

CHILD POVERTY BRIEFING

KEY MESSAGES

- Harrow's Ambition for 2020 is about working together to make a difference for the population in Harrow.
- Child poverty is underpinned by the councils priorities to "Protect the most vulnerable and support families.
- The Harrow Health and Wellbeing Board also committed to a five-year vision to help all in Harrow to start, live, work and age well concentrating particularly on those with the greatest need.

BACKGROUND

We focussed on what child poverty means for Harrow, the risk factors and how to mitigate the effects poverty and the impact it has on children's health and wellbeing and achieving their full potential Harrow council completed a child poverty needs assessment and action plan in 2017

"Tackling child poverty is a priority because of its short and long term consequences for children and for local areas. Tackling poverty is a key strategy to achieving successes in areas such as better health, education and economic development. Research estimates that poverty costs the UK £25 billion every year in reduced educational opportunities, lower taxes and higher service costs"

Joseph Rowntree Foundation, Estimating the Cost of Child Poverty (2008)

International context

In comparison to other countries in Europe, the UK ranks 13th worst out of 26 countries in terms of people at risk of poverty and social exclusion, as shown below.





Fig 1: Percentage of people at risk of poverty and social exclusion across EU countries

Despite recent declines in child poverty in the UK, there is evidence that children from the poorest families remain a concern. Those children at highest risk of poverty in Harrow include those in; poor housing, workless households and low incomes, low parental education and skills; low education and attainment, health inequalities including mental health and DV.

When poor families face such risk factors, they are less able to get resources to mitigate the effects on their family's physical and mental health. These experiences, often referred to as adverse childhood experiences, can shape not only a child's cognitive and emotional development, but his or her long-term physical health as well. A growing body of evidence now links early-childhood adversity to increased risk of a range of adult health problems, including diabetes, hypertension, stroke, obesity and some forms of cancer.

Local context

Child poverty rates in Harrow before housing costs were 21% before Housing costs and 31% after housing costs in 2017 (Figure 2). This is equivalent to a total number of children of 11,606 children and 17,769 consecutively.





Fig 2: Graph showing the percentage of children in poverty across London boroughs

Fig 3: Map showing child poverty (left) and the impact of social inequality on the cognitive development of children (right)



Child poverty is linked to social inequality. The graph is from the 1970 British Cohort study at age 22 months to 10 years which clearly illustrates the impact of social inequality on the cognitive development of children. The British Cohort Study followed the lives of people born in a single week in 1970. Children's cognitive development was measured at different time periods beginning at 22 months and proceeding for 10 years.



By the age of six (74 months), the 'less bright' children from higher socio-economic groups performed better in tests of cognitive-ability than 'bright' children from lower socio-economic groups. This early disadvantage for children in lower socioeconomic groups went on to predict final educational outcomes and therefore future life chances

RISK FACTORS ASSOCIATED WITH POVERTY IN HARROW

High housing costs

Options of social housing are currently only available to those in most need as social housing properties, becoming available for letting each year, are at a reduced amount. High average house prices in Harrow indicate home ownership to also be out of reach for those on lower incomes. Out of all London boroughs, Harrow has the lowest proportion of social housing. Approximately, 10 percent of Harrow's household live in social rented housing. Despite prevention efforts made from the housing team, there are still a high number of families dwelling in temporary accommodation. Harrow is nationally ranked 24th for overcrowding, where 1st is the most overcrowded. Harrow wards with the highest rates of overcrowding are Greenhill, Edgware and Marlborough. In Harrow, approximately, 6,100 children aged 0-5 years live in the 30% most deprived areas.

Parental education and skills

Kenton East scores highest in relation to a new indicator which measures those adults who experience barriers to learning and disadvantage in the labour market due to lack of English proficiency. Overall, adult skills levels are worse in the centre, south-east and south-west of Harrow. Harrow Weald, in England's most deprived 20 percent, is the borough's worst ranked LSOA for adult skills.

Debt and rent arrears

The data recorded enquiries at the CAB suggest that the number of enquiries on fuel debt has dramatically increased. Furthermore, there has been a rise in water debt in the last month. Wealdstone, followed by Roxbourne are the most deprived wards in Harrow for income deprivation affecting children. Nonetheless, Harrow's ranking for income deprivation affecting children has improved considerably since 2010 where five LSOAs (Lower Super Output Areas) are in the country's least deprived 10 percent, these are- Harrow on the Hill, Hatch End, Headstone North, Pinner and Pinner South wards.

Welfare reforms and benefit caps

Housing reforms plus welfare benefit changes in 2011 have led to an increase in homelessness applications and acceptances in Harrow, resulting in more families being placed in B&B at an average cost to the council of £7,000 per family per year. Whilst Harrow is a top performer in terms of managing and preventing homelessness (one of the lowest acceptances in London, lowest number in B&B in West London) there are no signs that the upward trend is going to reduce in the near future.



Low parental income- Individuals working in Harrow earn, on average, less than the average weekly pay for Harrow residents. Wages paid in Harrow (£489) in 2014 were below the national average of £523.30 and considerably lower than London's average of £660.50. Research shows when households are faced with financial difficulties, one of the first areas where cuts are made are in relation to household food brought per week, most frequently, healthier foods including fruits and vegetables. However, such cutbacks bring about consequences towards health and wellbeing.

Unemployment and access to childcare

Lack of work can be associated to a number of factors including, poverty, crime, substance abuse, poor health, low education levels and family breakdowns. In August 2014, there were 2,490 individuals in Harrow claiming Jobseeker's Allowance, a rate of 2.3% which was the lowest level of unemployment of all West London boroughs. According to research, in addition to various other life adjustments, unemployment can hinder a family's ability to purchase less fresh foods and eat a balanced meal due to the high prices of healthy foods. The acquisition of childcare is an important parameter which determines the employability status of a parent. Essentially, the take up of formal childcare is lower in Harrow at only 9 percent compared with London (14 percent) and England (15 percent) averages. Parents of children who receive income or other forms of support are entitled to free school meals (FSM) which aim to ensure children are gaining access to nutritional foods. As at January 2014, 13.8 percent of Harrow's primary school children and 17.0 percent of Harrow's high schools pupils were eligible for FSM. Harrow is in the top 10 authorities nationally for the successful progression of young people entitled to FSM. Based on statistics for the Income and Employment Deprivation domains, 12.7 percent of Harrow's residents live in income deprived households, whilst 8.3 percent of Harrow's working age adults are employment deprived. Moreover, 16.9 percent of Harrow's children live in income deprived households.

Education and attainment

The inequality gap in achievement in Harrow continues to narrow, however is still above national averages. Whilst all pupils in Harrow have performed above national averages, particular ethnic groups within Harrow do not fare as well as others. Inequalities in education exist in Harrow, particularly amongst children with special educational needs (SEN), those eligible for FSM and ethnic groups. Those children who have special educational needs are at a priority as per regulatory codes of practice. The achievement of pupils with SEN at Key Stage 2 compares well with national averages.

Although there has been a reduction in the gap, children who receive FSM show less progress across all subjects between Key Stage 1 and Key Stage 2 compared to their more affluent peers. Schools in Harrow are; on the whole, among the best performing in the country which has been maintained over a number of years. Less than half (47.1 percent) of Harrow School children spoke English as a first language, this figure had further fallen at the start of 2014. Over two- thirds (69.6 percent) of Harrow's residents who do not speak English well are aged 16-64 years old whilst 23.8 percent are individuals aged 65 and over.



Health inequalities

Poor health indicators are, most frequently, found in the more deprived areas of Harrow whilst better health outcomes, in the more affluent parts. For women in the most deprived parts of the borough, the difference in life expectancy was 4 years lower than in the most affluent areas. For men, however, the gap is much wider, with a difference in life expectancy to be over 8 years. This inequality needs to be urgently addressed to give all individuals a fair and equal chance in life. Although Harrow, as a borough, is generally a healthy place, there are a few measures where Harrow performs worse in than the England average, this includes; high rates of fuel poverty and statutory homelessness, high rates of excess weight in 10-11 year olds, low amount of fruit and vegetables eaten, high rates of TB and low rates of health checks. There exists a few health outcomes in Harrow which should be of particular focus as shown in the most recent PHE child health profiles.

HARROW STRATEGY

In 2017 Harrow council developed a child poverty and life chances strategy 2017 -2020 with a vision to:

" Support children and their families break the cycle of poverty and deprivation in order to thrive live safe, happy, healthy and lead successful fulfilling lives"

Tackling child poverty needs to be through collaborative work across a wide range of groups. Child poverty is multidimensional and cannot be solved by one intervention alone. The strategy helps to bring together key stakeholders and agencies to focus on what can be done to mitigate the effects in years to come. With the uncertainties of Brexit, it is even more important that Child poverty remains on the agenda.

The strategy for Harrow is to focus support and interventions on the eight areas in the borough where the disparity between income and health is higher compared to other ward counterparts. These areas are:

- 1. Roxbourne
- 2. Wealdstone
- 3. Marlborough
- 4. Greenhill
- 5. Roxeth
- 6. West Harrow
- 7. Headstone South
- 8. Queensbury

PRIORITIES AND KEY ACTIONS

The health and wellbeing board agreed that our vision will be achieved through 5 priorities and the key actions as a result of these priorities are stated below:



Priority 1: To increase opportunities for parents with English as a second language to enter employment, education and training and support adults in gaining skills

• Adult community learning (ACL) led by the economic development team continues to support local people into skills and training, supporting people affected by the benefit cap. The Xcite team are also promoting the apprenticeship scheme to employers and the benefits of this.

Priority 2: To tackle financial exclusion, including debt management, financial literacy, affordable credit and maximise benefit take up.

- Supporting the together with families programme to support unemployed people into jobs and training
- Progress on London Living Wage, the council will make a reduction in Business rates to eligible businesses that pay the London Living Wage. All council staff are on a LLW. The Cabinet Report on Social Value in Procurement stated that the council would explore ways to embed the London Living Wage in our procurement process

Priority 3: To increase opportunities for inward investment and funding opportunities by working

• The economic development team submitted expressions of interest to the GLA to secure funding to develop community workspace for the VCS. If our application is successful this would help generate a rental income stream for the sector with the voluntary and community sector

Priority 4: To improving health and wellbeing of children and families and access early support services with a focus on looked after children, children at the edge of care, children with Special Educational Needs (SEN)

- 1. Healthy Early Years award
- 2. Oral health promotion
- 3. Commissioning of the 0-19 health visiting and school nursing service
- 4. Drug and Alcohol service

Priority 5: Support families with housing and those in temporary accommodation

- Ongoing support to homeless families and those in temporary accommodation. More households able to increase their income and manage debts, more households digitally included, reduction in rent arrears, tenants receiving floating support if they require it.
- The child poverty steering group will be re-instated in 2019. Representatives from across the council departments and external partners will come together to monitor the Child poverty action plan and to update on progress to mitigate child poverty.