Social, economic, and political context of parenting

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This article is written as a contribution to the parenting debate and as a response to Hoghugh and Speight. Our starting point is simple; parenting cannot be understood, and neither can interventions to support effective parenting and successful childrearing be planned, unless it is placed within its economic, social, historical, and political context. Our paper is based around three interconnected themes, which arise from an extensive review of the parenting literature that one of the authors (JT) is undertaking. These are:

- the problems of defining “good enough” parenting
- the inadequacy of accounting for socioeconomic status in many parenting papers
- the direct effects of economic hardship and poverty on parenting.

Before considering each of these themes, we briefly reflect on some historical aspects of the debate around parenting. The brief review is intended to highlight some continuities and discontinuities over time in the parenting debate.

Some historical reflections on the parenting debate

Parenting has been the subject of a long-standing debate. In the last century, despite a focus on children of the “undeserving” poor (those viewed as “feckless” or “unsuitable” in the UK and the USA), the dominant approach to health was based on the provision of adequate sanitation and public health measures. Around the turn of the century, a shift took place towards personal responsibility for health. Emphasis was laid on the role of the parents, particularly the mother. In response to the poor physical state of recruits to the British Army in the Boer War and the perceived “degeneration of the race”, the 1904 “interdepartmental committee on physical deterioration” was established, taking evidence from various sources. A voluntary health visitor working with poor women is quoted in the committee’s proceedings as follows: “The girls . . . have no sort of sense of duty; not the slightest. It is only amusement and pleasure with them. The last thing they think of is duty, and therefore, they do not trouble to cook or get up in the morning, and the children go to school without breakfast, because the woman is too idle to get up . . . she is utterly indifferent . . .”

The implication of this quotation that infant health is mainly determined by the mother’s commitment and interest in child care (in other words her commitment to parenting) led directly to the concept of “maternal inefficiency/incompetence”, which was reported as the main determinant of infant ill health among children in Scotland, Bradford, Rochdale, and Blackburn in the 1920s. In the 1950s, the Newcastle 1000 families study reached similar conclusions, as did the first national cohort study.

The measures of maternal inefficiency/incompetence in all these studies were based on factors that were much more common among the poor as a result of lack of resources. The measures used to judge “standards of family life” in the Newcastle 1000 families study are instructive: “deprivation of parental care” included loss or absence of one or both parents, marital instability, parent chronically sick, and mother working full time; “deficiency of care” included defective sleeping arrangements (infants sharing the parental bed), and defective diet, clothing, supervision, and cleanliness; “social dependence” included unemployment, serious debt, receipt of national assistance, and family members involved in crime or delinquency. Not surprisingly, maternal inefficiency/incompetence was strongly correlated with low socioeconomic status.

These concepts are no longer in use, although some are nostalgic for their return. The current interest in parenting arises as a result of the apparent increase in behavioural problems, child abuse and neglect, juvenile crime, and delinquency. The emergence of social problems is accompanied by explanations that, as they did at the turn of the century, focus on individual rather than societal causes.

Defining good enough parenting

Review of the parenting literature demonstrates the difficulties of reaching a consensus on the definition of good enough parenting. Historically, definitions were based on perjorative classifications, which conflated poverty with poor parenting. More recent attempts have been less clearly based on criteria that exclusively characterise the poor; however, they have struggled to reach a universally applicable definition that can be used by practitioners. A range of criteria that has been characterised as “poor” parenting and those characterised as markers of “good” parenting is shown in table...
1. The range of these criteria supports the view that parenting, either poor or good, is difficult to define and to use in research. It is also noticeable that there has been much more focus on poor rather than good parenting. The extremes of good and poor parenting might be relatively easy to identify. The problem, however, is everything else in between. Much of the parenting literature focuses on mothering; fathering is either ignored or its potential importance minimised.

Hoghugi and Speight’s discussion of the components of good enough parenting illustrates these problems of definition; all three of their components would be accepted by most people, but they fail to tackle the problem of a definition, which allows a clear distinction between good enough and not good enough parenting.

“Love, care, and commitment” is their first component. They give appropriate examples of extreme situations in which lack of this component can be assumed, but give no practical definition that could be used by practitioners to distinguish good enough from not good enough levels of love, care, and commitment. Their jokey reference to the need for a measure of “serum love” is an admission of the difficulties in finding an operational definition of this component.

Their second component is “control/consistent limit setting”. The problem here is that control and limit setting are so culturally and socially embedded as to make generalisable measures virtually impossible to devise. For example, can you apply the same rules for “reasonable boundaries” to the single parent family living on a low income in a high rise flat and the family with a large house set in a large suburban garden where children can safely be left to explore and play? The mother who allows her child out to play in one setting might be regarded as negligent whereas the other would be praised for providing a stimulating environment. Equally, what constitutes reasonable boundaries changes rapidly from generation to generation and from culture to culture. Nineteenth century limits in Victorian Britain would undoubtedly be regarded as punitive and impairing development today. Parents from the Indian subcontinent are likely to view as negligent the normal UK practice of allowing teenage girls the freedom to attend “discos”.

“Facilitation of development” is the third component listed. This also is deeply embedded in culture and social circumstance. The same yardstick for measuring “rich and varied stimulation” cannot be applied to families unless realistic account is taken of the material and social resources needed to provide it. In a country such as the UK, with huge differences in family access to economic, social, and educational resources, it seems to us bizarre that anyone could discuss this component without reference to these resources.

The components of good enough parenting advanced by Hoghugi and Speight are considered completely outside their social, cultural, and historic context and, in each case, the authors conspicuously fail to provide any working, practical definition that professionals could apply.

**Accounting for socioeconomic status in parenting studies**

For the reasons discussed below, socioeconomic status is a significant confounder of the relation between parenting and child health outcomes. It is also a major distal component of the causal pathway to poor outcomes for children of which parenting is a more proximal component. Parenting can be seen as mediating the direct effects on children of material deficits: in some cases, through exceptional personal resources, interpersonal, or social supports; in others, personal ill health, trauma, or isolation might exacerbate the consequences of these deficits. Focusing on parenting behaviours as though they are the result of deliberate choice, free from external influence, provides ammunition for politicians who wish to reduce all social problems to matters of personal responsibility and morality.

Sociomedical research reflects the dominant paradigm of the societies in which it is undertaken. In the UK and the USA, individual families and parents are seen as responsible for the health and socialisation of their children. Individual responsibility in the form of harmful health related behaviours is given higher priority than societal factors that might be influencing individual behaviours.11 In this context, socioeconomic status tends to be either ignored or its effects marginalised. A consequence of this approach is that socioeconomic status is inadequately accounted for in many studies that focus on the individual characteristics of parents and their effects on child health outcomes.

The Exeter family study12 has been influential in persuading politicians and social commentators of the adverse effects on young people of divorce and parental separation. The authors have linked these consequences to

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**Table 1 Characteristics of “good” and “poor” parenting**

<table>
<thead>
<tr>
<th>Good parenting</th>
<th>Poor parenting</th>
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<tr>
<td>Teaching by example</td>
<td>Exposure to deviant models</td>
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<td>Providing a secure environment</td>
<td>Inability to provide continuity of care</td>
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<td>The mother’s presence</td>
<td>Poor supervision</td>
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<td>Attachment and bonding</td>
<td>Lack of bonding and attachment</td>
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<tr>
<td>Maturity</td>
<td>Youth of the mother</td>
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<td>Affection</td>
<td>Conditional affection</td>
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<td>Flexible control</td>
<td>Cruel control</td>
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<tr>
<td>Child centredness</td>
<td>Rejection</td>
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<td>Positive affectivity</td>
<td>Negative affectivity</td>
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<td></td>
<td>Unpredictability</td>
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<td>Provocation</td>
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<td>Impairment of health or development</td>
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<td>Harmful or cruel discipline</td>
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<td>Distance</td>
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<td>Hostility</td>
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<td>Intrusion</td>
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<td></td>
<td>Poor mothering</td>
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<td>Ignorance</td>
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<td>Fecklessness</td>
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<td>Lack of empathy for child</td>
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<td>Unrealistic expectations</td>
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<td>Latency and inconsistency</td>
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<td>Aggression</td>
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<td>Low warmth</td>
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<td>High criterion</td>
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<td>Neglect</td>
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<td>Abandonment</td>
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parenting. Seventy six children from re-ordered families and 76 children from intact families were matched on six criteria: age, sex, mother’s education, position in family, type of school, and social class group. The authors found significant differences in a range of behavioural, self esteem, and family support outcomes to the detriment of the children in re-ordered families. However, despite the matching process, the two groups show considerable differences in socioeconomic status. Re-ordered families were at much higher risk of receipt of state benefits, living in rented accommodation, suffering financial hardship, and having no exclusive use of a car. The authors suggest that some of this might be a consequence of a fall in income related to family breakdown. Equally, it cannot be ruled out that these differences predated the family breakdown, and consequently behave as potential residual confounders in relation to the child outcomes.

The most widely used measure of the quality and quantity of stimulation and support available to a child in the home environment is the “home observation for measurement of the environment” (HOME). The measure has been criticised on the grounds that the outcomes are highly correlated with family socioeconomic status and, therefore, might be measuring the effects of socioeconomic status rather than parenting.

**Parenting and economic hardship**

Hoghughi and Speight acknowledge that wider economic and social issues are involved in parenting but consider none of the evidence supporting this association. There is compelling evidence from USA and UK studies for the role of social factors in parenting. Socioeconomic factors appear to have a direct effect on parenting behaviour. Economic hardship and heavy income loss in families studied longitudinally in the USA city of Oakland during the depression of the 1930s were associated with more punitive, arbitrary, and rejecting parenting by fathers. An increase in economic hardship has been linked with a decrease in parental nurturance and an increase in inconsistent discipline by both parents. Unemployed fathers display fewer nurturing behaviours than other fathers. Low income, in combination with low levels of perceived social support, has been associated with a higher probability of punitive behaviour by the parent towards the child. Unemployment and low income are strongly associated with child abuse referrals. The socioemotional functioning of children living in poor families seems to be mediated by the psychological functioning of parents and the level of distress in family interaction patterns. Maternal rejection of early adolescents is closely correlated to the occupational status of the family. These direct effects of economic hardship and material disadvantage on parenting are partially mediated by marital stresses. The psychological well being of adults in the household is affected by economic hardship, as is the marital relationship. Disagreement and conflict over the use of the limited money available, and loss of warmth and affection and mutual parental respect, have been shown to be associated with economic hardship. The role change associated with the loss of the father’s job and the increased importance accruing to the mother in family decision making might weaken family unity and increase marital tension. Stress related changes in parent–child interactions lead to increasingly coercive parenting, with a resultant increase in childhood behavioural problems and future delinquency. A study of almost 6000 members of the 1958 national childhood development study cohort who had become parents confirmed the stresses on parents imposed by financial hardship and unemployment. Marital happiness and life satisfaction were significantly lower in families with no earner and these families also tended to show more aggressive parenting strategies.

Parenting is a proximal variable in the causal pathway to adverse outcomes in childhood and adolescence, of which material disadvantage and economic hardship are distal variables. Behavioural problems and temper tantrums among young children have been shown to increase as a result of parenting changes associated with economic hardship. Economic deprivation has also been associated with decreased respect for the father and increased dependence on peer group for adolescents, and lowered feelings of self adequacy and reduced goal aspirations for adolescent girls. Economic hardship appears to have direct and indirect effects on adolescent functioning. Increased loneliness and depression in both boys and girls directly correlate with economic hardship and there is an indirect effect through reduced parental nurturance.

The effects of economic hardship on delinquency and drug use are indirect, mediated by inconsistent parental discipline.

The outcomes that Hoghughi and Speight relate directly to parenting such as child abuse and neglect, behaviour and conduct disorders, truancy, school failure, and juvenile crime are all closely correlated with material deprivation. As Schorr states: “poverty is the greatest risk factor of all. Family poverty is relentlessly correlated with school-aged childbearing, school failure, and violent crime.” In contrast, childhood socioeconomic status has never been shown to be a risk factor for any of these adverse outcomes.

Two additional aspects of poverty should be considered in relation to its effects on parenting and childhood outcomes. Intergenerational cycles of poverty are known to be associated with poor outcomes for children. Low maternal birthweight and poor maternal nutrition during childhood are associated with low birthweight in the mother’s offspring, which is associated with poor outcomes in infancy, childhood, and into adult life. Material deprivation increases the risk of illness and other adverse outcomes throughout the life course. In addition, the length of time in...
poverty appears to have important effects on child behavioural and educational outcomes, which are probably mediated, in part, by the adverse effects of long term poverty on parenting. Children in long term poverty have a greater risk of both internalising and externalising behavioural problems and reduced IQs compared with children in short term poverty or those in more affluent homes.57

**Conclusions**

From the foregoing discussion, it is clear that parenting can only be understood in its social and economic context. In the UK, this implies that increasing crime, truancy, and conduct disorders, which Hoghughi and Speight attribute to poor parenting, should be seen within the overall social and political context, particularly the sharp increase in income inequality in the UK since 1979 and the emergence of a large group of socially excluded families, including single women with children. Over 30% of children now live in households with incomes less than 50% of the average after housing costs, and more than one million children live in families in which no adult is in work.48 These families have experienced both acute and chronic material deprivation and it is reasonable to suppose that parenting styles have been directly affected by these factors. At the same time, there have been substantial cultural changes, normalising expectations of ready access to expensive toys, equipment, entertainment, and designer label clothes. Fonagy argues that, although there is little evidence of a recent worsening of parenting, both the USA and the UK have seen deteriorating levels of “social health” and that: “while parents probably continue to behave as they have always done, society has changed to make the task of childrearing more challenging”. In other words, many will have been forced by economic circumstance into being not good enough parents, as judged by the standards laid down by Hoghughi and Speight.

Socioeconomic explanations for increasing trends in crime and juvenile delinquency have been challenged on the grounds that failure to recognise the vital part that these factors play in enabling parents to parent.

We agree with Hoghughi and Speight that society has a responsibility to parent. We disagree fundamentally with their perspective, which fails to recognise the vital part that these factors play in enabling parents to parent.

Commentary

This article needed to be written and practitioners and politicians need to face many of the issues contained therein. The issues that this paper raises are usually avoided; they force professionals to admit that we can play only a very tiny part in improving a family’s situation, and to face the likely outcome for the children when so many forces of a sociopolitical nature are often lined up against the family. This brings the frightening prospect of interventions being such a drop in the ocean that we cannot expect to be effective but must simply become bystanders watching the inevitable unfold.

The paper has three main themes:

- the inadequacy of accounting for socioeconomic status in many parenting papers
- the direct effects of economic hardship and poverty on parenting.

For the child care professions, such as social work, child and adolescent mental health services, and all professionals involved in implementing the Children Act, the last decade has been a particularly exciting one, with research from a variety of sources definitively showing associations between certain aspects of parenting and the emotional, social, and educational development of children. Much of the interest and impetus for the research started with Bowlby’s work and was further developed by Rutter in the 1980s. Then there was the research published in the 1980s and 1990s relating parenting styles to child adjustment, mainly in the area of children who become antisocial, as well as work on child abuse. Together these established some ground rules in relation to parenting; since when, the findings have been further supported. It is exciting because now, in certain domains of parenting, we are clear what the aims of public education and of intervention should be. Foremost among these established ingredients of “good” parenting are the importance of warmth and positive regard, close supervision, consistent, predictable and non-harsh discipline, and the absence of violence in the family. Taylor et al list characteristics in their article (table 1), but the shortness of the good characteristics list compared with that of the bad makes it skewed, as many good characteristics are omitted—most of the negatives do have positive counterparts: the promotion of health for the Care and Resettlement of the very young and teenagers and health: the key data. Milton Keynes: Open University Press, 1993

DEFINING GOOD PARENTING,
The current state of knowledge has brought us nearer to this definition and there is not much difficulty in agreeing where the parenting is clearly good—the children are thriving in all areas; and where it is clearly bad—there is evidence of abuse. The difficulty is in relation to the borderline cases where definitions fail or specific factors come into play—for example, a parent with learning difficulties, a child with very special needs.

For most of us the term “good enough” is used to encompass the idea that no parenting meets the ideal but that it should be good enough to meet the child’s basic needs. The Children Act (1989) progressed the refining of these concepts by setting up the idea of thresholds for establishing significant harm. This combines the concept of establishing that a child’s development (physical, intellectual, emotional, social or behavioural) is impaired compared to what could be reasonably expected of a “similar” child, with the attribution that the impairment results from the provision of care not being what it would be reasonable to expect a parent to offer. This is the heart of the legal system to define “not good enough” parenting and upon which action in separating parents and children can be taken.
ACCOUNTING FOR SOCIOECONOMIC STATUS
The argument that socioeconomic status is an often neglected issue in research is well made. The same could be said in relation to the evaluation of intervention studies.

Taylor et al argue that the important facets of positive parenting are undermined by the presence of certain socioeconomic conditions, in particular that unemployment, low income, and lack of social support is associated with more punitive and coercive discipline, more rejecting, less warm behaviours, and more aggressive parenting strategies affecting the behavioural, educational, and social development of children. They suggest this is mediated through the psychological functioning of the parents, and through the distress and marital discord that develops. They state that these socioeconomic hardships have a direct effect on parenting, and in some cases on the children themselves—for example, on the aspirations and sense of loneliness and depression in adolescents. As almost all their evidence is based on correlation studies without any control of conditions, many of their claims of direct effects must be seen as assumptions. They criticise, correctly, the failure of many studies to take account of socioeconomic variables and their effects, but they take apparently no account of possible genetic variables and other explanations for findings.

There is no comment about resilience—the fact that most families experiencing economic hardship and other adversities offer good enough parenting. Understanding mechanisms by which such families achieve a positive means of functioning despite the odds is at least as important as understanding those who cannot. At the risk of sounding politically incorrect, it seems to me that at least in some cases there are predisposing factors to “poverty”, which include genetic factors, individual differences, the parents’ experiences and models in relation to parenting and expectations of success, and the whole issue of the cycle of deprivation. The controversy about the relative contribution of heredity, role modelling, and situational contexts in the development of criminal behaviour is one illustration of this. Evidence that challenges the authors’ theme is not included. There is no comment about the contradictory fact that in the most extensive epidemiological studies of childhood psychiatric disorder by Rutter on the Isle of Wight and Camberwell (UK), social class was a poor predictor of child adjustment (and of many parenting variables). The contrasting fact that in whole population studies little connection is found between material prosperity of a population and childhood psychiatric disorder, and the fact that despite improving economic conditions in the UK, there is a deterioration in children’s overall adjustment, is not discussed, nor are issues of the relevance of the relativity of the conditions of poverty. The possibility that some of the less beneficial parenting practices may be culturally determined, in association with social class and status and ethnic origin, affecting attitudes to discipline and attitudes to children’s self expression must be relevant, particularly in studies where socioeconomic factors are controlled for. Factors that transcend socioeconomic and other adverse factors are of particular interest to those wanting to put research into practice. The absence of a specific mental health input into the writing of the paper makes it less eclectic and balanced than it might otherwise be.

Social class, poverty, and unemployment are not simple, independent variables, and Disraeli’s concept of two nations cannot be explained in simplistic terms. Effects of these socioeconomic factors act directly and indirectly, they act on the children (differently according to sex) and their community as well as the parents, and associations are stronger for some disorders—for example, antisocial disorders—than others. Three of the most significant psychological issues of our times: the role of lone parenthood (in its different definitions); the effects on families economically and emotionally of the increasing rate of divorce and parental separation and the problems associated with young teenage pregnancies are not addressed.

The term unemployment is not defined in this paper (or many others, and is used variously). The term can either refer to all those of working age who are not in employment or those registered unemployed. The former grouping contains within it those with severely inadequate personalities, most of the mentally ill, many of the ex-prison population, and those with chronic ailments such as back pain. Even in the last group, members are not simply all there by unfortunate chance: there are associations with educational level, coming from a one parent or long term “unemployed” family, personality characteristics, and many others. These interactions and cycles are complex.

In developed countries where poverty does not mean starvation, for some rising out of poverty would substantially improve the lives of the parents and children but in many it would not. I would rather see money invested in education (while at the same time controlling elitism in education) as the means most likely to improve the circumstances and sense of fulfillment of future generations of children, rather than in gratuitous handouts to deprived sections of the community. Educating girls who will later become mothers to a good standard is of great importance. Plans should address long term needs and goals.

This does not take away from the theme that parents in situations of real economic hardship will face particular stresses and factors that make effective parenting a much more difficult task. Those who succeed despite great adversity deserve our special respect.

This is a most welcome paper. It is an essential companion paper to that of Hoghughii and Speight. That socioeconomic factors are as important in the emotional and behavioural development and wellbeing of our children as they are to their physical health and development must be accepted. Their
importance in research and the understanding of the processes of healthy child development must be acknowledged. The uncomfortable parallel of the extent to which doctors and other child welfare professionals should take a political role in promoting the best interests of children must be faced.

Now that certain positive parameters of parenting are clear, these must be brought to the attention of the public, but little is being done in that area. How can the public respond to polls about questions like the physical punishment of children when they are not properly informed of the important knowledge available about parental discipline? Whatever hurdles there may be for families struggling against economic hardships this should not imbue a sense of hopelessness in professionals or detract from need for preventative measures and early intervention.

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deficiency was of good enough parenting, and while all the families were poor there was not one case that (in our opinion) would have been remedied by the simple injection of money. Despite this, the studio discussion that followed was entirely devoted to the issue of material poverty.

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