

THE CARING JIGSAW:

Systems of child care and education in Northern Ireland



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EXECUTIVE SUMMARY



This report addresses a single question: *How can reforms in child care and education support higher levels of female participation in the labour force, in ways which offer greatest opportunity for families who are at greatest disadvantage?* The report is in two sections.

Section 1 gives a brief synopsis of the current evidence base concerning the impacts of early childhood care and education, with particular focus on impacts for children living in poverty. Thereafter, a developmental systems approach (DSA) is outlined, and the rationale for using it in this report is discussed. DSA is then applied to the question at hand, and Section 1 concludes that preserving the status quo of a mixed model of provision – childminders, centres, and family-based caregiving – has much to recommend it. DSA also pinpoints mothers' opportunities for education and training as being the principle catalyst for achieving increased female participation in the labour force. If educational and skills opportunities are made available to mothers who are contemplating a return to work, effects may be anticipated on when they return to work, income prospects for the remainder of a woman's working life, her likelihood of remaining in work over time, and - in the longer term - her aspirations for her children's educational attainment.

Section 2 explores ways of providing an early education and care model which supports mothers in a return to training and education. The model is pragmatic and conservative, building on existing programmes of provision such as Sure Start, Children's Centres, and Extended Schools. However, there are important departures from the status quo, not least of all in the proposal to develop Centres of Excellence serving communities which are experiencing the greatest disadvantage. Given the overall emphasis on maternal education and training, and the provision of high-quality care and education for their children as a means of supporting them, the most obvious lead agency for this proposed model would be one which was responsible for lifelong education.

The proposed model has potential for closing gender and income gaps in Northern Ireland, although the report urges sustained vigilance in this regard. Ensuring that provision is effectively but sensitively targeted, and that it reflects the ethos of the local communities in which it is delivered, will help ensure that families experiencing greatest disadvantage are also families that are best served by reforms.

INTRODUCTION



“A society that is concerned with problems of violence and self control, school readiness and social civility, wisely takes note of the fact that the origins of these social, emotional and intellectual qualities take shape early in the life course. In committing itself to the well being of the youngest citizens, society can promote the well being of all.”¹

Countries in the industrialised world are moving inexorably towards out-of-home care for children in the years before they start school. Policy researchers anticipate that out-of-home care will soon become the norm for children after their third birthday throughout North America and Europe². By 2010 all EU member states agree that they should be able to provide free or subsidised full day care for a third or more of their children under 3, and for 90% of those aged 3 to 6; these targets have already been met by Denmark, Finland, Iceland, Norway, Sweden and parts of Belgium². Member states vary in their rationale for endorsing these targets, along a continuum from primarily *child*-centred rationales to primarily *labour*-centred rationales. In the UK, a labour-centred rationale predominates: providing quality care and education for young children is viewed as a primary mechanism for increasing rates of female participation in employment³.

This report is concerned with how child care and educational provision can contribute to increased rates of female participation in Northern Ireland’s labour market, with a particular focus on enabling families experiencing greatest disadvantage. The report applies a *developmental systems* model to the question at hand. The developmental systems approach is described in Box 1.

Using a developmental systems approach in this report allows child care and education to be embedded in a much broader context than simply the lives of children and parents. Also included in the system are wider family networks, neighbourhoods, employers, societies, cultural value systems, and policymakers, since all of these are relevant and contribute simultaneously. DSA provides an accessible way to:

- identify all the elements which contribute to the status quo
- map how they relate to one another, and
- pinpoint areas where changes in the system are likely to generate greatest impact.

BOX I: THE DEVELOPMENTAL SYSTEMS APPROACH (DSA)

Since the 1980's, DSA has been used in North America as a tool for planning and policymaking around the needs of children ⁴. Amongst its principal advocates are some of developmental psychology's leading theorists, including the late Urie Bronfenbrenner, Arnold Sameroff, and Richard Lerner. In a DSA model, child care and education are construed as integral parts of a much larger policy framework. The framework encompasses a wide variety of elements including civic society's views on gender and equality, current work and training opportunities, women's access to social capital, long-standing cultural beliefs about the value of children, and the balance of responsibilities for childrearing which parents and state share between them.

Whatever policy reforms are contemplated in child care and education, DSA advocates that they will have more chance of succeeding if:

- Reforms are embedded in the broadest societal and civic framework (i.e. are part of the existing *system, or status quo*)
- Reforms are responsive to emerging changes in this framework (i.e. are *developmental*)

DSA is useful in formulating new policies. Sure Start itself was developed from a DSA framework ⁵. It is also useful when planning changes in existing policies, since DSA seeks to identify the key drivers of a status quo. Initiating change in key drivers can stimulate a rippling of change throughout the system, altering the status quo in ways that are planned and strategic. Central to identifying these key drivers is the search for catalysts i.e. parts of the system which influence many other parts at the same time.

Implementing DSA relies on having a comprehensive evidence base from which a valid system or status quo can be built. The field of early child care and education meets this criterion especially well.

The report applies a DSA approach to addressing a single question :
How can reforms in child care and education support higher levels of female participation in the labour force, in ways which offer greatest opportunity for families which are at greatest disadvantage?

The report was prepared within a short time-frame and is formative. It aims to stimulate debate, rather than offer solutions. The focus is narrow. No consideration is accorded to the needs of children living with disabilities, or to the families of children for whom English is a second language. Both of these groups of children merit much more in-depth work around planning and policy-making than could be offered in the time and space available here.

SECTION I: THE STATUS QUO

The givens in early education and care – a brief review of the evidence base

A great deal is already known about the types of out-of-home provision that work best for children in early life, since the field is endowed with a half-century of research studies. Moreover, this rich evidence base is broadly consensual, providing relatively clear-cut guidance for policy-makers and practitioners. When quality provision is *not* being delivered for young children in the industrialised world, this is more commonly the result of insufficient resourcing and support, rather than a consequence of policymakers having to grapple with an inconclusive evidence base.

Newer studies have moved beyond a focus on children enrolled in flagship programmes (such as early Head Start, High/Scope, and the Abecedarian Projects). A broader focus has emerged, in which children enrolled in more ordinary types of childhood provision are monitored. Whilst this means studying children enrolled in many different models and quality-levels of provision, through which some children move in and out in their early years, the findings from these newer research studies can probably be applied with greater confidence in the everyday world. It is therefore encouraging that these more recent evaluations endorse in large measure the findings of the flagship programmes that preceded them. Positive impacts are often more dilute, which is to be expected given lower levels of resourcing and wider variation in how provision is delivered. However, the pattern of benefits that can be expected to accrue from investing in the care and education of young children remains consistent.

Adamson² and Penn⁶ provide useful accounts of the current evidence base, which is summarised in Box 2.

BOX 2: A BRIEF OVERVIEW OF THE EVIDENCE BASE CONCERNING EARLY EDUCATION AND CARE

- The early years of life are a time of “*extraordinary opportunity... when foundations are laid for future cognitive and social development*”²
- Given this, the traditional concept of child care as a means of liberating parents for work has slowly evolved into a more child-centred approach; even labour-driven models acknowledge the importance of protecting child and family wellbeing.
- Evidence concerning positive impacts of early provision for children under 2 years old can be difficult to find. If a policy of “first do no harm” is to be adopted, then ensuring that a parent is given opportunity to remain at home at least for the child’s first year of life is supported by the evidence base.
- The effects of early education and care are more likely to become positive around 2 to 3-years old, providing that the hours are not too long and the quality of care is assured.
- High quality education and care for children in the years just before school can increase later chances of children succeeding at school, in society, and as parents themselves. It can help build a stronger civic society.
- Although there is general agreement about what is best for children in the early years, there are cultural differences in the relative weight accorded to early education (stronger in France, the UK, and the USA) and early socioemotional adjustment (stronger in Scandinavian countries and Finland).
- Provision of early education and care is valuable for all children, regardless of background. Where feasible a universal system of provision should be provided. However, in societies which experience high levels of inequality, there is a tendency for the least advantaged to be marginalised from provision, and for the services they can access to be of poorer quality. For this reason, many OECD countries have opted for models of investment that focus on poorly-resourced families. Sure Start (UK) and Head Start (USA) originate from the latter philosophy.

Other important findings on which there is broad consensus include:

- Whilst positive impacts of early care and education provision are consistent, they are modest. Parent and family characteristics remain more strongly linked to the child's developmental outcomes than his or her experiences in care or early education.⁷
- Broadly speaking, countries where the greatest benefits to child wellbeing are evident are countries which endorse an ethos of gender equity and equal opportunities for employment⁸. These include Denmark, Sweden and the Netherlands. It is sometimes difficult to disentangle the effects of early childhood provision per se from effects which are more broadly attributable to the societal reforms that accompanied their emergence.
- Poor quality provision may do more harm than good, and may increase inequalities.⁶

To date, early childhood provision has made inroads into repairing vulnerability in families, and into righting inequalities in education, income, health, and family wellbeing. But effects are modest. They are strongest in countries where child provision is embedded in a broader system that includes parental labour rights, and a cultural context which places great value on children and family life. They are also most notable when the highest quality provision is targeted towards children living with greatest disadvantage. Evidence for this is briefly reviewed in Box 3. However, experiences on the ground indicate that effective targeting towards disadvantaged children can be difficult to achieve and requires sustained monitoring.



BOX 3: EARLY CHILD PROVISION AND CHILD POVERTY

More than any other variable, low income has emerged as the most reliable predictor of educational and behavioural risk for young children². Many studies indicate that the benefits of early education and care are strongest when they are targeted towards children who live with the greatest socioeconomic disadvantage⁹. However, this impact relies in large part on delivering out-of-home care of the highest quality, without which disadvantaged children may be placed at even greater risk⁶.

Relatively few countries have opted for income-based targets in their delivery model, and even amongst those which have, few have succeeded in maintaining a focus on delivering services to disadvantaged children¹⁰. There are acknowledged difficulties in avoiding stigma when using income-based targeting mechanisms, which can discourage parents from opting for provision of this kind. Targeted programmes of this kind also risk reducing the diversity of children in care settings, offering little opportunity for children to mix with peers from different backgrounds; low-income parents view this as a drawback.

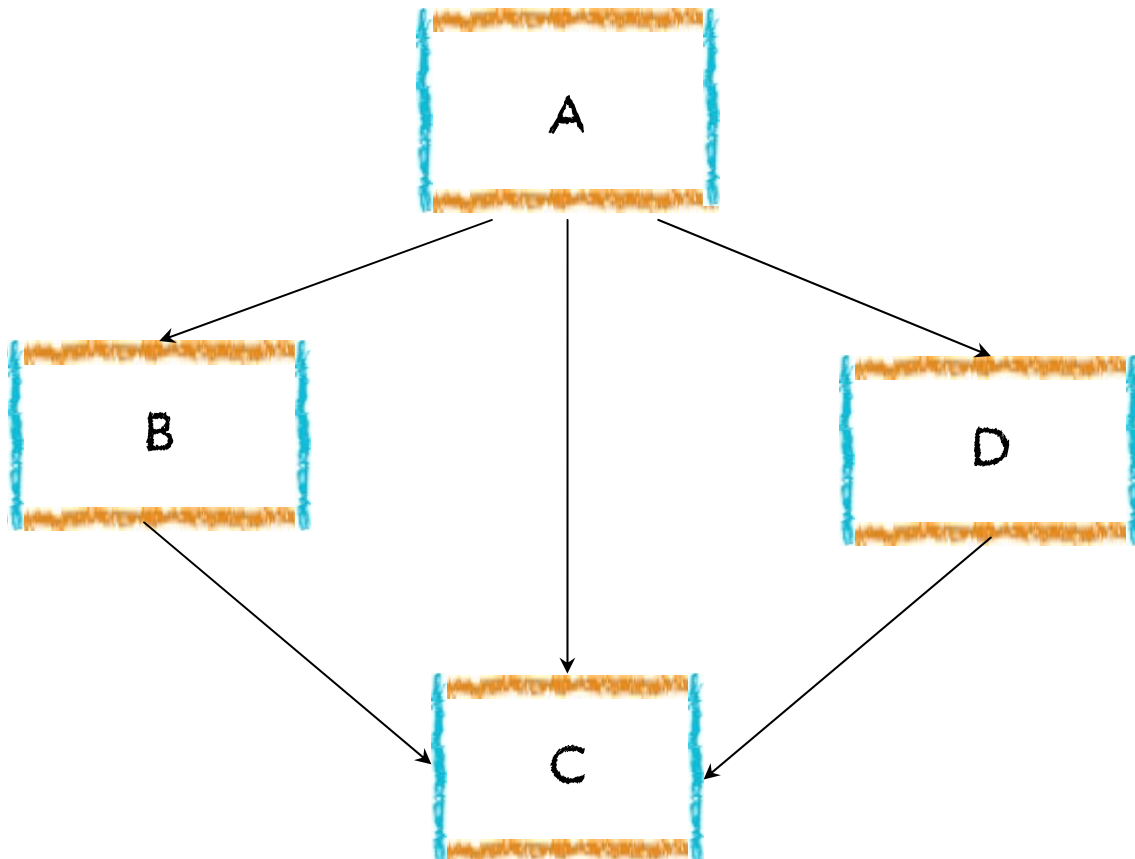
The UK Sure Start programme endeavoured to resolve these difficulties by using an area-based approach, although the early implementation phases of Sure Start were not entirely successful in this regard: child outcomes showed little evidence of socioeconomic gaps being lessened as a consequence of the programme, suggesting instead that the scheme had benefited better-resourced families disproportionately. Having established this, however, more efforts were made to redress the scheme's intake policies, and subsequent evaluations indicate measurable success in this respect¹¹.

However, without an explicit and sustained focus on supporting early education and care services for the poorest children, early childhood care and education provision seldom closes early learning gaps or remedies inequities in poorer children's longer-term developmental trajectories⁹. In addition, even the highest quality of early child provision is associated with modest impacts on child outcomes¹¹, and needs to be supported by a wide range of other measures, some running in parallel through their preschool years, and others following disadvantaged children into later life.

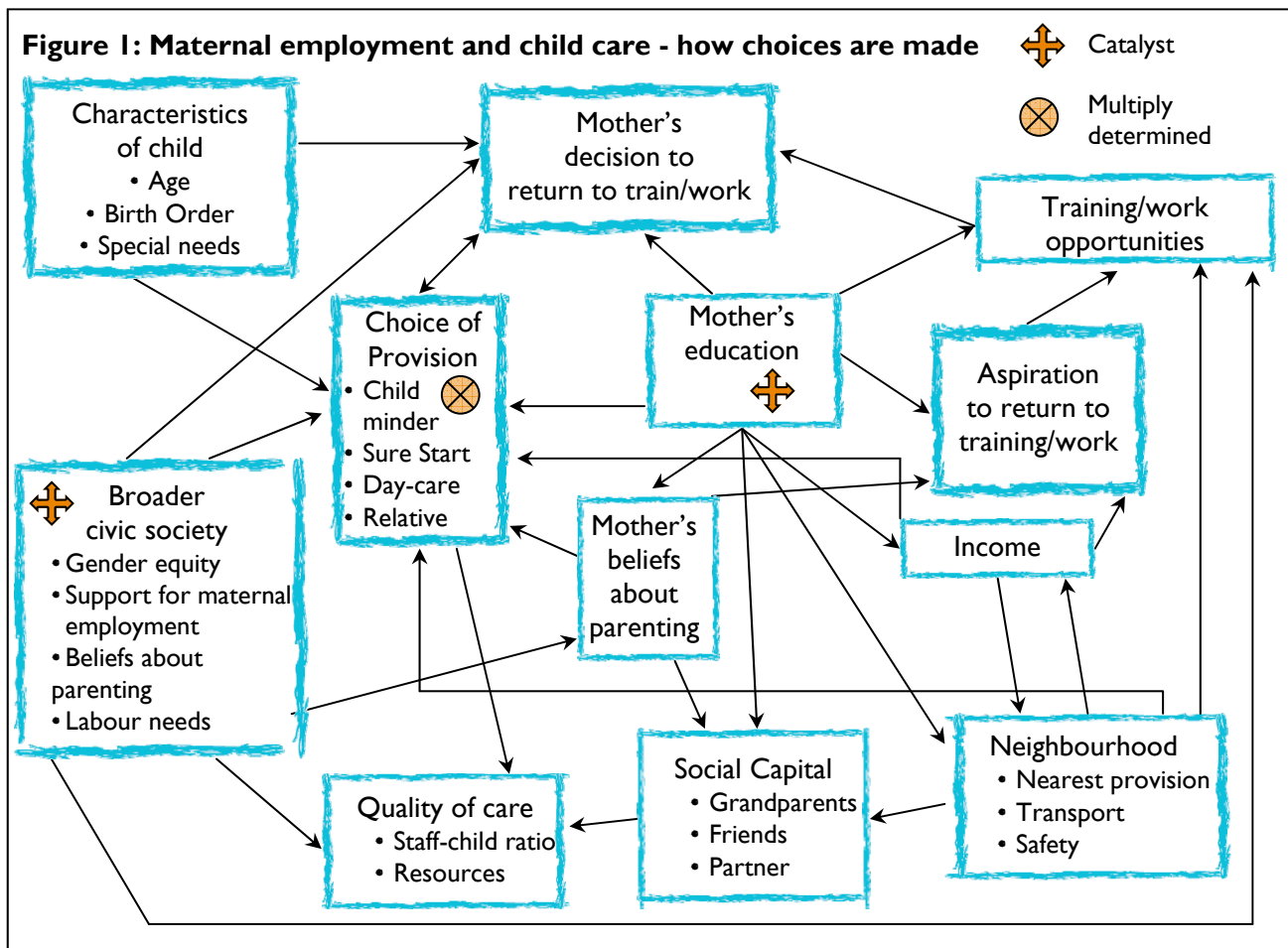
CHILD CARE AND EDUCATION IN NORTHERN IRELAND A DEVELOPMENTAL SYSTEMS MODEL OF THE STATUS QUO

DSA advocates mapping a system as a means of identifying key elements and (through using arrows that link elements) how these relate to each other. Elements from which the largest number of arrows spread out are catalysts. Conversely, elements on to which many arrows converge have multiple determinants. In the diagram below, A is a catalyst, influencing B, C, and D. By contrast, C is influenced by all the other elements and so has multiple determinants. In a simple system like this:

- systemic change could be most effectively generated by intervening in A, from which all other elements would be reached;
- the most challenging element to change is C, since it has many contributors and determinants.



The central question being explored in this report is: *How can reforms in child care and education support higher levels of female participation in the labour force, in ways which offer greatest opportunity for families which are at greatest disadvantage?* Figure 1 illustrates a map depicting some of the main factors which currently determine a mother's decision to place a child in out-of-home care and return to work.



I. Catalysts

The model has only one principle catalyst, namely Mother's education. This influences 8 other elements which are mother's:

- aspiration to return to training or work
- decision to return to train/work
- range of opportunities for training and work that are likely to be available to her if she does return
- family's income level
- neighbourhood the family lives in
- access to social capital – her network of friends, family, and knowledgeable people who can assist her in attaining goals
- beliefs about parenting and her roles as a parent
- ultimate choice of a model of out-of-home provision – i.e. childminder, centre, etc.

There are therefore many potential impacts which can accrue from supporting improvements in mother's education. Gray and Horgan ¹² note that women with a University degree are significantly more likely to be employed in Northern Ireland: amongst graduates the employment rate is 89% compared with 65% for non-graduates. They are also more likely to take up full-time work. Furthermore, weekly earnings average 70% more than the earnings of non-graduates. The potential of Universities and Colleges for alleviating poverty amongst mothers and children is immense. That being said, Horgan and Monteith ¹³ point out that no or low qualifications predominate amongst many of the poorest mothers. For a large proportion of mothers, entry to University or College may be difficult if not impossible, even under the widening participation agenda which Northern Ireland's Universities have pursued, with success, for several years. In addition to supporting mothers who may be eligible for University and College, equal investment in skilling women who have few academic options will be vital. In this context, skilled trades offer many advantages for mothers, including flexible work hours and opportunities for being self-employed. In Northern Ireland at present, whilst 28% of men are in skilled trades, only 2% of women are ¹². Support for fast-tracking women into skilled trades may be one of many areas worth piloting. Whether academic or vocational, support for skilling up is likely to have inter-generational impacts over time: mothers with better education and skills will have higher aspirations for the educational attainment of their children.

Supporting women in this way may challenge embedded cultural beliefs about the role of women in Northern Ireland society. The Derry Well Woman report of 2006 provides illuminating accounts of how these beliefs impinge on women's decisions about working, especially women living in poverty ¹⁴. McLaughlin ¹⁵ notes how frequently women in Northern Ireland who are undertaking a University degree describe themselves as "doing a wee course". Whilst this can be dismissed as little more than a local expression, discourse analysts would suggest it signifies much more than that ¹⁶. Lack of self-esteem and confidence when returning to training and work in Northern Ireland will require sustained focus and investment.

If policymakers wish to encourage mothers to return to work, the most important element for investment and support is *Mother's Education*. The more education and skills a mother acquires, the more likely she is to aspire to return to work, the more social capital she will have that can help her realise this aspiration, and the more likely she is to stay in work after her return. However, long-established beliefs concerning the role of women in society need sustained attention, both at the level of increasing women's personal aspirations and self-confidence, and at the macro-level of societal support for the opportunities made available to women and their children.

2. Multiply determined elements

Two elements are notable for having multiple determinants, namely *Choice of provision* and *Mother's decision to return to train/work*. Both of these may be difficult to intervene in successfully, as a result of being multiply determined. It is, however, worth noting that both are influenced by the principal catalyst, namely *Mothers education*.

2a. Choice of provision

“It has been argued that uppermost in mothers’ decision processes about employment are their beliefs about good mothering and what is best for their child. These beliefs underpin preferences and choices about childcare and work and have been shown to be morally and normatively determined by social, cultural, class and geographical contexts”¹⁷.

Figure 1 indicates that a mother’s choice of a model of provision for her child is influenced by:

- mother’s decision to return to work – if she does return to work, there will be less flexibility in the choices available to her
- mother’s education – the relative weight she gives to the social, cognitive, and linguistic features of different models of care and education
- mother’s beliefs about parenting – who she believes will give her child the best affordable care characteristics of the child – especially the age of the child
- broader civic society – the state’s investment (or lack of it) in providing a range of quality out-of-home services.

In fact, choice of provision is even more multiply determined than Figure 1 implies. Parents weigh up a plethora of factors before choosing a model of provision. The two most frequently documented are “affordability and availability”¹⁸. Whether a choice is being made because a parent is returning to work also contributes to the decision-making process; amongst working parents, opening and closing times – and how flexible these can be if needed – are also essential criteria. These are all well-rehearsed pre-requisites for childcare provision where mothers’ return to work is a central priority.

Less frequently acknowledged are the many attitudinal and cultural considerations which influence parental choice of provision. Scant regard has been given to the “dilemmas and contradictions”¹⁹ which parents navigate when making child care choices. For almost all parents for whom there is choice, each model offers advantages and disadvantages.

Amongst the factors which contribute to these dilemmas and contradictions, Stone et al.²⁰ list the following:

- lack of information about the pros and cons of different models of provision
- worries about safety
- concerns about the child not settling or being unhappy
- worries about quality
- not feeling ready for a return to employment
- wanting to stay home with the child until primary school.

For parents who return to work whilst their children are young, care by a relative or close friend is viewed as optimal by many²¹. It has the perceived advantages of safety, family commitment, shared understandings of childrearing practices, a familiar environment, and children's happiness. In Scotland, almost a third of parents viewed family members as the ideal caregiver aside from themselves²¹, and in the UK as a whole this seems a particular preference amongst lone parents¹⁷. In Northern Ireland more than half of parents who were asked about preferred childcare options for their 0-3 year-old children opted for friends and family first²². This is not surprising, given that Northern Ireland has a relatively limited tradition of supporting maternal employment or of subsidising young children's entry into out-of-home care and education. Historically, the model of support for families in Northern Ireland has reflected an ethos in which children are primarily the responsibility of mothers and their extended families. Szelewa, & Polakowski²³ refer to this ethos as one of implicit familialism:

“Childcare policies are residual and formally neutral, with the assumption that the family should not be interrupted in its task of educating children. They neither suggest the locus of responsibility for care, nor do they explicitly mobilize women to join the workforce. However, due to gender inequalities in the labour market, the lack of affordable and available childcare leaves the sphere of care almost solely to families.”

The model of implicit familialism is rare in Europe, although Italy and Poland are exemplars²¹. It may prevail in regions where there are strong inter-generational beliefs about parenting which support this ethos. Whether this is true in Northern Ireland is uncertain, but there remains little research which explores the formative parenting beliefs, attitudes, and aspirations of young men and women in Northern Ireland. There is a need for research of this kind, since it has a role to play in the development of new strategies for early childhood care and education. In any event, it is self-evident that women's choices of care provision cannot be taken to equate with their ideal model¹⁴.

Due care is needed so that the positive aspects of family life are not undermined by making family-based care less accessible for parents, should this be their preferred option. In the 7th Innocenti Report Card ²⁴, which compared child wellbeing across 21 EU countries, UK children emerged with the poorest *overall* outcomes. However, in terms of their assessments of family life and social support, they scored well. When asked whether they “feel awkward or out of place”, UK (and Irish) adolescents were less likely than most to respond that this was true of them. Similarly, UK and Irish teenagers were less likely to “feel lonely” and more likely to report that their parents spent time several times a week “just talking with them”. Whilst Sweden is renowned for the quality of its early education and care provision, Swedish teenagers ranked poorly in terms of their feelings of loneliness, the time they spent just talking to their parents, and their assessments of family and peer relationships in general. Supporting strongly protective elements of family life will help ensure that – whatever policies are adopted – children’s own sense of personal wellbeing is not compromised.

Whilst a frequently preferred model of provision, family-based care is not an option *all* parents view as optimal. The shared understandings, trust, and commitment which make this option attractive for some parents are not always a given, especially when mothers and grandmothers are negotiating a child’s care ¹⁷. Where grandparents and aunts work or live some distance away, it may not even be a choice which parents consider. In addition, parents express concern that care by a relative or friend may not offer children sufficient opportunities for social interaction with other children, which is in turn seen as a major benefit of centre-based care.

The opportunities which centres offer for peer interaction has, in turn, to be set against the more impersonal and anonymised care which parents perceive centres as offering. Many parents lack confidence in the quality of care which children receive in these contexts. Media reports of catastrophic failures in this regard do little to help parents reach a balanced and informed decision, so that lack of trust remains a significant barrier to parents opting for centre-based care. Innovative schemes in which web cameras are installed in centres, and digital photographs of children are sent to parents during the day, are currently being piloted ²⁵. These merit further monitoring and evaluation. In addition, the costs of centre-based care in Northern Ireland are among the highest in Europe which makes this option difficult for many parents, even if it is their preferred choice. ¹³

The research literature offers little clear-cut evidence as to which model of care offers the best outcomes for children. Broadly speaking, studies suggest that high-quality care – regardless of type – can have significant benefits for children’s cognitive and linguistic development, although it can also carry risks for conduct and socio-emotional wellbeing ²⁶.

These many “dilemmas and contradictions”¹⁹ call into question whether any one system of care and education will suffice in the medium-term. An expansion of centre-based care is unlikely to reduce the desire for informal care given its many perceived advantages for families. Identifying ways of supporting family-based systems of care, which are often the “glue” that holds many complex working family needs together²⁷ seems a matter of both common sense and urgency. At present, family carers are not eligible for the Higher Education childcare grant or the childcare element of Working Tax Credit in the UK. The preference which many parents express for friends and family as secondary carers for children is a primary reason for this subsidy being somewhat poorly supported by parents – in the UK as a whole, fewer than 10% of families with young children claimed this benefit in 2005³. Family caregivers are seldom reimbursed through payment from parents, as indicated in the following quote:

Just 7 per cent of grandparents received a payment for their childcare services in the reference week. Three per cent received a payment covering wages and a similar proportion received money for meals (2 per cent) or other items used by children when in their care. Under a fifth of friends (19 per cent) or other relatives (15 per cent) received a payment for their childcare services. Payments for fees/wages were more common for these providers (14 and 11 per cent respectively) than for grandparents (3 per cent)²⁸.

Consequently, ineligibility for state subsidy is compounded by the fact that few parents pay their family or friends for the care they provide.

Skinner and Finch explore the advantages of having the state subsidise care provided by elected relatives, in the same way as care provided by nurseries and childminders is. The issue is not without difficulties at all levels:

“On the one hand, the evidence presented here on grandparental childcare suggests that the government may well have made the correct decision to stay out of private family relationships that involve such complex notions of obligation and generalized reciprocity. It is possible that a state subsidy to pay grandparents may create unease in relationships as it could apply pressure on unsure/unwilling grandparents to provide care where they feel they have an obligation to do so but may not be all that willing. Certainly there was some evidence among lone parents to suggest that where this happened it could create family rows. Alternatively, grandparents may feel that payment devalues their caregiving as purely paid work and therefore devoid of the social relationships underpinning it. In either event, the state runs the risk of being an undesirable interloper in these private exchange relations, particularly if it insists on having a role as a regulator or approver of such care.”¹⁷

That being said, offering relatives and friends the *option* of training, support, and reimbursement, which could be taken or left, would not undermine aspects of goodwill and reciprocity in cases where these were the principal drivers of care being offered.

The Northern Ireland Kids' Life and Times Survey ²⁹ sheds additional light on the issue of whether one model could be more favourable than another. Details of how the 2009 Survey was undertaken are contained in Box 4.

BOX 4: THE KIDS' LIFE AND TIMES SURVEY 2009

The Kids' Life and Times Survey (KLTS) is an annual survey of P7 children in Northern Ireland. It is undertaken jointly by QUB and the University of Ulster under the aegis of Ark Northern Ireland. KLT scopes children's attitudes to early experiences, school and home life, and their perceptions of their neighbourhood. Data from the most recent survey, undertaken in June 2009, was recently released by ARK. It contains data from 3,697 young participants.

In the 2009 survey, several questions were asked about the children's experiences of child care in:

- a. the years before they started school;
- b. during their P7 year.

These data offer a unique *local* opportunity to provide a more textured account of child care provision in Northern Ireland, based on children's own views.

The Survey asked P7 children how they recall feeling about being looked after in a crèche/nursery or at a childminder's. The majority of children who attended out-of-home care in the years before school recall it as a happy experience. Similar results pertain for children who attended crèche or nursery (85% rated happy) and childminder (86% rated happy). There is little in these data which helps distinguish between different models of provision in terms of how children recall the experience.

KLTS also asked children to rate their present-day (P7) satisfaction with after-school care. Ratings of happiness were lower than they had been with out-of-home care when they were younger. Whereas 86% of children recalled having been happy with their out-of-home provision in the years *before* school, this figure fell to 72% for *after*-school care in P7. In addition, whilst care by a relative - mother or other relative - and childminder were rated as equally happy experiences for the P7s after school (75% and 73% respectively), those attending After School Clubs were significantly less happy (69%).

Results such as these are important because they can help inform parents about one of the barriers to placing a child in early out-of-home care, namely a worry that their child will not settle, or will be unhappy. The KLT Survey provides evidence that the vast majority of 10- or 11- year old children look back on their pre-school experiences in out-of-home care as being happy ones. They are, however, somewhat less content with their current arrangements, especially After School Clubs.

Another recent report, which explored public opinion on local (NI Executive) subsidy for child care for all who need it, was undertaken as part of the IPSOS Mori NI Omnibus Survey in late 2008³⁰. Results indicated strong public support (83%) for the principle.

The many factors which influence parental decisions about a model of care make this a difficult domain to instigate fundamental changes in, at least in the short- to medium-term. For pragmatic reasons, the status quo should ideally remain intact in the shorter-term. This means there is reason to support all elements of it equably. There is also strong support among the public at large for the principle of regional government subsidising child care for families who need it. Given this, it would be helpful to establish whether the current status quo approximates the models of provision parents would aspire to for their young children, given a more ideal world.

2b. Mothers' decision to return to training/work

The current UK government aims to increase mothers' return to work, and lone parent employment rates to 70% by 2010³¹. For lone parents this represents an increase of 15% from 2005 rates, and is a sizeable challenge. However, the Northern Ireland context offers some reasons for optimism, at least in terms of gender equity in pay. Women in Northern Ireland experience less gender inequity in pay than do women in other disadvantaged regions of the UK - only women working in London, the South East, East, and Scotland have a higher median weekly wage¹². However, this is offset by the fact that the median wage for men working full time in Northern Ireland is only 85% of that for British men¹³, so gender equity operates from a low baseline.

Although a number of recent studies have been undertaken to investigate the extent to which subsidising child care encourages maternal participation in the labour market, it has proved difficult to produce convincing estimates of impact. There are some certainties. For example, if the hours of care are not wraparound, then return to work is less likely. A study in the USA, for example, indicated that subsidising women's return to work had a negative impact on their use of Head Start, because of the hours when Head Start offered service. Instead, other forms of care, especially informal and unregulated forms of care, increased as mothers took up new state-supported employment programmes ³².

Figure 1 illustrates that a mother's decision to return to training or to work is multiply determined, and by many different factors. Factors influencing what she decides to do (e.g. work or not work) include:

- her current educational level
- the work and training opportunities available nearby
- how old the child is, whether there are younger children in the family, whether the child has any special needs
- the availability of out-of-home provision for her child
- the attitudes and needs of broader civic society including beliefs about parenting, support for the idea of women with children working, labour needs, etc.

The extent to which children make working more difficult for women is illustrated in the recent "Figuring it Out" publication ¹². This indicated that 73% of women without children are in paid work, compared with 64% of women with 2 children. The lowest rates of participation are to be found in women who are lone caregivers (57%), who are also less likely to work full-time, and more than twice as likely as other parents to leave employment in any one year. These figures suggest that the greatest investment needs to be offered to lone mothers, for whom the barriers are greatest, but for whom the routes out of poverty will almost inevitably require them to return to work. Studies undertaken in OECD countries suggest that the availability of pre-school places has a greater impact on lone mothers than two-parent families, indicating the potential of widening access for assisting groups most likely to be in income poverty ².

The Extended Schools and Child Care Pilot Programme in England ²⁰ found many more mothers of pre-school age children expressing a preference to stay home with their young children than had been anticipated. The opportunities the Programme gave them to prepare for a return to work served only to confirm reluctance in their own minds. Other studies have indicated how much mothers are prepared to sacrifice (in terms of their own needs and comfort) in order to remain at home while their children are young ³³. These studies suggest that the uptake of schemes which encourage an earlier return to work by mothers may be modest, and targets may need to be set at realistic levels.

A 2008 study in Northern Ireland indicated an increase of 10% in mothers returning to work in instances where quality childcare was made available; an additional 16% returned to education, and a further 40% of mothers felt that they had been able to maintain an existing job³⁴. Outcomes related to all of these aspects of employment, and not just the numbers of women who return to work immediately, could help broaden the evaluations of impact that are made in larger-scale evaluations.

CONCLUSIONS FOR SECTION I

A mother's decision to return to work is multiply determined, and will require intervention on many different levels if changes are to be made in how these decisions are currently taken.

Diverse models of provision prevail at present; they are diverse for good reasons. All of them require support and investment for the medium term. Without all of them on offer, fewer women will opt to return to training or work. Mothers' education is the principal catalyst of the status quo; hence, supporting mothers' further education and upskilling will be fundamental to increasing the numbers of women who decide to return to training or work when their children are young.

Resistance to the concept of an early return to work should be expected amongst women – the incentives that are offered to encourage a change in aspirations and parenting beliefs will have to be substantial.

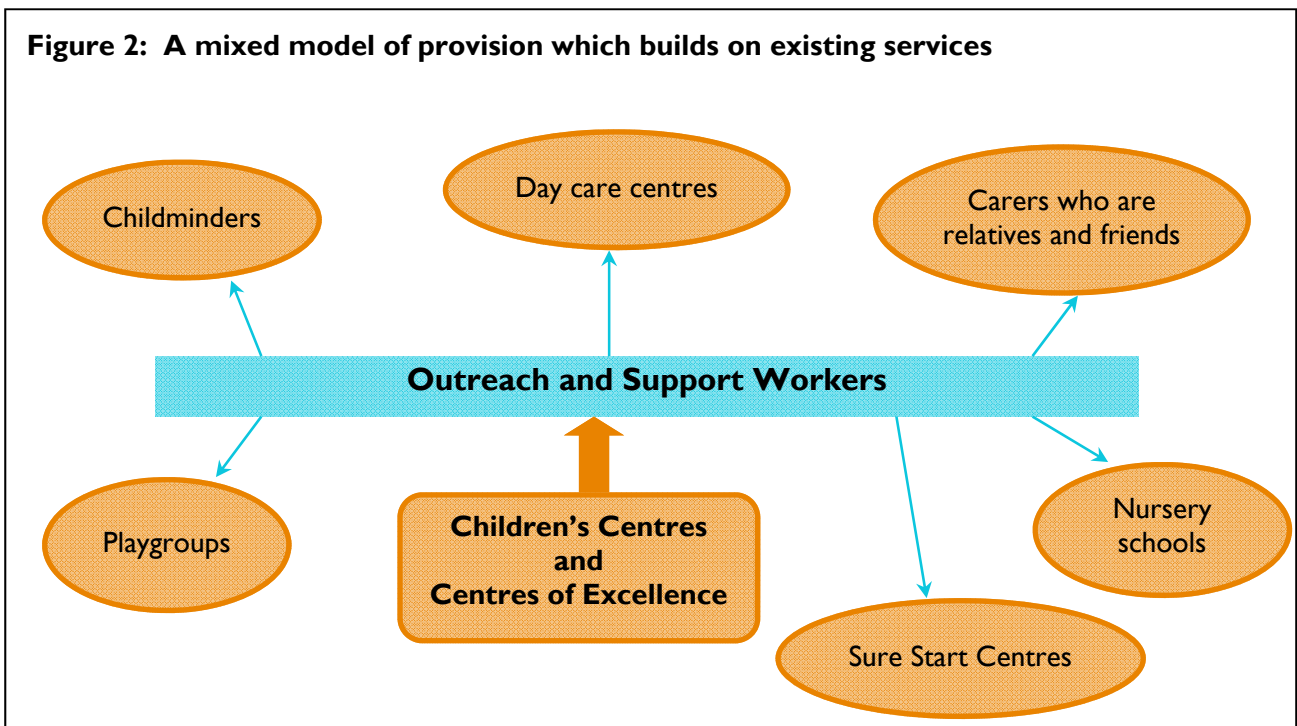
Where support has been offered in the past, more than 50% more women take up opportunities to further their *education* than take up opportunities to return to work. This suggests significant interest in *education first*. Long-term this may be a common aspiration of both low-income women and regional government.

SECTION 2

SUPPORTING A MIXED MODEL OF PROVISION IN A WAY THAT ENCOURAGES WOMEN TO RETURN TO EDUCATION AND WORK

Given the DSA model explored in Section 1, Figure 2 illustrates how a model of provision might be organised in a way which maximises the likelihood that mothers will elect to return to work and training.

Figure 2: A mixed model of provision which builds on existing services



Children's Centres as hubs

The model proposed in Figure 2 utilises the UK's emerging Sure Start model of Children's Centres as hubs. These hubs would cater for 3- to 4-year old children, at least at first. These children are nearing school entry, and mothers may be more willing to enrol them than they would be for younger children or infants.

As far as possible Children's Centres would be situated inside school premises so that any existing school transport services could be used for getting younger children to the Centre; in-school sites would also facilitate a single drop-off point by parents of older and younger children in a family each day. The Children's Centres would act as an all-day (7.30 am to 6.00 pm) service for 3-4 year olds.

In many schools, Children's Centres would augment the Extended Schools schemes currently being rolled out, and would place schools even more at the heart of communities. However, it is recommended that Extended Schools schemes and Children's Centres be kept as *wholly separate units*. Children's Centres would be located *in* schools, but they would not be *of* schools. They would not share the school ethos of curriculum-based learning. Instead, they would develop a play-based and experiential ethos, which is commonly agreed to be of greatest benefit for children in the years before school ³⁵.

In addition, it is proposed that Children's Centres be located in all FE Colleges and in both Universities, since this will help maximise the main catalyst for change, namely maternal education.

Centres of Excellence

Centres of Excellence (COE) will offer the highest quality provision, with higher per child costs than the average Children's Centre. Over time, COEs will become reference points for best practice and innovation. It is proposed that COEs are located in deprived wards, with 6 COEs being set up initially. This will mean that the best services are located in areas of greatest disadvantage. Great care and sensitivity will be needed to ensure that COEs reflect the aspirations and values of communities, and most especially the lowest-income families that live in them (see Box 5). Care will also be needed to ensure that COEs – though located in areas of disadvantage – remain accessible to families who are better provided for. This will help ensure that a diverse cohort of children use COEs, since this has been identified as optimal for disadvantaged children's development ³⁶, and also a principal concern for disadvantaged parents.

The roles of Centres of Excellence and Children's Centres

COEs and CCs would offer a wide variety of services for supporting family life. These would include:

- all-day care and education for 3-4 year olds
- a resource centre including a toy and book library from which materials can be borrowed by anyone living nearby
- a weekly one-stop child care and education advice service for caregivers, offering comprehensive information and advice on all registered child care and education facilities in the area; this would provide caregivers with an opportunity to compare the options available and be advised on the advantages and disadvantages of each type of provision
- a weekly one-stop advice service for parents seeking information on a range of other issues related to family life, e.g. housing, health, finance, etc.

- a weekly careers and training service etc.
- evening classes on topics such as effective parenting, child development and wellbeing, etc., with routes to accreditation where participants require it.

This is consistent with Government’s declared ethos of using schools to promote a “whole learning culture” in which “learning is part of a route into work, and part of developing the capacity of local people for successful parenting”³⁷. It also reflects an emerging educational infrastructure in which schools become lifelong learning environments through their engagement with parents in the provision of Essential Skills training.

Supporting Satellites

It is proposed that Children’s Centres and Centres of Excellence service the full range of *existing* models of provision within their catchment area, including childminders, nursery schools, and family-based caregivers. Children enrolled in all forms of care would be subsidised equally in this system, provided the centres or carers they attend are registered with the local Centre of Excellence or Children’s Centre. The Centres would offer accredited training to these “satellite” providers, such that state subsidy of satellite providers would be conditional on the completion of an annual programme of contact, inspection, training and support. Each COE and CC would employ at least one satellite Support and Outreach Officer who would liaise with satellite providers.

BOX 5: CRITICAL PERSPECTIVES ON SOCIAL INCLUSION

One of the most prominent analysts of early child care and education, K. Alison Clarke-Stewart urges vigilance in dealing with some of the unconscious biases and prejudices that can be found underpinning provision when it is tailored to the needs of the least advantaged³⁸. The issue has long been of concern. It was a primary impediment to uptake in many other schemes, including both Head Start³⁹ and Sure Start. Of the latter, Clarke-Stewart writes:

“The form and content of the services provided have tended to reflect the prevailing middle-class conceptions of motherhood and of the responsibilities of mothers in relation to children, and thus have helped to construct a dominant ideology of motherhood. Poor mothers whose behaviour does not conform to the norms promoted by this ideology and who come under scrutiny from the state are easily construed as exhibiting pathological behaviour resulting from a combination of ignorance and moral deviance.”

To support satellites, a mixed programme of one-day training programmes, delivered on the school premises during school holidays, as well as a range of modules which caregivers can complete via distance learning, would be offered in the COEs and CCs. The staff working in COEs and CCs would also be expected to participate in the same training programme, so that continuing professional development would be assured for all carers, regardless of whether they worked in Centres or satellites.

Providing training through flexible and supported learning for all out-of-home caregivers would be essential. Short time-frames were identified as barriers to childminders completing training in a recent local project ⁴⁰; likewise the JEWEL scheme in Northern Ireland reported a 20-25% drop-out rate amongst childminders during a training programme ⁴¹. Training goals should be modest, achievable by all, but mandatory and sustained throughout the career of a care provider. In line with recommendations made by the Daycare Trust ⁴², a fast-track registration process, including a financial support package to complete this, would be offered to satellite caregivers wishing to become linked to their local CC or COE. Start-up grants are already provided as part of Sure Start programmes in England and Wales, as are Childminder Development Grants in Ireland ⁴³.

Support for satellites would comprise a major element of any CC or COE's budget. In return, the partnership between Centres and satellites would fulfil many functions:

- enshrine parental choice in terms of models of provision
- help ensure that equitable standards of provision are offered to children regardless of the model of care their parents elect
- preserve the status quo of mixed model provision in Northern Ireland and so maximise the likelihood that mothers will be enabled to return to work
- accord all forms of child care and educational provision the same status
- provide an administrative route for delivering state subsidy to registered satellites.

Linking CCs and COEs to maternal employment

If children's care provision is to be used as a catalyst for increasing women's participation in work, it is essential that CCs and COEs play a direct role in facilitating their entry or re-entry into work. Women's lives as mothers and workers can be supported in the Centres, following the model of Women's Centres in Northern Ireland. Hence, it is proposed that CCs and COEs offer a wide range of services that support women into employment.

An employment and training officer could be attached to each CC and COE, offering a once-weekly service. Activities would include:

- Building strong links with local training colleges, FE institutions and Universities
- Offering local parents preparatory training on returning to work and managing this transition, e.g. through CV writing and training interview skills
- Offering local women vocational and training advice and assisting them in making applications for courses and jobs
- Facilitating regular meetings with groups of women to discuss barriers to employment and how these might be overcome.

By offering a diversity of COE, CC, and satellite services, some of which will be open from early morning to late evening, parents of 3-4 year old children will have greater opportunities for full-time work should they choose. So-called mini-jobs, which many parents opt for at present, may reflect the constraints placed upon them by the few hours of state-supported provision currently available, rather than their ideal work option. In any event, mini-jobs offer parents little real scope for enhancing their income, careers, or skills development, and so have a limited scope for making real impacts on mothers' participation in the labour market.

Maternal employment - Managing expectations

The extent to which child care and education provision will persuade mothers to work should be viewed cautiously. At best, a recent neighbourhood nurseries initiative⁴⁴ resulted in only 1 in 10 work-ready parents taking up a place, though not all may have taken up long-term employment. Whilst this may seem a disappointing result, more lone parents opted into the scheme, which may have disproportionately benefited children experiencing the greatest disadvantage. In addition, the scheme was evaluated very soon after launch, and many schemes of this nature require time to bed into communities, so that trust can be established.

In Northern Ireland's low-wage economy the incentives may make a return to work even less attractive than in Britain. Almost half (47%) of children living in poverty in NI have at least one parent working⁴⁵. In addition, it must be acknowledged that many mothers, regardless of income, would sacrifice a great deal for the opportunity to be full-time parents in the years before a child starts school.

In this context, the Extended Schools Childcare and Childcare Taster Pilots²⁰ explored the claim that lack of childcare is a primary barrier to work for lone parents on Income Support. As previously described, the study found mixed results – some parents were encouraged into returning to work after the Taster programme, whereas others realised that a return to work

was unrealistic, especially those whose children were below school age. A desire to stay home with the child emerged as a stronger barrier than had hitherto been recognised, which further supports the need for CCs and COEs to provide training and preparation for parents before they commit to a return to work.

COEs and CCs will in themselves generate job opportunities with a built-in continued professional development component, and these jobs are especially likely to be filled by women. In Scotland, an estimated 5,700 training opportunities were generated by recent reforms in childcare provision⁴⁶. Employers across all sectors in Northern Ireland could be supported (or mandated) to provide more family-friendly patterns of work, or to provide assistance with child-care costs. In this context, it is worth noting that – between 2001 and 2006 - 88% of the increase in public sector employment was in female opportunity¹². The development of best practice could begin at government level.

The costs of delivering a model of this kind will be relatively high, although the fact that the model is confined to 3-4 year-old children in the first instance will ensure that the early stages of model development and refinement are not excessively wasteful. The most recent annual Rowntree report on poverty and social exclusion⁴⁷ indicates a strong rationale for ensuring that children become the principal beneficiaries of welfare and state support in the future, rather than adults. This would be a paradigm shift in UK welfare reform, but one which would be consistent with an approach in which children, especially children at greatest disadvantage, are more central to society's vision.

CONCLUSIONS FOR SECTION 2

It remains to be seen whether changes to child care and education provision can produce significant changes in maternal employment patterns which yield acceptable cost-benefit outcomes. The mutual interest of government and low-income women in their returning to further education is perhaps the strongest catalyst. However, a strategic focus on women's return to work should not detract from the need to monitor the quality of provision being provided for children, especially the most disadvantaged, whose nurturance should remain a priority for all. Changes in maternal employment levels should be accorded low priority in monitoring any back-to-work strategy. Much more important will be monitoring of standards of provision that disadvantaged children themselves experience.

Changes in child care provision should not be expected to generate changes in the attitudes and beliefs of women, or of broader society, overnight. Progress will be more rapid if there is strong central support for change. However, even in exemplar countries such as Finland, reforms to day-care and home care allowance systems started in the 1960s and were only fully implemented in the 1980s. The first children who experienced a reformed system of care in Finland are now parents and grandparents themselves.

SUMMARY

The title of this short report is derived from a journal article by Wheelock and Jones²⁷, which uses the phrase to describe the matrix of formal, informal, and family-based provision that underpins the lives of many families. This report views the matrix as being even more complicated than Wheelock and Jones imply. Neighbourhoods, employers, governments, as well as the broader civic society, are equally important pieces of the jigsaw, and attempts at reform will have the greater chance of success if the reform process engages with this bigger puzzle.

The report addresses a single question: *How can reforms in child care and education support higher levels of female participation in the labour force, in ways which offer greatest opportunity for families who are at greatest disadvantage?* It offers suggestions that help answer this question, but in ways which are pragmatic and medium-term. In this context, the report:

- supports the status quo of a mixed model of provision – childminding, daycare, Sure Start, and family-based care.
- consolidates and expands on the Sure Start model of Children’s Centres which have been central to recent reforms in Northern Ireland.
- is consistent with the Extended Schools ethos, in which schools become the heart of communities providing a wide range of lifelong learning resources.

However, the proposed system of provision also differs in some important ways. In particular:

- mothers’ education is treated as the key driver of transformations in child care and education provision, a change in perspective which is evidence-based; the opportunities for rapid up-skilling, combined with the potential that higher levels of mothers’ education have for inter-generational transfer, make this an efficient model in terms of costs and benefits.
- in addition to Children’s Centres, Centres of Excellence are proposed; these would have much higher levels of financial and resource support, and act as hubs of innovation. Centres of Excellence would be situated in areas of Northern Ireland where children and their parents are experiencing greatest disadvantage.
- Although Children’s Centres and Centres of Excellence would be situated *in* schools, they would not be of schools. An ethos of play-based learning, flexible routines, and child-centred activities would be promoted rather than a curriculum-based pre-school approach.

Given that this model is driven by mothers' education, and has consequences for both maternal and child education and skills, the most obvious lead agency of a system such as this one would be a department or departments with responsibility for education. In Northern Ireland, this might include the Department of Education, and the Department for Employment and Learning, each perhaps with a joint and equable stake. However, many other Departments (e.g. DARD, DETI, DRD, DSDetc) would be essential stakeholders in this model, which is by definition a *model of distributed responsibilities*.

This report has explored the extent to which mothers' participation in the labour market might be supported by reforms in the provision of early child care and education services. However, in taking a systems-wide approach, the report has also illustrated the many other impacts which could be expected from such reforms. These are shown in Box 6.

BOX 6: SYSTEM-WIDE IMPACTS OF HIGH-QUALITY PROVISION FOR CHILDREN IN THE EARLY YEARS ²

Children

- social and emotional gains from learning to interact with others
- cognitive and linguistic enrichment
- improved school-readiness

Mothers

- widened opportunities and increased gender equality
- an easier reconciliation between the needs for income, personal development, and a positive family life
- improved mental wellbeing and self-confidence
- higher aspirations for the educational attainment of their children

Governments

- increased GDP and public revenue
- lower welfare budgets
- a narrowing of social, educational, and income inequities

The report offers a way of initiating reform in a manner which does not compete with existing services, but rather seeks to transform them in a gradual and sustained manner. In Northern Ireland presently, there is enough shortage for any new initiatives to supplement, rather than destroy existing services, many of which serve a well-established need.

The DSA approach has allowed a model of provision to emerge which is driven by maternal education. A strong evidence base supports the rationale for maternal education being the principal catalyst in the search for ways to widen women's participation in the labour market. However, it must be acknowledged that the model identified in this report is one of many potential models that could be built from the enormous evidence base that is relevant to this topic. It is rare for any model to be unanimously endorsed by *all* experts across *all* of the stakeholder fields. In this context, the function of a model such as this one is to lay out a rational way forward which can be scrutinised, debated, and re-worked by stakeholders over time. In social science, models of this sort are referred to as hermeneutical tools; in more conventional language they offer hands-on ways of interpreting and reforming complex systems.

Once refined, costing the model, and identifying a distributed inter-Departmental network of funding, would comprise the next steps in developing it. As is evident from Box 6, costs should be only one component of this exercise, balanced by a consideration of the likely returns on investment which could accrue across a wide range of areas.

The Caring Jigsaw emerges as being about much more than the different forms of care – child-minder, nursery, family and friends - and how they piece together to sustain the needs of parents and their children. The Caring Jigsaw is much larger, incorporating a system of values and beliefs, extended family relationships, neighbourhood resources, training opportunities, employment, government policy, and the support (or otherwise) that all of these offer women returning to work. Fitting all of these much bigger pieces of the jigsaw into the frame offers a broader understanding of what might be needed to generate effective reform. By making mothers' education the principal driver of change, and ensuring that the most disadvantaged areas have access to Centres of Excellence, there are opportunities for building a child care and education system which offers choice for parents, whilst being stable, equitable, and good for children.

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