

CHILDREN'S SERVICES SCRUTINY PANEL

POLICY REVIEW 2014/15

TACKLING CHILD POVERTY IN SUNDERLAND

FINAL REPORT

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Foreword

The starting point for this review was an acceptance that the issue of child poverty is everybody's business.

This is because a high level of child poverty in an area has both social and economic costs for local authorities, who often have to deal with its consequences. The Child Poverty Action Group carried out a study in 2012, which estimated the cost of poverty for each individual local authority, and reports that Sunderland spends an extra £187 million per annum on the effects of child poverty.

The size of the challenge facing Sunderland in trying to both reduce the numbers of families at risk of poverty and providing the support needed by families already experiencing its effect should not be underestimated.

The level of child poverty and the effectiveness of the work being done to improve the situation therefore matters. A sustained reduction in the number of children growing up in poverty is a key part of efforts, nationally and locally, aimed at breaking the 'poverty cycle' – where children of poor parents, become poor adults themselves.

The review has focused on prevention and early intervention, especially in the early years. There is compelling evidence that early intervention to prevent problems further down the line is one of the most effective forms of action both in terms of improving outcomes for children and young people and cost effectiveness.

A review of the child poverty is timely when those agencies working with families are finding that resources are being reduced significantly

The review recognises that a multitude of activities are currently being undertaken by the Council and other agencies to respond to the challenge. We are aware that early intervention to support younger children in poverty is only part of a much bigger picture around economic prosperity and material deprivation.

The findings and recommendations in this report are intended to contribute positively to achieving a better start in life for children, if only by ensuring they are accessing everything that they are currently entitled to.

I would like to thank members of the review for their contributions and also the various witnesses who supported the review.

Councillor Debra Waller
Lead Scrutiny Member, Children's Services

2. Introduction

2.1 Child poverty affects all local authorities. The Child Poverty Act (2010) (CPA) makes a commitment to reducing child poverty and places specific duties on local authorities to work towards ending child poverty. Specifically, it placed a duty on Local Authorities to:

- Co-operate with partners and other bodies to reduce child poverty and work to mitigate its effects.
- Produce an assessment of the needs of children living in poverty in its area (a child poverty needs assessment), and
- Prepare a joint Child Poverty Strategy with relevant partners.

2.2 Child poverty is officially defined as follows: *‘A household falls within the relevant income group, in relation to a financial year, if its equivalised net income for the financial year is less than 60 per cent of median equivalised net household income for the financial year’* (Child Poverty Act 2010). Children who are living in severe or persistent poverty are defined as ‘either in low income for long periods or are going without the basic goods and services which are considered essential to maintain an acceptable standard of living’ (DWP, 2011, p.1).

2.3 Local authorities are, on the one hand, committed to reducing and mitigating the effects of child poverty, while on the other they will experience the impact of welfare reforms that are predicted to increase child poverty.

2.4 The Frank Field review¹ is clear that what happens to children in the very early years – the way they are nurtured by their parents - is more important than tackling income poverty increases in benefit levels. The messages about the importance of early social and emotional development are repeated in the interim report of a further independent review led by Graham Allen into early intervention, which emphasises the importance of the very early years and nurturing by parents in determining later outcomes for children.²

3. Aim of Review

3.1 To raise awareness of child poverty and investigate the robustness of the local approach to the reduction of child poverty.

4. Terms of Reference

- a) To investigate what is having the most impact on addressing child poverty in Sunderland;
- b) To review the ways that services can demonstrate that they are helping to improve outcomes for those families experiencing poverty;

¹ Frank Field Independent Review of Poverty and Life Chances December 2010

² Graham Allen (January 2011), Early Intervention: Next Steps – An Independent Report to Her Majesty’s Government

- c) To review the ways that services are able to identify and engage those experiencing poverty;
- d) To assess how services intervene early and at the points in children and young people's lives when support is most needed;

5. Membership of the Panel

Lead Scrutiny Member, Cllr Debra Waller
 Cllrs Florence Anderson, Linda Williams, Doris MacKnight, Anthony Farr,
 Philip Tye, Jacqui Gallagher, Bob Francis and co-opted member Rose Elliott

6. Method of Investigation

- 6.1 The Panel gathered evidence at monthly meetings between July 2014 and February 2015 as well as carrying out desk-based research.

7. Findings of Review

Child and Family Poverty in Sunderland

- 7.1 The Panel collected evidence of child poverty at a local level. The evidence provides a snapshot of what child and family poverty looks like across the city, based on the relative poverty indicator.
- 7.2 The Panel was informed that almost one in four children in Sunderland (23.4%) are living in poverty. This is slightly higher than the North East average (22.6%) and considerably higher than the national average (18.6%).

Child and Family Poverty Indicators

Indicator	Sunderland	National	Better ↑ Worse ↓
Children in low income families	23.4%	18.6%	4.8 ↓
Lone parent families in low income	67.5%	69.5%	2.0 ↑
Couple families in low income	32.5%	30.5%	2.0 ↓
Children in workless households	17%	15%	2.0 ↓
Children in working households	47%	51%	4.0 ↓
Average gross weekly income	£450.60	£520.70	£70.10 ↓
Working age population with no qualifications	29.1%	22.5%	6.6 ↓
Youth people aged 18-24 claiming JSA	7.2%	3.7%	3.5 ↓
Long term sick rate	33.1%	21.4%	11.7 ↓

- 7.3 As in many other local authorities, poverty is more extreme in some areas of the city than others, with Hendon and Southwick wards having the highest levels of poverty at 39.5% and Fulwell the lowest with only 3.2% (Figure 1).

Figure 1 – Child Poverty levels in Sunderland, by ward

Ward	% of all children (0-19) in Sunderland in low-income families	
	2012 ³	2011
Barnes	16.4	17.8
Castle	27.6	28.3
Copt Hill	23.3	25.5
Doxford	10.0	13.5
Fulwell	3.2	5.1
Hendon	39.5	44.0
Hetton	27.3	29.1
Houghton	20.1	22.2
Millfield	27.2	31.4
Pallion	35.8	36.2
Redhill	33.8	36.5
Ryhope	20.3	21.3
Sandhill	31.5	31.0
Shiney Row	20.7	18.1
Silksworth	23.5	24.8
Southwick	39.5	40.0
St Anne's	31.5	34.2
St Chad's	20.7	20.5
St Michael's	10.7	15.3
St Peter's	13.4	13.6
Washington Central	17.3	16.6
Washington East	17.1	19.9
Washington North	27.5	31.0
Washington South	13.7	14.4
Washington West	19.0	19.0

³ These figures were released October 2014

- 7.4 Eleven out of the 25 wards in the city have a greater proportion of children living in poverty than the city average.
- 7.5 The majority of children living in poverty in Sunderland are below the age of 10, with a little over half of these aged 4 or under. This is in line with the UK, Great Britain and England averages. The Panel was informed that over the last five years, poverty levels in the 0-4 age group have risen steadily.
- 7.6 These figures reiterate the need to support families with very young children, to provide them with the best start in life and to lift themselves out of poverty.
- 7.7 For this reason, the Panel focused its evidence gathering on the provision of early year's services where Children's Centres and other early year's services play a key role.

Sunderland's Approach to Child Poverty

- 7.8 There are a number of initiatives that are already underway in Sunderland not only to mitigate the impacts of poverty, but also to combat it. Linked to the city's strategic priorities of People, Place and Economy, these include:
- Developments for economic growth in the city
 - Improving the infrastructure and communities
 - Supporting people to develop individual, family and community resilience
- 7.9 The Panel was informed that the Children's Trust revised the Children and Young People's Plan in 2014 and in doing so the partnership adopted responsibility for improving Children and Family Poverty across the city. The Trust agreed strategic objectives and priority areas for improvements where the Board felt it could add real value and were clearly linked to child and family poverty.
- 7.10 The review focused on the latter point in terms of how effectively we are currently delivering family focused services and which family prevention and early intervention services/programmes are effective. This included consideration of specialist intervention services working with the most disadvantaged families experiencing multiple risks i.e. families with the most complex problems.
- 7.11 Each Local Authority has a statutory responsibility to publish a Child Poverty Needs Assessment followed by a Child Poverty Strategy. The Panel took evidence on the needs assessment which was in development as the Panel carried out its review.
- 7.12 The needs assessment seeks to understand the depth of poverty in the city by exploring employment levels, household income, characteristics of those living in poverty, the cost of living and outcomes for children and young people. It

sets out actions to improve families' circumstances and mitigate the impacts of poverty for families.

- 7.13 The Panel believed that, overall, the needs assessment supports the development of a strategic direction which could be adapted across all mainstream universal services. The Panel favoured the setting of clearly specified outcomes for disadvantaged children and families and the setting out of expectations for improving outcomes for children and young people in poverty.

The Case for Prevention and Early Intervention

- 7.14 There is compelling evidence that early intervention to prevent problems further down the line is the most effective form of action both in terms of improving outcomes for children and young people and cost effectiveness.

- 7.15 Best start in life indicators are set out below:

Indicator	Sunderland	National	Better ↑ Worse ↓
Life expectancy (age in years)	77	79.2	2.2 ↓
Infant mortality per 1000 live births	3.1	4.3	1.2 ↓
Low birth weight	8.7%	7.3%	1.4 ↓
Smoking during pregnancy	18.5%	12.7%	5.8 ↓
Breastfeeding – initiation rate	60.3%	73.9%	13.6 ↓
Breastfeeding at 6-8 weeks	27.8%	47.2%	19.4 ↓
Immunisation rates:			
• MMR Vaccination age 2	94.9%	92.3%	2.6 ↑
• Dtap / IPV / Hib vaccination (2 years)	98.2%	96.3%	1.9 ↑
Children aged 5 with one or more decayed, missing or filled tooth	36.9%	27.9%	9.0 ↓
Prevalence of obese children in Reception	11%	9%	2.0 ↓
Prevalence of obese children in Year 6	21%	19%	2.0 ↓
A&E Attendances (0-4 years) per 1000 of the population	1,282.1	510.8	771.3 ↓
Mothers aged 18 or less as a percentage of all deliveries	2.7%	1.2%	1.5 ↓

Early Intervention Support – The Offer

- 7.16 The Panel was informed about the support available to families through the Early Intervention Service. The service both signposts to and delivers a range of support and intervention to alleviate the likelihood and impact of poverty both generally and for specific target groups. This includes accessing to support available through Government funding.
- 7.17 The Government provides 'pupil premium funding' to schools to intensively support pupils from disadvantaged backgrounds. This is calculated using free school meals eligibility as the main measure. Funding for 2014 to 2015 is set at £1,300 per eligible primary-aged pupil and £935 per eligible secondary-aged pupil.

- 7.18 In addition, from April 2013, free nursery education was offered to disadvantaged two year olds. These places were available to children who are entitled to free school meals from the term after the child's second birthday, with three intakes per year in line with school terms.
- 7.19 From April 2014, the criteria widened to include children who were in receipt of Disability Living Allowance, those who are adopted and looked after, and those from families with an annual income of £16,190 or less. Places are available with participating childminders, day-care nurseries, some nursery schools and primary schools with childcare on site.
- 7.20 The Panel heard that Sunderland is adopting an 'assumed consent' model for free school meals. This means that when an application for Housing or Council Tax Benefit is awarded, services will ensure that where there are children living in households they will automatically be registered for free school meals and the families and school will be informed. This approach is aimed to encourage maximum take up of a healthy meal for children who are eligible, but it also supports schools to claim their full pupil premium entitlement.
- 7.21 The Panel discussed access to free schools meals in the contexts of the impact on family budgets and the quality of food consumed by children in Sunderland. Figures released by the Child Poverty Unit in October 2014, show that:
- 0.6% children in Reception were underweight, compared to 0.9%
 - 11% of children in Reception were obese, compared to 9% nationally
 - 1.1% of children in Year 6 were underweight, compared to 1.3% nationally
 - 21% of children in Year 6 were obese, compared to 19% nationally.
- 7.22 The Panel recognised that early childhood is a critical time for good dietary health, as many lifestyle habits around diet and physical activity are established in the first years of life. There is a need to focus on both universal and targeted prevention across a range of settings, with action being taken as early as possible – and with the whole family – when risks are identified.
- 7.23 The loss of Free School Meals in the school holidays means that families must find extra money to feed their children. This markedly increases food poverty at these times of year. This issue, like all aspects of child poverty, needs to be seen in the context of the wider patterns of child poverty and attempts to alleviate its damaging effects

Parenting and family support

- 7.24 Programmes introduced in Sunderland include:
- Nurture Programme
Ten week course for grandparents, parents and carers.

- The Strengthening Families, Strengthening Communities Programme Parenting programme designed to help parents make changes. Issues such as domestic violence, gangs, crimes, drugs are tackled as well as praise, boundaries and consequences.
- Triple P (Positive Parenting Programme)
Five week programme to help parents understand the way their family works to help create a stable and supportive family.

- 7.25 The Panel emphasised the importance of ensuring that the support provided is co-ordinated and takes account of how individual problems affect the whole family. For example domestic violence in the home may lead to mental health issues for children who are witnesses; children of adult offenders may need additional support to prevent themselves becoming involved in youth crime. In these examples family-centred approaches should lead to the early identification of at risk children and young people.
- 7.26 The Panel noted that a key challenge is to ensure that all agencies who come into contact with parents know how to spot early warning signs and respond to the early identification of risk. In the current economic climate where support for the most disadvantaged families through existing family based interventions projects may be under threat, the Panel wanted to see resources prioritised for parenting and family support, particularly for the most disadvantaged families.
- 7.27 A study commissioned by the Department of Work and Pensions⁴ set out to explore the characteristics of children from poor backgrounds who ‘buck the trend’ and go on to escape poverty and achieve economic success as adults. The findings support the case for parental engagement, with poor children whose parents read to them and are interested in their education being more likely to go on to adult success.

Children’s Centres

- 7.28 The Panel considered the provision of high quality early years experiences, where Children’s Centres aim to impact on child poverty. There are five designated Children’s Centres in Sunderland acting as locality hubs and supported by a range of other delivery sites within each locality.
- 7.29 Evidence was provided that:
- All Children’s Centre activities are free and can therefore support low income families to access activities that support child development and promote social inclusion and wellbeing

⁴ Blanden, Jo (2006), ‘*Bucking the Trend*’: What enables those who are disadvantaged in childhood to succeed later in life? DWP Research Report No.31. Department for Work and Pensions.

- Family support through the early intervention family team provides support to families around financial issues – referral to specialist debt advice, applications for grants for household equipment
- Sunderland North Community Business Centre (SNCBC) are commissioned to deliver a contract to provide training for parents, especially workless parents. This includes low level training, accredited training, basic numeracy and literacy and support with writing CVs. This supports parents to apply for work or further training.
- SNCBC also deliver a contract to support parents into being volunteers with the aim of increasing their confidence, skills and competencies and thereby becoming more employable. For example volunteers are placed in schools and external organisations as well as within Children’s Centres as Children’s Champions, Bosom Buddies or Community Parents.

7.30 Families identified as needing additional support can receive home visits from the Early Intervention Family Team, who can bring play and learn type activities to the home for families who do not have the confidence to attend group activities. They can then encourage the family to attend group activities. Families that need more intensive support receive support from the child and family service which can support families to access grants for furniture and support from debt counselling services.

Childcare in Sunderland

- 7.31 The take up of formal childcare by low-income families in Sunderland is 14%, compared to 15% nationally⁵.
- 7.32 The latest local Childcare Sufficiency Review 2012/13, shows that there were sufficient childcare places in all sectors across the city except for day care spaces for 2-3 year olds in the Coalfields area, which is just 5 places under sufficiency. However, all childcare providers across the city were under-occupied.

The average weekly costs of the different types of childcare in the city are:

Type of childcare	Average Weekly Cost
Day care	£147.60
Out of school childcare	£31.56
Childminder	£127.66
Holiday childcare	Not available

7.33 From 1 April 2013 there were 817 children eligible for a childcare place under the government’s scheme to provide places for disadvantaged 2 year olds. Analysis shows that there are sufficient places to meet the demand in the first year, with the exception of the north area of the city, where an additional 5 places were required.

⁵ Child Poverty Unit, October 2014

7.34 Draft data shows that 707 children took up places in 2013, equivalent to 87%. The number of places required from 1 April 2014 was 1,634 places.

Targeted support

7.35 The Panel emphasised the need to be confident that we know we are working with the most disadvantaged families. Evidence was taken on 'Family Focus', the name given to the approach to deliver the national Troubled Families initiative in Sunderland.

7.36 The Department for Communities and Local Government (DCLG) estimates that there are 120,000 Troubled Families nationally by using research which identified the proportion of families who suffer from at least five of the following characteristics (all which are linked to child poverty):

- No one in the family is in work;
- Living in poor or overcrowded housing;
- No parent has any qualifications;
- Mother has mental health problems;
- At least one parent has a longstanding illness, disability or infirmity;
- A low income;
- An inability to afford a number of food, clothing items.

7.37 Using these criteria DCLG estimated that in Sunderland there are 805 such families with an estimated cost to the taxpayer in reacting to the issues in these families of £60,375,000. It is estimated that considerably less would be needed to be spent try to turn around their lives in a targeted, positive way.

7.38 As at August 2014 it was reported that Sunderland had 'turned around' 58% of the families it was working with through the programme and was in a good position to continue on this trajectory and turn around all 805 families by the end of the programme in March 2015.

7.39 Building on Family Focus, the Strengthening Families Framework seeks to ensure that families in Sunderland can easily access the right support at the right time. The emerging approach to strengthening families in Sunderland is:

- Asset based;
- Reduces dependence on public services in the longer term;
- Family-focused;
- Personalised and responsive;
- Pro-active, seeking to identify and address issues;
- Integrated, working across services to achieve more for families;
- Locally responsive, planning at a locality level where appropriate.

Wider Picture

- 7.40 'Due North'⁶ reinforces the health inequalities between those living in the North of England and those in the south, and highlights that the *“burden of local authority cuts and welfare reform has fallen more heavily...on the disadvantaged than the affluent areas; and on the more vulnerable population groups in society, such as children.”*
- 7.41 The report confirms that the UK has some of the worst indicators for child health and well-being of any high-income country. Within England, the health of children is generally worse in the North, reflecting the higher levels of child poverty.
- 7.42 The report reinforces the large body of evidence that children who start behind tend to stay behind. For example, children living in poverty are more likely to: die in the first year of life; be born small; be bottle fed; breathe second hand smoke; become overweight; perform poorly at school; die in an accident; become a young parent; and as adults they are more likely to die earlier, be out of work, live in poor housing, receive inadequate wages and report poor health.
- 7.43 The report states that, in the North of England, where large proportions of children are growing up in poverty, it is critical that action to improve early child development takes place on a scale that is proportionate to need.
- 7.44 The report concludes that two strands of action are required to significantly reduce child health inequalities at a population level. Firstly, a universal system of welfare support is needed that prioritises children, in order to eliminate child poverty. Secondly, a system of high quality universal early years child care and education support is also necessary. This needs to be supported by routine support to families through parenting programmes, key workers and children's centres with integrated health and care services and outreach into communities. The evidence base for these early interventions is strong.
- 7.45 The report recommends that agencies in the north should work together to:
- Monitor and incrementally increase the proportion of overall expenditure allocated to giving every child the best possible start in life, and ensure that the level of expenditure on early years development reflects levels of need;
 - Ensure access to good quality universal early years education and childcare with greater emphasis on those with the greatest needs, so that all children achieve an acceptable level of school readiness;
 - Maintain and protect universal integrated neighbourhood support for early child development, with a central role for health visitors and children's centres that clearly articulates the proportionate universalism approach;

⁶ Due North report of the Inquiry on Health Equity for the North September 2014

- Collect better data on children in the early years across organisations so that we can track changes over time;
- Develop and sign up to a charter to protect the rights of children to the best possible health.

8. Conclusion

- 8.1 The Panel took as its starting point the need for every child and young person living in low income families to have access to the best universal services. They wanted to see a continued drive towards excellence in everything we do, because high quality services have been shown to be one of the most important factors in protecting children from disadvantaged backgrounds from poor outcomes.
- 8.2 The Panel recognised that all services will need to be geared more explicitly towards those who need them most i.e. children in families with low incomes and those at greatest risk, with the most complex problems.
- 8.3 The Panel therefore wanted a Child Poverty Strategy to reflect that all mainstream services should be able to demonstrate that they are reaching and benefiting children and families living in poverty, and those at greatest risk. Mainstream services include schools, children's centres and other early years services, youth services, GPs, health centres, midwifery services, health visiting services, library and sports services, parks, planning, housing, revenue and benefits services and employment and training services including Job Centre Plus.
- 8.4 In conclusion, there is a large body of evidence confirming that early disadvantage tracks forward, to influence later life. We can have the biggest impact by intervening in the early years, with these years being formative for establishing healthy lifestyle choices. This is not only important in terms of the immediate impact on children's health and development, but the benefits also extend into adulthood with the associated savings for adult services.

9. Recommendations

- 9.1 The Panel's recommendations to Cabinet are outlined below:
1. The Child Poverty Needs Assessment should continue to be developed in a way that is evidence based and is informative about local deprivation data, to encourage officers and Members to use it to inform local planning and strategy.
 2. Opportunities should be taken to maximise the take up of entitlements available to disadvantaged families. This includes

- the take up of free nursery education offered to disadvantaged two year olds and;
 - the number of children taking up free school meals, using an assumed consent model (thereby ensuring schools claim their full pupil premium entitlement).
3. Options for disadvantaged children to access to a nutritious meal during school holidays, where they meet the criteria for free school meals, should be explored.
 4. To consolidate all ‘key worker’ style approaches across the city to ensure that families can work with one key mediator and are given consistent messages
 5. Locally based services should be available for parents, such as parenting support, which encourages and enables parental behaviour change where needed.

10. Acknowledgements

The Panel is grateful to all those who have presented evidence during the course of the review. We would like to place on record our appreciation, in particular of the willingness and co-operation we have received from the below named:

- a) Sandra Mitchell, Head of Community & Family Wellbeing
- b) Simone Common, Service Manager, Risk & Resilience
- c) Nicola Appleby, Senior Policy Officer, People & Neighbourhoods
- d) Helen Lancaster, Family Focus Coordinator
- e) Bev Chismon, Parenting Coordinator
- f) Rachel Putz, Service Manager, Locality Services, Children's Centres (and Coalfields Locality Operational Manager)
- g) Tim Hakim, Children’s Centre Manager
- h) Marie Roberts, Children’s Centre Manager

11. Background Papers

11.1 The following background papers were consulted or referred to in the preparation of this report:

- (a) The Child Poverty Act 2010
- (b) Sunderland Child Poverty Needs Assessment
- (c) Due North – Inquiry on Health Equity for the North September 2014

DRAFT