



**Poverty, parenting and  
poor health: comparing  
early years' experiences in  
Scotland, England and  
three city regions**

SUMMARY

- Given the proven links between individuals' early years experiences and subsequent adult health-related outcomes, it has been hypothesised that Scotland's 'excess' levels of poor health compared with the rest of the UK, and in particular Glasgow's excess mortality compared with other, similarly deprived, English cities, may be attributable in part to more negative experiences in childhood in Scotland.
- This project sought to explore this suggestion through detailed analysis of data collected from four cohort studies of children, born in Britain in 1946, 1958, 1970 and 2000, and supplemented by analyses of routine data and other large scale surveys. Analyses were carried out for Scotland, England and three relevant 'city-regions': Glasgow and the Clyde Valley (GCV), Merseyside, and Greater Manchester.
- Analyses focused on four key areas of investigation: social and material circumstances; dysfunctional households; maternal and child health; and parenting.
- Few clear differences in both contemporary and historic childhood and early years' experiences were apparent. On almost all measures of the above four headings, very similar profiles emerged for Scotland and England, and for Glasgow and the Clyde Valley (GCV) and the English city-regions.
- For some measures of the 'dysfunctional households' category (e.g. parental substance misuse, parental imprisonment, domestic violence, and looked after children), data limitations meant the picture was unclear: further research would be beneficial.
- In summary, although early years experiences are a topic of huge importance for population health, the available evidence suggests it is an unlikely explanation for the excess levels of mortality seen in Scotland, and particular parts of Scotland, compared with elsewhere in the UK.

## INTRODUCTION

Early years' and childhood experiences can have profound and long-lasting consequences for individuals' health. There is, therefore, considerable interest in this issue from policy-makers at a UK, Scottish and local level.

In particular, negative early years' and childhood experiences have also been proposed as a possible 'midstream' explanation for the 'excess' mortality (that is, over and above that attributable to the effects of material deprivation) seen in Scotland compared with England and Wales, and especially in Glasgow compared with similarly deprived cities such as Liverpool and Manchester.

## AIMS & PURPOSE

The aim of the project was to compare childhood and early years' experiences in Scotland and England, and in three 'city-regions' of Glasgow and the Clyde Valley (GCV), Merseyside and Greater Manchester: the latter three areas were used as proxies for the cities of Glasgow, Liverpool and Manchester to address data limitations, in particular small survey sample sizes (although some city-level data were additionally analysed). The project sought to compare not only contemporary, but also historical childhood and early years' experiences in these areas to establish whether any differences were apparent in previous decades.

## APPROACHES &amp; METHODS

This project drew on four cohort studies of children, born in Britain in 1946, 1958, 1970 and 2000, supplemented by analyses of routine data and other largescale surveys.

The four key data sources were: the 1946 MRC National Survey of Health and Development (NSHD), the 1958 National Child Development Study (NCDS), the 1970 British Cohort Study (BCS) and the Millennium Cohort Study (MCS). All four studies provided comparative data for Scotland and England, while two (NCDS, BCS) included representative samples of all three city-regions, and one (MCS) included representative samples of two of the three regions. Table 1 summarises the sample sizes and relevant geographical coverage of the four cohort studies.

**Table 1. Main studies used and sample sizes for relevant geographies.**

Study \ Area	NSHD (1946)	NCDS (1958)	BCS70 (1970)	MCS (2000)
Scotland	580	1,640	1,166	1,797
England	4,037	12,945	11,157	9,824
Merseyside	*	399	420	*
Greater Manchester	*	402	450	645
Glasgow and the Clyde Valley	*	701	377	598

*Note: Birth year of study children shown in parenthesis after study title. Sample sizes shown are maximum when child aged four (NSHD), seven (NCDS), five (BCS70) and three (MCS).*

*\* Not used due to small sample sizes.*

Drawing on the existing literature regarding the means by which early years' experiences have been shown to influence health in the UK, USA and Scotland, the report identified four key areas for investigation. These were:

- Social and material circumstances (e.g. income and poverty, maternal age and education, family structure)
- Dysfunctional households (e.g. parental drug and alcohol misuse, domestic abuse, parental discord, child neglect or abuse)
- Maternal and child health (e.g. breastfeeding, mother's physical health, mother's mental health, smoking in pregnancy)
- Parenting (e.g. parent-child relationships, parenting practices and styles, child behavioural problems).

FINDINGS & CONCLUSIONS

Few clear differences in contemporary or historical childhood and early years' experiences were apparent. On almost all measures of social and material circumstances (e.g. child poverty (Figure 1), maternal education (Figure 2), age of mother), child and maternal health (e.g. mother's malaise, mother's psychological distress (Figure 3)) and parenting (e.g. parent-child conflict, child behavioural problems), very similar profiles emerged for Scotland and England, and for GCV and the English city-regions. There was also little evidence to suggest poorer gender relations or a lack of shared parental responsibilities (e.g. father's role in upbringing of the child – Figure 4), or in aspects of child health strongly correlated with both parenting and poverty (e.g. child behavioural problems – Figure 5) in the Scottish areas.

Figure 1.

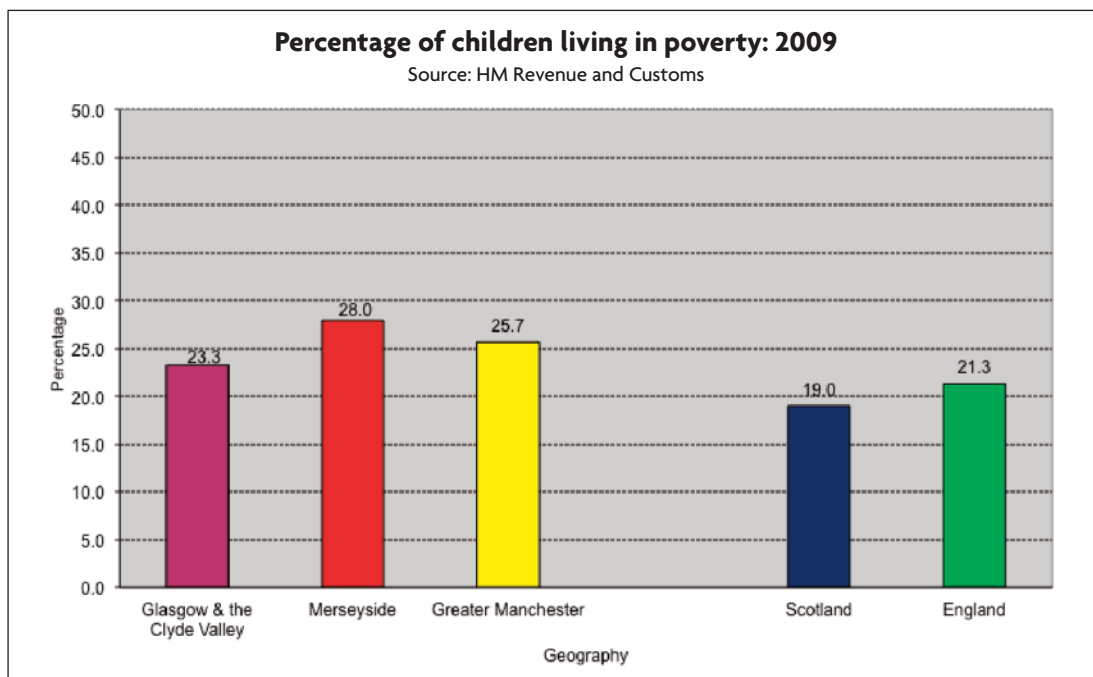


Figure 2.

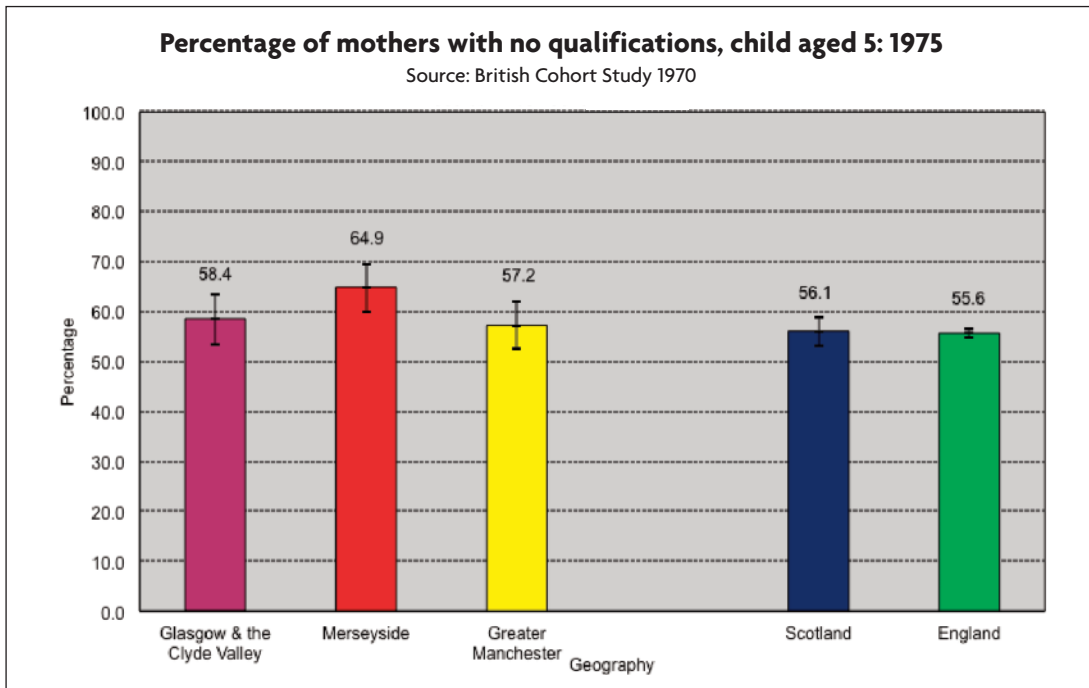


Figure 3.

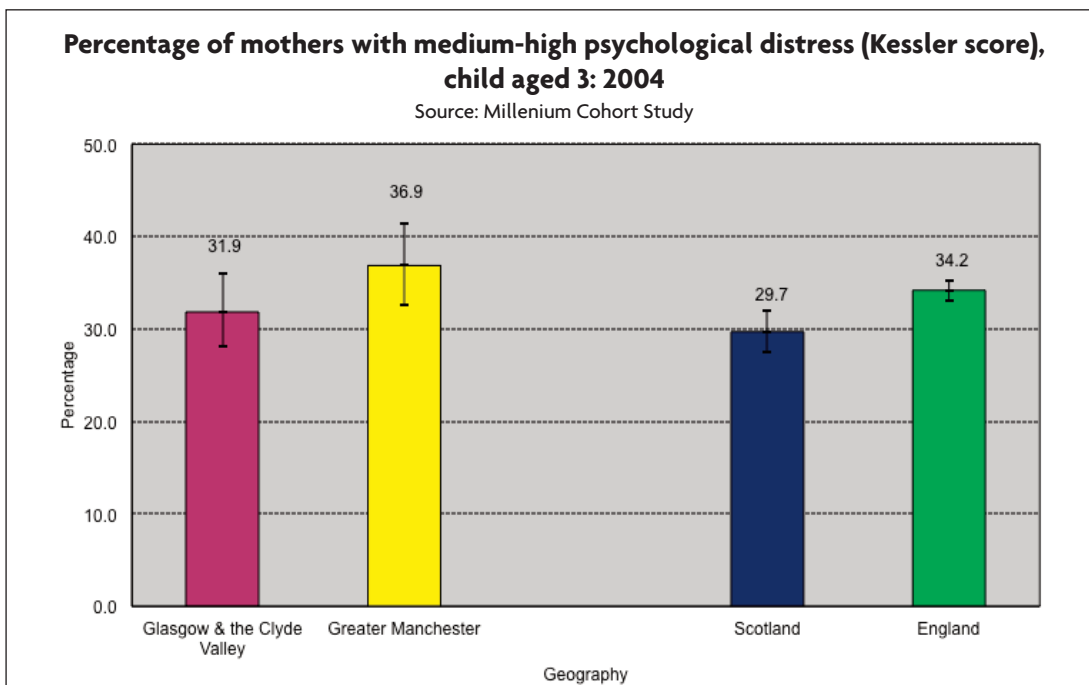


Figure 4.

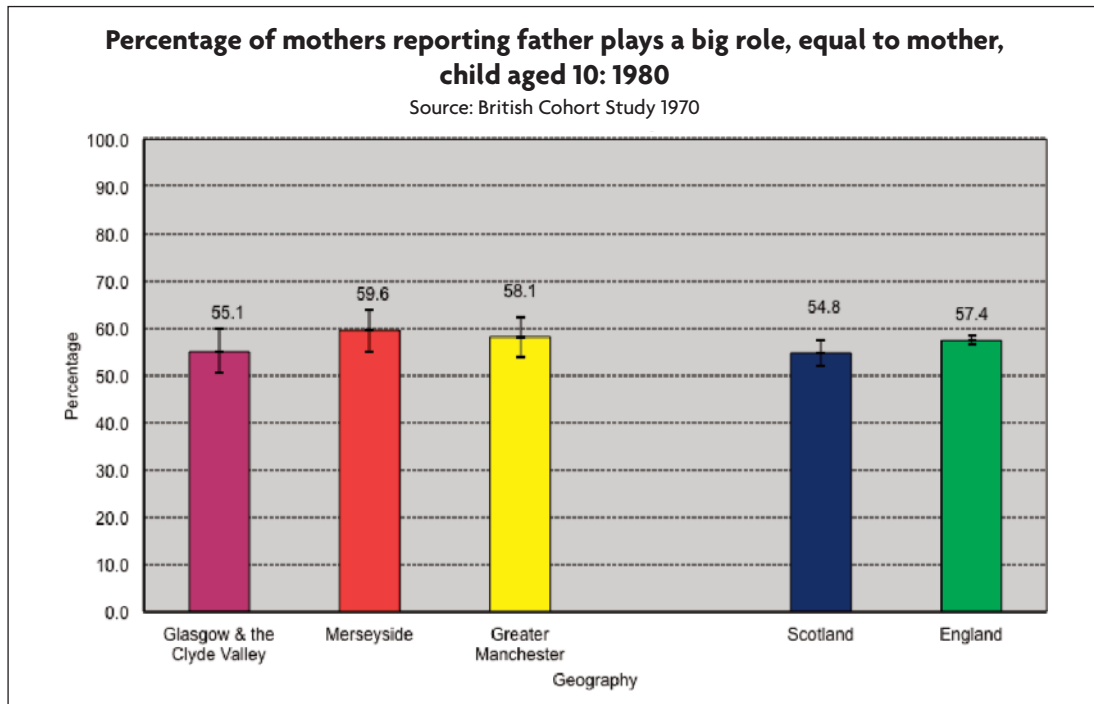
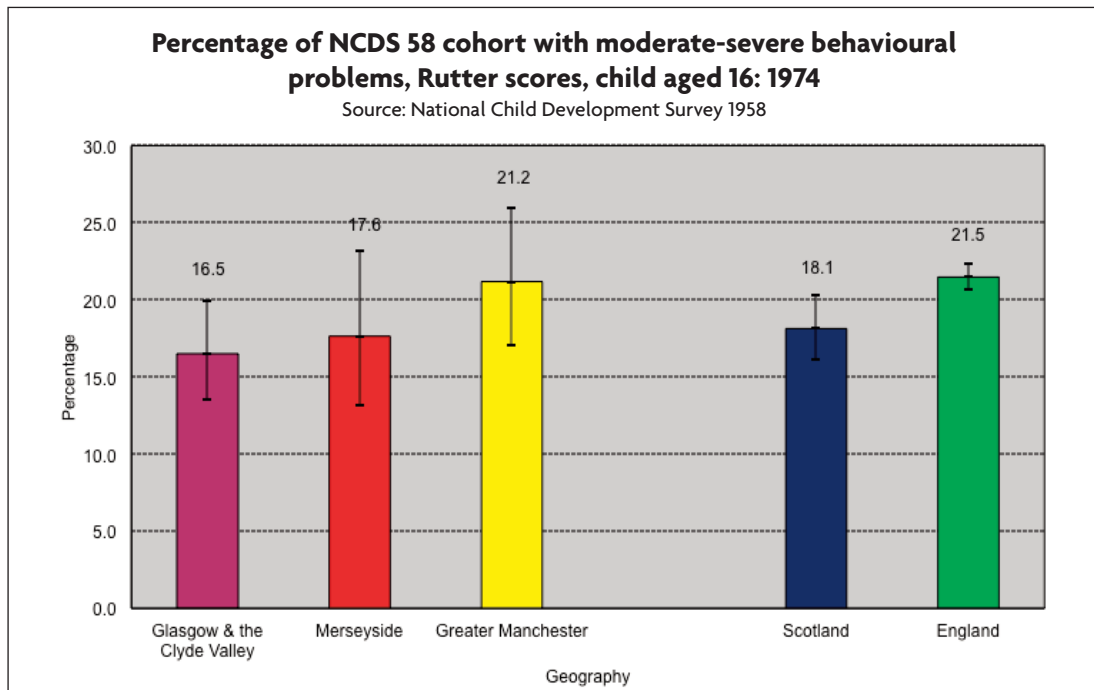


Figure 5.



In only a few aspects (maternal smoking during pregnancy, breastfeeding) could it be said clearly that Scottish children were potentially disadvantaged (i.e. at the national level). At a regional level, even fewer differences were identified. Glasgow and the Clyde Valley had a lower proportion of breastfeeding mothers than Greater Manchester but a higher proportion than Merseyside; differences in smoking during pregnancy were either small or non-existent.

For a number of aspects, concentrated in the area of dysfunctional households, the evidence was ambiguous as to whether contemporary childhood and early years' experiences were worse in Scotland. These include parental substance misuse, parental imprisonment, domestic violence, warmth of parent-child relationships, looked-after children and the use of shouting to discipline children. Further comparisons of these aspects of family life may provide useful insights into geographical variation in childhood and early years' experiences within the UK.

The study was limited by a number of factors. The most important of these were the reliance on self-reporting of highly sensitive topics (e.g. asking parents to rate their relationship with their child and declare their use of drugs or experience of partner abuse), which might bias results; the absence of contemporary data on parenting measures for Merseyside (because the MCS sample for this region was not representative); and the relatively small sample sizes available for some analyses.

Future research will extend the analyses to examine longitudinal associations between childhood and early years' experiences and adult morbidity and mortality in Scotland, England and the three regions.

In summary, although early years experiences are a topic of huge importance for population health, the available evidence suggests it is an unlikely explanation for the excess levels of mortality seen in Scotland, and particular parts of Scotland, compared with elsewhere in the UK.





RESEARCH TEAM

Martin Taulbut, NHS Health Scotland; David Walsh, Glasgow Centre for Population Health.



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FULL REPORT

The full report can be accessed via the GCPH website: <http://www.gcph.co.uk>

The report should be cited as follows: Taulbut M, Walsh D. *Poverty, parenting and poor health: comparing early years' experiences in Scotland, England and three city regions*. Glasgow: GCPH; 2013.

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 CONTACT

David Walsh  
Public Health Programme Manager  
Glasgow Centre for Population Health  
1st Floor, House 6  
94 Elmbank Street  
Glasgow  
G2 4NE

**Tel:** 0141 287 6742

**Email:** [david.walsh@drs.glasgow.gov.uk](mailto:david.walsh@drs.glasgow.gov.uk)

**Web:** [www.gcph.co.uk](http://www.gcph.co.uk)