder whether you think it would be, might be useful for a psychologist to offer support or advice in any of these areas. So again if you could just say whether it would be useful here, not useful here or not sure OK. So behaviour?

P: Yes.

I: Learning.

P: Not sure.

I: Not sure. Events like bereavement, that sort of thing?

P: Yes.

I: Emotional distress?

P: Yes.

I: Things like friendships or social interaction?

P: Yes, I guess so, (*inaudible*) Yes.

I: Things like self-help like toileting?

P: No

I: No, ok. Anything else you can think of a topic a psychologist might be useful in supporting?

P: I do not think so.

I: Ok of these ones (*the ones in the 'useful' pile*) which do you think, which two would be the most helpful?

P: I would say behaviour ..... emotional distress.

I: and emotional distress, OK. Do you want to, any reasons why those two?

P: Because, well psychologists, if you have problems and all that you could come and say look blar blar blar and stuff like that. Is that right?

I: There is no right or wrong answers so you are OK. (*Laughter*). The difficulty with doing this research is that people often do not know what a psychologist does and it is difficult trying to find out without saying.

P: Well I think psychology is like getting in your head and seeing what you actually do and your feelings and your emotions and how you... stuff like that. Like you just dump a load of cards and say how are you feeling today and all that, and there is a smiley face, a sad face and all stuff like that?

I: Yes sometimes we do do that, that is part of what we do. That is fine. Part of the reason I am doing the research is to more clearly identify what it is that..

P: ..yes yes...

I: You might find this one a little bit difficult so there is no pressure. What difference would it make to parents and their children if parents were able to meet with a psychologist in the centre?

P: Well I would say that we would not really need one at the moment so I would not really know. But some people would need one.

I: Ok. What reasons do you think that parents might not speak with a psychologist in the centre?

P: Maybe shy, afraid. Afraid to open up. They do not know what you do.

I: So what do you think we could do to, what could be done to make sure that parents feel comfortable in speaking with a psychologist if they wanted to?

P: Let them know when you are here and maybe like you are here have a room like this for yourself, if you have any problems, or that, come and see her.

I: What about if people are perhaps shy or afraid to open up?

P: I would maybe, you would have to go and speak to them go out on the floor and....

I: and speak to them..ok. This moves us on quite nicely onto the next one actually, so...how might a psychologist work best in the centre. So again, I have got a number of sort cards, so do you think for instance, that it would be helpful for a psychologist in centres to have informal chats with parents during sessions?

P: Yes.

I: Group training sessions on topics of interest?

P: Not really no.

I: Private appointments?

P: Yes.

I: Supporting centre staff.

P: Yes.

I: Anything else, any other ways that it might be useful for ...

P: I cannot think of any.

I: Right, ok. Of those (*indicates the cards in the 'useful pile'*) which would be the most useful?

P: Informal chat.

I: OK last question. What could a psychologist offer parents that other staff or professionals do not offer or might not do as well, and I know that is a tough question.

P: It

## **Appendix X – Sample table of codes/themes**

What parents believe/hope psychologists would provide.									
Comments	Improved Confidence in Parenting Skills	Personal Relevance or Relevance to the community	Information/Advice/ Direction	Emotional support	Direct access to appropriate support/Early Intervention	Strategies Techniques	Better Understanding (psychologist having and generating).	Improved Family Life	Support for Couples/Families
<p>I: What difference would it make to children and their parents if parents were able to meet with a psychologist in the centre?</p> <p>P: Knowing that they might be able to help you.</p> <p>I: So it is just knowing, it is like having the security blanket. Ok, so if the support was there and was used by the parents, what difference do you think it would make?</p> <p>P: Loads, to be confident, confidence knowing that you can cope.</p> <p>I: In terms of parents then it would be better confidence and just knowing is that right?</p> <p>P: Yes.</p> <p>I: What about for the children, do you think there would be any positives for the children?</p> <p>P: It would give them more confidence, realise that they can do things on their own, which would be nice.</p>	X			X					
<p>I: What difference would it make to parents and their children if parents were able to meet with a psychologist in the centre.</p> <p>P: Be able to improve their family life if a particular problem or problems were able</p>								X	

<p>to be addressed.</p> <p>I: To overcome problems is that right?</p> <p>P: Yes. It would improve their way of living.</p> <p>I: So there would be improvements, but what impact would that have, say for the children?</p> <p>P: Well, they would probably be a lot happier.</p> <p>I: and that would be the same for...?</p> <p>P: ....for the whole family yes. It would be the same for everybody wouldn't it.</p> <p>.....</p>									
<p>I: What difference would it make to parents and their children if parents were able to meet with a psychologist in the centre? .... If we were to do any of those activities (<i>referring to the ones on the sort cards</i>) what difference would it make?</p> <p>P: I would hope things would get easier with understanding of each other, between me and the child, to know where the child is coming from so that I can use techniques to help the child develop them better.</p>						X	X		
<p>I: What could a psychologist offer parents that other staff or professionals do not already offer or might not do as well?</p> <p>P: If you come to the centre it would be unique. To work where people could access you without going through everyone else first. It would be nice to have a direct thing to you so we would not have to be passed from pillar to post I suppose.</p>					X				
<p>I: So some of the things you have said would be useful for a psychologist to do, like a psychologist might be able to help a parent understand their child better, do you think that psychologists might do that better than other people?</p> <p>P: Yes</p> <p>I: Why do you think that?</p> <p>P: Like I say, because of the training. They are trained in that field so that they can listen and know what the reply is.</p> <p>I: The reply of a psychologist?</p> <p>P: Yes, because if you asked someone here, it would not be a reply that you would get an answer to it, sort of, or 'you would have to go to this person, 'you have to go to this person', at least with a psychologist you would be straight to the point and you would know. It is about cutting out the middle man and going straight to the</p>					X	X			

point.									
<p>I: That brings us onto the next question... what difference do you think it would make to parents and their children if they were able to meet with a psychologist in the centre?</p> <p>P: That would depend upon the scenario and situation; if you have got a problem and you were able to speak with somebody, it could help both the parent and the child. I just think it would be helpful.</p> <p>I: Can I push you on that one a little bit.</p> <p>P: It would be helpful in respect of you guys being able to point the parent in the right direction, or maybe support the child. I do not think I could comment unless I was given a scenario but I just think it could be helpful.</p>		X							
<p>I: Is there anything that could be done to so that we can offer a service that would encourage parents to come along?</p> <p>P: I would say, I think the word (<i>Psychologist</i>) sometimes does not relax people at all. Again information, a flyer and things.</p> <p>I: So it is about advertising?</p> <p>P: Yes, it is not all about if my child's got difficulties, psychology in their brain or what not. It is not always about that. Sometimes it is also about just having a chat with somebody and make them feel better. So yes, just put more information out there really to reduce fear. A lot of mothers and parents are feared by this.</p> <p>I: So it is about what we do....</p> <p>P: Yes it is not about something is wrong, it is about what you do, how you do it and how you can help in some respects, it might be informal but I would say lots of people do not know.</p>				X					
<p>I: If a psychologist was able to come to the centre and parents were able to meet with them, what difference do you think it would make for parents and their children?</p> <p>P: If I got some support from psychologist I would feel more confident, I feel stronger, I can be better parent for my children. For children the best thing is to have good parent isn't it!</p> <p>I: What impact would, what changes would you see?</p> <p>P: For example, if I have got some problem with behaviour, I do not know what to</p>	X								



do or sort it out, I can always ask you or somebody who I trust and I go away and I more confident, otherwise I need to look for someday I will do that way, someday I will do another way, children confused, I am confused, stressed. Personally I have got quite good children but some parents you know!									
I: Can you think of any examples of how a psychologist might support parents? P: Just if you know, you might have a problem with a child, struggling to bring the child up or something like that, especially if you have got more than one kid, they might be able to give some advice, you know, see if there is anything with that. Especially if there are coming here for a bit of a breathing space, it might be nice just having help and support for somebody you know.		X		X					
I: What difference would it make to parents and their children if there were able to meet with a psychologist in the centre? P: Support for parents, it might put their mind at rest. They may have some questions you know, behaviour problems or something. It might be the first people they speak to rather than go straight to a doctor or going down that route. To offer parents support help and direction of what they could do with their children.			X	X	X				
I: What could a psychologist offer that other staff or professionals might not offer or might not do as well? P: Probably a different approach to help with bringing up kids. Just different advice I suppose isn't it really. I would say more specific direction and a different approach really isn't it.			X						
I: OK. Are there any other people or staff that you think that parents might like to be able to meet in the centres. P: Educational Psychologists would be good. I: Why do you think that? P: Well my daughter is having some problems and it would have been nice if there had been somebody here to speak to earlier..... for it to have been picked up at nursery. It would have been nice if there was somebody here....		X							
I: OK of those ( <i>point to the cards put in helpful here pile</i> ) pick two that you think would be most useful here and then I might ask you to give us an explanation of why. P: Offering advice and work with children.		X	X						

<p>I: OK and what is it you think that would be useful with those two?</p> <p>P: Well my daughters having problems and it may be nice to speak to somebody that was a bit more, ... might have some more information.</p> <p>I: OK. Do you want to say more about that or not?</p> <p>P: Well she is having some problems with socialisation but she is only three. We have been to the paediatrician, but it would be nice to speak to somebody else that was a bit more in-tune with the way that children develop.</p>									
<p>I: OK, of those.... (<i>pointing to the 'useful here' pile</i>), which are probably the most useful?.... and give some reasons why?</p> <p>P: Friendships, my daughters not forming friendships, I could do with some help with that and behaviour – she, her behaviour is becoming a problem when people are approaching her. So, before they get labelled as naughty.</p>		X			X				
<p>I: OK. ... What difference would it make to parents and their children if parents were able to meet with a psychologist here in the centre?</p> <p>P: It might help them give them some useful advice on how to deal with children problems, before it got out of hand, if you know what I mean.</p> <p>I: So is that like an early intervention?</p> <p>P: Early intervention I think before it escalates.</p> <p>I: Do you want to say any more on that or are you happy..</p> <p>P: Yes XXXX's is now, when people approach her she sometimes starts throwing things, it would have been nice to have somebody at right, saying this is wants happening now, it is escalating, what do we do.....rather than waiting, to grab somebody to go....</p>		X	X		X				
<p>I: Which of these (<i>points to cards in 'useful' pile</i>) would be the most helpful?</p> <p>P: (<i>points to 'Informal chat during group sessions and 'supporting centre staff'</i>).</p> <p>I: Why did you pick those two?</p> <p>P: I think that if you could chat with staff and given them more of an idea of the problems that are out there with children. It would be nice because although they are really qualified, they might not always come across things and I think it would be nice for parents to have someone to speak to. If it was just on a higher level.</p>				X					
<p>I: Do you think it would be useful for parents to meet with a psychologist in the centre?</p>		X		X					

<p>P: Yes, Yes I think that would be nice?</p> <p>I: Why do you think that might be?</p> <p>P: Just to know that there is somebody to help them. You know, just to give support.</p> <p>I: What sort of support do you think we could offer?</p> <p>P: Things that you have mentioned, behavioural , education, a lot of par, a lot of mums worry about when their children goes to school, wondering if their children will be able to cope with it. I worry loads. I was not so worried when XXXXXXXX (<i>conversation omitted as it would compromise anonymity</i>). It took me nearly a year to realise that XXX can cope with it, you know, and I think knowing that you have got the support there. Not just the teachers.</p>									
<p>I: OK. Are there any other people or staff that you think parents might like to be able to talk with in the centre. I am thinking about other professionals really that do not already come along that might be useful/helpful?</p> <p>P: The thing is, even when the children start nursery we are doing a course. You know, there is always as in yourself maybe. You know. It is like a certain person destroys absolutely everything you know. It would be nice to be able to ask somebody who knows why they are doing this. People have asked around and people have said he is bored or it is this, it is that, but you know, it is not boredom it is absolutely is not. It is just a destructive nature I think and I could talk to somebody about that for example, I would find that helpful.</p> <p>I: You would find that helpful.</p> <p>P: Yes I would, you know what I mean because a health visitor does know an awful lot, but also sometimes it goes a bit deeper.</p> <p>I: OK so you think a psychologist might be helpful.</p> <p>P: Yes I would say.</p> <p>I: Because they would provide that more, in depth understanding...</p> <p>P: Absolutely, defiantly. Yes.</p> <p>I: ...of why that behaviour might come about?</p> <p>P: Yes definitely.</p>		X					X		
<p>I: I will ask you this question and then I will tell you a little bit about what psychologists do. Do you think it would be useful for parents to be able to meet with a psychologist in the centre?</p>		X					X		

<p>P: Yes absolutely.</p> <p>I: Why do you think that is?</p> <p>P: Some parents do have, I cannot think of the right words to say maybe, have a lesser understanding of their child because all children are different, all people are different everybody is you know, sometimes they do not understand why their child maybe behaves the way they do.</p> <p>I: So it is about a psychologist putting a different understanding..</p> <p>P: .. understanding, yes.</p> <p>I: So that would be working with ...</p> <p>P: .....with the parent and the child it would be both.</p> <p>I: OK.</p> <p>P: Because obviously they would have to have a relationship with the child to understand what they are doing obviously and understanding with the parent.</p> <p>I: OK, so it would be working with the parent and the child.</p> <p>P: Yes.</p> <p>I: Is there anything you want to add onto that before I move onto the next bit? How else do you think a psychologist might be useful?</p> <p>P: I do not know, I mean it would be good to have an understanding, any parent to have an understanding of. I myself would absolutely love to have a few questions answered.</p>									
<p>P: Marriages, that sort of thing, like step families that sort of thing, there are loads of problems there.</p> <p>I: So, shall I put that as another support for....</p> <p>P: Families, it would be like if there was a marriage, but not like marriage guidance as such in it itself, but there are some problems that couples have, that sort of thing.</p> <p>I: Is that a particular need in the community do you think?</p> <p>P: I know of a few people.</p> <p>I: OK no names (<i>laugh</i>).....</p> <p>P: (<i>laugh</i>), but I know of a lot actually about four or five people that I have known that have split up and got back together this year alone you know it is....</p> <p>I: Ok, so that is something useful that a psychologist could offer.</p> <p>P: Yes and also their step families, interaction between step families.</p>									X

<p>I: What difference would it make to parents and their children if parents were able to meet with a psychologist in the centre?</p> <p>P: Be able to improve their family life if a particular problem or problems were able to be addressed.</p> <p>I: To overcome problems is that right?</p> <p>P: Yes. It would improve their way of living.</p> <p>I: So there would be improvements, but what impact would that have, say for the children?</p> <p>P: Well, they would probably be a lot happier.</p> <p>I: and that would be the same for...?</p> <p>P: ....for the whole family yes. It would be the same for everybody wouldn't it. For example, my child, not my child, does not sleep at night, so everyone's awake and the child is screaming, everyone is awake, everyone is miserable, got to go to work, whatever, and nobody really understands why the child is feeling this way or.. I know there is a health visitor, sometimes it does not always work and then things may need to go a bit deeper than that.</p>							X	X	
<p>I: What could a psychologist offer parents that other staff do not already offer or might not do as well?</p> <p>P: Psychology goes a bit more deeper. Goes under the surface rather than just seeing what is in front of your eyes, which I think helps give you a better understanding of why whatever is going on is going on.</p>							X		
<p>I: Now you know a little bit about what we do, do you think it would be useful for parents to be able to meet with a psychologist in the centre?</p> <p>P: Yes, definitely.</p> <p>I: What do you think would be useful?</p> <p>P: Well my oldest is over sensitive and the behaviour comes out quite a lot....  <i>Parent describes personal circumstances that include behavioural difficulties with one of her children.</i> It would be nice to have a child psychologist there to sort of, have someone to listen to XXX (<i>her child</i>) to listen to instead of his parents, because XXX does not say half the things to me that he would to someone else and the behaviour management would be helpful and techniques would be helpful, different things.</p>		X	X						

<p>I: What is it that psychologists offer, that other staff or professionals do not already offer, or might not do as well? ..... Why might people want to talk to a psychologist rather than anyone else?</p> <p>P: I think it is because of your training. You know, what you are learning at university is not what teachers learn. It is not what parents learn. So from that perspective, you guys have got a different knowledge.</p> <p>I: So our training, what does that allow us to do that is different to what other people....</p> <p>P: Because you have got training, you guys have got a different understanding to what a teacher has and what a parent has.</p>							X		
<p>I: With what you know about what psychologists do, do you think it would be useful for parents to be able to meet with a psychologist in the Children's Centre?</p> <p>P: I think if you were worried about your child or thought that they had problems or were not mixing with other children, then yes. I think it would be a good thing. Even if it was like a chat. You might know something that we as parents might miss.</p>									
<p>I: So it is about looking for that deeper understanding. How do you think that would help parents do you think?</p> <p>P: I would think that they would learn from that. I think even if you spoke with the parents and then the parent went to do the child, so question the child, I think the parents just need a little bit of a kick or more understanding sometimes. I do not think it is out there sometimes. Parents sometimes feel a bit alone, especially if they have got a child who is a bit, you know, how do they deal with that? Who do they go to, because I think some parents might start to think, I cannot go nowhere with this child. That is where you guys with your training and everything.</p>				X			X		
<p>I: Do you think it would be useful to parents to be able to meet with a psychologist in the Children's Centre?</p> <p>P: Yes one hundred percent.</p> <p>I: What is it that you.....?</p> <p>P: I think it would be good as there are a lot of parents with children, if they cannot control their behaviour, or, you know, they have got problems, they are running riot at home and everything.</p>	X								

<p>I: Would that be a lot of parent in this community would you say?</p> <p>P: Yes I would say so.</p> <p>I: Yes so behaviour seems to be.....?</p> <p>P: Yes we have seen it in our close, like with children in the street swearing and you know at such an early age.....</p>									
<p>I: What difference would it make for parents and their children if parents were able to meet with a psychologist in the centre?</p> <p>P: It would be helpful because they would be able to talk through their problems and unload basically. I think that would be really helpful and it is not something where they would be able to talk to their friends and have the wrong advise. They would be able to talk to somebody, you know a professional, and be given good advice. They would be given advice on how to change, how to change the situation.</p>			X	X					
<p>I: What could a psychologist offer parents that other staff or professionals do not already offer or might not do as well? What is it that is unique about what a psychologist does?</p> <p>P: Emotional help. I would say, helping somebody to see that what they are in, is not permanent. You know it comes down to perspective again. You help somebody change the way they think and they can change their life.</p> <p>I: Ok it is about altering perspectives.</p> <p>P: I think that is important. Yes definitely.</p> <p>I: And what is about a psychologist that would enable them to do that better than somebody else do you think?</p> <p>P: I suppose because a psychologist will understand human behaviour more and the workings of how a human mind works, basically. I mean there are a lot of things are social as well aren't they, and they can affect you emotionally. You know so you take somebody out of that social situation, you know, that probably goes away. But then, they could recreate that same situation again if you move them to somewhere really nice, because of the way they think. So it is helping them to see different ...</p>				X			X		
<p>I: Do you think it would be useful for parents to be able to meet with a psychologist in the Children's Centre?</p> <p>P: Yes because being with small children very often is quite difficult. They not sure if they do good, sometimes even me feel I am not good mum. I lost sometimes, I</p>	X			X					

<p>scream children, it is wrong. I blame myself very often.</p> <p>I: So it is supporting parents because it is difficult sometimes and making them feel better.</p> <p>P: Especially if the children are babies, you cannot talk with a small person, you are alone with your mind.</p>									
<p>I: What could a psychologist offer that other staff or professionals do not already offer or might not do as well?</p> <p>P: I do not know really. Just advice and support really. I would like to speak with a somebody about my (<i>children ....</i>) who get me down with their behaviour.</p>		X	X	X					
<p>I: So now you know what we do, do you think it might be helpful for parents to be able to meet with a psychologist in the Children's Centre?</p> <p>P: Yes, I definitely do. Yes</p> <p>I: What do you think it is that we could offer?</p> <p>P: Lots of things really, because, I think, you know, loads of people they have problems with, you know, family problems or you know, problems with children whatever so I think loads of things that could be done really so I think that would be really good.</p>		X							
<p>I: What difference do you think it would make to parents and their children if they were able to meet with a psychologist in the centre?</p> <p>P: I think it would make a big difference really. Because like I said before, you do get a lot of parents and a lot of children that do need help and support so I think it would make a big difference.</p>									
<p>P: Our life is probably the most pressured. I mean the wife and I have two kids under two, it's only a semi-serious suggestion but it might not all be based around the child psychology – dealing with parents is another one – we just shout at each other.</p>				X					X
<p>P: Helping parents cope with stress.</p>									X
<p><b>Miscellaneous:</b></p> <p>I: With what you know about what psychologists do, do you think it would be useful for parents to be able to meet with a psychologist in the Children's Centre?</p> <p>P: I think if you were worried about your child or thought that they had problems or were not mixing with other children, then yes. I think it would be a</p>									



good thing. Even if it was like a chat. You might know something that we as parents might miss.

I: Why did you pick behaviour and emotional distress as your top two?

P: I think when you hear the word psychologist, to me, I do not know why, the words that come into my head are children that have got behavioural problems or learning problems, and that is where I would find someone like you useful.

I: Why not learning as your top two then?

P: No, that as well but those two are the main ones that I would find most useful. Learning would be, but I think you have got other support out there to help with that. I mean teachers and things. Whereas, behaviour, I think psychologists are more trained than a teacher to deal with issues like that. And parents if they cannot deal with their children's behaviour issues all the time, or they get to the point that their children do not listen anymore, and that is when they might go to you.

I: What do you think a psychologist could offer that other people or professional do not already offer, or do not offer as well?

P: I think you guys have got the training and skills to be able to dig deep in child's minds. Whereas parents know their children but they know them in a different way.

I: Why did you choose those two?

P: (*referring to why the parents chose support for parents as one of the most useful activities....*) ...because parents need to know what to do at home, what he has been worked with. I could sort of carry on.

The more support out there the better for parents and you hear things on the news that happen, like parents kills themselves and their children and if there was more support out there, things like this would not happen.

I: So it is about offering advice. Looking at what could be done to help that child and that parent with the child, but it is also about giving them the opportunity to feel better in themselves?

P: Exactly. Yes.

I: So can I push you a little bit? If a parent was able to do that and they felt better and they got the good advice, what difference would that make then, to their lives and their children's lives do you think?

P: I think if they saw that there was a genuine change, I think it would give them, it would change their perspective again with life, they would probably have more hope that everything is going to work out. Because you do not know, some people they have got dreams, they want to do this, they want to do that, and sometimes because of the situation they find they are in, they cannot go ahead and do those things. But, you know, it is like hopelessness. If that could change, you know, with hope, I think people could do anything.

I: Ok so hope features quite strongly?

I: What could a psychologist offer parents that other staff or professionals do not already offer or might not do as well? What is it that is unique about what

a psychologist does?

P: Emotional help. I would say, helping somebody to see that what they are in, is not permanent. You know it comes down to perspective again. You help somebody change the way they think and they can change their life.

I: Ok it is about altering perspectives.

P: I think that is important. Yes definitely.

I: And what is about a psychologist that would enable them to do that better than somebody else do you think?

P: I suppose because a psychologist will understand human behaviour more and the workings of how a human mind works, basically. I mean there are a lot of things are social as well aren't they, and they can affect you emotionally. You know so you take somebody out of that social situation, you know, that probably goes away. But then, they could recreate that same situation again if you move them to somewhere really nice, because of the way they think. So it is helping them to see different ...

I: That is really interesting.... there is a branch of psychology called positive psychology and that is looking at what we call the three P's. So you know, if someone is thinking about a situation, it is helpful if you see it as 'not permanent', it is not pervasive, so you do not see it as all encompassing and it is 'not personal'.

P: Yes.

I: So what you are talking about is very much like a positive psychology approach.

P: Because if you change the way you think, you change the way you speak as well. Because I am a firm believer that what I put into my little boy, what I speak to him, like you know, when you are old you are going to be fantastic, you are going to do great, I mean, then those words, will go in and form his behaviour and all that and help him out later on in life.

## **Appendix XI – Diary of research activity**

<b>September/October/November 2009</b>
Initial meetings with and University Tutors, Principal Educational Psychologist and key personnel in Authority to identify areas of interest and potential research.
<b>December 2009 – March 2010</b>
Review of relevant literature and consolidation of research aims in collaboration with Principal Educational Psychologist and University Tutors. Identification of potential Children's centre in which to conduct my research.
<b>March 2010</b>
Attended a networking meeting at a Children's Centre and spoke staff who work from the centre and the manager regarding my potential research. The manager expressed an interest that she would like me to conduct the research in her centre.
<b>April – June 2010</b>
Development of research proposal and specification of research methods (including development of information sheets, consent protocols and data collection) and submission of research proposal to the University of Birmingham Ethics Committee.
<b>July 2010</b>
Ethical committee approval of the research. Brief project summary report written and submitted to EPS and Children's Centre. Attended staff meeting at the centre and gathered background information about the centre, the support in the community and the population. Notes made during the group meeting were checked by the centre manager for accuracy.
<b>August – September 2010</b>
Data gathering (interviews with parents at Children's centre and satellite base). Transcription and initial analysis of interviews.
<b>October - December 2010</b>
Data analysis began in earnest (including coding and ongoing identification of possible themes). Fed back the preliminary findings of the research to the Children's Centre and the EPS at an Early Years and Parenting Team meeting.
<b>Dec 2010 – June 2011</b>
Continued refinement of data analysis and write up of research.

Table? : Research Activity

The activity which took place over the period from September 2009 – March 2010

lead to the research question which was broadly:

What do parents want from the opportunity to meet directly with an EP in community centres such as Children's Centres?

## **Appendix XII – Coded extracts**

Extract I = Interviewer P = Parent	Code	Code No.	Interview No.
<p>I: I want to talk a little bit about psychologists now. Do you have any experience of psychologists for example, in your own life or from watching TV. or, particularly about how psychologists work with children?</p> <p>P: Do you call Jeremy Kyle a psychologist because he is always on ...</p>	Lack of knowledge of what a psychologist does (1)	1	3
<p>I: Ok. What reasons do you think that parents might not speak with a psychologist in the centre?</p> <p>P: Maybe shy, afraid. Afraid to open up. They do not know what you do.</p>	Lack of knowledge of what a psychologist does (1)	1	3
<p>I: What we will do then is.... I have got some cards here with some things that psychologists might provide. I am not saying that this is what they do, because what I want to find out is whether you think it would be useful here or not and then work from there. Ok? So, 'helpful here', 'not sure' 'not helpful here' OK?</p> <p>So if a psychologist was to work from the centre, do you think it would be helpful for them to work with children here?</p> <p>P: ....Not sure really.</p> <p>I: Not sure.</p> <p>P: What would you say a psychologist does then? You going to get into people's brains or ...</p>	Lack of knowledge of what a psychologist does (1)	1	3
<p>I: What reasons do you think people might not speak with a psychologist in the centre?</p> <p>P: Probably embarrassed to speak to people, you know, might not want to discuss their issues.</p> <p>I: Is that embarrassed to speak to people in generally or particularly to a psychologist.</p>	Lack of knowledge of what a psychologist does (1)	1	2

<p>P: To a psychologist as they might think, what do they want to know, sort of thing. It might be that they do not understand what a psychologist could do they might think it ... a lack of understanding might be a bit issue. As with the advice and topics of information they probably think, oh I didn't realise you know, help.</p> <p>I: Ok so that is something we could be done, you know, tell people what we can do</p> <p>P: Yes and help really offering...</p>			
<p>I: What do you think a psychologist could offer parents that other staff or professionals do not already offer or might not do as well?</p> <p>P: Again, not particularly knowing what..... Not particularly familiar with what a psychologist does, I do not know, I would say you tell me, I was not really aware of what the potential was really. Difficult to answer.</p>	Lack of knowledge of what a psychologist does (1)	1	1
<p>I: Can we talk about psychologists now. Do you have any experience of psychologists perhaps in your own life or through watching TV or know about what work they do with children and families?</p> <p>P: No.</p> <p>I: No idea at all?</p> <p>P: I see the word 'psycho' and I think it is something to do with the brain or helping people. That is all I can really say.</p>	Lack of knowledge of what a psychologist does (1)	1	6
<p>I: What reasons do you think a parent might not speak with a psychologist in the centre?</p> <p>P: They might feel awkward. They might feel like they are doing something wrong. I think it would take a lot of, I think it would take a lot of encouragement for them to talk to people I think, especially mums... You know, it is more, 'could I go and speak to that person, is it, you know, the right person to speak to about problems or a problem'. You know, can I just go and speak to that person about anything?.</p>	Lack of knowledge of what a psychologist does (1)	1	6
<p>I: Do you have any experience of psychologists in your life or</p>	Lack of knowledge of what a	1	10

<p>through watching TV. maybe, particularly about the work that they do with children and families?</p> <p>P: No not really.</p>	psychologist does (1)		
<p>I: Moving on now to psychologists. Do you have any experience of psychologists in your own life or through watching TV or have any idea of how we work or what we do?</p> <p>P: No, I probably seen something on the television, a documentary of an interview but it is over my head really. It is not something I have any experience with. It is all new to me.</p> <p>I: From what you have watched on TV, what might we being doing, what where they doing?</p> <p>P: Interviewing children trying to sort of work them out in a way. Trying to find out where they are or what they are thinking. With regards, I saw a programme about a child that had got problems. So you know they were just trying to sort of, dig deep. Find out where they had come from and whether it was down to a sort of family thing or why they have got it sort of thing. If it was down to the family or why they have got it.</p>	<p>Lack of knowledge of what a psychologist does (1)</p> <p>Exception</p>	1	9
<p>I: Moving on now to psychologists. Do you have any experience of psychologists in your own life or through watching TV. or have any idea of how we work with children and families?</p> <p>P: Not really.</p> <p>I: So no idea at all what psychologists do?</p> <p>P: I think, I do not know if I am wrong, but I think it is to do with the emotional well being of children and adults.</p> <p>I: Yes that is fine. Not many people know what a child and educational psychologist does. What you have offered is a lot more than what some other parents have said. You do not have to know anything, but I want to just push you a little bit further.</p> <p>P: Yes ok.</p> <p>I: So emotional wellbeing, what do we do in terms of emotional wellbeing?</p>	<p>Lack of knowledge of what a psychologist does (1)</p> <p>Exception</p>	1	10



<p>P: Emotional wellbeing is the ability to deal with everyday life. When people get into difficulties, problems like financial problems – not being able to pay the mortgage, it causes emotional problems, upset, which can lead to I believe physical problems, breakdowns and nervousness, OCD.</p>			
<p>I: OK, what do you know about psychologist and what we do?  P: Talk with people, support them if they are depressed. If they have got a problem to bring up children, if they have personal problems with alcohol for example or difficult childhood. There are a lot of things, sometimes if you do not have very close friends or who you can share with your problems psychologist is the best.  I: Why do you think psychologists may be better than friends?  P: You can be safe that what you say will not be shared with anybody, you feel confident and you maybe trust that he's professional and can help you.</p>	Lack of knowledge of what a psychologist does (1) Exception	1	11
<p>Do you have any experience of psychologists in your own life or through watching TV. or know how we work ....  P: Yes I have seen some.  I: Seen some Educational Psychologists do you mean?  P: I have seen an Educational Psychologist when I was at school.  I: OK when you was at school..  P: Yes it was a long time ago though.  I: What do you remember of that experience?  P: I was just asked questions. I think I was only about 8 or 10, it was 27 years ago so it was.....  I: OK, so do you have an understanding of how we work?  P: Yes, I think so.  I: OK.  P: You go into schools and stuff and ask to see the children.  I: Yes, that is part of what we do, is we support schools – the schools that come to us and if they have got, an identified need, then we will work with the schools and also more broadly as well to</p>	Lack of knowledge of what a psychologist does (1) Exception	1	4

see how we would like them to promote positive outcomes or.. on a range of issues .. OK.			
12 extracts from 8 parents with 3 exceptions.			
P: Yes, I would suppose my reaction, a lot of people would think child psychologists get involved if there are serious issues. Whereas if you, I am still not particularly clear, but it might be, is it true or not?, you might be of a much more subtle role to play. Then if that is the case, then, that is something that probably people do not understand. That is where the stigma comes from. But if it is a light touch, you know, you could have a light touch helping children's development and parents understand that, then I am sure they might be much more inclined to.... maybe change your name. Call yourself something else.	Psychologist = psychiatrist (2)	2	1
I: OK so that moves us nicely onto the next bit which is..... I really want to find out what you know about what it is that Psychologists do. Do you have any experience of psychologists in your own life or through watching TV or any knowledge of how they work with children and families? P: On TV. mainly, I do know somebody who has bi-polar.	Psychologist = psychiatrist (2)	2	7
I: Do you think there are any reasons why parents might not speak with a psychologist? P: I do not know about this country but in my country people believe that you can go to psychologist if you have got a really serious problem.	Psychologist = psychiatrist (2)	2	11
I: What difference would it make for parent and their children if parents were able to meet with a psychologist in the centre? P: I suppose, you might find that they talk to you, people would probably take advantage of it perhaps. They might not because people might see it as stigma, if they think 'well I am going to see a shrink about my kids'. I also think it is back to the same point again, parents here I think are interested parents and they probably would just think, 'well we're doing alright', most the kids	Psychologist = psychiatrist (2)	2	1

here seem to be alright, there are odd occasions where a particular child might have you know, picked on one of ours, but even from having them both using the centre a lot for two years, everyone seems, they are all really good people and so you might not have a lot of visitors – you might do, I do not know.			
I: What reasons do you think parents might not speak with a psychologist in the centre? P: They might see them more as a psychiatrist.	Psychologist = psychiatrist (2)	2	4
5 extracts from 4 parents			
P: My son is year two. He speaks English better than me now. But he is a very quiet person, still there is some problems. He is a clever boy, he learns very good. But he has got a problem with other children. I think he is too quiet sometimes. He doesn't know how to do, when he's got some problem.	Parent experience of difficulties with their child relevant to psychologist (3)	3	11
I: Now you know a little bit about what we do, do you think it would be useful for parents to be able to meet with a psychologist in the centre? P: Yes, definitely. I: What do you think would be useful? P: Well my oldest is over sensitive and the behaviour comes out quite a lot.... <i>Parent describes personal circumstances that include behavioural difficulties with one of her children.</i> It would be nice to have a child psychologist there to sort of, have someone to listen to ( <i>omitted her child</i> ) to listen to instead of his parents, because ( <i>omitted</i> ) does not say half the things to me that he would to someone else and the behaviour management would be helpful and techniques would be helpful, different things.	Parent experience of difficulties with their child relevant to psychologist (3)	3	8
P: Well there is a young mums group. But another one I think would be nice. Helping things at home, learning new techniques that will work. Because I have been told things and I have watched programmes but it would be nice to be taught them first hand instead of watching second hand.	Parent experience of difficulties with their child relevant to psychologist (3)	3	8

<p>I: So are you saying working with you as a family?</p> <p>P: Yes as a family.</p> <p>I: So do you think there are a number of parents out there who might like to have support in terms of a family?</p> <p>P: Yes</p> <p>I: ..... and that would be things like, what sort of topics do you think?</p> <p>P: Children's behaviour, learning techniques for children's behaviour, rewards systems. Because my eldest has decided to be pushy at the moment and I have not got the techniques there that would be working because I have done a few courses but they just seem to... follow up to the courses that I have done would be good but they do not seem to do follow ups.</p>			
<p>I: Is there anything you want to add onto that before I move onto the next bit? How else do you think a psychologist might be useful?</p> <p>P: I do not know. I mean it would be good to have an understanding, any parent to have an understanding of. I myself would absolutely love to have a few questions answered.</p>	Parent experience of difficulties with their child relevant to psychologist (3)	3	7
<p>I: OK. Are there any other people or staff that you think parents might like to be able to talk with in the centre? I am thinking about other professionals really that do not already come along that might be useful/helpful?.</p> <p>P: The thing is, even when the children start nursery we are doing a course. You know, there is always as in yourself maybe. You know. It is like a certain person destroys absolutely everything you know, it would be nice to be able to ask somebody who knows why they are doing this. People have asked around and people have said he is bored or it is this, it is that, but you know, it is not boredom it is absolutely is not. It is just a destructive nature I think and I could talk to somebody about that for example, I would find that helpful.</p>	Parent experience of difficulties with their child relevant to psychologist (3)  Within child perspective	3	7

<p>I: What could a psychologist offer that other staff or professionals do not already offer or might not do as well?</p> <p>P: I do not know really. Just advice and support really. I would like to speak with somebody about my (<i>children ....</i>) who get me down with their behaviour.</p>	Parent experience of difficulties with their child relevant to psychologist (3)	3	5
<p>I: What support is there for parents in this community, to address any need that there are?</p> <p>P: Loads, like if you need help with like children's behaviour there is, I mean I have a problem with my XX and I have had help in the past with their behaviour (<i>from the Children's Centre</i>).</p>	Parent experience of difficulties with their child relevant to psychologist (3)	3	5
<p>P: Educational Psychologists would be good.</p> <p>I: Why do you think that?</p> <p>P: Well my daughter is having some problems and it would have been nice if there had been somebody here to speak to earlier..... For it to have been picked up at nursery. It would have been nice if there was somebody here that could....</p>	Parent experience of difficulties with their child relevant to psychologist	3	4
<p>I: OK and what is it you think that would be useful with those two?</p> <p>P: Well my daughters having problems and it may be nice to speak to somebody that was a bit more, ..., might have some more information.</p> <p>I: OK. Do you want to say more about that or not?</p> <p>P: Well she is having some problems with socialisation but she is only three. We have been to the paediatrician, but it would be nice to speak to somebody else that was a bit more in-tune with the way that children develop.</p>	Parent experience of difficulties with their child relevant to psychologist	3	4
<p>I: OK, of those....(<i>pointing to the 'useful here pile</i>), which are probably the most useful?.. And give some reasons why?</p> <p>P: Friendships, my daughters not forming friendships. I could do with some help with that and behaviour – she, her behaviour is becoming a problem when people are approaching her. So, before they get labelled as naughty.</p>	Parent experience of difficulties with their child relevant to psychologist	3	4
<p>I: Do you want to say any more on that or are you happy..</p>	Parent experience of difficulties with	3	4

P: Yes ( <i>omitted</i> ) is now, when people approach her she sometimes starts throwing things, it would have been nice to have somebody at right, saying this is what's happening now, it is escalating, what do we do?	their child relevant to psychologist (3)		
<p>I: Do you think it would be useful for parents to meet with a psychologist in the centre?</p> <p>P: Yes, Yes I think that would be nice?</p> <p>I: Why do you think that might be?</p> <p>P: Just to know that there is somebody to help them. You know, just to give support.</p> <p>I: What sort of support do you think we could offer?</p> <p>P: Things that you have mentioned, behavioural, education, a lot of parents, a lot of mums worry about when their children go to school, wondering if their children will be able to cope with it. I worry loads. I was not so worried when (<i>conversation omitted as it would compromise anonymity</i>). It took me nearly a year to realise that (<i>omitted</i>) can cope with it, you know, and I think knowing that you have got the support there. Not just the teachers.</p>	Parent experience of difficulties with their child relevant to psychologist (3)	3	6
12 extracts from 6 parents			
<p>I: Significant events like bereavement?</p> <p>P: Yes, a lot of people find it hard. I know I did, I lost both my grandparents while I was pregnant with (<i>omitted</i>) and that was one of the reasons that I had post natal depression because I could not grieve properly.</p>	Emotional support for parents (4) Depression	4	6
<p>I: Do you think it would be useful for parents to meet with a psychologist in the centre?</p> <p>P: Yes, Yes I think that would be nice?</p> <p>I: Why do you think that might be?</p> <p>P: Just to know that there is somebody to help them. You know, just to give support.</p> <p>I: What sort of support do you think we could offer?</p> <p>P: Things that you have mentioned, behavioural, education, a lot of</p>	Emotional support for parents (4)	4	6

<p>par, a lot of mums worry about when their children goes to school, wondering if their children will be able to cope with it. I worry loads. I was not so worried when (<i>conversation omitted as it would compromise anonymity</i>). It took me nearly a year to realise that (<i>omitted</i>) can cope with it, you know, and I think knowing that you have got the support there. Not just the teachers.</p>			
<p>I: What difference would it make to parents and their children if there were able to meet with a psychologist in the centre?  P: Support for parents, it might put their mind at rest. They may have some questions you know, behaviour problems or something. It might be the first people they speak to rather than go straight to a doctor or going down that route. To offer parents support help and direction of what they could do with their children.</p>	Emotional support for parents (4)	4	2
<p>I: What could a psychologist offer that other staff or professionals do not already offer or might not do as well?  P: I do not know really. Just advice and support really. I would like to speak with somebody about my (<i>children ....</i>) who get me down with their behaviour.</p>	Emotional support for parents (4)	4	5
<p>I: Is there anything that could be done to so that we can offer a service that would encourage parents to come along?  P: I would say, I think the word (Psychologist) sometimes does not relax people at all. Again information, a flyer and things.  I: So it is about advertising?  P: Yes, it is not all about if my child's got difficulties, psychology in their brain or what not. It is not always about that. Sometimes it is also about just having a chat with somebody and making them feel better. So yes, just put more information out there really to reduce fear. A lot of mothers and parents are feared by this.  P: Yes it is not about something is wrong, it is about what you do, how you do it and how you can help in some respects, it might be informal but I would say lots of people do not know.</p>	Emotional support for parents (4)	4	9
<p>I: What could a psychologist offer parents that other staff or</p>	Emotional support for parents (4)	4	10

<p>professionals do not already offer or might not do as well? What is it that is unique about what a psychologist does?</p> <p>P: Emotional, emotional help. I would say, helping somebody to see that what they are in is not permanent, you know it comes down to perspective again. You help somebody change the way they think and they can change their life.</p>			
<p>I: What difference would it make for parents and their children if parents were able to meet with a psychologist in the centre?</p> <p>P: It would be helpful because they would be able to talk through their problems and unload basically. I think that would be really helpful and it is not something where they would be able to talk to their friends and have the wrong advise. They would be able to talk to somebody, you know a professional, and be given good advice. They would be given advice on how to change, how to change the situation.</p>	Emotional support for parents (4)	4	10
<p>I: Do you think it would be useful for parents to be able to meet with a psychologist in the Children's Centre?</p> <p>P: Yes because being with small children very often is quite difficult. They not sure if they do good. Sometimes even me, feel I am not good mum. I lost sometimes, I scream children, it is wrong, I blame myself very often.</p> <p>I: So it is supporting parents because it is difficult sometimes and making them feel better.</p> <p>P: Especially if the children are babies, you can't talk with a small person, you are alone with your mind.</p>	Emotional support for parents (4)	4	11
<p>I: So it is just knowing, it is like having the security blanket. Ok, so if the support was there and was used by the parents, what difference do you think it would make?</p> <p>P: Loads, to be confident. Confidence knowing that you can cope.</p> <p>I: In terms of parents then it would be better confidence and just knowing is that right?</p> <p>P: Yes.</p>	Emotional support for parents (4)	4	6



<p>I: If a psychologist was able to come to the centre and parents were able to meet with them, what difference do you think it would make for parents and their children?</p> <p>P: If I got some support from psychologist I would feel more confident, I feel stronger. I can be better parent for my children. For children the best thing is to have good parent isn't it!</p>	Emotional support for parents (4)	4	11
10 extracts from 6 parents			
<p>P: Well there is a young mums group. But another one I think would be nice. Helping things at home, learning new techniques that will work. Because I have been told things and I have watched programmes but it would be nice to be taught them first hand instead of watching second hand.</p> <p>I: So are you saying working with you as a family?</p> <p>P: Yes as a family.</p> <p>I: So do you think there are a number of parents out there who might like to have support in terms of a family?</p> <p>P: Yes</p> <p>I: ..... and that would be things like, what sort of topics do you think?</p> <p>P: Children's behaviour, learning techniques for children's behaviour, rewards systems. Because my eldest has decided to be pushy at the moment and I have not got the techniques there that would be working because I have done a few courses but they just seem to... follow up to the courses that I have done would be good but they do not seem to do follow ups.</p>	Relevance to the community (6)	6	8
<p>I: So now you know what we do, do you think it might be helpful for parents to be able to meet with a psychologist in the Children's Centre?</p> <p>P: Yes, I definitely do. Yes</p> <p>I: What do you think it is that we could offer?</p> <p>P: Lots of things really, because, I think, you know, loads of people they have problems with, you know, family problems or you know,</p>	Relevance to the community (6)	6	5

problems with children whatever so I think loads of things that could be done really so I think that would be really good.			
<p>I: Do parents in the community have any areas of need that are not being met well by the centre?</p> <p>P: I do think it would be good to have more of an educational kind of theme. I mean, my little boy he has joined the book library and will take books home every single week. I think that would be good if it was encouraged as well. And when he brings his books back, he goes and talks to them about it, what he has read and everything. So I think that is good. I think there should be more of that, more emphasis on.... For example we have a sing song at the end of the session where we all have to sing. But I think it would be good for a member of staff to read as well.</p> <p>I: So perhaps more focus on the educational.....</p> <p>P: On the educational, take a theme and then stay with that theme and structure everything around it. I mean I know it is called 'stay and play' but I still think it would be good for the children to learn different things. I know we learn through play but I think it would also be good to do it through reading.</p>	Relevance to the community (6)	6	10
<p>P: Yes and even with the children, like encouraging parents to read with their children, when children take books and bring them back and they can kind of understand or comprehend what they have read, award them, you know, stars.</p> <p>I: Do you think it is a need particular to this community a need for a more educational focus?</p> <p>P: Yes.</p>	Relevance to the community (6)	6	10
<p>I: Do you think it would be useful to parents to be able to meet with a psychologist in the Children's Centre?</p> <p>P: Yes one hundred percent.</p> <p>I: What is it that you.....?</p> <p>P: I think it would be good as there are a lot of parents with children, if they cannot control their behaviour, or, you know, they</p>	Relevance to the community (6)	6	10

<p>have got problems, they are running riot at home and everything.</p> <p>I: Would that be a lot of parents in this community would you say?</p> <p>P: Yes I would say so.</p>			
<p>I: Anything other</p> <p>P: Friendships, does that come under like couples?</p> <p>I: You are talking....</p> <p>P: Marriages, that sort of thing, like step families that sort of thing, there are loads of problems there.</p> <p>I: So, shall I put that as another support for....</p> <p>P: Families, it would be like if there was a marriage, but not like marriage guidance as such in it itself. But there are some problems that couples have that sort of thing.</p> <p>I: Is that a particular need in the community do you think?</p> <p>P: I know of a few people.</p> <p>I: OK no names (<i>laugh</i>).....</p> <p>P: (<i>laugh</i>), but I know of a lot actually about four or five people that I have known that have split up and got back together this year alone you know it is..</p> <p>I: Ok so that is something useful that a psychologist could offer.</p> <p>P: Yes and also their step families, interaction between step families.</p>	Relevance to the community (6)	6	7
6 extracts from 4 parents			
<p>P: I think if they saw that there was a genuine change, I think it would give them, it would change their perspective again with life. They would probably have more hope that everything is going to work out.</p>	Psychologists provide a different perspective, something that has been missed (7)	7	10
<p>I: That is very good. What is it that psychologists do, to contribute to enhancing emotional.....?</p> <p>P: I suppose it is helping people to see that life can be different, changing their perspective, I think.</p> <p>I: Ok that is brilliant.</p>	Psychologists provide a different perspective, something that has been missed (7)	7	10
<p>I: What is it that psychologists offer, that other staff or</p>	Psychologists provide a different	7	9

<p>professionals do not already offer, or might not do as well? .....  Why might people want to talk to a psychologist rather than anyone else?  P: I think it is because of your training. You know, what you are learning at university is not what teachers learn. It is not what parents learn. So from that perspective, you guys have got a different knowledge.</p>	<p>perspective, something that has been missed (7)</p>		
<p>I: What do you think a psychologist could offer that other people or professional do not already offer, or do not offer as well?  P: I think you guys have got the training and skills to be able to dig deep in child's minds. Whereas parents know their children but they know them in a different way.</p>	<p>Psychologists provide a different perspective, something that has been missed (7)</p>	7	9
<p>I: With what you know about what psychologists do, do you think it would be useful for parents to be able to meet with a psychologist in the Children's Centre?  P: I think if you were worried about your child or thought that they had problems or were not mixing with other children, then yes. I think it would be a good thing. Even if it was like a chat. You might know something that we as parents might miss.</p>	<p>Psychologists provide a different perspective, something that has been missed (7)</p>	7	9
<p>I: What difference would it make to parents and their children if parents were able to meet with a psychologist in the centre?  P: Be able to improve their family life if a particular problem or problems were able to be addressed.  I: To overcome problems is that right?  P: Yes. It would improve their way of living.  I: So there would be improvements, but what impact would that have, say for the children?  P: Well, they would probably be a lot happier.  I: and that would be the same for...?  P: ...for the whole family yes. It would be the same for everybody wouldn't it. For example, my child, not my child does not sleep at night so everyone's awake and the child is screaming, everyone is</p>	<p>Psychologists provide a different perspective, something that has been missed (7)</p>	7	7

awake, everyone is miserable, go to go to work, whatever, and nobody really understands why the child is feeling this way or.. I know there is a health visitor, sometimes it does not always work and then things may need to go a bit deeper than that.			
<p>I: What could a psychologist offer that other staff or professionals might not offer or might not do as well?</p> <p>P: Probably a different approach to help with bringing up kids. Just different advice I suppose isn't it really. I would say more specific direction and a different approach really isn't it.</p>	Psychologists provide a different perspective, something that has been missed (7)	7	2
<p>I: OK. Do you want to say more about that or not?</p> <p>P: Well she is having some problems with socialisation but she is only three, We have been to the paediatrician, but it would be nice to speak to somebody else that was a bit more in-tune with the way that children develop.</p>	Psychologists provide a different perspective, something that has been missed	7	4
<p>I: OK. Are there any other people or staff that you think parents might like to be able to talk with in the centre? I am thinking about other professionals really that do not already come along that might be useful/helpful?.</p> <p>P: The thing is, even when the children start nursery we are doing a course. You know, there is always as in yourself maybe. You know. It is like a certain person destroys absolutely everything you know, it would be nice to be able to ask somebody who knows why they are doing this. People have asked around and people have said he is bored or it is this, it is that, but you know, it is not boredom it is absolutely is not. It is just a destructive nature I think and I could talk to somebody about that for example, I would find that helpful.</p>	Psychologists provide a different perspective, something that has been missed (7)	7	7
<p>I: What could a psychologist offer parents that other staff or professionals do not already offer or might not do as well? What is it that is unique about what a psychologist does?</p> <p>P: Emotional, emotional help. I would say, helping somebody to see that what they are in is not permanent, you know it comes</p>	Psychologists provide a different perspective, something that has been missed (7)	7	10

down to perspective again. You help somebody change the way they think and they can change their life.			
<p>I: and what is about a psychologist that would enable them to do that better than somebody else do you think?</p> <p>P: I suppose because a psychologist will understand human behaviour more so and the workings of how a human mind works basically. I mean there are a lot of things are social as well aren't they and they can affect you emotionally. You know so you take somebody out of that social situation, you know, that probably goes away. But then, they could recreate that same situation again if you move them to somewhere really nice, because of the way they think. So it is helping them to see different ...</p>	Psychologists provide a different perspective, something that has been missed (7)	7	10
11 extracts from 5 parents.			
<p>I: OK. Are there any other people or staff that you think parents might like to be able to talk with in the centre? I am thinking about other professionals really that do not already come along that might be useful/helpful?</p> <p>P: The thing is, even when the children start nursery we are doing a course. You know, there is always as in yourself maybe. You know. It is like a certain person destroys absolutely everything you know, it would be nice to be able to ask somebody who knows why they are doing this. People have asked around and people have said he is bored or it is this, it is that, but you know, it is not boredom it is absolutely is not. It is just a destructive nature I think and I could talk to somebody about that for example, I would find that helpful.</p>	<p>Psychologist provide a deeper understanding of a child (8)</p> <p>Within child</p>	8	7
<p>I: What do you think a psychologist could offer that other people or professional do not already offer, or do not offer as well?</p> <p>P: I think you guys have got the training and skills to be able to dig deep in child's minds. Whereas parents know their children but they know them in a different way.</p>	Psychologist provide a deeper understanding of a child (8)	8	9
I: I will ask you this question and then I will tell you a little bit about	Psychologist provide a deeper	8	7

<p>what psychologists do. Do you think it would be useful for parents to be able to meet with a psychologist in the centre?</p> <p>P: Yes absolutely.</p> <p>I: Why do you think that is?</p> <p>P: Some parents do have... I cannot think of the right words to say maybe, have a lesser understanding of their child because all children are different, all people are different everybody is you know, sometimes they do not understand why their child maybe behave the way they do.</p>	understanding of a child (8)		
<p>I: Is there anything you want to add onto that before I move onto the next bit? How else do you think a psychologist might be useful?</p> <p>P: I do not know. I mean it would be good to have an understanding, any parent to have an understanding of. I myself would absolutely love to have a few questions answered.</p>	Psychologist provide a deeper understanding of a child (8)	8	7
<p>I: What difference would it make to parents and their children if parents were able to meet with a psychologist in the centre?</p> <p>P: Be able to improve their family life if a particular problem or problems were able to be addressed.</p> <p>I: To overcome problems is that right?</p> <p>P: Yes. It would improve their way of living.</p> <p>I: So there would be improvements, but what impact would that have, say for the children?</p> <p>P: Well, they would probably be a lot happier.</p> <p>I: and that would be the same for...?</p> <p>P: ...for the whole family yes. It would be the same for everybody wouldn't it. For example, my child, not my child does not sleep at night so everyone's awake and the child is screaming, everyone is awake, everyone is miserable, go to go to work, whatever, and nobody really understands why the child is feeling this way or.. I know there is a health visitor, sometimes it does not always work and then things may need to go a bit deeper than that.</p>	Psychologist provide a deeper understanding of a child (8)	8	7

<p>I: What could a psychologist offer parents that other staff do not already offer or might not do as well?</p> <p>P: Psychology goes a bit more deeper. Goes under the surface rather than just seeing what is in front of your eyes, which I think helps give you a better understanding of why whatever is going on is going on.</p>	Psychologist provide a deeper understanding of a child (8)	8	7
<p>I: What difference would it make to parents and their children if parents were able to meet with a psychologist in the centre? .... If we were to do any of those activities (<i>referring to the ones on the sort cards</i>) what difference would it make?</p> <p>P: I would hope things would get easier with understanding of each other, between me and the child, to know where the child is coming from so that I can use techniques to help the child develop them better.</p>	Psychologist provide a deeper understanding of a child (8)	8	8
7 extracts from 3 parents			
<p>I: What difference would it make to parents and their children if parents were able to meet with a psychologist in the centre? .... If we were to do any of those activities (<i>referring to the ones on the sort cards</i>) what difference would it make?</p> <p>P: I would hope things would get easier with understanding of each other, between me and the child, to know where the child is coming from so that I can use techniques to help the child develop them better.</p>	Parents would like advice/information/direction/techniques (10)	10	8
<p>P: Well there is a young mums group. But another one I think would be nice. Helping things at home, learning new techniques that will work. Because I have been told things and I have watched programmes but it would be nice to be taught them first hand instead of watching second hand.</p> <p>I: So are you saying working with you as a family?</p> <p>P: Yes as a family.</p> <p>I: So do you think there are a number of parents out there who might like to have support in terms of a family?</p>	Parents would like advice/information/direction/techniques (10)	10	8



<p>P: Yes</p> <p>I: ..... and that would be things like, what sort of topics do you think?</p> <p>P: Children's behaviour, learning techniques for children's behaviour, rewards systems. Because my eldest has decided to be pushy at the moment and I have not got the techniques there that would be working because I have done a few courses but they just seem to... follow up to the courses that I have done would be good but they do not seem to do follow ups.</p>			
<p>I: Now you know a little bit about what we do, do you think it would be useful for parents to be able to meet with a psychologist in the centre?</p> <p>P: Yes, definitely.</p> <p>I: What do you think would be useful?</p> <p>P: Well my oldest is over sensitive and the behaviour comes out quite a lot.... <i>Parent describes personal circumstances that include behavioural difficulties with one of her children.</i> It would be nice to have a child psychologist there to sort of, have someone to listen to (<i>omitted -her child</i>) to listen to instead of his parents, because (<i>omitted</i>) does not say half the things to me that he would to someone else and the behaviour management would be helpful and techniques would be helpful, different things.</p>	Parents would like advice/information/direction/techniques (10)	10	8
<p>I: OK. ... What difference would it make to parents and their children if parents were able to meet with a psychologist here in the centre?</p> <p>P: It might help them. Give them some useful advice on how to deal with children problems, before it got out of hand, if you know what I mean.</p> <p>I: So is that like an early intervention?</p> <p>P: Early intervention I think before it escalates.</p> <p>I: Do you want to say any more on that or are you happy..</p>	Parents would like advice/information/direction/techniques (10)	10	4
I: What could a psychologist offer that other staff or professionals	Parents would like	10	5

do not already offer or might not do as well? P: I do not know really. Just advice and support really. I would like to speak with somebody about my ( <i>children</i> ....) who get me down with their behaviour.	advice/information/direction/techniques (10)		
I: Can you think of any examples of how a psychologist might support parents? P: Just if you know, you might have a problem with a child, struggling to bring the child up or something like that. Especially if you have got more than one kid, they might be able to give some advice, you know, see if there is anything with that. Especially if there are coming here for a bit of a breathing space. It might be nice just having help and support for somebody you know.	Parents would like advice/information/direction/techniques (10)	10	2
I: What could a psychologist offer that other staff or professionals might not offer or might not do as well? P: Probably a different approach to help with bringing up kids. Just different advice I suppose isn't it really. I would say more specific direction and a different approach really isn't it.	Parents would like advice/information/direction/techniques (10)	10	2
I: What difference would it make to parents and their children if there were able to meet with a psychologist in the centre? P: Support for parents, it might put their mind at rest. They may have some questions you know, behaviour problems or something. It might be the first people they speak to rather than go straight to a doctor or going down that route. To offer parents support help and direction of what they could do with their children.	Parents would like advice/information/direction/techniques (10)	10	2
I: What difference would it make for parents and their children if parents were able to meet with a psychologist in the centre? P: It would be helpful because they would be able to talk through their problems and unload basically. I think that would be really helpful and it is not something where they would be able to talk to their friends and have the wrong advise. They would be able to talk to somebody, you know a professional, and be given good advice. They would be given advice on how to change, how to change the	Parents would like advice/information/direction/techniques (10)	10	10

situation.			
8 extracts from 5 parents			
<p>I: What difference would it make to parents and their children if parents were able to meet with a psychologist in the centre?</p> <p>P: Be able to improve their family life if a particular problem or problems were able to be addressed.</p> <p>I: To overcome problems is that right?</p> <p>P: Yes. It would improve their way of living.</p> <p>I: So there would be improvements, but what impact would that have, say for the children?</p> <p>P: Well, they would probably be a lot happier.</p> <p>I: and that would be the same for...?</p> <p>P: ...for the whole family yes. It would be the same for everybody wouldn't it. For example, my child, not my child does not sleep at night so everyone's awake and the child is screaming, everyone is awake, everyone is miserable, go to go to work, whatever, and nobody really understands why the child is feeling this way or.. I know there is a health visitor, sometimes it does not always work and then things may need to go a bit deeper than that.</p>	Improvements that psychologists can bring about (12)	12	7
<p>I: What difference would it make to children and their parents if parents were able to meet with a psychologist in the centre?</p> <p>P: Knowing that they might be able to help you.</p> <p>I: So it is just knowing, it is like having the security blanket. Ok, so if the support was there and was used by the parents, what difference do you think it would make?</p> <p>P: Loads, to be confident. Confidence knowing that you can cope.</p> <p>I: In terms of parents then it would be better confidence and just knowing is that right?</p> <p>P: Yes.</p> <p>I: What about for the children, do you think there would be any positives for the children?</p> <p>P: It would give them more confidence, realise that they can do</p>	Improvements that psychologists can bring about (12)	12	6

things on their own, which would be nice.			
<p>I: If a psychologist was able to come to the centre and parents were able to meet with them, what difference do you think it would make for parents and their children?</p> <p>P: If I got some support from psychologist I would feel more confident, I feel stronger. I can be better parent for my children. For children the best thing is to have good parent isn't it!</p>	Improvements that psychologists can bring about (12)	12	11
<p>P: Educational Psychologists would be good.</p> <p>I: Why do you think that?</p> <p>P: Well my daughter is having some problems and it would have been nice if there had been somebody here to speak to earlier..... For it to have been picked up at nursery. It would have been nice if there was somebody here that could..</p>	Improvements that psychologists can bring about (12)	12	4
<p>I: OK, of those....(<i>pointing to the 'useful here pile'</i>), which are probably the most useful?.. And give some reasons why?</p> <p>P: Friendships, my daughters not forming friendships. I could do with some help with that and behaviour – she, her behaviour is becoming a problem when people are approaching her. So, before they get labelled as naughty.</p>	Improvements that psychologists can bring about (12)	12	4
<p>I: OK. ... What difference would it make to parents and their children if parents were able to meet with a psychologist here in the centre?</p> <p>P: It might help them. Give them some useful advice on how to deal with children problems, before it got out of hand, if you know what I mean.</p> <p>I: So is that like an early intervention?</p> <p>P: Early intervention I think before it escalates.</p>	Improvements that psychologists can bring about (12)	12	4
<p>I: What difference would it make to parents and their children if there were able to meet with a psychologist in the centre?</p> <p>P: Support for parents, it might put their mind at rest. They may have some questions you know, behaviour problems or something. It might be the first people they speak to rather than go straight to</p>	Improvements that psychologists can bring about (12)	12	2

a doctor or going down that route. To offer parents support help and direction of what they could do with their children.			
7 extracts from parents			
<p>I: One last question then, what do you think a psychologist could offer that parents that other staff or professionals do not already offer or might not do as well?.....</p> <p>I: it is a tough question....</p> <p>P:.... that is the main one isn't it! I think you are more qualified aren't,you are more..... what is the word?.....your specialised aren't you in children's problems if you know what I mean!</p> <p>I: OK, so is it the knowledge and the training...</p>	Psychologists training/experience /knowledge valued psychologists (13)	13	4
<p>I: Why would you like to see a psychologist rather than someone else at the centre?</p> <p>P: Because you are trained to what we would want and people here are not as trained to do that.</p> <p>I: Can I push you just a little bit... what is it that parents want?</p> <p>P: Someone on a highly professional level. Because it is a Children's Centre it is still quite, nursery work really, it would be nice for us to have a highly professional for us to talk to that would really know and has been trained.</p>	Psychologists training/experience /knowledge valued psychologists (13)	13	8
<p>I: Why did you pick behaviour and emotional distress as your top two?</p> <p>P: I think when you hear the word psychologist, to me, I do not know why, the words that come into my head are children that have got behavioural problems or learning problems, and that is where I would find someone like you useful.</p> <p>I: Why not learning as your top two then?</p> <p>P: No, that as well but those two are the main ones that I would find most useful. Learning would be, but I think you have got other support out there to help with that. I mean teachers and things. Whereas, behaviour, I think psychologists are more trained than a teacher to deal with issues like that. And parents if they cannot</p>	Psychologists training/experience /knowledge valued psychologists (13)	13	9

deal with their children's behaviour issues all the time, or they get to the point that their children do not listen anymore, and that is when they might go to you.			
<p>I: What do you think a psychologist could offer that other people or professional do not already offer, or do not offer as well?</p> <p>P: I think you guys have got the training and skills to be able to dig deep in child's minds. Whereas parents know their children but they know them in a different way.</p>	Psychologists training/experience /knowledge valued psychologists (13)	13	9
<p>I: What is it that psychologists offer, that other staff or professionals do not already offer, or might not do as well? ..... Why might people want to talk to a psychologist rather than anyone else?</p> <p>P: I think it is because of your training. You know, what you are learning at university is not what teachers learn. It is not what parents learn. So from that perspective, you guys have got a different knowledge.</p>	Psychologists training/experience /knowledge valued psychologists (13)	13	9
<p>I: What is it about psychologists that is different and I know I ...</p> <p>P: I know just, I think that have more experience they have more information they can find someone who is particular with this problem. I think in the centre they special about children but in the family, there can be more problems.</p> <p>P: So in the centre they're more focused on the children but psychologist more focus on the family?</p>	Psychologists training/experience /knowledge valued psychologists (13)	13	11
<p>I: and what is about a psychologist that would enable them to do that better than somebody else do you think?</p> <p>P: I suppose because a psychologist will understand human behaviour more so and the workings of how a human mind works basically. I mean there are a lot of things are social as well aren't they and they can affect you emotionally. You know so you take somebody out of that social situation, you know, that probably goes away. But then, they could recreate that same situation again if you move them to somewhere really nice, because of the way</p>	Psychologists training/experience /knowledge valued psychologists (13)	13	10

they think. So it is helping them to see different ...			
7 extracts from 5 parents			
<p>I: If anything, what changes could be made to encourage parents to come along?</p> <p>P: I suppose advertisement. I know it is probably really hard for the staff but trying to get the staff to speak to the parents more, telling them what is about and you know. Advertisement and leaflets really. Because they might not feel that, they might find that they got something wrong but they do not want to talk to somebody but if they had a leaflet or an advert saying what they do in the centre, then they might think, 'yes that is what I can do with doing', and then they can, you know, it might just help them speak to somebody.</p>	Need to advertise our role (14)	14	6
<p>P: Yes, I would suppose my reaction, a lot of people would think child psychologists get involved if there are serious issues. Whereas if you, I am still not particularly clear, but it might be, is it true or not?, you might be of a much more subtle role to play. Then if that is the case, then, that is something that probably people do not understand. That is where the stigma comes from. But if it is a light touch, you know, you could have a light touch helping children's development and parents understand that, then I am sure they might be much more inclined to.... maybe change your name. Call yourself something else.</p>	Need to advertise our role (14)	14	1
<p>I: What reasons do you think people might not speak with a psychologist in the centre?</p> <p>P: Probably embarrassed to speak to people, you know, might not want to discuss their issues.</p> <p>I: Is that embarrassed to speak to people in generally or particularly to a psychologist.</p> <p>P: To a psychologist as they might think, what do they want to know, sort of thing. It might be that they do not understand what a psychologist could do they might think it ... a lack of understanding</p>	Need to advertise our role (14)	14	2

<p>might be a bit issue. As with the advice and topics of information they probably think, oh I didn't realise you know, help.</p> <p>I: Ok so that is something we could be done, you know, tell people what we can do</p> <p>P: Yes and help really offering...</p>			
<p>I: So what do you think we could do to, what could be done to make sure that parents feel comfortable in speaking with a psychologist if they wanted to?</p> <p>P: Let them know when you are here and maybe like you are here have a room like this for yourself, if you have any problems, or that, come and see her.</p> <p>I: What about if people are perhaps shy or afraid to open up?</p> <p>P: I would maybe, you would have to go and speak to them go out on the floor and.....</p>	Need to advertise our role (14)	14	3
<p>I: Ok. What reasons do you think that parents might not speak with a psychologist in the centre?</p> <p>P: Maybe shy, afraid. Afraid to open up. They do not know what you do.</p> <p>I: So what do you think we could do to, what could be done to make sure that parents feel comfortable in speaking with a psychologist if they wanted to?</p> <p>P: Let them know when you are here and maybe like you are here have a room like this for yourself, if you have any problems, or that, come and see her.</p> <p>I: What about if people are perhaps shy or afraid to open up?</p> <p>P: I would maybe, you would have to go and speak to them go out on the floor and.....</p>	Need to advertise our role (14)	14	3
<p>I: So what do you think could be done differently to make sure that parents feel comfortable speaking to psychologists?</p> <p>P: God! I do not know. I think make sure that the parents know exactly what a psychologist does and make sure the psychologist sit is in with the parents and children and not just sit in a little room</p>	Need to advertise our role (14)	14	4



on their own.			
<p>I: Is there anything that psychologists could do to make sure that parents feel comfortable in coming to speak with a psychologist if they wanted to?</p> <p>P: Well I suppose part of it is what you are doing now? I suppose maybe making people aware of what the services are. Giving people examples of things that you might have helped with where it is not, you know 'you are not nutters' (<i>referring to parents</i>)</p>	Need to advertise our role (14)	14	1
<p>I: What changes could be made to encourage parents to feel comfortable in using the support, do you think?</p> <p>P: Knowing that there is the support around.</p>	Need to advertise our role (14)	14	6
<p>I: OK what could be done to make sure that parents would feel comfortable or not so scared speaking with a psychologist?</p> <p>P: Well you could come to a Parents Forum meeting and explain a little bit about yourself and what you do. Or at the end of courses you could perhaps ask for five or ten minutes of their time, you could nip in when they do the parenting puzzle that sort of thing.</p> <p>I: OK. So it is about explaining what we do, being clear..</p>	Need to advertise our role (14)	14	7
<p>I: So what could we do, what changes could we make so that parents feel comfortable in coming to speak with us?</p> <p>P: Maybe if they know more what they do, what psychologists do. If they know somebody who has support or if they know where they can find psychologists, because if I need a psychologist, I wouldn't know what to do, if I should go to GP or library, I do not know who to ask.</p>	Need to advertise our role (14)	14	11
<p>I: Is there anything that could be done to so that we can offer a service that would encourage parents to come along?</p> <p>P: I would say, I think the word (Psychologist) sometimes does not relax people at all. Again information, a flyer and things.</p> <p>I: So it is about advertising?</p> <p>P: Yes, it is not all about if my child's got difficulties, psychology in their brain or what not. It is not always about that. Sometimes it is</p>	Need to advertise our role (14)	14	9

<p>also about just having a chat with somebody and making them feel better. So yes, just put more information out there really to reduce fear. A lot of mothers and parents are feared by this.</p> <p>P: Yes it is not about something is wrong, it is about what you do, how you do it and how you can help in some respects, it might be informal but I would say lots of people do not know.</p>			
11 extracts from 8 parents.			
<p>I: Do you think there are any reasons that parents might not use the support?</p> <p>P: They might be ashamed of what their problem is, or it might be a very personal problem that they do not want to discuss with someone that they do not know very well.</p> <p>I: So what changes could be made to make the support or to encourage parents to use the support?</p> <p>P: I do not know. It would have to be off their own back really, you would not be able to push someone, if it was a touching subject. Ask, but if they are aware that they have a problem, they know where the support is.</p>	Adverse feelings (e.g. embarrassment, anxiety) in speaking with a psychologist (16)	16	8
<p>I: OK. What reasons do you think parents might not want to speak with a psychologist?</p> <p>P: Maybe too scared of what they might find out?</p> <p>I: Have you got any examples? Hypothetical.</p> <p>P: If my child is running around and never sit is down, find out that they may have ADHD or something like that.</p> <p>I: Scared of finding out...</p> <p>P: ...of finding out some kind of diagnosis that they do not want the child to have.</p>	<p>Adverse feelings (e.g. embarrassment, anxiety) in speaking with a psychologist (16)</p> <p>Exception within child perspective.</p>	16	7
<p>I: What reasons do you think parents might not speak with a psychologist in the centre?</p> <p>P: Maybe if they just feel uncomfortable.</p>	Adverse feelings (e.g. embarrassment, anxiety) in speaking with a psychologist (16)	16	5
<p>I: Do you think some people might think that there is something wrong if they need to go and see a Psychologist?</p>	Adverse feelings (e.g. embarrassment, anxiety) in speaking with a	16	6

<p>P: Yes</p> <p>I: So what do you think could be done to make sure some parents do feel comfortable in coming to speak with a psychologist?</p> <p>P: Perhaps like this, sitting in a little room, knowing that you can close the door if you want to. A lot of people like myself, sometimes if I need to speak about a problem, I start getting anxiety or I will get emotional. Knowing that you are not going to be made to feel silly in feeling like that it takes a lot, it does not take a lot for me to talk about my problems but I start getting really anxious and if I start getting anxious I feel like I want to cry and it is nice to know that you are not going to be made a fool of and like come on we have all felt like this and just to know that, you know everything is not all bad.</p> <p>I: Ok. So it is about making sure that we are supporting, we do not make people feel silly, and we give the option to sit in a room like this?</p>	psychologist (16)		
<p>I: OK so what other reasons do you think parents might not speak with a psychologist in the centre?</p> <p>P: They might be embarrassed.</p> <p>I: What do you think they might be embarrassed about?</p> <p>P: They might think the psychologist might think that they were a bad parent.</p>	Adverse feelings (e.g. embarrassment, anxiety) in speaking with a psychologist (16)	16	4
<p>I: What reasons do you think people might not speak with a psychologist in the centre?</p> <p>P: Probably embarrassed to speak to people, you know, might not want to discuss their issues.</p> <p>I: Is that embarrassed to speak to people in generally or particularly to a psychologist.</p> <p>P: To a psychologist as they might think, what do they want to know, sort of thing. It might be that they do not understand what a psychologist could do they might think it ... a lack of understanding might be a bit issue. As with the advice and topics of information</p>	Adverse feelings (e.g. embarrassment, anxiety) in speaking with a psychologist (16)	16	2

<p>they probably think, oh I didn't realise you know, help.</p> <p>I: Ok so that is something we could be done, you know, tell people what we can do</p> <p>P: Yes and help really offering...</p>			
<p>I: What difference would it make for parent and their children if parents were able to meet with a psychologist in the centre?</p> <p>P: I suppose, you might find that they talk to you, people would probably take advantage of it perhaps. They might not because people might see it as stigma, if they think 'well I am going to see a shrink about my kids'. I also think it is back to the same point again, parents here I think are interested parents and they probably would just think, 'well we're doing alright', most the kids here seem to be alright, there are odd occasions where a particular child might have you know, picked on one of ours, but even from having them both using the centre a lot for two years, everyone seems, they are all really good people and so you might not have a lot of visitors – you might do, I do not know.</p>	Adverse feelings (e.g. embarrassment, anxiety) in speaking with a psychologist (16)	16	1
<p>I: Can you think of any reasons why parents might not use the support?</p> <p>P: Embarrassment.</p> <p>I: What do you think they might be embarrassed about?</p> <p>P: Actually, making themselves aware that they might have a problem or actually going to that certain person that could help them to say that they have got a problem. It took me a long time.</p> <p>I: Ok so it is coming to terms with ....</p> <p>P: Yes, I realised that,.... I thought it was my son that had got the problems, but then talking to somebody about them, well, actually talking to my friend, that actually went and spoke to the person that could help me, she came, that person came to help me, and then.. She actually made me realise that it is not him, it is me and him.</p>	Adverse feelings (e.g. embarrassment, anxiety) in speaking with a psychologist (16)	16	6
<p>I: What reasons do you think a parent might not speak with a psychologist in the centre?</p>	Adverse feelings (e.g. embarrassment, anxiety) in speaking with a	16	6

P: They might feel awkward. They might feel like they are doing something wrong. I think it would take a lot of, I think it would take a lot of encouragement for them to talk to people I think, especially mums...	psychologist (16)		
<p>I: Is there anything that could be done to so that we can offer a service that would encourage parents to come along?</p> <p>P: I would say, I think the word (<i>Psychologist</i>) sometimes does not relax people at all. Again information, a flyer and things.</p> <p>I: So it is about advertising?</p> <p>P: Yes, it is not all about if my child's got difficulties, psychology in their brain or what not. It is not always about that. Sometimes it is also about just having a chat with somebody and making them feel better. So yes, just put more information out there really to reduce fear. A lot of mothers and parents are feared by this.</p> <p>P: Yes it is not about something is wrong, it is about what you do, how you do it and how you can help in some respects, it might be informal but I would say lots of people do not know.</p>	Adverse feelings (e.g. embarrassment, anxiety) in speaking with a psychologist (16)	16	9
<p>I: Do you think there is something that we could do to make them feel more comfortable or...</p> <p>P: Like behaviour for example. Some parents might feel a little bit embarrassed about how their child behaves, they might feel a little bit like it is down to them, a lot of people might point their finger at parents but at the end of the day, it is not always the case. Parent's might get a little bit</p>	Adverse feelings (e.g. embarrassment, anxiety) in speaking with a psychologist (16)	16	9
<p>I: Ok. So fear of being judged and they might feel stupid in themselves because of the...</p> <p>P: Yes and shame as well.</p> <p>I: What do think they might feel ashamed of?</p> <p>P: That they're not doing, that they are not good parents you know with bringing up their children. They know that their children are not, you know, good or they are causing problems and they do not know how to change it. It is like a vicious circle sometimes, it just</p>	Adverse feelings (e.g. embarrassment, anxiety) in speaking with a psychologist (16)	16	10

goes round and round.			
I: OK. Do you think there are any reasons why parents might not want to use the support that is available? P: Yes, Yes I think some parents think that they are being judged.	Adverse feelings (e.g. embarrassment, anxiety) in speaking with a psychologist (16)	16	4
14 extracts from 9 parents.			
I: Ok. So fear of being judged and they might feel stupid in themselves because of the... P: Yes and shame as well. I: What do think they might feel ashamed of? P: That they're not doing, that they are not good parents you know with bringing up their children. They know that their children are not, you know, good or they are causing problems and they do not know how to change it. It is like a vicious circle sometimes, it just goes round and round.	Perception of inadequate parenting or doing something wrong (17)	17	10
I: Do you think there is something that we could do to make them feel more comfortable or... P: Like behaviour for example. Some parents might feel a little bit embarrassed about how their child behaves, they might feel a little bit like it is down to them, a lot of people might point their finger at parents but at the end of the day, it is not always the case. Parent's might get a little bit...	Perception of inadequate parenting or doing something wrong (17)	17	9
I: OK can you think of any reasons that a parent might not speak with a psychologist in the centre? P: Fear. I: Fear of.. P: Fear that they are going to be, not on the spot, that they are going to be judged. I think being judged and they might feel that they're inadequate like they feel stupid they feel you know, the problem that they have got maybe, to them, be really simple and everything, they might feel stupid and what have you.	Perception of inadequate parenting or doing something wrong (17)	17	10
I: Do you think it would be useful for parents to be able to meet	Perception of inadequate parenting or	17	11

<p>with a psychologist in the Children's Centre?</p> <p>P: Yes because being with small children very often is quite difficult. They not sure if they do good. Sometimes even me feel I am not good mum. I lost sometimes, I scream children, it is wrong, I blame myself very often.</p> <p>I: So it is supporting parents because it is difficult sometimes and making them feel better.</p> <p>P: Especially if the children are babies, you can't talk with a small person, you are alone with your mind.</p>	doing something wrong (17)		
<p>I: What reasons do you think a parent might not speak with a psychologist in the centre?</p> <p>P: They might feel awkward. They might feel like they are doing something wrong. I think it would take a lot of, I think it would take a lot of encouragement for them to talk to people I think, especially mums...</p>	Perception of inadequate parenting or doing something wrong (17)	17	6
<p>I: Do you think there are any reasons that parents might not use the support?</p> <p>P: They might be ashamed of what their problem is, or it might be a very personal problem that they do not want to discuss with someone that they do not know very well.</p> <p>I: So what changes could be made to make the support or to encourage parents to use the support?</p> <p>P: I do not know. It would have to be off their own back really, you would not be able to push someone, if it was a touching subject. Ask, but if they are aware that they have a problem, they know where the support is.</p>	Perception of inadequate parenting or doing something wrong (17)	17	8
<p>I: Can you think of any reasons why parents might not use the support?</p> <p>P: Embarrassment.</p> <p>I: What do you think they might be embarrassed about?</p> <p>P: Actually, making themselves aware that they might have a problem or actually going to that certain person that could help</p>	Perception of inadequate parenting or doing something wrong (17)	17	6

<p>them to say that they have got a problem. It took me a long time.</p> <p>I: Ok so it is coming to terms with ....</p> <p>P: Yes, I realised that,... I thought it was my son that had got the problems, but then talking to somebody about them, well, actually talking to my friend, that actually went and spoke to the person that could help me, she came, that person came to help me, and then.. She actually made me realise that it is not him, it is me and him.</p>			
<p>I: What difference would it make for parent and their children if parents were able to meet with a psychologist in the centre?</p> <p>P: I suppose, you might find that they talk to you, people would probably take advantage of it perhaps. They might not because people might see it as stigma, if they think 'well I am going to see a shrink about my kids'. I also think it is back to the same point again, parents here I think are interested parents and they probably would just think, 'well we're doing alright', most the kids here seem to be alright, there are odd occasions where a particular child might have you know, picked on one of ours, but even from having them both using the centre a lot for two years, everyone seems, they are all really good people and so you might not have a lot of visitors – you might do, I do not know.</p>	Perception of inadequate parenting or doing something wrong (17)	17	1
<p>P: You see I think, to a degree if families are bringing their kids here, I would have said that, this would suggest that they are interested in their kids wellbeing and that in general terms then, I would expect that any psychological needs to be.... If what I see them to be, to be fairly limited, because their kids have probably got a rounded upbringing. There is not, you know.... Everybody I look at, you think they are interested in their children. That is why they are here. So in that regard I would almost say there are probably other parts of the community where it is not so obvious and the kids are not so first hand to you where there probably is more need. Where kids are not getting their needs addressed. A more interventionist sort of....</p>	Perception of inadequate parenting or doing something wrong (17)	17	1



<p>I: OK so what other reasons do you think parents might not speak with a psychologist in the centre?</p> <p>P: They might be embarrassed.</p> <p>I: What do you think they might be embarrassed about?</p> <p>P: They might think the psychologist might think that they were a bad parent.</p>	Perception of inadequate parenting or doing something wrong (17)	17	4
<p>P: A family support worker.</p> <p>I: Ok. And you found that very useful.</p> <p>P: Yes. I thought she was a social worker which sort of made, my son burnt himself, and I took that blame onto myself. So speaking to my friend about it because he was, ....he is so hyperactive anyway, speaking to my friend about it and she kept saying, 'speak to this person, and I kept saying, 'no, I am not speaking to a social worker. I am not having them just, you know, have a go at me for what I have done wrong. But then I realised that she was a family support worker and she came up to me and explained what her roles were and said, you know, you are not to blame, and that was nice. It made me realise that I am not to blame all the time.</p>	Perception of inadequate parenting or doing something wrong (17)	17	6
<p>I: If anything, what changes could be made to encourage parents to come along?</p> <p>P: I suppose advertisement. I know it is probably really hard for the staff but trying to get the staff to speak to the parents more, telling them what is about and you know. Advertisement and leaflets really. Because they might not feel that, they might find that they got something wrong but they do not want to talk to somebody but if they had a leaflet or an advert saying what they do in the centre, then they might think, 'yes that is what I can do with doing', and then they can, you know, it might just help them speak to somebody.</p>	Perception of inadequate parenting or doing something wrong (17)	17	6
12 extracts from 7 parents.			
<p>I: OK. So it is about explaining what we do, being clear..</p> <p>P:... and then maybe again they could ask you or tell you what</p>	Interview process is helpful (18)	18	7

they would like or how they need them.			
<p>I: Is there anything that psychologists could do to make sure that parents feel comfortable in coming to speak with a psychologist if they wanted to?</p> <p>P: Well I suppose part of it is what you are doing now? I suppose maybe making people aware of what the services are. Giving people examples of things that you might have helped with where it is not, you know 'you are not nutters' (<i>referring to parents</i>)</p>	Interview process is helpful (18)	18	1
<p>I: What reasons do you think people might not speak with a psychologist in the centre?</p> <p>P: Probably embarrassed to speak to people, you know, might not want to discuss their issues.</p> <p>I: Is that embarrassed to speak to people in generally or particularly to a psychologist.</p> <p>P: To a psychologist as they might think, what do they want to know, sort of thing. It might be that they do not understand what a psychologist could do they might think it ... a lack of understanding might be a bit issue. As with the advice and topics of information they probably think, oh I didn't realise you know, help.</p> <p>I: Ok so that is something we could be done, you know, tell people what we can do</p> <p>P: Yes and help really offering...</p>	Interview process is helpful (18)	18	2
<p>I: OK, moving onto the last question now. It is a difficult one I know. What could a psychologist offer a parent that other staff or professionals do not already offer or might not do as well? What is it that is unique about what a psychologist does?</p> <p>P: I suppose they help people. It is like some people like myself, when I first realised that the member of staff was a family support worker and not a social worker, everybody sees social workers as this bad role, you know, sometimes they maybe, sometimes they might be, but they do not realise that they are also there to help you. They might not be there, you might not realise that they are</p>	Interview process is helpful (18)	18	6

<p>helping you at the time, but they are there to help you. Everybody just hears a word and thinks automatically a bad thing about them. Which I have done myself. You should not judge a book by its cover.</p> <p>I: So in some ways I guess the idea of a psychologist does not always make you feel, like you have done something wrong to see one, but actually it is just that we are there to help at the end of the day?</p> <p>P: The way I see a psychologist, the way I see the word psychologist is there has to be something wrong, 'mindly', but obviously, I feel otherwise now.</p>			
4 extracts from 4 parents			
<p>P: Group training and informal chats, probably make people feel a lot easier.</p> <p>I: More than one (<i>informal chats</i>) is that the more important?</p> <p>P: Yes, I probably, yes yes.</p> <p>I: Why that one? Is that because it makes them feel easier?</p> <p>P: Yes, knowing that they do not have to sit and, sometimes, you know, you have to sort of, get it off your chest in an informal chat in a group to discuss how you feel, that is how I felt. It makes it a lot easier, you know, some parents might agree.</p> <p>I: So I guess it is about having the option, that both would be nice, appointments and informal chats?</p>	Approachability and accessibility (11)	11	6
<p>I: So what do you think we could do to, what could be done to make sure that parents feel comfortable in speaking with a psychologist if they wanted to?</p> <p>P: Let them know when you are here and maybe like you are here have a room like this for yourself, if you have any problems, or that, come and see her.</p> <p>I: What about if people are perhaps shy or afraid to open up?</p> <p>P: I would maybe, you would have to go and speak to them go out on the floor and.....</p>	Approachability and accessibility (11)	11	3

<p>I: So what do you think could be done differently to make sure that parents feel comfortable speaking to psychologists?</p> <p>P: God! I do not know. I think make sure that the parents know exactly what a psychologist does and make sure the psychologist sit is in with the parents and children and not just sit in a little room on their own.</p>	Approachability and accessibility (11)	11	4
<p>I: Do you think some people might think that there is something wrong if they need to go and see a Psychologist?</p> <p>P: Yes</p> <p>I: So what do you think could be done to make sure some parents do feel comfortable in coming to speak with a psychologist?</p> <p>P: Perhaps like this, sitting in a little room, knowing that you can close the door if you want to. A lot of people like myself, sometimes if I need to speak about a problem, I start getting anxiety or I will get emotional. Knowing that you are not going to be made to feel silly in feeling like that it takes a lot, it does not take a lot for me to talk about my problems but I start getting really anxious and if I start getting anxious I feel like I want to cry and it is nice to know that you are not going to be made a fool of and like come on we have all felt like this and just to know that, you know everything is not all bad.</p> <p>I: Ok. So it is about making sure that we are supporting, we do not make people feel silly, and we give the option to sit in a room like this?</p>	Approachability and accessibility (11)	11	6
<p>I: What could a psychologist offer parents that other staff or professionals do not already offer or might not do as well?</p> <p>P: If you come to the centre it would be unique. To work where people could access you without going through everyone else first. It would be nice to have a direct thing to you so we would not have to be passed from pillar to post I suppose.</p>	Approachability and accessibility (11)	11	8
<p>I: Ok. So what do you think we could do to make sure parents would feel comfortable coming to speak to a psychologist?</p>	Approachability and accessibility (11)	11	10

<p>P: I think coming into the centre would be great and just mingling. I mean it is good to give out leaflets and everything and just give advice and say we are here for you. But then just asking general questions you know, is everything ok? Being friendly that is one of the things. Being approachable really... and I think by doing that, people will have you in the back of their mind.</p> <p>I: Ok so it about being friendly, mingling asking questions..</p> <p>P: and another thing I would say is transparent. Being very open and available.</p>			
<p>I: So what could we do, what changes could we make so that parents feel comfortable in coming to speak with us?</p> <p>P: Maybe if they know more what they do, what psychologists do. If they know somebody who has support or if they know where they can find psychologists, because if I need a psychologist, I wouldn't know what to do, if I should go to GP or library, I do not know who to ask.</p>	Approachability and accessibility (11)	11	11
7 extracts from 6 parents			
<p>I: What other good points are there about bringing up a family here?</p> <p>P: For me, it is quite, especially where I am, I have got really good neighbours, you know, well my neighbour is going to be my childminder so you know, it is, I have good, really good neighbours, good support in that area. Our family literally, well my husbands' family, my family do not live here, but my husbands' family are up the road so it is very, you know, you rely on if you need a hand and I have got friends that have all got kids so you can sort of bond in that respect. But yes, generally it is not a bad place.</p>	Friendly supportive community (20)	20	9
<p>I: OK. You have already mentioned that everyone knows everyone, I am just wondering what strengths parents have in this community?..... What are parents good at?</p> <p>P: (<i>in audible</i>).. good at helping each other.</p>	Friendly supportive community	20	4

<p>I: What strengths to parents have in the community?</p> <p>P: Always, listening, parents always listen.</p> <p>I: To each other, or..?</p> <p>P: Not always to each other but they listen to their children.</p> <p>I: Any other strengths that the parents have in this community?</p> <p>P: I have not been here all that long really.... But the parents I have met, it is sort of, there is a good community spirit between us, there is a nice group of us and if your children are bored you can always pop around your friends for a coffee and a chat and the children can play. It is nice to have people there that you have not known before and you can make a new life for you and the children.</p>	Friendly supportive community (20)	20	8
<p>I: What is it like living here?</p> <p>P: We find it really good here. We are quite happy, I go to a few baby groups with my youngest and it is just really good really friendly really, I just really enjoy coming here really.</p>	Friendly supportive community (20)	20	5
<p>I: What is it like bringing up your family here?</p> <p>P: Quiet, not many people stick their noses in. You are left to do your own thing?</p> <p>I: Ok, is that in a good way, or...</p> <p>P: Yes, in a good way. You have got your space and if you need your neighbours you can go and knock on the door and ask for help or, but it is nice and relaxed and the children are, there isn't any rowdy noise or.</p>	Friendly supportive community (20)	20	8
<p>I: So supporting each other. Is there any other support that you get or need?</p> <p>P: I get support from here, I can, you know, if I get a bad day I can go round and say to one of the staff, I have had enough today and it is only half past nine, you know, and just having that quick chat seems to calm me down and you know, that is lovely. And I have got the help from my parents, you know, sometimes when they are driving me to despair, I can phone my mum up and say, just talk to</p>	Friendly supportive community (20)	20	6

me mum, just calm me down, you know she will, you know, a half an hour phone call and I am quite chilled out and say right, come on then, lets' get to bed and you know, we are alright then.			
<p>I: So is it talk, particularly how difficult it might be bringing up a family that is helpful?</p> <p>P: Yes, I mean I saw a lady that used to work here and she, she sort of showed me what, there is good things about having a family and there is bad things, and there is good things about having a family, it is,.. It was really helpful for me, and that has made me aware that I can pass those skills onto other people. You know, that is why I decided to do a toddler group because I can help people with what I have experienced.</p>	Friendly supportive community (20)	20	6
<p>I: What are they good at, what is good about parents in this community?</p> <p>P: We all stick together, you know. We all help each other out if need be, we are, you know. If we are not quite happy with what somebody is doing, then we can say, you know, you should not be doing that. We all listening, you know, we are all there for each other. All friendly.</p>	Friendly supportive community (20)	20	6
<p>I: I'll start by asking you if you could just tell me a little bit about the community here, what is it like?</p> <p>P: Very good actually to be honest with you, really friendly, enjoy it.</p>	Friendly supportive community (20)	20	2
<p>I: OK we got to the point where you were saying, yes, your partners made a lot of new friends here. Anything else that is good about bringing up your family in this community?</p> <p>P: They are just friendly; everyone does seem friendly to be honest with you, yes, very good.</p>	Friendly supportive community (20)	20	2
<p>I: What strengths do parents have in this community, what are parents good at? What strengths do they have?</p> <p>P: Well it is that, looking after their kids they are friendly, you know, a lot of the people we come across, seem willing to help, you know.</p>	Friendly supportive community (20)	20	2

I: Help each other.			
P: Yes I run it. It is around the corner on XX road. Not much I can say really, it is nice, it is, .....Everybody knows everybody, so if you are in any trouble or, you now, you need a good chat, you know where to come. It is good being here, because it does not matter if you are having an off day or a good day, you know, you can share all your views and it is nice. It is very,.... my husband says it is very family orientated this community, so it is nice.	Friendly supportive community (20)	20	6
I: What are parents good at in this community? P: I do not know, all quite good at being there for each other really.	Friendly supportive community (20)	20	5
I: OK so if you can think of anymore difficulties let me know. You have talked about strengths also haven't you so fairly close. What other strengths, what strengths do parents have in the community? P: I think, I do not know, they can meet together and talk, pull together, in that respect. I: So they help each other out, would it be fair to say that? P: Yes absolutely. .... If anybody has got any problems they are always there. Yes. Definitely. You have kind of got different sections though of people, it sounds awful but you do sort of have that spectrum of people where you get those that do not want to know, do not care, smoke drugs, drinking, fighting, arguing and you have got the others that just want to keep away from it all, you know.	Friendly supportive community (20)	20	7
14 extracts from 7 parents			
I: What other support is there for parents in the community? P: None really. I have only ever got my support from here and the midwife and the nursery nurses and things - I have had to have them out a few times because of potty training and sleeping and they were helpful with things like that.	The Children's centre is the main community focus (21)	21	8
I: Can I start by asking you to tell me a little bit about the community. P: I think there are a fairly close community because of the centre	The Children's centre is the main community focus (21)	21	7



mainly. It has brought lots of people together, definitely it is got busier and busier, you know, sort of over the years.			
<p>I: So when you say, being here you mean at the centre?</p> <p>P: Yes.</p> <p>I: Do you see, because you said you get to know the community through running a... do you think the community really revolves or is centred around the centres?</p> <p>P: Yes because there is a lot of people in the community that range from teenagers to like thirty, forty with children. Everybody knows that the centre is here, everybody likes to get involved and...,</p>	The Children's centre is the main community focus (21)	21	6
<p>I: Can you tell me a little bit about the local community from your perspective?</p> <p>P: Well, I have only been here probably just over two years. In terms of accessing the community I have not really had a great to do with it particularly. I work all over the country. I have made some friends through the kids, but this is the main, if you look at community, this is probably the main focus – the Children's Centre. My wife spends more time here with two babies very close together and they have both been with the younger ones and beyond that we use the swimming and facilities and things like that. But that is mainly where we come together.</p>	The Children's centre is the main community focus (21)	21	1
<p>I: Ok so the community serves as a base for social....</p> <p>P: Yes, I mean we are not religious or anything like that and in reality there is stupid exercise things but again clubs and things like that. But as a family this is our main, where we come together with other people.</p>	The Children's centre is the main community focus (21)	21	1
<p>I: Ok we have talked about the community, what strengths do parents have in this community do you think? What are they good at?</p> <p>P: Well I do not know whether it is particularly overtly obvious that there is a lot going on for parents and families, I do not know. But,</p>	The Children's centre is the main community focus (21)	21	1

again, you know, this is our only real access point for things like that. We use the local council leisure centre, but we are not out there actively looking for families to go along with and interact with other parents we have got enough on our plate and a sufficient number of friends and that will do for the moment.			
<p>I: Ok we have talked about the community, what strengths do parents have in this community do you think? What are they good at?</p> <p>P: Well I do not know whether it is particularly overtly obvious that there is a lot going on for parents and families, I do not know. But, again, you know, this is our only real access point for things like that. We use the local council leisure centre, but we are not out there actively looking for families to go along with and interact with other parents we have got enough on our plate and a sufficient number of friends and that will do for the moment.</p>	The Children's centre is the main community focus (21)	21	1
7 extracts from 4 parents			
<p>I: So people are generally quite friendly, so it terms of bringing up your family is that...</p> <p>P: It is quite good. There is, there is actually quite a lot to do, like you got the water-park that is quite a good thing to do. <i>(omitted)</i>is quite a nice little place to bring your family up anyway because there is quite a lot of things you can do really like lots of groups you can go to, there is swimming, water-parks, just normal parks, fields.</p>	Plenty of services/facilities/activities in the community (22)	22	5
<p>I: Is there anything difficulty about the community?</p> <p>P: No not at all. It is quite unusual because as I say we had children and moved at the same time. So life changed so much when we moved here that really,... so are there any benefits? Life is just completely different to the way it was two years ago anyway and so it is just what it is. I do not think we sit there and say 'this is rubbish or that is rubbish' at all. We generally just have a positive outlook on everything and all the services that are available to us.</p>	Plenty of services/facilities/activities in the community (22)	22	1

<p>You know (<i>omitted</i>)hospital has been very good, we have got (<i>omitted</i>) that does different stuff but again we are very happy with that. If you look at the problems we have had. I do not know, it is just like getting appointments for things. But generally, yes, the support we have had for the kids, the minor issues that have had, has been excellent.</p>			
<p>I: So what is it like bringing up your family here?  P: It is OK, there is plenty to do for us- there are activities everyday, there is stuff to do for her.  I: What sorts of activities are there?  P: (<i>inaudible</i>) Monday she goes swimming, Tuesday she goes to the adventure zone, Wednesdays she has a day off, Thursdays she goes to Tree House, Fridays she goes round to her friends, Saturdays she has Dad's group, Sundays she goes out with me and (<i>omitted</i>) .</p>	Plenty of services/facilities/activities in the community (22)	22	3
<p>I: If we start then, if I just ask you to tell me a little bit about the local community, what is it like bringing up a family here?  P: Quite a nice community,... there are areas of poverty. It is generally a nice community, nice green spaces, good facilities.  I: Nice community, it is very nice, green spaces and lots of facilities (<i>Paraphrasing</i>). What sorts of facilities are there?</p>	Plenty of services/facilities/activities in the community	22	4
<p>I: What is the (<i>omitted</i>) Centre?  P: They do the..., health visitors, the paediatricians, speech therapists, Integrated Disability Services, and we have got the Children's centre obviously that is..</p>	Plenty of services/facilities/activities in the community	22	4
<p>I: If we start then, if I just ask you to tell me a little bit about the local community, what is it like bringing up a family here?  P: Quite a nice community,... there are areas of poverty. It is generally a nice community, nice green spaces, good facilities.  I: Nice community, it is very nice, green spaces and lots of facilities (<i>Paraphrasing</i>). What sorts of facilities are there?</p>	Plenty of services/facilities/activities in the community	22	4
<p>P: There seems to be everything in the community. Obviously we</p>	Plenty of services/facilities/activities in	22	2

have got places like this, the doctors are close to hand, schools and nurseries etc. are ten a penny. There is plenty of choice which is probably the best thing isn't it, because usually, there is some communities where they have one or two therefore you have not got much choice have you? Whereas here, there is everything really. And there is obviously plenty of parks and play things for the kids, you know, to keep them entertained and things. There are all literally local, in the town or just outside the town so they are, you know, only a few miles away sort of thing.	the community (22)		
<p>I: Do you think there are any needs in the community that are not being met?</p> <p>P: With regards to children's parks and things, especially around here. I think a lack of parks. I find, there is one around the corner which is great and has got baby swings. But the big park in town, they have got nothing for babies. Nothing for babies and toddlers it is literally for children over the age of five I would say. For children under five, that would be my only gripe.</p>	Plenty of services/facilities/activities in the community (22) Exception Lack of facilities for younger children.	22	9
<p>I: Do you think there are any needs in the community that are not being met?</p> <p>P: Yes, quite a few. It would be nice for more sessions in the community for children like arts and crafts, there is things like for children who are too young to go to the ones based..... It would be nice if they (<i>children around the ages two to five years</i>) could have something on a day that I come here (<i>two days a week and attends another group on another day</i>) but there is other days that they could, there is things that could be filled in. More courses available would be nice, for the parents to learn techniques for doing things with the children. That would be helpful – very helpful.</p>	Plenty of services/facilities/activities in the community (22) Exception need for more facilities for younger children.	22	8
<p>I: Can I start by asking you to tell me a little bit about the community.</p> <p>P: In which I live in general?</p> <p>I: Yes.</p>	Plenty of services/facilities/activities in the community (22) Exception	22	10

P: There have been quite a lot of services that have been scrapped from the area. We do not live in a very good area. We live in <i>(omitted)</i> and they have just actually closed down blockbusters now. But with regards to children, I do not think there are a lot of facilities for children. There is a community centre and they do have something on a Thursday afternoon – very similar to this, but I don't believe that it is that structured.			
P: I do not believe there is enough equipment for children, like my little boy is only four, well he is three and a half but, you know there is not enough stuff for him. It is kind of geared towards children, older children.	Plenty of services/facilities/activities in the community (22) Exception.	22	10
11 extracts from 8 parents with 4 exceptions from 3 parents.			
I: What other strengths do parents have in the community? P: In respect of people being supportive and stuff, people that you need are, especially for the Children's Centre at <i>(omitted)</i> that is, to me, that, I find that place is really good. I would recommend <i>(omitted)</i> to anyone, anytime I speak to anybody I always say, 'well it is a community place and well if you are struggling and stuff the facilities are there', And <i>(omitted)</i> <i>(omitted staff member)</i> is just brilliant, she is just one of those people that tries to build rapport with, and the facilities there are fantastic with parents and I find there is something very trusting about her as well.	Plenty of activities in the Children's centre (23)	23	9
I: Lets' talk about the Children's centre then. What is there for parents in this Children's centre that you are aware of? P: There is a 'quiet group' I: Quiet group? P: Yes for children with special needs and parents that find it difficult to ... and we have got family support workers.	Plenty of activities in the Children's centre	23	4
I: What support is there in the Children's Centre that you are aware of? P: There is family support care. I: Family support care?	Plenty of activities in the Children's centre (23)	23	6

<p>P: Workers sorry. There are courses that you can go on to help with depression, trying to cope with children. There are baby massage courses, there is an endless list. It is trying to remember it all. I have done first aid here. There are crèche facilities for when you are doing the courses a lot of people do not know that. I have just finished a course called the three R's course, reading, writing, getting ready for nursery, which is a fun course, but it also helps and it makes you understand what that child is going to have to go through. What else is there, there is <i>(omitted)</i> school, that is a nice time actually for the children to realise that mummy or daddy does not have to be around for a couple of hours but they are going to be. My son loved it.</p>			
<p>I: I will move onto the Children's Centre now. What support are you aware of in the centre?</p> <p>P: Blimey, I think with regards to children there is absolutely everything, any kind of support you need absolutely anything. They have leaflets about absolutely everything, everything out there and anything there isn't they will always find out for you. Or they will point you in the right direction saying you need to do this or go there, or phone this or you can, you know. So pretty good.</p> <p>I: Is there any, is there a process where you can say to the centre staff to say this might be something that we could do with?</p>	Plenty of activities in the Children's centre (23)	23	7
<p>I: Do you think there are any needs that parents have that are not being met by the centre?</p> <p>P: I think if the centre cannot meet their needs, they always point you in the right direction. Obviously they cannot do everything here. There are always health visitors available or speech therapist, speech and language therapists and stuff like that you know, they are sort of. It is just making sure that parents are aware when they are available or if they are needed immediately, if they could have a contact number.</p>	Plenty of activities in the Children's centre (23)	23	7
<p>P: Yes absolutely because they do courses here as well. So, they</p>	Plenty of activities in the Children's	23	7

are always full. I: So the courses are quite popular. P: Yes absolutely, they do the 'parenting puzzle' I have done that one, cooking Thursdays, loads, I cannot even, it is always packed. Yeah absolutely loads.	centre (23)		
6 extracts from 4 parents			
I: What facilities are you aware of in this Children's Centre? P: I think they are really helpful. I mean they did go out of their way to help with, like me and my wife were considering putting ( <i>omitted</i> ) into pre-school and they did go out of their way to help us in that area.	Children's centre very helpful/supportive and point you in the right direction (24)	24	10
I: What facilities are you aware of at the Children's Centre? P: Well, support-wise, you have got the health visitors, and even the centre staff there. They have always been glad to help and you know, if they cannot answer a question, they always point you in the direction. There are leaflets available; there are always flyers and stuff going around. So from that respect, you are always finding out new things and what is going on and if they do not know, they always find out for you so.....	Children's centre very helpful/supportive and point you in the right direction (24)	24	9
I: Do you think there are any needs that parents have that are not being met by the centre? P: I think if the centre cannot meet their needs, they always point you in the right direction. Obviously they cannot do everything here. There are always health visitors available or speech therapist, speech and language therapists and stuff like that you know, they are sort of. It is just making sure that parents are aware when they are available or if they are needed immediately, if they could have a contact number.	Children's centre very helpful/supportive and point you in the right direction (24)	24	7
I: I will move onto the Children's Centre now. What support are you aware of in the centre? P: Blimey, I think with regards to children there is absolutely everything, any kind of support you need absolutely anything. They	Children's centre very helpful/supportive and point you in the right direction (24)	24	7

have leaflets about absolutely everything, everything out there and anything there isn't they will always find out for you. Or they will point you in the right direction saying you need to do this or go there, or phone this or you can, you know. So pretty good.			
I: OK. What is it like brining up a family here in this community? P: I would say, since the centre has been open, it is been great because if you have any problems or need any help, they are always here to guide you or point you in the right direction.	Children's centre very helpful/supportive and point you in the right direction (24)	24	7
I: What support is there for parents in this community to address any needs that there are? P: Loads, like if you need help with like children's behaviour there is, I mean I have a problem with my <i>(omitted)</i> and I have had help in the past with their behaviour <i>(Omitted – staff member's name)</i> .	Children's centre very helpful/supportive and point you in the right direction (24)	24	5
I: What is good about it, the supporting community, or is there anything else as well? P: Yes I mean, I suppose because I suffered from post-natal depression and I have <i>(Omitted a child)</i> that I get a lot of help with... They have helped me out no end. Yes.	Children's centre very helpful/supportive and point you in the right direction (24)  Parental mental health	24	6
I: OK. Thinking about the community in general, what support is there for parents in the community to address any needs they may have? P: I would say, there is here, and the toddler groups and you know, there is always somebody to talk to, you know, somebody knows somebody that they can talk to.	Children's centre very helpful/supportive and point you in the right direction (24)	24	6
I: So supporting each other. Is there any other support that you get or need? P: I get support from here, I can, you know, if I get a bad day I can go round and say to one of the staff, I have had enough today and it is only half past nine, you know, and just having that quick chat seems to calm me down and you know, that is lovely. And I have got the help from my parents, you know, sometimes when they are driving me to despair, I can phone my mum up and say, just talk to	Children's centre very helpful/supportive and point you in the right direction (24)	24	6



me mum, just calm me down, you know she will, you know, a half an hour phone call and I am quite chilled out and say right, come on then, lets' get to bed and you know, we are alright then.			
I: What other support is there for parents in the community? P: None really. I have only ever got my support from here and the midwife and the nursery nurses and things - I have had to have them out a few times because of potty training and sleeping and they were helpful with things like that.	Children's centre very helpful/supportive and point you in the right direction (24)	24	8
I: What support is there for parents in the Children's Centre for parents? Is there support that you could access here? P: Yes, members of staff, if you have got a problem will take you aside and you can sit in here and you can say your problems and they do courses here and they have got the groups like this one and it is a quite, ....my children love it. I did not know anyone before we moved here and one of the girls from here came to my house and walked me down to show me where I was going and we have came ever since and it is been ..... and we have got lots of friends and we are happy with everything that is going on – it is better than being stuck at home with no help at all.	Children's centre very helpful/supportive and point you in the right direction (24)	24	8
P: Other parents and families use it well as well. At least they have always got someone that if they need to talk to they will be taken aside and they can talk to them and feel a lot better afterwards.	Children's centre very helpful/supportive and point you in the right direction (24)	24	8
12 extracts from 6 parents			
I: Ok, so long as you have got friends it is good. P: Yes. Sometimes I'm a little bit upset that there is a lot of, I do not know how they call it in English, some person who make, for example, destroy something, some children go outside without any attention and they throw rubbish and destroy something. I find, some places, they have it.	Difficulties in the community (26)	26	11
I: You mentioned there had been some trouble.... P: Yes, I read something in the paper about what is gone on, you	Difficulties in the community (26)	26	9

know, and it is things like that.... is it getting a little bit, you know, unsafe to bring your children up. But I suppose it is like that everywhere, you know. You think there is going to be a better place but is there? You know it is one of those things you think is there a better place?			
P: Yes Blockbusters. I think that is the main one. I do not think the parks are taken care of as well, the children's parks. I mean every time I took my little boy to the park, there is, I mean there is graffiti, there are cans of beer and everything. It is not very well looked after.	Difficulties in the community (26)	26	10
I: What difficulties.... Are there difficulties in the community do you think? P: None. None, where my community is really, nothing really. There is, a bit broader than my bit, that would be in a hole, there is been two murders in two weeks. So yes.	Difficulties in the community (26)	26	8
I: So they help each other out, would it be fair to say that? P: Yes absolutely. .... If anybody has got any problems they are always there. Yes. Definitely. You have kind of got different sections though of people, it sounds awful but you do sort of have that spectrum of people where you get those that do not want to know, do not care, smoke drugs, drinking, fighting, arguing and you have got the others that just want to keep away from it all, you know.	Difficulties in the community (26)	26	7
I: So, quite close, good with the centres, there are some problems,.. P: There are problems yes. I: What are the problems would you say? P: I think, that I know of I mean I do not know, because where I am, it is sort of the quiet end so I am quite lucky generally. We do have people where they have been drinking coming past. There have been fights and that sort of thing at night, yes, arguments in the street, that sort of thing. I do not really know because I do not, I	Difficulties in the community (26)	26	7

<p>try and keep myself to myself in that respect.</p> <p>I: OK so perhaps sometimes fights and arguments when people have been drinking. Any other difficulties, any other needs in the community?</p> <p>P: There probably is but my brain is .. at the moment sorry. I think money is a problem going back to work, that sort of thing. Getting jobs. I think there are a lot of people not working near where I live. But then again, I suppose it is difficult at the minute isn't it for everybody.</p>			
<p>P: Well, we are not really happy. We do not want our little boy to be exposed to all that is going on in the area. I mean, like in our <i>(omitted)</i> for example, there are people dealing you know and we are disgusted by it. We have reported it anonymously</p>	Difficulties in the community (26)	26	10
<p>I: If we start then, if I just ask you to tell me a little bit about the local community, what is it like bringing up a family here?</p> <p>P: Quite a nice community,... there are areas of poverty. It is generally a nice community, nice green spaces, good facilities.</p> <p>I: Nice community, it is very nice, green spaces and lots of facilities <i>(Paraphrasing)</i>. What sorts of facilities are there?</p>	Difficulties in the community	26	4
<p>P: Some of the older children are a bit antisocial they can be <i>(inaudible)</i>. In our area, there is a gang.</p> <p>I: Ok, so there is a gang in the area. Do they make life difficult?</p> <p>P: They do for some residences.</p>	Difficulties in the community	26	4
<p>I: If we start then, if I just ask you to tell me a little bit about the local community, what is it like bringing up a family here?</p> <p>P: Quite a nice community,... there are areas of poverty. It is generally a nice community, nice green spaces, good facilities.</p> <p>I: Nice community, it is very nice, green spaces and lots of facilities <i>(Paraphrasing)</i>. What sorts of facilities are there?</p>	Difficulties in the community	26	4
10 extracts from 6 parents			
<p>P: Yes exactly, especially the ones we sort of met like this. My partner has met some friends through here like <i>(omitted another</i></p>	Children's centre provides parents with the opportunity to socialise and make	25	2

<i>father</i> ) who is obviously a father and that sort of thing.	friends (25)		
<p>I: What support is there for parents in the Children's Centre for parents? Is there support that you could access here?</p> <p>P: Yes, members of staff, if you have got a problem will take you aside and you can sit in here and you can say your problems and they do courses here and they have got the groups like this one and it is a quite, ....my children love it. I did not know anyone before we moved here and one of the girls from here came to my house and walked me down to show me where I was going and we have come ever since and it is been ..... and we have got lots of friends and we are happy with everything that is going on – it is better than being stuck at home with no help at all.</p>	Children's centre provides parents with the opportunity to socialise and make friends (25)	25	8
<p>I: I will start by asking you a bit about the community. What is it like bringing up a family here?</p> <p>P: Generally it is OK. It is nice that you have got Children's Centres locally like this, like you can pop down for an hour and speak with others.</p>	Children's centre provides parents with the opportunity to socialise and make friends (25)	25	9
<p>I: What sort of changes. I am going to push you a little bit here. If people were to come and try it out, what sort of positive benefit do you think they would get by coming here?</p> <p>P: By coming here. Well if they are single parents, they would build friendships with other parents which I think it is important and their children will also be able to mingle with other children and then I suppose outside of the centre as well, they would build friendships outside of the centre.</p>	Children's centre provides parents with the opportunity to socialise and make friends (25)	25	10
<p>I: So using the community centres to.... so it was another community centre, library and playground.</p> <p>P: I was a little bit upset that nearly all my friends were from Poland. I think that language is really important here so I liked to improve. That is why I come here, to have opportunity to speak English.</p>	Children's centre provides parents with the opportunity to socialise and make friends (25)	25	11
P: Yes exactly, especially the ones we sort of met like this. My	Children's centre provides parents with	25	2

partner has met some friends through here like ( <i>omitted</i> ) who is obviously a father and that sort of thing.	the opportunity to socialise and make friends (25)		
<p>I: What support is there for parents in the Children's Centre for parents? Is there support that you could access here?</p> <p>P: Yes, members of staff, if you have got a problem will take you aside and you can sit in here and you can say your problems and they do courses here and they have got the groups like this one and it is a quite, ....my children love it. I did not know anyone before we moved here and one of the girls from here came to my house and walked me down to show me where I was going and we have come ever since and it is been ..... and we have got lots of friends and we are happy with everything that is going on – it is better than being stuck at home with no help at all.</p>	Children's centre provides parents with the opportunity to socialise and make friends (25)	25	8
7 extracts from 5 parents			

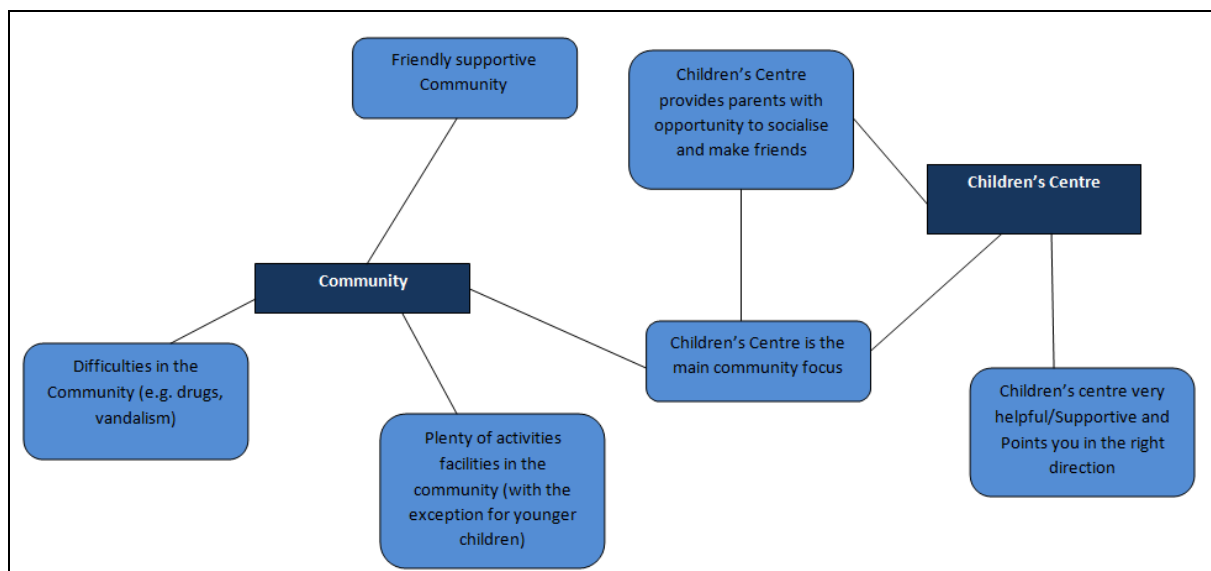
## **Appendix XIII – Public domain briefing (findings)**

## What do parents want from direct access to Educational Psychologists in community centres such as Sure Start Children's Centres?

This report outlines the preliminary findings of my research, designed to answer the question above. The findings are based on data from semi-structured interviews with eleven parents in a West Midlands Children's Centre (CC) during the summer of 2010. Interview questions were designed to find out about the resources and needs in the community as well as what parents would like from the opportunity to meet directly with an Educational Psychologist (EP) in the CC. The parents' responses were grouped into themes (main themes and subordinate themes) that are discussed below in relation to relevance to the community and CC and also to the role of the EP.

Three sort card activities were conducted within the interviews to find out parents' priorities and preferences regarding what an EP might provide. These activities asked parents to sort cards according to whether they felt that a particular activity, topic, or way of working would be 'helpful' or 'not helpful' within the CC and to choose one or two cards that show which would be 'most helpful'. The data relating to the sort card activities are presented in graphs below where relevant to thematic data.

### Key findings relating to the community and CC:



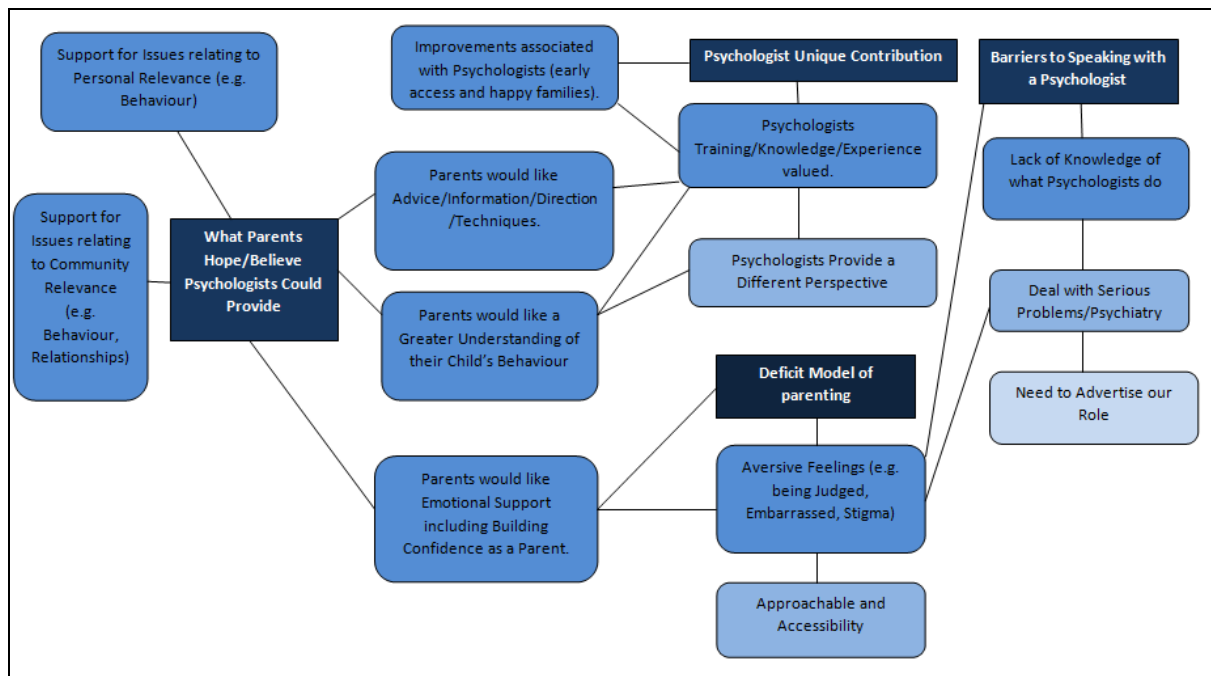
**Figure 1. Conceptual Map of the themes relating to the community and CC.**

Figure 1 shows that parents reported that the community is generally one in which people are supportive, friendly and will help each other out if there is a need (e.g. with child care). The parents also reported that the CC is the main focus of the community and provides parents the opportunity to socialise and make new friends. The CC staff are also very supportive and helpful and point parents 'in the right direction' of support if they are not able to cater for parents' needs directly.

Parents reported that there are a number of facilities in the community but there appeared to be a lack of parks and facilities for younger children (under five). Some parents reported

difficulties and/or disadvantages in the community including drug abuse, vandalism, antisocial behaviour, lack of employment and teenage pregnancy. These difficulties are represented within the combined theme ‘Difficulties in the community’ and not represented as individual themes as the difficulties mentioned were varied and lacked homogeneity across the data corpus.

### Key findings relevant to EP work:



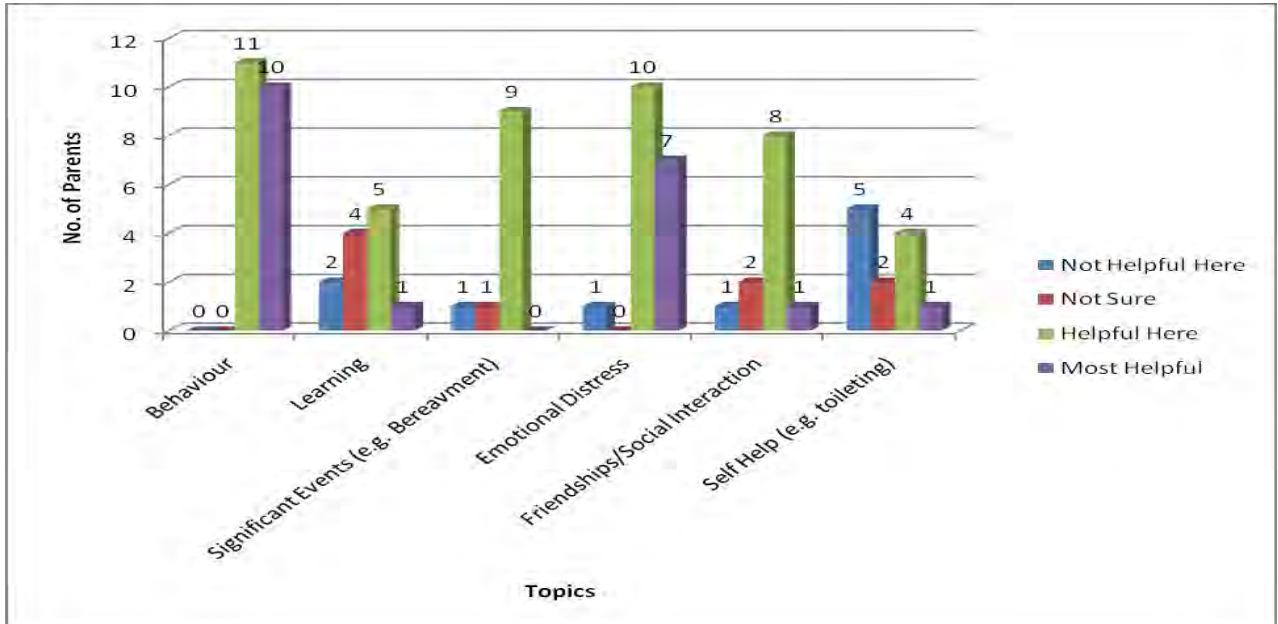
**Figure 2. Conceptual Map of the themes relevant to EP work.**

Figure 2 shows that there are four main themes relating to EP. Each main theme is summarised below:

#### 1. What parents hope/believe psychologists could provide to them.

Some parents reported needs in the community, perceived by parents, as relevant to EP work. These included difficulties with children’s behaviour, family relationships (e.g. step families and partners) and a need to focus on early learning. Parents also reported difficulties personal to their experience as a parent, that they felt they would like to speak with an EP about. This included parents wanting to speak with a psychologist about their child’s behaviour, and social interaction.

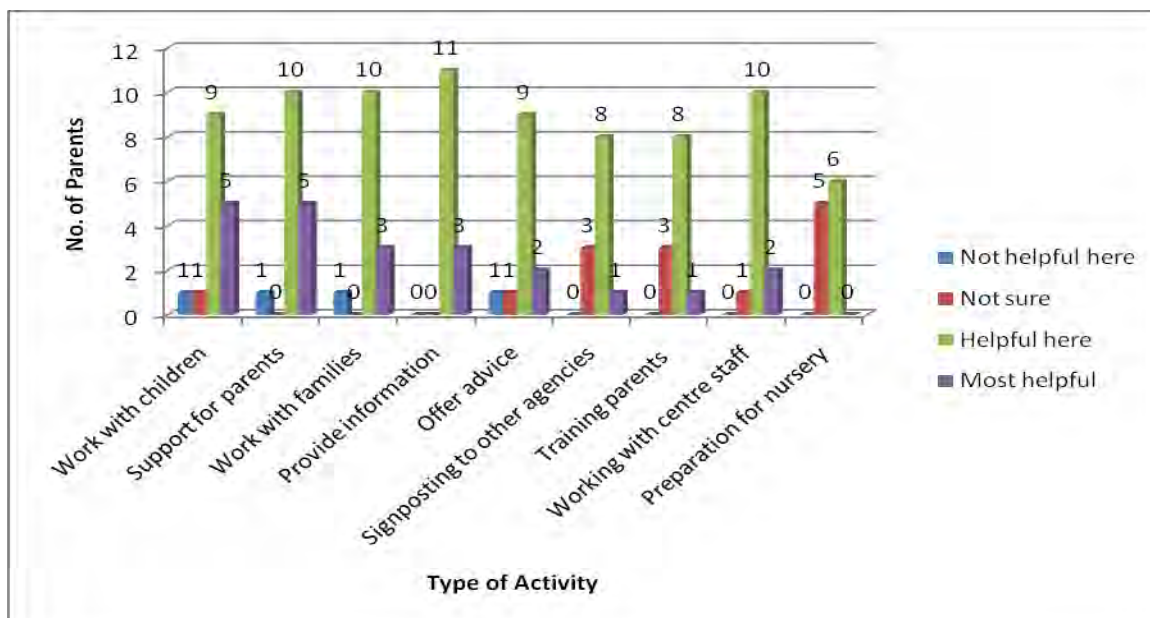




**Figure 3. The topics that parents reported would be helpful for an EP to cover in the CC.**

Figure 3 above shows that parents felt that it would be helpful for EPs to offer support on a range of topics. However, most parents felt that EP support would be most helpful for topics relating to Behaviour and Emotional Distress (10 of the parents were asked to select the 2 most helpful topics).

Parents also reported that they would like emotional support from an EP. This included support relating to building confidence in parenting skills as well as talking through the challenges of parenting. Parents would also like advice/information/strategies and direction from EPs and would like EPs to provide a ‘deeper’ understanding of their child. This indicates that parents recognise the external influences on a child’s behaviour (e.g. parenting) that is in line with a systemic perspective rather than a ‘within child’ perspective. This is supported by the data that suggest that parents hold a ‘deficit model’ relating to parenting skills (described below).



**Figure 4. The activities that parents reported would be helpful for an EP to undertake in the CC.**

Figure 4 indicates that parents felt that EPs could offer a range of helpful activities in the CC. However, nearly half of the parents reported that the most helpful activities that EPs could undertake would be working with children and supporting parents.

## 2. Psychologists' Unique Contribution

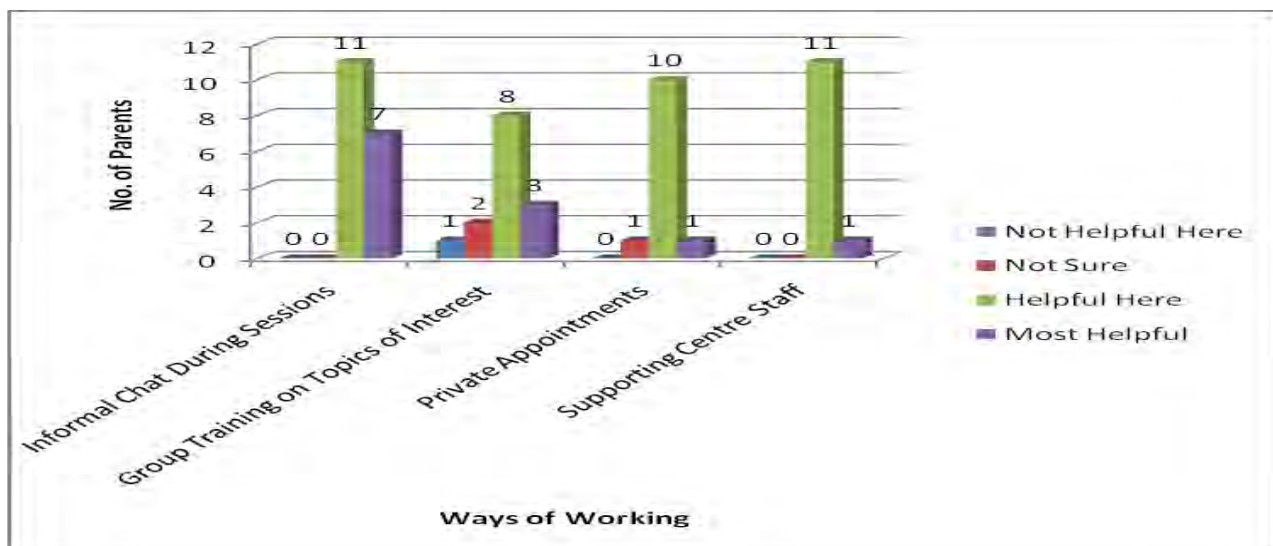
Parents reported that they felt that an EP could offer a unique contribution to them because of their training, knowledge and experience and the different perspective that they could bring. This means that parents would be confident that the advice that they were getting was 'professional' and also that they could access this 'specialised knowledge' directly without being passed 'from pillar to post'. Thus, the opportunity to meet directly with a psychologist in the CC might be construed as early intervention (e.g. access to the right advice and bypassing a trial and error approach).

## 3. Barriers to Speaking with a Psychologist

Parents reported that a lack of knowledge regarding what an EP (or a psychologist in general) does and that this is a barrier to parents accessing the support offered. This includes that parents perceive a psychologist as someone who works with 'serious problems' such as those that are relevant to psychiatrists and thus, parents might feel that there is a level of 'stigma' associated with requiring support from an EP. There is therefore, a need for EPs to 'advertise' their role and to ensure that parents are aware of the 'subtle' approach that they can offer. It appeared that the process of interviewing parents and asking them what they would like in itself contributed to the erosion of the sense of stigma and created more of a sense that to see an EP was something many parents might do as an integral part of developing their own confidence and skills, in the same way that the involvement of a health visitor is normal during the weeks following the birth of their children: as interviews progressed, many parents noted how helpful access to an EP would be in their own case, despite having earlier spoken in terms of EP contact being reserved for serious concerns.

#### 4. Deficit Model of Parenting

Parents' responses indicated that they hold a deficit model of parenting. That is, they perceived difficulties that a child experiences as being 'down to' parenting skills. Parents therefore reported that aversive feelings such as shame, embarrassment and fear of being judged, formed a barrier to accessing the support offered by EPs. Therefore, as well as the need for EPs to advertise their role (as distinct from 'psychiatry' and the subtle approach that EPs can offer) there is a need for psychologist to be approachable and accessible. Indeed parents' responses indicate that they would like EPs to be approachable and accessible (e.g. being friendly and visible) and not to sit away in an isolated room.



**Figure 5. The ways of working that parents reported would be helpful for an EP to offer in the CC.**

Figure 5 indicates that parents felt that EPs could usefully work in a number of ways. Furthermore, a majority of parents felt (one parent selected two most helpful ways of working) that EPs could most usefully offer the opportunity to have an informal chat during existing sessions (e.g. 'stay and play' sessions).

#### *Summary of Key Findings*

Key findings regarding what parents want from the opportunity to meet with EPs in the CC include that parents would like advice regarding their children's behaviour and social interaction, and emotional support regarding parenting. Parents appeared to be aware of the important role played by their own skills as parents and felt that an opportunity to meet with an EP might help build confidence in their skills. EPs therefore need to be sensitive to parents' perceptions of their skills and to be approachable and accessible. Parents would find it most helpful to be able to speak informally with an EP during existing sessions.

Parents felt that EPs could offer a unique contribution because of their training, and this means that parents could be confident that the advice was professional. Being able to access this advice directly is associated with early intervention as it meant that parents would not be passed 'from pillar to post'.