

"It's all about equality."

Involving disabled parents in their children's secondary phase education

Extracted from my dissertation submitted in partial fulfillment for the requirements of an MA in Community Education awarded by the Faculty of Health and Life Sciences De Montfort University January 2009

Kirsten Francis

“It’s all about equality” research findings summary

Research was undertaken in Norfolk secondary phase schools in 2009 to look at good practice in involving disabled parents in their children’s education as part of an MA in Community Education by Kirsten Francis, Parent and Carer Involvement Officer, Norfolk County Council Children’s Services.

The importance of inclusive practice in relation to parents and carers is clear when we consider how much difference it makes to children when their parents are involved in their education.¹ There is also a legislative framework which requires schools to make reasonable adjustments.

Among the 14.4 million parents in the UK in 2003, over 2 million adults received both Child Benefit and a disability related benefit² and so were considered to be “disabled parents”. In Norfolk there were 18,459 disabled parents with 29,791 children in 2003.³ This implies seven children with at least one disabled parent in an average classroom of 25 children. There will also be disabled parents who are not in receipt of disability related benefits.

Throughout the process of this study, when talking with colleagues, stakeholders and school staff there was a recognition that families who are described as ‘hard to reach’ may well be led by disabled parents, but this awareness hasn’t been translated into practice, and the term ‘hard to reach’ itself appears to conceal the real issue – that families experience barriers.

Examples of barriers parents face within schools include:

- Physical barriers (for example inaccessible areas of school sites)
- Intellectual barriers (for example materials and resources that are complex and require a high level of literacy and numeracy)
- Social barriers (for example inflexible arrangements for meeting with school staff)
- Sensory barriers (for example lack of provision for parents with sensory impairments)
- Internalised barriers to do with prejudice (for example judgements made by school staff about parents not being interested in their children’s education)

¹ DESFORGES, C. with ABOUCHAAR, A. (2003). *The Impact of Parental Involvement, Parental Support and Family Education on Pupil Achievements and Adjustment*. Department for Education and Skills.

² STICKLAND, H. (2003). *Disabled Parents and Employment* London: Department of Work and Pensions.

³ STICKLAND, H. (2005). Personal communication with Norfolk Disabled Parents Alliance

When services or involvement opportunities are offered in ways that are not accessible, or which disadvantage disabled parents, those parents will be disabled in undertaking their parental role and responsibilities in relation to being involved in the education of their children. Unequal access undermines the family, the parent, the child, the school, the community and society in general.

The following is a summary of the research findings:

There was a wide range of factors that impacted on inclusive practice identified by the findings, including: whole school ethos; accessibility of school sites and school communications; effectiveness of inclusive policies and practices; information collection, sharing and management at all school phases and across phases; training and the curriculum and how the needs of children of disabled parents, particularly young carers were addressed.

“You need committed people, strong leadership and a whole school ethos.”

The findings in relation to good practice in involving disabled parents in their children’s education are organised under the following thematic headings:

- Duties and responsibilities
- Information gathering and sharing
- Initiatives
- Inclusive opportunities and accessibility
- Relationships with parents and carers
- Communications
- Training
- Needs analysis, views and voice
- Curriculum
- Young carers
- Evidence

Duties and responsibilities

Schools that had met their Disability Equality Duty and worked with stakeholders to develop a Disability Equality Scheme (DES) that included reference to parents and carers were able to describe their inclusive practices, although one participant said:

“How far do we go and how do we deal with the issue sensitively is still not so clear.”

Staff meetings, governor meetings and meetings with parents had been used by participating schools to develop their DESs and participants felt that understanding the issues takes time:

“It’s taken 18 months to feel confident that we understand this agenda, the duty and the issues. The updated one this year is now based on what has been learnt and what we now know from thinking further about it - the next revision... will be even more informed... when something is put in place to meet the law, it doesn’t in all honesty reflect everything that should and could be done – it will take schools two or three years of consideration. Like everything new it takes time and discussions to raise knowledge and confidence and awareness and embed practice.”

Participants also referred to monitoring and reviewing their DES as good practice:

“Well worth doing - the process is as important as the outcome”

One secondary school had supported chronologically earlier intervention by sharing their DES with cluster heads to help them develop theirs to complement the secondary DES.

Information gathering and sharing

To establish any issues, including any additional needs of parents, most participating schools relied on data gathered on admission to secondary school through information passed on about families from feeder schools at transition.

This early chronological identification and intervention and passing on of information to secondary phase was identified as crucial by all participants, partly because of the level of contact that early years and primary phase settings have as opposed to secondary school:

“a school knows a lot about the family of a 5 year old but at secondary school, issues with parents not coming in are further compounded in rural areas where families may live a long distance from the school, which also compounds the impact on disabled parents”.

One participant had recently implemented a transition system with secondary school staff visiting each feeder school. This gave the opportunity to ask questions about disabled parents and young carers.

One school described also how after the first intake evening, staff are asked about any issues that have been brought up.

“In the last two years through transition I feel we have identified support needs that feeder schools have been aware of”

One participant described how for all “out of the ordinary” transitions as well as for students for whom a pastoral support plan (PSP) is put in place there is a face-to-face meeting with the family to gather information, which provides a

more personal opportunity to ask about support needs including asking if parents have any problems filling in forms.

One school described how the head of year notes special arrangements and addresses particular access issues for example at parents' evenings and for reports. For example, notes on the student in the management information system say: 'if you want to phone home talk to head of year first'. This participant was confident that all schools systems have the capacity to add detail about families:

"no technical issue – it's just about putting the processes in place"

One participating school had weekly meetings with cluster support, including external partners as well as Special Educational Needs Coordinators (SENCO) network meetings. The school worked closely with primary feeder schools to ensure they had data on year 6 students entering the school, enhanced by a teacher who worked in the primary schools for much of their time. This school had also issued questionnaires with an introduction that explained the broad definition of disability and included information about what the school could do to support parents. Parents who responded were mostly responding because they or their children were disabled.

One participant was very aware that the school didn't know about parents with *"hidden disabilities"* described as including substance misuse and mental health issues. They felt primary feeder schools not sharing information compounded by staff being conscious of people's privacy contributed to the lack of information.

There were participating schools considering how to ask questions appropriately at admission intended to elicit information about additional needs of parents and carers. One participant felt that as long as the focus was on support and enabling it shouldn't be a problem and reflected that there are questions on many questionnaires that adults fill in about disability,

"parents are used to it".

The strongest examples of information gathering where disabled parents were engaged with in ways that are accessible in the widest sense of the word came from the special school sector covering secondary phase. School staff made home visits to all families at transition, taking account of the needs of new students and their parents and recording them. There was also a face-to-face induction meeting where general paperwork was talked through, everything explained and discussed with support given if necessary. This also gave additional opportunity for the working in partnership ethos to be explained any issues that might be relevant to be discussed and recorded and support offered as well as information about extended school services given:

"we need to support you in your role in your child's education as a parent – and how best can we support you"

The school server had a confidential section with all information provided about parents recorded as a family pen picture. Any issues, for example literacy or mobility were noted and taken into account for supporting the family as well as when visiting the school and for home visits. At the beginning of term staff were briefed on the new intake and their parents and families. Throughout the child's time at the school parents were frequently asked: *"Is there anything we can do for you"*, including at regular parents' evenings.

Initiatives

Developments common to some of the schools who participated were described as having contributed to the capacity of the school to break down barriers to disabled parents being involved in their children's education. The most significant initiative seemed to be Parent Support Advisers (PSAs) others included: The Common Assessment Framework (CAF); strategic action plans and school nurses.

PSAs: The dedicated time PSAs had to work with parents to overcome barriers to their children's learning had created additional capacity and also seems to have created a culture shift in many schools where they have been operating as part of an embedded feature. Norfolk was one of the 20 Local Authorities that piloted this government initiative 2007- 2008 which has been rolled out from 2008 to all local authorities. It has been considered successful in Norfolk, and Norfolk County Council Children's Services had embedded the model into all school clusters. Participants felt that PSAs have worked more than they anticipated with families led by disabled parents.

All participating schools with PSAs described their role as crucial to building up relationships with individual parents and also the school community of parents. PSAs consider the family holistically when they get referrals, which gives opportunities for further identification of needs.

"one of the three cornerstones of the work is signposting and engaging parents"

Participants described many examples of PSAs working constructively with disabled parents and issues for disabled parents and their children were sometimes picked up through PSAs sensitively following up attendance issues and letters that hadn't been responded to.

"More awareness on both sides has really helped the relationship – the PSA as the interface – not the teachers – makes such a difference."

Fitting things around families needs, having enough time, being accessible and prompt responses were described as really important:

"PSAs need to have good communications skills and need time to build up relationships – not being teachers or social services has helped enormously."

It was apparent that where family learning events were already well established PSAs had been able to go to them informally and promote their service as well as taking referrals from the school:

“which makes such a difference as parents have already been able to check you out –meaning we are not as scary or unknown”.

In participating schools with PSAs it was clear that they raised a huge amount of awareness about disabled parents unmet needs contributing to why children are late and why there may be behaviour issues. They were ensuring that issues facing the child and the family that are impacting on the child’s education negatively were better understood by the school.

One head teacher described PSAs as the single most important initiative that has been introduced in all his years of teaching experience.

PSAs also worked to break down general barriers that could compound barriers faced by disabled parents and had training on inclusion and accessibility issues. The service was rapidly valued and sought after by parents, evidenced in increasing rates of self referral generated just as much by word of mouth as by advertising.

“We are intimidating in our institutions - we need to be able to break down barriers”

Staff working with ‘nurture’ groups of the most vulnerable children in a holistic way, including their families, was felt to be an important initiative and one that has been informed by the PSA model.

CAF: The CAF was felt to be another useful initiative where there are barriers to children and young people reaching their potential. It was hoped issues relevant to families led by disabled parents would be addressed.

Strategic action plans: One school had a cross-school inclusion team as part of the school improvement agenda and felt it was important to share out roles and responsibilities in order to embed inclusion:

“It’s not just the responsibility of one member of staff.”

School nurses: Participating schools with full time school nurses described that although the key focus of their work was on school based issues, that if an issue for a child with a disabled parent was highlighted then the school nurse was able to provide factual medical information for the school, could support the family and make referrals.

Inclusive opportunities and accessibility

Two participating schools had fully accessible school sites, and both schools consciously promoted an inclusive school ethos at every opportunity. Schools

described that they would use translation provision if necessary and would be open to making reasonable adjustments.

One participant described how if it was known that a parent was physically disabled meetings were arranged on the ground floor and if it is known that parents cannot read the school ensure staff made contact using the telephone and arranged meetings at mutually convenient times.

Although some parts of some schools were not physically accessible to wheelchair users, in most cases there were ground floor accessible rooms for every subject area, and new building work could consider accessibility. Parent's events at more than one school were always on the ground floor.

"The school is pretty good at adapting when there are physical access barriers"

Some participating schools had specialist centres, which were described as contributing to the whole school ethos and awareness. It was felt that awareness about barriers to learning could be transferable to make sure opportunities for parents are inclusive.

Inclusive Family Learning activities and courses for parents to find out more about what parents can do to support their children's learning were felt to make a big difference by some participants and were well attended when well advertised.

One school had many staff with skills, knowledge and experience transferable to working with disabled parents e.g. signing and using sign supported language and a range of leaflets in simple language, on how to support subject homework, issues around attendance etc. and also on extended school services including: nurse led health clinics; PSAs; parenting programmes; home visits and language support as well as explaining face to face to parents how they could support their children's education e.g. by supporting reading at home:

"if you send reading books home you need to let parents know how to support their children"

Relationships with parents

General good practices around building relationships with parents were felt by participants to contribute to enabling disabled parents to be involved in their children's education.

One school had strategies in place so that staff could form relationships with parents, including a well used home/school book, and for parents with literacy issues a home/school dictaphone and for others a home/school digital camera for children who don't communicate well so that parents could discuss their day with them. This is supplemented by telephone contact, asking if there is

anything the school can do. The relationship was considered crucial to children achieving their potential.

“It’s very much about the personal... if we don’t hear from a parent for a while we contact them – some parents who demand your attention can take up all of your time but some can go very quiet – especially when children get to high school age – you need to avoid those vacuums of contact.”

One school had a one to one hotline direct to a key member of staff for parents who need that level of support and texting is used to keep in touch with other parents.

One school described an informal parents’ forum, which informs the work of the governing body, and discusses all aspects of school provision.

Communications

One participant described the importance of the dialogue with the school community about reviews of the DES looking at what had been learned and implemented and feeding back in the newsletter saying what has happened, what has changed as a result, what adjustments have been made, what the school thinks it can do next and asking what parents think and what else the school can do.

“We have already listened and begun to understand the crucial feedback loop.”

Most participants described how there are flexible opportunities to talk to form and curriculum tutors e.g. by email and on the telephone for those who do not find general opportunities accessible. Participants described general practice including telephoning home to check on absences and contacting parents if they cannot / do not attend key meetings and school attendance officers and PSAs go on home visits when there are known literacy issues.

One school described how at the end of September all parents met teachers and teaching assistants and decided together on protocols and communication routes, which was reviewed at parents meetings.

Participants felt it was important to have lots of points of contact for parents and quick responses to any enquiries.

School briefings and meetings with external partners were seen as vital to fitting the pieces of the jigsaw about families together. One school had a confidentiality policy in place and next year will have an information sharing policy to go alongside this, which will support information gathering.

Training

One school had in house training for support staff that was considered “quite comprehensive” by the participant. Another used sections of the DDA to debate what is discriminatory and what is inclusive. One participant described how the definitions in the DDA had been circulated to all staff at least 3 times.

External training for school staff in understanding issues had been welcomed by some schools.

Needs analysis - views and voice

One school uses surveys to assess the students’ and parents’ views about the school. One participant described how when recent school policies have been developed, school council input had been sought and the views of vulnerable families had been represented by PSAs and other school staff and that personal contact had been made with parents to discuss policies.

One school described how questionnaires are included with newsletters and distributed on parents evenings – the motivation for extended schools is the recognition that parents play a key role in their children’s outcomes and development. Invitations considered literacy levels and were accessible.

“We hope that all this says: ‘if you are a disabled parent we’d really like to support you”

Curriculum

Schools that had reviewed the curriculum had ensured young carers were covered and found disability described in the Citizenship and PSHE curriculum, so felt students should be more aware in general. There is potential for delivery to be enhanced so that students could be supported to understand adult disability and so identify parents who are disabled:

“but as for the wider sense of disability... we haven’t equipped staff yet”

Young Carers

Most participants described relying on information given to the school at transition. The information sharing happens as a result of dedicated staff time and relationships that have been developed with feeder primary schools.

PSAs have referred young people to young carers groups, both external to schools and internal. Two of the participating schools had young carers groups operating during school time advertised widely across the schools, including general references to who young carers are. Another had one several years ago.

No schools had young carers policies in place yet, but one had a draft policy.

Only one participating school, from the special school sector covering secondary phase, was confident that they were aware of all young carers, identified through comprehensive ongoing pupil and family profiling. Support has been put in place to help cope with issues that come up.

Evidence

While some participants were able to describe that they had evidence that opportunities to engage with their child's education were accessible to disabled parents, others were only able to describe how they would look for evidence.

"It takes time to put a meaningful plan in place and get people coming in."

One participant was able to provide evidence of inclusive practice for events, including family learning where almost all children had a parent who attended. Another school pointed to their take up rate of 70-80% of parents coming in to parent's evenings, but knows that there are parents who don't engage.

One participant described the high number of families receiving holistic support, many of whom were believed to be led by disabled parents, and how the school office used creative methods, including texts for contacting families.

Parents pleasure that the PSA role is going to be continuing and the increase in self-referrals to PSAs was described as an indication that services were inclusive and accessible.

One participating school from the special school sector covering secondary phase had a wide range of evidence: high percentages of parents giving their views in surveys and attending school events; parents working as volunteers; families showing that they have understood and taken on board requirements and suggestions, e.g. 0.01 % unauthorised absence, and parents describing 'little and often' reading *"like it says in the school booklet"*; the depth of information shared and trust built up; and perhaps most significantly, that when parents find opportunities to be involved in their children's learning accessible, it has an impact on their children's outcomes:

"I think children make good progress at this school because we work closely and in partnership with their parents".

Analysis and discussion

Awareness

Answers given and terminology used indicated that participants had varying levels of awareness of the social model as opposed to the medical model of disability. The strongest examples of engagement of disabled parents in ways that are accessible in the widest sense of the word came from the special school sector. This is in accordance with other research:

An interesting and perhaps unexpected finding was that disabled parents with *disabled* children sometimes, ironically, have better access to information and support in relation to schools and support services than disabled parents with *non-disabled* children.⁴

In order to focus on things that can be changed and on support needs that can be met in line with the social model of disability, to demonstrate good practice school communities needed to be clear about statutory duties and schools needed to have policies and plans developed with reference to them and practices and activities in place to meet them. Despite the duty on secondary schools to have a DES in place by 4.12.06, not all schools had them, or don't refer to parents and carers in their published DES, although one participant felt that:

"It is clear that it needs to refer to and cover everybody."

One participant described how they were: "*shocked*" when information sharing identified that there are significant numbers of disabled parents on their patch, and would like to find out more about these parents – who they are and how to support them. They felt accessing this information was a challenge. This participant emphasised that anything which improves information collection and sharing in early years and primary settings will increase understanding as they felt that by the age of 11/12 children have often found a way to "*cope*" and are less visible and yet barriers to them achieving positive outcomes are still there.

It seems that transfer of information on family issues can be poor from feeder schools, which doesn't support a prevention / early intervention framework for disabled parents or their children, including those with caring responsibilities. Some of the contributory factors were raised by participants and described in the findings, and it is likely that the extended schools agenda could support better school cluster working, but it appears to be something that it will be challenging for schools to address strategically and resource properly until performance management is extended beyond schools self managed boundaries and into school cluster arrangements. However this appeared key to the issue of identifying children with caring responsibilities.

⁴ WATES, M. (2003) *It shouldn't be down to luck: consultation with disabled parents*. Disabled Parents Network

Although many schools have monitoring systems for categories of vulnerable children, they had not previously considered adding information about parents. This was surprising given the range of evidence that parents, as children's first and most enduring educators, have a great deal to do with achievement, which is the ultimate performance measure for a school. However some participants described being conscious that they felt the issue of identification to be potentially sensitive, and that this was compounded by limited community awareness of disability and also by the stigma attached to some issues disabled parents may experience and may have internalised.

It was in some ways not surprising that the gap in information in research literature about the experiences of children with disabled parents who were not young carers was also brought up in discussions with colleagues in preparing for and carrying out this study. The lack of policy, debate and awareness of issues that affect the children of disabled parents day-to-day, week-to-week and year-to-year may contribute to the apparent lack of link up in seeing how crucial inclusive practices for parents are in relation to quality of life and outcomes for children.

Participants talked of their considerable concerns about lack of support when children's outcomes are being impacted on but needs are not judged severe enough to have any Social Services input. There is a lot of policy and guidance that colleagues in schools don't appear to be aware of. For example there was no awareness amongst participants of the Norfolk Joint Policy and Protocol – Enabling parents with a disability or long-term illness, which has principles and processes that are based on the social model of disability and was written with local disabled parents. The protocol aims to ensure that disabled parents and their children have their health and social care needs properly considered and have access to co-ordinated services, which are focused on meeting needs effectively. The result is that staff described feeling isolated.

Evidence

As described, there is evidence that inclusive practices are effective. There was some evidence of the practices described having an impact on the lived experience of disabled parents in some schools and all schools considered evidence gathering possible.

There was a robust approach and credible evidence from one school from the special school sector that measures to understand and meet any additional needs of parents and carers are working, through an inclusive school ethos and policies designed to ensure that at every opportunity a full picture of the family, any support needs and any additional and changing information are added to the electronic information management systems, making sure that the child's needs and the families needs are identified and strategies are in place to meet them and that all relevant school staff are aware and take into account differentiating the students needs in their family context. This meant that disabled parents experienced fewer barriers to being involved in their children's education. The strong background of inclusion and differentiation

meant that this approach had been continually refined and embedded over the years.

“Yes we do spend a lot of time on it – but mainstream secondary schools would only need to do additional work for a small proportion of families”

Compound disadvantage

The significant needs of families with disabled parents were evidenced in the high ratio of monitoring for pupil welfare and Child Protection issues by a school where two thirds of the students had parents with learning disabilities.

Caring roles are shared out in many of these families and some of these children with learning difficulties have more ability than their parents. These parents are generally bringing up children on benefits with poverty compounding other disadvantage. The school described mentoring for these students with a member of staff chosen by the student.

Identifying and addressing barriers

Many participants felt that there were lots of vulnerable families, including those led by parents with Learning Difficulties and Disabilities, mental health issues and substance misuse issues, but who don't meet criteria for services, which made it all the more important that school opportunities were accessible.

“There needs to be sea change where secondary schools begin to understand differentiation for families.”

The degree of sensitivity and fear that families have about the interventions of social services mean that it is recognised that unmet need in families, and the degree of care given by children in families where a parent is disabled is likely to be under reported.

Inclusive practices would benefit parents who might not meet the legal definition of disabled but who still had access or support needs. Examples include: accessible literature for parents with learning disabilities, which will help parents who have English as a second or additional language and parents with low levels of literacy and numeracy.

Despite the recent addition to school staff, the role of the PSA was described as adding enormous value and being complementary to other pastoral support. It appeared that brief interventions could make a significant difference. Although there will always be parents who need support for longer, the model is to not foster dependence. It didn't appear that there had been any specific training about disabled parents or young carers for PSAs, but the broad general training was considered useful and included how to be inclusive and helpful services and organisations. However the limited capacity of PSAs means that in some schools access to the PSA was by referral from the

school only and the role was not advertised, which means that only families whose needs were known and understood by the school would be referred. Participants felt there was a lack of additional support resources to sign post families to.

Participants felt it was a challenge finding an acceptable supportive tone that wasn't condescending and that it had taken time to get language and formats right in school letters and publications.

It was evident from the responses of many participants that school staff were going out of their way to help or support any family where needs have come to light, beyond anticipatory structures that are set up, but a belief that demand severely exceeds resource availability was an issue for some participants who felt that demand would severely impact on what can be offered.

What schools would like to do

Participants described their ideas and intentions, which indicated a desire to improve inclusive practice and work towards prevention and early intervention. If money were no object schools would appear to want all activities to be accessible and non-threatening and have 100% engagement and attendance and have prevention and early intervention measures in place.

Staff who participated described difficulties knowing how and what to do and who to go to, and that they could do with more support.

Comments from stakeholders

Disabled parents who kindly responded to my request for comments on the questions that I was intending to ask advised that caution be employed when taking on face value school practice as described by school staff, and that it was the evidence that they could put forward that would be the true test of how effective school policy and practice was in this area

"It's all about equality".

They wanted to make it clear that what was described by schools didn't always reflect people's experience. For example one disabled parent had responded to a school's request for volunteers but had never been taken up on it.

It was raised with me when I was undertaking the research that as I had described myself as a disabled parent that school staff might feel the need to be *"on their best behaviour"*.

Similarly, colleagues in the young carers field shared concerns that there was a lack of awareness in this area in secondary schools and limited resource in the statutory and voluntary sectors to work in secondary schools.

“Again think it is fine [the survey] but I think the problem will be identifying some one in secondary schools to interview and who have the remit around inclusion of disabled parents, the reality - most schools have no idea.”

Neither stakeholder interest group were confident that secondary school staff would have a good understanding of disabled parents and their needs

“beyond checking that they have ‘disabled toilets’”.

Policy implications, future research, conclusions and way forward

Policy implications

Whilst there are clear absolute increases in achievement, there are not the same increases in relative achievement (Cabinet Office 2009). In order to close the gap between those that can take full advantage of opportunities, and those families who experience barriers to accessing opportunities the imperative is to increasingly focus on inclusive practices that break down barriers. Robust evaluation and monitoring of impact could ensure that practice in this arena continues to improve.

In relation to considering the relationship between schools and families, there are some key features of good practice, which it may be useful to draw from the social care arena. One of these is that: *“Needs arising from impairment/illness and/or disabling barriers should be addressed before making judgements about parenting capacity”*⁵. This raises the importance of schools responsibilities to act as a point of referral when capacity is being questioned (for example in cases of poor attendance, particularly if prosecution of parents is being considered).

Historically there have been few materials produced by government departments exploring how children’s and adult services can improve outcomes for vulnerable families by working together, but there are some helpful strands, for example the ‘think family’ policy agenda (Cabinet Office 2008) which challenges the traditional policy separation between child and adult services and requires a more holistic approach be taken to understand family-level experiences of disability and related support needs. In the current political framework it is important to ensure these new strands become more universal approaches.

Future research

⁵ SOCIAL CARE INSTITUTE FOR EXCELLENCE (2007) *Helping parents with physical or sensory impairments in their role as parents*

Any further research should involve those with life experience (disabled parents and their children) in understanding any additional needs of disabled parents in relation to supporting their children's education.

It would also be useful to look at early years and primary settings in relation to the experiences of families led by disabled parents as there are a compelling number of studies which describe that the benefits of working with families with young children to engage parents in early learning appear to have long term effects.

Conclusions

There is a sense of pervasive and complex problems, which cluster around communications between parents and schools, which seem to increase at secondary school for many reasons. There are tensions involved in any parent actively engaging with their role in terms of supporting education when their children are at secondary school. The complexities of allowing for developing independence and autonomy that is characteristic of a healthy adolescent transition, whilst providing clear boundaries and supporting development may be compounded in some families where children take on a caring role. In many professional situations colleagues in Children's Services and the education sector say that parents aren't interested, or lose interest when their children reach secondary school age. Whereas parents describe that they find schools, particularly secondary schools impenetrable and teachers, especially secondary school teachers, inaccessible.⁶

This research was intended to work towards resolving these different perspectives and raising awareness about the importance of developing effective ways to foster and maintain channels of communication between secondary schools and disabled parents.

There are legislative supports to ensure equality of access and services. The Equality Act 2010 is key to disabled parents in ensuring their entitlement to access to services for all parents, including those relating to parents' involvement in the education of their children.

Fundamentally, the data indicates that inclusion is a process that is not static and to make the most impact inclusion needs to be embedded in the whole extended school cluster philosophy, across and beyond secondary schools and their feeder schools.

Many studies tend to focus on the 'needs' of disabled parents or the 'needs' of young carers. This research was conceived to get a better understanding of the conditions and qualities that facilitate an inclusive and positive environment, supporting our progression into a fully inclusive society. The following recommendations were based on the findings.

⁶ FRANCIS, K. (2008) Parents and carers have your say report. Norfolk County Council

Updated recommendations 2010

These recommendations highlight positive attitudes towards equality to support higher achievement overall, and favour practices which recognise and build on strengths tailored to individual families needs, addressing all forms of access, including physical, cultural, emotional and intellectual. Many will benefit families when there isn't a disabled parent.

General recommendations

- National and local government should consider drivers and incentives for promoting inclusive practice in relation to equity of provision and addressing any barriers disabled parents and their children experience
- Norfolk's Children's Trust should support and collaborate with the Norfolk Disabled Parents Alliance to enable disabled parents to influence decision making and improve services and develop preventative and early intervention approaches and crisis support for disabled parents
- All schools should be supported to understand the links between school improvement, parental involvement and inclusive practice
- Demographic information about disabled parents should be gathered and used to inform practice and commissioning
- There should be an increase in the capacity of PSAs; investment in prevention and early intervention services and clear referral routes via schools when children and young people's outcomes are jeopardised, but criteria for social care are not met
- Schools should ensure that parents have inclusive and accessible opportunities to influence decision-making in schools
- Other barriers that can compound issues should be addressed, e.g. rural isolation and accessibility for Black, Asian and ethnic minority parents
- The inclusion and accessibility focus on the Norfolk Schools website should be enhanced
- An appendix to the Norfolk Joint Protocol should clarify schools duties

Thematic recommendations

Duties and responsibilities:

- All school governing bodies should ensure that each school has a monitored Single Equality Scheme (SES) and action plan that refers to all members of the school community including parents, and that stakeholders are involved. The scheme should be reviewed at least annually, and the whole school community should be made aware of duties, reasonable adjustments, inclusive services and achievements
- The schools advisory service should regularly audit that each school has a SES and support schools to ensure duties are met
- Local resources should be reviewed and guidance updated annually and the Norfolk schools website kept up to date

Information gathering and sharing:

- There should be a school cluster focus on information collection and sharing, including information sharing and confidentiality policies
- There should be a semi structured interview with all families at transition points offering empowering choices designed specifically to encourage involvement and address any barriers
- Management information systems should be utilised to collect relevant data about family members to ensure schools can differentiate services where necessary to ensure equality of provision

Initiatives:

- Robust evaluation of PSA work should include: client demographics; impact on outcomes; impact on school performance and cost benefit analysis to ensure that the model is appropriately resourced in the future
- Secondary schools should evaluate their practice and have ongoing development plans for inclusive initiatives
- Ensure any work done with vulnerable students includes a holistic family focus
- Ensure staff engaging with families to implement the Common Assessment Framework are fully aware of inclusion issues, adult services role and the Norfolk Joint Protocol
- Embed inclusive practice throughout the schools development plan, teaching and learning strategy, school policies and workforce development plan
- Draw on the experience and knowledge of school nurses to inform policy and practice

Inclusive opportunities and accessibility:

- Accessible support for parents to enable them to support their child's education at home should be provided and adjustments should be made to address any particular barriers, eg home school dictaphones
- Continue to review and ensure access issues are addressed in all settings, for example: ensure parking spaces are reserved for disabled people; documents should follow accessibility guidelines; meetings

need to be accessible and any planning and building work should take access into account

- Offer additional support: accessible family learning opportunities; homework clubs to supervise homework when parents aren't in a position to and accessible, inclusive forums for parents to meet each other
- Audit school staff for any relevant skills they may have e.g. signing, and let parents know which staff have these relevant skills

Relationships with parents and carers:

- The understanding of parents being their child's first and most enduring educator and the sense of parents as partners should inform the whole school ethos
- Good relationships with all parents should be addressed through school improvement
- All opportunities to interact with parents should be reviewed for barriers and accessibility and any stereotypes or assumptions (for example 'parents aren't interested') put to one side

Communications:

- Guidance and templates for inclusive communications planning should be made available to all schools
- All communications routes should be reviewed for accessibility
- Schools should develop processes to ensure each family has been asked about the best way to communicate with them
- Form tutors should follow up with all families who do not attend opportunities to discuss their child's progress with teachers

Training:

- PSA (and other staff) training should include disabled parents and their children and the Norfolk Joint Protocol
- Social model disability awareness and equalities training should be made available
- There should be good practice sharing sessions for cross phase school staff (including special schools) around equality, inclusion and adult disability
- Evaluation and dissemination of effective methods and good practice should be planned

Needs analysis, views and voice:

- There should be further involvement of disabled parents and their children in planning and decision making, policy development, training and monitoring
- A Consultation and Involvement Toolkit should be developed for schools

Curriculum:

- The curriculum should be reviewed to ensure that there are sections on special educational needs, adult disability and young carers, all from a social disability perspective.

Young carers:

- Issues related to identifying and supporting disabled parents, including in their parenting role and the challenges all families with disabled parents face should increasingly inform the young carers policy framework
- All schools should have a young carers policy and this should include consideration of referral routes for all family members
- Schools should have a named person responsible for young carers within the school and that the responsible staff member should have the necessary knowledge and information to advise other members of staff, be aware of the Norfolk Joint Protocol and adult services and also have contact with young carers workers for specialist support
- Young carers groups should have a holistic approach to supporting the whole family and be advertised widely

Evidence that inclusive practices are effective:

- Schools should be supported to develop measures for effectiveness that include the views of disabled parents

Way forward

The low cost of many of the inclusive interventions that are designed to increase diverse parents' involvement in their children's education at secondary phase described by participants seems to indicate that working in a more inclusive way is likely to be an efficient way to improve educational outcomes. This is particularly relevant in the present economic climate.

The focus on supporting parents in the Norfolk Children and Young People's Plan provides a framework for recommendations to be made in appropriate arenas to promote good practices in relation to supporting parents to be involved in their children's education, If schools continue to engage with the Children's Trust arrangements.

This structural backdrop along with continuing to work with Norfolk Disabled Parents Alliance is fundamental to both measuring and achieving progress in addressing barriers disabled parents experience in Norfolk.

Many thanks to disabled parents and staff across agencies and schools in Norfolk who generously shared their views and experiences.