



BRIEFING PAPER

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UK Youth Parliament briefing 2016

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Background

On 11 November 2016 the House of Commons will host the seventeenth sitting of the annual UK Youth Parliament.

What is the UK Youth Parliament?

The UK Youth Parliament provides opportunities for 11-18 year olds to use their elected voice to bring about social change through meaningful representation and campaigning. The UK Youth Parliament has over 280 seats for elected MYPs (Members of Youth Parliament) all aged 11-18. MYPs are usually elected in annual youth elections throughout the UK. Any young person aged 11-18 can stand or vote. In the past two years one million young people have voted in UK Youth Parliament elections. Once elected MYPs organise events and projects, run campaigns and influence decision makers on the issues which matter most to young people. All MYPs have the opportunity to meet once a year at the UK Youth Parliament Annual Sitting.

Where do campaigns and policies come from?

Each year MYPs present the issues they were elected to campaign on. Those already in the manifesto are filtered out and others covering similar content are combined. The final list of manifesto policy motions goes forward to the online MYP vote to prioritise the issues they would like most to be debated at the Annual Sitting. Manifesto motions are voted on at the Annual Sitting with speeches for each motion and an open floor debate. This year the Annual Sitting was held in July at the University of York. MYPs then prioritised the top ten issues to go to a national consultation through the Make Your Mark ballot, which reached 969,000 young people in 2015. The target for 2016 is to reach one million young people. The five top issues from the ballot are then debated in the House of Commons, where MYPs vote for the two issues to be campaigned on during the following year.

Parliament Week (16 – 22 November)

The UK Youth Parliament's sitting in the House of Commons marks the start of UK Parliament Week, a programme of events and activities that connects people with the UK Parliament.

Organisations across the UK run events and activities throughout UK Parliament Week which explore what the UK Parliament means to them and their community. There is something for everyone: whether you attend or organise an event, or simply take part in the conversation online using the hashtag #UKPW16.

Find out more at www.ukparliamentweek.org and follow @YourUkParl on Twitter for the latest news.



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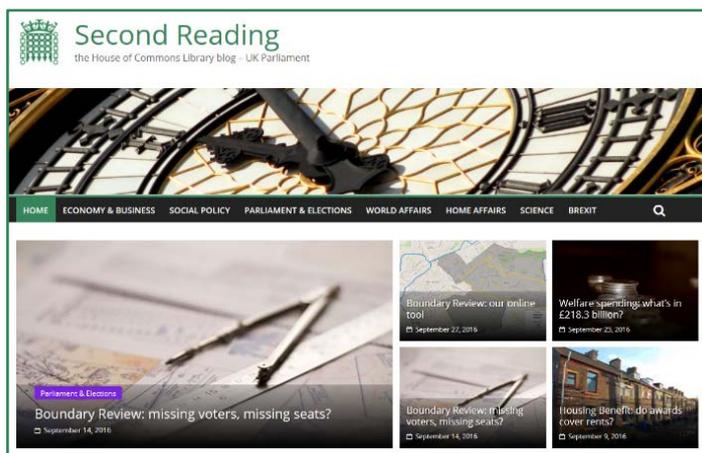
These papers are published to the [Parliament website](#) and can be accessed by members of the public.

The House of Commons Library aims to ensure that MPs are well informed ahead of any debate in the House of Commons chamber.

The purpose of this paper is to ensure that MYPs have access to the same relevant information to help them prepare for the debate in the House of Commons chamber.

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1. Votes at 16

Proposal before the Youth Parliament

Give 16 and 17 year olds the right to vote in all elections/referendums.

Under current legislation, a **person must be 18 or over to vote** in all elections in England, Wales and Northern Ireland. The franchise for the referendum on independence for Scotland in 2014 was extended to **include 16 and 17 year olds**. The law has subsequently been changed in Scotland to lower the voting age to 16 for elections to the Scottish Parliament and local government elections in Scotland, although the voting age for UK Parliamentary elections there remains at 18, as in the rest of the UK.

The voting age was lowered from 21 to 18 in 1969.

Sarah Champion's view (Labour):

"We cannot expect 16 and 17-year-olds to contribute to our society through various means—economically, physically, intellectually or socially—in a capacity where we recognize them as an adult, but then give them the democratic rights of a child." [HC Deb 6 May 2014 c7WH](#)

1.1 Who supports lowering the voting age to 16?

The Electoral Reform Society argues for this and organised a coalition on the issue. This resulted in the launch of the [Votes at 16](#) campaign on 29 January 2003. The campaign is supported by the British Youth Council, the National Union of Students, Unlock Democracy and the Children's Society amongst others.

The UK Youth Parliament is a supporter of the Votes at 16 campaign and calls for the reduction in voting age in its current [manifesto](#).

Baroness Morgan of Ely's view (Labour):

"The Labour Party agrees with the principle of allowing 16 and 17 year-olds to vote in the EU referendum and in elections more generally. Who can forget the enthusiasm and intelligence with which the 16 and 17 year-olds in Scotland engaged with that referendum debate? More 16 and 17 year-olds voted in that referendum than 18 to 24 year-olds, and evidence from Austria and Norway, which also have votes for 16 to 18 year-olds, suggests that they are more likely to continue to vote if they start at a younger age." [HL Deb 18 November 2015 c152](#)

The Labour Party, the SNP, the Liberal Democrats and the Green Party all support voting at 16. The Liberal Democrats have had a commitment to lower the voting age in their general election manifestos since 2001.

Historically, the Conservative Party has generally opposed lowering the voting age on the grounds that 16 and 17 year olds are not mature enough to have the vote, but recently the leader of the Scottish Conservatives, Ruth Davidson, announced that she supported lowering the voting age. In her contribution to the Tory Reform Group's publication, [Giving 16 and 17 year olds the vote: the Tory case](#), Ruth Davidson wrote:

In the weeks following the [Scottish independence] referendum, the debate has inevitably shifted onto whether the franchise should now be extended to all other elections. Those in favour of the status quo argue that while the referendum offered a clear, unambiguous choice, parliamentary elections present a more muddled, multi-layered decision which require a more mature electorate.

But having watched and debated in front of 16 and 17 year olds throughout the referendum, I have found myself unable to agree. My position has changed. We deem 16 year olds adult enough to join the army, to have sex, get married, leave home and work full-time. The evidence of the referendum suggests that, clearly, they are old enough to vote too.¹

Mark Harper's view (Conservative):

"We have to set the line somewhere, and I think that the right place to set it is the age of majority—the age of 18—when we basically decide that children become adults. That is where I think the line is best left. I do not think that that means that we do not engage with children in debates and arguments in schools and colleges; I and all other Members do engage with children in that way perfectly well." [HC Deb 6 May 2014 c18WH](#)

The Political and Constitutional Reform Committee's [report on voter engagement](#), published in November 2014, called on the Government to lead a national discussion on reducing the voting age and to allow the House of Commons a free vote on the issue.²

In February 2006 the Isle of Man was the first part of the British Isles to lower the voting age from 18 to 16 for elections to the Tynwald. The Channel Island of Jersey also lowered its voting age from 18 to 16 in July 2007.

¹ [Giving 16 and 17 year olds the vote: the Tory case](#), Tory Reform Group, 27 September 2015

² [Voter engagement in the UK](#), Political and Constitutional Reform Committee fourth report 2014-15, November 2014

1.2 The lowering of the voting age in Scotland and Wales

The franchise (those eligible to vote) was extended temporarily in Scotland to allow 16 and 17 year-olds to vote in the referendum on independence in 2014. The Electoral Commission reported that those registered to vote at the referendum included 109,593 16 and 17 year olds.³

Turnout at the referendum on Scottish independence

A survey carried out by the Electoral Commission indicated that 69% of 16-34 year olds said that they voted in the referendum on independence, compared with 85% of 35-54 year olds and 92% of the 55+ age group. Claimed turnout amongst 16-17 year olds was 75%, significantly higher than amongst 18-24 year olds (54%).

Electoral Commission's [report](#) on the Scottish independence referendum, 2014

The Scottish Parliament was subsequently given the power to extend the franchise to 16 and 17 year olds for elections to the Scottish Parliament and for local government elections in Scotland. On 18 June 2015, the *Scottish Elections (Reduction of Voting Age) Bill* was passed by the Scottish Parliament and 16 and 17 year olds were able to vote in the Scottish Parliament elections from 2016 and in local government elections in Scotland from 2017.

In Wales, the National Assembly is to be given the power to lower the voting age for its elections. The [Wales Bill 2016-17](#), currently before Parliament, will make provision for this.

1.3 Recent Parliamentary debates

Backbench business debate 24 January 2013

Stephen Williams (Liberal Democrat) secured a backbench business debate on 24 January 2013 on the lowering of the voting age.⁴ Mr. Williams suggested that the time had come to extend the franchise to 16 and 17 year-olds:

There is widespread support for this proposed measure among parliamentarians from all parties. It is also supported by a wide coalition of youth charities, including the British Youth Council, Barnardo's and the YMCA, as well as youth representation groups, such as the National Union of Students and, as the hon. Member for Worthing West (Sir Peter Bottomley) just mentioned, the UK Youth Parliament...⁵

³ [Scottish independence referendum: report on the referendum held on 18 September 2014](#), Electoral Commission, December 2014, p60

⁴ [HC Deb 24 January 2013 c479](#)

⁵ [HC Deb 24 January 2013 c479](#)

Caroline Lucas (Green Party) supported the motion to reduce the voting age:

"...a strong reason for supporting the motion is the evidence ... from countries such as Austria, where lowering the voting age has led to increased voter turnout, and that, given that voter turnout is something that we all care about, this proposal would be a very good way of achieving that."

[HC Deb 24 January 2013 c480](#)

Natascha Engel (Labour) argued that the Scottish referendum would provide the opportunity to see how giving 16-year-olds the vote could work:

Why should we not view it as a pilot? After 16, 17 and 18-year-olds have had their say in the referendum, we can look at how it went. I agree that the genie is out of the bottle once 16-year-olds are able to vote in a referendum, because after that it will be very difficult to say to them that they are to be denied a vote in the general election that will take place in the following year.⁶

The Government was not convinced that there was enough evidence to justify reducing the voting age but a vote at the end of the debate on the motion "that this House believes that the age of eligibility for voting in all elections and referendums in the United Kingdom should be reduced to 16" was agreed: Ayes 119, Noes 46.

Westminster Hall debate 6 May 2014

Sarah Champion (Labour) secured a [Westminster Hall debate](#) on 6 May 2014 on votes at 16.⁷ Sarah Champion argued that the time was right "to open the democratic system even further and to include 16 and 17 year-olds among the people who are able to vote."⁸ She continued:

...we have been pioneers of voting reform in the UK in the past, and I hope that we are open-minded enough now to continue that trend. It is high time that we recognised the clash within our expectations of 16-year-olds. We trust our young people to contribute to society in many ways, so we should start to give them their democratic rights.⁹

Tom Brake (Liberal Democrat) responded to the debate which he said had "again shown the divergent views in this House on whether 16 and 17-year-olds should be eligible to vote" and had reflected "differing opinions on the issue in society at large".¹⁰

Cities and Local Government Bill 2015-16

During Report Stage of the *Cities and Local Government Bill [HL] 2015/16* in the House of Lords, the Government was defeated on an amendment moved by Lord Tyler (Liberal Democrat) which proposed lowering the voting age for council elections.¹¹ Lord Tyler argued that the engagement of young voters in the Scottish independence

⁶ [HC Deb 24 January 2013 c494](#)

⁷ [HC Deb 6 May 2014 c1WH](#)

⁸ [HC Deb 6 May 2014 c2WH](#)

⁹ [HC Deb 6 May 2014 c7WH](#)

¹⁰ [HC Deb 6 May 2014 c27WH](#)

¹¹ [HL Deb 15 July 2015 c625](#)

referendum showed that 16 – 17 year olds were ready to vote in all elections:

...consider the facts. First, there was a remarkable response in terms of registration—no signs of disinterest there. Secondly, the level of debate ... was lively, intelligent and very well informed. Thirdly, the turnout on the day of the poll was excellent, with 75% casting their vote, which far outweighed that of the 18 to 24 year-old cohort, which managed only 54%...In summary, the new young voters proved themselves to be better informed, more conscientious and even more mature than many of their elders—they blew to smithereens all the misgivings and dire warnings of the doomsayers.¹²

The amendment was reversed by the House of Commons on 17 November 2015.¹³

EU Referendum Bill 2015-16

During the passage of the *European Union Referendum Bill 2015-16* there were attempts to amend this Bill to allow 16 and 17 year olds to vote in the referendum.¹⁴

At Report Stage of the Bill in the House of Lords on 18 November 2015, an amendment to extend the franchise for the referendum to 16 and 17 year olds was agreed after a division, Contents 293; Not-Contents 211.¹⁵

Introducing the amendment, Baroness Morgan of Ely (Labour), had argued that it was right to reduce the voting age for the referendum:

This is a very exceptional situation, because it is a once-in-a-generation opportunity for [16 and 17 year-olds] to vote on this significant issue. It is different from other elections, because within two years' time they will be able to take a position on who they want to run their country; in this instance, they will possibly never again get a say on their country's future relationship with the EU. However, they will have to live with the consequences of that decision for longer than any of us.¹⁶

The Government was not persuaded that the voting age should be changed for the referendum. The Minister said it was not appropriate to use the *EU Referendum Bill* to reduce the voting age and that "a change of this sort needs substantial legislation".¹⁷

EU Referendum: UK result would have been Remain, had votes been allowed at 16, survey finds

Had 16 and 17-year-olds been allowed to vote, as with the Scottish referendum in 2014, the UK would have awoken to an entirely different result on Friday morning, a new survey has revealed.

Online wiki and forum The Student Room conducted a poll - on the day the Brexit result was revealed - to find 82 per cent of voters in this age group would vote Remain. [Independent, 24 June 2016](#)

¹² [HL Deb 15 July 2015 c625](#)

¹³ [HC Deb 17 November 2015 c581](#)

¹⁴ See Library Briefing Paper 7249, [European Union Referendum Bill 2015-16: progress of the Bill](#) for further details

¹⁵ [HL Deb 18 November 2015 c180](#)

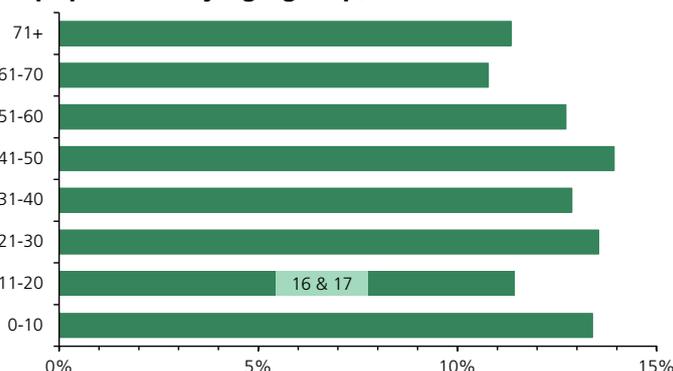
¹⁶ [HL Deb 18 November 2015 c153](#)

¹⁷ [HL Deb 18 November 2015 c179](#)

1.4 How many 16 and 17 year olds are there in the UK?

There are over **1.5 million** 16 and 17 year olds in the United Kingdom, representing around **2.3%** of the total population. If the voting age would be reduced to 16, 16 and 17 year olds would represent around 2.9% of the voting age population.

UK population by age group, mid-2015



Population aged 16 and 17 in the UK: mid-2015

Age	Northern					United Kingdom
	England	Wales	Scotland	Ireland		
16	631,635	35,901	58,760	24,271		750,567
17	641,107	36,698	60,074	24,562		762,441
16&17	1,272,742	72,599	118,834	48,833		1,513,008

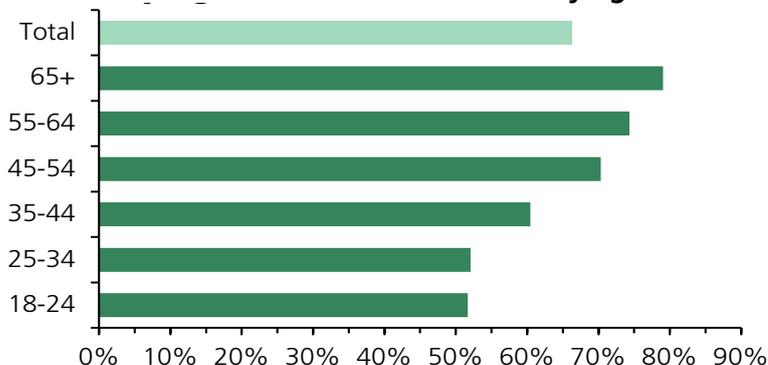
Source: [ONS population estimates, mid-2015](#)

1.5 What would the impact on turnout be if 16 and 17 year olds could vote?

It is not possible to predict how many 16 and 17 year olds would turn out to vote. There is no official data on turnout by age, but polling data suggests that turnout tends to increase with age, with the lowest turnout in the younger age groups.

Reported turnout is usually higher than actual turnout: at the 2015 General Election, 73% said they had voted, while the actual turnout was 66%. The chart below shows that estimated turnout by age at the 2015 General Election. Adjusting polling data for this difference, it is estimated that at the 2015 General Election, 18 to 24 year olds had a turnout rate of around 52%, while turnout for those aged 65+ was 79%.

2015 General Election: Estimated turnout by age



Note: Polling data scaled to actual turnout

Source: British Election Study, Face to Face study

1.6 Other countries

The voting age for national elections in EU countries is 18, except for Austria where it was reduced to 16 in 2007.

Countries with minimum voting age other than 18 in elections to national parliaments

Min age Country

16	Argentina, Austria, Brazil*, Cuba Ecuador, Nicaragua
17	Indonesia, Timor-Leste, Dem Peoples Rep of Korea
19	Republic of Korea
20	Japan, Nauru, Bahrain, Cameroon
21	Kuwait (men), Lebanon, Malaysia, Oman, Samoa, Tonga, Singapore

*Voters have to be aged 25+ in Italian Senate elections

*In Brazil voting is optional for 16-17s and 70+ and compulsory for other ages

Source:

IPU [Parline database](#) and the [ACE Electoral Knowledge network](#)

1.7 Further reading

- [Voting age](#), House of Commons Library Briefing Paper
- [Should the UK Lower The Voting Age to 16?](#), Democratic Audit and the Political Studies Association, July 2014
- [Audit of political engagement](#), Hansard Society

2. A Curriculum to prepare us for life

Proposal before the Youth Parliament

A Curriculum to prepare us for life. Schools should cover topics like finance, sex and relationship education and politics.

Education is a devolved subject. As a result, all the information included in this section relates to England only. The Westminster Parliament would not make the decisions on how this topic would be addressed in Scotland, Wales, or Northern Ireland.

2.1 Personal, social, health and economic education (PSHE)

Personal, social, health and economic education (PSHE) is taught in schools across England. The PSHE Association defines PSHE as:

...a planned programme of learning through which children and young people acquire the knowledge, understanding and skills they need to manage their lives, now and in the future.¹⁸

PSHE is a non-statutory subject. However, the [National Curriculum Framework](#) states that:

All schools should make provision for personal, social, health and economic education (PSHE), drawing on good practice. Schools are also free to include other subjects or topics of their choice in planning and designing their own programme of education.¹⁹

In September 2013, the Department for Education issued [new guidance on PSHE](#), which makes clear that it is largely up to schools to determine what is taught; it also states that the then Government **did not intend** to publish new non-statutory programmes of study for PSHE.

Personal, social, health and economic (PSHE) education is an important and necessary part of all pupils' education. All schools should teach PSHE, drawing on good practice, and this expectation is outlined in the introduction to the proposed new national curriculum.

PSHE is a non-statutory subject. To allow teachers the flexibility to deliver high-quality PSHE we consider it unnecessary to provide new standardised frameworks or programmes of study. PSHE can encompass many areas of study. Teachers are best placed to understand the needs of their pupils and do not need additional central prescription.

However, while we believe that it is for schools to tailor their local PSHE programme to reflect the needs of their pupils, we expect schools to use their PSHE education programme to equip pupils

¹⁸ PSHE Association, [What is PSHE and why is it important?](#) [accessed 15 September 2015]

¹⁹ Department for Education, [The national curriculum in England: Framework document: for teaching 1 September 2014 to 31 August 2015](#), September 2013

with a sound understanding of risk and with the knowledge and skills necessary to make safe and informed decisions.

Schools should seek to use PSHE education to build, where appropriate, on the statutory content already outlined in the national curriculum, the basic school curriculum and in statutory guidance on: drug education, financial education, sex and relationship education (SRE) and the importance of physical activity and diet for a healthy lifestyle.²⁰

The new guidance followed a review of PSHE carried out by the Coalition Government, which reported in March 2013, separately from its review of the National Curriculum.²¹ The [Summary Report](#) of the consultation on PSHE education (which includes discussion of sex and relationship education) sets out the views of the respondents to that consultation.²²

PSHE Association

The Government provides grant funding to the [PSHE Association](#) to work with schools to advise them in developing their own PSHE curriculums and improve the quality of teaching.

The association focuses on signposting schools to resources and in expanding their Chartered Teacher of PSHE programme. The Government has also asked the association to promote the teaching of consent as part of SRE.²³

The PSHE Association has published its own [programme of study](#) for PSHE, covering Key Stages 1-4. The programme has three core themes:

- Health and Wellbeing
- Relationships
- Living in the Wider World

Within these headings the programme includes focus on a variety of areas, including diversity and equality, relationships of different kinds, personal financial choices, drugs education, the importance of respecting and protecting the environment, and people's rights and responsibilities as members of families and other groups, and as citizens.²⁴

Nicky Morgan speech March 2015

In March 2015, the then Education Secretary, Nicky Morgan, made a [speech](#) to the Bright Blue think tank which made announcements on further initiatives on PSHE alongside the PSHE Association:

We will establish a new charter mark for schools in conjunction with the PSHE Association. This will be awarded to schools that demonstrate excellence in this area in order to give schools

²⁰ Department for Education, [Personal, social, health and economic education](#), 11 September 2013

²¹ Written Ministerial Statement at [HC Deb 21 Mar 2013 c52WS](#)

²² Department for Education, [Consultation on PSHE Education: Summary Report](#), March 2013

²³ Department for Education, [Personal, social, health and economic education](#), 11 September 2013

²⁴ PSHE Association, [PSHE programme of study \(Key stages 1-4\)](#), October 2014

something to strive for in improving their PSHE teaching, and making it easier for schools struggling in this area to work with the best.

[...]

And later this week we will launch new guidance, produced by the association on one of the most important and sensitive areas of PSHE teaching: consent.

The new guidance will build on an existing programme of work between the Department and the PSHE Association, and will give teachers important information about the law on consent, helping them to design effective lessons accordingly.²⁵

Other funded bodies

For drug and alcohol education, the Government launched a new evidence-based information service in April 2013 called [Mentor-ADEPIS](#) for those working with young people, including schools and teachers. The new service provides practical advice and tools.

The Government also provides funding to the [Centre for the Analysis of Youth Transitions \(CAYT\)](#) to develop a database of evaluations of programmes aimed at improving outcomes for young people.

2.2 Sex and relationship education (SRE)

Sex and relationship education is distinct from PSHE, although many issues relating to SRE may be taught within the PSHE curriculum. As the two subjects are so closely linked, particularly in calls for greater provision, this briefing includes an overview of SRE requirements. The Library briefing on SRE in schools, [SN06103](#), provides more detail on the current position and also on debates regarding possible reform.

Current position

The [gov.uk website](#) provides a brief overview of the rules relating to SRE in schools:

Sex and relationship education (SRE) is compulsory from age 11 onwards. It involves teaching children about reproduction, sexuality and sexual health. It doesn't promote early sexual activity or any particular sexual orientation.

Some parts of sex and relationship education are compulsory - these are part of the national curriculum for science. Parents can withdraw their children from all other parts of sex and relationship education if they want.

All schools must have a written policy on sex education, which they must make available to parents for free

Academies and free schools do not have to follow the National Curriculum and so are not under the same statutory obligations as local authority maintained schools. As such, they are not obliged to teach sex

²⁵ Rt Hon Nicky Morgan MP, [Preparing young people for life in modern Britain](#), 10 March 2015 [accessed 11 September 2015]

and relationship education;²⁶ if they do provide it, they must have regard to the [SRE guidance](#) issued by the Secretary of State.²⁷

Proposals for change

During the 2010 Parliament concerns were frequently raised about the content, status and quality of SRE. In 2013, an [Ofsted report](#) found that SRE “required improvement in over a third of schools,” with primary pupils ill-prepared for the physical and emotional changes of puberty, and secondary education placing too much emphasis on “the mechanics” of reproduction.²⁸

Private Members’ Bills have been tabled during both the 2010 and 2015 Parliaments to introduce compulsory SRE (sometimes within proposed statutory PSHE), and Labour and Green Party MPs tabled amendments with this aim during the passage of the *Children and Families Act 2014*. The previous Labour Government had proposed legislation prior to the 2010 General Election to ensure that all children receive at least one year of SRE, but the relevant measures did not pass. There have also been calls from across parties for the Government’s SRE guidance, which has been in place since 2000, to be updated to better equip teachers in the world transformed by the internet.

The Coalition Government argued that supplementary advice for schools published by the PSHE Association, the Sex Education Forum and Brook, “[Sex and relationships education \(SRE\) for the 21st century](#)”, fulfilled these expectations.²⁹

2.3 Education Committee report and recommendation for statutory PSHE

In 2014-15, the Commons Education Select Committee conducted an enquiry into PSHE and SRE, including consideration of whether the two subjects should be made statutory. In February 2015 the Committee [recommended](#) that age-appropriate PSHE, including SRE, should become a statutory subject in primary and secondary schools.³⁰ The Committee believed that the then Government’s:

...current strategy for improving PSHE is weak, with a mismatch between the priority that ministers claim they give PSHE and the steps that have been taken to improve the quality of teaching in the subject.³¹

The [Government response](#) published in July 2015 did not take forward this recommendation for PSHE to be made statutory, although it stated

²⁶ Unless there is a clause in their funding agreements requiring SRE to be taught.

²⁷ Department for Education and Employment, [Sex and Relationship Education Guidance](#), July 2000

²⁸ Ofsted, [Not yet good enough: personal, social, health and economic education in schools](#), May 2013

²⁹ HC Deb 14 Oct 2014 c280

³⁰ House of Commons Education Select Committee, [All schools should have to provide PSHE and SRE](#), 17 February 2015

³¹ Ibid.

that it would be giving further consideration to the Committee's arguments in 2015.³²

The Chair of the new Education Committee, Neil Carmichael, was [critical](#) of the Government's response:

The response made by the Government today is disappointing.

Ministers entirely sidestep the call made by MPs in the closing months of the last Parliament to give statutory status to PSHE.

They also reject or brush over nearly every other recommendation made by the previous Education Committee in their key report published five months ago.

It is unclear why it should have taken the Government so long to publish such a feeble response.³³

In November 2015, the Chair of the Committee [wrote](#) to the Education Secretary to stress that the Committee expected an update on statutory status, and insisted on considering the arguments in favour of statutory status carefully.³⁴

In December 2015, Natasha Devon, founder of the Self-Esteem Team and mental health champion at the Department for Education, told the Education Committee in [oral evidence](#) to its inquiry into the mental health and wellbeing of looked after children that she believed the Education Secretary favoured statutory status, but that there were budgetary issues:

Q50: [...] *As far as I am aware—this is just anecdotal—Nicky Morgan is in favour of it being made statutory, so the question is: what more can we do? My hunch is that financial considerations are at the root of the decision not to make it statutory, because as soon as you make it statutory you have to give it a budget.³⁵*

Joint letter from select committee Chairs

In January 2016, the Chairs of four Commons select committees – education, health, home affairs and business, innovation and skills – [wrote](#) to the then Education Secretary, citing committee reports and statements from the Children's Commissioner and the Chief Medical Officer, in support of statutory PSHE and SRE.

The letter stated that it was "clear to the four of us that there is a need to work towards PSHE and SRE becoming statutory in all schools."³⁶

³² Department for Education, [Government response: Life lessons: PSHE and SRE in schools](#), Cm 9121, July 2015, p9

³³ House of Commons Education Select Committee, [Government response to sex education report is "feeble"](#), 16 July 2015

³⁴ Education Committee, [Letter from Neil Carmichael MP to Rt Hon Nicky Morgan MP](#), 25 November 2015

³⁵ Education Committee, Uncorrected oral evidence: [Mental health and well-being of looked after children](#), HC 481, 16 December 2015

³⁶ Education Committee, [Letter from Neil Carmichael MP, Dr Sarah Wollaston MP, Rt Hon Keith Vaz MP, and Iain Wright MP, to Rt Hon Nicky Morgan MP](#), 8 January 2016

2.4 Women and Equalities Committee scrutiny and recommendation

As part of its inquiry into sexual harassment and sexual violence in schools, the Women and Equalities Committee [asked](#) for comments on the strength of the Government's evidence on the current status of PSHE and its work in this area, to inform its questions to Ministers.³⁷

[The Committee's report](#) was published on 13 September 2016. One of the Committee's recommendations was that:

Every child at primary and secondary school must have access to high quality, age-appropriate relationships and sex education delivered by well-trained individuals. This can only be achieved by making sex and relationships education (SRE) a statutory subject; investing in teacher training; and investing in local third sector specialist support.³⁸

The Committee further recommended that both PSHE and SRE should be made statutory in the anticipated Education Bill.³⁹

2.5 Government decision not to make PSHE statutory

In February 2016, Nicky Morgan [wrote](#) to the Education Committee Chair to state that PSHE would not be made statutory:

The vast majority of schools already make provision for PSHE and while the Government agrees that making PSHE statutory would give it equal status with other subjects, the Government is concerned that this would do little to tackle the most pressing problems with the subject, which are to do with the variable quality of its provision, as evidenced by Ofsted's finding that 40% of PSHE teaching is less than good. As such, while we will continue to keep the status of PSHE in the curriculum under review, our immediate focus will be on improving the quality of PSHE teaching in our schools.⁴⁰

The letter also stated that the DfE would be working with a group of leading head teachers and practitioners in the following months to produce an action plan and recommendations for improving PSHE, including publishing a comprehensive PSHE toolkit for schools.

Neil Carmichael, the Chair of the Education Committee, was [quoted](#) in *Schools Week* stating that he was "disappointed that the government is not going as far as the committee would like but pleased they are

³⁷ Women and Equalities Committee, [Personal, Social, Health and Economic education and the curriculum](#), 5 July 2016

³⁸ Women and Equalities Committee, ['Widespread' sexual harassment and violence in schools must be tackled](#), 13 September 2016

³⁹ House of Commons Women and Equalities Committee, [Sexual harassment and sexual violence in schools \(full report\)](#), HC 91 session 2016-17, September 2016, para 151

⁴⁰ Education Committee, [Letter from Rt Hon Nicky Morgan MP to Neil Carmichael MP](#), 10 February 2016

working on an action plan with the profession to improve the teaching of PSHE.”⁴¹

It was [reported](#) in the press that the decision not to make PSHE statutory was taken by the then Prime Minister David Cameron.⁴²

The PSHE Association was [strongly critical](#) of the decision, with the Association’s Chief Executive, Joe Hayman, describing it as “an appalling failure,” and stating that:

*What is most baffling about this decision is that the Government has a range of objectives it seeks to achieve through PSHE education, including teaching pupils to stay safe online, promoting children and young people’s mental health and preventing radicalisation, child sexual exploitation and violence against women and girls. Its decision not to address a status quo in which these issues are addressed by untrained teachers in inadequate curriculum time – or left off the curriculum altogether – is self-defeating and leaves vulnerable young people at risk.*⁴³

The letter was also discussed in a House of Lords debate on the day of its publication – see [HL Deb 10 Feb 2016 c2233-2236](#).

2.6 Further Reading

- House of Commons Library, [Personal, social, health and economic education in schools \(England\)](#), CBP 7303, July 2016
- House of Commons Library, [Sex and Relationship Education in Schools \(England\)](#), SN 6103, July 2016
- House of Commons Library, [Financial and enterprise education in schools](#), SN 6156, July 2016
- Ofsted, [Not yet good enough: personal, social, health and economic education in schools](#), May 2013
- House of Commons Education Select Committee, [Life Lessons: PSHE and SRE in schools](#), February 2015
- Department for Education, [Government response: Life lessons: PSHE and SRE in schools](#), Cm 9121, July 2015
- House of Commons Women and Equalities Committee, [Sexual harassment and sexual violence in schools \(full report\)](#), HC 91 session 2016-17, September 2016
- Department for Education, [Sex and Relationship Education Guidance](#), 2000

⁴¹ Schools Week, [Government rules out making PSHE and SRE statutory](#), 10 February 2016

⁴² Telegraph, [David Cameron just blocked compulsory sex education - and the women in his Cabinet are furious](#), 11 February 2016

⁴³ PSHE Association, [Statement on government decision to reject statutory status for PSHE education](#), 10 February 2016

3. First Aid Education for All Young People

Proposal before the Youth Parliament

First Aid Education for All Young People. All young people should learn basic First Aid, on a regular basis, including CPR, and all schools in the UK should have a defibrillator.

As education is a devolved area, the Westminster Parliament would not make policy decisions on this subject for schools in Scotland, Wales and Northern Ireland. Consequently, the information in this briefing relates to England only.

3.1 Current provision of first aid education in schools

Emergency first aid education is not currently part of the National Curriculum in England, which sets the required content for those subjects that should be taught to all pupils. Local authority maintained schools are required to follow the National Curriculum; academies, free schools (which operate as academies in law) and independent schools are not required to follow it but may do so if they wish.

Personal, Social, Health and Economic Education

Personal, social, health and economic education (PSHE) is taught in schools across England.

The PSHE Association, which receives grant funding from the Government, has published a [programme of study](#) (non-statutory) for PSHE. Emergency first aid is included in the suggested content for children at key stages 3 and 4:

- At key stage 3 (ages 11-14) pupils should have the opportunity to learn “a knowledge of basic first aid and life-saving skills”.
- At key stage 4 (ages 14-16) pupils should have the opportunity to learn “how to find sources of emergency help and how to give basic and emergency first aid in appropriate contexts”.⁴⁴

The PSHE Association also recommends, however, that schools do not attempt to cover all of the suggested content in the programme of study, as doing so “would lead to a series of superficial experiences that would most likely be restricted to providing information”.⁴⁵ There is therefore no requirement for schools to teach emergency first aid as part of PSHE, but they may do so if they wish.

As outlined in section two of this briefing, there have been calls to make PSHE a statutory subject, but the Government has decided to keep its non-statutory status.

PSHE

Section 2 provides further information on provision for personal, social, health and economic education in England

⁴⁴ PSHE Association, [PSHE Education Programme of Study \(Key Stages 1-4\)](#), October 2014, p16.

⁴⁵ As above, p1.

How many children currently receive emergency first aid education?

There are no official statistics on the proportion of school children in England who currently receive emergency first aid education. A number of figures have been quoted, including:

- An October 2015 article on the Red Cross website stated that “research developed by” the Red Cross, the British Heart Foundation and St John Ambulance showed that “only **24%** of schools currently teach first aid”.⁴⁶
- In a 2012 briefing on the campaign for life-saving skills to be taught in schools, the British Heart Foundation estimated that around **one in seven secondary** school children in England “receive training that could help them potentially save a life.”⁴⁷
- A 2009 survey of 1,552 primary and secondary school children conducted by St John Ambulance found that **69%** of those surveyed “wouldn’t know how to treat a friend or loved one who needed first aid”.⁴⁸

A 2006 survey conducted by the International Federation of Red Cross and Red Crescent societies stated that the percentage of the population trained in first aid among the countries who responded to the survey ranged from 95% in Norway to 0.3% in Hungary.⁴⁹

3.2 Training and resources from other organisations

A number of organisations, including St John Ambulance, the British Red Cross and the British Heart Foundation offer training and resources to schools for teaching emergency first aid.

As part of the support it provides to schools, the British Heart Foundation offers free CPR training packs – the “Call Push Rescue Training kit” – to all secondary schools in the UK. The training kit is suitable for students 12 years old and over and includes, among other things, an education DVD demonstrating how to do CPR and inflatable manikins.⁵⁰

The Government has stated that it would “work with the British Heart Foundation to continue to promote this kit to schools”.⁵¹

3.3 Automatic external defibrillators in schools

In November 2014, the Department for Education (DfE) published non-statutory advice for schools on automatic external defibrillators (AEDs), which was last updated in April 2016.

⁴⁶ [Top charities join forces to launch Every Child a Lifesaver campaign](#), British Red Cross, 1 October 2015.

⁴⁷ British Heart Foundation and Resuscitation Council UK, [Briefing on campaign for life-saving skills to be taught in schools](#), October 2012.

⁴⁸ [Pupils speak out about first aid](#), St John Ambulance, March 2009.

⁴⁹ International Federation of Red Cross and Red Crescent Societies, [First aid for a safer future: Focus on Europe](#), 2009, p3.

⁵⁰ “[CPR training for schools](#)”, British Heart Foundation, last accessed 19 September 2016.

⁵¹ [PQ3525, 25 June 2015](#)

What is an automatic external defibrillator?

The DfE advice states that an automatic external defibrillator (AED) is "a machine used to give an electric shock when a person is in cardiac arrest, i.e. when the heart stops beating normally." It further explains that the AED will monitor an individual's heart rhythm and apply a shock to restart it, or advise that CPR be continued. From when they are first switched on, AEDs provide voice and visual prompts to guide the rescuer through the process, including positioning and attaching the pads, when to start and restart CPR and whether or not a shock is advised.

The advice encouraged schools to purchase AEDs as part of their first aid equipment and stated that the DfE had "negotiated an arrangement with NHS Supply Chain for schools to purchase AEDs from them at reduced cost".⁵² It additionally stated that schools may wish to consider raising awareness of AED and CPR training across the whole school, and that this might be done through PSHE:

Schools may wish to consider raising AED awareness, along with CPR training, across the entire school community to ensure that there is a greater likelihood of being able to assist someone suffering a cardiac arrest in time to save their life. The Resuscitation Council (UK) states that untrained bystanders should not be discouraged from using an AED in an emergency. Nevertheless, individuals who have received training will naturally feel more confident in doing so should the need arise.

One way in which this might be done is through personal, social, health and economic (PSHE) education, which all schools should provide. The PSHE Association's suggested programme of study includes emergency life-saving skills as part of PSHE provision. Schools may want to consider using/contacting organisations such as the local IMPS (Injury Minimization Programme for Schools) programme, the British Red Cross, St John Ambulance and the Royal Life Saving Society UK, who may be able to provide suitable resources and/or training...

Secondary school pupils and older primary school children are generally capable of sufficiently compressing the chest to the correct depth and speed in order to successfully administer CPR. CPR training can also give children the confidence and skills to talk an adult through the administration of CPR.

Younger primary-aged children frequently lack the physical strength to carry out CPR on adults, so general awareness training (including, for example, how to dial 999 and put someone in the recovery position) may be considered more appropriate for this age group.⁵³

Similarly, DfE non-statutory guidance on supporting pupils with medical conditions advises schools to consider purchasing a defibrillator and promoting CPR techniques more widely in schools.⁵⁴

⁵² Department for Education, [Automated external defibrillators \(AEDs\): A guide for maintained schools and academies](#), April 2016, p10.

⁵³ As above, pp17-8.

⁵⁴ Department for Education, [Supporting pupils at school with medical conditions: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England](#), April 2014, p18.

Consensus paper on out of hospital cardiac arrest

A consensus paper on out of hospital cardiac arrest (OHCA) in England, developed by the British Heart Foundation, NHS England and the Resuscitation Council, was published in October 2014. It reported that in 2013, the emergency medical services attempted to resuscitate approximately 28,000 cases of OHCA in England. Of these cases, the overall rate of survival to hospital discharge was 8.6%.⁵⁵ The paper stated that the survival rates from other developed countries indicate that there is potential to improve survival rates in the UK.⁵⁶

How many OHCA's occur in England each year?

The consensus paper stated that the total number of cardiac arrests in England is unknown. It further stated that before quoting any figure it is important to define what is meant by 'cardiac arrest' given that the heart stopping will always be part of the process of dying and in many cases attempting CPR would be of no benefit.

A figure of 60,000 OHCA's is often quoted, which the consensus paper states probably derives from a 2006 report by the Ambulance Services Association, "which identified 57,345 OHCA's in 2006, of which 25,143 received attempted CPR by the EMS [emergency medical services] and 32,202 who did not". It is not certain how many of the 32,202 people would have been given CPR if the emergency services were called earlier or if bystanders had administered CPR.

The consensus paper stated that the most important figure is "the total number of cardiac arrests from which the person may have a chance of surviving if someone starts a resuscitation attempt immediately". This is uncertain but is likely to be higher than the number of cardiac arrests in which the emergency medical services attempted resuscitation in 2013 (28,000).

The paper stated that when an individual has a cardiac arrest, every minute without cardiopulmonary resuscitation (CPR) and defibrillation reduces their chances of survival by 7-10%.⁵⁷ It further stated that countries with the highest rates of OHCA survival are those which have strengthened all four links of the chain of survival:

- Early recognition and call for help;
- Early CPR;
- Early defibrillation;
- Post resuscitation care.

The rate of initial bystander CPR in England was reported in the paper as 43%, but this figure included situations where CPR was initiated following an instruction from a medical dispatcher after a 999 call. The paper noted that such situations "may result in a delay of up to several minutes before the victim receives CPR".⁵⁸

The paper stated that a number of factors contributed to the "low" level of bystander CPR and public access defibrillator use in England:

⁵⁵ British Heart Foundation, NHS England and Resuscitation Council (UK), [Consensus Paper on Out-of-Hospital Cardiac Arrest in England](#), 16 October 2014, pp2-3.

⁵⁶ As above, p2

⁵⁷ As above, pp2-3.

⁵⁸ As above, pp2-3.

1. **Failure to recognise cardiac arrest**
2. **Lack of knowledge of what to do**
3. **Fear of causing harm** (such as breaking the victim's ribs) or being harmed (acquiring infection from a stranger when giving rescue breaths)
4. **Fear of being sued**
5. **Lack of knowledge of the location of PADs**
6. **No access to a PAD** at the time of the cardiac arrest.⁵⁹

It argued that:

...more immediate 999 calls and immediate CPR given by bystanders could increase the number of people who receive CPR by the EMS [emergency medical services]. This will increase the number of people who are given a chance of surviving, and ultimately increase the number of people who do survive when they are given CPR.⁶⁰

3.4 Previous calls for compulsory first aid education

There have been a number of attempts since 2010 to make emergency first aid education a compulsory part of the National Curriculum in England. Most recently, in the 2015-16 parliamentary session, Teresa Pearce MP (Labour) introduced a private members' bill that would have required all state-funded secondary schools in England to teach emergency first aid education, including cardiopulmonary resuscitation and defibrillator awareness.⁶¹

The Bill had a second reading debate on 20 November 2015 but time to discuss it ran out before a vote was taken and the Bill made no further progress. During the debate on the Bill, and in other debates during the 2010-15 parliament, **arguments in favour** of making emergency first aid education compulsory in schools included (but were not limited to):

- Only a **small proportion** of the population currently have the confidence to carry out emergency first aid;⁶²
- **Increasing the number** of people who know what to do in an emergency **could increase survival rates**;⁶³
- Emergency first aid is as important as many subjects currently part of the National Curriculum and only takes a short amount of time to teach;⁶⁴
- **Free resources** from organisations like the British Heart Foundation, St John Ambulance, and the British Red Cross mean that there would **be minimal costs involved for schools**;⁶⁵

⁵⁹ As above, p2.

⁶⁰ As above, p2.

⁶¹ [Compulsory Emergency First Aid Education \(State-funded Secondary Schools\) Bill 2015-16](#).

⁶² For example, [HC Deb 20 November 2015, cc938-9](#)

⁶³ For example, [as above, c946](#).

⁶⁴ For example, [as above, cc940-1](#) & [c950](#).

⁶⁵ For example, [as above, cc944-5](#)

- There can be a **lack of consistency in current provision** as it can be affected by teachers leaving a school etc.⁶⁶

Arguments raised against making first aid education compulsory included (but were not limited to):

- The quality of provision **could be reduced** if it were made compulsory as pupils and teachers would be doing **it because they had to rather than because they wanted to**,⁶⁷
- **Teachers and head teachers should be trusted** to decide whether to provide first aid education rather than being told to do so by the Government;⁶⁸
- There are many **competing demands and a limit** to what can be put on the National Curriculum. It should focus on the key areas only,⁶⁹
- There is **nothing to stop schools teaching emergency first aid** now if they wish to do so;⁷⁰
- **Costs could be considerable** for schools.⁷¹

Government position

In his response to the second reading debate on the *Compulsory Emergency First Aid Education (State-funded Secondary Schools) Bill* the then education minister, Sam Gyimah, noted the importance of emergency first aid skills and set out what the Government was doing to encourage schools to buy AEDs.

He also stated that he did not believe an addition to the National Curriculum was the best approach to encourage first aid education in schools and that a National Curriculum with too much prescribed content risked a “tick-box approach that does not properly address the most important issues”:

It has somehow been routine for Education Ministers to come to this place to make the case against the inclusion of a particular new requirement in the national curriculum. Such proposals, like the one in this Bill, are often supported by a persuasive argument, but their sheer number means that I start from a position of caution... Some of those proposals are niche, to say the least, but when made they all have a strong and persuasive argument behind them, with support from a strong campaign. If we were to include each of them in the national curriculum, we would have to ask what they displace, how we account for the time and how things develop. If the Government were to tell schools that they should teach about [all these issues], we would be prescribing a very long list of specific content that should be covered, which would be unproductive. It could lead to a tick-box approach... that does not properly address the most important issues.⁷²

⁶⁶ For example, [HC Deb 10 March 2015 c33WH](#)

⁶⁷ For example, [HC Deb 20 November 2015, c947](#).

⁶⁸ For example, [as above, c949](#).

⁶⁹ For example, [as above, c960](#).

⁷⁰ For example, [as above, c994](#).

⁷¹ For example, [as above, c1003](#).

⁷² [HC Deb 20 November 2015 cc1018-9](#).

3.5 Further reading

- House of Commons Library, [*Background to the Compulsory Emergency First Aid Education \(State-funded Secondary Schools\) Bill*](#), CBP 7373, November 2015.
- Second reading debate on the *Compulsory Emergency First Aid Education (State-funded Secondary Schools) Bill*, [HC Deb 20 November 2015, cc937-61](#) & [cc984-1019](#).
- Department for Education, [*Automated external defibrillators \(AEDs\): A guide for maintained schools and academies*](#), October 2015.
- British Heart Foundation, NHS England and Resuscitation Council (UK), [*Consensus Paper on Out-of-Hospital Cardiac Arrest in England*](#), 16 October 2014.
- British Red Cross, [*Are Prehospital deaths from trauma and accidental injury preventable? A summary report*](#), 2016.
- British Heart Foundation and Resuscitation Council, [Briefing on campaign for life-saving skills to be taught in schools](#), 2012
- International Federation of Red Cross and Red Crescent Societies, [*First aid for a safer future: Focus on Europe*](#), 2009.

4. Mental health

Proposal before the Youth Parliament

Services should be improved with young people's help and mental health education should be compulsory and challenge stereotypes.

One in four people on average experience a mental health problem, with the majority of these beginning in childhood. A report by the Chief Medical Officer in 2014 found that **50%** of adult mental health problems start before the age of 15 and **75%** before the age of 18.⁷³

4.1 Government policies on children and young people's mental health

The 2011 Mental Health strategy, [No Health without Mental Health^{\[1\]}](#) set out the Coalition Government's plan to improve mental health outcomes, particularly for children and young people: "*By promoting good mental health and intervening early, particularly in the crucial childhood and teenage years, we can help to prevent mental illness from developing and mitigate its effects when it does.*"

In January 2014, the Government published [Closing the Gap: priorities for essential change in mental health](#).⁷⁴ This included commitments to improve children and young people's mental health care:

- There will be improved access to psychological therapies for children and young people across the whole of England, so that early access to treatment is available. The government has invested in a psychological therapies programme for children and young people, and aims for this to be available throughout England by 2018.⁷⁵
- Schools will be supported to identify mental health problems sooner through guidance published from the Department of Health. A new Special Education Needs (SEN) Code of Practice will also provide statutory guidance on identifying and supporting children and young people with mental health problems who have a special education need.⁷⁶

In July 2014, a Taskforce, led by Department of Health and NHS England, examined how to improve child and adolescent mental health

⁷³ Department of Health, [No Health without Mental Health: A cross-government mental health outcomes strategy for people of all ages](#), February 2011

⁷⁴ Department of Health, [Closing the Gap: Priorities for essential change in mental health](#), February 2014

⁷⁵ [ibid](#), p.15

⁷⁶ [ibid](#), p.25

care.⁷⁷The '[Future in Mind](#)' report (March 2015) set ambitions for improving care over the next five years, including making better links between schools and specialist services; tackling stigma and improving access and setting waiting time standards for services.⁷⁸

The 2016 Mental Health Taskforce

[The Five Year Forward View for Mental Health: A report from the independent Mental Health Taskforce to the NHS in England](#) was published in February 2016. The Taskforce was launched by NHS England and was independently chaired by Paul Farmer, Chief Executive of Mind.

The Mental Health Taskforce made a series of recommendations for improving outcomes in mental health by 2020/21. This includes specific objectives for children and young people, including the recommendation that by 2020/21, at least 70,000 more children and young people should have access to high-quality mental health care when they need it. The taskforce also called for the recommendations of the 2015 children and young people's taskforce report - *Future in Mind* - to be fully implemented.

The Government has said it welcomed the report's recommendations, and would work with NHS England and other partners to establish a plan for implementing its recommendations.⁷⁹ The Taskforce also called for an additional investment of £1 billion by 2020/21 to implement change in the priority areas identified by their report. These included:

- **Ending practice of sending people out of their local area** for acute inpatient care;
- Providing mental health care to **70,000 more children** and young people;
- Supporting **30,000 more new and expectant mothers** through maternal mental health services;
- New **funding to ensure all acute hospitals have mental health services** in emergency departments for people of all ages.

In response, the Government **pledged that an extra £1 billion** will be invested in mental health care by 2021 and **a million more people** will get mental health support.⁸⁰

⁷⁷"[Youth mental health care 'in dark ages'](#) says minister, BBC, August 2014

⁷⁸ Department of Health and NHS England, [Future in Mind: promoting, protecting and improving our children and young people's mental health and wellbeing](#), 17 March 2015

⁷⁹ [HC Deb 23 February 2016 c153-4](#)

⁸⁰ Department of Health, [New investment in mental health services](#), 16 February 2016

4.2 Other commitments

In December 2014, the **Government also announced five year funding of £150m for investment** in children and young people's eating disorder services.⁸¹ This would also allow the development of waiting time standards for eating disorders from 2016.⁸² A waiting time standard for children and young people with an eating disorder was introduced in July 2015.⁸³ NHS England is currently leading work on the development of further access and waiting time standards for children's mental health services.

In February 2015, the Secretary of State for Education, Nicky Morgan, announced an **investment of £8.5 million for new schemes to provide families with mental health support** and support early intervention for young people⁸⁴.

In March 2015 the Government published a [blueprint for school counselling services](#), which provided schools with practical, evidence-based advice on delivering high-quality school based counselling.⁸⁵ The Department for Education also funded the PSHE Association to produce [guidance](#) (March 2015) on providing age-appropriate lessons on mental health problems.

The March **2015 Budget announced an extra £1.25 billion** to improve mental health services for children, young people and new mothers.⁸⁶ £1 billion will be provided over the next five years to start new access standards for children and adolescent services. £118 million will be invested by 2018-19 to complete the roll-out of the Children and Young People's IAPT talking therapies. The Department for Education will also invest £1.5 million to pilot joint training for designated leads in CAMHS services and schools.⁸⁷

In August 2015, it was announced that £75 million will be allocated to support CCGs to work with local partners to develop local transformation plans, to overhaul mental health services for children and young people in their areas.⁸⁸

On 11 January 2016, during a speech on improving life chances, the former Prime Minister, David Cameron, announced investment to enhance mental health services across the country, including specific

⁸¹ Gov.uk, [Deputy PM announces £150m investment to transform treatment for eating disorders](#), 2 December 2014

⁸² [HC Deb 3 March 2015 c915](#)

⁸³ [NHS England website](#)

⁸⁴ Gov.uk, [Nicky Morgan speaks at Early Intervention Foundation conference](#), 12 February 2015

⁸⁵ [PO 1025 \[on Mental Health Services: Young People\], 8 June 2015](#)

⁸⁶ HM Treasury, [Budget 2015](#), March 2015, page 59

⁸⁷ [ibid.](#), pages 59-60

⁸⁸ Gov.uk, [Better mental health for the young: where, when and how to target funding](#), 12 August 2015

funding for perinatal mental health and for teenagers with eating disorders.⁸⁹

The Government also committed to commissioning a new prevalence survey of children and young people's mental health⁹⁰ and anticipates publication of findings in 2017.⁹¹

Further information can be found in the Library briefing, [*Children and young people's mental health – policy, CAMHS services, funding and education*](#) (22 June 2016).

⁸⁹ Gov.uk, [Prime Minister pledges a revolution in mental health treatment](#), 11 January 2016

⁹⁰ [PQ 221804 \[on Mental Illness: Children\]](#), 27 January 2015

⁹¹ Health Committee, [Children's and adolescents' mental health and CAMHS: Government Response to the Committee's Third Report of Session 2014-15](#), 10 February 2015, HC 1036, para 8

5. Transport

Proposal before the Youth Parliament

Make public transport cheaper, better and accessible for all.

5.1 Fares and ticketing on buses and trains

Buses

Local bus services operate in a deregulated market run by the private sector. They set their fares on a commercial basis and it is up to them to decide whether a reduced fare for particular groups is commercially viable. For example, when the Coalition Government abolished the subsidy that supported free long distance coach travel for older people, the commercial operators provided discounts and concessionary fares of their own so that this group would continue to use their services.

The [Bus Services Bill](#), currently going through Parliament, would allow local authorities to take more control over local bus services and to set fares should they so wish.

Government and local authorities can require bus companies to provide concessionary fares: these are funded by the entity prescribing the concession. The **most well-known bus concession is the pensioners' bus pass** – set out in legislation. This requires a subsidy of roughly £1.1 billion per annum. Local authorities can require bus operators to provide other, non-statutory, concessions (e.g. discounts for children and younger people in full time education, job seekers and veterans), which they pay for out of local budgets.

Some have suggested that the £1.1 billion spent on bus passes for older people could be better spent on young people.

Local authorities have a statutory duty to provide transport for post-16 learners. In addition many authorities, often working with commercial companies, provide locally-funded concessions for students in full time education (e.g. [Liverpool](#), [Manchester](#), the [North East](#), [Birmingham](#), [Brighton](#)).

Bus fares are not regulated at a national level, but may be regulated at a local level. Many local authorities provide support and subsidy to bus operating companies in order to ensure the provision of services which are deemed to be socially necessary, but which would not be viable on a purely commercial basis. This subsidy is a reason why bus fares in rural English areas have risen at a slower rate than those in England's towns and cities.

Trains

Railways in the UK are **expensive to run** and **the cost of rail travel for passengers has been increasing** year-on-year from an already relatively high base.

Before the 2010 General Election the then Secretary of State for Transport, Lord Andrew Adonis, announced that the Department for Transport and the regulator would jointly sponsor a value for money review of the rail industry, to be undertaken by Sir Roy McNulty, the former Chairman of the Civil Aviation Authority (CAA).

Sir Roy published his final report, [the 'McNulty Report'](#) in May 2011. He concluded that the UK rail industry should be looking to achieve efficiency savings of **approximately 30% by 2019** and proposed recommendations that, together, could deliver cost savings of between **£700 million and £1 billion per annum by 2019**. McNulty found that there were ten principle barriers to efficiency in the rail industry, including:

1. Fragmentation of rail industry structures and interfaces
2. The way in which major players in the industry have operated
3. Roles of government and industry
4. Nature and effectiveness of incentives
5. Legal and contractual frameworks
6. Relationships and culture within the industry.⁹²

McNulty identified a number of areas where the GB railway was performing less well than those in other European countries. In particular he highlighted that other European countries had obtained significant cost reductions from the competitive tendering of services, compared to a 17.1% increase in the unit costs of franchised services in GB.⁹³ He also highlighted an efficiency gap between Network Rail (NR) and the top-performing European railways of between 34% and 40%.⁹⁴ Work by Infrastructure UK further revealed that:

- An examination of seven high-speed lines across Europe showed that **construction costs in the UK were significantly higher**, and when compared with the four most directly comparable projects, High Speed 1 costs were at least 23% higher;
- Comparisons of **station development costs** indicated that the **UK was 50% more expensive**, for example, than Spain;
- Total **outturn costs** that involve significant tunnelling were **more expensive** than Europe, suggesting higher pre-construction and indirect costs.⁹⁵

Around **45 per cent of fares are subject to regulation** (by the Secretary of State in England and Wales and Scottish Ministers in Scotland). Regulated fares are set by a formula based on the RPI figure for the previous July, and for many years with a degree of flexibility (called the 'fares basket' or 'flex'). All other fares are set commercially by train operators.

⁹² ORR press notice, "[Efficiency savings the key to substantial rail industry growth](#)", 19 May 2011

⁹³ Sir Roy McNulty for DfT/ORR, [Realising the Potential of GB Rail: Final Independent Report of the Rail Value for Money Study](#), May 2011, p34

⁹⁴ [ibid](#), p32

⁹⁵ [ibid](#), p33

Rail fares have increased, in real terms, since the beginning of this century. In January 2013 fares across all operators were 23% higher than they were in January 1995; the average annual increase has been 1.2%. Fares have increased fastest amongst long distance operators, with average annual real terms increases of 2% between January 1995 and January 2013. Over the same period an average annual increase of 0.8% and 0.7% was observed for regional and London & South East operators respectively. The regulated fare increase for 2016 was 1% (based on an RPI +/-0 formula); the total fare increase was 1.1%. This disguises variations across different routes.

Almost without exception, when the annual fare increases are announced every year passenger groups express concerns that significant increases could 'price people off the railways' and put a strain on those who use the railways to commute to work, particularly into and out of London. However, it has been the policy of successive governments to rebalance the funding of the railways between passengers and taxpayers: reducing the relative contribution of the latter. A consequence of this is higher fares. The train companies themselves are keen to rebut claims that they are 'profiteering' off higher fares, noting that fares income is spent on upgrades and investment projects and, in some cases, is passed on to the Government as part of the financial package for the franchise.

Section 28(3) of the [Railways Act 1993](#), as amended, requires that all Train Operating Companies (TOCs) participate in certain approved discount card schemes for young and student travellers, disabled passengers and those aged over 60. All TOCs are obliged to participate in such schemes under the terms of their franchise agreements. This includes the [Young Persons \(16-25\) Railcard](#) (for young people aged between 16 and 25 and students in full time education).

5.2 Service standards

Minimum service standards on trains are required in the Franchise Agreements that train companies sign when they win a franchise. They are also required to meet statutory punctuality targets and there are well-understood penalties in place for failure to meet these standards – up to and including removal of the franchise.

Bus operators need to register an intention to set up a service with the relevant local Traffic Commissioner and agree to run the bus service according to the specification in the registration. Individual bus operators are responsible for the timetable. The introduction of new services will depend on the operator's opinion of the demand for it and its commercial viability. The Commissioners have the power to fine bus operators between 1% and 20% of their profits for failure to operate services in accordance with registered details.

As mentioned above, in the future changes to bus service licensing in England may mean that local authorities will have more control over the services in their areas and will be able to specify routes, frequencies and fares – as is the case in London.

5.3 Rural transport

Provision of public transport to rural areas is generally the responsibility of local authorities, who know best what is required in their local areas. The Government does provide some grant support for schemes that provide transport in isolated communities, though it has also admitted that while around £2 billion is currently provided each year by a number of agencies for local transport funding, “this is often not co-ordinated or integrated at a local level, resulting in duplication and potential waste of public money”.⁹⁶ It is providing funding for ‘total transport pilots’ to tackle this problem.

The Transport Select Committee published a report on transport in isolated areas in 2014, the Government’s response sets out the measures it is taking to address problems such as access for vulnerable groups, and encouraging community transport partnerships.⁹⁷

5.4 Access for young people with a disability

The UK is rapidly approaching the point where all buses, coaches and trains must be accessible to disabled people (January 2020) and in many cases these vehicles already meet the requirements. Taxis are also accessible in many parts of the country, though non-metropolitan urban areas and rural areas lag somewhat behind. There are also duties on air travel and sea travel providers to ensure that disabled people can access their services and expect a certain level of accommodation to their needs, though they can be denied travel on safety grounds.

Many day-to-day problems for disabled people stem from confusion over the rules, poor or insufficient communication, inadequate training, and/or a lack of enforcement. Issues where these concerns overlap include the provision of assistance on vehicles and at stations; the carriage of mobility scooters; and buggies and prams using wheelchair spaces on buses.

5.5 Further reading

- [Transport 2015](#), Commons Library Briefing Paper 7177, May 2015
- [Public Transport Fares](#), Commons Library Briefing Paper 7470, January 2016
- [Concessionary bus fares](#), Commons Library Briefing Paper 1499, July 2015
- [Rail fares and ticketing](#), Commons Library Briefing Paper 1904, March 2016
- [Passenger rail services](#), Commons Library Briefing Paper 6521, March 2016
- [Transport provision for post-16 learners](#), Commons Library Briefing Paper 6726, September 2013
- [Access to transport for disabled people](#), Commons Library Briefing Paper 601, April 2016

⁹⁶ DfT press notice, “[£7.6 million for local transport in rural and isolated areas](#)”, 27 March 2015

⁹⁷ [Passenger transport in isolated communities: Government Response to the Committee's Fourth Report of Session 2014–15](#), HC 719, October 2014

6. Stop cuts that affect the NHS

Proposal before the Youth Parliament

Stop cuts that affect the NHS. Funding that affects the NHS shouldn't be cut. We must keep up vital services to protect young people.

Government spending on healthcare and the NHS is set to rise for at least the next five years, but increasing pressure on health budgets over the same period means that many areas may see reductions in certain services.

6.1 NHS funding

The [Spending Review and Autumn Statement 2015](#) set out the NHS's funding settlement for the next five years, **with funding to reach £119.9 billion by 2020/21**. This represents a **£10 billion real terms increase** from the £98.1 billion allocated in 2014/15. As the table below from the Autumn Statement shows, Government funding to the NHS is increasing in real terms each year:

NHS spending projections and growth rate to 2020/21 (£ billions)

	Outturn		Plans				
	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21
NHS TDEL	98.1	101.3	106.8	110.2	112.7	115.8	119.9
Real terms growth rate		1.9%	3.6%	1.3%	0.4%	0.7%	1.4%
Cumulative delivery of £10bn commitment		2	6	7	8	9	10

Source: Department of Health, Spending Review 2015

Notes:

1. NHS TDEL: Included within Department of Health Total DEL
2. The additional £10 billion real terms funding is calculated with reference to the Summer Budget 2015 deflators, consistent with when the commitment was made.

Although funding is increasing, the amount of money that the NHS in England projects it will need is increasing at a faster rate.⁹⁸ This is due to factors like demographic growth (such as a larger elderly population and a larger general population), health cost inflation, technological development and medical advances. The annual difference between the spending allocated by Government and the amount the NHS needs is set out below:

NHS spending projections and funding to 2020/21 (£ billions)

	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21
NHS England projected requirements	107.0	113.0	118.0	124.0	130.0	137.0
Spending review settlement	101.3	106.8	110.2	112.7	115.8	119.9
Funding gap	5.7	6.2	7.8	11.3	14.2	17.1

Source: Department of Health, Spending Review 2015

⁹⁸ NHS England, [The NHS belongs to the people: A Call to Action – The Technical Annex](#), December 2013

As a result, in addition to the increases in Government funding, NHS England is expected to make **efficiency savings of £22 billion** by 2020/21, which would cover the funding gap above.

The Government has emphasised that the additional investment, and the efficiency savings, are both necessary to deliver 7-day services in hospitals and in primary care (including GPs), and has set out how they believe they can be achieved:

The NHS has committed to deliver its £22 billion in efficiency savings by 2020-21 to deal with rising demand. This will be achieved by reducing running costs, paying the right price for equipment, reducing avoidable hospital admissions, and improving care quality.

The plan to deliver these efficiencies from across the health system is already underway. Lord Carter's review of acute NHS trusts found, on average, hospitals could save between 5% and 15% of their expenditure.⁹⁹

However, a number of commentators have argued that this level of efficiency savings could be extremely difficult to achieve. *BBC News* reported that:

The British Medical Association's (BMA) Council Chair Dr Mark Porter attacked the Government's claim to have "fully-funded" the NHS. He argued that the required £22 billion of annual efficiency savings by 2020 was a "fantasy" and the inevitable outcome would be cuts to services. The BMA, he argued, had looked hard at where the efficiencies might come from and had found nothing remotely matching the Government's target.¹⁰⁰

Local decisions

According to NHS England's forecasts, £7 billion of the savings will be delivered nationally, with £15 billion delivered locally, including £9 billion by secondary care providers such as hospital trusts.¹⁰¹ A majority of NHS spending is delivered locally, according to local priorities, which often makes it difficult to identify which particular services may face efficiency savings or cuts.

The Nuffield Trust's 2016 report, [Feeling the crunch: NHS finances to 2020](#) highlighted some of the potential problems faced in meeting these efficiency targets. It noted that local secondary providers, such as hospital trusts, were facing significant deficits as the amount they were paid per patient did not cover costs. This financial year, the amount they are being paid per patient is to be increased for the first time in several years, but this will push clinical commissioning groups (CCGs) into deficits. CCGs are the local groups that commission and purchase health services for patients.

A 2015 survey by the *Health Service Journal* of local CCGs found that a third were considering limiting access to healthcare services due to

⁹⁹ Department of Health, [Department of Health's settlement at the Spending Review 2015](#), November 2015

¹⁰⁰ ['Is the NHS underdoctored, underfunded and overstretched?'](#), *BBC News*, 3 May 2016

¹⁰¹ NHS England, [NHS Five Year Forward View: Recap briefing for the Health Select Committee on technical modelling and scenarios](#), May 2016

increasing financial pressures.¹⁰² A recent, controversial example of this, was an announcement by the Vale of York CCG in North Yorkshire, which proposed limiting non-emergency surgery to obese patients or smokers, although the CCG has subsequently decided to review these plans.¹⁰³

Local CCG decisions can also have impact on services specifically catering for children and young people. For example, West Cheshire CCG recently announced it would no longer fund a hospital service delivering care for children in their own homes, as it “hadn’t delivered any cost savings.”¹⁰⁴

The Nuffield Trust’s report, [The future of child health services](#), expressed concerns that policy-makers could prioritise other services such as elderly care above children’s health services, which could lead to cuts.

6.2 Young people’s health services

As set out above, as much of the spending decisions in the NHS are made at a local level, it is not always possible to identify where specifically there have been increases or decreases in funding for children and young people’s services. One local area may see an increase at the same time as another can see a decrease in spending. However, set out below are some examples of identified changes in the delivery and funding of young people’s NHS services.

Public Health

Local authorities took over the provision of public health services in April 2013 from the NHS. This includes things such as drug and alcohol addiction services, stop smoking services, weight loss and healthy eating advice services, sexual health services, and cancer screenings.

In June 2015, the then Chancellor George Osborne announced that the public health grant to local authorities, which for 2015/16 amounted to £2.8 billion (plus £430 million for services for children aged 0-5), was to be reduced by £200 million for that year.¹⁰⁵ The [2015 Autumn Statement](#) subsequently announced that on top of this, the grant would be reduced by a further 3.9%, in real terms, each year until 2020.

The BMA argued that this reduction in the public health grant was being used to fund the increases in overall NHS spending.¹⁰⁶ A survey by the UK Faculty for Public Health of its members found that 63% felt that child health services would be affected by the grant reduction.¹⁰⁷

¹⁰² ‘[Survey: Third of CCGs consider limiting access amid cash squeeze](#)’, *Health Service Journal*, 21 April 2015

¹⁰³ ‘[Plans to deny surgery to obese patients and smokers put on hold](#)’, *The Guardian*, 3 September 2016

¹⁰⁴ ‘[Funding axed for Chester children’s hospital care at home](#)’, *The Chester Chronicle*, 6 April 2016

¹⁰⁵ HM Treasury, [Government announces £4.5 billion of measures to bring down debt](#), June 2015

¹⁰⁶ BMA, [NHS funding and efficiency savings](#), 2016

¹⁰⁷ UK Faculty of Public Health, [Children’s health could be affected by cuts, say public health experts](#), September 2015

This includes health visitors for children under five, child weight management, stop smoking services and school nurses.

The number of school nurses in post has already been decreasing over the past five years. Between April 2011 and April 2016, the number of school nurses fell by 11%, whilst the number of overall nurses and health visitors rose by 2% over the same period.¹⁰⁸ In response to the £200 million reduction announcement, *Children & Young People Now* reported on the possible impact of sex and relationships education (SRE):

Elaine McInnes, project development manager at the Institute of Health Visiting, said the government must "urgently" invest more in public health. Last year former Chancellor of the Exchequer, George Osborne, cut £200m from public health budgets for 2015/16.

"The bottom line here is the massive cut in the public health budget," McInnes said.

"The government needs to reinstate the budget, or even partially reinstate it, because a lack of SRE is making children more vulnerable. The problem is just going to escalate out of control. "

Rosalind Godson, professional officer for the health sector at Unite, said children need continual SRE throughout their school years, adding that teachers do not have the background to do this as effectively as school nurses.

"During SRE, young people ask questions that are often quite medical and clinical and often there are things you can discuss with a school nurse you frankly can't discuss with your teacher because you're going to see them for the rest of the week," she said.¹⁰⁹

Hospital services

As part of moves for greater efficiency and the best use of resources, a number of local areas in recent years have carried out reviews of how best to deliver healthcare. In some cases this has led to the closure of specific services for children.

For example, a review of children's services in North West London concluded that the best, most sustainable way to deliver children's services was to consolidate services in five children's A&E departments, moving them away from Ealing Hospital, whose children's A&E closed on 30 June 2016.¹¹⁰

Other areas, such as Devon, Surrey and Wiltshire, have carried out service reviews and concluded that the most efficient way to provide children's health services was to let a private company, Virgin Care, run them. *Somerset Live* reported the rationale for this change in regards to the Wiltshire deal:

¹⁰⁸ NHS Digital, [NHS Workforce Statistics - April 2016, Provisional statistics](#), July 2016

¹⁰⁹ ['Fall in school nurse numbers 'heightens abuse risk'](#), *Children & Young People Now*, 25 August 2016

¹¹⁰ Healthier North West London, [Changes to children's services at Ealing Hospital are given the go-ahead to support high quality seven-day services for all children in North West London](#), June 2016

By moving from five providers to one, children and parents will have access to 'consistent and equitable levels of service and support' regardless of where they live in the county, said Deborah Elliott, the accountable officer for Wiltshire's doctor-run Clinical Commissioning Group.

"A single community child health service will help children and young people in Wiltshire receive the best possible start in life," she said. "For example, the same standards of care and easier access to services will be possible to all, through more joined-up working between health and social care professionals."

However, the report also noted some concerns with the deal from the trade union UNISON:

"UNISON is disappointed that Wiltshire Child Health Services for the next five years will no longer be delivered by the NHS, instead the services will be delivered by Virgin," said Helen Eccles, the regional head of health for Unison. "UNISON believes that the fundamental ethos of public services should be to deliver high quality care - this ethos often becomes diluted when the company delivering these services is motivated by profit.

"We know from our experience in supporting staff delivering public services that privatisation often ends up costing more and frequently damages services, leaving the public picking up the bill.

"We think it is right that our taxes should go directly to services, to the people who deliver them and the people who rely on them, rather than to profits and shareholders," she added.¹¹¹

In contrast to planned changes in areas like Wiltshire and Ealing, some areas are seeing unscheduled reductions to children's services based on unforeseen pressures. Stafford Hospital's children's A&E department has been closed since August due to safety issues, stemming from a lack of available, qualified staff.¹¹²

It is expected that there will be significant reorganisation of services across the country over the next few months. Over the autumn, 44 local *Sustainability and Transformation Plans (STPs)* are expected to report on their plans for services in their local areas. The remit of the STPs is to draw up plans for local services to work together to improve care and deliver greater efficiency savings. There has been some criticism that STPs are not being drawn up with sufficient transparency. It is not possible to determine which, if any, areas will see changes to their children's health services until the plans get published.

More information can be found in the Commons Library debate pack briefing, [NHS sustainability and transformation plans](#).

Mental health

More information on children and adolescent mental health services, including details on funding, can be found in section 4 of this briefing.

¹¹¹ ['Wiltshire's entire NHS Children's Services privatised to Virgin in £64 million deal'](#), *Somerset Live*, 17 November 2015

¹¹² ['Stafford hospital suspends 'unsafe' children's A&E'](#), *The Guardian*, 25 August 2016

7. Body Image

Proposal before the Youth Parliament

More needs to be done to raise awareness on body image issues, particularly the effects of negative body image on mental health. Bullying connected to body image should be challenged, and reduced.

7.1 Why is body image an important issue?

According to Coalition Government-commissioned research, body image is about **body confidence** and **self-objectification**:

The concept of body image relates to how people experience their body in the world, covering:

- **Body confidence** – how satisfied they are with their appearance;
- **Self-objectification** – how much they see themselves through others' eyes, investing their self-worth in how their appearance is judged by others.

Body image, and particularly body confidence, is an issue of enormous public concern, especially to parents and young people. Low body confidence is a contributory factor in poor mental wellbeing, eating disorders, obesity, low aspirations and a range of risky behaviours.¹¹³

Men and women can both be affected by issues of poor body image *“but women and girls are particularly prone to poor body confidence and self-objectification.”*¹¹⁴

The Girl Guides [Girl's attitudes survey](#) in 2014 reported that body confidence remained a key issue for girls:

Over the six years of the Girls' Attitudes Survey, we have consistently found body confidence to be an important issue for girls and young women, and increasingly so as they get older – 17- to 21-year-olds are most affected by appearance pressures. This year we explored their views on how the pressures they feel affect their behaviour, and found that low body confidence can lead to lower participation in education and leisure activities.

Girls and young women face strong pressures to conform to body image ideals. The majority of those aged 11 to 21 say that they feel pressure to do more exercise to get a thin body (53%) and almost as many feel pressure to go on a diet (48%). Those aged 17 to 21 feel most pressure about dieting, with 56% saying this. Last year's Girls' Attitudes Survey found the same percentage of this age group had actually been on a diet, which may indicate a strong link between feeling pressure to diet and behaviour change. The figure for those aged 7 to 10 feeling pressure to diet is nearly one in six (15%). One in four of those aged 11 to 21 feels pressure to dress in a sexy way (25%, rising from 13%

¹¹³ Government Equalities Office, [Body confidence: findings from the British Social Attitudes Survey](#), October 2014, p. 3

¹¹⁴ Government Equalities Office, [Body Image: evidence, policy, action -Report of a multidisciplinary academic seminar](#), September 2013, p. 3

*among girls aged 11 to 16 to 37% among those aged 17 to 21).*¹¹⁵

Health Problems

Obesity, eating disorders and mental health issues are significant problems in the UK. The Health Survey for England 2014 found that **“17% of children were obese, and an additional 14% of children were overweight”**.¹¹⁶ A review published under the Coalition Government stressed the links between disordered eating, body confidence, and weight problems:

*There is a strong relationship between poor body image, disordered eating and weight problems. People with low levels of body satisfaction are **more** likely to gain weight: whereas those who have higher levels of body satisfaction are less likely to put on weight. [...]*

*The causes of eating disorders are complex. Poor body image is often a factor, but it is not a prerequisite. But poor body image is strongly linked with depression, and society's idealisation of physical appearance is a significant pressure upon young people's mental wellbeing. Positive body image is likely to be a resilience factor.*¹¹⁷

Research carried out by [Women in Sport](#) into barriers to girls participating in more sport and physical activities found that:

*75% agreed that 'girls are self-conscious of their bodies' ... Many girls dislike the thought of getting their hair messy and getting sweaty. ... 'when you're at school you just want to look nice for your friends'.*¹¹⁸

Risky Behaviours

Academic research has suggested that people with poor body image are **more likely to lack self-esteem**, and that this may make them more vulnerable to peer and partner pressure. Findings also suggest they are **more likely to be depressed** and may consequently use risky coping strategies.¹¹⁹ Risky behaviours may include:

- Not taking care of themselves during sex
- Vomiting or purging
- Alcohol and drug abuse
- Crash dieting
- Smoking to control appetite
- Self-harm
- Rushed or ill-considered aesthetic cosmetic surgery.¹²⁰

¹¹⁵ Girl Guiding, [Girls' Attitudes Survey 2014](#), p.14

¹¹⁶ Health Survey for England 2014, [Vol 1, Chapter 10](#), p. 1

¹¹⁷ Government Equalities Office, [Body confidence campaign - Progress report 2015, 2015](#), pp. 10-11

¹¹⁸ Women's sports and fitness foundation, [Changing the game for girls](#), May 2012, p. 7

¹¹⁹ See: Government Equalities Office, [Body Image: evidence, policy, action -Report of a multidisciplinary academic seminar](#), September 2013, p. 6

¹²⁰ *Ibid.*, adapted from text on p. 6

7.2 Conservative Government policy on body image and body confidence

On 14 January 2016, then Parliamentary Under-Secretary of State for Women, Equalities and Family Justice, Caroline Dinéage, answered a series of oral questions on body confidence. She said the Government recognised the importance of the issue:

Body Confidence

4. Michael Fabricant (Lichfield) (Con):

What steps the Government are taking to address the issue of low body confidence in girls and young men; and if she will make a statement. [903007]

The Parliamentary Under-Secretary of State for Women and Equalities and Family Justice (Caroline Dinéage):

Strong body confidence is obviously really important for both physical and mental health wellbeing. That is why the Government are working with partners on projects such as media literacy that equip young people to be resilient and realistic about body images that they see in print and on our screens.

[...]

We want all young people to be informed and resilient. That is why we aim to improve media literacy. Our PSHE Association guidance on body image helps teachers to approach this topic sensitively and points them to the best quality-assured material. We also produce media-smart literacy resources for parents and teachers of primary school children to help them better to promote understanding of the images that young people see in the media.

[...]

*We know that anorexia kills more than any other mental illness. On Monday, the Prime Minister set out our commitment to investing in mental health services. We will invest nearly £1 billion in a revolution in mental health treatment throughout the country, which will include the first-ever waiting time target for teenagers with eating disorders. They will be able to obtain help within a month of being referred, or within a week in urgent cases. [...]*¹²¹

7.3 Government policy on mental health services

Government policy on mental health services is covered in depth in Section 5 of this briefing paper. Two further standalone House of Commons Library briefing papers provide additional background:

- House of Commons Library briefing, [Children and young people's mental health – policy, CAMHS services, funding and education](#), updated June 2016.
- House of Commons Library briefing, [Mental health policy in England](#), updated April 2016.

¹²¹ [HC Deb 14 January 2016, c 985-986](#)

7.4 Body image and schools in England

Body image and the curriculum

Body image is most likely to be covered, in schools in England, as part of PSHE. The PSHE Association does not recommend schools cover the whole programme of study, but select parts that are most relevant to their pupils. At Key Stage 3 (ages approx. 11 to 14) they suggest schools could explore:

What might influence [pupils'] decisions about eating a balanced diet [...]

How the media portrays young people, body image and health issues and that identity is affected by a range of factors, including the media and a positive sense of self

Eating disorders, including recognising when they or others need help, sources of help and strategies for accessing it.¹²²

At Key Stage 4 (ages approx. 14 to 16) schools could explore how to:

[...] recognise and manage feelings about, and influences on, their body image including the media's portrayal of idealised and artificial body shapes

[...] health risks and issues related to this, including cosmetic procedures.¹²³

The PSHE association has also published a range of resources and guidance to support teaching about body image and body confidence – see e.g.:

- [PSHE Association, Key standards in teaching about body image](#)

Bullying

All state-funded and registered independent schools in England are required to have policies that address bullying. The Department for Education (DfE) has published non-statutory advice for schools on their duties in this area:

- [DfE, Preventing and tackling bullying](#), October 2014

On 8 September 2016, the Government [announced](#) that it had awarded **£4.4 million to support a range of anti-bullying schemes** in England.¹²⁴ The funding includes £1.6 million over 2 years from the Department for Education and £2.8 million from the Government Equalities Office.

7.5 Other relevant policy and publications

Coalition Government's Body Confidence Campaign

The *Body Confidence Campaign* was set up by Lynne Featherstone MP, then Minister for Equalities, in November 2010. It aimed to:

¹²² PSHE Association, [PSHE education programme of study \(Key Stages 1-4\)](#) October 2014, p. 16

¹²³ *Ibid.*, p. 15

¹²⁴ DfE and Government Equalities Office press release, '[Thousands more children to benefit from anti-bullying app](#)', 8 September 2016.

PSHE

Section 2 provides further information on provision for personal, social, health and economic education in England

- Respond to public concerns and raise public debate to **promote cultural change**
- Support efforts **to promote media literacy and resilience**, particularly among young people
- Develop constructive relationships with industry and other stakeholders to **encourage positive action and good practice**.¹²⁵

The *Body Confidence Campaign* and other parts of government undertook a range of actions, more details on which can be found in [Body confidence campaign - Progress report 2015](#), and [Body confidence campaign: progress report 2013](#).

Schools

- In 2011 the then Government launched a teaching pack for use in primary schools and a companion pack for parents on body image [Media Smart: media literacy teaching pack on body image](#) to help children understand how images in the media are altered and how this can affect self-esteem.

The [Taking Action on Body Image toolkit](#) was launched in 2014

This toolkit was developed by Beat, the eating disorders charity, and Dr Helen Sharpe from the Kings College London, Institute of Psychiatry, with funding from the Government Equalities Office. It can also be used by others who work with young people of a similar age. It aims to engage young people with the issues around body image and inspire and guide them to utilise their understanding to promote positive body image in themselves and others through social action.

Raising awareness

The Coalition Government ran a series of blogs in the Huffington Post in 2012: [It's Been a Year of Success for the Body Confidence Campaign](#).

In 2014 [The Be Real Campaign](#) was launched to act as a hub to link various activities on body image.

Working with Fashion, Retail and the advertising Industries

The *Body Confidence Campaign* worked with industry and advertising to encourage diversity in the fashion industry e.g., supporting Debenhams' launch of plus-sized mannequins:

*The government worked with [All Walks Beyond the Catwalk](#) to launch the Centre of Diversity. This educational institution teaches fashion graduates to design clothes for a diverse range of body shapes, and is helping to inspire the next generation of graduates and designers to consider and celebrate a broader range of body and beauty ideals.*¹²⁶

With the Professional Publishers Association, the then Government launched the PPA Diversity Awards; the first winners were announced in July 2012 and the awards were relaunched in 2014 as the [Body Confidence Awards](#).

¹²⁵ Government Equalities Office, [Body confidence campaign - Progress report 2015](#), 2015

¹²⁶ Government Equalities Office, [Body confidence campaign: progress report 2013](#), 2013

Health and Sports

In October 2011 the Department of Health published [Healthy Lives, Healthy People: A Call to Action on Obesity in England](#), setting out the action the then Government would take to tackle overweight and obesity. This recognised the role that self-esteem and confidence may play in the choices that individuals make about their diet and levels of activity.

The Department for Culture, Media and Sport (DCMS) also hosted a series of roundtable discussions on women's participation in sport and hosted workshops on promoting sports as a lifestyle choice for young women. In 2013 the [Keogh review](#) made a number of recommendations about better regulation of the cosmetic surgery sector.

2012 All Party Parliamentary Group on Body Image report

In 2012 the All Party Parliamentary Group on Body Image published the report [Reflections on Body Image](#).¹²⁷ This looked at three main areas: 'Growing up' and the effects of body image on children; 'The mis-sold ideal', which looked at the role of the media and advertising and 'body image and health'. It made many recommendations in all three areas, including:

- The development of effective strategies to support parents to **build positive body image environments** for their children.
- The introduction of **mandatory lessons on body image** in primary and secondary schools.
- Commitment from industry to develop advertising campaigns that include **images that reflect greater diversity in appearance** and are more reflective of consumers.
- The tightening of **regulations for cosmetic surgery advertising**.
- A review into the scale of **the problem of appearance-based discrimination and how this could be best tackled**.
- A reframing of health messages from a focus on weight-loss to **health enhancing behaviours** and the **adoption of weight-neutral language**
- The adoption of **more inclusive marketing strategies for sports, fitness and healthy lifestyles**.¹²⁸

¹²⁷ All-Party Parliamentary Group on Body Image, [Reflections on body image](#), 2012

¹²⁸ All-Party Parliamentary Group on Body Image, [Reflections on body image](#), 2012 pp. 72-3

7.6 Further reading

Other websites

[Endangered Bodies](#)

[Body Image - Beat](#)

Press Articles

The Guardian, "[Bishop campaigns to highlight issue of body image among children](#)", 18 September 2016

BBC News, "[UK girls becoming more unhappy](#)", 31 August 2016

BBC News, "[How do you help young girls feel happier?](#)", 31 August 2016

BBC News, "[Body image 'a problem for boys', says advertising think tank](#)", 8 August 2016.

The Guardian, "[Let's get physical: how women's sport can conquer body image](#)", 12 June 2016.

Huffington Post, "[Women's Body Confidence Is A 'Critical Issue' Worldwide, Warns Dove's Largest Ever Report](#)", 21 June 2016

The Guardian, "[Bullied teenagers increasingly want to have cosmetic surgery, says survey](#)", 16 April 2015

The Guardian, "[Appearance bullying – and the damage it does to children's education](#)", 19 October 2015

New Statesman.com, "[Are you beach body ready? The Protein World 'beach body' adverts only prove that body shaming is a feminist issue'](#)" 24 August 2015

Telegraph, "[Body confidence week: New research says 10 million women 'depressed' over body image](#)", 13 October 2014

BBC News, "[Does social media impact on body image?](#)", 13 October 2014.

BT Sport, "[BT Sport survey: Body image insecurities rife in women's sport](#)", 18 January 2014

The Guardian, "[Body image concerns more men than women, research finds](#)" 6 January 2012.

Press Releases

Mayor of London, "[Mayor in crackdown on body image advertisements on the TfL network](#)", 13 June 2016

Central YMCA, "[It's time to Be Real about body image](#)", 16 August 2016

Centre for Appearance Research and AnyBody, "[Low body confidence thwarts girls' and women's work and education aspirations - says new report](#)", 3 December 2014.

8. Youth services

Proposal before the Youth Parliament

Fund our youth services, don't cut them

8.1 Key Points

- [The Education Act 2006](#) sets out the Government's policy for youth services in England.
- This Act places a duty on local authorities to **provide access for young people to appropriate leisure facilities and services**; however funding of youth services is not mandatory which has led to wide variations in spending across the country.
- Since 2010, there have been various initiatives to improve services for young people.
- **Funding for youth services from local authorities has continued to fall since 2010.** As local authorities have been under pressure to cut costs, areas of non-mandatory spend in particular, such as youth services, have seen decreases.
- Going forward, the impact on youth services of the UK's vote to leave the European Union following the June 2016 Referendum remains to be seen.

8.2 The Government's statutory duties to provide youth services

- The statutory regime underpinning the provision of youth services is set out in section 507B of the *Education Act 1996* as amended.
- Section 507B of the 1996 Act places a duty on local authorities, "so far as is reasonably practicable ... to secure access for young people in their area to sufficient positive leisure-time activities".
- Revised [statutory guidance](#) for local authorities on services and activities to improve young people's well-being was published by the Department of Education in June 2012
- It should be noted that funding of youth services is not mandatory and the localised nature of provision has meant wide variation in spending on youth services across the country.

8.3 Government policy on youth services since 2010

Coalition Government (Conservative/Liberal Democrats, 2010 - 2015)

- In December 2011, the Coalition Government published a strategy document, [Positive for youth](#), which “set out a vision for how central and local government can work more effectively with communities, voluntary and community sector providers, and business to help all young people succeed.”¹²⁹
- They followed this up in 2013 with a [Positive for Youth progress report](#), which reiterated the Government’s commitment to young people, “leading by example by putting young people at the heart of our major reforms and giving others a sense of ownership for their role.”¹³⁰
- In January 2013, the then Education Secretary, Michael Gove, suggested that youth services policy was largely a matter for local authorities to determine and something the Government did not wish to be prescriptive on.¹³¹
- Gove’s comments attracted criticism from some, including from David Wright, chief executive of the Confederation of Heads of Young People’s Services, who urged Mr Gove not to absolve Government from its responsibility to young people.¹³²
- The comments also led other youth service leaders to question the continued impact of *Positive for Youth*.¹³³
- In March 2015, the Coalition Government confirmed that they remained committed to supporting the youth sector, pointing to the fact that as well as continuing to offer practical support to the youth sector, they had also provided over 130,000 opportunities for young people through National Citizen Service.

Current Government (Conservative, 2015 – present)

- The Conservative Party’s 2015 manifesto pledged to support the *#iwill* campaign that “aims to make social action part of life for as many 10 to 20 year-olds as possible by the year 2020”.¹³⁴
- Following the general election, a £1 million *Youth Social Action Fund*¹³⁵ was established in July 2015 with charities, community interest companies and social enterprises invited to apply for funding of foster youth social action activities. The *Pears Foundation* and *UK Community Foundation (UKCF)* further

¹²⁹ Department for Education, [Positive for Youth. A new approach to cross-government policy for young people aged 13 to 19](#), December 2011

¹³⁰ HM Government, [Positive for Youth, Progress since December 2011](#), July 2013

¹³¹ Education Select Committee, [Department for Education Reform](#), 23 January 2013 HC 853- i

¹³² “Gove: Youth policy not a central government priority”, *Children and Young People Now*, 25 January 2013

¹³³ *Ibid*

¹³⁴ #iwill, [#iwill - About us](#)

¹³⁵ GOV.UK, [Applications open for Youth Social Action Fund](#), July 2015

pledged to match the investment in targeted regions and areas of interest.¹³⁶

- On 11 September 2011, the [Government announced](#) the launch of the Youth Investment Fund of £80 million available for England’s youth sector, of which £40 million would “go towards the new Youth Investment Fund, targeting disadvantaged communities across England”; the other £40 million “will provide continued support for Step Up to Serve’s successful #iwill youth social action campaign”. The press release stated that “the £40 million Youth Investment Fund (YIF) will be open to projects in targeted disadvantaged communities, with funding available up to 2020 to help organisations invest and plan for the future. Young people will be involved in the design and decision-making of the new fund, with the first awards are expected to be made in spring 2017”. However, investment for the Youth Investment Fund will be “focused” on a number of local authorities (which are listed in the Government press release).¹³⁷

Considering the impact of Brexit

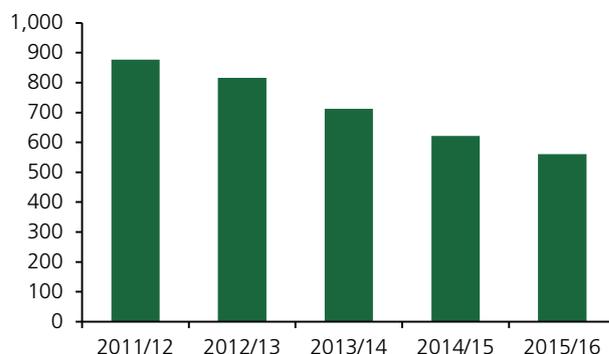
- Following the UK’s vote to leave the European Union in June 2016 (and the subsequent appointment of Theresa May as Prime Minister, succeeding David Cameron) there remains uncertainty about the impact of an eventual Brexit on various aspects of government policy, including youth services.
- As part of changes made by Theresa May to several Government departments, youth work policy and National Citizen Service were moved from the Cabinet Office to the Department for Culture, Media and Sport in July 2016.¹³⁸

8.4 Funding for youth services

The below table shows planned expenditure on services for young people from data released by the Department for Education:¹³⁹

Expenditure on ‘Services for Young People’

£ millions



Source: Department for Education

¹³⁶ Ibid.

¹³⁷ GOV.UK, [Government delivers £80 million boost to help give young people the best start in life](#), press release, 11 September 2016

¹³⁸ [HCWS124 21 July 2016](#)

¹³⁹ GOV.UK, [Department for Education Statistics: local authority/school finance data](#), September 2015

Early Intervention Grant (EIG)

- The Coalition Government [introduced the EIG](#) in 2011/12. The grant aimed to support services for children, young people and families in England. It replaced several other grants, including those aimed at youth services, and totalled £2.23 billion.
- The EIG is distributed to local authorities as part of the local government finance settlement (an annual process via which central government confirms how much funding it will provide to local government).
- The EIG was not ring-fenced (i.e. assigning grant for a particular purpose so as to restrict its use). This was in line with the Government's policy that local authorities should be given the freedom to make their own decisions on how best to target resources, including support for youth services.
- Initial EIG funding allocations were based on the 2010/11 totals of the grants it replaced. However, in line with the Coalition Government's deficit reduction priorities, total EIG funding in 2011/12 was 11 percent lower than the sum of its predecessor grants.¹⁴⁰

The impacts of EIG on youth services

- A July 2015 joint report from the publication *Children & Young People Now* and the charities *The Children's Society* and the *National Children's Bureau* suggested that the total value of the EIG had been more than halved in real terms to around £1.4 billion.¹⁴¹ *The Children's Society* suggested that the drop in funding had led to an "impact on the make-up and availability of early intervention services"¹⁴² and suggested that "youth services are having to become more targeted due to funding pressures".¹⁴³
- The Government responded that these figures failed to include the full range of funding for youth services, focusing instead only on finances provided directly to local authorities for 'early intervention'.¹⁴⁴
- A 2014 National Audit Office report into the Financial Sustainability of Local Authorities estimated that local authorities had seen 37% reductions in government funding and 25% reductions in income from 2010/11 to 2015/16¹⁴⁵ (once inflation was taken into account). While local authorities had managed to protect expenditure on statutory services for children's care, non-

¹⁴⁰ BBC News, [Early intervention grant is cut by 11%](#), December 2010

¹⁴¹ The Children's Society, NCB, Children & Young People Now, [Cuts that cost: trends in funding for early intervention services](#) July 2015

¹⁴² The Children's Society, [Billions cut from early help for children and young people](#), July 2015

¹⁴³ Ibid.

¹⁴⁴ Full Fact, [Early help for children—uncertain definition leads to uncertain estimates](#), July 2015

¹⁴⁵ National Audit Office, [Financial sustainability of local authorities 2014](#), November 2014

statutory expenditure – including youth services – had suffered the consequences of these cuts.

- Spending under the general heading of ‘Services for Young People’ has **fallen from £877 million in 2011/12 to £561 million** in 2015/16, a fall of 36%¹⁴⁶, although direct comparison between years is difficult on account of changing elements within sub-categories.
- An August 2016 report by Unison estimates that between April 2010 and April 2016, **£387m in total was cut from youth service spending**.¹⁴⁷ They estimate that “this has led to the loss of nearly 140,000 places for young people and more than 3,600 youth work jobs as well as the closure of more than 600 youth centres since 2010”.¹⁴⁸

8.5 Questions on youth services in parliament

- Since the introduction of EIG, there have been several instances where responses to parliamentary questions (written responses made in August 2013¹⁴⁹ and March 2015¹⁵⁰) have highlighted the challenges in centrally identifying expenditure on youth services, now that allocations are made at a local rather than central government level.
- Responses to questions on funding for youth services have also reiterated that “local authorities are best placed to decide what services will meet local needs and priorities and how to meet these needs within available resources” (the then Parliamentary Under Secretary of State for Children and Families, Edward Timpson, in response to Tristram Hunt, July 2013).¹⁵¹ Several other recent responses have also emphasised this.
- The Cabinet Office have also reiterated, during their responses to parliamentary questions, the Government’s ongoing commitment to National Citizen Service (the Cabinet Office’s Minister for Civil Society, Rob Wilson, in response to Andrew Gwynne (Labour), April 2016).¹⁵²

¹⁴⁶ GOV.UK, [Department for Education Statistics: local authority/school finance data](#), September 2015

¹⁴⁷ Unison, [A future at Risk: Cuts in Youth Services](#), August 2016

¹⁴⁸ Unison, [Millions axed from youth service spending, says UNISON](#), August 2016

¹⁴⁹ [HC Deb 29 August 2013 c1010W](#)

¹⁵⁰ [PQ 225333 02 March 2015](#)

¹⁵¹ [HC Deb 5 July 2013 cc820-821W](#)

¹⁵² [HC Deb 27 April 2016](#)

8.6 Further Reading

1) Gov.uk, [Statistics: local authority and school finance](#)

Government statistics on expenditure by local authority, including on education and youth services. This includes data tables on 'Planned local authority and school spending'. Current data is available for the 2015 to 2016 financial year.

2) Commission into Youth Work, [National Youth Agency Commission into the role of youth work in formal education](#), October 2013.

The report, led by former Children's Minister, Tim Loughton, and hosted by the National Youth Agency, found strong evidence to support the expansion of youth services in education settings. The report cited examples of where schools are already acting as both direct providers and commissioners of youth services.

3) Unison, [The Damage report: A future at Risk: Cuts in Youth Services](#), August 2016

This is an updated version of a 2014 report of the same name, and examines cuts in youth services over the 2010-2016 period, and pressures facing the sector.

4) The Children's Society, NCB, Children & Young People Now, [Cuts that cost: trends in funding for early intervention services](#), July 2015

This jointly produced report examines the extent and impact of cuts to early intervention services across the country.

5) National Youth Agency (NYA), [Youth services in England: Changes and trends in the provision of services](#), November 2014

Examines the changes to delivery of youth services in England and outlines the NYAs vision for youth services up to 2020.

9. Raising Awareness of Sexual Harassment in schools

Proposal before the Youth Parliament

Raising Awareness of Sexual Harassment in schools. Let's raise awareness of sexual harassment in schools so that young people affected don't suffer in silence and can get support from schools and teachers.

Education is a devolved subject. As a result, all the information included in this section relates to England only. The Westminster Parliament would not make the decisions on how this topic would be addressed in Scotland, Wales, or Northern Ireland.

9.1 Safeguarding guidance

The Department for Education has published statutory guidance on safeguarding children in schools, [Keeping Children Safe in Education](#). The guidance was most recently revised in September 2016, including the inclusion of further information relating to peer on peer abuse.

The guidance sets out the requirements on schools to have safeguarding policies in place, and makes specific reference to sexual harassment and the type of issue that child protection policies should cover (emphasis in original):

42. All staff should be aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but may not be limited to, bullying (including cyberbullying), gender based violence/sexual assaults and sexting. Staff should be clear as to the school or college's policy and procedures with regards to peer on peer abuse. [...]

47. Governing bodies and proprietors should ensure there are appropriate policies and procedures in place in order for appropriate action to be taken in a timely manner to safeguard and promote children's welfare.

48. This should include:

- *an effective child protection policy; and*
- *a staff behaviour policy (sometimes called the code of conduct) which should amongst other things include - acceptable use of technologies, staff/pupil relationships and communications including the use of social media.*

[...]

76. Staff should recognise that children are capable of abusing their peers. Governing bodies and proprietors should ensure their child protection policy includes procedures to minimise the risk of peer on peer abuse and sets out how allegations of peer on peer abuse will be investigated and dealt with. The policy should reflect the different forms peer on peer abuse can take, make clear that abuse is abuse and should never be tolerated or passed off as "banter" or "part of growing up". It should be clear as to how victims of peer on peer abuse will be supported.

77. Peer on peer abuse can manifest itself in many ways. Governors and proprietors should ensure sexting and the school or college's approach to it is reflected in the child protection policy. The department provides [searching screening and confiscation advice for schools](#). The UK Council for Child Internet Safety (UKCCIS) Education Group has recently published sexting advice for [schools and colleges](#).

78. Governors and proprietors should ensure the child protection policy reflects the different gender issues that can be prevalent when dealing with peer on peer abuse. This could, for example, include girls being sexually touched/assaulted or boys being subject to initiation/hazing type violence.¹⁵³

9.2 Women and Equalities Committee inquiry

In April 2016, the Commons Women and Equalities Committee [announced an inquiry](#) into sexual harassment and sexual violence in schools.

Fixers report

In advance of launching its inquiry, the Committee gathered evidence from young people across the UK through a series of workshops run by Fixers. Young people reported that:

- schools **are not playing their part in recognising the pressures young people are under** when dealing with matters of sexual harassment and sexual bullying
- teachers may **brush off incidents of sexual assaults or sexually threatening behaviour** because of students' relatively young ages
- **many incidents go unreported** because students are worried that victims will be punished as well as perpetrators

A [full report](#) was published by Fixers alongside the inquiry announcement.

Report

[The Committee's report](#) was published on 13 September 2016. The report included evidence that:

- almost a **third (29%)** of 16-18 year old girls say they have experienced unwanted sexual touching at school;
- nearly **three-quarters (71%)** of all 16-18 year old boys and girls say they hear terms such as "slut" or "slag" used towards girls at schools on a regular basis;
- **59% of girls and young women** aged 13-21 said in 2014 that they had faced some form of sexual harassment at school or college in the past year.

The Committee made several recommendations to Government, including that:

¹⁵³ Department for Education, [Keeping Children Safe in Education](#), September 2016, p12, p14 and p19

- The Government **must use the new Education Bill to ensure every school takes appropriate action to prevent and respond to sexual harassment and sexual violence.** Schools will need support from Government to achieve this, including clear national guidance.
- Ofsted and the Independent Schools Inspectorate **must assess schools** on how well they are recording, monitoring, preventing and responding to incidents of sexual harassment and sexual violence.
- Every child at primary and secondary school must **have access to high quality, age-appropriate relationships and sex education delivered by well-trained individuals.** This can only be achieved by making sex and relationships education (SRE) a **statutory subject**; investing in teacher training; and investing in local third sector specialist support.
- The Government should **fund research** to establish the most effective ways to support boys and young men to be part of the solution to the problem.
- All schools should **collect data on reports of sexual harassment and violence.** This data should be collated nationally and published annually.
- The **police should record incidences of sexual harassment and violence** in schools specifically.
- As part of its ongoing review of Initial Teacher Training, the Government should assess the most effective ways to **ensure all school staff are well trained** to deal with and prevent sexual harassment and sexual violence.
- The Government should use the homophobic, biphobic and transphobic (HBT) bullying funding model to create a fund to support specialist sector organisations to use their expertise to help schools tackle sexual harassment and sexual violence.¹⁵⁴

PSHE and SRE

Section 2 contains full information on Personal, Health, Social and Economic Education and Sex and Relationship Education, such as definitions, legislation and provision.

¹⁵⁴ Women and Equalities Committee, ['Widespread' sexual harassment and violence in schools must be tackled](#), 13 September 2016

9.3 Further Reading

- House of Commons Library, [Personal, social, health and economic education in schools \(England\)](#), CBP 7303, July 2016
- House of Commons Library, [Sex and Relationship Education in Schools \(England\)](#), SN 6103, July 2016
- House of Commons Women and Equalities Committee, [Sexual harassment and sexual violence in schools \(full report\)](#), HC 91 session 2016-17, September 2016
- Independent, [Thousands share their experiences of sexual harassment in school after calls for compulsory sex education](#), 22 August 2016
- UK Feminista, [Statistics: Young People and Gender Equality](#)

10. Tackling racism and religious discrimination

Proposal before the Youth Parliament

Tackling racism and religious discrimination, particularly against people who are Muslim or Jewish. All young people should work together to combat racism and other forms of discrimination, and ensure we know the dangers of such hatred.

The [Equality Act 2010](#) outlaws discrimination on the basis of religion, race and other characteristics. The [Racial and Religious Hatred Act 2006](#) outlaws stirring up hatred on religious grounds. A range of other public order offences may also apply. Hate crimes (crimes motivated by prejudice, such as racial or religious hatred) can face more severe sentences. Non-criminal actions motivated by prejudice, such as bullying and harassment, are reported to the police as hate incidents.

10.1 Government policy

Racism (including Islamophobia and anti-Semitism) is covered by various strands of Government policy.

Equality

The Government's [Equality Strategy](#) (2010) states that:

It is not right or fair that people are discriminated against because of who they are or what they believe. So we need to stop that discrimination and change behaviour... Government will work with employers, employees and wider society as an advocate for change, instead of dictating what the right approach should be through rules and regulations.

The Equality Strategy includes measures to tackle hate crime. These are set out in more detail in the [Hate Crime Action Plan](#) (2016). This Plan includes five main points of focus:

1. **Preventing hate crime** by challenging the beliefs and attitudes that can underlie such crimes
2. Responding to hate crime in our communities with the aim of **reducing the number of hate crime incidents**
3. **Increasing the reporting of hate crime**, through improving the reporting process, encouraging the use of third party reporting and working with groups who may under-report
4. **Improving support** for the victims of hate crime
5. **Building our understanding of hate crime** through improved data, including the disaggregation of hate crimes records by religion

Integration

The Government's [Integration Strategy](#) (2012) states that:

Our country is stronger by far when each of us, whatever our background, has a chance to contribute. And our communities are stronger when different people not only treat each other with respect, but contribute together... we are committed to rebalancing activity from centrally-led to locally-led action and from the public to the voluntary and private sectors.

The strategy outlines steps taken to tackle intolerance (including discrimination) and extremism, stating:

We need to remain vigilant to ongoing challenges, for example recent trends on anti-Muslim hate crime and antisemitism, and around gaps in our knowledge.

These steps include gathering information about hate crime.

In July 2015, then Prime Minister David Cameron set out how the Government was looking to tackle extremism as a means of helping to strengthen "our multi-racial, multi-faith democracy". He [announced](#) that a new Counter-Extremism Strategy would be part of building a more cohesive society, so that more people feel a part of and are therefore less vulnerable to extremism:¹⁵⁵

Whether you are Muslim, Hindu, Jewish, Christian or Sikh, whether you were born here or born abroad, we can all feel part of this country – and we must now all come together and stand up for our values with confidence and pride...

I understand that it can be hard being young, and that it can be even harder being young and Muslim, or young and Sikh, or young and black in our country. ...

And I know that for as long as injustice remains – be it with racism, discrimination or sickening Islamophobia - you may feel there is no place for you in Britain. But I want you to know: there is a place for you and I will do everything I can to support you. ...

We need young people to understand that here in the UK they can shape the future by being an active part of our great democracy. ...

So we need specific action here. So I can announce today I have charged Louise Casey to carry out a review of how to boost opportunity and integration in these communities and bring Britain together as one nation. She will look at issues like how we can ensure people learn English; how we boost employment outcomes, especially for women; how state agencies can work with these communities to properly promote integration and opportunity but also learning lessons from past mistakes - when funding was simply handed over to self-appointed 'community leaders' who sometimes used the money in a divisive way.

The [Counter-Extremism Strategy](#) was published in October 2015. It includes a chapter on *Building cohesive communities* (Chapter 6).¹⁵⁶

¹⁵⁵ Prime Minister's Office, [Extremism: PM Speech](#), 20 July 2015

¹⁵⁶ Cm 9148, [Counter-Extremism Strategy](#), October 2015

10.2 Combatting racism amongst young people

The Equality Strategy includes a commitment to combat bullying in schools, particularly bullying motivated by prejudice. The Hate Crime Action Plan of 2012 stated:

A lack of understanding, reinforcement of negative stereotypes and fear of the unknown can all contribute to prejudice. Children and young people in particular learn their behaviours and form their views from their peers and the adults around them. In that context, we need to stand up and challenge discrimination and bigotry, to send a clear message that we do not tolerate such views or behaviour before they have a chance to take root. By staying silent we not only risk being seen to condone such views, we also risk leaving those who are victims isolated.

Measures against anti-Semitism and anti-Muslim hatred are also taken under this Plan.

10.3 EU referendum

The Parliamentary Under-Secretary of State for the Home Department, Karen Bradley gave a [statement on the issue of hate crime with specific reference to the EU referendum](#) on 29 June 2016. There was also a [short debate on the issue](#), brought by Yasmin Qureshi MP, on 5 July 2016.

Links to further parliamentary and news media material on this issue are given in the Further Reading section below.

10.4 Statistics

Home Office

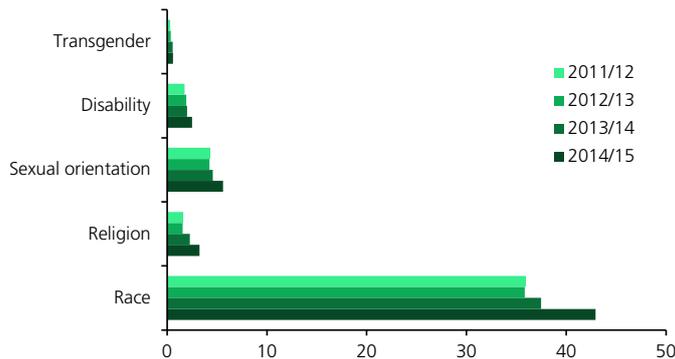
The [Home Office](#) publishes yearly statistics on hate crime and racist incidents in England and Wales. The chart below shows the number of hate crimes recorded by the police, broken down by type between 2011/12- 2014/15. In 2014/15, the police **recorded 52,528 hate crimes in England and Wales**, an **increase of 18 %** compared with 2013/14, and **24 %** up on 2012/13.

Of 52,528 crimes recorded in 2014/15:

- 42,930 (82%) were race hate crimes;
- 5,597 (11%) were sexual orientation hate crimes;
- 3,254 (6%) were religion hate crimes;
- 2,508 (5%) were disability hate crimes; and
- 605 (1%) were transgender hate crimes.

Hate crimes recorded by type, 2011/12 to 2014/15

Thousands



Source: Home Office, Police recorded crime

Notes: Data were collected from 44 police forces in England and Wales and cover notifiable offences only.

It is possible for one hate crime offence to have more than one motivating factor which is why the above numbers sum to more than 52,528 and 100 per cent.

The number of religion hate crimes was more than double in 2014/15 (3,254) compared to 2012/13 (1,572). The Home Office attributes much of this rise to offences following the murder of Lee Rigby in May 2013 ([Home Office statistical bulletin 2013/14, pp. 7-9](#)).

Analysis of racially motivated hate crime by religion shows that Muslim adults or those whose religion was coded as 'other' **were more likely** to be a victim of racially motivated hate crime (1.2%) than other adults (for example, 0.1% of Christian adults or those with no religion).

Not all hate crime is reported to the police. Based on data from the *Crime Survey for England and Wales* for 2012/13 to 2014/15, it is estimated that there were **an average of 38,000 incidents of** religiously motivated hate crime per year.

From the same surveys, it is estimated that 0.1 per cent of adults were victims of a religiously motivated hate crime in the 12 months prior to interview. **Muslim adults were the most likely** to be a victim of religiously motivated hate crime, **0.8%**.

Adults with an Asian ethnic group **were more likely** to be victims of a religiously motivated hate crime than adults of White ethnic group (0.5% and less than 0.1% respectively).¹⁵⁷

Metropolitan Police

The religion of the victim in incidents of religious hate crime is not centrally recorded.¹⁵⁸ However, the [Metropolitan Police](#) provides some indicative data showing the number of Islamophobic and Anti-Semitic hate crimes for 2015 and 2016 in London:

¹⁵⁷ Home Office [Hate Crime, England & Wales Statistical Bulletin 5/15](#) (October 2015)

¹⁵⁸ <http://www.parliament.uk/written-questions-answers-statements/written-question/commons/2015-03-19/228335>

Metropolitan police: recorded crime for 2015 and 2016

	2015	2016	% change
Racist and religious hate crime	13,041	15,481	18.7%
Islamophobic crime	816	1,313	60.9%
Anti-Semitic crime	503	468	-7.0%

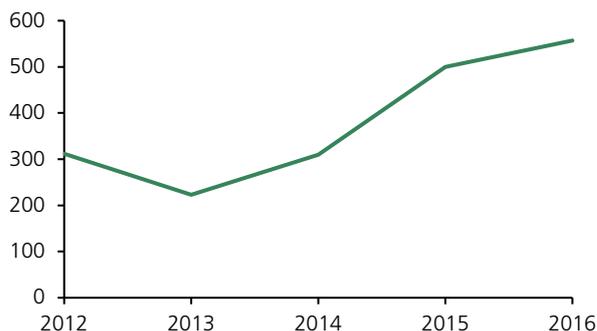
Source: Metropolitan Police

This shows an approximate **19%** rise in the overall number of hate crimes which are recorded as racist and religious hate crime. Recorded Islamophobic crime in London has risen by nearly **61%** in the last year.

Community Security Trust

The chart below shows the number of anti-Semitic incidents in UK in the period between 2012 and 2016. The Community Security trust classifies an anti-Semitic incident to be any malicious act aimed at Jewish people, organisations or property, where there is evidence that the victim or victims were targeted because they are (or are believed to be) Jewish.

Number of anti-Semitic incidents, UK, 2012-2016



Source: Community Security Trust, Anti-Semitic Incidents Report

Notes: Anti-Semitic incidents were recorded by CST for the first 6 months of the year 2012 to 2016.

The Jewish group [Community Security Trust \(CST\)](#) gathers data on anti-Semitic incidents across the UK. In the first 6 months of 2016 they recorded 557 anti-Semitic incidents. This is 80 per cent higher than in the first 6 months of 2014.

In the whole of 2015 CST recorded **1,174 anti-Semitic incidents**. This number was more than double the 535 recorded in 2013 and the highest annual total ever recorded by CST.

Tell MAMA (Measuring Anti-Muslim Attacks)

The [MAMA Project](#) gathers data on anti-Muslim incidents across the UK. In 2015 Tell MAMA received **1,128 reports of anti-Muslim incidents** from victims, witnesses and third party organisations. Muslim women **were more likely** to be attacked than men in most settings. The largest proportion of perpetrators were white males. This means that the largest proportion of incidents involves Muslim women, usually wearing Islamic garments.

10.5 Further reading

Speeches

- [Understanding our differences: the importance of inter-faith dialogue](#), Sajid Javid MP, Secretary of State for Communities and Local Government, 12 September 2016
- Theresa May when Home Secretary, [A stronger Britain, built on our values](#) (23 March 2015)
- David Cameron when Prime Minister, [PM's speech at Munich Security Conference](#) (5 February 2011)
- Ex-Labour Leader Ed Miliband, [Labour would outlaw Islamophobia, says Miliband in an exclusive interview](#) (24 April 2015)

Press

- [PM condemns 'despicable' post-EU referendum hate crimes](#), BBC, 27 June 2016
- ['Go back home' - Bitter backlash post EU referendum](#), BBC, 27 June 2016
- [In numbers: Has Britain really become more racist?](#), BBC, 10 August 2016
- ['A frenzy of hatred': how to understand Brexit racism](#), Guardian, 10 August 2016
- 'You worry they could take your kids', [The Guardian](#) (23 September 2015)

Reports, white papers and policy reviews

- Department for Communities and Local Government, [Government action on antisemitism](#) (December 2014)
- HM Government, [The Equality Strategy – building a fairer Britain: progress report](#) (22 May 2012)
- HM Government, [Challenge it, report it, stop it – delivering the Government's hate crime action plan](#) (May 2014)
- Department for Education, [The Schools White Paper 2010](#) (November 2010)

Organisations

- [Tell MAMA](#) (Anti Muslim hate crime)
- [Community Security Trust](#) (antisemitism)
- [Runnymede Trust](#) (race equality)
- [Equality and Human Rights Commission](#)
- Crown Prosecution Service [Guidance on prosecuting cases of racist and religious crime](#)

Parliamentary activity

- Parliamentary questions: [hate crimes since EU referendum](#), [hate crimes](#), [religiously aggravated offences](#); [racial violence](#); [hate crime and community cohesion](#); [communities: young Muslims](#); [antisemitism](#); [religious hatred](#)
- Debates: [EU referendum: race hate crime](#); [Freedom of religion and belief](#)

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