

The Mental Health of Children and the Factors Which Influence It

A Study of Families in Ballymun Summary Report

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Summary Report

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As with all studies, it is important to emphasise that responsibility for the report rests entirely with the authors.



Introduction

This report was commissioned by the Ballymun Development Group for Children and Young People. The context for this study was set out in July 2005 in the invitation to tender:

“The Ballymun Development Group for Children and Young People (BDG) is in the process of developing a 10-year plan aimed at improving the quality of life for children and young people in Ballymun. This plan will be supported by a number of pieces of work and will be focused on the delivery of positive child outcomes. The pieces of work supporting the 10-year plan are as follows:

- i. The Child's voice
- ii. The Community voice
- iii. An audit of existing services
- iv. Evidence of existing need
- v. What works?
- vi. The national policy context
- vii. Needs analysis.”

This study corresponds to the piece of work entitled 'Needs Analysis'.

Definition of Need

In order to carry out a study of need, it is necessary to begin with a clear definition of need. Children are said to be in need when their well-being is below a threshold that is regarded as either normal or minimal. Need is a multi-dimensional concept covering all aspects of the child's well-being including: physical, psychological, relationship with parents and peers, education, out-of-school activities, etc. Children's well-being is also heavily dependent on the well-being of their parents and, for this reason, a proper understanding of children's needs must take into account the well-being of their parents: physical, psychological, relationship with partner and with child, social supports, etc. In addition, since children's needs are influenced by the socio-economic status of their household and the broader physical environment, it is therefore necessary to measure household income, employment and education as well as neighbourhood perceptions. It is this understanding which informs our approach to assessing the psychological needs of children in Ballymun.



The Sample

The study is based on a representative sample of 149 households where there is a child up to the age of 17 years. The sample was selected by means of the standard Random Route procedure. This ensured that each household was selected by objective principles – rather than chosen by interviewers – in accordance with their numerical distribution within the geographical area. The questionnaire was successfully self-completed by 83% of the mothers who agreed to do so. This response rate is adequate and provides a representative sample of households with children in Ballymun, having a sampling error in the 5-8 range at the 95% confidence level.

The interviews with each mother included a set of questions on one child in the household, aged over four years, based on the Strengths and Difficulties Questionnaire (SDQ)¹. The SDQ is a validated and reliable instrument for assessing behaviours, emotions and relationships, and was created by Robert Goodman during the 1990s for the purpose of screening children who may have mental health or psychiatric needs. It is therefore a useful proxy measure of psychological well-being. It is suitable for 3-16 year olds and can be completed by the child (if over 11), the parent (for children aged 3+), and the teacher (for children aged 3+). The SDQ was completed on 128 children. In addition, a sub-sample of 53 children (aged 11-16) in the qualifying households self-completed a child questionnaire.

Thus the study is based on three sub-samples as follows:

- 149 mothers who self-completed the parent questionnaire
- 128 children who were assessed by their mother using the SDQ, these being a sub-sample of the 149 mothers who had a child aged over 4 years
- 53 children (aged 11-16) who self-completed the child questionnaire

Questionnaires

The instruments used to measure the needs of children and their parents in this study meet the three criteria identified by the National Children's Office in its recent wide-ranging review of appropriate indicators for measuring child well-being². The three criteria are that indicators should be:

- Important and therefore cover significant aspects in the child's life
- Practical and therefore have good comparable data in order to assess need
- Robust and therefore measure well-being using valid and reliable instruments

The instruments and the dimensions of need which they measure are detailed in the main report.



¹ For more information, see www.sdqinfo.com; see also Goodman, 1997; Goodman, Meltzer and Bailey, 1998; Goodman and Scott, 1999; Goodman, 1999; Smedje, Broman, Hetta and von Knorring, 1999.

² Brooks and Hanafin, 2005; Hanafin and Brooks, 2005;

Characteristics of Households

We compared the characteristics of households in Ballymun with households in Ireland and found, as expected, that Ballymun is distinctive in a number of respects:

- Lone parenthood is the predominant family form and the family type that children are most likely to experience. The ratio of one to two parent households in Ballymun is 60/40 compared to 20/80 in Ireland.
- Residents in Ballymun are nearly ten times more likely to rent their home from the Local Authority (65%) compared to Ireland (6.9%).
- Mothers in Ballymun are twice as likely to be in the lowest socio-economic position (67%) compared to mothers in Ireland (32%).
- Mothers in Ballymun leave school earlier and a majority (75%) have no higher than a Junior Certificate, whereas the majority of mothers in Ireland (65%) have a Leaving Certificate or higher.
- Ballymun mothers are more likely to be home-makers compared to Ireland (53% compared to 40%) while those at work are more likely to be in part-time employment (29% compared to 18%).
- Mothers in Ballymun experience a much higher level of financial strain – as measured by difficulties in coping financially – compared to Irish mothers (36% compared to 15%). Indeed, the level of financial strain among mothers in Ballymun is well above that experienced not only by Irish households generally but also by reference to specific groups which are vulnerable to poverty such as households with children, older people, unemployed, and the ill/disabled³.

These findings are not surprising to those familiar with Ballymun and are consistent with its status as one of the more disadvantaged parts of Ireland. Nevertheless the comparative analysis serves to highlight just how different the experience of living in this small geographical area is likely to be by comparison with Ireland given the strong concentration of lone parents, the high density of local authority housing, a generally low level of educational attainment and a relatively high level of financial strain. A number of initiatives have been put in place to address the disadvantaged status of Ballymun but less is known about the needs of children and their parents, and how these compare to the rest of Ireland. That is the issue which we explore in the rest of the report.

³ Whelan, Nolan and Maitre, 2005

Mothers' Perceptions of Children's Strengths & Difficulties

We used the Strengths and Difficulties Questionnaires (SDQ)⁴ to assess the extent of psychological need among children in Ballymun, based on the responses of mothers. The SDQ assesses if the child's behaviours, emotions, and relationships fall within internationally agreed mental health categories of normal, borderline or abnormal. Questionnaires were completed by mothers on 128 children over the age of four and involving slightly more boys (71) than girls (57). In families with more than one child over the age of four, mothers were directed to 'focus on the child who may be causing you the most concern over the past six months'. Most of the children fall into two age categories: those aged seven to twelve (48%) and those aged thirteen to seventeen (38%).

The SDQ has three different measures to identify children whose mental health needs meet DSM-IV diagnostic status⁵, or 'child psychiatric caseness'⁶, and we used all three measures to estimate the prevalence of need among children in Ballymun. The three measures are:

- (i) 'SDQ Symptoms' which refer to 25 symptom statements about the child from which a total difficulties score is computed as well as scores for five sub-scales – emotional symptoms, behaviour problems, hyperactivity, peer problems and pro-social behaviour.
- (ii) 'SDQ Perceived Difficulties' which comprises one question to the mother: 'overall, do you think that your child has difficulties in one or more of the following areas: emotions, concentration, behaviour or being able to get on with other people?'
- (iii) 'SDQ Impact' which is based on a question to assess the impact of difficulties on the child in terms of distress and interference with home life, friendships, classroom learning and leisure activities.

The results show that the proportion of households in Ballymun with a child in the borderline or abnormal range of the SDQ – and therefore a reliable indicator of a child in need – is in the range 26% to 42%, with a mid-point of 34%. Extrapolating this result to all households with children in Ballymun, we estimate that the number of households in Ballymun with a child in need because of difficulties associated with their behaviours, emotions and relationships is somewhere between 700 and 1,000.

The main area of need among children in Ballymun is conduct problems with more than half (52%) falling outside the normal range. Conduct problems were measured by the mother's response to the following statements about the child: 'often has temper tantrums or hot tempers', 'often fights with other children or bullies them', 'often lies or cheats', 'steals from home, school or elsewhere', 'generally obedient, usually does what adults request'. The level of need is somewhat higher among boys than girls, and higher among pre-teenage than teenage children, but the differences are not great. This is in line with other studies⁷.

The scale of need among children in Ballymun appears high when compared to other children in Ireland, based on a range of studies. However, since this study measures the prevalence of households with a child in need whereas other studies measure the prevalence of children in need, it is to be expected that the prevalence rate in Ballymun would be higher than indicated by other studies. Most other studies in Ireland measured the needs of children using the Rutter Scale⁸ – which has a high correlation with the SDQ⁹ – and these show that about 20% of children living in disadvantaged families and communities show evidence of a psychiatric disorder which mainly finds expression in behavioural problems¹⁰.

Depth of Need Among Children

Given that this study is contributing to the preparation a 10-year plan for children in Ballymun, we assessed the depth of need by comparing the mean scores of children in Ballymun with the mean scores of a nationally representative sample of over 10,000 children in Britain¹¹, since there are no corresponding representative studies of children in Ireland using the SDQ. This was done by calculating effect sizes, a statistic which gives an indication of how far Ballymun children may be from the normal range, and therefore the challenge facing any potential interventions to help these children. Our analysis revealed that the SDQ total difficulties score for all children in Ballymun is well above the average for children in Britain with an effect size of 0.6; Ballymun children who are in the abnormal range have an effect size of 2.8 relative to the mean score of children in Britain. In order to appreciate the significance of these effect sizes – and therefore the scale of need involved – it is useful to remember that the most effective programmes for children and families tend to achieve effect sizes in the range 0.5 to 0.8 and many with a deserved reputation for effectiveness, such as the High/Scope Perry Pre-School Programme, have achieved much lower effect sizes¹². In other words, the scale and depth of need among children in Ballymun is considerable and poses a challenge in terms of finding an appropriate set of interventions which will make a significant improvement to their lives within a realistic timeframe.

The difficulties of children are far from transient with most (72%) being present for over a year, suggesting some degree of entrenchment. In turn, these difficulties impose a considerable burden on over a third (36%) of mothers and their families.

4 Available at www.sdqinfo.com

5 DSM-IV refers to Diagnostic and Statistical Manual of Mental Disorders which sets out the diagnostic criteria developed by the American Psychiatric Association (1994).

6 Goodman, 1999.

7 See for example, Simpson, Bloom, Cohen, Blumberg and Bourdon, 2005.

8 The Rutter Scale is a 26-item screening questionnaire created by Michael Rutter which can be completed by either parents or teachers for the purpose of detecting psychological disorders among children (Rutter, 1967).

9 Goodman, 1997

10 Fitzgerald and Jeffers, 1994; O'Connor, Ruddle and O'Gallagher, 1988; McCarthy and O'Boyle, 1986; Porteus, 1991; O'Rourke and Fitzgerald, 1985; Lynch, Fitzgerald and Kinsella, 1987; Barton and Fitzgerald, 1986; Stone, Fitzgerald and Kinsella, 1990; Mohan, Fitzgerald and Collins, 1998.

11 See Meltzer, Gatward, Goodman, and Ford, 2000; see also www.sdqinfo.com

12 See for example Schweinhart and Weikhart, 1997; Schweinhart, 2004. This is similar to the results of a meta-analytic review of the effect sizes associated with family support programmes (Layzer, Goodson, Bernstein and Price, 2001) and other pre-school prevention programmes (Nelson, Westhues and MacLeod, 2003).

Children's Perceptions of their Well-Being

A sample of 53 children in Ballymun aged 11-16 were selected to complete a questionnaire which measured various aspects of their well-being. This was compared to a representative sample of Irish children in the same age group and using the same instruments¹³. The Ballymun children are a sub-sample of the main sample of 149 households on which the study is based and, by virtue of its smaller size, has a higher sampling error (in the 8-14 range at the 95% confidence level). The key finding to emerge from the survey is that Ballymun children assess themselves as having similar levels of well-being compared to other Irish children. Given our definition of need – having a lower level of well-being relative to a given standard – this implies that children in Ballymun do not perceive themselves as having needs.



This is a surprising result because it is contrary to the perceptions of mothers, over 40% of whom consider their children to have problems. There are a number of possible explanations for this result. The first possibility is that the sample is small and the corresponding sampling error creates a wide margin of error. In view of this one might expect that a larger sample would yield results showing a greater congruence between the perceptions of mothers and children on the extent of children's needs. The second possibility is that the self-completion format, which was used in both the national sample and in Ballymun, may not have been appropriate in Ballymun. We tested this on a small sub-sample of 12 Ballymun children and re-interviewed them to find that the overall scores were not significantly different using the self-completion and interviewing formats. The third possibility is that there is a very low correspondence between the perceptions of mothers and children, irrespective of the measurement instrument. We tested this

by analysing data on 29 Ballymun children for whom we have both the mother's perceptions of the child using the SDQ, and the child's perceptions using the Beck Youth Inventories of Emotional and Social Impairment¹⁴. We found that only 12% of the variance in the SDQ scale was explained by the Beck scale and vice versa indicating a very weak relationship between the two measures. We also re-examined data from a previous study – an evaluation of the Springboard family support programme¹⁵ – where we had SDQ data on 135 children completed by mothers and children and found that mothers' scores explained 20% of the variance in children's scores, and vice versa, also indicating a very low level of correspondence between the two measures. It is the third possibility therefore which is the most likely source of this surprising result.

These considerations suggest that parents and children have quite different perceptions of reality, particularly the reality of a child's psychological well-being. When these perceptions are measured using standardised psychometric instruments it emerges that children tend to have much fewer concerns about themselves than either mothers or teachers, who may also have different concerns from each other about the child. This difficulty is not unique to this study and has been widely documented¹⁶. Perception-based measurements to assess a child's psychological well-being – such as self-concept, behaviour, emotions, etc. – are quite unlike performance-based measures for assessing other child outcomes such as reading, writing, school attendance, trouble with the law, etc., where the child outcome can be observed directly. In other words, measuring the psychological well-being of children is essentially measuring the extent to which there are concerns about the child and these concerns tend to be much higher among parents and teachers than among children, although there may also be a minority of children whose difficulties go undetected by parents or teachers.

Viewed from this perspective, the finding that children in Ballymun do not perceive themselves as having problems – leaving aside the question of sampling errors – is an extremely positive result because it indicates that children have fewer concerns about themselves than adults. At the same time, mothers have many concerns about their children and these have to be taken seriously since, by themselves, they are likely to affect the well-being of both parents and children. These considerations suggest the need to re-frame the conventional understanding of assessing the needs of children – at least those needs in the broad psychological domain – as unveiling some objective reality about the child; rather they are a method for identifying the type and extent of concerns which parents and teachers may have about children. These concerns are the needs that are to be addressed and, as we shall see in Chapter Six, they often

reveal as much about the well-being of parents as they do about the well-being of children.

The practical implication of this result is that the use of psychometric instruments to measure children's perceptions of well-being, while of great value in the context of clinical assessment, are of limited value in the context of assessing the prevalence of children in need within a community because they are unlikely to indicate the true extent of concern which exists about those children. Given that parents and teachers have much more concerns about children than the children themselves – although a minority of children may also have difficulties which go undetected – the sensible approach is to confine the community assessment of need to the perceptions of parents and teachers. There are other ways of including the voice of the child, including those being used by the Ballymun Development Group for Children and Young People, and these can be much more valuable in terms of throwing light on how children perceive their concerns.

Well-Being of Mothers

We assessed the well-being of mothers in Ballymun relative to the well-being of mothers in Ireland using a common set of measurement instruments¹⁷. In order to establish the extent of need among mothers in Ballymun, we compared the mean scores of both sets of mothers and standardised the difference using the effect size statistic while also testing if the difference in each set of mean scores was statistically significant.

The results show that Ballymun mothers have a slight but significant tendency to have more physical symptoms of anxiety than Irish mothers. Typical symptoms of anxiety include nervousness, suddenly scared for no reason, heart pounding or racing, and feeling that something bad is going to happen to you. This may indicate a physical problem but may also point to psychological difficulties since a person's self-reported symptoms may indicate as much about their psychological state as their physical state. Indeed, there is growing evidence that a person's physical well-being is influenced by their psychological well-being since "the immune systems of happy people work more effectively than those of unhappy people ... [which] may account of the longevity of happy people"¹⁸.

In terms of health behaviour, there is a slightly higher usage of alcohol in Ballymun (78%) than in Ireland (70%), while the rate of smoking in Ballymun (75%) is more than twice the national average (33%). The main drugs used by a significant minority (15%) of Ballymun mothers are 'sedatives, tranquillisers or anti-depressants' which is three times higher than the national average (5%). The use of cannabis by Ballymun mothers (6%) is also three times higher than the national average (2%); methadone use (4%) is also well above the national average (0.2%), as is the use of heroin (1.4% compared to 0.1%).

In terms of emotional well-being, Ballymun mothers have lower levels of positive affect than Irish mothers but similar levels of negative affect. However their psychological well-being is significantly below that of Irish mothers, particularly in the sub-scales measuring purpose in life, self-acceptance, personal growth and positive relations with others. Overall the difference in psychological well-being between mothers in Ballymun and Ireland is equal to an effect size of 0.35, which is higher than the effect size achieved by many family support programmes¹⁹. In addition, Ballymun mothers have experienced a higher number of negative life events than mothers in Ireland and tend to have significantly weaker support networks, although they are just as satisfied with their neighbourhood as other Irish mothers.

In general, mothers in Ballymun have a weaker parent-child relationship than mothers in Ireland which expresses itself in terms

¹³ McKeown, Pratschke and Haase, 2003

¹⁴ Adapted from Beck, Beck & Jolly, 2002

¹⁵ McKeown, Haase and Pratschke, 2001

¹⁶ For a review, see Beck, Beck and Jolly, 2001

of feeling less satisfied with themselves as parents and less able to set appropriate limits on their children. The issue of limit-setting is a particular problem for Ballymun mothers who use much more discipline on their children compared to Irish mothers. Non-violent discipline (such as explaining why something was wrong) is the most frequently used form of discipline by both sets of mothers, but Ballymun mothers use it more frequently than the average Irish mother. Ballymun mothers also use much more psychological aggression (such as shouting, yelling or screaming at the child) than Irish mothers and, although minor physical assaults (such as shaking or slapping the child) are relatively infrequent, they are nearly twice as likely to be used to set limits on children by Ballymun mothers. Severe physical assaults (such as hitting or kicking the child) are infrequent with no statistically significant difference between Ballymun mothers and Irish mothers. These results paint a picture of mothers in Ballymun who seem to over-discipline their children on the one hand while nevertheless feeling unable to control them on the other.

In terms of intimate relationships with partners, we found no significant difference in the quality of intimate relationships experienced by mothers in Ballymun and Ireland. However there are two areas of significant difference namely, the ability to resolve conflicts, and the use of aggression with Ballymun mothers being less effective at arguing and more prone to aggression, particularly psychological aggression. Mothers who are less effective at arguing tend to agree with the statements that 'our arguments are left hanging and unresolved', and 'we go for days without settling our differences'. Consistent with this, Ballymun mothers are significantly more likely to use minor psychological aggression towards their partner such as 'I insulted or swore at my partner', 'I shouted or yelled at my partner' or 'I said something to spite my partner'.

These results throw light on the extent of need among mothers in Ballymun where need is defined as a statistically significant difference in well-being between mothers in Ballymun and Ireland, usually involving an effect size of 0.2 or more. The needs identified in this study are important in their own right because they impact on the well-being of mothers but are also important, as we show in the next section, because of their impact on children.

¹⁷ McKeown, Pratschke and Haase, 2003

¹⁸ Carr, 2004:29

¹⁹ For a meta-analytic review of the effect sizes associated with family support programmes, see Layzer, Goodson, Bernstein and Price, 2001; the effect sizes associated with pre-school prevention programmes are summarised in Nelson, Westhues and MacLeod, 2003.

Key Influences on Children's Psychological Well-Being

This study has shown that the scale of need among children in Ballymun is substantial. However it is probably more important to know if there are some statistically reliable indicators to help identify households where children are experiencing poor psychological outcomes and, once identified, what type of factors would need to be addressed in order to improve those outcomes. We tried to find answers to these questions by using correlation analysis²⁰ and logistic regression analysis²¹ to test the level of association between children in the abnormal range of the SDQ (the dependent variable) and various socio-economic and family variables (the independent variables).

In Table 1 we list the variables which were tested in the regression analysis in order to identify those which had a statistically significant association with children whose scores fell within the 'abnormal' range of the SDQ. This list was derived from a much larger correlation matrix and only those variables which were significantly correlated were entered into the regression analysis. The results reveal that, of the independent variables tested, only four were statistically significant. The four variables that influence the psychological well-being of children, in order of statistical importance, are: (i) mother's physical well-being (ii) parent-child relationship (iii) subjective financial well-being (iv) one parent household.

Table 1

Results of Regression Analysis on Factors Associated with Ballymun Children in Abnormal Range of the SDQ

Variable	Statistical Significance
Mother's physical well-being	Statistically significant ***
Mother-child relationship	Statistically significant ***
Subjective financial well-being	Statistically significant *
One-parent household	Statistically significant *
Psychological well-being	Not significant
Negative affect	Not significant
Disciplining practices	Not significant
Use of cigarettes, alcohol and drugs	Not significant
Monthly income	Not significant
Level of education	Not significant
Unemployed	Not significant
Local authority rented accommodation	Not significant

* Statistically significant (p<0.05).

** Statistically significant (p<0.01)

*** Statistically significant (p<0.001)

These results are important in two ways. First, they offer clear and statistically reliable guidance on the type of factors which need to be addressed in order to improve the psychological well-being of children. Second, the results show the importance of family processes in shaping the psychological well-being of children, although the overall socio-economic environment in Ballymun remains an important background context within which the high prevalence of need has emerged in the first place. This result is in line with a recent review of the literature on child outcomes generally which observed that socio-economic indicators "have relatively limited utility as guides for designing effective interventions because they tell us relatively little about the causal mechanisms that explain their impacts on child development. Thus, researchers and service providers are focusing increasingly on the importance of within-group variability and individual differences among children and families"²².

We now examine in more detail each of the four factors which influence child outcomes. We do this by analysing the variables which are correlated with each of these factors since this will offer guidance on how interventions might be designed to alter the risk and protective factors associated with each influence.

Physical Well-Being of Mothers

The physical well-being of mothers, as measured through the presence of symptoms, has the strongest influence on the psychological well-being of children in Ballymun. We found, as have other studies²³, that physical well-being has a strong emotional and psychological dimension since mothers with more physical symptoms are likely to have more negative feelings and reduced psychological well-being. They also have more difficulty coping financially and to have experienced more negative life events. The use of cigarettes, alcohol and drugs – which is more prevalent in Ballymun than in Ireland – also reduces physical well-being but to a much lesser degree than the factors just mentioned.

These results draw attention to the intimate relationship between children's psychological well-being and the well-being of their mothers. Mothers who are not well physically and psychologically will tend to have children who are not doing well psychologically. This suggests that any intervention to improve the psychological well-being of children needs to address the physical and psychological well-being of mothers. This study did not collect data on the well-being of fathers but interventions should also give consideration to their physical and psychological needs.

Parent-Child Relationship

The second strongest influence on the psychological well-being of children in Ballymun is the mother-child relationship. When this relationship is weak, as so much research has documented²⁴, children are more likely to have problems. We found that weaker parent-child relationships were associated with greater use of discipline, a finding which suggests that the mother's capacity set appropriate limits on the child is diminished by the excessive use of discipline. We have seen earlier that Ballymun mothers use much more discipline on their children compared to Irish mothers, including psychological aggression and minor physical assaults, some of which could be regarded as child abuse, as the term is understood in Ireland and elsewhere²⁵. Significantly, the parent-child relationship is also strongly related to the mother's emotional and psychological well-being as well as her support networks and tends to be weaker in one-parent households. These findings suggest that any intervention to improve the mother-child relationship will need to help the mother with the practical skills of interacting appropriately and effectively with the child, particularly in terms of setting limits, but also improving her emotional and psychological well-being.

Subjective Financial Well-Being

Children in Ballymun experience poorer psychological outcomes when their mothers have difficulty coping financially and it would appear that these mothers have much more difficulty in this area than virtually every other vulnerable group in Ireland for which there is information²⁶. However on further analysis we found that difficulties in coping financially are strongly associated with negative life events, some of which may have financial implications such as serious illness or injury to one's self or a loved one, problems at work, loss of job, etc. Mothers who have difficulty coping financially are also more likely to have reduced emotional, psychological and physical well-being and, as we have already seen, to have a poorer relationship with their child. This may not be helped by the use of cigarettes, alcohol and drugs which is also strongly associated with difficulties in coping financially. Being a mother in a lone-parent household is a strong predictor of financial difficulties although actual monthly income and support networks, while statistically significant, are the weakest influences on the ability to cope financially.

The findings on financial well-being provide an important insight into the deeper reality which underlies the experience of having difficulty in making ends meet. It is clear from this analysis that helping people to cope financially involves much more than money however important

that may be in particular cases. Helping people to cope financially also requires, as a prerequisite, helping them to cope with themselves and the life events that they experience. Given that lone mothers have most difficulty coping financially this provides an important insight in how interventions might be targeted for the benefit of both the mother and the child.

One Parent Households

Children in one-parent households in Ballymun have a greater likelihood of having psychological problems compared to two-parent households. This is the weakest independent influence on children's psychological well-being although, as we have seen, it is also associated with both a weaker parent-child relationship and with difficulties in coping financially.

The finding that one parent households in Ballymun are more likely to have children with psychological problems is helpful in terms of planning interventions for children since this is a clearly identifiable group requiring support. Naturally there are children in need in two parent households who also require support. However it is significant that family type is the only socio-demographic indicator available to help identify households with children in need and underlines the importance of internal family processes in shaping the psychological well-being of children.



²⁰ Correlation analysis measures the extent to which two variables - one designated as dependent, the other as independent - are associated. The correlation coefficient is the percent of variance in the dependent variable that is explained by the independent variable when all other independent variables are allowed to vary. The magnitude of the correlation coefficient reflects not only the unique covariance it shares with the dependent variable, but uncontrolled effects on the dependent variable attributable to covariance which the independent variable shares with other independent variables. This makes correlation analysis more limited than regression analysis.

²¹ Regression analysis is a method of explaining variability in a dependent variable using information about one or more independent variables; it is referred to as multiple regression analysis because there is more than one independent variable. The regression coefficient is the average amount the dependent variable increases when the independent variable increases by one unit and other independent variables are held constant. The fact that regression analysis holds constant the

influence other independent variables makes it a significantly more powerful statistical technique than correlation analysis. In logistic regression, the dependent variable is binary or dichotomous and is used, in this context, to assess the likelihood of a child being, or not being, in the abnormal range of the SDQ. The results of logistic regression are expressed in terms of the odds ratio where 1.0 means there is no relationship, less than 1.0 indicates an inverse or negative relationship, and greater than 1.0 indicates a direct or positive relationship.

²² Shonkoff and Phillips, 2000:354.

²³ McKeown, Pratschke and Haase, 2003, Chapter Three

²⁴ For a review of the evidence, see Shonkoff and Phillips, 2000:225-266

²⁵ Department of Health and Children, 1999; 2002.

²⁶ Whelan, Nolan and Maitre, 2005

Implications

The findings of this study have a number of implications for the preparation of a ten-year plan for children in Ballymun. We present them as issues for consideration rather than specific recommendations in keeping with the deliberative nature of the planning process.

First, we have established that around a third of all households in Ballymun have a child in need as measured by the SDQ, somewhere between 700 and 1,000 households with children. The SDQ measures a wide range of domains through its symptoms measure (behaviour, hyperactivity, emotions, peer relations, and prosocial attitudes) and its impact measure (by assessing the impact of difficulties on home life, friendships, classroom learning and leisure activities). Given the numerous advantages of the SDQ, it might be useful to adopt this as a global measure to assess the overall impact of the strategic plan, while acknowledging that more detailed measures would also be required. In addition, the prevalence of children with psychological problems identified in this study might serve as the baseline benchmark against which progress is measured.

Second, an innovative feature of the study is the use of effect sizes to measure the depth of need. This is calculated as the difference in mean scores between two groups divided by their pooled standard deviation. Using this statistic, we compared the mean SDQ scores of children in Ballymun with the mean scores of a nationally representative sample of over 10,000 children in Britain, since there are no corresponding representative studies of children in Ireland using the SDQ. This is a useful way to measure need since it gives an indication of the journey which must be undertaken if children are to move within the normal range and the corresponding challenge facing any potential interventions. For example, our study estimated that the SDQ total difficulties score for all children in Ballymun is well above the average for children in Britain with an effect size of 0.6 while Ballymun children who are in the abnormal range of the SDQ have an effect size of 2.8 relative to the mean score of children in Britain. This indicates a huge scale of need, particularly among those in the abnormal range. In order to appreciate the scale of need, it is useful to remember that the most effective programmes for children and families tend to achieve effect sizes in the range 0.5 to 0.8 and many, such as the High/Scope Perry Pre-School Programme have achieved much lower effect sizes of 0.36. Thus the use of effect sizes could help in the search for appropriate interventions as well as in setting targets that would be realistic and achievable. For this reason, we suggest that changes in effect sizes might be a useful way of monitoring progress in a

standardised way while also allowing comparison with similar initiatives and programmes elsewhere.

Third, in designing interventions to improve outcomes for children it is important to keep the overall socio-economic context of Ballymun clearly in mind. We have found that socio-economic and demographic variables are not good predictors of which households will have a child with psychological problems. However these variables are good predictors of where the overall number of children experiencing poor outcomes will be found, and this is typically in areas like Ballymun. This implies that attention needs to be paid to the different aspects of disadvantage in Ballymun and to ensuring that existing services are effective and coordinated while also developing new services which well tailored to the needs of children at different stages of the life cycle, but especially the early years.

Fourth, at the level of households, we have identified in a statistically reliable way, that one-parent households are more likely to have children with poor psychological outcomes. This does not mean that there are not children with poor outcomes in two-parent households or that interventions should be targeted only at one type of household only. Rather, it might be used as a sensitivity indicator to ensure that lone parents are well-represented – even over-represented – in any services designed to improve the psychological well-being of children.

Fifth, and still at the level of households, it is important and helpful to know that the two most significant ways to improve psychological outcomes for children in Ballymun are: (i) improve the physical, psychological, emotional and financial well-being of mothers; and (ii) improve the mother-child relationship, especially the skills required to set appropriate limits on the child without using excessive or harsh discipline. This is a statistically reliable result that would be unwise to ignore.

Sixth, we have learned from this study that the best way to measure the prevalence of psychological need among children in the community is through the perceptions of parents – possibly supplemented by those of teachers – essentially because children have fewer concerns about themselves than adults. This difficulty does not arise in the measurement of other child outcomes such as reading, writing, school attendance, trouble with the law, etc., which lend themselves to performance-based measures.

Seventh and finally, it is important to draw attention to three limitations of the study which, if gone unnoticed, could lead to an imbalance in the design of interventions to improve child outcomes. The first limitation is that the range of outcomes covered in this study is narrower than the range that might appropriately be covered by

the ten-year plan for children which might also include specific interventions in the areas of children's education (including support for pre-school, in-school, out-of-school, and after-school activities) and children's physical health (including nutrition, sport and leisure). The second limitation is that the study is based solely on the experiences of mothers and their children. This, while unavoidable, should not be allowed to distract attention from the role that fathers can play in promoting positive outcomes for children, as a growing body of research is showing²⁷. It is generally recognised that the support services for families are inadequate but this inadequacy is even more pronounced for fathers, and especially single fathers²⁸. The third limitation is that our sample was too small to assess how, using logistic regression, the couple relationship in two parent households affects child outcomes. We know from other research that its effects can be considerable²⁹, particularly in cases of intense conflict and instability, and this may be worth examining further particularly since our study shows that Ballymun mothers emerge as less skilful in resolving conflicts and arguments with their partner compared to the average Irish mother. A further implication of this limitation is that the sample size required to do a proper assessment of community needs should probably be set at around a minimum of 200 households.

²⁷ For a review of the evidence on fathers, see Lamb, 2004

²⁸ McKeown, 2001a; 2001b

²⁹ See McLanahan, Donahue and Haskins, 2005; Harold, Pryor, and Reynolds, 2001; McKeown and Sweeney, 2001: Chapter Four; One Plus One, 1999

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