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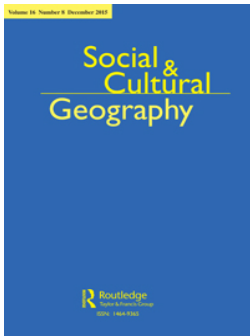
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Children's Centres as spaces of interethnic encounter in North East England

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This paper explores the role of Sure Start Children's Centres as spaces of encounter between new migrants to the UK and 'White English' residents in host communities. Children's Centres were selected as the context for the research because they serve people with common needs (families with pre-school children), and because building social capital and mutual support among parents is part of their core purpose (Department for Education. (2013). Sure Start Children's Centres: Statutory guidance for local authorities, commissioners of local health services and Jobcentre Plus. Retrieved from <http://www.media.education.gov.uk/assets/files/pdf/s/childrens%20centre%20stat%20guidance%20april%202013.pdf>). Drawing on data from semi-structured interviews conducted with service users from Black and Minority Ethnic backgrounds (recent migrants) and service users representing 'the majority' white population in two urban areas in North East England, it explores the role of ethnicity and other factors relating to migration in shaping encounters in these spaces, and considers the perceived benefits of these interactions. It finds that interethnic encounter in Children's Centres is often seen by new migrant parents/carers primarily as an opportunity to improve English language skills, meeting an additional need to that of local 'indigenous' parents/carers. It further found that new migrant parents/carers often perceived Children's Centres as an opportunity to experience a particular version of the local community, facilitating more predictable encounters than encounters in the wider host community.

Keywords: Children's Centres; micro-publics; service use; interethnic encounter; English language proficiency; policy-making

Centres pour les Enfants en tant qu'espaces de rencontre interethnique au Nord-Est de l'Angleterre

Cet article explore le rôle des Centres pour Enfants Sure Start en tant qu'espaces de rencontre entre les nouveaux immigrants arrivés au Royaume-Uni et les résidents « blancs anglais » des communautés d'accueil. Les Centres pour Enfants ont été sélectionnés comme contexte pour la recherche parce qu'ils servent les gens qui ont des besoins communs (des familles dont les enfants ne vont pas encore à l'école) et parce que la construction d'un capital social et de soutien mutuel entre parents fait partie de leur objectif principal (Ministère de l'Éducation, 2013). Puisant dans les données tirées d'entrevues semi-structurées menées auprès d'utilisateurs des services noirs ou de minorités ethniques (immigrants récents) et auprès d'utilisateurs représentant « la majorité » blanche de la population de deux secteurs urbains du Nord-Est de l'Angleterre, il explore le rôle de l'ethnicité et autres facteurs concernant l'immigration en donnant forme aux rencontres dans ces espaces et il examine les avantages que l'on peut dégager de ces interactions. Il trouve que la rencontre interethnique aux Centres

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pour Enfants est souvent vue par les nouveaux parents / gardiens immigrants comme une possibilité d'améliorer leurs compétences de la langue anglaise, correspondant à un besoin supplémentaire par rapport aux parents / gardiens « originaires » locaux. De plus, il trouve que les nouveaux parents / gardiens immigrants ont souvent perçu les Centres pour Enfants comme une possibilité de faire l'expérience d'une version particulière de la communauté locale, facilitant plus les rencontres prévisibles que les rencontres dans la communauté d'accueil en général.

Mots-clés: Centres pour Enfants; micro-publics; utilisation de services; rencontre interethnique; compétence linguistique; élaboration des politiques

Los centros infantiles como espacios de encuentro interétnico en el noreste de Inglaterra

Este artículo explora el papel de los centros infantiles Sure Start como espacios de encuentro entre los nuevos inmigrantes al Reino Unido y los residentes 'blancos ingleses' en las comunidades de acogida. Los centros infantiles fueron seleccionados como el contexto para la investigación ya que sirven a las personas con necesidades comunes (familias con niños en edad preescolar), y debido a que la construcción de capital social y el apoyo mutuo entre los padres es parte de su propósito central (Departamento de Educación, 2013). A partir de datos de entrevistas semi-estructuradas a los usuarios de servicios con antecedentes BME (migrantes recientes) y usuarios de los servicios que representan a 'la mayoría' de la población blanca en dos áreas urbanas en el noreste de Inglaterra, se explora el papel de la etnicidad y otros factores relativos a la migración en la conformación de los encuentros en estos espacios, y se consideran los beneficios percibidos de estas interacciones. Se halla que el encuentro interétnico en centros infantiles es visto a menudo por los nuevos padres/cuidadores migrantes sobre todo como una oportunidad para mejorar el idioma inglés, respondiendo a una necesidad adicional a la de los padres/cuidadores 'indígenas' locales. Se halló además que los nuevos padres/cuidadores migrantes a menudo ven a los centros infantiles como una oportunidad para experimentar una versión particular de la comunidad local, facilitando encuentros más predecibles que los encuentros en la más amplia comunidad de acogida.

Palabras claves: Centros infantiles; micro-públicos; uso del servicio; encuentro interétnico; dominio del idioma inglés; formulación de políticas

Introduction

In the UK, strained relationships between some members of different ethnic groups living in close proximity to each other, combined with broader ethnic tensions, often over local resources including housing and jobs, have seen government efforts to promote and increase 'social' and 'community cohesion' (Finney & Simpson, 2009, p. 31; Yuval-Davis, Anthias, & Kofman, 2005). Nagel and Staeheli (2008, p. 418) identify 'conflicting ideas about integration that circulate in immigrant-receiving societies – ideas, that is, about who "we" are and under what conditions others are able to become part of "us"'. They (2008, p. 416) note that 'the "social cohesion" agenda overall is marked by the assertion that the host society should define the terms of integration and that the primary responsibility for integration lies with immigrants and minorities'. Phillips (2006), in her study of residential segregation, challenges this expectation by drawing on her research findings that preferences expressed by interviewees for greater interaction with people from other cultural or ethnic backgrounds were hindered by external factors including white self-segregation, institutional racism and racial harassment. Sturgis, Brunton-Smith, Kuha, and Jackson (2014, p. 1303) suggest that previous studies which show a negative

correlation between diversity and social cohesion ‘may, in some instances, actually be picking up the effect of minority group segregation with which diversity is correlated’.

Putnam (2007) differentiates between ‘bridging social capital’ between members of different ethnic groups, and ‘bonding social capital’ between members of the same ethnic group. Focusing on US communities, he argues that increased ethnic diversity leads to lower levels of trust and social capital, and that ‘people living in ethnically diverse settings appear to “hunker down”’ (2007, p. 149). While some sources such as the Commission on Integration and Cohesion (2007) suggest that bonding social capital is a necessary prerequisite for bridging social capital to occur because individuals who are secure in their own group identity are more tolerant of those who are different from themselves, others such as Dench, Gavron, and Young (2006) argue that those tightly bound into family or identity groups ‘are more likely to hold hostile attitudes to people from identity groups different from their own’. Likewise Hemming (2011, p. 65), considering faith versus community schools, warns that ‘if creating bonds does not leave enough energy for building bridges, this may create problems for relationships with other communities’, which would affect interethnic mixing in communities.

In the UK, the social cohesion agenda in the first decade of the millennium coincided with the Labour Government’s renewed attempts to combat child poverty through Sure Start programmes, which aimed particularly to combat social exclusion of families from services, and more recently Children’s Centres, which prioritised integrated services for families (Sheppard, MacDonald, & Welbourne, 2008, p. 62). However, the role of Children’s Centres in combating child poverty and their potential significance in improving social cohesion have been overshadowed by recent restructuring of funding (the removal of ring-fenced funding for Sure Start), due to government austerity measures and resulting cuts to local authority budgets (McVeigh, 2014).

The focus of this paper is on how interethnic mixing might be facilitated in the specific context of Children’s Centres. It draws on research carried out by the author in 2007–2008 as part of an ESRC-funded project conducted in two urban Children’s Centre areas in North East England. The paper begins by reviewing academic literature on processes of migration and geographies of encounter, including the limited literature on encounter at services for families with young children, in order to provide a context for considering Children’s Centres as spaces of encounter between recent, first-generation migrants and local ‘White English’ residents.

Of the regions in England and Wales, the North East of England (see Figure 1) had the third highest percentage of population identifying as ‘white’ (White English/Welsh/Scottish/Northern Irish/British) in the 2011 Census, at 93.6%, against the national average of 80.5% (Office for National Statistics, 2012), although its Black and Minority Ethnic (BME) population, particularly non-British white groups, has grown since European Union accession since 2004. Increasing proportions of non-British white groups in the UK, and particularly in the North East of England – a predominantly ‘White English’ region – increases associations, in the public mind, of BME groups with immigration rather than with ‘indigeneity’. It also changes the relationship between ethnicity, language, migrant status and indigeneity.

Increased non-visible ethnic difference means that other factors relating to migration, besides white or non-white ethnicity, may become more dominant in the process of distinguishing between indigenous and migrant communities. One such factor may be language, meaning that issues of racism are no longer linked just to visible factors, but may now also relate to speech for example. Mas Giralt (2011, p. 342) found, in her research on young people of Latin American descent living in the north of England, that:



Figure 1. Map showing the location of the North East region of England.

'For participants with unmarked physical traits (in comparison to white British young people), their whiteness and accent-less English protects them from othering experiences'. She refers to 'silence strategies which maintain their cultural heritage as invisible to the eyes of their peers and as the preserve of their family privacy and intimacy'.

This paper will draw on interviews with first-generation, recent migrants to the UK, and 'White English' residents, to explore interethnic contact in two Children's Centres in North East England (see [Figure 1](#)). It will review the literature on geographies of encounter, including literature specific to Children's Centre settings, before outlining the research methodology, and then presenting the findings and analysing their significance to policy, particularly in the light of current cuts to Children's Centre funding.

Geographies of encounter

Migration and networks

There is a growing literature on the role of processes of migration in forming networks of 'co-ethnics' in host communities (Boyle, Halfacree, & Robinson, 1998; Johnston, Forrest, & Poulsen, 2002). Eve (2010, p. 1231) questions ethnicity as the most appropriate focus for analysing 'social integration'. He argues that it is not simply identity, cultural similarity or discrimination that accounts for networks between people from certain ethnic backgrounds, but that processes of migration, and the ties that exist or develop between people migrating from the same place, play an important role in the formation of networks of 'co-nationals':

Although not everyone takes the beaten track of established migration chains in the classic sense, few migrants are totally without prior contacts (either with locals or co-nationals) in the place of arrival. For most people these initial ties form the basis for further relations, which have an influence on where one finds work, housing and leisure. (2010, p. 1236)

Eve demonstrates that information on personal relations, including the nationality of friends and spouses, are often used as 'indicators of the "level of integration" reached', but are not treated as 'objects of investigation with their own dynamics'. He calls for 'more detailed relational data on the contexts in which relationships form' to help prevent density of relationships with co-ethnics being attributed to ethnicity itself (2010, p. 1234). Likewise, Alexander, Edwards, and Temple (2007, p. 783) suggest that BME 'communities' provide insights into the performance of citizenship and belonging 'from below', and critique policy associations of language with citizenship and belonging (2007, p. 785).

Levitt and Lamba-Nieves (2011, p. 2) attempt to 'bring culture back into migration debates', emphasising the migration of culture, including religion, ideas, political attitudes and artistic practices. They argue that it is not enough to focus solely on migrants' social networks, positions or activities, since their 'identities and actions are rich in cultural and social meaning' (2011, p. 2). They show how 'the ideas and practices migrants bring with them actively shape who and what they encounter in the countries where they move' (2011, p. 2). When exploring spaces of interethnic encounter, then, cultural factors stemming from ethnicity as well as more tangible factors stemming from processes of migration must be considered. Before turning to 'micro-publics' of encounter (Amin, 2002), and specifically Children's Centres, we explore the 'contact hypothesis'.

The contact hypothesis

The 'contact hypothesis' (Allport, 1954) holds that the best way of reducing prejudice and promoting social cohesion is to enable contact between diverse groups, thus reducing uncertainty and anxiety about encounters with difference. Wright, Aron, McLaughlin-

Volpe, and Ropp (1997) generalise the positive effect of contact, arguing that even knowing about close relationships between fellow group members and members of other groups will lead to positive attitudes about the minority group among members of the former group.

However, Valentine (2008, p. 325) identifies a 'naive assumption' that positive encounters with individual members of a BME group will be 'scaled up' to acceptance of the whole group, and warns that intergroup contact can be stressful and uncertain for minority groups, particularly where they have previously experienced marginalisation and discrimination (2008, p. 331). She differentiates 'meaningful contact ... that actually changes values and translates beyond the specifics of the individual moment into a more general positive respect for – rather than merely tolerance of – others' (2008, p. 325).

Matejskova and Leitner (2011, p. 719), from their research on interaction between Russian 'Aussiedler' immigrants and local German residents in Berlin, find that local residents can have positive attitudes towards individual immigrants, but prejudice towards the immigrant group (2011, p. 719). They observe local residents 'exempting' individual immigrants, who become 'like us', from the 'negatively connoted' immigrant group (2011, p. 734). They point (2011, p. 720) to the attractions of the contact hypothesis for urban planners in designing urban spaces to promote encounters and increase contact between different social groups in outdoor public spaces, but warn that such attempts to promote intergroup contact can lead to 'hardening of prejudice and stereotyping'. They argue that, in real-life contact between members of different social groups, 'uneven power relations are not suspended during face-to-face contact but always saturate it and exceed it' (2011, pp. 720 and 721). Wessel (2009) points out that positive attitudes towards BME neighbours can be the reason why residents chose to live in an ethnically diverse area in the first place, rather than being the result of increased contact.

Indeed, interethnic encounters are also informed through other modalities of difference besides ethnicity, including gender, social class and stage in the life cycle (Yuval-Davis et al., 2005, p. 521). Sveinsson (2009, p. 3) illustrates the intersectionality between class and ethnicity in his discussion of how the concept of class is becoming acceptable in the context of multiculturalism (drawing comparisons between migrant communities and the 'white working class'), though not in the context of inequality (comparing the 'white working class' and the middle class).

'Micropublics' and Children's Centres

Academic literature has recently moved beyond focusing on the neighbourhood scale or 'macro-processes' of encounter such as residential segregation (Phillips, 2006) to explore 'micro-scale' interaction in urban spaces. Amin (2002, p. 959) emphasises the role of 'micropublics' of everyday social interaction in 'reconciling and overcoming ethnic cultural differences', and the 'negotiation of difference' within these micropublics (2002, p. 960). He notes 'an emerging consensus that a crucial factor is the daily negotiation of difference in sites where people can come to terms with ethnic difference and where the voicing of racism can be muted'. Amin and Thrift (2002) recognise that in cities, public spaces such as streets and parks do not tend to promote 'lasting and fruitful engagement', and Amin (2002) suggests focusing on spaces such as sports clubs and community centres. Fincher and Iveson (2008) find that community centres are spaces that emphasise recognition, encouraging informal social encounters and repeat visits, rather than incidental encounters, but less organised than 'micro-publics' such as drama groups (Valentine, 2008, p. 331).

Wilson (2013) explores the 'micropublic' of the school playground, describing a space where parents are judged on their 'parenting capabilities' and 'where friendships and

acquaintances are formed' (2013, p. 627). She identifies 'spatial practices' and 'lived geographies' of parents in these spaces (2013, p. 635), where difference is constructed through 'visual indicators of difference . . . , materialities and the audible presence of foreign languages'.

Nava (2006, p. 68) includes baby clinics in a list of examples of '*local zones* – the micro publics – of the city' (specifically London), but there is no literature focusing on Children's Centres as spaces of encounter. It is therefore worth considering the core purpose of Children's Centres, in order to assess their potential as spaces of successful interethnic encounter.

Sheppard et al. (2008, p. 61) describe Children's Centres as 'the latest in a line of neighbourhood-based initiatives for family support'. The Department for Education (2013, pp. 20 and 21) defines the core purpose of Children's Centres as follows:

to improve outcomes for young children and their families, with a particular focus on families in greatest need of support in order to reduce inequalities in: child development and school readiness; parenting aspirations, self-esteem and parenting skills; and child and family health and life chances.

It states that one of the ways in which Children's Centres achieve this is by acting 'as a hub for the local community, building social capital and cohesion'. It counts 'respecting and engaging parents' as one of the key principles underpinning Children's Centres (Department for Education, 2012, pp. 1, 4); this includes involving parents in decision-making and in service delivery, and notably 'working with health visitors to build the capacity of local parents to help each other and form informal networks of support'.

Academic literature on Children's Centres and their precursors, Sure Start Local Programmes, tends to focus on the role of staff in facilitating service use. Garbers, Tunstill, Allnock, and Akhurst (2006, p. 293) emphasise that it is less helpful to identify some families as 'hard-to-reach' in relation to Sure Start Local Programmes and more helpful to recognise the onus on service providers to 'tak[e] adequate account of the needs and preferences of parents and their right to have these prioritized in sensitive access systems' (p. 295). Avis and Chaudhary (2008) explore the participation of BME families in Sure Start services and find a disparity between perceived barriers to their participation held by staff and the perceived barriers held by BME parents themselves.

By contrast, Sheppard et al. (2008, p. 61) describe how users of Children's Centre services 'can help create the culture and expectations in centres just through the processes of interaction developed over time'. They explore 'the part played by service users themselves – particularly through their informal interactions and culture – in the responsiveness of centres to higher-need families for whom secondary-level prevention is appropriate' (p. 61). They refer to service users as potential gatekeepers – 'individuals or groups who provide access to services – a role normally ascribed to professionals or service providers generally' (p. 64), and identify that:

While the children were the primary reason given by most parents for initial attendance at the centre, in general, continued attendance arose because of what the centre offered to them, as adults. (p. 65)

However, their research was conducted in a predominantly rural area with a 'very small ethnic minority population (just over 1%)', and they do not consider the ethnicity of 'gatekeepers'.

The paper will now describe the research methodology used for this research, before describing the study areas and analytical framework, and then presenting the findings of the research and discussing their implications for understanding Children's Centres as spaces of interethnic encounter.

Methodology

This paper stems from research carried out by the author in two urban Children's Centre areas in North East England. Names of the specific locations are withheld in order to protect the anonymity of interviewees. The research was part of an ESRC-funded research project carried out in 2007 and 2008, which explored the role of identity in determining parents'/carers' use of Children's Centre services. It aimed to ascertain how far minority groups' approaches to using Children's Centres are determined by the individual's own identity and the perceived identities and expectations of other service users and staff. Children's Centres and related community settings were chosen as a sampling frame for the research as spaces of potential interethnic and intercultural encounter for two key reasons. First, they serve people with similar interests and needs (parents/carers with pre-school children), and thus offer them, in addition to support from professionals, a space for social interaction and for building social capital and mutual support between parents/carers. Second, enabling mutual support among parents/carers is part of the core purpose of Children's Centres (Department for Education, 2012, p. 4), making them potentially ideal sites of encounter for those eligible to use them. Furthermore, Children's Centre management staff, in discussions with the researcher during selection of specific Children's Centres for the research, identified increasing service use by BME parents/carers as a priority, and in further interviews, they and operational staff often identified building relations between existing and potential service users as a strategy for increasing and prolonging service use (Parks & Askins, 2015).

Although the original study focused on the use of Children's Centres, rather than specifically on Children's Centres as spaces of encounter, much of the data collected from interviews with parents/carers centred on the differences between their experiences of interacting with local people in Children's Centres and their experiences of interacting with local people in the wider host community, providing the rationale for this paper. In addition, one of the selected Children's Centres offered a service named the 'Multicultural Group', aiming to attract families from a range of ethnic backgrounds including 'White English', and the centre manager was keen to know how the service name might affect the propensity of people from different ethnic backgrounds to use this and indeed other services on offer at the centre.

The empirical data selected for this paper come from interviews conducted with a total of 50 parents/carers who were using Children's Centre and affiliated services ('service users'). Thus the focus is not on barriers to accessing the services, since all interviewees were already doing this in some capacity. Their distinctive perspective allows us to explore what had enabled or driven their service use and how they perceived and valued interethnic encounters in this specific 'micro-public'. The physical spaces referred to, in which the interviews were conducted, were usually designated, purpose-built Children's Centres, but also included other buildings, such as community centres and health centres, in which Children's Centre services were delivered.

Responses are anonymised, with quoted interviewees numbered: Interviewees A1-23 lived in Area A, while Interviewees B1-27 lived in Area B (see Table 1). Thirty-two of the 50 interviewees (including all 20 BME interviewees) were female; the relatively high proportion of White English male interviewees is because the original research also explored the participation of men as a minority group in Children's Centre services. Interviewees are identified in this paper by gender (M/F = male/female), with 'BME' added where relevant. The term 'White English' is used, rather than 'White British', to describe the majority ethnic group in the population, since all members of this group

Table 1. Details of interviewees.

Interviewee code ^a (relationship to child(ren))	Age	Ethnicity ^b	Years living in the UK (years living in community if less)	English language skills ^c
A1 (Mother)	24–34	White English	Lifetime	NA
A2 (Mother)	35–44	White English	Lifetime (14)	NA
A3 (Mother)	18–23	White English	Lifetime	NA
A4 (Grandmother)	60 +	White English	Lifetime	NA
A5 (Mother)	24–34	White English	Lifetime	NA
A6 (Grandmother)	60 +	White English	Lifetime	NA
A7 (Mother)	24–34	Palestinian, Jordan (S, temp)	2	Good
A8 (Mother)	24–34	Ethiopian (AS)	4 (<1)	Basic
A9 (Mother)	24–34	White English	Lifetime (12)	NA
A10 (Mother)	18–23	White English	Lifetime (2)	NA
A11 (Mother)	24–34	White English	Lifetime (3)	NA
A12 (Mother)	24–34	Eritrean (AS)	4 (2)	Basic
A13 (Mother)	35–44	Zimbabwean (R)	8 (2)	Good
A14 (Mother)	24–34	Polish (E)	< 1	Basic
A15 (Father)	24–34	White English	Lifetime (2)	NA
A16 (Father)	24–34	White English	Lifetime (3)	NA
A17 (Father)	18–23	White English	Lifetime (3)	NA
A18 (Father)	24–34	White English	Lifetime	NA
A19 (Father)	18–23	White English	Lifetime (11)	NA
A20 (Father)	24–34	White English	Lifetime (3)	NA
A21 (Father)	< 18	White English	Lifetime	NA
A22 (Father)	18–23	White English	Lifetime (3)	NA
A23 (Father)	18–23	White English	Lifetime (5)	NA
B1 (Mother)	24–34	Indian (E, temp)	< 1	Good
B2 (Mother)	24–34	White English	Lifetime	NA
B3 (Father)	24–34	White English	Lifetime (2)	NA
B4 (Mother)	24–34	Romanian (E)	< 1	Good
B5 (Mother)	24–34	Albanian (E)	8 (2)	Good
B6 (Mother)	24–34	White English	Lifetime (2)	NA
B7 (Grandmother)	60 +	Congo (EF)	3 (<1)	Basic
B8 (Father)	24–34	White English	Lifetime (3)	NA
B9 (Mother)	24–34	Philippino (E)	8 (3)	Fluent
B10 (Father)	18–23	White English	Lifetime (< 1)	NA
B11 (Father)	35–44	White English	Lifetime (3)	NA
B12 (Mother)	24–34	Indian (E, temp)	< 1	Fluent
B13 (Mother)	24–34	Indian (E, temp)	< 1	Good
B14 (Mother)	24–34	White English	Lifetime (7)	NA
B15 (Mother)	24–34	Tanzanian (AS)	2	Basic ^d
B16 (Mother)	35–44	Ukrainian (M)	3	Good
B17 (Mother)	24–34	Polish (E)	3 (2)	Basic
B18 (Mother)	24–34	Chinese (AS)	< 1	Basic
B19 (Grandfather)	60 +	White English	Lifetime	NA
B20 (Mother)	24–34	Slovak, Romany (E)	< 1	Basic ⁴
B21 (Mother)	24–34	Pakistani (E)	12 (3)	Fluent
B22 (Mother)	35–44	Bangladeshi (E)	17 (8)	Basic ⁴
B23 (Father)	35–44	White English	Lifetime (4)	NA
B24 (Father)	35–44	White English	Lifetime (3)	NA

(Continued)

Table 1 – *continued*

Interviewee code ^a (relationship to child(ren))	Age	Ethnicity ^b	Years living in the UK (years living in community if less)	English language skills ^c
B25 (Father)	35–44	White English	Lifetime (< 1)	NA
B26 (Father)	24–34	White English	Lifetime (< 1)	NA
B27 (Mother)	24–34	Sri Lankan (AS)	3	Good

^aThe interviewee codes are used to label quotations.

^bIf further information was provided by interviewees relating to, for example, religion or nationality, this is also included here.

^cThe broad categories of basic, good and fluent were assigned by the researcher.

^dInterview was conducted via an interpreter.

identified as English as opposed to other British nationalities. ‘Indigenous’ is also used in relation to this group where interviewees had lived in the local area all their life, indicated by ‘I’ after interviewee codes. ‘BME’ is used in line with long-standing use of this term (in the UK) to include all minority ethnic (including White minority ethnic) groups and individuals (although the Office for National Statistics (2012, p. 1) refers to ‘White’, including ‘White British’, as the ‘majority ethnic group’). The migrant status of BME interviewees is noted in Table 1 and after quotations in the findings section (AS = asylum seeker; E = economic migrant or partner of economic migrant; EF = joining extended family; M = marriage; R = refugee; S = student or partner of student), and ‘temp’ (temporary) is noted where work or study in the region was stated to be fixed term.

All BME parents/carers who participated in the research were first-generation migrants, and many had recently arrived in the UK. The research did not specifically target first-generation migrants; rather the predominance of BME service users falling into this category reflected broad patterns of service use in the two areas.

The researcher was conscious of her own ethnicity (White British), and how this, and indeed her national identity, was constructed through the interview setting, particularly through her non-local accent. She therefore gave a brief account of her ethnicity and national identity at the beginning of each interview, in order to engender a spirit of openness for the subsequent discussion. However, staff reflections on how service users related to them and their accents (Parks & Askins, 2015) suggest that a non-local researcher accent may have allowed ‘White English’ interviewees – who would be more conscious of non-local accents than BME interviewees, all of whom spoke English as a second language – to respond more freely than they would to someone they perceived as local. Nevertheless, it is recognised that interviewees’ perceptions/knowledge of her ethnicity, and indeed gender, might affect what ‘truths’ and ‘accounts’ she was told (Neal & Walters, 2006), especially in the context of research on ethnicity, a sensitive topic. This may have been further compounded in the three cases where interpreters were present in interviews.

Study areas and analytical framework

The two Children’s Centres selected for the research consisted of clusters of urban communities, some of which were deprived and could be classified as ‘inner-city’ areas, and both Children’s Centres delivered services from a range of venues in the areas. Area A

consisted predominantly of White English ‘indigenous’ (I) residents, but one part of the area had designated housing for receiving asylum seeker families, many of whom moved on to more permanent housing within a year. Area B consisted of many more established (second and third generation) BME households than Area A, but also an increasing number of new migrants, particularly from new EU-sending countries. Indeed, many second- and third-generation BME, typically Muslim, parents/carers living in Area B used Children’s Centre services that had been outsourced to venues used by their particular (religious) community. Thus in both areas, BME groups came from a wide range of ethnic backgrounds, and many BME groups tended to be directly correlated with migration rather than with ‘indigeneity’; thus both Children’s Centres were actively seeking to engage with new arrival families. Furthermore, given the recentness of migration in both areas, most ‘White English’ locals could not be said to have chosen to live in ethnically diverse neighbourhoods (cf. Wessel, 2009).

The interview data were analysed by identifying ethnic and other factors invoked by interviewees in their accounts of their service use. The empirical data will now be presented by considering BME and White English experiences of interethnic encounter at Children’s Centre services under the following themes:

- (1) The extent to which social interaction with other parents/carers of the same or other ethnicities features in interviewees’ motivations for using Children’s Centres.
- (2) Factors shaping encounter and interaction at Children’s Centre services, including English language skills and individual personalities.
- (3) Interviewees’ identification with other Children’s Centre service users.
- (4) Evidence of roles played by BME and White English service users, including ‘gatekeeper’ roles.

This analytical framework allows us to explore the role of ethnicity and other factors relating to migration in shaping encounters in these spaces, and to consider the perceived benefits of these interactions.

Research findings

Social motivations towards Children’s Centre service use

Many interviewees described attending services with family or friends; in the case of White English service users these were often family members unaccompanied by children (A3, F/I; A5, F/I; A10, F; B2, F):

I knew someone before I came for the first time. It helped – if she hadn’t have been coming I don’t think I would have. Sometimes I come with me mam. (A3, F)

In the case of BME service users, it was more commonly friends of the same ethnicity, or ‘similar nationality’ (Parks & Askins, 2015, p. 102), who were accompanying children of their own:

I knew [B13, F/BME, E] through our husbands’ work, but the Children’s Centre helped us come together more and we now share a house. (B12, F/BME, E)

Key actors, especially health visitors, social workers and Children’s Centre staff, especially through outreach work, also clearly play a role in shaping the context for encounter at Children’s Centres, by encouraging people to attend particular groups, some of which are ethnically defined (for example the ‘Multicultural Group’). Ethnicity/

nationality emerged in interviews with staff as a factor shaping their efforts to link up new service users to attend services for the first time together (cf. Parks & Askins, 2015).

Echoing Sheppard et al.'s (2008, p. 65) findings, new migrant mothers often emphasised the social opportunities for themselves afforded by using Children's Centre services:

Yeah, it's not just about the kids, it's about me as well, making friends and . . . It took a bit of time . . . not like on the first day you are my friend, seeing which one you like which one not. But that would be the same anywhere. In 8 years I hadn't thought about it - that's the end, just bringing up kids, not doing anything for myself. (B5, F/BME, E)

This comment refers to the social benefits for the mother herself, but avoids connecting the process of making social connections to ethnicity. Another (B13, F/BME, E) suggested that both she and her health visitor saw her needs as being primarily social: 'The Health Visitor . . . put me in touch with the Children's Centre so I could make friends and get to know the community'. Another (B27, F/BME, AS) felt able to mix at the family play session 'because of the staff, most of the parents and the structure of the group'. Others emphasised the social benefits for their children and themselves equally: 'I use the group for my granddaughters to play with other children, and because it is good for me to meet other people' (B7, F/BME, EF).

Interviewee B15 (F/BME, AS) ranked her reasons for using the Children's Centre in the following order:

I come here for the groups first of all for my children to come here to play with the other children. And the second thing, I come here for community and for people here from different parts of England and from other countries. And the third thing, I came here as well to know how to speak. It's hard if I go to shopping or I go to hospital . . . so it's hard for me to talk to them here in England, so I wanted to come here to speak to people to know languages well. (B15, F/BME, AS, via an interpreter)

The social benefits for herself came second of three reasons, and she emphasised her interest in building interethnic relations with other service users, as well as improving her English language skills. The only interviewee not to identify social benefits for herself as a reason for using the Children's Centre was a mother from India who was living in the UK for a fixed term. She identified instead educational, social and material benefits for her son (and practical reasons for herself):

[My son] has to get into the achievements . . . he has to play with the children because we are alone here . . . mix with other children. It's good because we can use the toys -there's no point in buying any when we're only here for the short-term. (B1, F/BME, E)

Although this interviewee did not have wider family support in the area, she did not cite a need for support as a reason for using the Children's Centre. By contrast, other newly arrived Asian mothers cited the Children's Centre as their main source of support and means to integration:

When we came, we thought we are alone, we haven't got any friends . . . my son is alone, he hasn't got any friends, nobody can talk to us . . . When we started the Family Centre I got lots of friends in this area and he got friends to play and he improved. (B27, F/BME, AS)

This interviewee conflated the family centre with the local area, and drew her local friendship network from Children's Centre services. Likewise, two Indian mothers (B12, F/BME, E and B13, F/BME, E), who, like Interviewee B1, were in the UK temporarily, saw the Children's Centre as central to their integration into the community, and particularly valued the opportunities it had provided for them to share their culture with White English service users:

The Children's Centre staff and Family Centre staff have made it easy. We were allowed to integrate fully in all the Christmas celebrations through the Children's Centre and the Family

Centre – it was our first experience of Christmas. I now understand all the Christmas events – Boxing Day and everything. We also understand Bonfire night. We were also allowed to celebrate our festival – Diwali – through the Family Centre and to share it with the others in the groups. We have made friends. We know our culture, but we adapt here. (B13, F/BME, E)

This suggests ‘bridging social capital’ (Putnam, 2007) at the micro-scale, underpinned by ‘bonding social capital’ between two co-ethnic friends attending groups together.

Many White English interviewees also cited support as one of the benefits of using the Children’s Centre, despite usually having strong local family support networks:

I get support from my family, friends, and the Children’s Centre. If I have a problem with me son I come here ... any problems with children they sort you out somehow. (A15, M)

Another cited her children as her primary reason for using the Children’s Centre:

Look out for your bairns [local term meaning ‘children’], you’ve got to protect your bairns, that’s it. Once you become a mam you’ve got to have 24 hour care, it’s like your bairns are your life. That’s all you live for, well that’s all I live for. (A1, F/I)

However, this interviewee later revealed that she currently used a range of services despite her child now attending nursery. While one of these services was a ‘drop-in’ service for parents/carers, she also continued to attend a toddler group without her child, suggesting strong social benefits for herself (see below).

Some new migrant mothers particularly valued courses for parents/carers with crèches attached, including English for Speakers of Other Languages (ESOL) classes, which were sometimes available in Children’s Centre settings (B16, F/BME, M; B17, F/BME, E; B18, F/BME, AS): ‘I like here. I like English group. It helps improve my English, meet housewives, we can talk baby, we can talk the services and improve my English’ (B18, F/BME, AS). Indeed, improving English language skills was a reason given by many recent migrant service users, commensurate with the extent to which ‘talking’ to other service users was cited in (especially female) interviewees’ (both BME and White English) reasons for and perceived benefits of using the services, as in the following examples:

Some days that’s what you need – you need to go into a group and sit and talk (A1, F/I)

I like to share experiences with people, I like to talk with people. (A7, F/BME, S)

When you’re a new mum and you don’t know other mums it’s good to come in and talk to people. (A11, F)

I wouldn’t have met any of these people if I hadn’t come here ... it’s a community in itself – a support group. [My wife] can come and talk to people, mothers can get together and ... share experiences. (B3, M)

The importance attached to verbal interaction clearly formed specific benefits for many BME parents/carers, given their desire to strengthen their English language skills. This motivation, then, is a means to developing ‘bonding’ as well as ‘bridging social capital’ (Putnam, 2007), and provides the ‘energy’ required for building the latter (Hemming, 2011, p. 65). Language is also one of the practices that ‘actively shape who and what they encounter’ in the host community (Levitt & Lamba-Nieves, 2011, p. 2).

Factors shaping encounter and interaction at Children’s Centres

One mother compared the ‘Multicultural Group’ in Area B to other toddler groups she had attended that were predominantly attended by ‘White English’ families:

The Multicultural Group is a good idea: with me, I can mix with anyone, I don’t have a problem. There was a parent and toddler group in my son’s school and that was always white people but I

don't mind that. But I know there are people who have language difficulties and they prefer to have people around who have the same culture so they can mix with them. (B21, F/BME, E)

However, with few regular attenders, the Multicultural Group may have echoes of Phillips' (2006) findings on white self-segregation (which was not the case in other services that were not ethnically defined), and may reflect an association of the term 'multicultural' with only minority cultures, as well as being less attractive for BME parents/carers wishing to develop their English language skills.

Some interviewees referred to their outgoing personality or friendly nature as helping them mix with other service users:

My character! Because I live here in England, it's now my life here in England. And first I asked people about how to make life in England, help me live in England. I go to community groups, I go to park, playgroups with the children, this is how I integrate. And also people help me with advice – people that I met in playgroup. (B16, F/BME, M)

Here, the interviewee's approach to meeting people in the wider host community transfers to her use of Children's Centre services, especially as a route to learning English, which in turn increases her benefits from using Children's Centre services. Interviewee B9 (F/BME, E) had a similar approach:

When you go to a place where you are not familiar with, the people around you will not change for you, you've got to adapt to the new surroundings, otherwise you'd be completely lost. And I did that... I never used to speak this language, I used to just stop listening and watch how they talk and that's how I learned. (B9, F/BME, E)

The latter interviewee saw the onus as being on her to integrate (cf. Nagel & Staeheli, 2008), and saw this responsibility primarily in terms of her English language skills. However, Interviewee B16 (F/BME, M), despite having very good English (researcher's assessment), described linguistic barriers to mixing with other service users:

I try to talk to other parents but it's difficult when they talk about children – my English is not good enough... so they talk to me for a couple of minutes and then... So in the room there is English group and international group. (B16, F/BME, M)

Here, English language skills, rather than personality (and this interviewee had earlier commented on her outgoing personality), age or indeed ethnicity itself was seen as the key determinant of interethnic mixing at services. Another interviewee described her experience of using a service in which the majority of users were from one particular BME group and often spoke among themselves in their own language, which she saw as exclusionary:

If I had classmates and students with me in the same group who are Philippinos, I feel very at home... because you tend to have people there who speak your language, who have the same culture – it's very homely feeling... I think sometimes when people get so comfortable talking in their own language and eventually they don't realise that they are offending other cultures because they wouldn't have a clue what they are talking about. (B9, F/BME, E)

This perspective emphasises the exclusionary power of language in the case of two BME groups, which may be multiplied in the case of minority–majority ethnic group encounters. This suggests that the prevalence of relationships between co-ethnics, and between BME people from different ethnic groups, can be attributed not to ethnicity itself, but to the comfort that is provided by sharing either a mutual language or a mutual lack of fluency in the host language, thus engendering more 'meaningful contact' (Valentine, 2008) than that between BME parents/carers and local 'indigenous' people. Indeed, BME interviewees only described 'spatial practices' relating to language (B16, F/BME, M; B9, F/BME, E), and not relating to the judging of parents or parenting capabilities described by

Wilson (2013) in her research on ‘playground encounters’ between parents of different ethnicities. This may be because Children’s Centre services are held in indoor spaces and thus are not ‘sites of panoptic force’ (cf. Blackford, 2004; Wilson, 2013, p. 627), and also because encounters at Children’s Centres (a non-mandatory service) are less frequent and less predictable than encounters on the school playground (Wilson, 2013, p. 642).

However, language development was central to many BME interviewees’ accounts of how they interacted with other service users, and all demonstrated positive approaches to responding to language difficulties:

They are speaking about children, you should listen and try to speak better. (A12, F/BME, AS)

Yes I’m happy in groups – I like them. I understand slow, slow. I am happy that the children are here, no problem at all. (B15, F/BME, AS, via an interpreter)

Accent may be a further differential, but only one interviewee (B12, F/BME, E) reported experiencing specific difficulties in understanding the local accent. One interviewee distinguished between her approach as a service user and the approach of her non-service using, co-ethnic friends:

Yes, I feel myself different from other people, I’m sure they feel me different from them . . . I wish to feel myself as part of the community, but it is difficult . . . It’s not people’s problem, it’s my problem because I have to talk in English very well to mix with them, so they can understand me, they can feel if I am good or not good, they can then judge me and decide if they want to talk with me or not . . . Because some of my friends, they don’t talk English very well, so they don’t mix with any English people, so they feel – they just mix with their friends from their country or the same language, and they feel separate from English people. I don’t like that, no I don’t like that, I like to share experiences with people . . . we can share that – it’s a good thing. (A7, F/BME, S)

Like interviewee B9 (F/BME, E), this mother saw the onus being on her to interact with local people (cf. Nagel & Staeheli, 2008), starting with having sufficient language skills but extending to cultural exchange. This respondent also illustrated the intersectionality of her ethnic identity with class identity (cf. Yuval-Davis et al., 2005) when she commented ‘In my country I can’t live in an area the same as [this area] – it’s completely different, I have been in a very good area’.

A Polish mother who did not use any services other than the ESOL class held at one of the Children’s Centre venues described her approach to interacting with the wider host community in assimilationist terms, referring to attempts to overcome or hide language differences:

Sometimes I not tell I’m Polish, I not speak in Polish you know, because not everyone in England like Polish people –I feel that. Everybody know I am Polish! Sometimes I not speak if I see different people. (B17, F/BME, E)

This echoes Mas Giralt’s (2011, p. 342) findings in relation to young people of Latin American descent living in the north of England.

White English service users also perceived language issues as the key barrier for BME parents/carers using services: ‘I suppose it would be language barriers wouldn’t it, but you can’t expect the people who are working to be multilingual’ (A11, F). However, none of the BME interviewees expected or even expressed an interest in having service facilitators who could speak their native language; rather, all BME interviewees who were not already proficient in English were keen to benefit from immersion language learning by attending Children’s Centre services, supported by ESOL classes where possible. Another White English interviewee suggested that services targeted at BME women would overcome language barriers:

Barriers for minority ethnic families are language, and boundaries, not being able to speak easily . . . With a lot of the ethnic women, they won't sit and elaborate on things, they see as you can't speak outright, you know, it needs to be some sort of group where it's just for them. (A9, F)

This view, however, does not fit with the experiences of and interests in service use expressed by BME interviewees; targeting services to BME groups would not offer users the opportunity to learn English by immersion, by interacting with native speakers, nor would it facilitate cultural exchange with local people, a desire expressed by Interviewee A7 (F/BME, S). A White English father admitted that he 'used to think there should be separate groups for everyone, but now I think it should all be mixed . . . because it's stereotypes, but it's all the same I think' (A15, M). However, he also suggested a method of overcoming language barriers that conflicted with the approach to language learning of many BME interviewees: 'Language is a barrier for BME families, but there are no translators'. He further emphasised personality as a barrier: ' . . . the only other barrier is not knowing people. You've got to be a really outgoing person to come to groups. My wife is scared' (A15, M). Likewise, a White English mother (B14, F) stated that her BME partner would not use the services 'even if he could' (if he was not at work) due to shyness, rather than due to gender or ethnicity. Another White English mother who was not from the area originally described her own fear when attending a service for the first time, because she did not know anyone there:

I came on my own. And that was scary . . . it's very disconcerting when, already, what you perceive to be a clique of a group of people. And how do you interact with that group without knowing them? . . . I think that interaction is really, really beneficial . . . You know, I'm confident but not that confident – it's like the first day at school – it's terrifying. (B6, F)

Confidence is clearly a pre-requisite for using services, especially when attending for the first time alone. Confidence is linked to language skills and to personality, but other factors such as educational background, employment status and circumstances may also play a role.

Identification with other Children's Centre service users

Interviewee B15 (F/BME, AS), despite having little English, felt that Children's Centre services attracted certain types of parents/carers with whom she was comfortable mixing and with whom she identified, and whom she distinguished from non-service users:

I'm no different at all. People who don't go to groups, these are people of different mind, different ways . . . I want my kids to grow up here, but it's different, the children here grow up with a different discipline . . . they don't respect the adult people. I want my children to grow up with the culture of Zanzibar, because here if you go out in the streets some of them shout at people for nothing. (B15, F/BME, AS, via an interpreter)

This perception of a lack of civility among some people in the wider host community (but civility among Children's Centre service users) was shared by a number of BME service users:

I deal with people outside [the Children's Centre] . . . I can stay [in this community], but I don't feel comfortable. I have to stay here just because the rent is not expensive . . . I don't feel safe when I see bad behaviour from other people. (A7, F/BME, S)

Here, the word 'outside' implies a perceived distinction between the community as represented in the Children's Centre and the wider host community, with reference to the white 'indigenous' population in particular, and thus portrays the Children's Centre as a specific space of encounter not only because of the key commonality among service users (having pre-school children) but because it attracts a particular type of people and perhaps is seen to ensure encounters with non-prejudiced people. However, a White English

service user (A9, F) expressed a particular interest in facilitating the integration of BME groups in the community: ‘... at the minute a lot of the asylum seekers or the different ethnic backgrounds aren’t accepted in the community as much as they should be’ (A9, F). This respondent’s view that ‘new people to a group need to know who’s there and who’s not basically’ relates to perceived ‘decency’, rather than to ethnicity or other demographic categorisations.

Interviewee A2 (F) spoke of her approach to interacting with BME service users as follows:

Where people are from would come into the conversation, and ones we had have been pretty willing ... It doesn’t matter at the end of the day anyway does it – where people are from – they’re still people at the end of the day, still entitled to use services ... There are people from ethnic backgrounds in the groups, and what I tend to just do is go over and talk to them. And ... I mean we don’t know what they’ve come from so a lot of them are very unsure anyway and it’s just a matter of people in the group building up the trust with them. (A2, F)

However, Interviewee A1 (F/I) was reluctant to ask BME parents/carers where they were from: ‘If they don’t want to tell you where they’re from you just let them – they’ll tell you when they’re good and ready’. This has implications for Wright et al.’s (1997) ‘naive’ (Valentine, 2008) assumptions about ‘scaling up’ of acceptance to the whole group, since ignorance among majority ethnic group members of the ethnic background of minority group members may mean that any ‘scaling up’ of acceptance can only occur in relation to BME groups generally, or to groups based on assumptions about visible or audible indicators of difference, rather than to specific BME groups. It also suggests some trepidation among majority group members over what interethnic conversations can be about. These interviewees both referred to mixing with people ‘just like me’ at services, but this similarity evidently pertained to personality (and possibly also class), rather than to ethnicity:

I just went in ... It did take confidence ... The other girls were just like me – happy go lucky, willing to have a laugh. (A2, F)

When I came I did enjoy it because the lasses were just like me so I just mingled straight away ... down to earth, laid back. They’re a good bunch of lasses ... I felt comfortable from day one coming ... We mingle new people – it’s just the way we are. (A1, F/I)

Although Interviewee A1 did not comment here on ethnicity or on language proficiency, verbal communication was clearly important. Her emphasis on the need to ‘talk’ referred to chatting to other mothers about a range of topics, including parenting, and thus related to family support.

In these accounts of interactions between service users, Children’s Centres conform to Amin’s (2002, p. 959) ‘micropublics’ of everyday social interaction, ‘where people can come to terms with ethnic difference and where the voicing of racism can be muted’.

Roles played by service users

Comments from some White English interviewees suggested that they played the ‘gatekeeper’ role identified by Sheppard et al. (2008, p. 64): ‘individuals or groups who provide access to services – a role normally ascribed to professionals or service providers generally’, and whose ‘continued attendance arose because of what the centre offered to them, as adults (p. 65). For example, there was evidence among White English service users of a high level of comfort experienced when using services and being in the Children’s Centre setting:

I just stay here, just go to the playgroups and the drop-in, and the toddler group in Family Health, and the cookery course. I use services every Tuesday, Wednesday and Thursday – those are my three days. Obviously with [Son] going into nursery I thought I wouldn’t be able to go no more, but I still come to the groups even though the bairn’s not there. (A1, F/I)

This statement has echoes of Sheppard et al.'s (2008, p. 65) 'gatekeepers', in that the interviewee's service use had clearly become more adult-focused. She went on to state: 'I wouldn't be bothered if I walked into a group and there was coloured people or there was white people – that's just the way I am' (A1, F/I), significantly not referring to new service users coming into a space she was already inhabiting, but instead imagining herself entering a room with new service users already there.

A number of White English fathers also displayed a sense of ease at using the services. One stated that 'groups are definitely important for networks – people of likemindedness and the same situation' (B8, M). Another father described social class and gender, but not ethnicity, as presenting barriers for him mixing with other service users:

I mean there are probably reasons of sort of social class as well as gender ... that's probably the reasons why I probably don't ... relate to some ... I feel a bit different at groups being a man, but it's the same in the school staff room at work. (B23, M)

This admission raises questions about whether class differences are more evident among co-ethnics (this interviewee was referring to a mainly White English group of service users) than between users of different ethnicities. Similarly, another father spoke of 'the rough kind of women which I couldn't be bothered with' (B11, M). The former interviewee also felt that service facilitators should not draw attention to the presence of minority groups (men and BME groups) at services when attempting to encourage their engagement in services:

I've had situations where they've been like wow, it's a dad, come and join the group, can we talk to you, can we interview you, what a fascinating specimen you are, and you're just like well I'll just keep my head down. But I don't mind, having said that. But you don't want to go too far the other way ... I think it's related to race in a way, that you shouldn't be made to feel not ... The best thing is just not to make a big deal out of it. (B23, M)

This interviewee, when asked whether he attended the 'Dads' group' run by the Children's Centres on Saturday mornings and attended by many of the other male interviewees from Area B quoted above, replied: 'It's just not for me'. This suggests a dilemma for service facilitators who also offer targeted services for minority groups, over how to respond to members of these groups who chose to use non-targeted services. This supports Garbers et al.'s (2006, p. 295) emphasis on the need for service providers to recognise the needs and preferences of parents rather than to identify 'hard-to-reach' families.

Conclusions

This research has shown that Children's Centres come to represent the host community for many new migrants who use the services. Children's Centres can provide new migrant parents/carers with opportunities to experience a particular version of the local community which facilitates encounters that are less 'stressful and uncertain' (Valentine, 2008, p. 331) than encounters in the wider community.

Interethnic encounter between new migrant and White English service users was often seen by the former, at least initially, primarily as an opportunity to improve their English language skills. This research did not explore whether such encounters developed into sustained and meaningful relationships; the short timescale within which the research was carried out may not have allowed sufficient time for new migrants to develop the level of proficiency in English which they clearly felt was a prerequisite for meaningful relationships to develop. This significance of language relative to ethnicity itself supports Eve's (2010, p. 1234) call for improved understanding of how relationships between co-ethnics are formed.

The research also found evidence of avoidance by white 'indigenous' parents/carers of asking where BME parents/carers are from, which may impede the development of 'meaningful' relationships. Contrary to Levitt and Lamba-Nieves' (2011) suggestion, interactions between white 'indigenous' and new migrant parents/carers may be more practical than cultural, from the latter's perspective at least, but is also integral to the 'negotiation of difference' within these micro-publics (Amin, 2002, p. 960).

Interethnic encounter in Children's Centres is thus an integral part of processes of migration for BME service users, meeting a different need to that of local 'indigenous' parents/carers. This is reflected in the fact that the majority of BME service users in the two selected Children's Centres were first-generation migrants, suggesting less need or motivation to use Children's Centres among second-generation migrants. Children's Centres facilitate what Matejskova and Leitner (2011, p. 719) call 'consciously constructed' rather than 'chance' contact between local 'indigenous' residents and new migrants, but because of the centrality of English language improvement to the service use of many of the latter group, is less likely to lead to 'close and sustained' contact, though it may be a first step towards more 'meaningful contact' (Valentine, 2008) with other individuals. The tendency of some BME interviewees to distinguish between service using and non-service using 'types', though, suggests that positive attitudes among BME service users towards White English service users would not necessarily be scaled up to the whole majority group in the community.

Talking with other service users provided a form of family support for white 'indigenous' mothers, whereas for BME mothers, interaction was more likely to relate to improving English language skills. This prevalence of references by BME interviewees to improving their English language skills while attending services suggests that Children's Centres should advertise the English language improvement opportunities offered by their services. Ready-made topics of conversation clearly exist between parents/carers with children of similar ages, and such informal conversations, with other service users and with service facilitators, are one way in which parents/carers can receive family support, one of the key aims of Children's Centres.

In relation to Sheppard et al.'s (2008) research on service users as 'gatekeepers', language proficiency can be seen as a power-giving advantage, which enables people to become 'gatekeepers'. In this research, language, rather than ethnicity itself, may be the key element requiring the 'energy' to build bridges with other communities or ethnicities (cf. Hemming, 2011, p. 65; Nagel & Staeheli, 2008, p. 416), as well as helping to build social capital (Putnam, 2007).

Furthermore, many Children's Centre service users have recently undergone a transition from one life stage to another in that they are new parents, and those who have recently migrated to the UK, or indeed from another part of the UK, can be said to have undergone a double transition. This may lead to a search for familiarity, as Andersson, Sadgrove, and Valentine (2012, p. 502) have found in the case of students. In this research, this sought-after familiarity was often specifically around language and language needs. The language objectives of many service users have been neglected by existing literature, and have implications for policy-making and planning of Children's Centre services, particularly in the current context of threats of closure to Children's Centres.

This research demonstrates the centrality of language issues to interethnic mixing in Children's Centres, and suggests that further provision of ESOL classes for new migrant parents/carers could enhance 'meaningful contact' at these services. Future research could compare language barriers with other communication issues which arose in this research, including local accents, personality barriers, and intergender communication, as well as

further explore the links between language and perceptions of the onus being on BME communities to integrate. Such explorations could be enhanced via a longitudinal study of English language skill development and the formation of interethnic friendships.

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