

# Family Services Survey

*Annex to A positive approach to a parenting:  
Part 2 of the Independent Family Review*

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December 2022

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## Executive Summary

- There is large regional variation in take-up of family services as well as variation in take-up by parent characteristic. Parents who stay at home are the most likely to access no services at all – 46% compared to 19% of those in full time jobs and 24% of those in part time jobs. Women are more likely to use playgroup services than men (45% of mothers compared to 37% of fathers).
- Findings show services are delivered by a mix of charities, businesses and local government. Charities are the most common method of delivering support groups while the local government was most common for antenatal and parenting courses.
- Friends and family members were the most common source of information for antenatal courses and parenting courses while health visitors were most common for playgroup and support groups. Rarely did parents find information about relevant services from their local authority website.
- Among parents who didn't access specific services, the most common reason provided was not needing the services. For play groups, the most common barrier after not needing the service, was not feeling like they would fit in with the other parents (19% of parents said not fitting in was the reason why they did not access playgroups).

## **1. Introduction**

The Children's Commissioner for England, Dame Rachel de Souza, has been asked by the Government to undertake an independent review into support for families, following on from a recommendation of the 'Commission on Race and Ethnic Disparities'.

As part of the Review, the Children's Commissioner commissioned a nationally representative survey of 3,000 parents with children aged 0-17 in England on Family Services (FSS). The survey was designed to understand what services they currently use, how they heard about them and what barriers, if any, prevented them from accessing services. In this report the Children's Commissioner's Office (CCo) analyses responses at an aggregate level and how these responses vary according to respondent demographics and geographic region. All findings in this report are from this survey.

## 2. Methodology

This report presents key findings from a nationally representative survey of 3,000 parents with children aged 0-17 across England commissioned by the Children's Commissioner for England as part of the Family Review.

This Family Services Survey (FSS) is a follow up to the Family Life Survey (FLS) conducted in March 2022 and was carried out by 72Point's research division OnePoll. Fieldwork was conducted over 7-8 working days in June 2022. Sample quotas were designed to be representative of the England population by parent's age and gender, parental employment status and household region. The sample also includes a booster of 200 parents from an ethnic minority background to ensure sufficient sample size for reporting. To ensure that data is representative of the England, weights are generated using estimates of the population of parents from the Annual Population Survey. This allows findings to be scaled up to the whole population (see Table S1 for a demographic breakdown).

The CCo asked all adults questions about household composition, region, demographics such as age and gender, and their economic circumstances. The office then asked parents further questions about family services they accessed including playgroups, children's centres, support groups and parenting courses.

All parents included in this sample had at least one living with them at their main address that were aged between birth and 17 years old at the time of the survey (June 2022). This section is split into four broad themes, mirroring the key questions outlined above:

- Which family services do parents use?
- How did parents hear about the family services offered?
- Who was responsible for delivering the services that parents could access?
- What are the reasons parents don't access services?

### 3. Which family services do parents use?

Of the parents surveyed, 61% accessed at least one of health visitor services, playgroups, children's centres, online support, parenting course, support group, or an antenatal course since July 2021. Of these, the most common were additional health visitor services (42%), playgroups (42%), children's centres (41%), and online support services (32%). This leaves 39% of parents who have accessed no services at all in the last year.

For parents of infants (under age 1), 60% access playgroups and 57% use additional health visitor services – higher than the average of parents with children aged 5 and under. Parents of children under 1 are less likely to access support services such as support groups and online support (see table below).

**Table 3.1. Parental take-up of different family service types**

Service	Percentage (%)	Percentage (%) - youngest child under 1
Additional health visitor service <sup>1*</sup>	42	57
Playgroup*	42	60
Children's centre*	41	39
Online support	32	16
Parenting course	22	12
Support group	22	9
Antenatal course	8	29
Accessed no services	39	17

\* Filtered take-up rates to parents with children age 5

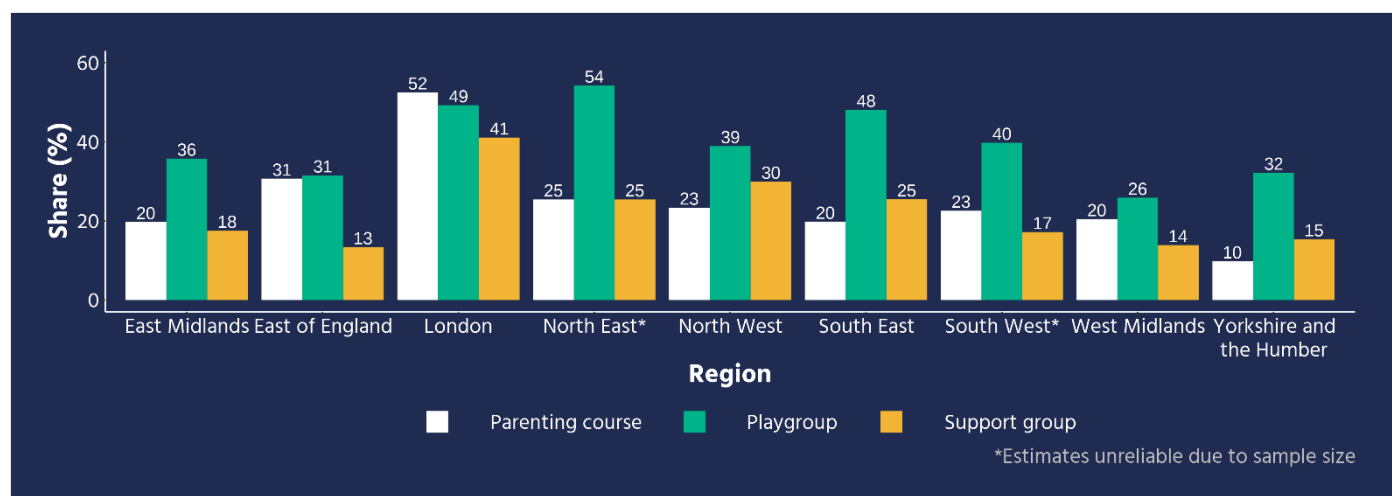
<sup>1</sup> Based on whether the respondent reports accessing health visitor services not including the regular health visitor checks? (For example, calling your health visitor with a question)

### 3.1. Access by region

Availability of services can vary significantly based on how each area decides to configure and prioritise service delivery and spending. While this can mean that local support is provided where it is most needed, it can also create a 'post code lottery' of support where families living in certain areas have less access to available services.

Figure 1 shows the variation in take-up rates by region for parenting courses, playgroups and support groups. There was notable variation around the country when it came to accessing services – for example, parents in London are more likely to take-up parenting courses, playgroups and support groups than parents in West Midlands. While these figures don't show whether variation in take-up rates of services is due to differences in demand for services or supply of services, they demonstrate that families in some areas of the country are much less likely to be getting help (see Figure 1).

**Figure 1. Regional variation in share of parents with a child age 5 and under accessing services**



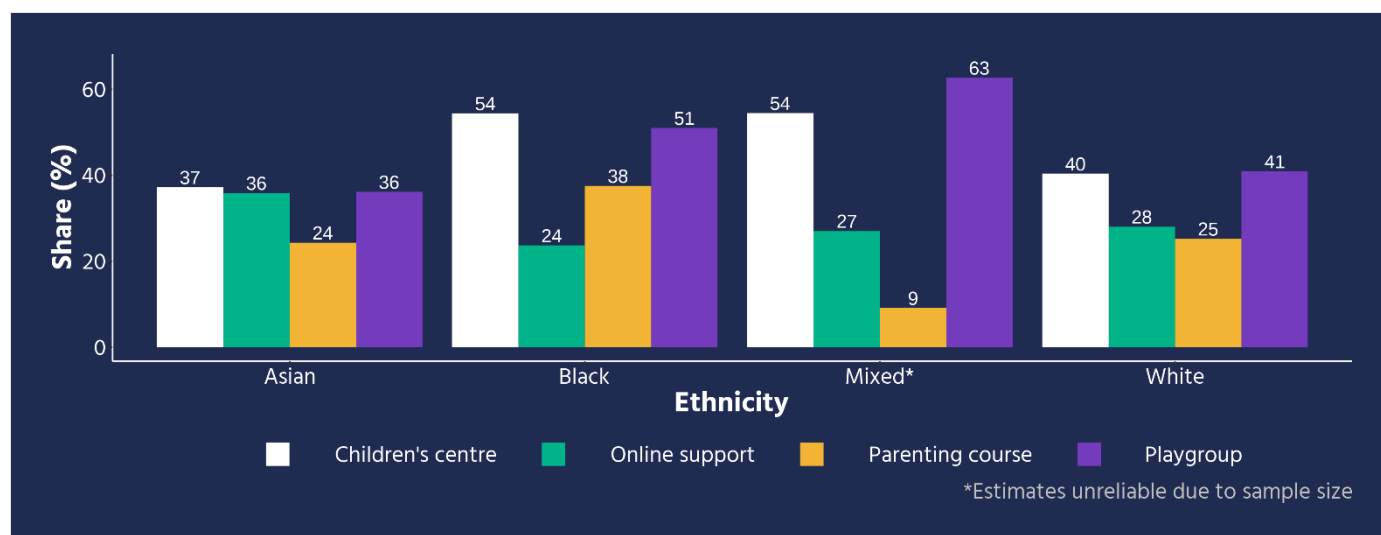
### 3.2. Access by ethnic group

Ethnicity and culture can have a large influence on how accessing help could be perceived. As expressed by practitioners and parents alike during interviews for the Family Review, some parents may feel like they should be enough without needing external help and fear being seen as less than by their communities if they do. Regardless of ethnic group, the most commonly accessed family services are playgroups and children's centres (see Figure 2).

Black parents are more likely than White and Asian parents to visit a children's centre - 54% of parents from Black backgrounds mention visiting a centre in the past year compared to 37% of Asian parents and 40% of White parents. This is also the case for playgroup services where 51% of Black parents state that they have been to a playgroup compared to 36% and 41% of Asian and White parents respectively.

Asian parents are more likely to turn to online support than parents of other ethnic groups. Thirty-six percent of Asian parents accessed online support (compared to 24% of Black and 28% of White parents). They are, however, less likely to join playgroups when compared to parents of other ethnic groups – only 36% of Asian parents compared to 51% of Black parents and 41% of White parents.

**Figure 2. Share of parents with a child age 5 and under accessing services by ethnicity**



### 3.3. Access by age of youngest child

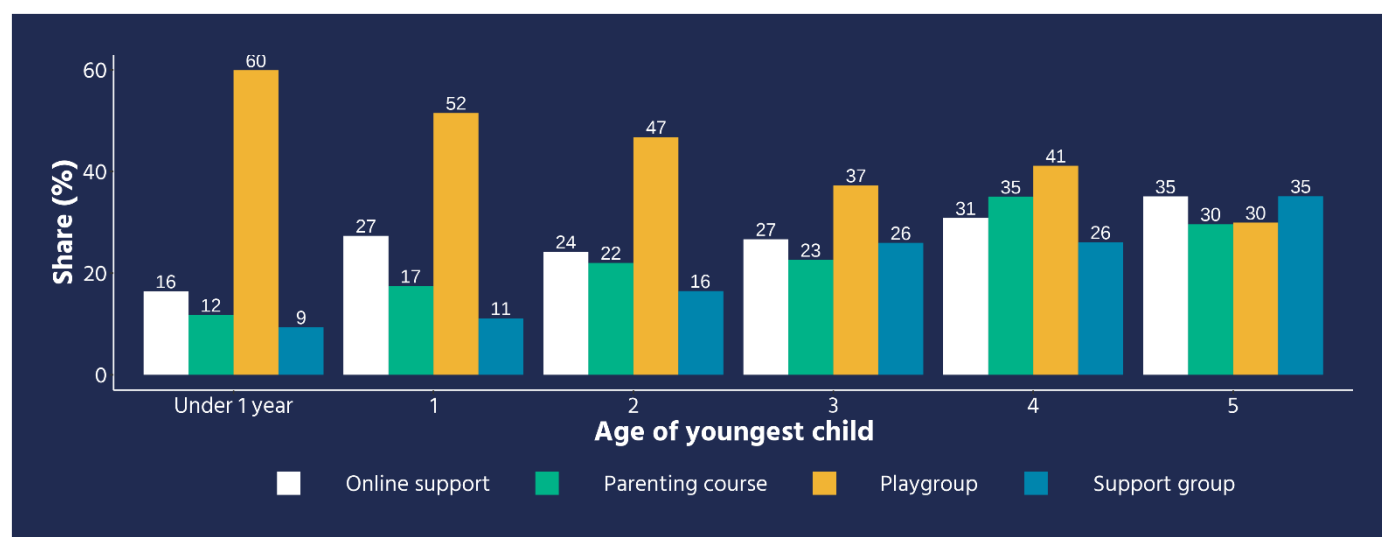
The age of a parent's child (or children) can play a major role in determining which services families access. When children are young, playgroups are the most commonly accessed family service type. As children age, parents access playgroup services less frequently and begin to use other services more. Sixty percent of those with children under one year old use a playgroup service and this falls to 30% of those with five-year-olds.



Take-up of parenting courses and support groups starts low with a respective 12% and 9% of parents with children under the age of one accessing such services. This gradually rises to 30% and 35% of parents with children who are five years old.

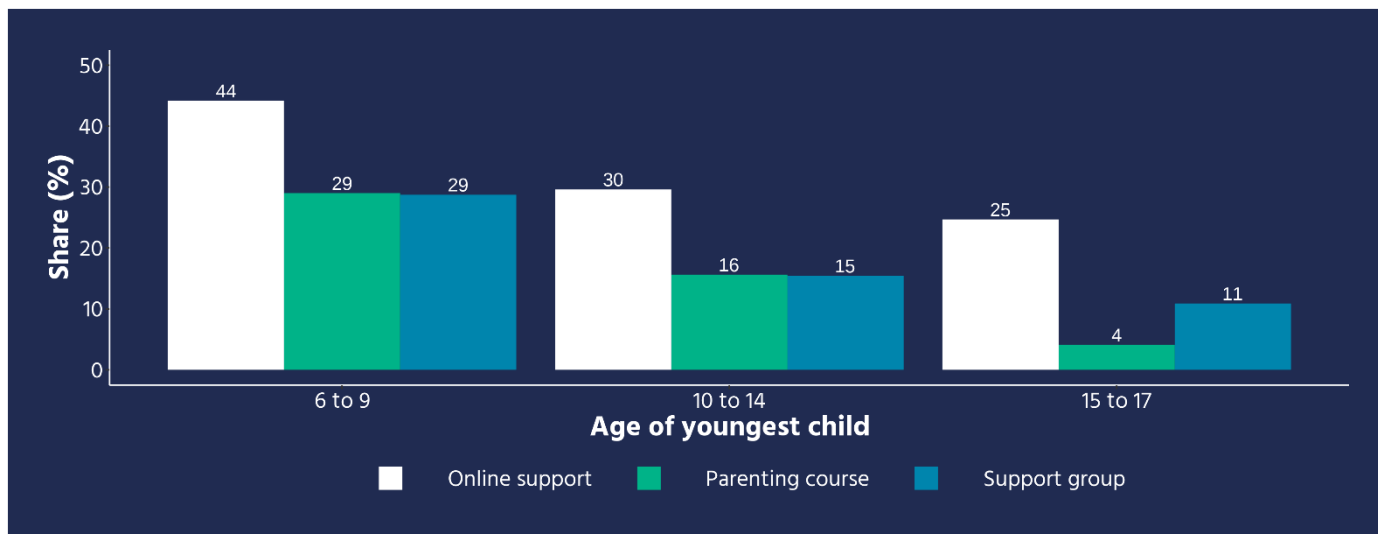
Parents using online support services gradually increases over time from 16% of parents with children under one to 35% of those with five year olds (see Figure 3).

**Figure 3. Share of parents with a child age 5 and under accessing services by child age**



For parents whose youngest children are above six years old, online support is the most common form of service accessed is online support (see figure below). Use of parenting courses and playgroups decreases as the age of their youngest child increases. Access of support group services also falls with child age but not by as much as the playgroups and parenting courses.

**Figure 4. Share of parents with a child age 6 and above accessing services by child age group**



### 3.4. Access by gender

As many women mentioned in interviews for the Family Review, mothers are often assumed to be the primary caregivers of children in families from many cultures. This means that services may cater towards mothers more so than fathers. Services that welcome fathers may be sparse or poorly advertised, creating a potential gap as gender roles loosen over time.

For both genders, playgroups were the most commonly accessed family service type. Women were more likely to use playgroup services than men (45% of mothers compared to 37% of fathers).

### 3.5. Access by employment

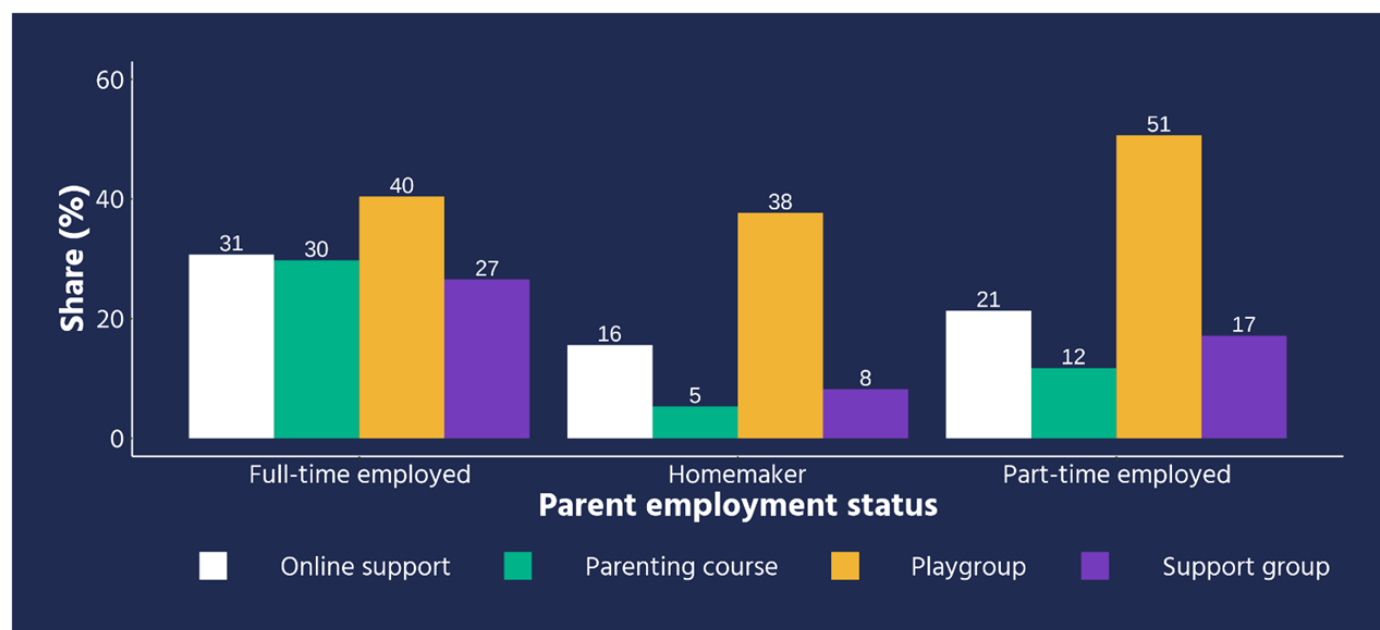
Whether a parent works, both part-time or full-time, can have a major influence on the type of services the parent needs and can access due to existing work commitments. For example, a single parent who is employed full-time may need more assistance as their time and resources are split between work and childcare.

This is reflected in the survey where, apart from playgroups, those who are in full time employment are more likely to have used all kinds of family service. In particular, they are far more likely to attend parenting courses than both homemakers or part time employees (30% compared to 5% of homemakers and 12% of part time workers. Regarding playgroups, those who are in part-time work were more likely than both homemakers and full-time employees to join playgroups (51% compared

to 38% and 40% respectively), as shown in Figure 5.

Parents who stay at home are the most likely to access no services at all – 46% compared to 19% of those in full time jobs and 24% of those in part time jobs.

**Figure 5. Share of parents with a child age 5 and under accessing services by parent employment status**



## 4. How did parents hear about family services?

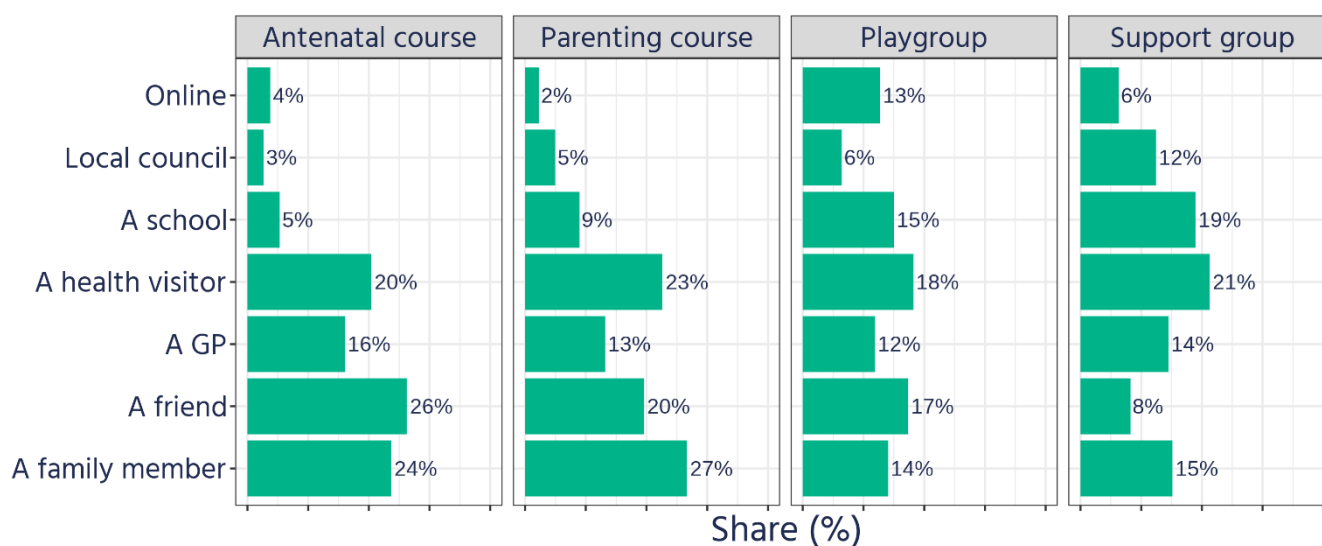
Parents hear about courses and groups through a number of channels. Where they most commonly hear about certain type of group depends on the nature of the service itself.

Parents report that health visitors were a common source of information regarding all service types surveyed such as antenatal/parenting courses, playgroups and support groups. For both playgroups and support groups, NHS health visitors were the number one cited source with 18% and 21% of parents saying so respectively.

Other common sources include people closer to home such as friends and family members. In particular, 26% of parents who took an antenatal course heard about it from their friend and 24% from a family member (see Figure 6).

Schools were also mentioned as a good source of information for various groups where 19% of parents heard about a support group and 15% heard about a playgroup through their local school.

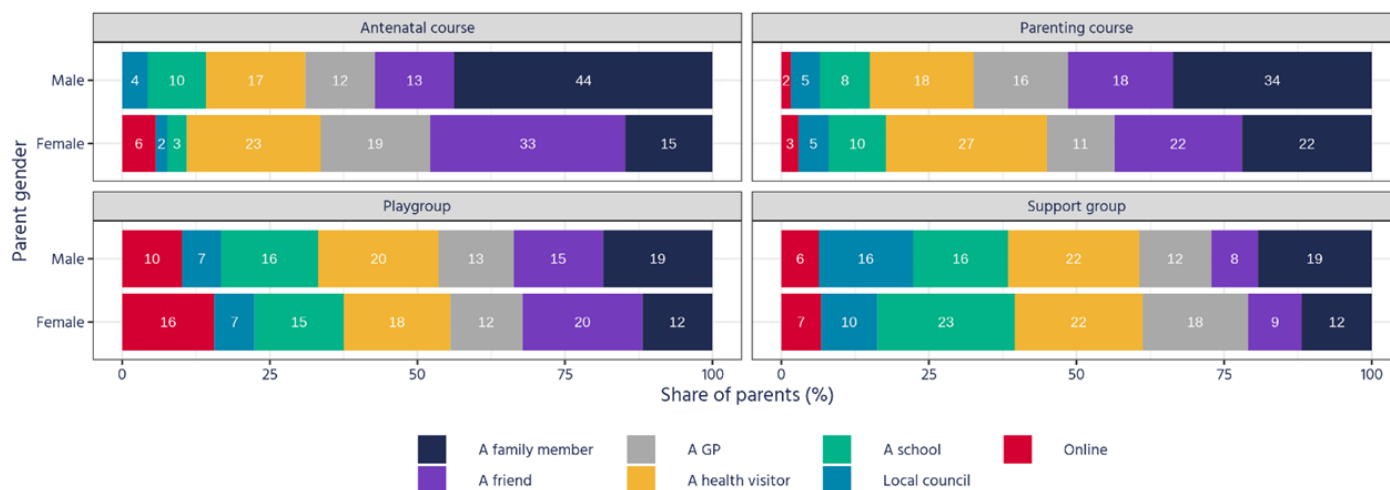
**Figure 6. Among parents who accessed a specific service, where did they hear about it?**



## 4.1. Source of information by gender

Overall, fathers were more likely than mothers to hear about services from family members. This is especially the case for courses where a large proportion of men found out about antenatal (44%) and parenting courses (34%) from relatives (compared to 15% and 22% of women respectively). Mothers, on the other hand, were more likely than fathers to find out about family services from their friends. This includes playgroups, antenatal and parenting courses.

**Figure 7. How parents heard about family services by parent gender**



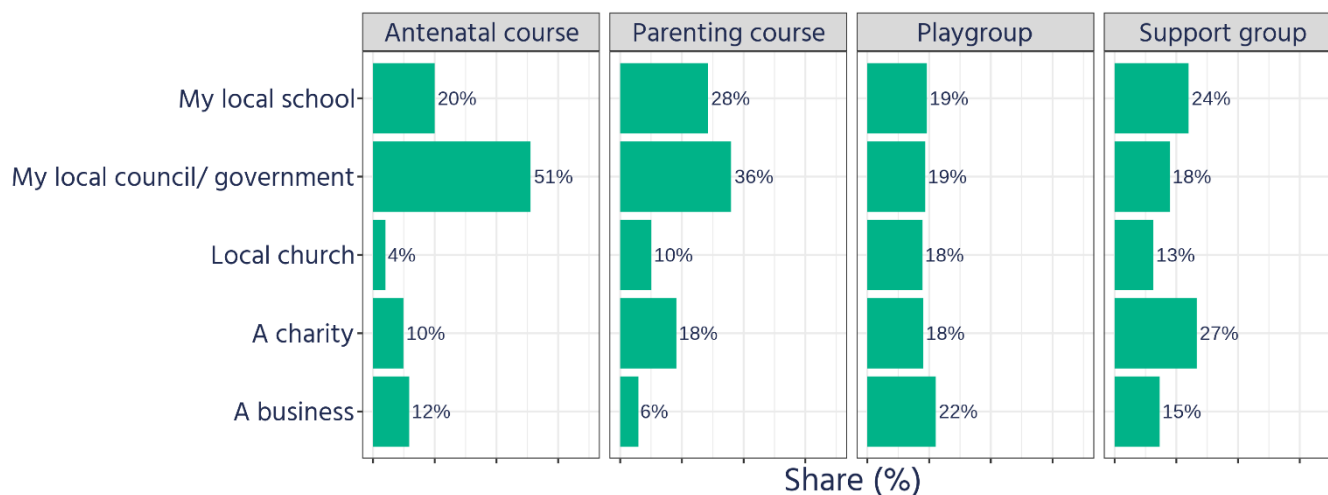
## 5. Delivery of family services

In England, family services are delivered by a number of organisations including non-profits, local councils, schools, corporations and churches. Of these, schools, councils and charities were the most common providers mentioned by parents in the survey regardless of service type.

Antenatal and parenting courses tend to be provided by local governments and schools with half (51%) of parents saying that they accessed an antenatal course delivered by their local council/government (see Figure 8). In contrast, government organisations are less involved in providing playgroups and support groups.

Playgroups were provided by a more diverse selection of organisations from businesses (22%), charities (18%), schools (19%) and local churches (18%). Support groups on the other hand, were most likely to have been provided by charities (27%) and schools (24%).

**Figure 8. Organisations providing the family services accessed by service type**



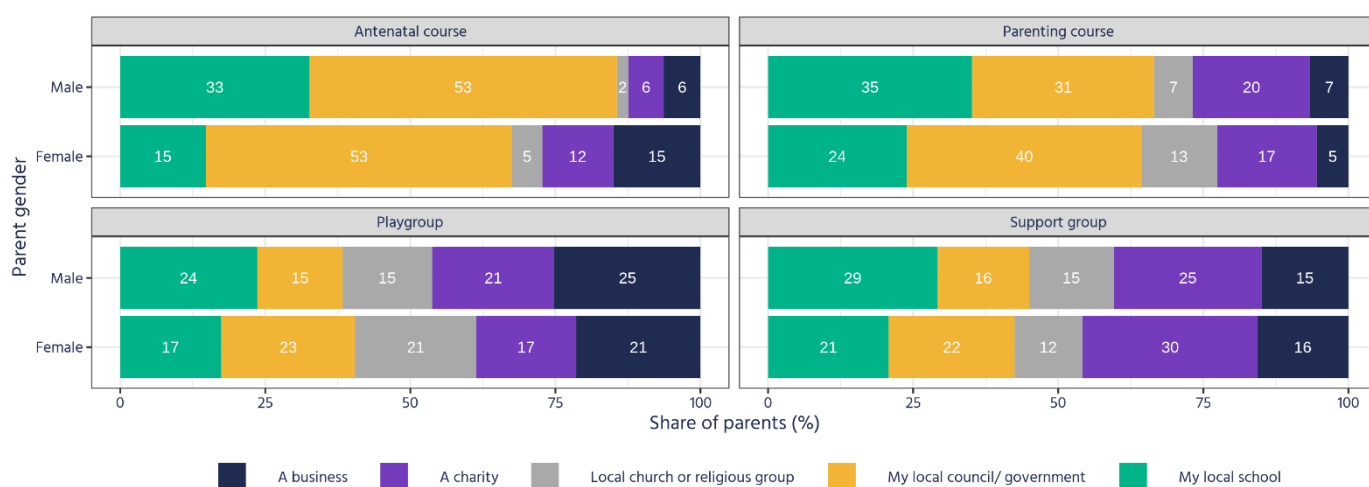
### 5.1. Delivery of service by gender

Regardless of parent gender, the majority of antenatal and parenting courses were delivered by local councils and schools while support groups were most likely to be provided by charities. The provision of playgroups was more equally divided amongst different types of service providers (see

Figure 9).

Among parents accessing family services, fathers were generally more likely than mothers to access family services provided through schools while mothers were more likely to access services provided through local councils including playgroups (23% compared to 15%), support groups (22% compared to 16%) and parenting courses (40% compared to 15%).

**Figure 9. What organisation delivered the family services by parent gender**

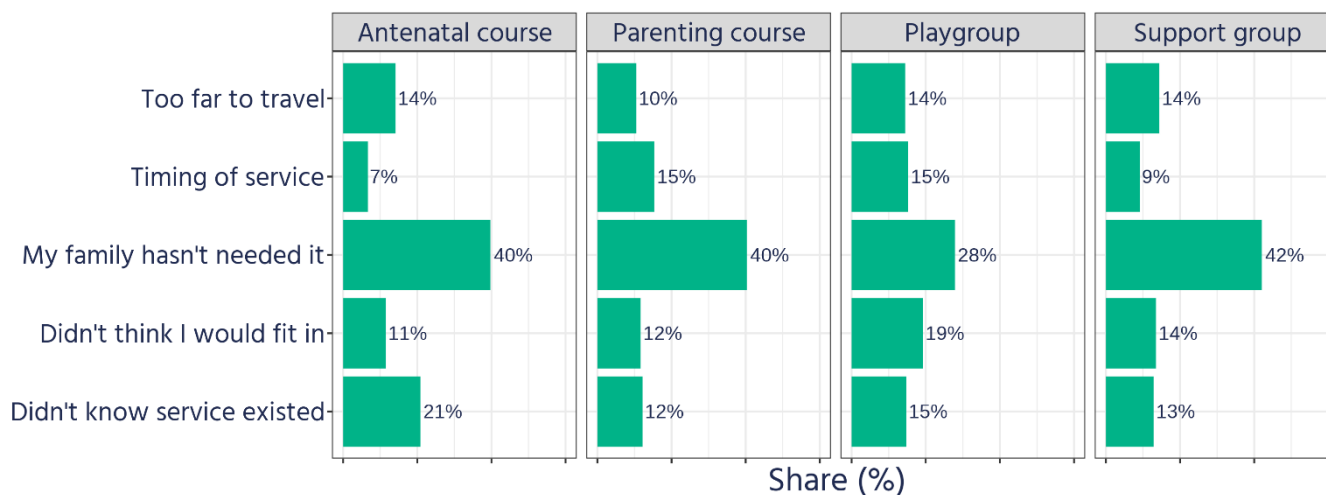


## 6. What are the reasons parents don't access services?

Parents who did not access specific services were asked reasons for not doing so. The CCo survey provided a list of potential barriers to access including travel distance, timing, awareness of the service and whether or not they felt they would fit in. Across all service types, the most cited reason for not using a service was not needing the service (see Figure 10). In cases where parents were aware of the service but did not access it, the most commonly listed barriers were travel distance (14% of parents who did not attend an antenatal course) and timing (15% of parents who did not attend parenting courses).

Regarding services that are more social in nature, for example play groups, the most common barrier after not needing the service, was feeling like they would not fit in with the other parents. This was especially an issue with playgroups where 19% of parents said not fitting in was the reason why they did not access the service.

**Figure 10. Reasons for not accessing a specific service (parents with children of all ages)**



### 6.1. Reasons for not accessing a service by region

Whatever the region, the most common reason for not accessing antenatal courses, parenting courses and support groups was not needing the service. Parents in London were less likely to say that their family not needing the service was a barrier. Instead, they were more likely to cite other barriers such as travel distance, schedule clashes and not knowing the service existed.



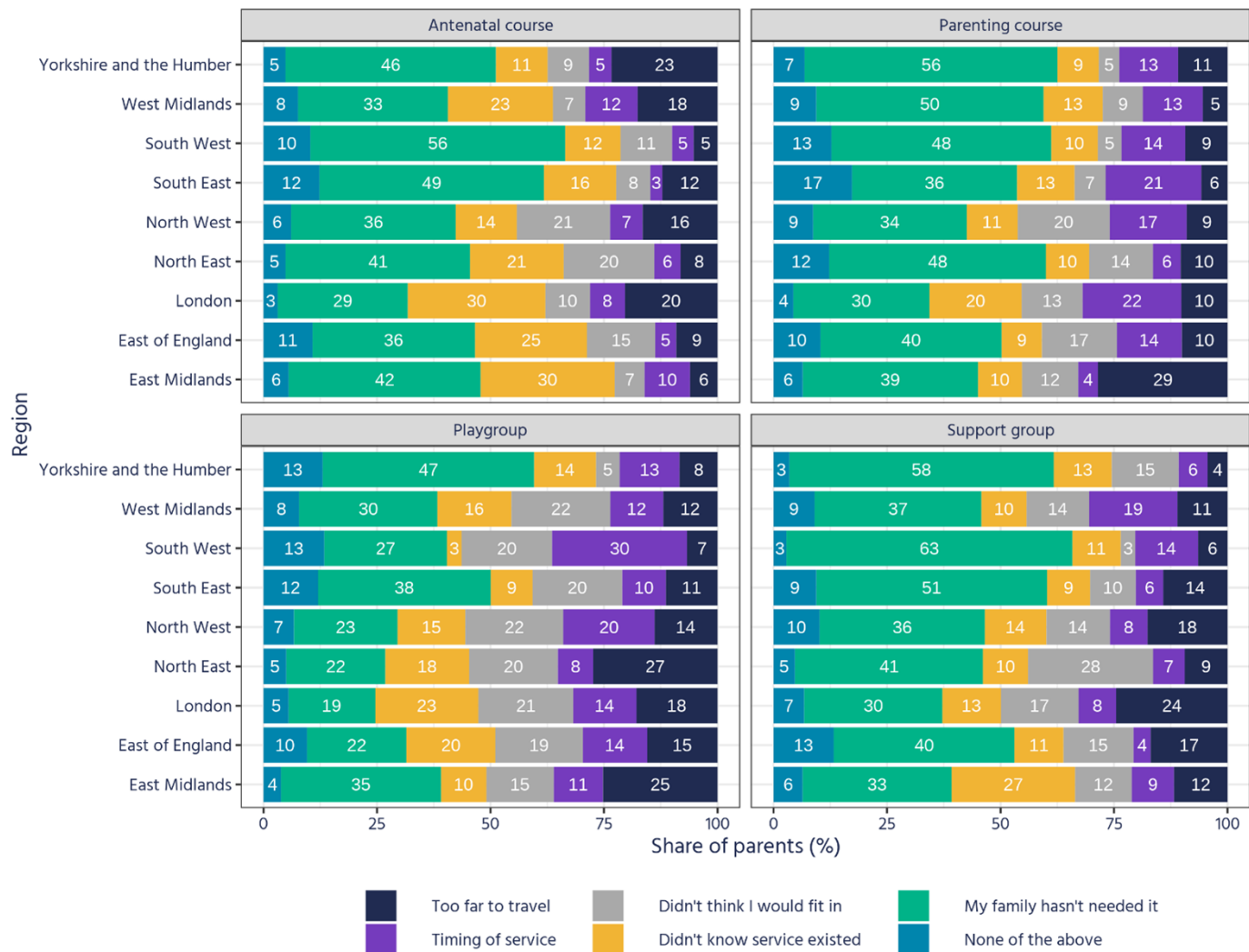
For playgroup services, the most consistent barrier across regions was parents feeling like they would not fit in. About 20% of parents in all regions but Yorkshire and the Humber and the East Midlands selected this as their main barrier against accessing playgroups. In contrast, only 5% of parents in Yorkshire and the Humber said so. Instead, they were far more likely to say that their family did not need playgroup services.

Fitting in aside, travel distance was frequently raised as a barrier in accessing playgroups especially in the North East and East Midlands. Time clashes with existing work and family schedules was most commonly mentioned by parents in the South West and North West.

Lack of awareness about the family services available emerged as an issue in many regions. This problem was especially severe for antenatal courses where 30% of the parents in London and the East Midlands were unaware of such services. Those in the East Midlands were also particularly unaware of support groups - 27% of parents compared to a range of 10-14% in other regions.

Parents in the North East and North West of England were most likely to feel that they would not fit in at both antenatal and parenting courses, suggesting that more work may need to be done making these courses seem more accessible in certain areas.

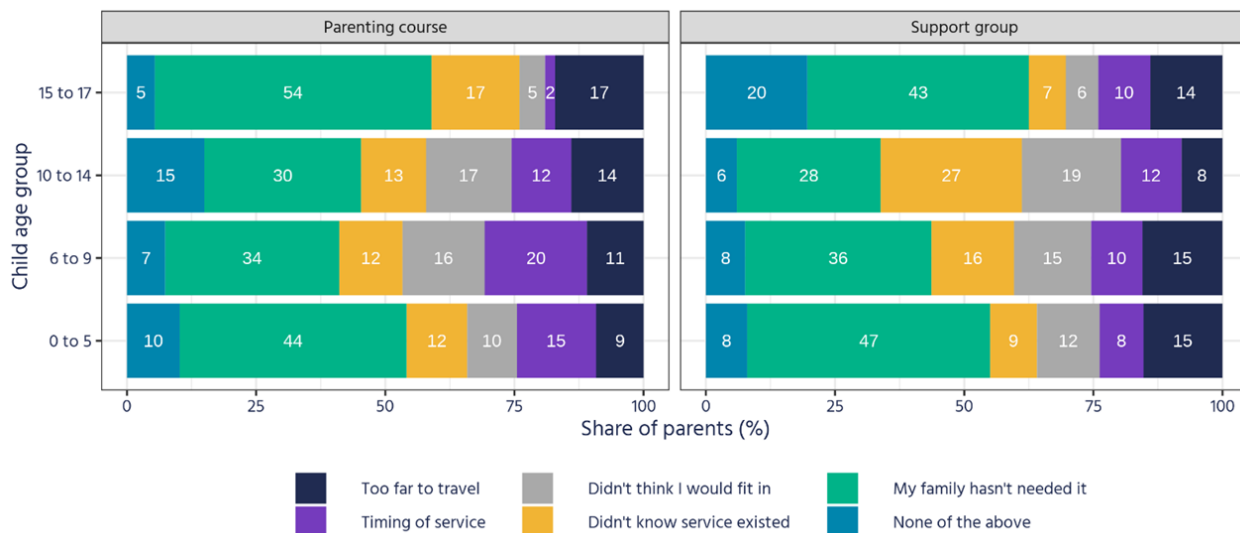
**Figure 11. Reasons for not accessing a specific service by region**



## 6.2. Reasons for not accessing a service by age of child

Among parents not accessing specific family services, parents with children who are young (aged 0 to 5) or in their late teens (aged 15 to 17) are most likely to say they do not need parenting courses and support groups. Parents with children who are aged 10 to 14 were more likely to think they would not fit in at parenting courses when compared to those with children who are young (aged 0 to 5) – 17% compared to 10%.

**Figure 12. Reasons for not accessing a specific service by age of youngest child**



## 6.2. Reasons for not accessing a service by employment status

Across the board, parents not working were the most likely group to say they did not need any family service (see Figure 13).

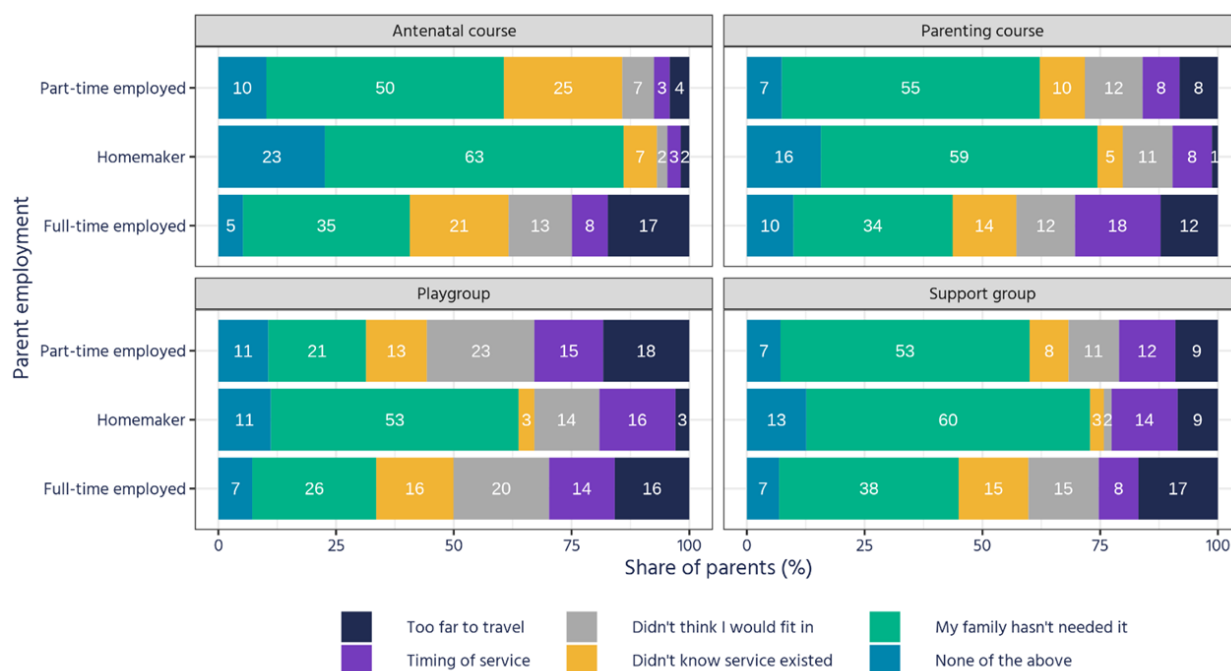
Generally, parents who worked were more likely than parents not working to find services too far to travel to or that clashed with existing work or other commitments (except for support groups). To illustrate, 30% of full-time parents had distance or service timing issues – much higher than 9% of homemakers and 16% of part-time parents.

Many employed (both full-time and part-time) parents were completely unaware of the services available to them, much higher than the rates for homemakers. This was particularly concerning for antenatal courses – where 25% of full-time and 21% of part-time parents did not know such courses were available compared to just 7% of homemakers.

Homemakers were less likely to think they would not fit in with other parents at family services than parents who work. This is especially the case for services that are more social in nature such as playgroups and support groups. Twenty-three percent of parents who work part-time and 20% of those who work full-time worry about not fitting in at playgroups, much higher than 14% of homemakers.

These main barriers suggest that more improvements could be made in the availability (both timing and location) and the perception/accessibility of such services.

**Figure 13. Reasons for not accessing a specific service by employment status**



### 6.3. Reasons for not accessing a service by gender

Among parents not accessing specific services, fathers were more likely than mothers to cite the timing of service as a reason for not taking it up. For parenting courses, 20% of fathers (compared to 12% of mothers) who had not accessed a course listed the timing as a barrier.

## 7. Conclusion

This nationally representative survey of 3,000 parents in England aims to showcase how parents use family services. These findings show that services are delivered by a mix of charities, businesses and local government. These results also highlight that there is large regional variation in the take up of services and some parents cited barriers to accessing services such as distance and time clashes. Another common barrier was not feeling like they would fit in with the other parents – suggesting that more needs to be done in improving the availability and perception of who ‘belongs’ to various services.

## Appendix

**Table S1. Descriptive statistics of parents in sample (n=3,000)**

Socio-demographic variables	Unweighted sample size (n)	Weighted sample size (n)	Percentage of weighted sample (%)
<i>Responding parent age group</i>			
18-24	406	51	2
25-34	698	713	24
35-44	1,011	1,215	41
45-54	577	845	28
55-64	213	147	5
65+	76	11	<1
<i>Responding parent gender</i>			
Female	1,720	1,637	55
Male	1,261	1,344	45
<i>Primary parent ethnic group</i>			
Asian	99	123	4
Black	58	51	2
Mixed	46	60	2
Other	8	8	<1
White	2,770	2,739	92
<i>Household region</i>			
East Midlands	253	260	9
East of England	259	340	11
London	641	485	16
North East	118	131	4
North West	354	370	12
South East	455	507	17
South West	216	291	10
West Midlands	421	308	10

Yorkshire and the Humber	264	290	10
<i>Number of children</i>			
1	674	793	27
2	1,229	1,230	41
3	816	774	26
4+	262	184	6
<i>Primary parent employment status</i>			
Full-time employed	2,190	2,116	71
Homemaker	178	188	6
Part-time employed	433	468	16
Retired	17	20	<1
Self-employed	76	93	3
Student	25	28	1
Unemployed	62	67	2

*Note: The sample is weighted to be nationally representative of parents by age, gender and household region. National population estimates for age, gender and region of parents are calculated using the [Annual Population Survey – Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk).*



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