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**Published paper**
Exploring the impact of groupwork and mentoring for multiple heritage children’s self-esteem, well-being and behaviour

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Exploring the impact of groupwork and mentoring for multiple heritage children’s self-esteem, well-being and behaviour

Abstract

Findings are reported from a study of an innovative Multiple Heritage Service in Sheffield (UK) which provides, inter alia, individual mentoring for young people and school-based group sessions on cultural heritage, dealing with racism and enhancing well-being. Groupwork, undertaken between November 2005 and December 2006, was evaluated by a before/after design with 43 children aged from eight to fifteen attending five different groups (response rate 77 per cent), using three well-established and validated measures. There were improvements on the Rosenberg Self-esteem Scale from 31.415 to 33.024 (p =0.005) with more improvement among younger children and boys (p=0.004 and p=0.001); and well-being as measured by the GHQ12 improved from 1.460 to 0.8378 (p=0.111) with more improvement among older children (p=0.026). On the third measure, of problem behaviour (the Strengths and Difficulties Questionnaire) there was an improvement from 12.4 to 12.1 (p=0.716) but there was no improvement at all for girls. Mentoring was evaluated by telephone interviews between June and October 2006 with 14 mothers whose children had just completed, or were nearing completion of, mentoring (response rate 70 per cent). Overall the mothers’ evaluations were highly positive: two-thirds commended the service on the positive impact on their children’s well-being and happiness (including all the mothers of daughters); a half reported positive impacts on identity; mothers commended the positive role model effect same-sex mentors had on their children’s behaviour; but only a third said mentoring had boosted their children’s self-esteem.

Introduction

‘Multiple heritage’ or ‘mixed race’ is one of the fastest growing ethnic categories in British society and because of its high concentration in the younger age groups, is set to expand rapidly in the next decade (Aspinall, 2000). As recently as a quarter of a century ago Benson (1981:1) was able to claim that the then tiny but unenumerated proportion of mixed race children were ‘the exception that proves the rule of ethnic differentiation, the outcome of deviation from a statistical and cultural norm’. This is now no longer the case and the 2001 Census has provided detailed demographic data on Britain’s multiple heritage population differentiated between White / Black Caribbean, White / Black African, White / Asian and Other Mixed.

There is a growing awareness of the unique situation occupied by people with Multiple Heritage. Nevertheless, there is an acknowledged lack of research on multiple heritage in the UK (Ifekwunigwe, 2001). Most of the British empirical
research is small-scale (for example, Tizard and Phoenix, 1993, 1995; Christian, 2000). There are some larger scale studies (for example Tikly et al., 2004) but there is an absence of explicit attention to Multiple Heritage issues in discussions of race even in major studies of ethnicity such as the Fourth National Survey of Ethnic Minorities (Nazroo, 1997). This may be partly because of the very recent growth in numbers and partly because of the lack of homogeneity in Multiple Heritage: its delineation is not substantively oriented in terms of belonging to a specific ethnic group or culture, but instead is categorically oriented in terms of belonging to a combination of any cultures. Implicitly this can be construed in a negative context, of not belonging exclusively to one ethnic group and thus being an outsider, whereas an equally valid representation is much more positive, in terms of multiple membership of different cultures or even as having a cosmopolitan cultural identity (Aspinall, 2003). The research which has been undertaken gives more credence to the more negative of these two classifications as can be seen from the following review.

They suffer disproportionately from social exclusion
This is even in comparison with other minority groups. They have a higher prevalence of risk factors including poverty, psychological ill health, unemployment and family breakdown and they are over-represented on all collected measures of social exclusion: school exclusions; looked after children; key stage attainments; criminal justice system and substance misuse (O'Neale, 2002; Sinclair and Hai, 2002; Prescott-Clarke and Primasteta, 1999). Information on well-being is sparse and there are only a small number of mental health promotion studies which are directly concerned with socially excluded groups (EPPI-Centre 2001).

They experience high levels of family breakdown
They are up to 8.5 times more likely to enter care than either White, Afro-Caribbean or Asian children (Chand, 2000), are over represented in foster care (Moffatt and Thorburn, 2001) and more likely to be living with lone parents (Parker and Song, 2001; Fatimilehin, 1999). The frequent movement in and out of lone parenthood suggests that large numbers might also live in informal or formal stepfamilies (Joseph Rowntree Foundation 1998; Office for National Statistics, 1998). They therefore may experience often-changing levels and types of family support.

They under-achieve in school attainment
Reported rises in achievement for most ethnic minority groups are not shared by this group, where the trend is worsening (Tikly et al., 2004). Local reports confirm this and also show that there are important variations. The Asian/White group for example, has above average achievement (Sheffield Education Directorate, May 2002).

They experience distinct patterns of racism
They often have unique patterns of identity formation and are subject to forms of discrimination that cannot be addressed within existing conceptions of ‘race’. They fall outside dominant racialised categories and are often profoundly and hurtfully misrecognised by others, and endure what Parker
and Song (2001) call the ‘what are you?’ question. They can face suspicion and distrust – and indeed overt racism – from within their own families (Barn and Harman, 2005). Their unique needs can become invisible and they clearly can be subject to prejudice from both Black and White groups (Alibhai-Brown, 2001). They share the negative evaluations, low expectations and negative stereotyping experienced by most Black pupils in schools (Sewell, 1997; Tikly et al., 2004).

But there can be positives too
As noted above, this group can also enjoy the potential for multiple allegiances and identities; and dual identification and cosmopolitan environments are both associated with a positive sense of identity (Fatimiliihan 1999). Tizard and Phoenix (1995) indicate that positive racial identity is associated with attending a multi racial school and having a Black and mixed peer group. It is clear that issues are complex there being a wide variety of identities including those that are both Black and White.

Methods

This paper reports on an evaluation of the Sheffield Multiple Heritage Service which is part of a larger project investigating the lives and experiences of multiple heritage young people in Sheffield. Sheffield is a large English city with a population of around half a million with a similar proportion of White population to England as a whole (91 per cent). Sheffield’s multiple heritage population is slightly higher than the national average (see Table 1). Because of its young age distribution, Sheffield’s multiple heritage school population is around 2950 (3.8 per cent) over half of whom are White / Black Caribbean.
has published an information pack, ‘Celebrating our Rootz’ (sic) for young people; runs training courses for parents, carers and educators; has a carers and parents group; and has a management committee entirely comprising young people. The young persons’ management committee is central to the running of the service. It meets monthly and has the following functions: involvement in staff recruitment and selection; feedback to service managers; consultation on policy proposals; and deciding on activities to be undertaken in the school holidays.

The study was funded by the Sheffield Health and Social Research Consortium (SHSRC), an independent research body, funded by contributions from the University of Sheffield, Sheffield Hallam University, Sheffield NHS Trusts and Sheffield City Council. The research funding had no link with the Sheffield Multiple Heritage Service and there are no conflicts of interest associated with the research study. The study was given ethical approval by the North Sheffield NHS Ethics Committee and gained research governance approval from the University of Sheffield and SHSRC. Informed consent was received from all participants in the research.

Evaluating the Service

Groupwork and mentoring, the two main provisions of the Multiple Heritage Service examined here, are very different in nature and require different methodological approaches in their evaluation.

Groupwork

The groupwork is pre-planned, timetabled well in advance, tightly structured, delivered via the same modules for all groups and has the specific aim of raising self esteem. It requires considerable consultation between the Multiple Heritage Service, school-based mentors, parents and young people in order for the groups to run, and prior written parental permission is obtained. Thus it is suitable for a routinised research procedure, where a rigorous before-after psychometric procedures can be undertaken. In addition to measuring self-esteem, two other outcome measures covering well-being and levels of problem behaviour were also used in the study.

Self-esteem

Self-esteem itself is a well-explored construct: it can be raised by appropriate interventions (Bagley and Young, 1998) and is measurable in both global and specific terms with instruments in widespread use with high levels of reliability and validity (Bagley and Mallick, 2001). The most widely used and comprehensively validated of these is the Rosenberg Self-esteem Scale
which has the advantage of brevity (10 items), is easily understandable and is robust in terms of construct, predictive and convergent validity (Butler and Gleeson, 2005). The items cover the extent to which the young person feels he or she: is a person of worth; is a failure; has a number of good qualities: is able to do things as well as most other people; does not have much to be proud of; has a positive self-attitude; is satisfied with him/herself; wishes s/he could have more self respect; feels useless at times; and thinks s/he is no good at all. Each item is scored from one to four (strongly agree to strongly disagree) and the scale has a range from 10 to 40 with 40 equating to the highest levels of self-esteem. Bagley and Mallick (2001) identified UK norms for school pupils of twelve years and over: the community norm score is 29.8 with a standard deviation of five. Several American studies have identified higher levels of self-esteem on the Rosenberg scale in African American (including multiple heritage) than European American adolescents (Brown et al., 1998; Carlson et al., 2000; Connor et al., 2004; Phinney et al., 1997).

**Well-being**

Well-being was measured by the twelve-item General Health Questionnaire (GHQ12), an instrument designed to detect possible psychiatric morbidity in the general population (Goldberg and Williams, 1988). It is the most widely used measure for comparative purposes in non-psychiatric studies where the main purpose is to detect non-severe morbidity in mental health (Banks, 1983). Over 90 independent validation studies have been reported in 15 countries, including the 13 to 18 age group. The 12 items can be completed in two minutes and cover the following areas over the past four weeks: ability to concentrate; loss of sleep; feeling of playing a useful part in things; feel capable of making decisions; feel constantly under strain; feel unable to overcome difficulties; able to enjoy day-to-day activities; able to face up to problems; feeling unhappy and depressed; losing self-confidence; thinking of self as a useless person; and feeling reasonably happy, all things considered. Each item is scored on a four-point scale, encompassing the equivalent of ‘not at all’, ‘no more than usual’, ‘rather more than usual’ and ‘much more than usual’, with a score of zero for an item being the most positive outcome. For aggregation purposes these are usually converted into binomial scores with the two most positive responses both counting as zero and the two most negative as one. Thus the best possible overall scale score is zero and the worst is twelve.

A score of four or above is a threshold to identify possible psychiatric disorder (McMunn et al., 1998). There are substantial gender differences in the distribution of scores with nearly twice as many girls as boys aged thirteen to fifteen scoring more than four, but there was no clear association among income quintiles or deprivation indices (Sproston and Primatetsa, 2002).

**Problem behaviour**

The most commonly used instrument for detecting behavioural, emotional or relationship difficulties for young people under the age of sixteen is the Strengths and Difficulties Questionnaire (SDQ) (Doyle, 2002). It comprises five, five-item sub-scales, four of which are used to provide the overall SDQ domain score: emotional symptoms (worry; unhappiness; nervous; fears and
feeling scared; head-aches, stomach-aches and sickness); conduct problems
(get angry; do as I am told; fight a lot; am accused of lying; take things that
are not mine); hyperactivity (restless; fidgeting; distracted; thinking before
doing things; finish what I am doing); and peer problems (usually on my own;
have one or more good friends; liked by peers; picked on by peers; get on
better with adults than peers). Each item is scored on a three-point scale –
‘not true’, ‘somewhat true’ and ‘certainly true’ – with zero being the most
positive and two the most negative response. This yields a 40-point overall
scale with the normal range in self completion questionnaires identified as 0-
15, borderline as 16-19 and abnormal as 20-40 (Goodman et al., 1998).
Normative data from an Office for National Statistics national survey on young
people’s health indicate around 10.5 per cent of young people aged 11-15
years having abnormal responses, with a higher percentage among boys than
girls (12 per cent compared with eight per cent) and that prevalence of
abnormality is inversely related to social class as measured by both parental
occupation and income (Doyle, 2002). In a national study of young people’s
mental health by ethnic group, those identified as Black had the highest
scores (about two per cent higher then whites) and with the category including
multiple heritage being marginally higher than average (Meltzer et al. 2000).

Questionnaires were administered before the first and after the last groupwork
sessions for all groups run by the service where the project researcher was
able to attend. Group outcomes were compared using both parametric (t-test)
and non-parametric (Wilcoxon Signed Rank test) statistical tests. The
Wilcoxon test is the most parsimonious and robust and its findings are
reported here for the overall scales. All measures were computer using SPSS
12 for Windows.

Mentoring

Mentoring is completely different to groupwork: it is undertaken on a one-to-
one basis and is tailored to the individual circumstances of the young persons
and their families. Perhaps the most important goal of mentoring is to enable
young people to develop their own strategies for dealing with racism and
going/getting out of trouble. Therefore mentoring depends for its success or
otherwise not upon a pre-determined curriculum, as in groupwork, but on the
quality of the relationships between young person and mentor and on the
mentor’s ability to utilise their generic professional skills in highly
individualistic circumstances relating to each young person’s unique needs.
Therefore, because of the wideness and non-specificity of its aims, the
mentoring could not be evaluating using standardised, pre-specified, before-
after tests. Instead, more qualitative, semi-structured telephone interviews
were conducted with parents whose children had just completed, or were
nearing completion of, mentoring.

It is noteworthy that this article does not report in any detail the verdicts of the
young people themselves. There are two reasons for this. The first is that the
views of young people who had completed both the groupwork and mentoring
were universally positive. This is not surprising because both activities were
voluntary and were designed to be ‘fun’. Moreover, the groupwork took them out of their normal lessons; and most of the mentoring involved visits to places such as bowling alleys. Additionally, both types of activity took place over several sessions and it is likely that anyone not enjoying them would drop out in the early stages. The second reason is perhaps more important. A major element of the research project of which this evaluation forms a part, comprises in-depth and lengthy qualitative interviews with young multiple heritage people on their lives in general, their sense of identity and their strategies for dealing with the exigencies of life. It is in this part of the research, not yet completed, that the voices of the young people will be heard.

Results

**Groupwork – quantitative analysis**

A total of 56 young people attended these groups, all of whom completed the initial questionnaire. Both initial and final questionnaires were administered to all the 43 of these who attended the last as well as the first session, giving a response rate of 77 per cent of those initially attending. Nine groups were studied between November 2005 and December 2006, each lasting five weeks, covering eight schools: two primary and six secondary. There were 22 females and 21 males; 13 were aged eight to eleven, 16 were twelve years old and 14 were aged thirteen to fifteen. Twenty-five participants identified their ethnicity as either Caribbean-White (23) or Caribbean (2) and almost all the others (16) classified themselves as either ‘Other Mixed’ or ‘Other Black’ except for two who identified themselves as Asian-White and Yemeni (see Table 2). Sixteen (39 per cent) lived with both their mother and father, twenty-three (56 per cent) lived with their mother but not their father, one lived with father and grand-parents, and one just with grand-parents.

**Self-esteem**

The average score of the Sheffield sample on the Rosenberg Self-esteem Scale before group work was 31.4 and after group work was 33.0 (p=0.005) (see Table 3). This indicates that low self-esteem was not a problem for these young people. Younger children started from a higher base and showed more improvement than older children (p=0.001). Similarly boys scored higher than girls on both occasions and the extent of their improvement was significantly greater (p=0.004). The highest level of improvement in individual items were: ‘all-in-all I am inclined to think I am a failure (p= 0.003) and ‘I wish I could have more respect for myself’ (p=0.025).
Well-being

Pre groupwork, the Sheffield multiple heritage sample had higher than average percentages above the threshold for possible psychiatric disorder (17.7 per cent of boys compared with 7 per cent nationally and 15 per cent of girls compared with 13 per cent nationally) but the percentages were lower than the national average after groupwork (zero and 10 per cent respectively). The average score before group work was 1.5 and afterwards was 0.8. This improvement was not significant on the binomial score scale but was significant (p=0.047) on the four-point based aggregate scale (see Table 4). The over twelves started off worse than the under twelves, but overtook them in improvement (p=0.026 on the binomial and p=0.036 on the four-point scale). Boys started with a more positive average than girls (a finding which is common in mental health surveys) and achieved a larger but non-significant improvement. The highest level of improvement on individual items was ‘been losing confidence in myself’ where there was a whole sample reduction in the four-point scale mean from 0.8 to 0.3 (p=0.001), and an even larger reduction from 0.6 to 0.1 (p=0.05) among the boys. One other item had a significant whole-sample overall difference; ‘being able to concentrate on what I am doing’ from 1.0 to 0.7 (p=0.05). Overall, the group work can be seen to be highly successful in raising the subjective well-being of boys, particularly in relation to self-confidence. It also succeeds in raising the subjective well-being of girls, but to a lesser extent, and from a less positive starting point.

Problem behaviour

It is noted above that the Strengths and Difficulties Questionnaire (SDQ) has five sub-scales, four of which are used in the overall scale. None of the before-after differences for any of the sub-scales was significant but one item in the only sub-scale not used in the global SDQ score, the prosocial scale, did have a highly significant difference after groupwork. This was ‘I usually share with others (food, games etc)’ where there was a 0.3 improvement (p=0.005).

While none of the findings on the global SDQ are statistically significant it can be noted that boys had positive outcomes on this instrument both in terms of threshold and mean scores just as they did on the other two instruments. Girls on the other hand had no overall gains in mean scores and even had an increased negative outcome on the threshold. So the groupwork was not as successful for girls as boys on this as well as the other two dimensions. However, it does need to be noted that these young people’s scores were not in the problem ranges.
Mentoring – parents’ views

Fourteen telephone interviews took place in summer and early autumn 2006 with parents (in all cases mothers) of fifteen young people who had just completed or were near to completion of mentoring (11 and four respectively). None of these children had been members of the groups reported on above. This gave a response rate of 70 per cent of the 20 parents who had been invited to take part. Most of the children were aged 10 to 15 years but one was five years old. There were 11 boys and four girls: this is representative of the mentoring service as a whole which is seen as being needed more by boys than girls. Almost all the mothers said that they lived in predominantly White areas, with most in social housing estates where their children were often subject to bullying because they ‘stood out’. They were sometimes not fully welcome either in areas with predominantly ethnic minority residents. For example, one mother said her sons had been spat at (by men not by teenagers) when they went to visit their father in a predominantly Muslim area, presumably because of their multiple heritage identity. In this case, the children seemed isolated from both communities because they did not fit into either. Most of the mothers believed that their child had been referred to the mentoring service because of behavioural issues in school, including getting into fights and being seen by teachers as disruptive.

Mentors and mentoring

In some cases the mentoring had been relatively intensive and had taken place over six to twelve weeks and in others it had been spread out over a longer period, up to a year for two young people. Most of their children had been referred to the service through their school, although some had been referred through their health visitors or social services. Most of the interactions between the mentor and child involved either meeting at school and having ‘chats’ (around a third), or going on more energetic activities, such as bowling, golfing, visiting the local market or playing snooker (around a third). Bowling was the favourite activity.

The ethnicity of the mentor was seen as important by most mothers in terms of an ability to appreciate the difficulties that their child was facing and in advising on strategies for dealing with racism. In this context it was the fact that the mentor was of multiple heritage that seemed most important rather than whether they had precisely the same ethnic identity as the child.

For the mothers the gender of the mentor was often as important as, or even more important than, their ethnic identity, particularly for boys. Nearly all the mothers of sons were grateful that they were having regular contact with a man, because the fathers were almost always absent or else infrequently in contact. One mother said that the male mentor was acting as a ‘role model’ for her son and another said ‘I deliberately asked for a man as my son would
have not been interested in a woman, [she] would be seen as interfering. [My son] has a level of respect for a man who listens to him'.

The gender issue was not confined to boys. One mother was particularly complimentary about the female mentor who had worked with her daughter. She believed that her daughter’s idolising of popular (Black) music artists such as Beyonce and Jamelia influenced her acceptance of her mentor who had a fashionable and well-groomed image. The mother also even thought that the mentor’s ethnic identity would not have mattered to her daughter so long as she could identify with the mentor in terms of fashion and popular culture.

Most mothers did not know very much about what their child and the mentor discussed. Many said that they believed their children’s relationship with their mentor was a private affair, and they did not wish to interfere by either getting involved in the sessions or by quizzing their children about what had happened. They did report, however, that they had the opportunity to speak to the mentor in order to clarify what had taken place or be informed if anything particularly problematic had come up. In some cases this was done by a pre-arranged monthly phone conversation. In these conversations they were able to brief the mentor on what was happening in their child’s life. Sometimes the mentor also briefed the mother about what was happening in school: ‘[mentor] visits the school then rings me up to fill me in on what has been said’. All mothers reported that the mentor said they would get in touch as soon as possible if something serious came up in their sessions with their son or daughter.

Many of the mothers were not entirely clear whether the main focus of the mentoring service was on their child’s multiple heritage identity or whether it was more specifically connected to issues around the child’s behaviour. One commented on the lack of information on the purpose of the service provided for the parents, as she was confused whether it was intended to address behavioural problems or multiple heritage issues.

Approximately half of the mothers stated that their child had issues with the way they were treated by others because of their skin colour, and that the mentor had helped them with this. This was clearly evident in two cases. The first was a girl who had been consistently asking questions and expressing concern about her background prior to contact with the service and became much more comfortable with her multiple heritage identity after the mentoring sessions. The second was a teenage boy who was bullied because he had much darker skin than his brother, who was also multiple heritage. After the mentoring sessions he appeared more confident in his identity, and it did not seem to be causing as much friction at home as before. Interestingly, the ‘shade’ of skin tone was an issue that came up more than once in relation to whether the child could ‘pass’ as either Black or White, with the mothers reporting that children with neither very dark nor very light skin felt the most pressure and often perceived themselves as not accepted by either Black or White peers.
On the other hand, some mothers believed that their child’s identity had actually *not* been the main problem, or in some cases even a problem at all, and that rather they had been referred to the Multiple Heritage Service only because of their behavioural problems. One mother commented that the service ‘has had a positive influence but my son’s behavioural problems were never really connected to his identity’. Another remarked that the mentor seemed to be dealing more with anger management issues than multiple heritage.

**Outcomes**

Mothers were asked about the impact the mentoring had on their child’s well-being, self-esteem and confidence in their identity. Two thirds commented on the positive impact the service was having on their child’s well-being and happiness. One mother remarked that her son was a lot calmer now, and was learning the techniques to walk away from a confrontation and another said that her son seemed a lot happier since his contact with the service. All the mothers of daughters made positive comments: one said ‘she felt special having someone else to go into school and give her attention’ whilst another remarked on how her daughter now seemed more confident in herself and her hopes for the future. Yet another remarked that she had seen a change for the better in her daughter, and that she had ‘a much more positive outlook on herself and life in general’ as a result of contact with the service. The same mother commented that ‘my kids have loved every single minute of it’, especially at a Multiple Heritage Service barbeque when there were opportunities to meet other children from similar backgrounds.

Only a half of the mothers reported that the mentoring had a positive effect upon their child’s confidence in their identity. This is not necessarily a criticism because, as noted above, around a half of the children were seen by their mothers as not having any problem with their identity anyway. Among positive comments were the following: ‘it has had a positive influence’; ‘has boosted my son’s confidence greatly’; and ‘she knows more about her heritage and background now, always used to be down on herself’. Only five – just over a third – of the mothers said that the mentoring had boosted their child’s self-esteem. In three of these cases a high level of improvement was reported: ‘Has really boosted one of my sons’ self-esteem as he has had the most difficulty’; ‘I can see my son’s self-esteem has risen: [he] acts more confidently’; and ‘boosted his self-esteem visibly, even [the] school have noticed: not 100 per cent but a lot better than in the past’.

Overall, mothers’ verdicts on the outcomes of the mentoring were very positive and the service was seen as performing a useful function: ‘I think this is a good idea, otherwise kids who are not at school or who have been excluded are just stuck at home or out on the streets’. The commitment of the staff in their dealings with the children, including their reliability and their dedication (for example, always honouring their appointments, sometimes even calling beforehand to make sure it was still a convenient time) was something that stood out in all of the interviews. One mother even joked that
she would liked to have kidnapped her child’s mentor so that they ‘could have him all to themselves’. The Multiple Heritage Service has had a profound influence on some families, with one mother saying that the service had ‘done wonders’ for her son, and another remarking that ‘what they have done has been brilliant for us as a family’ and that ‘we wouldn’t be able to be where we are today without them’. Another mother said that the service had ‘worked wonders with the children, brought them out of themselves’ and that she would recommend the Multiple Heritage Service to anyone. Perhaps the most complimentary verdict was about the personal interaction between mentor and child: ‘if driving past, would call in; my sons’ faces would light up when they saw him’. In summary, all the mothers interviewed remarked that the service did a good job, and that they supported its existence, and that what was needed was actually a bigger, wider reaching service.

**Criticisms**

Mothers were probed on any aspects of the service with which they were critical or dissatisfied. The largest dissatisfaction, raised by most mothers, was that the service was time-limited and had come to an end: ‘Worst bit? None – except that the service is finished’ and ‘would have preferred more often and to have gone on for longer’. A general comment in the majority of the interviews was the wish that there were more workers available, so that the children could have contact with the service over longer periods of time (particularly as a couple of mothers reported on the deterioration of their child’s behaviour since contact with the service had ceased).

At a more substantive level there were four sets of issues which emerged from the interviews. The first relates to why and how referrals are made to the service. The mothers often reported they thought that a child could only be referred if he or she was having behavioural difficulties at school. One mother expressed this rather pungently: ‘it had to get to crunch time before the service was offered’. Another stated that she had been asking for help for her son for a long time, and it was not until his behaviour became so disorderly at school that the Multiple Heritage Service was involved. On this occasion it appears to her that the service was ‘off limits’ until her son’s behaviour ‘got bad enough’.

On more than one occasion it appeared that access to the service through a referral for behavioural problems from the formal channels of education or social services was problematic because it risked alienating children who needed help but were not deemed sufficiently disruptive. There was a confusion among the mothers over who was allowed to access the service, and on what grounds. In one interview a respondent commented that whilst her son had had access to the service, it had not been offered to her daughter who was displaying similar issues with regard to her multiple heritage identity, and whom she believed would have benefited greatly from the service. This was echoed by another mother who commented on how mentoring had been offered for her daughter but not for her son, and that she was unsure how
much to push for her son’s inclusion, saying that ‘If they are trying to make it inclusive, then it’s important that it is’.

The second issue relates to whether the service should be specifically directed at the child or more generally at the family. This was a question asked of all mothers, partly because the Multiple Heritage Service management is considering widening the mentoring remit to include other family members: at present it is focused predominantly on the referred child. Mothers’ views on this were split, with four wanting a more family-oriented service, six explicitly wanting the service to stay centred on the child, and the other four not having an opinion. The following views were expressed by mothers who wanted the service to stay child-specific: ‘Am very keen I am not involved and this is my son’s private time to talk in confidence’; ‘[am] happy with it being done at school and me being not too involved’; and ‘no, am very happy with it all being focused on the children’.

On the other hand, one respondent was keen to be more involved with the process, saying she wished she had been kept more informed of her daughter’s meetings so that she could either reinforce any particular messages from them, or build upon what had been said. Another mother echoed this: ‘it would have been nice to have more contact with the service: as a parent: the service seemed very separate from me’. A suggestion made by one mother was that more ‘practical’ activities could have been offered, that might have enabled the child, the mentor and the parent or parents to do things together.

A third issue raised in different ways by several of the mothers was a lack of clarity about the goals of the service in relation to mentoring. It is noted above that most of the mothers did not know whether the main focus was on identity or behaviour. One mother summarised this pithily: ‘[I] would like to have known what the outcomes, if any, they were trying to aim for and achieve. There may not have been any outcomes but [I] would have liked to been informed either way’. This leads on to the fourth issue: a lack of knowledge about the service. Not only were the mothers in general unaware of the existence of the Multiple Heritage Service before the commencement of mentoring, but several also said that the schools, social services and most other statutory and voluntary services were also unaware of its existence, for example:

[I] didn’t know anything about [the Multiple Heritage Service], it was my social services officer that put me in touch with the service, but even they had only heard of it in passing. They didn’t know any details about the service at all. [I] think it is an excellent idea for people with mixed heritage, but much better promotion is needed.

Discussion

Some of the aims of the service are not addressed here, particularly those related to improvements in young people’s educational attainment and school attendance and to reductions in school exclusions. These will be addressed in
other aspects of the study of which this is a part. The finding presented here do illuminate some of the other aims: increasing children's sense of positive identity; raising self-esteem and subjective well-being; and to a limited extent, reduction in problem behaviours.

Before discussing these it is important to contextualise them within the limitations of the research design. First, in relation to the quantitative part of the study, although the instruments used are robust and extensively validated the validity of the findings would have been enhanced if it had been possible to have repeated the measures more often, for example six months after the end of groupwork. Also a larger sample would have enabled meaningful comparisons to have been made between different multiple heritage groups and would have facilitated analysis by family structure. The main methodological criticism of such a design, however, is that the absence of a control group reduces internal validity: there is no guarantee that the observed changes are due to the intervention and would not have happened anyway. In the present study, there were nine groups in eight different schools and not just a one-off evaluation, so in practical terms these dangers are minimal. Also this before-after methodology avoids the ethical problems of trying to use matched pairs or other control conditions which would artificially deprive some children of the service. Nevertheless, a control group would have added to the study’s validity. If a subsequent study were to be carried out in a situation where there was access to a larger number of groups it would be possible to overcome ethical concerns by control group members being given groupwork at a later date

Similarly, although the response rate for mothers was high (70 per cent) there is a danger that dissatisfaction with the service might be a reason for non-response. This is potentially a serious limitation and it is important to be aware that the perceptions of the respondents might not be shared by all parents and carers whose children were mentored. Also, it is a limitation that the voices of the young people do are not represented here: it is hoped that this will be rectified in future publications.

**How successful has the Sheffield Multiple Heritage Service been?**

**Groupwork**

To recap, the groupwork can be successful in raising self-esteem, particularly for boys and younger children and in raising well-being as measured by the GHQ12 scale particularly for older children and, to a lesser extent, for boys. However, it did not have a positive impact on problem behaviour as measured by the Strengths and Difficulties Questionnaire perhaps the groupwork does not tap into this dimension.

This success in relation to self-esteem and well-being is gratifying, but further research need to be undertaken to establish whether these improvements become dissipated or whether they are the result of a step-change in the
young peoples’ perceptions arising from the service and therefore are retained. It would be valuable for the Multiple Heritage Service to explore possibilities of finding ways to enhance girls’ well-being to the same extent as has happened with boys. This is particularly important given that girls’ pre-groupwork self-esteem is lower than that of boys (albeit not in a problem range). In this context it would be valuable for local education authorities to monitor the self-esteem and well-being of pupils and to target those with problem levels to discover the nature of the difficulties they are encountering and to target support appropriately.

**Mentoring**

Here there does seem to be a positive impact on behaviour as reported by the mothers: several mothers commented on positive changes in the way their children interact with other people, deal with potentially disruptive situations and manage their anger. This again is specifically positive in relation to boys – and explicitly boys who have been mentored by men who are affirmative role models. Mentoring is also seen as positive in terms of self-esteem. Although the numbers are too small to be any more than indicative it is noteworthy that mothers of all the girls commented on how their daughters’ self-esteem had risen because of the mentoring. Issues relating to identity were more complex. Here half the young people, according to their mothers, felt fine about their identity before mentoring anyway. For the others, however, identity was a central issue in their mentoring.

It is clear that mentoring needs to be sensitive to the specificities of each individual case and tailored accordingly. At present the service is predominately child-centred and many mothers want this to continue. But others felt excluded and even a little undermined by this and wanted the service to be oriented to the family rather than to the child.

Two other important issues were raised in the interviews with mothers: referral procedures and lack of awareness in schools and health and social services of the existence of the Multiple Heritage Service. The frustration of many mothers at not being able to access the service until a crisis was reached and in relation to siblings with similar problems but less disruptive behaviour being denied the service is understandable. Similarly many of the mothers had been requesting help over a long period of time from the school, family or social workers, none of whom had apparently been aware of the existence of the mentoring service. These problems are perhaps unavoidable where demand outstrips supply and funding is limited.

**The distinct situation of multiple heritage children**

The research evidence available repeatedly indicates that Black and Multiple Heritage children face negative evaluation, low expectations and negative stereotyping in schools. They are over-represented on all measures of ‘behavioural problems’. The limited evidence in this study would seem to
support these more general findings, especially in relation to boys. Sewell (1997) has shown that when the microcosm of the classroom is studied in detail, these boys are given a raw deal. Further research has shown that teachers and schools are often ill equipped to deal positively with these children and have a muddled approach to tackling under achievement (Office for Standards in Education, 1999/2000).

This exploratory study does suggest that a service targeted to meet the distinct needs of this group in school can have a positive impact on these young people. The main targets of both the group work and mentoring, as can be seen from Boxes 1 and 2, is filling the acknowledged gap in schools around celebrating Black history, giving children of Multiple Heritage a visible and valued identity in school and dealing with the racism they encounter, particularly in the school context-from both adults and children.

It is however, noteworthy that the young people in this study did not suffer low levels of self esteem – even before attending the sessions their self esteem was higher than reported national averages. It is possible that their self esteem is independent of the value placed on them by schools and is related to other social arenas in which they feel highly valued.

Families with multiple heritage children will often face problems over and above those of other ethnic groups. they are growing rapidly in numbers and are still seriously under-researched. So there is limited understanding of the nature of their problems, a lack of experience in establishing and evaluating strategies for dealing with them and only a very limited range of services is in place for this group. Therefore it is commendable that Sheffield City Council has established a mainstream service specifically addressing the needs of multiple heritage young people and that they have encourages its evaluation. Moreover, the success of the service in this evaluation demonstrates that effective procedures for enhancing the well-being of this disadvantaged group are already available.
Table 1: Multiple heritage populations, England and Sheffield: all ages

Table 2: Multiple heritage schoolchildren: all Sheffield and groupwork sample

Table 3: Self-esteem among groupwork sample (Rosenberg Self-esteem Scale)

Table 4: Well-being among groupwork sample (General Health Questionnaire – GHQ12)

Table 5: Problem behaviour among groupwork sample (Strengths and Difficulties Questionnaire)

Box 1: Summary of group work sessions

Box 2: Summary of Mentoring
### Table 1
Multiple heritage populations, England and Sheffield: all ages

<table>
<thead>
<tr>
<th></th>
<th>England</th>
<th></th>
<th>Sheffield</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>Total population</td>
<td>49,138,831</td>
<td>100.00</td>
<td>513,234</td>
<td>100.00</td>
</tr>
<tr>
<td>White / Black Caribbean</td>
<td>231,424</td>
<td>0.47</td>
<td>3,704</td>
<td>0.72</td>
</tr>
<tr>
<td>White / Black African</td>
<td>76,498</td>
<td>0.16</td>
<td>711</td>
<td>0.14</td>
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<tr>
<td>White / Asian</td>
<td>184,014</td>
<td>0.37</td>
<td>2,085</td>
<td>0.41</td>
</tr>
<tr>
<td>Other Mixed</td>
<td>151,437</td>
<td>0.31</td>
<td>1,728</td>
<td>0.34</td>
</tr>
<tr>
<td>All Multiple Heritage</td>
<td>643,373</td>
<td>1.31</td>
<td>8,228</td>
<td>1.60</td>
</tr>
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</table>

Derived from:
http://www.statistics.gov.uk/census2001/access_results.asp
Table 2
Multiple heritage schoolchildren: all Sheffield and groupwork sample.

<table>
<thead>
<tr>
<th></th>
<th>Sheffield schools</th>
<th></th>
<th>Groupwork sample</th>
<th></th>
</tr>
</thead>
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<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>All multiple heritage children</td>
<td>2,950</td>
<td>100</td>
<td>43</td>
<td>100</td>
</tr>
<tr>
<td>White / Black Caribbean</td>
<td>1,534</td>
<td>52</td>
<td>25</td>
<td>58</td>
</tr>
<tr>
<td>White / Black African</td>
<td>207</td>
<td>7</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>White / Asian</td>
<td>560</td>
<td>19</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Other Mixed</td>
<td>649</td>
<td>22</td>
<td>17</td>
<td>40</td>
</tr>
</tbody>
</table>

Sheffield Education Directorate 2002, Report to Service Standards (Education and Social Services)
Table 3
Self-esteem among groupwork sample (Rosenberg Self-esteem Scale)

<table>
<thead>
<tr>
<th>Category (number)</th>
<th>Scale score Mean (SD)</th>
<th>Difference Mean (SD)</th>
<th>Wilcoxon Signed Ranks Test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Before</td>
<td>After</td>
<td>Z</td>
</tr>
<tr>
<td>Whole sample (40)</td>
<td>31.4 (4.9)</td>
<td>33.0 (4.4)</td>
<td>-1.6 (3.3)</td>
</tr>
<tr>
<td>Boys (19)</td>
<td>32.6 (4.1)</td>
<td>34.3 (3.9)</td>
<td>-1.6 (1.9)</td>
</tr>
<tr>
<td>Girls (21)</td>
<td>30.3 (5.6)</td>
<td>32.1 (4.7)</td>
<td>-1.8 (4.2)</td>
</tr>
<tr>
<td>12 years or under (28)</td>
<td>31.6 (4.4)</td>
<td>33.8 (4.4)</td>
<td>-2.1 (3.0)</td>
</tr>
<tr>
<td>Over 12 years (12)</td>
<td>30.9 (6.4)</td>
<td>31.6 (4.3)</td>
<td>-0.7 (3.7)</td>
</tr>
<tr>
<td>Category (number)</td>
<td>GHQ12 score</td>
<td>Difference</td>
<td>Wilcoxon Signed Ranks Test</td>
</tr>
<tr>
<td>------------------</td>
<td>-------------</td>
<td>------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td></td>
<td>Before</td>
<td>After</td>
<td>Mean (SD)</td>
</tr>
<tr>
<td>(a) binomial scoring</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Whole sample (37)</td>
<td>1.5 (2.3)</td>
<td>0.8 (1.7)</td>
<td>0.6 (2.1)</td>
</tr>
<tr>
<td>Boys (17)</td>
<td>1.4 (1.9)</td>
<td>0.5 (0.9)</td>
<td>0.9 (2.2)</td>
</tr>
<tr>
<td>Girls (20)</td>
<td>1.5 (2.6)</td>
<td>1.2 (2.2)</td>
<td>0.3 (2.0)</td>
</tr>
<tr>
<td>12 years or under (26)</td>
<td>1.3 (2.3)</td>
<td>1.0 (2.0)</td>
<td>0.2 (2.0)</td>
</tr>
<tr>
<td>Over 12 years (11)</td>
<td>1.9 (2.3)</td>
<td>0.4 (0.7)</td>
<td>1.5 (2.1)</td>
</tr>
<tr>
<td>(b) four point scoring</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Whole sample (37)</td>
<td>9.1 (5.4)</td>
<td>7.3 (4.7)</td>
<td>1.7 (4.7)</td>
</tr>
<tr>
<td>Boys (17)</td>
<td>8.5 (5.2)</td>
<td>5.8 (3.4)</td>
<td>2.8 (5.4)</td>
</tr>
<tr>
<td>Girls (20)</td>
<td>9.6 (5.7)</td>
<td>8.7 (5.3)</td>
<td>0.9 (4.0)</td>
</tr>
<tr>
<td>12 years or under (26)</td>
<td>8.6 (5.2)</td>
<td>7.8 (5.3)</td>
<td>0.8 (4.2)</td>
</tr>
<tr>
<td>Over 12 years (11)</td>
<td>10.2 (5.9)</td>
<td>6.3 (2.9)</td>
<td>3.9 (5.4)</td>
</tr>
</tbody>
</table>
Table 5:  
Problem behaviour among groupwork sample  
(Strengths and Difficulties Questionnaire – SDQ)  
(NB inverse scoring)

<table>
<thead>
<tr>
<th>Category (number)</th>
<th>SDQ score Mean (SD)</th>
<th>Difference Mean (SD)</th>
<th>Wilcoxon Signed Ranks Test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Before</td>
<td>After</td>
<td>Z</td>
</tr>
<tr>
<td>Whole sample (43)</td>
<td>12.4 (5.6)</td>
<td>12.1 (6.6)</td>
<td>0.3 (4.6)</td>
</tr>
<tr>
<td>Boys (20)</td>
<td>10.9 (4.9)</td>
<td>10.1 (5.6)</td>
<td>0.8 (5.4)</td>
</tr>
<tr>
<td>Girls (23)</td>
<td>13.4 (6.1)</td>
<td>13.4 (7.0)</td>
<td>0.0 (4.3)</td>
</tr>
<tr>
<td>12 years or under (29)</td>
<td>12.3 (6.1)</td>
<td>11.9 (7.2)</td>
<td>0.4 (4.8)</td>
</tr>
<tr>
<td>Over 12 years (14)</td>
<td>12.3 (4.7)</td>
<td>12.0 (5.0)</td>
<td>0.3 (4.3)</td>
</tr>
</tbody>
</table>
| Session 1 | Introduction to group work and ground rules  
|           | Getting to know each other  
|           | Discussions about being multiple heritage/ mixed race, what names children get called, how they feel and respond. What they want to be called etc.  
|           | Attitudes  
|           | Assumptions we all make  
| Session 2 | Racism  
|           | Racism, strategies on how to deal with it  
|           | Slave triangle  
| Session 3 | Heritage and family  
|           | Exercise to map out where they come from  
|           | Research about history  
|           | Homework to find out more about their cultures and history  
| Session 4 | Feelings and experiences  
|           | Self-expression  
|           | Role models  
| Session 5 | Hopes and Aspirations  
|           | Being valued  
|           | Feel good factor  
|           | Close and evaluation |
Box 2
Summary of Mentoring

Mentoring usually runs for six sessions over a six-month period, either in a private space in the school or else in another venue away from the family home. Each mentoring relationship is unique and tailored to the child’s needs but the following areas are central to mentoring:

- For young people to realise that they have a background to be proud of and that their ancestors have made a major contribution to the society we live in (Black history).

- For young people to feel good about themselves and that they are worthwhile individuals regardless of the problems that they may be having: just because kids sometimes get into ‘trouble’ either in or out of school, does not mean that they are bad people with no future.

- To give them strategies for dealing with racism both personal (including from people in authority or with power over them) and institutional.
Acknowledgements

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References


Sheffield City Council (2002) City of Sheffield Primary School Performance Tables: National Curriculum Results KS2. Sheffield City Council, Sheffield.


