Self-advocacy and supported learning for mothers with learning difficulties

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Abstract: This paper describes the work of the Supported Learning Project (SLP). The SLP was a DfEE ACLF-funded programme designed to provide personal support and development in self-advocacy to mothers with learning difficulties. The authors provide an account of the project, an overview of the learning gains made by the mothers and the obstacles to progress they encountered, and an evaluation of the project's success in achieving its intended aims. The paper concludes with a discussion of the transferable lessons that emerged from working with this hard-to-reach group of excluded mothers.

Support for parents with learning difficulties is officially acknowledged to be 'patchy and undeveloped' (Department of Health, 2001). A recent survey of current services in central Nottinghamshire, for example, reported that most were 'rated as only adequate or poor in terms of quality and access' by practitioners (Nicholson, 1997). The full extent of the support gap such

families face is now well documented (Booth & Booth, 2001). Moreover, the barriers to service delivery are known to be primarily system-centred rather than family-centred (Kidd Webster, 1988). These barriers derive from two sources. First, 'management arrangements and systems' that 'hinder the provision of services' (Social Services Inspectorate, 1999d). Chief among these are too much rigidity across organisational boundaries, too little co-ordination across divisions, lack of budgetary flexibility, fragmentation of roles and responsibilities, the absence of common recording systems with little or no cross-referencing, no commonly agreed eligibility criteria, and inadequate monitoring and review processes (see also Social Services Inspectorate, 1998; 1999a; 1999b; 1999c; 1999e; 1999f). Second, a 'professional knows best' culture that gives only token acknowledgement to users' views (Social Services Inspectorate, 1999d). This model, of the professional as trained expert, sits uncomfortably alongside the reality observed by the Social Services Inspectorate of 'staff who were insufficiently knowledgeable' about 'what specialist assistance and resources were available and how they could be accessed' to enable someone with a learning difficulty to succeed as a parent (Social Services Inspectorate, 1999d). The combined effects of these service failures show themselves in various forms of system abuse (1998a, chapter 9; Booth & Booth, 1998b) that undermine parental competence, harm children and threaten family integrity - as instanced by the SSI finding that crucial decisions about the removal of

children from their parents are 'being made on inappropriate or inadequate information' because staff lack the necessary skills (Goodinge, 2000, para. 6.9).

Meanwhile, around the country, a few innovative schemes, mainly but not exclusively outside the statutory sector, have begun to explore new ways of supporting parents that look beyond a 'professional caring' approach, or what Heighway (1992) calls the 'deficit model of service delivery', in which a professional comes to the rescue of a struggling family. Key examples here include the Special Parenting Service in Truro, Cornwall (McGaw, 1993; Campion, 1994); the Exeter Parenting Service (Young, Young, & Ford, 1997); Parents Together in Sheffield (Booth & Booth, 1998c); The Crowley House Families Project run by Circles Network in Bristol[1]; the Parents Support Service provided by Lambeth Mencap[2]; the Parent Support Service organised by Warley Leisure and Enabling Services[3]; and the Elfrida Rathbone Siren Project[4] (Whittaker, 1993). Many of these projects, explicitly or unwittingly, have built on ideas whose origins can be traced back to pioneering initiatives in the United States (Ullmer, Kidd Webster, & McManus, 1991; Ullmer

[1] For further information contact Circles Network, Pamwell House, 160 Pennywell Road, Upper Easton, Bristol BS5 0TX. See also: www.circlesnetwork.org.uk
[2] For further information contact Lambeth Mencap, 256 Brixton Hill, London SW2 1HF.
[3] For further information contact Warley Leisure and Enabling Services, Rounds Green Methodist Church Buildings, Newbury Lane, Oldbury, West Midlands B69 1HE.
[4] For further information contact Elfrida Rathbone Centre, 34 Islington Park Street, London N1 1PX.

Liamba, 2000a), particularly under the leadership of the Wisconsin Council on Developmental Disabilities[5] (Booth & Booth, 1996). Four such tenets help to differentiate their approach from that of mainstream services:

- First, a belief that parents can succeed with the right kind of support - as against the widespread 'presumption of incompetence' (Booth & Booth, 1993) and the resulting 'expectation of failure' (Watkins, 1995) found among generic service providers.
- Second, a recognition of the importance of advocacy support for parents both as a defence against the risks of system abuse and as a leaven for their self-esteem. Nicholson (1997) found that advocacy support for parents was rated as important by professionals but poor in terms of both quality and access.
- Third, an understanding of the value and place of specialist services. Parents are known to face difficulties, including ostracism, in fitting into open groups and to be more comfortable and receptive in settings made up of people with whom they can identify (Canterbury Partnership Project, 1999; Ely, Wilson, & Phillips, 1998; McGaw, 2000).
- Fourth, a readiness to learn from the parents. There is 'a tendency to try to fit them to our methods' when really they 'themselves are

[5] For a list of publications emanating from the WCDD Supported Parenting Program and an order form go to http://www.wcdd.org

> the best teachers of what their needs are and how we can meet them' (Kidd Webster & Ullmer, no date). Polly Snodgrass speaks with the authority of many years experience in the supported parenting field when she acknowledges that all the good ideas have come from the parents themselves: 'They have taught us everything we need to know about what they need and how they function best and what would help the most.' (Ullmer Liamba, 2000b)

This paper describes the work of one such specialist project for mothers with learning difficulties, built on these principles, and considers the wider lessons that were learned from the women who took part.

The Supported Learning Project

The Supported Learning Project (SLP) was a joint venture between the University of Sheffield and Sheffield Women's Cultural Club[6]. It was funded by the DfEE under the Adult and Community Learning Fund (ACLF) and ran from September 1999 to August 2001. The ACLF[7] was 'born out of the Government's belief in the power of learning to enhance the lives of

[6] See http://www.workstation.org.uk/WCLUB for further information about SWCC. The SLP was based in the SWCC premises in Sheffield.
[7] For further information about the Adult and Community Learning Fund see http://www.lifelonglearning.co.uk/aclf/

individuals, their families and communities' in order to carry forward the ambitions outlined in the green paper on *The Learning Age* (DfEE, 1998). One of the key aims of the Fund was to open up access by taking learning to the people who are hardest to reach in order to improve their basic skills, build human capital and promote active citizenship.

The Supported Learning Project was set up to provide personal support and development in self-advocacy to mothers with learning difficulties in order to support them in their parenting and in meeting the needs of their children.

The Government's consultation document on *Supporting Families* (The Home Office, 1998) acknowledges the 'need to do more to provide help to parents with the difficult job of raising children throughout their childhood and adolescence', and points to better parenting education as an important means of supporting parents. The SLP aimed to address this challenge in respect of this excluded group of mums with learning difficulties in order (a) to equip them to take greater control of their lives and (b) to strengthen their families in line with the wider contribution of learning as envisaged in *The Learning Age*.

The decision to target mothers was taken for sound practical reasons: most parents with learning difficulties are mothers and most mothers with learning

difficulties are either lone parents or have partners who do not have learning difficulties (although they may present other impairments or mental health problems). The key to supporting these families is addressing the mothers' needs for new learning to help them in their parenting. Moreover, it is known that women often appreciate support in women-only groups, especially when, as was the case with this group of mothers, many had been or were still being abused and exploited by men.

GUIDING PRINCIPLES

The SLP built on good practice in the continuing education of adults with learning difficulties (Sutcliffe, 1990) by following:

a) *A person-centred approach based on negotiated learning where the mothers made their own decisions about what they learned and how.* Parents with learning difficulties are known to learn best 'when there is respect and trust, when they can choose what they want to learn, are motivated, and are offered support in a way and at a pace that is right for them' (Sweet, 1990). A single-minded focus on improving mothers' skills without addressing the obstacles to their learning was only likely to lead to disillusionment and failure. Successful learning outcomes have been linked (Franz, 1995) to programmes that give parents*: access* (real opportunities for inclusion in the process of

deciding what sort of services are provided and how); *voice* (a say in how the programme is run and the feeling of being listened to); and *ownership* (a belief that what they are doing is worthwhile). The project had to fit into the mothers' lives rather than require they fit into the project. This called for responsiveness to the mothers' own priorities and adaptability in planning their individual learning programmes.

b) *An adult approach that recognised and respected people's prior learning and the life skills they brought with them.*

The Government's consultation document on *Supporting Families* acknowledges that 'parents often learn as much from each other as from the professionals'. Mentoring relationships were viewed as an important step to this end. The idea of mothers supporting mothers (group members and workers alike) was a core feature of the project. Bringing mothers together also strengthens their social networks. The project provided mothers with a forum for mutual support and learning drawing on our previous experience of co-ordinating an advocacy support group for parents with learning difficulties (Booth & Booth, 1998c).

c) *The use of real-life situations that involved the mothers in developing their self-advocacy skills by addressing issues arising in their own lives.*

Supporting parents is as much about equipping them to make use of the help and resources available - which may mean dealing with their own insecurities and anxieties - as it is about teaching parenting skills. Our emphasis was on parental empowerment rather than parenting training. Mothers were supported in pursuing benefit claims, dealing with schools about their children's education, taking up problems with the Housing Department, managing their finances, applying for jobs etc. Similarly, the group organised outings, picnics and trips, which involved the mothers in information searching, using public transport, sticking to a timetable, making decisions, learning give-and-take etc. A small award from the BT 'Countryside For All' scheme helped to fund a series of excursions to allow mothers to give their children a good day out and to show them the inexpensive pleasures of a day in the country. Such experiential learning, rather than forms of didactic education that are known to exclude people with learning difficulties, was at the heart of the approach.

d) *A flexible approach that allowed mothers to participate in the project on their own terms and to vary their involvement in line with changes in their circumstances and their own personal development.*

Experience warned that maintaining the commitment and involvement of this group of hard-to-reach mothers would be difficult. The project had to provide them with reasons for participating that were stronger than the easier option of not bothering. Participation was likely only if learning was worth the candle. At the same time, progression in self-advocacy means learning to do things for oneself and that includes learning how to do without the kind of support the project provided.

e) *An inclusive approach that made use where possible of non-segregated learning opportunities which brought mothers into contact with other people.*

The project was first and foremost directed at learners as mothers rather than as women with learning difficulties. Our experience on the Parents Together project showed that, for most people, their learning difficulties were not a salient aspect of their identity (Booth & Booth, 1998c). The project aimed to bolster their sense of being 'equal people' by using ordinary community facilities (without

ignoring their special learning needs like, for example, the need for more time or visual information or frequent reinforcement).

WHAT THE SLP OFFERED

- The project ran a weekly learning support group for mums. This was held in Sheffield Women's Cultural Club, a women-only space. The functions of this group were:
  - to provide support and opportunities for new learning in a forum where mothers made the decisions;
  - to foster friendships and mentoring relationships among the mothers that extended into their everyday lives;
  - to serve as a base from which mothers could access learning resources in the wider community;
  - to provide peer support and encouragement for mothers in pursuit of their learning;
  - to address mothers' anxieties, fears and reservations about their participation in the project;
  - to allow members to feel valued and competent;
  - to develop confidence about functioning in a group setting as a basis for joining courses offered by other organisations;
  - to reinforce their new learning;

- to provide opportunities for experiential learning through shared activities and problem-solving.

The self-help movement has shown that a key way of helping people overcome a lack of confidence and forge a more positive identity for themselves is by ensuring they feel valued for what they are (Mullender & Ward, 1991; Kurtz, 1997). The support group was intended to provide this kind of validation.

Crèche facilities were available but rarely used. Children were looked after by voluntary childminders in the same room where the support group met. They served as a bond between the mothers, a talking point, an excuse for cuddles and helped the group to cohere.

- The project provided a step onto the ladder of learning through the provision of day and evening courses and activities run by Sheffield Women's Cultural Club. A weekly 'Thursday Club' for women with learning difficulties at SWCC offered confidence-building opportunities to engage in activities such as collage, singing and percussion, women's health classes, dancing, video-making and telling their stories through poetry in safe and familiar surroundings. Mothers were also encouraged to sample the regular programmes

of courses run by SWCC for all women on topics such as personal development, self-defence and personal safety.

- The project provided guidance and support in accessing educational courses available through the Sheffield College Network, the Open College Network and the Worker's Educational Association as well as through voluntary organisations such as, for example, St. Wilfred's Centre, which offers certificated courses in practical life skills.

- The project facilitated mothers' involvement in other specialist support groups and networks within the wider community by making use of the wide range of learning opportunities available through voluntary and community organisations in Sheffield (Sheffield City Council, 1997).

- The project provided customised courses, in collaboration with Northern College, designed by a tutor-organiser in consultation with mothers and the project workers. Two 2-day residential courses were delivered: one on 'Being a Mum' and the other on 'Men in our Lives'. A 10-session course on assertiveness led by a professional trainer was also offered.

The SLP was co-ordinated by one part-time (0.4fte) Development Worker and two part-time (0.4fte) Learning Support Workers.

RECRUITING THE MUMS

An information leaflet about the project was widely distributed among practitioners in the health, education, social care and voluntary services throughout the city. As Sutcliffe and Jacobsen (1998) observe, working across agencies 'has always been important in education for adults with learning difficulties' and is 'an essential part of developing new provision for marginalised groups'. A separate, plain language version was produced for practitioners to give to interested mums. Project workers made personal approaches to professionals known to be in contact with our target group, and other gatekeepers in the service sector, to encourage them to bring it to the attention of mothers likely to benefit. Joining the project, however, was a decision for the mothers themselves: we accepted introductions but not referrals from third parties. Once a mother had expressed an interest in coming along to the group or finding out more about what it entailed, we offered to visit her at home to explain what we did and what she could expect. Some mothers were glad of this kind of induction; others were happy to show up cold. Likewise, some mothers were pleased to have a project worker or their own practitioner accompany them on their first visit

to the group where others made their own way from the outset. Once the group began to gel it was not long before some mothers began to introduce new members themselves.

GETTING TO THE MEETINGS

The support group was located in city centre premises close to the main bus station. The other courses, classes and groups accessed by the mothers beyond this base were spread around the city, often close to where they lived. The project workers were committed to supporting mothers who needed help with using public transport until they learned to find their own way. But a principled decision was made from the start that transport would not be laid on as a matter of course. We wanted to know that mothers wanted to come; and we wanted them to make the choice of whether or when they attended. If the project could not attract and retain mothers without escorting them there and back we felt it was probably out of touch with their views of their own needs. In the event, most of the mothers had no problems using the buses; only two required showing the route, one of whom regularly made the train journey from the other side of the Pennines. We have no evidence that this arrangement deterred anyone from joining the project. On the other hand, we can be sure that those who came found it worth the trouble of getting there.

ATTENDANCE AND PARTICIPATION

A total of 31 mothers (six more than originally planned) took part in the SLP: 18 of the mothers were involved for 18 months or more. Recruitment continued through to the end of the project in line with our exit strategy, which envisaged finding an alternative source of funding that would secure its future after support from the ACLF ceased[8]: 4 mothers joined the project in its last six months. Only three mothers dropped out (having attended at least one support group meeting) and two others decided that the project was not for them after receiving home visits.

Twenty-eight of the 31 mothers attended the weekly support group or group activities: 16 of this number were regular attendees, meaning they were more often there than not. The average weekly attendance at the group was nine mothers. A total of 680 person-sessions was held throughout the project: the average number of support group sessions attended by regular participants was 41.

Twenty mothers took part in learning activities outside the weekly group with the support and back-up of project workers. These activities were

[8] The project has in fact now been taken over by Circles Network, a Bristol-based national voluntary organisation with an educational objective of building inclusive communities, primarily through the setting up of circles of support (cf. footnote 1), so ensuring continuity of support for the mothers.

delivered by a range of learning providers within the city and included, for example, literacy and numeracy courses, woodwork, sewing, cooking classes, health and safety instruction, Karate, driving lessons, assertiveness workshops, flower arranging and much more besides. Mothers' take up of these opportunities was determined by their own preferences and commitments, and what else was going on in their lives.

Jasmine seized the opportunities provided by the SLP to throw herself into a bundle of activities as a means of filling her days and blotting out the pain after her children were taken away. A lone mother of five, without support of any kind, Jasmine had been finding her older children's behaviour harder to manage. When she fell pregnant again, all five were placed in foster care. After they had gone she was given a support worker. The new baby, a little girl, was taken at birth. Jasmine insisted she could cope: after all, she said, she'd brought up five on her own until the eldest was 14. The baby was placed for adoption. Jasmine knew she faced a personal watershed: go under or fight to survive. She determined to make something of her life. Joining the SLP was a start. She enrolled on four courses at the African/Caribbean Centre; started a literacy course; began doing voluntary work; signed up for a three day a week 'Stepping Out' course at the local Further Education College and enjoyed it so much

that she moved onto a full time course in Catering. In and amongst she learned to write and, two years after her baby had been adopted, was able to send her a letter for the first time.

Kirsty, a single mum, lived alone with her boisterous one-year-old, David. Although she had some help from a family support worker, she rarely managed to get out or meet people, other than her parents. She was bored and lonely. She joined the support group to make friends and to give David a chance to mix with other children. The support worker accompanied her on her first visit but thereafter she made her own way. She didn't feel able to take part in outside classes or activities for so long as David needed her attention. For the time being, the group provided the outlet she had been looking for and she joined in with vim, taking part in the Steering Group, going shopping with other mothers and organising the SLP's Christmas Party.

Twenty-five children under five years were accommodated alongside their mothers in the support group during the project (and some older children came along during school holidays). On average, there were four under fives at the support group every week. Six volunteers were used to mind the children during the course of the project, with two usually being present at each session.

Parents with learning difficulties are widely depicted as being suspicious of professionals and their kind, wary of seeking help, reluctant to engage with official services, erratic in their attendance and quick to drop out. Keeping families involved is cited as a common problem by most support programmes (New York State Commission on Quality of Care for the Mentally Disabled, 1993; McGaw, 1996). The reasons for this reticence are rooted in their lives and their experience of exclusion. The fear of having their children taken away often drives them into regarding professionals as a threat and into avoiding settings where they might come under scrutiny. The difficulties many have with reading, writing, telling the time, using public transport and other similar everyday competencies can work against the maintenance of a scheduled routine. At the same time, parents are so often overburdened by day-to-day problems that they lack the energy and personal resources to take on anything else. Many parents too have spent most of their lives trying to escape their label and steer clear of people and places that summon up its stigma (McGaw, 1996; Edmonds, 2000). Despite these barriers, however, the SLP has shown that mothers will accept support when it is provided on the right terms. This lesson presents a new challenge to those working with parents. The known difficulties of recruiting and retaining mums and dads with learning difficulties in early intervention groups, parenting programmes, family centres, ante-natal classes and the

like are too easily blamed on them when they owe more to shortcomings in the delivery of these services. Experience on the SLP has taught us that keeping mothers involved is an objective that must be built into the work rather than a spin-off from other activities. As such we made a point of:

- making every mother feel important
- helping mothers feel better about themselves
- ensuring the support group was run by and for the mothers
- putting listening before talking
- respecting mothers' individual choices and preferences
- being consistent and reliable and showing mothers we would stick by them
- always keeping in touch (phoning people between meetings, promptly returning calls, sending cards, posting invitations to group events)
- building togetherness through parties, trips and outings
- having fun.

These precepts - rooted, as they are, in the ideas of the advocacy movement and our own prior experience of working with parents (Booth & Booth, 1998c) - were themselves not enough to counteract the insistent press of forces threatening to drag mothers away from the project. Among the more common pressures jeopardising their continued participation were the effects of:

- *clinical depression*

  Feldman et al (1997) report very high levels of stress among mothers with learning difficulties, especially those with school-age children. So it is not surprising that Walton-Allen (1993) found clinically significant depressive symptomatology in two-thirds (62.5%) of her sample of 40 such mothers. Depression is an important and often overlooked factor impacting on people's everyday functioning quite apart from their learning difficulties. For many of the mothers in the SLP, their appearance at the weekly support group marked a personal victory in their battle with these demons.

- *child care proceedings*

  Six mothers had (11) children removed during the course of the project. The protracted investigations and hearings, as well as the emotions they unleashed, often impacted on these mothers' attendance. Observing what was going on also drained the morale of other mothers, some living under close social services surveillance, others (12) living with the memory of having had children of their own taken away,

- *jealous partners*

  Some men perceived their partner's attendance at the group as a threat, worrying about what the women might say about them

behind their back, mystified as to what it was about, fearful of where it might lead. They tried to stop their partner going, hung around outside the club, repeatedly rang on the mobile during meetings. Others resented the fact that they were excluded, feeling that somehow they were missing out, and demanding that if one go they both should go. Jo's partner, for example, got so possessive that she stopped coming, though she kept in telephone contact, pressing for advice on what she should do as she wanted to attend. She was told the decision was down to her. Eventually, she found the courage to stand up to her partner, started coming again and became a regular member.

- *poor health*

  The incidence of serious health problems among the mothers, including eating disorders, was high. Sickness, medical appointments, consultations and hospital visits were frequent causes of absence. Jez, for instance, 19 years old, already subject to fits and expecting her second child, developed an ovarian growth and a malformed placenta that kept her indoors at home for the last two months of her pregnancy. She came back to the group soon after Lil was born by caesarean section, still waiting to hear if she would have to have a hysterectomy.

- *unavoidable commitments*

  Mothers were at the beck and call of many people with power to command their time. With so many professionals and officials of one kind or another involved in their lives they were forever having to fit into someone else's diary. Pregnancy, the birth of a baby, young children starting nursery, court orders, practitioner visits, a new job, change in the contact times with looked after children were all things that impacted on mothers' participation in the project.

A range of practical measures and supports was put to use in working with mothers to safeguard their continued participation in the project in the face of these obstacles including:

- *a flexible approach* - we worked at the mother's pace and ability
- *a responsive approach* - taking a step forward only when the mother was confident and ready
- *time* - extra time was always found for mothers facing stressful life events
- *child care* - wherever and whenever it might be needed to enable the mother to meet the learning goals she had set for herself
- *presence* - we accompanied mothers as necessary to college enrolment sessions and to classes until they settled in

- *reassurance* - we made a point of always being there to bolster mothers when they encountered difficulties or set backs
- *engagement* - helping mothers cope with the pressures on them, so they could find the space for new activities and new learning, meant becoming involved in their lives and their families.

Of all these practice points, there is no substitute for close, personal knowledge of a mother and her family built up over time through a trusting relationship based on give-and-take in which the worker gets to know the mother as the mother gets to know the worker. Empathy comes from this kind of engagement rather than 'assessment'. The professional injunction not to get personally involved with clients is a major barrier to effective support (Heighway, 1992; Yoder, 1993).

Learning Gains

Measuring the benefits that mothers derived from the project and how their participation changed them as people and as parents is not easy. What passes for evidence in this regard is a matter of conjecture. A skills approach to learning might properly reckon progress by qualifications obtained. Learning defined in terms of personal development, however, calls for a different measure. Denise may have attained her OCN Certificate Level 1 in Basic Skills but in the context of her long personal history of passivity and acquiescence the fact that she gained the confidence to make a

complaint to her dentist might signify the greater achievement. We did not specifically set out to accredit mothers' learning, although some of the learning providers offered accredited courses. Accreditation is not always appropriate for marginalised groups of learners because it can skew the learning process towards goals which are not relevant for them (Sutcliffe & Jacobsen, 1998). As Simons (1992) has written, 'to erect "qualification" barriers is fundamentally to miss the whole point of self-advocacy.'

Detailed personal portfolios were maintained for all the mothers. The basic format of these portfolios followed guidance issued by the National Institute of Adult Continuing Education (NIACE), the organisation that administered the ACLF on behalf of the DfEE. The portfolios recorded biographical information, learning goals, types of supports available, learning gains and outcomes (accredited and non-accredited) and observations on the barriers to progress encountered by the mothers. Every mother had access to her own portfolio and all were encouraged actively to help maintain it as a complete record. The mothers clearly liked having their own personal file and made a point of both asking for information to be entered and depositing material (such as certificates awarded) of which they were proud. The portfolios were updated not less than once a week throughout each mother's time in the project so providing a process record or formative account of her attainments.

These portfolios provide the qualitative data for assessing what the mothers gained from the project. Knowing how best to present this data, however, is a puzzle. Extracting it from the lives to which it relates degrades its meaning. But locating it within a biographical context generates too much text. Consider, for example, the following list of learning achievements extracted from Denise's portfolio:

Denise's Main Learning Gains

Attends accredited course at St.Wilfred's; joins SWCC Thursday Club; attends new drama course; attends Northern College residential course; on stage at Lyceum with St. Wilfred's; takes first holiday with a friend; makes complaint to Dentist; OCN Certificate Level 1 in Basic Skills; makes buns for SLP workers; takes part in Panto; phones other mothers; completes 1 year maths course at St. Wilfred's; attends art course (painting exhibited in Sheffield Art Gallery); becoming more assertive; applies for house with garden; in new Drama at St. Wilfred's; signs on for work; attends Northern College with Thursday Club; does own shopping for first time; takes control over own money - reclaims benefit book from sister; learning to cook; doing pottery at St. Wilfred's; does Health and Safety course; attends Work Training Scheme.

Denise was a member of the SLP from the beginning, attending 88 weekly sessions of the support group in addition to her other activities. The bare list in Figure 1 presents an apparent mish-mash of activities without giving any clue as to their significance. It helps to know that, at the start of the project, after talking with project workers, Denise identified her own goals as: learning how to live on her own, improving her reading and writing, moving house, finding work, controlling her own money, taking up drama and craft work, and becoming a better grandma. It helps still further to know that Denise has suffered a lifetime's lack of confidence: she has looked to her family to make the decisions and manage her affairs, always deferring to their judgement and letting them do the work. The sudden death of her husband five years ago knocked away her main prop and plunged her into a long period of grief and depression that only exacerbated her helplessness and introversion. It is against this background that Denise's achievements slot into place, in that they can be seen to derive from her own learning goals and to mark her advance towards greater personal competence.

Bearing in mind the crucial point that achievements are benchmarked against lives, let us look at how far the project succeeded in its aims by drawing on the evidence contained in mothers' portfolios. The project set out to facilitate new learning that would strengthen mothers' capacity to parent by helping them to acquire:

1) greater personal and practical skills
2) greater control over their lives
3) a better self-image and more confidence in their own abilities
4) greater assertiveness
5) more awareness of their own needs and how to get help
6) a larger network of support
7) more enjoyment out of life.

GREATER PERSONAL AND PRACTICAL SKILLS

Just over half (16) of the mothers who joined the SLP said that one of their learning goals was to improve their skills. Only a minority (6) of this group specifically referred to parenting or child care skills. Most were interested in increasing their employability (and hence their capacity to support their family) or their literacy/numeracy (and hence their ability to manage their family's affairs and, importantly, to help their children in school). Unlike many programmes aimed at supporting parents with learning difficulties, which focus narrowly on instruction in child care skills, our mothers understood that parenting is about more than just mothering: that it includes a range of non-nurturing responsibilities, such as homebuilding and civics, which are equally as vital to children's well-being and family maintenance. They wanted to learn how better to undertake these tasks too.

Lois had a pretty low opinion of herself. A history of sexual abuse as a child and years of unrelenting criticism and taunting from her partner had left her with little confidence and less self-esteem. When her two children started school she decided to plan for her future. Joining the SLP was a first step. She enrolled on a basic maths course at College and began helping with the baking as a classroom volunteer at her children's school. Then she was introduced to 'Storysacks'[9]. As a pathway to the pleasures of books and reading it sparked her enthusiasm and fired her imagination. She was hooked. After earning a certificate for her work she was photographed in the local paper with David Blunkett, out promoting the scheme, and later spoke from the platform at a 'Storysacks' conference. As her confidence returned, she felt able to ask the project workers for help in sorting out some of the other upsetting problems in her life.

The SLP was very successful in placing and supporting mothers on courses designed to develop their skills: 15 joined college courses or accredited

[9] 'Storysacks' aim to give parents the confidence to enjoy reading and sharing books with their children. The approach is the focus of a National Support Project sponsored by the Basic Skills Agency. See http://www.storysacks.co.uk

courses delivered by other providers during the project. The project team worked closely with mothers on a one-to-one basis to ease the transition into learning: sorting out practicalities like ensuring that timetables were compatible with their family commitments, procuring any necessary equipment or materials, sorting out bus routes and times, establishing what level of literacy or numeracy was required, linking with college learning support teams, course leaders, and tutors, and accompanying mothers if necessary until they found their feet.

GREATER CONTROL OVER THEIR LIVES

The overwhelming majority of mothers entered the SLP wanting to change their lives in some way and invent a different future for themselves. These aspirations were not dreamy or fanciful but entirely practical and down-to-earth: they wanted to sort out the garden, give up smoking, act on their own decisions, eat more healthily, move house, deal more assuredly with people in authority, learn to use public transport, set up home on their own, leave an abusive partner, have a care order on a child removed, find work.

> Jude had been dogged by frequent changes of her care worker all her adult life. She'd invest heavily in getting to know and learning to like someone only for them to up and off just when she had come to regard them as a friend. Where for Jude, who craved a buddy, the relationship was a lifeline, for the worker it was just a job. Jude

experienced these partings as personal rejections that reinforced her sense of unworthiness and sometimes led her to self-harm. Turning up at one group session in tears, having learned that yet another carer was about to leave, she shared her feelings with a project worker. Jude was encouraged to tell her carer how she felt, and rang there and then on her mobile. The upshot was that the care worker stayed in touch with Jude while she was off on maternity leave and Jude felt much more positive about her standing in the relationship.

The SLP helped mothers realise many of their goals in the way of greater independence and self-determination. During the course of the project, six mothers secured jobs, a further six became involved in voluntary work, seven found the courage to leave a partner or their parental home to set up on their own. Most of the advances the mothers made, however, were measured in small steps rather than big strides: doing the shopping without assistance, changing from a male to a female GP, contacting the Citizens Advice Bureau for help, taking a first holiday with friends, signing up for driving lessons, registering with a Women's Therapy Group for counselling about childhood sexual abuse, reporting troublesome neighbours to the police, sorting out child care for the school holidays. As was the case with Denise, cited above, the full import of these apparently inconsequential actions is only understood in the context of lives lived in the passive tense

by people who are inured to having things happen to them instead of making them happen themselves. As Geri replied when asked what she had learned from the group: 'To do things for myself.'

The project was not always as successful as the workers would have liked at putting the mothers' new-found resolve to good effect because of problems in accessing and mobilising resources. Lois offers a case in point:

> After putting up with her partner's abusive ways for long enough, Lois finally steeled herself to break the relationship. She talked with her project worker about what she should do for the best. Having made enquiries, the worker put her in touch with a local Domestic Abuse Project whose literature promised personal support, legal advice and refuge if necessary. It took a lot of courage for Lois to bring herself to phone for an appointment. Her details were taken and she was told someone would get back in touch with her shortly. Three weeks later Lois still had not heard, so she rang again. This time she was told the worker allocated to her case was away and there was no one else available to deal with her. Lois' resolve evaporated. Two months later she was still living with her partner.

Men also were sometimes a serious obstacle. Keith, for example, prevented Evelyn from attending her antenatal classes, dreading that once she came under the scrutiny of professionals they would scheme to remove the baby, just as they had with their other two children. Evelyn was so in thrall to Keith that she knuckled under, despite what she knew to be the dangers to her health, the baby and the likelihood that their behaviour would bring about the event they most feared. Or again, Annie's husband banned her from attending the group and her college courses, which she loved, as retribution for a night on the tiles with her sister. His refusal to back down precipitated a crisis in their relationship that eventually led to her leaving him and returning to live near her mother in Scotland. Lone mothers tended to be more receptive to efforts to help them gain more control over their lives, and project workers were always anxious that ground gained might be lost when a new man appeared on the scene.

A BETTER SELF-IMAGE AND MORE CONFIDENCE IN THEIR OWN ABILITIES

There were very few mothers, like Julie, who openly said they joined the group in the hope of 'getting my confidence back'. If this was how they felt, they were not revealing it in so many words. Such feelings were more likely to show themselves through the correlates of low self-esteem: a high level of stress, a strong sense of failure, fear of criticism, a heightened self-consciousness, loss of will. Though they themselves might not have

articulated the problem, it was nonetheless evident to the workers. Almost half of the mothers' portfolios specifically mentioned a serious lack of confidence as a barrier to their learning.

The SLP sought to improve mothers' sense of self through:

- *coursework* - offering mothers a valued status (student/adult learner), a purpose and the thrill of achievement. Listen to Jasmine: 'My husband says he wants a baby. I said not yet, I'm going to college first, get a certificate, help my career.' Those who took part in arts and drama projects, like Denise, who appeared on stage at the Sheffield Lyceum and, with Jude, had a painting exhibited in Sheffield City Art Gallery, rose to the limelight and the applause (Moore & Goodley, 1999).
- *relationships with other mothers* - offering friendship, support and affirmation: 'We get talking to each other and get to know each other, learn how to deal with things in our lives.' Carol found 'learning about other mothers' was one of the main benefits she had derived from the group: 'I know they're going through what I've gone through.'
- *relationships with the workers* - offering unconditional acceptance and positive reinforcement. Asked what she would say about the group to a mother who was thinking of coming along, Annie replied, 'It's a place to go and make friends. You're made to feel very welcome - doesn't

matter what you are and what you do.' Betty answered in the same vein, 'I would say it was a friendly atmosphere, supportive. You don't feel left out and the people who run it listen to you.'

- *group activities* - offering people the opportunity to share simple pleasures with others and make them feel good. Lilian used to find it hard seeing the other children enjoying themselves. It made her think of her own who have been adopted. Now, she says, she has learned to manage these feelings: 'I like seeing how they've grown and getting to know them.' For Annie, her confidence had increased from learning 'how to meet new friends'.

Although few women came into the SLP looking to improve their confidence, more recognised they had done so by the end. Asked what she had learned from being in the group, Melanie answered, 'I'm learning how to be confident in what I'm doing. I've been told I've been through a lot and done well. I get more confident when I'm speaking.' Jez made the same point, saying she was now, 'feeling confident, not so nervous - learnt quite a lot about myself. I'm handling myself better than I did before I came here.' Linda, too, thought that belonging to the group had helped to restore her confidence: 'I became more aware of my own life and to think more positively.'

GREATER ASSERTIVENESS

The driving purpose of the SLP was self-advocacy. Self-advocacy is about people working together to find their own voice, speak up for themselves, recognise their strengths, make their own decisions and, in the case of project mothers, identify their own learning needs as parents.

Adapting Worrell (1988) slightly, there are three aspects to self-advocacy: awareness, self-help and mutual action.

Awareness comes from people getting together, making new friends, sharing their experiences and learning from each other. From out of this they begin to understand that others too endure the same anger, frustrations and troubles. They see they are not alone. The weekly support group served this function. The mothers were clear this was something they were looking for when they joined the project:

> *'I thought the group might be helpful, to get information, meet new friends and ones you can get on with, talk about the frustrations of being a parent.'* (Janice)
>
> *'Because there were other women in the same situation as me, I thought I could get support and they could get support off me.'* (Anna)

' (I joined) *because other people have had kids taken away like Keith and me. I bet they went through the same pain and stress.'* (Evelyn)

The women were equally sure that greater awareness was something they had got out of the group: 'talking with other mums', 'mixing with other mums', 'just having a chat with others', 'picking up things from other mums' were the most frequently cited benefits they said they had derived from their attendance. As Angie put it, 'It's a place to get information and to talk over what we feel we want.'

' (I'm) *learning to open up my feelings to other people.'* (Liz)

'We can talk about problems and we know it won't go any further.' (Diane)

Self-help involves turning this new-found awareness into action to change one's situation. The support group provided a forum in which the mothers could discuss their problems, decide what to do, and model or rehearse their response. Two attempts were made to recruit mothers onto a specially commissioned 10-week assertiveness course run by a professional facilitator but take-up was poor. Only five women attended any sessions and only two completed the course: finding another day in the week alongside their other commitments proved too difficult. Nevertheless, the stories the women told in the group spoke of a growing willingness to confront rather than back

away from issues: whether it was Denise asking her sister to return her benefit books or Lois making the hard decision to part from her disabled husband.

> Lilith and her little girl had been living with her parents until she decided to find a place of her own. She had lived away from home once before: when she moved in with the man by whom she became pregnant. But he used to beat her up and after her daughter was born she left him and returned to her parents' home. Now she felt ready to try living on her own again. She found a nursery place for her daughter and secured the lease on a council flat. Things did not go easily for her. She ran up debts, fell out with her parents, and was pestered by strange men. Despite these difficulties, Lilith is still in her flat and determined to make good. Her parents have come to respect her wishes and she has now made up with them.

Group action lifts self-help to the level of pressure politics and campaigning. The SLP was not resourced to give this task a high priority or to pursue it energetically. Group action was undertaken on just three fronts. First, the mothers as a group agreed the ground rules for the way it should operate: deciding, for example, that people should not swear, especially in front of the children, and that mobile phones should only be used outside the room.

They also voted for setting up a separate group for couples[10]. Second, at least one and, on occasions, up to four mothers served on the SLP Steering Group that was responsible for the strategic management and direction of the project. Third, a group of mothers volunteered to give a presentation at a day conference on parents with learning difficulties organised for practitioners by Community Health Sheffield. The mothers planned, prepared and rehearsed their session. All found the experience nerve-racking but liberating. The opportunity to let practitioners know how they felt about what the system had done to them and their families had both a purgative and restorative effect. All came away vindicated.

MORE AWARENESS OF THEIR OWN NEEDS AND HOW TO GET HELP

A recent SSI inspection of local authority services for disabled parents concluded that: 'The focus of staff appeared to be either on the children in the family or on the impact of the adults' disability on their personal needs. Workers rarely looked beyond this and seldom focused on the whole family and how to support and help the parents in the discharge of their parental duties in their social setting.' (Goodinge, 2000) Jackie Knight, a mother herself, made the same point more succinctly when she said, 'Nobody was

[10] A proposal now being implemented after Circles Network took over the project

there for me. It was always professional people for the kids. I needed somebody for me, not just the kids.'[11] A critical lesson to emerge from general research on early intervention (Rapoport, Rapoport, Strelitz, & Kew, 1977) and, specifically, from the supported parenting programme spearheaded by the Wisconsin Council on Developmental Disabilities (Hoffman et al., 1990) is that parents have needs as people too. Unless their needs are addressed, they may be unable to give due priority to their children's interests (Espe-Sherwindt, 1991). It is also known that parents' perceptions of their own needs often do not correspond with the interpretation made of them by professionals (Llewellyn, 1991; Walton-Allen & Feldman, 1991). Once again, this underlines the importance of listening to parents, creating an atmosphere in which they feel able to talk and acting on the basis of their priorities. The crucial difference between advocacy support and parenting training or assessment is who sets the agenda. Parents are known to drop-out when they feel patronised. The singular success of the SLP was in keeping them coming, which is the surest measure we have that it provided something they wanted. The fact that almost a quarter of the mothers left partners or the parental home during the course of the project is another sign of people reflecting on their situation and acting to change it.

[11] Speaking at a national one-day conference on parents with learning difficulties organised by the Mental Health Foundation, Birmingham, 1 December 1999. See also (Knight, 2001)

Christine, for example, moved out from under her parents' roof and set up home with her little girl, Sian, then aged 5. It was the first time she had taken sole responsibility for Sian's care. The Easter holidays were tough going: having Sian around all day taxed her concentration and stretched her patience. She knew she would have to sort something out before the long school break in summer. Christine discussed her problem with the other mums in the group. She made enquiries about a place on a summer placement scheme for Sian. When she found there would be a charge, she acted on information picked up in the group about possible sources of funding. Slowly a relief plan began to take shape and she was able to look ahead to the summer without foreboding.

We cannot pretend that mothers who found the confidence to acknowledge their own needs necessarily encountered better outcomes as a result. Having been emboldened to make the break with a good-for-nothing partner, it was not unusual to see a woman take up with another man who looked just as likely to cause her grief in the future. And poor Christine. She suffered a bitter reward for all her achievements. While her long-standing social worker was off sick, a locum, drafted in to provide cover, whisked Sian into care within weeks of taking over the case, for no better reason that

anyone who knew Christine could understand than that the locum did not know her at all.

A small office off the main meeting room was available for private talks during support group sessions. This opportunity was used by the mothers to seek confidential advice from one of the workers, most often about money matters, relationships or health problems (of which there were many), or to patch up tiffs among themselves. It was noticeable how mothers became more willing to share their problems as they became more practised at talking about them: Lisa put it this way, 'Before I came to the group I didn't use to talk to anyone. It's a lot easier now.'

Ten women saw through a pregnancy during the course of the project; six women had children removed. Both these experiences provided a focus for group learning about, for example, the value of antenatal classes, the importance of getting to know your midwife, finding an understanding doctor to trust, your rights as parents in child protection conferences, getting legal aid, choosing a solicitor.

One of the important means by which the SLP contributed to increasing mothers' awareness of their own needs was through what Brown et al (1989) have called 'legitimate peripheral participation'. They make the point

that not all important discourse in learning is 'direct and declarative'. People, especially newcomers to an activity, can learn a great deal from a position on the sidelines. Watching from the wings was a first step to better coping for a lot of mothers.

A LARGER NETWORK OF SUPPORT

Social isolation is a major factor undermining parents' ability to cope. It strips them of the kind of supportive relationships that, Belsky (1984) suggests, provide emotional sustenance, instrumental assistance and moral guidance (about acceptable standards and behaviour). A key task of support programmes is to improve parents' social connectivity (Llewellyn, McConnell, & Bye, 1995).

Four immediate ways of responding to this challenge present themselves:

- *Bringing people together:* The SLP was successful in nurturing mutually supportive relationships among the mothers that extended beyond the group into their lives in the community. When Linda's children were taken for adoption, two of the mothers stayed with her for the night after the final goodbye and one remained for several days when Linda was overwhelmed by her loss. These relationships were characterised by fallings out and makings up but learning that

friendships could survive a quarrel was a big step forward for most of the women.

- *Building bridges with estranged family:* The SLP cannot lay any claim to success on this front, primarily because it was not a goal the mothers set for themselves. Linda was moved to re-establish contact with her father, and made an effort to get in touch with her long-lost brother, but otherwise it was not a salient concern for the women.
- *Greater involvement outside the home:* The success of the SLP in supporting mothers in finding jobs, voluntary work and learning placements with educational and other providers undoubtedly brought them into contact with a lot more people and helped them to forge a positive new side to their identity. As one mother said, 'We get support and help so we can take up opportunities outside.'
- *Getting more out of the service system:* The record of the SLP in this respect is mixed. Mothers were helped to access services and resources for which they were eligible but good work was often undone by deficits in the system, of which two were particularly marked. First, unreliability in delivery occasioned by such things as staff turnover, changes of rules, shifts in policy, cutbacks in finance: Christine's case, cited above, offers an extreme example. Second, unresponsiveness - as typified by passing the buck. When Sally

> finally gathered herself to lodge a complaint with the police and the Housing Department about the disquieting influence an alcoholic neighbour was having on her family, officials told her that it would be easier for them to move Sally than deal with the nuisance. Fighting for a family within the system too often meant fighting the system itself and in such a battle the odds were just as surely stacked against the workers as against the mothers.

MORE ENJOYMENT OUT OF LIFE

A common unmet need recognised across support programmes is for greater recreational and leisure activities for parents (New York State Commission on Quality of Care for the Mentally Disabled, 1993). The mothers in the SLP were certainly looking for such an outlet and most felt it provided them with one. They were quite explicit that 'getting out of the house', 'having something to do' and 'meeting new people' were important considerations in them joining the project in the first place: 'Otherwise I'd just be at home vegging out in front of the TV'; 'I was just sat at home bored and my health visitor suggested I came'; 'It's a break'.

The mothers were equally definite that the project had met these expectations. They liked coming, had made new friends, enjoyed the activities and wanted it to continue running:

'It's fun and the company's great. You get the chance to learn new skills.' (Betty)

'I'd like it to keep going. If it finished, some mothers would never get out or meet other mothers. They'd be stuck in the house. It gets us out instead of getting depressed.' (Mary)

'Just having people to talk to' was one of the attractions, so also was the chance to escape: 'I come up here and unwind. Just be yourself, no pressure or anything. I feel relaxed when I go home.' As one keen mother said, 'I wish I could come more often.'

Monitoring Progress

A process of continuous monitoring was followed from start to finish. There were two strands to this process: monitoring the progress of the individual learners and monitoring the progress of the project against its declared aims. The learners' progress was monitored by weekly review meetings, at which the project workers pooled information about participants' achievements and problems, and by the mothers' portfolios. The project's progress was monitored by: a Steering Group, comprising mothers, workers and representatives of the partner agencies which met seven times during the life of the project; by group discussions involving the mothers attending the support group; and by structured personal interviews with mothers undertaken as the ACLF-funded phase of the project drew to a close. This

paper has drawn mainly on evidence from the mothers' portfolios, illustrated by quotations extracted from the personal interviews. This section summarises the questionnaire data.

Eighteen one-to-one interviews were conducted with project mothers: 2 people refused; 4 joined too late to take part; 5 had dropped out and 2 had moved away. None of the interviews was done by the person's support worker.

Sixteen of the women stated unambiguously that they enjoyed attending the support group: one person was non-committal and another, who had stopped attending, said she had found the 'other mothers not very friendly'. Thirteen thought they had learned something new from the group, and eight specifically and without prompting said they had learned from other mothers. The great majority (15) of the women also felt they had learned a lot from the activities they had been introduced to outside the group. Fifteen said they got on with the other mums and none had any criticisms of the project workers. When asked if there was anything about the group they would like to change, their suggestions focussed either on facilities ('more baby toys', 'more high chairs', 'the colour of the room') or other people's behaviour ('To not have swearing', 'Mothers should smoke outside', 'It'd be nice if some of the other mothers helped out, like washing up, tidying toys'). The overall

tenor of the responses was summed up in one mother's parting question: 'This is going to stay open, isn't it?'

Discussion

The SLP was grounded on the simple premise that supporting parents supports children: that helping mothers better cope with their own lives will help them better cope with their children. The weight of evidence presented above points to two broad conclusions. First, the SLP encouraged new learning by mothers that bolstered their competence. Second, the mothers felt better about themselves as a result of their involvement in the SLP.

Whether these achievements actually led to the women becoming better mothers remains unknown. We have no direct evidence on this matter as the quality of their parenting was not itself assessed. Indeed, the fact that six mothers had children removed during the course of the project might appear to point in the opposite direction. Such an outcome, however, is known to be an unsatisfactory indicator of parental inadequacy in the case of parents with learning difficulties. A number of intervening variables mediate the relationship between parental competence and child outcomes. As Czukar (1983) has pointed out, parents with learning difficulties 'are especially vulnerable to losing custody of their children because of prejudicial attitudes, unfounded assumptions about inadequate parenting, lack of

appropriate support services, and other problems.' (see also Dowdney & Skuse, 1993; Booth & Booth, 1994; Booth, 2000) The interactional model of parenting (Belsky, 1984) shows how child outcomes are shaped by a combination of influences including parenting behaviour, environmental variables and child characteristics. This leaves open the possibility that mothers in the project could have improved their parenting and still lost their child because other factors (such as those mentioned by Czukar) worked against them. Equally it could have been that the circumstances leading up to the child being removed pre-dated the mother joining the project. The one thing of which we can be sure is that the SLP did not fail the mothers: if the premise on which it was based is ill-founded then the ramifications extend well beyond this project to strike at the heart of the Government's policy on supporting families.

The SLP threw up many practical lessons about supporting mothers with learning difficulties. Some of these reinforced what other experienced practitioners have also found (see, for example, Snodgrass, 1993; 2000). Others came as treasure trove. Working in partnership with mothers to meet the challenge of new learning for living, we ourselves learned to appreciate the importance of certain basic reminders:

- *Little things matter* - Parents may face many problems in their lives that act as barriers to the development of greater competence. When working with them to overcome these obstacles, there is a tendency to tackle the biggest first - where success is likely to take longer and is less assured. Seeing their lives change for the better in small ways can motivate parents. Pick on an easier problem that can be dealt with quickly and surely.
- *Sweets and sours* - People already bearing a lot of troubles can find the strength to face up to new challenges if they have some pleasures to look forward to and enjoy.
- *The mouse and the elephant* - Big challenges don't look so daunting to parents who have grown in stature from the experience of successfully overcoming smaller ones.
- *Make haste slowly* - Don't rush at things, pressure parents, be too eager to step in or despair of making progress. A ticking clock can inhibit progress.
- *Act laterally* - It doesn't always pay to square up to problems head on. A sideways approach can be more productive. For people living often chaotic lives we should apply a bit of chaos theory and remember the metaphor of the butterfly and the tornado.

- *Progress is not a straight line* - If things don't go according to plan, don't think in terms of setbacks and failures. Just try something different.
- *People say they can't when they can* - Low self-esteem erodes people's belief in their own ability. Have faith in their capacity.

Learning, we found, is story-driven: it came from mothers listening and talking to each other and sharing one another's tales of achievement and progress. The ground rules of success are mostly foreign to people who have experienced a lifetime of failure and are used to being put down. Hearing stories of success, in the safe environment of the support group, from others with whom one can identify because they are like oneself, showed people that they too could rise to the challenge of new learning and what to expect if they did. In this sense, learning may be seen as a process of enculturation that is facilitated by mixing with like others and carried forward through the medium of narrative. This is a very different model from one which puts an expert in charge. The Supported Learning Project showed how mothers responded to the chance to talk.

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