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## 2 The present study: planning and method

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### Exploiting longitudinal data

The flowchart (Figure 2.1) provides a chronology of the themes discussed in this book.

### *The base population*

The 847 families remaining in the study in 1952 formed the base population for the present study. The recorded social and family information was then reconstituted to develop six criteria of deprivation (see Chapter 6) and the degree of deprivation was calculated for each family as follows:

- 1 *Non-deprived*: 482 (59 per cent) families had no adverse criteria.
- 2 *Deprived*: 246 (29 per cent) families had one or two criteria.
- 3 *Multiply deprived*: 118 (14 per cent) families had three or more criteria.
- 4 For certain analyses categories (2) and (3) have been combined to enable a study of all 364 (43 per cent) deprived; and for others the deprived families have been separated into those with one and those with two criteria.

The above categorization enabled us to use all the data to study the association of deprivation in the first generation with social functioning, with the cognitive and behavioural effects on Red Spot children and on their adult lives at the age of 32 years.

### *The tenth-year population*

By 1957 the number of families had fallen to 812, almost all the loss being attributable to movement out of the city. Further psychosocial data were then collected allowing the families to be re-rated on five of the six criteria studied at

YEAR	COHORT	THEMES
1947	1142 children 1132 families	Original sample All births in Newcastle upon Tyne, May and June 1947
1952	847 families	Baseline cohort of 1978-1980 Study, Six criteria of deprivation, Severity of deprivation
1957	812 families	Five criteria of deprivation Severity of deprivation Becoming deprived Moving out of deprivation
1979-1981	266 families interviewed 264 families analysed	A. Family of origin: stratified samples based on 1952 criteria i Non-deprived (14% sub- sample) ii Deprived (50% sub-sample) iii Multiple deprivation (6.8% sub-sample)  B. Family of formation: reorganized according to criteria of deprivation (types and severity) in the current families (families of formation)  C. Retrospective data from spouses.
1981	812 (notional)	Contact with the law i Deprivation and offending ii Privileged but delinquent: deprived but resilient iii Prediction of delinquency
1979-1981	352 total children in 1979-80 179 first children	Third generation school-age children.

*Figure 2.1 Flowchart of 1,000 family cohort: 1947-81*

the fifth year. This made possible a comparison of families who had moved out of deprivation since 1952 with those who were not deprived in 1952 or 1957. The children were compared in relation to educational and behavioural progress, personality, temperament and attitudes until they left school.

As families left the city the numbers fell slowly during the school years. For instance in 1952, 483 families did not show any criteria of deprivation, and of these 477 remained in

1957 and 423 in 1962. No data relating to school were available for the children of families who left Newcastle but some were later visited in 1979 or 1980.

### The 32-33 year families: the transmission of deprivation

#### *Definition and selection of study groups*

The 1979-80 follow-up was undertaken to study the extent and the effects of deprivation and the transmission from one generation to the next. Limitations of time and resources required the family visits to be confined to defined subsamples of the base population, and four groups were isolated by random sampling:

- 1 *Non-deprived*: a sample 62 (13 per cent) of the 483 families without deprivation in 1952 (families of origin).
- 2 *Deprived*: 185 families, a one-in-two random sample of the base population with one or more criteria of deprivation in 1952. This would allow study of the progress of the children from these families, the effects of deprivation, cross-generational changes and also supply information about the importance of both type and degree of deprivation.
- 3 *Multiply deprived*: 78 families, a random two-in-three sample of the 118 families with three or more criteria of disadvantage in 1952. This sample overlapped with the *deprived* group. It allowed the same studies as for the deprived group.
- 4 *Random controls*: a random sample of 67 (8 per cent) of the base population of 847 families to allow inferences about the base population. Since this was a random sample there was some overlap with families in other groups. Subsequently we decided this complicated rather than clarified the picture and for most purposes it was abandoned.

There were 294 families in these three samples and eventually 264 were interviewed. For certain themes only the first three of the above four groups are described and the numbers fall to 220. However, one theme concerning the change in deprivational status from family of origin to family of formation uses all the 264 families. By 1979-80 there

were 352 children of which 179 were first-born and of school age in the families of formation.

**Method 1952: the definition of deprivation**

We were faced with problems of definition, organization and procedure. These comprised:

- 1 The definition of criteria of deprivation and description of essential requirements for family life, reasonable for 1952 and 1980.
- 2 The design of questionnaires for family interviews. Only one home visit would be possible in most cases, and in all long-distance cases. Data were required concerning both parents (one in each family was not known to the original study) and for each child. Documentation of the school visits was also necessary. The result was a series of proformas which could also be used as transcription sheets for data storage.
- 3 From the 847 families in the study in 1952 it was necessary to identify those showing the criteria of deprivation and to obtain a comparable sample of families without criteria.
- 4 The families thus selected had to be traced and interviewed. About half had been seen in 1969 during a study of growth in adolescence (Miller *et al.*, 1971). Some had left the city between 1952-62, whilst others were still living in Newcastle.
- 5 After collection the data had to be stored and analysed.

The first step was to reassess the criteria used in the ascertainment of deprivation in 1952. These assessments were made in relationship to the standards of the time and the information available in the records of the 1,000 Family Study and to theoretical views about their relevance. That data yielded 14 items or circumstances which could be used and these were gathered into five groups:

- 1 family and marital disruption which included loss of father (almost half died), loss of mother (most died), marital instability, either parent incapacitated by illness;
- 2 poor care of child and home which included poor cleanliness of child, domestic cleanliness and clothing;

18 *Continuities of Deprivation?*

- 3 social dependence which included serious debt, unemployment, reliance on National Assistance;
- 4 inadequate housing as represented by overcrowding (Miller *et al.*, 1960: 269) and lack of amenities;
- 5 maternal failure to cope with management of children.

The frequency of each was calculated for the 847 families; this ranged widely from 1 to 48 per cent. To reduce the number of items, we calculated the percentage overlap between pairs of items and the intercorrelation between items. The family items were not well correlated with each other ( $r=0.15$ ). Furthermore, loss of father or mother included loss from death as well as from divorce, desertion or separation, and death differs from other forms of loss. We decided therefore to omit loss by death and to allow marital disruption and parental illness to stand on their own as separate criteria of deprivation (see Table 2.1).

On the other hand, the items grouped under poor physical and domestic care correlated highly with each other ( $r=0.61$ ), and were therefore combined as a single criterion of overall care. This group showed a moderate correlation with poor mothering, but the latter was retained as a separate criterion (see Table 2.1).

The three items of social dependency showed only moderate intercorrelations ( $r=0.27$ ), and also correlated poorly with items in other groups. Nevertheless, we decided they should form a single criterion (see Table 2.1).

The last group representing inadequate housing also intercorrelated only moderately ( $r=0.34$ ) and there were no important correlations between these items and those from the other groups. Since lack of a fixed bath and a shared lavatory affected as many as 48 per cent of families they were omitted (see Table 2.1).

Thus, our final decision was to group the items that reflected similar concepts of deprivation; this gave rise to six clusters and their frequency analysis is also presented in Table 2.1. This decision was supported by intercorrelations within clusters. All six criteria were identifiable when the Red Spot children were five years of age in 1952, and the first five were again identifiable in 1957 when the children reached their tenth birthday. Assuming that each criterion had the same 'value' as an indicator of family deprivation,

Table 2.1 *The*  
*in 8*

A.	Family/marital i. Divorce/sep ii. Marital inst
B.	Parental illness Parent incapaci
C.	Poor physical a i. Personal cle ii. Domestic cl iii. Poor clothi
D.	Social depende i. Debt ii. Unemploy iii. National A
E.	Housing (overc
F.	Poor mothering

Table 2.2 *Dis*

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Table 2.1 The frequency of criteria of deprivation in 847 families in 1952

A.	Family/marital disruption	14.5%
	i. Divorce/separation	
	ii. Marital instability	
B.	Parental illness	12.2%
	Parent incapacitated by illness	
C.	Poor physical and domestic care	12.6%
	i. Personal cleanliness	
	ii. Domestic cleanliness	
	iii. Poor clothing	
D.	Social dependence	17.5%
	i. Debt	
	ii. Unemployment	
	iii. National Assistance	
E.	Housing (overcrowding)	18.7%
F.	Poor mothering qualities (non-coping)	15.2%

Table 2.2 Distribution of criteria in 847 families in 1952

No. of Criteria	No. of Families		Percentage of Total	Combined Percentages
0	482	482	57.0	= 57% Non deprived
1	165	249	19.5	= 29% Deprived
2	84		9.9	
3	61	116	7.2	= 14% Multiple deprivation
4	30		3.5	
5	17		2.0	
6	8		0.9	

each family was given a score of '1' for each criterion exhibited. Families without any criterion scored zero. The definition score for any family then could range from 0 to 6. We confirmed that it was reasonable to sum the scores of deprivation by subjecting the data to factor analysis.

Table 2.2 shows that 482 (57 per cent) of the 847 families had no adverse criteria. One-fifth of families had one criterion and the number of families affected fell rapidly as the number of criteria increased until only 1 per cent were affected by all six criteria. In all, one family in seven (14 per cent) had three or more criteria and were in 'multiple deprivation'.

*Agreement between pairs of criteria (Table 2.3)*

This can be represented in terms of percentage overlap between pairs of criteria, by summing the cases with either of two criteria and calculating what percentage of the total have both. The highest overlap (50 per cent) occurred with poor care and poor mothering (Table 2.3). Further, each of the criteria correlate at least moderately highly with the summed score with correlations ranging from 0.52 to 0.70.

*Table 2.3 Percentage overlap in pairs of criteria  
847 families in 1947*

	A	B	C	D	E	F	
Family/marital disruption	A	—					
Parental illness	B	16.5	—				
Poor care	C	17.4	18.6	—			
Social dependence	D	22.6	37.9	25.6	—		
Housing — overcrowding	E	14.7	15.0	27.4	25.4	—	
Poor maternal mothering (non-coping)	F	22.4	18.4	50.3	25.3	26.4	
Summed score and its correlation with each of the criteria		(0.52)	(0.57)	(0.70)	(0.70)	(0.59)	(0.70)

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*Previous assessment of deprivation*

Wedge and Prosser (1973) using National Child Development Study data reported 6.2 per cent of families affected by low income, poor housing and adverse family situation. Stevenson and Graham (1983) reported that 6.6 per cent of their families showed three or more of their eight indices of family disadvantage. Both of these rates are lower than the 14 per cent we report for multiple deprivation. Berthoud (1980) used data collected during the 1975 General Household Survey to identify six adverse criteria: educational disadvantage (43 per cent); family (lone parent or divorced/separated, or four or more children) (19 per cent); poor housing (19 per cent); low income (24 per cent) sickness and work handicap (that is, unemployed, or in semi-skilled or unskilled work) (41 per cent). The educational and work criteria were rather broad and were unlikely to represent a severe deprivation and this affected a large percentage of families; accordingly 8.8 per cent of families had four or more criteria, which is higher than the 6.4 per cent in our study. The differences may be determined by definition and method. None of these workers included assessments of mothering skills and these may be fundamental to the problem. The method of aggregating the criteria may be crucial — for instance Stevenson and Graham (1983) define deprivation as the worst 10 per cent on each of the eight measures. Finally, no evidence is provided of the extent of overlaps between criteria and, until this information is available, it is difficult to compare deprivation across samples.

There are difficulties, and they have been well described by Brown and Madge (1982): 'Multiple deprivation comes in many shapes and forms, and is due to a variety of causes . . . in general deprivation of one kind attracts deprivation of another'. Irrespective of the method, it is evident that single deprivations are more widespread in the community than is often appreciated — 76 per cent in the Berthoud study, just over 50 per cent in the Stevenson and Graham research and just under 50 per cent in the Newcastle study.

**Tracing and follow-up: isolating groups for study**

Four groups of families to be interviewed were extracted by random sampling (see Chapter 5). In this procedure the following principles were considered. First, the random



control group would provide a yardstick for comparison with other studies. Second, an important comparison was to be between the non-deprived group and the deprived groups. However, because a high percentage of the families had at least one criterion of deprivation, we might have concentrated on mild rather than severe deprivation. The use of a multiply deprived group would constitute an insurance against that possibility. Nevertheless, it was essential that our research strategy should allow a comparison between the non-deprived and the total group of deprived families.

There was also overlap between the two deprived groups, and they are not directly comparable. This created problems when mutually exclusive groups were needed for certain statistical analyses. To facilitate direct comparisons between different degrees of deprivation, the families were also re-grouped into three categories of non-deprived (zero criteria), moderate deprivation (one or two criteria) and multiple deprivation (three or more criteria). Similar regrouping was undertaken in the families of the 266 'Red Spots' as adults and their spouses or partners.

*Types of deprivation*

It is also necessary to consider the effects of the different types of deprivation and whether there is constancy or change in types of deprivation across the generations. Six groups of families each representing a different type of deprivation were therefore isolated (see Table 2.1, p. 19). The numbers were as follows:

Marital Disruption	Parental Illness	Poor Care	Social Dependency	Over Crowding	Poor Mothering
70	63	66	89	92	81

*Tracing and cooperation of the families*

Our project depended upon an ability to trace and obtain the cooperation of the 300 families in the samples we had isolated (see Table 2.4). We first made an appeal over the local radio and in the local newspapers asking the parents of 'Red Spots' or the children themselves (then 33 years of age) to get in touch with us. The results were encouraging for we located 90 (31 per cent) of those we wished to visit. Only five responses came by letter, the rest by telephone from the

Table 2.4

Group	Features considered
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Table 2.4 The criteria of deprivation in 1979-80:  
Red Spots (Generation II) as adults

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Features considered additional to the six criteria used in 1952

Group 1	Psychological Disturbance of Parents
	1. Disturbance of mother
	2. Disturbance of father
	3. Alcoholism (excluded)
Group 2	Socio-economic Stress
	4. Unemployment
	5. Job mobility
	6. Poor maternal resources (excluded)
	7. Poor socio-economic status
	8. Poor domestic facilities (excluded)
	9. Large family size
Group 3	Education and Further Training
	10. Education - mother
	11. Education - father
	12. Further vocational training
Group 4	Parental Stress
	13. Marital stress
	14. Parental psychological stress
	15. Maternal over-concern about family
	16. Family mobility
	17. Problems of care and fostering (excluded)

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'Red Spots', their spouses, their parents or other close relations. This was the easiest part of the search.

Next we located families through statutory agencies. We negotiated an arrangement with the Office of Population Census and Statistics who provided the details of Family Practitioner Committees with which the individuals were registered as patients. We then wrote to the Secretary of each of these Committees explaining our purpose and asked if we could be permitted to have the name of the family practitioner. We then got in touch with the family doctor, explained our purpose and asked his permission to approach or to send a letter to the family. Again, the cooperation was remarkable, and in this way we made contact with another 109 (37 per cent) of the families. We also pursued local searches. The housing list proved particularly useful and neighbours were helpful. This gave another 25 (8 per cent)

families. We then extended the direct search by visiting relatives, friends and other 'Red Spot' families – particularly through local child health centres.

Searches of telephone directories and electoral registers were laborious rather than rewarding, but we did get six names in this way and these, with the 34 from the 'local gossip', gave 40 (13 per cent) including some valuable addresses for families who had gone abroad. Later we made contact with four more families in the armed forces.

In all we traced and obtained agreement to visit 268 families. This left 27 families who fell into two residual groups. First, there were some 15 families or individuals who were traced but could not be interviewed – of these five had died, six refused or did not reply to our letters, and four appeared to lead lives of irregular movement throughout the locality. That left 11 of whom we had no knowledge at that time. We learned later that two of these had died. Ultimately, therefore, we were able to trace and interview 266 Red Spots (264 families since two had married other Red Spots) all but five within the United Kingdom. Those abroad were interviewed in South Africa, Australia, the USA and Canada.

#### *Comment*

We were encouraged that we had been able to trace 96 per cent of those in the sample groups. In the end we interviewed 92 per cent of those still living. The success of our search, more than 15 years after the end of the original study, was due chiefly to two factors. First, the relative stability of the population and, second, the firm lasting relationship established in the first study between the families and the observers had brought its own reward. In 1979 only about 20 per cent of the second-generation 'Red Spot' families lived beyond Tyneside and the adjacent areas of Northumberland and Durham which might be fairly described as the North-East. Less than 3 per cent were known to have migrated beyond the United Kingdom.

In the United Kingdom there is one other study which has attempted to trace families studied over roughly the same period as the '1,000 Families'. Atkinson *et al.* (1980) set out to trace, as adults, the children of the 1,363 'Rowntree' parents who were studied in 1950. They concentrated on families headed by a man in full-time work, and using Kelly

Street Directories received a positive response.

In the USA we located 90 per cent of those who obtained adult addresses in Wisconsin, Canada. High school graduates contacted parents through searches, but this was 88 per cent.

*The family interview*  
The meetings were arranged and altogether more visits were made. The school visit was made to families with children.

*The family interview*  
The home visits were made each taking an hour in the neighbourhood, requiring an hour of the interviewer.

As addresses were obtained with each family we arranged a satisfactory time for the best time for the occupation of the family were employed convenient, and this was a Red Spot. If neither was possible during the day, we interviewed the family at a satisfactory arrangement were necessary. Telephone, and if there was not a telephone for a long distance, it was necessary to contact the family.

Separate interviews were made where possible. The interview

Street Directories, voting lists and personal letters, they received a positive response from 567 families.

In the USA Robins (1966), studying deviant children, located 90 per cent of subjects, interviewed 82 per cent, and obtained adult agency records for 98 per cent. More recently, in Wisconsin, Clarridge *et al.* (1978) traced 92.5 per cent of high school graduates 17 years after they had left school by contacting parents and using telephone and taxation record searches, but they only obtained telephone interviews with 88 per cent.

#### **The family interviews and school visits**

The meetings with the families took place from 1979 to 1981 and altogether 264 were visited. In some families two or more visits were needed to complete the interview. The school visit was complementary to the home interview for all families with children at school.

#### *The family interviews*

The home visits were conducted by three trained interviewers each taking an agreed area of the city and its immediate neighbourhood. All long-distance visits – that is, journeys requiring an overnight stop – were undertaken by the same interviewer.

As addresses became known, the interviewer got in touch with each family either by letter or by a personal visit to arrange a satisfactory time for the interview. For each family the best time varied with the family composition and occupation of the adults. Where both parents or partners were employed, an evening visit was the only time convenient, and this also applied when the father was the Red Spot. If neither parent was working, visits could be arranged during the day. Occasionally a special visit was needed to interview the father. But, in practically every case, a mutually satisfactory arrangement was found. Long-distance visits were necessarily arranged by correspondence or by telephone, and many took place during the weekend, yet there was not a single instance in which the arrangements for a long distance visit failed, even though it was always necessary to complete the interview in one session.

Separate interviewing of each partner was not always possible. The interviewers estimated that, where only two

adults were to be seen, the visit took about three hours. Each child added another hour, so that families with more than two children required a second or, exceptionally, a third visit. In a few cases, interviews were carried out in two different houses.

We knew we were asking much of the families both in time and in the content of the interviews, and we approached our task with care. This was well worthwhile, for with only one or two exceptions the interviewers were well received and the families were actively cooperative, perhaps particularly so when the mother had been the 'Red Spot' child. Occasionally the father's attitude was that of amused tolerance and, once, it was suggested the team should organize a Red Spot reunion with plenty of Newcastle Brown — a potent local brew — which would have been wonderful but was unfortunately beyond our resources.

At the completion of the interview the Mill Hill vocabulary test was taken by both husband and wife, occasionally provoking friendly rivalry. Dictionaries, sometimes hopefully regarded, were prohibited. Only one man declined the test cheerfully saying he was not a reader and had truanted from school most of the time.

Only in two families was the interview not completed and in each case special circumstances understandably gave rise to apprehension, despite good relationships with the interviewers. One of the Red Spots was severely mentally handicapped and only the parents were interviewed.

Despite the length and complexity of the subject matter, the interviews were successfully achieved in all but four instances.

*Long distance children* These children were tested, weighed and measured in their own homes by the family interviewer who had travelled from Newcastle. At the same time permission to contact the school was obtained from the parents and, after approaching the headmaster, behavioural questionnaires were sent to the teacher; all were completed and returned.

*Overseas families* Five families were visited outside the United Kingdom. The same procedure was followed, but the interviewers were contemporary or former members

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*The interview technique* The interviewers, all of whom had previous experience of systematic interviewing for research purposes, had received further instruction in the technique of the semi-structured, focused interview. Regular quality checks were undertaken to ensure the consistency of scoring of the information given, and problems were discussed. A satisfactory level of reliability was achieved. The interviewers had no previous access to information about the family backgrounds.

*The school visits*

At each family interview, the presence of schoolchildren was noted and details of name, sex and age recorded. Each family was then asked to agree that we should visit the school the children attended. This was given in every case and permission was usually obtained in writing.

The next step was to approach the Director of Education in each of the relevant areas. We sent details of the purpose and method of the study and asked for permission to get in touch with the head teachers in each school. It is pleasant to record that we had generous help from both local and distant areas and Directors of Education notified the heads of the schools concerned. We then sent details of the study to each teacher and arranged to visit the school. The visits to local and nearby schools were made by one of three qualified teachers who were also trained as interviewers.

Each interviewer had scales which were of the same type, were synchronized and had been purchased at the same time. The testing material comprised Holborn Reading Scale (Watts, 1948), Crichton and Mill Hill Vocabulary and Raven Progressive Matrices (junior and senior) (Raven, Court and Raven, 1976). At school, the interviewer met the head or class teacher, for the study had caused considerable interest, particularly in those who remembered the original 'Red Spot' study. Many asked if they could be told of the ultimate findings. Several times the interviewers accepted invitations to join in assembly, listen to concerts or see exhibitions of works.

Most of the children, aged from 6 to 17 years, were interested for they knew about the study in which their parents had taken part.

Each child was seen alone and the tests were given after a little general conversation. After the test, each child was measured for height and weight and given a card, similar to that used in 1962, recording the results. Each assessment took some 40-60 minutes. Finally, on taking leave of the teacher, a Rutter B behaviour scale was left with an addressed and stamped envelope - all were completed and returned. If a child was absent, a further appointment was arranged, and eventually all were assessed.

The help we had received was always acknowledged, all the data collected were scored, double-checked and transferred to a specially designed proforma and transcription sheet.

**The method 1979-80: defining deprivation in 1979-80**

Study of the Red Spots as adults and parents posed a new situation. Each family now contained a spouse or partner about whom we did not have any previous information. We faced also the problem of defining a series of criteria of deprivation which would be applicable to the standards of reasonable family life in 1979-81 and representative of current views of deprivation.

*The selection of items*

We began with a group of six criteria resembling those identified in 1952 - namely, marital instability, parental illness, poor personal care of the child and home, social dependence, overcrowding and poor mothering ability. We then identified 17 further features which we thought might be more appropriate for use in 1980 and these were divided into four groups as set out in Table 2.4 (p. 23).

First we looked at the frequency of each item and excluded four which did not occur often enough to merit further consideration. We then studied the average correlations of items within each group. The education items in group 3 showed an average correlation of 0.33 but those for socioeconomic stress in group 2 and parental stress in group 4 were lower at 0.21 and 0.15 respectively. The inter-correlations of items relating to psychological disturbance of parents in group 1 was low; but as they gave a correlation of 0.30 with the parental illness criterion, their effects were considered to be represented therein. Similarly the items

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in group 4, parental stress, seemed to be represented in the marital disruption criterion (average correlation 0.27).

From principal component and other analyses, seven major criteria of deprivation could be identified in 1980. Six of these coincided with those described in 1952. The frequencies with which the seven occurred in 266 families in 1979-81, are given in Table 2.5. Only one of the 1952 criteria, overcrowding, was of reduced importance (although defined differently), and a new criterion of 'educational deprivation' (that is, the absence of educational qualifications, no school examinations or vocational training after leaving school) had assumed major significance.

In the family of origin, we had been subject to constraints in choosing and defining criteria of deprivation. However, there were no such constraints in relation to the family of formation as we were free to elicit information we considered appropriate to the present times. Nevertheless, we concluded that the data in 1952 and 1980 yielded very similar profiles of deprivation at each period.

Following a major change in housing circumstances in Newcastle after 1952, overcrowding had been displaced as a useful criterion. Nevertheless a housing measure was available which represented a lesser degree of overcrowding and which could be used instead of 'educational insufficiency' in order to achieve a crude comparison between the 1952 and

*Table 2.5 Criteria of deprivation 1979-80*

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Frequency of each criterion of deprivation in 264 family units

1. Marital instability	71 (27%)	(NA = 18)
2. Parental illness	58 (22%)	(NA = 12)
3. Poor care of child and home	41 (16%)	
4. Social dependence	63 (24%)	
5. Educational insufficiency	119 (45%)	
6. Housing (overcrowding)	28 (11%)	
7. Poor mothering ability	48 (18%)	(NA = 20)

Many families had more than one criterion.

NA = This item not applicable to the stated number of cases on the grounds of their being single or childless.

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1980 criteria. This is not comparable with 1952 'overcrowding' because different definitions were used and in 1980 only 28 families (11 per cent) were rated as overcrowded. Yet in nearly half the families the parents had left school without any qualifications and had not afterwards had any vocational training, so that the effect of substituting one for the other was marked.

We had hoped to consider deprivation using criteria which were broadly comparable in both generations, but this proved not to be a credible exercise. Table 2.6 shows the distribution of the summed deprivation scores.

Table 2.6 *Distribution of families by number of criteria 1979-80*

Number of criteria	n = 264	
0	75	(28%)
1	82	(31%)
2	47	(18%)
3	30	(11%)
4	19	(7%)
5 or 6	11	(4%)

1980 assessment of deprivation

**The criteria of deprivation in the family of formation**

We have already discussed the importance of devising contemporary concepts of deprivation. An account is now given of the criteria that were eventually chosen.

*1 Marital instability*

This was defined as the presence of divorce or separation or marital instability as reflected by serious conflict, fights and physical aggression. The percentage given in Table 2.5 (p. 29) constitutes a slight underestimate as it does not allow for 18 Red Spots who were not married or cohabiting.

*2 Parental illness*

On this occasion, parental illness in the family was not limited to those who were not living with their mothers for care or who were in their charge. A decision was made to include as a component of parental illness and psychological distress defining illness in the previous five years, at least a year of unemployment or absence from work or absence from school.

*3 Poor care*

This was defined as the child being held or cared for by a person who was not a parent or guardian.

*4 Social deprivation*

This was defined as the child being in care (at least a year), and the child being in care for Services for Children in Distress.

*5 Poor mother*

This consisted of the mother being on the basis of her own assessment with tasks of the household.

We appreciate the importance of this criterion in the sounder foundation of the family. It is correlated with psychiatric morbidity and socioeconomic status in the factor analysis. It is a criterion which is required for the assessment of deprivation.

*6 Housing*

In 1952, the Housing Act was passed. But by 1959, the Housing Act was amended to allow for the possibility of a family being in a council house.

## *2 Parental illness*

On this occasion we decided to confine parental illness to illness in the mother, mainly because a number of mothers were not living with their spouses yet carried responsibility for care of their children. Furthermore, illness in these mothers was more likely to give rise to stress and distress in their children (the third generation). Support for this decision was available from the statistical analysis (principal component analysis) which highlighted a cluster of physical and psychological disorders particularly in mothers. The two defining illness features were serious physical illness in the previous five years, and a chronic or recurrent illness lasting at least a year and substantially affecting her capacity to work or ability to cope with housework.

## *3 Poor care and domestic cleanliness*

This was characterized by a low standard of care of household or children. It correlated highly with family size.

## *4 Social dependence*

This was characterized by debt, unemployment (two or more years), and voluntary or mandatory contact with Social Services concerning any children before their fifth birthday.

## *5 Poor mothering ability*

This consisted of judgements by the social interviewers, on the basis of the family interview, of mothers' ability to cope with tasks of mothering.

We appreciated that the judgements about mothering ability in the first-generation families were likely to have had sounder foundations as they were based on long knowledge of the family by health visitors and paediatricians. This item correlated significantly with a variety of features reflecting psychiatric disturbance of mother, marital stress, and low socioeconomic status. Despite a link with social dependency in the factor analysis, it was decided that this criterion required consideration on its own merit.

## *6 Housing: overcrowding - the family of formation*

In 1952 overcrowding was defined according to the 1936 Housing Act and affected 18.7 per cent of the 847 families. But by 1980, due to the greatly improved housing

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circumstances in the city and a major rehousing programme, the less rigorous criterion of 1.5 or more persons per room identified only a small proportion of our sample of 264 families. For the purpose of comparison, an operational decision was made to take a subsample that approximated to the lowest 10 per cent on the overcrowding index, and this amounted to 28 families. It is noted that only 11 of these overlapped with overcrowded families in the previous generation.

We have already established that 'overcrowding' is of reduced importance as a criterion of deprivation in the 1980s. We could not propose any other housing standard which could be viewed as a meaningful criterion of deprivation in the 1980s. Non-ownership of one's home was a possibility but there were many circumstances, such as being accommodated in satisfactory council housing, where this could not in itself be considered as a deprivation.

7 *Educational insufficiency*

Society is continuously changing and therefore what is not perceived as deprivation in one decade may be so perceived two or three decades later. Other workers have suggested lack of basic educational achievements and occupational skills constitute deprivation in the 1970s and 1980s. We therefore examined the situation in our families, defining educational insufficiency as absence of any examination success at school-leaving and absence of occupational training after school.

In our families between one-third and two-thirds of second-generation males and females (both Red Spots and their spouses) were without educational achievements and 20 per cent had training aspirations but no success (Table 2.7). These rates proved too high for use as meaningful criteria.

Only a minority of the girls had vocational training and, when present, this was traditional in character; few had degrees or their equivalents. On the other hand, two-thirds of the men did have vocational training, many with degrees or equivalents. For these reasons we decided to aggregate this information and define a criterion of educational insufficiency which encompassed both parents.

Table 2.8 shows the distribution of this information. We

Table 2.7 *Posi form*

No further training
Further training but qualification
Degree or equivalent
Guilds, Technical
Professional training
General vocational (secretary, trade)
Other combinations
Total

Table 2.8 *Dis and*

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b. educational at
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Table 2.7 Post-school vocational attainments: families of formation (tertiary occupational training)

	Second Generation Males	Second Generation Females
No further training	76	160
Further training but no vocational qualification	43	26
Degree or equivalent (e.g. City & Guilds, Technical Diplomas, etc.)	54	3
Professional training (nurse/teacher, etc.)	5	10
General vocational qualifications (secretary, trade apprenticeship, etc.)	48	50
Other combinations	10	3
Total	236	252

Table 2.8 Distribution of educational insufficiency and educational attainment

a. educational insufficiency		
1.	Two-Person Family Unit	'n'
(i)	Neither parent has school-leaving qualifications or vocational educational achievements	44
(ii)	Neither has school-leaving qualifications One has vocational achievement	58
2.	Single-person Unit	
	Has neither school-leaving qualifications nor vocational achievement	17
	Total	119
b. educational attainment		
1.	Two-Person Family Unit	'n'
(i)	One has school-leaving qualifications Neither has vocational achievement	10
(ii)	One has educational qualifications One has vocational achievements	29
(iii)	Neither has school-leaving qualifications Both have vocational achievements	19
(iv)	One has school-leaving qualifications Both have vocational achievements	23
(v)	Both have school-leaving qualifications Only one has vocational achievements	15
(vi)	Both have school-leaving qualifications and vocational achievements	25
2.	Single-Person Unit	
(i)	Has both school-leaving qualifications and vocational achievements	11
(ii)	Has school-leaving qualifications only	11
(iii)	Has vocational achievements only	2
	Total	145

considered that the foundations of educational sufficiency should be school-leaving qualifications in one or both of the adult partners (or in a single person). This simple decision needed modification to allow for some of the complex contingencies revealed in the table where both adults in a two-person family unit had obtained vocational qualifications despite the absence of school-leaving qualifications. These were solved by adding the rider that a unit should be categorized as showing educational insufficiency when both the adults in the family unit lacked school-leaving qualifications and when, in addition, one of the adults lacked any tertiary occupational achievement (and the equivalent for the single-person unit).

These were rigorous criteria and 119 (45 per cent) of 264 family units were rated as deprived. But as this was the sum of stratified samples, each sub-population needed to be considered separately. When this was done, the incidence rose sharply from the non-deprived families (21 per cent) through the random control (38 per cent) and deprived groups (49 per cent) to 65 per cent of the multiply deprived. Thus, even in non-deprived families, one in five of the adults were without educational success or vocational training, and this was the situation in one in three of all the 847 families.

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