

# Mothers at home Matter.



## What's in a Name?

A recent lively, but gracious, debate on our Facebook pages centred on whether we should change our name to something more inclusive. This topic comes up regularly in our committee meetings and a couple of years ago I was an advocate for trying to widen our reach with something like Mothers And Home Matter. However, the cultural shift towards all mothers being back at work as soon as possible after giving birth is happening so rapidly that I feel that we have to be advocates (and we're the only ones) for mothers (not fathers) who are *at home* (not working outside the home).

Being called Mothers at Home Matter has pros and cons. It is a bit provocative as it is not politically correct. Some feel it implies others don't matter - why is our title restricted to mothers? This isn't how we feel - do the Black Lives Matter campaigners suggest that white lives don't matter? Fathers and 'working' mothers are feted in society and supported financially by the Government, so we are the only ones saying that mothers at home are uniquely important in their children's lives. Secondly, it's very clear what we stand for: mothers at home. This enables us to be found by the media. We are often the only voice speaking up to say that it does matter whether children are in childcare or at home, and that mothers should not only be valued, but should also be supported financially to enable them to stay at home.

Of course all mothers matter. Whatever job they do, being a mother is the only role they are uniquely qualified to play. However, we say that being a mother is so important that we should be able to spend as many hours as possible mothering, rather than trying to shoe horn it in after a day at work. Time is the greatest gift we can give our children, and the gift which is in shortest supply for many of us. As Barbara Bush said, "At the end of your life, you will never regret not having passed one more test, not winning one more verdict or not closing one more deal. You will regret time not spent with a husband, a friend, a child, or a parent."

MAHM celebrates and recognises the unique value that mothers have. Our previous newsletters have highlighted research that shows that the sound of the mother's voice can calm a baby, or even a 12 year old. Mothers reduce their children's stress levels. The smell and sound of their mother is what a baby is used to when they are born, and the presence of an attentive, sensitive mother is the most important factor in helping babies to develop well.



Babies are designed to be loved by their mothers.

Our name also gives us a unique position in debates on shared parental leave, for example. Almost all government policies are designed to get mothers into work for as many hours as possible, even though most mothers would rather work less and have more time to spend with their children. Shared parental leave is no different, which is why we have a voice in this debate. Of course fathers are absolutely vital to children. The consistent, attuned care that a father can give a child when he is at home full time is brilliant for pre-schoolers and older. But for the first year or two, at least, babies need their mothers, not only for breastfeeding, but also for the calming effect the mother has. Babies are not that laid back about who cares for them in their early years. They want and need their mothers.

Mothers at home do matter, and not just as mothers. They are able to meet their children's needs more easily because they are consistently available. But they are also very often involved in community activities, running toddler groups, helping with neighbours, the elderly, running voluntary groups etc. The job they are doing is vital. The Government will give them lots of help if they want to be out at work and pay someone else to care for their children. But we would like the Government to support them if they want to care for their children at home themselves.

We have to be able to say that 'this' matters (ie, mothers at home) without saying that 'that' (fathers/working mothers) doesn't matter. The point is that government rhetoric and society say that mothers only matter if they are being paid and contributing tax. We say their worth transcends any monetary value.

Finally, what is a 'mother at home'? I have various titles I can use, depending on who I'm talking to. I am a corporate finance research director, a charity trustee, a relationships manager, a newsletter editor and more. But I do all this around the children. My children are both at school now so there is some flexibility to work - although the days do fly by. But I don't consider myself a working mother (although the Government might). I am at home when the children need me. There are lots of us in this halfway house of doing some paid work, or doing masses of voluntary work, but primarily identifying ourselves as mothers at home.

Mothers at home matter. They really do. 

Claire Paye, Editor & Vice Chair of MAHM

# Letter from the Chair

Five of Anne's six sons

*Our Chair, Anne Fennell, on how her family's personal househunting trials have reinforced her policy views for MAHM, as well as all the great work the committee has been getting up to.*

The past year for our family has been one of great transition, of questioning and of a great test of faith. About a year and a half ago our landlord of 11 years gave us notice that he wanted to move back into our home and we had to find somewhere else to live. That notice was deeply unsettling; it was like a rug pulled from under one's feet, the security that we had come to rely on in the form of our home was no longer so secure.

I began to question the decisions we had made particularly for me to give up my work. Had I continued we might have got a mortgage years ago and had a home. I would not have been able to raise our children myself, but we would have had some security. Yet had I done this I would have not been happy, nor would it have been ideal for our family.

We were extremely fortunate that our landlord gave us a long notice period. It has been quite a journey and a real eye opener into the world of housing and just how difficult it is for families and particularly young people to establish a home either to rent or buy.

House prices in London (where I have lived all my life), and in other main cities, are quite simply unaffordable and in many areas are over 17 times the average income. The rental market is not much easier. Rents in London for a 3 bed house are close to £2k a month which makes living on one income extremely difficult.

Moreover, landlords have many restrictions. Increasingly families are being turned down for a variety of reasons: landlords wanting the security of 2 incomes in case one partner loses his/her job; having a number of children; having pets; being on benefits; etc. More homes are on offer to professional sharers, whilst many of the new flats being built are luxury apartments quite often sold for investment. In short the housing market is failing to support families.

Housing is an area that does need to change if mothers are to have a chance to stay at home to raise their children. It is a campaign area I would like Mothers at Home Matter to develop in the next few years.

Housing has become a top domestic priority for government, but finding a solution that works is difficult. Our own journey has led us into the world of self-build and I have been supported by the Community Land Trust organisation and National Custom and Self Build Association, and have come into contact with various officials in central government, the GLA, Ministry for Housing, Communities and Local Government, my own local council and think tanks. These links I would like to strengthen as a first step.

Meanwhile there has been much going on behind the scenes at MAHM. We are delighted to welcome two new committee




members,  
Zoe Gilbert and  
Esther Peacock.

Our event with Miriam Clegg and the Home Renaissance Foundation on the Value of Home in November went well and provided a forum to ask what it is we value and why it is the world of care is so undervalued. Marie Peacock, our former Chair, continues to speak out, often as a lone voice, at All Party Parliamentary Groups and Early Childhood meetings about the importance of mothers and attachment and recognising the value of this invisible work.

Claire and Lynne are often called on to appear on the radio or TV to challenge the idea that all mothers wish to rush back to work as soon as possible. We had a good response to the Treasury Committee inquiry into 'Productivity' and the impact of outsourcing care on GDP - many of our members made the case for the importance of family care and 'productivity' at home, which is not counted in GDP but matters to the economy, family and society. Erica Komisar, one of our AGM speakers, was invited to give a presentation at the Legatum Institute in March this year on the importance of the mother bond and the neurological effects of mothers being forced to leave their babies. MAHM joined her at this event and the following evening at a Legatum dinner looking at 'Strengthening Families'.

Our website is still in development and we are looking at ways we can expand our support to mothers and simplify our campaign messages. One new and exciting venture is Katharine Boddy's online inspiration group for mothers (see p12)

As a final note can I make a plea for help? We are all volunteers. Every little bit of help counts. We need someone to take over managing our database and our membership. Help is also needed to update our social media pages. If anyone is interested in getting involved, and/or in writing articles for a blog or attending meetings - we get invited to many - please let us know.

With best wishes,  
Anne 

# MAHM Open Meeting 2017

*The MAHM Open Meetings are held in the Autumn every year and are a chance for members to hear inspirational talks and meet and chat to other members. Here's the account of the fantastic talks in November 2017.*

**O**ur Open Meeting (conference) takes place once a year and is open to all. It is an opportunity for mothers and policy makers to come together to be encouraged about the value of mothering. These are some notes from our two speakers. We highly recommend Erica's book (review in Autumn 2017 newsletter) in which she expands on her comments here.

## **Erica Komisar**

*Being there: why prioritizing motherhood in the first three years matters*

Erica is a New York psychoanalyst who has recently published a high profile book called 'Being There: Why prioritising motherhood in the first three years matters', which has attracted considerable attention because of its uncompromising and, to some, unwelcome message.

Erica started by saying that we need an organisation called Mothers at Home Matter. Isn't it obvious that they do?

All jobs have boring and burdensome moments but for some motherhood has lost its joy. Over the past 30 years of practice Erica has seen increasing levels of mental illness at younger and younger ages, which she connects with the absence of mothers on a daily basis. Her work focuses on helping mothers to be present. No one has to have children. If you do, you should look after them.

There is a myth that nothing changes after you have children; everything changes. We need to inform mothers before they have children. Nurturing is hard work but it can be fun. It is important to remember that you don't have to do it all when the children are young, you can enjoy success at your job later. The first 1000 days of life are a crucial time when the limbic system, which helps us cope with stress, is developing. You lend your child yourself, but you get it back when they grow up. You have to be selfless.

There is an increasing devaluation of mothers in the world. Motherhood has lost status. Mothering is not seen as valuable work because it is not paid, but what could be more valuable than raising emotionally healthy children?

Feminists gave us the choice to have children or not but the pendulum has swung too far. Now, if you don't go out to work, you're seen as a traitor to feminism. Social economists are driving the research which is being reported. They write about the importance of mothers returning to work. Published articles are almost always about the needs of mothers and fathers, hardly ever about the needs of children. We should build a child-centred society.

Erica conducted lots of research for her book. We need research to prove that mothers are emotionally and biologically necessary, for example:

1. Mothers regulate their baby's emotions so they achieve homeostasis (emotional and physical equilibrium). Babies can't do this themselves until they are about three.
2. Mothers buffer their babies from stress. Babies are born more neurologically fragile than we realised. They

are born about 18 months too early in developmental terms, because mothers wouldn't be able to carry them any longer.

3. Nurturing, or the lack of it, is passed on down through the generations.

There is an inverse relationship between oxytocin and stress. Oxytocin is a protector against cortisol. The more the mother is present, the higher the level of oxytocin in the child and the better they respond to stress. The amygdala is the almond shaped part of the brain which plays a central role in the experience of anxiety. It is like a light switch. If it is always on, children go into a hypervigilant state with raised levels of anxiety. If this continues, they can become depressed and don't react as they should to stress. The presence of the mother regulates the amygdala, enabling it to 'switch off' and reduce anxiety levels.

In the USA, 27% of women return to work only two weeks after birth. There is no paid maternity leave. 40% have post-partum depression, which can make them bored with their babies. Returning to work does not help these mothers. They feel conflicted and may feel guilty. Guilt is OK because it shows you are feeling empathy for your baby's brain and what they are going through. Only when we face up to children's pain can we empathise with it and repair it. If mothers do have to work, they should recognise the signs of distress in their children and work out ways to be as present as possible when they are there.

Empathy should develop in the first three years in the baby's brain. Attachment disorders in early childhood are impacting mental health in later life. Sensitive babies, with a short allele on the serotonin receptor, are more prone to anxiety issues. They may be harder to soothe and seem distressed by sound, light and other stimuli. But good quality emotional nurturing can neutralise that gene. [See p6 for further details].


## **Responses to audience questions**

Siblings play an important role in personal development. They help you learn to resolve conflicts and play in a different way. Fathers are critical but aren't the same as mothers. Fathers don't tend to turn into the pain, they turn away from it. They get the baby up and functioning again. Mothers instinctively lean in. Fathers can do it but they generally have to be taught.

## **Antonella Gambotto-Burke**

*The social cost of sidelining intimacy*

Intimacy is the ability to sustain caring relationships and can be a cornerstone for leadership. Abraham Lincoln said that his early strong relationship with his mother gave him resilience. He said, 'All I am or hope to be, I owe to my mother'.

Attachment is very important. All of our physiology is designed to connect to others. Much of our brain is designed for picking up non-verbal cues and we have sensors in our skin which are designed to pick up touch. The relationship between a mother and a baby thrives on this sort of intimacy. 



*Erica speaking at the AGM*

# Post Natal Depression - how one mother coped

*Can loneliness cause Post Natal Depression? Is that why so many mums head back to work? MAHM member **Emily Tredget** has set up a way to connect with other mothers, called *MummyLinks*, as a way of helping.*

**B**efore I became a mum I was happy, energetic and optimistic. But when I became a mum that all changed. I struggled for two years with awful Post-Natal Depression and Anxiety. For me this meant turning into a nervous wreck – too scared to have coffee with my best friends at times. I was scared to be left on my own with my son for fear of being taken ill and not being able to look after him. I often cancelled plans with friends last minute as the panic set in, or didn't make plans at all for fear of letting someone down. I cried all the time, and couldn't see the end of the darkness.

I tried everything: eating better, exercising, (trying to get!) more sleep. But nothing worked. So even though I wanted to be a stay at home mum, and the thought of commuting filled me with dread, I tried to go back to work, hoping that this might "fix" me. And in a way it did. I suddenly had eight or more hours a day with adult conversation, brain stimulation and no worries about whether I was being a good mother.

This is the story for many mums with PND; trying to find a way not to be around their baby. It's not the experience of all – some actually just want to be left with their baby and to see nobody else, and others are somewhere in between. But for me, and many of the mums who I come into contact through my MummyLinks project, trying to get away is attractive.

The problem is, this doesn't really solve the problem – or it didn't in my case. It meant I was spending less time with my son, so the bonding process, which unfortunately hadn't yet kicked in, wasn't getting any better. I forgot I was a mum whilst at work, but that made coming home even more of a shock. And in the end it actually made me feel more guilty.

As I started to feel better I felt bad for my son that I'd missed so many days, months, years of his life. Not physically – but emotionally and mentally. There are large chunks I simply can't remember – I presume my brain has just blocked them out as too traumatic. They weren't traumatic to him or wouldn't be to any "normal" mum, but for me, for some reason, just being a mum was traumatic. I have since found out that actually this experience isn't that abnormal. 1 in 3 mums struggle with mental health post-natally, and 1 in 4 pre-natally.

This thought process effectively forced me back into being a SAHM. The guilt crept up, the anxiety and depression came back with a vengeance and I couldn't face the world once again. I was signed off sick from work, and eventually handed in my notice as I felt I was letting the company down.

But that was the best thing I could ever do. I went back to my GP – had more therapy (meds weren't for me, although I'd encourage other mums to go down that route if they can as it's



typically the quickest road to recovery, I've since found), spent more time with my son, and built that bond. Which now, I am glad to say, is stronger than ever.


But I haven't stopped there. Since getting better I've been on a mission to help mums struggling with PND and other mental health issues to know they are not alone, they are not awful, and they will get better.

I found out that loneliness can be a precursor to PND, but also that is one of the easier risk factors to mitigate. So I now spend all my time (when not looking after my 3 year old – hence it taking a long time to complete!) raising awareness of maternal mental health issues, breaking the stigma, and helping mums to beat loneliness so that they don't have to suffer in the same way as I did.

I was extremely lucky to have the support of family and friends around me, but for many mums this isn't the case. My aim is to start to provide that village around mums again so that whether they struggle with mental health or not, they have a support structure for those more tricky days. My aim is to make being a mum that bit easier and more enjoyable - and hopefully this will encourage more to stay at home as opposed to head back to work asap.

To kick off Maternal Mental Health week, which starts in the first week of May, I will be launching, for the second year running, an online campaign called #ShoutieSelfie. If you are keen to get involved then follow me on Instagram, Twitter or Facebook (@MummyLinksApp) and from the 30th April watch out for a picture of me shouting and then copy the wording and do your own! It's an awareness campaign - for mums who have suffered PND and those who have supported someone.

My main project is MummyLinks. It is a social project that helps mums (whether they struggle or not with mental health) to beat loneliness through safe and local playdates. It's currently a Facebook group, with a free app launching very soon. It's invitation only to keep it safe, and once mums are invited they can create a simple profile. They can then find playdates near to them, or create one themselves, and a notification is sent out to those within, say, three miles of the playdate location. It's all about getting out of the house, in the fresh air, and meeting people. No more collecting online friends and comparing ourselves to social media images.

I would love you to join – whether you would use MummyLinks, or are beyond that stage (it's for any mums but the current focus as it grows is mums on maternity leave) because being invitation only it's key that great mums like yourselves ask to join, and then go on to invite all their mum friends who may benefit. It's the only way the communities around the UK will build and support each other. Do head to [www.mummylinks.com](http://www.mummylinks.com) for more info and a link to the Facebook Group to join. It may take some time to be approved, but this is to keep mums as safe as possible! 

# Is the Government's Childcare Plan Working?



*The Government's primary aim is to increase GDP. The blunt tool they use is funding childcare in order to get more mothers working. But is the massive investment in childcare - £6bn - worth it? Does it make a difference to how many mothers work and how much they contribute to the nation's finances? Our former Chair considers why it is that more parents of young children are both working than ever before, and more children spend longer away from home in registered provision, but we seem to be getting poorer.*

## **I** f more mothers work, will the economy benefit?

What is the link between mothers working and a positive impact on the economy? Employment targets are focused very narrowly on one small group (ie mothers of pre-school children) but is employment of younger mothers at the expense of the many older women who report finding it hard to secure employment? Also large numbers of parents – including mothers - are already in employment: the upper threshold may already have been reached.

## **Why aren't mothers working?**

It's important to put childcare in context. The cost of registered childcare is not the only reason why mothers don't work, so it follows that more or cheaper childcare cannot 'fix' the problem of what politicians might call 'under-employment'. It's a combination of factors, many of which won't be influenced by policies, such as a mother needing to be home for another child, lack of extended family to help, or lack of suitable transport/few jobs. However to influence parental employment Government might seek to influence:

- The problem of a family-unfriendly workplace culture and poor management practices, poor part time opportunities and lack of flexibility /time off for parents.
- Lack of suitable jobs or high level of competition for term time jobs locally
- Skills / back to work training (free)/lifelong learning opportunities and support to access training online etc.
- Incentives for employers to take on older returners after they've been out of work caring for family.
- More social housing to provide stability and affordable rents
- Support for childcare that parents want - including more support for the parental care at key times (pre-school years and school holidays) and removing barriers for childminders to set up in family-type settings (higher funding rates per child so that the market is sustainable and to help parents with finances).

## **Are mothers only productive if they are paid to work?**

Unpaid work is estimated at around £343 billion by the ONS but currently not counted as part of GDP. When a parent cares, there's no-one 'working', but when a practitioner is employed, two people are 'working' – i) parent and ii) paid/registered practitioner!

Productivity is boosted when families have money to spend on goods and services, so it makes little sense to give so little support to families raising children and to restrict support only to childcare, when the other costs of raising children (food, clothing, other expenses etc) are considerable. A fairer family tax system and better income support would boost spending power. What happens to the economy when the support team is no longer available? Economies are propped

up by 24/7 'human work' behind the scenes. There's now too little time to support a 'productive' workforce and to support dependents. Other contributions are consequently neglected (which could end up costing billions - eg elderly patients who need to stay on in hospital because families are unavailable to help, costing the NHS... ). The Government needs to take an inter-generational life cycle approach. Not everyone can be in paid work all of the time. Plus we have an ageing population to support with companionship, respect and care.

## **Is full employment of mothers the best way to increase productivity of the whole workforce?**

There are rising costs associated with mental health problems and family breakdown. A fulfilling life with good health means a productive workforce - conversely a long hours culture, long commutes, no time to chat with teenagers or engage in life outside work (especially if employment is low paid) seems to correlate with a worrying increase in family breakdown in recent years. We appear to be heading towards a perfect storm of time, relational and financial poverty- and it's worth remembering that we all expect family to 'be there' when things are difficult.

## **Should childcare subsidies be payable based on individual income rather than family income?**

Childcare subsidies should focus on households who need financial assistance the most – for example those on low pay or parents without family support. Instead, the better off or highest dual earners will actually benefit the most - and some low earners might struggle to qualify for any help at all with costs. One earner couples receive little support and are also penalised in tax right across the income distribution. Subsidising higher paid dual income earners, on around £100,000, doesn't make mothers more likely to work, it just reduces the cost of childcare which they would probably have paid for anyway. Research shows that subsidising childcare makes little difference overall to how many mothers are in work.

## **If both parents work, does this reflect an improvement in the family's circumstances?**

Productivity goes up when things go wrong – when a window is broken a new one is bought and someone paid to fix it. A second adult moving into employment does not necessarily represent a net positive economic /social benefit – eg mothers moving into more work might be due to family breakdown, housing costs, inability to or decision not to have a second child, partner losing his job/or changes to income support when on low pay/partner's health etc - in other word negative personal or economic pressures could be associated with more 'second adult' labour market participation.

## **Conclusion**

It's worrying that the main driver is higher participation in the workforce by women with young children – with no gaps until retirement. There's no scrutiny of whether this strategy has a positive social and economic impact. Ever-longer hours in work over a lifetime, the daily commute and so many persistently low paid jobs – with little time to care– hardly sounds like 'equality' for most, but it's somehow dressed up as 'progress' which is probably not how it seems to the average family. <sup>M</sup>

# Why Boys Need Extra Care



**W**hy is it that more boys than girls exhibit ‘conduct disorders’ - behavioural problems where a child is more aggressive, antisocial or defiant than is appropriate for their age? Why do so many more boys than girls have attention deficit hyperactivity disorder (ADHD)? Could the early care boys receive tell us anything about the current rise in gangs and knife crime in London?

In putting this article together I am indebted to the brilliant charity What About the Children? for highlighting this research by Allan Schore published in 2017, entitled, ‘All our sons: The developmental neurobiology and neuroendocrinology of boys at risk’.

Schore identified a range of factors which mean that if boys don’t receive ongoing, responsive, loving care from their mothers, either because their mothers don’t or can’t provide this quality of care, or because they are separated from their mothers in a childcare setting, their development will suffer and they are likely to struggle with behavioural and mental health problems.

## **Why boys’ brains are more susceptible to stress**

The principal culprit is that there are significant surges in testosterone in baby boys and puberty. The right side of boys’ brains develops more slowly than girls’ from before birth until

age three, but testosterone surges slows them down further. They have an effect primarily on the right side of the brain, which is responsible for coping with stresses and challenges and for emotions.

This slower development means that boys’ brains are exposed to any risks for longer while the brain is forming. During testosterone surges boys are much more susceptible to cortisol, which is a hormone released by stress.

A newborn male separated from his mother will exhibit sky-high levels of cortisol, which is a hormone released by stress and which can damage brain development. Regular separation from his mother can lead to hyperactive behaviour and changes to the parts of the brain (the pre-fronto limbic pathways) which are related to mental disorders if they don’t function as they should. Damage to these areas can affect an individual’s emotional responsiveness and ability to cope with stress later in life.

Boys are at a disadvantage relative to girls even from before birth. The amygdala, which is larger in boys than in girls, is the part of the brain which processes our response to anything which might cause fear, and controls how we react to events that we might see as potentially dangerous or threatening. If the environment in the womb is stressful, due to the mother’s

# Why Boys Need Extra Care - contd...

stress, the amygdala will develop more slowly. An immature amygdala at birth is linked to poor eye contact, with eye contact being a key component of how we build relationships. The amygdala relies on positive communication with the mother, which might suffer if she has post-partum depression, and continues to develop after birth, particularly in two to three month olds.

## The importance of a good relationship with the mother

Being well cared for by his mother and forming a strong attachment to her develops the right side of the brain. Well cared for boys therefore develop a healthy ability to cope with stress. However, if there are any problems in his relationship with his mother, or he is separated from her, the right side of the brain, the part which should cope with stress, won't develop as well and he will find the stress on his immature brain effectively unbearable. In addition, it is highly stressful for mothers to have to place their sons in childcare, which can lead to conflicting emotions, just at the time when a secure relationship with their sons is essential.

## Why boys struggle more in low-quality childcare

An additional factor to consider is that not only is separation from the mother very stressful, but, if childcare arrangements are low-quality, this compounds the stress the boy suffers at a time when their slowly-developing brains already can't cope with stress very well. This conclusion was highlighted in a report which focussed on the economics of childcare, 'Gender differences in the benefits of an influential early childhood program' by Garcia, Heckman and Ziff, 2017. This report was designed to encourage provision of free childcare for all in New York, but the authors concluded 'the children would have been better off staying at home', even when the boys come from a disadvantaged background, rather than subject them to poor quality childcare. They write this as though they can't quite believe it themselves.

This study is also interesting because, pursuing the idea of the value of high-quality childcare versus the danger of low-quality childcare, they found that boys in high-quality childcare were more likely to be employed, were likely to earn more and were 'less likely to commit costly crimes'. This report links with a previous one by Heckman which identified a 13.7% annual return on investment in early-childhood programmes for disadvantaged children. The punchline comes with the comment that these (very expensive) programmes 'basically do what a good middle-class loving mother would do', which implies that a good mother will enable her son to be more likely to be employed and less likely to commit crime.

The idea behind this particular report is that where mothers fail, the state could step in, but it will have to be very high-quality care provision (viz, expensive). Other studies have shown that it is more effective (and cheaper and much better for children) to support mothers to be good mothers so that

children can be cared for in a home environment and not subjected, in an already fragile state, to separation from the mother and stressful childcare arrangements.

This conclusion is not new. Back in 1986 a study by Howes and Olenick - Family and Child Care Influences on Toddler's Compliance - not only identified gender differences, and that boys suffered more in poor quality childcare, but they linked that negative outcome to the quality of compliance with adults and self-regulation the children showed, ie how likely they were to obey adults and manage their own strong emotions. So poor quality childcare has been associated with lower ability to manage stress and emotions, for over 30 years, with the effects felt most keenly by boys.


## The value of emotional health

Returning to Schore, he identifies the issue which is behind all promotion of external childcare today, namely that there is too much focus on the left-brain language skills and motor skills, which do sometimes improve in external childcare (although the effects dissipate by age 7), and not enough on the early development of the brain systems responsible for how we manage our emotions, how we interact with others and how we cope with stress. According to a study on 'What predicts a successful life?', Vernoit et al show that the most powerful predictor of adult life-satisfaction is the child's emotional health, followed by the child's behaviour. The least powerful predictor is the child's intellectual development. And family income only accounts for a tiny variation in life-satisfaction (0.5%); mental and physical health are much more important.

## Conclusion

The positive news is that loving, responsive care from their mother in a home environment is what all boys and girls need, and will provide them with everything they need to develop well. The bad news is that boys and girls will probably both struggle if they don't receive this. Girls are not immune to poor attachment to and separation from their mother. High levels of cortisol in young girls are strongly linked to anxiety and depression when they reach adolescence. For boys, high levels of cortisol in early childhood are strongly linked to aggression, anger, defiant behaviour around adults, autism and ADHD.

The effect of stress on boys' testosterone-inhibited, slowly developing brain is devastating. By the age of 7 to 12 girls may be as much as 2 years ahead in the development of social sensitivity, and this continues into adolescence, although boys can catch up in adulthood.

If you take this research alongside the research on differential susceptibility, published here on p 7 & 8, it is blindingly obvious that parents have to be able to give each of their children the tailored, high-quality care that they need. 



Claire Paye

# Mothering & Mental Health in Children



*One of the ways that MAHM seeks to enlighten their members is through keeping them up to date with the latest scientific research on the impact of how children are raised. In this article, Claire Paye goes into the real nitty gritty of how it is that the quality of mothering makes a massive difference to some children's mental health.*

**T**he way a child is cared for by their mother, or the amount of time spent away from the home in external childcare, and the quality of that childcare, can have a direct impact on a child's mental health in the present and throughout their lives. However, most parents and government policymakers don't believe this is true, because they don't understand the link between the genes we're born with and the way we are cared for when we are very young, which is known as the gene by environment (GxE) impact. In addition, people still associate mental health problems with personality disorders and don't recognise that depression, anxiety and aggression are mental health issues, and self-harming, over-reliance on superficial affirmation from social media or risky sexual behaviour can be signs of poor mental health. It is much easier just to blame social media and 'pressure to succeed', which certainly play their part, than suggest that how a child has been cared for can (although not always) make the difference between good and poor mental health.

The research cited here is quite in depth and is a relatively new field. However, I believe it is fundamental to take it into account when combatting the attitude that says it doesn't matter whether a child is cared for at home by his or her mother or is in external childcare for hours each day.

## **Differential susceptibility: for better or for worse**

Scientific research is developing a fascinating thesis which suggests that, for some children, there is a gene variation which means that they are much more affected by their environment than others are. These children are much more likely than others to react badly to being in a stressful environment, either through poor mothering or being separated from their mothers. However, they are also much more likely to develop very healthy mental health if they are well cared for by their mothers in a secure, loving home.

The research is highlighting something called 'differential susceptibility' and the outcome of this gene variation is a 'for better or for worse' outcome, ie that children with this gene variation will really benefit from good mothering, with the result that the gene-based increased likelihood they have of developing mental health problems is neutralised and transformed by being cared for by a responsive, attuned, loving mother. They will actually develop better mental health than their peers and thrive in life. Unfortunately, on the flip side, if children with this gene variation don't experience good mothering, they are more likely to have a 'worse' outcome than others and struggle with anxiety, aggression, depression, or other mental health problems.

## **The short allele on the gene 5-HTTLPR**

The gene 5-HTTLPR is behind this difference in outcomes. This gene is involved with serotonin take up. Serotonin is linked to the regulation of mood, emotions, appetite, memory, sleep and learning. It is one of the most important

neurotransmitters (a chemical which helps brain cells communicate with each other). There is a short version (allele) and a long version of this gene. If you have a short allele, your body has a lower serotonin uptake. Those with the short version have been found to be less resilient to stress and thus more prone to depression. The long version (allele) boosts resilience.

## **Genes and quality of mothering linked to externalizing behaviour**

It is not only a variation of the gene 5-HTTLPR which carries risk. A similar differential susceptibility has been found with the dopamine receptor D4 gene. The 7-repeat variation (DRD4 7R) of this gene has been linked to ADHD, high novelty-seeking behaviour and other problem behaviour. Children with the 7-repeat DRD4 allele displayed the most externalizing behaviour of all children when mothers were judged insensitive, yet they also manifested the least externalizing behaviour when mothers were highly sensitive. In other words, ironically, the more mothers relied on punishments and threats to try to make their children obey them, the less likely the children were to behave well.

## **Susceptible, not difficult, children**

Redefining some so-called "vulnerable" children as children highly susceptible to the benefits of supportive rearing environments as well as the costs of poor ones is vital. Viewing such children as having substantial developmental plasticity instead of simply being "difficult" may create hope for the many parents who often feel overwhelmed when dealing with such infants and toddlers and strongly suggests that these children need to be raised in a positive home environment. So, rather than extracting these children from their home, their mothers need help to be sensitive and provide a positive home environment. The return on a heavy investment in sensitive, authoritative parenting may be substantial.

## **The Research Behind the Findings**

[Differential susceptibility to the environment: a neurodevelopmental theory. Ellis, Belsky, van IJzendoorn et al, 2011](#)

This difference in gene length lies behind what is known as 'differential susceptibility'. Basically, this means that people with short alleles are more susceptible than others to differences in environment. However, what is really interesting is that this happens on a 'for better or for worse' basis. So those with short alleles will experience 'good' outcomes in positive environments, defined by qualities such as secure attachment, happiness, high self-esteem, emotion regulation. But they will also experience 'bad' outcomes in negative environments, such as insecure attachment, behavioural problems, depression and so on.

Differential susceptibility moderates the effects of environmental exposures on developmental and life outcomes. Ultimately, this means that the development of some individuals, more than others, will be influenced by their experiences and environments (even if these were exactly the same). Children with short alleles might be expected to



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encounter poorer health in high-stress contexts and unusually positive health outcomes in low-stress contexts. One plausible explanation for such a pattern of findings is the possibility that reactive children are more sensitive or more susceptible to the characteristics of the social environment. Children with a heightened sensitivity to the environment might then be expected to experience unusually poor outcomes in high-stress, unsupportive social conditions. The same children might flourish, on the other hand, under low-stress, nurturing, and predictable conditions.

[Children's differential susceptibility to effects of parenting. Michael Pluess and Jay Belsky, Institute for the Study of Children, Jan 2010](#)


This study followed 16-19 month old boys with 'difficult temperaments' – identified as having the 'susceptibility factor'. When reared by highly sensitive mothers who only infrequently used negative control, they showed the smallest increase in the externalising problems score. However they showed the largest increase when highly insensitive mothers relied heavily on negative control. But similarly 'difficult' children behaved much better when their mothers were sensitive to their needs.

Many research groups have been able to replicate Caspi et al.'s (2003) findings of increased vulnerability to depression in response to stressful life events for individuals with one or more copies of the short allele.

However, what is really significant in these studies is that those carrying short alleles did not just function most poorly when exposed to many stressors, but best – showing least problems – when encountering few or none. Compared to those with long alleles, individuals with short alleles had more and less persistent ADHD, depending on whether or not, respectively, they experienced an adverse early environment.

[Serotonin transporter gene \(SLC6A4\) polymorphism and susceptibility to a home-visiting maternal-infant attachment intervention delivered by community health workers in South Africa: Reanalysis of a randomized controlled trial. Morgan et al, 2017](#)

Data from a limited study on a home-visiting programme in Khayelitsha, a township in South Africa, designed to improve attachment between mothers and their babies, showed a significant effect from the home-visiting programme on those with a short allele, and almost no difference in those with a long allele. Children with a short allele showed a two and a half times improvement in attachment as a result of the intervention by community health workers, but those with a long allele showed almost no change.

What is particularly interesting about this is that if the long and short allele differences were not taken into account, the average across the two groups would lead to a negligible outcome, so it would look as though this intervention had made no difference. Considering other research on boys (see article in this newsletter p6&7), it would be very interesting to separate out the group by boys and girls as well as by short and long alleles. Would boys with a short allele react even more significantly? 

Claire Paye

## Your Letters



*We love to hear from our members (or future members). Please feel free to write to us about your experiences or reflections at [info@mothersathomematter.co.uk](mailto:info@mothersathomematter.co.uk)*

Hello,

I just wanted to get in touch because I was deeply affected by your manifesto and your whole campaign. I thought I was alone in believing so strongly that being a mother is a full-time job and is seriously undervalued in today's world.

My husband and I are expecting our first little one this summer. We have wanted children longer than we realised, however, I had come to realise that the only reason stopping us was that I thought we both had to be in the perfect financial situation in order to do so. I feel exhausted by the large amount of courses and career opportunities I looked into and even spent money on and trained in (but rarely completed) in order to earn a good wage when deep down, all I want to do is be there for my children. As the daughter of a housewife (which I aspire to be and see as a very positive identity), I have felt the amazing benefits of the loving, close relationship with my mother and respect for my parents which I only want to pass onto my unborn son and any other future children we hope to have.

I would have never called myself political, however, as my first pregnancy continues, my hidden passion for this topic only grows stronger, as I fear that I will eventually be forced back to an unfulfilling job, leaving my son in the care of strangers (as our parents are unable to babysit) and losing that confidence and empowerment I seek when I become a mother whose full responsibility is her child.

My husband and I are not on great money. I am a part-time cleaner, leaving for maternity in 2 months and my husband works in retail, struggling to get in 30 hours a week; he's also an aspiring entrepreneur and art curator, which will eventually bring in some extra, but when that will be is unknown.

I look forward to being a member and joining online support groups etc. but if there is any other way I can support you, I would absolutely love to jump on board!

Keep up the amazing work and I am so happy that I came across your website today!

Thank you,

Heather Judd

<https://heatherblogz.wordpress.com/> 



# Rebellion & Scandal – being a mother at home in Denmark

*‘It’s amazing that perhaps my most scandalous and rebellious act in my life has been to be a stay at home mother!’ In this amazing article MAHM member Sarah (not her real name) reflects on the battles she has fought to be able to care for her daughter herself in Denmark.*

In 2010 at 10pm exactly, a moment that I had anticipated for as long as I can remember finally happened. I gave birth to a precious baby girl. To my own surprise it was a natural and straightforward birth. I had married a viking three years previous. We had decided to raise our family in Copenhagen. Most of my husband’s family lived close to the city and since I had worked a year previous to the birth I could take one year of almost full paid maternity leave shared with my husband.

Immediately after the birth we were sent from the hospital and booked ourselves for one week into the ‘Barsel Hotel’ (Maternity hotel) where we could receive daily checks and gain confidence as first time parents. It was reassuring but I discovered quite soon that the care was wanting. There was absolutely no question that it was expected I breastfeed and yet in my experience there was no appropriate support available when things did not go well with it. My baby and I battled on a bit too much trying to make that work. As my daughter cried in hunger and I cried in pain a pattern of severe sleep deprivation began and I was prescribed pain medications that I might try to endure feeding sessions.

When you have a new baby in Denmark there is the opportunity to join a ‘mothers group’ with other women in your area who have had a baby around the same time. The groups take turns meeting in one another’s homes or a cafe or park once a week, chatting about life and children over fresh baked bread or cake. I struggled to meet with my group due to the nursing issues I was enduring and now that my husband was returning to work I was aware that I did not have much support around me. After weeks of tears and a biopsy later I learned that I had an abscess in one nipple which eventually resulted in my going full time expressing milk and ended up in formula feeding. For a place that puts so much emphasis on breast feeding I found little adequate support for it.

At the time this was happening I recall in the local news there was a report on which cafes and restaurants in the city did not allow breastfeeding or children even. This took me by surprise for what was recognised to be a very ‘family friendly’ culture.

At my daughter’s one year visit the healthcare visitor asked what my plans were. I told her my desire to stay home with my daughter for at least one more year. ‘Why would you want to do that?!’ She exclaimed. ‘How will you manage!?’ ‘What about the child’s social needs?’ I found myself trying to explain my decision to her and as I did so, she became increasingly agitated, her voice rising. I became aware that this was not about me. I asked if she had any children. She had a 7 month old in daycare.

I had no doubt what I desired for myself and my baby. I wanted my child to have a happy, calm start to life in the comfort of the only person she knew very closely. I also wanted to enjoy my beautiful child and see her first steps myself, share in her many firsts, catch her expressions and be there to comfort her when she scraped her knees or was confused by her emotions. I knew nobody could love my daughter the way I did or find delight in



her the way that I do. I resisted the pressure to sign her up on the waiting list for daycare, which I was advised to do before her seventh month.

With my extended family continually harassing me about when and where I was signing her up to ‘vuggestue’ (nursery), I decided to be open minded about it even though the idea did not resonate with me. We eventually signed her up on a waiting list and went to visit the institution together when she was offered a spot. It was a brand new institution close to us, an integrated unit with a department for both the very young (babies and toddlers) and the older group, age 2.5 years up to 6 years. This particular school houses 137 children. We had heard from several in our neighbourhood that it was a great place that their children loved. Long story short, we took a visit and were not at all impressed. We decided that we would find a way to make it work that she would be able to stay at home with me.

I was able to finance staying home with my daughter by becoming a private daycarer employed by the kommune (council), caring for my daughter and one other child until they were old enough for Børnhave (pre school - 34 months old). Children can be cared for by a private daycarer while on a waiting list to be accepted into a daycare of the parent’s choice, as there are often more children than institutional daycare spaces in each region. I found the daycares with the longest waiting lists and added our daughter’s name to them and enrolled as private daycarer for her and another child, whose mother found my advert online.

Daycare in Denmark is already highly subsidised. It is not ‘paid for by the government’ or ‘for free’ of course, as everyone pays into it already via tax. The incentive to take

## Rebellion & Scandal, contd...

advantage of the system is that you have already contributed and invested highly into it (whether or not you intend to use it) and would be shooting yourself in the foot financially not to pay the little portion more to allow both parents to have a paying career. It is quite a bind.

The system requires compliance on a social level for it to work. Many mothers have said to me how they would have liked to have been able to afford to stay home longer with their children. The wage as a private daycarer was reasonable when considering also the special tax rebate given on it too. However it would have paid only for some of the rent for our 112m2 apartment. We were fortunate that we could afford for me to stay at home because my husband is a 'high earner' here. This also means though that he is in the top tax bracket: more than half of his wage is deducted in tax.

In Denmark we are reminded each new year in the Queen's speech that there is no 'you and I' in Denmark, only 'we'. And that the mission in Denmark is focused on Industry and every person should be industriously engaged. The 'cost' of not subscribing to this system has been more than financial for me. As a private daycarer for my own child I should first pay the kommune for her daycare spot (me!) and then the kommune would pay me the amount returned that I would receive as a contribution had she been in a daycare institution. Holidays were interesting as I would pay my employer for my daycare spot (with myself) and not get paid from them, but apply instead for my 'holiday money' to be paid to me.

We received monthly visits from my employer. On her checklist were window and furniture safety and kitchen hygiene. I was to provide organic bread, milk, fruit and vegetables daily. She would observe me with the children and offer advice as to their developmental stages and write a report on her visit. I received a tax rebate and 1.5 nappies per day per child while working as a dagplejer (child minder). I had no idea how isolated we would be as there were so few other mothers close to me staying at home with their small children.

I had stepped completely out of the cultural norm. Generally speaking, the only people who looked after their own children were immigrants who are perceived to have difficulty finding other work and get a bad rap for not giving their children a full introduction into Danish language through subscription to institutional care. We went to parks and rarely were there any other people in them. Occasionally we would see a line of children marching in twos led by daycare leaders as they passed us.

I felt socially ostracised as a mother at home. One day while shopping with the children (not another child to be seen in the shop during day time) a man started shouting at me that I was crazy and that the children should not be in the shop - that they should be in daycare.

I felt anxious when we went shopping for a while after that. Another day while visiting a park out of our neighbourhood a grandmother waiting to collect her grandchild from daycare started to chat to me. When she saw that I spoke English,


she was very interested in having a conversation with me (a chance to show off her English). She asked where I was from and what I did for work. I explained that my husband and I had chosen to have me be home with our daughter in her earliest years. The woman, who had been very chatty up until then, turned her back on me and walked away without saying anything more.

The sense of isolation, loneliness and even hostility towards mothers keeping their children home was intense to me. The mothers in my mother group had returned to work and had little time for socialising. I also wondered if the ones who had all returned to work continued to meet without me, that I was no longer relational enough for the group.

My daughter, now 34 months old, received a letter in the post inviting her to børnhave (pre-school). I was now feeling ready for a break from the pressure of being an isolated home parent - but was she ready to be away from me for hours at a time? We visited a small privately run institution and decided that I would continue to stay home so that our daughter would have short days of 2-3 hours maximum at børnhave.

This was unheard of at the børnhave and not welcomed.

School entry age in Denmark is six years old. The majority of children here go to after school club until their parents can collect them when they are finished work. After (and before) school club costs vary from area to area. It is around 1000 kr full price (around 85 GBP) per month where we are for the first child, there is a discount for subsequent children. If you work in private daycare your school age children are automatically put on the waiting list for a place at after school club by the commune because you are not permitted to have other children in your care than those that you are employed to care for in the paid hours of work, even if they are your own children.

My daughter was happy to start school and has glowing reports on every area. She is a smart child, emotionally intelligent, with a good focus and attention span. When others heard my plans to be home with her in her first years I was told that she would suffer socially and emotionally. Many people said that she would struggle to learn the Danish language. On entry to primary school every child is tested on their language abilities to be sure they have good enough comprehension of the Danish language to follow the lessons. The examiner who has conducted the test over the region for years never before had seen a child get such a high score even those children with two Danish speaking parents. She got 100% correct answers in the test. 

*If you have a story you would like to share about your experience of being at home and any struggles you have faced, in the UK or elsewhere, please email the editor on media-claire@mothersathomematter.co.uk. I'm hoping that Sarah will continue her story in the next newsletter- there is more to tell!*

“I felt socially ostracised as a mother at home”

# NEW MAHM Mothers Group!



**K**atharine Boddy, a former primary school teacher, a mother of four and a long-term meditator, invites you to join her for an online mothers group.

Connect with other SAHMs, nourish your mind and heart and get inspired! The group will look at the key qualities of a mother from many angles. Through open dialogue, mothers will understand better the importance of their role for themselves, their family and their community, and also develop greater resilience to juggle the many demands of motherhood. The group will be informal and flexible, so if you need to breastfeed or to take a toddler to the bathroom, that is not a problem!

Course content includes:

- The nature of love
- The power of silence - and how to find it
- Resilience - managing your energy
- Purpose - the role of a mother
- Nourishment, not just nutrition

Interested? Here are the details:

**When?** Fridays 10am - 11am in term time. 10 sessions per term, starting on 20th April 2018

**Where?** In your own home via the Zoom conferencing app from your tablet or computer.

**How much?** £15 per term for non members, £10 for members paid by PayPal. All proceeds will go to MAHM.

**Who?** Open to all mothers. Only 10 places available.

If you'd like to know more, or to book your place, contact Katharine on [katharineboddy@gmail.com](mailto:katharineboddy@gmail.com)

## NEW DATA PROTECTION POLICY

Under the new General Data Protection Regulation (GDPR), we need to be confident that you have given Mothers at Home Matter your consent for us to contact you by email and to send you this newsletter. And we have to let you know how we use your details. The only time anyone outside MAHM sees your details is when we give them to the printer, in order to post this newsletter to you, or to someone who organises the mail merge for emails. They are not allowed to use this information for their own purposes. We *never* sell your details.

Being a member of Mothers at Home Matter means that you receive biannual newsletters and very occasional email updates from us, including reminders about our Annual Meeting. You can opt out of receiving the newsletter and/or emails by emailing [info@mothersathomematter.co.uk](mailto:info@mothersathomematter.co.uk) or writing to PO Box 43690, London, SE22 9WN. You can also contact us at any time to ask about the information we hold on you – which is usually just your address, which you provided when you became a member.

Thank you to those of you who have replied to our recent email asking you to confirm that you would like to receive newsletters and emails from us. If you didn't receive an email, dated 5 April, and would like to receive emails from us, please send us your email address.

Please see Data Protection on our website for further details about our policy.

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Sarah Douglas-Pennant

### Honorary Vice President

Marie Peacock

### Chair

Anne Fennell

[chairmothersathomematter@gmail.com](mailto:chairmothersathomematter@gmail.com)

07957 232504

### Vice Chair

Claire Paye

[media-claire@mothersathomematter.co.uk](mailto:media-claire@mothersathomematter.co.uk)

07972 727544

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[secretary@mothersathomematter.co.uk](mailto:secretary@mothersathomematter.co.uk)

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Katharine Boddy

[secretary@mothersathomematter.co.uk](mailto:secretary@mothersathomematter.co.uk)

### Membership Secretary

Sine Pickles

[sine.pickles@btinternet.com](mailto:sine.pickles@btinternet.com)

### Policy Research Officer

Alexandra McVicar-Payling

### Committee Members

Esther Peacock, Zoe Gilbey, Kerry Hedley,

Maro Iordanou, Citra Abbott

### Media Enquiries

Claire Paye - 07972 727544

[media-claire@mothersathomematter.co.uk](mailto:media-claire@mothersathomematter.co.uk)

Lynne Burnham - 07753 803915

[secretary@mothersathomematter.co.uk](mailto:secretary@mothersathomematter.co.uk)

Anne Fennell - 07957 232504

### Newsletter

#### Newsletter Editor

Claire Paye

[media-claire@mothersathomematter.co.uk](mailto:media-claire@mothersathomematter.co.uk)

#### Newsletter Design Editor

Poppy Pickles

[poppickles@hotmail.com](mailto:poppickles@hotmail.com)

