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UNICEF Europe and
Central Asia Regional Office

Parenting Support Framework for the Early Years

In support of
Global Initiative to Support Parents

Contents

Foreword

Supporting children to grow and thrive is central to UNICEF's mission. And we believe everyone has a role to play in making this happen – whether we're caregivers or not.

At the same time, decades of research show again and again that the path of a child's development starts with their parents. From the earliest days of infancy, whether parental care is nurturing, responsive and loving – or less so – can wire a child's long-term physical and mental health, social skills, relationships and even school performance.

Some parents may seem better equipped to provide nurturing, responsive care than others. This can be especially hard for those who were themselves raised with harsh or punitive parenting models, or who struggle day-to-day to meet their families', or their own, basic needs. But all parents need support, regardless of their circumstances.

As specialists in child development and advocates for children's rights – and with our keen understanding that different cultures, societies and families require different approaches – we are in a unique position at UNICEF to offer a framework that governments and stakeholders can use to provide and bolster such support.

This is that framework. Our hope is that it will build competencies, boost confidence and enhance the health and well-being of parents, better allowing them to effectively respond to their children's developmental needs and provide nurturing care. In Europe and Central Asia, that includes supporting the rights of 21 million children under the age of 5 alone.

Parenting is as ancient as humanity itself. But our understanding of just how much parenting practices impact children has evolved significantly in recent years, as has our understanding of the importance of supporting parents themselves.

The Parenting Support Framework for the Early Years aims to support UNICEF country offices and governments in addressing these priorities by providing a comprehensive, inclusive, evidence-informed and adaptable approach to supporting parents in their vital role. By recognizing the diversity of parental needs and the complex environments in which they care for their children, we can create a nurturing world where every parent is empowered to foster their child's development and well-being.

Regina De Dominicis
UNICEF Regional Director for
Europe and Central Asia

Voices of Parents

The following quotes were taken from Bebbo Parenting Surveys conducted in 2023 and 2024:

"Every child needs a place in a kindergarten."

– Mother, North Macedonia

"We need kind words from health professionals."

– Mother, Serbia

"The biggest need for my family is public nurseries for children under 2 years old, and there need to be enough motivated staff working there."

– Mother, Moldova

"We need flexible work schedules for pregnant and nursing mothers, and childcare options at work."

Mother, Moldova

"[It is important to] involve fathers in the process of raising children, as well as housekeeping."

– Mother, Kyrgyzstan

"We need better-trained health workers, because they know little about breastfeeding and sleep, and they spread misinformation."

– Mother, Serbia

"We need a better health system and better access to doctors."

– Father, Serbia

"Fathers should not be seen as the 'secondary' parent, especially not by health workers."

– Mother, Serbia

"It would be good to hold seminars and webinars for young parents, since there is, as usual, a lot of incorrect information on the internet. Some booklets from NGOs would also be cool, to educate young parents."

– Father, Kyrgyzstan

"Parents need awareness courses on what it means to be a parent before making the decision to become one. And support groups for parents, especially at the beginning of the journey."

– Mother, Romania

"We need better conditions for young children in care, and we need individual or semi-individual classes on parenting support. Most important of all, we need 24-hour, expert support to answer our emergency questions about babies and young children."

– Mother, Montenegro

"We need psychological support for new parents to help them face everyday difficulties."

– Mother, Greece

"Parents need to have more shelters for mothers with children who choose to leave the family due to violence. And [there needs to be] psychosocial support for parents in difficulty."

– Mother, Albania

"Parents need access to safe spaces for children, [and there needs to be] parental education support."

– Father, Romania

"I think that social policies are needed, as in most other countries, where the child has economic support until the age of 18, which helps parents raise more complete and happy children."

– Mother, Albania

"[I want] to have more hours to take care of my children."

– Mother, Albania

"[Parents need] more services, offered in such a way that they have the opportunity to devote more time to their children, their growth and education."

– Mother, Albania

"Parents need access to reliable information regarding the care of newborn and infant children, rather than receiving conflicting explanations or recommendations from various sources."

– Mother, Ukraine

1. Introduction

1.1 Why do we need a Parenting Support Framework for the Early Years?

When a child is born, parents are born too. Parents are the primary, most important and most consistent agents of a child's development and well-being. During the early years, parents fundamentally shape their children's present and future. In this document, 'parent' refers to the main caregiver of the child and is not limited to a biological or legal parent.

The time is right to accelerate efforts on parenting support. Recent political, economic, environmental and social changes, combined with increased family vulnerabilities due to the COVID-19 pandemic and the war in Ukraine, highlight the importance of policies and services for parents and families in Europe and Central Asia (ECA) (*see Box 1*). Data shows that many children do not receive the nurturing care they need for optimal development. For instance, one in four children under 5 do not receive adequate stimulation and responsive care at home, while two out of three lack sufficient children's books at home, crucial for quality early stimulation.[1] Despite most parents reporting that they don't believe in the effectiveness of physical disciplining, more than half of young children are violently disciplined at home.[2] This data indicates that parents need support in order to provide nurturing care in a safe environment that is sensitive to children's needs, with interactions that are responsive and playful, emotionally supportive

and developmentally stimulating. Parents also need support for their own well-being, which significantly influences their overall parental competence. A parent who receives parenting support, such as information, services, programmes, activities and resources – benefits in many ways. This support can help them in their parenting role and promote their well-being, as well as that of their children. As a result, the parent has enhanced confidence, skills and well-being, and can better provide nurturing care.

There is a need for a conceptual framework on parenting support that can unite these different concepts across sectors and stakeholders. Currently, parenting support is understood, implemented and experienced very differently across Europe and Central Asia.[3,4,5] The growing recognition of the importance of parenting for early childhood development has led to a rising demand for country efforts to be guided by a unified conceptual framework and a systemic vision that will ensure universal access to quality parenting support.

Countries need a coherent, multisectoral vision and systemic approach to translate parenting support into effective programmes, services and policies that support families' universal progressive needs. Parenting support is proliferating across ECA, with many countries scaling up their efforts, but often in a fragmented or ineffective way. This may be because parenting support is being delivered across many different sectors and responds to parents' many different needs, leaving room for gaps and inefficiencies and creating a need for a coherent, multisectoral approach to parenting support.

Box 1.

Parenting support in Europe

Since the 1990s, there has been a growing number of parenting support initiatives in Europe. Traditionally, policies focused on families were part of wider policies, including employment, social protection, housing, education and health. Policy interest in parenting support has intensified over recent decades, largely due to research findings highlighting the importance of parents in early childhood development, as well as a shift towards investing in preventive initiatives. Today, parenting support in Europe is viewed as a social investment that contributes to both human and social capital.[6][7][8]

Policies related to parenting support fall within the responsibilities of individual Member States, but there are also important developments at the European level. For instance, aspects of support for parents were present in the Lisbon Strategy and were taken forward in its successor strategy, Europe 2020. The Council of Europe's 2006 recommendations on policy to support positive parenting were also an important development, influencing the establishment of new laws and

programmes across EU Member States.[9] The recent COFACE assessment[10] of the European Union's work from 2019 to 2024 showed that important steps have been taken to support parents and families. This includes the strengthened European Pillar of Social Rights, and the introduction of the Child Guarantee, the Care Strategy etc. The COFACE assessment highlighted the lack of impact assessments for parenting support initiatives, as well as the need to review and consolidate existing frameworks under the European Pillar of Social Rights Action Plan.

Today, there exists a broad range of national, regional and local initiatives on parenting support, which include the development of legislation and national strategies, as well as policies and specific programmes. Parenting support services vary in scope, organization, models of delivery and funding across Europe[11], although there is a trend among EU Member States to take a universal and progressive approach to parenting support. The European Platform for Investing in Children (EPIC) lists evidence-based parenting services implemented in EU Member States. It provides information on their key characteristics, as well as appraisals of the evidence in support of their effectiveness.[12]

1.2 Purpose and objectives

The Parenting Support Framework for the Early Years (henceforth referred to as 'the Framework') represents a conceptual framework that provides a unified vision of multi-sectoral support for parents and parenting in the early years (from pregnancy to 8 years of a child's age). It aims to bring together different stakeholders and sectors through a system-strengthening approach, and by leveraging social and behavioural change guidance and strategies. The Framework is based on evidence and country experience and complements existing international frameworks and resources (*see Box 2*), while being tailored to the ECA regional context.

The objective of the Framework is to provide conceptual guidance to strengthen parenting support in the ECA region by outlining key entry points, strategies, and delivery platforms across different sectors that can deliver universal and progressive parenting support. The Framework does not focus on specific parenting behaviours, nor is it a step-by-step guide for parenting support development and implementation.

Social and Behaviour Change (SBC) is at the core of the Framework. SBC strategies are integrated throughout the Framework and introduce various ways to leverage social and behavioural sciences in the development and strengthening of parenting support programmes. SBC is instrumental in unveiling and understanding the various factors that influence parenting behaviours (such as the barriers and enablers at individual, community, services and system levels). Evidence on the behavioural determinants that influence parenting practices has supported the development of the parenting behaviours model that the Framework presents. Evidence on what works in influencing parenting behaviours has also shaped proposed activities and approaches. These include designing, developing, adapting and implementing parenting support policies, programmes and services; developing information and communication activities and materials; empowering parents and service providers in shaping parenting support; and strengthening service providers' capacities to effectively engage with parents and deliver relevant and tailored information and guidance in engaging and human-centred ways. The proposed SBC strategies follow a systems-strengthening approach, leveraging local capacities and resources and empowering relevant stakeholders.

Box 2.

Elevating parenting support through global initiatives and partnerships

The importance of parents and universal parenting support has been highlighted across different organizations, initiatives, frameworks and resources. The Global Initiative to Support Parents (GISP) is an inter-agency collaboration, formed in response to the COVID-19 pandemic, which aims to provide universal access to parenting support by scaling up existing initiatives, advocacy and innovations. GISP was initiated by UNICEF, WHO, Parenting for Lifelong Health at the University of Oxford, the Early Childhood Development Action

Network (ECDAN) and the Global Partnership to End Violence. Individually or jointly, these organizations have produced a set of essential resources, including UNICEF's Vision for Elevating Parenting, UNICEF's Gender-Responsive Parenting Technical Note, UNICEF's Designing Parenting Programmes for Violence Prevention: A Guidance Note, WHO's Guidelines on Parenting Interventions to Prevent Maltreatment and Enhance Parent-Child Relationships with Children Aged 0-17 and GISP Inter-Agency Vision. This regional framework complements these existing resources while focusing on parenting support for early childhood development in Europe and Central Asia. See below for a brief timeline up to this Framework's creation.

1990
Convention on the Rights of the Child

2015
Sustainable Development Goals

2017
Advancing ECD: from science to scale (Lancet series)

Ukraine   COVID-19

2021-2023
UNICEF's Vision for Elevating Parenting, GISP Inter-Agency Vision, WHO Guidelines on Parenting Interventions

2018
Nurturing Care Framework

2023
Development of UNICEF's regional Framework

2024
Launch and roll out of the Parenting Support Framework for the Early Years

2. The power of parenting in the early years

"Support parents with kind words. With encouraging words."

– Mother, Kyrgyzstan, Bebbo Parenting Survey, 2023

Decades of research have demonstrated that the impact of parents may never be greater than during the early years of life, when a child's brain is rapidly developing and is shaped by interactions and experiences with parents, family and the broader environment. [13] [14] Parents help children to build their knowledge, skills and attitudes, charting a trajectory for later health, development and well-being. The experience of parenting also impacts parents themselves, giving rise to a number of new emotions and challenges, and highlighting the need for support services. The central role that parents play in holistic child development is well recognized, and attention to parental well-being is an important element of parenting support (*see Box 3*).

Responsive parenting can protect against adverse childhood experiences such as abuse and neglect, mental illness, substance abuse and environmental crises or threats. [15] [16] However, parents and families often need support in order to fulfil their role, especially if they are burdened by their own risk factors at an individual, community or environmental level, such as inadequate family-friendly policies, having limited access to information, resources and services or a lack of support for their well-being, and exposure to crises or emergencies.

Investing in parenting support benefits children, families and societies at large. Recent systematic reviews covering over 100 randomized control trials have shown that parenting interventions during early childhood are effective for improving a range of early childhood development (ECD) and parenting outcomes, such as knowledge, practices and parent-child interactions – as well as mental health and well-being. [17] [18] [19] Parenting interventions can contribute to a reduction of violence in the family – specifically, violence against children and violence against women. [20] Evidence suggests that parenting programmes simultaneously can reduce both forms of violence, even when not specifically designed to do so. Parenting interventions can also address gender inequality and harmful gender norms, particularly when they are designed to be gender transformative. At a community level, the provision of parenting support can enhance the well-being of communities and promote greater social cohesion. At a societal level, parenting support can ensure a more effective use of resources, reduce inequalities, break the cycle of violence, and develop and promote human and social capital.

Every child is entitled to supported parents, and supported parents are an investment in every child's future. Recognising the importance of parents is about respecting the rights of every young child and the right of parents and families to be supported, as enshrined in the United Nations Convention on the Rights of the Child (UNCRC). Nevertheless, despite the growing recognition of the importance of parenting support, only 26% of governments worldwide indicate that parenting support programmes reach all parents in their country. [21] [22]

Box 3.

Parenting for holistic child development

Since its launch in 2018, the Nurturing Care Framework has provided a roadmap for applying a nurturing approach to early child development.[23] The Framework captures two interrelated action areas. The first looks at the five components of nurturing care, each one crucial for a child's healthy growth and development. The second action area focuses on the child's environment, recognizing the critical role that parents and other caregivers have in providing nurturing care, while articulating the importance of communities, services and policies to support families of young children.[24]

Importantly, the Framework puts parents at the centre of nurturing care. It highlights the power of families and caregivers – in all their diversity and different roles – to support their children's development across all five nurturing care components. It also recognizes the power of communities, service providers and policy makers in supporting and empowering parents, and emphasizes a family-centred approach to early childhood development, bringing families to the forefront of policies and services.

Components of nurturing care

GOOD HEALTH
ADEQUATE NUTRITION
RESPONSIVE CAREGIVING
SAFETY AND SECURITY
OPPORTUNITIES FOR EARLY LEARNING

ENABLING POLICIES
SUPPORTIVE SERVICES
EMPOWERED COMMUNITIES
CAREGIVER'S CAPABILITIES
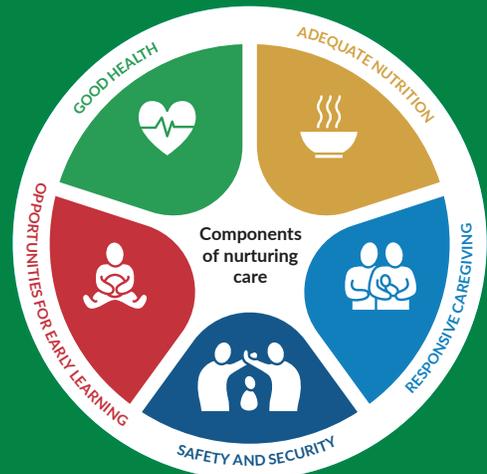
3. Parenting and nurturing care in Europe and Central Asia

"In a society that overwhelms parents with information, and in an era of hyper-consumerism and beautiful imagery, what is needed are means of support that can effectively help and calm new parents – certainly better working conditions which would mean more quality time with your children."

– Mother, Greece, Bebbo Parenting Survey, 2023

Europe and Central Asia are home to around 21 million young children under 5[25], who grow and develop while experiencing wide disparities in nurturing care.

A disproportionate burden is falling onto disadvantaged groups, such as children with disabilities and developmental delays, children growing up in at-risk families, children in alternative care (including residential care), Roma children or children from other minority ethnic groups. The limited quality and scarcity of data hinders a deeper exploration of the various dimensions of parenting behaviours, yet the evidence that is available shows that with an understanding of the various enablers and barriers at individual, community and environmental levels (*see Annex I*), parents' skills and knowledge can be enhanced to enable more desirable behaviours across the nurturing care domains.

**Figure 1.
Parenting
and nurturing
care in
Europe and
Central Asia**

GOOD HEALTH

Refers to the health and well-being of the children and their caregivers. Why both? We know that the physical and mental health of caregivers can affect their ability to care for the child.

over 300.000 young children not covered by DTP vaccine

33 - 93% ycross-country variability in service-seeking behaviours for child pneumonia.

ADEQUATE NUTRITION

Refers to maternal and child nutrition. Why both? We know that the nutritional status of the mother during pregnancy affects her health and well-being and that of her unborn child. After birth, the mother's nutritional status affects her ability to breastfeed and provide adequate care.

41% of infants are being exclusively breastfed

25% of children aged 6 to 23 months consume a minimum acceptable diet.

2MIL of children under 5 are stunted, and just under 2MIL are overweight

SAFETY AND SECURITY

Refers to safe and secure environments for children and their families, includes physical dangers, emotional stress, environmental risks (such as pollution), and access to food and water.

55% of young children are violently disciplined at home

1MIL children under 5 experience unadequate supervision

5,000 children under 1 died due to air pollution

OPPORTUNITIES FOR EARLY LEARNING

Refers to any opportunity for the infant or child to interact with a person, place, or object in their environment. Recognizes that every interaction (positive or negative, or absence of an interaction) is contributing to the child's brain development and laying the foundation for later learning.

58% of young children have access to at last three books at home

73% of young children have two or more playthings at home

53% of young children not accessing pre-primary education

RESPONSIVE CAREGIVING

Refers to the ability of the caregivers to notice, understand, and respond their child's signals in a timely and appropriate manner. Considered the foundational component because responsive caregivers are better able to support the other four components.

26% of you children do not receive adequate early stimulation and responsive care at home

15% of fathers versus **54%** of mothers provide early stimulation and responsive care at home

4. Parenting support framework for the early years

4.1 The building blocks of the Parenting Support Framework

UNICEF's Parenting Support Framework for the Early Years aims to strengthen and raise the quality of support offered to parents of young children in the ECA region. It is based on UNICEF's Social Ecological Model[26] and the Nurturing Care Framework[27], and is aligned with UNICEF's global vision for parenting support.[28]

The Framework is underpinned by the following guiding principles:

- **Rights-based:** Guided by the rights, needs and voices of parents and children, with a specific focus on the most vulnerable, marginalized and at-risk communities.

- **Equity-focused:** Ensures fair access to quality, universal and progressive parenting support to all parents.

- **System-centred:** Aims to strengthen the quality of services and the enabling environment, with efficient coordination mechanisms in place for integrated parenting support.

- **Evidence-informed:** Rooted in science, including social and behavioural sciences, and best practices.

- **Inclusive:** Responsive and tailored to parents' specific needs, including parents of children with disabilities, Roma parents, refugee and migrant parents and others.

- **Gender-transformative:** Promotes gender-equitable parenting roles that foster positive social and gender norms and support children's development and growth.

- **Strength-based:** Recognizes, values and respects the parents' capacities and strengths when providing the best for their children.

- **Family-centred:** Responsive to the preferences, needs and voices of parents and families. Parents play an active role in creating, shaping and evaluating the support offered to them. They are empowered and supported in a way that leaves them more competent and better able to advocate for themselves and their children's rights.

- **Context-specific:** Flexible and tailored to the specific needs, culture and context of parents and children.

"There is no infrastructure to make parenthood easier. There is no content in the media on this topic, there are no available psychologists, doctors in hospitals do not provide moral support but try to blame you instead, society demands too much and men do not help."

– Mother, North Macedonia, Bebbo Parenting Survey, 2024

Parenting does not occur in a vacuum, but rather within a network of people, structures and systems surrounding families. The Framework aims to capture different pathways of influence, reminding us that in order to address parents' holistic needs, we need to go beyond parenting support interventions and strengthen the services, communities and environments around families. Thus, the Framework's building blocks reflect parenting's wider ecological context, and guide how parenting support can be coordinated and integrated across multiple actors to empower parents, improve parental competencies, boost their support networks and provide them with access to quality resources and services.

The Framework builds on The Pyramid of Parenting Support, using the universal-progressive approach, and examines the supportive, enabling environments and quality services needed to effectively support parents (*see Figure 2*). The Framework also unpacks three key dimensions of parenting behaviours that parenting support should target and strengthen. The following sections will explore the Framework's different components and introduce potential approaches to consider in strengthening and advancing each one.

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Figure 2. Key building blocks of the Parenting Support Framework for the Early Years

Parenting behaviours: The key dimensions of parenting behaviours needed for nurturing care and support for parental well-being.

Parenting support: A universal and progressive approach to parenting support (universal, targeted, intensive) that recognizes that the intensity and range of support will depend on parents and families' unique needs.

Quality services: The key factors needed in order to provide quality parenting support.

Enabling environment: The key factors that create and support a positive and enabling environment for parents.
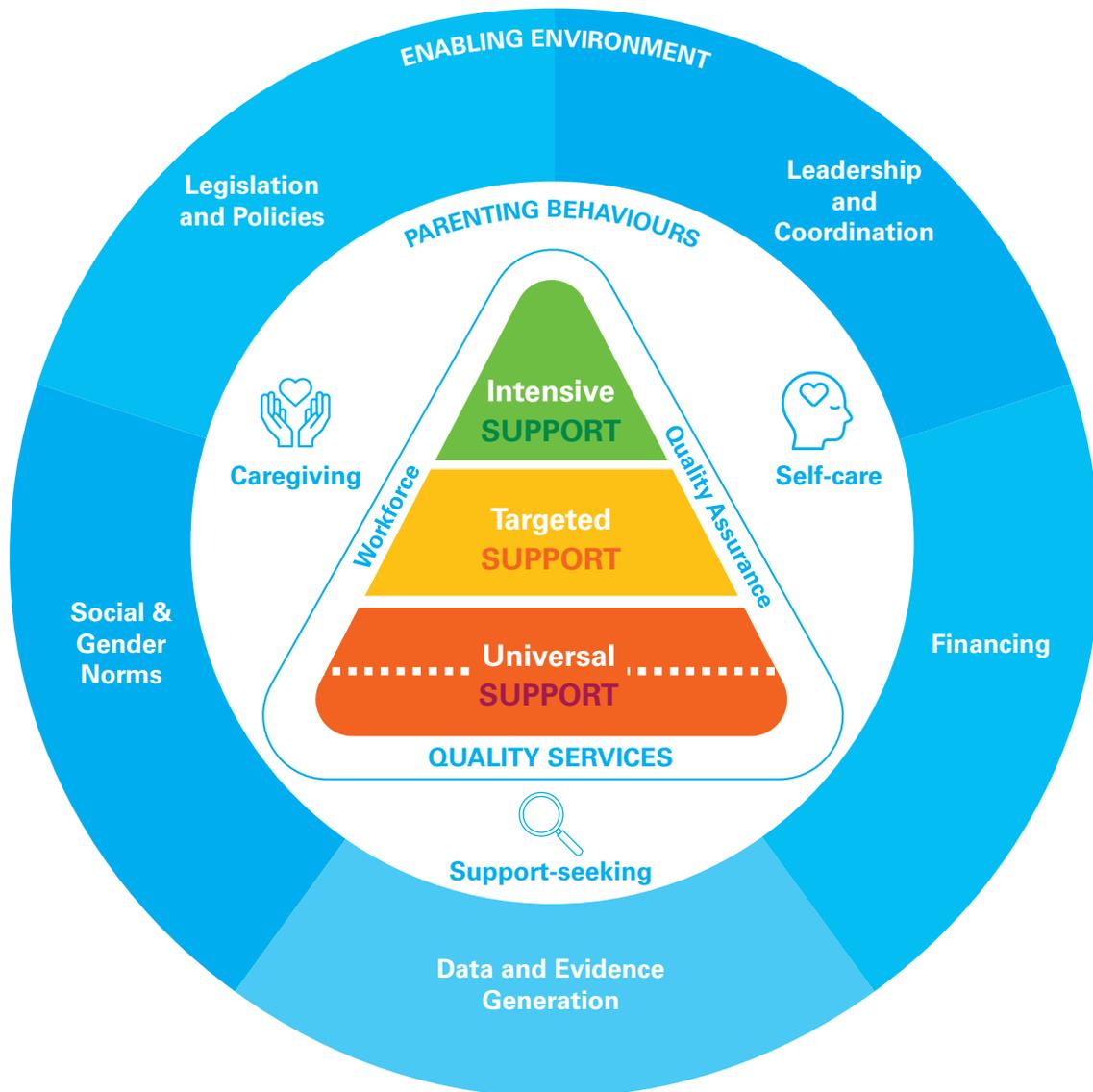
4.2 Dimensions of parenting behaviours

A wide range of parenting behaviours and practices influence the early years of a child's life. These stem from an interplay of multiple factors, including parents' own childhood experiences and individual circumstances, their beliefs and expectations, gender norms and gender socialization, social support networks, parenting-related knowledge and self-efficacy, children's characteristics and the availability of support, services, family-friendly policies and other socio-economic considerations.[29]

"Parents need a bit more understanding."

– Mother, Serbia, Bebbo Parenting Survey, 2023

Despite this diversity of drivers, parenting behaviours can be grouped into three interrelated categories that are needed for the provision of nurturing care:

- **Caregiving behaviours –** refers to the direct care that parents provide to their children, including through their interactions, responses and communication. When parents have enhanced support, beliefs, knowledge, skills and confidence, they enjoy strengthened parent-child interactions, closer bonds with their children and enhanced well-being. They are also better able to support their children's needs, development and well-being. Children need responsive care from their parents to support their holistic development.

- **Support-seeking behaviours –** refers to parents accessing services and informal support that may bolster their own and their children's well-being, development and growth. For this component, parents must know what support and services are available to them and their children, and where, when and how to access them. In places where there are limited services, all parents should be empowered to demand them.

- **Self-care behaviours –** refers to behaviours that parents engage in to support their own physical and mental health, recognizing the importance of parental well-being. When parents feel supported and take care of their own well-being, they are better able to provide care to their children[30]. Parents need nurturing care as well as children.

These parenting behaviours are interconnected and can influence one another. Parenting support interventions should ideally consider all three dimensions of parenting behaviours – supporting and empowering parents not only to adopt responsive caregiving practices, but also raising awareness about the services and support available (and how to demand and access them) as well as how to prioritize their own parental well-being. When we bolster these behaviours, we empower parents and support children's nurturing care.

4.3 Parenting support pyramid

The Parenting Support Pyramid recognizes that not all parents and children need the same intensity and range of support. To best meet individual needs, support is built across three levels (universal, targeted and intensive) using a universal and progressive approach.

The pyramid provides a way to articulate and understand the layering of services to support families of young children based on their needs. Not all parents will require the same level of intervention, and needs may fluctuate and evolve. Nevertheless, all parents should benefit from universal and basic parenting support. The universal approach may be followed by more targeted or intensive programmes for families with specific or complex needs (*see Figure 3*).
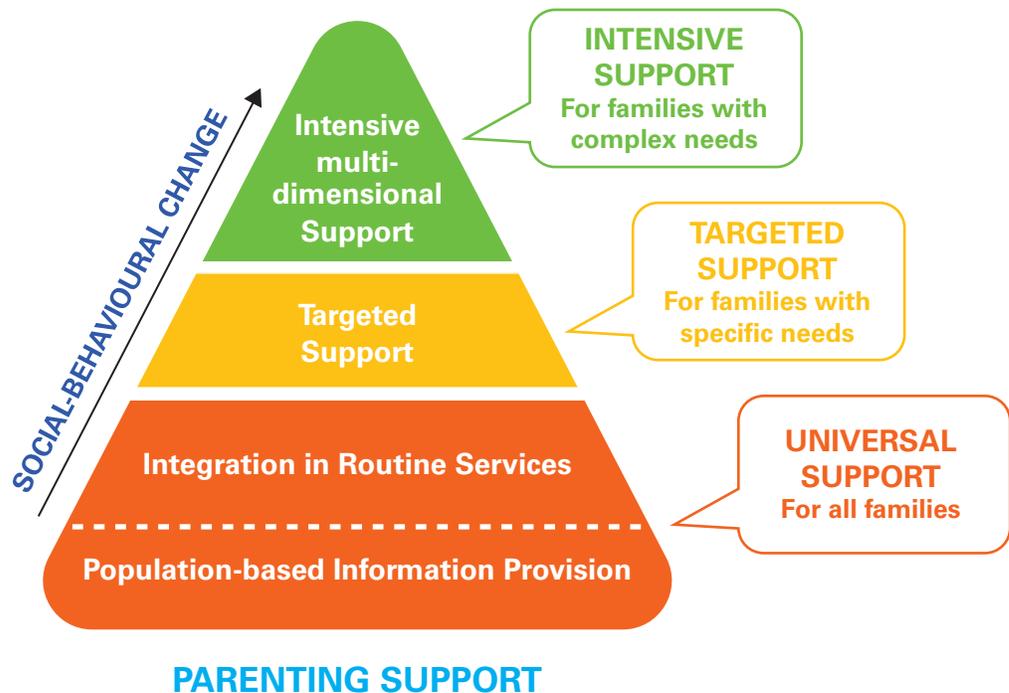
"Sometimes, a smile is enough."

– Mother, Serbia, Bebbo Parenting Survey, 2024

Of the three levels of support outlined in the programmatic pyramid, universal support has received the most attention and investment globally. Universal support utilizes existing sectoral entry points to provide light preventive services to all families and identifies families who might need additional support[31]. This universal layer of support has benefited from a growing understanding that parents are key agents of change for young children and that family-centred approaches yield better outcomes than child-centred approaches. Efforts to normalize access to family-centred support as a universal right are expected to generate strong benefits for both parents and children.

In the ECA region, most countries invest in a combination of universal and more targeted or intensive programmes to meet the needs of their diverse populations and specific vulnerable groups.

Figure 3.
The Parenting Support Pyramid

SOCIAL-BEHAVIOURAL CHANGE

Intensive multi-dimensional Support

Targeted Support

Integration in Routine Services

Population-based Information Provision

INTENSIVE SUPPORT
For families with complex needs

TARGETED SUPPORT
For families with specific needs

UNIVERSAL SUPPORT
For all families

PARENTING SUPPORT

Social and Behavioural Change is integrated across the different layers of parenting support. Behavioural insights and evidence should inform and guide the type of support needed alongside the modalities for engagement and delivery. For example, population-based information provision can be effective in raising awareness and addressing parents' concerns and misconceptions. However, if we want to encourage and support parents to adopt new behaviours and strengthen their self-efficacy and skills, individual guidance from service providers and support groups that use demonstration and practice will be more effective. Likewise, if we want to challenge harmful norms that perpetuate child maltreatment, reflective discussion among parents, their wider families, and communities will help move parents beyond attitudinal change and towards behavioural change. To achieve sustainable change, social and behavioural science should underpin policies, services and programmes to adequately leverage the influence of service providers and systems in place. Parents and community groups should also be engaged in designing and developing parenting support services and programmes to ensure parents' needs, preferences and expectations are met, and ultimately ensure there is demand for such support.

4.3.1. Universal parenting support

Universal parenting support is a broad, population-based, core preventive package accessible to all parents and designed to be inclusive, non-stigmatizing and welcoming.

Universal parenting support can be delivered as a stand-alone parenting intervention or by integrating parenting support components (e.g., key messages, counselling or skills-building) into existing services across multiple sectors. Universal parenting support is even stronger when its coordination support across different sectors ensures continuity of services, avoids gaps and addresses different parenting needs.

This layer of the pyramid helps to build a culture of

positive parenting and nurturing care. It enables all families of young children to receive support, while those with specific needs can be identified early and referred to more specialized services. Universal support is split into two levels: Population-based information provision (when no direct contact with frontline workers is needed) and the integration of parenting support into the routine services that reach parents (usually involving direct contact with frontline workers).

A) Population-based information provision

The first level of universal support focuses on population-based information provision in order to improve knowledge and shift attitudes and beliefs on the role of parents and the importance of parenting, nurturing care and parenting support.

The provision of parenting-related information and guidance through information and communication technologies contributes to parenting in two ways:

i) It supports socialization with respect to how children develop, what parenting involves and how parenting can facilitate and support children's development and well-being.

ii) It raises awareness and supports the development and maintenance of parenting behaviours, practices and skills through interventions that use these technologies (*see Box 3*).[32]

Information provision should encompass and promote all three key dimensions of parenting behaviours: caregiving, self-care, and support-seeking. Information should be designed and presented in a user-friendly and accessible way aligned with the local context. It should consider parents' various abilities, such as disabilities, literacy levels, languages spoken by different groups and access to and capacity to use digital resources.

Though used frequently around the world, population-based information provision is not enough to support parents. Globally, 71% of countries and territories surveyed reported broadcasting messages on television, radio or other media that promote responsive caregiving and

opportunities for early learning for children under 3.[33] Using localized, targeted messages through contextualized dissemination channels can positively impact parental knowledge and support-seeking behaviours.[34] It can challenge and address widespread misconceptions around parenting practices, stereotypes and social expectations. It can help promote and reinforce positive social and gender norms, and foster more engaged and supportive communities. It can also support advocacy and policy dialogues through consistent messaging on why supporting parents matters and ensuring that parents have access to information, supportive services and an enabling environment. Nevertheless, this is not enough to support parents.

"We need awareness raising that parenting is not easy. It is a serious 24/7 job."

– Mother, Serbia, Bebbo Parenting Survey, 2024

Population-based information provision should be combined with other levels and layers of support. For example, an awareness-raising campaign on the importance of breastfeeding can be combined with home visits focusing on breastfeeding and baby-friendly initiatives in maternity hospitals. Similarly, a campaign addressing misconceptions and harmful gender norms, such as the role of fathers in providing children with nurturing care, can complement other targeted parenting interventions that are gender-transformative and focus on fathers' engagement with the family.

In recent years, there has been an increase in the use of digital solutions such as mobile apps, online platforms, online support groups and text messages to provide information (*see Box 3*). These tools can help make information readily available wherever and whenever needed, even in humanitarian settings and among communities with intermittent internet access. The hybrid delivery of digital resources can be an effective strategy when combined with human interactions – for example, when paired with phone-based support, home visits and group meetings to boost understanding and engage parents in reflective

discussions to challenge prevailing social norms and misconceptions. Care should be taken when using exclusively digital means to reach communities, as the digital divide and inequalities are still strong within the ECA region.

> **In humanitarian settings,** the provision of universal information can complement other types of interventions and direct service delivery by raising awareness of distress reactions among young children, promoting positive parenting in times of crisis, highlighting the importance of parents' and children's mental health and need for psychosocial support, and by sharing practical information on when and how to access support and essential services. It can also play an advocacy role in ensuring continued access to services for refugees or internally displaced populations, or the creation of additional community-based services (e.g., play and learning hubs, children's corners, mother and baby corners).

Key features of population-based information provision include:

- **Audience:** Society as a whole, including parents, families, service providers and communities.

- **Delivery platforms and mechanisms**: A combination of platforms and channels should be considered due to families' diverse profiles and preferences, and should be combined with more direct opportunities for engagement (for example, through routine services and targeted or intensive support). Modern technologies, such as apps, messaging services, websites, parenting hubs, games, applications, chatbots and social media, can also be leveraged to reach parents and communities and disseminate key information and messages. Options such as community-based mechanisms, mobile platforms (such as mobile units), radio, podcasts and social services remain effective channels for reaching and engaging with communities.

Table 1. Examples of population-based information provision across different stakeholders

Public sectors – health, education, social/child protection	• Awareness raising activities/campaigns on various topics (positive parenting, gender transformative parenting, responsive feeding, child development, immunization, child-centred learning, etc.) and through national and local campaigns that help build support structures, normalize support-seeking behaviours, de-stigmatize parenting education, and challenge misconceptions of others' expectations or beliefs, including harmful gender and social norms. • Displaying child-friendly materials, parenting information and key messages within services, facilities and public spaces. • Stigma-reduction interventions and campaigns; activities that address parental mental health issues, parental fatigue, burn-out and other challenges. • Awareness raising on rights, entitlements, available services and sources of support, including how, when and where to access them. • Leveraging tech-based approaches, such as mobile phone apps (Bebbo), Rapid Pro, television, radio, video and online portals (e.g., Parenting Hub), to share key messages and information.
Business sector	• Information dissemination (both external and internal facing), through workplace wellness programmes, communications campaigns on the importance of positive parenting and the interrelationship between work, self-care and parenting, and the display of relevant information within the business sector (e.g., banks, shops, pharmacies). • Awareness raising on entitlements and family-friendly policies via HR, unions, management trainings etc., that support employees in their parenting role, including communication on the essential role of fathers and their right to use parental leave, and ensuring sufficient parental leave for their employees.
Community-based organizations and networks, including faith-based organizations	• Developing and leading parenting support actions, integrating parenting advice and dialogue around norms in their existing projects and activities or joining and amplifying broader communication campaigns implemented by national or local authorities and stakeholders. • Promoting men's involvement in parenting; leveraging local role models and opinion leaders to challenge widespread harmful beliefs, misconceptions and social expectations.
Public broadcast / Mass media	• Media organizations such as television, radio and print can implement and/or amplify public awareness campaigns through public service announcements, commercials, podcasts, billboards, newspapers etc. Special sessions dedicated to parents and child development can be scheduled (e.g., morning parenting hour, TV series dedicated to topics on parenting,). Parenting information can also be provided through digital engagement platforms and using approaches like gamification.
Influencers and opinion leaders, including faith leaders	• Playing an important role in stimulating dialogue and challenging and shifting social and gender norms and/or joining and amplifying existing campaigns.

Box 3. Examples from practice

a) Bebbo, a self-paced digital parenting program reaching parents through evidence-based content

Since its launch in November 2021, this innovative program packaged in the form of a mobile parenting app and developed by UNICEF's Regional Office for Europe and Central Asia has gained significant traction – with over one million downloads. It is currently available in 15 languages across 15 countries, implemented jointly with governments/national partners as an open-source digital public good, and integrated within key services such as health and education. The app is not limited by internet connectivity issues, and offers its wealth of resources in both online and offline modes – so it can be quickly deployed to deliver real-time information and alerts in emergencies.

Bebbo grows with the child as it aims to inform and assist parents/caregivers of children aged 0-6 in supporting their child's development from birth to the first day of school with high-quality, evidence-based information and numerous interactive functions. It also provides specific guidance for parents and caregivers on how to care for their own well-being.

The app was designed in partnership with parents, and their feedback is continuously collected and addressed in regular app updates. Bebbo has also started supporting rapid surveys to strengthen programming inputs and hear from parents on their needs. More than 20,000 responses were received during the official parenting month of June 2023, highlighting the need for adequate family-friendly policies and parenting support programs across ECA countries.

b) Using digital space and television to support and empower parents in Armenia

UNICEF, together with Armenia's Ministry of Health, established Babycef.am online platform in 2019 to support and empower parents across Armenia with relevant information in their native language. Since its creation, Babycef.am has become an important digital tool, reaching around 110,000 visitors per year and offering evidence-informed content on various aspects of parenting, including child health, nutrition, pregnancy and motherhood, nurturing care, early learning, brain development, the role of play and social interaction, and positive disciplining. Approximately 90 per cent of visitors to the platform rate the articles and content as useful.

Starting in 2021, UNICEF Armenia also initiated social listening activities to monitor conversations in the digital space and to identify information gaps and issues that parents face while caring for their children, in order to further inform content development for Babycef.am. Social listening showed a high usage and reliance on Facebook groups, so a partnership was established with the Facebook group Armenian Parents Corner, which helps mainstream Babycef.am content and supports parents with reliable and trustworthy information. As of 2022, the Facebook group has held regular Facebook Live sessions with leading Armenian healthcare and parenting experts, presenting on topics related to health, nutrition, mental health, early learning and childcare.

In addition to digital media, UNICEF jointly with Public TV and the Ministry of Heath developed a parenting TV show called 'Parents' Meeting'. The 16 episodes, each 35 minutes long, were broadcast during spring 2024 and covered a range of essential topics related to child development and well-being. Episodes are interactive and dynamic, and include features such as discussions among parents, expert Q&As, myth busting video reportages, success stories, plus games and practical exercises with parents.

c) The EUDI website supports parents with information and advice in Azerbaijan

In 2020, the Early Childhood Development (EUDI) website was developed by UNICEF Azerbaijan and the Society for Regional Development under the Early Childhood Development Project, with financial support from the European Union. Three years later, the website was successfully handed over to the State Committee on Family, Women and Children Affairs of the Republic of Azerbaijan.

EUDI aims to raise awareness among families, communities and wider society on the importance of holistic early childhood development and nurturing care. Information provision includes blog and articles on positive parenting, tips, games, videos, locally developed webinars and a calendar of relevant events. Information is complemented with advisory services, which enable parents to receive direct support (either online or by phone) from specialists in the field. In summary, the website has created an online community encompassing thousands of parents/caregivers of young children and professions across many different sectors. To date, over 16 thousand parents and caregivers are registered on the platform.

B) Universal parenting support integrated into routine services

The second level of the universal Parenting Support Pyramid focuses on strengthening routine services to support responsive caregiving, nurturing care and the well-being of parents.

The early years are crucial for parents and children to set the foundation of nurturing care and optimal development. That is why parenting support works well when integrated into services that parents routinely access, starting from pregnancy. Integrating parenting support into routine services and existing delivery platforms through various sectoral 'touch points' – health and nutrition, education, social and child protection services – is key to strengthening parenting behaviours, ensuring universal coverage and providing stigma-free support (*see Figure 4*). Similarly, recognizing that parents are crucial agents of change for young children also means recognizing that parenting support is a necessary aspect of service delivery.
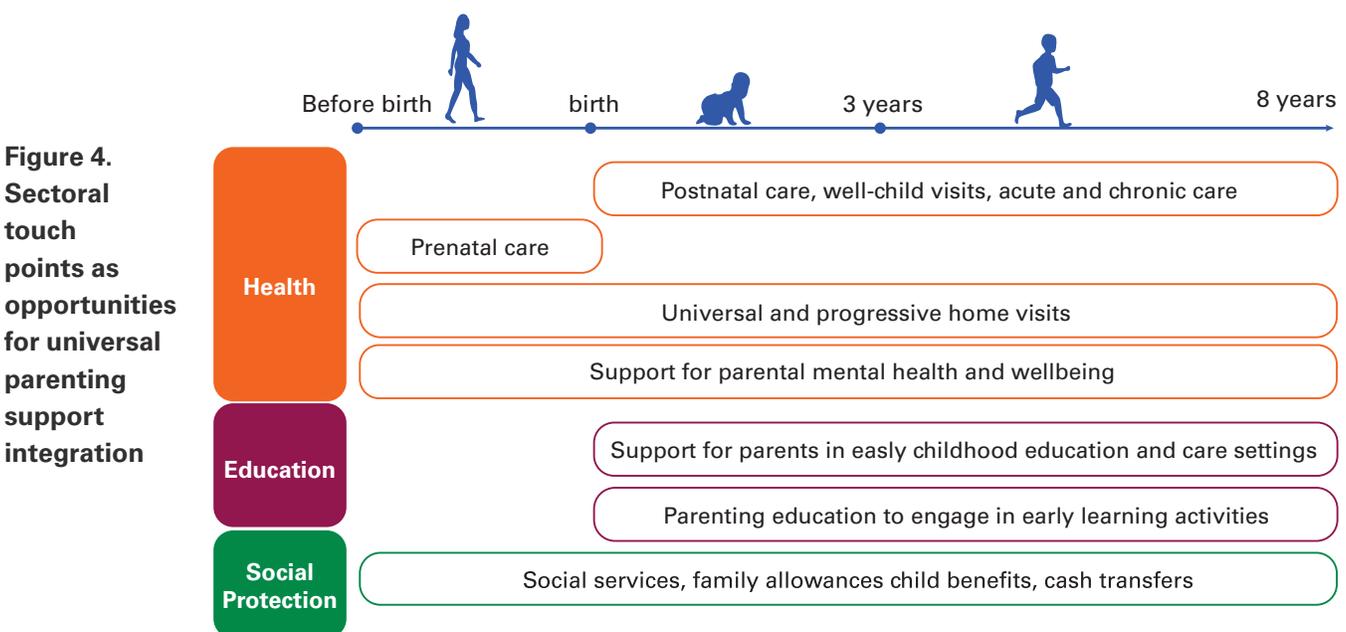
Universal services are preventative in nature, and most effective when they can be accessed at multiple 'touchpoints' across sectors

throughout child development. It is important that service providers speak the same language across these touchpoints, with their key messages and guidance aligned.

"We need free access to doctors who can provide professional advice anytime."

– Mother, Ukraine, Bebbo Parenting Survey, 2023

Support usually includes counselling and providing information, education, advice and training programmes. These services are most effective for less severe parenting problems, for instance, a lack of informed parenting knowledge.[35] Meeting quality standards for participation, intervention dose (frequency, intensity, duration) and establishing pathways for connecting families with specific needs to more targeted services are all critical for impact.[36] [37] The success of parenting support also depends upon ensuring that the service delivery and service providers' interactions with parents are not affected by their own internal biases, individual negative attitudes, beliefs or prejudices (*see Section 4.4.1 B*).

Figure 4. Sectoral touch points as opportunities for universal parenting support integration

Before birth — birth — 3 years — 8 years

Health
- Postnatal care, well-child visits, acute and chronic care
- Prenatal care
- Universal and progressive home visits
- Support for parental mental health and wellbeing

Education
- Support for parents in easly childhood education and care settings
- Parenting education to engage in early learning activities

Social Protection
- Social services, family allowances child benefits, cash transfers

Through direct contact, competent service providers have the opportunity to build trusting relationships with parents and promote the habit of accessing services for their various support needs. Service providers are well-positioned to model skills, guide parents in practising self-care and responsive caregiving, and identify and address common misconceptions, misinformation, myths and harmful norms. They can also help connect parents and parents-to-be through existing parenting social and support groups. Evidence shows that directly accessible universal support, such as counselling and provision of information, is a key element of parenting support.[38]

Key features of parenting support through routine services include:

• **Audience:** All parents of young children accessing routine services across sectors.

• **Delivery platforms and mechanisms:** Primary service delivery platforms across key social sectors include health care, early childhood education and child and social protection. There should be multiple routes for families to access services and to facilitate inclusion, alongside easy access to support (e.g., for parents with disabilities) and a variety of delivery mechanisms. These can include home visits, individual or group sessions, workshops, work with parents and their children together, lectures and peer support. Information and support are usually provided face-to-face, although it may also take place through digital means. Service providers can offer user-friendly and up-to-date printed materials, such as flyers, brochures or guidelines, or digital resources relevant to parents' varying needs and culturally appropriate and accessible for different literacy levels and languages spoken.

In humanitarian settings, crisis conditions (such as armed conflicts, natural disasters and large-scale outbreaks of disease) make it more difficult to access and provide continued routine services. This calls for increased attention to the access and quality of services, as it is even more important to assess and support parental well-being and competencies in times of increased stress and need for support. When resources or movement are restricted, routine service providers can communicate through digital channels, text messages, social media, radio and television, etc., to convey relevant information, despite not having the same impact as in-person counselling. Different entry points can also be used to reach parents in humanitarian settings, including through referral or recruitment by local leaders and health or social services workers at safe spaces or service delivery points. Mobile teams can deliver support to parents at home, recruit and train community workers or volunteers to conduct parenting groups and clubs or make home visits to support families. Some additional challenges to be considered are language barriers, limited entitlements and access to services, and cultural differences that may affect service demand and use.

Table 2. Strengthening parenting support through routine services

Sector	Description	Examples of parenting support

Health and nutrition	Family-centred and supportive health care services can empower parents to provide nurturing care and to take care of their own physical and mental health. Health professionals are considered as trusted practitioners and allies to parents. Due to their almost universal reach in the early years of parenthood, they have great potential to support holistic child development as part of routine maternal, newborn and child health services, while also building parents' knowledge, skills and competencies for responsive caregiving, support-seeking and self-help. Services can be facility-based (health clinics, primary health centres etc.) or provided in community centres and at home (by home visitors or community health workers).	• Promoting and supporting positive parenting through the provision of information, counselling, guidance and behaviour modelling (including through demonstration and practice sessions) on:
		
		  ◦ Parental health and well-being
		
		  ◦ Preparation for birth and breastfeeding
		
		  ◦ Holistic child development, including developmentalneeds and monitoring of developmental milestones
		
		  ◦ General advice on parenting practices (positive discipline, play, reading etc.)
		
		  ◦ Infant and young child feeding
		
		  ◦ Fathers' role in offering nurturing care
		
		  ◦ How to build and boost positive and responsive parent-child interactions
		
		  ◦ Child safety
		
		  ◦ How to support stimulation, early learning through play and responsive feeding
		
		• Monitoring and identifying needs, strengths and risks at individual, family and community levels.
		
		• Linking parents to other services or resources (targeted services, parenting apps).
		
		• Organizing mother-baby and parent group activities; convening and facilitating parent/peer support groups.
		
		• Setting up baby- and child-friendly spaces in health facilities where parenting support can be provided

Sector	Description	Examples of parenting support
Education	Early Childhood Education and Care (ECEC) services and professionals can play an important role in engaging and empowering parents and supporting them in creating rich learning and development-supportive experiences for their children. ECEC policies and plans treat family engagement as a critical component of quality service provision. Standards for community and family engagement are commonly included in teacher training programmes. Engaging parents not only as 'users' but also as creators, volunteers, advocates and decision makers can empower parents to take an active role in their children's learning and development. Parenting support through ECEC can be facility-based (kindergartens, day-care centres, creches), provided in community centres, at home or online.	• Promoting positive parenting and early learning, care and development through the provision of information and guidance. • Encouraging parental volunteering, recruiting and organizing parents to participate in ECEC programmes (e.g., sharing their skills and experiences, organizing social events, fundraising). • Engaging parents in decision-making processes through the establishment of parent councils, associations or teachers' associations. • Designing and facilitating parenting workshops or sessions on how to establish a rich and stimulating learning environment at home that complements learning and development in ECEC settings. Convening peer support and experience-sharing sessions and clubs with parents. • Setting up online platforms where parents can share ideas with teachers and other parents and receive information and build communities of support. • Setting up child-friendly spaces in education facilities where parenting support can be provided.
Social protection	The pandemic provoked a growing interest in implementing universal approaches to social protection for children, such as child benefits. Nevertheless, the social welfare and protection sectors often have less universal contact with parents, as they typically provide a more tailored service to marginalized and at-risk populations. In some countries, early childhood education and care services for children aged 0–3 years are provided by the social protection sector (e.g., the Ministry of Social Affairs), in which case the examples in the Education sector (as mentioned above) also apply. When provided within the social protection system, parenting support can be implemented by different partners including government, NGOs, cooperation agencies and it can be delivered through home visits, community-based group meetings, or during visits to facilities that distribute child and family benefits.	• Providing information, goods and services on child health and development, positive parenting and safe home environments. • Increasing financial resources for parents through universal child and family benefits (child benefits, maternity benefits, birth grants etc.). • Connecting universal cash transfers to information, knowledge and / or parenting support interventions ('cash plus'). • Strengthening social support among parents. • Introducing incentives to increase the use of available parenting support programmes. • Setting up child-friendly spaces in social welfare facilities where parenting support can be provided and sessions with parents can be facilitated.

Box 4. Examples from practice

a) The Universal Progressive Home Visiting Programme

The Universal Progressive Home Visiting Programme sees trained nurses and health care workers employ a holistic approach to childcare in the home setting. In ECA, UNICEF has established and supported governments to implement this model for community health in 17 countries. With UNICEF's support, nurses have been trained to offer health services as well as provide families with guidance on nurturing care and good parenting practices. Nurses are also trained to observe possible risks or signs of developmental delays or disabilities, and refer families to additional support services. Over the course of repeated visits, nurses build warm, trusting relationships with families. They use standardized tools for service delivery and support the implementation of intersectoral service delivery. The model includes both universal and more targeted (progressive) components of support, and has the potential to serve as an outreach arm of primary health care to reach the most vulnerable groups (e.g., Roma or other marginalized communities, or those living in remote, rural areas) who have limited contacts with health care providers due to various barriers (such as social, geographical or financial). A multi-country formative evaluation of UNICEF-supported community health home visiting initiatives in 2019 signalled these efforts to be 'one of the most pioneering' in the region's health sector. The evaluation highlighted improved parental knowledge and skills, successful detection of risks and delays and referrals to health or other services, the establishment of a robust legislative and regulatory framework to support expansion of home visiting, and significantly increased skills and agency of home health visitors.
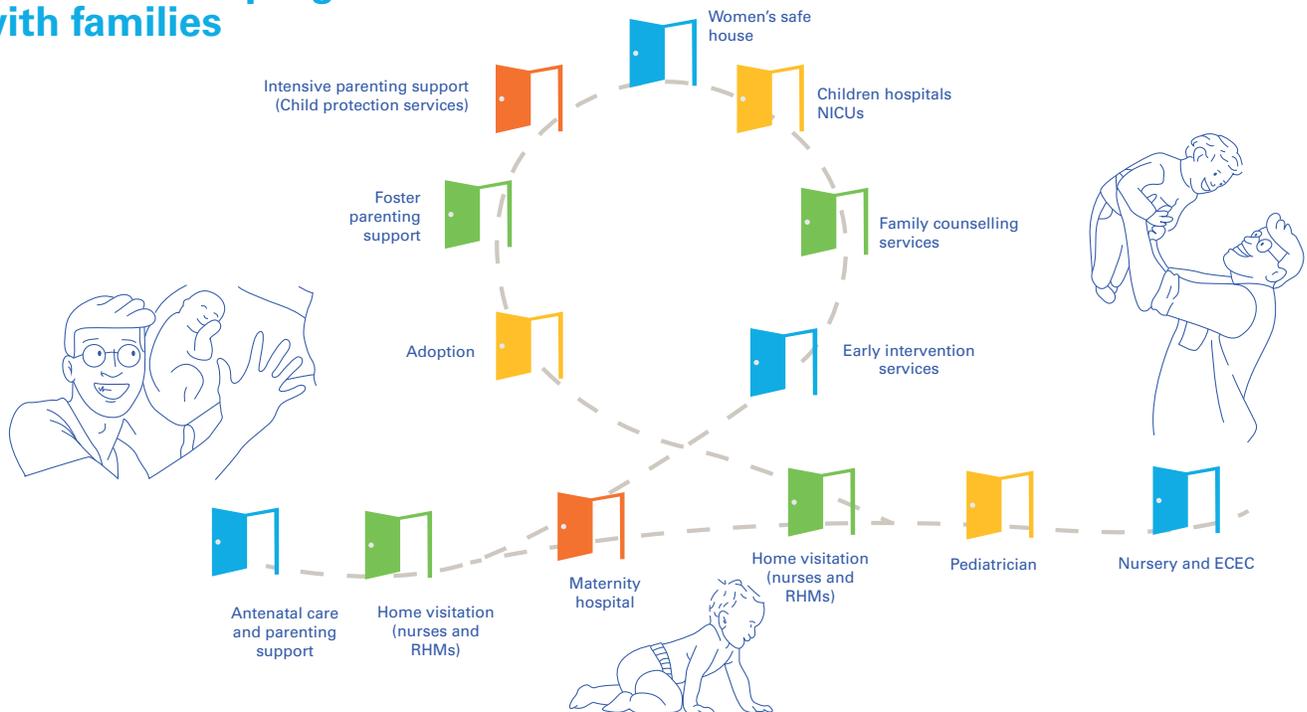
b) Playful Parenting (PP) - Universal Provision of Multisectoral Parenting Support in Serbia

In 2016, the Serbian Ministry of Health endorsed a National ECD Program that recognizes the key role of the health sector in promoting a child`s development and supporting parents in creating conditions for a child's optimal development, with the additional participation of other relevant sectors. In 2018, a Call for Action for multi-sectoral ECD was signed that outlined parental support as one of its core goals, in line with the Nurturing Care Framework. To underpin the operationalization of the Call for Action and help to bridge persisting inequalities, in 2019, a multisectoral Playful Parenting Programme was initiated in Serbia to continue strengthening institutional and professional capacities in health care, preschool education and social welfare, in order to foster responsive, playful, gender-balanced parental practices and parental well-being.

From 2020 to 2023 over 60.000 parents and caregivers in Serbia were empowered through family-based counselling (in-person and remote), 40% of whom were fathers – a ratio which grew by 10% between 2022 and 2023.). Additionally, parenting schools were opened in primary health centres across Serbia, along with a 24-hour telephone counselling service (Halo Beba) for parents. Between 2022 and 2023, 20% of local municipalities started to allocate funds to support health care and other sectors to provide optimal support for early childhood and parenting.

Where the PP program meets with families

Women's safe house

Intensive parenting support (Child protection services)

Children hospitals NICUs

Foster parenting support

Family counselling services

Adoption

Early intervention services

Antenatal care and parenting support

Home visitation (nurses and RHMs)

Maternity hospital

Home visitation (nurses and RHMs)

Pediatrician

Nursery and ECEC

4.3.2 Targeted parenting support

Targeted parenting support involves supplementing universal support services with a range of more targeted interventions tailored to families' specific needs or identified risks.

For some parents, the universal package of services will not be enough to adequately address their needs. Various issues may increase parental vulnerability and could pose a risk to parenting and optimal child development. Targeted support is usually provided within the context of secondary prevention to address specific needs or potential risks to nurturing care (such as ill health, poverty, poor education or literacy, poor housing, food insecurity, family structure, adolescent parents, difficulties in breastfeeding, challenging parent-child relationships, social isolation or exclusion and limited service-seeking behaviours). The cumulation of risks and disadvantages is common in vulnerable families[39] and amplifies pressures on parents – highlighting the need for targeted and coordinated support.

Specific needs are usually identified through primary universal prevention, with multiple entry points and no 'wrong door' approach. Universal services are an important soft entry point of first contact that leads parents to access targeted services and support. Whenever a parent or a child accesses a sector and service, they should either be provided with the necessary support or they should be referred to, and connected with, a more appropriate and accessible targeted service that addresses their specific needs.

Targeted services are often embedded in universal services. However, the content and type of engagement go beyond providing information, counselling and anticipatory guidance to respond to families' specific needs. Support is provided by trained and supervised personnel (e.g., frontline workers and trained community volunteers) who will counsel, model, coach and build relationships with parents. For targeted support, additional resources in the community are often leveraged through local networks for parenting support, faith-based programmes, family

and community support groups and community centres. While a universal layer of home visiting services caters to all young children and their parents, progressive elements allow for additional visits. These may provide support tailored to families with additional needs, including triggering social and child protection interventions when necessary.

The aim of targeted support is to address families' specific needs and decrease the impact of risk factors that may cause harm, while increasing factors that may protect children and parents. Decisions regarding programme dose (duration, frequency, and intensity), delivery modality (face-to-face or tele counselling, etc.) and setting should be determined based on the existing resources and systems, community needs, risk profiles of the population and cultural context. In general, interventions should have measurable and concrete aims based on a strong theory of change and the desired outcomes.

"It is important to have psychological support and help for people raising their children alone without help from their families."

– Mother, Greece, Bebbo Parenting Survey, 2023

Active outreach strategies are often designed to find, identify and build relationships with vulnerable and marginalized families or those who may have specific needs and link them with services that match their needs and preferences. Behavioural research to understand parents' needs, challenges, preferences and expectations may also be considered to inform the design and delivery of targeted support. Sometimes, targeted parenting support is associated with stigma, which means there may be a lack of demand from parents. To encourage parents to seek help and support, sometimes interventions deliver 'targeted' services under the umbrella term 'universal'. The most common barriers to participation are practical, such as not having transportation, childcare or having work and scheduling

conflicts.[40] These can be resolved by providing transportation assistance and childcare, and matching programme scheduling with parents' own schedules.

> **In humanitarian settings**, targeted parenting support is provided to parents to mitigate the negative impacts of exposure to adverse events and associated distress, as well as disrupted access to services and social support networks (*see Box 5*).

Key features of targeted parenting support include:

- **Audience:** Parents deemed to be at risk for parenting difficulties and parents with some specific needs emerging from their family circumstances. These may include living in poverty, being exposed to high levels of community violence, families with children at risk of domestic violence, lack of parental competencies for optimal and safe child development, substance abuse or mental health problems, families or children with developmental delays or disabilities, families living in humanitarian settings (migrant, refugee population), families who are participants in social protection programmes, single parents, adolescent parents or parents from marginalized groups (such as members of the Roma population). This also includes families at risk of separation.

- **Delivery platforms and mechanisms:** Multiple formats are needed for service delivery to suit the specific needs and preferences of parents. They can be available in formal formats (e.g., the provision of additional services through sectoral entry points and routine services, such as preschools, social service facilities and health facilities), semi-formal formats (e.g. services provided through community-based organizations and the voluntary sector) or informal formats (e.g., facilitated playgroups, community groups and peer support groups arising from social support networks)[41]. Services can be delivered in different settings, including at home, in formal facilities (e.g., parental counselling in health centres) or through a combination of both, with or without additional technology-based support (such as apps, text messages and tele counselling).

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Table 3. Illustrative examples of targeted parenting support implemented in ECA region for families with specific needs or identified risks

Specific needs or risks	Illustrative examples
Poverty	• Growing Up Together Count Us In programme (Croatia) • Combining cash transfers with parenting interventions ('cash plus')
Social exclusion	• Growing Up Together Count Us In Plus (Croatia) for Roma parents • Parenting support in home languages through ECEC services
Nutrition	• Nutritional/breastfeeding counselling for low-birth-weight infants • Child feeding programmes or meal programmes combined with parenting interventions
Violence	• Parenting for Lifelong Health or 'Brizne Porodice' (Montenegro) • Services in support of child protection and prevention of family separation through family empowerment and reduction of risk factors
Gender	• Gender-transformative support groups or programmes, e.g., Fathers' Clubs (Croatia) • Support for gender-transformative parenting through the health sector and home visits
Developmental delays or disability	• The Caregivers Skills Training – designed to be delivered by non-specialist care workers as part of health, education and social services for children with developmental delays or disabilities and their families (Serbia, Bulgaria) • Growing Up Together Plus (Croatia)
Well-being (physical and mental)	• Caring for the Caregiver (Serbia, Montenegro) • Support for the mental health and psychosocial well-being of parents through the health sector – e.g., routine antenatal and postnatal services, including home visits • KOMET in Sweden, Parenting Shops in Belgium and Family Centres in Germany offer stress reduction/management activities and psychotherapy for parents
Humanitarian settings	• Parenting support provided in Play and Learning Hubs (Poland, Romania, Moldova, Slovakia, Czech Republic, Hungary and Bulgaria) and at Mother Baby Corners as part of the earthquake response (Türkiye) where children can learn and play, and parents can receive support. • The national Appreciative Parenting Programme adapted for Ukrainian refugees and delivered across educational institutions in Romania • Focused care for distressed parents, including psychological first aid

Box 5. Examples from practice

a) 'Growing up Together' parenting programme, supporting parents with diverse needs in Croatia

Since 2008, UNICEF Croatia has supported the development of high-quality, evidence-based parenting support programmes, with an emphasis on providing both mainstream as well as specialized, targeted support for underserved and/or marginalized communities. Illustrative programmes include 'Growing Up Together' (targeting all parents of children up to 5 years of age), 'Growing Up Together Plus' (targeting parents of preschool children with developmental disabilities), 'Growing Up Together – Count Us In' (targeting parents of preschool children who are beneficiaries of the social welfare system), 'Growing up Together – Count Us In Plus' (targeting Roma parents of preschool children), and 'Father's

Club' (targeting persons who have the role of a father to children aged 1–4 years). These programmes are designed to improve children's well-being and developmental outcomes by enhancing parents' knowledge, self-efficacy and skills. The programmes also focus on parents' well-being, general resourcefulness, coping skills and, when needed, any issues related to co-parenting. Changes in legislation in the social welfare system have enabled the implementation of the family centres programme as well as the scaling up of all developed programmes through the European Child Guarantee National Action Plan. In 2022, based on this programme, a pilot was tested to support working parents of children aged 0–8 years, by providing them with opportunities to gain knowledge and skills on responsive caregiving practices through online education modules, while at the same time supporting the business sector in enhancing their family-friendly workplace policies.

b) 'Empowered/ *Dodać Sił'* parenting intervention supports refugee parents in Poland

In collaboration with the Polish Institute of Mother and Child, UNICEF supported the development and implementation of parenting interventions for the Ukrainian refugee population across 30 municipalities in Poland. The programme was developed by a group of Polish and Ukrainian experts from the Institute of Mother and Child, the Centre for Education Development, the School for Parents and Caregivers Association, and the Ukrainian Wings for the Family Association. The intervention focused on: 1) Improving the well-being of parents, and 2) Developing the ability to support children in the face of adversity and difficulties. To achieve this, parents received professional support and tools to facilitate their communication with children and to strengthen a supportive family atmosphere. Themes cover topics including resilience, active listening, expressing and accepting feelings, communication, strengthening self-esteem and self-awareness, supporting children in goal setting and goal-achievement, recognizing, responding to and resolving conflicts, using positive feedback and drawing consequences. The intervention is delivered by Ukrainian and Polish trainers, who rated their own training 4.95 out of 5 in terms of usefulness, training materials and quality of master trainers. To date, hundreds of parents have benefited from the intervention.

c) Parenting for Lifelong Health ('*Brižne Porodice'*) supports responsive caregiving and non-violent discipline in Montenegro

Since late 2017, the Government of Montenegro and UNICEF, with the support of the European Union, have made considerable progress in implementing the Parenting for Lifelong Health for Young Children programme in Montenegro (called *'Brižne Porodice'*, or Caring Families). Since then, more than 1,700 parents from two thirds of Montenegrin municipalities have been recruited into the programme, with a high completion rate of 88%. This parenting programme was introduced to support the implementation of Montenegro's legal reform in 2016, which prohibited all forms of corporal punishment, and was in response to the high rates of violent discipline in the country (66 per cent of children 1–14 were subjected to violent discipline, and 31 per cent experienced physical punishment, according to the Montenegro Multiple Indicator Cluster Survey 2018). This group-based programme is delivered by trained facilitators from preschool institutions, primary health care centres, a few primary schools, non-governmental organizations and other relevant institutions. The programme was evaluated during its first delivery cycle[42]. Data is also collected on a regular basis to monitor programme delivery and consistently demonstrates positive outcomes. Measures to anchor the programme in the national professional development system have included accrediting the facilitator and supervisor training programmes with relevant national institutions. The national Preschool Education Strategy 2021–2025 and the national ECD Strategy 2023–2027 envisage measures for scaling up and facilitating access for vulnerable groups. In 2024, a guidance document for centres for social work for referring parents to the parenting programme was developed. A guidance note for the programme's online delivery also exists, and Montenegro was also one of the countries involved in implementing ParentChat (an online adaptation of the programme delivered via video conferencing and chat sessions) during COVID-19.

Intensive parenting support

Some parents and caregivers may need comprehensive, individualized and intensive support, usually from multiple professionals or services across different sectors.

This layer of parenting support is intended for a diverse group of parents who may experience longer-term challenges to meet their children's developmental needs and provide nurturing care. This may be due to the influential factors associated with their individual characteristics, including parenting style, health and behaviour, the child's needs or the wider social and cultural environment within which parenting unfolds. For example, the mother's very young age, a parent's mental health or physical health difficulties, disability and other complex needs, substance use, experience of family violence including domestic violence against children, exposure to other potentially traumatic events, poverty, social isolation and lack of social support networks, unemployment or homelessness – any of which may affect the parent's capacity to maximize their children's potential. It is important to note that support for parents of children with disabilities, and parents with disabilities, should be available at any level; as with any other family, support needs will vary. More intensive parenting support for families with disabilities (of either the parent or child) may be influenced by a lack of other accessible and inclusive services (e.g., health and education), stigma and discrimination in the community, inaccessible universal parenting services or the general isolation and exclusion that may damage the family's overall well-being and social support network. Caring for a child with developmental difficulties, including delays and disabilities, or a child with complex health needs, may also contribute to elevated levels of stress among parents, foster parents, carers or other caregivers, and may create additional needs to strengthen caregiving competencies, parental well-being and access to important services. Child protection concerns, including risk of separation of the child from the family and subsequent entry to the child care system, often

require intensive parenting support in order to ensure a safe and nurturing family environment. Specialized support can be needed for caregivers of children in family-based alternative care, including foster parents, kinship carers, and caregivers of children reintegrating to families after residential care.

Intensive parenting support is often highly individualized. It is tailored to the unique needs of each individual family and child and builds on a deep understanding of family and life contexts, including their strengths and opportunities. It is often flexible and adaptable in order to respond to the needs of the parents and the child as they evolve over time.

> **"Parents need help at home when no people are around to help. Especially people with severe disabilities who are blessed to become parents and try to cope every day."**
>
> – Mother, Greece, Bebbo Parenting Survey, 2023

Intensive parenting support requires integrated service delivery and case management. In many cases, multiple factors may influence parenting, creating complex and high support needs, which can be addressed through multiple service providers or professionals across different sectors. These families often need intensive, continuous and coordinated support from different services, including access to other social services such as income support, housing assistance and job training. Interventions may involve collaboration with multiple agencies and sectors to deliver trans- or inter-disciplinary services, with usually one agency and case manager that facilitates and coordinates support. Interventions can best reach parents when integrated within existing systems, such as child protection, health, education and social

protection, rather than conducted as stand-alone programmes (such as specialized services, without other layers of support). Specific considerations related to safety and referrals to appropriate services should be taken into account in case of violence against children or violence against women committed in the home by a family member. With this in mind, this layer is often supported by a multi-sectoral workforce, including social workers, nurses, educators, counsellors and other mental health workers (e.g., psychologists and psychiatrists), as well as other specialized services for survivors of gender-based violence or child victims of sexual abuse, ensuring that service providers have received adequate training and regular supervision, and can coordinate to address the needs of the family in a holistic and family-centred manner.

Intensive parenting support often involves the development of an individual family support plan that defines the scope and intensity of support, as well as providing a framework for inter-agency coordination. Intensive parenting support may include tailored counselling, guidance and coaching, home visiting, therapeutic interventions or other forms of support, depending on the identified needs of the parents and the child. This kind of support can also be part of the child protection system's statutory family support service to families with children who are at risk of separation due to neglect, abuse and exploitation. In this case, a parenting programme can be obligatory, prescribed by the court or a relevant social work authority, as part of a comprehensive family support plan.

Effective and integrated parenting support requires shared values, responsibilities, coordination and practice across professional disciplines and service providers, anchored in the principles of a family-centred approach. In family-centred practice, professionals work to form a collaborative partnership with parents to enhance parental competencies and family functioning. The family-centred approach acknowledges and builds on parental strengths. Family-centred approaches that follow a socio-ecological model also consider the functioning of each individual within the family

as integrally connected and, similarly, see the family system as influenced by, and influencing, its surrounding systems – including community and societal factors. Family-centred approaches assess and address risk and protective factors at all levels of social ecology.

Integrated systems benefit from supportive cultures and norms, shared responsibilities and supportive communities. Services should inform and guide parents towards the support that is available in their community and local environment, in order to increase social support networks.

In humanitarian settings, parenting may be particularly challenging, especially for parents with additional and high support needs. The humanitarian context may exacerbate pre-existing vulnerabilities or create new needs for intensive support due to exposure to violence and other potentially traumatic events, such as displacement, family separation, insecurity or the loss of formal and informal support networks, plus limited access to basic services and traditional forms of parenting support. Delivering intensive support may also be difficult in conflict, displacement or disaster situations when the public systems are affected or refocused to address immediate humanitarian needs, or families cannot access the available support because of language and cultural barriers or limited entitlements. In humanitarian contexts, intensive support includes specialized and integrated support services. For example, in the context of a refugee crisis, parents may receive specialized mental health and psychosocial support, or they may receive coordinated support to access services such as refugee accommodation, job-seeking assistance, education or health services in host countries.

Key features of intensive parenting support usually include:

- **Audience:** Parents and children with complex needs, high risks or a diagnosable condition (such as those related to domestic violence, developmental delays or disabilities, mental health disorders, substance abuse disorders, chronic health conditions or persistent adversities such as poverty, or parents reported to child welfare services), caregivers in families at risk of family separation and caregivers of children in family-based alternative care, including foster parents and kinship carers. Some parents may also have complex needs due to an interplay of multiple individual and contextual factors that may impact

their capacities and resources for nurturing care (for example, poverty, mental health issues, addiction or marginalization).

- **Delivery platforms and mechanisms:** Support can be delivered in settings such as health clinics, early intervention, community centres, kindergartens, social service facilities and families' homes. All support should be individualized to meet the specific and unique needs of each child, parent and family. Parents may access group services to exchange peer support with other parents who may be facing similar circumstances and complement ongoing sessions. Both group and individual sessions can be delivered in person or online to suit parents' preferences and needs.

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Box 6. Examples from practice

a) Early Childhood Intervention (ECI) in Portugal: Family-centred services for parents of children with developmental difficulties

Portugal has a national system of multisectoral, integrated and trans- or interdisciplinary early childhood intervention services targeting children aged 0–6 years old with developmental delays, disabilities or health conditions that limit the child's 'personal and social growth and participation in age-appropriate activities', as well as targeting children at serious risk of developmental delay.

Three key sectors – health (e.g., medical doctors, nurses and therapists), social welfare (social workers) and education (e.g., pre-school support teachers, special educators and psychologists) participate in the national ECI system and service delivery for families. The system is coordinated and organized from a family perspective, considering the contribution of the family for child development, as well as stress factors that
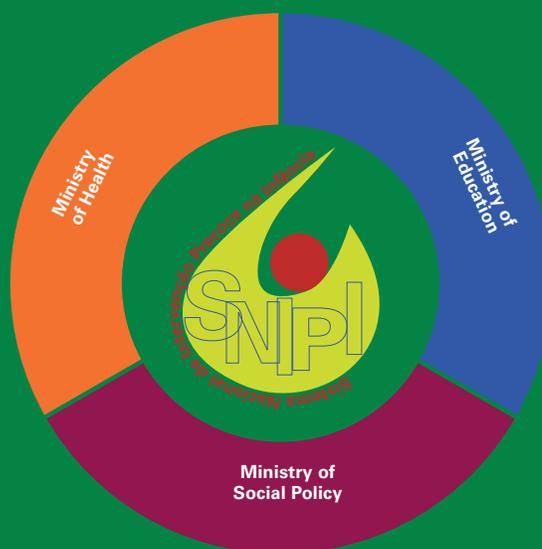
may affect the family (e.g., social, financial and psychological factors) and affect the family's ability to support the child. In other words, the family is considered a critical element in planning and provision of services. Thus, the services aim to enhance both the child's and caregivers' competence, skills and confidence. Services are delivered in the child's natural environment – at home, in the playground, at kindergarten, etc. – in which ECI professionals are working collaboratively with families to develop and implement a plan that supports the family.

4.4 Strengthening parenting support through quality services and an enabling environment

To effectively implement parenting support that addresses the key dimensions of parenting behaviours (caregiving, support-seeking, and self-care), services should be high-quality and inclusive, complemented by a broader enabling policy and social environment. Section 4.4.1 dives into the key elements that support the design and delivery of quality parenting support services, while Section 4.4.2 examines the enabling environment components that are also crucial for supporting parents.

"There should be more investment in helping new mothers financially and also supporting them in raising their children."

– Mother, Albania, Bebbo Parenting Survey, 2023

Box 7.

What do parents in Europe and Central Asia need?
A survey across 13 countries using the Bebbo parenting app

The Bebbo parenting app was used during the annual 'Parenting Month' to conduct 'Voice of Parents' surveys and receive input from parents on the type of support they need the most across 13 countries in Europe and Central Asia (ECA). The survey collected responses from over 12,000 respondents in 2023 and almost 5,000 respondents in 2024, most of whom were mothers. In 2024, nearly three-quarters of respondents expressed a need for stronger parenting support, but only half said they were able to access support. Parents most frequently sought support from family, friends, neighbours and the Bebbo parenting app. They less frequently turned to community organizations, government and public services for help. The data from both the 2023 and 2024 surveys indicate that quality and accessible early childhood education and care, flexible working conditions – including paid leave for when children are sick – as well as financial assistance are the top priorities for parents in ECA.

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4.4.1 Quality services

A) Quality assurance (service design, delivery, monitoring & evaluation)

Parenting support services and programmes should be inclusive, accessible, affordable, gender-transformative, family-centred and informed by evidence. The success and effectiveness of these services depend on their quality, what is being delivered and how it is being delivered. When service delivery meets the needs and expectations of parents and families, it builds trust, drives demand for repeat services and creates demand for other services. It can also reinforce the social perception that parenting support services are a common and acceptable means of helping parents strengthen their capacities and interactions with children.


"We need standardized advice... Different doctors and institutions offer conflicting guidance on parenting, leaving parents unsure of whom to trust or which advice to follow."

– Father, Serbia, Bebbo Parenting Survey, 2023

Quality of services is not a stand-alone component but rather a process that encompasses a number of interlinking factors related to **service design, delivery, monitoring and evaluation**.

Quality parenting support services should include the following key aspects:

- **Services should be provided through all sectors**, along the universal and progressive tiers of parenting support, in order to reinforce continuity of care, build a common vision and drive accountability across sectors and ministries.
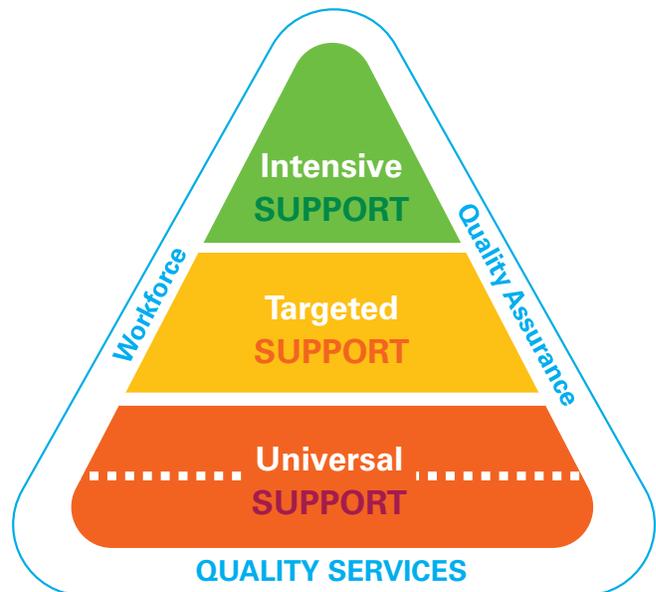
- **Services should be evidence informed.** Timely and regular evidence and data on parenting practices, enabling factors and barriers, effective parenting intervention models and evidence-informed content (backed by social and behavioural science) should support the design, delivery and improvement of parenting support services (*see Box 8*).

- **Services should be designed to support the key parenting behaviours** – **caregiving, support-seeking and self-care.** The contact between service providers and parents creates several opportunities. First, to provide parents with relevant information, guidance and tools on caregiving, which improves parent-child interactions and ensures the child receives nurturing care. Second, this contact provides an opportunity to reinforce support-seeking behaviours – whether for the same or new services, based on identified additional needs. Ensuring parents know when, where, how and why to use recommended services is important so that they and their children can receive timely support. Third, the interaction between service providers and parents creates an

opportunity to support parental well-being, provide them with information, tips and advice and/or refer them to other professionals so that they can nurture their self-care capacities.

- **Services should be designed and delivered in a collaborative and empowering manner**. Participatory strategies, such as human-centred design approaches, should be considered when developing and/or adapting parenting support services and programmes, ensuring parents can make a meaningful contribution to the process, which strengthens their trust in the services and increases their motivation to participate and use them to their full potential. Parents' needs and expectations will vary, and it is critical to ensure that different voices are heard when developing and providing parenting support – including voices from vulnerable and marginalized groups. Opportunities for engaging with parents include connecting with parents' associations and groups and creating opportunities for parents to contribute as volunteers, experts and facilitators. These approaches can also help strengthen community capacities and increase parents' sense of belonging, which facilitates the building of formal and informal support systems. When designing and providing these services, any barriers to engagement and retention at structural, service delivery, community and family levels should be examined and addressed. Appropriate and accessible feedback and complaints mechanisms should be in place for parenting support services, and insights should be used to refine and adapt the services provided.

- **Quality standards, guidelines and protocols should be established and implemented for service delivery.** They should be evidence-informed and well-defined in order to adequately capture different service elements (including structural and process components) and measurable – so that they can be monitored and adjusted as necessary. It is important to ensure that service providers are competent and have the right attitudes, beliefs, skills and appropriate

accountabilities and resources to deliver quality services. There should be alignment between sectors to support inter-sectoral referral and coordination, implementation and evaluation.

- **Services should be monitored and evaluated regularly to improve effectiveness and address changing needs and contexts.** A monitoring system can help track different aspects of service delivery, including outcomes in terms of parenting practices, child development and service use. Collecting evidence related to service availability, affordability, accessibility, effectiveness and efficiency can provide insights on how to improve service quality and equity. Thus, evaluation findings should inform any necessary adjustments, improve the effectiveness of parenting support services and contribute to a more efficient and accountable allocation and use of resources.

- **Capacity development and supportive supervision for quality assurance should be in place**. Training and other capacity development activities on quality standards and monitoring should have clearly articulated targets and learning objectives, as well as methods for measuring learning outcomes. Short-, medium- and long-term assessment approaches can be considered, from self-assessments and pre- and post-training assessments, to measuring competencies and self-efficacy, or assessing the application of knowledge and competencies in daily interactions with parents. Additionally, supportive supervision can assist frontline workers in improving and monitoring their performance while empowering and building their resilience and skills for coping with complex professional challenges and crisis situations. Supportive supervision can be aligned with performance monitoring processes, helping service providers implement new knowledge and competencies effectively and confidently, acknowledge and strengthen good performance, identify learning gaps and needs, and define development plans.

Box 8.

Using social and behavioural science to strengthen service quality and effectiveness

Depending on the goals and expectations of parenting support services, different approaches and models may be considered to strengthen service quality. Though population-based information provision can be effective in addressing knowledge gaps, positive and open interpersonal communication and motivational interviewing approaches have a stronger potential to address negative attitudes, harmful beliefs, myths and misconceptions. Adult learning strategies that encourage interaction and reflection should be prioritized to engage parents, rather than using a more traditional, top-down and didactic manner of interaction. Individual and group sessions can create safe spaces for parents to try and practice new behaviours (also known as modelling) and allow them to discuss these behaviours with professionals and peers in a safe and supportive environment – leading to better outcomes for parents in terms of knowledge and self-efficacy. Social norms programming approaches should also be considered when addressing widespread harmful beliefs, misconceptions, stereotypes, traditions and norms. This evidence should be used when designing or adapting parenting support services and programmes to ensure their relevance, effectiveness and efficiency. Ideally, new services should be pre-tested and evaluated to ensure they are effective before scaling them up.

B) Workforce

The quality of parenting support is directly connected to the accountabilities, knowledge, competence, approach and motivation of the workforce providing these services. Despite coming from a range of sectors and professions (e.g., doctors, nurses, social workers, early childhood education and care professionals), including informal workers or paraprofessionals (e.g., community mediators, community health workers and trained volunteers) they all should share core technical knowledge, attitudes and inter-personal communication competencies (*see Annex II*).

"Paediatricians should help parents much more, not just examine and treat sick children. I want them to tell me what I can and cannot do, and what is in the best interest of my child."

– Father, Serbia, Bebbo Parenting Survey, 2024

The service providers delivering parenting support are expected, in general, to perform the following functions to strengthen parenting behaviours and support them in offering nurturing care (*see Annex III*):

a) Understand – Assess and identify the family's needs and strengths through open and positive dialogue, showing empathy, care and respect, and applying interpersonal communication techniques. This helps to build trust between service providers and parents, ensuring parents are more open and willing to follow the information and guidance offered by the service provider as well as building demand for services.

b) Share – Provide parents with relevant information, advice and guidance, using simple and understandable language based on the previously identified needs and

The parenting support workforce performs the following functions:

UNDERSTAND   **SHARE**   **CONNECT & REFER**   **DOCUMENT**
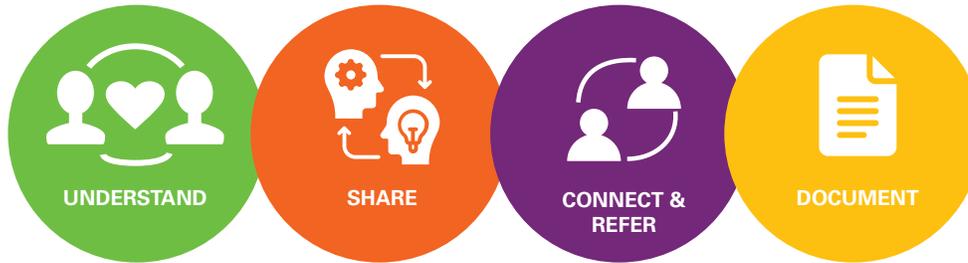
strengths. This means adopting a tailored approach to each family (and sometimes to different family members) based on their needs and challenges.

c) Connect and refer – Identify any need for additional support, and connect and refer parents to more specialized support as well as community support services. Referral mechanisms should be in place to facilitate case referral in and across sectors, including adequate case management and follow-up mechanisms.

d) Document – Keep accurate records of services provided and the parents/families who have received support in order to allow for case monitoring as necessary, including in and between sectors. This assists with monitoring and evaluating the effectiveness of support and helps with the improvement of services. At a macro level, documentation builds evidence of parenting support in general – tracking progress, challenges and any areas for further attention and improvement.

To leverage and strengthen service providers' capacities to deliver parenting support, the following interventions could be considered:

- **Mapping and assessing service providers' capacities across sectors** to provide parenting support. The assessment can be done against

the core knowledge and competencies for different service providers (*see Annex II*) and capacity building needed according to the layers of parenting support (*see Annex IV*). The assessment should explore the enablers and barriers to effective parenting support, including those related to accountabilities, motivation, in-service and pre-service training programmes (and their relevance compared to expected and required service providers' competencies), working conditions, protocols and standards for service provision, supervision and performance monitoring. Behavioural research should also be considered to identify and understand service providers' potential bias, negative attitudes and beliefs, misconceptions and norms that may affect the quality of interaction with parents and the type and accuracy of information and guidance provided. This will help identify gaps and opportunities to strengthen workforce capacities across the sectors and empower service providers to better respond to parents' needs. Tools such as the Parent Support Workforce Needs Assessment Tool[43] can also be used.

- **Developing and implementing a capacity development strategy or plan** to address identified gaps and strengthen workforce capacities across the sectors. This should be done in consultation with service providers, academia,

training institutions, licensing and accreditation bodies and professional associations, who can help define the training curricula (pre-service and in-service training), and the tools and resources needed. Training should also address stigma and discrimination, gender bias and other harmful beliefs and negative social norms, which may impact the quality of interaction and service offered to parents. The capacity development strategy should consider introducing or strengthening supportive supervision, coaching, mentoring and peer support mechanisms to assist service providers in effectively acquiring and applying new knowledge and skills and ensuring their ongoing professional growth. Despite sharing the core knowledge and competencies, the level of education and training of the workforce will vary depending on the needs and requirements of the service across different layers of support (*see Annex IV*). Thus, mechanisms to build these capacities should be established (for example, through in-service training, specific guidance and tools, job aids and protocols). In general, well-trained and supervised personnel are key to delivering high-quality services, achieving targeted outcomes and maintaining intervention fidelity. [44] [45]

- **For effective parenting support, adequate working conditions are key and should be prioritized across the sectors. Protocols and standards need to incorporate the parenting support function, job descriptions and service delivery protocols and standards should be shaped accordingly.** Based on the workforce capacity assessment, adjustments to service providers' job descriptions may be required to ensure they have the right accountabilities and adequate resources and make certain that they operate in a supportive environment with clear career trajectories, and that they are formally empowered to provide relevant support to parents. Workforce efforts must be recognized through fair remuneration and other non-financial incentives, which can motivate the workforce to perform the parenting support function to a high standard.

4.4.2 Enabling environment

An enabling environment is an environment that acknowledges the importance of parenting, creates conditions where parenting support can exist, supports and empowers parents to continuously improve and adopt appropriate parenting behaviours, and challenges and addresses barriers to parenting at the individual, community, services, systems and broader society levels. An enabling environment for parenting support is one where supportive legislation, policies and coordination mechanisms are in place, inter- and intra-sectoral roles and accountabilities are clearly defined and followed, where policies and programmes are evidence-informed and backed by data and evidence – as well as adequate and predictable funding – and where social and gender norms are supportive and conducive to the delivery of parenting support services and the adoption of positive parenting practices.
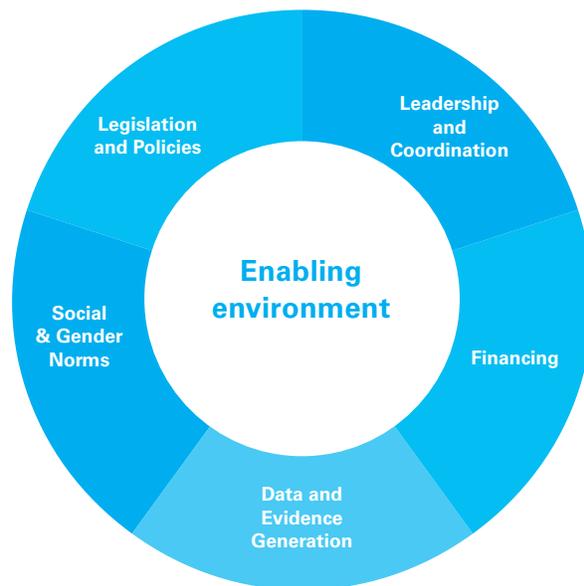
"As a single mother, I have no one close to help me – it would be really useful to get help from the government to be able to pay a nanny. When I return to work, I will work shifts, sometimes until 10 p.m."

– Mother, Romania, Bebbo Parenting Survey, 2023

A) Legislation and policies

Policies that support the delivery of parenting services reduce everyday stresses in the lives of families and improve the well-being of households, while supporting parents in caring for their children and for themselves. It is difficult for chronically stressed families to benefit from parenting programmes when they face multiple disadvantages.[46] Programmatic pathways to support parents (such as the pyramid of support) need to be combined with national and subnational policies and legislation that address the broader contextual and structural factors that affect parents and children's lives (e.g., poverty, unemployment, poor health, housing and education). Evidence shows that supportive public policies have a positive impact on parenting behaviours and achieve positive outcomes for children[47] [48].

Family-friendly policies that provide both parents equally with the time, resources and services they need to fulfil their parenting roles should be in place.

UNICEF calls for a set of four key family-friendly policies for children in the early years, including policies which:

1) Ensure adequate and gender-balanced parental leave

2) Improve access to affordable, accessible and high-quality childcare

3) Support breastfeeding

4) Provide child benefits such as cash transfers and vouchers[49]

Besides family-friendly policies, parenting support elements should be integrated into other policies across health, education and social welfare sectors. Both the legislative and policy environment should secure public financing, standards and access to parenting support. This includes

policies that challenge harmful norms and reinforce positive social and gender norms and positive parenting behaviours, whether by preventing domestic violence, violence against women and girls and child maltreatment (e.g., legal provisions banning all forms of abuse and violence against children), promoting inclusivity and care for children with disabilities, promoting family support and preventing family separation.

To ensure policies are effective and produce desired outcomes, they should be informed by evidence and behavioural science and be developed in consultation with relevant stakeholders, including families. This supports meeting the specific and varied needs of parents, including those from vulnerable or marginalized communities.

"Parents need more time to be with their little ones."

– Mother, North Macedonia, Bebbo Parenting Survey, 2024

Gender-transformative and disability-inclusive approaches should be promoted in the process of policy formulation and implementation and during the evaluation of existing parenting programmes and services. Even when childcare is available, barriers to its use may still persist, for example, in cases of a temporal misalignment between the availability of early childhood education and care services and the end of parental/maternity/paternity leave, or cases of high costs and poor quality. In these instances, parents (predominantly women due to traditional gender norms and/or the persistent pay gap) might still be forced to choose between their career and family obligations (*see Box 9*).

Box 9.

Gender disparity in terms of unpaid care for children in ECA

Women's burden of unpaid care and domestic work remains one of the main barriers to women's quality employment, as gender norms continue to influence women's participation in the labour force.[50] Globally, women and girls spend three times as much time on unpaid care as men and boys.[51] In Bosnia and Herzegovina, women spend over six hours a day on unpaid care work (almost twice the European Union average)[52]. In Belarus, Kyrgyzstan, Serbia and the Republic of Moldova, women dedicate up to twice as many hours to unpaid care and domestic work compared to men. In Kazakhstan, North Macedonia and Kosovo, this gender disparity increases to around three times, while in Türkiye, it exceeds five times. The most substantial difference is observed in Albania, where women spend over six times more hours on unpaid care and domestic responsibilities than men.

Box 10. Examples from practice

a) National Early Childhood Development (ECD) Strategy adopted in Montenegro

In October 2023, the Government of Montenegro adopted the first national ECD Strategy for the period 2023–2027, with the vision that "in partnership with parents, we provide all children in the early development years with a stimulating environment for realizing their rights and full potential". One of the three strategic objectives also recognizes partnerships with parents: "Early development services are equally accessible and of high quality in all stages of a child's development with strengthened families, which are involved on a partnership basis". The Strategy was developed by an intersectoral working group led by the Ministry of Health, and it was inspired by the Nurturing Care Framework. The Strategy was costed and budgeted, with €1.2 million allocated for the implementation of the Action Plan 2023-2024. In December 2023, the Ministry of Health established a National Coordination Body for Enhancing Early Childhood Development, tasked with the monitoring of the ECD Strategy's implementation.

b) National Strategy for Supporting Parents (2024-2030) in Romania

Romania's National Strategy for Supporting Parents (2024-2030) and its implementation plan have been developed by the Ministry of Education, together with the Ministry of Health, the Ministry of Family, Youth, and Equal Opportunities, and the Ministry of Labour and Social Solidarity, with the participation of civil society and public. Parent support services have a universal character, but they are also focused on certain special categories of vulnerable groups, taking into account their particular situations. The vision of this strategy is to create a support system where every parent can develop their parenting skills to confidently guide the development of their child, turning daily interactions into opportunities for growth and maximizing each child's potential, thereby contributing to building a prosperous and inclusive society. The proposed mission is to ensure quality support services for every parent or future parent to develop their parenting skills.

B) Leadership and coordination

Good leadership and coordination enable the effective implementation of parenting support. Coordination mechanisms and accountability structures, with clear roles and responsibilities across different sectors, are key contributors to strengthening parenting support.

This requires effective leadership in coordinating efforts across sectors and different levels of government, an integrated approach to strategy-setting and implementation, and identifying and addressing challenges through evidence-based and behaviourally informed approaches. 'Coordination' can refer to vertical coordination (i.e., among the central and decentralized levels of one sector) and horizontal coordination (i.e., coordination across multiple sectors).

With multiple stakeholders involved, robust intersectoral coordination is usually required by a single institution that has the necessary resolve and resources to convene and coordinate many different actors. Ideally, a national coordination mechanism would be in place, including representatives of different sectors or line ministries, relevant institutions, civil society organizations and parents' associations. In this way, parenting support can be complementarily driven across multiple sectors with clear roles, responsibilities, and accountability while also enabling the identification and allocation of resources and funding necessary to implement parenting support.

"We need to be understood and supported in difficult moments."

– Mother, Moldova, Bebbo Parenting Survey, 2024

C) Financing

The provision of quality parenting support is underpinned by a need for adequate resources that are properly allocated and managed across the three layers of the Parenting Support Pyramid, at both national and subnational levels. Critical to this is sectoral buy-in and the integration of parenting support within sectoral budgets. This requires good planning and budgeting alongside regular forecasting, procurement and reporting to ensure a continuum of care and the delivery of services at an adequate scale and quality.

"We want kindergartens to be accessible and free of charge."

– Mother, Serbia, Bebbo Parenting Survey, 2024x

Carefully identifying and mapping the different dimensions of parenting support services and programmes during the planning and implementation phases is critical for the adequate allocation of resources. Budget allocation should be evidence-informed and needs-based, ensuring parenting support services are available, accessible, affordable and of good quality. Necessary actions should be taken to increase funding for both universal and more targeted services according to service needs (i.e., actual costs and projections) and desired outcomes. Funding should be allocated not only for parenting support services and programme delivery, but also for evidence generation on parents' behaviours, the barriers and enablers to accessing support services, and service providers' capacities and needs. Resources should also be allocated for measuring the effectiveness of services, including services' design and testing, outreach, monitoring and evaluation, quality assurance, service providers' capacity building, performance monitoring and supportive supervision, and the promotion of services. Financing should also support community participation in needs assessments and programme implementation. By including parenting support services in existing programmes, systems and service delivery platforms that already serve families, fiscal investments can be maximized by using existing infrastructure.

Box 11. Example from practice

National Parenting Strategy brings together different ministries in North Macedonia

The North Macedonia National Parenting Strategy has brought together several different ministries under the leadership of the Ministry of Labour and Social Policy in order to develop a cross-sectoral system for supporting families and future parents in improving their parenting skills and competencies. The close cooperation of three key ministries – the Ministry of Labour and Social Policy, the Ministry of Health and the Ministry of Education and Science – was instrumental in drafting the Strategy, as was the participation of the civil society sector and the academic community. In this regard, the Strategy aims to ensure a systematic approach to the provision of parenting support services, resources and initiatives, which are both inclusive and easily accessible, through the involvement of various state institutions, organizations, practitioners, volunteers and local communities – alongside members of civil society and the business community – to promote a cohesive and concerted national approach. The Strategy also contains a costed action plan that outlines measures and activities, and it defines accountabilities and responsible implementers, i.e., responsible institutions/organizations, implementation dynamics and deadlines. In this respect, each of the responsible institutions, organizations and competent authorities needs to anticipate and plan the activities and include them in their annual budget planning for their annual programmes.

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Financial investments in parenting support can yield short- and long-term societal and economic benefits on an individual and national level.[53] Evidence demonstrates that investments in family and parenting support are fundamental to national economies.[54] Increasing investments in strengthening families and scaling up parenting support have been posited to help achieve SGD goals and realize returns from issues ranging from economic losses to violence.[55]

D) Data and evidence generation

Quality data and evidence generation on parenting needs, behaviours and drivers, plus parenting support services and their quality, relevance and effectiveness, should be regularly collected across sectors and used to support and inform programming, decision making and the allocation of resources at a national and sub-national level (e.g., cross-sectoral data dashboards on parenting). Generally, data management should serve to streamline service provision, facilitate obtaining efficiencies, and increase the quality and equity of parenting support for all parents and families. Wherever possible, data capturing and collation should be integrated into existing administrative and record-keeping activities and tools. The focus should be on strengthening existing, routine government data collection systems rather than setting up new and parallel data collection programmes. Data should be easily analysed and made available to facilitate decision-making, monitor service providers' and parenting support services' performance and determine what is working well and what can be strengthened or improved. A theory of change that includes core output and outcome indicators and associated measurement tools is also crucial.

Data should also be purposefully collected across all sectors, services and programmes to gain a deeper understanding of the current context and parental needs. Evidence from available data sources, including situational analysis, household surveys, behavioural research, social media listening and participatory action research, can be triangulated to elicit insights and inform how services and support should be designed and offered. The analysis of data should keep the equity focus in mind, i.e., identifying universal bottlenecks versus those that relate to particular groups and specific needs.

Behavioural insights can be used to make information systems more user-friendly and facilitate service providers' monitoring and engagement with parents. For example, electronic systems can notify health workers if a child does not receive their scheduled vaccines and prompt them to discuss this with parents in order to understand and proactively address the cause. This approach can also facilitate a smooth referral between services, ensuring parents receive continuity of care. This can also ensure positive experiences along the parenting journey, building parents' self-efficacy and fostering positive social norms.

"Parents should be the ones to decide on the parenting services and support needed."

– Mother, Serbia, Bebbo Parenting Survey, 2024

Box 12. Example from practice

National online platform for data and evidence generation in Romania

In Romania, an online platform for evidence generation, monitoring, evaluating and supervising various forms of parental support has been developed (www.qie.ro). Initially focused on parenting programmes, the platform also provides a real-time monitoring model, supervises the activity of professionals offering parenting programmes, and gathers national-level data that can be used for analysis, research and policy development. The platform is also used to collect data from parents, teachers and other professionals who provide services to children and their parents. At the same time, utilizing the digitalization process, the platform supports the scaling up of parental support programmes at a national and international level, ensuring a high degree of flexibility for adapting programmes to local cultures and various vulnerable groups.

E) Social and gender norms

Engaged, supportive and inclusive communities that foster positive social and gender norms can ensure that parents are heard and supported in adopting positive parenting practices and overcoming any challenges they may face.

Parents' decisions and behaviours are often shaped by their community (*see Annex I*). Gender roles, familial and societal expectations, religious beliefs and cultural norms, among other factors, all influence how parents understand parenting and their roles and responsibilities. Harmful beliefs and stigma can also influence parenting choices and practices, shaping parents' demand for services and affecting their equitable access – or even deter parents from support-seeking behaviours. Typically, stigma can put pressure on parents to adopt and/or maintain ineffective (and sometimes harmful) parenting approaches while deterring marginalized groups, including parents of children with disabilities or Roma and ethnic communities, from accessing services or socializing within the community.[56] This may place children at risk, as they are unlikely to be routinely monitored against developmental milestones and receive vaccinations on schedule, and parents are less likely to receive advice on nurturing care or to seek support and services, including on mental health.

Positive social and gender norms create an enabling environment across all components of nurturing care and parenting behaviours (i.e., caregiving, support-seeking and self-care). Understanding the local prevailing and dominant social norms through community-based participatory research and the analysis of data can help shape parenting support and address barriers and stigmas. Parenting programmes should be aware of how gender norms influence parents, their relationship with their children and partners, and their parenting practices. UNICEF, in partnership with the International Step by Step Association (ISSA), has developed a resource package and training modules for promoting gender-transformative parenting.[57] Such programmes understand how gender inequality and power imbalances between men and women and girls and boys can undermine parents' capacity to provide nurturing care, restrict children's opportunities, and present risk factors for violence against children and violence against women. These programmes aim to promote caring, equitable relationships and nonviolent interactions for the whole family, improving family well-being in the long term.[58]

"We need to fight cultural stereotypes about the role of mother and wives at home and in the family. Expectations in the home and workplace inevitably lead to burnout, relationship problems, and mental health problems."

– Mother, Kyrgyzstan, Bebbo Parenting Survey, 2024

It is important for parenting support services to make use of community channels to generate public support. Leveraging community-based structures and networks, positive role models, and opinion leaders can help shift negative social norms and create a more enabling and culturally relevant parenting narrative. This approach can also serve to create practical support structures for parents and develop an important sense of social security that improves families' overall resilience.[59]

Parenting programmes can reduce violence against children and women by taking a gender-transformative approach, challenging unequal gender norms and power dynamics to build relationships and parenting skills that support more equitable, caring, and nonviolent family dynamics. For more information, explore a series of briefs developed by UNICEF, Prevention Collaborative and Equimundo: https://www.unicef.org/innocenti/stories/how-parenting-programmes-can-reduce-violence-against-children-and-women

5. Using the framework to deliver results for children

"The main thing is to believe in yourself and your child."

– Mother, Ukraine, Bebbo Parenting Survey, 2024

The Framework offers a basic blueprint for systematic government engagement, from which a tailored, coherent plan for parenting support in the early years can emerge. It is designed to support system strengthening across different sectors and leverage community resources and effective practices. It also helps to identify critical gaps and challenges and address them comprehensively to achieve more sustainable results at scale.

The Framework will be accompanied by **operational guidance,** which will provide guidance to UNICEF country offices on how to assess the needs and gaps in parenting support at the country level, and how to use this information to guide and inform strategic planning for parenting support programming across multiple levels.

If parenting support is not yet established, governments could use the Parenting Support Framework and its corresponding operational guidance to initiate reflection and discussion among their partners and stakeholders across different sectors. This could be a first step towards building an accurate picture of what is needed in order to develop effective parenting support.

Other countries may already have well-established parenting support services and could use the Framework and operational guidance to develop a fuller understanding of areas that need more attention or would benefit from a fresh approach. Countries affected by emergencies and humanitarian crises will also find elements of this framework helpful in informing how best to support parents in times of crisis.

Glossary

Caregiver: A person who is very closely attached to the child and is responsible for their daily care and support. Primary caregivers may include biological, adoptive or foster parents, family members such as grandparents, legal guardians or other people who are directly responsible for the child at home.

Developmental difficulty: Any condition that puts a child at risk of suboptimal development or causes a child to have a developmental deviance, delay, disorder or disability. This term encompasses all children with limitations in functioning and developing to their full potential. It includes those living with hunger or social deprivation, those who had a low birth weight, and those with persistent behavioural problems (such as autism), sensory problems, cognitive impairments (such as Down syndrome) or physical disabilities (such as cerebral palsy and spina bifida).

Disability: A long-term mental, physical, intellectual or sensory impairment that – in interaction with the environment – limits activity and restricts participation in society on an equal basis with others.[60]

Early childhood development: The cognitive, physical, language, motor and social-emotional development of children from conception to 8 years of age.

Family-centred approach: Policies, procedures and practices tailored to focus on the needs, beliefs and cultural values of children and their families. This approach means working with families and recognizing and building on their strengths.

Family-centred practice: A set of principles and practices that seek to respect family values and preferences, establish a mutually trusting partnership with families, base services on family priorities, and build on family strengths and competencies.

Family support: A set of policies, services, interventions and other activities aimed at improving family functioning by grounding child-rearing and other familial activities in a network of supportive relationships and resources, both formal and informal. While parenting support and family support have distinct focuses, both are important. They complement each other by providing a focus for policies and plans to promote child development and support parents.

Frontline workers: Workers who are in direct contact with young children and their caregivers to provide information, counselling and other services. They include primary health care providers, early childhood education providers and professionals, including educators, assistants and principals/leaders, as well as social service workers, community workers, and others supporting caregivers' and children's health, development and well-being.

Gender-transformative parenting: Applying fundamental principles such as gender equality and inclusion and promoting positive gender norms, gender-transformative parenting supports a child's holistic development, well-being and positive gender socialization.

Nurturing care: An environment created by caregivers, ensuring children's good health and nutrition, protecting them from threats and providing them with opportunities for early learning through interactions that are both emotionally supportive and responsive.

Parent: In the scope of this document, 'parent' refers to the child's primary caregiver and is not limited to biological or legal parents. This breadth of meaning is important given that significant numbers of children are reared by people other than their biological or legal parents, such as adoptive or foster parents, siblings, grandparents and other relatives. The term 'parent' or 'parenting' thus extends to any guardian or main caregiver who provides the child with consistent care.

Parenting: The interactions, behaviours, emotions, knowledge, beliefs, attitudes and practices associated with the provision of nurturing care. Positive parenting involves providing nurturing care in a stable environment that is sensitive to children's needs, protects them from threats, and provides opportunities for learning through interactions that are responsive and playful, emotionally supportive and developmentally stimulating.

Parenting behaviours: The behaviours and practices that form the foundations of parenting, including three core components – caregiving, support-seeking and self-care.

Parenting programmes: Interventions, activities or services that engage parents in strengthening their knowledge, behaviours and practices for supporting child development and parental well-being. We use the term 'programme' throughout this document interchangeably with 'service' and 'intervention' to cover a wealth of different activities.

Parenting support: A broad set of services, programmes, activities, resources and information available to parents to help them in their parenting role, increasing child-rearing knowledge, skills and social support, enhancing parenting competencies, and promoting the well-being of parents and children.

Responsive caregiving: The ability of caregivers to notice, understand, and sensitively respond to their child's signals in a timely and appropriate manner, and with awareness of the child's acts and vocalizations as communicative signals to indicate needs and wants. It is considered the foundational component of nurturing care.

Social and Behaviour Change (SBC): A set of approaches that promote positive and measurable changes toward the fulfilment of children's rights. It aims to empower individuals and communities while lowering the structural barriers that prevent societies from becoming more equitable, inclusive, cohesive and peaceful. SBC brings together perspectives and insights from multiple disciplines (including sociology, psychology, anthropology, economics and communication, among others) and blends social and behavioural sciences with community insights.

Annex I

Enablers and barriers affecting parenting behaviours

To identify and understand the different factors at individual, community, systems, institutional and societal levels that influence parenting behaviours, various behavioural models and theories can be considered and applied. These include the Socio-Ecological Model, the Behavioural Drivers Model, the COM-B Model and Social Norms Theory. Additionally, other models and theories, which focus more on behaviour modelling and social change, such as the Social Learning Theory, the Self-Efficacy Theory, the Planned Behaviour Model, behavioural economic theories and the Diffusion of Innovation can also guide the development of relevant parenting support interventions and programmes based on evidence and insights, helping them define their focus, content and approach.

Following a desk review using a wide range of data, research and reports, various factors have been identified that influence parenting behaviours and practices in the early years in the ECA region. The table below provides examples of some identified enablers and barriers, which are conventionally grouped for caregiving, support-seeking and self-care behaviours. They do not constitute a comprehensive and exhaustive list of all enablers and barriers, but rather a summary of some key factors identified across different sources. Localized behavioural research is recommended to better understand the specifics of parenting behaviours and to inform how parenting support can be best offered to meet parents' unique and evolving needs.

Caregiving behaviours

Enablers

Knowledge, awareness and self-efficacy

- Parents are aware of children's developmental milestones and needs, and their role in monitoring and responding to children to offer nurturing care.
- Parents understand that violence against children can take many forms and are aware of the negative and lifelong impact it can have on children.
- Parents are confident in their skills and ability to respond to children's needs and provide nurturing care, irrespective of gender and ability, and keep children safe from all forms of violence.

Model behaviours

- Parents are familiar with a range of approaches and tools to use in positive, warm and playful interactions with children.
- Parents are skilled in a variety of healthy and playful behaviours and practices.

Support structures

- Fathers (and other key family members who can be part of the reference group, for example in some instances mothers-in-law) support mothers in breastfeeding and child   care, understanding the lifelong benefits it offers children and mothers.
- Family-friendly services are readily available to support parents in caregiving.
- Essential services for children and families are well connected, fostering the strengths and well-being of caregivers, parental stress coping skills and parental alliance for the child.
- Family-friendly policies nurture parental strengths, not only through services and allowances but also in the work environment.

Social and gender norms

- Fathers are recognized as bringing unique value to children's development and are offering warm, sensitive and responsive caregiving.

Barriers

Knowledge, awareness and self-efficacy

- Parents are not aware of their role and behaviours to support children's holistic development and its importance.
- Parents are not aware of different approaches and the tools for responding to children's unique needs to promote their development and growth.
- Parents lack the motivation, skills and confidence to promote healthy behaviours, to monitor children against developmental milestones and to offer warm, sensitive, nurturing care to children.
- Mothers have misconceptions and harmful beliefs, and lack the skills, confidence and support to successfully breastfeed.
- Parents lack knowledge on different forms of violence against children, including harsh discipline and its impact on children's development and well-being.
- Parents are not aware of the benefits of play and storytelling for their children's development and how they can incorporate play-based learning and storytelling in their daily activities, without requiring additional resources or access to books.

Access and affordability

• Parents may lack access to affordable, quality, nutritious food.

Social and gender norms

• Fathers and society do not support (extended) breastfeeding and may put pressure on the mother to stop or to only breastfeed in private.

• Responding promptly, sensitively and warmly to children is not socially practised and/or not associated with a father's behaviour and healthy attitude.

• Parents' experience of violent discipline in childhood. Lack of appreciation for benefits of play-based learning and accessing early learning opportunities.

• Household is not literate and/or does not read regularly.

• Widespread harmful beliefs, misconceptions, stigma, negative gender norms and social expectations.

Support-seeking behaviours

Enablers   **Knowledge, awareness and self-efficacy**

• Parents know which services are available to support their children's health, learning and development, and how/where to access them.

• Parents are aware of the benefits of accessing services that can promote and monitor children's health and development, and support parental well-being.

Services

• Affordable, inclusive, quality and family-centred services are available and equipped for referrals and tailored service plans meeting parents and children's specific or complex needs.

Social norms

• Parents routinely and in times of concern seek support from health, education, social/child protection services.

Barriers   **Knowledge, awareness and self-efficacy**

• Parents are not aware of services that can support them and their children's well-being and development e.g., mothers may not know where to access breastfeeding / weaning support.

• Parents are not aware of the parenting programmes and support that they can access.

• Parents are not aware of their rights and entitlements and are not empowered to demand and access parenting support and services.

• Parents and communities do not see the importance and value of services.

• There are perceptions of services as being of poor quality or discriminatory.

Resources

• Limited availability and poor accessibility of services. Restricted criteria for services use.

• Costs (formal and informal) associated with accessing support services. Households cannot afford to travel to services or take time off work to access services, or don't have facilities at home, e.g., quality WASH.

Social norms

- Marginalized communities e.g., Roma and families with low education levels, lower income, religious and/or highly conservative families typically show lower rates of accessing services such as immunization, birth registration, WASH services and early learning opportunities.

- Parenting support is seen as only necessary for a "problem child".

- Beliefs that parents know what is best for the child and that what happens at home is a private issue.

Fear and stigma

- Misinformation, anecdotal evidence or experience of side effects around vaccination may deter families from vaccinating children.

- Limited trust in services and service providers. Marginalized communities e.g., Roma, and parents of and children with disabilities may experience stigma in social settings and when accessing services, including early learning environments, which deters parents from accessing services.

- Fear of punishment and of child protection services, and the risk of the child being removed.

Support structures

- Parents may lack support and struggle to take children to access services i.e., having a responsible adult to look after other children; having time off work to take children to services.

- Disagreements within the family on the necessary services and when to access them.

Self-care behaviours

Enablers **Knowledge, awareness and self-efficacy**

- Parents are aware that their health and well-being influences their ability to parent well, and how they can promote their physical and mental well-being from conception to throughout the early years of parenthood.

- Parents adopt healthy dietary and lifestyle practices to boost their own health and well-being.

- Parents take active steps to monitor and manage their stress and well-being to strengthen parent-child interactions and to provide a safe and secure environment for children.

- Parents are aware of the forms of violence against children and other forms of domestic violence, and safeguard their children and themselves from this and other adverse incidents, including witnessing violence at home.

- Parents promote gender equity through modelling positive behaviour and an equitable division of labour, enabling both parents to take care of their personal needs.

Access and affordability

- Parents, and mothers in particular, are able to access and afford support services, including those addressing mental health.

- Parents are able to access and afford quality, nutritious food that promotes parental physical and mental well-being from conception and throughout the early years.

Support structures

- Families and communities support parents to ensure their well-being.

- Communities and service providers create opportunities for socialization and peer support (including recreational, sport and other activities).

Social and gender norms

- Fathers' and mothers' roles in parenting are recognized, including how they can support their children's development and foster a nurturing relationship.

Services

- Quality and affordable services are available for parents for a range of multisectoral services. Parents are aware of these services, including when, where and how to access them.
- Identification and management) of health and well-being concerns are included into routine services, whether via referral or directly.

Policies

- Family-friendly policies encourage companies to support parents in taking care of their children i.e., paid maternal and paternal leave, flexible working arrangements or baby-friendly spaces in the workplace.
- Child-benefits are provided to support family resources and ensure the provision of good care.

Barriers	**Knowledge, awareness and self-efficacy**

- Parents are unaware of the importance of self-care to offer children quality nurturing care, and lack resources, motivation or skills to address existing and emerging physical and mental health conditions.
- Parents experience mental health problems and are unable to self-regulate their emotions and model positive behaviours.
- Parents do not access services that can support them, due to lack of awareness of services, lack of resources and low motivation, etc.

Stigma

- Stigma deters parents from seeking services and maintaining treatment and care, especially for mental health and psychosocial support services and mothers living with HIV.

Support structures

- Parents lack adequate support (social, relationship, financial) to look after their own well-being, and to help them in caring for the self as well as caring for their children.

Social norms

- Gender norms and expectations around responsibilities which are culturally assigned to mothers might prevent mothers in need from seeking help. Gender inequality tolerates or condones unhealthy behaviours.
- Subject of parental mental well-being is culturally or traditionally neglected or stigmatized.

Annex II

Capacity development plans for service providers across sectors aim to develop and strengthen a core set of technical and relational competencies. There are various tools to measure service providers' knowledge and competencies, and to ensure that the provided capacity development support is tailored to their exact needs[61].

Table 3. Examples of core competencies of a supportive workforce across different sectors[62]

Technical knowledge and skills	• Early childhood development • Early childhood interventions • Responsive caregiving • Family-centred practice • Knowledge and skills in use of evidence-informed practice • Needs assessment and referral • Inter-disciplinary teamwork • Specific knowledge and skills, depending on the sector and the type of parenting support – universal, targeted or intensive
Relational, communication and enabling competencies:	• Interpersonal communication • Motivational interviewing • Tailored communication and support • Active and reflexive listening • Empathy • Trust building • Empowerment and capacity strengthening • Strengths-based approaches • Problem solving • Gender transformative approaches • Partnership development and community engagement

Annex III

The role of the workforce in parenting support across health, education and social/child protection

	Health	Education	Social/child protection
Understand	**When health care workers understand parents' and children's needs, strengths and risks they can better tailor services and provide parents with the specific support they require.** To establish this understanding, health care workers need to build a warm, trusting relationship with parents. This establishes an enabling and safe environment to discuss parent behaviours, including why and how parents can facilitate children's holistic development. Observation of parents' practices and behaviours can complement the assessment of parents' needs and guide the type of parenting support they require. With strong, sensitive communication skills, health care workers can build a rapport with parents and thoughtfully develop parents' knowledge and skills, fostering their self-efficacy.	**Early childhood education and care teachers build unique relationships with parents and children and can support them in providing responsive care and early learning opportunities at home.** As teachers engage with children, they build an understanding of children's needs and strengths as well as their areas for improvement. Together with regular contact with parents, and observation of parent-child interactions, teachers are well placed to gain insights into a family's background, culture and dynamics. Teachers can advise, counsel and guide parents on how to provide stimulating early learning opportunities at home and how to engage with their children. Through sensitive communication and supportive interactions, a warm, trusting relationship between teacher and parent can be fostered.	**A warm, trusting relationship with parents opens the forum for respectful engagement with parents on their specific needs.** Social workers often have direct contact with parents and children, including those who are most vulnerable, allowing them to observe parenting practices and the parent-child relationship first-hand. Social workers (and particularly community Roma mediators) often hail from the community they serve, enabling them to easily build a rapport with parents. This also assists with understanding the household's unique context, such as any experiences of stigma, discrimination, violence etc. Understanding the individual, family and community context guides social workers to sensitively assess the family situation and determine the best support.

Share

Health care workers counsel, advise and share information and guidance on responsive caregiving, child development and the importance of support-seeking and self-care behaviours. Through respectful and sensitive engagement, health care workers can guide, demonstrate and model positive parenting skills and practices. Parents should be offered the opportunity to practice these skills under the service provider's supervision and guidance, to help parents develop their confidence and self-efficacy. Open dialogues on positive parenting behaviours and practices can strengthen what parents are already doing well, and guide areas where there is room for improvement. In this safe forum parents can also share their challenges and concerns, and solutions can be explored. Health care workers can promote positive social norms (e.g., fathers' involvement) and address individual and widespread myths, misconceptions and harmful beliefs. They can provide and display informational material (e.g., pamphlets, posters, charts, presentations, videos) that explain parent behaviours and how they may promote children's development. Parents should be provided with schedules for developmental milestones and routine checks to promote service-seeking behaviours and ongoing contact. Health care workers can link parents to local parenting support, services, programmes and information. Contact sheets and referral network information can also be displayed and included in the parenting information provided to parents.

Teachers engage with parents to advise, discuss and support parenting behaviours crucial for early learning and development. Education settings can function as community hubs, supporting community integration, offering child development or parenting workshops, classes, training and other programmes for parents. They can also set up platforms where parents can share ideas with teachers (e.g., Facebook/WhatsApp/Telegram groups). Teachers can inspire parents to offer rich learning experiences to their children through informal everyday activities and routines. Teachers can promote play-based learning, encouraging parents to use everyday items as playthings to boost children's creativity, critical thinking and problem-solving skills. Teachers can promote storytelling and book sharing among parents and the broader family. They can share guidance on playful parenting and using positive discipline as a way of nurturing children's well-being. Teachers can also promote the important and unique role that fathers play in developing children. In this way teachers can support specific parent behaviours to advance nurturing care. Teachers can also foster an appreciation for diversity and inclusion. Collaboration with parents who have specific needs or vulnerabilities is crucial and particularly beneficial. As a result, teachers can play a valuable role in building positive social norms and empowering parents and communities. This can serve to build a culture of positive parenting and supportive community.

Social workers discuss, model and promote safe behaviours, secure and stimulative environments and positive parenting, while sharing information on accessing social services. For example, social workers can encourage hard-to-reach parents to access mobile birth registration services, notify parents of their eligibility for cash benefits, assist them with registration and advise them of disbursement requirements. They can promote parents' responsive caregiving, including positive discipline through education, guidance and awareness raising on the importance of positive parenting. They can offer parents the opportunity to practice these skills, thus building their confidence, competencies and self-efficacy. Knowledge building can be enhanced through dissemination of printed or online material (e.g., text messages, parenting hub, website, printed parenting cards, booklets and pamphlets). Social workers can also promote and support parents' self-care behaviours and fathers' engagement with their children, and they can create links between parents through community support structures. They can facilitate the establishment of community-based parent support interventions (centre-based or online). Support structures create a safe forum for regular engagement, encouraging parents to share their experiences, challenges and solutions, while learning from and supporting each other. Social workers can also help parents to plan their time by developing routines and linking them up with other services and resources (employment or education opportunities, skills building training etc.). The distribution of cash transfers/in-kind vouchers also presents an opportunity to disseminate relevant information, as well as combine them with parenting interventions.

Connect and refer	**Through understanding, mutual sharing and family-centred approaches, health workers can better respond to the needs of parents and children.** Health workers should assess, monitor and alert relevant services to a family's identified needs, understanding the strengths and risks at individual, family and community levels. They should connect families with other services and know what local support is available (e.g., services that support educational development, employment and community-based parenting services etc.) or resources (materials, information). They should determine any need to alert and refer parents for additional support. They should sensitively discuss and coordinate with parents as partners. When needed, they should participate together with parents in the development of an individualized plan with the family and the 'team around the child'.	**Through ongoing engagement with parents and children, teachers are well positioned to determine if there is a need to alert and refer parents for additional support and services.** Teachers should nurture engagement with parents as partners in their children's learning and development. They should be aware of what local support is available and coordinate with parents to access it. They should inform parents and leverage existing community resources (e.g., in community centres, libraries, museums, NGOs and businesses) and where possible, form part of the network of support offered. Digital tools can also be used, e.g., a WhatsApp/Telegram/Facebook group to facilitate easy and quick communication with parents. In terms of children at risk or with developmental difficulties or disabilities, teachers can participate as part of the 'team around the child' and contribute to the development of an individualized plan with the family.	**Social workers can determine if there is a need to alert and refer parents for additional support and services.** Ideally such support and services should be locally available and social workers should coordinate the transition. Social workers may form part of the network of support, offering continuity, which may be particularly valued by more vulnerable populations. In case of early childhood intervention, they can also form part of the 'team around the child' and participate in the development of an individualized plan with the family.
Document	**Health care workers should monitor progress and document the support offered to parents in order to enable data analysis and assist health care workers in offering parents quality support.** The health data will inform health care workers in determining if there is a need to escalate and refer parents to further services. This should be shared with parents and included in their health records. Feedback from parents should also be collected and recorded. Parents can also be reminded of developmental milestones and appointments using telephone, text message and messaging services, e.g., WhatsApp or Telegram. At a macro level, the data collected can inform athe implementation and monitoring of intersectoral parenting support. Meta-data analysis can also strengthen decision making, resource allocation and advance advocacy for parenting support and family-friendly policies.	**Teachers should document their assessment of children to inform whether parent behaviours need to be strengthened and supported.** Data can indicate if there is a need to escalate and refer parents for further support. Children's progress should be shared with parents using both formal and direct engagement, or more informally using text message or a telephone call. In this way, parents can be provided with feedback on their children's development and well-being, serving to inform, guide and strengthen parent behaviours. Meta-data analysis can inform if there is inclusive and quality early learning and if there are shifts in social norms. This can inform resource allocation, including infrastructure development, and how teachers need to be trained and capacitated to provide support to parents.	**Social workers should document their service offering to parents and children as well as any outcomes to inform whether parent behaviours need to be further strengthened and supported.** This can also indicate if there is a need to escalate and refer parents for further support. Meta data analysis can reveal shifts in parents' behaviours, specifically any increase in service-seeking. Where feedback from parents on service delivery is available, monitoring and evaluation can be triangulated to inform decision making and further strengthen support for parents.

Annex IV

Workforce capacity development by different layers of parenting support

1. Universal parenting support

In order to successfully implement universal and evidence-based parenting support practices, the workforce must be well-prepared with education, training and professional development. Institutions of higher education can enhance courses and academic content to incorporate foundational knowledge and awareness of developmental science, parenting science and implementation science related to parenting support. Furthermore, coursework across different disciplines can incorporate information about the critical importance of the early years, parenting, and evidence-based practices to support parents. Students can be afforded the opportunity to engage in practical exercises that expose them to the various parenting programmes that currently exist, providing hands-on training. For professionals already working in the field, in-service professional development can further the acquisition of skills needed to effectively communicate with parents on caregiving, service-seeking and self-care behaviours while also addressing their internal biases, stigma, harmful attitudes and beliefs. There is also a need to create materials and resources that educate parents on nurturing and responsive care, and to generate awareness of the available programmes and support that focus on parenting behaviours.

2.Targeted parenting support

In order to successfully implement targeted parenting support practices, the workforce requires the specific knowledge and skillsets to work with a wide range of families and issues. To ensure the workforce is well-prepared with the professional and ethical competencies needed to improve parent and child well-being outcomes, formal training and professional development in early childhood development, parenting, family systems, and the skills required to work with families are necessary across and between sectors. In addition, coursework across all disciplines can incorporate information about evidence-based practices to support parents. Professional development must include training that focuses on the technical and soft skills needed to effectively communicate with parents. There is also a need to create materials and resources focusing on specific needs and risks, as well as on general parenting behaviours that promote nurturing care. The workforce needs contact information for different programmes and services that can support parents.

3. Intensive parenting support

The workforce engaged in this layer of the pyramid includes specialists from different professional disciplines and sectors, such as child development experts, paediatricians, licensed mental health professionals including psychologists and psychiatrists, family support social workers, members of the social service workforce working within the alternative care system, speech therapists, psychologists, special educators and clinicians. These professionals have specialized training in dealing with multi-dimensional issues and factors affecting families. They may be specialists from different sectors working in a team around the child – contributing according to their respective roles while working in a collaborative and coordinated approach to support the family. As for previous layers, formal training and professional development must include information on early childhood development, parenting and family systems, as well as the technical and soft skills (such as effective listening and communication skills) needed to work with families. The training and professional development for professionals working in this layer can include specific training in trauma-informed care, mental health and physical disorders/illness, as well as supporting the unique needs of families experiencing trauma or crisis, generational trauma or living in extreme poverty, etc. Workforce training and professional development must also include theoretical and practical considerations in providing intensive support and working within complex family systems where various social, cultural, and environmental factors may hinder a child's development and health. Professional development may also include training and certification in evidence-informed dyadic therapies targeting parents and young children. Coaching and mentoring can further strengthen the workforce's capacities and competencies to provide intensive support.

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