

Working in partnership with Southwark & Lambeth Council







Contents

About this document			
Executive summary			
1. 1.1 1.2 1.3 1.4	The Knee High Project Project overview Courage and imagination The national picture The picture in Southwark and Lambeth	{ 10 12 14	
2. 2.1 2.2 2.2.1 2.2.2 2.2.3 2.3	Opportunities for design Research summary The design opportunities Leaving the house Day-to-day play Parents are people Design principles	11 19 24 20 30 34 38	
3.1 3.2 3.3 3.4	Our approach Research and engagement aims Working together Overview of research and engagement activities Secondary research	41 4 42 40 41	
3.5 3.6 3.7 3.8 3.9 3.10	Inviting participation In-depth research: Ethnography Community researchers Interviewing and shadowing professionals Child-led research Online engagement tools	49 54 56 58 60 62	
4. 4.1 4.2 4.3	Understanding the research Analysing the insights Testing the findings Creating design opportunities	64 66 68	
5.	Thank you	70	
6.	Lessons learnt and recommendations	72	
Appendices 1. Example Challenge documentation			
2. 3. 4. 5. 6. 7. 8. 9. 10.	Evaluation framework for design opportunity areas Phase One aims Phase One evaluation framework Advisory Board members list Safeguarding and data protection policy Community engagement materials Ethnographic research tools Community researcher tools In-depth interview framework and tools Child-led research tools	79 80 82 83 84 85 86 87 89	
References			



About this document

This document shares the research and engagement approach taken throughout *The Knee High Project*. It also summarises the research findings and outlines areas of opportunity for improving the health and wellbeing of children in their early years.

We hope it starts to provoke the question; what could we do **now** to really make a difference?

Executive summary

The early years of a child's life are crucial in establishing their future health and wellbeing. During the first five years, including the nine months of pregnancy, a child develops the foundations for virtually every aspect of their emotional, social, and intellectual development. There is substantial evidence showing that this early development is strongly associated with later educational success, employment, and better health and wellbeing¹. There is also strong evidence to show that the inequalities between children's development when they start school, can make a lasting impact on the rest of their adult lives. In Southwark and Lambeth the associated risk of rising health inequalities for children in their early years is high.

The importance of early intervention and its comparative benefits and cost-savings are well understood, yet despite considerable investment and research into the area in recent years, the improvements that had been hoped for have not been achieved. We believe that by introducing more innovation, experimentation, and evaluation to the development of early interventions, new ideas will lead to transformative new approaches in tackling health inequalities for local children and their families.

It's time to take a fresh look at a familiar problem

There remains a strong political commitment to families and the early years. Successive governments have made considerable investments in new strategies that aim to support the development of young children and enhance the health and wellbeing of families as a whole. But with few strongly evidence-based solutions, Southwark and Lambeth, as with many other areas of the country, are not seeing the impact they would hope for.

More than one in four children live in poverty in England. In Southwark and Lambeth the statistic is an estimated one in three. Social determinants of health, such as employment, income, and housing, are significant issues within Southwark and Lambeth. With the reduced provision of preventative services, the rising cost of childcare, the changing structure of families and increasingly desperate communities, the need to act could not be more urgent.

In our research we have seen a strong culture of dependency between families and professional services. Families do not always feel confident, able, or willing to take responsibility for the health of themselves and their children. We also saw families consumed by the stresses and strains of day-to-day life, practically and emotionally unable to invest in their child's early development. We also met families with considerable levels of resilience, resourcefulness and aspiration, who were finding effective ways of supporting themselves and others to flourish.

With healthcare in the midst of a period of unprecedented change, the merging of public health directorates and Local Authorities, and with the establishment of local Health and Wellbeing Boards, there is widespread acceptance of the need to take a fresh approach to solving persistent challenges. The time to act is now.

Why design?

When design is used well, it can transform people's lives. Design can spot opportunities within a complex set of problems and it can keep the needs, aspirations and motivations of people at the heart of innovation. A design-led approach can also ensure that new ideas are tested quickly and iteratively in collaboration with the right people.

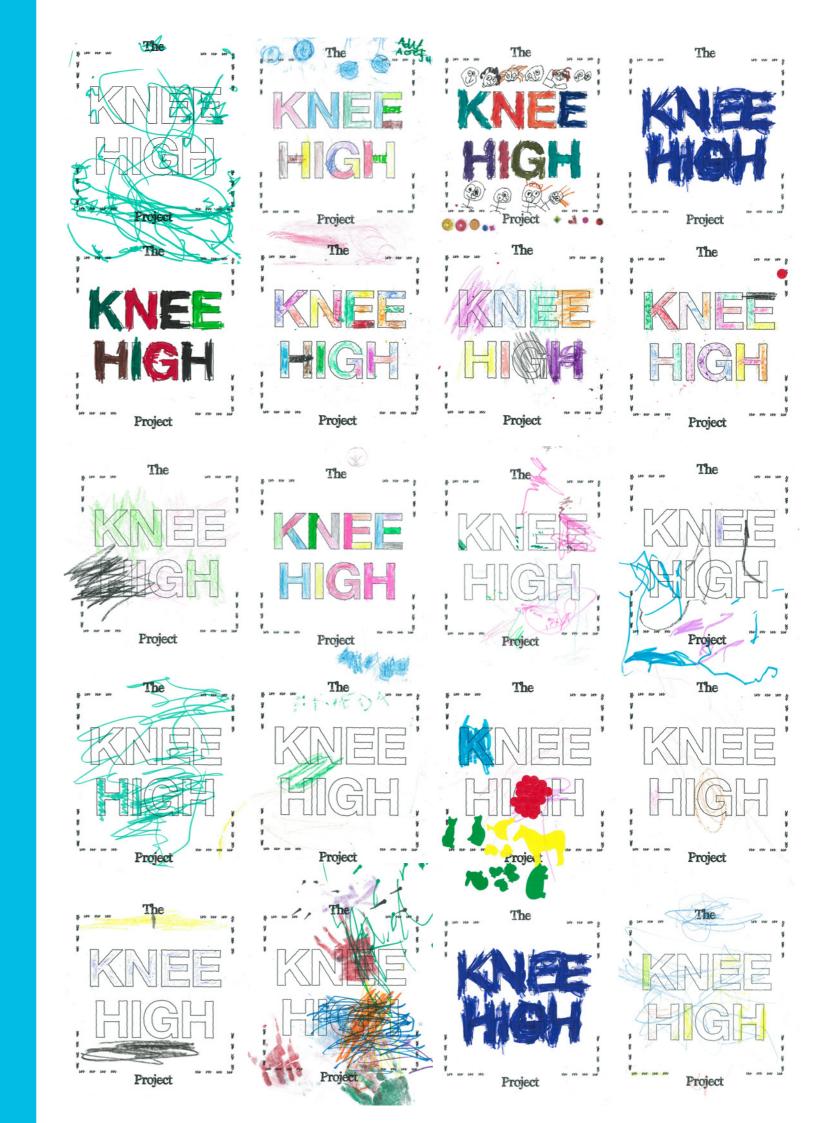
We believe that design and innovation have a significant role to play if the health and wellbeing of children in their early years is going to be radically improved.

The Knee High Project

The Design Council has partnered with Guy's and St Thomas' Charity and the London Boroughs of Southwark and Lambeth to explore how a more innovative, explorative and evaluative approach could be applied to the design of early interventions for children under five and their families. The ultimate aim of this partnership is to kick-start and support the growth of new products or services that can demonstrate an improvement in the health and wellbeing of local children.

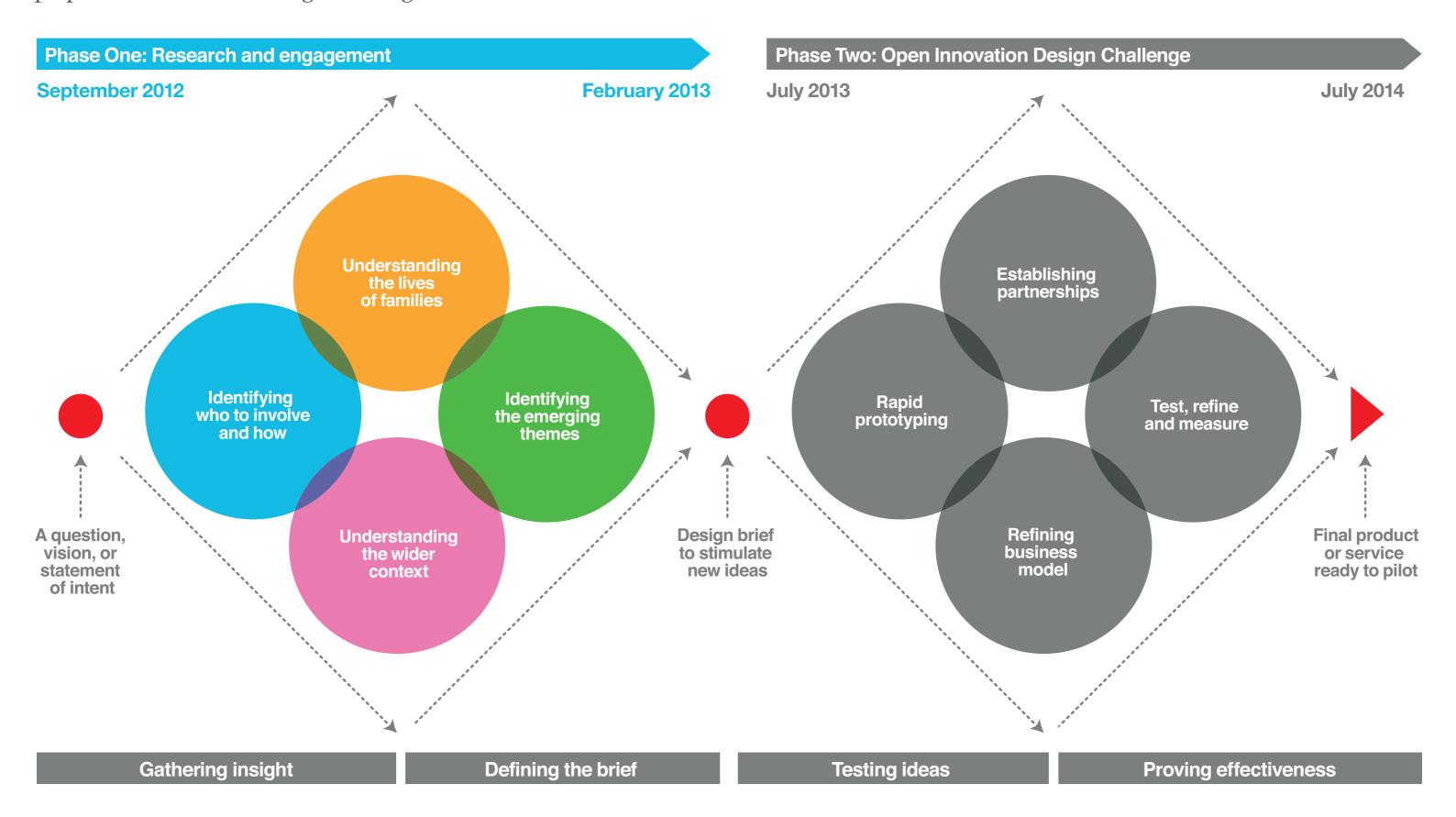
Since September 2012 this partnership has undertaken six months of in-depth research and engagement activity to identify where the greatest opportunities lie for design. We called this work *The Knee High Project*.

Using insights from *The Knee High Project*, design opportunities have been created to kick-start a new Open Innovation Design Challenge.



Project overview

This diagram shows the work completed so far and the proposed activities for a Design Challenge.



Courage and imagination

"The foundations for virtually every aspect of human development — physical, intellectual and emotional — are laid in early childhood. What happens during these early years has lifelong effects on many aspects of health and wellbeing — from obesity, heart disease and mental health, to educational achievement and economic status"

Sir Michael Marmot, 2010²

Evidence shows that the first five years of a child's life, including the nine months of pregnancy, are critical to cognitive development, non-cognitive development and later life outcomes. The social and emotional capabilities developed in early childhood enable children to make and sustain positive relationships, succeed at school and live a healthy and fulfilling life. The importance of early intervention strategies that ensure all children are given the best start in life is emphasised in recent influential reports, such The Marmot Review: Fair Society Healthy Lives³ and Graham Allen MP's Early intervention: The next steps⁴. As Graham Allen MP states: "The intellectual climate is now highly supportive of an Early Intervention approach and the political climate has shifted favourably in the last few years"5.

The quality of both human and environmental interactions very early in a child's life is proven to be a key influence for future health and wellbeing, and the design and delivery of such interactions are of paramount importance. Yet there remains a disjuncture between what we know about early years in theory, and the reality of delivering early years services in practice. Successive governments have made considerable investments in early intervention. But with few evidence-based solutions, Southwark and Lambeth, along with many other areas of the country, are not seeing the impact they would hope for. It is time for a new approach.

Evidence-based early interventions, unlike many interventions later in life, can offer significant social and economic return on investment: raising social capital across communities, improving international competitiveness, and increasing long-term Gross Domestic Product. Marmot states that there is an increasing appetite to invest in early intervention, as the longer-term cost savings are becoming more widely understood. "Early Intervention should, in principle, appeal both to private investors, seeking a worthwhile rate of return, and philanthropic investors seeking to put something back into society". There is a need to provide more opportunities for innovation, as well as to build a greater understanding of how to evidence impact.

In these times of economic constraint, existing systems and services may not be the best place for innovation to grow. Innovation requires space to take risks, ask new questions, and look beyond what is considered possible.

The Design Council has partnered with Guy's and St Thomas' Charity and the London Boroughs of Southwark and Lambeth to explore how innovation and design can play a role in developing new products or services that raise the health and wellbeing of local children and their families. We believe a design-led approach can connect the demand for innovation and cost saving, with a genuine understanding of people's needs, motivations and capabilities. Such an approach could create early interventions that make a lasting and effective difference to the health and wellbeing of local children, and society as a whole.

"The economic, as well as the health and wellbeing of today's children depends on us having the courage and imagination to rise to the challenge to do things differently, to put sustainability and wellbeing alongside economic growth and bring about a more equal and fair society."

Sir Michael Marmot

"What you see consistently are children at a very early age starting school already behind. That's why I've said that I'm going to put billions of dollars into early childhood education... Every dollar that we spend in early childhood education, we get \$10 back in reduced dropout rates, improved reading scores. That's the kind of commitment we have to make early on."

Barack Obama

The national picture

The picture of family life in the UK has changed dramatically over the last 40 years. Advancements in medicine and changing social 'norms' has led to increasing diversity in the structure of families. Additionally, the volatile employment market has seen a rise in fathers being the primary care giver and the prospect of shared paternity leave could enable parents to take more equal responsibility in caring for young children.

Family structures are changing

Just over one quarter (26%) of households with dependent children are single parent families, and this is projected to rise. Single parents are at a higher risk of depression⁸ than couples, and children from single parent families are more likely to suffer childhood mental illness⁹. Boys whose parents had seperated had the highest rate of childhood mental illness in 2004¹⁰.

Mental health of parents is a risk factor

An estimated 144,000 babies under 12 months old live with a parent who has a mental health condition. Half of all adult mental conditions begin by the age of 14, including anxiety, depression and schizophrenia¹¹.

Postnatal depression poses a risk to child development

Postnatal depression is recorded to affect up to 15% of new mothers, but health campaigners fear the figure may be twice as high¹², because many women are unaware or unwilling to admit that they are suffering. Research shows that untreated, severe or long term postnatal depression can impact on an infant's cognitive and language development, and increase the susceptibility to mental health problems during teenage years¹³.

Playtime is reducing

Playtime may have decreased by as much as 50% since the 1970s¹⁴. A survey commissioned by Play England found that 71% of adults played outside every day when they were children whereas only 21% of children do so today.

A survey of 2000 children¹⁵ undertaken in 2010 found that 64% of 8-12 year olds play outside less than once a week; the distance children stray from home on their own has decreased by 90% since the 70s; and 43% of adults think a child should not play outdoors unsupervised until the age of 14.

In 1999 the Mental Health Foundation reported that the increasingly limited amount of time children have to play outside, or to attend supervised play projects was a causative factor in the rise of mental ill health in young people¹⁶.

Poverty makes day-to-day life particularly hard

There are 3.6 million children living in poverty in the UK today, which equates to 27% of children, or more than one in four¹⁷.

Furthermore, there are 120,000 'troubled families'* that cost the UK state £9 billion per year¹⁸.

Housing quality and provision impacts upon family wellbeing

Over 1.7 million households are currently waiting for social housing. The social housing crisis means that many families are housed in hotels, bed and breakfasts and overcrowded accommodation. Being poorly or temporarily housed can affect both parent's and children's wellbeing.

Inequalities in early development have a clear impact on physical and emotional health, and cognitive, linguistic and social skills

The Marmot Review highlights a particularly striking finding that children with low cognitive scores at 22 months of age who grow up in a higher socioeconomic position improve their scores by the age of 10. Conversely, children with high scores at 22 months who grow up in a lower socioeconomic environment have lower scores by the age of 10¹⁹.

Socioeconomic status is also related to birth weight, levels of postnatal depression, reading hours, bed times and school readiness.

*Troubled families' is a term given to families who are experiencing multiple and complex problems, resulting in disproportionate state spending across social care, criminal justice, housing, health and education.

There are 3.6 million children iving in poverty in the UK today An estimated 144,000 babies under 12 months live with a parent who has a mental health problem An estimated one in three new mothers suffer from post natal depression - half of those suffering are not seeking support Playtime may have decreased by as much as 50% since the 1970s 43% of adults think a child should not play outdoors unsupervised until the age of 14

Just over one quarter of households with dependent children are single parent families

The picture in Southwark and Lambeth

The populations of Southwark and Lambeth represent enormous diversity in terms of ethnicity, age, culture, and socio-economics. Both Boroughs are densely populated – Lambeth is one of the most densely populated Boroughs in the country – and their populations are growing rapidly. The main ethnic groups in the Boroughs are White British, White European, Black African and Black Caribbean although many minority groups are present. Both Boroughs have large religious networks, with Christianity as the most prolific religion in both areas.

Southwark and Lambeth are two of inner London's largest Boroughs, spanning a huge geographic area which borders the river at one end and extends some seven miles south. Several distinctive neighbourhoods are recognised within each borough, which extend from central London through inner urban areas and into suburbs.

Young populations (in comparison to London and nationwide averages) with high diversity

There are 21,900 children in Southwark and 20,700 children in Lambeth aged 0-4 years, representing approximately 7% of the population in each Borough²⁰.

58% of Lambeth's child population are from ethnic minority communities. Across both Boroughs over 140 different languages are spoken, with the most common languages after English being Yoruba and Portuguese. One in three primary and secondary school pupils in Southwark (29.8%) are not fluent in English^{21,22}.

Poverty is above national average

Within the two Boroughs more than one in three children under 16 years is living in poverty. In London's Poverty Profile Report, Lambeth and Southwark are reported to have significantly higher than national average rates of child poverty: Lambeth between 34-36% and Southwark between 30-32%.

Family structures are increasingly fragmented

Lambeth has above average rates of lone parents with dependent children, with 9% of households headed by a lone parent. The national average is 6%²³.

Housing and homeownership is largely controlled by landlords

Around 67% of households live in rented accommodation in Lambeth. Just less than 20% of households rent from the Council. Southwark Council is the largest social landlord in London with 42% of properties Council owned²⁴.

Teenage pregnancy rates are high, but on the decrease

The teenage pregnancy rate for females aged 15-17 is 69 per 1,000 in Southwark and 68 per 1,000 in Lambeth. Recent initiatives have been successful in reducing teenage pregnancy rates. For example, Southwark has seen an overall 39% reduction in teenage pregnancies since 1998, with major improvements taking place between 2009 and 2012.

Teenage mothers are three times more likely than older mothers to develop postnatal depression²⁵.

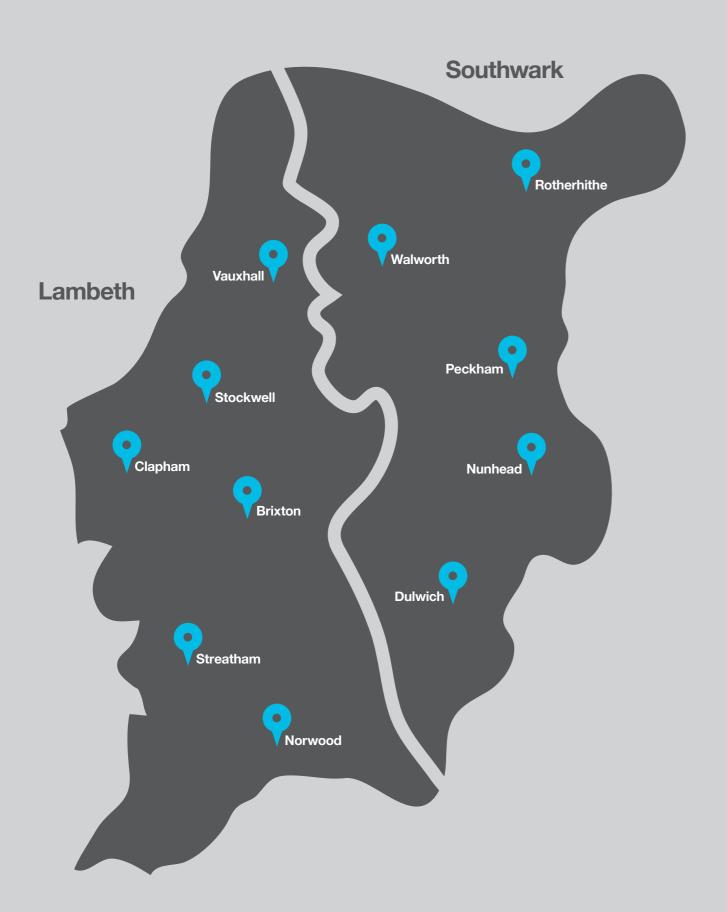
Obesity is higher than the national average

Both Boroughs have among the highest obesity rates in the country – in Lambeth 12.1% of children aged 4-5 are obese, and in Southwark 13.4% of children aged 4-5 are obese. This compares with a national average of $9.4\%^{26}$.

Population churn is high with families frequently moving in and out of both Boroughs

Lambeth has the second highest level of population churn in the country, with over 25% of residents arriving and leaving within 12 months. The population churn gives rise to significant pupil mobility within schools. 8.1% of pupils in Lambeth arrive and leave a school within one school year.

58% of Lambeth's child population are from ethnic minority communities Within the two Boroughs more than one in three children under 16 years is 9% of households in Lambeth are headed living in poverty by a lone parent There are 42,600 children aged 0-4 years in Southwark and Lambeth households live in rented accommodation in Lambeth children aged 4-5 in Southwark and Lambeth are obese 25% of Lambeth's residents arrive and leave within 12 months



Public health priorities in Southwark and Lambeth

Nationally the Public Health function is moving from Primary Care Trusts (which cease to exist in April 2013) to Local Authorities. Locally a decision has been reached for Lambeth and Southwark to share a Public Health function which will be hosted by Southwark Council from April 2013.

Southwark and Lambeth have very similar public health issues and populations so this joint approach is hoped to enhance public health outcomes for local people, by bringing together resources and expertise to focus on prevention, resilience and active living.

Health and Wellbeing Boards were proposed by the current health and social care bill, and become statuatory in April 2013. These new structures within every upper tier Local Authority area will be tasked with joining up local action to improve public health and wellbeing and strengthen the democratic accountability of health and care services. They present a real opportunity for local areas to take control of their future.

In Lambeth the health and wellbeing of children and young people is jointly commissioned by the Local Authority and the Clinical Commissioning Group. The Strategic Plan's priorities are:

- Childhood obesity
- Prevention
- Early intervention
- Workforce development.

Southwark have identified four priorities:

- Healthy weight and physical activity
- Mental wellbeing, coping and resilience
- Alcohol
- Early intervention children and families.

To support the above, a joint Early Intervention Commissioning Strategy is being developed which will outline the areas of interest including improving family stability and health inequalities.

The local economic landscape

Early years services sit across multiple funding sources. Some grant-based services are experiencing dramatic changes in budgets and targets, while others are able to access more constant funding from mainstream sources.

Children and families services in both Boroughs are feeling the pressure of a reduction in the early intervention grant which was reduced by £5 million in 2012. This is creating pressure on more universal service provision, with early years services becoming increasingly targeted around 'high need' children and families. While there is a general commitment to preventative services, there is a risk that highly targeted services alienate families who might already be experiencing a declining health and wellbeing trajectory.

In September 2013, Southwark and Lambeth will see the roll out of the free early years educational entitlement for disadvantaged two year old children to receive an additional 15 hours free childcare a week. As a result Southwark and Lambeth will see an emphasis on developing the childcare market to match the increased demand on places.

The picture across Southwark and Lambeth is familiar to all local authorities and stimulates a number of considerations:

- With less investment for universal provision, how can families connect and support each other across barriers of socioeconomic status, culture, and background?
- With less money for preventative provision, who will notice when families need specific support?
- With heightened demand for childcare and professional services, what are the informal community-owned alternatives?
- With pressure on services increasing, how do we start building family's own capabilities?
- With services being designed around needs, how do we nurture and encourage the growth of aspirations?

Opportunities for design

This section summarises the research findings and proposed design opportunities.

Research summary

Please see Section 3 for more detailed information about the research and engagement approach and the activities.

Over the course of five months, the Design Council and selected partners conducted a series of research and engagement activities within Southwark and Lambeth. The research activity enabled families, children, early years professionals and other key stakeholders to contribute their experiences, perspectives, and ideas to the work.

Existing early years research can tell us what children need and how they develop, while our approach aimed to uncover how families live, what they want, what they value, and why they behave the way they do. It is through the nuances of their lived experiences that we have uncovered new kinds of opportunities that fit with the grain of families' lives.

Here we present nine actionable insights uncovered by the research.

Investing in child development

One of the most important components of creating nurturing environments is families' attitudes towards investing in the early development of their child. Throughout the crucial first years of brain development, children spend the majority of their time with their family, who become their primary educators.

Our research highlighted a lack of awareness around child development in many families, particularly around the social and emotional dimensions; the importance of quality time between children and their families as opportunities for investment; and the family's roles in creating stimulating social environments for their children. For example, while the importance of quality time was often undervalued, parents did notice the positive effect it had on children's behaviour and the family's wellbeing.

"Maybe twice a month we'll go to McDonalds or Chinese, just me and Raul, and have some special family time together. I always look forward to it."

Natalie, 31, mother of one

However, many families lack confidence and understanding around what they describe as 'invisible' development, where the lack of feedback makes it hard to see the results of their investment in their child's early development.

Reports

Detailed learning from the primary and secondary research can be found within a series of reports.

A desk research report can be downloaded at bit.ly/11nVBtW.

The Innovation Unit's ethnographic research findings report and Coney's summary report of insights from an adventure in research are available on request from the Design Council. Please contact us at kneehigh@designcouncil.org.uk.



The Knee High Project Report Section 2.1

How families learn

It is striking that many professionals are hooked on the question of 'how can we teach parents to do x,y,z'. Yet through our research it was apparent that the teaching offered by services in its current form is one of the least effective mechanisms for families to learn.

Our research saw that learning delivered by services did not translate into practice when carried over into the home environment. For example, immediately following a parenting class that focussed on safety in the home, one mother left unattended pans on the heat with the handles sticking out into the room. The social aspect of these sessions was clearly valued above the learning content.

Secondary research tells us something about where parents look for information about bringing up children, finding that parents are most likely to ask friends or relatives for advice and information (39%), compared with children's centres (11%) and health visitors (6%)²⁷. 'Parenting on instinct' is not enough to give children the best start in life and therefore families also need to learn about becoming good parents²⁸.

"I restrain his limbs to get him to have a nap, otherwise he won't sleep. I got the idea from one of mu blogs."

Nancy, 28, mother of one

Our research showed that families are most likely to learn from practical solutions that offer results, reduce stress, create situations that benefit both them and their children, or make them feel good about themselves as parents. Families are adept at creating strategies that work for them. However, some families are better at this than others and more could be done to spread learning between parents about what works well and what does not.

Creativity and play

Creativity appears to be a core capability of families in making nourishing environments for their children. Creativity allows for the key developmental activity of the early years: play. A family's creative and imaginative capabilities also support the emotional wellbeing and resilience of their children. Creativity and play as ordinary parts of life seem to be under-valued or unnoticed by many families and many early years services.

For example, more than one family encouraged quiet activities such as watching TV over energetic or creative interactions and valued these behaviours as 'good' and 'bad'.

"Thomas is a good boy—he can sometimes watch TV for hours at a time. But Peter gets bored very quickly. He prefers to go off and play by himself and makes up his imaginary games. His concentration span is not as good as Thomas."

Sarah, 33, mother of two

As well as undervaluing the importance of play, there are practical barriers to parents encouraging play and creativity such as a lack of space in the home and perceived lack of safety in outdoor spaces. Secondary research suggests that children's free time and time to play has decreased in recent years, as well as their freedom to roam away from the home and to play outdoors. However, it is evident from our research that many children love to play outdoors, with many of them listing the park as one of their favourite places. Children's imaginations give them an incredible ability to turn any activity into an opportunity to play and to learn, even from everyday activities that adults may consider 'mundane' chores.

For me, one eına a varent balancın nu parenta vith mu own to be disciplinea n carvina out alone and with lacoh. When eachers or parents reter to ne as Samuel's encourage them to call me bi mu name

Jennifer, 29, mother of two

Families emotional wellbeing

There is a strong correlation between parents' emotional wellbeing and that of their children. Research shows that the emotional experiences of a parent effect the quality of the nurturing given to a child. For example, studies of millennium cohort data found that parents' self-esteem, a sense of control over their environment and perceived competence as a parent are all significantly linked to children's character development^{29,30}.

Half of the families we met had been diagnosed with mental health issues of varying degrees, while others had experienced low mood, low self-esteem and other emotional difficulties but had not sought support. Our research explored the emotional needs of parents and began to look at what might be possible if these needs were met.

During our research we met many parents who had aspirations for their own future and that of their family, and those who had a huge amount to offer their communities. We also met families who were struggling to match their experience with their expectations. For these parents it is evident that emotional wellbeing is dependent on a number of factors and characteristics including; past experience; existing relationships including trust, honesty and support; self-confidence and confidence as a parent.

Day-to-day stress

Being a parent is challenging and at times stressful for everybody. Not all stress is bad for child development but issues arise when stress becomes 'toxic'. For children this means prolonged stress without the support of a responsive caregiver. A report by The American Academy of Paediatrics states that "toxic stress" in infancy or early childhood can "disrupt the architecture of the developing brain, thereby influencing behavioural, educational, economic and health outcomes decades and generations later" "31. Stressed families find it harder to invest in their children, create quality time and find opportunities for quality interaction.

Our research began to look at some of the main sources of stress and the coping strategies that families use. As well as the stresses caused by finances, housing and routines such as disrupted sleep, many of the parents we met were simply "worn thin" by parenting – constantly attending to their children's needs without meeting basic needs of their own.

"I've been trying to wash my hair for over a week now but haven't been able to."

Crystal, 26, mother of two

In some families we saw how the stress could be directly damaging to the children, while in others the children certainly suffer from the reduced stimulation this entails. For example, coping strategies included the use of TV as a pacifier to enable parents to 'get on' with other tasks without interruption from their children, as well as an over-expectation on some children to assist with chores in a functional way that did not present opportunities for stimulation or learning.

Housing and environment

Many families in Southwark and Lambeth are living in poor quality housing that has a direct impact on the health and wellbeing of their children. Additionally, issues around transport and the local area mean that many families do not leave the house frequently enough. Consequently, many children are missing out on both active indoor and outdoor play, which results in a lack of physical activity, social interaction, vitamin D and opportunities to bond with parents. Secondary research shows that only just over 30% of five year olds meet the recommended level of daily physical activity³².

"It was really cold this morning and walking my daughter to school was just too cold for the boys and they kept crying. When I only had my daughter we used to bike everywhere, but now we are walking with the pram or going on the bus. The tube is just too difficult with a

Rachel, 26, mother of three

Our research explored the barriers and enablers to families making the most of their environments to invest in their child's development. As well as physical barriers around the practicalities of leaving the home, transport and the safety of the local area, it is evident that there are also emotional barriers to family's ability to leave their homes.

However, we also saw that when environments are 'family friendly' this offers families a much needed reason to leave the home and a rewarding experience when they do so.

Involving fathers

Despite the pressure on families bringing up children, men are largely absent in the day-to-day. This affects bonding between children and their fathers, creating more stress for some mothers and reducing the diversity of stimulation for the children. Increasing involvement of fathers is proven to improve speech and language development, increase physical activity and accelerate social and emotional development.

Many families are choosing a traditional arrangement of mother as primary care giver. This may be due to their cultural beliefs or financial situation. Parental leave still favours the mother and gender pay inequality means it is often more financially prudent for the father to work.

Our research found that services do not effectively engage fathers and often perceive them as a 'risk to be managed' rather than an active influence on their children. We found that the absence of men in children's early development is perpetuated by the attitudes of services, but also by the attitudes of some families and cultural traditions.

"I think parenting is harder for men. For women the parenting role is a more natural and intuitive one. Men find it harder to see what their role can be."

Jennifer, 29, mother of two

Cultural diversity in Southwark and Lambeth leads to a myriad of child rearing traditions and gender roles. In our research we met fathers occupying varying roles, from those taking a leading role in bringing up their children, to father's who 'play to their strengths' and select roles that they feel they are good at or comfortable performing, to those who take a decidedly less active role and regard childcare as the mother's domain.

Please see Section 6, which discusses some of the service related learning points and top-line lessons and recommendations emerging from the work so far.

Sharing parenting

Sharing parenting reduces stress for families, grows and strengthens the nurturing environment and gives children more holistic opportunities for development. Sharing parenting is difficult when families live in different parts of the world and people don't know their neighbours, but some of the families we met were very successful at sharing the load.

"I think it is really important for Robert to interact with other kids, and he loves it. It gives me a break where I can either do the shopping or go to the gym."

Lesley, 38, mother of two

The families we met were employing a range of strategies and ways of calling on the resources of those around them for support: from community parenting, to involving grandparents, and the use of formal and paid-for childcare. Cultural traditions also played a role here with extended periods of early childcare being offered by some grandmothers. However, some parents felt more comfortable than others in asking for help or involving others in their child's development.

The role of services

Services are an important part of the local landscape for all the families we met. The most popular services are parks, libraries, children's centres, cafes and restaurants, shops and shopping centres, playgroups and churches. Beyond these, the other services families frequently use include GPs, midwives, health visitors and social services. Many of these services are directly related to children's wellbeing, and all have at least an indirect impact on it. Services have an important role in investing in children's development. They are at their best when they enable families to invest in their own children, pursue economic resilience, and provide specialist help. However, too often services are disempowering and inadvertently reinforce dependency.

All the families we met rely on some services and all clearly appreciate the help that they get. The community research revealed a reasonable level of satisfaction with services, while deeper ethnographies showed that there are frustrations with services that are rarely expressed by many parents.

While we were not aiming to audit and directly critique current early years services, the research provided us with a good understanding of what families value, when services make a positive difference, and what services aspire to become. The design opportunities, while married to the needs and aspirations of children and families, may lead to design ideas that exist within or outside of the current system. This is something we hope to explore in the next phase of the programme.

"I think a lot of the mothers at the session had been referred, maybe by social services. There were a lot of young mothers, and the woman running it was really patronising. She was talking to us like we were dumb, and I felt quite offended. which I'm sure the other airls felt too."

Becky, 39, mother of one

The design opportunities

We drew together a wide range of insights from all the research and distilled these insights into three opportunity areas. These areas are intended to provide designers with a well informed and inspiring starting point from which to generate new ideas. They are by no means mutually exclusive, and will interweave and overlap in their focus and outcomes.

They aim to:

- Reframe familiar problems
- Combine the aspirations of families with strategic priorities
- Inspire ambitious and innovative thinking.



Opportunity: Leaving the house

How might we connect more families to the people and places beyond the boundaries of their home?



Opportunity: Day-to-day play How might we help all

How might we help all children to learn and develop through stimulation, interaction and play in their everyday lives?



Opportunity: Parents are people

How might we help parents alleviate the stress, anxiety and depression they experience in their day-today lives?

At the launch of the Open Innovation Design Challenge, these design opportunities will be presented along with a summary of the Challenge, the context of the programme and the vision for the Challenge. Please see Appendix 1 for an example of these documents. Measuring what works and what doesn't, and investing in evidence-based interventions is critical. An evaluation framework has been created for all three opportunity areas to help design teams understand the short and long-term outcomes they could achieve. Please see Appendix 2.



Opportunity: Leaving the house

How might we connect more families to the people and places beyond the boundaries of their home?

Many families experience long periods of isolation and loneliness after the birth of a child. It can become very difficult, practically and emotionally, to leave the house and stay connected with people and places in the outside world.

Sharing in new and stimulating experiences, getting away from domestic routines, and interacting with other people, all have a positive effect on the wellbeing of families and the early development of children.

"After I gave birth to my son, I was in hell. Complete hell. I never left the house — it was just me and my baby. The only service I knew about was the Post Office. It was like the dark ages living in a cave."

Sarah, 33, mother of two

Insights

Emotionally, life changes dramatically when children are born. It becomes harder to stay in touch with old friends, parents feel exhausted, often lack confidence, and feel like people outside will judge them.

How might we help families to nurture and develop their informal networks of support, before and after the birth of a child?

Practically, leaving the house with young children can be very challenging. An extra pair of hands and eyes is often required to manage the logistics involved in getting out of the front door. It is often easier to stay in, watch TV, and do the chores.

How might we make it easier for families to leave their homes?

Environmentally, many families live in busy streets, on estates where they don't feel safe, or in an area where they don't know their neighbours. A perception of fear is often what stops families playing outdoors and keeps children stuck inside.

How might we support families to enjoy using the spaces and places available to them?



Food for thought

Social norms

Our behaviours are guided and constrained by social norms, the informal rules that shape society. The overriding need to fit in can lead to conformity and unfounded beliefs³³ – all children are noisy and messy but parents still feel judged when they take their children outside. Terms such as 'hard to reach' further stigmatise those who believe they don't fit in. We need to bring attitudes back in line with reality, giving families more choice and control over where they want to go.

Isolation and Ioneliness

Social connections have a significant influence on our lives, from providing new skills to enhancing self-belief and wellbeing³⁴ – a wider support network is associated with lower levels of illness³⁵ and greater resilience to stress³⁶. Problems of isolation and low confidence will only be solved with active involvement from families, friends and beyond. We need to facilitate greater cooperation to develop self-sustaining communities and a stronger society.

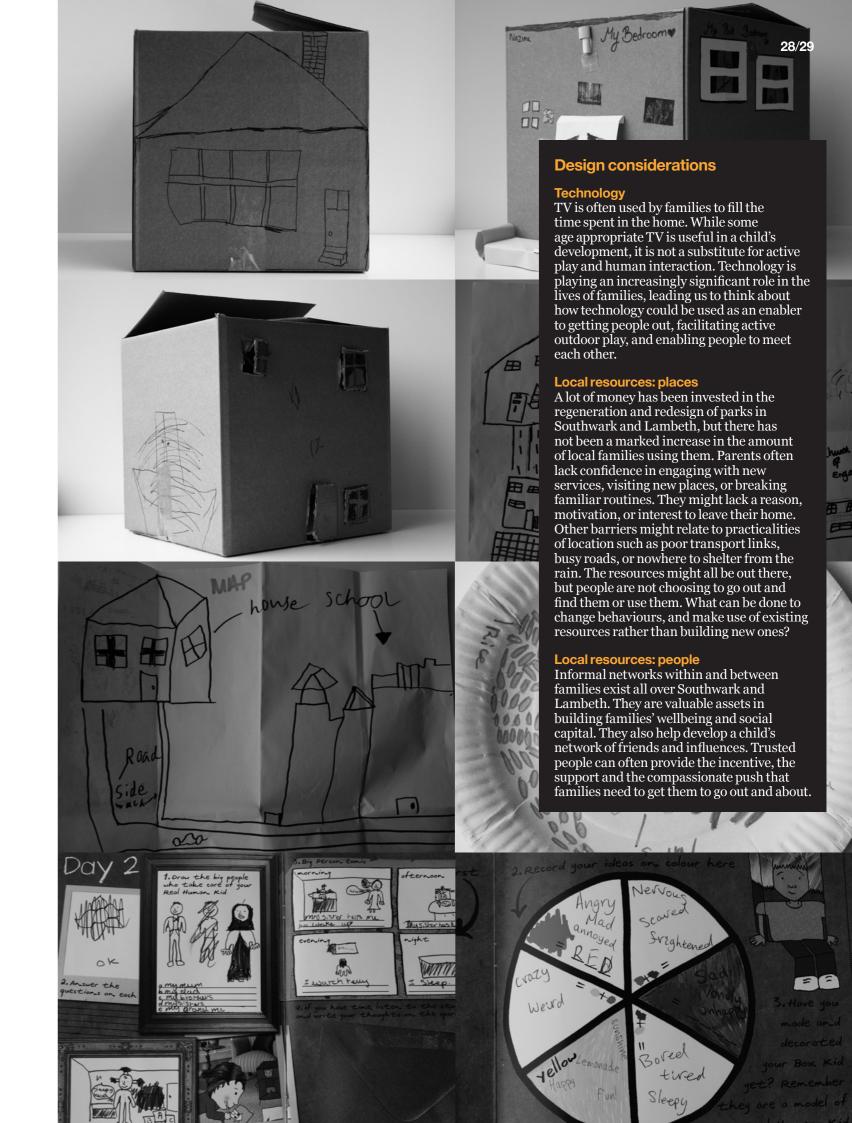
A recurring policy recommendation within the Marmot Review is to improve community capital and reduce social isolation³⁷. To date, policy regarding isolation and loneliness has focused primarily on the older generation, but there are many parallels with the early years. Isolation and lack of stimulation for children and families is widely regarded as a key influence on a child's early development and later-life outcomes. Families are becoming increasingly spread out, and people's social networks are no longer based around the area in which they live. There is a pressing need to create ways for people to connect with informal networks of support, increasing people's social capital, reducing dependency on the state, and increasing the wellbeing of society as a whole.

Housing

Children growing up in poor housing face some of the toughest challenges. Overcrowding, access, cold, and damp all contribute to physical health problems and a stressful environment. Getting out of the house can help minimise these risk factors³⁸ but investment in regeneration will be wasted if no attention is paid to the psychological and logistical barriers that keep people inside. We need to make it easier for families to have a better quality of life outside the home.

Levels of social housing in Southwark and Lambeth are amongst the highest in London, a large proportion of people in social housing live in flats (74% of housing stock in Southwark is flats) and there is a shortage of affordable housing generally. Local Authorities have a duty to keep families in safe and comfortable homes, but with a shortage of homes and money, and a huge demand, it will take time for meaningful change to reach many families. Therefore, we need to look at other ways to give every family the chance of having a better quality of life beyond their home environment.

In addition, young children's levels of physical activity are a serious long-term public health risk. The British Heart Foundation National Centre for Physical Activity and Health published the first government supported guidelines for early year's physical activity³⁹. More and more children are staying in-doors, getting stimulation from computers and TVs, and not seeing the sun. If this becomes a social norm, there will be serious repercussions on the health and wellbeing of the next generation.



Opportunity: Day-to-day play

How might we help all children to learn and develop through stimulation, interaction and play in their everyday lives?

By the time a child is three years old their brain is already 80% developed. During those early years a child is learning all they can about themselves, other people, and the world in which they live. Children predominantly learn through play: they come to understand the world around them through constant experimentation, questioning and exploration. This insatiable need to learn is often left unsupported in their day-to-day lives.

A child's family and home environment have a huge role to play in supporting and nurturing their early development. It is not something that should only happen within early years settings, being delivered by early years professionals.

"Thomas is a good boy – he can sometimes watch TV for hours at a time. But Peter gets bored very quickly. He prefers to go off and play by himself and make up his imaginary games. His concentration span is not as good as Thomas."

Sarah, 33, mother of two



Insights

Many parents feel over-stretched and worn-out by their responsibilities and have not got the time, energy, or motivation to play with their children.

How do we make time for child's play to be something that the whole family can enjoy?

Many parents see the developmental needs of their child as being the responsibility of early years services.

How might we develop the capabilities of all parents to be their child's primary educator?

For many parents, their child's early development feels invisible. They don't understand the value of play, and they don't know if the effort they put in is making a difference, and so it is not valued or prioritised.

How might we make a child's emotional, social, and intellectual development a more visible and transparent process?

Food for thought

Autonomy and dependency

Play is the defining activity of childhood, strongly linked to healthy cognitive⁴⁰, emotional⁴¹, social⁴² and physical development⁴³. Unlike older children, babies and toddlers are dependent on their caregivers for the interaction and encouragement that underpins future growth. Many parents see this as the role of local services but it is their responsibility. We need to reverse the trend of declining play time and encourage families to prioritise a good experience from birth.

There is increasing pressure on early years services to deliver both targeted and universal support: to demonstrate they are having an impact on those most in need, as well as offering support to all the families who want it. The thresholds for targeted services are increasing in Southwark and Lambeth, resulting in professionals having less time to develop the independence and capabilities of families. Instead, services are reactive. Some families view early years services, especially Children's Centres, as a place where 'play happens'. Without the right support, many parents do not understand their role, responsibilities and abilities. As demand on these services increases, we need to stop families developing their dependency on professionals and help them find their own way to make play a valued and valuable experience for all children.

Capabilities and resourcefulness

The benefit of play to children is linked to the quality of the interaction and skill of the play partner⁴⁴. Children need affection, feedback and teaching in a way that fosters their curiosity to explore and experiment⁴⁵. Parents are always the preferred play partner but many lack the confidence or self-belief to engage. We need to help families express their natural creativity, skills and ideas with the resources available to make playtime worthwhile for all.

Active play

Internet devices are changing how families and friends communicate. Traditional toys are being pushed aside by new electronics that need less joint interaction between parents and children⁴⁶. Smart phones and tablets have educational benefits but are facilitating a shift towards screen media and passive parenting. We need to support parents in managing technology and ensure the focus remains on active, collaborative play.

Children are engaging with the outside world less and less. This was seen widely across the research in Southwark and Lambeth with the majority of families using smart phones and TV's daily as a way to distract or entertain their children.

The National Trust has recently launched the Outdoor Nation⁴⁷ campaign in a bid to promote the need for children to learn through outdoor play. Over the last 30 years children's roaming distance (the area in which they explore) has reduced by 90%. Explorative play is fundamental to a child's development and the external conditions prohibiting play need to be rebalanced by factors that enable and encourage child development.



Opportunity: Parents are people

How might we help parents alleviate the stress, anxiety, and depression they experience in their day-to-day lives?

Being a parent is hard work. Every parent experiences highs and lows and these are often heightened during the early years of their child's life. While this is a normal part of having a family, for many parents the persistent lows can be very overwhelming and difficult to escape.

If a parent experiences stress, anxiety or depression for a prolonged period of time, it can have a significant effect on the long-term health and wellbeing of them and their children.

"Often, parents think that they need to get their child sorted first and then they will sort themselves out when they get time, as a lower priority. However making them see that by being in the best possible health themselves, they are giving their child the best chance, they can be more easily persuaded to address their own problems."

Community Paediatrician

Insights

Many parents feel completely over-stretched by their responsibilities and feel worn-thin by the stresses and strains of daily life.

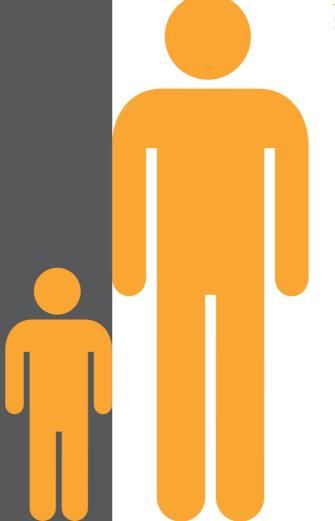
How might we stop parents from reaching breaking point?

Some parents often feel they 'should be coping' and experience a strong sense of guilt and failure when they are not. Parents often lack the confidence to ask honestly for support.

How might we stop parents suffering in silence?

The people around a family are not always well equipped with the knowledge or understanding of how they can better support each other.

How might we strengthen a family's informal network?



The Knee High Project Report Section 2.2.3

Food for thought

A spectrum of need

We all experience some measure of stress and anxiety. Chores, work or even idle chatter with strangers can lead to unbearable dread. Accumulation over time leads to poor health but the state cannot support low-level need. Stress is less harmful if people see it as a challenge they can overcome rather than a threat⁴⁸. We need to find ways to help families develop the skills and inner strength to cope with daily setbacks⁴⁹, no matter where they sit on the scale.

Services often design their support around a person's diagnosis. In Southwark and Lambeth people talked about the GP or health visitor being the 'gatekeeper' at the point when parents first ask for help. Parents who visit their GP with feelings of stress, anxiety and depression might be diagnosed with postnatal depression, or they might not. These decisions are sometimes critised as arbitrary, based on the availability of resources to cope with demand, and a professionals understanding of the person in front of them. While there is a strong political commitment to increasing investment in mental health services, there is little being done to understand the spectrum of need. A formal diagnosis of 'with' or 'without' might not be the best approach. A more proportional response to people's emotional wellbeing would ensure that, no matter where someone is on the spectrum of need, they are supported in the most effective way.

It's everyone's concern

Asking for help is simple in theory but challenging in practice. Even minor requests can expose insecurities and make parents feel embarrassed or self-conscious⁵⁰. Providing greater access to advice and information can have a positive effect but glosses over the psychological barriers to speaking out. We need to enable parents to actively seek advice that benefits their children and ensure that providers are more empathetic to the discomfort they feel.

The Marmot Review highlights how the mental health and emotional wellbeing of both parents has evidential effects on a child's educational outcomes, as well as their future physical health and wellbeing⁵¹. However, associated statistics do not show the full picture, with many parents suffering in silence without reporting to formal services. It is estimated that 50% of parents experience poor mental health in one form or another. We need to start with the assumption that, like physical health, emotional health is everyone's concern. A more universal approach to discussing and supporting emotional health would not only reduce stigma, it would also normalise people's needs and expectations, developing the collective capabilities of people to support

Invisible damage

Children learn through experience and interaction, constantly absorbing things with no way to filter positive and negative influences. Stressful, argumentative homes can have a significant effect on child development⁵², leading to longer term emotional problems if left unchecked. Mental scars are invisible but reversible. We need to help families recognise the effect they have on a daily basis and ensure children grow up in positive, supportive environments.

Parenting is a big focus for policy makers. In Early Intervention, the next steps, Graham Allen MP talks about the critical need for policy to break patterns of inadequate parenting. There is a lot of media speculation about the risk of government controlling and guiding 'good' and 'bad' parenting. The answers cannot, and should not, lie in formal state-run services — the opportunity lies in people, networks, and relationships. We need to ask what would best engender the development of a family's capabilities and aspirations, and facilitate the sharing of skills and resources across communities.



Design principles

When analysing the research, a series of ten design principles emerged which will guide the design and development of new ideas.

Preventing rather than reacting Intervening early saves money in the long-term and improves later life outcomes.

Services are often best placed to help those families in most need. Families who are just coping, or families on a downwards trajectory can often fall through the net. New products or services should support all families to flourish, proportionally to what they need and want.

Strengthen capabilities

Create opportunities for people to feel in control and able to find their own way.

During the research we met many families who showed high levels of dependency on services and expected services to do certain things on their behalf. This not only limits families confidence and capability but increases demand on services which are already stretched. New products or services should look to develop people's capabilities.

Encourage positive health choicesRaise the value that people place on health and wellbeing.

New products or services need to understand the context and complexities behind people's behaviours and choices and work on raising the value people place on their own health and the health of people around them.

Invest in people

Design for impermanence and create lasting change.

Southwark and Lambeth's populations are highly mobile. We should invest in people as if they are here to stay. We should also seek to create new services and products that react quickly to new arrivals and stay with people even if they do move away.

Strengthen positive influences Reinforce informal networks.

Many parents talk about how their 'world shrinks' when they become parents. Their influences can become hyper-local and support networks can radically change. Strengthening positive informal networks around a family can reduce isolation and relieve pressure on services.

The whole journey Identifying the right moments to

Identifying the right moments to make a difference.

All families will be different, but identifying the most appropriate moments to introduce new services or products will be beneficial. For example, pregnancy may represent an opportune time to help parents become more emotionally ready for having children, but a lot of advice is lost during the chaos of the first few weeks after the birth. Understanding parenting as a journey of constant change is essential.

Strengthen confidence

Pass no judgment and show sensitivity to all.

Many parents feel judged by others and place heavy judgement on themselves. However, parents are often the best experts on their own children and we can learn a lot from their strategies. A non-judgemental and non-patronising approach will be essential in removing barriers and strengthening confidence.

Double wins

Identify what works for the whole family.

Parents need to feel 'double wins' in their dayto-day activity, finding moments where both the child and the parent benefit. We should look to create products and services that respond to the need for mutual benefit.

Raise aspirations

Reduce stigma, cut across social groups, parenting ability and experience.

Many of the families we met were ambitious and wanted to contribute more actively to their communities. We should take an inclusive approach, dissolving barriers and encouraging people to connect, integrate and collaborate with one another.

Every family is unique One size does not fit all.

Understanding the different family structures and child-rearing traditions that exist within the communities we are designing for is essential. New solutions should work with families differences, rather than expect families to 'fit'.



Our approach

This section introduces the approach that was taken throughout *The Knee High Project*.

Research and engagement aims

Throughout the first phase of the programme the Design Council has worked with the communities of Southwark and Lambeth to understand families' behaviours and choices, and to identify where the opportunities lie for improving the health and wellbeing of local children under five.

The main objectives of this research and engagement work were:



To create substantial and compelling research that catalyses innovation.



To inform, raise interest and engage a diverse range of stakeholders in this programme.



To build on the capabilities of stakeholders to use design-led research tools and methods in the future.

Please see Appendix 3 for a full list of Phase One objectives.

Please see Appendix 4 for the Phase One evaluation framework.

An evaluation framework was created to measure the success of our research and engagement activities against the objectives outlined above. The activities conducted were designed to achieve the following measures:

- A diverse range of parents and families informed about *The Knee High Project* and interested in being involved
- A diverse range of professionals informed about *The Knee High Project* and interested in being involved
- Children and young people feel valued for their contribution
- Increased capacity within the community and among professional stakeholders to use research and design principles.

Working together

To date The Knee High Project has engaged:

- Local families living in Southwark and Lambeth who have one or more children aged below five years
- Professionals who encounter or influence the lives of children under five and their families in Southwark and Lambeth
- Key individuals with specific expertise in early years health and wellbeing, design and social enterprise development.

Alongside the core project team, a range of people have been involved in delivery, informing and advising and spreading the word.



People involved in The Knee High Project

Professionals and local organisations

Health and social care

- Children's Centres
- Paediatric Osteopaths
- Community Midwives
- Health Visitors
- Community Paediatrics
- Paediatrics A&I
- _ GP

Local Authority

- Speech and Language Services
- Early Help teams
- Children's Services
- Social Services
- Libraries Services
- Housing and Enforcement tean
- Family and Friends Service
- Schools

Voluntary

- Home-Start Southwark
- Post-natal depression support groups

Commercial

- Shops
- Cafes

Community researchers

Families (in-depth research participants)

2

Advisory Board representatives:

- Lambeth Public Health Directora
- Southwark Public
 Health Directorate
- Warwick Business School
- University College London
 Institute of Health Equity
- European Centre on Health of Societies in Transition
- Centre for Excellence and Outcomes in Children and Young People's Services
- Royal College of Paediatrics and Child Health
- Guy's and St Thomas' NHS Foundation Trust
- Vine's Health Doube on
- Coin Street Community Ruilder
- Frontier Economics
- The Children's Society
- Save the Children
- Magic Breakfast
- ESRO (Associate)
- Nonon

3

Many local families, professionals and other members of the community have received information about *The Knee High Project* and been involved by reading the blog, spreading the word and connecting us to their networks.

Advisory Board

The programme has identified and engaged a small group of key individuals with expertise in early years health and wellbeing, economics, design and social enterprise to form an Advisory Board. Meeting twice during the first phase of the programme, the role of the Advisory Board has been to provide strategic advice and guidance. Additionally, the Advisory Board act as champions and advocates to:

- raise the profile of the programme across relevant networks including government, industry, the general public and the media
- advise on appropriate measures and evaluation criteria for subsequent phases of the programme
- further refine the programme's vision and success criteria.

The Advisory Board is made up of representatives from;

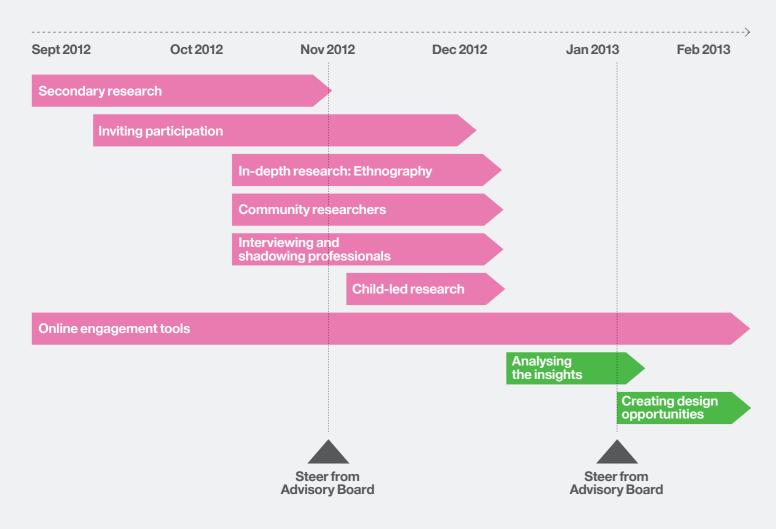
- the programme's partners
- local community organisations
- national charities
- professional bodies and royal colleges
- research and evaluation specialists
- design and innovation specialists.

All members of the Advisory Board are eager to continue their involvement in the programme. As the programme progresses the requirement of Advisory Board support will evolve to include a stronger focus on business expertise and to supplement existing involvement from innovation and evaluation specialists.

Please see Appendix 5 for a full list of Advisory Board members.



Overview of research and engagement activities





The Knee High Project Report Section 3.4 / Section 3.5

Secondary research

A desk research report was produced to provide an overview of the early years landscape. Principally, this report comprises a literature review to examine key themes and issues for parents and children in the early years from pregnancy to five years old.

The aim of the report is to provide those involved in the programme with contextual insights and themes upon which to base and test hypotheses through further research. As well as reviewing existing literature, the desk research was influenced and shaped by initial conversations with local residents in Southwark and Lambeth and a series of informal interviews with people working in early years more broadly. These included representatives from The Reading Agency, Hackney Pirates and Nesta, among others.

The desk research report is a sharable resource that has been used by ethnographic researchers to help them understand the issues around early years health, wellbeing and life readiness. Alongside the other research outputs, the desk research report will be used by people at a later stage to inform the development of new ideas.

The key benefits of conducting this desk research report were:

Spotting gaps

Secondary research has helped to identify where the gaps exist within current data sets and studies.

For example, we found that there is a lack of data directly about dads involvement in a child's early years.

Exposing themes

Secondary research helped identify recurring themes and relevant strategic priorities. These insights contributed to creating hypotheses to test and challenge through ethnographic research.

For example, we found that families' mental wellbeing is a strategic priority across both Boroughs, but after more in-depth investigation we found gaps in local evidence and statistical data, such as incidences of post-natal depression.

Harvesting networks and case-studies

Combing the landscape of early years helped us find and connect with individuals and organisations that would offer a useful perspective on this work. It also helped us identify case studies exhibiting both good and bad practice examples.

For example, we found that many of the highly regarded case-studies focused on parent's education. These could demonstrate marked improvements in parent's confidence and wellbeing, but less evidence was available about the impact on the child or on the family as a whole.

Creating a tool to inform

The desk research specifically acted as a tool for the project team and commissioned researchers in the development of the primary research frameworks. It will also act as a starting point for anyone working to develop new products and services, providing them with a sufficient overview to inform and inspire new ideas.

The desk research report can be downloaded at: bit.ly/11nVBtW

During this early research we harvested a huge number of interesting and relevant reports, articles and news stories, which we collated using Diigo.

This resource is available at: diigo.com/user/dcchallenges

Inviting participation

We knew from the outset that local collaboration would be essential to the success of this work so we spread the word as widely as possible. We went out into Southwark and Lambeth and involved a broad community of local families and early years professionals in the project.

Local community engagement

A series of community launches were held at locations across Southwark and Lambeth to kick-start *The Knee High Project*. The aim of these sessions was to raise awareness of the programme in the local area and to generate interest. We sought to engage local families living in either Southwark or Lambeth and with one or more children aged below five years, as well as early years professionals.

Events were held at Brixton Market, Surrey Quays Shopping Centre, 1st Place Children's Centre, Dulwich Library, Clapham Library, and Peckham Library. These locations were selected as neutral spaces both within and outside of services. We attended targeted sessions (where appropriate these events tied in with library sessions such as baby rhyme time or story time) as well as positioning ourselves in public spaces in order to meet a variety of families.

We aimed to openly invite participation by offering clearly defined roles and ways of being involved. Three options for involvement were presented and people chose which best suited them.

- 1. **Be a researcher** offered an opportunity to take part in some free research training whereby participants could learn basic ethnography skills and techniques and actively contribute to the research programme.
- 2. **Be heard** asked people to share their experiences of bringing up children in their early years.
- 3. **Be a connector** asked people to open up their networks, advise the programme about who to contact and help to promote awareness of the programme locally.

Please see Appendix 7 for flyers and posters from the community launch events.

During the six sessions, approximately 600 flyers were handed out, conversations were held with families about the project and their experiences, and 93 individuals left contact details and expressed an interest in further involvement in the programme.

Throughout the project we have ensured that contact details for the project team are widely available and have encouraged people to get in touch by phone, email or via *The Knee High Project* blog.

We engaged both families and care-givers including single parents, fathers, nannies, grandparents. These families represented a range of ethnicities including Black African, Black Caribbean, White European, and White British. Teenage mothers and pregnant women were less engaged using this method.

Professionals engagement

At the start of the project an email invitation was sent to over 400 relevant local professionals to introduce them to the programme and offer a range of options for involvement. The four options invited professionals to;

- **Connect:** Attend a launch event at Southwark Council and/or a drop-in session with the project team
- **Share:** Host an ideas session in their workplace
- **Learn:** Take part in the community researcher training
- Stay involved.

We aimed to engage a wide range of professionals from the fields of health, social care, children services, education and housing. We identified key champions within these fields who could help us spread the word through their networks.

The Knee High Project hosted a launch event at Southwark Council in order to raise awareness for the project and invite participation from early years professionals. The launch event offered attendees a chance to hear more about the project, contribute their experiences and ideas via group activities, and to help shape the direction of the research and engagement work.

"Every part of fprofession

Southwark child-minder

this session was great. Learning how design comes to play with our field s amazıng

This will help me stimulate different ideas and thoughts when I am working with mu team.'

Early years professional, Lambeth

The launch event was attended by 21 professionals. Additionally, two dropin sessions were held in Southwark and Lambeth to offer interested professionals who were unable to attend the main launch event an alternative opportunity to meet the project team and to hear more about the project.

People's main reasons for coming to the launch event were to:

- 1. Learn new skills
- 2. Improve best practice
- 3. Contribute and improve team working

Participants felt that the main value of the launch event was:

- 1. Learning about design and research
- 2. Sharing experiences and ideas as a group
- 3. Develop specific thinking on the subject

From all professionals engagement we received the following interest in involvement:

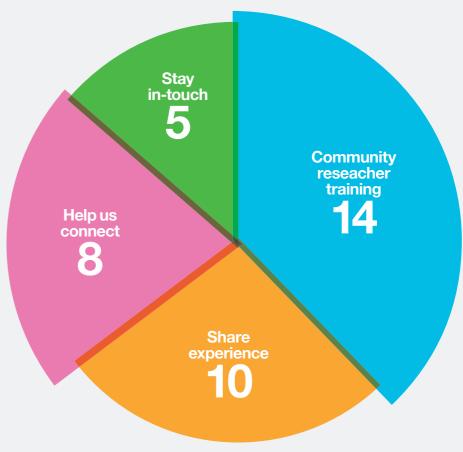
400 professionals kept informed about the work through email.

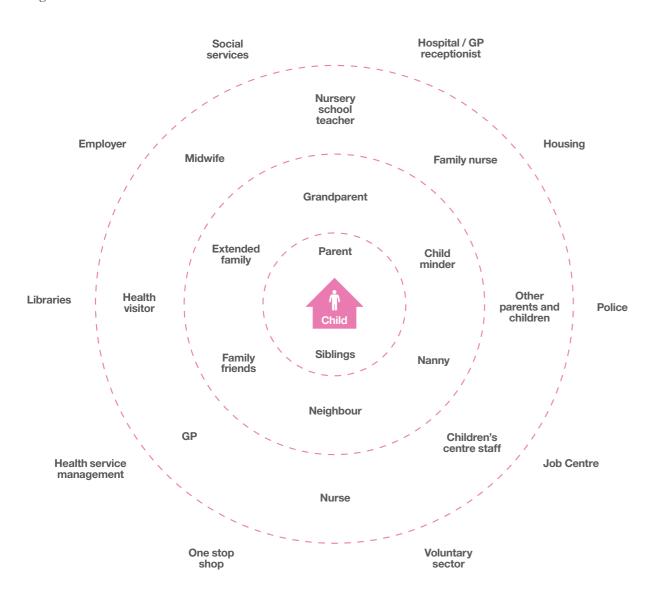
37 interested in more in-depth involvement.

Tam keen now to think differently about working with families to improve services with thēir needs in mind.

Early years professional, Southwark







The Knee High Project Report Section 3.5

The key benefits of this engagement approach were:

Forming trusted relationships

Across both our professional and community engagement activity the main benefit was to start forming personal connections between people and the project.

When initiating the more in-depth research the links we had already formed with people delivering services became particularly useful in the recruitment of families who were less confident in putting themselves forward. For example, a local children's centre was able to connect us with a mother who offered the research a unique perspective on isolation and lone parenthood. This mother would not have become involved without the input from someone she trusted.

Having an identity

We named this phase of research and engagement work *The Knee High Project* and created an identity that stood apart from existing early years state services. The intention was to appear independent of the Council in order to have new types of conversations with people, away from judgment and preconception.

With families this meant they came to us without feeling judged. For professionals this meant they shared their experiences with us without concern that it would affect their jobs.

Reaching different people

The term 'hard to reach' families is often used by services to describe the cohort of people who do not attend their services. We wanted to meet people who did and did not attend services. Rather than assuming people were 'hard to reach', we went to where they were.

We learnt that young parents found the project less engaging and were less inclined to talk with us. Understanding the reasons for this may be useful for future initiatives and for other services. Additionally, parents who's first language is not English were put off by the work, and in future phases of the programme we aim to develop a more inclusive approach.

Structuring future involvement

By making the opportunities to be involved in the project clear and transparent, local families and stakeholders were able to choose their role and choose their level of responsibility. This allowed us to engage them in an appropriate way as the project developed.

Safeguarding and data protection

With the Boroughs of Southwark and Lambeth and the appointed researchers, a safeguarding and data protection policy was drawn up to protect the safety and confidentiality of everyone involved in the project.

Please see Appendix 6 to review the policy.



In-depth research: Ethnography

We commissioned the Innovation Unit to undertake in-depth ethnographic research with local families. The team spent over 200 hours with families who were carefully selected to ensure we had a representative diversity of; experiences, backgrounds, beliefs, attitudes, and ethnicity.

Ethnographic research is a qualitative research method that allows researchers to investigate an issue in its real context. Rooted firmly in behavioural science, ethnography allows researchers to gain insight into complex issues: moving beyond what people say they do to what they really do.

The ethnographic research built on the key areas identified through the literature review, community engagement activity and initial consultations.

We began the in-depth research with a set of hypotheses. These hypotheses provided a framework for the research and allowed us to identify certain themes to challenge and test. These were:

Enabling parents and children to feel and be in control of their own lives would improve long term outcomes for under fives.

Early emotional (and low-level mental health) support for parents would improve long term outcomes for under fives.

Support for parents to make informed decisions about their child's use of technology would improve long term outcomes for under fives.

Dads are under used. Enabling them to take a more active role would improve long term outcomes for under fives.

The social network of the family is the key factor in the early development of the child.

The ethnographic research allowed us to gain a thorough understanding of how families live their lives and how they perceive health and wellbeing, with a key focus on the impact felt by children under five years old. The insights generated have subsequently informed the design opportunity areas.

Please see Appendix 8 for example ethnographic research tools. The key benefits of conducting this in-depth research are outlined below.

Taking the time

Ethnography is about taking the time to observe and develop an understanding of how people live their lives every day. Within this project the researchers accompanied families on trips, errands, and visits to services and friends, enabling the research to be enriched by the different qualities of time and interaction that families experience.

Uncovering needs and aspirations

Many people find it hard to articulate what they want or need. Taking an ethnographic approach allowed researchers to gather evidence through both conversation and observation that uncovered hidden or latent needs and aspirations. Ethnography sits well alongside other types of research and adds rich qualitative insights that cannot be achieved through traditional desk research or second hand descriptions.

For example, we found that many parents lack confidence and self-esteem. This is not something people spoke about openly, but it became clear through their behaviour within the family and through interactions with people away from their home.

Carrying no-judgment

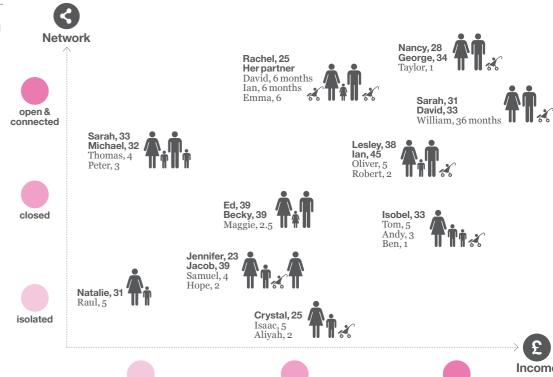
Ethnography is based on principles of nonjudgment. A researcher listens and seeks to gain an understanding of a person's life without placing their own slant on what is heard. This helps to develop trust and ensure that the insights gathered are genuine.

We found that feeling judged is a key barrier for many parents and care-givers. It was therefore vital that our work did not contribute to this anxiety.

Family-led

Ethnographic research does not follow a tight set of questions and guidelines, allowing the conversation and experience to be led by the participant, exposing what really matters to them.

This diagram represents the families engaged during our ethnographic research, segmented based on their network and social economic status.



medium

Community researchers

Working in partnership with the Innovation Unit we trained a small group of people in ethnographic techniques and supported this team of community researchers to undertake a series of mini-ethnographies.

Training the community researchers helped us gain supplementary insights and built a strong team of advocates around the programme. Additionally, offering this training opportunity was an effective way to communicate the value of ethnographic and design methods and processes to a broader audience, with a view to building the knowledge of our partners and promoting the programme more widely.

"It seems that too often people do not get time to do this kind of reflection but that it could be helpfully included in some sort of 'service'... helping people see what areas of their lives they want to give more attention."

Community researcher

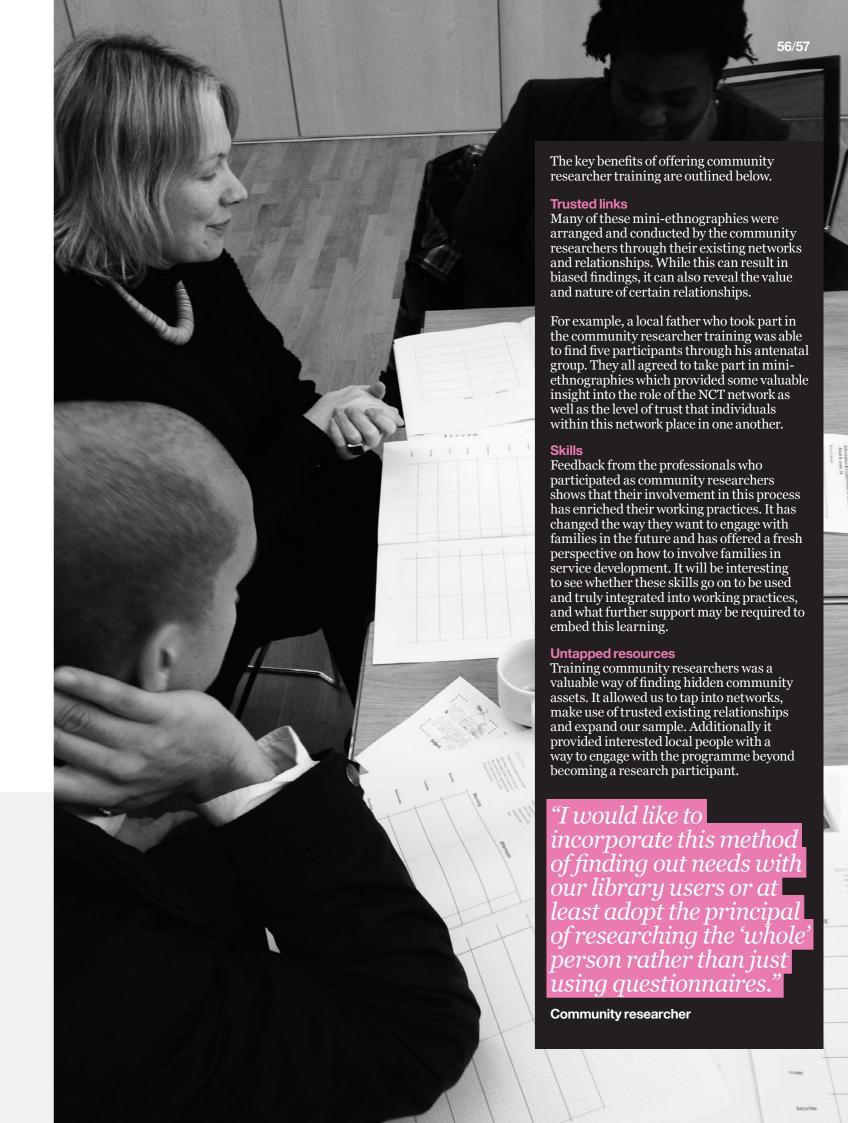
Nine people took part in the community researcher training and they conducted 15 mini-ethnographic interviews.

The most interesting things people learnt included:

- The importance of listening
- Understanding how to use the experiences of people to inform innovation
- The value of giving people time and space to reflect on their experiences.

Participants found the most useful things for the future to be:

- Knowing how to ask better questions
- Using ethnographic techniques to find out what service users really need
- Allowing people to reflect on their whole experience (pregnancy/parenthood) not just a point in time.



Interviewing and shadowing professionals

To supplement the family ethnographies and gain a services perspective, the Design Council and the Innovation Unit conducted in-depth interviews and spent over 20 hours shadowing early years professionals. The Design Council team also ran short 'ideas sessions' workshops with teams of professionals.

The key benefits of conducting these interviews and ideas sessions are outlined below.

Corroborating and challenging insightsWe aimed to use the experiences and lives of families as the primary steer for this work but

aimed to challenge the emerging insights by researching with early years professionals. This enabled the researchers to acquire a more strategic understanding of the issues raised by families, and see the same issues from a professional's perspective, which allowed us to see both sides of the story. Understanding the relationships that professionals have with families was highly valuable

For example, we learnt that Speech and Language Therapists hold genuine and trusted relationships with the families they work with. They focus on building the capabilities of families to support the child's development, rather than encouraging dependency.

The character of Southwark and Lambeth

It was important for this work to understand the different levels of perspective – political, national, local, and family to family – while also remaining focused on the reality of living and working in Southwark and Lambeth. By understanding the unique qualities inherent in both Boroughs we were able to build a set of design principles that would guide the design of effective and relevant innovations.

For example, we learnt that the movement of families in and out of the area meant that professionals found it challenging to understand how their investment in families would make a difference in the longer term. A design principle therefore would be: To treat people as if they are here to stay and to create new services and products that stay with people even if they do move away.

Please see Section 2.3 for a full set of design principles that have been developed to help guide the creation of solutions.

Please see Appendix 10 for an example of the tools used during these interviews. Interviews were conducted with a range of professionals, including;

Council services

- Speech and Language Therapists
- Libraries Managers
- Lambeth Family and Friends Service Support Worker
- Social Services Early Years Support Manager
- Southwark Early Help Team
- Housing and Enforcement Officer

Health and social care

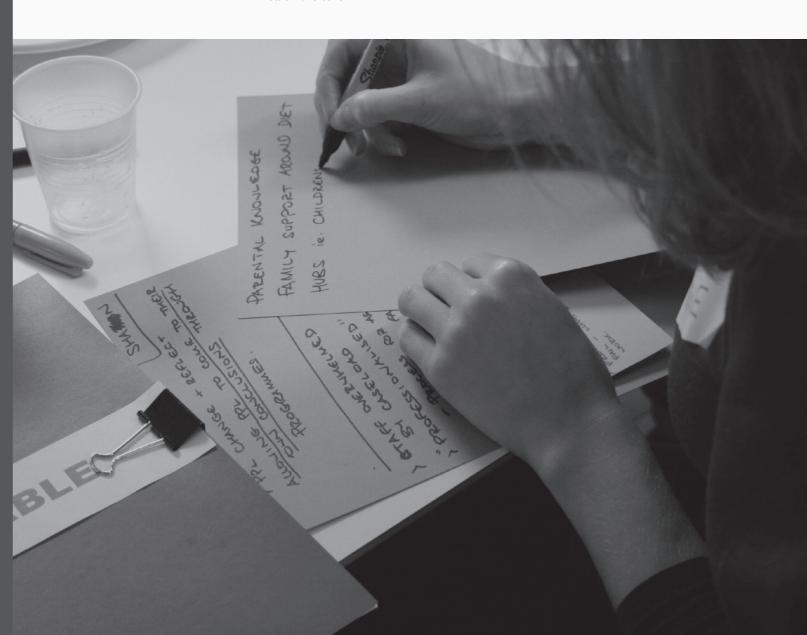
- Children's Centre Managers
- Paediatrics A&E Lead Consultant
- Paediatric Osteopaths
- Community Midwives
- Community Paediatrics Doctors
- Health Visitors

Voluntary

- Home-Start Scheme Manager
- Post-natal depression support group workers

Commercial

- Child and Baby Shop Manager
- Parenting Expert and Writer
- Parents Café Manager



Child-led research

The Design Council commissioned play specialists, Coney, to deliver an 'adventure in research', which brought children centre stage. This approach has enabled us to gain insights directly from children themselves, which contributed to the research as a whole.

The adventure in research involved over 50 children via two primary school classes. Primary school children were enlisted to act as researchers, gathering evidence to demonstrate the brilliance of real human kids. The story involved an inventor who was creating robot children, believing that perfect children were better than real ones. This story was presented as if real, where only the children could save the day by presenting their findings to show why real children are better than perfect robot children.

The children documented their findings in scrapbooks and were also interviewed by Coney during the collection of materials and at live finales in their schools. The research was child-centric, primarily looking at the experience of young children in the home and with their family.

Findings demonstrated the central importance of play as a crucible for the expression of many factors important for resilience and wellbeing, and some of the challenges for children and their families in supporting play.

The key benefits of conducting child-led research are outlined below.

The Knee High perspective

This piece of work was developed as a mechanism for gaining a child's perspective on various issues and directly hearing the child's 'voice'. Keeping children at the centre of the work remained a key priority for *The Knee High Project* to ensure that the experiences of the whole family informed the opportunity areas.

Siblings

This work engaged older siblings in involving their younger siblings. The influence of sibling relationships was a strong theme within our research so it enabled us to explore this dynamic through the child's eyes. For example, we learnt that many young children adopt a sense of responsibility for their younger siblings and spend a lot of time during the week and at weekends overseeing their play within the home.

Experimenting

The adventure in research was an experimental methodology that gave children the responsibility of having the role of a researcher. Engaging play and performance specialists, Coney, brought a fresh perspective into the public health space. The methodology will be shared to enrich future Local Authority initiatives.

Please see Appendix 11 for an example of the child-led research tools.

What we learnt

Play is all-important: the crucible for children to learn and to be happy.

What's the most interesting thing you've learned from this project?

She likes to play and that children really love to be silly... Sometimes when some people are sitting down she will go down under the table and make a fart noise.

What's the best thing about being a real human kid you've learned?

Because you can play and adults you can't play because you have to work.

Mums and dads are perceived to have very different roles.

What do you do that makes your dad happy? When I help him find things

What do you do that makes him worried or upset?
When I run away

What do you like to do together? Go out in car

When do you spend time together? Saturday and Sunday

What do you do that makes your mum happy? Help in kitchen

What do you do that makes her worried or upset?

Look out of the window

What do you like to do together? Drawing

When do you spend time together? Everyday! Dad spends time at weekends, playing football. Mum at evenings, playing games. Starting school after five years of being at home is a difficult transition

I was scared so I asked Miss if I could go and sit up at the table with her.

When it was my first day at school, I got very scared and I had butterflies in my tummy. Then I had a teacher and she called me 'handsome' and then I was very happy.

I was scared because I thought I wasn't going to have any friends and I didn't want to leave my mum and I was scared someone was going to bully me. But I now have lots of friends.

Children are born curious

What is nature?

The children were asked to create difficult questions for the inventor of robot children. Some of their questions were:

Can robot children do the gangnam style?
Can your robot children make up new ideas?
Can robot children fall in love?
But do robots do Halloween and that stuff?
How do you make the world spin faster?
How do you make someone (like a robot child) laugh?

Online engagement tools

In addition to the activity streams already introduced, we posted a number of tools and resources online to further engage people with an interest in this work. Principally this was via *The Knee High Project* blog and an online survey for parents.

A wordpress blog site was created as a platform that could be shared and viewed by everyone involved in the programme and by the general public. The blog has acted as a repository for thoughts and learning throughout this first phase of the programme, and as a place for the programme team to share updates about our process and activities, such as the community launch events, community researcher training and other workshops.

The key benefits of creating these online engagement elements are outlined below.

Valuing small thoughts

The blog has provided a useful tracking tool to capture intuitive thoughts and insights as the programme has developed and has allowed us to see how certain ideas and themes are progressing. Capturing thoughts and insights in real time has also encouraged reflection throughout the programme, and helped us give credence to those small early ideas.

Building momentum

The blog has been well used (receiving over 1500 views to date – at March 2013) and relatively well publicised. The blog has been a useful outlet to share and promote the programme. Via the blog we have been contacted by a number of designers who are eager to be kept up to date with the programme with a view to being involved in the development of new products and services at a later stage.

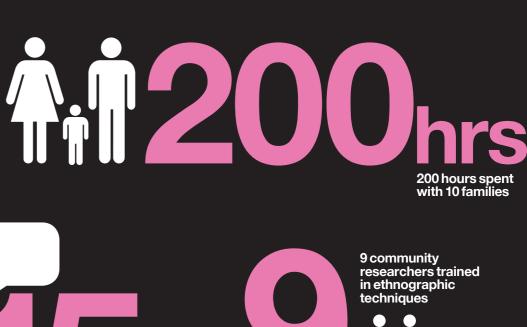
Being oper

The blog has provided an open platform that has allowed transparency into our process. We have aimed to keep the tone and content of the blog informal and accessible.

Expanding engagement

The online parenting survey provided a mechanism for those who were unable to be involved in the more in-depth research to share their views and contribute to the research.

The Knee High Project blog is live at: thekneehighproject. wordpress.com



Over 15 service professionals interviewed and shadowed

researchers trained in ethnographic techniques

Over 50 children involved in an adventure in research

15 families involved in mini-ethnographies

1500 hits on the blog



Understanding the research

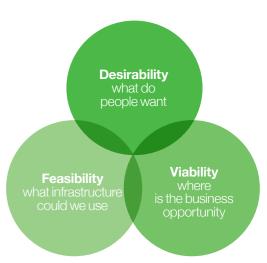
This section explains how the research was analysed and transformed into design opportunities.

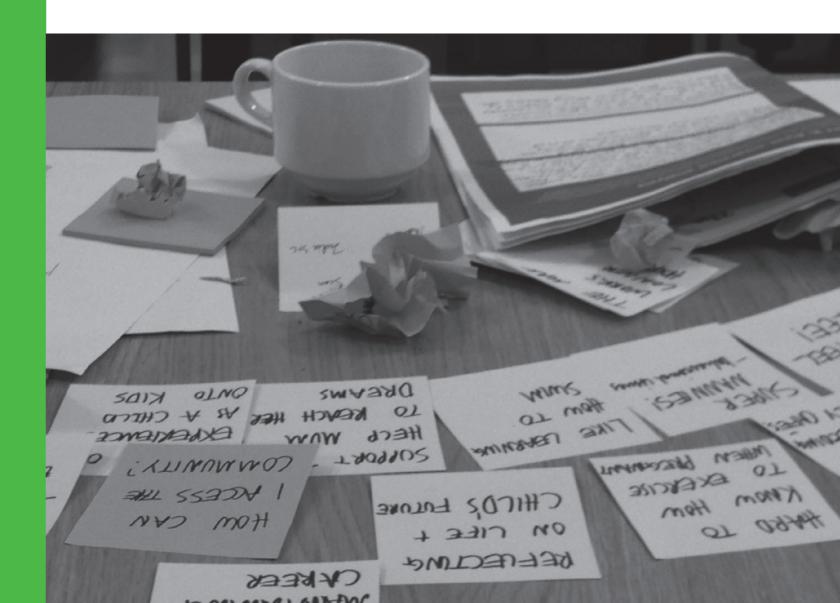
The first step in any good design process is to research the problem and understand the issues. As discussed in Section 3, *The Knee High Project* gathered insights through multiple streams of research. A huge amount of data was collected through these research activities and provided us with a wealth of rich insights upon which to base the development of design opportunity areas.

The second step is to understand the wider opportunity for innovation. Innovation is about identifying people's needs and spotting gaps for new ideas.

By combining the primary and secondary research we started to identify where the greatest opportunities lay for innovation. Our challenge was to draw all of the research streams together, analyse the insights and generate a series of inspiring design opportunities.

This diagram shows three considerations that we kept central to our thinking as we worked to identify opportunity areas for innovation.





Analysing the insights

The programme team took the research from raw findings to four thematic areas. The four areas were derived by clustering and prioritising findings in collaboration with families and professionals who had participated in the research.

	Process	Outputs	Team
Research download sessions Two days	All research streams presented and findings drawn into one place. Researchers downloaded their research findings in raw form. Innovation Unit introduced each ethnographic participant family in detail. Insights recorded and clustered. Possible solutions outlined and prioritised.	Insights from across all research streams structured into multiple clusters. Insight clusters prioritised.	Design Council Design Associate Sean Miller Innovation Unit Coney Southwark and Lambeth public health teams Guy's and St Thomas' Charity
Analysis of insights One day	Insight clusters distilled and overarching principles identified. Commonalities identified and insight clusters grouped into five broad issues/themes: - Emotional health - Male involvement - Imprisoned in the home - Stimulation - Lack of knowledge	Four thematic areas identified which encapsulate all insights. Thematic areas framed with child development outcomes.	Design Council

Theme development One day

Interrogating and framing the four identified themes. Refining language to reflect the nuances of each theme. Themes given working titles of;

Upon interrogation of the five areas it was agreed that the theme 'Lack of knowledge' was interwoven through the other four areas rather

Common barriers and enablers identified

Short and long term outcomes mapped

Overarching principles identified.

than a distinct theme in its own right.

Parents are people

across the five themes.

against each theme.

- The role of dads
- Leaving the house
- Stimulation and play

Following this session these areas were taken forward and further developed by the Design Council.

Four thematic areas further refined and developed. Detail added.

Design Council Design Associate Sean Miller



Testing the findings: Community workshop and Advisory Board input

The Design Council invited families and early years professionals who had played a role in the research to be involved in reviewing, challenging, and validating the research findings and emerging themes.

This community workshop gave the research teams an opportunity to present their findings, and gave the community an opportunity to respond – letting us know whether we'd got it right or wrong.

A series of discussions and activities guided the workshop participants to add to the insights and emerging themes. Scenario cards and storyboarding allowed participants to explore opportunities for design and where they felt that design could have the most impact on child development outcomes.

Following this community workshop the Design Council team further refined the four areas to reflect the community's feedback before the research findings and emerging themes were presented to the Advisory Board. Research insights structured around the four emerging themes were presented to the Advisory Board for comment and critique.

This workshop was attended by 28 people, including representatives from the project community and beyond. A number of participants had been involved in the research while those who hadn't could bring fresh eyes to the work.

Session attended by:

- 13 Professionals
- 6 Families
- 5 Advisory Board members
- 4 Community researchers

The most interesting things participants learnt during this workshop included:

- 1. The methodologies used to refine priorities
- 2. The strategies used to engage a range of different stakeholders
- 3. The process of working towards a final idea from a lot of research.

The most useful learning for the future included:

- 1. Using creative techniques to encourage people to think differently
- 2. Working across teams to think 'outside the box'
- 3. Seeing how parents and families can be used as advisors.

"It was a great workshop — I really enjoyed hearing views and ideas — stimulating and exciting. I was worried that it was decadent to spend a whole day away from the centre but it proved very invaluable."

Children's Centre Manager, Lambeth

Creating the design opportunities

To reflect the Advisory Board's feedback on four the themes, the Design Council team subsequently worked these themes into three opportunity areas for design.

Opportunity: Leaving the house

How might we connect more families to the people and places beyond the boundaries of their home?

Opportunity: Day-to-day play

How might we make it possible for more children to learn and develop through stimulation, interaction and play in their every-day lives?

Opportunity: Parents are people

How might we help parents alleviate the stress, anxiety, and depression they experience in their day-to-day lives? These three opportunity areas are intended to inspire and inform innovative thinking and new ideas for design. While they overlap and interweave, they present three areas of focus which all aim to improve the health and wellbeing of children under five living in Southwark and Lambeth today.



Thank you

The Knee High Project has seen the involvement of some extraordinary people who are passionate about making life better for children and their families. We have been honoured and inspired by the commitment of everyone involved in this project and would like to extend our sincere thanks to all of you.

To the families of Southwark and Lambeth who have been so generous with their time, so incredibly open about new ideas, and so genuinely delightful to work with.

To all the students who worked so hard to ensure the demise of perfect robot children.

To the people working tirelessly in Southwark and Lambeth to deliver children and families services – your passion, commitment and expertise does not go unnoticed.

To the Advisory Board, who's contribution has been invaluable.

To everyone who has met with us over the past few months to share their thoughts, their work, and their ideas. You have guided and inspired us.

The Knee High Project aims to inspire and inform the development of truly great ideas that will radically improve the health and wellbeing of children under five and their families.

Let's make it happen.

For more information about this work please contact us: kneehigh@designcouncil.org.uk

The Knee High Project Report

Lessons learnt and recommendations

The programme team recorded emerging learnings throughout *The Knee High Project*.

This section summarises top-line lessons learnt and recommendations that have emerged from this work. It introduces a set of reflections that might be of use to the Boroughs of Southwark and Lambeth and Guy's and St Thomas' Charity in future social innovation programmes with local communities.

Vision

What is possible

Supporting all service professionals to dream, imagine what is possible, and exercise their ability to innovate is critical in creating agile, responsive and effective services.

It has not been easy to gain traction with professionals across all service areas. There was uncertainty about the relationship between the Primary Care Trust and the Local Authority at the time the research was being conducted which meant some professionals felt under preasure and had concerns about the future. However, this was not the case for everyone and those with the greatest hunger for trying new approaches have become most involved in the work.

Additionally, some of the professionals who did engage found it difficult initially to think beyond their day-to-day roles, and imagine what might be possible. They needed a lot of support from the researchers, and from design tools to extract their thoughts from the constraints of their reality.

Families on the other hand were easier to involve. The project resonated with them, they wanted to be heard. They were motivated by the opportunity to share their experiences and to feel that they were being listened to.

What could make a difference?

- Facilitate ways for all service professionals to visit places and people who are successfully innovating in early years. Taking inspiration and learning from best practice examples outside of your field of work is a good way to see how things can be done differently.
- Establish a system where the ideas and experiences of professionals can meaningfully contribute to a conversation about service development and innovation.
- Reward staff who want to innovate: give them the tools to try out new ideas, and support them to share this energy with their peers. Managers can support this by prioritising their staff's need for inspiration and release time to make this possible.

The relevance of services

Qualities and values

Identify the qualities that families value within services and design new models around these principles.

Families clearly value services that allow them to invest in their own children and pursue economic wellbeing, as well as those that provide specialist help. For example, we learnt that Speech and Language Therapists hold genuine and trusted relationships with the families they work with. They build on families' capabilities and were able to achieve tangible change over time, meaning that families can see the benefit of their own investment of time and energy. It is apparent that families value services that are genuinely impartial, non-judgemental, and that work to increase their capabilities.

Many services could benefit from aligning more closely to these principles.

What could make a difference?

- Services and families sharing and celebrating genuine success to ensure that other services learn what works well, and what doesn't.
- Genuinely listening to what families want, and observing what families value.

The Knee High Project Report

Engaging the 'hard to reach'

There is a pressing need to transform attitudes around labelling families as hard to reach and instead to involve the real needs and aspirations of families in the design of relevant and effective early years support.

The term 'hard to reach' is frequently used within the Council and in public health to characterise the people who are not engaging with available services. During this project we started to see the issue to be much less about access, and much more about relevance. In many cases families are not accessing services because they do not feel these services are relevant to them in their day-to-day lives. Often families were unaware of the need and purpose of services and were unsure of what they would gain from accessing them, and what would be expected of them if they did.

There was also a sense of exclusion which was acknowledged by both families and professionals. Services are open from 9am to 5pm, Monday to Friday, which gives the impression that they have been designed to be convenient for the staff rather than for the families they exist to support.

What could make a difference?

- Build the capabilities of service professionals to listen and involve families as they innovate or improve existing services. For example, staff could be trained in co-design methodology which could enable them to facilitate constructive conversations and activities with families.
- Give families more power to feed their views and ideas into the system.
 Create a 'patient opinion' model for families and early years services enabling feedback to be a core part of what shapes and ignites change.

Looking beyond mother and baby

More needs to be done to improve the relevance of early years services for men and other members of the family, ensuring they are as involved as they want to be in the early development of their child.

Despite efforts to involve dads (through targeted father sessions on Saturdays), families and professionals alike felt that there remained a strong sense that male involvement was lacking for many children under five. There will be number of reasons for this, one of which is the attitude of early years services. By viewing the mother as the main care-giver in the early years, some of the professionals we met (inadvertently or otherwise) excluded the father from conversations about their child's health and wellbeing. Letters were written to the mother of the child; midwives talked about fathers like they were a 'risk to be managed'; and services were designed around soft and effeminate principles which alienate men. This issue is likely to affect other marginal care-givers such as grandparents, extended family members, and child-minders.

What could make a difference?

- Recruit more men into early years services and give them responsibilities for widening services' engagement and relevance to local dads.
- Start again. Create a small task force of designers, dads and early years experts to design and test and a 'new-look' children's centre.

Embrace complexities and harness capabilities

Clarify involvement

People have a complex set of skills and capabilities. They need to be given opportunities to use and build on these, as models of state-run services change.

Engaging people means very little. Raising awareness is not enough to ensure people want to be involved and are able to take action in their community. Genuine roles and responsibilities need to be outlined which relate to people's capabilities and desires.

We should not be surprised to discover that there is a huge pool of talent and ability within families in Southwark and Lambeth, within which there exists enormous potential for positive change. We have barely scratched the surface.

What could make a difference?

- Seek out opportunities for service-users to have roles on boards and advisory groups. Use local nomination to ensure it's not only the 'usual suspects' that are involved.
- Actively listen to the community and hear what they have to say, even if it isn't convenient or doesn't feel comfortable.
 Treat service users as people who all have something to offer, rather than as a problem to be solved.
- Bring members of the community into the development and delivery of local services. Expand on the principles within a cooperative model.

Attitudes not needs

By better understanding people's attitudes, values and motivations there is greater likelihood they will want to be involved, whether in research or service re-design.

One size does not fit all. Southwark and Lambeth, like everywhere else, provides residence for people with a variety of different backgrounds, experiences, and beliefs. Within this project we aimed to try different methods of involving people, and used various mechanisms to learn from people. However, despite our efforts we did not engage effectively enough with families where English was not their first language, as we did not provide translation. We also did not engage well enough with very young parents. This is might be due to younger parents having less interest in the work or feeling 'over engaged' through targeted initiatives in the past. We would need to conduct further analysis to examine the real reasons for what worked and what didn't, although in general we learnt that seeing segmentation in a traditional sense (age, ethnicity, religion) was less helpful than seeing segmentation in an attitudinal sense (past experiences, aspirations, self-reliance).

What could make a difference?

 Designing services around the attitudes and motivations of families, in the same way that a commercial organisation understands its market. Creating a system which allows people to share what they value, trust and believe, in order for future early interventions and support to understand the most suitable approach for different types of family. The Knee High Project Report

Involving the network, not the individual Efforts should be made to take a genuinely networked approach to service delivery. Target collectives of people and prioritise strengthening relationships.

At the start of this project we began with the hypothesis that the people around a child, and the relationships between those people are incredibly important in a child's later life outcomes.

We also found that genuinely involving a network in the research was challenging. Perhaps unsurprisingly, it is the individuals within a family who primarily engage, meaning the research understands the nature of their network from their perspective.

What could make a difference?
Create an expectation within services that it is the norm to involve the network around a family. Measure success based on the breadth and depth of the relationships around a service user.



Appendices

Example Challenge documentation

Overview

Giving every child in Southwark and Lambeth the best possible start in life.

We know that the first five years of someone's life, including the nine months of pregnancy, are critical in the development of a person's life beyond childhood. During these early years, before we start school, we develop the foundations for an understanding of ourselves, the people around us, and the world in which we live.

There is strong evidence showing that the very early development of a child's social skills (such as listening and communication), emotional skills (such as self-regulation and perseverance) and cognitive skills (such as literacy and problem-solving) are strongly associated with later educational success, employment, and health and wellbeing? There is also strong evidence to show that the inequalities between children's development when they start school, can make a lasting impact on the rest of their adult lives.

Reducing these inequalities at an early age is vital, not only for economy, but for the health and wellbeing of society as a whole.

Every child deserves the best start in life, and we need your help to achieve

The Design Council in partnership with Guy's and St Thomas' Charity and the boroughs of Southwark and Lambeth are challenging you design, test, build and launch a new service or product (or otherwise) that will improve the bealth and wellbeing of all children, starting in Southwark and Lambeth, giving every child the best possible start.

The brief

We want you to propose ideas that you believe have the potential to improve the health and wellbeing of children under five living in Southwark and Lambeth today.

Over the last few months we have been working with families and early years professionals within Southwark and Lambeth to identify where the greatest opportunities be for improving child beatht and wellbeing. We wanted to provide you with a well-researched brief and a clear starting point.

The big vision

By improving children's early emotional, social, and intellectual development,
we believe we can create a long-term positive impact on child bealth and
wellbeing. This is the big goal of the Challenge. How you achieve this, is up to

The difference that will make a difference
We have identified three areas of opportunity for new ideas. These are starting points from which you can make steps towards achieving the his vision

These opportunity areas have been developed by working with local families and professionals. Together we felt these areas revealed a lot of unmet needs, and presented potential for making a significant difference.

As you will see, the three areas overlap and interweave, so we don't expect your idea to sit snuggly within one area. Use them to inspire.

How might we connect more families to the people and places beyond the boundaries of their home?

Opportunity: Day-to-day play
How might we help all children to learn and develop through stimulation,
interaction and play in their everyday lives?

Opportunity: Parents are people
How might we help parents allowinte the stress, anxiety, and depression they
experience in their day-to-day lives?

The Challenge

There are children starting school without the basic capabilities to make friends, express themselves, or engage in learning new things. Fundamental emotional, social and intellectual development needs are not being met in their early years, which is having a lasting effect on a child's health and

Child development theory is well documented, we know the early years are crucially important and we understand why, but do we understand enough about what really works, why it works, and how to do it?

With few evidence-based initiatives in the early years, we believe there is a pressing need to see more innovation, experimentation, and evaluation in order to identify what will really make a lasting difference for children under five and their families.

It is time to take a new approach to raising the health and wellbeing of

What is the challenge?
This is a competition to create a new product or service (or otherwise), that improves the long-term health and wellbeing of children by developing their emotional, social, and intellectual capabilities in their early years.

We don't know what the end result will look like yet. That bit is up to you What we do know is that this challenge needs a fresh approach. It needs experimental and innovative thinkers, and it needs to demonstrate it can a difference to the fives of children under rive and their families by delive

APPENDIAL, THANKS, USEA, DULLICE
We all know creating something new is rarely a quick and easy task. We are
looking for teams with the right skills and the right attitude to ensure that
ideas develop into concepts that genuinely make a difference to children's
lives.

Leaving the house

How might we connect more families to the people and places beyond the boundaries of their home?

Many families experience long periods of isolation and loneliness after the birth of a child. It can become very difficult, practically and emotionally, to leave the house and stay connected with people and places in the outside

Sharing in new and stimulating experiences, getting away from domestic routines, and interacting with other people, all have a positive effect on the wellbeing of families and the early development of children.

"After I gave birth to my son, I was in hell. Complete hell, I never left the house — it was just me and my baby. The only service I knew about was the post office. It was like the dark ages — living in a cave."

Emotionally, life changes dramatically when children are born. It becomes harder to stay in truch with old friends, parents feel exhausted, often lack confidence, and feel like people outside will judge them. How might we he

Practically, leaving the house with young children can be very challenging. An extra pair of hands and eyes is often required to manage the logistic involve in getting out of the front door. It is often easier to stay in, watch TY, and do the chores. How might we make it easier for families to leave their homes?

don't feel safe, or in an area where they don't know their neighbours. A perception of fear is often what stops families playing outdoors and keeps children stuck inside. How might we support families to enjoy using the spaces and places available to them?

Evaluation framework for design opportunities

KEY ISSUES	KEY CAUSES	HOW TO ACHIEVE CHANGE	OUTCOMES				
PROLONGED ISOLATION Families with young children feeling trapped and isolated within their	INSUFFICIENT SUPPORT NETWORK FEAR CRIME AND SAFETY OUTSIDE	INCREASE BREADTH AND DEPTH OF FAMILY'S INFORMAL SUPPORT NETWORK	INCREASE IN NUMBERS OF PEOPLE CONNECTED WITH WEEKLY INCREASE IN TIME SPENT WITH OTHER PEOPLE	FAMILIES MORE CONNECTED AND LESS ISOLATED			
own homes. Affecting the wellbeing of a family in the short and long-term.	PREVIOUS TRAUMATIC EXPERIENCES (Difficult birth, childhood trauma, bereavement)	BUILD CONFIDENCE OF PARENTS TO	PARENTS PROACTIVELY ASKING OTHERS FOR SUPPORT / ADVICE	FAMILIES FEELING GREATER AUTONOMY AND CONFIDENCE			ı
& Limiting diversity of stimulus for children as they develop.	EXTERNAL PRESSURES AND CONSTRAINTS (ie. Finances, housing, environment, transport)	PROACTIVELY ASK FOR SUPPORT BUILD FAMILY'S CONFIDENCE TO BELIEVE IN AND DEVELOP THEIR OWN CAPABILITIES	INCREASE IN TIME SPENT OUTDOORS	CHILDREN MORE PHYSICALLY ACTIVE	SCHOOL		
	OVER STRETCHED BY RESPONSIBILITIES (at work and/or within the home and family)		INCREASE IN TIME SPENT ENJOYING LIFE AS A FAMILY	FAMILIES ENJOYING MORE QUALITY TIME TO- GETHER, IMPROVED OVERALL WELLBEING	/ REACH		
	FEELING JUDGED BY PEOPLE OUTSIDE	BUILD THE CAPABILITY OF THE COMMUNITY TO SUPPORT CHILDREN'S NEEDS	INCREASE IN THE TIMES SPENT TRYING SOMETHING NEW	CHILDREN MORE ABLE TO INTERACT AND COMMUNICATE WITH OTHER PEOPLE	E THE		
	FEELING LIKE THERE IS NOTHING TO DO OR NOWHERE TO GO	DEVELOP A FAMILY'S AWARENESS, CONFIDENCE AND DESIRE TO TRY NEW EXPERIENCES	REDUCTION IN TV HOURS	CHILDREN MORE ENGAGED AND INTERESTED IN LEARNING	T BEFOR	(5	
TOXIC STRESS Families with young children experiencing high levels of stress and anxiety in their everyday lives.	OVER STRETCHED BY RESPONSIBILITIES (at work and/or within the home and family) INSUFFICIENT SUPPORT NETWORK	INCREASE BREADTH AND DEPTH OF FAMILY'S INFORMAL SUPPORT NETWORK	PARENTS IMPROVED CONFIDENCE AND SELF-ESTEEM	FAMILIES ENJOYING MORE QUALITY TIME TO- GETHER, IMPROVED OVERALL WELLBEING FAMILIES MORE CONNECTED AND LESS	AND INTELLECTUAL DEVELOPMENT BEFORE THEY REACH SCHOOI	CHILD HEALTH AND WELLBEING	IMPROVED LIFE CHANCES FOR CHILDREN
Affecting the wellbeing of a family in the long term.	EXTERNAL PRESSURES AND CONSTRAINTS (ie. Finances, housing, environment, transport) PREVIOUS TRAUMATIC EXPERIENCES	BUILD CONFIDENCE OF PARENTS TO PROACTIVELY ASK FOR SUPPORT	OTHERS FOR SUPPORT / ADVICE FAMILIES MORE ABLE TO STAY ON TOP OF DOMESTIC CHORES	FAMILIES FEELING GREATER AUTONOMY AND CONFIDENCE	TELLECTU	LD HEALTH	E CHANCE
Affecting the support and stimulus for children as they are develop.	(Difficult birth, childhood trauma, bereavement) UNREALISTIC EXPECTATIONS (ie. not emotionally ready for parenthood)	STRENGTHEN PARENTS ABILITY TO MANAGE CONFLICT AND COPE WITH STRESSFUL MOMENTS	PARENTS AND CHILDREN SLEEPING BETTER	IMPROVED BOND BETWEEN PARENT AND CHILD		MPROVED CHI	ROVED LIF
	RELATIONSHIP ISSUES FOR PARENTS	STRENGTHEN A FAMILY'S EMOTIONAL PREPARATION FOR HAVING CHILDREN	LESS ARGUMENTS WITHIN THE HOME	GREATER SENSE OF CALM AND WELLBEING WITHIN THE HOME	EMOTIONAL,	IMPE	IMP
LACK OF STIMULATION	INSUFFICIENT SUPPORT NETWORK	NOTE OF PREDICTION OF RECOVER	SE DU MAS AS DOMESTIA	FAMILIES ENJOYING MORE QUALITY TIME TO-	SOCIAL,		
Families with young children not prioritising play and exploration in a child's early	LACK OF TRUSTED PARENT ROLE MODEL FOR PARENTS	INCREASE BREADTH AND DEPTH OF INFORMAL SUPPORT NETWORK	RE-BALANCE OF DOMESTIC RESPONSIBILITIES, AND PLAY MORE TIME SPENT INTERACTING	FAMILIES ENJOYING MORE QUALITY TIME TO- GETHER, IMPROVED OVERALL WELLBEING IMPROVED BOND BETWEEN PARENT AND	IMPROVED CHILD SOCI		
development. Affecting the bonding within the family.	OVER STRETCHED BY RESPONSIBILITIES (at work and/or within the home and family)	BUILD CONFIDENCE OF PARENTS TO PROACTIVELY ASK FOR SUPPORT	AND PLAYING AS A FAMILY CHILDREN SPENDING MORE TIME ENJOYING UNSTRUCTURED PLAY	CHILD CHILDREN DEVELOPING KEY SOCIAL, EMOTIONAL AND INTELLECTUAL SKILLS	IMPROV		
& Limiting the possibilities for children to develop early cognitive and	LACK OF POSITIVE / VISIBLE FEEDBACK	THOROTIVEEL AUXTORSOFFURI	INCREASE IN TIME SPENT CONNECTING WITH OTHERS	FAMILIES MORE CONNECTED AND LESS ISOLATED			
non-cognitive skills.	UNAWARE OF WHAT TO DO AND HOW	DEVELOP A FAMILY'S AWARENESS, CONFIDENCE AND DESIRE TO TRY NEW EXPERIENCES	INCREASE IN THE TIMES SPENT TRYING SOMETHING NEW	CHILDREN MORE ENGAGED AND INTERESTED IN LEARNING			
	OVER DEPENDENCY ON SERVICES	BUILD CONFIDENCE OF FAMILY'S TO BELIEVE IN AND DEVELOP THEIR OWN CAPABILITIES					

The Knee High Project Report Appendix 3 / Appendix 4

Phase One aims

The research and engagement phase aimed to;

- Explore and understand the issues to form a solid knowledge base upon which to build the early years programme.
- Engage with key partners (Southwark and Lambeth PCTs) and the communities of Southwark and Lambeth, inclusive of local providers and users.
- Convene a strong, multidisciplinary Advisory Board continue to refine project vision and success criteria.
- $Collect\ rich\ in sights\ from\ the\ frontline\ in\ Southwark\ and\ Lambeth.$
- Triangulate bodies of research into a rich and accessible reference source.
- Prioritise and select target themes highlighting the areas where improvements in health and care provision of early years children are most needed and where new and improved technologies, services and environments are most viable and collate, publish and promote our findings.
- Drive awareness and interest, through targeted communications share and disseminate skills, approach and insights.
- Build and maintain momentum.

82/83

Phase One evaluation framework

This framework describes the main objectives of this first phase research and engagement programme. If describes the activities proposed to achiese these objectives and the methods used to access success and evaluate impact. There are three main objectives:

- To inform, raise interest and engage a diverse range of stakeholders in this programme
 To build on the capacity of stakeholders to use design and research tools and methods in the future
 To create substantial and compelling research that catalyses innovation

DESIRED OUTCOME	DPUTS	NIEASUREABLE OUTPUTS	EVALUATION METHOD		
What we will achieve	What we will do	The indicators of success	Formal and questions		
To inform, raise interest and engage a diverse range of families" in	d small launch events acress both boroughs Pholography compellion	Number of families who received information Numbers of families engaged and signed-up Variants in diversity across 8 areas Number of submissions	Capture and analyse data on families who engage and families who sign-up Questionnaire for all participating		
his programme	Story-Adventure activity	Number of completed toolbis Whole family engaged in the process	families: 1. Why did you engage 2. What was most valuable 3. What impact have you noticed		
To inform, raise interest and enuage a diverse	Launch event and drop-in sessions	Number of families who received information Number of sign-ups and altendees Variants in diversity across the professional area and responsibilities	Capture and analyse data on professionals who sign-up and professionals that attend		
and engage a dwese range of professional stateholders in this programme	Ideas Sessions	Diverse professional teams creating a collective insight	Questionnaire for all participating professionals: 1. Researcs for engagement 2. Desired involvement going formard 3. What was most valuable 4. How useful in future work		
To build on the sapacily of stateholders to use design and research tools and methods in the future	Elmographic Research Iraining	Number of families and professionals interested and engaged Volume of subsequent contribution to the research and data capture	Capture and analyse data on statisholder who sign-up and level of further involvement. Cuestionnaire for all participates: 1. Reasons for engagement 2. What was most reducible 3. Confidence and ability to put training into practice 4. How useful in future nork		
	methodology and tools where possible	Numbers of people viewing the blog	Capture and access hit rates, comments, and follow-up questions		
To create substantial and competing research that catalyses immutation	Triangulate all data in a pollaborative session with researchers and designers Co-create and test themes, opportunities and design briefs with appropriate stateholders	A series of written and nisual outputs that are credible to professionals in the field of early years health and wellbeing, and irespire new innovative thinking	Peer-Review outputs with 7 professionals		

[&]quot;All engaged families with have children under five, they will five in either borough, and together they will reflect the diversity of the area

Advisory Board members list

John Mathers, Design Council – Chief Executive

Deputy chair

Mat Hunter, Design Council – Chief Design Officer and Director of Challenges

Pauline Armour, Southwark Public Health Directorate - Interim Head of Service: Early Help

Gemma Bull, Save the Children - Head of Innovation

Dr Hilary Cass, Royal College of Paediatrics and Child Health – President

Rosie Dalton-Lucas, Southwark Public Health Directorate – Health and Wellbeing Manager

Jenny Deeks, Coin Street Community Builders – Head of Family and Children's Centre

Angela Donkin, University College London Institute of Health Equity – Senior Advisor

Dr Grenville Fox, King's Health Partners – Child Health Clinical Academic Group (CAG) Leader, and Guy's and St Thomas' NHS Foundation Trust - Consultant Neonatologist and Clinical Director Children's Services

Ed Gardiner, Warwick Business School - Behavioural Design Lead

Jackie Harrop, Centre for Excellence and Outcomes in Children and Young People's Services - Regional Associate: London and the South East

Chris Howroyd, Design Council - Head of Programmes

Rashid Igbal, The Children's Society – Deputy Director, Children and Young People

Carmel McConnell, Magic Breakfast - Chief Executive and Founder

Sean Miller, Nonon – Founder and Director

Dr Abdu Mohiddin, Lambeth Public Health Directorate – Consultant in Public Health

Sophia Parker, ESRO - Associate

Michael Ridge, Frontier Economics - Board Director

Oliver Smith, Guys and St Thomas' Charity – Director of Strategy and Innovation

Ruth Wallis, Public Health Directorate – Joint Director of Public Health for Southwark and Lambeth

Dr Ingrid Wolfe, European Centre on Health of Societies in Transition – Research Fellow

Safeguarding and data protection policy

The Knee High Project

Safeguarding and Data Protection Guidelines

The following document outlines The Knee High Project team's approach to safeguarding and data

This document has been developed with the Design Council who are coordinating the Innovation Unit who will be conducting the majority of the research, and the Lo of Southwark and Lambeth who will be involved in the recruitment and engagement

Participants in this research will have the confidentiality agreement explained to them in the

Researchers conducting observations will be alert to any signs indicating that the child is uncomfortable with the research process, including behaviours that appear to make obser difficult; this should be taken as a tacit retural to be observed.

nurruer.

Purpose of research —To explore opportunities for new solutions which would make a lasting positive difference in a child's early work.

htid's earny yeurs ding – Guy's and St Thomas's Charity r **ethnographic approach –** To get a real and in-depth understanding of life as a parent

Information & Consent Form for Research - Adult

The research is to be conducted by the Innovation Unit on behalf of the Design Council as part of The Knee High Project.

For further information about your interview data, or if you have any concerns about the research you would like to discuss please contact:

This research is about building a rich picture of the world from family's rills research is about building a first picture or the word trom lating's perspectives. The aim of the research is to discover new ways to support children's early years' development. For example, this might be through improving existing services, creating new ones or creating new kinds of products.





Innovation Unit



Why have I been chosen?
Clearly explain the rationale behind segmentation and research priorities
What is required from me the parent and my child?
What is required from me the parent and my child?
Do I have to take part?
This is an invitation to be invoked, not an obligation
Who do I consult for a second opinion?
Explain the relationships between project team, and pass on details of So team, and pass on details of Southwark or Lambeth PC







The research is strictly confidential and anonymous as set out by the Market Research Society Code of Conduct. This means that we will not share information about you with others in a way that they can recognise you. The information researchers are given will be used to inform a report and presentation that will highlight opportunities for design to make a difference in early years development. In this report some of the things you tell us will be grouped with other people's experiences and shared with a variety of stakeholders. All names will be changed and if any photos or video are used faces will be blurred to ensure anonymity in this report. Participants must be aware that in the case of a legal demand for evidence, any confidentiality and anonymity may be subject to change.

Interview tapes and transcripts will be held in confidence. Tapes, transcripts and notes will be coded. Participant names, codes and collected material will be securely stored by the Innovation Unit. They will not be used other than for the purposes described above and third parties will not be allowed access to them (except in the case of a legal demand for evidence).

Recording and Photography consent

During the day we will use cameras and audio recording equipment that allow us to capture conversations accurately. This data will only be used by researchers and will not be shared with anyone else, unless you give special permission at the end of the day.

I voluntarily agree to participate and to the use of my data for the purposes specified above. I can withdraw consent at any time during the research.

☐ I agree to the use of recording equipment ☐ I do not agree to the use of recording equipment

Adult 2

Signature: ☐ I agree to the use of recording equipment ☐ I do not agree to the use of recording equipment

Community engagement materials



Understanding life as a person under five

The Knee High Project will be working with families across Southwark and Lambeth to understand what would improve the health and wellbeing of

and January will help us to understand

We'd love you to be involved We want to make great things happen and we need your help.

kneehigh@designcouncil.org.uk

Here are three options for getting involved:

1 Be a researcher We are offering you the opportunity to receive some **free research training** over the next two months. You will then be invited to conduct an interview with the support of professional researchers.

There are limited places, so please send

If you or your family have experience bringing up children in their early

3 Be a connector

We would really appreciate your

support getting this project to reach families across both boroughs. If you could help us spread the word, tell us

who we should talk to and where we

2 Be heard

1	Be a resea	rcl	ier
	We are offering a limited number of places for some free research training over the next two months. This is an exciting opportunity to learn new skills and make a difference.		
	You will then be invited to conduct an interview with the support of professional researchers.		
2	Be heard		
	If you, or your friends and family, have experience of bringing up children in their early years, we really want to hear from you.		
3	Be a conn	ect	or
	We would really appreciate your support getting this project to reach families across both boroughs.		



Are you a child under five? A parent of a child under five? Someone who spends time with children under five? If so, we need you.

The Knee High Project will be working with families across Southwark and Lambeth to understand what would improve the health and wellbeing of any child under five years of age, including during pregnancy.

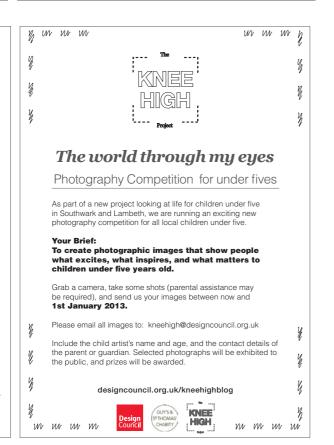
The information gathered between now and January will help us understand where the opportunities are for giving every child the best possible start.

to make great things happen and we need your help.

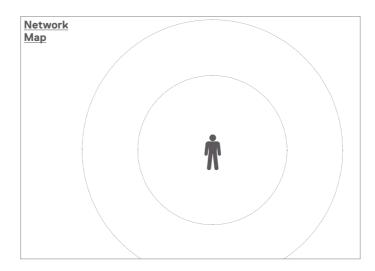


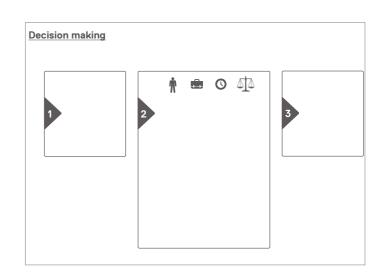
should go, then please get in touch. kneehigh@designcouncil.org.uk

07539 946 463 designcouncil.org.uk/kneehighblog



Ethnographic research tools





	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							
Night							



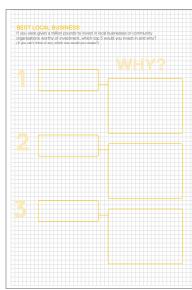


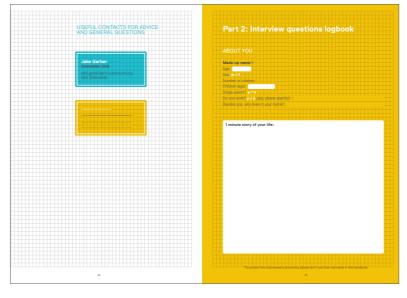


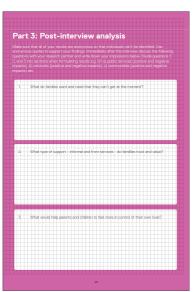
Community researcher tools

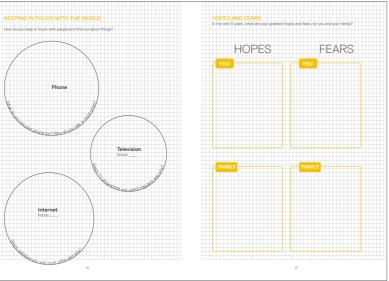




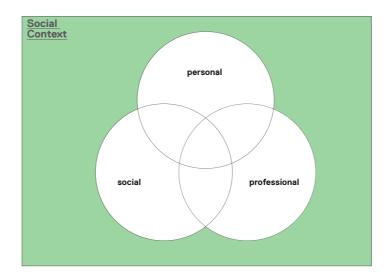


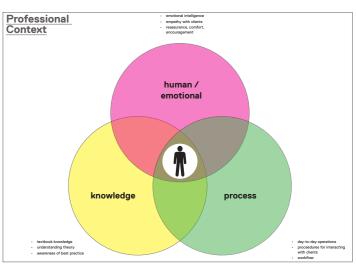


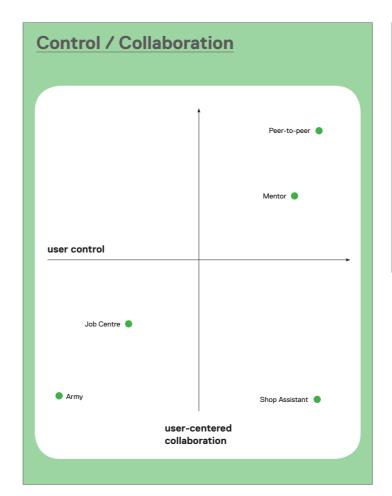


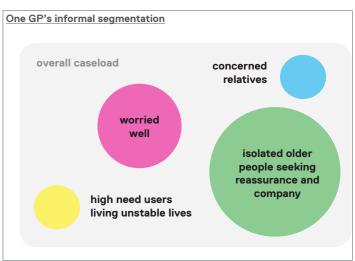


In-depth interview tools

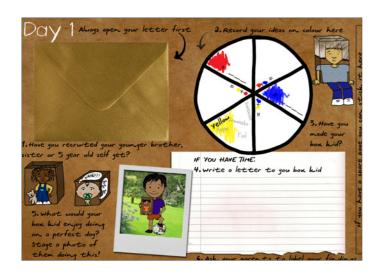






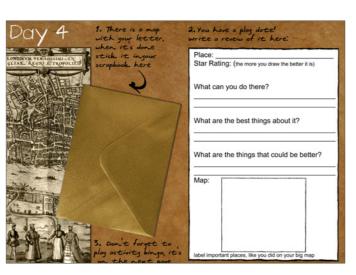


Child-led research tools













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