

Supporting young Fathers:

The promise, potential and perils of statutory service provision in a Northern Local Authority

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This article provides a case study of the challenges faced by one local authority in supporting young fathers, in a context of changing models of service provision, resource constraints and professional training needs. Developments in service provision are tracked over a decade, starting with a mentoring service set up under New Labour's ten year teenage pregnancy strategy, and considering how this has been refashioned under new models of service provision. The article was developed in close consultation with local authority service providers and draws on both professional accounts and the perspectives of young fathers as clients of the service. Overall, the article contributes to debates around the relative strengths of mainstream and specialist support for young fathers, and suggests the value of specialist support within mainstream provision.

Keywords: Young Fathers. Mentoring Services. Local Authority provision.

Introduction

This article traces the development of a specialist service supporting teenage fathers in a local authority area that we have called Grey Bridge in the North of England. Grey Bridge has led the way in developing a mentoring service for the support of school age dads that is delivered from within the local authority. Over time, the key practitioner for this service has become a local champion for young fathers. Through his developing role and his own practitioner-led research he has influenced the wider delivery of services in the authority, based on the principles of father-inclusive practice.

While a range of service provision exists to support the sometimes complex needs of teenage fathers, these services are often fragmented across the statutory and voluntary sectors, with many projects small scale and time limited. Funding and staffing constraints can present difficulties in developing and sustaining services over time, while also limiting their accessibility to service users who may not be aware of their existence. For this article a case study approach has been adopted in order to draw out in some detail the unfolding of a specialist service and how it has been modified over time as part of a wider re-orientation to generic, father friendly services across the locality.

Research for this article was conducted under the three year ESRC funded Following Young Fathers project (www.followingyoungfathers.leeds.ac.uk). This explored the lived experiences and support needs of a sample of 35 young fathers, as part of which, semi structured interviews and focus groups were carried out with service managers, practitioners and policy makers. Seventeen of the young fathers in the study had been clients of the specialist service reported on here. The project used qualitative longitudinal methods and a participatory approach, working closely with the young fathers and practitioners over time to co-produce knowledge and evidence (see Neale et al., 2015 for further details). In what follows we outline the specialist mentoring service and present client feedback on its effectiveness. We go on to trace changes in service ethos and delivery in the local authority. We begin with a local evaluation of professional support for young fathers, trace the implementation of a new integrated family support service, and conclude by considering the implications of these changes for specialist provision for young fathers.

The Learning Mentor Service.

In certain ways, the provision and delivery of services for fathers, and particularly young fathers, in the Grey Bridge locality is more developed than in other local authorities in England. Certainly, the provision of targeted support to the youngest fathers in the city via a Specialist Learning Mentor was an innovative and pioneering development. The mentoring service was developed as part of the work of the local Teenage Pregnancy and Parenthood Team (TPPT), set up in 2001 in response to New Labour's ten year Teenage Pregnancy Strategy (SEU, 1999). Initially the team consisted of several mentors that were area based within the locality. Working through the education service, the mentors provided holistic support for school age parents, and delivered educational 'prevention' sessions to reduce conception rates among teenagers. For the first two years, the team worked primarily with young women but, in 2003, after noting that young fathers were also often present at appointments, a similar programme was developed specifically for young men. A dedicated male worker for teenage dads was appointed in 2004, with funding from three sources: the local authority education service, Sure Start and Connexions. The initial remit for the post holder was to work with young dads up to the age of 19. However it soon became apparent that such young men presented too great a case load across the locality for one worker to manage, and, in the absence of resources to recruit another mentor, the age range was narrowed to young fathers of school age. The holistic support offered to young fathers was for a minimum of 6 months, to continue until they left school or had been referred on for support via an appropriate alternative agency.

The service aimed to reach young fathers early in their transition to parenthood by accessing them at the ante-natal stage. Dads-to-be were referred by schools, the local teenage pregnancy midwives and also by other mentors working in the Teenage Pregnancy and Parenthood Team, who would pass on the details of young dads acquired from the mothers. The post holder worked on the same principles

as the existing mentors for the young mothers. The remit included encouraging young fathers to remain in education, supporting them through the transition to parenthood and adult life, and helping with a range of practical issues as they arose. A central part of the Specialist Learning Mentor's work was to establish an after school group, to be delivered by two qualified female nursery nurses in the team. This provided peer support for the young fathers in the locality, as well as enabling the development of their childcare skills. The work of the mentor was therefore broad and multi-faceted, incorporating sexual health work, parenting skills, as well as the other wider issues of concern that had been highlighted in the national teenage pregnancy strategy around education, training and employment (SEU, 1999).

The young fathers who were referred to the mentor placed a very high value on this support:

That support was the best support you can have really. ... I didn't have a clue what I was doing but, like, I was skiving school ... but he got me referred onto college, and that got me back into education. ... He always took us out to places with our son... and socialising with other young fathers, you know, in the same shoes as us. It's literally he is the one who taught me everything I know about where to go, what ... help to get. You know what I mean. What questions to ask and everything. He's always the one who actually helped me out. (Darren)

He's been like a really good mate to me. ... If I want support, if I want to talk, I can go to him, I can text him... he'll come visit me in school and say, 'ah you've been really good, you're doing well, carry on'. (Senwe)

I get on with him, cos he's a guy, and a dad as well ain't he.... The support I got from college was to help me financially But he's helped me a lot emotionally. ... 'cos I didn't sort of have emotional sort of boundaries, that - I couldn't care less about anything. So to get things off my chest with him ... like someone I could talk to as a friend, but wasn't a friend cos he was a professional. ...it helped me sort of stabilise myself (Adam).

I did a fathers group that he ran... like how to bath a baby. And one time [laughs] they brought in these pretend pregnancy things – in the belly it had loads of weights - so you'd know how it felt to be pregnant. ... [then] I was doing peer mentoring... like you'd help other teenage fathers and stuff. ... it felt like I'm needed to do summat, like I'm wanted, if you know what I mean. ... I don't know where I'd be now if it weren't for him. ... He was always supporting me, like when I was going through court. ... I know he's a professional in what he does. But he's down to earth and you can talk to him and he's like one of your mates, you can tell him owt. He does teach you. And he makes you think about things... in the right way. And makes you see sense. And that's helped me a lot in life 'cause I've been in a lot of dark places. . And, you know, I think everyone needs a guy like him around. ... if you can see yourself going down hill, you want to stop it. And he makes you see that (Callum).

He's not one of them people that's just doing it for a job. He's actually doing it to make a [difference] (Tarrell).

These reflections show the significant value of sustained, one-to-one, multi-faceted support, based on fostering a warm and friendly relationship between practitioner and client. The flexibility and impartiality of the support, and the trust engendered in the young men over time through a one-to-one relationship were of paramount importance (Neale and Lau Clayton, 2011). Indeed, as reported in wider research on professional engagement with parents (Katz et al., 2007), the young men in our

study commonly reflected on the importance of their relationship with the mentor and the enduring nature of his support in making a difference to their lives. In this case it was not unusual for the mentor to maintain informal links with young fathers beyond the time when they were deemed too old to be part of his case load:

And it's now ...past the point where I have to ... be under his care as such. ... Like the other day ... through ... what's going on at moment, I can ring him up and I can vent at him. I can ... tell him exactly how I'm feeling and, you know, he's more, you know, it is more of a caring relationship as opposed to 'this is a job for me, you are a kid' (Dominic)

The learning mentor was one of a number of 'local champions' for young fathers, both male and female, whom we encountered in our research. What distinguished them was their commitment to going the extra mile to anticipate and meet the needs of their clients.

Evaluating Professional Support

In 2009, the specialist knowledge developed by the learning mentor provided the impetus for an evaluation of generic family support for young fathers in the locality. Previous research (Ghate et al., 2000) had found that fathers were generally not well served by family support services and had highlighted the need to try new approaches to father engagement. The local evaluation (known as the mystery shopper exercise) investigated how young fathers were being responded to by staff in children's centre settings. Young fathers were recruited from the case load of the Specialist Learning Mentor and asked to visit children's centres on their own (without their children) to make an enquiry for information. The young men encountered a range of responses from staff at the centres, including not being recognised as potential clients. Of most concern were a number of incidents in which the young fathers were treated with suspicion. While all children's centres have a core remit to support whole families and actively engage with fathers (DfE, 2013), in practice they are often seen as places for mothers and young children. Fathers (and especially young fathers) are not often visible within the centres, given the standard opening hours, and young men are usually absent from publicity materials promoting the services. As Osborn (2015, this issue) indicates, negative responses from professional workers are not likely to be isolated incidents but appear to be relatively common and widespread across the UK. The findings from this exercise were presented to the head of the newly integrated family support services in the locality, with the aim of feeding the findings into the development of professional training in the locality.

Developing universal 'father inclusive' practice.

In 2013, building on existing services provided by the TPPT and other family support services in the locality, a new strategic plan was devised for the future development of services for children, young

people and families. The new plan was based on the findings of a universal services review in the locality, that was conducted in the early years of the coalition government (2010-2012) and it drew on a raft of national policies (DCSF and DoH, 2009; DfE, 2013). The new integrated model of service provision is broadly framed around early intervention, inter and multi agency working across health and children's services, and a model of progressive universalism (Field, 2010; Allen, 2011; Tickell, 2011). The new model aims to be responsive to individual and local needs by providing the right support for families at the right time: in particular providing tailored support for the most vulnerable children, young people and families in the locality; doing so early enough to create a seamless pathway into support for families with pre-school children; and thereby achieving better outcomes for children in a 'child friendly' locality. The ethos is one of fostering empowering relationships between practitioners and the families they support, building on the existing strengths of families and fostering positive solutions based on an optimistic orientation to the future. In this, the new service builds on key elements of the effective support provided by the specialist learning mentors.

A new management and collaboration structure has been put in place to facilitate the developments outlined above. Key changes of pertinence to young fathers have been the realignment of health visiting boundaries to match those of children's centre cluster areas; increased levels of joint working and improved communications – e.g. joint documentation and information sharing - across health and child care agencies; the use of the Pregnancy, Birth and Beyond programme of support (DoH, 2011) and other bespoke support packages; and the development of both universal and targeted pathways to provide tailored support where needed. As a result, family support in the locality has been restructured around service levels that are stepped according to user need, with the local authority investing in targeted services to work alongside universal, specialist and complex services.

In terms of parenting support generally, and fathering support more specifically, the new service draws on the provisions contained in a national policy directive, produced under New Labour, known as the Healthy Child Programme (DoH, 2009). This gives particular prominence to supporting transitions to parenthood, enabling mothers and fathers to provide sensitive and attuned parenting, and supporting strong and stable couple and family relationships. Of particular relevance to young fathers who may not be resident with their children, the policy seeks to ensure that “contact with the family routinely involves and supports fathers, including non-resident fathers.” (DoH, 2009: 10). The programme also places emphasis on the role services can play in supporting men as fathers and how this could be improved, noting that:

The contribution that fathers make to their children's development, health and wellbeing is important, but services do not do enough to recognise or support them. Research shows that a father's behaviour, beliefs and aspirations can profoundly influence the health and wellbeing of both mother and child in positive and negative ways. Maternity and child health services are used to working mainly with mothers, and this has an impact on their ability to engage

with fathers. Fathers should be routinely invited to participate in child health reviews, and should have their needs assessed (DoH, 2009: 11).

In inculcating a father-inclusive ethos, the local authority used the findings of the evaluation exercise, described above, to develop and commission specialist training for practitioners on father-inclusive practice. This has been rolled out in the locality across the family support services – the health team, integrated health visiting and children’s centre team, domestic violence team and Teenage Pregnancy and Parenthood team. The specialist learning mentor, as a local champion for young fathers, has played a key role in these developments, bringing his specialist knowledge to bear on the development of wider father-inclusive practice across the locality. This indicates the importance of individual practitioners in pioneering new approaches to service development and delivery.

Implications for specialist support for young fathers

The changes outlined above in the structure of Grey Bridge’s family support services, coupled with capacity and funding constraints, have had a significant impact on the specialist support initially provided by the Teenage Pregnancy and Parenthood Team. There would seem to be a trade off between the provision of in-depth support provided by specialist staff, and the provision of generic, father-inclusive practice across all staff in the authority. Particularly in times of scarce resources, statutory provision needs to steer a somewhat difficult path between these two forms of support.

In this case, generic provision has been prioritised over the sustaining of specialist support:

“Because we’ve changed our processes as well, where we’re saying that we’re only going to work with targeted [clients] rather than work with them all...because our team initially was... eight people. It’s now cut down to three or four people working across the city.” Practitioner, Teenage Pregnancy and Parenthood Team

In March 2014, as part of the streamlining of the TPPT team, the specialist learning mentor for young fathers was formally appointed to an enhanced role to develop generic, father-inclusive practices across the authority, particularly through Children’s Centres. A lack of funds to replace his post, however, means that support for young fathers is no longer provided by a dedicated fathers’ practitioner. Instead, these responsibilities have been absorbed into the work of the team of learning mentors working in schools, and their more generalist colleagues across the other teams. However, resource constraints and the larger and more varied case loads held by these practitioners militate against the provision of the in-depth, sustained support that the specialist learning mentor was able to provide. Furthermore, the provision targeting all school age fathers (itself a dilution of the original plan to support all young fathers up to the age of 19) has given way to support that is selectively targeted on those identified as the most vulnerable young fathers in the locality. In practice, this tightening of eligibility to access professional support means that those young fathers who have some support from family members are now unlikely to benefit from one-to-one mentoring, and will be

expected to rely, instead, on their informal support networks – albeit such support may be variable in quality and inconsistently provided (Neale and Lau Clayton 2014).

Further issues arise in determining which young fathers are eligible for specialist support. The new system relies on a robust system of referrals, from generalist to specialist staff, to ensure that all those who would benefit from specialist support are able to access it. However, the current referral system is in need of improvement:

... But what we're not good at, as a service is, is getting quality referrals. So sometimes we may have a universal that could be targeted. But because we're not [a universal service], we don't chase them. (Practitioner, Teenage Pregnancy and Parenthood Team)

There are further ramifications of this general change in focus. The initial drive to develop services that differentiated between the needs of mothers and fathers and that recognised and responded to the unique circumstances of young fathers, has been replaced with a drive to embed in service delivery a more gender neutral interpretation of parenting, so that services become aimed at *parents and their children* rather than *mothers and their children*. However, in the current climate, fathers routinely interpret the word 'parents' in promotional literature to mean 'mothers' and do not perceive that they are eligible for the available support (Katz et al., 2007; Bayley et al., 2009). It remains to be seen, therefore, whether a sufficiently strong culture of hands-on fathering has developed to capitalise on this change in focus in the locality. It seems likely, in the current climate, that concerted efforts to actively draw fathers in and to make them feel welcome in family services settings will be needed for some time to come. These challenges are likely to be all the greater for practitioners engaged with young fathers, given the general ambivalence that persists about their role and status in relation to their children.

Concluding comments

Our review of developments in the provision of support for young fathers in this local authority reveals the challenges faced by statutory services in balancing specialist and generic support for young parents, in particular, in creating a robust interface between the two through referrals and professional training. The challenges of acknowledging and responding to the unique needs of young fathers are all the greater in a climate of reduced funding for statutory services. Overall, the focus in this local authority on embedding father-inclusive practice more effectively into generic family support services is laudable. At the same time, the mentoring scheme that was developed under New Labour's Teenage Pregnancy Strategy was innovative in providing a model for how to embed specialist support for young fathers within generic statutory services. Arguably, the specialist provision has particular value in terms of the ethos of early intervention, for it opens up new and productive pathways for young fathers to follow as they enter into parenthood. The findings from our research suggest a strong need for a continuation of this holistic, one to one support for young fathers,

which this authority has pioneered so effectively. Over time, however, we have traced the process through which this high quality service has been absorbed back into more generic family support. In the process, the scope of coverage and depth of support has been reduced, with a potential dilution of the positive impact it can have on young fathers in relation to their children and young mothers. While it is desirable for professionals working in generic support services to have the capacity and skills to support young fathers, the decision by Grey Bridge to limit access to specialist support to only the most vulnerable has left a significant gap in provision. This, arguably, may limit the capacity of the authority to work preventively to circumvent the accumulation of problems faced by young fathers as they grow into adulthood. In times of resource constraints there are no easy answers in terms of prioritising support for those in need, but the innovative provision offered in Grey Bridge is testament to the capacity of statutory services to engage effectively with young fathers.

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