Office of the Children’s Commissioner

Review of policies and interventions for low-income families with young children

Summary report

October 2014

Ivana La Valle, Lisa Payne, Eva Lloyd with Sylvia Potter
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List of abbreviations

CAMHS  Child and Adolescent Mental Health Service
CCG  Clinical Commissioning Group
CPAG  Child Poverty Action Group
CPU  Child Poverty Unit
CQC  Care Quality Commission
DCLG  Department for Communities and Local Government
DfE  Department for Education
DH  Department of Health
DWP  Department for Work and Pensions
EYFS  Early Years Foundation Stage
FIP  Family Interventions Project
FNP  Family Nurse Partnership
JHWS  Joint Health and Wellbeing Strategy
JSNA  Joint Strategic Needs Assessment
NCMP  National Child Measurement Programme
NICE  National Institute for Health and Care Excellence
RCT  Randomised controlled trial
SMCPC  Social Mobility and Child Poverty Commission
UNCRC  United Nations Convention on the Rights of the Child
We would like to thank Lisa Davis and Ross Hendry at the Office of the Children’s Commissioner for their contribution at all stages of the review, and in particular Lisa for her support in producing the report summary.

We would also like to thank the project advisory group for their comments on the emerging findings from the review and Professor Jonathan Bradshaw for his feedback on the draft report.
The Office of the Children’s Commissioner (OCC) is a national public sector organisation led by the Children’s Commissioner for England, Dr Maggie Atkinson. We promote and protect children’s rights in accordance with the United Nations Convention on the Rights of the Child and, as appropriate, other human rights legislation and conventions.

We do this by listening to what children and young people say about things that affect them and encouraging adults making decisions to take their views and interests into account.

We publish evidence, including that which we collect directly from children and young people, bringing matters that affect their rights to the attention of Parliament, the media, children and young people themselves, and society at large. We also provide advice on children’s rights to policy-makers, practitioners and others.

The post of Children’s Commissioner for England was established by the Children Act 2004. The Act makes us responsible for working on behalf of all children in England and in particular, those whose voices are least likely to be heard. It says we must speak for wider groups of children on the issues that are not-devolved to regional Governments. These include immigration, for the whole of the UK, and youth justice, for England and Wales.

The Children and Families Act 2014 changed the Children’s Commissioner’s remit and role. It provided the legal mandate for the Commissioner and those who work in support of her remit at the OCC to promote and protect children’s rights. In particular, we are expected to focus on the rights of children within the new section 8A of the Children Act 2004, or other groups of children whom we consider are at particular risk of having their rights infringed. This includes those who are in or leaving care or living away from home, and those receiving social care services. The Act also allows us to provide advice and assistance to and to represent these children.

Our vision
A society where children and young people’s rights are realised, where their views shape decisions made about their lives and they respect the rights of others.

Our mission
We will promote and protect the rights of children in England. We will do this by involving children and young people in our work and ensuring their voices are heard. We will use our statutory powers to undertake inquiries, and our position to engage, advise and influence those making decisions that affect children and young people.

This report is © The Office of the Children’s Commissioner 2014
This report marks an important milestone in the Office of the Children’s Commissioner’s work on child poverty. It represents the scoping stage and is not full of recommendations or calls for further action on the part of policymakers or practitioners. A report of that nature will come later. This will result from work by OCC that this report highlights is necessary, when we have been out into different areas of England to meet children and families, and have conclusions to report, evidence from their lived experiences to present, good practice to highlight, and challenges to pose to policymakers and practitioners.

This report represents a necessary preliminary stage for our work in the field. It presents a scoping summary as we embark on our next steps of OCC’s work on poverty and disadvantage, and their effects on the lives of the very youngest children in England and their families. It is vital that we present this baseline study, which is backed by rigorous academic research. We are publishing this evidenced review of fiscal, social welfare and family policy, and what all of these mean when they are translated into local decision making and professional practice on the ground, in a wide range of English localities.

In particular, this piece of work focuses on what we know and can say, and where the gaps in our knowledge are, regarding how low income families fare in reality, in a complex policy environment, when their children are very young. The picture presented by this review is not encouraging, despite the authors finding pocket and patches of good practice and joined up thinking across the many policy areas concerned.

The pages that follow record and analyse a wide range of both nationally set and locally adapted policy, and begin to analyse the practice that results from both. This report examines what we know of both local authorities’ work on this policy area, and that being undertaken on the same issues by local authorities’ partners and their staff. Our researchers analyse the emerging match, and in contrast the considerable mismatches, between national intentions, local policymakers’ responses in shaping what a national policy requires, and local practice.

This report will now enable all of at the OCC to target what we seek to find out in our visits to a range of places in England, where we will meet with policymakers, practitioners, families and their children across local authorities, other partners and agencies. The work we will focus on in these visits is what they are all doing to try to mitigate the ill effects on young children when their families live in and deal with the effects of poverty.

The OCC relies on three equally important drivers for all its work. Firstly, we ask what the law says about an issue and what the intentions of policy and statute are, backed by what treaties and conventions the UK has signed and ratified. Secondly, we analyse how far these important requirements – in laws, treaties or conventions – are actually honoured and lived up to for children and young people, who cannot
fight for their own rights and need a champion who will do so. Finally we add the
unique strand that characterises our work: the voice and lived experiences of the
children and young people who are affected by the issue on which a piece of work
focuses. This report takes up the first two of these three. The third will follow as the
work we will do next is done, recorded, and can be reported.

I commend this first stage report to its many readers, and look forward to doing the
next phase of this work with localities across England and reporting again after it is
done.
Key findings

This report provides a summary of the findings of a review on low-income families carried out by a research team at the University of East London for the Office of the Children’s Commissioner (OCC) for England. The review will inform the OCC’s programme of work on child poverty and specifically a series of visits aimed at understanding good local practice in tackling poverty in a child’s early years.

The review has:

- explored the legal and policy frameworks in relation to child poverty, welfare reform, early years, health and housing
- provided a map of national and local programmes and services available to low-income families
- reviewed local child poverty planning.

The review found that:

- The Government’s 2011 and 2014 child poverty strategies are consistent in their focus on tackling poverty through behavioural change and getting parents into work. The 2014 strategy included existing policies which focus on alleviating the consequences of poverty on young children, but are not considered to be effective anti-poverty measures that can contribute to the prevention and reduction of child poverty.

- The 2014 child poverty strategy does not indicate how the Government intends to meet the Child Poverty Act income targets. The focus is on work as the solution to poverty even though levels of in-work poverty are higher than they have been since 1996–97, when the annual Household Below Average Income series began.

- The Government’s emphasis on getting parents into work is a long-term strategy which does little to help alleviate the immediate effects on the youngest children of living in poverty.

- The Government-funded Child Poverty Pilots have shown that short-term help with financial difficulties and housing problems, and multi-agency support tailored to individual families’ circumstances are needed to provide a starting point for engagement towards longer term employment outcomes. This support also results in short-term benefits in terms of parents’ and children’s wellbeing.

- The Department for Work and Pensions (DWP) has asked local authorities to consider lessons from these Pilots in developing local child poverty strategies, while the DWP Work Programme seems to have failed to put these lessons into practice. The evaluation has found that the support provided by the Work Programme is disjointed and not tailored to meet individual needs and circumstances. Furthermore the imposition of sanctions could seriously
undermine that starting point for engagement and solid base from which families can progress to longer term employment outcomes.

- While local authorities can do little to directly affect levels of household income, they are expected to develop effective early intervention approaches to help low-income families, which should include parenting support, early education and public health programmes. There is now an established body of evidence showing how effective early intervention works: good universal services that can provide low level support and identify families who need more intensive and targeted services, with a growing number of evidence based programmes now available to support families with different needs.

- While there is a growing awareness of the approaches and tools that can be used to intervene early to prevent problems from escalating, local authorities do not have the resources to develop effective early intervention approaches. Universal services, such as children’s centres, which are key to effective early intervention, are being drastically reduced, and there is not enough funding locally to provide the range of targeted support in response to diverse local needs.

- It is likely that support available locally will increasingly reflect the availability of central funding for a small number of targeted programmes, that is: the Family Nurse Partnership (FNP); Troubled Families; free early education for two year olds; and Healthy Start food and vitamin vouchers. While these programmes target some of the most disadvantaged families, they do not reach many families with young children living in poverty and/or meet all their needs.

- Housing policies and initiatives can play an important part in supporting low-income families with young children, for example through the development of affordable housing, home safety and home improvement schemes, and with programmes tackling fuel poverty and homelessness – and indeed some local authorities include these in their child poverty planning.

- However, in contrast to the growing evidence base on what works in relation to early years and public health programmes, the evidence on the effectiveness of housing schemes is very weak, particularly the effects they specifically have on children and parents living on a low income.

- There is very little evidence that either central or local Government systematically involve families and their children in child poverty policy development and implementation or in service design, planning and commissioning. It is more common for parents than children to be involved in service and programme evaluation.
Introduction

This report provides a summary of the findings of a review on low-income families (La Valle et al, 2014) carried out by a research team at the University of East London and funded by the Office of the Children’s Commissioner (OCC) for England. The review will inform the OCC’s programme of work which aims to promote good local practice in tackling poverty in a child’s early years. This summary report gives an overview of the key messages and conclusions. The more detailed full report is available on the Children’s Commissioners website at www.childrenscommissioner.gov.uk

Aims of the review and methodology

The aims of the study were to:

- Provide an overview of the current policy and legislative frameworks within which programmes and services aiming to reduce or mitigate the effects of child poverty operate in England.

- **Map examples of child poverty, early years, health and housing** services and programmes which are commissioned and delivered to low-income families with young children in England.

- Provide examples of **approaches taken by local authorities** in England to tackling child poverty in their area.

- The study involved reviews of:
  - policy and legal frameworks
  - local approaches to child poverty planning
  - programmes and services.

The methodology is outlined in detail in the main report (La Valle et al, 2014).

The context for the review

Living in poverty has a substantial negative impact on children’s lives and the enjoyment of their rights as outlined in the United Nations Convention on the Rights of the Child (UNCRC). The UNCRC outlines specific economic rights. They include:

- **Article 26**: States Parties shall recognise for every child the right to benefit from social security, including social insurance, and shall take the necessary measures to achieve the full realisation of this right in accordance with their national law.

- **Article 27**: Every child has the right to a standard of living adequate for the child’s physical, mental, spiritual, moral and social development.
Other core child rights include:

- **Article 2**: Non-discrimination
- **Article 3**: Best interest of the child
- **Article 6**: Every child has the right to life. Governments must do all they can to ensure that children survive and grow up healthy
- **Article 12**: Every child in accordance with their age and stage of development has the right both to give their views on all matters affecting them, and have their views taken seriously.

**Report structure**

In the following chapters we first provide an overview of the policy and legislative frameworks within which interventions aiming to reduce or mitigate the effects of child poverty in England operate. We then discuss which national and local programmes and services are available to reduce or mitigate those effects. The chapters discuss the different policy and service delivery areas including: child poverty (chapter 2), early years (chapter 3), health (chapter 4) and housing (chapter 5). In chapter 6 we consider how national policies, legal requirements, and evidence of effective interventions in supporting low-income families with young children are translated into practice locally, based on an analysis of relevant strategies and plans from a national representative sample of ten local authorities.
1. Child poverty legal and policy frameworks

This chapter provides an overview of England’s child poverty legal and policy frameworks, followed by a review of interventions aimed at supporting parents into work and out of poverty.

1.1 Legal framework

A cross-party commitment to eradicating child poverty in the UK by 2020 is enshrined in the Child Poverty Act 2010.

The purpose of the Act is to ‘define success in eradicating child poverty and create a framework to monitor progress at a national and local level’ (Child Poverty Act explanatory notes, para.6). The Act does this by placing a duty on the Secretary of State to meet four child poverty targets by 2020–2.

Child poverty targets

- Relative low income – to reduce to less than 10% the proportion of children living in households below 60% national median income (before housing costs).

- Combined low income and material deprivation – to reduce to less than 5% the proportion of children living in households below 70% national median income who also experience material deprivation.

- Absolute low income – to reduce to less than 5% the proportion of children living below 60% national median income in 2010/11 adjusted for inflation (Department for Work and Pensions, 2013a).

- Persistent poverty – to reduce the proportion of children living in households below 60% national median income for three out of the last four years.

The Coalition Government added a fifth measure for severe poverty, which is the number of children living in households below 50% national median income who also experience material deprivation.

The Secretary of State for Work and Pensions is required to publish a UK child poverty strategy every three years to 2020–21. The strategy must set out measures the Government intends to take to meet the income targets, and consider whether further measures should be taken in the following areas:
• the promotion and facilitation of the employment of parents or of the development of the skills of parents

• the provision of financial support for children and parents

• the provision of information, advice and assistance to parents and the promotion of parenting skills

• the provision of physical and mental health, education, childcare and social services

• the provision of housing, the built or natural environment and the promotion of social inclusion.

These are also the areas of activity on which local authorities must then focus on in their local child poverty strategies and interventions that target disadvantaged families. Local strategies and child poverty needs assessments are required under Part 2 of the Act. They set out how local authorities and partners will make arrangements with a view to reducing, and mitigating the effects of, child poverty in the local area. When preparing the local child poverty strategy, the local authority must consult with children and parents, as well as organisations working with or representing them.

The Child Poverty Unit issued non-statutory guidance to Part 2 (Child Poverty Unit, 2010) which recommended that the local strategies:

• be based on analysis (i.e. the local child poverty needs assessment)

• identify strategic choices (the overall approach and priorities)

• identify how the strategies will be implemented (resources, structures, mechanisms, and how progress will be measured and monitored).

1.2 Policy framework

Overarching policies
The policy framework introduced since the passage of the Child Poverty Act must be seen in the context of a national programme of deficit reduction and the introduction of austerity measures, as well as reductions in public spending, including in local government.

Picking up on themes set out by Frank Field MP in his independent review on poverty and life chances (Field, 2010), the Government’s first national child poverty strategy described how it intended to tackle poverty up to 2020 (HM Government, 2011c). Its approach was to focus on the causes of intergenerational cycles of poverty, and what the Government’s preferred response would be:
• ‘worklessness’ – a welfare system that will enable people to work their way out of poverty

• debt – building financial capability among families

• strengthening families – relationship and parenting support

• educational failure – improving educational attainment through a new focus on the early years

• poor health – public health reforms, as well as stronger support for the early years.

Specific commitments that would affect young children were:

<table>
<thead>
<tr>
<th>Year</th>
<th>Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010–11</td>
<td>£22m funding for Early Years Professional Status training</td>
</tr>
<tr>
<td>2011–12</td>
<td>£64m funding provided to local authorities for offer of early education</td>
</tr>
<tr>
<td>2011–12 to 2012–13</td>
<td>Funding allocated to local authorities to provide free early education to all disadvantaged two-year-olds</td>
</tr>
<tr>
<td>2012–13</td>
<td>4,200 extra health visitors recruited</td>
</tr>
</tbody>
</table>

The 2014–17 child poverty strategy is based on an evidence review (HM Government, 2014b) that focuses on behavioural rather than structural issues related to poverty (Social Mobility and Child Poverty Commission, 2013). The strategy’s core message is that ‘families can work themselves out of poverty’ (HM Government, 2014a, p.28), but the strategy acknowledges key family characteristics that can make this aim more difficult. These are:

• long-term worklessness

• having low qualifications

• being a lone parent

• having three or more children to care for

• experiencing ill health.

Living standards are to be improved through a variety of schemes that will reduce fuel, water, food and transport costs as well as increase the supply of affordable houses, but the overriding policy response is getting adults in affected families into work. The strategy promises job creation, increased earnings and support to get parents into work, as well as policies that will improve living standards and raise the educational attainment of poorer children. These are the Government’s priority areas for tackling poverty through to 2017.
Children and families’ involvement
Evidence of involvement of young children and families in child poverty policy development at national level is limited. During his review of child poverty, Frank Field and his team visited children’s centres and undertook a formal written consultation programme, hearing from a wide range of organisations that work with and represent the interests of young children and families. Staff from the Child Poverty Unit meets regularly with various stakeholder groups, including organisations that help them arrange focus group sessions with children and young people. During the development of the child poverty strategy, the Unit met with the OCC and Amplify, the Children’s Commissioner’s advisory group of children and young people, and ran a series of events attended by 195 children, young people and parents.
2. Interventions to support parents into work

In this section, we present the findings from the Child Poverty Pilots, and then from the Work Programme initial evaluation.

2.1 The Child Poverty Pilots

The Child Poverty Pilots, which were centrally funded until 2011, are examples of the most recently evaluated national programme aimed at supporting parents into work. Information about them is summarised in Appendix A. With the exception of Family Interventions Projects (FIPs), funded between 2006–11, funding for the other pilots was provided for two years to identify effective ways of supporting parents out of poverty and into work. While funding for the pilots has ended, there is an expectation that lessons learnt will inform local child poverty strategies (Department for Work and Pensions, 2012).

Evaluations of the Child Poverty Pilots outlined the range of approaches developed and how the pilots operated, providing useful evidence on how they could be replicated, building on what worked well and less well. For example, effective approaches should (Department for Work and Pensions, 2012):

- reach families through services that are already working with them
- regularly review targeting criteria to avoid creating new barriers to inclusion or participation
- be flexible and responsive in order to engage new target groups
- be tailored and holistic to support families’ diverse needs – including, for example, support with money management and debt advice, housing, health issues and parenting
- recognise small achievements as part of an approach that builds longer term outcomes from a solid base.

A weakness of the pilots was the lack of conclusive evidence on their impact. While local authorities may adopt these approaches, they do not know for certain whether they will actually help families to move out of poverty. FIP was the only pilot that provided a more robust impact assessment (albeit with some limitations) which showed that FIPs did not reduce worklessness although they had other positive effects on some of the most disadvantaged families (Lloyd et al, 2011).
2.2 The Work Programme

We also reviewed the initial evaluation of the Work Programme (Newton et al, 2012). While not providing specific evidence on parents, the research has highlighted the potential difficulties that parents who are required to join the programme may face, including lack of personalised support, and possible sanctions which could put their families under financial strain. From the evaluation findings so far, it does not seem this programme has many of the features required for an effective approach to support families out of poverty and into employment.

2.3 Conclusion

In terms of the policy and legal frameworks, there appear to be inherent contradictions in national child poverty policy. Although the Child Poverty Act income targets remain in place, it seems unlikely they will be achieved given the current programme of welfare reforms and reductions, augmented by the austerity measures and reductions in public spending to reduce the national deficit throughout the duration of the 2010–15 Parliament and beyond (Social Mobility and Child Poverty Commission, 2013).

Since 2010, targeted redistribution through tax and benefits has fallen, in-work poverty has increased, and attention has shifted from the responsibilities of the State to the responsibilities of families (Department for Work and Pensions, 2013a; Social Mobility and Child Poverty Commission, 2013). The Government’s child poverty strategies centre on a set of family characteristics that are seen as preventing families from lifting themselves out of poverty, and on a pathway to a more adequate income through employment (HM Government, 2014c). However, while the focus is on work as the solution to poverty, levels of in-work poverty are higher than they have been since 1996–97 (MacInnes et al, 2013).

The Child Poverty Pilots developed a range of innovative approaches, but, a weakness of the pilots was the lack of conclusive evidence on their impact. The early evidence from the Work Programme has highlighted the potential difficulties that parents who are required to join this programme may face, including lack of personalised support and facing sanctions which could put their families under considerable financial strain.
3. Early years

In this chapter we review the early years legal and policy frameworks, and then discuss national and local early years interventions.

The legal and policy frameworks
In the 2014 child poverty strategy, early learning and supporting parents are the Government’s priorities for young children, with a goal ‘to ensure that all poor children arrive at school ready to learn through increasing free preschool places, getting better teachers and simplifying the curriculum’ (HM Government, 2014a, p.37-38) – referring to the free entitlement to early education, changes to the training and qualifications framework for early years educators, and reforms to the Early Years Foundation Stage (EYFS).

3.1 Legal framework

The Childcare Act 2006 requires local authorities in England to improve the wellbeing of young children and to reduce inequalities between young children in their area. To achieve this, local authorities must work in partnership with the NHS and Jobcentre Plus. Local authorities must provide information, advice and assistance on childcare provision to (prospective) parents (ie the Family Information Service), as well as other services or facilities that may be of benefit to families. Statutory guidance (Department for Education, 2013a) specifies that local authorities should ensure that parents are aware of:

- early education places for two, three and four year olds
- the option to continue to take up their child’s 15 hour early education place until their child reaches compulsory school age
- how to identify high-quality provision in their area.

The Act includes a ‘sufficiency’ duty requiring local authorities to secure sufficient childcare for working parents and those preparing or training for work. Local authorities must also ensure early childhood services are provided in an integrated manner, to facilitate access and maximise benefit to those using them, and to make arrangements for sufficient provision of children’s centres to meet local need.

Local authorities are obliged to secure free early years provision, under details contained in regulations. The free early years entitlement covers all three and four year olds, and two year olds from disadvantaged families. Currently, ‘disadvantage’ is based on the criteria used to determine eligibility for free school meals.¹ (Department for Education, 2013a), but this is due to

¹ Meaning, in receipt of Income Support, Income-based Jobseekers Allowance, Income-related Employment and Support Allowance, Support under Part VI of the Immigration and Asylum Act 1999, the guaranteed element of State Pension Credit, Child Tax Credit (provided the applicant is not also entitled to Working Tax Credit and has an annual gross income of no more than £16,190), or Universal Credit.
change in 2014/15, as outlined below. The Childcare Act also introduced the Early Years Foundation Stage (EYFS), and all providers caring for children from birth to five are required to deliver the EYFS unless exempted².

3.2 Policy framework

**Overarching policies**

In July 2010, the Government announced Graham Allen MP would undertake a review of early intervention. This led to the publication of two reports the following year (Allen, 2011a; 2011b). A clear recommendation was for the Department for Education (DfE) and the Department of Health (DH) to work together to produce a ‘seamless Foundation Years Plan’ covering children from birth to five. Allen wanted an expansion in the use of evidence-based early intervention programmes and advocated the creation of an Early Intervention Foundation.

The Coalition Government’s vision for early years was developed jointly by the DfE and DH (Department for Education and Department of Health, 2011). *Supporting families in the foundation years* sets out what should be on offer for parents, children and families, and is underpinned by the UN Convention on the Rights of the Child (UNCRC). Its focus is on child development so that, by the age of five, children are ready for school and have laid down foundations for good health in adult life. Its commitments include:

- Expectant mothers will be supported through universal, high-quality maternity care from early pregnancy, and will be helped to make choices and plans about their care by their midwife, GP and health visitor. Mothers and fathers will have more choice about how to share their caring responsibilities, with more flexible parental leave, and options for flexible working.

- All new parents will be supported in their transition to parenthood, through pregnancy and into the first months of life. Support will come from families and friends, as part of routine healthcare by a trusted professional, through antenatal programmes and through the work of community groups and intensive preventative programmes such as Family Nurse Partnership (FNP) for the most vulnerable.

- Health visitors will provide expert preventative healthcare for parents and children until they are five. All families will have access to high-quality delivery of the Healthy Child Programme led by health visitors. Health visitors will work closely with children’s centres and primary care to join up healthcare and child development.

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² Exempt providers include registered independent schools (this does not include academies or free schools), and providers who follow established practices such as the Steiner or Montessori approaches to early learning.
• Children’s centres will provide access to a range of integrated universal and targeted services to meet local need.

• All three and four year olds, and two year olds from disadvantaged backgrounds, will be entitled to 15 hours of free early education per week for 38 weeks of the year.

• A revised Early Years Foundation Stage framework will help practitioners to get children more ready for all of the opportunities ahead of them, and for parents to better understand their child’s development.

• Children should start school healthy, happy, communicative, sociable, curious, active, and ready and equipped for the next phase of life and learning.

More recently the policy focus has been on the childcare market. For example, *More affordable childcare* (HM Government, 2013) looked at how the Government will help families meet the costs of childcare, and increase the amount of affordable provision. In relation to affordability for families, the main provisions mentioned were: the free entitlement, which, it suggested, should be more readily available through schools; and a Tax-free Childcare Scheme (HM Treasury, 2014) to be introduced through the Childcare Payments Bill outlined in the May 2014 Queen’s Speech.

**The free entitlement**

An entitlement to free early education provision was introduced for all four year olds in 1998, and expanded to include all three year olds in 2004. Since 2010 the entitlement has been set at 15 hours per week for 38 weeks a year per child. In 2013, 96% of three and four year olds were making use of funded early education, 89% of them using the maximum hours available and 80% were in settings rated as ‘good’ or ‘outstanding’ by Ofsted (Department for Education, 2013b). However, there has been some concern that, especially among the poorest three year olds, uptake has been lower than the national average (Gambaro et al, 2014).

Since September 2013, 130,000 two year olds from disadvantaged families have been eligible for a similar free entitlement, with the target doubling to 260,000 or 40% of two year olds from September 2014. The 2013–14 intake is based on free school meal eligibility. The 2014–15 intake will also include children with a Statement of Special Educational Needs or an Education, Health and Care Plan. Funding for the free entitlement is provided to local authorities through the Early Years Single Funding Formula (EYSFF) supported by the School and Early Years Finance (England) Regulations 2012.

**Children’s centres**

In 2012, the Government published a revised core purpose for children’s centres. Statutory guidance (Department for Education, 2013c) stipulates this
is to improve outcomes for young children and their families and reduce inequalities between families in greatest need and their peers in:

- child development and school readiness
- parenting aspirations and parenting skills
- child and family health and life chances.

In 2013–14, the Early Intervention Grant which had funded children’s centres became part of the local government Business Rate Retention Scheme. In its 2013–14 census of children’s centres, 4Children (2013) reported that local authorities would be spending 15% less on children’s centres than the previous year and some centres started charging for services that were previously free or new. Official figures show that between April 2010 and April 2013 the number of children’s centres dropped from 3,615 to 3,055 (Truss, 2013).

**Children and families’ involvement**

It is unclear if additional efforts have been made to involve families in the development of the various early years Government policy documents. The DfE commissions a regular survey to explore parent’s use and views on childcare provision and unmet needs (Huskinson et al, 2014), and Ofsted involves parents in their inspections of children’s centres and early education and childcare providers (Ofsted, 2013; Ofsted, 2014).

### 3.3 Early years interventions

Building on a substantial body of evidence, the Allen review (Allen, 2011a) recommend the most effective approach to supporting disadvantaged families is to intervene as early as possible, with a combination of universal and targeted multi-agency support, using evidence-based programmes. In this section we consider the extent to which this approach is reflected in the parenting support available in the pre-natal period and the early years, then look at provision of early education and childcare services.

**Strengthening families through parenting support**

There is a range of centrally initiated universal parenting services and programmes to support families during pregnancy and in the early years (these are summarised in Appendix A). Alongside ante-natal and perinatal services, there are a number of major programmes introduced recently, including the new model for health visitors and the integrated review for two year olds; however these have not been evaluated yet, so we do not know how effective they are.

The Government wishes to stimulate the creation of universal, non-stigmatising parenting classes. However, the trial of universal parenting classes does not provide much evidence that these will develop in the way envisaged by the Government (Cullen et al, 2014).
When looking at targeted parenting interventions funded by central Government, we found two programmes:

- **Family Nurse Partnership (FNP)**, a programme with a very strong evidence base which is expanding, but focuses on a narrow group (ie first-time mothers aged 20 and younger in early pregnancy) and current expansion plans will only provide funding to reach a quarter of the eligible population.³

- **Troubled Families** (Department for Communities and Local Government (2012c), which targets a broader group but has not yet been evaluated. Although its predecessor, FIPs, showed some positive results (Lloyd et al, 2011). Unlike FIPs, the Troubled Families programme is delivered through a payment-by-results scheme. This introduces an element of uncertainty; as such a scheme has never been tested in England for complex programmes. Effective payment by results schemes tend to be simple in terms of inputs and outcomes. Complex programmes may not easily lend themselves to such schemes.

It is not clear how these two programmes are linked to other early years services for example, children’s centres. They appear on the whole to be delivered fairly independently of these services.

In addition to these two centrally supported targeted parenting programmes, there is a range of locally initiated targeted parenting programmes for families with specific needs e.g. to improve children’s behaviour, as illustrated in Appendix A. Not all these programmes have been rigorously tested, but some have. There seems to be increasing awareness and knowledge of the value of using evidence-based programmes, particularly within children’s centres (Allen 2011a; Goff et al, 2013). However, with no specific funding remaining in place to support these programmes, it’s unlikely this provision will be increased, or at least sustained to current levels.

**Early education and childcare services**

As discussed earlier, the introduction of universal free early education for all three and four year olds has led to a substantial increase in take-up of early education among children from low-income families. While many attend high-quality settings, concerns remain about variability in the quality of early education (Coghlan et al, 2009; Smith et al, 2009). This will be particularly an issue with free early education for disadvantaged two year olds (Smith et al, 2009). By and large this provision will not be offered in the short term in the highest-quality settings, school-based nursery classes. It remains to be seen if other settings will be able to deliver a sufficient number of high quality places

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³See details at:
http://api.ning.com/files/ojSCGs3jvX1MjEvF5u8i5ZLEJtKOkz2yy1D9CcmnOcQRqRQs6PM2BiZbQnYHolkayUzQYW0z1zqbrgY13gUqk2afKSSNT-C/FNPEvidenceSummaryLeafletApril13.pdf (accessed 10 April 2014).
for the 40% most disadvantaged two year olds, as historically the quality of provision in these settings for the very young children has been more variable (Coghlan et al, 2009; Smith et al, 2009).

The EYFS requires settings to work with parents to improve the home learning environment, but the extent to which this is achieved is unclear as the revised EYFS has not been evaluated. We identified a number of local programmes providing effective in improving the home learning environment (Appendix A), and awareness of these may be becoming more widespread. However, with no central funding, it remains to be seen if local areas are able secure resources to deliver these programmes, sustain them and address issues of variability.

Provision over and above the free entitlement is equally relevant to discussions of support for parents to enter paid employment. Childcare services can play a key role in supporting parental (mainly maternal) employment, but need to be accessible, flexible, affordable and of good quality. Research (e.g. Lloyd and Penn, 2013) has consistently highlighted difficulties in delivering the kind of childcare services parents need, particularly those from low-income families.

A major gap in relation to targeted early years initiatives relates to disabled children. There is both in terms of adequate provision for this group of children and also in the evidence base on how they can be effectively supported to access early education and childcare. The findings from a national programme that piloted ways of making provision more accessible to disabled children were inconclusive (Cheshire et al, 2014), although we did find some local examples of more promising practice (see Appendix A).

3.4 Conclusion

The key early years policy document remains Supporting families in the foundation years, which was signed off by both the DH and the DfE. The document provides a coordinated overview of universal and targeted early years and health policies, including the enhanced health visiting programme, FNP, the free entitlement for three and four year olds and disadvantaged two year olds, and children’s centres. While there is central Government investment in the first three programmes, funding for children’s centres comes from local authorities and is unprotected. National policy, however, lays out an expectation that children’s centres will be available in each area and able to offer disadvantaged families an integrated service, including support with parenting, financial capability and preparation for work. The tension inherent in the policy being presented but the funding either absent or uncertain causes concern.

In terms of interventions, there are a number of centrally supported new and established universal parenting programmes. We do not yet know if they work as intended, providing low level support to prevent more serious problems and to identify families who need more intensive, targeted and evidence-based support. As mentioned above, the future of the initiative that seems to
provide more promising evidence in terms of achieving this aim, namely children’s centres, could be uncertain given they are not supported with protected funding.

While we identified a number of effective targeted programmes, in the current financial and public spending climate there is a danger that targeted support will become limited to those entitled to centrally funded programmes, namely FNP and Troubled Families. While these programmes support some of the most disadvantaged families, they do not reach many low-income families with young children. In relation to early education and childcare services, it remains to be seen if current arrangements can deliver for children and families who missed out in the past, and also substantially increase access to high quality provision for disadvantaged two year olds, disabled children and low-income parents who need to access childcare services.
4. Health

In this chapter we first review the legal and policy frameworks shaping health services in England and then discuss national and local public health interventions specifically focused on families with young children.

The NHS is in the early stages of system-wide reform. There is a renewed focus on reducing health inequalities at central and local Government level, and greater investment in public health through local authorities. Although population-wide, the approach aims to tackle health and wellbeing issues that have a disproportionate impact on disadvantaged children and adults.

4.1 Legal framework

The Health and Social Care Act 2012 will have an impact on low-income families with young children through duties to reduce health inequalities which apply at all levels from Secretary of State to local government; new commissioning structures; public health duties; and a greater focus on patient voice and choice.

Parts 1 and 2 of the Act provide the legislative basis for Public Health England. It specifies the public health functions of local authorities, under a duty to improve public health. Local authorities must appoint a Director of Public Health for their area, and must have regard to relevant documents issued by the Secretary of State, including the Public Health Outcomes Framework.

Part 5 of the Act deals with public involvement, and creates Healthwatch England, a committee of the Care Quality Commission representing the views of users of health and social care services, other members of the public and Local Healthwatch organisations.

Local authorities and any Clinical Commissioning Group (CCG) that works within a local authority area must prepare a joint strategic needs assessment (JSNA) to identify current and future health and social care needs. Using this, local authority-led Health and Wellbeing Boards must prepare a joint health and wellbeing strategy (JHWS). Local Healthwatch and local people must be involved in the development of the JSNA, and the preparation of the strategy. Statutory guidance on JSNAs and JHWSs describes both as a continuous process of strategic assessment and planning, the core aim of which is to develop local evidence-based priorities for commissioning which will improve the public’s health and reduce inequalities, though there is no specific reference to reducing child poverty (Department of Health, 2013c, p.4).
4.2 Policy framework

**Overarching policies**

A group of independent experts (including the Children’s Commissioner for England) sit on the Children and Young People Health Outcomes Forum to help develop a strategy for children and young people and to hold the system to account (Children and Young People Health Outcomes Forum, 2012). In response to the Forum’s first years recommendations (Department of Health et al., 2013a), the DH, the DfE and partner agencies (e.g. the Royal Colleges, Association of Directors of Children’s Services, Healthwatch, Public Health England and the NHS Confederation) published a pledge on child health which commits its signatories to: ‘improving the health outcomes of our children and young people so that they become the best in the world’ (Ibid., p.2).

**Public health**

The *public health white paper* (Department of Health, 2010) set out the Government’s vision for public health, adopting Sir Michael Marmot’s recommendation (Marmot, 2010) to take a life-course approach to tackling the wider social determinants of health. For children, this would mean ‘giving every child in every community the best start in life’.

The *Public Health Outcomes Framework 2013−16* (Department of Health, 2013a) comprises four domains with indicators relevant to young children in low-income families, including:

- children in poverty
- school readiness
- domestic abuse
- statutory homelessness
- utilisation of green space for exercise/health reasons
- fuel poverty.

NHS England is responsible for public health services for children 0−5, including health visiting, the Healthy Child Programme and the Family Nurse Partnership (FNP) until October 2015, when responsibility will transfer to local authorities.

**Family Nurse Partnership**

The Government aims to increase the take-up of places on the Family Nurse Partnership programme for new parents aged 20 or under to at least 16,000 by April 2015.
Health visitor implementation programme
The Coalition Agreement committed to an increase in the numbers of health visitors by 4,200 against a 2010 baseline of 8,092 by April 2015. The Government published an implementation plan (Department of Health, 2011) outlining the new health visitor model providing different levels of services from universal to targeted. In 2013, there were 49 Early Implementer Sites working to deliver the full programme (Department of Health, 2013b).

Mental health
The Government’s mental health strategy (Department of Health, 2012b) made a number of commitments to make mental health a key priority for Public Health England and prioritise early intervention across all ages. In relation to young children and families, the paper referred to the health visitor programme, the Healthy Child Programme, links with maternity services and children’s centres, and the Troubled Families Programme.

Children and families’ involvement
In her review of child health (CMO, 2013), the Chief Medical Officer reports that NHS England is introducing three new initiatives involving children and young people: expanding the Friends and Family Test to invite child patients to give their views; setting up a NHS youth forum with the British Youth Council; and, developing new children’s experience measures for the NHS. She notes the particular challenges that health workers and agencies will have in involving very young children, but is clear that they should be involved.

4.3 Interventions to promote public health in the early years
In addition to the health-led parenting programmes discussed earlier (eg FNP, the new health visitor model), we reviewed the following public health support available in the pre-natal period and the early years:

- support for mothers with high health risks, dealing with issues such as maternal depression, substance misuse and smoking
- health promotion, we review programmes on nutrition and life style, including those aiming to reduce child obesity
- mental health interventions available for young children.

There have been extensive reviews (e.g. by National Institute of Clinical Excellence (NICE)) of interventions that support mothers with high health risks which, if not tackled, could have considerable negative consequences for their children (see Appendix A). We currently have no means of knowing how widespread the use of these interventions is.

The universal parenting support initiatives discussed earlier should play an important role in providing universal low-level support in relation to health promotion, and identifying families who need more targeted and intensive
health support, as well as providing and coordinating this support. There are other centrally supported initiatives focused on nutrition and lifestyle, including: the Baby Friendly Initiative to increase breastfeeding; Change4Life, a promotion campaign to reduce childhood obesity and the Healthy Start Scheme to improve access to a healthy diet among low-income families (see Appendix A). Only the first of these initiatives is based on a large evidence base of what works in supporting breastfeeding. The effectiveness of the others has not been conclusively established. Evidence is weak in relation to the effectiveness of Change4Life.

In response to the growing body of evidence that poor mental health in early years can lead to significant inequality and poorer mental health outcomes throughout life, two centrally supported initiatives have recently launched to improve children’s access to mental health services: MindEd, which provides e-learning for a wide range of professionals on children’s mental health\(^4\); and Improving Access to Psychological Therapies (IAPT), which aims to increase the availability of NICE-recommended psychological treatments for depression and anxiety disorders to children, as well as adults, (Department of Health, 2012b). Neither of these have been evaluated yet as they are relatively new.

4.4 Conclusion

In terms of policy, a key element of the life course approach in the new health service aims to help disadvantaged families to provide their children with the best start in life through a better diet, more exercise, parent-child communication, development of emotional wellbeing and a safer and cleaner environment in the home and community. Public health changes are particularly relevant and, at local level, provide a basis for professionals and services working across health, early years, play, education, housing and social care.

It remains to be seen whether shared public health objectives will in practice lead to better coordinated commissioning and delivery of services. When examining public health services available to low-income families with young children, we found a good evidence base on effective support for mothers with high health risks, but we do not know how widespread the use of these interventions is. We identified local programmes aimed at reducing childhood obesity with some evidence of their effectiveness, but again we do not know how widespread they are or whether their provision, particularly via children’s centres, is declining. We found little evidence that centrally funded promotion campaigns, such as Change4Life or the Healthy Voucher Scheme, work as intended. Two mental health programmes targeted at children and those working with them have recently been introduced, in recognition of the importance of providing adequate mental health support to children. Neither have yet been evaluated yet.

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\(^4\) See details at: [http://www.rcpch.ac.uk/minded](http://www.rcpch.ac.uk/minded)
5. Housing

In this chapter we focus mainly on reviewing the housing legal and policy frameworks. Very little was found in relation to how housing interventions affect families with young children.

5.1 The legal and policy frameworks

Links between child poverty and housing generally refer to:

- housing affordability (whether social housing, private rental or owner-occupier)
- housing location or neighbourhood, particularly in relation to transport, accessibility of other services, and distance from sources of employment
- housing stability in relation to security of tenure
- housing conditions, including the quality of housing as well as considerations about safety and security within the home and local community (eg Tunstall, 2013).

In its 2011 child poverty strategy, the Government made a series of comments about the importance of stable, good-quality housing as well as the negative impacts that living in a poorer, often less safe, area can have on children and young people (HM Government, 2011c).

5.2 Legal framework

Housing law is complex, and this summary is therefore necessarily selective, focusing on issues identified above as they may apply to low-income families: security of tenure, housing allocation, the quality of housing stock including its energy efficiency and homelessness.

**Tenancies**

Part 4 of the Housing Act 1985 (since amended) introduced secure tenancies, which remain the most common form of tenancies provided by local authorities. Grounds for repossession can include: rent arrears, anti-social behaviour, or if the size of the dwelling is more extensive than is reasonably required by the tenant. The Localism Act 2011 gives local authorities the power to offer flexible or fixed term, tenancies to new social tenants and to family intervention tenants.

**Housing standards**

Part 1 of the Housing Act 2004 created the Housing, Health and Safety Rating system (HHSRS) for dwellings. The HHSRS (Department for Communities and Local Government, 2006b) is a risk-based approach to assessing housing
conditions, including damp and mould; overcrowding; noise; heating; domestic hygiene and pests; personal hygiene; food safety; and water supply. It provides the statutory basis for the Decent Home Standard Department for Communities and Local Government, 2006a). In order to meet the Decent Home Standard, dwellings must:

- not contain any hazards assessed as category 1 (serious) under the HHSRS
- be in a reasonable state of repair
- have reasonably modern facilities and services
- provide a reasonable degree of thermal comfort.

**Fuel poverty and improving energy efficiency**
The Energy Act 2011 provides the legislative basis for the Green Deal and the Energy Company Obligation. Under a new definition of fuel poverty (Department of Energy and Climate Change, 2013), a household is considered fuel poor if:

- their income is below the poverty line (taking into account energy costs)
- their energy costs are higher than is typical for their household type.

It also uses a fuel poverty gap, which is the difference between a household’s modelled bill and what their bill would need to be for them to no longer be fuel poor.

The Energy Company Obligation (Department of Energy and Climate Change, 2013) is the focal point for low-income households and includes three components:

- The Carbon Saving Obligation (CSO) provides support for the delivery of measures in hard-to-treat properties (such as those with solid walls).
- The Carbon Saving Communities Obligation (CSCO) delivers insulation measures in deprived and rural areas (and is expected to deliver a combination of lower-cost loft and cavity wall insulation as well as some solid wall insulation).
- The Affordable Warmth Obligation (AW) is expected to support basic heating and insulation measures in low-income private tenure households.

**Homelessness**
The Housing Act 1996 requires local housing authorities to ensure that advice and assistance to households who are homeless or threatened with homelessness is available free of charge. A ‘main homelessness duty’ is
owed where the authority is satisfied that the applicant is eligible for assistance, is unintentionally homeless and falls within a specified priority need group which includes households with dependent children or a pregnant woman.

5.3 Policy framework

**Overarching policies**

The Coalition Government’s housing policy was published in 2011 (HM Government, 2011a), with an overall vision of: ‘a thriving, active but stable housing market that offers choice, flexibility and affordable housing’. Its proposals include:

- Investing £4.5 billion in affordable housing through the Affordable Homes Programme throughout 2011-15, stating that the majority of new homes should be available as affordable rent and ‘in some circumstances’ social rent.

- Seeing social housing as a springboard for social mobility and changing allocations policy to better manage the scarce supply of social housing.

- Tackling homelessness, with funding for homelessness prevention and prioritisation of rough sleeping.

- The Troubled Families programme, with housing associations and private landlords playing a key role in identifying families for this programme and deploying evidence-based interventions.

- Reduce Housing Benefit expenditure by over £2 billion between 2012–15.


**Homelessness**

A separate homelessness strategy (Department for Communities and Local Government, 2012b) notes that 18% of the households accepted as being homeless in 2011–12 were in that situation due to relationship breakdown, with violence a factor in 70% of those cases. It recommends that local authorities and others:

- adopt a corporate commitment to prevent homelessness

- work with the voluntary sector and other local partners to address support, education, training and employment needs

- offer a Housing Options prevention service to all clients
• agree housing pathways with key partners, which include appropriate accommodation and support
• develop a suitable private rented sector offer for all client groups
• prevent mortgage repossessions
• avoid the use of bed and breakfast accommodation unless in an emergency and for no longer than six weeks.

Statistics on homeless families in England (Department for Communities and Local Government, 2014) indicate that, as at 31 March 2014, 43,530 households in temporary accommodation included dependent children and/or a pregnant woman (within which households there were 80,560 children or expected children). 1,960 households with children were in bed and breakfast style accommodation and, of these, 480 had been in bed and breakfast for more than six weeks.

Welfare reforms affecting families with young children
In the 2010 Budget, the Government announced its intention to reduce the amounts spent on Housing Benefit; housing affordability and security have been affected by the welfare reforms, with some evidence emerging of the impact of these changes. The reforms include:

• a cap on total household benefits of £26,000 per year or £500 per week for couples or lone parents, no matter how many children they have
• Housing Benefit for private sector tenants is restricted to the cost of the lowest-cost 30% of homes in the local market area
• under-occupancy reductions in Housing Benefit (bedroom tax) – a cut in the amount of Housing Benefit for working-age tenants of social landlords if the number of bedrooms exceeds their assessed needs
• Council Tax reduction – from 2013, funding of £3.2 billion (a cut of 10%) was transferred from the Department for Work and Pensions to the Department for Communities and Local Government, and then devolved to local authorities to distribute to low-income households. With the exception of pensioners, who are protected, local authorities may draw up their own support schemes for vulnerable groups. The relevant legislation is the Local Government Finance Act 2012.
• Community care grants and crisis loans – abolished and replaced by local schemes controlled by local authorities.

Children and families’ involvement
There is no evidence of any targeted involvement of children and families in the development of housing policies at national level.
5. Housing interventions

In contrast to the other areas reviewed, where we identified evaluations of many national and local initiatives, we could find very little evidence of evaluations of effectiveness of housing interventions in supporting low-income families. We could not identify an evaluation of key Government housing initiatives, such as the Affordable Homes Programme and the Affordable Warmth Scheme. Nor could we find any evidence on the evaluations of interventions to tackle homelessness, other than some evidence from the national evaluation of FIPs (Lloyd et al, 2011).

5.5 Conclusion

Policies to alleviate the effects of poverty target disadvantage and low income through measures to make homes safer, of a decent quality and more affordable.

We found little evidence on the role of housing schemes to support low-income families with young children or exploring effective practice locally. It is important to consider what role housing interventions are expected to play in relation to the local child poverty strategy. It is also important to explore the effectiveness of these interventions. Sadly we found very little evidence that housing programmes are evaluated, in particular to assess their impact on families with young children.

We found very limited evidence of housing schemes being evaluated for their effects on low-income families with young children. There are many ways in which housing interventions can support these families, for example, through home safety and home improvement schemes and with programmes tackling fuel poverty and homelessness. In the next chapter we see that some local authorities have included these in their child poverty planning. Furthermore, as discussed earlier, the Child Poverty Pilot found that stable and suitable housing is important for progression in other areas.
6. Policy planning at a local level

In this final chapter we briefly consider how legal requirements, national policies and evidence of effective interventions in supporting low income families with young children are ‘translated’ into practice locally. The discussion is based on an analysis of relevant strategies and plans from a sample of 10 local authorities (see Appendix B for a list of local authorities included and further information about the documents we analysed).

The local documents we reviewed all mention specific interventions to support low income families with young children. Major national programmes (e.g. children’s centres, health visiting, Family Nurse Partnership (FNP), Troubled Families) were seen by virtually all these local authorities as playing a part in their strategy to tackle and alleviate child poverty and support low income families. Many of the local programmes we reviewed were also mentioned in wider local plans and strategies, including those with a good evidence base. There were also some that did not seem to have been evaluated or with inconclusive evaluation results. A list of these programmes is available in the full review report (La Valle et al, 2014). This summary focuses on the priorities identified locally to support low income families with young children.

It is clear from the Child Poverty Pilots that supporting low income parents with immediate financial problems is important, and can lead to both immediate benefits in terms of parent’s and children’s wellbeing, creating a solid foundation to support a move into employment. Three of the 10 authorities we reviewed did not report this as a priority, while seven did mention a combination of improving families’ financial capability, and help to avoid debt and maximise benefit entitlement.

The Child Poverty Pilots also stress the importance of supporting ‘parents as parents’ and consider the specific barriers and needs related to having caring responsibilities, particularly when caring for young children. However, supporting parents into work was identified as a priority by only four of the 10 authorities. Interestingly, seven authorities prioritised actions to improve the local economy and labour market, a crucial issue when considering improving parents’ employment opportunities, but not highlighted by the Child Poverty Pilots.

Two key national policy priorities, namely strengthening families by providing parenting support and support to families with multiple problems, were priorities in all 10 authorities. While central funding for FNP and Troubled Families should ensure that targeted parenting support to some of the most

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5 It should be stressed that this discussion is based on what local authorities were planning to do when the documents we reviewed were developed and we did not collect any evidence on how these plans were implemented.
vulnerable families is delivered, many low income families are not eligible for either programme, or may miss out entirely as other key early years services (e.g. children’s centres or programmes to support children with behavioural problems) are not supported by dedicated central funding.

Only half of the 10 authorities identified a priority for improving the take-up of early education and childcare services, including the free entitlement though all local authorities offer it. This is a concern, given the evidence discussed in chapter 3 which showed that a small number of mainly disadvantaged three and four year olds do not access early education. The chapter also examines the difficulties expected in implementing the free early education entitlement for disadvantaged two year olds and the role childcare services can play in supporting parental employment.

Improving the home learning environment, which is acknowledged as key to children’s cognitive and social development, was not identified as a specific priority by any of the 10 local areas. It is possible this issue could be seen as an element of priorities such as: provision of parenting support, and/or part of services provided by children’s centres. Reflecting national policy, all authorities were committed to providing a variety of services in children’s centres.

In line with national policy priorities, all 10 local authorities identified a reduction in health inequalities and the promotion of healthy lifestyles as priorities for their areas. However, more specific mechanisms for achieving these, such as reducing smoking in pregnancy and improving access to healthy eating, were mentioned by few (two and three respectively). Other vital public health issues, such as support to mothers with high health risks other than smoking and children’s mental health, were not identified as specific priorities. They may have been covered within other broader health priorities which were outside the scope of this review.

From this sample of local authorities’ priorities, it seems that views on the role of housing in supporting low income families varied. While all ten authorities identified tackling fuel poverty as a priority (again, a national priority with allocated funding), the prioritisation of other interventions varied. Only four mentioned tackling overcrowding, two the provision of housing advice, and three suitable sites for Gypsies and Travellers. Other issues were prioritised by more. Six mentioned increasing the supply of affordable housing; five homelessness prevention; and four housing improvements.
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