

Raising the next generation and doing it better

Summary

Parenting emerges as the most fundamental and universal concern. It cuts across nations, generations, social classes, ethnic groups, religious or political creeds. This paper analyses some of the background that has led to the unprecedented focus on parenting nowadays in western societies and indicates issues to address to raise the next generation better.

Three core parenting tasks are determined: care, control and development. To fulfill these tasks adequately parents need to have knowledge and understanding of a child's state, needs and capability in the cause of its growth, the difficulties and problems that may befall it and how to cope with them, in each task of care, control and development. Furthermore parents must be motivated to raise children and must be able to raise children, like having enough material resources (housing, food, warmth) and possessing the skills and the opportunities to adequately care and control for their children.

Key-words: Parenting, children, care, control, development.

Introduction

This title is adapted from Riley et al (1996) report on the Wisconsin Parenting Newsletter. It encapsulates the critical importance of doing a good job of raising children. But why does all else depend on it? Simply, because children are all our future. Given the inescapable process of weakening and decay in an ageing population, it is the newly rising generation of younger, stronger and better adapted citizens who will:

- create and sustain enough wealth to continue the country's development and succour the older folk;
- create a safe and protective social environment for increasingly dependent citizens;
- at the private level, ensure that older age is not fraught with a sense of wasted life, but gives affirmation to older people in terms of their contributions to continued life and progress.

But at least in developed countries, we do not raise children primarily as wealth creators, as insurance policies against old age are more general means to this end. We do so primarily because whether out of a biological imperative or as the fullest expression of our intimate strivings, we see children as extension and improved elaborations of ourselves, as ends in themselves and as creatures who by adding new dimensions to our existence will make us whole and give an unparalleled sense of purpose to our lives.

The extraordinary price we as parents pay in terms of physical pain and fatigue, financial cost, complications in marital and other relationships (particularly under conditions of adversity), constant anxiety about our children's welfare, and loss of opportunity to develop alternative lifestyles because we have children, gives some indication of the unequalled value we attach to children and the concern for their upbringing.

This paper sets out an overview of the field of parenting and child development, some of the background that has led to the unprecedented focus on parenting particularly in the UK and indicates some of the issues we need to address, if we want to raise the next generation better.

Historical perspective

Procreation is the basis of continued life, for without it the species will die. Animals have to engage in parenting in even more astonishingly diverse conditions than human beings, because they inhabit a much wider range of environments and are generally less able to change their circumstances than we are. Since the beginnings of humanity, parenting has been a major occupation. Anthropologists suggest that compared with other species, the relatively prolonged dependence of the human infant on its mother may have been the start of the differentiation between men and women, into hunter-gatherers and homemakers (French 1995).

Almost all the modern tensions between men and women, resulting not only in men's attempts to 'keep women in their place' but also feminism and other reactions to assert the equal rights of women, can be suggestively traced back to this original need to ensure that children are adequately nurtured and safeguarded (Geary 1998). The fact that in some isolated countries and at different historical times, there have been role reversals between men and women does not significantly alter the main thrust of the argument.

This tension has modern resonances as, for example, in UK Government's attempts to pull mothers of young children into the labor market whilst also emphasizing good child care. But the cost and the consequences are complex, as will be seen.

It appears that from the earliest attempts to codify and regulate human behavior (as in the laws of Hammurabi) the role and importance of parenting has been recognized. Our current understanding and indeed the word 'parent' can be traced back to the Romans who gave us so much of what we subsequently called 'civilized'. 'Parens' is the Latin root for our word 'Parent'. It comes from the verb 'parere' - which means to bring forth, create and develop. In the past in educational and social legislation (e.g. the UK 1948 Education Act) we used the phrase 'in loco parentis' for teachers and others who took on a parenting role in relations to other people's children.

The use of the verb 'parenting' is as recent as the noun 'parent' is old, and is confined as far as I can see to Western Anglophone countries - mainly Britain, Canada and United States. The nearest words in French ('parentaliser') and German ('elteuschaft') do not have either the same sense or focal literature to accompany them. The emergent use of the verb is in part an aspect of the greater differentiation in a complex society; greater focus on empirical enquiry into parenthood and the need to give the activity some academic substance; recognition, from considerable research, that in most western societies parenting process is subjected to extraordinary pressures that damage and distort it; therefore, the need to support it by a great deal of family related work which up to now has been lacking in coherence.

The word 'parent' denotes the biological relationship of a mother or father to a child. We qualify it by such words as 'adoptive' or 'foster' parents or 'parent surrogates' or carers to make sure that we keep the biological relationship intact (Clarke-Stewart et al 1995). On the other hand, the verb 'parenting' denotes and connotes a process, an activity and an interaction *usually* between a child and grown ups, not necessarily or exclusively his or her own parents. The connotation is that parenting is a positive, nurturing activity. Usually is an important qualification because there are the so called 'parental children' or young carers who look after their disabled or otherwise needy parents or younger siblings (Furman, 1995).

As parents get older, roles are gradually reversed and most children adopt an increasingly parenting role, ensuring the safety and welfare of their parents (e.g. Zarit and Eggebeer 1995). And we have now extended the process to a wide ranging social concept of 'corporate parenting' not only in commercial firms looking after their employees, but also in identifying local authorities' responsibility with children who have special needs and whom they look after (DoH, 1998). Given that even people who have no children of their own are somebody's child, brother or sister, aunt or uncle, almost everyone engages in 'parenting' activities.

Thus, when we look at its reach and significance, we see that parenting emerges as probably the most fundamental and universal concern acting as a connective tissue which joins up and cuts across, nations, generations, social classes, ethnic groups, religious or political creeds.

Where commonalities are overwhelmingly greater than the differences. Our sympathy for children and parents of Biafra or Kossovo are instances of this fundamental, universal sentiment.

Why so important?

Apart from its fundamental role in perpetuating the species, parenting determines much of the style of adaptation and health of the child from infancy to adulthood. Although children have a powerful genetic endowment, both for positive and negative development, the extent to which the positives, such as intelligence and musical aptitude are fostered and the negatives such as physical disabilities are compensated for, depends on the quality of parenting. Most environmental pressures such as poverty and bad housing make their impact on the child through reducing and distorting parents' ability to look after their children. Thus when parents fail to act as a 'buffer' against adversity, their children suffer (McLloyd, 1998).

The other impact of parents on children is when they actively damage or abuse their children (Long, 1998). These two account for most of the adversities children suffer from, as established by considerable research, much of it of high quality.

Quite recently there has been a suggestion (Harris, 1998) that for all but the youngest peer groups are more important than parents. Her conclusions are based on some original and deservedly iconoclastic look at much conventional mental health research and has provoked much positive response. There are, however, some serious reservations about her analysis. We know from extensive work that up to and including late adolescence, the degree of peer influence itself is a function of how close parent-child relationships are (Warr, 1993).

Our current evidence suggests that, as mediator of and insulation against external stressors, the quality of parenting and the parent-child relationship that results from it is the major factor in:

- hygiene related illness in children (Kumar, 1993);
- avoidable accidents inside and outside the home (Avery and Gordon, 1993, Gillham and Thomson, 1996);
- teenage pregnancy (Peckham, 1993);
- substance use and misuse (Health Advisory Service, 1996);
- children's educational achievement (Douglas, 1967, Waller, 1998);
- bullying, truancy and school exclusion (Olweus, 1993);
- child abuse (Briere et al, 1996);
- premature leaving home / running away from home (Houghghi, 1993, Ploeg & Scholte, 1997);
- skills for making and maintaining social networks (Belle, 1989);
- general anti social behavior and offending (Farrington, 1996, Rutter et al, 1998);
- problems of mental health, *perhaps* excluding serious mental illness (Dodds, 1995, Rutter et al, 1994).

The cumulative cost and impact of these difficulties demands that we should better understand tasks and processes of parenting as a means of improving them.

What is the common core of parenting?

By now there is substantial literature on parenting. The most notable recent addition is the 4 volume handbook edited by Marc Bornstein (1994), containing high quality material. My debt to that volume is great, as is evident in my references.

And yet, peculiarly neither in Bornstein nor in the myriad other publications there is any attempt to find the common denominators of what everyone agrees are parenting processes. There is almost an implicit assumption that 'everyone knows what parenting is, so let us get on with describing its practice and impact'. But this is unhelpful in either appreciating and consensually describing the full complexity of parenting or identifying the 'cause and effect' relationships which are essential for ameliorative work with parents. As is also evident in working with some hard-nosed, organically inclined colleagues, the often mushy, soft-centred discourse

does not persuade that it should be given a much higher profile in academic discourse, clinical research and practice.

Therefore, I wish to set out the core elements of the parenting task. These have been distilled from the literature and common observation of parenting. These elements, I believe to be necessary and sufficient to describe and codify parenting activity but not the process which is concerned with the 'how' rather than the 'what' of parenting.

Core parenting tasks

Like every other behavior, parenting can also be analysed at a variety of levels from the micro to the macro. Much micro behavior (e.g. feeding and washing) is similar across all ages and sorts of people and situations and cannot, therefore, be identified as exclusively related to parenting. We, therefore, need a higher order taxonomy whose elements taken together make up the necessary and sufficient structure of parenting activities. Such an approach suggests that there are three elements : care, control and development.

Care is perhaps the most obvious function. It entails 1. activities aimed at protecting the child against harm, such as disease, accident and abuse; 2. promotion of welfare. Since protective functions mentioned above do not by themselves ensure well being, much parenting activity is devoted to ensuring that the child actively thrives and does well. The first set of functions are aimed at survival, the second at positive and healthy growth.

These two aspects function across child's *emotional* and social state as well as the more obvious *physical*. Thus a child is protected against unhappiness and social isolation. Parents spend much time in making their children laugh and increasingly widen the range of their social contacts as a positive aspect of their well being e.g. in mother and toddler groups, nurseries and the like.

Care functions are universal and the most critical element for a child's survival. Although the process and quality of care giving varies across communities and social classes, its elements are deeply embedded in the culture and from the basis of child protection legislation e.g. 1989 Children Act in England and its equivalents elsewhere.

The end product of good quality care in the wider sense used here is the physical and psychological survival of a child who is also securely attached (Bowlby, 1970). This secure attachment provides the basis of psychological confidence that allows the child to venture out and utilize what developmental opportunities arise in the environment.

It is clear, however, that a significant minority of children do not receive adequate care. The most blatant and public cases are those children who are taken into the care of public authorities. Evidence shows, that far from receiving compensatory care which makes up for the damage and neglect, many of the children are further abused and neglected in the care system (Utting, 1998). Girls with a public care history are a particularly sad example, since they are so damaged by the experience of insecure attachment that they are often unable to care adequately for their own children, who are in turn taken into care. It is evident that whilst we may overcome some of the consequences of damaged care, there are some sensitive periods during development where neglect and damage leave a more permanent mark (Rutter and

Hay, 1997; Clarke and Clarke, 1976). Fortunately, there is now considerable awareness of this issue. Most parenting courses (Smith and Pugh, 1996) teach it, as do health visitors and parent toddler groups. It has also now been encapsulated in programs such as Sure Start (1998), HeadStart, Perry High/Scope targeted at some high risk families.

Control is the second important parenting function. It is aimed at setting and enforcing behavioral and social boundaries which become increasingly complex as the child gets older. Whilst not as critical for the child's physical survival as the care function, it is nevertheless the essential medium of teaching the child to recognize and avoid dangers and difficulties. This is obvious in the case of avoiding fire and observing the pedestrian traffic code. It is more subtle but nonetheless vital in recognizing social boundaries, both of person and property and thus avoiding high risk situations.

Setting boundaries is nothing like as difficult as enforcing them. It is in this area that parents are faced with the greatest challenge of parenting, which has grown in tandem with breakdown of traditional authoritarian and positional hierarchies, the proliferation of advice about parenting and children's increasing peer orientation and self-determination as they grow older.

The establishment of adequate control in the course of child rearing results in 1. the learning of cause and effect relationships with regard to behavior, social functioning and 2. the acquisition of adequate internalized controls (or conscience) in relation to personal and social opportunities and threats.

There is now considerable research to suggest that parents who place rigorous but age appropriate controls over their children and behavior in the context of a warm and loving relationship are most likely to produce securely attached and well controlled children (Wahler and Dumas, 1987). Of the four major styles of parenting identified - *authoritarian* or harsh, *indulgent* or lax, *indifferent* and *authoritative*, it is this last which is most effective. It combines negotiation (and thus reasoning and wider social perception) with enforced boundaries. Parents frequently resort to 'If you do this..then.' or 'when you have donethen' are examples of this (Baumrind, 1996), Puckering's concept of 'mellow parenting' beautifully encapsulates this (Puckering et al, 1994).

Development is the most abstract, least focused and socially enforced of parental functions. It is concerned with providing direction and opportunity for the child to explore, hone and maximize his or her potential in every area of functioning, throughout the life span. This is intimately bound up with social and economic structures of the environment and is, therefore, the most obvious casualty of difficulties in these areas. Even so, parents in every culture spend considerable time and concentrated effort in shaping their children's verbal skills, helping them walk, playing with them and providing them with opportunities for development. Parental attitude to schooling and support for school's work is a particularly important aspect of this in economically competitive societies. This is why the UK Government has engaged in a range of initiatives to increase developmental opportunities for children, particularly if they come from disadvantaged backgrounds as in e.g. Early Excellence Centres and Sure Start.

The end product of good enough development is that the child develops increasing awareness of his ability to cope with and master the world i.e. positive coping based on specific competence.

There have been many social fashions emphasizing various care, control and development functions in parenting. However, it is clear that we cannot miss out or short change any one of them without risking damage and distorted growth in the child. In this regard, clearly the *process* i.e. *how* we do things with children is as important as *what* we do with them, as we saw in relation to styles of control. The 'what' ensures survival, rule following and some personal development. The 'how' creates the attachment which breeds self respect, adaptive self regulation and positive problem solving attitudes. These create a confident sense of self efficacy and competence to deal with problems of living which are at the heart of positive mental health.

This is widely recognized (in breach as much as in observance) as the core issue for our society, given so much less than optimal parenting, hence the British Government's Green Paper on 'Supporting Families' (1998).

Over the recent decades balance of power has shifted from parents to the State, which through legislation has placed increasingly tight limits on what parents may not do with children. This process is likely to continue and become more prescriptive, as we see in most areas of parental behavior, such as immunization, home-school expectations, limitations in chastisement, and the like. This is in part because, jurisprudentially, children belong to themselves and are only in trust to their parents. Parents may not do what they want with their children and are forcibly reminded of this, if they err seriously on the side of omission or commission. On the other hand, there does not appear to be any limitation in parental responsibility for their children's misdeeds, as is apparent in the imposition of recent 'Parenting Orders' in Britain on parents of unruly children and similar measures elsewhere.

Parallel with this, in the west we have moved from a monolithic and white-centred perception of parenting practices to an appreciation of its plurality in a much more diverse and multi ethnic societies, in which considerable chunks of *laissez-faire* still prevail. On the positive side this means that in Britain unlike some of our Continental neighbors, we are happy to allow and even encourage expressions of cultural diversity such as the wearing of traditional clothing by Muslim girls. On the negative side, we ignore the terrible plight of a significant minority of children, so that large numbers are damaged by poverty and many with special needs do not receive any relevant, focused help.

To understand this, we need to appreciate the critical pre-requisites of parenting and through that, see why it is difficult to achieve any quick fixes in improving parenting practice.

Pre-requisites of parenting

As with any other task, parenting requires knowledge and understanding, motivation, resources and opportunity to undertake tasks of caring for, controlling and developing the potential of children.

Knowledge and understanding

It is an oft-repeated litany that despite some child development and social orientation courses at schools, many parents do not have sufficient knowledge of children's developmental stages and corresponding needs.

Most learning about development and children's health, intelligence and behavior is passive and opportunistic, rather than learnt and anticipated.

Child Health clinics deal with the youngest and are generally utilized in good time. This is, however, mainly by parents who are not so distracted by their own problems and needs that they do not notice their children's difficulties. There are still significant numbers of children whose difficulties, from faltering growth to speech delay, are not detected at an early date, with serious adverse consequences.

Knowledge and understanding are the minimum pre-requisite of parenting, since without them, there would be no proactive, focused parenting activity. Parents need to have some understanding of a child's state, needs and capabilities in the course of its growth, the difficulties and problems that may befall it and how to cope with them, in each task of care, control and development. Thus we have a 3x4 grid into which we can map the component pre-requisites of parenting tasks. We can add another two dimensions of 1. age/developmental stages of the child and 2. processes, thus providing a comprehensive, organic picture of life long parenting as follows:

- *tasks*: care, control and development
- *pre-requisites*: knowledge, motivation, resources, opportunity
- *developmental stages*: infant, child, young person, adult
- *processes*: engaging, anticipating, communicating, negotiating etc.

But knowledge is not the same as 'understanding'. The latter concerns an individualized idea of a particular child and its needs. Such understanding results from sustained and reflective interaction with the child, wonderful to observe in the myriad communications taking place between children and parents who are mutually engaged. This understanding provides a form of organic, implicit knowledge which enables parents to tune into their children and respond effectively to their needs. Conversely such understanding is impeded or damaged through lack of opportunity for parents and children to engage (e.g. when parents are away from children for long hours) or when parents are preoccupied with their own difficulties.

Even more important than knowledge is motivation for parenting i.e. wanting to meet the child's needs positively and, even more importantly, sustain it in the face of inevitable difficulties.

Although much is known about the theory and practice of motivation (see any psychological text book), it remains the 'black hole' of psychology where most often, parenting comes to grief. Despite apparent complexity, practical approach to improving motivation remains elemental and simplistic, reducing the extraordinary complexity of human motivational behavior to relatively primitive conditioning and reinforcement terminology.

This is particularly grave in the case of teenage parents (where there are strongly conflicting motivational states) and when there is some mental ill health or learning disability. Fortunately this is now recognized and reflected in the content of most parenting programs.

The issue is particularly highlighted in the case of parenting, which is the only lifelong bond we enter into. We cannot cease to be parents, neither can our offspring cease to be that.

The unique strength of motivation for parenting is borne out in the frequent instances of parents giving their own lives to protect their children. The recent film 'La vita è bella' and the Kosovo situation are supreme examples of this. We know that every week some parents in the UK (and no doubt elsewhere) go at least without one meal, in order to feed their children (NCH 1994). There is a powerful evolutionary background to this, given the relative helplessness and long dependency period of the human infant. It has also been powerfully shaped by cultural pressures focused on protecting children and ensuring their welfare.

And yet this singular level and intensity of protectiveness is not universal. There have been human communities (such as early Semitic peoples) where girls were selectively killed at birth in order to release resources for nurturing boys, because the latter were seen as potential hunter-gatherers and supportive labor force. There still continue to be some communities (such as the Mundugumor in the South Seas) where mothers ritually reject their newborn at birth and where the father then adopts a maternal role and nurtures the child until it has grown up.

The more important exception is in our own current culture, where parents neglect or abuse their children, to levels which beggar belief, sometimes killing them after prolonged and even deliberate torture. Examples of this are in the UK Maria Colwell, Jasmine Beckford, and numerous other instances of grave abuse.

Between these two extremes fall the many levels and qualities of motivation of parents to look after their children. As we shall see, knowing what to do and having adequate resources and opportunities for parenting are all important, but none is as critical as the level and quality of motivation. Sadly, none is more vulnerable to the vicissitudes of fortune, acquired through our own experience of parenting and affected by the general cultural climate of what we believe we can and should do to and with children. This is why despite considerable variations *within* cultures, there are apparently significant differences *between* them in terms of harm to children.

More directly, motivation is fundamentally affected by parents' own current state which is why issues of parental mental health, poverty, family break up and being under cultural stress are so significant in affecting and sometimes distorting the quality of parenting. I shall return to this later.

Another important feature, affecting motivation for parenting is the general state and temperament of the child and its effect on parents. There is by now considerable research and analytical commentary, showing that parental response is fundamentally influenced by children, from birth onwards, becoming more pervasive and complex as the child grows older. Children's temperament, ease of feeding, propensity to crying, physical health and the demands it makes on parents for extra work (as in the case of children with special needs), willingness to be cuddled and reciprocating warmth, specific difficulties such as autism and

attention deficit disorders, are all instances but by no means exhaustive of the kind and quality of pressures which dramatically affect parental feelings, attitude and behavior towards their children.

Thus parents frequently battle to do their best for their children despite enormous difficulties. This persistence should give us pause in accepting standard reinforcement theory or variations thereof, as an explanation of why parents carry on in the face of overwhelming odds. Equally it should make us wary of passing easy judgement on parents who do not do well with their children. In either case, it demands a rather more complex and probably individualized approach to parenting support. This element is almost always absent from parenting programs

Resources

Resources are the third pre-requisite of parenting. This has attracted more attention from social scientists and policy makers than any other since 'resource' has been usually interpreted narrowly as referring to income or more precisely its shortage and its consequences for parental behavior.

But 'resource' is a wider term. It refers to everything parents need, over and above knowledge and motivation, to be able to bring up their children satisfactorily.

The most important resource for parenting are the parents themselves, their presence, qualities and skills for dealing with their children's changing needs, for care, control and development.

Qualities are our fundamental personality features, inborn and shaped by experience. Though they continue to change subtly, by and large they cannot be newly created or fundamentally altered.

To my knowledge, no one has enumerated the necessary and sufficient personal qualities for parenting. They are, however, likely to include warmth, responsiveness, resilience, maturity, high frustration tolerance, good impulse control and intelligence - (not high IQ). Each of these or their functional manifestation can be enhanced both by parental experience or supportive parent education but unlikely to 'grow' if reasonable seeds do not already exist

'Skills' are what we learn as a result of natural or schooled experience. These involve parents being able to detect changes (both positive and negative) in the condition of children, recognition of what response they require (as for example detecting temperature rise or that a child is anxious) and being able to respond appropriately, either themselves or through external help. Teaching 'skills' is a common concern of parenting courses and there is considerable evidence that it is useful (Barlow 1997, Scott 1998). However, to make it more rigorous and still more useful, we need to know much more about its interaction with parents' qualities and which aspects of parents' cognition, affect or behavior it particularly influences.

Each parent can only, of necessity, bring one set of qualities and skills to parenting. Given that parenting is a complex and demanding task, two parents are more likely to provide complementary qualities and skills as well as share the considerable physical burden of parenting. This is not to say that single parents cannot and do not successfully raise children, despite extraordinary stresses it puts upon them (Fundudis 1997).

Materials

(Qualities and skills are necessary but not sufficient by themselves enable parenting.) Children have physical need for food, warmth, sleep and environment that allows these to be experienced without significant distress and ill comfort. This presumes availability of material resources and what buys them - money. In the UK there is by now a very considerable literature to show that:

- children impose a heavy financial burden on parents, so that 1 in 6 families who were not poor before are pushed into poverty with the birth of a child and this increases with subsequent children (HM Treasury 1999);
- children born to poor parents do worse in physical, intellectual and social terms. The effect is long term and cumulative and the longer it lasts, the more difficult it is to remedy (Garmezy & Masten 1994).

Opportunity

The obvious last requisite is that parents should have the opportunity - the actual face to face time in which to bring up their children and affect how they develop. This is still not a problem for most people in the world, but, it is becoming an increasingly serious problem in the West generally, and in the UK in particular

The UK has the longest working hours in Europe, particularly for men. This means that fathers in general have, compared to mothers, little time to spend with their children. This is an aspect of 'fatherlessness' particularly among the more deprived families, which is causing serious concern among politicians and commentators (Dennis and Eidos 1992, Parke 1994). The increase in employment for women, (which is now exceeding that of men for part time jobs) means that they also have less time for child rearing. Thus Government policy to drive young women into work is likely further to exacerbate this.

Clearly this is an issue of a balance of pros and cons. Evidence suggests that working mothers and those who utilize nurseries are themselves better adjusted, financially better off and have cognitively more advanced children. But there is no question that many find the demands of home and work conflicting and the attempts at resolving them exhausting. Active, face to face parenting may thus become a casualty of attempt to take mothers out of the poverty trap.

The Treasury which clearly wants long term national prosperity through a well educated work force and removal of women from welfare dependency has to recognize and calculate the long term cost to the nation of parents who are too tired or too pushed for time to meet their children's needs.

Capacity and competence

Understanding children, wanting to do the best for them and having the necessary personal qualities together, give parents the capacity to look after their children adequately. Whether

they do so or not depends on their skills, resources and opportunities. Thus our concern in working with parents is to maximize their capacity and competence for child rearing. On the evidence available, the majority, about 60-70% seem to do a good enough job of parenting, in that they bring up reasonably attached children who have an appropriate sense of their own efficacy and can cope with developmental challenges without major long term difficulties. But a significant minority have difficulties and produce children with a range of vulnerabilities.

We know much more about vulnerable families than about resilient ones. What we know suggests that resilient families have parents who are actively, positively and centrally concerned with their children; are ready to seek help if in difficulty; have adequate skills for resolving conflict, have an extended family and social network, and have reasonable skills for managing their homes and finances.

The vulnerability factors are too many to enumerate exhaustively. They include poor parental health or disability; excessive use of drugs and alcohol; poor educational background and associated poverty; chronic unemployment; unstable and disorganized families; family violence and child abuse; parental mental health difficulties; poor social and family networks and a history of criminal behavior. There are extensive social systems apparently geared to dealing with this. Unfortunately available evidence suggests that many of these conditions are deteriorating. Three major areas of parenting in adversity warrant particular mention because they are inadequately covered in current policy and practice, at least in the UK.

The first is poverty. As I have already indicated, poverty is a major factor in damaging children and scarring their prospects. However, the latest evidence confirms the common observation that children of equally poor people are as diverse as children of richer parents - from badly neglected and damaged to the resilient and socially competent. What makes the difference is the quality of parenting i.e. parents ability to give priority to their children's welfare and do so actively and persistently (McLloyd 1998). We also know of course that despite this, poverty leaves its mark

The challenge for Government and professional is not just more money for the poor but changing the collective mindset which is the 'culture of poverty'. In such a culture, the very language, which is the common currency has within it themes of hopelessness and helplessness, which act as the undertow and negate long term effects of any simple monetary help (Houghghi 1997).

The recent Treasury Report on Tackling Poverty (1999), paints a grim picture of how 2 out of every 5 children are poor and that there are now three times as many than in 1979 who are at least in the short term, getting poorer. The multitude of Government initiatives to regenerate communities and mitigate some of the more serious consequences of poverty are unlikely to succeed, just as Beveridge did not. Thus in something like Sure Start and Early Years education, our job is not just to combat parents' poverty but also to change their mind set, enable them to use a more assertive and hopeful language and increase their sense of self efficacy. This is as hugely complex and difficult as it is urgent.

In terms of its extent and debilitating force, an even bigger problem than poverty is the mental health of parents. Unfortunately the term mental health having been hijacked by psychiatry, has now become synonymous in the public mind with mental illness. In the parenting

literature, the same tendency occurs, which is why the overwhelming research focus is on maternal depression and its impact on child rearing (e.g. Field 1994).

But mental illness, such as psychoses and depression are a small and extreme end of the spectrum and by themselves affect only a small though sizeable proportion of parents. Further along the spectrum lie many other difficulties, sometimes persistent but not always referred to specialists. These affect not only mothers but also fathers, other siblings and significant people within the family. They range from sub clinical depression, mood disturbances and anxiety to personality disorders. But beyond these disorders are also reactions to problems of living which significantly undermine psychological well being of parents and thus their capacity for parenting.

Whether and to what extent the impact of these is on cognition, affect or motivation of parents is not clear at present. Some researchers estimate the cumulative prevalence of these difficulties to affect about 40% of the population. They include parental discord and separation, family violence, reactions to unemployment and job insecurity, physical ill health and disability, alcohol and drug taking and many others. Yet clinicians, concerned as they are with adult mental health, rarely trouble to ascertain or counteract the impact of parental mental health difficulties in children.

Conflict between parents, ranging from persistent bickering to violence against partner and the break up process are a major source of psychological stress, affecting children with more or less long term adverse consequences (Wilson and Gottman 1994). Even very young children show adverse psychological reactions to simulated parental conflict, much more evident as children get older, before they have managed to develop adequate coping mechanism.

Given the extent and gravity of marital conflict and parental break up, we need much more focal approaches to this and the wider issues of parents' psychological well being if we want the next generation to fare better (Hoghughi 1999)

In the UK, the new early intervention program, Sure Start only mentions maternal depression; the Home Secretary's Green Paper on Supporting Families recognizes the difficulty but has no solutions (other than the omnibus 'enhanced health visiting') and the Health Secretary's White Paper on Mental Health does not even mention it. We need to do much better in this area if we are not to have even more damaged and partially developed children as problems of living take an even bigger toll of parents.

Ethnic minorities

The evidence on the prevalence of mental health difficulties in minority ethnic communities in the UK is mixed. On the whole the West Indians do badly, those from India and Pakistan reasonably well. We know little about the Bangladeshi and smaller communities. There is no question that certain strong cultural patterns of parenting and existence of extended networks are major protective factors in the reasonably well adopted patterns of bringing up children in some of these communities (Coll et al 1994).

But there are a number of factors which warrant a greater attention to minority ethnic children and their parents' difficulties in rearing them adequately. In the UK (and probably elsewhere):

- they are on the whole financially and materially worse off;
- they are subject to and suffer from institutional racism, as confirmed in both MacPherson 1998 and OFSTED 1999 reports. I suspect if we had other enquiries appertaining to other local and national services, they would come to a similar conclusion;
- this damages the well being and educational achievement of a significant group of children;
- parents are wary of official services and do not voluntarily make (proportionate) use of them;
- because of this some children's difficulties get much worse than they need be if services were offered earlier;
- there are tensions and conflicts between generations of minority ethnic communities in regard to keeping their own identities, behaving in traditional ways or being assimilated into the indigenous culture - issues of marginalization or integration versus assimilation or alienation are particularly potent.

All these issues warrant greater attention to the psychological well being of minority ethnic children and their parents than currently addressed in various programs though the HeadStart programs recognized its importance.

Parenting society

Everything that I have said so far shows that parenting, though a natural process, is probably the most complex and taxing job humans are ever likely to undertake

Parents can only do this to the extent that their capacity and competence allows them to do. These in turn depend not only on their innate qualities but even more dramatically on the quality of support and social affirmation we give them. In simple terms, this means that parents can only love and nurture their children in the long term, to the extent that they are themselves loved and nurtured.

Given the fundamental importance of child rearing to our future, this implies that we adopt the concept of a 'parenting society' as the organizing principle of all we do. At whatever level, from the Government to the individual, we have a duty of mutual care, control and development to all our citizens. Our children are the children of all of us and parents hold them in trust on behalf of all of us. We should, therefore, adopt a parenting attitude to them and each other, recognizing our mutual rights and responsibilities, with particular attention to enhancing parenting capacity and competence. Much of what I've said suggests that, at least in the UK we have not been doing very well and at the bottom end may be doing worse.

This demands that we see parents as an integral part of the children's welfare, across the developmental life span and thus integrate our services focus on them. Parents are both their children's primary educators and their national health service. Helping them do a better job makes economic and social sense. This is as difficult and challenging a task as it is necessary, because after all nothing matters more than raising the next generation and doing it better.

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