



# Commission for Rural Communities

Tackling rural disadvantage

## Insights from users and providers of Children's Centres in rural communities: Summary report



The Commission for Rural Communities acts as the advocate for England's rural communities, as an expert adviser to government, and as a watchdog to ensure that government actions, policies and programmes recognise and respond effectively to rural needs, with a particular focus on disadvantage.

It has three key functions:

**Rural advocate:**

the voice for rural people, businesses and communities

**Expert adviser:**

giving evidence-based, objective advice to government and others

**Independent watchdog:**

monitoring, reporting on and seeking to mainstream rural into the delivery of policies nationally, regionally and locally

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## Introduction

500,000<sup>1</sup> children in rural communities in England live in households affected by poverty<sup>2</sup>. Sure Start Children's Centres have a remit to address the Public Service Agreement (PSA) target of narrowing the gap in educational achievement between children from low income and disadvantaged backgrounds and those from more affluent backgrounds; and to contribute to a reduction in the numbers of workless households by supporting parents in their employment aspirations.

Children's Centres are also charged with engaging and supporting disadvantaged families. The Children Plan, published in 2007, underlines this commitment, asserting that:

*Effective home-visiting outreach and other outreach services can make a real difference to families who cannot or choose not to access services, providing important information and access to services such as childcare and family support.*<sup>3</sup>

This summary report provides an overview of the challenges and opportunities of delivering children's centre services in rural areas and the experiences and perspectives of parents of young children. It also sets out the key areas in which change is needed to improve support for families through rural Children's Centres.

This report raises some important issues for providers and funders around accessibility, provision of employment and training, isolation and poverty that are worthy of further consideration. The Commission for Rural Communities is pleased to be part of the sharing of good practice to move these issues forward.

The full report was undertaken for the Commission for Rural Communities by Capacity Ltd, with expert advice provided by the Coalition for Rural Children and Young People.

*There was nothing here when I was young, only a youth club. My partner and me, we were thinking of moving but the children's centre keeps us here.*

Mother, living on low-income with five children

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## Background

The countryside is typically considered to provide a safe and healthy environment for children, but rural poverty is rising. Employment in rural areas is often part-time, seasonal and low-paid, while basic goods and services are more expensive. Affordable housing is often in short supply and poor transport can be a barrier to accessing services or finding and keeping employment.<sup>4</sup>

Rural poverty is often hidden and unacknowledged. Low population densities in rural areas mean the fact that poorer and more affluent families live in the same area is masked. The effects of rural poverty on family life may also be masked because families are reluctant to ask for help because of the fear of loss of privacy.<sup>5</sup>

<sup>1</sup> English Housing Conditions Survey 2008

<sup>2</sup> Below 60% of median income after housing costs

<sup>3</sup> Department for Children, Schools and Families (2007). The Children Plan

<sup>4</sup> CRC (2008) State of the countryside

<sup>5</sup> Countryside and Community Research Unit (2003) The demography of rural areas :a literature review – Report to Defra

Sure Start Children's Centres provide a one-stop-shop for families with children under the age of five. Centres serving the most deprived areas have access to family healthcare, advice and support for parents, outreach services, integrated early education and childcare and links through to training and employment. There are currently more than 3,000 centres in England. Of these, 624 are described as rural in local authority returns to Together for Children, the body tracking delivery on behalf of the Department for Children, Schools and Families (DCSF).

Priority groups for Children's Centres are identified in government guidance and include teenage parents, fathers, lone parents, families living with disability, black and minority ethnic families, prisoners' families, homeless families, victims of domestic violence and asylum seekers. In 2001, the National Family and Parenting Institute (NFPI) conducted a national mapping of family services in England and Wales and rural families were among the specific groups of families less likely to access services.<sup>6</sup> Similarly, in 2003 a study by the Countryside Agency of the early lessons of Sure Start found that lower levels of resources, trained staff and suitable premises resulted in failure to take-up services.<sup>7</sup> Despite this evidence, rural families are not identified in guidance for Children's Centres, as a priority group.<sup>8</sup>

*There is no such thing as hard-to-reach families; it's the services which are unreachable.* Children's Centre Head



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<sup>6</sup> Henricson, C., Katz, I., Mesie, J., Sandison, M. & Tunstill, J. (2001) National Mapping of Services in England and Wales: A Consultation Document. London: NFPI

<sup>7</sup> The Countryside Agency (2003) Delivering Services to children and families in rural areas: The early lessons from Sure Start

<sup>8</sup> Dcsf (2006) Children's Centres Practice Guidance

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## The study

The study, which took place in 2009, developed qualitative case studies of four rural Children's Centres. Two of the centres were in less sparsely populated areas; one was identified as urban, but serving a wider rural population and the remaining one was in a sparsely populated area.

The centres involved were:

*My Start Children's Centre*, Ilfracombe, Devon (Action for Children)

*Millom Children's Centre*, Cumbria (Action for Children)

*Wiveliscombe Children's Centre*, Somerset (The Children's Society)

*Wainfleet Children's Centre*, Lincolnshire (Local authority-managed)

The work of the selected Children's Centres was profiled and analysed against the local health, education, employment, transport and social conditions prevailing in their local areas. In addition, more than thirty children's centre staff, local authority officers and other service professionals, including specialist services, health visitors, playgroups, family support organisations and other agencies contributed.

Parents also contributed their experiences and views. Those parents, 129 in total, represented a broad cross-section of income, employment, family size and structure. Most were users of Children's Centres but some were non-users.

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## Key findings

*Weekly shopping is a nightmare; it's a £15 taxi ride back, I can't afford it, but it's such a struggle on the bus with two children, buggy and shopping.*

Unemployed parent, no private transport

The benefits of rural life – peace and quiet, good air quality and access to areas of natural beauty – were acknowledged and shared by almost all families, but the distinctive disadvantages – the higher costs of accessing goods and services, poor public transport, the shortage of affordable housing and physical isolation – were experienced very differently, according to the circumstances of people's lives. Poverty, in particular worklessness and lack of private transport, appeared to be the key variables.

For a majority of parents the perceived disadvantages of rural communities – isolation, poor public transport, lack of choice regarding goods and services and housing shortages – are offset by the benefits of clean air, reduced crime levels and a more peaceful environment. For those with cars, access to the internet, a reasonable income and family and friends close at hand, the disadvantages are regarded as occasionally troublesome but no more than that.

For a minority, however, the disadvantages are very significant, causing some of them to miss out on primary health care, continuing education,

the opportunity to have social relationships, childcare and employment. For some the realities of day-to-day living are extremely harsh and the impact of the current recession is to make life even harder.

Children's Centres are committed to families and demonstrate a similarity of approach to the rural nature of their communities. The most common features of this approach are a flexible use of outreach, help for families with transport needs and the use of a wide range of satellite venues, mobile facilities and home visiting to bring services closer to remote areas.

A further feature is the capacity of the Centres to engage and gain the trust of many of the families who find it hardest to access services, whether because of transport problems, lack of information about the services on offer, or because they are reluctant to ask for help. Their success in doing so is achieved by a combination of practical help, for example with transport, combined with an approach which was frequently described by parents as non-judgemental and sympathetic.

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## Children's Centres

*Without the children's centre, I would probably be tearing my hair out. Everything would go downhill, my confidence would be zilch.*  
Lone parent

Children's centre staff understand rural poverty and want to do more to support families. Access to education and training are seen as key to this, alongside help with parenting, childcare, transport, health education and advice and information.

Resources are thinly spread and the costs of delivery are higher in rural areas because of the distances involved in reaching and supporting families in larger geographical areas and in the necessity of making use of satellite venues. With additional funding, staff believe that more families could be helped. In some instances this would be through additions to levels of service provision, e.g. ante-natal care, in others additional funding would enable more help to be given with transport or allow evening and weekend working, or increase outreach capacity.

Children's Centres are doing all that they can to ensure that they support those families most in need, but acknowledge that in a large sparsely populated area, they may literally not always know where those families are. Staff also believe that it may be harder in communities where people know each other well for families to ask for help because of fear of loss of privacy.

Parent users of Children's Centres are clear that they have benefited from Children's Centre services. The benefits most frequently identified were parenting skills, increased confidence and a reduction in isolation. Some parents believed that Children's Centres had helped them to access training leading to work, others that it had reduced mental health problems.

Although all parents were highly positive about the Children's Centres, for some the benefits were described as relatively marginal. Those

were most likely to be families who are on higher incomes, have good qualifications, have their families close at hand and are in housing which is suitable for their needs. For others, however, the benefits of involvement with Children's Centres were crucial to their wellbeing and their ability to cope with a range of challenging issues in their lives.

For many parents the main, or only, disadvantage is that Children's Centres are not open longer – in the evenings or weekends. With more flexible opening times, working parents, including fathers, could also receive help. Families also want activities for their older children, for whom in rural areas there is currently a lack of services and activities, such as holiday schemes and clubs. More activities for disabled children are also needed. In at least one centre in the study, Millom, this model is already in place. Run by Action for Children, the Children's Centre offer is provided alongside youth work, adult education and support for families with children with special needs.

Those leading and managing the work believe that the recession is having an impact, particularly on low-income families, who may be getting behind with nursery fees or unable to afford small extras like snacks for their children. Parents were more divided about this, but some were aware of businesses closing down or family or close friends losing their jobs.



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## Quiet disadvantage<sup>9</sup>

*The kids have not been to dentist for a while as it costs £20 return to take them to Skegness.*

Unemployed father of eight children

The vast majority of parents (94%) said that they felt that the countryside was a healthy place to live, and 62% said that health services were available at the times and places where they were needed.

The majority (73%) of the parents in the study have their own transport and access to the internet as a further means of accessing information, goods or services.

Among those without access to private transport, however, only 32% said that they could easily and conveniently access health appointments.

Among workless families 47% reported chronic health problems and 57% of this group said that their children had additional needs or health problems. Despite the relatively high incidence of health problems only 26% have access to a car and the majority, 59%, did not believe that health services were available at the times and places where they were needed. Dental services were identified by many as particularly difficult to access.

For most families, finding affordable housing was a problem to some degree, but this was accentuated for those on low incomes. For many of this group, renting privately or obtaining a council house was the only feasible solution. Privately rented accommodation was frequently described in stark terms as unhealthy, inferior and completely unsuitable for children.

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## Transport

*No trains on Sundays, the bus is extraordinarily prohibitive. It costs £15 single for 3 adults and three children. We walk 20-25 miles a day. But there's no transport to get back!*

Parent of four children, no car

The service which most parents believed was in need of significant improvement was transport. More than two thirds of parents, including those who had cars, felt that both the service and the cost of transport needed to be addressed. Among those who lacked transport, three-quarters believed that improvements were necessary.

For those living in smaller villages public transport was described as expensive and hopelessly inadequate. Bus drivers were singled out by many as unhelpful or aggressive towards parents with small children and the design of the buses unsuitable for access for prams and pushchairs.

Some parents on very low incomes and lacking cars described how they had no choice but to pay for expensive taxis in order to get their weekly shopping, because there was no bus on that particular route.

<sup>9</sup> The interviews with parents were coded to enable responses to be expressed in numerical form, with the caveat that, given the sample selection and size, the study provides data of a qualitative, as opposed to statistical nature.

Shift workers were similarly forced to rely on taxis to get them home.

Community transport schemes are acknowledged to be helpful. For example, in Ilfracombe My Start has also developed a 'Tiny Travellers' transport scheme – using volunteer drivers who are trained and CRB checked. The scheme was developed between North Devon Volunteering Development Agency; Devon County Council and Action for Children.

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## Isolation

*It's very lonely; we play on the sand all day.*  
Lone parent

Many of the parents had family living nearby and felt supported by them but slightly more than 40% of parents said that isolation was a problem.

Among lone parents nearly 60% said isolation was a problem and among those without private transport 66% regarded this as both a problem and a disadvantage of rural living.

Parents repeatedly talked of the opportunity to meet other parents as a key benefit of children's centre involvement. A number had suffered from feelings of depression, and loneliness were frequently mentioned as a disadvantage of rural communities by those who had no family nearby. Participation in Children's Centres had helped many of those parents to make friends and to enjoy rewarding activities with other parents and children.

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## Childcare

*I gave up work as a nurse; I was doing 12 hour shifts, but no flexible childcare... It ended up paying to go to work.*  
Parent of three children, husband in work

Positively, nearly three-quarters felt that the childcare available locally met the needs of their families, but proportionately fewer with children over five felt this was the case. Lack of after-school clubs and holiday care was frequently cited as a disadvantage of rural living. Childcare was described by some parents as either too costly, or not sufficiently matched to their working hours or other needs. A shortage of crèches and childminders was an issue in all of the areas in the study.

Among those who felt that the childcare available did not meet their needs, the main reasons related to what were described as inflexible hours, inaccessibility and a shortage of childminders. Where the available local employment involved shifts, parents would rely on family and friends, or where no help was available, they were unable to work.

Families with a disabled child or children said that childcare provision was not always suitable.



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## Employment

*If the children's centre didn't exist, I wouldn't even have thought of doing courses. Now I've done literacy and maths. I've got a qualification.*  
Low-income parent, now in work

Less than half of all parents were in paid employment and among those who did work, three-quarters were in part-time jobs. Among lone parents only 36% were in employment, which is significantly below the government's target of 75% lone parent employment, and of these very few lone parents were in full-time work.

Half of the parents interviewed were well qualified, with at least Level 3 qualifications or diplomas and degrees. Among those on incomes of £15,000 or less, 38% had no qualifications or were at Level 1 or below.

Asked about the areas of family life that parents would like help with, most said they wanted help with their children's behaviour or learning, but almost a third wanted help with getting back to work. Among parents living in families where no-one was in work, half wanted help to get a job.

After transport, tackling the lack of local employment was regarded by all parents as the next highest priority. For those without transport, however, gaining the qualifications and training they need would not be possible without the help of the Children's Centres which are offering courses, working with Jobcentre Plus and organising volunteer transport.

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## Issues

The findings illuminate very clearly some of the elements of family life which are distinctive for rural areas. This was a short qualitative study and the four case study areas varied, economically, demographically and culturally, but there was, nevertheless, a marked consistency in the descriptions of rural life offered by parents and professionals alike.

Poverty has also been shown conclusively to have the largest impact on outcomes in the early years.<sup>10</sup> In rural areas, poverty is perpetuated by the nature of local economies which are characterised by seasonal work, whether in agriculture or tourism; low pay; shift work, or self-employment. Rural poverty is also distinctive from its urban counterpart, where families have helping services close to where they live and where public transport is more readily at hand.

Children's Centres unquestionably play a crucial role in promoting early childhood development and responding to deprivation. More widely, tackling child poverty will shortly be given fresh impetus by the enactment of the Child Poverty Bill. In this it is vital that the distinctive aspects of rural poverty are accorded high visibility and priority.

If rural family poverty is to be addressed effectively the findings of this study suggest the need for change across a broad range of areas of policy and public service delivery. In this context, the Commission for Rural Communities, as the body tasked with advising government on rural matters and rural disadvantage, will want to consider further the following issues.

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## Children's Centres

The rural Children's Centres in the study are already tackling the issues which are associated with the causes and effects of family poverty, but could be more effective if enabled to be more flexible in their offering to families. This would include extending activities to include older children, other family members, and families affected by disability. Evening and weekend opening would also form part of a more flexible offer.

This greater flexibility is particularly relevant to rural children's centres, because of the distances involved for families attending activities and the relative lack of facilities for older children and adults.

Enhanced in this way, rural Children's Centres could play a larger role in assisting families with tax credits, benefit claims and other aspects of money management. In partnership with training providers they could have an important role to play in helping out-of-work families to gain and sustain employment, including more support for parents in rural areas to gain Level 2 and Level 3 qualifications and to undertake vocational and other training. Some of this work is already in evidence in some centres, for example Wainfleet in Lincolnshire, where adult education for parents is combined with close links with Jobcentre Plus.

Accredited volunteering schemes and support for co-operatives, which provide work activities and build confidence, may also be relevant. Existing schemes like the food cooperative at Wiveliscome Children's

<sup>10</sup> C4EO (2009) Narrowing the gap in outcomes for young children through effective practices in the early years.

Centre in Somerset or the community café provided by My Start in Devon provide a starting point.

A more flexible and extended children's centre offer would require agreement from Dcsf and support from local authorities, which have responsibility within their areas for Children's Centre delivery. Those who are commissioned to deliver Children's Centre services would also have a role to play. It would be logical to suppose that the children's centre offer, extended to include additional activities and longer opening hours, would require additional resources, but there might also be cost-savings obtained by co-locating additional services such as adult education alongside health, parenting and childcare. Some additional activities like community cafés might be provided as community businesses or social enterprises. Clearly, more work is needed to determine the resource implications of these options, drawing on the experiences of Children's Centres like those in the study.

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## Health

On the findings of the study, a combination of low-income and lack of transport causes some families to miss out on primary healthcare, including dentistry or access to parenting support. Rural Children's Centres are already developing a range of outreach techniques to bring families and services together and this good practice could be disseminated more widely. Multi-agency working, described as good by those participating in the study, could be enhanced through full data-sharing between health and other services, to ensure that isolated families with young children are identified early, if possible during pregnancy.



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## **Childcare**

The nature of local economies requires a flexible childcare response. Children's Centres are already aware of this but might wish to review with their contractors the flexibility of their provision, consistent with ensuring its financial sustainability. The need for evening or weekend care could be facilitated by an increase in the supply of appropriately registered childminders, attached to Children's Centres as part of a local childminding network. Within an extended, more flexible offer, there would also be scope to meet local needs for out-of-school and holiday care.

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## **Local authorities**

Barriers to training and employment and other public services require an authority-wide commitment if they are to be tackled effectively.

Forthcoming child poverty legislation will create a new statutory responsibility to develop a needs assessment and strategy to reduce child poverty within local authority areas. In undertaking or commissioning needs assessments in rural areas, it will be important to ensure that:

- families lacking transport to access health and other services and families where no-one is working are accurately identified and consulted about help that they need;
- families living with disability together with other priority groups are recognised as integral to any effective needs analysis; and
- parents who lack vocational skills or qualifications can be identified and offered the help which they need.

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## **Transport**

Public transport is a fundamental service and, as identified in the study, the service which is believed by the vast majority of families to be in need of improvement. The issues which have the most direct bearing on access to services and addressing rural child poverty are:

- transport which is accessible to families and suitable for prams and buggies, including families with disabled children;
- bus routes and timetables which allow those living in remote areas to travel to centres of employment, for accessing healthcare, education or training; and
- subsidised or concessionary fares for families with children.

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## **Department for Children, Schools and Families**

Within Dcsf practice guidance for Children's Centres, rural families do not constitute a priority group, nor is poverty itself addressed explicitly in guidance about priority families. The evidence of the study suggests that Dcsf should consider making rural poverty a further priority category adding this to existing guidance for Children's Centres.

In rural areas outreach is more expensive because of the time and costs involved in travel and because fewer families can be supported by each worker than would be the case in a more densely populated area. Children's Centres' staff believe that with additional resources, more could be done to identify and engage families most cut off from services.

There is already a rural disadvantage weighting in the allocation of Sure Start Grants but it was not possible within the scope of the study to justify this should be reviewed by Dcsf at this time. However, it may be that this could be undertaken at a reasonably early date. To facilitate this, Children's Centres should be supported by their local authorities to capture the additional costs of delivering services to rural communities, through outreach and other means.

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## **How to get the full report and more information**

The full report can be downloaded from our website:  
[www.ruralcommunities.gov.uk](http://www.ruralcommunities.gov.uk)

We would like to hear what you think of the report – our website allows you to send comments.

More information about Children's Centres can be found at:  
[www.dcsf.gov.uk/everychildmatters/earlyyears/surestart/whatsurestartdoes/](http://www.dcsf.gov.uk/everychildmatters/earlyyears/surestart/whatsurestartdoes/)



**Commission for  
Rural Communities**

John Dower House Crescent Place  
Cheltenham Glos. GL50 3RA

**Telephone** 01242 521381

**Facsimile** 01242 584270

**Email** [info@ruralcommunities.gov.uk](mailto:info@ruralcommunities.gov.uk)

**www** [ruralcommunities.gov.uk](http://ruralcommunities.gov.uk)