In this Data Insight researchers at Swansea University Medical School investigate the risk factors for children’s low school readiness (e.g. low vocabulary & communication, low on ability to socialise).

This work is a collaboration between ADR Wales’ Early Years Strategic Impact Programme, the Welsh Government, the Centre for Population Health (CPH) and Public Health Wales.

What we did

A review of published research undertaken by researchers at Swansea University examining factors associated with school readiness indicate that area-level factors, parental demographic and health factors and child health factors all play a role. Those associated with higher school readiness included higher levels of child care provision in the area, living in private housing, mother’s age (between late twenties or thirties), breastfeeding (higher rates and longer breastfeeding duration), child living with both parents and a nurturing parenting style. Parents in good physical and mental health and the child in good physical health (being born at term and a healthy birth weight) are factors associated with higher school readiness. Conversely, the factors that are associated with lower school readiness include low access to childcare, higher levels of unemployment (family and area-level), living in social housing and exposure to poor environment such as damp. Parental factors include maternal heavy drinking behaviours, mother who smoked during pregnancy, younger mothers (teenage mothers) or older mothers (40+ years) and parents with poor physical health (hypertension, diabetes etc) or poor mental health. Single parent or step-parent families, low expectations by the parent for the child, preterm or low birth weight child, and poor health of the child are also associated with low school readiness.
What we found

Within Wales the provision of interventions for vulnerable families is offered by Flying Start. Flying Start is an early years Welsh Government funded programme for families of children under 4 years of age. The programme aims to make a decisive difference to the life chances of eligible children in identified Flying Start areas by providing access to childcare; health visitors; parenting support; parent/toddler groups; and speech, language and communication support. We examined the percentage of children who have low school readiness and do not live in a Flying Start area (and so cannot obtain the help and support). We found in Wales, 14.1% of children in non-Flying start areas had low school readiness and 21.0% of those in Flying Start areas (6.9% higher in Flying Start areas). However, it is important to note that most children do not live in a Flying Start area and so in absolute numbers, more children who have low school readiness do not live in a Flying Start area in Wales.

What next?

The next steps for this research will be developing a predictive model for school readiness (before school starts) to examine if a child who is likely to have low school readiness but who does not live in a Flying Start area, can be identified in advance in order to offer help and support, compared to the prediction of living in a Flying Start area.

Our analysis reveals that there are multiple risk factors for low school readiness in children. This data provides us with further opportunities to explore the significance of various factors in predicting school readiness such as low birth weight and maternal smoking. Knowing the risk factors can help inform policy regarding the provision of interventions and access to resources for the most vulnerable children and their families.

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Reference

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