



## GENDER, CARE and TRANSITIONS

an interim report of CRFR's first fellowship research in association with  
**The Scottish Poverty Information Unit**

The main aim of the research is to consider the transitions of women with dependent children into training and employment and the role of both formal and informal care in supporting such transitions. The research is based at Rosemount Lifelong Learning, a training and childcare centre in Royston, North Glasgow with a remit to deliver and analyse ways of reducing poverty by increasing life chances through learning, with associated child care, in a supportive setting.

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### Key Points

- Community-based opportunities for children's development and for personal development for mothers outside the home motivated women returners as much as the desire to enter work or training.
- Parents valued Rosemount for the (re)discovery of learning and abilities, and the opportunity to rethink personal ambitions and the support available. Women want to manage work, training and care in way that benefits children in the long term. Problems of transition occur not because women resist role changes, but because they seek change without detrimental consequences for their children.
- Factors affecting transitions from initial community-based training to formal education or employment included the availability of childcare, the limited time and energy available after all care responsibilities were fulfilled, the expected effect on family income and the extent of family or partner support.
- Positive outcomes reported included greater self-confidence, greater awareness of choices that could be pursued in the long or short term, a re-engagement with learning, and improved skills.
- Although formal care is a welcomed resource for families in areas of high unemployment, long-term integration of children's needs was difficult if care was conditional on use of services by parents, e.g. if it was only or mainly available in association with training or further education.
- Unpaid care work by women is complex, changing and multi-faceted and is not easily replaced by formal care. Reflecting on care activities allowed those researched to identify the skills and resources they brought to and used within their own households and wider kin. Women caring for young children commonly also had considerable care responsibilities for older family members.
- Previous research identified the importance of informal care and other support from wider family members for the economic and social well being of mothers and children in low-income households in the area. The present study confirms the importance of informal care but shows that it is often difficult to routinise this to meet the demands of employment and formal education.
- Policies on 'welfare to work' may aim to meet the expressed needs of low-income women but there is a poor fit between policy and experience, in part because policies assume an oversimplified model of the relationships, resources and infrastructure that maintains social care
- There is a need to recognise the value of lifelong learning projects in increasing long-term social capital as well as labour market potential in regeneration areas.
- Many of the lessons learnt in a project such as Rosemount should be incorporated into other sectors of lifelong learning, including further education.

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**This Briefing summarises the interim findings of the research - a research report with fuller analysis of the data will be available in April 2002**

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## The project and context

Lifelong learning and employment related training are seen, within Scotland's social justice programme, and the European Commission's Objective 3 programme, as important means to redress social and economic exclusion. Within those programmes, gender constraints to participation in employment, or types of employment, have been highlighted. These can be addressed by initiatives that focus on the training and support needs of women in communities undergoing social and economic regeneration.

Rosemount Lifelong Learning is a childcare, training and adult education centre providing services mainly to women and ethnic minorities in the North Glasgow Social Inclusion Partnership area. It provides quality pre-school and after-school childcare for 90 children; accredited vocational training for 52 women; and adult education and computer access for over 280 women and men. The area Rosemount serves is characterised by a high proportion of households with children (67%), a high rate of unemployment (24% male and 7.6% female), but a high level of satisfaction with the area in which they live. It is part of a designated area for regeneration that became one of the 45 Scottish Social Inclusion Partnership areas in 1999. Rosemount was awarded three years funding under Objective 3, Priority 5.2 of European Social Fund as a demonstration project in 2000. As such it has a responsibility to reflect on and analyse the factors and processes that affect its activities, successes and failures in order to inform local and European policy promoting a gender-sensitive approach to economic improvement.

## The study

The research included two focus groups with twelve mothers who were currently trainees, or had previously undergone training at Rosemount Lifelong Learning. The mothers involved also completed 'care diaries' for two weeks and were interviewed once, in-depth. Second interviews will be conducted in March 2002. The study was undertaken by Sue Innes and Gill Scott from the Centre for Research into Families and Relationships (CRFR) and the Scottish Poverty Information Unit, Glasgow Caledonian University. The study was funded jointly by CRFR and the European Social Fund.

Interviewees included current trainees, trainees who had moved on within Rosemount and ex-trainees. Educational qualifications were low. All had children most under 5, born while they were in their teens or twenties. They represent a 'young' set of returners, a set which Government policy is particularly keen to help into work and training. Just over half were lone parents, and all were white.

In order to increase understanding of the factors that affect women's real choices while using or moving on from Rosemount, the study examined the benefits and costs of transition for users in relation to their care responsibilities. A key element in contemporary policy discussions of poverty reduction has been the encouragement of all members of families, and increasingly mothers, to engage in paid labour as a means to reduce child poverty.

The UK government is supporting measures for the re-

entry to employment of women who have taken time out to care for children in their early years, through the Working Family Tax Credit, New Deal, and funded childcare for vocational trainees and lone parents in education. There is some recognition of the unpaid care that mothers and other family members provide and the costs of transfer between sectors is partially covered by state support.

However, much of this development ignores the informal care work and is based on an oversimplified notion of the relationships, resources and infrastructure that families use to provide unpaid care.

Informal care is an important resource and cost that is at least as likely to affect working mothers as they return to study or work as the availability of formal care. If the effect of policy is to alter the relationships of the unpaid care economy with respect to other sectors of the economy, the full ramifications must be recognised, planned and budgeted for. Care plays a vital role as an input to the economy. If insufficient time and resources are devoted to it, productivity will suffer as human resources deteriorate and the social fabric is inadequately maintained.

## Making transitions

A number of the women said they found that the initial steps into training had been difficult to take. Decisions to take up training were not solely related to work intentions, but did represent intentions to 'do something with their lives'. They reported that the integrated nature of the centre allowed them to consider their children's, as well as their own, ambitions to improve their own and their family's long term prospects.

*W: It was kinna half and half. Half because I was fed up in the house - just driving me mad. I wanted to do something different. And I also wanted somewhere for K, like nursery.... I thought that's a kind of open door tae get her in this nursery... Now like for me but for her as well.*

Few of the current trainees reported clear ideas of where attending Rosemount would take them in terms of work or entry into formal education as a motivation for first coming to the centre. However, by the interview stage, almost all had clear ideas of what they wanted to do next, even if some were uncertain whether it would be possible. Rosemount was described as providing them with the space and the support to make considered and confident choices over their next step.

*I always thought I was never capable o goin further in ma education, or further in [pause] confidence - I've gained new confidence, I've gained skills I never thought I could gain.*

The women's goals were generally to move into paid work, or work after education, they did not want to be dependent on benefits. However, they needed to find employment or educational opportunities that would fully take into account their caring responsibilities and some women concluded that this would not be possible until their youngest children were at school. Of those who had completed their training at Rosemount, not all

were currently working, and all voiced concerns about balancing work or education with childcare. Part-time work post-training, or locally based work or flexible formal study were viewed as solutions to the conflicts that arose in seeking change without detrimental consequences for their children. Models of 'welfare to work' tend to oversimplify the stages of transition and the measures of success of training programmes. There was clear evidence in this research that personal support, from staff and fellow trainees, was allowing women to consider both the timing and nature of return in a way that enhanced labour market potential rather than preparing women simply for low-paid, low-level jobs.

### Factors affecting transition

In considering what they might move on to after a period at Rosemount the main factors that were identified as having an impact were:

- childcare
- time and energy
- appropriate timing for change
- financial pressures
- social pressures
- extent of family support/partner's support

Finding the time to fit together demands of caring, training and work when there were few resources with which to reduce the demands of caring was a major issue. Money, especially in relation to choices between further education or immediate earning capacity, or between low wages and loss of stable benefits, was a crucial factor for families in making choices. It was felt that information on which to base choices could be improved within the centre and the community. Pressures from society, especially for lone parents, and from immediate family and friends were felt to act as both barriers and an impetus for change.

The research demonstrates that the effort entailed in making effective transitions into formal education or training after Rosemount is significant and should not be underestimated. Decisions about balances between family and other activities, and also about the timing of change are complex.

*I feel that finally it's worked out really well - everything just sort of fits in quite good. I havena got the worry that I had before, that I actually earn my own money it's quite a good feeling because you can say at the end, well, I've done that all by myself. I've done it.*

*I have got where I want tae be, just now. I dae want tae go further- that's the decision on trainin an dae I want tae dae it. Can I fit it in? Maybe it'll have tae wait till maybe she's a bit older and in high school...*

Availability of or uncertainty over childcare was the most significant barrier to effective transition to further education or work. This was identified as an issue in relation to formal and informal care. Rosemount was valued highly for the integration of good quality care that saw the development needs of children as a

priority alongside good quality training and support for the women. However, the weakness of a wider neighbourhood formal care strategy meant that 'moving on' for mothers meant a discontinuity, and often reduction of quality care for children. As national studies show, informal care is generally the form of care that low income households fall back on to provide substitute care.

### Informal Care and transition

The research shows that informal and formal care are complementary. Informal care is a major resource that the women use, or need, but it was not available to all of the women involved. Formal care was seen as a very important resource by all, but as only one part of the resources necessary to provide care whilst a mother is in training or employment.

Many of the women were not simply receivers of informal care, they provided care for kin, contributing care particularly to their own or their partner's mother. Just under half of the women were caring for others as well as for children. The area's high levels of poor health showed in its impact on the health of the grandparent generation - meaning grandparents are seldom in a position to help with care as they were in need of care themselves (even though many of the grandparents were not yet over 60).

*She's ma main support, ma Mum. I was never able to do anything without ma mum. But she's no fit enough now.*

Reciprocity of care was important to the smooth functioning of informal care relationships. In some cases a reduction in being able to provide care was associated with a number of examples of reduced availability of grandparents to care for children while participants were in work or training. Reciprocity of care was part of expectations - the 'family deal'- but there were a number of reasons why it did not occur:

- not wanting to ask
- estrangement and negative relations in the family
- health problems

Informal family care was valued:

- for its flexibility - when childcare emergencies occur someone is needed to step in at a moment's notice
- for its practical/emotional mix
- because of close relationship with the children
- where grandparents are better off and able to offer material benefits to the children
- because things can (although not always) be legitimately asked of families that can't be of other people.

However, using informal care as a means to support or replace care for children as the women took up training or employment was seen to have *costs* and to be *conditional*.

### Costs

- The women's wish for greater independence through education and work, insofar as it creates situations in which informal care is needed, calls for greater dependence on family members. Yet a number of women said that not depending on others was very important for them.
- Women may not pursue stated goals because of family attitudes and cultures, not just because of practicalities. Developing new ideas and ambitions could contribute to family estrangement - for some women there was a sense of being penalised for stepping outside the family nest.

### Conditional on:

- Considerable *effort* in keeping relationships within families going, particularly after separation. When there is more than one father involved the informal care patterns in families focus even more on mother's central role in managing them.
- *Reciprocity* which is not always easy to achieve, and has uses up time.
- Being willing to accept different childcare styles from alternative carer.
- Children's own views, including how willing they are to go to an alternative carer.

### Conclusions and Policy implications

Three key issues emerged from the study:

- 1) Integrated childcare and lifelong learning provision that supports parents and children's longer term education and skills development can increase the choices available to parents, particularly women, as they seek a manageable transition to combining work and care. However, success depends on long-term funding and a more strategic approach among other training and childcare providers.
- 2) In addition to any individual employment-related skills that result from projects such as Rosemount, outcomes should be recognised as socially significant. These represent resources that are essential to successful social and economic regeneration and contribute significantly to combatting social exclusion.
- 3) Informal resources for care should not be taken for granted. They are neither universal nor self-sustaining, yet are essential, either on their own or as additions to formal care, for the transition into sustainable employment for many parents. Present childcare subsidies that accompany in-work benefits will not maintain this important part of the economy, and child benefit is currently set too low to allow parents to stretch the informal economy to routinise care.

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### CRFR RESEARCH BRIEFING SERIES

The Centre for Research on Families and Relationships was set up in January 2001 with the support of a research development grant from the Scottish Higher Education Funding Council. It involves a consortium of universities in Scotland. CRFR is committed to producing research and commentary on families and relationships relevant to Scotland and to disseminating such work widely through a range of publications and different types of events to promote collaboration across sectors, to stimulate debate and to enhance the dissemination of research. A core strand of these efforts is the **CRFR Research Briefing Series**. Research Briefings will provide the opportunity for short, accessible reporting of primary research; literature reviews; commentary on demographic and social trends; and think pieces on topical issues. We plan to develop the Series over time, with the members of the CRFR network of researchers, policy makers and practitioners contributing ideas, developing briefings, and working with CRFR staff on short articles.

CRFR Briefing 1: Solo-living in Scotland: Trends and issues	June 2001
CRFR Briefing 2: Gender, Care and Transitions	January 2002
CRFR Briefing 3: Family Policy in Scotland	February 2002

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