

# Growing Up In Scotland Study

# Use of Informal Support By Families With Young Children



# GROWING UP IN SCOTLAND STUDY USE OF INFORMAL SUPPORT BY FAMILIES WITH YOUNG CHILDREN

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It should be noted that since this research was commissioned a new Scottish government has been formed, which means that the report reflects commitments and strategic objectives conceived under the previous administration. The policies, strategies, objectives and commitments referred to in this report should not therefore be treated as current Government policy.

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Responsibility for the opinions expressed in this report, and for all interpretation of the data, lies solely with the authors.

### CONTENTS

EXECUTIVE SUMM	IARY	Ι
CHAPTER ONE	INTRODUCTION	3
Introduction Background About the study Format of the repor	rt	3 3 4 4
CHAPTER TWO	ATTITUDES TOWARDS SEEKING HELP AND/OR ADVICE	5
CHAPTER THREE	AVAILABILITY OF SOURCES OF INFORMAL SUPPORT	7
Friends and family	s grandparents	7 7 8 9 10 10 10
CHAPTER FOUR	USING SOURCES OF INFORMAL SUPPORT	13
Introduction Mother and child gu Informal advice dun Information on chil Information on chil Use of informal chil Index of use of informal chil	ring pregnancy d health d behaviour ldcare provision	13 13 13 14 15 16 17
CHAPTER FIVE	SUPPORT FROM THE CHILD'S GRANDPARENTS	20
CHAPTER SIX C	CONCLUSION	24
REFERENCES		26
ANNEX A -MULTI-	VARIATE ANALYSIS RESULTS	27
Description of the a Results	analysis	27 29

#### LIST OF TABLES

Table 1	Attitudes towards seeking help and/or advice by cohort
Table 2	Scaled attitudes towards seeking help by key independent variables:
	birth cohort6
Table 3	Number of adults other than respondent in the household by cohort7
Table 4	Number of child's grandparents that the family are in contact with by
	cohort8
Table 5	Proportion of grandparents that the family are in contact with by
	cohort and age of mother at birth of cohort child)9
Table 6	Scaled availability of sources of informal support by key independent variables: birth cohort
Table 7	Types of informal sources used for advice during pregnancy by cohort
	and age of mother at birth of sample child
Table 8	Types of informal sources used for information about child health by
14010 0	cohort and age of mother at birth of sample child
Table 9	Type of informal source used for information about child behaviour
	by age of mother at birth of sample child
Table 10	Scores on index of use of informal support by cohort
Table 11	Scaled use of sources of informal support by key independent
	variables: birth cohort
Table 12	Nature and frequency of support from child's grandparents by cohort
Table 13	Score on 'variety' of grandparent support index by cohort22
Table 14	Scaled use of grandparental support by key independent variables:
	birth cohort23
Table A1	Logitistic regression model detailing factors related to having most
	difficulty seeking help or support: birth cohort
Table A2	Logitistic regression model detailing factors related to low access to
	sources of informal support: birth cohort
Table A3	Logitistic regression model detailing factors related to low use of
	sources of informal support: birth cohort
Table A4	Logitistic regression model detailing factors related to receiving a
	low-level of support from the child's grandparents: birth cohort31

## **EXECUTIVE SUMMARY**

This report draws on data from the first sweep of the Growing Up in Scotland study to examine the extent to which parents with young children have access to, and draw upon, *informal* sources of support with parenting. That is, support, information and advice which is sought from and provided by family members - including spouses, partners, parents' siblings and the child's grandparents - friends, and other parents. Findings are based on the first sweep of GUS, which involved interviews with the main carers of 5,217 children aged 0-1 years old and 2,859 children aged 2-3 years old, carried out between April 2005 and March 2006.

#### Attitudes towards seeking help or advice

The vast majority of parents in both cohorts did not find it difficult to ask for help, did not have much trouble establishing who they should ask, and were not particularly concerned about the possibility of 'interference' from formal services which provide support and advice following a request to them for advice.

However, there were some small notable differences in the attitudinal data. Mothers with no qualifications and those from low-income households were more likely to agree that seeking help from professionals would result in interference, and to express difficulty with seeking help or advice than mothers with qualifications and those from higher income households. This lack of confidence in seeking help and wariness of formal intervention appeared to impact on network structure and use of informal support.

#### Availability of sources of informal support

Virtually all parents (99%) had access to some sources of informal support and many had access to a wide range of such sources.

The size and complexity of informal networks, that is the number and types of sources of informal support available to parents, varied across the sample. Generally speaking, parents in more socially disadvantaged circumstances reported more limited informal networks than their more socially advantaged peers. For example, parents in the lowest income group were over three times more likely to report low access to sources of informal support than were parents in the highest income group (36% in the lowest income group reported low access compared with 10% in the highest income group) and mothers with no educational qualifications also reported more limited networks than did those with any qualifications.

#### Using sources of informal support

Around nine out of ten parents in both samples had used an informal source for some kind of support. This ranged from providing regular childcare to information on child health or behaviour. Many parents had used several different informal sources for different purposes. For the most part, different parents - those of varying age or socio-economic circumstances for example - accessed and used informal support in very similar ways and only small differences in the extent to which informal support was *used* were evident in the data.

Those parents who reported most difficulty asking for help, and who had more limited access to informal support tended to report lower use of informal sources. However, low access did not always imply low use - a little over one-fifth of parents who had limited informal sources available were classed as high users of informal support suggesting that they received a high level of support from a more limited network.

Although having a more limited network structure, younger mothers and those on low incomes relied on and used informal support just as much as other mothers did. However, the particular composition of their networks suggests that almost all of this support was provided by a smaller number of people than in other cases, and possibly just one person in some circumstances.

#### Support from the child's grandparents

The child's grandparents were a key source of informal support. Almost all families (around 95%) in both cohorts were receiving some type of help or support from the child's grandparents and many were receiving a full range of support including regular childcare, taking the child on outings and providing financial or material support. Around one-third of families in each cohort indicated that the child's grandparents provided all, or almost all, the types of help and support considered (30% in birth cohort, 37% in child cohort).

Having a greater number of grandparents alive and having some or all of those grandparents living relatively close by, or indeed in the household, both increased the likelihood of receiving higher grandparental support. Higher use of grandparents was also evident amongst younger mothers and those on low incomes

#### Conclusion

Data from the first sweep of Growing Up in Scotland demonstrates that most families with young children are involved in often complex informal support networks. Almost all parents have access to, and make considerable use of, an informal network variously composed of friends, family and other parents for support, information and advice on a range of parenting concerns. However, there exists a small group of parents who are unsure of asking for help or advice both formally and informally, many of whom either draw heavily on a limited informal network or receive little or no informal support at all.

Future analysis of data collected at subsequent sweeps of Growing Up in Scotland will allow a more thorough examination of informal support and, through longitudinal analysis, permit exploration of how differences in the structure of informal support networks and levels of use of informal support impact on both child and parental well-being.

## CHAPTER ONE INTRODUCTION

#### Introduction

This report, which draws on data from the first sweep of the Growing Up in 1.1 Scotland study, starts from the position that in order to understand the types of formal support services that parents of young children require, the extent to which parents have access to, and draw upon, *informal* sources of support must also be understood. That is, support, information and advice which is sought from and provided by family members including spouses, partners, parents' siblings and the child's grandparents - friends, and In recognising that family and friends are normatively seen, and other parents. practically drawn upon, as sources of support by parents, despite policy and practice perceptions of a breakdown in such networks (Edwards and Gillies, 2005), it follows that parenting should be understood as being embedded in a network of supporting relationships. The report explores attitudes towards seeking help and/or advice, and examines in detail the extent and use of informal networks by parents of young children and how these vary according to key socio-demographic characteristics of the families involved. The main finding is that generally all parents have access to and make considerable use of informal support and only small differences exist across parents and families of varying characteristics.

#### Background

Families have been a policy focus for many successive government 1.2 administrations, however, in recent years, parenting has become an increasingly central focus of much family policy (Wassoff and Hill, 2002). Within this, the provision of adequate and appropriate support for parents to allow them to succeed in their childrearing responsibilities has been a particular focus. Parental and family 'support', in policy terms, has often been understood as taking the form of material benefits such as child support or income support for example. This definition has since expanded and formal support for parents now incorporates education and advice from experts, particularly in statutory/voluntary sector partnerships, with the purpose of firmly establishing an understanding of good parenting skills against a rising threat that such knowledge is disappearing in modern society (Edwards and Gillies, 2005). Notwithstanding this expansion of the forms, methods and scope of formal parental support, research has demonstrated that parents continue to rely on informal sources such as family or friends for help and advice and often turn to these sources in the first instance (Edwards and Gillies, 2004). In research with older people, access to and use of informal support has been related to individual well-being. This research indicates that network size, number of face-to-face contacts and the number of local ties are connected with greater availability of active and emotional support and further, that older people who have strong social networks are happier and more likely to perceive themselves as healthy (Wenger and Tucker, 2002). There is an argument therefore, that informal networks are not only an important source of informal support for parents but that access to and use of those networks may be connected to parental and, consequently, child wellbeing.

1.3 A key objective of the Growing Up in Scotland study (GUS) was to provide the Scottish Government with a resource for monitoring and evaluating the effectiveness of

early years/children's services policies across a range of policy sectors and including services designed to provide help, advice and support to parents. As well as collecting data on their use of formal support services such as ante-natal classes, health visitors and childcare, the first sweep of GUS also collected a range of information which allows analysis of informal support networks and the extent to which different parents have different types of networks and use them in different ways. Initially, and as demonstrated in this report, data from GUS can be used to explore the informal support networks of parents with very young children. Over time however, the collection of longitudinal data will allow detailed analysis of the impact of the structure and use of informal support networks on child outcomes across a range of domains.

#### About the study

1.4 The Growing Up in Scotland study is an important longitudinal research project aimed at tracking the lives of a cohort of Scottish children from the early years, through childhood and beyond. Its principal aim is to provide information to support policy-making, but it is also intended to be a broader resource that can be drawn on by academics, voluntary sector organisations and other interested parties. Focusing initially on a cohort of 5,217 children aged 0-1 years old and a cohort of 2,859 children aged 2-3 years old, the first sweep of fieldwork began in April 2005. This report is one of a series that provide key findings from the first sweep of the survey.

1.5 GUS is based on a cohort or longitudinal design involving the recruitment of a 'panel' of children (and their families) who will be revisited on a number of occasions over an extended period of time. Members of the panel were identified in the first instance from Child Benefit records. For the first year of the study, interviewers sought to contact the 'main carer' of the child named in the Child Benefit records. In virtually all cases (99%), this proved to be the child's natural mother. As well as information on informal support, the first interview also collected data on pregnancy, birth and early parenting, childcare, child health and development, and parental health.

#### Format of the report

1.6 This report begins by examining respondents' attitudes towards seeking help and/or advice, from both formal and informal sources of support, and how these attitudes vary by individual and household characteristics. It then moves on to explore differences in the availability of informal support resources for different sets of parents. Although the data is limited for this exploration, this section provides some insight into the extent to which parents appear to have an informal support network at their disposal and the complexity and composition of that network. The next section looks at the extent to which parents are actually using sources of informal support, in what context and for what purpose and how patterns of use, and the sources used, differ across the sample. The final section considers separately the support received exclusively from the child's grandparents.

## CHAPTER TWO ATTITUDES TOWARDS SEEKING HELP AND/OR ADVICE

2.1 In order to measure attitudes towards seeking help and/or advice, from both formal and informal sources of support and advice, respondents were asked to what extent they agreed or disagreed with a set of statements. The statements and spread of responses are displayed in Table 1.

Base: All children			
	Statement 1:	Statement 2:	Statement 3:
	"If you ask for help or advice about parenting from professionals like doctors or social workers they start interfering or trying to take over."	"It's difficult to ask people for help or advice about parenting unless you know them really well."	"It's hard to know who to ask for help or advice about being a parent."
Birth (%)			
Agree/Strongly agree Neither	9.6 22.7	25.3 12.1	22.2 14.2
Disagree/strongly disagree	67.7	62.7	63.6
Bases Weighted Unweighted	5110 5110	5210 5210	5195 5195
Child (%) Agree/Strongly agree	10.3	26.9	24.5
Neither Disagree/strongly disagree	24.4	13.5	15.6
	65.3	59.5	59.9
Bases Weighted	2791	2853	2848
Unweighted	2791	2853	2849

Table 1	Attitudes towards seeking help and/or advice by cohort
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2.2 Generally speaking, the vast majority of parents in both cohorts did not find it difficult to ask for help, did not have much trouble establishing who they should ask, and were not particularly concerned about 'interference' from formal services which provide support and advice. Parents were however, slightly less sure about the implications of taking advice from professionals than they were about the other two scenarios. Almost one-quarter of parents in both cohorts said they neither agreed nor disagreed with the first statement, whereas only around 12-16% gave this response for the other two statements. Concerns about the implications of help or advice from formal services varied by maternal education and household income: mothers with no qualifications and those from low-income households were more likely to agree that seeking help from professionals would result in interference than mothers with some qualifications and those from higher income households. This is explored more fully below.

2.3 In order to facilitate an analysis of the key drivers of positive and negative attitudes towards seeking help and/or advice, responses to the second and third statements

were scaled to create a single index indicating how easy or difficult the respondent found it to ask for help. The scale ranged from 0 (indicating the greatest ease with asking for help) to 6 (indicating the greatest difficulty). By categorising scores on the index, it was possible to classify individuals as belonging to the 'have most difficulty', 'have least difficulty' or 'intermediate' group. On the basis of a logistic regression model, the following variables were shown to have the strongest independent association with having more difficulty asking for help amongst parents in the birth cohort (Table 2)

Base: Children in the birth cohort Row percentages					
	Have least difficulty asking for help	Intermediate	Have most difficulty asking for		
			help	Be	ases
	%	%	%	Weighted	Unweighted
All	71	15	13	5191	5190
Attitudes towards help from professionals					
Concerned about interference	38	21	41	489	462
Not concerned about interference	77	15	9	3453	3492
Parity					
Sample child is first born	73	15	11	2600	2545
Had other children already	69	15	15	2591	2645
Equivalised annual household income <sup>1</sup>					
Less than £8410	59	18	23	1000	929
Between £8411 and £13,750	68	15	17	963	947
Between £13,751 and £21,785	75	14	10	845	857
Between £21,786 and £33, 571	78	14	8	980	1013
More than £33,572	79	15	6	863	916
Mother's education					
Higher grade or above	75	15	10	3706	3772
Standard grade or equivalent	66	15	18	974	937
No qualifications	52	19	29	499	469

 Table 2
 Scaled attitudes towards seeking help by key independent variables: birth cohort

2.4 The starkest distinctions occur between those respondents who were more wary of intervention by professionals and those who were less wary. Indeed the regression analysis showed this to be the strongest predictor of having difficulty asking for help. Two-fifths of those who were concerned about interference from professionals were among the group most likely to report difficulty. Not surprisingly, given their related effects on wariness of professional support, significant variance was also evident by maternal education and household income. Mothers with no qualifications and those in lower income households appear to be less comfortable asking for advice than mothers with some qualifications or those in higher income households respectively.

<sup>&</sup>lt;sup>1</sup> The income that a household needs to attain a given standard of living will depend on its size and composition. For example, a couple with dependent children will need a higher income than a single person with no children to attain the same material living standards. "Equivalisation" means adjusting a household's income for size and composition so that we can look at the incomes of all households on a comparable basis.

## CHAPTER THREE AVAILABILITY OF SOURCES OF INFORMAL SUPPORT

#### Introduction

3.1 For the purposes of this report, sources of informal support were considered to be family members - including spouses, parents' siblings and the child's grandparents - friends, and other mothers. Although the data did not specifically collect information on parental friendship networks (i.e. number of friends, closeness of relationships), information collected on household composition, the child's grandparents, and family activities, allow limited measurement of the 'availability' of informal sources to the respondent. That is, the extent to which any individual source could potentially be used by the respondent for information, advice or support.

#### Other adults in the household

3.2 Initial analysis of the data demonstrated that whilst many parents were not married or cohabiting, because they lived in a household with other adults<sup>2</sup> they were not necessarily 'lone' parents. These other adults were considered to be an important, easily accessible and immediate informal resource.

3.3 As well as the respondent, the vast majority of households in both cohorts contained just one other adult (couple households) (Table 3). In almost all (98%) of these households, the other adult was a partner or spouse of the respondent. In around one in six households in the baby cohort, and one in five in the toddler cohort, the respondent was the only adult. A small proportion of households had three or four adults including the respondent (multiple adult households). This was slightly more common in the younger cohort than in the older cohort (7.4% versus 5.8%). As well as partners or spouses of the main respondent, other adults included the child's grandparents, older siblings (of the child) and 'other' relatives (mainly aunts or uncles of the child).

Base: All sample				
	Cohort			
Number of other adults in	Birth	Child		
the household	%	%		
0	14.4	20.6		
1	78.2	73.6		
2	4.5	3.9		
3 or more	2.9	1.9		
Bases				
Weighted	5217	2858		
Unweighted	5217	2858		

Table 3Number of adults other than respondent in the household by cohort

3.4 Younger mothers were both more likely to be in a lone adult household and in a multiple adult household than older mothers were. In the birth cohort, mothers who were

<sup>&</sup>lt;sup>2</sup> Adults were classed as any individual aged 16 years or older

aged under  $20^3$  were five times more likely to live in lone adult households and almost seven times more likely to live in multiple adult households than mothers in their thirties were (35% compared with 7%, and 27% compared with 4% respectively). In the child cohort, whilst the pattern in lone adult households was similar, mothers aged under 20 were only twice as likely as those in their thirties to live in multiple adult households (12% compared with 5%).

3.5 Around one-quarter (24%) of respondents in routine or semi-routine occupations were living in lone adult households compared with 5% of those in professional occupations. The former group were also more likely than the latter to live in multiple adult households (11% compared with 3%). Patterns were similar by household income – lower income households were both more likely to be lone adult and multiple adult than higher income households were.

#### **Contact with child's grandparents**

3.6 Virtually all (99%) children in both cohorts had at least one grandparent alive. Previous analysis on GUS data, and indeed on data from other cohort studies, has increasingly shown the important part that grandparents play in the lives of their grandchildren<sup>4</sup>. For the purposes of this report, a grandparent was only considered a source of informal support if he or she was in regular contact with the family.

3.7 As may be expected, the vast majority of families in both cohorts had regular contact with at least one of the child's grandparents and many had regular contact with several grandparents (Table 4). In the birth cohort, a little over two-fifths of families were in regular contact with four of the sample child's grandparents.

Base: All children with grandparents				
Number of grandparents that family Cohort				
are in regular contact with	Birth	Child		
	%	%		
0	2.0	2.4		
1	7.6	9.4		
2	21.7	26.4		
3	25.1	23.5		
4	40.8	36.1		
5 or more	2.7	2.2		
Bases				
Weighted	5204	2841		
Unweighted	5204	2841		

Table 4	Number of child's	grandparents that the	e family are in contac	t with by cohort
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3.8 Children with younger mothers, despite having more grandparents alive, were less likely than those with older mothers to be in contact with *all* of their grandparents (Table 5). In the baby cohort, around three-quarters (75%) of mothers aged 40 or older were in contact with all of the child's grandparents compared with a little over half of mothers (55%) aged under 20. The higher incidence of lone parent households amongst the younger age groups, and the often poor relations between both natural parents, is likely to

<sup>&</sup>lt;sup>3</sup> At the time of the sample child's birth

<sup>&</sup>lt;sup>4</sup> For further detail on grandparents of children in the GUS study see Anderson *et al* (2007)

explain much of the lack of contact between a child and one set of grandparents in these cases.

Base: All children with grandparents					
		Age of mother at birth			
Proportion of grandparents that	Under 20	20 to 29	30 to 39	40 or older	
family are in regular contact with	%	%	%	%	
Birth					
All	55.1	67.4	77.8	74.6	
Some	43.6	31.4	20.7	19.6	
None	1.4	1.2	1.5	5.8	
Bases					
Weighted	402	2182	2423	170	
Unweighted	348	2090	2555	183	
Child					
All	47.1	64.6	76.0	79.2	
Some	52.4	33.5	22.0	18.6	
None	0.4	1.9	2.0	2.2	
Bases					
Weighted	213	1205	1335	70	
Unweighted	182	1143	1417	80	

# Table 5Proportion of grandparents that the family are in contact with by cohort and age<br/>of mother at birth of cohort child)

#### Proximity of child's grandparents

3.9 On studying factors which affected the frequency of contact between grandparents and grandchild, Uhlenberg and Hammill (1998) found geographic proximity to be the strongest predictor of such contact. The data above showed that around one-third of mothers aged under 20 actually lived with at least one of the child's grandparents. Whilst this is an occurrence mainly restricted to younger mothers, many families did have grandparents who lived nearby. Grandparents in these cases can, theoretically, more easily provide important and regular additional forms of support to parents, particularly in terms of regular childcare, than grandparents who are more geographically remote.

3.10 Around 85% of families in both samples reported that at least one of the child's grandparents lived locally, that is, within a 20-30 minute drive. For a little over two-fifths of families, three or four grandparents lived locally (birth cohort 45%, child cohort 42%). This meant that approximately half of all children in both cohorts had all of their grandparents living locally.

3.11 The likelihood of having grandparents living locally decreased as mother's age increased. In the birth cohort, a little over two-thirds of mothers aged 40 or older reported that none of the child's grandparents lived nearby compared with just one in ten mothers in their twenties. For a little over half of mothers under 20 (53%) and of mothers in their twenties (51%) all of the child's grandparents lived locally. This was slightly less common for mothers in their thirties (46%) and significantly less so for mothers aged 40 or older (12%).

#### Friends and family with medical knowledge or training

3.12 Previous analysis of the GUS data has indicated child health and illness is a significant concern for many parents of young children (Anderson *et al*, 2007). Having a friend or family member who has medical knowledge or training, and being comfortable asking for advice from that person, can be an extremely useful resource for parents.

3.13 In both cohorts, just under half (46%) of all parents reported having a friend or family member with medical knowledge or training from whom they would feel comfortable asking for informal advice. Mothers with higher educational qualifications were more likely to have access to this resource. Around half with a qualification at Higher grade or above reported knowing someone with medical knowledge or training compared with 37% of those with standard grades and 24% of those with no qualifications. Associations of this nature were also more commonly reported by older mothers than by younger mothers. In the child cohort, around half of mothers in their thirties and mothers aged 40 or older said they knew someone with medical knowledge compared with 37% of mothers aged under 20.

#### Friends and family with young children

3.14 Friends and family, especially those who also have young children, are a valuable source of informal advice on and support with parenting. Whilst the sweep 1 dataset does not contain a direct measure of the existence or size of the respondent's friendship group, and the extent to which their friends have children, the interview with parents in the child cohort asked how often the sample child was taken to visit friends or family with young children. This information was used as a proxy measure of the availability of friends and family with young children as an informal resource.

3.15 Almost all parents (93%) said they took their child to visit friends or family with young children. The prevalence of this activity was generally high amongst all groups across the sample although there was some variation by maternal age for example, with older mothers more likely to go visiting than younger mothers were (96% of those aged 40 or older compared with 83% aged under 20). On the other hand, younger mothers visited friends or family on a more frequent basis than older mothers did.

#### Index of availability of informal support

3.16 Thus far it is clear that the availability of and access to different sources of informal support varies by a number of key household and individual characteristics. To obtain a sense of how, overall, access to sources of informal support varies by these same groups, each question was converted to a binary variable which indicated whether or not a particular source was 'available' to the parent. The scores from each of these variables were combined to give an overall score between 0 and 4 for parents in the birth cohort, and 0 and 5 for the toddlers' parents. Respondents were then separated into three groups according to their score on the index indicating a low, medium or high level of access to informal support. Logistic regression was undertaken to more visibly identify the key

characteristics determining whether or not a parent fell into the low access group. Table 6 displays scaled results by significant independent variables from the regression.<sup>5</sup>

Table 6	Scaled availability of sources of informal support by key independent variables:
	birth cohort

Base: Children in the birth cohort Row percentages					
	Low access/ availability	Medium access/	High access/ availability		, percentages
	5	availability	<u>,</u>	Be	ases
	%	%	%	Weighted	Unweighted
All	17	50	33	5205	5205
Attitudes towards seeking help and/or advice					
Least difficulty asking for help	15	50	35	3692	3723
Intermediate	19	54	28	799	787
Most difficulty asking for help	24	49	26	689	668
Equivalised annual household income					
Less than £8410	36	47	17	1000	929
Between £8411 and £13,750	18	52	30	969	953
Between £13,751 and £21,785	11	52	37	846	858
Between £21,786 and £33, 571	9	50	41	980	1013
More than £33,572	10	49	41	866	919
Mother's education					
No qualifications	36	50	14	<i>49</i> 8	468
Standard grade or equivalent	21	53	26	974	937
Higher grade or above	13	50	37	3720	3787
Mother's employment					
Unemployed	25	51	25	2179	2111
Employed part-time	11	50	39	2229	2274
Employed full-time	11	51	39	790	813
Age of mother at birth of sample child					
Under 20	24	53	23	404	350
20 - 29	18	50	32	2186	2094
30 - 39	14	51	36	2438	2571
40 or older	26	43	31	176	189
Area deprivation					
Living in one of the 15% most deprived					
datazones	29	48	23	961	860
Not living in one of the 15% most deprived					
datazones	14	51	35	4244	4345

3.17 In general, the data indicates that virtually all parents have access to some form of informal network, less than 1% of parents had no access and many reported availability of all the sources considered. However, there was some notable variation across the sample indicating a more limited informal network amongst more socially disadvantaged parents. For example, low household income was a particularly powerful predictor of belonging to the 'low access' group. Maternal education was also significant – mothers with no qualifications were significantly more likely than those with any qualifications to be in the low access group. Smaller, but statistically significant, variations also existed by mother's employment and area deprivation with unemployed mothers and those living in more deprived areas more likely to be in the low access group.

<sup>&</sup>lt;sup>5</sup> See Table A2 in Appendix A for the results of the regression

3.18 Only small differences were evident between the cohorts. Whilst household income and mother's employment status remain prominent, difficulty seeking help was found to be weakly related to low access in the child cohort but neither area deprivation nor maternal age were significant predictors in the older cohort model.

# CHAPTER FOUR USING SOURCES OF INFORMAL SUPPORT

#### Introduction

4.1. Having access to various sources of informal support does not imply that those sources were necessarily used nor does it provide any information on the *nature* of the support for which the various sources were used. To examine the extent to which parents actually used informal sources for support, and the type of support provided, a further set of variables were considered. As the questionnaire contained a discrete section on the specific support offered by the child's grandparents, these variables are considered separately in chapter five.

#### Mother and child groups

4.2 Informal mother and child groups are common throughout Scotland, and the rest of the UK, existing in some form in most localities. Often attached to community centres, churches or other neighbourhood hubs, these groups provide space and resources for children to play and allow mothers access to other mothers as an informal resource.

4.3 Around four out of ten respondents in both cohorts said they had attended a parent and child group in the last year with attendance slightly higher amongst parents in the older cohort (39% in the birth cohort, 43% in the child cohort). Attendance was also higher among mothers from couple families and older mothers than among lone mothers and younger mothers. In the child cohort, for example, 47% of mothers in couple families said they had attended such a group compared with 29% of lone mothers and 47% of mothers in their thirties had attended a group compared with 28% of mothers aged under 20.

4.4 The most common reason given for not using such groups by parents in both cohorts was lack of time – this was mentioned by around a third of those who had not attended classes. Over one in ten said it was because there were no classes available or accessible to them. Many parents simply did not want to attend and a significant proportion either felt shy or awkward about attending or said they did not like groups. These latter sentiments were most common among lone parents, younger mothers and first-time mothers.

#### Informal advice during pregnancy

4.5 Pregnancy is a period during which expectant mothers seek the answers to many questions. Respondents were asked what sources of information they had used when they had any questions or concerns whilst pregnant. Although formal services delivered via health professionals such as GPs or Midwives emerged as the main source of this information, two of the response categories - 'friends and family' and 'other mothers' - referred to informal sources.

4.6 Virtually all mothers in both cohorts (98%) had sought advice or information during their pregnancy and around three-quarters had used at least one informal source.

Family or friends were a more popular resource than 'other mothers'; 69% of all mothers and 95% of those who had used any informal source reported using family or friends compared with 29% and 40% who had used other mothers.

4.7 Despite there being little difference in the propensity of different mothers to have sought advice during their pregnancy, younger mothers were significantly more likely than older mothers to have used *informal* sources for advice. In the birth cohort, 85% of mothers aged under 20 had used at least one informal source compared with 70% of mothers in their thirties and 60% of those aged 40 or older.

4.8 Although more likely to use informal support generally during pregnancy, younger mothers were in fact less likely to use 'other mothers' as a resource than older mothers were (Table 7). In both samples, around half of mothers aged forty or older had used other mothers for advice during pregnancy compared with only a quarter of mothers in their teens.

Base: All parents who had used an informal source of advice during pregnancy						
		Age of mother at birth				
Type of informal source used	Under 20	20 to 29	30 to 39	40 or older		
	%	%	%	%		
Birth						
Family or friends	96.6	96.3	93.7	92.2		
Other mothers	26.3	34.6	47.8	52.0		
Both	23	31	42	44		
Bases						
Weighted	342	1649	1702	105		
Unweighted	297	1582	1797	111		
Child						
Family or friends	98.9	96.3	93.4	90.7		
Other mothers	23.1	35.1	48.9	50.7		
Both	22	31	42	41		
Bases						
Weighted	174	924	973	34		
Unweighted	150	874	1029	40		

Table 7Types of informal sources used for advice during pregnancy by cohort and age of<br/>mother at birth of sample child

4.9 Some small but significant differences were evident across other sub-groups reflecting the trends evident in the access to informal support index. In both cohorts, likelihood of using informal sources of advice during pregnancy increased with household income and with socio-economic classification. Likewise, use of informal sources in this context was higher amongst respondents who lived in areas of low deprivation compared with those living in areas of high deprivation.

#### Information on child health

4.10. The majority of parents in both cohorts reported having some concerns about the sample child's health and almost all (89% overall) said they had consulted at least one person or service for information or advice on the cohort child's health. Parents in the birth cohort were slightly more likely to have had sought health advice about their child than parents in the child cohort were.

4.11 Again, the principal sources of information were health professionals. However, parents could also indicate the extent to which they had used any informal sources. These could be the respondent's (or their partner's) parents or grandparents, other friends or family with children and other parents.

4.12 Overall, use of any informal source for help or advice about child health concerns was less common than using informal sources for pregnancy-related queries. A little over half of respondents in the child sample (51%) and just under six out of ten in the birth sample (58%) said they had used at least one informal source and most had used only one or two sources. The respondent's parents were the most common informal source cited whereas grandparents of the respondent or partner were least likely to have been used.

4.13 Although maternal age did not impact on the extent to which parents had a concern about their child's health, mothers in the younger age groups were more likely to have used an informal resource in this context than were older mothers. There were also differences in the particular sources used by mothers of different ages matching those seen in chapter 3 (Table 8). Younger mothers again placed greater emphasis on kin sources whereas older mothers drew support from a broader network which was significantly more likely to include other friends or family with children and other parents.

Base: All parents who had used an informal source for information on child health					
		Age of mo	ther at birth		
Type of informal source used	Under 20	20 to 29	30 to 39	40 or older	
	%	%	%	%	
Birth					
Own parents	87.6	83.2	71.0	48.5	
Other parents	6.9	10.2	15.2	15.2	
Other friends and family with					
children	24.4	34.3	53.1	66.7	
Bases					
Weighted	271	1330	1331	84	
Unweighted	237	1275	1413	89	
Child					
Own parents	84.8	80.1	66.0	42.0	
Other parents	4.2	7.5	13.2	13.5	
Other friends and family with					
children	22.1	33.8	53.2	65.3	
Bases					
Weighted	130	656	635	24	
Unweighted	112	625	673	28	

Table 8Types of informal sources used for information about child health by cohort and<br/>age of mother at birth of sample child

#### Information on child behaviour

4.14 As well as sources of information on child health concerns, parents of children in the child cohort were asked who they had turned to with concerns about their child's behaviour. In general, this type of concern was less common than those about health. Half of toddlers' parents reported seeking information about a behavioural matter with most of these having used only one source, although a small proportion had used two or three sources.

4.15 Unlike health concerns, the principal sources of information on child behaviour were informal rather than formal. Overall, around 37% of respondents in the child cohort had used at least one informal source for information about their child's behaviour. Almost one-quarter (24%) had consulted their own parents and one-fifth had spoken to other friends or family with children. This compares with 18% who had spoken to a health visitor and just 6% who spoke to a GP.

4.16 In contrast to concerns about health, maternal age did appear to impact on the likelihood of having a behavioural concern with older mothers less likely to report they sought information or advice than younger mothers were. However, patterns in the types of informal sources used for advice on child behaviour by maternal age were similar to those seen in relation to sources of info on child health. That is, younger mothers relied more on their own parents and less on other friends and family with children than did older mothers (Table 9).

Base: All parents in the child cohort who had used an informal source for info on child behaviour						
		Age of mo	ther at birth			
Type of informal source used	Under 20	20 to 29	30 to 39	40 or older		
	%	%	%	%		
Own parents	58.6	52.8	41.6	23.9		
Other parents	4.7	8.0	11.3	6.6		
Other friends and family with						
children	19.0	31.0	51.3	55.2		
Bases						
Weighted	111	641	649	26		
Unweighted	96	614	687	30		

Table 9Type of informal source used for information about child behaviour by age of<br/>mother at birth of sample child

4.17 Household income did not affect whether or not a parent had sought information on their child's behaviour but it did appear to influence use of informal sources. Parents in higher income households were more likely than those in lower income households to have used any informal source; 46% of parents in the highest income quartile had used an informal source in this context compared with 33% in the lowest income quartile. Respondents in higher income households also made greater use of a wider range of informal sources for advice on child behaviour. For example, they were twice as likely as those in the lowest income quartile to use other friends and family with children (57% compared with 24%).

#### Use of informal childcare provision

4.18 The provision of regular childcare by friends or family members constitute an informal resource for many parents of young children but some families rely more heavily on this type of provision than others. Childcare data was examined to identify those families most reliant on informal childcare provision. For the purposes of this paper, childcare provided by grandparents was excluded from this part of the analysis because support from grandparents, including childcare, is considered separately in the next section. As such, informal childcare was defined as that provided on a regular basis

by other relatives, an ex-spouse or partner, the child's older sibling, or a friend or neighbour.

4.19 In general, parents of children in the child cohort were more likely to be using any type of childcare than were parents of children in the birth cohort (75% compared with 60% respectively). However, parents in each cohort were just as likely to be using informal childcare provision. Around one in ten parents reported a regular arrangement with an informal provider. Amongst those families who use childcare however, slightly more in the birth cohort reported using informal provision than in the child cohort (20% compared with 16%).

4.20 Use of informal childcare varied by maternal age; in both cohorts, younger mothers, particularly those under 30, were more likely to be using informal provision than older mothers were and parents in lower income households were also more likely than those in higher income households to be doing so.

#### Index of use of informal support

4.21 A further scale was created to allow exploration of differences in the use of sources of informal support across the sample. Again, an extra item (sources of information on child's behaviour) was included for the child cohort scale. Scores for the birth cohort ranged from 0 to 4, and for the child cohort from 0 to 5.

Base: All children					
Cohort					
Birth		Child			
Score	%	Score	%		
0	11.7	0	10.0		
1	23.6	1	20.4		
2	38.4	2	28.0		
3	23.8	3	27.9		
4	2.5	4	12.1		
		5	1.6		
Bases					
Weighted	5205		2835		
Unweighted	5205		2835		

 Table 10
 Scores on index of use of informal support by cohort

4.22 The data in the table demonstrates that the vast majority of parents in both samples had used some form of informal source of support and many had used several. Parents in the older cohort were slightly more likely to have drawn on informal support than parents in the child cohort were. To further explore use of informal support, each respondent was classed as either a low, medium or high user<sup>6</sup> and a regression model was created to examine the independent effects of factors related to low use.<sup>7</sup> The key variables are summarised in Table 11.

<sup>&</sup>lt;sup>6</sup> Birth cohort: Low = 0-1, Medium = 2, High = 3-4; Child cohort: Low = 0-1, Medium = 2, High = 3-5

<sup>&</sup>lt;sup>7</sup> See Table A3 in Appendix A for the results of the regression

Table 11	Scaled use of sources of informal support by key independent variables: birth
	cohort

Base: Children in the birth cohort				Ro	w percentages
	Low use	Medium use	High use	В	ases
	%	%	%	Weighted	Unweighted
All	35	38	26	5205	5205
Attitudes towards seeking help and/or advice					
Least difficulty asking for help	33	39	29	3693	3724
Intermediate	37	39	24	799	787
Most difficulty asking for help	48	36	16	688	667
Access to sources of informal support					
Low	44	34	22	865	840
Medium	36	38	25	2622	2609
High	29	41	30	1716	1754
Parity					
Sample child is first born	23	43	35	2604	2549
Had other children already	48	34	18	2601	2656
Mother's education					
Higher grade or above	31	39	30	3719	3786
Standard grade or equivalent	40	41	19	974	937
No qualifications	56	31	12	498	468
Mother's employment					
Employed full-time	32	40	28	791	814
Employed part-time	30	39	32	2227	2272
Unemployed	42	38	20	2180	2112
Respondent NS-SEC					
Managerial/professional	28	38	34	1810	1885
Intermediate occupations	33	38	29	991	<i>99</i> 8
Small employers and own account workers	39	40	21	202	208
Lower supervisory and technical occupations	37	39	24	321	317
Routine and semi-routine	40	40	20	1602	1544
Age of mother at birth of sample child					
Under 20	29	50	21	404	350
20 - 29	34	40	27	2186	2094
30 - 39	37	36	27	2438	2571
40 or older	46	31	23	176	189
Area urban rural classification					
Urban	36	39	25	4332	4248
Rural	31	37	32	873	957

4.23 As may be expected, both attitudes towards seeking help and/or advice, and access to sources of informal support were shown to be strongly related to use of informal support. Almost half of those classified as having 'most difficulty' seeking help fell into the low use group and a little over two-fifths of parents with low access also reported low use of informal sources. However, low access did not always imply low use – a little over one-fifth of parents who had limited informal sources available were classed as high users of informal support suggesting that they received a high level of support from a more limited network. Parity and maternal education were two of the strongest independent predictors of low use of informal support in the regression model. Mothers who had previously had children, and those who had no qualifications were

significantly more likely to be in the low use group than first-time mothers and employed mothers were. Findings for the child cohort were very similar.

# CHAPTER FIVE SUPPORT FROM THE CHILD'S GRANDPARENTS

5.1 Research has repeatedly shown that grandparents are a key source of childcare for many parents and that grandparents often step into parenting roles when parents are unable to care for their children for whatever reason (Gray *et al*, 2005; Smith, 2005; Gray, 2005; Dench *et al*, 1999). Grandparents are also widely acknowledged as a key source of informal support for parents, especially for parents of young children.

5.2 This paper has already explored the extent to which grandparents are *available* as a source of informal support for families (see chapter 3). To measure the extent and type of support offered by the child's grandparents, respondents were asked a series of questions about how often the child's grandparents babysat, had the child to stay overnight, took the child out, bought toys or clothes for the child, helped out around the house and helped out financially. The results are displayed in Table 12.

	Coh	ort
	Birth	Child
Nature and frequency of support	%	%
Look after the child for an hour or more during the day		
At least once a week or more often	57.0	57.6
At least once a month	13.9	12.0
At least once every three months or less often	9.7	10.1
Never	19.5	20.4
Babysit for the child during the evening		
At least once a week or more often	18.3	18.8
At least once a month	28.4	26.9
At least once every three months or less often	23.0	26.1
Never	30.2	28.2
Have the child to stay overnight		
At least once a week or more often	12.8	13.4
At least once a month	16.0	18.7
At least once every three months or less often	20.4	27.3
Never	50.8	40.5
Take the child on outings or daytrips		
At least once a week or more often	21.8	22.2
At least once a month	17.9	22.7
At least once every three months or less often	13.9	22.6
Never	46.4	32.5
Buy toys, clothes or equipment for the child apart from on special occasions like birthdays		
At least once a week or more often	23.2	21.3
At least once a month	40.4	36.6
At least once every three months or less often	26.1	28.3
Never	10.2	13.8
Help out around the house – for example by cooking, cleaning or doing DIY	10.2	15.0
At least once a week or more often	17.7	15.6
At least once a month	11.3	8.1
At least once every three months or less often	11.5	17.5
Never	56.0	58.8
Help out financially in some other way	50.0	50.0
At least once a week or more often	6.5	5.6
At least once a month	9.9	9.1
At least once every three months or less often	9.9 24.4	25.0
Never	24.4 59.2	23.0 60.2
Bases	37.2	00.2
	5203	2840
Weighted Umweighted		2840 2840
Unweighted	5203	2840

#### Table 12Nature and frequency of support from child's grandparents by cohort

5.3 To allow a broader examination of how the level of support from grandparents varied across the sample, each item was converted into a binary variable<sup>8</sup> and all items added together to give an overall index of the 'variety' of grandparental support. A higher score on the index indicated that grandparents offered a wider *range* of support. Scores on the index ranged from a potential minimum of 0 to a potential maximum of 7. The spread of scores by cohort is illustrated in Table 13.

<sup>&</sup>lt;sup>8</sup> Indicating whether or not the particular support was provided by a grandparent, on any basis

Base: All children					
	Sample Type				
Score	Birth	Child			
	%	%			
0	5.1	6.5			
1	6.3	5.6			
2	8.3	6.5			
3	11.4	8.6			
4	16.5	12.9			
5	22.6	23.1			
6	17.3	23.9			
7	12.5	12.9			
Bases					
Weighted	5179	2823			
Unweighted	5180	2825			

 Table 13
 Score on 'variety' of grandparent support index by cohort

5.4 Scores on the index show that almost all families in both cohorts were receiving some type of help or support from the child's grandparents and many were receiving the full range of support. Around one-third of families in each cohort scored 6 or 7 on the scale indicating that the child's grandparents provided all, or almost all, types of help and support considered (30% in birth cohort, 37% in child cohort).

5.5 To examine more closely any significant variance in the levels of grandparental support used by different families, respondents were separated into three groups according to their score on the index indicating a low (score 0-2), medium (score 3-5) or high (score 6 or 7) level of support provided by grandparents. Logistic regression was then undertaken to explore factors which influenced both a high and low level of support from the child's grandparents. Table 14 summarises the key independent variables which emerged from the regression.<sup>9</sup>

<sup>&</sup>lt;sup>9</sup> See Table A4 in Appendix A for the results of the regression

Base: Children in the birth cohort				Ro	w percentages		
	Low use	Medium use	High use	e Bases			
	%	%	%	Weighted	Unweighted		
All	20	51	30	5179	5180		
No. of grandparents alive							
Up to 2	40	41	19	701	705		
3 or 4	17	52	31	4256	4254		
More than 4	12	53	36	223	221		
Proximity of grandparents							
All grandparents live within 30 mins	13	52	35	2484	2463		
Some grandparents live within 30 mins	17	54	29	1909	1902		
No grandparents live within 30 mins	43	40	17	754	781		
Grandparents in the household							
No grandparents in household	21	52	27	4856	4884		
At least one grandparent in household	2	25	73	323	296		
Number of adults in the household							
Single adult household	19	43	38	744	692		
Multiple adult household	20	52	28	4435	4488		
Parity							
Sample child is first born	14	50	36	2589	2535		
Had other children already	25	51	24	2591	2645		
Equivalised annual household income							
Less than £8410	21	41	38	986	916		
Between £8411 and £13,750	25	49	27	966	950		
Between £13,751 and £21,785	17	51	31	843	855		
Between £21,786 and £33, 571	16	57	27	978	1011		
More than £33,572	16	58	26	866	919		
Mother's education							
Higher grade or above	18	53	29	3705	3772		
Standard grade or equivalent	18	47	35	970	933		
No qualifications	36	42	22	493	464		
Mother's employment							
Employed full-time	19	53	28	788	811		
Employed part-time	14	54	33	2220	2265		
Unemployed	26	47	27	2164	2097		
Age of mother at birth of sample child							
Under 20	8	35	57	401	347		
20 - 29	15	49	36	2172	2081		
30 - 39	23	56	21	2430	2563		
40 or older	53	35	11	175	188		

 Table 14
 Scaled use of grandparental support by key independent variables: birth cohort

5.6 The results suggest that a low level of grandparental support is primarily related to three broader factors – the availability and accessibility of grandparents as a resource, the need to use grandparents as a resource, and the availability of other forms of adult support. Having a greater number of grandparents alive and having some or all of those grandparents living relatively close by, or indeed in the household, both increased the likelihood of receiving higher grandparental support. Higher use of grandparents amongst younger mothers and those on low incomes supports earlier findings from chapter four where the data indicated that child's grandparents were usually the main, and only, informal source of support for parents in these groups.

# CHAPTER SIX CONCLUSION

6.1 This report has examined data from the first sweep of Growing Up in Scotland and the data is somewhat limited in the extent to which it permits detailed exploration of the informal support networks of parents with young children. As such, the report represents an introduction to the more comprehensive examination of informal support networks that will be possible after future sweeps of data collection. Nevertheless, it does present a number of important findings about the significance and structure of informal support networks for parents with young children and how structures and patterns of use vary amongst different parents.

6.2 One important and central finding from this report supports that of other research in this area (Edwards and Gillies, 2004). That is, that rather than bringing up children in isolation, most families are involved in often complex informal support networks; almost all parents have access to and make considerable use of an informal network variously composed of friends, family and other parents for support, information and advice on a range of parenting concerns. For example, around one-third of parents in the birth cohort were classed as having high access to sources of informal support - indicating that all, or almost all, of the informal resources considered were available to them - less than one-fifth were classed as having only low access and virtually none reported that they had no access to any of the informal resources considered.

6.3 The examination of attitudes towards seeking help and/or advice indicated that groups of parents who may be described as economically disadvantaged or socially excluded, particularly in terms of a lack of educational qualifications, lack of employment, and with a lower household income, were less sure about asking for help and more wary of the implications of seeking professional help than those of more educated, economically active and affluent status. This lack of confidence in seeking help and wariness of formal intervention impacted on network structure and use of informal support.

6.4 Study of the composition of social networks, that is, the actual sources used, provided some further insight into the types of sources available to parents and identified some small but important distinctions in the types of informal support that different parents accessed. Younger mothers, those who were unemployed and those on lower incomes, for example, were shown to draw on a more limited support network, relying much more on their own parents for support than did older mothers and those with higher There is an indication in the data in fact, that mothers in the latter groups incomes. appear to draw on support largely, and in some case only, from people who are already known to them before having the child. In contrast, for those mothers in more economically advantageous situations, having a child seems to extend their social and support network so that their resources, whilst including both kin and friends, move beyond 'known' individuals to also include 'other parents' such as those they may encounter at mother and child groups for example. Indeed, the report has shown how older mothers and those in couple families were more likely to attend mother and child groups, and thus have the opportunity to extend their informal support network, than younger mothers and lone parents were.

6.5 For the most part, different parents - those of varying age or socio-economic circumstances for example - accessed and used informal support in very similar ways and only small differences in the extent to which informal support was *used* were evident in the data. Around 90% of parents in both samples had drawn on an informal source for advice or support in at least one of the situations included and many did so regularly in many circumstances. Support from the child's grandparents was also well used across the sample. Around one-third of families in each cohort scored 6 or 7 on the grandparent support index indicating that the child's grandparents provided all, or almost all, types of help and support considered.

6.6 Although having a more limited network structure, for the most part, younger mothers and those on low incomes relied on and used informal support just as much as other mothers. However, the particular composition of their networks suggests that almost all of this support is being provided by a smaller number of people than in other cases, and possibly just one person in some circumstances – most likely the respondent's mother (the child's maternal grandmother), although the data is not detailed enough to support this. Analysis of support from grandparents reinforces this; mothers in the youngest age group and in the lowest income quartile were more likely to report high grandparental support than those who were older and those with higher incomes.

6.7 Despite generally widespread use of informal support amongst all parents, there is some indication that parents who are unemployed and those with no qualifications - that is, the same groups who have most difficulty seeking help, who are most wary of formal support, and, according to previous research (Anderson *et al*, 2007), are less likely to be using formal support - are also less likely to be drawing on informal support. It is arguably these socially excluded parents, with a more *limited* support network at their disposal, who in fact require higher levels of support in order to ensure that the barriers caused by unemployment, low income and lack of education are overcome and the child involved reaches his or her full potential. In policy terms therefore, there is a case for considering appropriate and targeted initiatives which aim to compensate for the support deficit that these parents experience. This is particularly challenging because of the observed wariness of formal intervention among these parents and their dislike of support delivered in traditional formats (such as ante-natal classes) suggesting the need for consideration of more innovative and less obvious formal services.

6.8 Subsequent sweeps of Growing Up in Scotland have collected further and more detailed information on the composition and use of informal networks by parents of young children. When this data is available, further analysis will allow a more thorough examination of informal support and, through longitudinal analysis, permit exploration of how differences in the structure of informal support networks and levels of use of informal support impact on both child and parental well-being.

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# ANNEX A – MULTI-VARIATE ANALYSIS RESULTS

#### **Description of the analysis**

The fact that there is a relationship between key independent variables such as income levels, age of mother at birth of sample child, and level of mother's education, means that it is difficult to establish the key drivers of differences in the observations contained in simple bivariate analysis. For example, is the relationship between age of mother and use of grandparental support simply a function of the fact that younger mothers are more likely to live with grandparents? By using multivariate analysis (logistic regression) to look at the impact of a number of variables simultaneously on people's use of grandparental support, for example, we can find out whether the circumstances of younger mothers are distinct once other factors, such as living with a grandparent, are controlled. The results of these analyses are presented in the following tables.

All of the regression models included the following independent variables: parity, household income, mother's educational qualifications, mother's employment, respondent NS-SEC, age of mother at birth of sample child, area deprivation (whether or not family resided in an area within the 15% most deprived datazones) and area urbanrural classification (urban or rural according to a grouped version of the Scottish Executive 6-fold classification). Further, this technique requires that the outcome variable of interest has two-categories therefore for each model, each case was coded to reflect whether or not they fell into the category of interest.

The regression results are presented as odds ratios for each independent variable, all of which have a significance value and 95% confidence intervals attached. Odds ratios estimate the effect of each individual independent variable on the dependent variables, adjusted for all other independent variables in the model. Logistic regression compares the odds of a reference category (shown in the tables in brackets) with that of the other categories. An odds ratio of greater than one indicates that the group in question is more likely to have this view or demonstrate this characteristic than is the chosen reference category, an odds ratio of less than one means they are less likely. For example, Table A1 shows that the odds of people with no formal qualifications being amongst the group of people most likely to find it difficult to ask for help or advice, are twice as large as for people with qualifications at Higher grade or above.

As well as significance scores, odds ratios and confidence intervals, the regression tables display the results of two statistical tests carried out with the regression analysis which help to evaluate how well the models predicted the outcome variable – Nagelkerke's  $R^2$  and Hosmer and Lemeshow's Goodness of Fit test. Nagelkerke's  $R^2$  is most often quoted in logistic regression as a measure of strength of association ranging from 0 to 1. The closer the  $R^2$  value is to 1, the better the model is at accurately predicting the value of the outcome variable. A value closer to 0, suggests that there are important explanatory factors which are not included in the model. If the result of the Hosmer and Lemeshow Goodness of Fit test is not significant (p>0.05) the model's prediction of the outcome variable and the model is predicting the dependent variable well, or has 'good fit'. Further notes on the regression analysis are included in Appendix A.

0.1 Analysis of data from each of the Growing Up in Scotland cohorts must be undertaken separately (because together the cohorts do not represent a coherent or real population and results would be misleading). For the purposes of space and simplicity, all analysis in this report uses only data collected from natural mothers in the birth cohort. Larger numbers in the birth cohort also allow more detailed analysis of the selected subgroups.

#### Results

Table A1	Logitistic regression model detailing factors related to having most difficulty
	seeking help or support: birth cohort

Variable	Category	Significance	Odds	95%	C.I.
			ratio	Lower	Upper
Attitudes towards help from	(Concerned about interference)				
professionals	Neither concerned nor unconcerned	<.001	0.37	0.28	0.50
	Not concerned about interference	<.001	0.21	0.16	0.28
Parity	(Sample child is first child)				
	Had child(ren) before sample child	<.001	1.33	1.09	1.62
Equivalised annual	(Less than £8410)				
household income	Between £8411 and £13,750	0.43	0.90	0.69	1.17
	Between £13,751 and £21,785	0.06	0.73	0.53	1.01
	Between £21,786 and £33, 571	< 0.01	0.58	0.41	0.81
	More than £33,572	< 0.01	0.48	0.33	0.70
Mother's education	(Higher grade or above)				
	Standard grade or equivalent	0.01	1.35	1.06	1.72
	No qualifications	< 0.01	1.95	1.43	2.65
			Nagelke	erke's $R^2$	0.132
		Hosme	Hosmer & Lemeshow test		

 Table A2
 Logitistic regression model detailing factors related to low access to sources of informal support: birth cohort

Variable	Category	Significance	Odds	95%	C.I.
			ratio	Lower	Upper
Attitudes towards seeking	(Least difficulty seeking help)				
help and/or advice	Intermediate group	0.15	1.18	0.94	1.49
	Most difficulty seeking help	0.02	1.34	1.05	1.70
Equivalised annual	(Less than £8410)				
household income	Between £8411 and £13,750	< 0.01	0.45	0.35	0.57
	Between £13,751 and £21,785	< 0.01	0.34	0.26	0.46
	Between £21,786 and £33, 571	< 0.01	0.30	0.22	0.41
	More than £33,572	< 0.01	0.35	0.25	0.48
Mother's education	(Higher grade or above)				
	Standard grade or equivalent	0.16	1.17	0.94	1.46
	No qualifications	< 0.01	1.82	1.37	2.41
Mother's employment	(Employed full-time)				
	Employed part-time	0.48	0.90	0.68	1.20
	Not employed	0.01	1.51	1.13	2.02
Age of mother at sample	(Under 20)				
child's birth	20 - 29	0.11	1.32	0.94	1.84
	30 - 39	0.02	1.52	1.07	2.17
	40 or older	0.00	3.19	1.92	5.32
Area deprivation	(Not living in an area within the				
	15% most deprived datazones)				
	Living in an area within the 15%				
	most deprived datazones	0.00	1.57	1.27	1.93
			Nagelker		0.132
		Hosme	r & Lemesh	ow test	0.399

Variable	Category	Significance	Odds	95%	C.I.
			ratio	95% Lower 0.80 0.60 0.93 1.17 2.59 0.97 1.47 1.08 0.95 1.04 1.17 0.61 0.73 0.82 1.01 1.30 0.65 erke's R <sup>2</sup>	Upper
Availability of informal	(Low)				
support	Medium	.722	0.97	0.80	1.17
	High	.005	0.74	0.60	0.91
Attitudes towards seeking	(Least difficulty seeking help)				
help and/or advice	Intermediate group	.219	1.12	0.93	1.35
	Most difficulty seeking help	<.001	1.43	1.17	1.75
Parity	(Sample child is first child)				
	Having more than one child	<.001	2.99	2.59	3.46
Mother's education level	(Higher grade or above)				
	Standard grade or equivalent	.108	1.16	0.97	1.40
	No qualifications	<.001	1.92	1.47	2.51
NS-SEC	(Professional or managerial)				
	Intermediate occupations	0.01	1.31	1.08	1.58
	Small employers and own account				
	workers	0.10	1.33	0.95	1.87
	Lower supervisory and technical				
	occupations	0.03	1.38		1.84
	Routine and semi-routine	0.00	1.42	1.17	1.73
Mother's employment	(Employed full-time)				
	Employed part-time	.004	0.75	0.61	0.91
	Not employed	.340	0.90	0.73	1.12
Age of mother at sample	(Under 20)				
child's birth	20 - 29	.456	1.13	0.82	1.55
	30 - 39	.043	1.41	1.01	1.97
	40 or older	.002	2.07	1.30	3.31
Urban Rural classification	(Living in an urban area)				
	Living in a rural area	.007	0.78		0.93
			Nagelk	erke's R <sup>2</sup>	0.138
		Hosme	er & Lemes	show test	0.074

# Table A3 Logitistic regression model detailing factors related to low use of sources of informal support: birth cohort

Variable	Category	Significance	Odds ratio	95% C.I.	
				Upper	Lower
No. of grandparents alive	(Up to 2 grandparents alive)				
	Having 3 or 4 grandparents alive	<.001	0.42	0.33	0.53
	Having more than 4 grandparents				
	alive	<.001	0.32	0.19	0.53
Proximity of grandparents	(All grandparents live within 30 minutes drive)				
	Some grandparents live within 30 minutes drive	<.001	1.63	1.32	1.98
	No grandparents live within 30 minutes drive	<.001	4.99	3.94	6.22
Grandparents in household	(Not living with any of the child's grandparents)				
	Living with at least one of the child's grandparent(s)	<.001	0.10	0.04	0.27
Attitudes towards help-	(Least difficulty seeking help)	<.001	0.10	0.04	0.27
seeking	Intermediate group	.080	1.23	0.99	1.57
	Most difficulty seeking help	<.001	1.23	1.25	2.05
Number of adults in	(Being in a lone adult household)	<.001	1.50	1.25	2.03
household	Being in a multiple adult household	.001	1.45	1.09	1.93
Parity	(Sample child is first child)	.001	1.45	1.07	1.75
	Having more than one child	<.001	1.34	1.11	1.60
Equivalised annual	(Less than £8410)	<.001	1.54	1.11	1.00
household income	Between £8411 and £13,750	0.63	1.07	0.81	1.42
	Between £13,751 and £21,785	0.05	0.79	0.57	1.42
	Between £21,786 and £33, 571	0.00	0.75	0.40	0.78
	More than £33,572	0.00	0.30	0.34	0.76
Mother's education level	(Higher grade or above)	0.00	0.47	0.54	0.07
	Standard grade or equivalent	0.04	1.28	1.01	1.62
	No qualifications	0.00	2.05	1.50	2.80
Mother's employment	(Employed full-time)	0.00	2.05	1.50	2.00
	Employed part-time	<.001	0.63	0.51	0.84
	Not employed	.693	1.05	0.81	1.38
Age of mother at sample	(Under 20)	.075	1.00	0.01	1.50
child's birth	20 - 29	.003	1.85	1.08	3.18
	30 - 39	<.001	3.44	1.98	5.99
	40 or older	<.001	9.88	5.12	19.09
Area deprivation	(Not living in an area within the		2.00	5.12	17.07
	15% most deprived datazones)				
	Living in an area within the 15%	0.04	1.00	1.02	1.65
	most deprived datazones	0.04	1.29	1.02	1.65
		<b>11</b>		$erke's R^2$	0.228
		HOSM	er & Lemes	now test	0.503

# Table A4Logitistic regression model detailing factors related to receiving a low-level of<br/>support from the child's grandparents: birth cohort

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