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STATE OF THE NATION: UNDERSTANDING PUBLIC ATTITUDES TO THE EARLY YEARS

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The Duchess of Cambridge's Early Years Steering Group

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FOREWORD

Our future will be shaped by what we do today.

Science tells us that a child's experiences from conception through their first five years will go on to shape their next 50. It tells us that the kind of children we raise today, will reflect the kind of world we will live in tomorrow. It tells us that investing in the start of life is not an indulgence, but economically, socially and psychologically vital to a prosperous society.

Over the last nine years The Duchess of Cambridge has heard this first-hand from those who are tackling some of society's toughest challenges. She has seen over and over again how often problems can be traced back to the earliest years of someone's life and it has become her ambition to bring about change in this area.

But change can only be achieved together.

This report represents the views of almost half a million people from across the United Kingdom, making it the largest public study ever conducted on the early years. Compiled through qualitative ethnographic research, nationally representative surveys, an open online questionnaire and a dedicated survey which explores the impacts of COVID-19 on parents, it provides an unrivalled insight into public attitudes towards this crucial topic and lays the groundwork for action.

And action is what we need. Within these pages lie the opportunities and obstacles which we must collectively embrace if we are to give every child in this country the very best odds in life; odds that the public think we have a real capacity to influence, since 98% place at least equal importance on the role of nurture as well as nature on a child's outcomes.

To do so successfully, we must make our reasoning clear. As it stands, only one in four people recognise the specific importance of the period from conception to 5 in securing health and happiness in adulthood. Yet we know that gaps in achievement at school entry make up a sizable share of later achievement gaps; just one of the lifelong generational inequalities that could be avoided with the right intervention .

The quality of the relationships that surround children, in addition to essentials like good nutrition and a safe environment, is therefore key to building the foundations of future success. When 90% of people in our study cited parental mental health and wellbeing as a critical factor in a child's development, they made that simple point: that supporting the child starts with supporting the adult.

Support is the key word, because it can be hard for parents to do it alone. Our research shows that only 10% of expectant parents mentioned taking time to look after themselves before their baby arrived; while a third expect the COVID-19 pandemic to have a negative impact on their long-term wellbeing.

So how can we help?

Well, it starts with keeping an open mind. A high number of parents (70%) admitted to feeling judged by others, with 48% saying this had taken an emotional toll. We absolutely want society to feel involved in the collective nurturing of the next generation, but it's important that we make this a positive mission, giving parents encouragement in place of critique.

For we know that the last year has placed an enormous strain on those sources of encouragement. Parents report that they rely most often on the backing of their family and friends, yet the global pandemic has forced us into silos of isolation. Parental loneliness has rocketed from 38% to 63% and the percentage of those who feel uncomfortable asking for help has doubled.

Most concerningly, this impact has been greatest on those living the hardest lives, with responses from those in deprived areas consistently showing higher levels of loneliness and less likely to have experienced an increase in community support.

But there have been triumphs. We have seen people all over the country who have come together, who have lent a hand, helped with the shopping, shared a smile.

Today there is hope of an end to this crisis, but if we can retain one thing, let it be that spirit. Because if we all play our part to address parents' feelings of insecurity and loneliness, build their confidence and knowledge and create networks of trusted support, then we will go a long way to building a happier, healthier society.

On behalf of The Royal Foundation, I would like to express my sincere thanks to Kindred² for making this report possible and to the people across the United Kingdom who have generously given up their time and shared their views.

To those who are about to browse through its pages, I hope you will join us in raising this issue to the place it belongs: right at the forefront of society's consciousness.



Jason Knauf
CEO, The Royal Foundation

1 INTRODUCTION

This report sets out the findings from the most comprehensive study of attitudes towards bringing up children from conception to 5 years ever undertaken in the United Kingdom. Thousands of parents and non-parents have participated to help shed light on how we approach the early years of life for children in the UK.

1.1 Background and rationale for this programme of research

The first five years of childhood, are more pivotal for development, future health and happiness, than any other single moment in our lifetime. An enriching environment and experiences throughout these years provide the essential foundations for children to become healthy, happy and productive adults. As part of The Duchess of Cambridge's work on these early years, Her Royal Highness and The Royal Foundation convened a Steering Group comprising academics, practitioners and charities.

The Royal Foundation undertook a rapid evidence review to explore existing data relating to public perceptions of the early years in the UK. The evidence review identified a large body of research on the experience and behaviours of parents and families throughout the early years, and on parental attitudes towards specific policies. However, it found a gap in knowledge about how this period, and the role of parents throughout these years, are perceived by parents and the general public. How people view the first five years of life is an important determinant of the priority the early years are given by parents, organisations, and wider society.

Responding to this evidence gap, The Royal Foundation commissioned a substantial piece of social research in 2019 to understand the UK's perceptions about the period from conception to age 5 ("the early years").

This study addresses an important knowledge gap: what are public perceptions of the early years in the UK? As well as informing The Royal Foundation's own early years strategy, we hope that this research will be used widely by others.

1.2 Methods

The study methodology is mixed methods, with several sizeable quantitative surveys (predating and during the COVID-19 pandemic) alongside observational and qualitative

research with parents and families. This report integrates findings from the following strands of research:

- **Face-to-face survey (December 2019-January 2020):** A nationally representative face-to-face survey of those aged 15 and over across the UK to provide robust, reliable and representative statistics. In total, 3,733 respondents were interviewed face-to-face. To allow analysis by nation, and by parents of a 0 to 5-year-old, more interviews were carried out among these groups. Findings discussed throughout this report are from this survey, unless otherwise stated.
- **5 Big Questions (January 21st-February 21st, 2020):** An extensive public survey with over half a million people responding; 435,141 of whom were from the UK.¹ An online questionnaire was shared as an open-link, so everyone was welcome to provide an answer. The intent of the '5 Big Questions' was to give everybody a chance to be heard and to spark a national conversation about the early years. The survey received a large response however it was not intended to be representative of the UK population as it simply reflects the views of those who took part. Findings from the 5 Big Questions are presented in blue boxes throughout the report.
- **Explanatory qualitative research (February 2020):** In-depth qualitative interviews with 40 parents of a 0 to 5-year-old who had taken part in the face-to-face survey, and an online community to explore findings in more depth². Findings from this aspect of the research are described as "conversations with parents" throughout the report.
- **Observational research (September-October 2019):** "Ethnographic research" with 12 families and 4 community leader interviews. Researchers immersed themselves in the home environment of families, following their daily routines to gain a detailed understanding of their attitudes to bringing up children. Case studies from this strand are presented throughout the report in grey boxes.
- **Online survey (October 2020):** The strands of research described above were conducted between September 2019 and February 2020 before the coronavirus pandemic in the UK and worldwide. An online survey of 1,000 parents of a 0 to 5-year-old was carried out in October 2020 to identify any changes in parents' experiences of the preceding 6 months, when the COVID-19 pandemic has been affecting every aspect of life in the UK. Reflections on parent attitudes over the period of the pandemic are shown in green boxes throughout the report.

¹ UK responses were identified using IP address. A total of 527,898 completed the survey globally.

² The online community was a virtual community whose members interacted with each other within a secure platform to discuss topics of relevance to the research programme.

1.3 This report

This report seeks to draw together the evidence collected across all the research strands to provide an overview of the public's and parents' perceptions of the early years in the UK today. To achieve this, the data collected via each research methodology was independently analysed using a thematic approach. Identified themes were then compared and contrasted across the methodologies to create a rich picture of current perceptions of the early years.

This report is structured around the key themes that emerged from the analysis. In some cases, these themes relate to topics that the research team purposefully set out to explore; for example the sources of support that parents value. However, other themes, such as mental health, emerged organically from our conversations with parents to an extent that justifies discussion in the report. The report is therefore divided into the following chapters:

- **Chapter 2: The importance of the early years:** This chapter explores parents' and non-parents' perceptions of the importance of the early years, their understanding of brain development, and the role of parents in supporting children's development.
- **Chapter 3: The reality of being a parent:** This chapter explores parents' and non-parents' perceptions of what it is like to be a parent today, including both positive experiences as well as challenges and obstacles. It examines the extent to which parents recognise the direct and indirect impact that their own mental health has on their children's development. It also explores where parents would go to seek support for their mental health, and the potential impact of social isolation on parents.
- **Chapter 4: Parents' support networks:** This chapter explores the types of support accessed by parents and their perceptions of the trustworthiness of different sources of support. It considers the implications of this for child development in the early years.
- **Chapter 5: The role of wider society:** This chapter explores how parents perceive their roles and responsibilities in supporting children to develop relative to those of wider society.
- **Chapter 6: Conclusions:** This chapter draws together the implications of the research findings.

The report includes evidence from other studies. These are referenced clearly and numbered with the full reference provided in Chapter 7.

The volume and richness of the data means that, for the sake of brevity, this report cannot cover the full extent of the insight to be gathered from it.

2 THE IMPORTANCE OF THE EARLY YEARS

2.1 The research context

The science of early childhood development reveals that the period from conception to the age of 5 plays a crucial role in lifelong development. Throughout this period, the brain is changing rapidly. During the first year after birth the size of a child's brain increases by 101% on average [1]. By the age of 3, a child's brain is estimated to be twice as active as an adult's brain [2]. These transitions mean that in the early years, children are especially sensitive to influences that promote the acquisition of perceptual, motor, cognitive, language, socio-emotional and self-regulation skills [3]. When children do not experience adequate care, attention and love from their parents, this can lead to poor outcomes, including physical and mental health problems in later life [4]. An enriching environment and experiences throughout these years can therefore provide the essential foundations for children to become healthy and productive citizens.

In contrast, although children continue to develop throughout their lives, science demonstrates that as children grow older it becomes ever more difficult to change how their brains process information [1]. Instead, any developmental delays that have arisen in the early years tend to worsen during childhood and endure throughout life. Indeed, there is evidence that 40% of the socio-economic attainment gap at age 16 is already present at age 5 [5]. Evidently, the first years after birth provide a critical period of opportunity which, if missed, can have long-term consequences.

Given that a child's central relationship is most often with their parent, they have a very strong influence over their child's brain development [6]. It is important for parents to understand the *process* of brain development in the early years so they can provide responsive caregiving and early education.

In response to the weight of evidence supporting the importance of the early years, in 2020 the World Health Organization (WHO) published evidence-informed recommendations on improving early childhood development [7]. The recommendations draw on the concept of *nurturing care* (a term coined in the Lancet Series, '*Advancing early childhood development: from science to scale*,' [8]) and call for responsive caregiving and engagement in early learning from parents. Crucially, the recommendations also call for parents to be supported in the delivery of these recommendations.

In the UK, policy makers have introduced a number of early intervention programmes to support development in the early years, starting from pregnancy. These include the Healthy Child programme; a universal service for families. It comprises health promotion, child health surveillance and screening, and advice and support to help children's physical and emotional development. The service is designed to provide help at an early stage to reduce demand on higher cost specialist services at a later stage [9]. The Early Years Foundation Stage (EYFS) was introduced to provide standards for children at ages 2-3 and 5; and recently there has also been an expansion of the provision of free early years education. Additionally, the Early Intervention Foundation (EIF) has evaluated a plethora of interventions aimed at improving children's long-term outcomes [10].

In this chapter, we explore parents' and non-parents' perceptions of the importance of the early years, their understanding of brain development, and the role of parents in supporting children's development. This research provides an assessment of UK society's *perceptions of early development* in a more holistic way than other studies have attempted.

2.2 Recognition of the importance of nurture

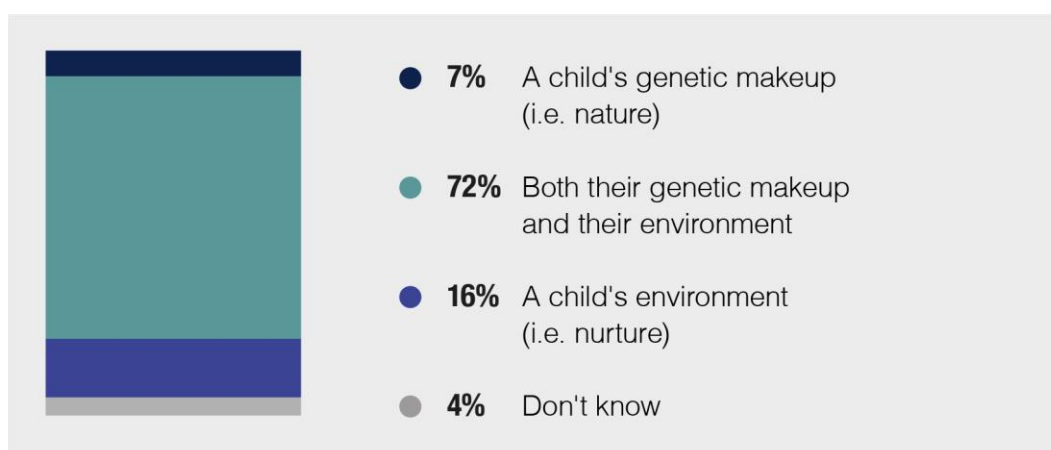
The nature versus nurture debate concerns the extent to which genetics or the external environment influences a child's development. The contemporary understanding of child development now encompasses both sides of this debate. It is widely accepted that the unique genetic makeup of each child will predispose their behaviour and abilities in all areas of their life, but that this only provides a framework; healthy development is heavily dependent on the physical and social environment of the child.

Parents' own stance on the nature versus nurture debate has the potential to shape their attitudes and behaviours when bringing up children. Specifically, research has shown that a fatalistic belief that a child's development is wholly determined by their genetics can affect how parents interact with their children, and how children go on to develop [11].

Positively, our survey found that most parents recognise that children's brains do not develop independently of their surroundings. As shown in Figure 2.1, almost nine in ten (88%) parents recognise that development before age 5 is influenced by the environment. This comprises 16% who think environment plays the major role; and 72% who think a combination of genetics and environment influences development. Just 7% of parents hold the fatalistic view that a child's outcomes are wholly pre-determined by their genetics.

However, our survey suggests that where parents do believe that child development is predetermined, this has significant implications for their behaviour. These parents are less likely than those who believe in nurture to think it is important to read (49% compared with 73%); talk (65% compared with 90%); play (65% compared with 90%); or spend time outside (61% compared with 81%) with their child during the first year. Furthermore, the likelihood of parents believing that their child's development is predetermined increases with economic disadvantage. Parents who live within the most deprived areas of England³ are more than twice as likely as others to believe that a child's genetic makeup is the biggest influence on their development (15% compared with 7%). Similarly, those with household incomes of less than £17,500 per annum are more than twice as likely as those with higher incomes to prescribe to this view (11% compared with 5%). This finding is striking given the finding of Health Equity in England: The Marmot review 10 years on [12], that those eligible for free school meals are less likely than their peers to have reached a good level of development by the time they enter reception class.

Figure 2.1: Which of the following is closest to your opinion of what influences how children develop from the start of pregnancy to age 5?



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: 1,019 parents of a 0 to 5-year-old

³ The Index of Multiple Deprivation (IMD) is the official measure of relative deprivation. The Index of Multiple Deprivation (IMD) combines information from seven domains to produce an overall relative measure of deprivation. The domains are: Income; Employment; Education; Skills and Training; Health and Disability; Crime; Barriers to Housing Services; Living Environment.

5 Big Questions Insight:

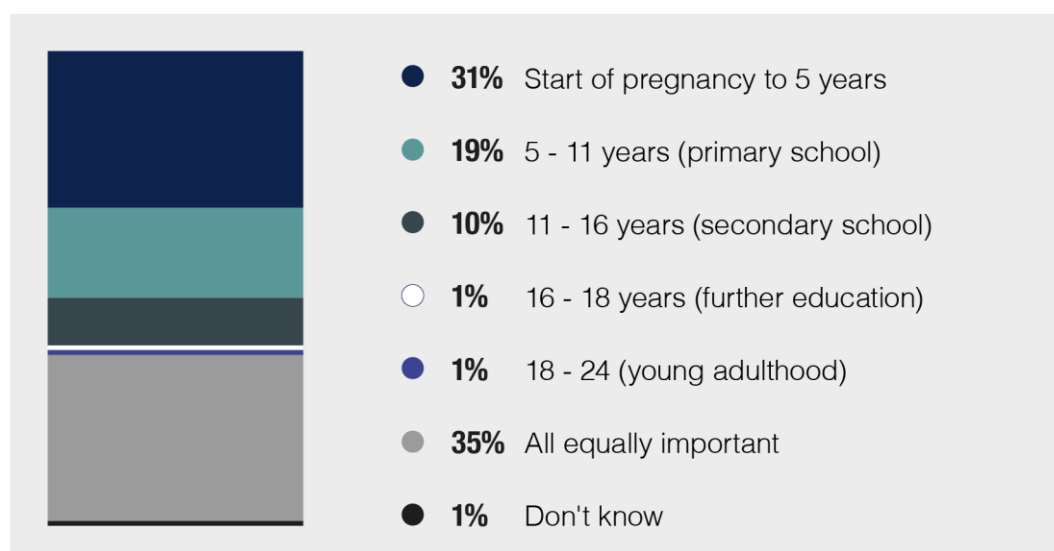
Almost all participants (98%) believe that the experiences of a child in the early years (i.e. nurture) influence how a child develops from the start of pregnancy to age 5. A large proportion (42%) believe that nurture, rather than nature, plays the primary role in determining lifelong outcomes.

When asked what is most important for children growing up in the UK to live a happy adult life, the most important factor for 60% of respondents was “Good physical and mental health”.

2.3 Recognition of the importance of the early years

Our research shows that recognition of the importance of the early years is far from universal. Even among parents of a 0 to 5-year-old, recognition of the first five years as being the most important for health and happiness in adulthood is relatively low, with just 31% stating that this is the most important developmental period (Figure 2.2). This means that 7 in 10 parents of 0 to 5-year-olds (69%) are not aligned with the scientific consensus that the conception to age 5 period is crucial in providing the foundation of health and happiness.

Figure 2.2: Which period of a child and young person’s life is the most important for health and happiness in adulthood?



Source: Online survey (October 2020)

Base: 1,000 parents of a 0- to 5-year-old

In response to the survey question about the most important period for health and happiness a significant proportion of parents suggested that all periods were equally important (35%). The perception that all stages of development are equally important was apparent in our conversations with parents. Parents explained that they thought each stage of development has its own challenges, and that each stage contributes to a child's development in different ways. For example, one parent reported that while going to school is an important time in children's lives, ensuring that they're on the right track while they're a teenager is also critical to their future.

"All stages are important. Babies develop from nappies onwards. They're like a sponge from 1 to 7; they suck up information very quickly."

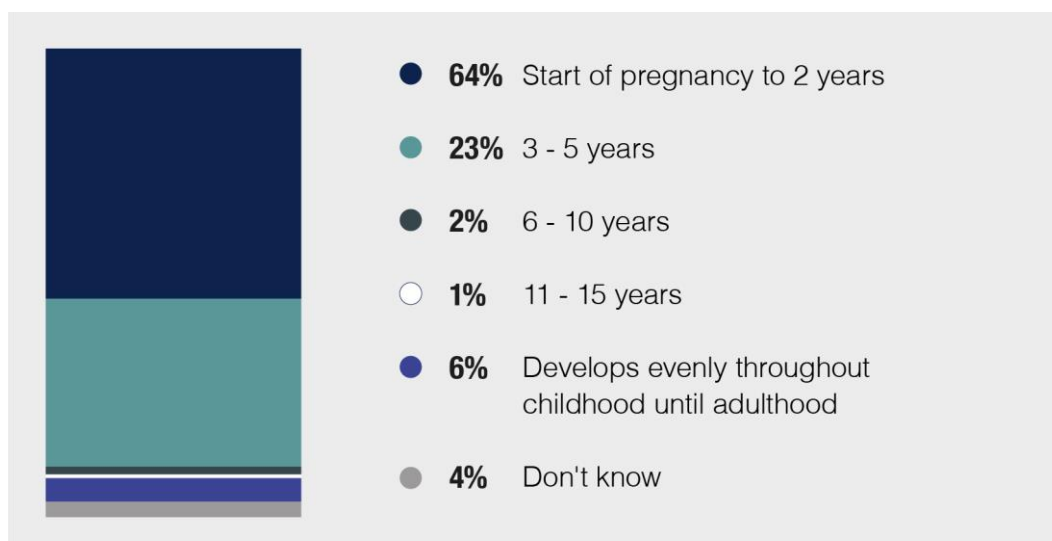
Father of 3-year-old, South East England

While parents' belief that all stages of development are equally important is not a concern in itself, our conversations with parents suggest that the lack of emphasis placed on the early years is sometimes due to the perception that children do not develop during this period.

When asked more explicitly about the period during which the brain and mind develops fastest (Figure 2.3), parents show higher recognition of the importance of the early years; almost nine in ten (87%) report that the brain develops fastest during the conception to age 5 period. However, just over one in three parents (36%) does not recognise that the brain develops fastest in the conception to 2 years period, and one in four parents (24%) does not recognise that what parents do between birth and 18 months has a large impact on their child's future. These beliefs are in opposition to scientific evidence which demonstrates that brain development during this time is faster than any other period of development [1].

Analysis of parents' responses reveals that female parents and parents with a child aged 3 or under, were particularly likely to recognise that the brain and mind develops fastest during the conception to age 2 period.

Figure 2.3: At what age do you think a child's brain and mind is developing fastest?



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: 1,019 parents of a 0- to 5-year-old

A key way in which parents judge brain development is by observing visible changes in their child's behaviour. Therefore, the fact that some aspects of development are harder to “recognise” or observe, leads parents to underappreciate the speed at which their child is developing, particularly in the first 18 months after birth [13]. For example, while parents mentioned early signs of development – such as following eye gaze – many of the “signs” of development mentioned by parents (such as talking and walking), are in fact the results of brain development. It was only once children had reached these development milestones, that some parents felt they were able to influence their child's development.

“Any milestones before the baby starts to communicate with you, I didn't have a clue. And I don't think any mum has a clue of what the baby should be doing.”

Mother of 3-year-old, London

This challenge is not specific to parents in the UK. For example, in a study of how Albertans in Canada conceive of child development, a key finding was that the process by which the brain developed throughout childhood remained “shrouded in mystery” [13].

Other than getting up in the night to check that his son was still breathing, Michael didn't interact much with his son until he was 18-months-old.

Once his son started to speak, Michael recognised that he could observe his son's development through their conversations. However, Michael didn't want to measure his son's progress against expected milestones, as he felt he would be paranoid if his son did not meet these. Therefore, instead of providing his son with support to meet milestones, Michael felt it best to allow his son to develop in his own time, as his son was "just finding out who he is."

Michael did not recognise that any delay in development in the early years could have implications for his son throughout the rest of his life.

"I won't have a 9 or a 10-year-old who can't speak or sing. It doesn't matter if your kid does it at 5-years-old and my kid does it at 7-years-old. That's irrelevant because, by the time he is my age, he will be on the same level as your kid."

Father of 2-year-old, London

Our conversations with parents also showed there to be an issue with the terminology used. The term "brain and mind development" led to conceptions of a purely biological "black-box" process which is out of the control of parents. This suggests that the language may need clarifying in order to make clearer how the brain is developing during the early years and, importantly, how this is related to a child's everyday experiences and social relationships.

"While you pick up on behavioural signs, including how she is interacting with you, you can only assume what is going on in the brain. I would not be able to tell you how the brain works!"

Father of 18-month-old, Glasgow

The Impact of COVID-19:

Relatively few parents of children aged between 0 and 5 (11%) think that the COVID-19 pandemic will have a negative impact on the brain and mind development of their child. Parents who do not live with a partner are particularly likely to hold these concerns (17% compared with 10% who live with partner). Parents key concerns relate to the lack of socialisation with other children (88%) and adults (56%) and spending too much time inside (56%).

In contrast, 44% think that their child's brain and mind development will be better due to the pandemic, citing increased time spent learning (73%), playing (68%) and talking (65%) with their child. Notably, parents whose working hours have reduced since the start of the pandemic are more likely to think that their child's development will improve than other parents (47% compared with 40%).

3 THE REALITY OF BEING A PARENT

3.1 The research context

When parents provide support to their children (such as emotional support and intellectual stimulation), not only are the children themselves enriched, but society benefits from their child's contributions as adults (such as economically and socially) [14].

However, parents commonly face conflicting priorities, challenging demands on their time, stress and exhaustion. Indeed, data suggests that up to 20% of women develop a mental health problem during pregnancy or within a year of giving birth [15], and that 10% of all new fathers worldwide experience postnatal depression [16].

In addition to the significant impact of poor mental health on quality of life, the impact of poor mental health on new parents can be wide-ranging. Lowered productivity among individuals with poor mental health (due to unemployment, missed work and reduced productivity at work) places them at increased risk of poverty. Delays to seeking medical advice for mental health issues, and difficulty adhering to treatment regimens places those with poor mental health at greater risk of poor physical health [17]. Furthermore, mentally ill parents may experience significant social stigma and discrimination, which can contribute to feelings of isolation, judgement and anxiety.

Although the impact on parents of their mental ill health should not be underestimated, it is at least as important to recognise the impact that poor parental mental health has on children. The London School of Economics and the Centre for Mental Health estimate that nearly three quarters (72%) of the cost associated with poor maternal health is related to adverse impacts on the child rather than the mother [15]. Research has identified a range of effects that poor parental mental health can have on children, including slower language development, poorer academic performance and emotional problems. For example, it has been shown that depression in mothers three months after birth is associated with significantly lower IQ and attentional problems in their children at 11 years of age [18].

Research into the mechanism by which these effects occur suggests that, as well as being impacted *directly* by their parents' mental states, children can be affected *indirectly* by the way parents cope with poor mental health. For example, research demonstrates that mothers who report a high level of anxiety and stress show less

responsiveness to their child's attempts at verbal communication and other interaction. Furthermore, parents who report high levels of stress tend to use harsher forms of discipline and are more inconsistent in their parenting style. These effects on the interaction between parent and child can negatively impact children's social, emotional and cognitive development [19].

As discussed earlier in this report, development delays that children experience in the early years can persist throughout childhood, and into adult life. Therefore, parental mental health has the potential to shape, for better or worse, a child's future.

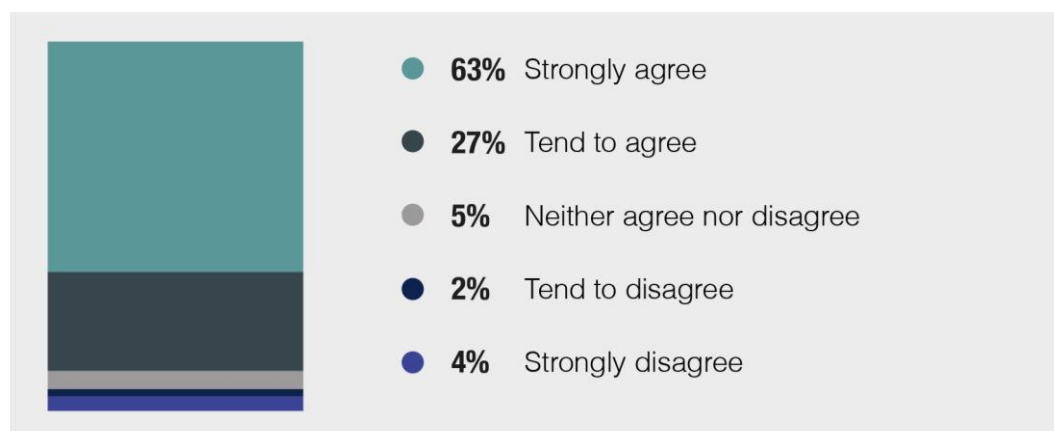
This chapter describes experiences of parenthood, exploring the positive experiences along with the challenges and obstacles.

3.2 Understanding of the importance of parental mental health

There is strong evidence linking parental mental health and the long-term development of children. Parents recognise that their current mental state will have an impact on how their child feels. However, there is little recognition that poor parental mental health can have a long-term impact on a child's development, other than in cases where poor parental mental health results in abusive or neglectful behaviour.

For example, the clear majority of parents of a 0 to 5-year-old recognise the link between a parent's mental health and their child's wellbeing. Nine in ten either strongly agree (63%) or tend to agree (27%) with the sentiment that "a happy parent equals a happy child" (Figure 3.1).

Figure 3.1: To what extent do you agree or disagree that 'a happy parent equals a happy child'?



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: 1,019 parents of a 0- to 5-year-old

5 Big Questions Insight:

The vast majority of respondents strongly agree (90%) that the mental health and wellbeing of parents and carers has a great impact on the development of children.

In our conversations with parents, there was a common understanding that one channel through which children learn is copying or mirroring the emotions or behaviours that adults display. It was through this direct route that parents thought a parent's happiness could impact their children's happiness. For example, one parent explained that if parents displayed aggressive behaviours, their child would adopt these behaviours, thereby causing them challenges.

"If parents are in a violent relationship, or if they shout and scream at someone, the children are going to think it's alright for people to do that. Kids are going to copy you. They're like little sponges."

Mother of 5-year-old, North West England

However, there was little acknowledgement of the indirect impact that parents' mental state could have on their child. For example, parents did not speak about the impact that poor mental health would have on the extent to which, and the way in which, parents engage with their children, and the resultant impact that this could have on children's development.

Furthermore, where parents discussed how the impact of parents' mental states could follow children into later life, this was in relation to extreme cases resulting from poor mental health, such as abuse or neglect. Parents did not generally acknowledge that common mental health conditions (such as depression and anxiety) could, in themselves, have a long-term impact on children in an otherwise functional family.

"A child who witnesses a lot of anger and aggression, is not talked to or engaged with, or is feeling mentally battered and bruised, whether at home or at nursery, that is not going to be good later on."

Mother of 3-year-old and 4-year-old, London

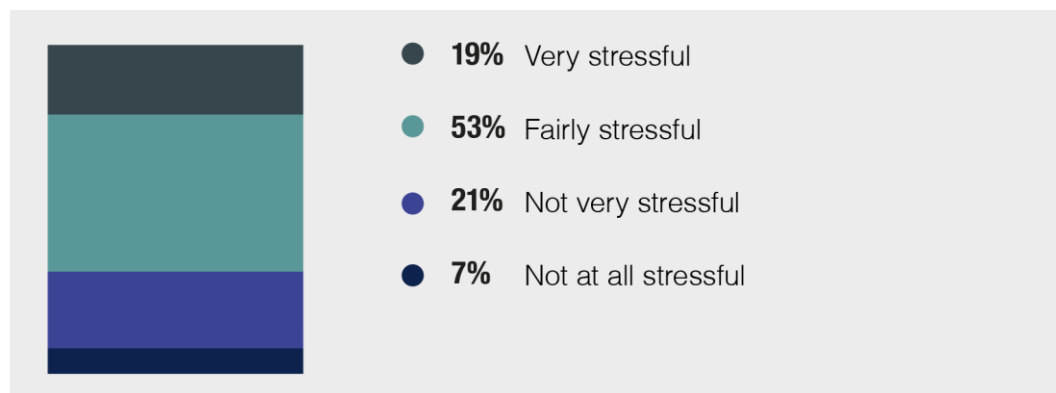
Given the centrality of parents' mental health to ensure the lifelong health and happiness of their children, it is crucial that parents both take preventative action to look after their mental health and have access to support when necessary. The next section of the report draws on our research data to explore these issues.

3.3 Experiences of being a parent

Despite the recognition of the importance of parental mental health, and the many positives of being a parent such as enjoying spending time with their children and seeing them develop, in reality many parents feel under huge amounts of pressure.

Further reflecting the challenges of looking after a 0 to 5-year-old, when asked directly, three in four parents (73%) agree that being a parent is stressful, with one in five (19%) reporting that it is very stressful (Figure 3.3). Notably, female parents are more likely to report that parenting is stressful than male parents (77% compared with 66%); and white parents are more likely to report that parenting is stressful than parents from black and ethnic minority backgrounds (75% compared with 65%).

Figure 3.2: Overall, how stressful, if at all, do you think it is to be a parent of a 0 to 5-year-old?⁴



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: 1,019 parents of a 0- to 5-year-old

The most frequently mentioned challenges of being a parent to a child of this age include balancing work demands (45%); feeling tired (22%); the demands of domestic chores (22%); and the demands of other children (17%).

Finally, it was common for parents to mention the stress caused by their own anxiety for their child, including concerns about their child's health (23%); safety (14%); and future (9%). Parents also report that they were stressed by trying to be the perfect parent (9%) and being judged (7%). Feelings of judgement were a common theme in our conversations with parents and are explored below.

"The stress comes from worrying about the child, rather than the process of parenting."
Father of 9-month-old, South East England

The case study below illustrates how a mother's personal experience helped her focus on recognising the impact her actions would have on her daughter's future development.

⁴ The proportions of parent who said parenting was very stressful (19%) and fairly stressful (53%) have been rounded. For this reason, they do not perfectly sum to the total proportion of parents who said that parenting was stressful (73%).

Claire's personal and professional experience of mental illness led to her recognition that parents' actions during the first years of life have a profound impact on their children's future. In particular, Claire felt that meeting her 9-month-old daughter's emotional needs in the early years would contribute to her future mental wellbeing.

As a result, Claire tried to interpret her daughter's behaviours and understand her personality so that she could tailor her own behaviour accordingly. Within a few weeks of her daughter's birth, Claire felt she had learnt to differentiate between "different types of crying" and understand the needs that her daughter was expressing through each.

Claire had also identified that her daughter was relatively independent, and she encouraged this by leaving her daughter in a high-chair while she cleaned and cooked. Claire felt this helped her daughter to understand she was still safe, even when Claire wasn't physically close to her.

"Working in mental health, I obviously have read studies about how what you do when they are this age can affect their future. Personality disorders can be to do with the way babies and children are brought up. I want to make sure her needs are met because I want her to be okay in the future."

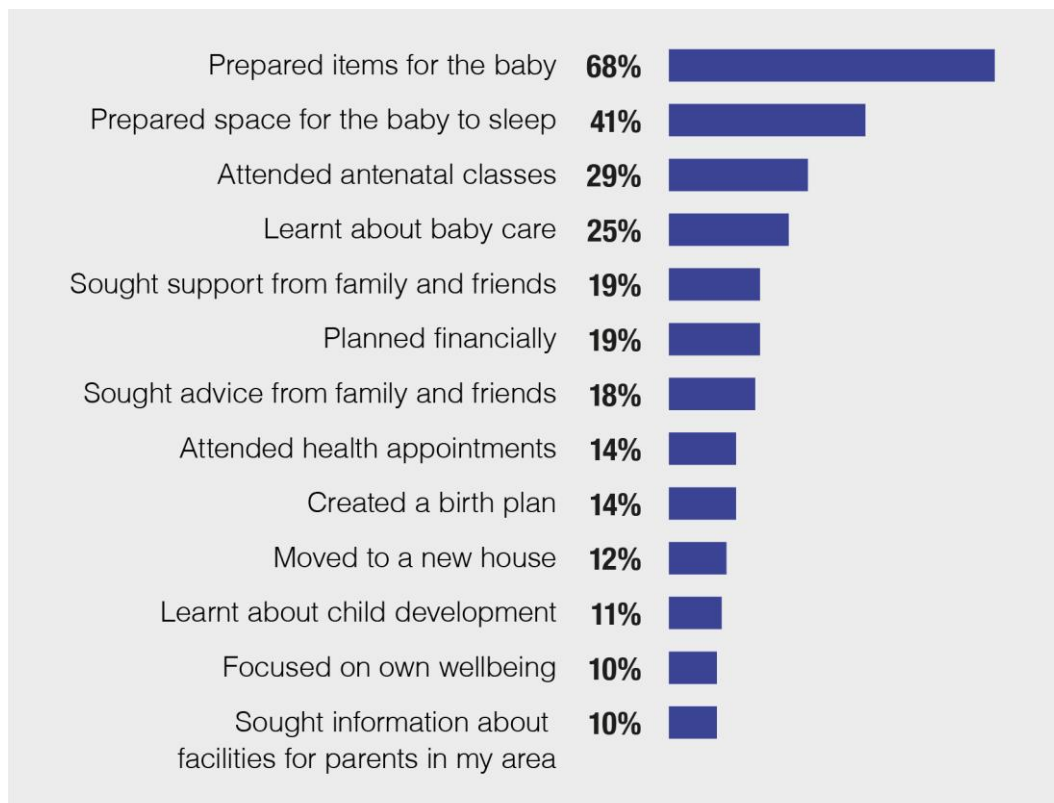
Mother of 5-month-old, South East England

3.4 Prioritisation of parental health

Despite parents' awareness of the importance of their own mental health, against this challenging backdrop parents are likely to put the needs of their children before their own. Parents' tendency to prioritise their child appears to start before birth and continues throughout the early years.

For example, when asked how they prepared for the arrival of their first child both practically and mentally, parents' most frequent mentions related to practical aspects of preparation (Figure 3.3). Many parents report preparing necessary items for the baby (68%); preparing a space for the baby to sleep (41%); attending antenatal classes (29%); or learning about baby care (25%). Only one in ten spontaneously reported that they took time to look after their own wellbeing (10%), or find out about facilities for parents in their local area (10%).

Figure 3.3: When you were expecting your first child, what did you do to prepare for their arrival both practically and mentally? Top mentions.



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: 1,019 parents of a 0- to 5-year-old

Compounding this lack of focus on their own mental wellbeing, one in five parents (18%) says that they would feel uncomfortable seeking help for how they were feeling. This compares with fewer than one in ten (8%) who would feel uncomfortable seeking help for how their child was feeling.

Furthermore, if parents were to experience poor mental health, it is not clear that all would know where to turn for support. The types of support that parents said they would access for 'help with how they are feeling' were limited, with 6% of parents saying they would either have nowhere to go or wouldn't know where to go.

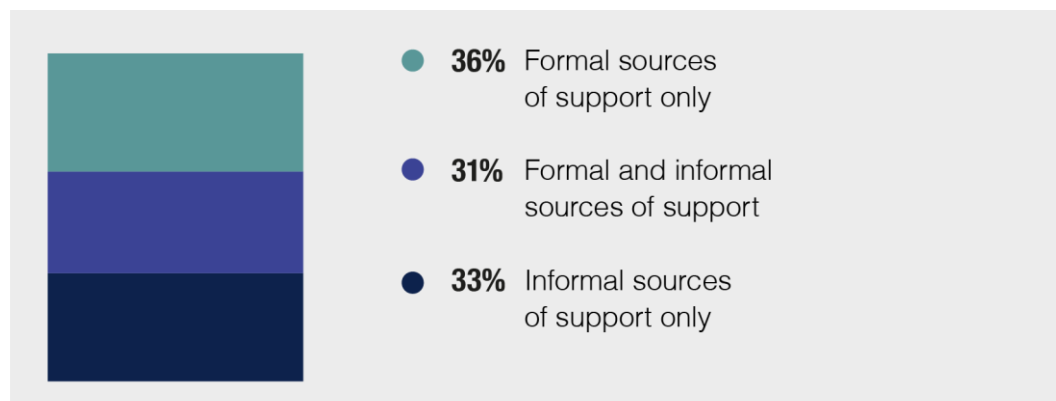
Among the sources of support mentioned by parents, informal support was favoured (Figure 3.4).⁵ For example, 35% report that they would speak to their own parents; 33%

⁵ Informal sources included in the analysis were the respondent's partner/child's other parent, the respondent's parents, the respondent's parents in law, other family members, close friends, and other parents.

Formal sources included in the analyses were childcare providers, school teachers, healthcare professionals, charities, children's centres, health visitors and social workers.

report that they would speak to close friends; and 27% report that they would speak to their partner. Two in three parents (64%) reported that they would use at least one informal source of support; while one in three (33%) said that they would only use informal sources of support if they needed help with how they were feeling.

Figure 3.4: Where do you think parents could turn for help with how they as a parent are feeling?



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: 1,019 parents of a 0- to 5-year-old

The importance of informal support networks was strongly reinforced by our conversations with parents. Parents emphasised the centrality of family and friends in helping them to raise their children and supporting their mental wellbeing.

“There’s never a day that goes past where it’s just me and Theo. My mum or my sister will pop in. My grandad will come up. There will be different faces coming in and out. I think it’s good for your general mental health to have those people there for you.”

Mother of 6-month-old, Cardiff

Parents’ reliance on informal support networks is positive, as the efficacy of family and friends for supporting mental health is well-documented. Social connections can help protect against the detrimental impact of stressful life experiences on mental wellbeing [20] and the onset of mental health problems [21], and increase the likelihood of those with poor mental health accessing health services for physical health [22].

Parents do not rely on informal support exclusively however. Around two in three parents (65%) said that they would turn to formal sources of support for how they are feeling, including medical professionals (40%), or health visitors (18%). Notably however, male parents were less likely than female parents to say that they would seek any form of professional support (61% of male parents compared with 71% of female parents). This reflects studies which have shown men to be less likely than women to

access formal support for their mental health. For example, in 2018, only 36% of those referred to psychological therapies in England were men [23].

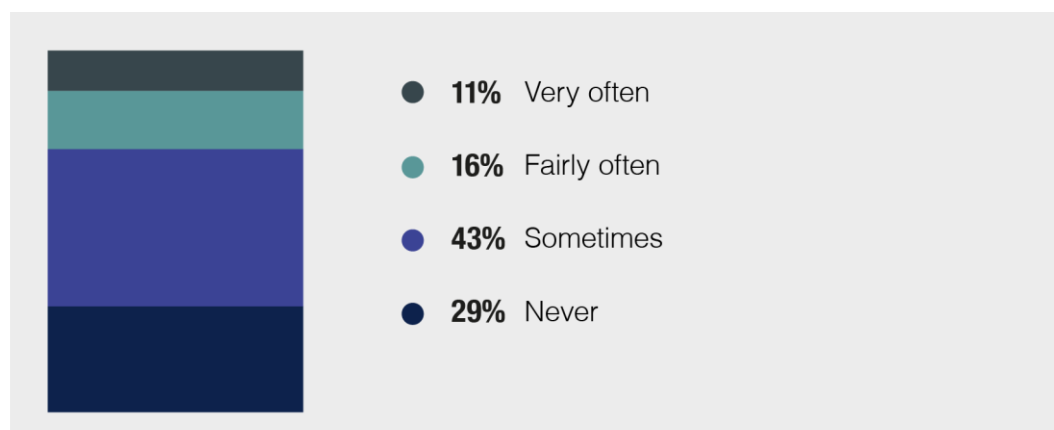
The Impact of COVID-19:

Two in five parents (37%) think that the COVID-19 pandemic will have a negative impact on their long-term mental health. Women (40%) and those who have experienced financial difficulties during the pandemic (43%) are particularly likely to report a negative impact.

3.5 Feeling judged as a parent

Feeling judged has the potential to impact parents' mental health, which evidence has shown to impair children's development [24]. Given these detrimental outcomes, feelings of judgement experienced by parents pose a real risk to children's development. Concerningly, seven in ten (70%) parents of a 0 to 5-year-old say they feel judged by others. Among non-parents, six in ten (64%) admit that they judge other parents.

Figure 3.5: As a parent, how often, if at all, do you feel judged by others?



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: 1,019 parents of a 0- to 5-year-old

Parents from higher socioeconomic grades are more likely to feel judged than those from lower socio-economic grades (76% of those in ABC1 compared with 62% of those in C2DE). Similarly, a higher proportion of women feel they are judged than men (74% compared with 62% men). This gender split in perceptions of judgement was reflected in our conversations with parents.

"The line between feeling judged and feeling inadequate can be a fine one. I think there are things which my wife would like to do but, if you work full-time, you can't. You have to cut your cloth accordingly."

Father of 2-year-old, South West England

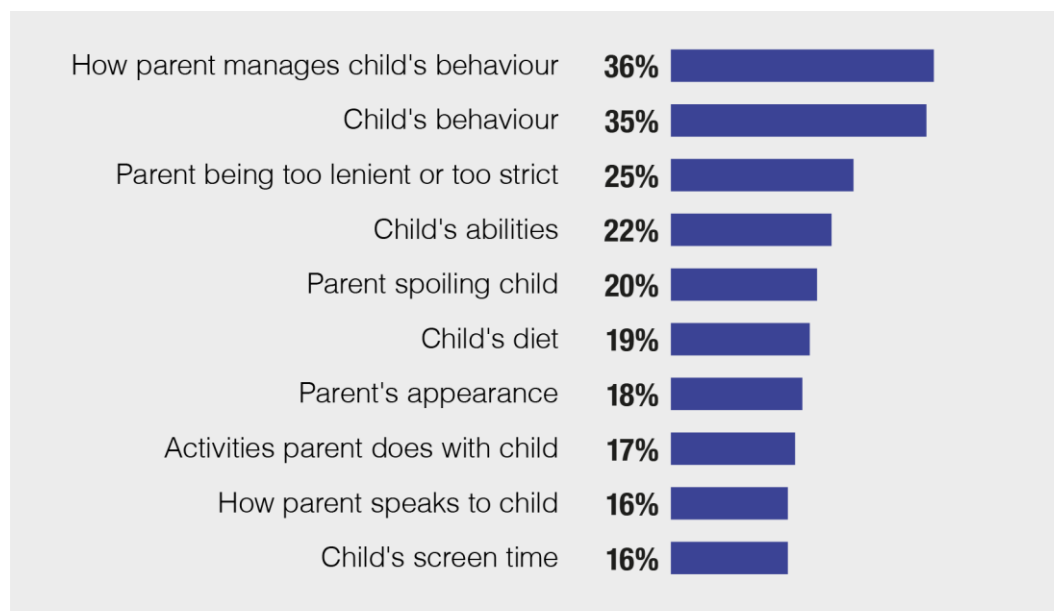
When asked what they felt they were being judged for, parents suggested a range of reasons relating to both them as a parent and to the child themselves (Figure 3.6). The child's behaviour (35%) and the way in which the parent manages that behaviour (36%) were the most frequently mentioned reasons for feeling judged. Related to this, many parents mentioned feeling judged for being too lenient or too strict (25%), or for spoiling their child (19%).

"When the kids are playing up, especially in public, there are people who stand and stare. They're wondering 'why?'. What am I doing as a parent that makes the child behave like that?"

Father of 5-year-old, Edinburgh

Judgement of other aspects of how parents look after their children, including how the parent feeds their child (19%); activities the parent does with their child (17%); and the child's screen time (16%), were also frequently mentioned.

Figure 3.6: When you are feeling judged as a parent, what do you think people are judging you for? Top mentions



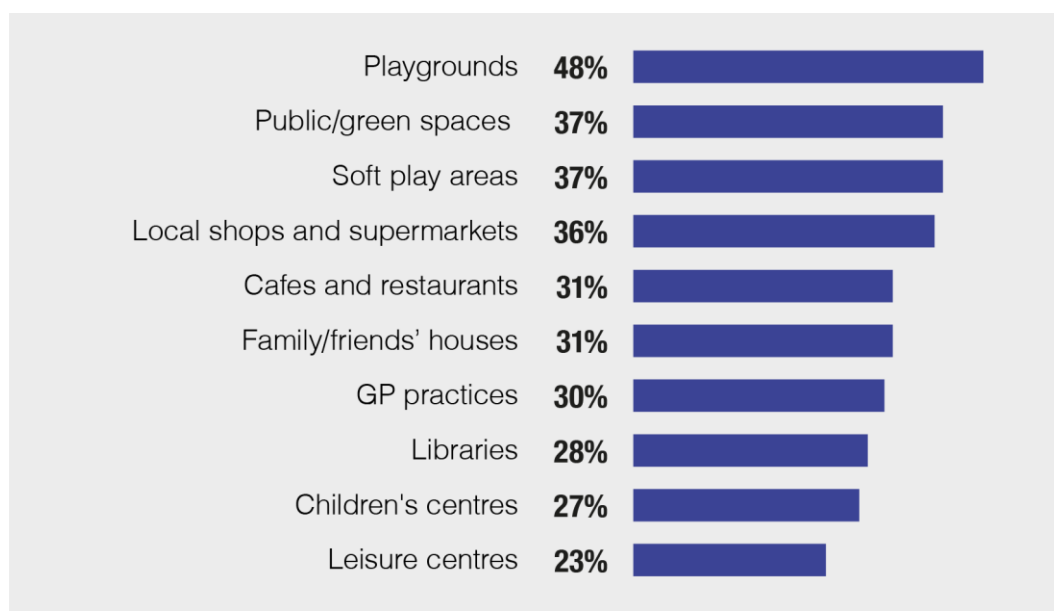
Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: 718 parents of a 0- to 5-year-old who feel judged

Our conversations with parents suggested that, given the breadth of reasons for which parents felt they were scrutinised, they found themselves "between a rock and a hard place" in which whatever actions they took, they would be negatively judged. There were a number of suggestions that the internet – particularly chat forums – contributed to the level of judgement experienced by parents by presenting a prescriptive view of what it is to be a "good parent".

When asked to name the places in their local area in which they felt most welcome or comfortable, a large variety of places were mentioned; with an average of 4.35 responses per parent. Playgrounds (48%); soft play areas (37%); and parks (37%) were the most frequently mentioned places.

Figure 3.7: Thinking about your local area, which places, if any, do you feel welcome or comfortable with your child? Top mentions.



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: Base: 1,019 parents of a 0- to 5-year-old

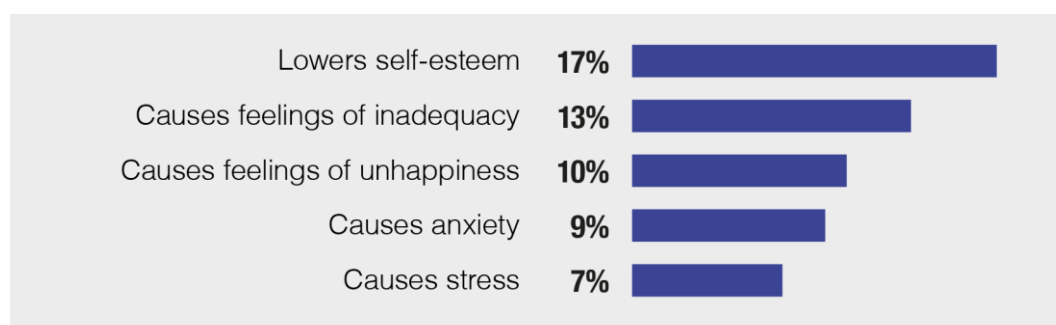
Parents described experiencing feelings of judgement in a range of different spheres. While there were many mentions of feeling judged by strangers, it was notable that parents also mentioned feeling judged by those closest to them; including by their partner and their own parents. Perceived judgement from close friends and family was often found to be particularly hurtful.

There was recognition that parents' perceptions of judgement may be related to their own self-consciousness and insecurities. These parents admitted that their feelings of

being judged were being prompted by people giving them unfriendly looks or making comments. These, they admitted, could be being misinterpreted.

However, regardless of whether parents' feelings of judgement are founded in reality, the implications of their perceptions are real. As a consequence of feeling judged, almost half (48%) of parents have experienced an emotional toll. Of those parents who have experienced an emotional toll, 17% report a lowering of self-esteem or increase in self-doubt; 13% report feeling inadequate or like a failure; and 10% report feeling sad or unhappy. (Figure 3.8).⁶

Figure 3.8: What impact, if any, does feeling judged as a parent have on you? Top mentions.



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: 421 parents of a 0- to 5-year-old for whom feeling judged has had an impact.

Furthermore, conversations with parents suggest that the impact of judgement can sometimes lead parents to change their behaviour. For example, an issue raised was that parents reported that they had stopped attending local parent and baby groups for this reason.

"It affects my child because I end up not wanting to take him out, socialise or be in public with him. So, we stay in frequently, when I used to always be out and about with him a few times a week."

Mother of 3-year-old, Northern Ireland

For example, 15% of parents report that the fear of feeling judged makes it difficult to ask for help and support for their child if needed. The consequent modification of their behaviour, may therefore impact on children's long-term development [24].

⁶ Parents were asked to describe, in their own words, what impact, if any, feeling judged as a parent has on them. The verbatim responses to this open-ended question were analysed and common answers identified

Peter regularly feels judged by other parents when he's in public with his 2-year-old son.

In a recent trip to the park, Peter's son had playfully tried to take another child's ball. When his son's behaviour continued, despite Peter trying to distract his son's attention, Peter noticed that other parents were staring at him. Peter felt he was being judged based on his son's behaviour and chose to take home his son home, thereby removing them both from the situation in which he felt uncomfortable.

"He loves Peppa Pig, and that's a Peppa Pig ball. He doesn't understand that situation. I tried telling him four or five times and he doesn't listen, so we have to leave the situation. I just felt like people's eyes were on me as we were walking around. Why should I be watched?"

Father of 2-year-old, London

4 PARENTS' SUPPORT NETWORKS

4.1 The research context

Many studies have demonstrated the importance of parents getting the support they need to bring up their child [24], as well as access to trusted sources of support when needed [26].

Ensuring parents feel they have access to a wide range of trusted sources of support, without fear of judgement, is vital for the early development of children as well as maintaining parents' own wellbeing and mental health. There is an extensive body of literature which looks at parents' access to services in depth, including the Growing up in Scotland study which highlighted the importance of medical services as a source of support to families as well as their family and friends [27].

There is much evidence of what the barriers are to accessing support which include concerns about being labelled a "bad parent", feeling like a failure, and admitting to existing problems in the first place. Further barriers relate to a lack of awareness or lack of access to sources of support [25].

Our research explored the types of support accessed by parents and their perceptions of the trustworthiness of different sources of support. It considers the implications of this for child development in the early years.

4.2 The size of support networks

The feeling that parents need to rely entirely on themselves could result in stress in some cases, which has long been established as having a negative effect on children's development [28]. Studies indicate that parents who access help and support (for example, parenting programmes), are less likely to report high levels of stress [29].

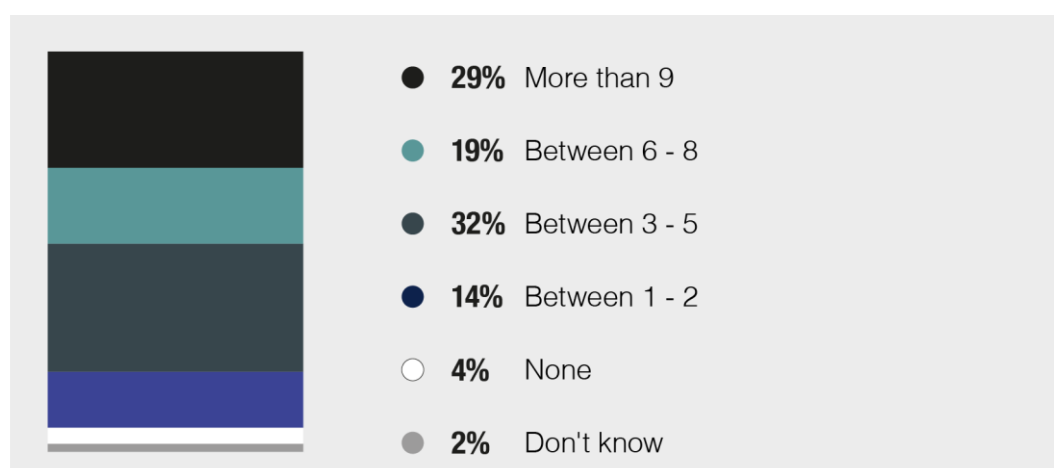
"It's difficult when you don't have any support. It's stressful. It gets too much. When you're exhausted, you pass it on to the children. It's helpful to have people around and know you're not alone."

Mother of 2-year-old and 4-year-old, London

Parents reported needing help and support for a wide range of issues including child health (38%); nutrition (33%); behaviour (24%); and sleep (20%). It is important that parents feel supported with the health and nutritional needs of their child as this is what parents report as the biggest area of stress for them. Furthermore, behaviour is the aspect that parents report feeling most judged for (as seen in Chapter 3).

For many parents however, it appears that this support is lacking: one in five parents (18%) report that there are two or fewer people they can turn to locally for support if needed (Figure 4.1). A third of parents who have two or fewer people to turn to (33%) report that the number of people in their network has decreased since they have had children (Figure 4.2). This highlights the potential vulnerability of many parents at times of stress.

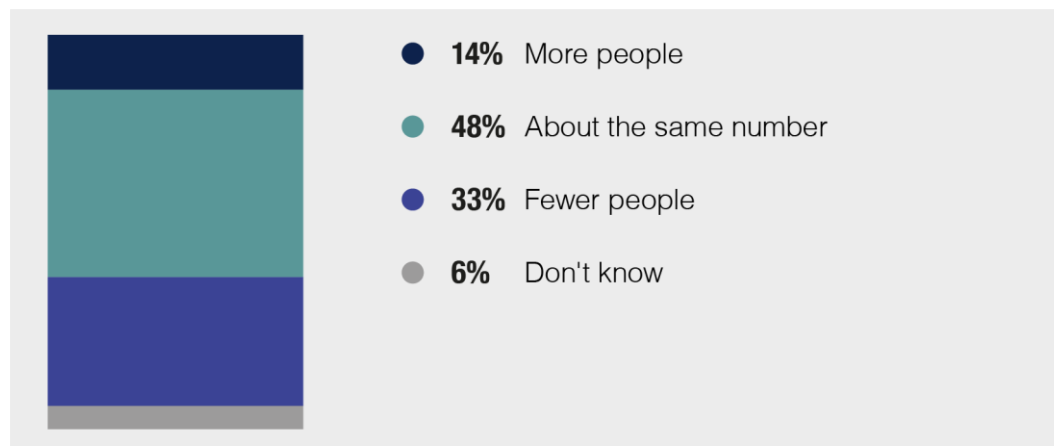
Figure 4.1: Overall, how many family friends and other parents who you can turn to for support if needed, do you have within the local area or easy reach?



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: 1,019 parents of a 0- to 5-year-old

Figure 4.2: Since you had children, would you say you have more, fewer, or the same number of people around you who you can turn to for help or support if needed?



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

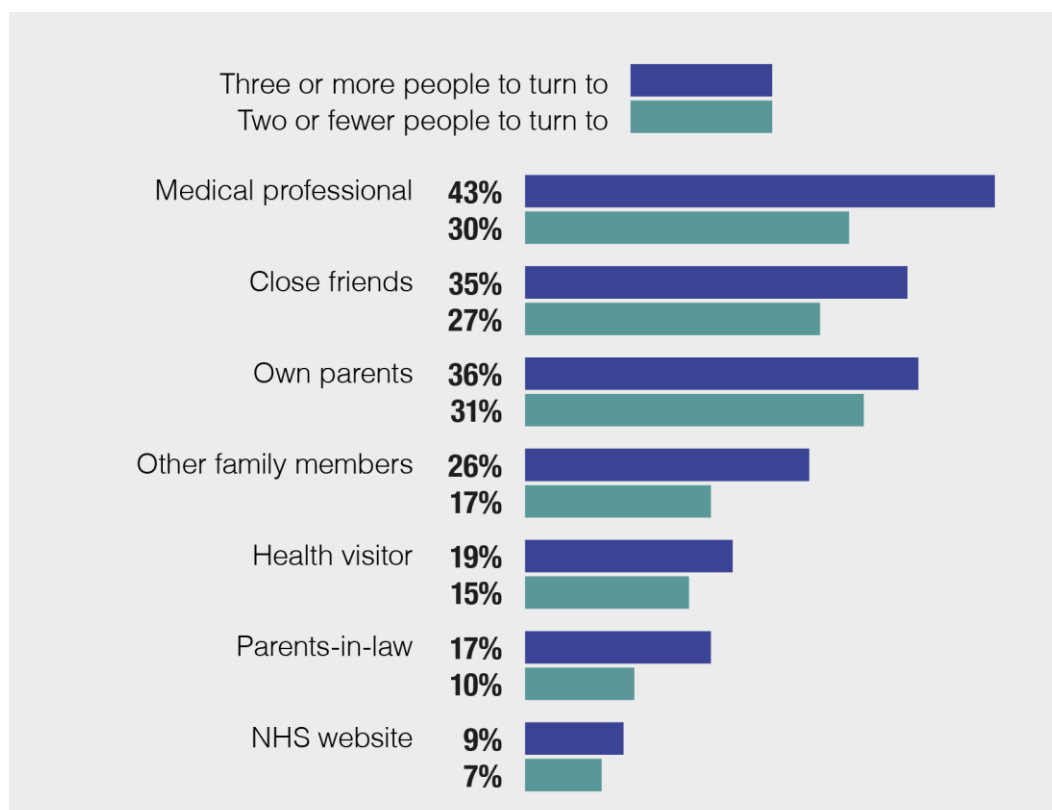
Base: 208 parents with two or fewer people to turn to

Parents with small networks⁷ are less likely to turn to friends and family for support with how they are feeling. For example, they are less likely to report that they would turn to their own parents, than those who report having a larger network (31% compared with 36%).

Although it is perhaps unsurprising that those with small networks are less likely to turn to friends and family for support, it is concerning that they do not appear inclined to access formal sources of support either (Figure 4.3). In fact, parents with small networks reported a lower likelihood of using many types of formal support than parents with a larger support network. For example, only 30% of those with a smaller network report that they would approach healthcare professionals for support with how they were feeling, compared with 43% of those with a larger support network. This may be due to not knowing who to contact, a fear of being judged, or shame at feeling unable to cope among other reasons.

⁷ In our analysis we have defined a small network as those with two or fewer people who they can turn to for help and support if needed within local area or easy reach.

Figure 4.3: Where do you think parents could go for help with how they as a parent are feeling? Top mentions.



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: Base: 1,019 parents of a 0- to 5-year-old

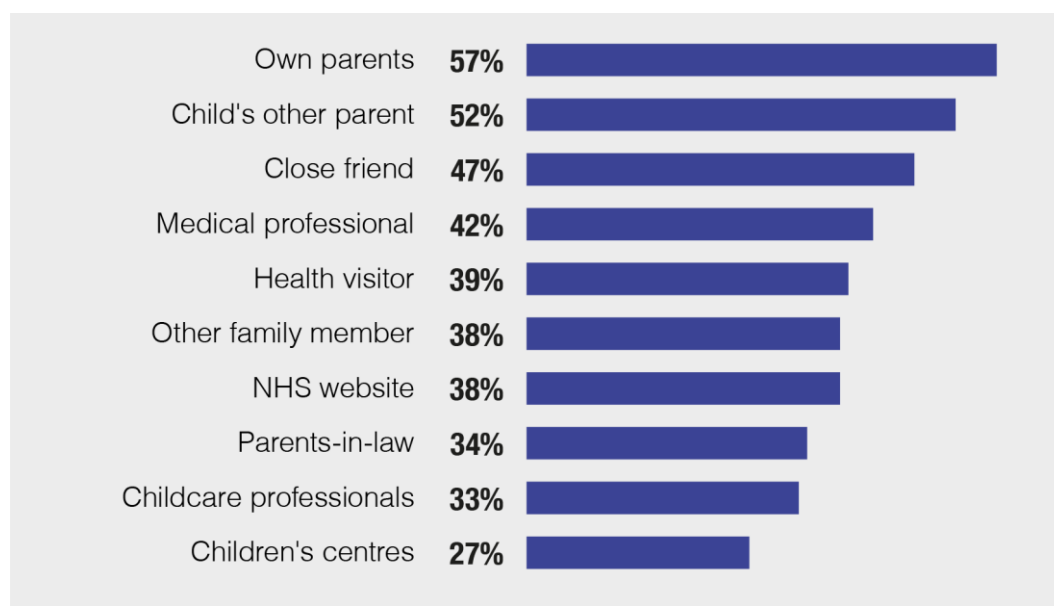
Furthermore, those with a small network are more likely than those with a large network to say that they would have nowhere to go (6% compared with 1%), or that they wouldn't know where to go (7% compared with 4%) for support with how they are feeling. Given that those with a small network are more likely than those with a large network to feel lonely often, always, or some of the time (27% compared with 17%) – and that loneliness is associated with poorer mental and physical health outcomes [30] – it is concerning that even a small proportion of this group have no one to seek support from about how they're feeling. This highlights the importance of discussions between GPs, midwives, health visitors and parents regarding the size and nature of their support networks to ensure those with small networks are able to access the support they need.

4.3 Sources of trusted information

In order for parents to engage with various support channels, it is essential that they feel they can trust that source of information.

When asked where they would turn for information they can trust about bringing up their child, informal sources are top-of-mind for parents (Figure 4.4). They are most likely to mention their own parents (57%); their child's other parent (52%); and close friends (47%). Health-related sources are also highly trusted, with healthcare professionals mentioned by 42%; health visitors mentioned by 39%; and the NHS website mentioned by 38%. Parents' strong reliance on health professionals (GPs, midwives and health visitors) is reflected in other studies, including Growing up In Scotland, where most parents see medical professionals as a key source of support, with GPs the most commonly used formal service [27].

Figure 4.4: Where would you turn for information you can trust about bringing up your child? Top mentions.



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: Base: 1,019 parents of a 0- to 5-year-old

Parents with household incomes of under £9,500 per annum mention fewer sources of support than those with incomes over £25,000 per annum (an average of 3.8 mentions compared with 6.4) and are significantly less likely to say that they would seek advice from medical professionals (27% compared with 47% of those with incomes over £25,000 per annum).

The Impact of COVID-19:

During the COVID-19 pandemic, parents were particularly likely to report that they would turn to the NHS website for information they could trust about bringing up their children (47%). Positively, the proportion of parents who said they would speak to a medical professional was in line with the nationally representative survey (41%).

However, it seems there has been a rise in the proportion who feel uncomfortable seeking help for how they are feeling from 18% before the pandemic to 34% during it.

A strong theme throughout our conversations with parents was that, rather than placing their trust in individual sources, parents tended to triangulate different sources of information before making a judgement. As such, rather than there being a strict hierarchy of trustworthy sources, information was seen to be validated when multiple sources agreed with each other.

"I'll listen to them, and then I'll judge what to do. It's not so much a question of trusting or not trusting them. It's rather that I'm responsible for my decisions."

Mother of 3-year-old and 4-year-old, London

The need to verify information was mentioned in relation to advice received from friends or family, or from the internet. Parents said that when advice was received from family and friends, they were sometimes concerned that the advice was not tailored to their specific child, or their own parenting style. In other cases – particularly where the advice was from grandparents – parents suggested that the advice might sometimes be a little outdated.

"Generally, information from my parents is tried and tested but sometimes I feel I need to take it with a pinch of salt."

Father of 2-year-old, East Midlands

Although, in general, parenting blogs and websites were not always trusted to provide objective information, mentioned by only 11% of parents, the NHS website was seen as an exception, and appears to be used frequently to verify advice received from other sources. The lack of trust of online sources stemmed from a lack of personal relationship with those providing the advice and experiences of feeling judged.

Overall, the findings highlighted that personal relationships and trust are important in driving where people go for support. Ultimately, however, parents do not tend to make

decisions based on single pieces of advice, but by triangulating advice from multiple sources.

Donna relied heavily on her mother for support. She explained how on most day, either her mum visited her at home, or she would go to her mum's house. Her mum and sister were the only people that she would go to for support; whether emotional or practical.

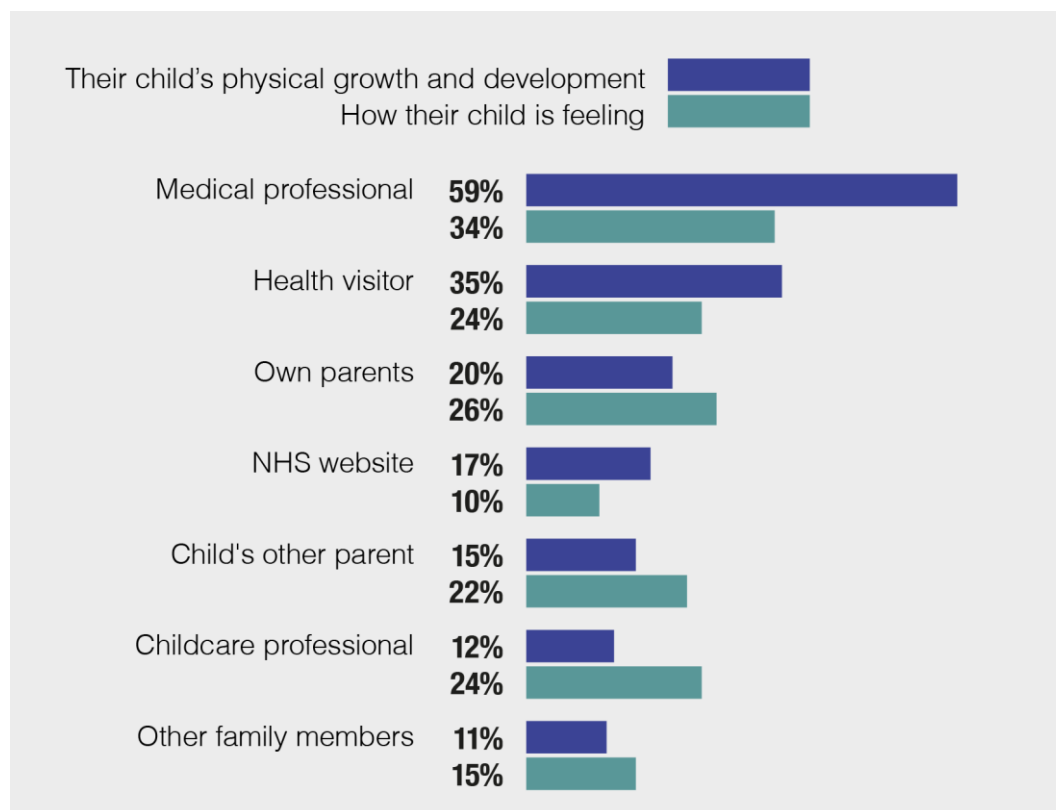
"I've slotted my working days around my sister and my mum, so they'll take it in turns to look after him. I'd much rather him be with family than be with total strangers. You can't beat family."

Mother of 6-month-old, Cardiff

4.4 Sources of support with child development

In the survey, we asked where parents would go for help with their child's physical growth and development. Medical professionals are parents' most mentioned source of support (mentioned by 59% of parents); followed by health visitors (35%); and their own parents (20%).

A similar picture emerges when parents were asked where they would seek support for their child's feelings and how they act around others. While the most mentioned sources of support are the same, the proportions of parents who would seek support from medical professionals for emotional issues are lower than for physical growth and development (Figure 4.5).

Figure 4.5: Where do you think parents could go for help with...?

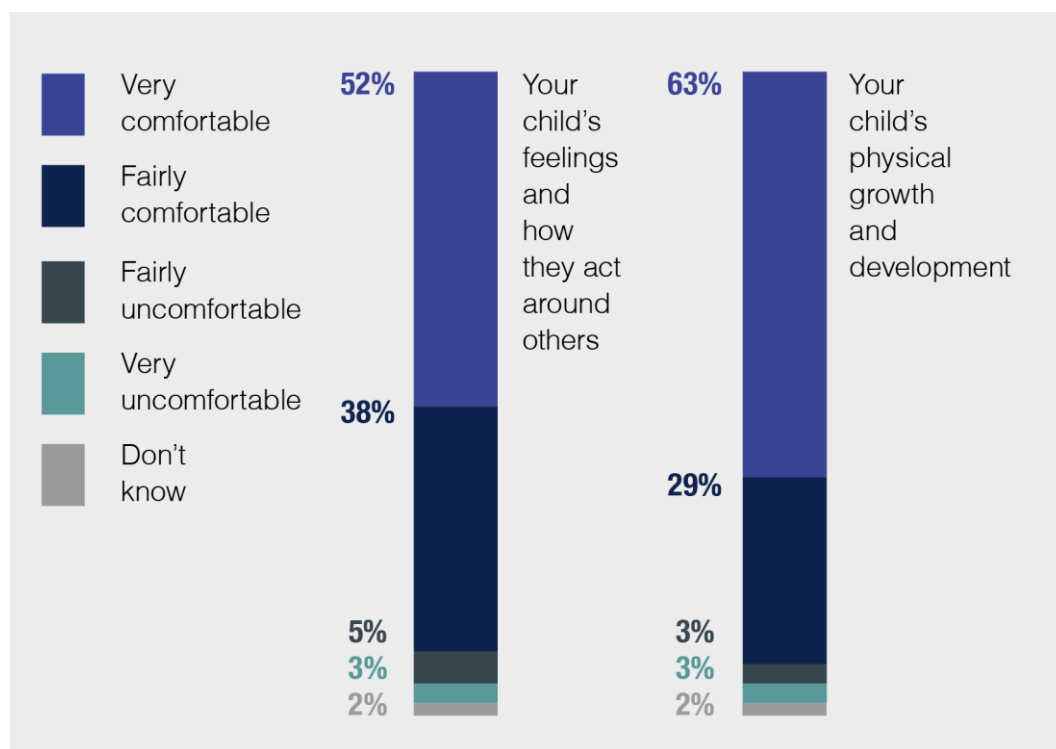
Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: Base: 1,019 parents of a 0- to 5-year-old

White parents (62%) are more likely to report contacting a medical professional for physical growth and development queries than black and minority ethnic parents (46%). In contrast, black and minority ethnic parents are more likely to seek support from their own parents with how their child is feeling (33% compared with 25% from white backgrounds).

Importantly, the majority of parents of a 0 to 5-year-old would feel comfortable seeking support for their child's physical growth and development (92%); and for their child's feelings and how they act around others (91%). This is shown in Figure 4.6.

Figure 4.6: Overall, how comfortable or uncomfortable would you feel seeking help and support for...?



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: Base: 1,019 parents of a 0- to 5-year-old

That said, there is evidence from other studies which shows barriers to accessing support include a sense of fear of being labelled “bad parents” [25]. Indeed, in this study we found some of the main barriers faced by parents when asking for support are wanting to avoid showing weakness (16%); not wanting to feel judged (15%); and the feeling of failure (14%). Female parents are more likely than male parents to mention not wanting to feel judged (17% compared with 12%) and the feeling of failure (17% compared with 11%).

Figure 4.7: What, if anything, makes it difficult for you to ask for help or support for your child? Top mentions.



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: Base: 1,019 parents of a 0- to 5-year-old

"I felt I couldn't ask on social media or even other parents about anything I wasn't too sure of, I felt I would be judged for not already knowing the answer. If I hadn't felt like I'd be judged, I would have asked for help when I needed it, rather than waiting."

Mother of 3-year-old, North East England

5 THE ROLE OF WIDER SOCIETY

5.1 The research context

The last 100 years have seen extensive changes to family structures in the UK [31]. The nuclear family is no longer the accepted norm, with more households comprised of cohabiting parents, stepfamilies, single-parent families and those co-parenting and living apart [32]. Alongside changes to family structure, societal trends include the geographic movement of parents away from their wider family, leading to what many commentators believe to be a weakening of community cohesion and identity [33]. This means that traditional parental roles and responsibilities have changed, and the role of wider society is under the spotlight.

How parents perceive their roles and responsibilities in relation to others in society is particularly important when it comes to primary education. Parents' perceptions of the balance of responsibilities for the 'education' of their children can inform how they interact with their children in the early years.

As seen in Chapter 2, scientific evidence shows that nurturing relationships are crucial in the development of children during the early years. This chapter explores how parents perceive their roles and responsibilities along with those of wider society in how children develop.

5.2 Attitudes towards wider society's role

Parents were asked whether it was mostly the responsibility of parents to give their children the best chance of health and happiness, or whether it was the equal responsibility of parents and society, or mostly the joint responsibility of everyone in society.⁸

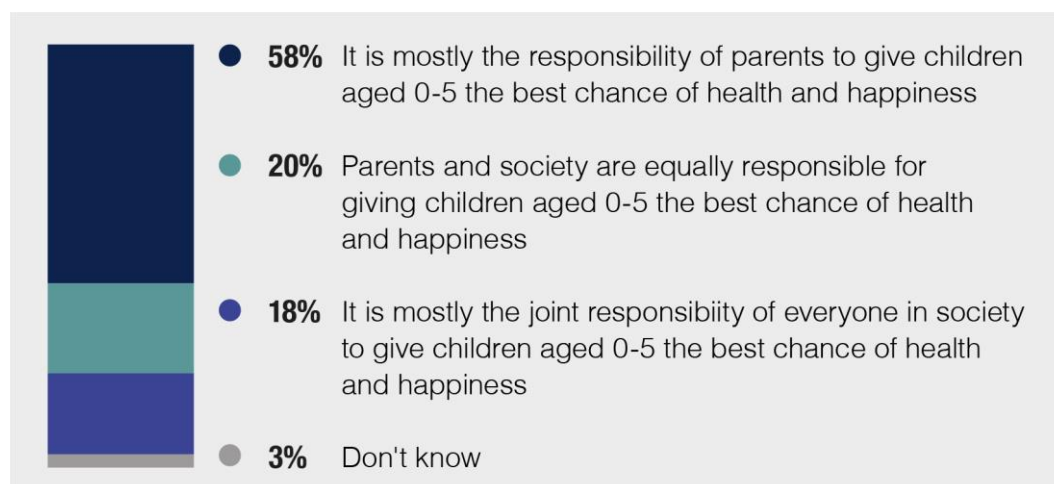
The survey revealed that the idea of shared responsibility in bringing up children does not resonate with many parents. Parents of a 0 to 5-year-old tend to assume that the responsibility for giving children the best chance of health and happiness is purely

⁸ Respondents were told "By society, we mean everyone on this card: Wider family, Neighbours, Friends, Schools, Nurseries, Wider community, Health professionals (e.g. health visitors, nurses, midwives and GPs), Social workers, Local authority early help professionals (e.g. family support workers, youth workers), Childminder or nanny, Charity/Voluntary sector.

theirs (58%), rather than the joint responsibility of everyone in society (20%) or the equal responsibility of parents and society (18%).

In addition, when asked what are the most important things that can be done to help children aged 0 to 5 flourish as they grow up, having loving parents (56%) and a safe home (53%) are the top responses given by parents.

Figure 5.1: Which of these statements is closest to your opinion...?



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: 1,019 parents of a 0- to 5-year-old

5 Big Questions Insight:

Around half (53%) of those providing a response, believed it is the shared responsibility of parents and others in society to give children aged 0 to 5 the best chance of health and happiness. However, a sizeable proportion (46%) believed it is primarily the responsibility of parents.

In our conversations parents recognised that wider involvement in raising children was desirable, but they also felt it had limitations. It was described as a nostalgic idea that no longer held relevance in modern life.

There was, however, an acceptance that everyone the child came into meaningful contact with would have an influence on their development. Indeed, parents felt that independent role models often had more influence over children than parents themselves. However, parents expressed a variety of views over whether the greater involvement of others in society would be beneficial or not. Ultimately, concerns

seemed to stem from parents' desire to retain control over the way their child was looked after.

For example, parents expressed concerns about the extent to which others reflected their own standards and expectations for their child. Parents wanted their children to receive consistent messages, that reinforced parents' own teaching. Where this was the case, external influences – whether friends, family, or professionals – were seen as positive. However, where external influences undermined parents' teaching, they were seen as something to be avoided.

"When friends visit, we have to remind them to mind their Ps and Qs. I like it that wherever my children go, they get a consistent message."

Father of 18-month-old and 3-year-old, North West England

5.3 Which individuals or organisations have a role?

When parents are asked to consider who, other than parents, has responsibility for giving children the best chance of health and happiness, family is by far the most frequent response (71%).

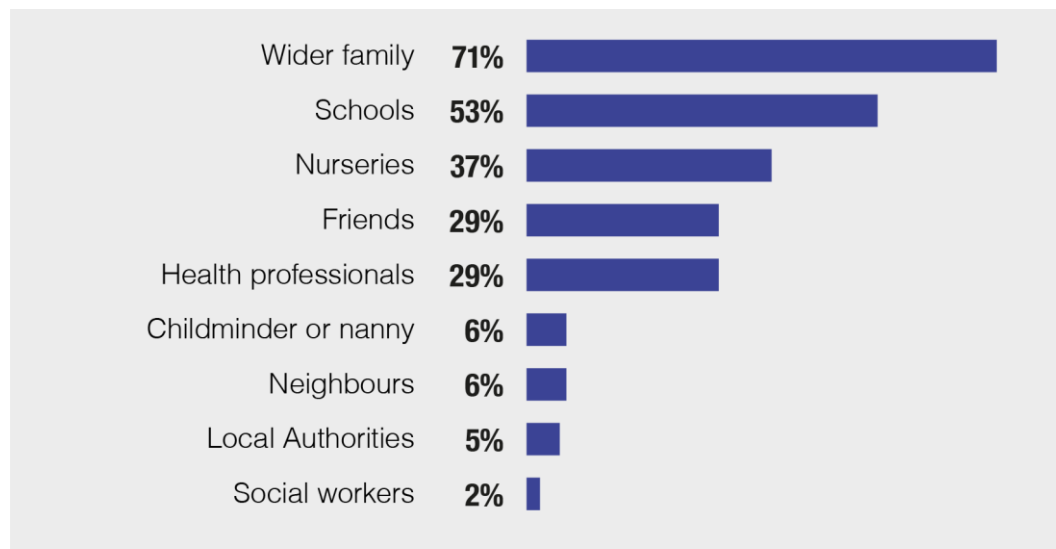
Katie believes that it is parents' responsibility to make decisions for their children and tries to avoid relying on anyone but family to provide childcare for her son.

"It's all about the family in the beginning for a child - the baby is our responsibility."

She is slightly resentful of what she perceives as interference from the state. For example, she perceives her child's school as very controlling about what goes into her older child's lunch box; she thinks they should be more laid back about allowing chocolates and sweets in moderation. She also feels that parents should have been consulted over the reduction in child's play time in the afternoon.

Mother of 3-year-old, Glasgow

Figure 5.2: Other than parents who, if anyone, is responsible for ensuring that children aged 0 to 5 have the best chance of health and happiness? Top mentions.



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: Base: 1,019 parents of a 0- to 5-year-old

Our conversations with parents suggested that parents tended to place a lot of trust in family members, which was mainly driven by the belief that they held standards and expectations in line with their own. Parents felt that extended family played an important role in providing their child with discipline and supporting them emotionally. In this sense, it was felt that input from extended family complemented rather than duplicated the role of parents. For example, it was suggested that children might feel more comfortable confiding in extended family members than in their parents, and that discipline from extended family members could carry more weight than that from parents.

"They can provide emotional support more than anything. A lot of kids confide in their grandparents with things which they might not tell their parents."

Father of 18-month-old, Glasgow

Many parents also viewed schools (53%) and nurseries (37%) as playing a role in children's health and happiness. In our conversations with parents, it was suggested that schools and nurseries were able to provide experiences that the parent would not be able to provide themselves. From a practical perspective, parents discussed the importance of diverse activities, including 'messy play', some of which would be challenging and time-consuming to recreate at home. Parents also saw merit in their child socialising within large groups of children.

"Her pace of development increased massively when she started nursery. I think it was from interacting with other kids the same age and different adults. And being in a larger group, and not the centre of attention, is more representative of society."

Father of 2-month-old and 1-year-old, West Midlands

As was the case with extended family, childcare providers were seen to complement rather than duplicate the role of parents. Parents reported that they used childcare providers to support their child's development, rather than purely for practical purposes (e.g. for childcare while the parent worked).

The Impact of COVID-19:

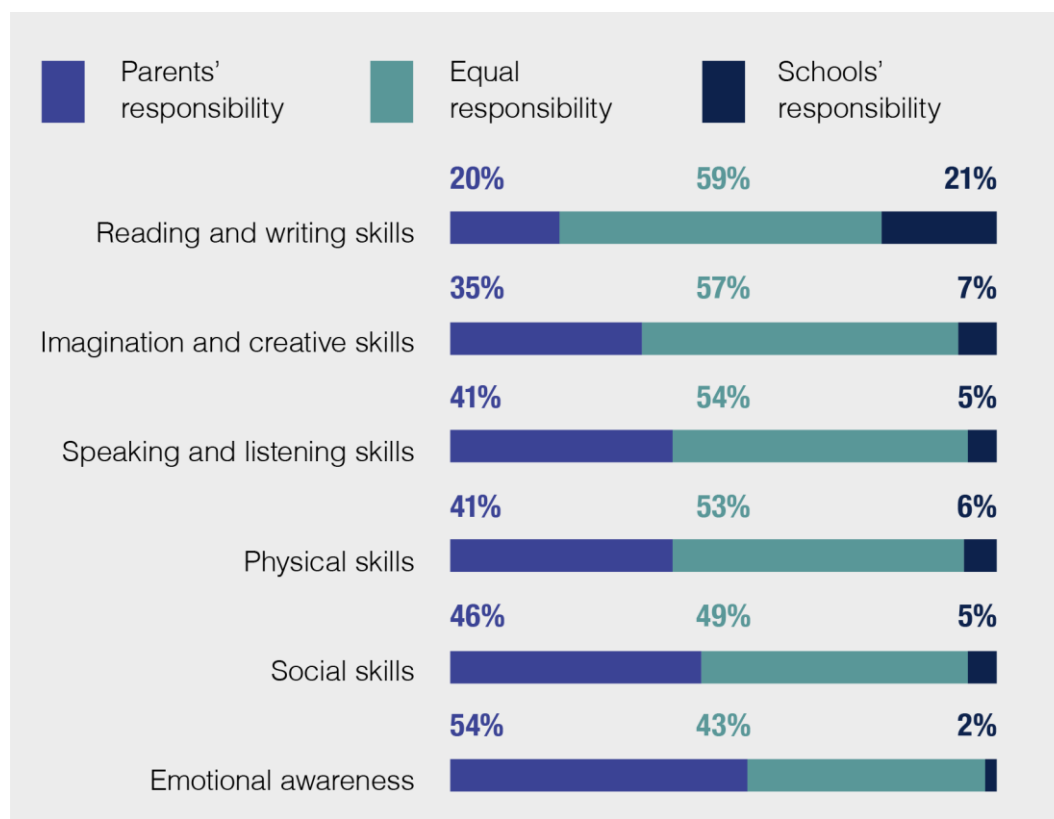
Across the UK, 40% of parents report that their local community has become more supportive during the COVID-19 pandemic with communities "pulling together" to support the elderly and vulnerable. However, parents living in the most deprived areas are less likely to have experienced this increased support (33%) than parents living elsewhere. Around two in three (68%) of those who have witnessed increased community support think that it will be maintained into the future.

5.4 The role of primary schools

As noted above, 53% of parents suggested that primary schools have a complementary role to play, alongside parents, in securing the lifelong health and happiness of children aged 0 to 5.

Almost six in ten parents of a 0 to 5-year-old believe that schools and parents should be equally responsible for reading and writing (59%) as well as non-core academic skills such as imagination and creativity (57%); speaking and listening (54%); and physical skills (53%). The proportion who feel schools and parents should have equal responsibility is just under half for social skills and behaviours (49%), compared with 46% who believe that parents should be mainly responsible. When it comes to emotional awareness just over two in five (43%) believe that schools and parents should have equal responsibility, but a higher proportion (54%) believe parents should be mainly responsible.

Figure 5.3: And do you think that parents or schools should be mainly responsible for...?



Source: Nationally representative face-to-face survey (December 2019 to January 2020)

Base: Base: 1,019 parents of a 0- to 5-year-old

The finding that such a large proportion of parents perceive parents and primary schools to have *equal* responsibility for developing basic skills may mean that a large proportion of parents also underestimate the importance of their own interactions with children pre-school. It may also mean that parents may be leaving activities that encourage their child's development until they are of school age. Indeed, in our conversations with parents, a tendency to rely on primary schools to instigate children's education (including reading and writing) was apparent when they start primary school.

The perception among some parents that learning does not begin until children start school combined with a tendency to focus on external, observable phenomena when assessing children's development (as seen in Chapter 2) may contribute towards a more 'passive' approach to child development in the early years in the UK. This may affect the preparedness of children for school: Government data shows over a quarter (28%) of children in England were not considered 'school-ready' with their language,

communication and literacy skills in 2018/19⁹, and this rises to over 2 in 5 (42%) in some deprived areas.

⁹ This is based on data collected by the Department for Education which shows whether children have reached a “good level of development” at the end of the Early Years Foundation Stage (EYFS). Children are defined as having reached a good level of development if they achieve at least the expected level in the early learning goals in the prime areas of learning (personal, social and emotional development; physical development; and communication and language) and the early learning goals in the specific areas of mathematics and literacy.

https://fingertips.phe.org.uk/search/school%20readiness#page/11/qid/1/pat/6/par/E12000004/ati/102/are/E06000015/cid/4/page-options/eng-vo-0_eng-do-0

6 CONCLUSIONS

There are three main themes that emerge from this research:

1. The importance of promoting education and dissemination of evidence on the primacy of the early years to parents, parents of the future and the whole of society.
2. The need to cultivate and sustain more support networks for parents to enhance their mental health and wellbeing.
3. Encouraging society as a whole be more supportive of parents, carers and families in the early years.

These are discussed in more detail below.

1. Promoting education and dissemination of evidence on the primacy of the early years to the whole of society.

- A significant proportion of UK parents of a 0 to 5-year-old (69%) underestimate the primary importance of the early years. This contrasts with the scientific evidence which is clear on the primacy of the early years in providing the foundation for both children's future development [8], and their life chances as adults. This points to the need to elevate the importance of the pregnancy and early years period in the public consciousness; not only among parents, but also among the parents of tomorrow and the whole of society.
- There is a significant gap in understanding of how rapidly the brain is developing during the most critical first two years. Reflecting findings from other research [19], this could result in **less active interaction** with children in the early years, particularly before the child starts to exhibit outward signs of development such as speaking. It may also lead to a **more 'passive' approach** to caring for children, focusing on physical needs (such as feeding and sleeping), rather than their emotional and social development.
- To **increase understanding of brain development**, we need to translate and increase accessibility of developmental science, so that parents, future parents and wider society understand the importance of active interaction with children in the 0 to 5 age group (with a particular focus on the 0 to 2 period) on the life chances of babies far beyond these first years.

2. The need to cultivate and sustain more support networks for parents to enhance their mental health and wellbeing.

- While parents generally understand the impact of their mental state on children at a superficial level (e.g. in extreme cases of abuse or neglect), it is important to raise awareness of the long-term impact of common mental health conditions (such as depression and anxiety) on children's development. It is vital to ensure parents have access to the support they need, especially those who have smaller support networks. The research indicates around a fifth of parents with children aged five and under are vulnerable due to a lack of formal or informal support networks.
- It is important to build trust in, and visibility of, sources of support that exist in communities as parents without support networks are at the greatest risk of poor mental health, which impacts on the early development of children. Parents' first ports of call for support they trust are those with whom they have a personal relationship (such as family or friends), or the NHS (GPs, health visitors, NHS website). Other potential sources of support are often not front-of-mind and non-NHS online sources are the least trusted. It is **important for online sources to have a clear association with a 'trusted' and familiar brand like the NHS, and to be promoted in a streamlined way between different services**, to engage parents.

3. Encouraging society as a whole to be more supportive of parents, carers and families in the early years.

- Most parents work hard to provide positive experiences for their children. However, parents face juggling priorities, conflicting demands on their time, stress and exhaustion. They also feel judged by others at home and in the community, primarily for their child's behaviour. Parents require support and understanding from the whole of society.
- When parents feel stressed and judged they may adapt their behaviour and relationship with their child and be more reluctant to seek support. This moderation of behaviour may impact their child(ren)'s long-term development [20]. Stress and judgement can impact parents' wellbeing and mental health, with many parents often finding themselves prioritising other things over their own mental wellbeing.
- It is important that parents feel that society as a whole supports them in bringing up their child. An environment in which parents feel able to access support is important for their own wellbeing and that of their child. Feeling that society is unsupportive can place undue pressures on parents, but also limit

the depth and range of relationships, opportunities, and (more formally) interventions that children experience.

- We also find that parents see primary schools as having an important and sometimes equal role in supporting children's development. Parents therefore need to be supported to understand the knowledge and skills that will provide their child with a good foundation for school and to be equipped to play their role in child development in the pre-school years.

Collectively these findings are intended to provoke discussion and debate. They identify key issues to address to ensure support for parents and carers to raise the next generation, and highlight an opportunity to help people understand the early years. The significance of this opportunity is not just its bearing on better outcomes for children, but its impact on health and happiness for the whole of life and for future generations.

7 REFERENCES

1. Save the Children. (2016). Lighting up young brains: How parents, carers and nurseries support children's brain development in the first five years. Save the Children. Available at:
<https://resourcecentre.savethechildren.net/library/lighting-young-brains-how-parents-carers-and-nurseries-support-childrens-brain-development>
2. Brotherson, S. (2009). Understanding Brain Development in Young Children. Bright Beginnings, NDSU Extension Service, North Dakota State University
3. Britto PR, Lye S, Proulx K, et al. (2016). Nurturing care: promoting early childhood development. *Lancet*. 389(10064). Available at:
[http://dx.doi.org/10.1016/S0140-6736\(16\)31390-3](http://dx.doi.org/10.1016/S0140-6736(16)31390-3)
4. Center on the Developing Child at Harvard University. (2009). *Maternal Depression Can Undermine the Development of Young Children: Working Paper No. 8*. Available at:
<https://developingchild.harvard.edu/resources/maternal-depression-can-undermine-the-development-of-young-children/>
5. J. Hutchinson, S. Bonetti, W., Crenna-Jennings, A & Akhal, A. (2019). *Education in England: Annual Report 2019*. Education Policy Institute. Available at: <https://epi.org.uk/publications-and-research/annual-report-2019/>
6. All Party Parliamentary Group on Speech and Language Difficulties. (2013). The links between speech, language and communication needs and social disadvantage. Available at: <https://www.rcslt.org/-/media/Project/RCSLT/all-party-parliamentary-group-on-slc-inquiry-report.pdf>
7. World Health Organisation. (2020). *Improving early childhood development: WHO guideline*. Available at:
<https://www.who.int/publications/i/item/97892400020986>
8. The Lancet. (2016). Advancing Early Childhood Development: from Science to Scale. An Executive Summary for The Lancet's Series'. Available at:
https://marlin-prod.literatumonline.com/pb-assets/Lancet/stories/series/ecd/Lancet_ECD_Executive_Summary.pdf

9. Department of Health. (2009). Healthy Child Programme: Pregnancy and the first five years. Available: <https://www.gov.uk/government/publications/healthy-child-programme-pregnancy-and-the-first-5-years-of-life>
10. The Early Intervention Foundation (2020). The EIF Guidebook. Available: <https://guidebook.eif.org.uk/>
11. Finnegan, J. (2010). *How to Talk About Children's Mental Health: A FrameWorks MessageMemo*. FrameWorks Institute. Available at: <https://www.frameworksinstitute.org/publication/how-to-talk-about-childrens-mental-health-a-frameworks-messagememo/>
12. Marmot, M., Allen, J., Boyce, T., Goldblatt, P., & Morrison, J. (2020). Health equity in England: *The Marmot Review 10 years on*. Institute of Health Equity. Available at: <https://www.health.org.uk/publications/reports/the-marmot-review-10-years-on>
13. Kendall-Taylor, N. (2010). *Experiences Get Carried Forward: How Albertans Think About Early Child Development*. FrameWorks Institute. Available at: <https://www.albertafamilywellness.org/resources/doc/experiences-get-carried-forward-how-albertans-think-about-early-child-development>
14. Karoly, L.A., Kilburn, M.R. & Cannon, J.S. (2005). *Early Childhood Interventions: Proven Results, Future Promise*. Available at: http://www.rand.org/content/dam/rand/pubs/monographs/2005/RAND_MG341.pdf
15. Bauer, A., Parsonage, M., Knapp, M., Lemmi, V., & Adelaja, B. (2014). *The costs of perinatal mental health problems*. Centre for Mental Health and London School of Economics
16. Paulson, J.F., & Bazemore, S.D. (2010). Prenatal and postpartum depression in fathers and its association with maternal depression: A meta-analysis, *The Journal of the American Medical Association*, 303(19), 1961-1969
17. World Health Organization. 2003. "Investing in Mental Health". Available at: <https://apps.who.int/iris/bitstream/handle/10665/42823/9241562579.pdf>
18. Hay D F, Pawlby S, Sharp D et al. Intellectual problems shown by 11- year-old children whose mothers had postnatal depression. *J Child Psychol Psychiatry Allied Disciplines* 2001; 42: 871–9

19. England MJ, Sim LJ. (2009). *Depression in Parents, Parenting, and Children: Opportunities to Improve Identification, Treatment, and Prevention*. National Academies Press
20. Maulik P. K., Eaton W. W., Bradshaw C. P. (2010). The effect of social networks and social support on common mental disorders following specific life events. *Acta Psychiatrica Scandinavica*, 122(2), 118–128
21. Teo A. R., Choi H., Valenstein M. (2013). Social relationships and depression: Ten-year follow-up from a nationally representative study. *PLoS ONE*, 8(4), 1–8
22. Andrea S. B., Siegel S. A., Teo A. R. (2016). Social support and health service use in depressed adults: Findings From the national health and nutrition examination survey. *General Hospital Psychiatry*, 39, 73–79
23. NHS Digital. (2020). Psychological Therapies, Annual report on the use of IAPT services, 2019-2020. Available at: <https://digital.nhs.uk/data-and-information/publications/statistical/psychological-therapies-annual-reports-on-the-use-of-iapt-services/annual-report-2019-20>
24. Clarke, B. & Younas, F. (2017). *Helping parents to parent*. Social Mobility Commission. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/592452/Helping_Parents_to_Parent_report.pdf
25. Early Intervention Foundation. (2019). *Engaging disadvantaged and vulnerable parents: An evidence review*. Available at: <https://www.eif.org.uk/report/engaging-disadvantaged-and-vulnerable-parents-an-evidence-review>
26. Gillies, V. (2005). Meeting parents' needs? Discourses of 'support' and 'inclusion' in family policy. Available at: <https://doi.org/10.1177/0261018305048968>
27. Bromley, C. and Cunningham-Burley, S. (2010). *Growing Up in Scotland: Health inequalities in the early years*. Scottish Government
28. Neece, C. L., Green, S. A. & Baker, B. L. (2012). *Parenting stress and child behavior problems: a transactional relationship across time*. *American journal on intellectual and developmental disabilities*, 117(1), 48–66. <https://doi.org/10.1352/1944-7558-117.1.48>

29. Barlow, J. & Cohen, E. (2017). The Effectiveness of Parenting Programs: A review of Campbell reviews. *The Effectiveness of Parenting Programs: A Review of Campbell Reviews*. Research on Social Work Practice. 2018;28(1):99-102. doi:10.1177/1049731517725184
30. Mushtaq, R., Shoib, S., Shah, T. & Mushtaq, S. (2014). Relationship Between Loneliness, Psychiatric Disorders and Physical Health? A Review on the Psychological Aspects of Loneliness, 8(9), doi:10.7860/JCDR/2014/10077.4828
31. International Longevity Centre UK.(2020). The 100 Year Family: *Longer lives, fewer children*. Available: <https://ilcuk.org.uk/the-100-year-family/>
32. Office for National Statistics, *Families and Households in the UK Statistical bulletins*. Available: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/families/bulletins/familiesandhouseholds/previousReleases>
33. Schout, G. & de Jong, G. (2018). *The Weakening of Kin Ties: Exploring the Need for Life-World Led Interventions*. International Journal of Environmental Research and Public Health. 15 (203). Available at: <https://doi.org/10.3390/ijerph15020203>

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