

# Child Poverty

## Context

Bradford District is one of the most deprived local authorities in England, ranking 26th in the 2010 Index of Multiple Deprivation. Bradford is also the youngest English city outside London. Nearly a quarter of the population is aged under 16 (23.5%). The large 0-19 population in the District means that our most recent 2011 child poverty rate of 25.8% equates to 35,820 children and young people. This faces the District with a growing challenge as over the last decade there has been an increase of over 20% in 0-4 year olds. Over the next ten years the number of under 16 year olds is predicted to increase by 13,200 – an increase of 10.7%. Whilst there has been a sustained fall in the District's child poverty rate since 2007 two factors indicate that the current decline may not continue: these are the projected national upswing in child poverty rates from 2012-2020 plus the concentration of child population growth in the most deprived areas of the District.

Growing up in poverty can affect physical, cognitive, social and emotional development, all of which are determinants of outcomes in adulthood. Although some children who grow up in poverty will go on to thrive in adulthood, many others will not. Poverty blights children's lives and can prevent them from fulfilling their potential, leading to inter-generational patterns of poor outcomes and continuing poverty unless we are able to interrupt that cycle of poverty for the future and reduce the impact of poverty on children in the short-term. As such the issue of child poverty is one of the key challenges that face our District.

Children living in areas of high deprivation are:

- more likely to die in infancy or childhood,
- more likely to be injured at home or on the roads,
- more likely to be subject to safeguarding/child protection measures,
- less likely to be breastfed and more likely to be obese or underweight
- more likely to have problems with oral health.

Young people growing up in areas of high deprivation are:

- more likely to conceive and more likely to become a parent as a teenager
- more likely to enter the youth justice system;
- more likely to smoke
- more likely to be NEET (Not in Education, Training and Employment).

Poverty and high levels of deprivation within the Bradford district appear to be linked to adverse outcomes across many aspects of children and young people's lives including health and education. The measurement of poverty typically focuses on relative poverty and is based on the proportion of children living in families in receipt of Child Tax Credit whose total reported household income is less than 60% of the median, or living in families in receipt of Income Support or Income-Based Jobseekers Allowance<sup>1</sup>. Eligibility for free school meals is recognised as an appropriate proxy measure of poverty and is often used to track educational outcomes for children living in poverty.

The Child Poverty Act, 2010 has placed a duty on national and local government to develop child poverty strategies and to promote co-operation between partners to tackle child poverty. It enshrined in law the Government's commitment to eradicate child poverty by 2020 and ensures sustained action must be taken to tackle child poverty by this, and future, governments and by local government and their partners.

All responsible local authorities are expected to make arrangements to promote co-operation between the authority and its partners in order to reduce and mitigate the effects of child poverty within the local authority's area. The National Child Poverty Strategy sets out the measures to be taken in relation to employment and skills, financial support for families, information and advice for families and services for children in relation to housing, the environment and social inclusion.

A 12-18 month update of the first Child Poverty Needs Assessment describes outcomes for children and young people in poverty and the nature and extent of child poverty in the Bradford district. It highlights those groups of children most at risk of living in poverty locally, and the challenges to be overcome in tackling child poverty in Bradford district. Based on this the first Bradford District Child Poverty Strategy 2011-14 has five priorities to reduce the impact of poverty on children and young people.

## National and local targets

The Child Poverty Act 2010 set four challenging UK-wide targets to be met by 2020. Together, these targets provide a clear vision and definition of what ending child poverty means. The targets are based on the proportion of children living in:

- Absolute poverty: this measures whether the poorest families are seeing their incomes rise in real terms, fixed as equal to the relative low-income threshold for the baseline year of 1998-1999 expressed in today's prices. Target is less than 5%. (LA level data not available)
- Relative poverty: this measures whether the incomes of the poorest families are keeping pace with the growth in incomes seen across the economy as a whole. The indicator is the number of children living in households where total household income is less than 60% of the median income. Target figure is less than 10%.
- Material deprivation: this measures the actual living standards of children and families in detail. The indicator is the number of children living in households that are both materially deprived and have low income, ie less than 70% of median income. Target is less than 5%.
- Persistent poverty: measures the proportion of children living in households with less than 60% of the median income for three out of the previous four years. Target to be set in regulations by 2015. (LA level data not available)

The headline indicator for the National Child Poverty Strategy is the proportion of children living in (relative) poverty – the latest available figures for 2011 show the rate for England to be 20.1%. We await the outcome of a national review and consultation in 2012 on a new multi-dimensional measure of child poverty.

A local target is proposed for 2013-14 onward – that the Bradford District child poverty rate should track no higher than 6% above the rate for England.

## Relevant strategies and local documents

- Child Poverty Act 2010
- Bradford District Children and Young People's Plan 2011 – 2014
- Bradford District Child Poverty Needs Assessment 2011-12
- National Child Poverty Strategy
- Bradford District Child Poverty Strategy 2011-14 – 'Child Poverty is Everybody's Business'
- Sustainable Community Strategy II
- Bradford District Early Help Strategy
- Bradford District Joint Strategy for Disabled Children and Young People 2011-14
- Bradford District Food Strategy and action plan

- Bradford District Health and Well-Being Strategy
- Children and Young People's Health and Lifestyle Survey 2010 (2013 update forthcoming early 2014)

## What do the data tell us?

The data indicate that the District's children born into, and living in, poverty are more likely to be exposed to adverse experiences from a young age, many with serious adverse consequences. Without intervention to interrupt a cycle of poverty the children currently growing up in poverty are less likely to make a successful transition into working adulthood and are more likely to become adults and parents who live in poverty.

The child poverty rate in Bradford District has been declining since 2007. The most recent, official child poverty figures for 2010-11 (published in autumn 2013) showed a further small reduction of 0.3% following a substantial 1.2% fall the previous year, giving the District a child poverty rate of 25.8% in 2011 compared to the England rate of 20.1%. Despite the sustained fall in the rate more than one in four children in the District still live below the official child poverty line (almost one in two children in some small areas of the District). Two factors, the projected upswing in child poverty rates from 2012-2020 plus the concentration of child population growth in the most deprived areas of Bradford District indicate that the current decline may not continue. An additional factor is that the District has a growing child population from communities that can experience delayed access to out of work benefits which could have the effect of under-counting child poverty in some of the most deprived areas of the District.

The large and growing 0-19 population in the District mean that a 25.8% child poverty rate equates to 35,820 children and young people aged 0-19. Consistently we find that just over half of children who live in poverty live in 6-8 of the most urban of the District's 30 wards. The most recent figures show that half of children in poverty (51.8%) live in 8 wards. In order of the largest number of children in poverty per ward these are: Bradford Moor, Little Horton, Manningham, Bowling and Barkerend, Tong, Toller, Great Horton and City wards (HM Revenue and Customs, 2013).

From this point onwards the data analysis refers to the 2010 data published in autumn 2012 – these points will be updated as the 2011 data published in autumn 2013 is analysed further in early 2014.

- Child poverty rates for smaller geographic areas - Lower Super Output Areas (LSOAs) show even starker concentration of inequality. This ranges from 1% of children living in poverty in parts of Ilkley, Wharfedale and Craven Wards to 58% in parts of Bowling & Barkerend and Little Horton. Analysis of small area data shows pockets of deprivation in some of the more affluent areas of the District. For example, even though Windhill and Wrose is in the lower half of the 30 wards ranked by child poverty, it still has pockets of deprivation.
- Children from larger families are more likely to live in poverty. In Bradford District, a third of families where there are four or more children live in poverty compared to a fifth of families that have two children. (HM Revenue and Customs, 2012)
- An analysis of school census data by deprivation and by ethnicity of school pupils shows that 91% of Roma/Roma Gypsy children and over 80% of children with 'Mirpuri Pakistani' and 'Other Pakistani', 'Bangladeshi' and 'African' ethnicities live in areas of the District that are in the 10-30% most deprived areas of the country compared to 42% and 36% of 'White British' and 'Chinese' children'. In summary children with Roma/Roma Gypsy, Pakistani, Bangladeshi and African ethnicities are heavily over-represented in the most deprived IMD areas of the District.
- Nationally nearly two thirds of children in poverty live in households headed by a lone parent. In Bradford District this figure is lower at 54%, meaning that 46% of children living in poverty live in families headed by a couple. Living in a couple-headed household is generally regarded as a protective factor against poverty, as potentially two adults can be in work. However, in Bradford District this potential advantage is not lifting as many couple-led households out of poverty as we would hope. This may be as a result of high unemployment and low skill levels leading to low

wages, high rates of economic inactivity, under-employment in terms of hours worked, or a combination of these factors.

- In Bradford District almost twice as many children (12%) as nationally (7.5% in England) live in working households where paid income is low enough for them to receive Working Tax Credit but for total household income to remain below the level of 60% of average income that marks the child poverty line. Again this may reflect the pattern of lower than average pay in the District (HM Revenue and Customs, 2012).
- Average household incomes are approximately 88% of the national average, (CACI, 2011).
- Eligibility for free-school meals is based on the receipt of one or more specific benefits, or who have income between a total annual household income of more than £16,190 (DirectGov, 2011). One fifth of children (20.8%) educated in the Bradford District are eligible for Free School Meals. Narrow eligibility criteria help to explain why fewer children in the district are eligible for free school meals than are classed as living in relative poverty (25.8%) for example the criteria exclude children in poverty if the household is eligible for Working Tax Credit even if the additional income does not raise the household income above the poverty line.
- Worklessness is highly concentrated in deprived areas, particularly inner city areas. 9.6 % of 18-24 year olds were claiming JSA in July 2011 compared to 7.6% in July 2010. (BMDC, 2011b) In 2010 the total proportion of the working age population claiming Jobseekers' Allowance increased to 5.5% compared to 4.5% for Yorks & Humber and 3.9% nationally. There has been an increase of 41% in female unemployment over the last year compared to only 9.8% for men. Unemployment is particularly high in the 25 to 49 year old age-bracket.(NOMIS, 2010).
- Increasing numbers of children are living in out of work households; approximately 23.4% of children in the Bradford district live in out of work households, compared with 19% regionally and 16.5% nationally
- At all educational milestones, children and young people who are eligible for Free School Meals and/or living in areas of high deprivation are less likely to achieve expected thresholds or targets and are more likely to be among the lowest achieving pupils in their cohort. However a small number of local primary schools have succeeded in almost closing the achievement gap at Keystage 2.
- At both KS2 and KS4 the educational attainment gap between children receiving Free School Meals and those that are not remains smaller than the regional or national gap but the trend for local improvement reversed in 2010 at both KS2 and KS4. Fewer young people who were eligible for Free School Meals at age 15 achieve full level 2 or level 3 qualifications at age 19. There are higher rates of children and young people Not in Education, Employment or Training (NEET) in areas of high deprivation (BMDC, 2011c).
- The most deprived 20% of the District has twice the level of babies born with low birth weight (10.9%) as the least deprived quintile (5.2%) and a significantly higher level of infant mortality (9.9 deaths per 1,000 births) compared to the District average (of 8 deaths per 1,000 births). Children born to mothers living in the most deprived areas are less likely to be breastfed. Babies who are not breastfed are more likely to experience the associated health inequalities of higher rates of gastrointestinal, respiratory and urinary tract infections and greater likelihood of being hospitalised as the result of infection and higher prevalence of high blood pressure, high cholesterol levels, obesity and type-2 diabetes.
- Rates of both underweight and obesity have a link to poverty. As deprivation increases so does the proportion of children who are underweight and the proportion that are obese. The link between poverty and child obesity appears stronger, the gap between the obesity rate for the most and least deprived widens from a 3 percentage point gap at age 5 to a 10 percentage point gap at age 11.
- Children living in the most deprived areas are likely to experience poorer oral health with impacts of pain, discomfort, difficulty eating, sleepless nights, time off school, problems with self-esteem, confidence and communication.
- Rates of teenage conceptions are twice as high in the most deprived quintile of the population (49.2 per 1000 population compared to 22.1 for the least deprived). Children born to teenage parents are

more likely to experience poverty and poor health outcomes which, without intervention, can create a negative cycle whereby each generation suffers increasingly poor health outcomes.

- Over the life course health inequalities linked to deprivation add up to shorter life expectancy. Girls born in the most deprived areas have a life expectancy that is nearly 7 years shorter than it is for those born in the least deprived areas. Boys born in the most deprived areas have a life expectancy that is nearly 10 years shorter than their peers in the least deprived areas.
- In summary, children who live in the most deprived areas of Bradford are more likely to have lower life expectancy, are less likely to have a healthy weight (more likely to be overweight or underweight) and more likely to be admitted to hospital for a range of conditions including respiratory illness and injury than those who are born in the least deprived areas of Bradford. They are also more likely to have low birth weight, less likely to be breastfed and statistically more likely to die in their first year of life.

## Future needs and gaps in provision

- The number and proportion of the district's total population aged under 18 years is increasing and the relatively high proportion that live in poverty is likely to increase the general demand for services and support to families including early help and preventive services as well as those that seek to reduce the impact of poverty.
- In addition to the quarter of children already living below the poverty line, the high number of families living with low income plus material deprivation puts a further third of the District's children at high risk of falling into child poverty and means that they are already experiencing the negative impact of low-income plus material deprivation on their life chances.
- 59,900 adults across the district have no qualifications. This equates to around 18% of the working-age population, which is higher than the regional and national average. Growth forecasts for the Bradford district (2009–2019) suggest that the strongest growth is likely to be seen in parts of the service sector which typically employ highly-skilled staff – producing a skills gap (NOMIS, 2011).
- Rates of unemployment among the adult population are high and residents from Black and Minority Ethnic (BME) communities are disproportionately affected. Of the BME population in Bradford 4.4% are claiming Job Seeker's Allowance compared to 2.7% of the White population (NOMIS, 2011).
- The number of people claiming JSA has increased slightly over the 2010 to 2011 period, but the duration of the claims has remained fairly constant, with two thirds of recipients claiming for up to 6 months. On a regional and national basis overall claims are lower and there has been an increase in short term claims and a decrease in those claiming for over 12 months (NOMIS, 2010).
- At £420, average weekly earnings for full-time workers in the district are 9% lower than the regional average and 16% lower than the national average giving Bradford a higher than average rate of in-work poverty. (NOMIS, 2010)
- Bradford District has a high proportion of private sector accommodation classed as 'non-decent', often due to poor energy efficiency standards and risk of excessive cold. This combined with low average incomes may mean that families spend a disproportionate amount on heating. Privately rented accommodation suffers a worse rate of non-decency than owner occupied housing (NOMIS, 2011).
- Higher proportions of disabled children, and children with Special Educational Needs (SEN), live in poverty, concentrated in areas of high deprivation. The costs associated with caring for a disabled child, and the difficulties parents face in obtaining and maintaining work, make it difficult for these families to move out of poverty.
- Poverty prevention - A high level of low income plus material deprivation puts a further third of the District's children at high risk of falling into child poverty and means that they are already experiencing the negative impact of low-income plus material deprivation on their life chances.

## Summary of priorities

The 2011-14 Child Poverty strategy is being reviewed in winter 2013 and a new strategy will be developed for 2014-17. The new strategy will be based on the updated further needs assessment and will review the current high-level outcome and five priorities for the Child Poverty Strategy which are:

*“to create the conditions in the District where all children, young people and families can maximise their full potential by minimising the adverse effects of child poverty”*

- Priority 1 - No child to live in sub-standard housing
- Priority 2 - Every family can access the support they need (eg. Debt advice; benefits & careers advice; mental health; domestic violence support; disabilities services)
- Priority 3 - Children and young people take advantage of education, employment and training opportunities (continue to reduce the gap between children at foundation stage, key stage 2 and key stage 4)
- Priority 4 - Break the cycle of worklessness by undertaking positive action for vulnerable groups (low income families; unemployed adults; those who are NEET or at risk of becoming NEET.
- Priority 5 - Positive parenting builds resilience in children and families to address inequalities particularly health related issues.

An activity plan puts the priorities into operation, co-ordinating work between children’s services, partner agencies and other council departments to address child poverty issues through existing and forthcoming strategic plans and to focus existing resources on child poverty. Additional Workstreams address child accident rates, increasing the uptake of free school meal, housing quality, fuel poverty, ‘poverty-proofing’ the school day; helping parents to protect children from the impacts of poverty, promoting enterprise education, growing and attracting high-quality jobs; improving children’s nutrition and developing child poverty impact assessment.

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