

Evaluation of Children's Centres in England (ECCE)

Strand 2: Baseline Survey of Families Using Children's Centres in the Most Disadvantaged Areas

Research Brief

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Introduction

This report is the third output from the Evaluation of Children's Centres in England (ECCE), a six year study commissioned by the Department for Education and undertaken by NatCen Social Research, the University of Oxford and Frontier Economics. The aim of ECCE is to provide an indepth understanding of children's centre services, including their effectiveness in relation to different management and delivery approaches and their cost.

Background

The Department for Education describes children's centres' core purpose as:

Improving outcomes for young children and their families, with a particular focus on the most disadvantaged families, in order to reduce inequalities in:

child development and school readiness;

supported by improved:

- parenting aspirations, self esteem and parenting skills;
- child and family health and life chances (DfE 2012).

The Evaluation of Children's Centres in England is a large scale, six year study that looks at Sure Start Children's Centres (SSCCs) in the most disadvantaged areas of England. These are centres that were set up in the first two phases of the programme.

The evaluation will provide a very detailed picture of children's centre services. This includes how effective they are when they use different approaches in their management and when delivering services and activities for parents and children. It also looks at the cost of delivering different types of services.

The findings presented here are from the first survey of a longitudinal study of families using children's centres. These families had to be registered with a children's centre. The key aims of this strand are to:

- provide estimates of the level of take-up of various children and family services among families with different socio-economic characteristics;
- monitor changes in patterns of use over time;
- collect data on different aspects of child development and family functioning in order to enable an analysis of impact on child outcomes from using different types services.
- This report presents findings about families who were using children's centres when their child was 9-18 months of age.

Methodology

The parents were users of children's centres that responded to an initial survey of centre managers. The stages in the process of sampling parents were as follows:

- A sample of 850 centres was selected for the centre managers' survey from the list of those eligible and 509 responded.
- A sub-sample of 300 centres was then selected from the responding sample and invited to recruit their users for the evaluation.
- A core sub-sample of 120 centres, plus an extra sub-sample of eight centres, were then selected from the centres that successfully recruited users for the evaluation.
- A total of 10,187 parents were selected from these 128 centres and invited to take part in the longitudinal survey of users. This resulted in 5,717 interviews.

Participant families were interviewed in their homes by fieldworkers using computer assisted personal interview (CAPI) software between January and April 2012. Sensitive questions were administered using a self-completion method ensuring responses were unknown to the interviewer.

Findings

Use of children's centres

Who uses children's centres?

- Mothers were far more likely to use family services than fathers. The services fathers were particularly likely to attend were:
 - ante-natal classes with mothers
 - basic IT or jobs skills courses
 - employment support
 - peer support groups (such as a Dads' club)
- In 7% of families someone other than the parents took the 9-18 month old child to the named children's centre (often this was another family member such as a grandparent or a childminder).

What services do parents use?

- The activities and services that families most often used at their named children's centre were:
 - 'stay and play' or play and learn groups (47%)
 - midwife or health visitor drop in sessions or clinics (47%)
 - organised sport or exercise for babies or children (19%).
- This high level of take-up reflects the high proportion of centres who offer these services.
- Some services were only taken up by a very small proportion of families (for example, English as a second language classes, speech and language therapy). But this can largely be explained by the low number of families in the survey that needed these.

• 36% of families reported that they had at some point received a home visit from someone at the children's centre.

Childcare

41% of families used some kind of formal childcare for their 0-5 year old children, but only 4% used formal childcare that was provided by their named children's centre. This figure is likely to rise when the selected children are older: a large proportion of parents prefer not to use nursery provision at 9-18 months and free part-time childcare does not begin in most areas until children are three.

Patterns of use

- Typically families started using their named children's centre at some point during the two years before they were interviewed.
- 46% of families only used one or two services from the named children's centre. However,
 24% used three to five of the named children's centre services and 5% used six or more.
- The way in which families used their children's centre varied enormously in terms of:
 - the number of services they used and the activities they attended
 - the number of months over which they used different services and activities
 - the frequency with which they used them
- In total, 15% of families said that they had not used any activities or services at the named children's centre recently. This was usually because:
 - Preference: they preferred to use another children's centre
 - Distance: it was too far away or hard to get to
 - Time constraints: they had no time or were too busy
 - Awareness: they had not been aware that the children's centre existed
 - Lack of need: they did not need to use any family services or activities
- An exploratory analysis identified two broad groups based on the types of services parents were using and how much they were using them:
 - limited users of family services (19%) these families tended to only use health related services.
 - heavy users (38%) these families used lots of the centre's services and activities, especially activities for parents and toddlers.
 - The remaining 43% of respondents showed no clear pattern in how they used the centres.

Services used by parents elsewhere

• The types of services that families often used but were run by organisations that were not linked to children's centres were:

- ante-natal classes (21%)
- midwife/health visitor drop in sessions or clinics (25%)
- benefits and tax credit advice (11%)
- organised sport or exercise for babies or children (10%).
- Most children's centres offer these services and therefore using these services elsewhere seems to be down to parents' preference or not realising it was offered by the children's centre, rather than the children's centre not providing it.

Satisfaction with children's centres

- Generally satisfaction with the services and activities from the named children's centre was very high. Just under half of parents (49%) said that they were 'very satisfied' and a further 29% said that they were 'fairly satisfied'.
- Families who used activities or services at the named children's centre typically found them very helpful. For each of the 22 service categories the majority of users considered them to be 'very helpful' and the proportion of users who rated them as 'very' or 'fairly helpful' ranged from 88% to 100%.

Families' circumstances

Mental Health

- Some parents were notably more likely to have poor mental health than others. Those more likely to have poor mental health included:
 - parents whose household income was under £10,000 (28% compared with 13% of those whose income was £40,000 or more);
 - parents from households where no one was in work (28% compared with 16% of parents from working households); and
 - lone parents (27% compared with 16% of those in two-parent households)

Physical health

11% of mothers and 8% of fathers had a long-standing illness or disability.

Drinking, smoking and substance abuse

- Parents' responses show that on the whole their drinking was moderate.
 - 33% said that they never drank alcohol
 - 24% said that they drank alcohol less than once a month
 - 25% said that they drank once a week or more often
- The majority of parents were non-smokers (80%) and only 16% smoked every day.

- A notable proportion of mothers had smoked during pregnancy (15%).
- The majority of mothers and fathers (81% and 77% respectively) had never tried drugs.
- Just 1% of parents said that they currently use drugs. Three per cent said that they had used them quite often in the past but do not use them now.

Food preparation and diet

Diet is an important aspect of physical health and so parents were asked about the food they ate and how often they prepared it from scratch or ate ready made/convenience foods.

- Parents generally had positive attitudes toward the time and expense of preparing meals from fresh ingredients. However, 11% felt that preparing meals from fresh ingredients took too long and 15% felt that it was too expensive.
- Families with the lowest household income (less than £10,000) were most likely to express the view that it takes too long (16%) or that it is too expensive (23%) to prepare meals from fresh ingredients.
- 79% of parents said they ate fresh meals every day or most days. Ready meals were consumed every day or most days by just 3% of respondents. Over two-thirds of respondents (70%) said that they ate ready meals less often than once a week or never.

Birth weight, breastfeeding, early immunisations

- Only 9% of children had a low birth weight (less than 2.5kg) but 35% were born before full term (before 37 weeks gestation).
- 77% of respondents said that they had tried to breastfeed their 9-18 month old child.
- 45% of children were breastfed beyond three months old, and 32% were breastfed beyond six months.
- Almost all children (96%) had had their recommended immunisations at 2, 3 and 4 months old.

Long-standing health problems

- Two-thirds of children had no long-standing health problems (67%).
- Where children did have long-standing health problems, the most common were skin problems and breathing problems. For 66% of children with long-standing health problems their issues were severe enough to have involved visits to the hospital or regular visits to the GP.

Accidents and injuries

• The majority of children had not had an accident or injury that was serious enough to require a trip to Accident and Emergency at a hospital (72%). However, 19% of children had been to A&E once and 9% had been twice or more.

Development

• In terms of children's development (for example, learning new skills such as crawling, walking and talking), 9% of parents felt that their child was developing less quickly than other children their own age, and 9% had some concerns regarding their child's development.

Diet

- The majority of children ate fresh fruit, or vegetables and salad every day (71% and 68% respectively).
- Half of parents (50%) said that they took their 9-18 month old child out of the house at least once a day.

Activities and Home Learning Environment (HLE)

Home learning environment is what happens at home to encourage children's learning. We found that:

- The most frequent home learning activity was parents drawing their child's attention to the names of things (90% did this with their 9-18 month old at least once a day)
- 82% sang songs or nursery rhymes with their child at least once a day
- 65% of parents read to their child at least once a day
- 62% used blocks or shape sorting toys with their child at least once a day
- 58% talked about or tried to teach their child the names of colours and shapes at least once a day
- The least common activity for parents to do was to engage in messy play. Only 8% of parents did this at least once a day and 40% had not yet given their child a chance to play in a messy way.
- Families with higher incomes and where mothers had higher levels of education had higher HLE scores than lone parent families.
- Families where at least one parent was in paid employment had higher HLE scores than those where parents did not work.
- Watching a lot of TV can affect child development. Fifty two per cent of 9-18 month old children in the study watched fewer than 30 minutes of TV a day with their parents and 76% watched fewer than 30 minutes of TV on their own. Only 5% watched more than three hours of TV a day with their parents and only 2% watched more than three hours of TV on their own.

Calm versus chaotic homes

- A relatively small proportion of parents believed their home environment was chaotic:
 - 11% thought their home was really disorganised
 - 12% agreed that 'one could not hear themselves think' in their home
 - 8% could not describe their home atmosphere as calm
 - 3% said that they did not have a regular routine at home
- Families with higher incomes, those where mothers had higher educational attainment, those with two parents and where at least one parent worked tended to have slightly less chaotic and more organised homes than those in more disadvantaged circumstances.

Major life changes

 29% of parents said that major life changes had happened in their family since the selected child was born. A death of a family member was mentioned most frequently (17%), with other life events (such as unemployment, divorce or imprisonment of a family member) being mentioned by fewer families (2-9%).

Relationships

- 19% of households were lone parent households. In 77% of these households respondents said that their child had contact with their other natural parent. However, only a quarter (25%) of children in lone parent households saw their non-resident parent every day.
- For couples, most were satisfied with their relationship with their partner (94%), and levels of criticism of the other partner appeared to be relatively low.¹
- Only 2% of respondents reported that their partner was ever violent towards them.

Involved Dads

- Fathers who lived with their children were very involved with playing with their child 77% did so every day. However, they were far less likely to be involved in caring activities. Only 17 22% of fathers looked after their child on their own, dressed their child, or got them ready for bed every day.
- There were no statistically significant associations between family socio-demographic characteristics and the degree of father's involvement in child rearing.

¹ Questions about marital relationships, father involvement in child rearing and parenting stress were asked in a self-completion section of the questionnaire (on a laptop) due to their sensitivity.

Stress

 More disadvantaged families experienced higher levels of stress than those with more advantages. These included parental distress, parent-child dysfunctional interaction, and difficult child – parent relationships.

Parenting style, family functioning and family characteristics

- Exploratory analysis focussing on two-parent families showed that there were two broad groups of households based on different patterns of parenting and family functioning:
 - More favourable parenting and family functioning (39%)
 - Less favourable parenting and family functioning (61%).
- These two groups of households differed significantly from one another on several measures of parenting and family functioning including:
 - Home Learning Environment
 - Parenting Stress Index
 - the quality of a respondent's relationship with their partner
 - the extent of the father's involvement in child rearing
 - the level of organisation within the home
- Households with lower household income were slightly more likely to be characterised by less favourable parenting and family functioning. There were no statistically significant differences between these two groups with regard to households' working status, mother's educational qualifications and mother's martial status.



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This research report was commissioned before the new UK Government took office on 11 May 2010. As a result the content may not reflect current Government policy and may make reference to the Department for Children, Schools and Families (DCSF) which has now been replaced by the Department for Education (DFE).

The views expressed in this report are the authors' and do not necessarily reflect those of the Department for Education.

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