Contents

Executive Summary .................................................................................................................. 3
Introduction .............................................................................................................................. 6
  Who is a parent? ....................................................................................................................... 8
  The parental role .................................................................................................................... 8
Children benefit in multiple ways from good parenting ....................................................... 9
Parental relationships ............................................................................................................. 9
Resilience ................................................................................................................................. 10
Vulnerable groups of parents ............................................................................................... 11
  Single parents ....................................................................................................................... 11
  Fathers .................................................................................................................................... 11
  Teenage Parents .................................................................................................................... 11
  Disabled Parents .................................................................................................................... 12
  Parents of disabled children ............................................................................................... 12
  Grandparents as parents ...................................................................................................... 12
The Position of the National Parenting Policy in Relation to other Policy Areas .................. 13
What the National Parenting Policy will do .......................................................................... 13
1. Family Forms in Trinidad and Tobago .............................................................................. 15
  1.1 Marriage and other unions ............................................................................................. 15
  1.2 Family size ....................................................................................................................... 16
  1.3 Single parents .................................................................................................................. 16
  1.4 Trends Associated With Shifting Family Forms .............................................................. 16
    1.4.1 Fertility ....................................................................................................................... 17
    1.4.2 Teen pregnancy .......................................................................................................... 17
    1.4.3 Grandparents as parents ............................................................................................ 18
    1.4.4 Labour market participation ....................................................................................... 18
  1.5 Summary .......................................................................................................................... 19
2. Parenting Needs in Trinidad and Tobago .......................................................................... 20
  2.1 Consultations .................................................................................................................... 21
    2.1.1 Identified Strengths of parents / caregivers ................................................................. 22
  2.2 Position papers on the National Parenting Policy .......................................................... 24
  2.3 Summary .......................................................................................................................... 25
3. Legislative Environment .................................................................................................... 26
  3.1 The international context ............................................................................................... 26
  3.2 The national context ....................................................................................................... 26
  3.3 Summary .......................................................................................................................... 28
   4.1 Health and maternity services ................................................................................. 29
   4.2 Family planning ......................................................................................................... 30
   4.3 Childcare and early years provision .......................................................................... 30
   4.4 Programmes in support of youth ............................................................................... 31
   4.5 Social services ............................................................................................................ 31
   4.6 Employment ................................................................................................................ 31
   4.7 Help for low income families ..................................................................................... 32
   4.8 Education ..................................................................................................................... 32
   4.9 Leisure activities and sports ...................................................................................... 32
   4.10 Family friendly spaces ........................................................................................... 33
   4.11 Transport ................................................................................................................... 33
   4.12 Summary .................................................................................................................... 33

5. Expansion of Parenting Support Service Provision ...................................................... 34
   5.1 Provision of child care ............................................................................................... 35
   5.2 Attending to child health and development needs .................................................... 35
   5.3 Education .................................................................................................................... 36
   5.4 Building positive intra-family relationships ............................................................. 36
   5.5 Parenthood Code ....................................................................................................... 37
   5.6 Summary ..................................................................................................................... 37

6. Policy Implementation Mechanisms ............................................................................ 38
   6.1 Parenting Centres ...................................................................................................... 38
   6.2 Multi Sectoral Steering Committee ........................................................................... 39
   6.3 Monitoring and Evaluation ........................................................................................ 39
   6.4 Summary ..................................................................................................................... 39

Acknowledgements ........................................................................................................... 40
References ............................................................................................................................ 40
**Executive Summary**

The role of parenting is central to child development and family wellbeing. The importance of the parental role has been articulated through several international conventions and covenants including the Universal Declaration of Human Rights, International Convention on Civil and Political Rights, the International Covenant on Economic, Social and Cultural Rights and the Convention on the Rights of the Child.

In Trinidad and Tobago the rights and responsibilities of parents are clearly articulated in the Children Act 2012 and in the Vision 2030 national development wherein it is stated that the family is “...... the foundation of the society (and) contributes to its growth, development and stability”, the National Parenting Policy represents another vital step in the social transformation process.

The influence of parents on their children’s development cannot be overstated and makes the support of positive parenting a legitimate concern of the Government of Trinidad and Tobago. Parenting is essential for child development and good parenting has been demonstrated to provide a solid underpinning for the cognitive, social and emotional development of children. Moreover, parental influence on a child’s well-being and development is greater than any other single socio-environmental factor. The quality of parental relationships is essential to children’s development, whatever the family form in which the child is located.

The Government of Trinidad and Tobago is mindful that there are particular groups of parents that can be considered vulnerable. These groups, which are not homogenous, include single parents, teenage parents, grandparents as parents, disabled parents and parents of disabled children all potentially face potential challenges in performing their parenting role.

The objectives of the National Parenting Policy are as follows:

- to ensure the development of effective multi-sectorial provisions to support parental empowerment in the performance of their parenting duties, irrespective of family form, in order to promote the optimal holistic development of children at all stages of growth;
- to improve the linkage between current parent support services in Trinidad and Tobago through the reduction of any existing service provision gaps and minimization of programme overlap to ensure that parenting needs are adequately met;
- to provide parenting education to persons who are not yet parents to ensure that they are equipped with knowledge and skills necessary to make responsible and informed decisions that pertain to becoming parents and parenting;
- to foster greater appreciation and support for responsible and effective parenting in Trinidad and Tobago; and
- to promote inclusive healthy family functioning that contributes to the building of strong communities in Trinidad and Tobago.
The National Parenting Policy is founded on the understanding that multiple parenting roles are practiced within different family forms. The Policy recognizes that parents can be genetic, adoptive, or generally, anyone who performs the parenting role. Further, the personal and private role of parenting, based on the decisions of relevant adults within the household is acknowledged. The Policy adopts a needs-driven approach in the support of parenting roles that contribute to the positive development of children.

Irrespective of ethnicity, parents or those playing parenting roles are invariably found in some form of family structure. The family can be described as a group of people associated by shared genetics, affinity (by marriage), or co-residence and/or shared consumption.

Family form and parenting roles are not static. The historically connected experiences of slavery and indentureship, ancestral cultures, subsequent colonial experiences, inter-ethnic relationships and associated creolization all have bearings on the multiple family forms in existence in Trinidad and Tobago. These family forms encompass nuclear, single parent, extended, blended or step, cohabiting, grandparent-led, foster and group home, adoptive parent, sibling families and co-custody families. These multiple family forms and the parenting roles that emanate from them are continuously shaped by interactions within families and between families and the wider society. The society is characterized by increased industrialization, shifts in social values and associated gender role perceptions, increases in female labour market participation, increases in female academic qualification, greater access to contraception and an ageing population. Emerging from these interconnected social and economic factors are declines in family size, marriage and fertility rates, with growing numbers of single-female headed households, childless persons, teen pregnancies and the increased prevalence of grandparents caring for their grandchildren.

Socio-economic pressure, poor social capital, inter-partner violence, community violence and harsh parenting all have negative effects on family functioning and child development. Studies have revealed that a pervasiveness of harsh parenting has deleterious consequences for child development throughout the Caribbean, irrespective of ethnic group. However, in Trinidad and Tobago children that experienced positive parenting approaches, religious socialization and ethnic socialization were found to be more likely to display prosocial behaviours. Conversely, antisocial behaviours were found to be displayed more frequently amongst children that experienced harsh and neglectful parenting approaches.

Several areas of concern pertaining to parenting practices in Trinidad and Tobago have been identified through national consultations. These include insufficient and ineffective communication within some families; poor and at times abusive methods of discipline; poor socialization skills in some instances; negative media influences; and changes in community and societal values. Moreover, parental strengths were identified, and these encompassed unconditional parental love for their children; skill in money management; drive and determination to survive; adherence to positive traditions; strong religious influence; an eagerness to learn in order to improve self and family and respect; and responsible fathers.
Emanating from these national consultations were clear understandings of what parents wanted in support of their parenting roles. These parental wants included understanding how a child’s brain develops; how to discipline appropriately; building a positive relationship with my child; health care of my child; and balancing work and family life.

Trinidad and Tobago already has legislation that seeks to support parents, both as duty bearers and rights holders, in their parenting roles. The delicate balance that exists between the rights of parents and the rights of the child can give rise to multiple tensions, particularly regarding parental rights and responsibilities and the power of the State to intervene in family life. The supportive approach articulated in the National Parenting Policy will serve to alleviate some of these tensions through the coordination of current parental support interventions and the introduction of additional interventions as necessary.

The Government, through consultation outcomes, is mindful that the nation’s parents want access to high quality information, advice and support. Government is also mindful that the levels of information, advice and support will vary between families and so will the modes of delivery of support services. The National Parenting Policy will, therefore, identify the avenues through which these support services will be delivered and expanded.

The Government seeks to uphold the rights of parents and children, through the provision of an extensive range of services and programmes including:

- Provision of child care.
- Attending to child health and development needs.
- Financial support for low-income families.
- Education.
- Housing needs, including repairs for lower income families.
- Building positive intra-family relationships.
- Skills training.
- Safe non-judgmental spaces to voice concerns.

Ideally, all parent support services should be respectful, effective and accessible. Additionally, such services should recognize the strengths that parents possess, which can be built upon to enhance service delivery, making parents’ part of the preferred outcome, as opposed to being perceived as part of the problem. Current parenting support services are delivered through multiple service avenues including Government, civil society and the private sector, and as such these sectors will continue to deliver both universal and targeted parenting support provisions.

Parenting support service expansion will be facilitated in support of: teen mothers in gaining academic and vocational qualifications; grandparents and fathers in parenting roles; new mothers and fathers; disabled parents and parents of disabled children; working parents; eliminating corporal punishment use within family settings; and reducing the rate of teen pregnancy.
The proposed expansion of parenting support initiatives will continue through Government, civil society and the private sector. Parenting services, as a result of their eclectic nature are accessed in a variety of ways. Some parenting support, including medical and educational services, are accessed as a result of child development needs, and these services are often accessed directly; this will continue. Other parenting services are accessed through referral, for example birth registration through TTconnect. However, for certain parenting support services, such as relationship counselling, parents will need an awareness, of the existence of services and their locations.

To ensure awareness of the availability of parent support services, and increase access to such services, the Service Centres of the National Family Services Division would be expanded into every district. To promote national awareness of parenting support services and the function of the Service Centres, a Social Services Directory will be published and updated on an annual basis.

The implementation of the National Parenting Policy will be driven and monitored by a multi-sectoral steering committee. This committee will include representations of relevant Government Ministries, Civil Society Organisations, UNFPA, the private sector and parents. Utilising the objectives of the National Parenting Policy, the Committee will identify indicators of progress regarding implementation of the National Parenting Policy, and regularly monitor implementation and publish annual progress statements.

To conclude, multiple avenues of parental support are currently available through various Government, civil society and private sector services and programmes. Nevertheless, the expansion of the Service Centres will not only support the cohesive delivery of many parenting support services, but the implementation of new parent support initiatives can serve to significantly reduce the inconvenience encountered in accessing such services in the current environment. Ultimately, implementation of the National Parenting Policy will contribute to the development of equitably-delivered, needs-sensitive positive parenting support services and programmes that that are easily accessible, and which will serve to enhance the development of parents and children so necessary for the social cohesion and continued development of the nation.

Introduction

Parents are an integral part of a family, and the family unit is an important element of any society. Parenting approaches that support the positive, holistic development of a child are essential in the nurturing of family well-being and the consequent development of all societies. Indeed, the essential role of parenting to child and family wellbeing has been articulated through several international conventions and covenants including the Universal Declaration of Human Rights, Article 16(3) which states that:

‘The family is the natural and fundamental group unit of society and is entitled to protection by society and the State.’
This position is reinforced in Article 23 of the International Convention on Civil and Political Rights and extrapolated through Article 10(1) of the International Covenant on Economic, Social and Cultural Rights which states, inter alia, that:

‘The widest possible protection and assistance should be accorded to the family, which is the natural and fundamental group unit of society, particularly for its establishment and while it is responsible for the care and education of dependent children.’

Further, the Convention on the Rights of the Child recognizes ‘that the child, for the full and harmonious development of his or her personality, should grow up in a family environment, in an atmosphere of happiness, love and understanding’ and ‘should be fully prepared to live an individual life in society and brought up in the spirit of peace, dignity, tolerance, freedom, equality and solidarity.’

With respect to these international conventions, the Government of Trinidad and Tobago has a responsibility to not only protect, but also develop its citizenry, and in this regard the support of good parenting can be considered essential in the fostering of a balanced, cohesive society. However, parenting operates in both public and private spheres and the Government is mindful of what may be considered intrusion in the private domain.

The need for positive parenting\(^1\) is implied in the international conventions cited above, of which Trinidad and Tobago is a signatory. The signing of such conventions signals, not only the country’s commitment to the tenets of these conventions, but legally binds the country to put into place provisions that ensure the rights of all citizens are upheld.

In Trinidad and Tobago, the rights and responsibilities of parents are clearly articulated in the Children Act 2012, whilst the country’s commitment to the international conventions is reflected in Government’s National Development Strategy. This framework presents the social and economic transformation that the Government envisions, which are projected to positively impact on socio-economic issues such as crime, poverty and inequity. A National Parenting Policy represents yet another vital step in this transformation process.

Over the past three decades, there have been shifts in the country’s demographic, economic and social landscapes including financial instability and rising crime. These shifts have been paralleled by a greater diversity and wider acceptance of varying family forms. Some of these shifts have had both positive and negative impacts on family cohesion and parenting approaches. Moreover, the expansion and pervasiveness of information and communication technology has provided the opportunity for parents to be better informed, and consequently more demanding of the information and support that may be required to ensure fulfilment of their role.

---

\(^1\) Positive parenting has been described as an approach to child-raising that fosters a relationship between parents and children based on mutual respect, the facilitation of the child’s full development potential and on the ability to negotiate diverging interests in a non-violent and constructive way (Respect Works Out, 2015)
Who is a parent?
The question of “who is a parent?” could be rephrased as, “who carries responsibilities for parenting?” However, who is entitled to play a parenting role and who is not appropriate to do so, when viewed through a human rights lens, is difficult to answer. This difficulty is further complicated by the expanding variation of family forms and socio-economic changes. Genetic parents and social parents have differentiated obligations with regard to child care and support. Genetic parents are those persons who contributed genetically to the child, whilst social parents are those persons responsible for the day to day nurturing and care of children with whom they have no biological connection, i.e. foster/adoptive parents, those providing care through State run institutions etc. Thus, a parent for the purposes of this policy can be genetic, adoptive, or generally, anyone who performs the parenting role.

The parental role
When the parenting role is contemplated, it is normally in the context of raising a child to the age of eighteen. It has been suggested that the parenting role be considered as a continuum, as the role shifts to support the developmental needs of the child. Moreover, as a child reaches eighteen parenting does not cease. There will be persons over the age of eighteen, still living in their parent(s) home who require parental support, in addition to parents playing parenting roles in the care of their own ageing parents.

Parenting has been demonstrated to provide a solid underpinning for the cognitive, social and emotional development of children (Bornstein & Tamis-LeMonda, 1989; Kochanska, 1994; Landry, Smith, Swank, Assel, & Vellet, 2001; Ramey & Landesman Ramey, 1998; J. P Shonkoff & Phillips, 2000). The parental role should serve to provide children with love, a sense of identity within the family extending to wider society, a safe and secure environment in which self-expression is encouraged and in which questions can be explored, where universal morals are instilled and finally where childhood can be enjoyed.

Parental influence on a child’s well-being and development is greater than any other single socio-environmental factor. This influence, begins prior to birth, and continues through middle childhood, adolescence and into adulthood. Indeed, parental influence is a varying lifelong influence and endures even after parents are no longer ‘in’ their offspring’s lives. An authoritative parenting style that is high in warmth and responsiveness, coupled with reasonable control, has been demonstrated to contribute to the socio-emotional wellbeing of children. This type of parenting style was also found to be a predominant factor in the positive development of resilience in children growing up in especially challenging circumstances (SPRC, 2010). Moreover, sensitive, responsive parenting characterised by consistency, support, structure, stimulation, and monitoring decrease the risks of the child displaying psychological and behavioural disorders (Waylen & Stewart-Brown, 2008).
Children benefit in multiple ways from good parenting

From birth, even prior to birth, and beyond the age of eighteen, children benefit in multiple ways from good parenting. However, infancy is still regarded as an essential stage in the positive development of the child. This phase is characterized by tremendous psychomotor growth, development of information-processing skills, language learning, emotional expressivity and temperament formation (Bornstein, 2002). The brains adaptability in the early years of life and its associated responses to sensory stimulation, including physical touching and social interaction increase its function thereby increasing cognitive and social growth (Dawson, Ashman, & Carver, 2000; Landry, Smith, & Swank, 2003; Nelson, 1999). Further, research has demonstrated that responsive and attuned early years care promotes denser brain circuitry (Davies, 2004). Thus, consistent parental involvement encompassing stimulation, responsiveness, warmth and sensitivity contributes to positive developmental outcomes (Teti & Candelaria, 2002). Equally, it has been evidenced that harsh and inconsistent discipline, little parental involvement in addition to a lack of child activity monitoring all potentially contribute to early displays of antisocial behavior that can manifest in delinquency (Patterson, DeBaryshe, & Ramsey, 2000).

Parenting roles are just as essential in the teen years of child development as in the early year’s child development. Teenagers are particularly vulnerable to problem behaviours as a result of psychosocial disorders associated with adolescence including depression, suicide, drug and alcohol abuse and risk-taking encompassing sexual activity and mental illnesses (Adams & Berzonsky, 2003). However, continued consistent parental support and the monitoring of teen activity results in higher academic performance, fewer behavioural problems, enhanced mental health, greater self-esteem and better social skills (Gunnoe, Hetherington, & Reiss, 1999; Jackson, Henriksen, & Foshee, 1998). Positive parenting approaches characterized by an authoritative style are therefore essential in nurturing positive child development outcomes, which serve the individual well beyond their eighteenth birthday.

Parental relationships

The quality of parental relationships influences child development outcomes. When parents interact with each other in a positive fashion, pro-social interactions with their children are more likely to occur. Such consistent positive interaction bodes well for the child’s mental and physical health development (Werner, 2000). Thus, strong and stable relationships within the home, that is relationships between parents and between parent(s) and child, were found to have a great impact on the child’s happiness and overall wellbeing (ibid). Conversely parental conflict, parental drug abuse, poor parental mental health, financial instability and social stress have been demonstrated to negatively contribute to poor parenting practices often characterized by hostile and inconsistent parent child interactions. Such scenarios negatively impact on the child’s development (Cowan & Cowan, 2002; Fincham, 1998; Shaw, Owens, Giovannelli, & Winslow, 2001; Zahn-Waxler, Duggal, & Gruber, 2002). Additionally, it appears that post-natal depression, which can impact on the quality of parental relationships, is also linked to poor child development outcomes (L. Murray & Cooper, 1997).
Unfortunately, parental conflicts do occur. When such conflicts occur it is important to bear in mind that family function is a priority as opposed to preserving a family ‘type’ or form. There have been a variety of studies examining the outcomes of children who have experienced parental divorce, and although a child’s adjustment to divorce and possibly remarriage, or another cohabiting relationship may cause both internal and external conflict, enduring problems are only experienced by a minority (Hetherington, E.M. and Stanley-Hagan, M., 1999). However, if parental conflict persists over the long term, this can have negative impacts on child/adolescent development.

The maintenance of parental cooperation, post-parental separation/divorce has been shown to contribute positively to children’s adjustment to family fractures (Rodgers, B. & Pryor, J., 1998). Research indicates that in the case of separated parents, children’s outcomes are influenced by the quality of the relationship they have with the nonresident parent as opposed to the frequency of contact (Gilmore, S., 2006), although good relationships are demonstrated to benefit from frequent contact between child and nonresident parent (Dunn, J. et al, 2004). It is therefore particularly important that there are available avenues of support for parents and children involved in a ‘family’ separation or consequent realignment. It should be borne in mind that the extended family, including grandparents, often provide essential support in family breakdown scenarios and that extended family members may also require support in some cases of parental relationship breakdown.

**Resilience**

Resilient children can be identified as those who display positive developmental outcomes in spite of exposure to risk factors including parental unemployment, poverty, violence and family fracture. Resilience can be fostered at the level of the child, the family, the community and the wider society (Rutter, 2000). Healthy, good-tempered and children who are achieving academically are often considered resilient children, particularly if they are being raised in especially challenging circumstances. Such children generally develop into persons who are able to manage stress, live independently and engage in pro-social interactions (Luthar, 2006; Masten & Coatsworth, 1998; Werner, 2000).

Studies on children growing in especially challenging circumstances have found that good parenting is a predominant factor that contributes to a child’s positive development. In especially challenging circumstances, the qualities of emotional security, confidence and trust in others, are all nurtured by a caring and supportive parental environment (Daniel, Wassells, & Gilligan, 1999). The provision of suitable role models, consistent family structure and guidance with clearly defined boundaries, rewards and sanctions. have all been evidenced as contributing to positive coping responses in the face of adversity (M. Hill, Stafford, Seaman, Ross, & Danie, 2007). Conversely, poor parenting can have lasting impacts on the individual’s life, particularly for children in especially challenging circumstances (J. P Shonkoff & Phillips, 2000).
Vulnerable groups of parents
The Government of Trinidad and Tobago is mindful that there are particular groups of parents that can be considered vulnerable. Thus, single parents, teenage parents, grandparents as parents, parents with disabilities and parents of children with disabilities all potentially face particular challenges in their parenting role. Unfortunately, the aforementioned groups are not discrete and can overlap; a single parent can be a teen parent or alternatively a lone grandparent caring for their grandchild. The challenges faced by vulnerable parents generally revolves around difficulties surrounding service access and availability.

Single parents
Central Statistics Office (CSO) data indicates this group, dominated by women, is relatively stable at around 11% of the population. Being a single parent often intersects with other vulnerable groups including teenage parents and grandparents as parents (Goodger & Larose, 1998). Despite their status, single parents have been demonstrated to provide similar levels of child care as coupled parents (Craig, 2004), as well as a stable environment and abilities necessary to cope with adversity (Lindblad-Goldberg, 1989). Yet, research has revealed that single parents are at a higher risk of poverty, reporting higher levels of financial challenges (Harding, et al., 2005; Waldfogel, et al., 2001). Additionally, international research suggests that unemployment is higher amongst single parents, when compared to two-parent families, and the children of single parents show lower levels of academic achievement, with consequent limited employment prospects (Harding, et al., 2005).

Fathers
As a result of parental role constructs which are heavily underpinned by gender scripts, parent is often synonymous with mother. This seem evident when, for instance, parents are invited to schools, or a child needs to visit the doctor, it is more likely that the child’s mother, or another woman within the family unit, is the responsible adult accompanying the child. Yet, studies have revealed that development of the child’s self-esteem, resulting friendships, demonstrations of empathy and educational achievements are heavily influenced by the degree of the father’s involvement in the child’s upbringing (Amato, 1998; Lamb, 2004).

Teenage Parents
The perusal of CSO (Census 2000, 2011) data indicates an increase in the number of teenage parents. International research has shown teen mothers to be at greater risk of pre- and post-natal complications (Botting, Rosato, & Wood, 1998) and more likely to experience single parenthood, to display poor parenting abilities, and possess lower level qualifications (Bradbury, 2006; Brooks-Gunn & Chase-Lansdale, 1995; Coley & Chase-Lansdale, 1998). Additionally, the children of young parents have been found to have poorer mental health and greater behavioural problems when compared to their peers (Vinnerljung, Franzén, & Danielsson, 2007).
Parents with disabilities
Research has shown that parents with disabilities frequently reported facing skepticism or discrimination, regarding their capacity to parent, from support services and wider society (Campion, 1995; G. Llewellyn & McConnell, 2010). However, physically or intellectually impaired parents have the ability to provide love, support, structure, guidance, and leadership to their children (Olsen & Clarke, 2003). Olsen and Clarke also propose that, understanding the impact of disabilities on parenting roles within the context of available support is required.

Parents of children with disabilities
Parents of children with disabilities face many challenges often determined by the nature of the child’s disability and the socio-economic circumstances of the parents. Nevertheless, parents of children with disabilities will share similar experiences pertaining to their challenges including denial, anger, embarrassment and guilt (MacKeith, 1973). The additional task of caring for a child with a disability can have profound effects on the whole family including additional demands on time, patience and finances.

As a result of the time and energy demands required to care for a child with disabilities and negative social attitudes, the social activities of parents of children with disabilities are severely curtailed (Case, 2000). It is noteworthy that, internationally, parents of children with disabilities concede that they are unlikely to receive supportive, concerned and knowledgeable advice from practitioners and professional workers and a possible consequence of this is a high value placed on peer support groups where non-judgmental interactions with other parents in similar circumstances can occur (Case, 2000).

The Government is mindful that practical and emotional support of these parents is essential from the moment of diagnosis of the child, as it is at this stage parents often feel isolated and abandoned by relevant services (Case, 2000; Dowling & Dolan, 2001; Tudball, Fisher, Sands, & Dowse, 2002). However, the provision of such integrated support requires considerable coordination of services.

Grandparents as parents
There currently exist multiple contributions of grandparents in support of their grandchildren, with socio-economic circumstances being lead determinants of these experiences. These contributions could range from occasional grandchild care, through to regular grandchild care to enable parent(s) engagement in employment, through to full-time grandchild care in the absence of parents, as a result of a range of possible circumstances that include migration, illness/death, substance addiction, incarceration or separation. Further, the grandparent’s role as a potential support resource could encompass being sought for advice on a diverse range of topics, for counselling or even to deliver interventions to avert a potential family crisis.

It should be borne in mind that, grandparents who play a leading role in their grandchildren’s upbringing are more likely to experience financial hardship as a direct result of their active role. Such a scenario can expose the grandparent to a higher risk of experiencing multiple
dimensions of poverty. Some circumstances that can increase the vulnerability of grandparent’s that care for grandchildren include being grandparents of single mothers, grandparents of disabled children, grandparents of lower socio-economic status and grandparents who are working and caring for grandchildren.

The Position of the National Parenting Policy in Relation to other Policy Areas
The National Parenting Policy is a policy that transects the four major policy areas of education, health, child and gender. Figure 1 below is a diagrammatic representation of the cross cutting nature of the National Parenting Policy.

![Diagram of the National Parenting Policy in relation to other major policy areas](image)

Figure 1: The National Parenting Policy in relation to other major policy areas

What the National Parenting Policy will do
The influence of parents on their children’s development cannot be overstated, and makes the support of positive parenting a legitimate concern of the Government of Trinidad and Tobago. The parental potential to provide the requisite love, care and protection to children that enables their holistic development and consequent contribution to societal cohesion will be supported.

The quality of parental relationships and parenting is essential to children’s development, whatever the family form in which the child is located. The objectives of the National Parenting Policy for Trinidad and Tobago are:
• to ensure the development of effective multi-sectorial provisions to support parental empowerment in the performance of their parenting duties, irrespective of family form, in order to promote the optimal holistic development of children at all stages of growth;
• to improve the linkage between current parent support services in Trinidad and Tobago through the reduction of any existing service provision gaps and minimization of programme overlap to ensure that parenting needs are adequately met;
• to provide parenting education to persons who are not yet parents to ensure that they are equipped with knowledge and skills necessary to make responsible and informed decisions that pertain to becoming parents and parenting;
• to foster greater appreciation and support for responsible and effective parenting in Trinidad and Tobago; and
• to promote inclusive healthy family functioning that contributes to the building of strong communities in Trinidad and Tobago

The National Parenting Policy is founded on the understanding that multiple parenting roles are practiced within different family forms. The Policy recognizes that parents can be genetic, adoptive, or generally, anyone who performs the parenting role. Further, the personal and private role of parenting, based on the decisions of relevant adults within the household is acknowledged. The Policy adopts a needs-driven stance in the support of parenting roles that contribute to the positive development of their children. As a supportive policy, it does not seek to intervene directly in the private sphere of family life, unless a child or an adult is in danger of harm when intervention is necessary. However, such interventions are not covered in the National Parenting Policy, as these are addressed in legislation, inclusive of the Children Act 2012 and the Domestic Violence Act 1998.

The Government, through the outcomes of several consultations, is mindful that the nation’s parents want access to high quality information, advice and support. Further, the Government is also mindful that the levels of information, advice and support will vary between families, and so will the modes of support delivery. The National Parenting Policy will, therefore, identify the avenues through which these support services will be delivered and expanded.

The following chapters in this document will:

- Present the various family forms existing in Trinidad and Tobago and the varying contexts that affect family forms and parenting roles,
- Outline what legislative and programmatic support the Government already provides to parents and
In the context of a shifting socio-economic landscape, present future avenues of support with consideration for trends in family forms, vulnerable groups of parents and varied parenting roles.

1. Family Forms in Trinidad and Tobago

The population of Trinidad and Tobago comprises 1,328,019 persons (CSO, 2011) with two co-dominant majorities, persons of African descent and persons of Indian descent, encompassing 34.22% and 35.43% of the total population respectively. The third largest group, described as mixed is 22.82% with the remaining 7.53% distributed among persons of Chinese, Syrian and European descent.

Irrespective of ethnicity, parents or those playing parenting roles are invariably found in some form of family structure. The family can be described as a group of people associated by shared genetics, affinity (by marriage), or co-residence and/or shared consumption. A variety of family forms are found in Trinidad and Tobago and exist as nuclear, single parent, extended, blended or step, cohabiting, grandparent-led, foster and group home, adoptive parent, sibling families and co-custody families. As a result of limited national data on some of these family forms, insights into trends are difficult to assemble, however, some trends in shifting family forms can be gleaned.

Since independence in 1962, there have been significant political, social and economic shifts, both locally and globally that have influenced local family forms and parenting roles. Further, differing and dynamic power structures underpinned by gendered perceptions exist within the multiple variations of family which determine, to a greater or lesser extent, parenting roles and associated child care practices. Thus, family form and the parental functions performed within the family arise through the convergence of multiple interactions spanning social, cultural, political, economic and environmental spheres.

The sections below use available data to explore some of the emerging changes in Trinidad and Tobago family forms, followed by a brief examination of some possible influences associated with shifts in family form.

1.1 Marriage and other unions

Marriage, invariably underpinned by religious teachings, is the most common form of union according to Census 2011 data, with approximately 35% of the female population aged 14 -54 years classified as married and living with a spouse; however, common law and visiting unions also persist. Non-marital unions are common in the Caribbean (Anderson, 2007). Up to 2011, there has been a continuous rise in common law and visiting unions. Census statistics indicate that the percentage of people who were married at least once (over the age of fourteen) declined over the period 1990-2011. Between 1990 and 2000, this percentage decreased from 53.4% to
51.2% in 2000 and 51.1% in 2011 (CSO, 2011), while common law and visiting unions increased over the same period.

From 1990 to 2011, the Singulate Mean Age at First Marriage (SMAM) increased from 29.9 for males and 27.1 for females in 1990 to 31.4 for males and 28.1 for females in 2000 to 31.8 for males and 29.2 for females in 2011 (ibid). It should be noted that, this measure does not take into account first marriages above age 50 (ibid).

1.2 Family size
Trinidad and Tobago has experienced a steady decline in family size. This decline is indicated by the number of persons living in a household, which decreased from 4.1 persons per household in 1990 to 3.3 per household in 2011 (ibid).

1.3 Single parents
Single parents constituted 11.39% of the Trinidad and Tobago population (ibid), and despite not being disaggregated by sex, it is generally assumed, as a result of gendered roles, that women would be the head of household for the majority of single parent families. Perusal of CSO census data over the last two decades reveals relative stability in the numbers of single parents, at approximately 11% of the population.

However, according to the National Census Report 2000 for Trinidad and Tobago, the percentage of female-headed households was approximately 30% and increased to 33% in 2010 (CSO, 2011).

1.4 Trends Associated With Shifting Family Forms
Family form and parenting roles are not static. The historically connected experiences of slavery and indentureship, ancestral cultures, subsequent colonial experiences, inter-ethnic relationships and associated creolization, all have bearings on the multiple family forms in existence in Trinidad and Tobago (Logie, C. & Roopnarine, J.L., 2015). Family forms with varying levels of partner commitment, psychological boundaries and changing household numbers, and attendant parenting roles are therefore shaped by shifting economic, social, cultural and political factors. To attempt to understand these multiple shifts and their possible impacts on the family form, it is essential to first acknowledge the interconnectedness of these historic, economic, social, cultural and political factors.

It should be borne in mind that shifts in behaviour and attitudes vis a vis parenting, are underpinned by shifts in gender scripts and associated gendered perceptions, linked to the parenting roles of males and females. These gendered perceptions are often underpinned by religion which determines, to a large degree, approaches and beliefs pertaining to men’s and women’s roles in child rearing (Roopnarine & Gielen, 2005). Caribbean societies still exhibit ‘mother as nurturer’ and ‘father as provider’ constructs. Moreover, motherhood is associated
with womanhood and fatherhood with manhood (Logie, C. & Roopnarine, J.L., 2015), which could have implications for the significant number of teen mothers in the Caribbean (UNFPA, 2013). A focused inquiry into the pertinent social and economic trends could provide useful insights into changing family forms in Trinidad and Tobago.

1.4.1 Fertility
As outlined in the ‘Trinidad and Tobago 2011 Population and Housing Census Demographic Report’, Cohort Fertility Rate “measures the number of children born alive to specific real cohorts of women by the end of their childbearing period” (CSO, 2011). In 1990, there were 4.1 children born alive per woman for those persons approaching the end of their childbearing years. However, this figure declined to 3.1 in 2000, and to 2.5 in 2011 (ibid). It is also noteworthy that ‘Childlessness’, the amount of women who have not given birth to children by the end of their childbearing years, increased from 8.3% to 12.8% between 1990 and 2011 (ibid). Over a twenty year period, fertility has consistently declined, whilst childlessness has increased.

The decrease in fertility, resulting in smaller households appears to occur as a result of several converging factors including a greater access to and understanding of the use of contraception, shifts in gender perceptions pertaining to the roles of women within the family and wider society, higher levels of qualification in the female population, resulting in greater labour market participation. All of these factors could potentially contribute to delayed childbirth or opting for childlessness.

1.4.2 Teen pregnancy
Disaggregation of data indicating an overall decline in fertility rates reveals an anomaly of increased teenage fertility rates. Teenage mothers are defined as “the percentage of women aged 15-19 who already have children or are currently pregnant” (Trading Economics, 2015), whilst adolescent fertility rate refers to “the number of births per 1,000 women ages 15–19” (World Bank, 2014). Unfortunately, this data does not capture those teen and pre-teen pregnancies that occur in girls aged 14 and under. Nevertheless, between 2005 and 2010 Trinidad and Tobago was found to have an adolescent fertility rate of 33 births per thousand women (WHO, 2013) which increased to 35 in 2012 (World Bank, 2014).

Age of first child has been evidenced as lowest in lower socio-economic strata, with these births often occurring as a consequence of a visiting relationship, as opposed to some form of cohabitation. It should be noted that post birth, many women in visiting relationships do seek a common law union (St Bernard, 2003). However, child-shifting and partnership-shifting are also practices that emerge with single persons of lower socio-economic circumstances (ibid).

International research indicates that becoming a young mother can adversely affect the life chances of the mother and her offspring (Brooks-Gunn, J., & Chase-Lansdale, P. L., 1995) and UNICEF has identified teen parenting as a child protection issue in the Caribbean (UNICEF, 2007). Moreover, full-time childcare demands on a teen mother can adversely affect the
acquisition of academic or vocational qualifications, which would otherwise potentially increase the individual’s earning capacity and standard of living (Bradbury, B., 2006). This potentially precarious social situation can be further exacerbated by the gendered dimension of absentee fathers, or fathers being unable or unwilling to contribute towards the upbringing of the child, which increases the likelihood of the teenage mothers experiencing single motherhood (ibid). The convergence of lower economic status, poor understandings of conception and contraception and the gendered power dynamics of male-female relationships, including the association of motherhood with womanhood and fatherhood with manhood, explain the rising trend in teenage fertility and associated single motherhood.

1.4.3 Grandparents as parents
A consequence of a decrease in a population’s fertility rate is an increase in the mean age of the population and the proportion of single female-headed households, as a result of their greater longevity, when compared to men. Further, illness/death, substance addiction, incarceration, separation and the economic migration of persons from the region, have all impacted the restructuring of Caribbean families. An outcome of this restructuring creates an even greater on women, in many cases grandmothers, as both providers and nurturers (Logie, C. & Roopnarine, J.L., 2015), sometimes in unfavorable socio-economic circumstances.

Grandparents have traditionally played an integral, though not necessarily publically acknowledged role in the Caribbean family including the provision of reliable, affordable childcare for parents, particularly single mothers. Further, there is growing anecdotal evidence to suggest a gradually increasing number of grandparents that parent their grandchildren; however, more research is required.

The provision of childcare by Grandparents allows mothers to return to work after child birth, which increases female labour market participation and potential economic stability. However the Grandparents’ contribution is not without a cost. International research has indicated that Grandparents who play a leading role in their grandchildren’s upbringing are more likely to experience financial hardship as a direct result of their active role (SPRC, 2010). Such a scenario can expose the grandparent to a higher risk of experiencing multiple dimensions of poverty. Further, specific circumstances exist that can increase the vulnerability of grandparents that care for grandchildren, which include being grandparents of single mothers, grandparents of disabled children, grandparents of lower socio-economic status and grandparents who are working and also caring for grandchildren.

1.4.4 Labour market participation
Effective family and by extension, parenting function is enhanced by financial stability (Curran et al, 2010). Economic growth is positively associated with growth in employment. In the last four decades Trinidad and Tobago has experienced significant economic growth. This growth has been accompanied by an increase in employment, with women’s employment in Trinidad and Tobago accelerating faster than men (World Bank, 2014). In 2002 the employment rate for
women was approximately 42% of the total population, while that for men was 70% (United Nations, 2014). In 2011, the rate for women was estimated at 51%, and for the rate was estimated to be 75% of the total population (ibid).

Further examination of female labour market participation in Trinidad and Tobago reveals other positive trends. When industries are disaggregated, females are found in higher numbers than males in the following sectors: wholesale and retail trade; restaurants and hotels; finance, insurance, real estate and business services and community social and personal services. Moreover, in the restaurants and hotels and community, social and personal services, the percentage of females employed was double that of males. Yet, the percentage female participation in the labour market must be tempered with the understanding that labour market participation implies neither job stability, a ‘living wage’ or wage parity with male employees. In Trinidad and Tobago wage disparity between men and women is still prevalent. This disparity may persist due to the gendered perceptions of male and female roles within the family and society as a whole as traditionally, men have been the main wage earner whilst women are expected to be responsible for nurturing the family (Reddock & Bobb-Smith, 2008).

Additionally, in many industries employment is offered on a temporary, contractual basis, increasing both emotional and economic instability, which have negative implications for parenting roles and relationships. Unemployment or underemployment is associated with economic poverty. Households affected by economic and other dimensions of poverty tend to be larger, with a greater frequency of female heads that have dependent children and are single (Bernard, 2003).

It has been posited that the increase in female participation in particular service areas is linked to increases in female academic qualifications, which have been demonstrated to be higher than males. Indeed, tertiary education enrollment of females was consistently higher than males between 63% and 67% from 2008 to 2011 (MSTTE, 2010, MTEST, 2012). Females who attain higher levels of secondary and tertiary education are open to greater life chances. These life chances can alter these individuals’ perceptions to the age of child bearing, choice of partner, health choices and marriage, all of which are more likely to have positive impacts on the family. Conversely, poor qualification often results in lower wages and employment instability, with negative implications for parenting and associated child development (J. P Shonkoff & Phillips, 2000; St. Bernard, 2001, 2003).

1.5 Summary
As a result of converging socio-economic, historic and cultural factors, multiple family forms exist in Trinidad and Tobago. These family forms and the parenting roles that emanate from them are continuously shaped by tensions that arise within families and between families and the wider society. The social environment is characterized by increased industrialization, shifts in social values and associated gender role perceptions, changes in divorce laws making union dissolution easier, increases in female labour market participation, increases in female academic qualification, greater access to contraception and an ageing population which have led to multiple differing family forms. Emerging from these interconnected social and
economic changes are declines in family size, marriage and fertility rates, with growth in the number of single-female headed households, childlessness, teen pregnancy and apparent number of grandparents caring for their grandchildren.

The following chapter will present the multiple needs of parents that arise within the various family forms and parenting practices in Trinidad and Tobago.

2. Parenting Needs in Trinidad and Tobago

Different child rearing practices and accompanying expectations of children’s academic abilities, behaviours, and socialization are found in different cultures. Parenting approaches in the Caribbean, influenced by converging socio-economic, historic and cultural factors, have been described as warm and indulging coupled with harsh, controlling practices (Leo-Rhyne, 1997). In Trinidad and Tobago, mothers and fathers have been found to display similar levels of warmth and affection towards their children. Moreover, high levels of positive parenting and high levels of behavioural control were found to occur across all ethnic groups. However, within Indian (descent) and ‘mixed’ ethnic families (Indian/African descent) higher levels of positive behavior management approaches, rule-setting and material-rewarding were found, when compared to families of African descent. Further, harsher disciplinary approaches towards children were found in African descent and ‘mixed’ ethnic families when compared to families of Indian descent. Mixed-ethnic couples were also found to engage in higher levels of academic socialization when compared to families of Indian or African descent, whilst mothers, when compared to fathers, engaged in higher levels of academic socialization across all ethnic groups (Roopnarine et al. 2013).

Socio-economic pressure, poor social capital, inter-partner violence, community violence and harsh parenting all have negative effects on family functioning and child development. Studies have revealed that a pervasiveness of harsh parenting has deleterious consequences for child development throughout the Caribbean, irrespective of ethnic group. However, family practices such as ethnic socialization could potentially offer protection to children that are not only subject to harsh parenting but also living in especially challenging social circumstances. Moreover, positive parenting and the associated prosocial behaviours in children were found to be partially mediated by ethnic socialization in the Indo and Mixed-ethnic groups, whilst in the African group positive parenting was found to be more directly linked to prosocial behaviours displayed by children in their families (Krishnakumar et al, 2013).

Religion, and/or spirituality practiced within a family has also been demonstrated to provide a protective function vis-a-vis children engaging in risk-taking behaviours, discrimination and substance abuse (Wong et al, 2006). Moreover, fathers who placed a high importance on

---

2 The ability of a family to communicate academic expectations and foster educational and occupational aspirations
3 The ways in which ethnic group membership affects child development and the developmental processes by which children acquire the behaviors, perceptions, values, and attitudes of their ethnic group.
4 Positive actions that benefit others
spirituality were found to display authoritative parenting approaches. Children in Trinidad and Tobago who experienced positive parenting approaches, religious socialization and ethnic socialization were found to be more likely to display prosocial behaviours. Conversely, antisocial behaviours were found to be displayed more frequently amongst children that experienced harsh and ignoring parenting approaches (Logie & Roopnarine, 2015).

Significant associations have been demonstrated between economic factors and caregiving practices and child outcomes (Roopnarine et al. 2013), whilst the practices of child shifting and partner shifting have been considered major causes for concern vis-a-vis child mental health (Sharpe & Mohammed, 2013). Further, parental expectations of their children were often found to be too demanding and unrealistic yet parents and caregivers ranked parents and families as the most important setting in which children learn values. Interestingly, schools/teachers were considered second most important source of value acquisition (Logie & Roopnarine, 2015).

A report of the Cabinet Appointed Committee to Examine the Status of the Institution of the Family in Trinidad and Tobago (August, 2004) concluded that “poor parenting skills and practices” were having a detrimental effect on family life in Trinidad and Tobago. The document identified, inter alia, areas of concern regarding parenting practices in Trinidad and Tobago, which included:

- Insufficient and ineffective communication within some families;
- Poor and at times abusive methods of discipline;
- Poor socialization skills in some instances;
- The negative influence of the media / cable television;
- Changes in community and societal values.

To supplement the insights into parenting approaches in Trinidad and Tobago presented above the Government also utilized additional data sources. These included two (2) consultation reports on the National Parenting Policy and one (1) National Social Worker Consultation. Additionally, UWI Family Development and Children’s Research Centre (FDCRC) and the Islamic Ladies Social and Cultural Association submitted position papers on the National Parenting Policy. Analysis of the aforementioned consultation outcomes the position papers coupled with data above provide valuable understandings of parenting needs in twenty-first century Trinidad and Tobago.

2.1 Consultations
In April 2013, the former Ministry of Gender Youth and Child Development (MGYCD) hosted a Consultation with Social Workers and Social Service Staff from Government Ministries and Agencies at the Capital Plaza Hotel, Wrightson Road, Port of Spain. This consultation targeted Social Workers and Social Service Staff from the MGYCD, Ministry of Education, Ministry
of the People and Social Development, Ministry of National Security, The Children’s Authority and The Tobago House of Assembly.

One of the major objectives of the consultation was to gather data that would assist the MGYCD in implementing relevant and appropriate activities in the National Parenting Programme and by extension inform development of the National Parenting Policy. The findings presented below were deemed pertinent to understanding the national situation as it pertains to twenty first century parenting in Trinidad and Tobago.

Interestingly, this consultation identified the strengths of parents and caregivers in their role. These strengths, listed below, offer a positive platform on which expanded Government support, articulated through the National Parenting Policy, will continue to be offered.

2.1.1 Identified Strengths of parents / caregivers

Social Workers and Social Service Staff from Government Ministries and Agencies identified the following strengths of parents:

- Unconditional love for their children.
- Skill in money management.
- Drive and determination to survive.
- Fathers who come to the office take their family responsibilities very seriously.
- Parents are skilled (employable).
- Eagerness to learn in order to improve self and family.
- Adherence to positive traditions.
- Strong religious influence and respect.

Further, parents of lower socio-economic backgrounds, accessing the Temporary Conditional Cash Transfer Programme (TCCTP), were identified as displaying the following:

- Able to access public health services and pharmaceutical support.
- Willing to realize social promotion and self-improvement.
- Fully aware of emergency contact numbers and services.
- Able to seek emergency relief in terms of disasters.

Other outcomes of the consultation were the identification of parenting trends and practices in Trinidad by geographic area. It should be noted that the recorded absence of a trend/practice does not mean that it is not occurring, but that amongst those consulted the perception of a particular phenomenon was not recognized.
### Table 1: Parenting trends/practices by geographic area (Trinidad)

<table>
<thead>
<tr>
<th>North</th>
<th>Central</th>
<th>South</th>
</tr>
</thead>
<tbody>
<tr>
<td>Absent fathers</td>
<td>Sexual abuse</td>
<td>Teenage pregnancy</td>
</tr>
<tr>
<td>Child abuse / neglect</td>
<td>Verbal abuse</td>
<td>Minimum focus on education</td>
</tr>
<tr>
<td>Beyond control children</td>
<td>School absenteeism / truancy</td>
<td>Single mother households</td>
</tr>
<tr>
<td>Teenage pregnancy</td>
<td>Alcohol abuse</td>
<td>Child sexual abuse</td>
</tr>
<tr>
<td>Courts mandating co-parenting</td>
<td>Teenage pregnancy</td>
<td>Substance abuse (marijuana, alcohol)</td>
</tr>
<tr>
<td>Social displacement / homelessness</td>
<td>Incest/ Child sexual abuse</td>
<td>Beyond control children</td>
</tr>
<tr>
<td>Parents affected by illiteracy as a result of being school dropouts</td>
<td></td>
<td>Beyond control children</td>
</tr>
<tr>
<td>Blended families</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Reading of Table I (above) reveals that concerns surrounding teen pregnancy and child sexual abuse were recognized as significant trends/practices in all three regions consulted.

In June 2014, persons in twenty (20) Government Ministries were consulted on ‘parenting information/support needed’. Of the three hundred and fourteen (314) respondents, 75% were female and 24% were male. A significant proportion of respondents were biological parents (65%) and parents to be (9%). 14% of respondents did not have the responsibility of parenting duties, 3% were guardians, 2% were caregivers and 5% were categorized as other. Approximately 42% of the respondents were single, 8% divorced and 3% separated, whilst 40% were married and 6% in a common law relationship. Interestingly, 85% of the respondents indicated that they have never been exposed to formal parental education with 93% expressing that such education was important. Approximately 70% of respondents indicated that they value both formal and informal types of parental support.

Participants were asked to rate the importance of thirty-seven (37) categories of parental information and the categories listed below were rated very important by over 80% of respondents:

- Understanding how my child’s brain develops.
- How to discipline appropriately.
- Building a relationship with my child.
- Health care of the child.
- Balancing work and family life.

Additionally, in June 2014, two hundred and thirty five (235) persons across fourteen (14) government Ministries were consulted regarding major challenges experienced in parenting. Finance, external influences, guidance and counselling, discipline and time management...
challenges accounted for approximately 55% of the responses. The categories entitled external influences, inexperience of parents, lack of knowledge, guidance and counselling, understanding mental and physical development were further divided into the following sub-categories:

**External Influences**
- Social media
- Electronic media
- Community influences with regard to drugs and crime
- Double standards exhibited by others in the environment

**Inexperience of Parents / Lack of Knowledge**
- Understanding the role of the parent
- Dealing with advances in technology
- Educational level of parents not sufficient to help the education activities of the child

**Guidance and Counselling**
- Imparting social skills
- Advice on dealing with bullying
- Instilling spiritual values, and morals
- Balancing school and recreational activities

**Understanding Mental and Physical Development**
- Sex and Sexuality
- Managing children’s personality from stage to stage

2.2 **Position papers on the National Parenting Policy**
In its position paper the UWI FDCRC identified the main parenting issues as levels of parenting knowledge, skills and functioning, which often impact on the quality of parenting and family life. Further, inadequate and questionable level of delivery of social services, economic circumstances, advances in technology; discipline and punishment; media influences; toxic environments; the negative influences of the existing materialistic culture were also recognised as parental challenges (UWI FDCRC position paper on National Parenting Policy).

The Islamic Ladies Social and Cultural Association position paper on National Parenting Policy identified several challenges with regard to parenting. These included inadequate family resources, limited and inefficient community support systems, social media, electronic media and shifting ‘moral’ values.
2.3 Summary
When the data presented above are considered, a picture of parenting in contemporary T&T emerges. Firstly, parents are viewed as possessing many positive traits including unconditional love for their children, skills in money management, adherence to positive traditions and probably, most importantly an eagerness to learn in order to improve self and family. However, major challenges affecting parenting in twenty-first century Trinidad and Tobago also appear. These challenges can be presented under the following themes:

- Financial
- External Influences
- Guidance & Counselling
- Discipline
- Time Management
- Child sexual abuse
- Teen pregnancy

Interestingly, though perhaps not surprisingly, given the challenges identified above, parents were also able to identify information on the subjects they considered very important.

<table>
<thead>
<tr>
<th>Information parents would like</th>
<th>Corresponding challenges identified</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘Understanding how my child’s brain develops’</td>
<td>Guidance and counselling challenges</td>
</tr>
<tr>
<td>‘How to discipline appropriately’</td>
<td>Discipline challenges</td>
</tr>
<tr>
<td>‘Building a relationship with my child’</td>
<td>Guidance and counselling/discipline, child sexual abuse/teen pregnancy/external influences challenges</td>
</tr>
<tr>
<td>‘Health care of the child’</td>
<td>Guidance and counselling/external influences challenges</td>
</tr>
<tr>
<td>‘Balancing work and family life’</td>
<td>time management challenges</td>
</tr>
</tbody>
</table>

Table 2: Important information parents would like and corresponding parenting challenges identified

Through the analysis of both primary and secondary data, it is clear that the parenting in Trinidad and Tobago has multiple positive aspects. However, not only did the primary data reveal an awareness of the multiple challenges all parents potentially face, but there was also an understanding of what information and support would be required to address these challenges.
3. **Legislative Environment**

3.1 **The international context**

The State has a responsibility to ensure that the rights of citizens, inclusive of children’s rights and their associated care, are upheld. The Universal Declaration of Human Rights contains thirty (30) articles, many of which are pertinent to parents as individuals and to their parental role. Parents, by virtue of their unique role act as both rights holders, that is as individual citizens entitled to human rights, and as duty bearers, that is, as persons responsible for ensuring their children’s rights are not violated.

The Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) ratified by Trinidad and Tobago in 1990 also possesses articles that can be considered relevant to a National Parenting Policy including articles referencing education, employment, health, economic and social benefits, rural women, marriage and family life.

Further, Trinidad and Tobago has ratified the United Nations Convention on the Rights of the Child, which contains several articles which cover non-discrimination, the best interests of the child and parental guidance, all areas relevant to a parenting policy.

3.2 **The national context**

As a result of seeking to fulfil the tenets of these various conventions a triangular relationship arises among parents, children and the State. Such a relationship is bound through various pieces of legislation. The State, through law, plays a role in defining the relationship between parents and children (Eekelar & Sarcevic, 1993). The various pieces of legislation determine the extent to which the State can intervene in the relationship between parent and child.

Trinidad and Tobago has demonstrated significant efforts to ensure that the rights of all citizens, including parents and children, are protected. However, parental rights may be set aside in the case of child rights violations. In Trinidad and Tobago, the rights and responsibilities of parents are clearly enunciated in the Children Act 2012 and several other major legislation pertinent to parents and their associated roles. These are summarised as follows:

**The Children Act of 2012 and Children’s Authority Act, 2000** provide detailed stipulations concerning the well-being and protection of all children in order to uphold children’s rights as outlined in the United Nations Convention on the Rights of the Child. This Act gives the State the Authority to intervene where the well-being of the child is compromised.

**Children’s Community Residences, Foster Care and Nurseries Act, 2000** serves to ensure that the rights of the child in care of the State are upheld and supports the family reintegration of such children. Further, the efficient provision of foster care through a streamlined service supports the vision of a family for every child.
The Family Law (Guardianship of Minors, Domicile and Maintenance) Act, 1981 (the Family Law Act) outlines the rights of parents relating to parental custody, child-rearing and welfare of children. Specifically, the mother and father have primary and equal rights to custody and upbringing of the child and are joint guardians. However, if parents are not able or willing to care for children and where the well-being of the child is compromised, then the State has authority to intervene.

The Maternity Protection Act provides certain privileges and protection for pregnant women in Trinidad and Tobago. These entitlements include: paid maternity leave, job retention after leave and pay for medical absences related to pregnancy. However, there are strict eligibility criteria for women to fulfil including: being continuously employed by the institution for at least one year, notice of absence no later than eight weeks before leave, doctor’s medical certificate with date of confinement and intention to return to work after her leave. According to the Act, a woman is permitted fourteen (14) weeks maternity leave. However, the Act explains that the woman is allowed a full month’s salary for one (1) month only while half salary is permitted for the other two (2) months.

Paternity Leave is not mandatory but male teachers are permitted to receive paternity leave. As stated in the Education Act, a “male teacher shall be eligible for paternity leave of four working days at or about the time his spouse gives birth”. Moreover, the eligibility criteria for paternity leave are: medical certificate stating date of delivery, registration of his spouse’s name at Tobago House of Assembly as the case may be and an application need to be submitted to the Permanent Secretary through the principal and school supervisor.

Other legislation that are also relevant to parenting in Trinidad and Tobago include:

- the Age of Majority Act (1973)
- the Births and Deaths Registration Act (1847)
- the Children’s Life Fund Act (2010)
- the Children and Young Persons (Harmful Publications) Act (1955)
- the Cohabitational Relationships Act (1998)
- the Corporal Punishment (Offenders over 18) Act (1953)
- the Emigration (Children) Act 1918
- the Hindu Marriage Act 1945
- the International Child Abduction Act 2008
- the Maintenance Orders (Facilities for Enforcement) Act (1988)
- the Marriage Act 1923
- the Married Persons Act 1976
- the Matrimonial Proceedings and Property Act 1972
- the Muslim Marriage and Divorce Act 1961
- the Notification of Birth Act 1916
- the Orisa Marriage Act 1999
• the Princess Elizabeth Home for Handicapped Children Association (Incorporation) Act 1953
• Public Health (Nursery School and Primary School Immunization) Act 1973
• the Registers of Births, Death and Marriages Act 1940
• the Sexual Offences Act, 1986
• the Status of Children Act, 1981
• the Widows’ and Orphans’ Pensions Act, 1934
• the Widows’ and Orphans’ Pensions Extension Act 1974
• the Young Offenders Detention Act 1926

3.3 Summary
Perusal of this body of legislation indicates the various legislative efforts made in support of parents fulfilling their roles, both as duty-bearers and rights-holders. This delicate balance between the rights of parents and the rights of the child can give rise to multiple tensions, particularly regarding parental rights and responsibilities and the power of the State to intervene in family life. The supportive stance articulated in the National Parenting Policy will serve to alleviate some of these tensions through the coordination of current parental support provisions and the introduction of additional provisions which are outlined in Chapters 4 and 5.

Services and programmes are important in supporting parenting roles and consequent child development. Parenting support services and programmes are delivered through Government Ministries, civil society organisations and the private sector. The Government of Trinidad and Tobago currently supports parents through the operations of various Ministries and the delivery of multiple programmes and services in the areas of health (including sexual and reproductive health), leisure, finance, education and social services, as follows:

- Parents as employees is the responsibility of the Ministry of Labour and Small Enterprise Development (MOLSED)
- Parents as custodians is the responsibility of Ministry of National Security (MNS)/Ministry of Social Development and Family Services (MSDFS)/Ministry of Health (MOH)/Ministry of education (MOE)
- Parents of children with medical needs is the responsibility of MOH
- Education support of children is the responsibility of MOE
- Protection of children is the responsibility MNS, MSDFS, MOH, MOE, Office of the Prime Minister, Gender and Child Affairs and Children’s Authority
The following paragraphs provide a synopsis of the current major Government programmes and services in support of parents within discreet service areas.

4.1 Health and maternity services

*Point of Care Testing (POCT)*: POCT has been initiated by The Ministry of Health (MOH). This service is defined as “testing at or near the site of Patient Care”. Specifically, this initiative brings testing instruments and results directly to the patient, as opposed to the patient having to go to an external Laboratory testing, thus making testing faster and easily accessible.

*The Extended Programme on Immunization*: Through this programme, the Ministry of Health offers free immunization services to all nationals of Trinidad and Tobago.

*Chronic Disease Assistance Programme*: Through this programme, persons are able to access free prescription drugs and pharmaceutical items.

*National Oncology Programme (NOP)*: all nationals of Trinidad and Tobago are provided with free cancer care and treatment. The NOP is multifaceted as it also offers education, awareness, early detection, screening, prevention, palliation and support.

*Mobile Clinics*: Mobile clinics are available to citizens living in rural areas who may be unable to access health clinics. Some of the services offered by these clinics include: testing, screening for such conditions as dietary disorders; home, school and community visits.

*Nutrition and Metabolism Division*: this Ministry of Health division provides services to educate and encourage nutritious food preparation and healthy eating habits. These services include: education and practical demonstrations of healthy local food preparation in health centres; food displays in relation to feeding all family members; nutritional advice to the public in relation to their own and their family’s health and preventative classes inclusive of wellness classes.

*Adolescent Mothers Programme*: The Child Welfare League of Trinidad & Tobago assists pregnant teens and teenage mothers through the provision of training courses which can improve their employability. The four Adolescent Mothers Centres offer: day-care, counselling, skills training, literacy training, academic courses, health and nutrition information, parenting courses and personal development training.

*National Health Service*: The Ministry of Health is currently undertaking the implementation of a National Health Service that will provide necessary health services to all citizens of Trinidad and Tobago. These services will be available at an accredited public or private healthcare institution convenient to patrons making healthcare more accessible and affordable for all persons, particularly parents who may find it difficult to obtain quality healthcare for their children.
4.2 Family planning

*Health and Family Life Education:* This social studies component is delivered through the MOE and focusses on four thematic areas, self and interpersonal relationships, sexuality and sexual health, eating and fitness and managing the environment.

*Population Programme Unit:* This programme provides sexual reproductive health services such as contraceptives, cervical cancer testing, pregnancy testing, referral services and family life counselling with the majority of these services being available in health centres and general hospitals.

*Programme for Adolescent Mothers (P.A.M):* The Division of Health, Wellness and Family Development (Tobago House of Assembly) have this programme to reducing the prevalence of teenage pregnancy in Tobago through facilitation of parenting awareness and education, life management techniques, skills training and continued academic study.

*Rapport:* The Ministry of Health offers this programme to empower youth to make informed decisions vis-a-vis safe sex, through awareness raising.

4.3 Childcare and early years provision

*Homework Centres:* The Carlsen Field Homework Centre was established in 2013 through the Ministry of Social Development and Family Services, as an aspect of the Poverty Reduction Programme. This after-school care and homework centre caters for a large proportion of children unsupervised after school.

*Interdisciplinary Child Development Centre (ICDC):* The ICDC, operating under the auspices of the MSDFS, provides:

- **Day care** services for babies aged one (1) to three (3) years
- **Educational** - ECCE Nursery - Provides ECCE stimulation for 3-5 year olds daily
- **Nutrition** - Provides meals inclusive of breakfast, lunch and snacks for children
- **Child development** - Provides a range of development services and early childhood stimulation for babies, toddlers and pre-schoolers
- **Parenting** - Provides a limited amount of workshop activities for parents as it related to their children’s development
- **Public/Community involvement & collaboration** - Facilitate wider public service involvement and community enfoldment, such as volunteerism, working with UWI, UTT and OJT personnel in caring for children

*Vacation Camp:* The Ministry of Sport and Youth Affairs hosts two vacation camps in the July/August vacation period: Camp Footprints for ages 3-11 and Camp VYBE for ages 12-17. These camps focus on developing patriotism, personal growth, positive behaviours, life skills, self-esteem and confidence building among children in a safe, affordable and leisurely environment.
4.4 Programmes in support of youth

**District Youth Offices:** Nine District Youth Offices operated by the Ministry of Sport and Youth Affairs (MSYA) function in youth development programme delivery throughout the country. The Youth Division within the MSYA co-ordinates these holistic youth development programmes. The programmes offered include: adolescent intervention programme, youth literacy and enhancement, youth leadership, positive vibes Carnival programme, safe sex practice workshop, youth health project, youth health Carnival parade, providing alternative activities for youth during carnival, innovative theatre workshop and school health intervention programme.

**Youth Training and Employment Partnership Programme (YTEPP):** The Ministry Education have initiated this programme in four locations and it is an intervention type programme focused on mitigating the prevalence of unemployment, particularly among young people.

4.5 Social services

**Social Welfare Division:** The Ministry of Social Development and Family Services is responsible for providing welfare services through the Social Welfare Division (SWD). There are ten locations nationwide offering these welfare services. One of the core functions of the SWD is “To provide assistance on behalf of children whose parents have died, deserted, or are ill, or imprisoned”. The SWD also offers grants such as the General Assistance Grant for those in need which includes: house repair, household items, medical equipment, dietary grant, clothing grant, education grant, special child grant, school supplies, urgent or temporary assistance.

**Social Welfare Unit:** The Division of Health and Social Services (Tobago House of Assembly) allocates financial assistance to elderly, disabled and disadvantaged people. They are given services inclusive of: free bus pass, emergency cases fund, public assistance grant, burial assistance, disability assistance grant, senior citizen grant, adoption services.

**Children and Family Services Unit:** This unit maintains the same function as the social welfare unit and offers more family focused services such as: counselling; linking and networking with government, non-government and international organizations; visits to offices, homes, schools, field visits; housing assistance; burial assistance; children and family support; money management and emergency relief support. These services are a comprehensive package of family support in Tobago.

4.6 Employment

**Women in Harmony Programme:** The Office of the Prime Minister, Gender Affairs Unit delivers the Women in Harmony Programme to address the issue of unemployment among women, particularly female-headed households (matrifocal) where the women possess little to no skills or income. This programme offers courses on Elderly Care, Agriculture/Landscaping and Life Skills.
Women’s Programme: The Ministry of Local Government provides training in fifteen locations nationwide for women who are employed in such trades as: crafts, furnishing, cleaning, painting, community work, geriatric care and beautification of surroundings.

Non-traditional Skills Training Programme for Women: This programme, delivered through the Ministry of Community Development Culture and the Arts offers specialized technical and vocational education and training to unskilled women of lower socio economic status.

National Employment Services: The Ministry of Labour and Small and Micro Enterprise Development assists with the creation of employment opportunities, sustainable jobs and the reduction of poverty.

4.7 Help for low income families
Poverty Reduction Programme: The Ministry of Social Development and Family Services seeks to eradicate poverty through strengthening and improving poverty reduction services. One of the key components of the programme is “Delivering key poverty eradication projects that would address poverty and vulnerability sustainability at individual and community levels. These projects include the Sowing and Empowerment through Entrepreneurial Development (SEED), The Micro Enterprise Loan Facility (MEL), Telecenters and the Regional Micro Project Fund (RMPF)”.

Targeted Conditional Cash Transfer Programme (TCCTP): This is an initiative of the Ministry of Social Development and Family Services which provides short-term food aid together with social protection through the promotion of nutrition and food security to vulnerable households.

4.8 Education
Primary school education: The Ministry of Education provides free universal primary school education.


Government Assistance for Tuition Expenses (GATE): The Government, through the Ministry of Education, provides financial assistance for students at the tertiary level.

4.9 Leisure activities and sports
National Youth Services Directory 2014-2014: Office of the Prime Minister (Gender and Child Affairs) has created a national directory which provides information on various organizations offering youth services within the nation such as sport, recreation, entertainment, health, culture, faith, fitness, employment training, empowerment, vocational institutions, to name a few. The directory provides the name, mission, contact information, programmes and age
requirements for each youth service provider and therefore facilitates access to essential youth services.

*Sport School Training Programme:* This Ministry of Sport’s camp initiative is for talented athletes who are given specialized training to hone their skills and personal development.

*Youth Development Centres:* The Division of Education, Innovation and Energy (Tobago House of Assembly) has established nine youth development centres for young people to access the internet, skills training and a secure place for leisure activities.

*Community Programmes:* The Ministry of Sport and Youth Affairs has implemented the Total Participation in Sport principles executed through the district Sport Development Officers (SDOs).

4.10 Family friendly spaces

*National Family Services Division:* This Ministry of Social Development and Family Services division operates in twelve locations offering families services to affect effective functioning via developmental, preventive and remedial programmes and services. These services involve: advice, advocacy, consultation counselling, mediation, placement, networking, collaboration and rehabilitation.

*National Parenting Programme:* Delivered through the National Family Services Division the National Parenting Programme provides support and services for parenting through the core areas of education and support which includes workshops for parents, media dissemination of messages and the sensitization of stakeholders concerning parenting issues. Support includes counselling referrals and access to support groups.

*Respect Me, Respect You:* This campaign aims to reduce peer violence throughout the country. Through the campaign, workshops will be conducted at the school and community level with children to determine their views and experiences with bullying and develop Anti-Bullying Guidelines for future campaigns. Messages will be developed for peers by peers using creative arts as a medium, such as poetry, spoken word, dance and drama.

4.11 Transport

Public transportation options are available throughout the country. These include: the Public Transportation Service Corporation (PTSC), Trinidad and Tobago Inter-Island Ferry Service and Water Taxi services.

4.12 Summary

The Government seeks to uphold the rights of parents and children through the provision of extensive services and programmes delivered through multiple avenues including:
- Provision of child care
- Attending to child health and development needs
- Financial support for lower income families
- Education
- Housing needs, including repairs for lower income families
- Building positive intra-family relationships
- Skills training
- Safe non-judgmental spaces to voice concerns

The consideration of the current provision of parenting support, in light of the changing family forms, and associated explanations outlined in Chapter 1 and the parenting needs identified in Chapter 2, provide insights into where current parenting support can be strengthened in addition to the opportunity to introduce additional services, particularly those in support of vulnerable parents. The following chapter will outline current services that would be strengthened and additional initiatives which would be implemented to continue to support positive parenting practices in a sustainable and non-punitive manner.

5. Expansion of Parenting Support Service Provision

With consideration of the trends identified in Chapter’s 1 and 2, the GORTT proposes to expand current parenting support services and introduce additional initiatives to support positive parenting with equity. Further, the National Parenting Policy will serve to complement the suite of legislation outlined in Chapter 3 and seeks to add to and expand on the support services outlined in Chapter 4.

Ideally, all parent support services should be respectful, effective and accessible. Moreover, such services should recognize the strengths that parents possess and can be built upon in service delivery; parents should be considered part of achieving the preferred outcome as opposed to being perceived as part of the problem.

Current parenting support services are delivered through multiple service avenues including Government, civil society and the private sector and as such these sectors will continue to deliver both universal and targeted parenting support provisions.

The trends of increased teen parenthood associated single parenthood, greater paternal involvement in the day-to-day care of children, continued harsh parenting practices in addition to a greater understanding of the role grandparents play in the parenting of grandchildren, the needs of disabled parents and disabled children requires expansion in parental support delivered through a coordinated multi-sectoral approach. This requires that, going forward, services are responsive and more inclusive of fathers, parents with disabilities, children with
disabilities, teenage parents, single parents and other parenting family members, such as grandparents.

The following sections provide an overview of the expanded parental support service and programme.

5.1 Provision of child care
- Teen mothers returning to education: This group of potentially vulnerable mothers, should be supported in their efforts to gain further qualifications. To this end, subsidized child care at training facilities during classes/lectures will be expanded.
- Father-friendly child care services: Traditionally, services for parents have generally operated under the gendered assumption that parents equates to mothers. However, the contemporary reality is shifting from this assumption. Accordingly, all Government registered child care providers will be trained in providing father friendly services.
- Unemployed parents returning to educational and vocational studies: Subsidized child care will be provided for these parents as an incentive to further their qualifications and self-development.
- Nursery regulations: These regulations will serve to provide assurance to parents that their children will be attending government-approved institutions providing a safe, healthy environment for positive child development.

5.2 Attending to child health and development needs
- Consultation with parents with disabilities and parents of children with disabilities: These consultations will serve as an initial stage in the improvement of multiple services to these two potentially vulnerable groups of parents.
- Extended support for parents of children with disabilities: In some instances the health needs of children with disabilities will require longer term engagement with health services. This engagement can take a toll on parents and therefore additional support services for parents of children with disabilities will be offered in tandem with health services being offered and delivered to children with disabilities.
- Baby box initiative\(^5\): A starter pack will be given to low or no income expectant mothers who have accessed medical care prior to their fourth month of pregnancy. The Means Test of the Ministry of Social Development and Family Services will be the measure utilized to determine eligibility.
- Father information pack: Fathers are now able to attend child birth in public hospitals, and the Government will also introduce a father’s information pack for all new fathers.
- Parental leave: As a result of rising female employment rates, the time for child care responsibilities has become more limited. Parental leave will serve to support working

\(^5\) For seventy-five (75) years, Finland’s expectant mothers have been given a box by the state which serves as a starter kit comprised of clothes, including bodysuits and outdoor wear, sheets, nappies, bathing products for the baby, a sleeping bag, a small mattress and toys. Thus the box is designed to give all parents and their children a basic start. With the mattress in the bottom, the box becomes a baby’s first bed. It should be noted that Finland has one of the lowest infant mortality rates in the world.
parents in the provision of paid leave for the purposes of child care or making arrangements for the child’s welfare.

5.3 Education

- Strengthened age appropriate parenting education in HFLE: As parenting has been associated predominantly with mothers, the sensitization on fathers’ unique and essential role in childcare and development will be introduced and reinforced through a revised HFLE curriculum.

- Strengthened age appropriate sex and sexuality education (HFLE): With the increasing trend in teen pregnancy, the prevention of this phenomenon is a priority. Age appropriate awareness of sex and sexuality is an essential step in pregnancy reduction which can start in schools.

- Provision for the continued education of teen mothers: In opposition to the gendered exclusion of teen mothers, the inclusion of teen mothers in education will serve to recognize that support and continued education is necessary for this particularly vulnerable group of mothers.

5.4 Building positive intra-family relationships

- Expanded relationship counselling services: Solid parental relationships bode well for the children in their care. Too often counselling is introduced in the latter stages of relationship decline. The gendered perceptions of counselling often inhibit fathers from attending relationship counselling, despite evident relationship fractures. As such, the promotion and expansion of access to father-friendly counselling service will provide avenues in which potential relationship breakdowns can be addressed at the early stages.

- Partnership to be forged between Government and University of the West Indies Family Development and Children’s Research Centre in the development of parental support initiatives.

- Flexible working hours: Some organisations already operate flexible working hours, though this may not be articulated in company policy. However, the introduction of flexible working hours has numerous potential benefits for parents and their families, as well as for the employers themselves. Parents are able to attend to child care needs such as the school run, a child clinic session or parent teacher consultations without having to be absent from work for the whole day, whilst the company is able to retain valued labour and offer a more favourable work-life balance to current and potential employees.

- Father support groups: With the increasing involvement of fathers in their child’s lives, it is important to recognize that fathers may experience unique needs with regard to their parenting roles. The expansion of culturally sensitive father support groups will serve to provide safe non-judgmental spaces in which fathers can express their concerns regarding their parenting roles and through this, sharing experience access the relevant support services.
- National parenting programme expansion: The initial pilot of the National Parenting Programme to develop parent self-efficacy will be expanded, offering the opportunity for all parents to attend the programme and establish parental support groups within their communities. Positive behavioural management approaches will be demonstrated through this programme as part of a multi-agency approach to reduce harsh parenting practices.

- Training in relationship counselling for healthcare staff who work with parents’ pre and post birth: Healthcare staff work closely with parents, particularly mothers, just prior to and just after the birth of a baby. All relevant healthcare staff will receive relationship counselling training to equip them to support mothers-to-be and new mothers and fathers in the development and maintenance of healthy relationships.

- Training in positive behaviour management strategies for parents, to be delivered to trainee pediatricians. Harsh parenting practices including corporal punishment is of limited effectiveness and has potentially harmful unintended effects. Pediatricians’ advice is frequently sought in regard to child discipline and those versed in authoritative parenting approaches could advice accordingly, thereby reducing the practice of harsh parenting practices.

- Public awareness campaign: In its efforts to reduce harsh parenting practices, including the use of corporal punishment, a public awareness campaign will be launched with the requisite parallel law reforms.

- Social Services Directory: This directory will provide a comprehensive listing of social services delivered by the Government, civil society and the private sector.

5.5 Development of a Parenthood Code

- This Code will clarify the obligations and rights of being a parent in Trinidad and Tobago. Ideally, avoiding an over prescriptive and judgmental approach, the Code will:
  - Outline the State’s expectations of parents
  - Provide clarity on any legal differences between genetic and social parenting
  - Provide clarity on legal status between married parents, cohabiting parents and visiting unions in relation to each other and their children.
  - Influence positive attitudes towards parenting through recognition of the valuable role they play in societal development
  - Clearly articulate the rights of parents in relation to support from the state
  - Clearly articulate the obligations and entitlements of the parents themselves.

In the formulation of such a code, a rigorous consultation will be required. To this end, the Government would commence consultations with the aim of producing a widely acceptable code for parenthood.
5.6 Summary
The expansion of parent support services and programmes will encompass the Government, civil society and the private sector. Service expansion will be facilitated through the following areas:

- Provision of child care
- Attending to child health and development needs
- Universal education
- Housing needs, including repairs for lower income families
- Building positive intra-family relationships
- Skills training
- Safe non-judgmental spaces for parents to voice concerns

The following chapter presents an implementation mechanism for the National Parenting Policy that will address the practicalities of expansion of the parenting services and programmes.

6. Policy Implementation Mechanisms

The delivery of current parenting support services occur through multiple agencies ranging from Government Ministries through to civil society organizations and the private sector. The proposed expansion of parenting support initiatives will continue through a range of agencies and organisations. Parenting services, as a result of their eclectic nature are accessed in a variety of ways. Some parenting support, including medical and educational services, is accessed as a result of child development needs and these services are often accessed directly, and this will continue. Other parenting services are accessed through referral, for example birth registration through TTconnect. However, for certain parenting support services, such as relationship counselling, parents will need to be informed about the existence and location of the services.

6.1 National Family Services Division Service Centres
Service Centres will be established in every district to facilitate increasing awareness of the availability of parent support services and access to such services. If a parenting support service cannot be accessed directly at a Service Centre, an established referral system will allow parents’ access to the service most appropriate to their identified needs. To promote national awareness of parenting support services and the function of the Service Centres, a Social Services Directory will be published and updated on an annual basis. Copies of the directory will be made available to the general public through Social Sector Ministries, TTConnect and the Service Centres.
Some parenting support services will be accessed directly through the Centres. However, the majority of parenting support services will be accessed through an onward referral process. Accordingly, the Service Centre will provide parents with seamless service access through offering the following:

- Advice on the appropriate services required for specific parents support needs
- Advice on where the service can be accessed
- Advice on when the service can be accessed
- Advice on how the parent can access the service
- Supporting the parent(s) in accessing the appropriate service

6.2 Multi-Sectoral Steering Committee
The implementation of the National Parenting Policy will be driven and monitored by a multi-sectoral steering committee. This Committee will include representations from relevant Government Ministries, Civil Society Organisations, UNFPA, private sector and parents. Utilising the objectives of the National Parenting Policy, the Committee will identify indicators of progress of the implementation of the parenting policy, regularly monitor implementation and publish annual progress reports.

6.3 Monitoring and Evaluation
Development occurs through behaviour change, either between persons or between persons and their environment. A monitoring and evaluation approach that is sensitive to behaviour change, such as a developmental evaluation approach (Patten, 2002) would be required to assess the social impacts of National Parenting Policy implementation. The Parenting Centres will be ideally positioned to support this approach, given their ability to gather local data related to demand for and access to parent support service, among other critical data. Based on such data, a clearer perspective of local parenting needs and the requisite support services will emerge, and as a consequence the appropriate development and targeting of services can be affected to ensure equity in parenting support service delivery.

6.4 Summary
Multiple avenues of parental support are currently available through various Government, CSOs and private sector services and programmes. Nevertheless, the expansion of Social Service Centres will support the cohesive delivery of many parenting support services, the development of new parent support initiatives and significantly minimise the difficulties encountered in accessing such services. Ultimately, implementation of the National Parenting Policy will contribute to the development of equitably-delivered, needs-sensitive positive parenting support services and programmes that can be easily accessed, and which will serve
to enhance the development of parents and children, so necessary for the social cohesion and continued development of the nation.

Acknowledgements

The National Parenting Policy is the first of its kind in Trinidad and Tobago. The Ministry of Social Development and Family Services wishes to acknowledge the support and valuable input of the following entities in the development of this National Parenting Policy: Government of Jamaica, UNFPA, FDRC UWI, and all agencies, organization and individuals who participated in the various consultations.

References


Central Statistics Office (CSO) 2000 *Population and Housing Census* (2000), Trinidad and Tobago

Central Statistics Office (CSO) 2011 *Population and Housing Census* (2011), Ministry of Planning and the Economy, Trinidad and Tobago


Department for Children, Schools and Families (2010) *Support for All* Printed in the UK for the Stationery Office Limited on behalf of the Controller of Her Majesty’s Stationery Office


Logie, C., & Roopnarine, J. L. (2015). *Childrearing Practices in the Caribbean: Lessons and Implications from a National Assessment in Trinidad and Tobago.* Family Development Centre (FDC) University of the west Indies, St Augustine 2015


MSTTE (2010) Ministry of Science Technology and Tertiary Education


