

APPENDIX A

The Home Learning Environment and the Child A collaborative study between Barnet PCT and UCL

Preliminary Report

1. Introduction/Purpose of Report

This report is an outline of the preliminary findings of ongoing research being undertaken to examine the relationship between poverty and cognitive and educational outcomes, through an understanding of the provision of a home learning environment within households in Barnet. This research was commissioned by Barnet PCT with a view to informing interventions to improve parenting and the Home Learning Environment in poor households in Barnet.

After a brief introduction to the context of the research, we describe the methodology and summarise the findings to date. This report is therefore based on the first ten interviews conducted. Based on these early findings tentative conclusions will be drawn, and recommendations made.

2. Background

2.1 Poverty and the Home Learning Environment

The importance of the socio-economic status of the household as a determinant of educational outcome has been well-researched. An influential study by Feinstein (2003) showed that two year-olds with high cognitive ability in the lowest socioeconomic groups, are easily overtaken in ranking of cognitive ability by children with low cognitive ability in the highest socioeconomic group by the age of five, or when they start school (Feinstein 2003). A number of factors have been shown to explain this. These include parental education levels, socioeconomic status and the school environment. But the most consistently influential has been found to be the home learning environment (Siraj-Blatchford et al 2007).

The home learning environment is defined as measures taken in the home to encourage children's learning. These include: reading to the child, taking the child to the library, teaching nursery rhymes and songs and encouraging learning through play. To provide a good home learning environment costs nothing and is clearly within the financial means of even the poorest families. However, there is considerable evidence that in many resource-poor households the home learning environment is weak, and this is thought to explain poor educational outcomes. The reasons for the barriers to the provision of a good home learning environment in such households are not clear. The aim of this research therefore is to examine the possible barriers to the provision of an adequate home learning environment in poor households through in-depth interviews with parents.

One of the challenges of research in this area centres around definitions of poverty. The World Bank bases its definition of poverty on having sufficient income to meet basic needs. The minimum level is called the "poverty line" and every country (and even region within country) uses lines which are appropriate to its level of development, societal norms and values. (World Bank Organisation 2012). In most developed countries poverty is defined in relative terms, calculated on the individual or household income relative to the national average. In the UK the official definition of poverty is any family living on less than 60 per cent of the median income.

There is a large literature examining the impact of poverty on children's morbidity, mortality, emotional development, as well as their cognitive development and educational attainment. This literature suggests that in general 'poor families' "are more likely to be headed by a parent who is single, has low educational attainment, is unemployed, has low earning potential, and is young" (Brooks-Gunn and Duncan 1997:56). Much of the literature attempts to examine 'pathways' by which poverty acts on the child. One such pathway is identified as the 'home environment' and the literature around this suggests that as income increases, household resources such as learning materials and toys also increase, whilst parental practices, such as discipline, and the quality and warmth of parent-child interactions improve (Brooks-Gunn and Duncan 1997:62).

Another term now more commonly used in the context of deprivation is 'social exclusion.' This has been defined as "what can happen when individuals or areas suffer from a combination of linked problems such as unemployment, poor skills, low incomes, poor housing, high crime environments, bad health and family breakdown" The term 'social exclusion' refers to the alienation of individuals or groups of individuals from society. It has been proposed that social exclusion has more influence on childhood outcomes than poverty *per se*. (Social Exclusion Unit 1997:1)

2.2 Barnet

Barnet has relatively low levels of deprivation compared with other London boroughs: it has the 26th highest level of child poverty in London (out of the 32 boroughs in the capital). Despite this it is estimated that over 18,000 children in Barnet are living in poverty, reflecting sharp inequalities in the borough, with pockets of concentrated disadvantage in some areas. In particular, problems of disadvantage in housing and crime are drivers of local deprivation. As elsewhere across the UK children in these disadvantaged households are less likely to achieve basic educational qualifications and are more likely to experience a range of health problems both in childhood and in later life. Addressing these issues of disadvantage would not only improve outcomes in the children themselves but would benefit the whole population of Barnet.

3. Methodology

This is a qualitative study involving face-to-face interviews, ethnographic observation and focus groups. The latter have yet to be conducted. We opted to focus on the Home Learning Environments of children aged between two and five, since research has shown this is a formative period for a child's later cognitive and academic achievement. For the interview and ethnographic observation components, it was decided that 30 carers should be interviewed and observed. It was felt that 30 would give access to a fairly wide variety of carers, living in various degrees of poverty and social exclusion, while allowing for sufficiently in-depth interviewing and ethnographic observation to take place within the timeframe. We intended to interview individuals who were on benefits, single parents, teenage parents, recent immigrants, drug addicts, alcoholics, individuals with mental illness, physical illness and disability, low income households, and individuals who were experiencing or had experienced domestic violence.

Ethical approval for the project was obtained from the UCL Ethics Committee. All participants underwent an informed consent process. Anonymity of all collected data was assured.

3.1 Sampling

Up to now we have used snowballing techniques to identify possible participants. Snowball sampling is a well-established method in qualitative research and it relies on referrals from initial subjects to generate additional subjects. One of the researchers has family members living in Barnet, one of whom is a single mother of two small boys living on benefits in a council flat. She was a good initial contact as she fit the criteria for research participants and gave researchers access through personal introduction to other potential research participants living in Barnet. These other research participants were contacted, interviewed, and asked to introduce further potential research participants. While the snowballing method has proved productive in identifying appropriate informants, we have reached saturation using this method (that is we are not acquiring new information). This together with the fact that we have not identified the most vulnerable households in Barnet, means we will alter our sampling methods in the next phase.

3.2 Interviews

Potential interviewees were first approached through a phone call by the researcher. She explained the purpose and conduct of the research. If the respondent agreed to participate the researcher made two visits to the home. At the first visit informed consent was obtained. The interview took place across the two visits in two parts. The first was designed to explore the social and economic background of the participant and the second of which was designed to explore more deeply attitudes towards parenting and the home learning environment. The first interview focused on basic socio-demographic information such as age, religion, ethnicity, marital status, number of children, as well as indicators of social exclusion such as education, employment status, relative income, housing status, health status (including mental health), misuse of drugs and alcohol, and family makeup.

The five questions in the second interview were designed to more deeply explore the participants' attitudes towards and beliefs around parenting and education within the home. Parents were asked about aspirations they have for their children, ideas about what is and what isn't a good parent, responses to state management and control of parenting, educational activities which take place within the home, and the participants own ideas about what may prevent parents from providing educational activities within the home. Asking these questions across a variety of socioeconomic backgrounds allowed for a comparison of parenting beliefs and practices between these households.

All interviews were audio-taped with the specific consent of the respondents. Notes were made on the ethnographic components.

3.3 Participant observation

The participants were asked if the researcher could observe a routine in the child's day. It was hoped that the researcher could watch a bedtime routine so, for example, activities such as bedtime stories could be observed. However, for some participants this was felt to be too late and disruptive, and so other routines such as meal times and homework were observed.

Observation included watching interactions between carers and children, examples of education and learning, as well as discipline, communication and structure. Of particular interest was the way in which the child was involved in the activity of the carer. Observation also included the

wider home environment and examples of books, toys, games, drawing, painting, extracurricular activities, and other examples of the provision of educational opportunities within the home.

3.4 Transcription and analysis

Interviews were transcribed and themes will be identified using the technique of thematic analysis. Formal analysis will be conducted when all interviews and focus groups are complete.

4. Summary of findings

4.1 Overview of research participants

Results from the first nine interviews, which have been fully transcribed, are presented here. The small number is clearly a major limitation; when the rest of the interviews are complete and the focus groups are conducted the results will be more robust.

Research participants came from a wide variety of social and economic backgrounds. This section examines the possible relationship between social and economic background and attitudes to and beliefs around a child's upbringing and education, and specifically the provision of a home learning environment. This will of course be explained when interviews are complete.

Of the research participants interviewed, all were female, with the exception of a couple who were interviewed together. Male partners/fathers were often around and added to the interview, but were not the principal respondents. The age of research participants ranged between seventeen and forty two, with the average age being thirty. Relationship status varied with participants being single, in a relationship, cohabiting, and married or separated. There was also a variety of ethnic backgrounds. Research participants identified themselves as being English, French, Filipino, Polish, Ukrainian, Indonesian, and New Zealander, and, of those who weren't English, as either immigrants or second generation immigrants. A wide variety of religious backgrounds were also represented with participants identifying themselves as Catholic, Christian, Muslim, Jewish, or Atheist, with varying levels of practice and faith. Of those children born to immigrants and second generation immigrants, many were bilingual, speaking Polish, Bahasa, Russian, and some French. However, English was usually the dominant language spoken at home.

The economic and work background of participants was equally variable with several families depending solely on benefits, but other families living on high incomes with professional jobs. All the female research participants had at least GCSEs, although one male partner had been expelled from primary school for bad behaviour and had not managed to gain any academic or professional qualifications. Other qualifications included diplomas, BTecs, NVQs, degrees and nursing qualifications. Housing varied with participants living in council housing, rented property, or as owner-occupiers. Two participants were staying with friends or relatives while they waited for the council to house them. Almost all participants said they felt safe in the local residential area.

On the whole, the general physical and mental health of participants was reported to be good. Only a few of the participants smoked and all claimed they had stopped whilst pregnant. With the exception of one father, all participants left the house to smoke and were mindful of the effect of smoke on their child.

The ages of the children of research participants ranged between fourteen months and six years. The children were almost all reported to have good physical and mental health, although in one family both children had allergic eczema and asthma. All children were reported to be achieving appropriate milestones and parent had no concerns about their development.

4.2 Aspirations for children

Parent's aspirations for their children varied surprisingly little across social and economic groups. Specifically, parents were asked what they would like their children to be doing twenty years from now. Almost all participants responded that they wanted their child to be doing "whatever they wanted to." However, with a little further investigation, parental expectations of their child became apparent. The starkest contrast was between the wealthiest mother, and the poorest mother, who was living on benefits. The wealthy mother said she wanted her son to do well educationally, and would prefer he enters a profession. She intended to send her son to a private school. The mother on benefits said in response to this question that she wanted both her sons to be happy, healthy and in a fulfilling relationship. This interpretation of and response to the interview question suggests that economic and career success were not a high priority for her children, but rather a good quality of life. Most other research participants understood the research question as relating to the child's future work and career, and while all said that ideally they'd prefer their child to go to university, depending on their chosen career, they also said they wanted their child to do what made them happy.

4.3 Being a parent

Again, there was little variation in how parents understood their role of being a parent and bringing up their children. Almost every parent interviewed understood their role to be taking an interest in and getting involved in their children's lives.

For mothers, particularly, there seemed to be a sense that being a parent should involve sacrifice to a greater extent, and there seemed to be a certain amount of guilt if these sacrifices were not made. Women who frequently made personal sacrifices (for example, giving up something they found personally pleasurable) in order to spend time with their children were considered to be 'good mothers' by other women. It was often suggested by those I interviewed that women may not be providing a stimulating and enjoyable home learning environment for their children because they did not want to give up time for themselves (i.e. they were 'bad' mothers).

4.4 The Home Learning Environment

In all homes there were toys, some of which were specifically "educational" in nature. Of the nine mothers, four read to their children routinely, five irregularly. Three mothers used the library to obtain books. In all households, but one, the television was permanently on, sometimes at high volume.

4.5 Consideration of child's education

Despite a great variation in social and economic background there was little distinction between parents' concerns about their child's development and education. Almost all parents recognised the importance of an education and had a desire for their child to do well and succeed. They all recognised the importance of supporting their child through the provision of educational activities at home and the need for their own involvement in these. There seemed to be a

relatively high level of anxiety around finding a good school for their child and most parents said they would research local schools online and check OFSTED reports before signing their child up for a school. Some parents even went so far as planning to move to another borough so their child would be eligible for a school of their choosing.

Despite this what did vary was the priority and emphasis placed on a child's education and academic achievement to the detriment of other skills. For example, the mother in the highest earning family believed that at the age of two, all emphasis should be placed on learning. During observation, her child spent his time playing quietly with toys, Disney DVDs, or an educational computer his parents had bought him. Other parents, whilst recognising the importance of education, also placed emphasis on confidence, physical exercise, and sociability as skills they needed to teach their children. A good example of this is the mother in one of the poorest households who interpreted the research question on aspirations to refer to the future happiness of her children (rather than their future career). Confidence was one of the most important things she could instil in her children and she did this by talking to them and encouraging their sociability rather than solely focusing on their learning. For another - relatively wealthy - mother, physical activity was very important, as was attending Church on a Sunday. These were two things the family could do together, and were thought to make them closer.

4.5 Concerns of parents regarding a child's education and development - what they found difficult or prevented them from focusing on the child's education

Many parents interviewed were quite articulate about what prevented them from providing an optimal home learning environment, and what they felt might prevent other parents from providing an adequate home learning environment for their children. Some parents felt that, in retrospect, they did not have the knowledge required when their children were very young to provide an educational environment. One mother spoke about not allowing her child to become messy or to experiment whilst playing, and felt she had been wrong to do this. She also expressed regret that she had lacked knowledge about selecting the best school for her child. With regards to the experimentation and learning through play, she felt she had gained this knowledge through her role as nursery assistant and manager, where she was trained in basic child education. Another mother, previously a nursery manager, also felt the same. She believed a lot of parents were unaware of the importance of the home learning environment because of a lack of basic education in parenting and felt that parenting classes should be offered to new parents.

Many parents spoke about local services available to parents with small children, and how this affected the child's education at home. This particularly affected new mothers who had recently arrived in the United Kingdom from other countries. One woman, from Poland, explained that a complete lack of knowledge about local mother and toddler groups and drop-in centres left her feeling isolated, lacking in support, and at risk of depression. She said she found out about these groups from meeting other mothers in the local park, and attending the groups meant she could meet other mothers and learn about what was 'normal' and to be expected when bringing up a small child.

Other parents expressed concern regarding local ante- and postnatal services. On the whole these were considered to be very helpful and supportive and there was a fear that services were being reduced due to a lack of funding. Many parents wanted several classes prior to giving birth and home visits afterwards so they knew what to expect from being a new parent.

Several parents spoke about their desire for their child to be educated in a religious environment or institution and felt that religious instruction and guidelines would help shape their child and their sociability. One of the poorest mothers believed that sending her children to a Church of England school would instil a morality and a community spirit in them. The mother from Indonesia felt that the secular educational and social system in London lacked a structure and community support that a more religious society, such as an Islamic one, could provide. Another mother was envious of her sister-in-law who was Jewish and deeply religious. She felt this provided her family life with a structure and direction which she could not attain, partly due to her lack of faith.

When asked about why parents may not be able to provide their children with an adequate home learning environment, many research participants felt that either too little time - parents were out all day, working, and preparing meals and doing housework when they returned and did not have the time to support their child - or too much time, by which they meant that parents who spent all their time with their children did not have the time to miss them, or had stopped enjoying spending time with their children. What was ideal was a balance between these two states.

Several parents mentioned that they were often made to feel inadequate by the government and in the press. The single mothers in particular described how they were made to feel that they were irresponsible or incapable of bringing-up a child alone, that their children were seen as having a bad start in life, and that this made the job all the more difficult.

5. Summary and conclusions

Despite research participants coming from a wide variety of social, economic, ethnic and religious backgrounds, there was very little variation in attitudes and beliefs around parenting and educating children. All parents prioritised the future happiness of their children over academic and career achievement. This was reflected in their understanding of their role as a parent, and the activities they provided for their children. Parenting itself - which refers to and is defined by the research participants as attention placed on children and their development - seemed to be, in part, a tension between providing quality time and attention for the children, and the need to place attention elsewhere, such as work, the household, other children, partners, or the self. Many parents spoke about guilt associated with this placement of attention, and referred to parents who do not pay adequate attention to their children as 'bad mothers'.

There seem to be several social and individual barriers to the provision of an optimal home learning environment. Social barriers included a lack of education about what children required to enhance their learning potential, lack of knowledge about or access to local social resources which would support an optimal home learning environment, provide a support network for parents, and prevent social isolation which may affect the relationship between carer and child, and a weak social structure not informed by strong social or religious ties. Individual barriers include a lack of desire to conform to the social role of 'mother,' and psychological distress (such as postnatal or clinical depression, or alcohol or substance abuse). Social and individual barriers are inextricably linked.

These results suggest that an inadequate, or suboptimal home learning environment is a product not of 'poverty,' as even those living on benefits demonstrate the similar values, knowledge, and capacity to provide an effective home learning environment as those who are relatively wealthy. Rather, it is a product of 'social exclusion,' as it is more broadly defined: as not having access to, or rejecting, dominant social expectations of being a parent.

6. Recommendations and interventions

Recommendations from this initial component of the research are of course tentative. We have yet to interview the most vulnerable parents, such as substance abusers and the mentally ill). However, from this first phase several recommendations emerge.

- 1) Parenting classes should become a normalised, but not mandatory, part of having a first child in the UK, particularly for those with little external social support and little access to other parents who can advise on aspects of parenting. Such classes should include a focus on the home learning environment
- 2) Information about parent and baby groups and parent and toddler groups should be made accessible to parents from the early stages of pregnancy, preferably through GP or antenatal services. This information should be made available to non-English speakers, and culturally appropriate groups provided.
- 3) Social, nongovernmental (neighbourhood, ideally) agencies, possibly working through GPs, should be available to identify parents who are struggling with social isolation, or do not have a support network or money to allow them freedom from their children (and subsequently to enjoy their children) and assistance should be offered. Further research is needed into why some parents do not access these services, such as SureStart.
- 4) National and local governmental and nongovernmental agencies should be made aware that, as long as children are not being harmed, parents have a right to decide how to bring up their children and what to prioritise in their parenting, and that these decisions need to be respected by others.

7. Measuring the effectiveness of interventions

“Impact Is defined as the immediate effect that health promotion programmes have on people, stakeholders and settings to influence the determinants of health. Health promotion programs may have a range of immediate effects on individuals and on social and physical settings. For individuals, the immediate effects include improved health knowledge, skills and motivation, and changes to health actions and behaviour.” (Australian Institute of Primary Care 2003).

The effectiveness of interventions can be measured through longitudinal assessment study of families involved in pilot schemes, An important aspect of all interventions should be that parents feel supported and happy in their desire and ability to provide a home learning environment for their child, so much of assessment will be dependent on the subjective experience of parents. A longitudinal study would also be able to assess a child's academic achievement, although other interventions and circumstances would have to be controlled for. With an improved home learning environment it would be expected that children would do better at school, and have an increased enjoyment of school. It may be possible to predict a child's cognitive and academic achievement without intervention, and measure actual achievements against this.

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