Parenting Today in Victoria: Key findings and resources for families

Presented at the Maternal and Child Health Conference October 2024

Zvezdana Petrovic, Research Specialist

Parenting Research Centre

parentingrc.org.au

Acknowledgment of Country





Services ~ Case Studies About ~ Resources ~

(Contact



Turning evidence into action so families thrive

We work with like-minded organisations to improve outcomes for families and children. We know when parents are supported, children do well and we all benefit.







parentingrc.org.au



Parenting Today in Victoria

Survey of 2600 Victorian parents (938 of 0-5 yrs) Conducted every 3 years (since 2016) Funded by the Victorian Government

Parenting Today in Victoria

Domains of interest in 2022

- 1. Experience of being a parent
- 2. Approaches to parenting
- 3. Parent wellbeing and self-care
- 4. Parent support and help-seeking
- 5. Parent engagement with children's learning and education



IN 2022, WE SPOKE TO



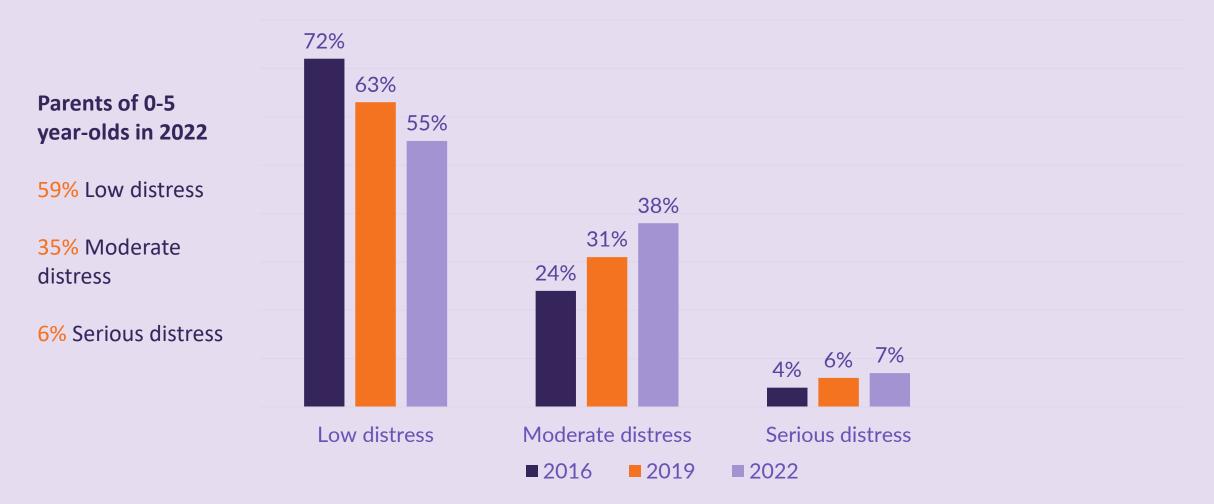
Parent health and wellbeing

- 84% (0–5 yrs) 82% (all parents) reported they were in 'good', 'very good' or 'excellent' health (2019 = 88%; 2016 = 79%)
- 61% (0–5 yrs) 62% (all parents) agreed they have a healthy diet
- 41% (0–5 yrs) 46% (all parents) agreed they get regular exercise
- 41% (0–5 yrs) 47% (all parents) agreed they feel under constant pressure

Parent health and wellbeing

- 34% (0–5 yrs) 40% (all parents) agreed they regularly do things to help them relax and re-energise (2019 = 55%)
- 35% (0–5 yrs) 39% (all parents) agreed they get enough sleep
- 36% (0–5 yrs) 38% (all parents) agreed tiredness gets in the way of being the kind of parent they would like to be
- 31% (0–5 yrs) 35% (all parents) agreed they worry a lot

Parent distress measured by K6 Scale has increased over waves of survey



Parent concerns about their child (small, moderate or large problem)

- 82% (3-5 yrs) 73% (3-18 yrs) felt their child not doing as asked was a problem
- 56% (3-5 yrs) 71% (3-18 yrs) felt their child's worries, fears or anxiety were a problem
- 56% (3-5 yrs) 67% (3-18 yrs) felt their child playing computer games or using electronic devices was a problem
- **79% (3-5 yrs) 64% (3-18 yrs)** felt their child's whining was a problem

- **65% (3-5 yrs) 57% (3-18 yrs)** felt their child not following rules was a problem
- 67% (3-5 yrs) 55% (all) felt their child's eating was a problem
- 70% (3-5 yrs) 46% (3-18 yrs) felt their child's tantrums were a problem
- 20% (3-5 yrs) 37% (3-18 yrs) felt their child being depressed or withdrawn was a problem

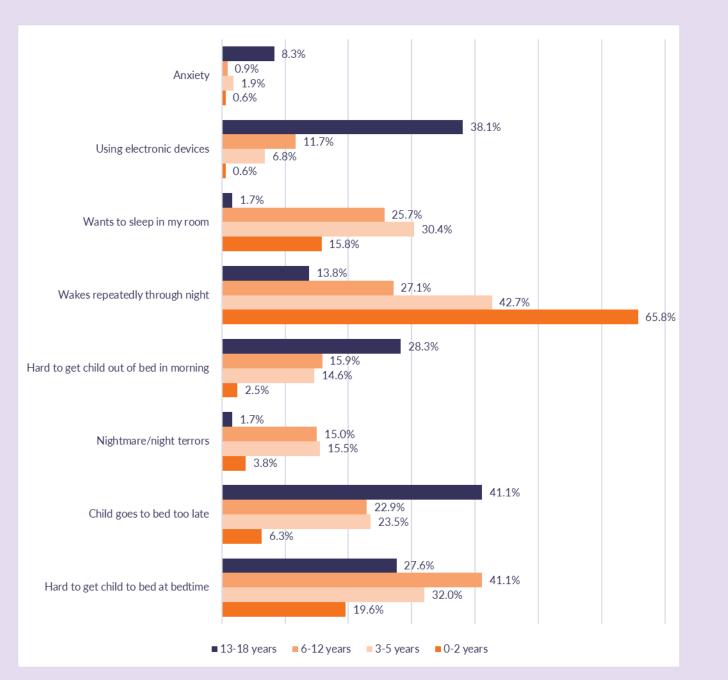
Sleep problems by age group

46% (all parents) felt their child's sleep was a problem (small, medium, large problem)
60% (0-2 yrs) 49% (3-5yrs)

44% in 2019 and 36% in 2016 (all)

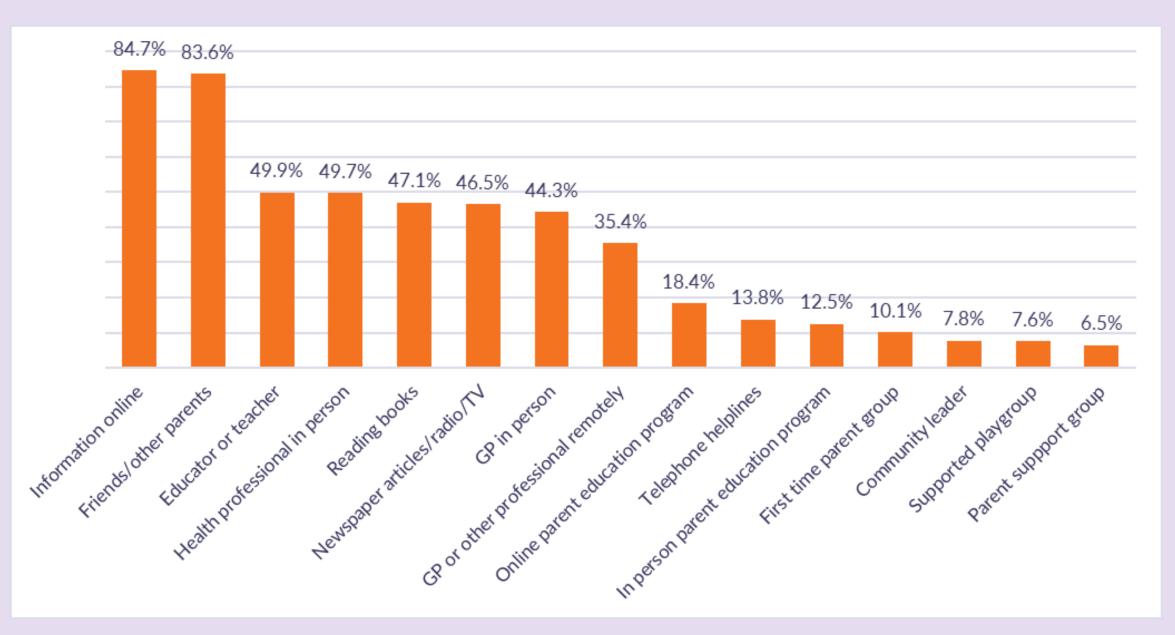
25% (all parents) felt their child's sleep was a problem (moderate, or large problem)
34% (0-2 yrs) 24% (3-5yrs)

20% in 2019 and 17% in 2016 (all)



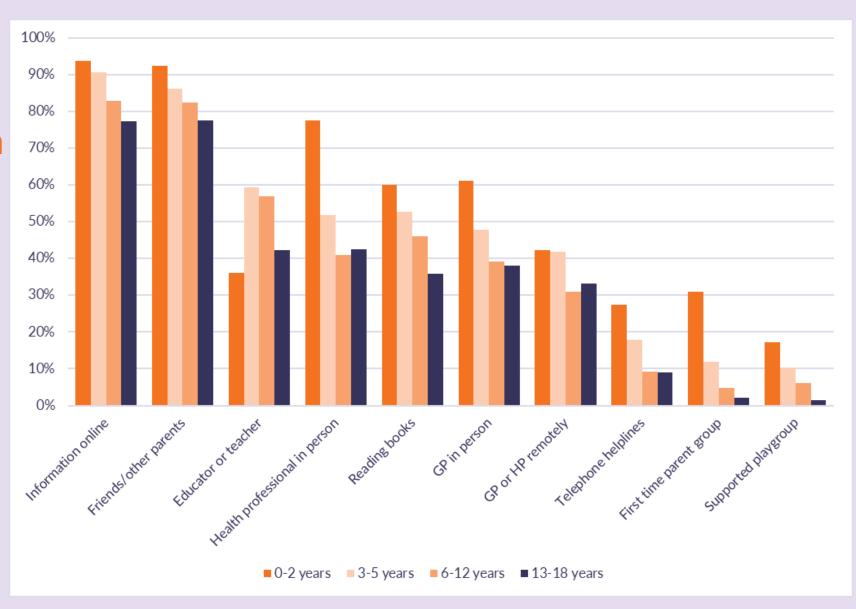
Parent support and ability to support child's wellbeing

- 83% (0-5 yrs) 83% (all parents) agreed they had a trusted support person they could turn to for advice
- **79% (0-5 yrs) 76% (all parents)** agreed that their family were the first people they turn to when looking for help to raise and support their children
- **68% (O-5 yrs) 75% (all parents)** of parents agreed that they would know where to go to get professional help with their child's emotional problems (e.g., worries, fears, anxiety, depression)
- 66% (0-5 yrs) 72% (all parents) of parents agreed that they would know where to go to get professional help with their child's behavioural problems (e.g., temper tantrums, breaking rules)



Parenting information sources accessed outside the family (past 12 months)

Sources of parenting information accessed in the past 12 months



Parent feelings about help offered by professionals

- 74% were satisfied with the help offered, 18% had mixed feelings and 8% were not satisfied
- 85% did not feel judged, blamed or criticised when seeking help, 8% had mixed feelings and 7% did feel judged, blamed or criticised
- Primary mode of remote professional health was by telephone (81%), followed by videoconference (47%), email (16%), texts (7%), webchat (3%) and Facebook messenger or similar (1%)
- 40% parents using remote professional services felt they were just as good as in person services, 21% felt they were a little or much better and 39% felt they were a little or much worse



1 in 8 ... said they'd attended a parenting program in person in past 12 months

1 in 5

... said they'd attended an <u>online</u> parenting program in past 12 months



Who is attending parenting programs (any program vs no program)?

- More mothers (28%) than fathers (18%) are attending
- More parents with higher education (31%) than lower education (19%) are attending
- More parents with a younger child (0-2 years) attended (29%) compared to parents of older children (22% for 3-5 years, 22% 6-12 years, and 23% for 13-18 years)

Parenting programs

Features influencing parent decision to participate

Program features	N (%)
Program is held at a convenient time of day	2401 (93%)
Program is held in a convenient location	2344 (90%)
Program addresses personally relevant issues	2340 (90%)
Program has been demonstrated to be effective	2320 (89%)
The program is easy to access	2290 (88%)
Resources are professionally produced and presented	2257 (87%)
Program is offered in my language	2249 (87%)
Trained practitioners conduct the program	2241 (86%)
Program is free or very low cost	2223 (86%)
Program can be tailored to the needs of the individual parent	2190 (84%)
The program has a clear curriculum	2166 (83%)
I can complete the program in my own time	2151 (83%)
The program is available online	2086 (80%)
Program offers access to ongoing or post-program support	2081 (80%)
The program is brief, I can complete it quickly	1979 (76%)
There are other participants just like me	1929 (74%)
Participants are encouraged to set and achieve their own goals	1906 (73%)
The program is delivered in person/face-to-face	1578 (61%)
Program is delivered or co-delivered by a parent	1333 (51%)
I can do the program anonymously	1462 (56%)
The program is in group format	1280 (49%)
The program is delivered via a seminar	1227 (47%)
Program has accreditation (certificate to show you've completed)	967 (37%)

Parent of children with complex needs report more challenges

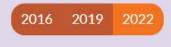
- Poorer parental mental health
- Poorer parental physical health
- Lower parenting confidence, say parenting is more demanding, frustrating
- More likely to worry, be hard on themselves, and struggle with feelings of guilt or shame about parenting; less likely to forgive themselves
- Less likely to regularly do things to relax and re-energise
- More likely to report child behaviour problems, including child sleep

Visit our website for more PTiV findings

When asked about what they wish they did differently:

38%

said they regret their impatience with their children



40% of fathers and **48%** of mothers felt too tired to be the parents they want to be

2019 2022



wished they were more consistent in their parenting





parentingrc.org.au/ptiv

Raising Children Network



Raising Children Network – for professionals



Baby development 8 to 9 months

What you can do to help your baby's development.

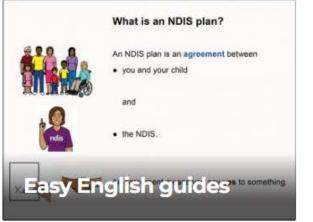
- + Play together sing, read and play peekaboo. + Talk to your hotey.
- + Listen and respond to your baby's babbling.
- · Encourage moving pick up small objects, rolt crawl or stand up together · Make your home safe for a baby en the move.
- · Make sure your baby has their routine health checks.

When to seek professional help at 8-9 months

:Child development: downloadables



promotional material









raisingchildren.net.au/for-professionals

Diverse formats: Easy English



The NDIS People who can help you and your child



How the NDIS helps children



The NDIS can help children with disability or developmental delay.

Disability and developmental delay mean it is hard for children to do things.

It might be hard for children to



understand

Diverse formats: Parenting in Pictures

Reducing SUDI risk: breastfeed, avoid overheating, don't smoke



If you can, breastfeed your baby or feed your baby with expressed breastmilk for the first 6-12 months. Breastfeeding reduces SUDI risk by a lot. **Don't overdress your baby.** Keep your baby's face and head uncovered. Overheating is a SUDI risk. **Don't smoke** during pregnancy or around your baby. Smoke significantly increases SUDI risk. If it's hard to quit smoking, call Quitline on 137 848.

Diverse formats: Videos

K NEWBORNS: VIDEOS

Suitable for 0-6 months How to breastfeed: breastfeeding positions



KEWBORNS: VIDEOS

Suitable for 0-3 months Bonding with newborns: parent stories



Languages other than English





Development downloadables

Child development 0-2 years: downloadables

57 Found this helpfu

Our posters, graphics and videos cover child development from birth to 2 years. Parents can use these resources to help their child develop well. The resources also outline early signs of developmental concerns. Services working with families can download, display, disseminate or share these resources for free.

On this page:

- A3 posters (297 mm x 420 mm)
- A4 handout in colour or black and white (297 mm x 210 mm)
- Facebook posts
- Instagram posts
- Videos

A3 posters (297 mm x 420 mm)

2-3 months	8-9 months	12-15 months	18 months	2 years
Beby development	Interdevelopment	Child day dog to the	Children digment	Criticidev doprivert
His push a Briag La Bagalan anna 1 Shan anna anna anna anna anna anna anna		Hand a rank for the last of a flashed sector of the last of the la	Mining and the full control of the full contro	Under provinsion for the provinsion of the provi
	The second secon	All toruster and represent	The second research or persons	The terrent of the second seco
○ 誕	3 33	* M	3 🕅	*

A4 handout in colour or black and white (297 mm x 210 mm)



2-3 months	8-9 months	12-15 months	18 months	2 years
Easily since operative (1997) 0021	Easing sincer approach i Clock reaction	Onlink deventionments 10-benetiste	Datal development Baseda	Dalid deve inseranti Detti
NUMERAL AND	the second	<pre>Minipar do a tra apresentaria internationalizzatione de la construcción internationalizzatione de la construcción internationalizzatione de la construcción de la construcción de la construcción de la construcción de la construcción de la construcción de l</pre>	 We consist on the first constant of the structure means and structure in the structure means that the constant structure is the structure of the structure is and the structure is the structure of the structure of the structure is the structure of the structure of the structure is the structure is the	 Marganes and the different Advancements and international and advancements and advancements in the difference of the difference of the international advancements and the international advancements and the difference of the international advancements and the internationadvancements and the differenc
State of the second sec		Constant, a de estador	- De manager personne	
<u>.</u>	<u> </u>	<u>.</u>	<u> </u>	<u>*</u>





Raising Children Network product Mental wellbeing mobile app



Targeted Content 0-11 years

Download now









smalltalk supports parents to extend children's communication and thinking skills and to:

Connect with their community and services to help parents make friends and have valuable formal and informal help when they need it.

Create stimulating learning environments at home with activities such as play, reading together and establishing routines.

Build their confidence as a parent,

so they can be the parent they want to be – to turn knowledge into actions. **Improve the frequency and quality of everyday interactions** which helps to build warm, positive relationships between parents and children and extend their learning opportunities.

Consider their own self-care

because parents who are happier, healthier and well-rested are better able to engage with, and provide a positive learning environment, for their children.



Let's talk!

smalltalk was designed to fit within, supplement and enhance supported playgroups. It can be used in a range of service delivery platforms, including home visiting services.

It has been adapted for use in integrated family services, nurse home-visiting programs and for use in early childhood education settings.

We want to work with service providers and states to find new approaches, to make *smalltalk* widely available, and to help Australian children and families thrive.

We offer training and implementation support, along with access to all our program materials. There are no ongoing costs beyond the initial training and support which are dependent on the scope of your project.





Support groups for parents of children with disability or other additional needs



Chat over coffee

In some MyTime sessions, members just relax over a coffee, talk about their week and share advice and information.



Learn something new

In some sessions the facilitator or a guest speaker might lead discussion on a topic of interest.



Take care of yourself

Sometimes, the group might just have fun with an activity aimed at helping members relax and look after their wellbeing.

Find out more: mytime.net.au/

ForWhen



1300 24 23 22 Mon-Fri 9am-4.30pm



forwhenhelpline.org.au



WHO WE SUPPORT



New and expecting parents, from conception until the child is 12 months of age, **with** mental health concerns



Health professionals requiring information on services and supports in their area

Thank you

 Θ





Parenting Research Centre parentingrc.org.au



Zvezdana Petrovic zpetrovic@parentingrc.org.au

Parenting Research Centre