

Millennium Cohort Study

CHILD BEHAVIOUR



Taken from Chapter 7 of *Millennium Cohort Study Second Survey: A User's Guide to Initial Findings*

Anitha George, Kirstine Hansen and Ingrid Schoon

The Survey

The Millennium Cohort Study (MCS) offers groundbreaking large-scale information about children born into the new century and the families who are bringing them up in all four countries of the United Kingdom. It lays the foundation for a major new research resource.

For the first survey, conducted in 2001-2002, we interviewed the families of nearly 19,000 children aged nine months. A disproportionate number of these children came from families living in areas of high child poverty, and, in England, from areas with relatively high minority-ethnic populations¹. This survey looked at the circumstances of pregnancy and birth, as well as the social and economic background of the families into which these children were born.

The second survey marks the beginning of a series of follow-up surveys. Conducted in 2003-2005, it records how nearly 16,000 cohort children are developing at the age of three. For the first time, researchers have been able to chart the changing circumstances of families and relate children's outcomes at age three to earlier circumstances and experiences. This summary reveals some of the results from the second survey, pertaining to the mother's report of the child's behaviour².

Why and how behaviour is measured

The acquisition of emotional intelligence is an important element of success in life. A child's emotional and behavioural problems help predict difficulties at school and delinquency later on. Emotional adjustment was assessed using the Strengths and Difficulties Questionnaire (SDQ). This is a behavioural screening questionnaire for 3 to 16-year-olds and is also a well-validated tool for screening psychiatric disorder. Within the normal range of scores, it taps into variations in self-regulation which may reflect the outcomes of earlier experience. It also helps to predict what may happen to the child in the future. The SDQ consists of 25 items generating an overall score as well as scores for five sub-scales measuring: conduct; hyperactivity; emotional symptoms; peer problems and pro-social behaviour. The items were assessed, for all children, via parental report, usually by the mother, in the computer-assisted self-completion module. In families with twins or triplets only one child was assessed.

For the following analysis an average difficulties score was computed by summing replies to the 20 items indicating behavioural problems contained in the sub-scales. The maximum score, if the parent said it was 'certainly', rather than 'somewhat', true that the child showed all 20 problems, would be 40. The abnormal

range starts at 17. The raw mean score reported for the whole sample was 9.3, equivalent to it being somewhat true that the child showed a problem on just under half the items, or that there was certainly a problem on just under a quarter.

This briefing relates the behavioural adjustment of the three-year-olds to different demographic and family background characteristics and their own development at nine months to see if early outcomes are differentially related to these factors.

How behaviour scores vary between children

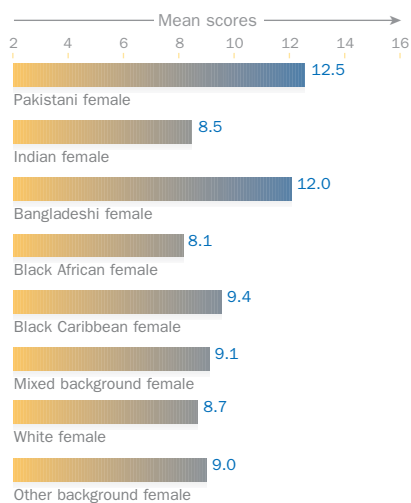
- Mothers in Northern Ireland reported the least behavioural problems (mean score of 8.7), followed by Scotland (8.9), Wales (9.1) and England (9.4).
- As is already well-established, behavioural problems were reported less in girls than boys (mean scores of 8.8 and 9.8 respectively).
- Black African children were reported to have the least problems (mean score of 8.7) and Pakistani children the most (13.0). The variations in mean scores by ethnicity and gender can be seen in the two graphs that follow (see next page). In interpreting these findings, it has to be kept in mind that behavioural adjustment was assessed via parental report and it is possible that there are cultural differences in perceptions and the propensity to report problems.

¹ Percentages reported here have been re-weighted to represent the population as a whole.

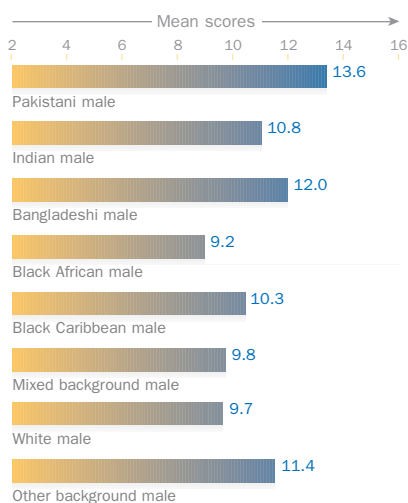
² Twins and triplets are not covered in this report

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Mean total difficulties score by ethnicity and gender (girls)

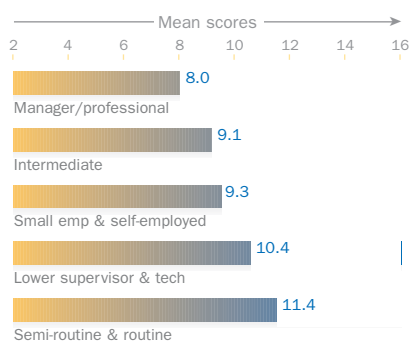


Mean total difficulties score by ethnicity and gender (boys)



- The mean value of the score reported by mothers in families with two natural parents was 8.9. There was little difference between the mean values of children from lone-parent households and those with one natural and one step-parent (11.2 and 11.8 respectively).
- Increasing levels of parental education were associated with less problem behaviour. Children of parents with at least a degree-level qualification had a mean score of 7.9, whereas children of parents with no qualifications had a score of 11.9.
- Fewer problems were reported for children of more skilled parents, as seen below:

Mean total difficulties score by parental occupational class



- Higher family income was also associated with lower reported behavioural problems. Children from families with income above 60 per cent of national median had a mean score of 8.6, compared with 11.4 in the lowest income group.

Looking now at the problematic extreme, groups where as many as 10 per cent or more had an abnormal score over 17 were: boys; ethnic groups from South Asia; lone parents; step-families; parental occupation in the lower two classes, and family income below £330 per week adjusted for family size.

Adjustment at age three was compared

with level of development at nine months. Levels of previous development were measured in terms of developmental milestones of gross and fine motor function skills and early communicative gestures. Gross motor skills include standing and walking, fine motor skills include being able to pick up small objects, and communicative gestures at nine months include smiling and waving goodbye. Delays were identified for a minority who had not reached the normal stage for their age.

- Children with developmental delays at nine months were assessed as having more behavioural problems at age three than the sample as a whole.
- Compared to the overall mean of 9.3, children with one or more gross motor function delays had a score of 10.2. The scores for those with one or more fine motor function delays or one or more communicative gesture delays were 10.6 and 10.8 respectively.

The indicators of developmental milestones at nine months, especially communicative gestures, did not appear to show such clear patterns by social group as does our measure of emotional adjustment at three. This could be because behavioural problems in infants are less clearly measured, or because socially divergent patterns emerge as a baby grows into a three-year old.

Conclusion

The results show that most children are relatively free from emotional maladjustment or conduct problems. However, children from more advantaged families were assessed as having fewer behavioural problems than those from more disadvantaged ones. This was seen consistently across parental education, occupation and income. Girls were assessed as having fewer behavioural problems than boys. More problems were also reported for children of specific ethnic groups.

However, it is possible that mothers with different characteristics (including ethnic and cultural backgrounds) may vary in their interpretation of behaviour as problematic or in their tendency to report it as such. This must be considered when looking at all these results.

Millennium Cohort Study Second Survey: A User's Guide to Initial Findings is available at www.cls.ioe.ac.uk