

Child Poverty

Introduction

Living in poverty impacts on health, education, social and psychological outcomes, limiting development and preventing people from reaching their full potential. Children from a poor background are more likely to be bottle fed, breathe second-hand smoke, become overweight, perform badly in school, have poor mental health and die in the first year of life or in an accident¹. These impacts affect life chances in adulthood.

The Marmot review found that childhood sets the foundations for all aspects of health and wellbeing for life. Therefore adversity in childhood has a lifetime of impact on many aspects of health and wellbeing such as heart disease, mental health, educational achievement and economic status.³

Summary

Child poverty can be defined in either absolute or relative terms: absolute poverty measures the income of families against a set minimum level, whereas relative poverty compares a family's income to the rest of the society. The Child Poverty Act (2010) describes a child as being in relative poverty when they live in a household with an income of less than 60% of the national median income⁴. A new definition proposed in 2015 by the Work and Pensions Secretary uses a measure which, in addition to income, includes indicators such as educational achievement and living in a workless household⁵. In 2018, the Social Metrics Commission (SMC) set a poverty line of 55% of median total available resources so that high unavoidable household costs are considered when understanding poverty. Using SMC's measure 4.5 million children are defined as living in poverty in the UK, in comparison to the 4.1 million identified using previous measures⁶.

In 2016, 15.1% of Norfolk's children (under 16s) (21,670) were defined as living in low income families, i.e. families in receipt of out of work benefits or tax credits where their reported income is less than 60% median income. This is less than England at 17.0%. Across Norfolk this value varies by district with Broadland having the lowest rate (8.9%) and Norwich (22.3%) the highest rate.

Children growing up in poverty are more likely to live in poor quality housing, to have poor health outcomes, and to achieve lower grades at school. As adults they are more likely to experience health problems, less likely to be employed and to have lower income. Therefore, increased use of services and difficulties associated with child poverty continue into adult life. This costs Norfolk an estimated £333 million a year from increased demand on services and reduced tax revenue. The national cost of child poverty is estimated to be £29 billion a year.⁷

¹ Wickham, S., Anwar, E., Barr, B., Law, C., & Taylor-Robinson, D. (2016). Poverty and child health in the UK: using evidence for action. *Archives of disease in childhood*, 101, 759-766. Retrieved from <https://adc.bmj.com/content/101/8/759>

³ <http://www.instituteofhealthequity.org/resources-reports/fair-society-healthy-lives-the-marmot-review>

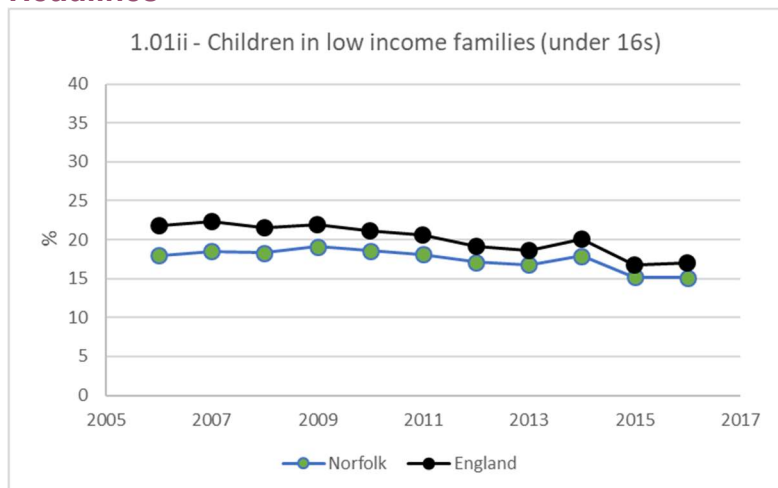
⁴ Child Poverty Act 2010. Retrieved from http://www.legislation.gov.uk/ukpga/2010/9/pdfs/ukpga_20100009_en.pdf

⁵ Child poverty definition to be changed (2015, July 1). *BBC News*. Retrieved from <https://www.bbc.co.uk/news/uk-politics-33346989>

⁶ Social Metrics Commission. (2018). *A New Measure of Poverty for the UK*. Retrieved from http://socialmetricscommission.org.uk/MEASURING-POVERTY-FULL_REPORT.pdf

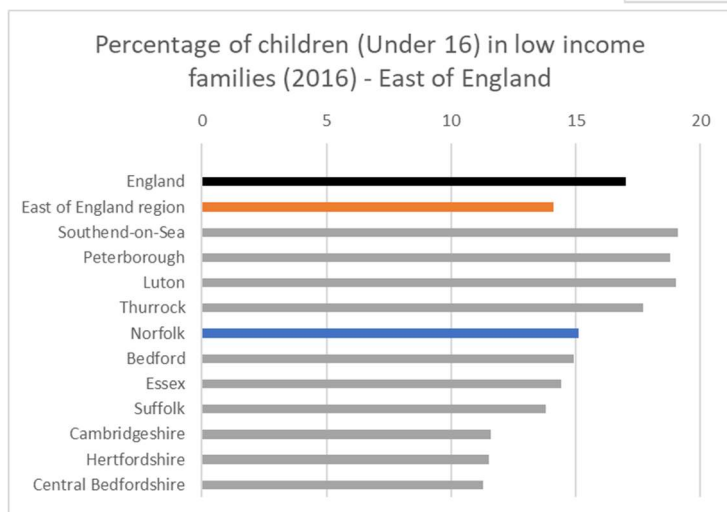
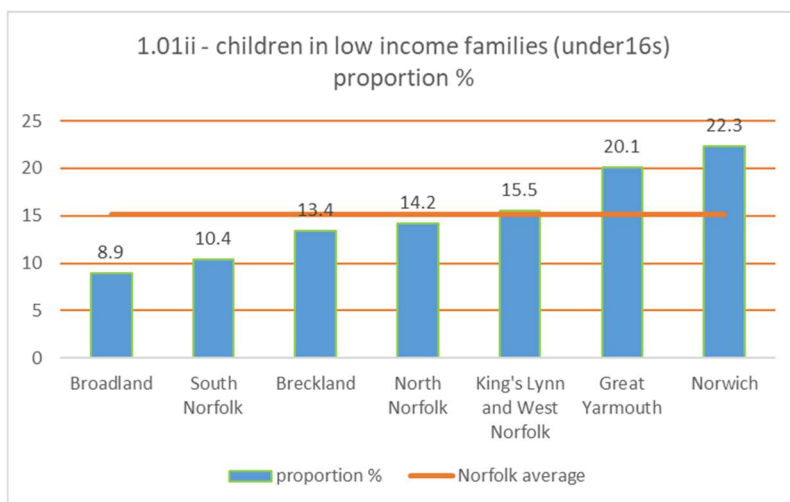
⁷ http://www.cpaq.org.uk/content/child-poverty-facts-and-figures#footnote9_bat03ls

Headlines



The percentage of children in low income families, children living in families in receipt of out of work benefits or tax credits where their reported income is less than 60% median income for under 16s only for Norfolk is better than the England average at 15.1% for 2016. This has followed the national trend and is currently at the lowest level since 2006.⁸

Across Norfolk this value varies by district with Broadland having the lowest rate (8.9%) and Norwich (22.3%) the highest rate.



Norfolk sits fifth amongst the East of England Counties for this measure.

Childhood poverty has profound short and long-term impacts. These impacts range from housing and educational achievement to health and well-being. This in turn places significant pressure on local services. The Child Poverty Action Group estimates that the national cost of poverty is £29 billion a year, and in Norfolk the cost is £333 million a year from increased demand on services and reduced tax revenue.⁹

⁸ <https://fingertips.phe.org.uk/profile/public-health-outcomes-framework/data#page/4/gid/1000041/pat/6/par/E12000006/ati/101/are/E07000147/iid/10101/age/169/sex/4>
⁹ http://www.cpag.org.uk/content/child-poverty-facts-and-figures#footnote9_bat03ls

Influences on Health and Wellbeing

As summarised by Wickham et al. (2016)¹⁰ children in poverty in the UK are more likely; to die in the first year of life, be born small, be bottle fed, breathe second hand smoke, become overweight, suffer from asthma, have tooth decay, perform poorly at school and die in an accident.

These UK-wide statistics are also reflected in information specific to Norfolk. Prevalence of tooth decay in Norfolk is higher in more deprived areas.¹¹ (Discussed further in our “Dental health in children and young people” briefing paper¹²) and at Reception age 26% of children in deprived areas were overweight, which increased to 36% in Year 6.¹³ Compared with 19% at Reception and 28% by Year 6 among children in the most affluent areas. (Discussed further in our “Childhood obesity” briefing paper¹⁴)

Poor outcomes for children in poverty in the UK are also affected by their increased likelihood of living in cold, damp, and overcrowded housing. These include both adverse health outcomes, such as increased instances of circulatory and respiratory problems, and problems in educational achievement because of decreased ability to concentrate in a cold and overcrowded house¹⁵. (Discussed in our “Housing and health” briefing paper¹⁶)

Educational achievement varies across England according to level of deprivation. Those in the most and least deprived IMD2015 decile differ by 11.8% in the achievement of 5A*-C including English and Maths, with 51.75% achievement in the most deprived to 63.5% in the least.¹⁷

Children in poverty are more likely to be born with inherited special education needs and disabilities (SEND) and are more likely to develop some forms of SEND as they grow up. Furthermore, children from low-income families are less likely to receive effective interventions for their SEND. The social and healthcare expenditure for looking after disabled and SEN children is higher¹⁸.

Social, environmental, population context

According to the Joseph Rowntree Foundation nearly half of children in lone-parent families in the UK live in poverty, compared with one quarter of children in couple families. Over the last five years, poverty rates for children in lone-parent families have risen by around twice as much as those for children in couple families.¹⁹

Parental unemployment is a key predictor of a child being in poverty. Barriers to employment include the cost of childcare, other caring responsibilities, and poor health or disability. However, government data has found that 66% of children in poverty have parents who are in work²⁰, which could be explained by insecure employment or low wages.

¹⁰ Wickham, S., Anwar, E., Barr, B., Law, C., & Taylor-Robinson, D. (2016). Poverty and child health in the UK: using evidence for action. *Archives of disease in childhood*, 101, 759-766. Retrieved from <https://adc.bmj.com/content/101/8/759>

¹¹ Hospital admissions for tooth decay highest amongst England's most deprived (2013, March 13). *NHS Digital*. Retrieved from <http://content.digital.nhs.uk/article/2595/Hospital-admissions-for-tooth-decay-highest-amongst-Englands-most-deprived>

¹² <http://www.norfolkinsight.org.uk/resource-briefing-paper-dental-health-in-children-and-young-people/>

¹³ NCMP data 2012-15.

¹⁴ <http://www.norfolkinsight.org.uk/resource-briefing-paper-childhood-obesity/>

¹⁵ All Party Parliamentary Group on Health in All Policies (2016). Inquiry: Child Poverty and Health – the impact of the Welfare Reform and Work Bill (2015-2016). Retrieved from <https://www.fph.org.uk/media/1374/appg-health-in-all-policies-inquiry-into-child-poverty-and-health2.pdf>

¹⁶ <http://www.norfolkinsight.org.uk/resource-briefing-paper-housing-and-health/>

¹⁷ <https://fingertips.phe.org.uk/search/GCSE#page/7/qid/1/pat/6/par/E12000006/ati/102/are/E10000020>

¹⁸ Shaw, B., Bernardes, E., Trethewey, A., & Menzies, L. (2016). *Special Education Needs and their Link to Poverty*. York: Joseph Rowntree Foundation. Retrieved from <https://www.jrf.org.uk/report/special-educational-needs-and-their-links-poverty>

¹⁹ <https://www.jrf.org.uk/report/uk-poverty-2018>

²⁰ Households Below Average Income statistics, Department for Work and Pensions, 2016 <https://www.gov.uk/government/statistics/households-below-average-income-199495-to-201415>

Burden of ill health and gaps in services

In 2013 it was estimated that high levels of child poverty across the UK cost the country at least £29 billion a year²¹, which was up from the £25 billion per year estimate given in 2008²². This cost occurs because those who grew up in poverty are less likely to be in employment in later life and are more likely to receive unemployment credits. Furthermore, children in poverty often require additional public services as a result of their increased likelihood of social, educational, and health problems. Each child living below the poverty line costs the economy an estimated £10,861.

In 2013 the Child Poverty Action Group (CPAG) published a report which included the cost of child poverty in every local authority and constituency. This showed an overall annual cost of £333 million across Norfolk, including an annual cost of £79 million in Norwich, £61 million in King's Lynn and West Norfolk, and £56 million in Great Yarmouth²³.

Current services, local plans and strategies

The 2010 Child Poverty Act required, by law, that the government eradicate child poverty by 2020²⁴. This target will not be met²⁵; however, the 2016 Welfare Reform and Work Act removed the Government's commitment to meet the target²⁶.

There are several national strategies aimed at improving the lives of children, which help to create more equal opportunities for children in poverty. For instance the Childcare Bill (2015) entitled working parents to 30 hours of free childcare in early years, allowing parents to work to support their family instead of missing out on employment because of childcare responsibilities before the child reaches school age²⁷.

In 2014, the Child Poverty Strategy was launched with the aim of ending child poverty in 2020. This strategy included aims such as supporting families into work, reducing transport costs for low-income families, and introducing free school meals for all infant aged pupils²⁸. In addition, the Healthy Start scheme aims at improving nutrition of low income pregnant women, mothers, and children²⁹.

Voice – the perspective from the public, service users, referrers and front-line staff

A 2018 survey of the National Education Union (with members working in early years, primary and secondary education) revealed that 87% think that poverty affects the learning of their pupils significantly. 60% of respondents thought that the situation has got worse since 2015, and a third thought it had worsened significantly. Schools are therefore stepping in to fill the poverty gap. For example, 18% of respondents revealed their school has a low-cost food club, 13% have food banks and 16% have clothing banks³⁰.

In a 2017 survey of paediatricians in the UK, 46% noticed an increase in problems related to child poverty. They explained that cuts to services had left families with less support and this in turn leads to health problems. Ultimately, this means more children need to go to clinics or hospitals³¹.

²¹ Hirsch, D. (2013). *An Estimate of the Cost of Child Poverty in 2013*. Loughborough: Centre for Research in Social Policy. Retrieved from: <http://www.cpag.org.uk/content/estimate-cost-child-poverty-2013>

²² Hirsch, D. (2008). *Estimating the Cost of Child Poverty*. York: Joseph Rowntree Foundation

²³ CPAG Publishes Cost of Child Poverty in Every Local Authority and Constituency (2013, July 18). *Child Poverty Action Group*. Retrieved and data available from www.cpag.org.uk/content/cpag-publishes-cost-child-poverty-every-local-authority-and-constituency

²⁴ Child Poverty Act 2010. Retrieved from http://www.legislation.gov.uk/ukpga/2010/9/pdfs/ukpga_20100009_en.pdf

²⁵ *Reforming the Child Poverty Act*. London: The Centre for Social Justice. Retrieved from <https://www.centreforsocialjustice.org.uk/core/wp-content/uploads/2016/08/Child-Poverty-2020.pdf>

²⁶ Child Poverty Action Group. *Child Poverty Promise and Child Poverty Act*. Retrieved from <http://www.cpag.org.uk/content/child-poverty-promise-and-child-poverty-act>

²⁷ Childcare Bill 2015. Retrieved from: <https://www.foundationyears.org.uk/files/2015/06/Childcare-Bill.pdf>

²⁸ Child Poverty Strategy 2014-2017. Retrieved from: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/324103/Child_poverty_strategy.pdf

²⁹ NHS Healthy Start scheme. <https://www.healthystart.nhs.uk/>

³⁰ National Education Union & Child Poverty Action Group. *Child Poverty and Education: A Survey of the Experiences of NEU Members*. Retrieved from www.cpag.org.uk/content/child-poverty-and-education-survey-experiences-neu-members

³¹ Child Poverty Action Group & Royal College of Paediatrics and Child Health. (2017). *Poverty and Child Health: Views from the Frontline*. Retrieved from <https://www.rcpch.ac.uk/resources/poverty-child-health-views-frontline>

Save the Children campaign on behalf of all children and have a specific programme on child poverty. They working with families to narrow the gap between children living in poverty and their better off classmates. By focusing on early learning, helping to make sure children across the UK realise their full potential.

The Child Poverty Action Group publishes data and information on child poverty as well as offer help, training and publications to support professionals.

Joseph Roundtree Foundation is an independent social change organisation working to address UK poverty and undertakes events, publications and research in the area.

Considerations for Health and Wellbeing Board and commissioners

A reduction in child poverty would improve the health and wellbeing of children in the short term as well as allow them to fulfil their potential into adulthood. Therefore, strategies targeting child poverty will act as preventative measures for other issues later in life.

Services which support single parents to start or stay in work would minimise the impact of separation and would improve children's and parents' wellbeing.

Support for children from low-income backgrounds would help them succeed in school and leave with the knowledge, skills and confidence to move successfully into further education, training or the labour market and towards independence.

Bringing together child and family services, including relationship support, parenting advice and family and mental health services, with advice and support on material and financial matters would enable joined up services and support.

Ethnic minority families, single-parent families and families with disabled children or disabled parents are particularly impacted by poverty.

Early intervention and prevention services are recommended.

Norfolk County Council funds services in this area including; Health visiting and school nurses under the Health Child Programme, Schools and Education Support, Children's Centres and Children's Social Services.

Author and key contacts

Victoria.Leigh@norfolk.gov.uk

William.Stevens@norfolk.gov.uk

Anne-Louise.Ollett@norfolk.gov.uk

Online feedback:

Send us your query or feedback online using our online feedback form at

<http://www.norfolkinsight.org.uk/feedback>

Email: JSNA@norfolk.gov.uk