Glasgow Promise Partnership

GC VS Glasgow Council for the Voluntary Sector

Third Sector Family Support Mapping

What does Glasgow's Family Support landscape look like?

Where are the gaps in current provision?

We asked third sector organisations to help us find out.

2022

Executive Summary

Background and Research Objectives

Over a three month period (July – September 2022), the Children's Services Team at GCVS conducted a research exercise to map the city's family support landscape. Co-designed with members of the Glasgow Citywide Forum's Family Support subgroup, and with input from the Glasgow Health and Social Care Partnership, we produced a survey to gather key data. Similar to research conducted in 2018, the survey aimed to identify the extent of existing third sector family support services, as well as key gaps in current provision. We aimed to achieve these aims by covering the following areas:

- Geographical area of service delivery
- Funding sources
- Service type and operation
- training and methodology
- Referral processes
- Services' views on main concerns, issues facing families and gaps in family support

Research also intended to complement service design work by the Glasgow Promise Partnership. The ongoing project, embedded within GCVS, aims to design a new family support service, through co-production and co-design with children, young people and families.

Findings

One-hundred and twenty two survey responses were gathered, from 78 different providers. We asked respondents to complete a separate response on behalf of each project which delivers any aspect of family support.

In total, around 32,500 families received support from services over the past year (March 2021-March 2022). This figure reflects the total number of families supported by those who submitted a survey response. A more accurate figure is likely to be considerably higher than the scope of, and return, from this research.

Just over half of respondents offer a city-wide service to families across Glasgow, regardless of locality. Based on the survey data, an equal amount of support is available in the North East and North West of the city, with fewest services available in the South.

In terms of targeted support, as anticipated, the majority of services work with children and young people, or offer whole-family support. Just over half of respondents work with children aged 5-12 years, and at just 18%, young people aged 18-26 were found to be the least supported group. To gain a deeper understanding of recipients of support, we asked respondents to highlight any specific targeted groups, such as (but not limited to) families affected by disability, young parents, BME families and LGBT+ groups.

Most services are open to all of the above, which may suggest an equal range of support available for specific groups across the city. However, some respondents voiced the need for increased , tailored support for certain groups, particularly children with additional support and complex needs, disabled children, and families seeking asylum and refuge. Additionally, a few instances of specialized support were identified, however, eligibility criteria is more specific.

Over half of survey respondents described their service as either community or home based and delivered support using a 1-1, group work or whole family approach. Respondents also highlighted services offering emotional, guardianship and academic support, as well as financial inclusion advice, supported accommodation, counselling and wellbeing activities. Data revealed a lack of childcare and nursery provision, as well as respite and opportunity for specialist support.

Organisations were asked to describe what they believe are the biggest issues facing families in Glasgow. Concerns around isolation, mental health, food and fuel poverty and the general rising cost of living were frequently highlighted by survey respondents. Increasing concerns over a lack of adequate housing, domestic violence, post-pandemic anxiety and drug and alcohol misuse were also identified.

In addition to mapping the city's existing family support landscape, research also aimed to identify the gaps in current provision. Generally speaking, respondents concluded that Glasgow is not necessary lacking in specific services and instead, issues are related to the lack of widespread availability of services: ***"it's not that services aren't available (in Glasgow), there's just not enough of them."*** The following support types are under huge demand and were repeatedly highlighted by respondents, including: mental health and wellbeing, complex needs, poverty, early intervention and prevention, early years support, collaborative and joint working, BME, whole family, employability and transition support. An in-depth analysis of key gaps is provided further in this report.

Discussion and Recommendations

Recommendations were advised following further consultation with respondents, the Promise Project network group and Health and Social Care Partnership colleagues. See page 17 for a detailed discussion.

Funding

- More long term, sustainable and accessible funding to help meet the growing demand for third sector support and reduce long waiting lists.

Collaborative and Partnership Working

- Joint-working approaches between services, and across private, public and third sectors, e.g. the sharing of premises, enhanced communication and exchanging of knowledge.

Increased resources to meet demand

- Glasgow boasts a wide range of services offering varied support, however, the city needs more: more services, more staff and the ability to accept increased referrals.

Holistic and specialist support

- A whole family approach to support is crucial and should address the needs of entire families. To meet wide ranging and multiple needs, specialist support should also be readily available.

Timely support: early intervention and averting crisis

- Early intervention and prevention services play a crucial role in families' avoiding a point of crisis. Whilst increased funding and additional services are required across the entire sector, the need for further early years and preventative support is incredibly clear.

Survey Demographics

Who responded?

A total of 122 responses were gathered from 78 different organisations. Respondents were asked to complete a separate survey on behalf of each service they provided. A number of organisations offer more than one family support service, based on locality area, age range or support needs.

122
survey responses

78
Organisations/providers identified

32,500
*Families supported from March 2021 - March 2022

Glasgow's third sector provides a wide range of support to families across the city. Over a one year period (March 2021 – March 2022), approximately 32,500 families were supported through the various services offered by survey respondents. *This figure is not representative of the city's entire third sector ,and is likely to be much higher, should all services that provide support to families be considered.

The majority of survey responses were gathered from voluntary organisations and registered charities. Insight was also gained from social enterprise groups and input from one community group with no paid staff/income.

Whilst 122 separate responses were gathered, only a number of services specifically identified as delivering 'family support'. The majority of respondents delivered wide-ranging support to various groups, however, considered family support to be an important aspect of their practice.

Around half of respondents delivered their service in partnership with one (or more) of the following agencies:

- Glasgow City Health and Social Care Partnership
- Glasgow City Council
- Other Third Sector organisations - both local and national (e.g. Aberlour, Action for Children, Includem, Right There, OPFS, Children 1st, NSPCC)
- The Scottish Government
- Local Community Groups, including community Churches
- Education and Schools
- Social Work
- Police Scotland

Where is support available?

Drawing on the survey data, an equal number of services are available in both the North East and North West of the city (26.23%). Data suggests that family support provision is lowest in the Southside of Glasgow. According to the data, just under half (46.9%) of services are available to families across the entire city, and are not geographically limited to any single locality.

Training, Methodology & Approaches

We asked respondents whether they are required to be registered with the Care Inspectorate in order to deliver their service. For a large majority of respondents (72%), this was not a requirement, and only a necessity for 28%. However, more than three-quarters of services were informed by The Promise principles.

Ninety-three percent of services drew on specific approaches and methodologies in practice. The following approaches noted consistently in the survey data were:

Strength-based approach **UNCRC** **Trauma Informed Practice** **ACE**
Mental Health Training **Outcome Star Assessment** **CBT** **Person-centred**
GIRFEC **CALM 1** **Child Protection & Safeguarding** **Triple P** **Counselling**
Whole Family Approach **Community Learning Development** **SHANARRI**
Book Bug **Voice, Validation, Hope Model** **Creative: art, music & play therapy**

Staff Recruitment and Retention

Most services were satisfied with the level of recruitment and retention of staff over the past year. However, 37% expressed discontent with regards to staffing. A general consensus was identified among respondents.

A number of respondents highlighted great difficulty in recruiting, and retaining, staff with appropriate experience and qualification. Findings implied successful recruitment and retention was a particular concern in relation to Family Support staff, making the possibility of recruiting additional staff extremely challenging. Organisations also reported competing, both within the third sector and beyond, for the same pool of recruits due to a lack of wide ranging applicants for posts. A lack of long term funding further affects the likelihood of staff accepting job offers, due to fears over job-security.

Funding

Concerns around funding, including availability, longevity and sustainability were frequently highlighted throughout this research. In order to gain an accurate understanding of the current issues, we asked repsondents to tell us about their sources of funding and provide any additional information.

The majority (60%) of services receive funding from Public Sector Grants such as Glasgow Comunities Fund or money from the Scottish Government.

Just under half (48%) of respondents receive grants from funding partners such as the Robertson Trust, Corra, TBL, to name a few.

A third of services rely on fundraising efforts, and others are commissioned by the Public Sector (25%).

A handful of respondents described PEF funding as their main source.

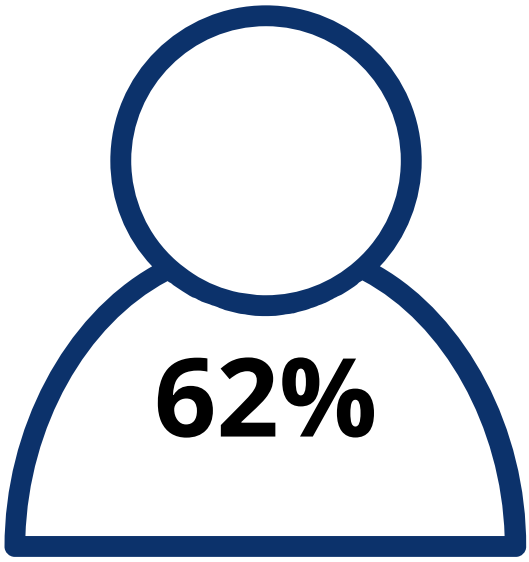
> **"The need for family support services is phenomenal (but) seeking funds for the provision of staff is extremely difficult."**

A number of respondents voiced similar concerns around a lack of secure funding. Described as inconsistent and unsustainable, the struggle to accquire and maintain sufficient funding was repeatedly highlighted by organisations. Despite a continuous stream of referrals, and high demand for support, some providers feel unsupported by local authorities and other funding partners. Respondents also stressed the need for longer term funding, highlighting the difference that sustainable income would make with regards to positive impact and addressing major concerns among families. Organisations further expressed the need for longer term funding, to support with staff retention. Respondents implied an over-subscribed funding landscape in Glasgow has left children and families services under immense pressure to secure the same funding sources.

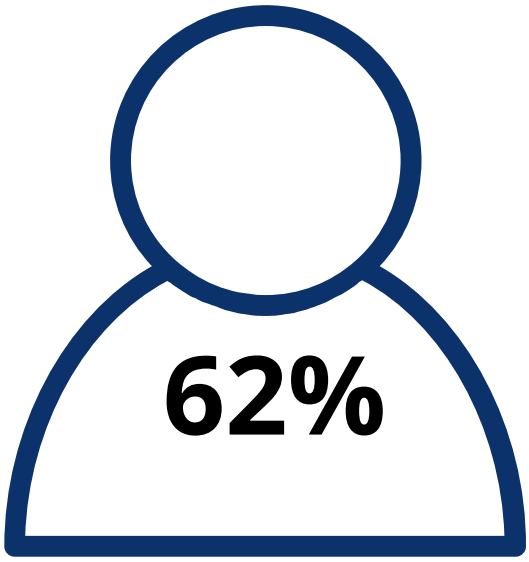
Service Users

Services were equally targeted towards children and young people and to whole families – with 62% of respondents highlighting these groups as their main service users. Research suggested that those in kinship care are the least supported group at just 19%. With regards to age range, just over half of services offer support to children aged 5 – 12, followed by pre-birth – 5, followed by 12 – 18 years. Data highlighted limited support services for young people aged 18 – 26.

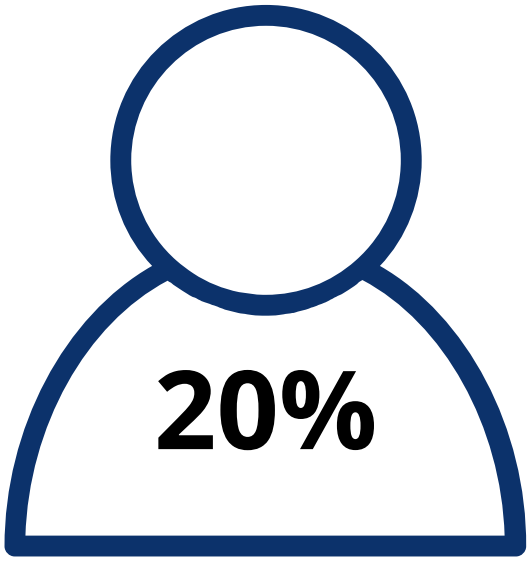
Main service users



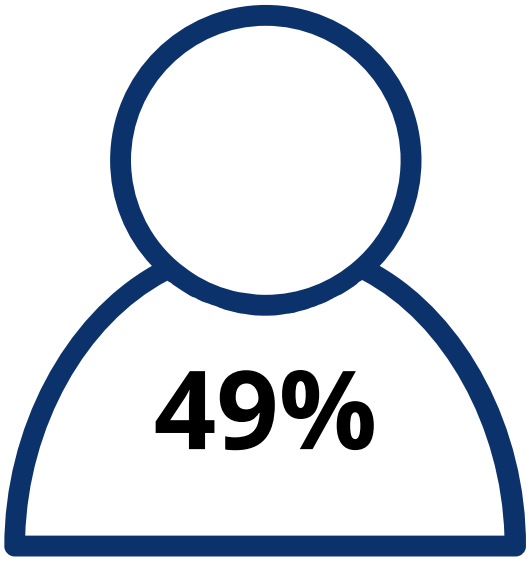
Children & Young People



Whole Families



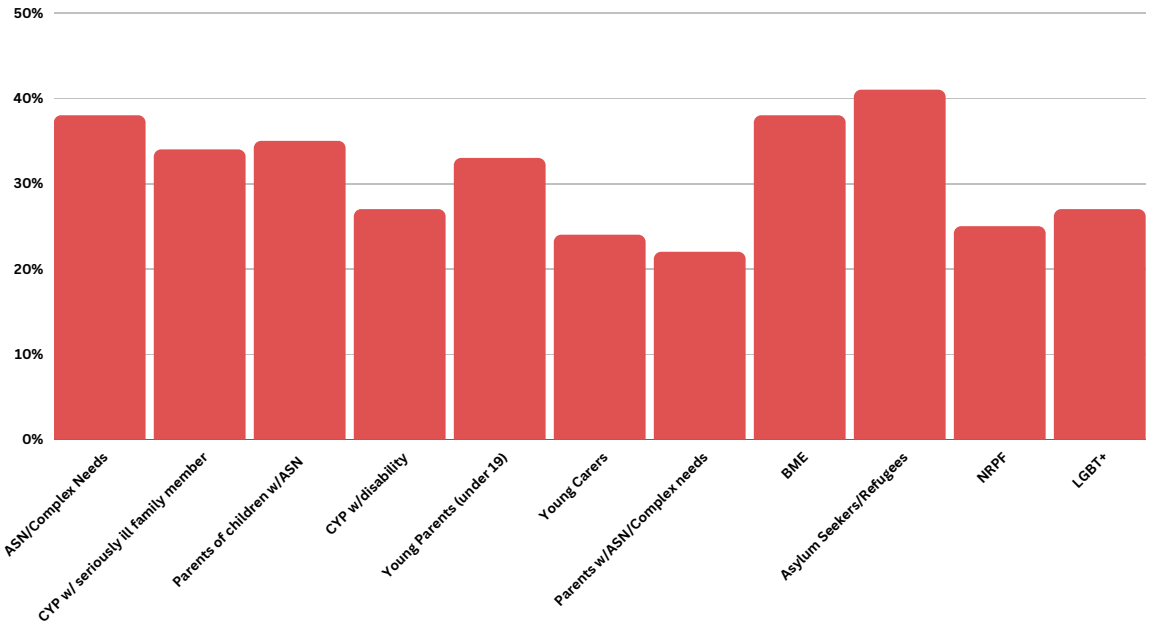
Kinship



Parents & Carers

The majority of respondents highlighted their offer of support towards specific groups. Answers varied depending on the nature of the service, however, a large number of respondents emphasised their ability to work with various, if not all, of these groups and adopt a 'no barriers to support' approach.

Support offered to specific groups



The above results indicate an equal delivery of support across specific groups, suggesting a balanced range of services available across the city. Despite this seemingly balanced support landscape, some respondents stressed the need for increased support to particular groups, such as children with additional support needs and disability and families seeking asylum and refuge, reinforcing one of the overarching research findings- **a wide range of services do exist in Glasgow, however, the city needs more.** Additional services would expand both the reach of support, and encourage positive joint working between organisations, resulting in a more streamlined, timely and efficient delivery of support to families.

Other recipients of support highlighted by respondents included:

- Trafficked children
- Families affected by addiction and substance misuse
- Family members with ill health
- Trauma experienced children and families
- Those at risk of/experienced homelessness
- Gender diverse children and family members
- Survivors of domestic abuse
- Families affected by imprisonment
- Families in low income

Support Offered

76% of those who responded to the survey offered Early Intervention support to families. Around 65% also provided a Preventative service, and just over half (51%) delivered Intensive Family Support.

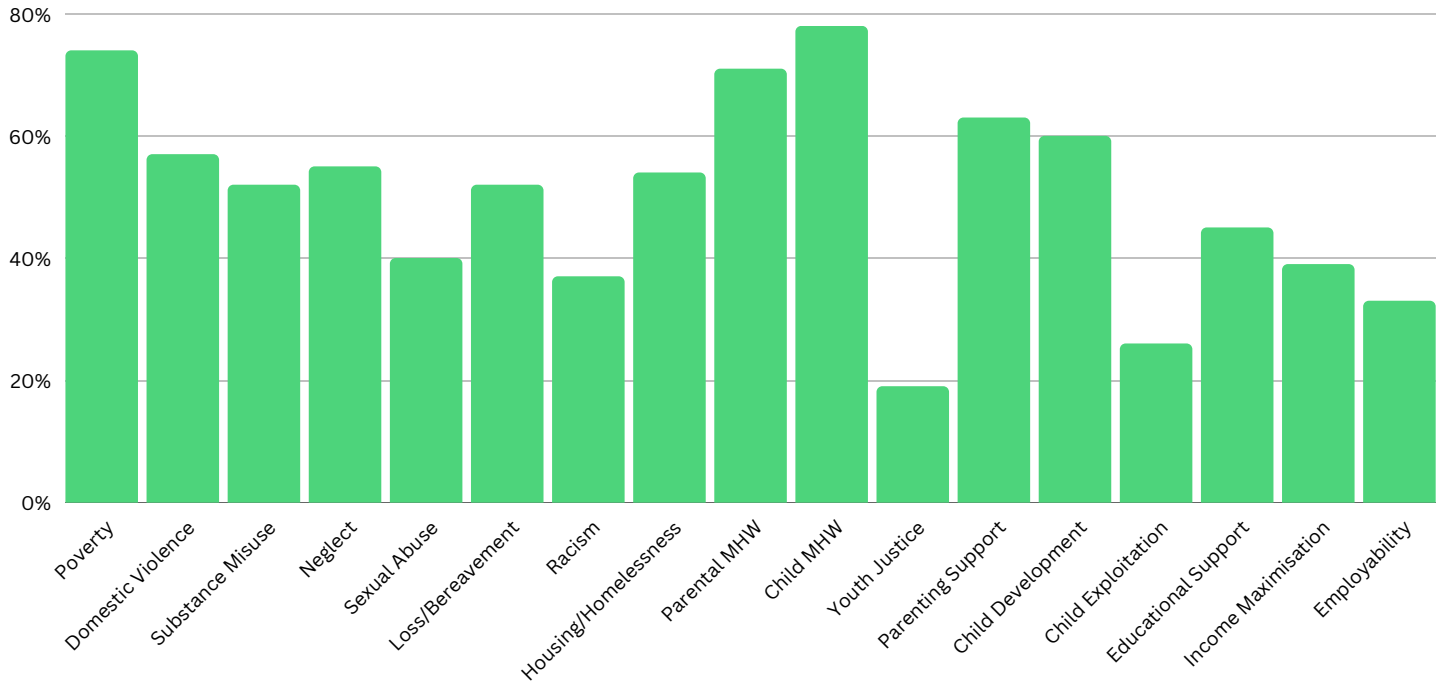
Other support types such as early learning and childcare, family respite, community-led activities, provision of material goods, welfare advice and support within prisons, also emerged from the survey data.

Surprisingly, in the following survey question ***'What type of service do you provide?',*** only a minority (17%) of respondents highlighted childcare or nursery provision for families, and even fewer stated the provision respite support (15%). By contrast, over half of respondents provided practical community or home based support. Less than a third delivered recreational/leisure activities or support in the forms of family therapy and counselling.

In addition to the above variations, respondents further noted mental health support, guardianship services, educational support, befriending, advocacy, ASN training and supported accommodation.

When asked to describe their delivery format, 79% reported using 1-1 support, followed by group work, whole family approaches, specialist support. At just 18%, and reinforcing previous findings, respite support and delivery was in the minority.

Services provided support around several specific issues. Unsurprisingly, a vast majority of services worked to address concerns around child poverty and the mental health and wellbeing of families. Survey data revealed support was less available in relation to tackling employability, racism and child exploitation.



Main activities provided by services:

1-1 Support	Mental Wellbeing Support: confidence & self esteem	Counselling	Home-based support	Group work and befriending
Practical life skills: grants, budgeting, cooking advice	Therapeutic assessments	Personal development	Baby massage	Needs led support
Signposting to other agenices	Dad's only support	Support with legal representation	Parenting skills and strategies	School based support
Education, employability and volunteering opportunities	Creative activities: music, arts & crafts	Sensory play	Outdoor play e.g. walk and talk gorups	Physical and sporting activities
Transitional support e.g. primary - secondary school	Personal Care	Provision of essential items	Financial and welfare advice	Housing support
Peer education and mentoring	Early learning and childcare	Evening support for parents	Disability support and respite	After school clubs
Telephone helplines	Food provision and community pantries	Youth worker training	Antenatal & perinatal support	Residential and short breaks
Advocacy support	Digital and online skills	Attending appointments	Facilitation of family time	Substance misuse and recovery support

Accessing Services

In previous research and discussions, third sector organisations have expressed concerns regarding the accessibility of services. Both providers and families are often unaware of where to turn to for support. In order to gain a deeper understanding of access constraints, referral routes and eligibility criteria, we asked respondents the following questions:

How do you time limit your service?

Responses divided almost equally, indicating a balanced number of services operating with and without time constraints. Some specific time limitations emerged from the findings. Where families were referred to social work, services often provided support for the length of statutory involvement only. Some services offered support until a child reaches a specific age, or provided a programme of support for a pre-determined number of week or months. Only a minority of services operated without time limitations and were able to continue working with families indefinitely. Respondents repeatedly noted their ability to provide support was determined by the amount of available funding. Others stated that support was flexible to meet families' needs, and for others, support was available during opening hours only:

Monday to Friday 9-5: 35%
Monday to Friday, extended hours: 26%
7 day service, 9-5: 0%
7 day service, extended hours: 23%
24/7 service: 6%
Weekend support only: 1%
School holidays only: 0%

How can people access your service?

A clear majority (84%) of services accepted referrals from partners, with some also open to self-referrals from families. Only 38% of services had open-access.

Where do you accept referrals from?

Services accepted referrals from various partners, most commonly social work, health visitors, GPs, community link workers and from education staff. Referrals were also made from other third sector organisations and community groups.

Are there any eligibility criteria for your service?

Data revealed the following criteria:

- Age range
- Locality
- Subject to social work screening
- Care Status
- Aslylum or Refuge Status
- BME Identity
- One or more ACEs
- Disability Status
- Significant family member in prison

Biggest Issues Facing Families

In addition to mapping the existing family support landscape, and identify the gaps, research also aimed to highlight the issues experienced by families across the city. Respondents were asked to describe what they believe to be the most pressing concerns affecting families.
A number of themes emerged from the survey findings.

Mental Health

Survey data indicated a high level of mental health concerns. Various respondents highlighted families' declining mental health and wellbeing, as well as a lack of available services. Organisations emphasised long waiting lists to access existing mental health services, as well as diagnosis and treatment. Other factors, particularly the rising cost of living, isolation and post-pandemic anxiety were also found to negatively impact families' mental wellbeing.

> *"(there's a) huge gap in mental health services for adults and children...the lists and waiting times...parents/young people are unable to access these services. Other issues could be intrinsically addressed with ease if those families could access the right services at the right time. Unfortunately this is not what families are experiencing and despite best efforts, mental health unaddressed is not helpful."*

Cost of Living

> *"High cost of living. The higher costs families with disabled children have compared to non disabled children. (Contact research states, 3 times as much). Higher costs of childcare for families with disabled children and young people."*

> *"This (in-work poverty) is becoming horrific for families as they have no quality time together due to working as many hours as they can to earn money, they have little to no funds left after paying bills which limits how they can enjoy their time together when they DO get days off, they are suffering mental health due to working long hours but still carrying the stress of making ends meet and the younger generation are observing their parents go through this horrific regime."*

Families across the country are experiencing a rising cost of living crisis, with food and fuel prices continuing to increase. Respondents also told us that families are facing a lack of disposable income, creating additional pressures and stressors on whole family environments.
In-work poverty was also noted as a major issue, with families struggling to buy essential items after paying bills, despite working long and unsociable hours.
Fears over a future rise in costs are creating additional stress for families. Respondents further highlighted the increased financial difficulty experienced by families affected by disability, as well as asylum seekers and refugees.

Whilst Mental Health and Cost of Living factors were identified as the most prominent concerns, substance misuse, lack of of adequate housing, post pandemic anxiety and domestic violence were also noted as key issues facing families in Glasgow.

Where are the gaps in Glasgow's Family Support Landscape?

In addition to the mapping of existing services, research further aimed to identify the gaps in Glasgow's family support sector. Survey respondents were asked to highlight what they believe is missing, or lacking, in terms of family support across the city.

Respondents stressed the following themes should not be viewed as 'gaps' in the landscape but more so the 'pinch points' in family support, and a reflection of the areas where demand is high, yet capacity is low. Glasgow boasts a wide range of services, including specialist supports, however, the following were identified as areas where additional services are required:

- **Mental Health Services and Support**
- **Support for families affected by disability and complex needs**
- **Addressing poverty: food & fuel, financial & welfare support**
- **Employability and skills development**
- **Early Years and Childcare Support**
- **Early Intervention and Prevention**
- **Collaborative and Joint Working Approaches**
- **Support for BME, Asylum Seekers and Refugee Families**

Other key gaps were identified, including a lack of Dad's only support and limited 24 hour services.

Increased Mental Health Support

A large number of respondents highlighted their concerns around a lack of mental health support available to families across the city. It is important to note that this concern does not reflect the number of services available, but instead refers to the limited access to support, specifically long waiting lists and under-resourced services offering mental health aid. Findings suggest that many individuals and families are reaching crisis point with regards to their mental wellbeing, before receiving appropriate support. In addition to lengthy waiting times, survey data also suggested a lingering stigma surrounding mental health remains among certain communities. Respondents also raised the need for longer term support and intervention in order to have a positive impact on families' mental health and wellbeing.

Support for families affected by disability, ASN, ASD and complex needs, including transitions and respite care

Families with a disabled family member, including both children and parents/carers, are more likely to face additional barriers with regards to accessing and receiving support. Respondents told us that families need longer term support and that current provision is often much too short to make a lasting impact. A lack of specialist and person-centred support for families with disability was also identified among survey responses. Respondents highlighted the importance around understanding the needs of young people with disabilities and that inclusion in mainstream services is *not* meeting these needs. In addition, a desire for more specialist and 1-1 support was also noted, as well as more respite opportunities for carers. Respondents who emphasised the need for increased advocacy support also voiced challenges faced by families who are awaiting an official diagnosis.

"(There's a) Lack of services for disabled children and young people. Families want respite and childcare for after and school holidays just like non disabled children. However, current family support in Glasgow provides family support workers to work in the home for short periods of time. That is not what a parent/carer of a disabled child or young person needs, A child is disabled all of their childhood."

Addressing poverty: cost of living, food & fuel, financial & welfare support

Reducing poverty is at the core of family support. As anticipated, almost every survey respondent voiced their concerns over the rising cost of living crisis, and what this means for families. Current issues, particularly food and fuel poverty, were repeatedly noted as key concerns for both families and organisations, who are struggling to access provision for families in need. In-work poverty remains problematic, where workers are undervalued and underpaid. Increased financial support for families, both aid and advice, were also noted by respondents.

"There is no "quick fix" for this poverty epidemic we now live in, but we feel supporting people in work to cope is paramount in leading the way out of it."

Early Years Support/Childcare & Early Intervention/Prevention

Research identified limited referral routes for early years support and free childcare options. Early intervention and prevention services play a crucial role in families' lives and help to provide children with the best start in life. More investment in these services is required in order to meet an ever growing demand for this type of support. It is only by accessing the right support at the right time, that families will have the opportunity to benefit from preventative services.

"Further refinement required to ensure we have appropriate provision for both prevention and early intervention services for under 12s as well as more intensive family supports for this age group. "

"lack of investment in early intervention and prevention ie self referral is not recognised enough as a preventative measure. location of services is hit or miss and lacks strategic focus eg lots of services for over5s and not enough focus on under 5s especially undeer 3s."

Collaborative/joint working approaches

Respondents voiced the potential benefits collaborative working between organisations and agencies could bring to practice. Families with multi support needs are being restricted by the limited accessibility of services. By incorporating different services within existing support structures, particularly heavily stigmatized support, could increase uptake.

"All services working in collaboration or operating from the same spaces at times for ease of access for families and professionals to communicate with each other. Plans are made to support a family by a professional and are not shared quick enough to all partnerships if at all. Information on children particularly should have a streamlined system to share between health and education for example."

"services need to look at how they work together in hubs, or to incorporate their support into ones that hold less stigma for users. We know that many individuals will not access mental health support, money advice or food because of the stigma associated with these servies. However, if these services were provided within a different context (e.g. courses, children's play activities) then they can be delivered and accessed with greater ease, and less fear."

Support for BME, Asylum Seekers and Refugee Families

A lack of support for BME families was also highlighted in the survey responses. Referral rates are often low among BME communities, and so the need for increased awareness of available support should be a priority. Families seeking asylum or refuge, and those with no recourse to public funds, were also identified as groups receiving limited support. Families who have been involved in the asylum process for a long period of time may find it extremely challenging to integrate and participate fully in society - and should receive increased focus and help to access services.

"Services that help and include asylum seekers and refugees who have been in the asylum process and in limbo for a long time."

Discussion & Recommendations

The following recommendations emerged after further discussion with respondents, members of the Glasgow Promise Project and input from Glasgow Health and Social Care Partnership colleagues. The findings revealed that whilst Glasgow is home to a rich and diverse family support landscape, there is a clear need for improved service accessibility, capacity/demand balance and increased investment. It is on this basis that we suggest the following areas are considered:

- **Funding**
- **Collaborative Working**
- **Increased resources**
- **Acknowledging the importance of holistic and specialist support**
- **Accessible and timely support**

Funding

The survey data revealed an urgent need for increased third sector funding so services can ***"increase (their) capacity to suport families.".***
A***"Lack of funding is a major issue as this prevents third sector organisations operating at full capacity."*** Organisations are already operating at full capacity and in some cases relying on reverse funds in order to meet growing demand and ultimately, to support vulnerable families in need. Services require long term, sustainable funding to ensure the delivery of authentic, high quality support for children, young people and families. Organisations are struggling to stay afloat, falling short on crucial commissioning oportunities, whilst referrals continue to rise.

Collaborative and Partnership Working

Respondents agreed that both organisations and service users would benefit from enhanced collaborative working approaches between services and across sectors. Whilst concerns were raised regarding the practicality and reality of successful partnership opportunities, a general agreement around the need for joint-up working was identified; for example, the sharing of premises to deliver more streamlined and easily accessible support, or stronger communication between services and sectors. There is a clear need to improve the lines of communication between the public and third sector, and that doing so would be of great value to both organisations and families with regards to accessibility.

Resources to meet demand

We asked organisations to identify the gaps in family support, however, upon analysis of the data, it became clear that Glasgow is not lacking in any particular service, but rather under-resourced and struggling to meet demand across the board. Services for families with additional support needs, as well as mental health support, are particularly stretched, yet continue to experience a huge influx of referrals: ***"capacity has remained the same, however, needs have not. We still aren't getting it right for families."*** There is an undeniable need for increased resources, so services can manage this overwhelming demand for support.

Valuing holistic and specialist support

The delivery of whole family support is vital to families' wellbeing and ability to thrive. Prioritising holistic support is crucial in circumstances where families are affected by multiple needs and vulnerabilities. We must ensure that families, both children and adults, have equal access to a range of specialist support services, to address the ***"lack of specific and inclusive services for families with specific needs and experiences.",*** specifically around mental health and disability. Individual, specialist support is rarely available under the one roof. Families should feel supported to access the right amount of support to meet their various needs.

Timely support: early intervention and averting crisis

Families are reaching a point of crisis before gaining access to services and longing for ***"access to support earlier, to avoid family breakdown and (stay) together.***" Action is required to ensure families, particularly those with additional vulnerabilities, can access early and consistent support from the outset. Early intervention and prevention services are in huge demand across the city. Third sector organisations are experiencing lengthy waiting lists as well as a constant stream of referrals, but are lacking the necessary funding and wider support to manage this continuous and increasing demand.

We would like to express our thanks and appreciation to those who contributed to and participated in this research. We hope these findings provide an updated picture of Glasgow's Third Sector Family Support landscape; including what the city is doing well, and where increased focus and attention is required.