**Children 1st response to Education and Skills Committee Inquiry into attainment and achievement of school aged children experiencing poverty**

*March 2018*

Children 1st is Scotland’s national children’s charity. We have over 130 years of experience of working alongside families to provide relationship- based support when they need it and to help children and families to recover from the trauma associated with childhood adversity. We focus our work on three main areas: prevention, protection and recovery from trauma.

End Child Poverty figures reveal that poverty affects children in every part of Scotland, with as many as 34% of children living in poverty in some local authority areas - compared to one in ten in others. In Glasgow it is estimated that 34% of children are living in poverty.[[1]](#footnote-1)

Children 1st have seen a substantial increase in the number of individuals we work alongside experiencing financial hardship. Some of the families that we support have told us that they have to choose between ‘eating and heating’. For the children that we support growing up in poverty means feeling cold, going hungry, being unable to fully join in activities at school, with friends or in the wider community and spending time feeling worried about their financial situation at home, or even where they are going to live.

For many of the families that we work with poverty can place intolerable stresses and strains on daily life and can impact on their ability to support a safe and nurturing environment for children to grow and develop. Where there are issues relating to poor housing, economic or financial uncertainty, job insecurity or unemployment some families can find it hard to develop safe, attachment- based relationships while experiencing poverty. Children may find it difficult to concentrate at school or to build resilience while dealing with not having enough to eat or worry about what is happening at home.

We also know that some parents use coping mechanisms to deal with the trauma of poverty, such as using drugs or alcohol to cope, that can have an impact on family life. For others, living in poverty is compounded by unresolved trauma from childhood adversities like experiencing domestic abuse as a child, child abuse or neglect or a parent being in prison. Research also talks about the impact of poverty on intergenerational trauma. Children 1st’s experience is that financial instability can be a result of—or result in—a range of social and emotional factors which in turn can affect family functioning. A 2016 Joseph Rowntree Foundation evidence review talked about the links between family socio-economic circumstances and child abuse and neglect.[[2]](#footnote-2) Research from England has also found that Adverse Childhood Experiences (ACEs) have been shown to be related to deprivation, with the experience of four or more ACEs being reported by 4.3% in the least deprived quintile and 12.7% in the most deprived quintile.[[3]](#footnote-3)

Children 1st’s submission to the Committee focuses on the impact of poverty on children and families’ lives and the way in which experiencing poverty can affect all areas of family life, including achieving in school. We believe that it is important to explore and acknowledge the links between poverty and childhood adversity and trauma in order to fully address the attainment gap. Crucially, our view is that closing the attainment gap should not solely be down to schools but that support should be in place, where required, to help all families to ensure they have the resilience and relationships to be safe, healthy and happy.

Attainment is not just about a single child but about the whole family and the support around that family—acknowledging this, and the importance of strong attachments and building resilience to help prevent and overcome the impact of trauma, will be the key factor in closing the attainment gap in Scotland.

1. **How has your work supported the educational attainment of children and young people? What has worked well and what barriers have there been to success?**

Children 1st’s view is that easily accessible, non-stigmatised, compassionate, trauma- informed family support has the potential to help families to overcome trauma and build resilience to prevent problems from escalating to a point of crisis. We believe that child- centred, family- minded support will help children to become emotionally healthy and resilient individuals and, where appropriate, their parents are able to access early help to resolve what happened to them in their own childhood and to support the development of positive, safe, loving family relationships.

Once children feel safe, happy and loved (and their parents are emotionally and financially resilient) we believe it is much more likely that they are able to achieve what they want both at school and in their home lives.

For this reason, our work to support the educational attainment gap has involved some core elements of supporting families to recover from trauma and build resilience, including:

1. Working collaboratively with families by providing Money and Welfare Advice to help them to access the financial support that they are entitled to and manage debt, where required. We aim to deliver integrated benefit, debt and money advice within the wider context of trauma informed family support. This work acknowledges the importance of financial stability for families.
2. Children 1st also deliver IFF Kitbag sessions in schools and directly with families. Kitbag is a tool to build and develop resilience, emotional literacy and compassion in children. By building children’s capability to name and discuss feelings we believe that it has the potential to change individual, family and school culture to recognise that children’s behaviour is wholly linked to their emotional development.
3. In many local authorities we are commissioned (or we fund ourselves) to deliver relationship- based, trauma- informed family support to families who invite us to work alongside them. We work using a ‘hub model’ of integrated family support, where everyone is working to the same agenda and is underpinned by the same trauma- informed processes and practice. Our support workers are trained to meet the complex and varied needs of families and to help them with problems that they identify—which may include money advice, housing, parenting support and issues stemming from relationships. Our support workers are adaptable and able to respond to the needs of the family, drawing on expertise from those with more specialist knowledge if required. We believe that these services are successful because they include the whole family rather than just working with the child.

In addition to these specific areas, Children 1st runs ParentLine, the national family support service, that operates advice and information about family life via a helpline, text messaging service, webchat and through online information.

It is also important to highlight the role that Family Group Decision Making (FGDM), piloted by Children 1st in Scotland nearly 20 years ago, has had in helping families to build resilience. Since the first Family Group Meeting we have seen dramatic impacts on the reduction of children being accommodated and increases in family confidence to create and own their own plans and decisions. The principle of this model is that at Family Group Meetings families are asked to help in looking at solutions for families as a rights- based, trauma- informed way of bringing the family together.

Since Family Group Decision Making began being offered to every child at risk of becoming accommodated in Edinburgh City Council in 2016 the local authority has seen a decrease in the numbers of children in the care system. In 2015 Edinburgh Council delivered an estimated 227 Family Group Meetings per year with 10.5 staff at a cost of just over £2,000 per family meeting. Conservative estimates for savings made for children whose meetings resulted in an alternative to residential care placements (for example, kinship care placements) as £1,077,000.

1. **Are there any services that you/ your organisation has not been able to provide that you believe would work?**

Despite research consistently pointing towards the need to invest in family support and trauma recovery we have not seen the type of investment in preventative services envisaged by the Christie Commission in 2011.The Early Intervention Foundation states that in England and Wales late intervention costs £17 billion per year which “underlines the need for effective, targeted early intervention to address the demand for late intervention.”[[4]](#footnote-4)

[Glasgow](http://www.heraldscotland.com/search/?search=Glasgow&topic_id=8799) Health and Social Care Partnership spends over half its budget for children’s services on looking after nearly 1,350 children and young people at an annual cost of £95m. Of that nearly £42m is spent on 239 children and young people in care – at an average cost of £175,700 per year, per child.[[5]](#footnote-5)

Although the evidence tells us that over half of all mental ill health starts before the age of 14 years and 75% has developed by the age of 18,[[6]](#footnote-6) thousands of children in distress in Scotland are on waiting lists for mental health support or rejected from services because they don’t meet eligibility criteria. We also remain concerned by the lack of available services to address parental mental health and trauma recovery. A Scotland-wide mapping study of post-sexual abuse services conducted in 2008 found there was no consistent or coordinated approach to provision in Scotland and the services which existed were unable to meet demand.[[7]](#footnote-7) The majority of specialist and general services are provided by the third sector, but this is dependent uponshort-term, fragmented and insecure sources of funding.[[8]](#footnote-8)

Even though local authorities are aware of the importance of identifying resource to invest in innovative practice that could produce longer-term savings they are finding it increasingly challenging to identify resources due to a reduction in budgets.[[9]](#footnote-9)

Children 1st is currently piloting a family wellbeing project that aims to provide universal services with an option to refer children who are demonstrating coping or traumatised behaviours to family support instead of to CAMHS. Innovative approaches like this, which aim to increase the health and happiness of the whole family, should be invested in, in order to produce long-term savings both financially and in terms of human cost.

1. **If you work with schools/ local authorities/ others to address school attainment and wider achievement, what makes collaboration on the issue easy/ difficult?**

Children 1st is privileged to work with a large number of dynamic and forward- thinking support staff, teachers, headteachers and other school staff. In many schools it is the leadership of senior staff driving forward an understanding of the impact of trauma and the links to poverty and attainment that make a difference.

We find that the culture within a school is a vital part of reducing the attainment gap. A rights- based approach to attainment, through a trauma- informed lens, whereby staff and teachers consider what each child and family may need on an individual basis is vital. This means exploring coping and traumatised behaviours, rather than reverting to a behaviour management based model that does not ask what has happened to cause the behaviours.

Those trauma- informed schools that have a clear understanding of what traumatised behaviour looks like and engages with parents are more likely to find out what support the child and family may need. In turn, they reduce the attainment gap by building resilience in their pupils and creating a safe and supportive learning environment.

In some circumstances we are concerned by a lack of training and broader understanding for teachers about the impact of Adverse Childhood Experiences and trauma and find this a significant barrier to building resilience and raising attainment. In some schools we have been concerned about a lack of awareness of the systemic impact of poverty on families and a perceived detachment from wider local authority strategic planning.

Compassionate and curious practice that explores what is happening within a family is more likely to have an impact on improving emotional and financial stability- and in turn attainment- rather than ignoring the wider context.

We also find the power dynamics between local authorities and schools and the third sector and communities or families can be difficult to navigate. Those schools that establish a real relationship with families and acknowledge that they have within them resources and can be part of the solution can foster a trust and understanding that forms an important part of trauma recovery.

1. **What else could be done to support the attainment/ achievement of children and young people from families affected by poverty?**

As stated above, there is an urgent need for a strategic and sustainable expansion of trauma- informed, relationship- based family support models across Scotland. Children 1st believes that the prevalence of childhood adversity in this generation of children is linked to the recovery of the previous generation. It is this systemic approach, which acknowledges prevention and recovery as part of the same continuum that will help us tackle the many issues that are linked to unresolved childhood adversity. We often find that it is only by working with the entire family, and helping to resolve parental trauma caused by their own childhood adversity, that we resolve issues for the child. However, we have concerns that some funding is divided into specific ‘child services’ and ‘adult services’ which causes an arbitrary divide instead of allowing organisations to apply for funding to work with the entire family.

In our view, in some cases, working to prevent unresolved trauma from manifesting as coping behaviours and strategies or becoming mental health issues will help to strengthen families and reduce the likelihood that children will feel unsafe at home. In order to achieve this, a wide range of services is required to meet all needs. There is an urgent need for universal services to be trauma informed and to understand the symptoms of trauma, adversity and challenge faced by children and families.

Recent research from Glasgow Caledonian University found that intense child poverty can be found in some of Scotland’s most affluent areas, with two- thirds of those suffering income deprivation (468, 430 people) living outside areas identified as ‘deprived’.[[10]](#footnote-10) We therefore think it is important to ensure that SIMD classification is not the sole determinant of funding allocations or service provision.

For further information please contact Chloe Riddell, Policy Manager, at [chloe.riddell@children1st.org.uk](mailto:chloe.riddell@children1st.org.uk)

1. <http://www.endchildpoverty.org.uk/poverty-in-your-area-2018/> [↑](#footnote-ref-1)
2. Bywaters, P, et al., (2016) [The relationship between poverty, child abuse and neglect: an evidence review](https://www.jrf.org.uk/report/relationship-between-poverty-child-abuse-and-neglect-evidence-review), York: Joseph Rowntree Foundation. Pg.3 [↑](#footnote-ref-2)
3. Bellis MA, Hughes K, Leckenby N, Perkins C, Lowey H. National household survey of adverse childhood experiences and their relationship with resilience to health-harming behaviors in England. BMC Medicine 2014, 12:72. <http://bmcmedicine.biomedcentral.com/articles/10.1186/1741-7015-12-72> [↑](#footnote-ref-3)
4. Chowdry, H., and Fitzsimmons, P., The Cost of late Intervention: EIF Analysis 2016, Early Intervention Foundation [↑](#footnote-ref-4)
5. <http://www.heraldscotland.com/news/16078218.alan-sinclair-on-how-to-improve-the-lives-of-scotlands-children/?ref=mr&lp=12> [↑](#footnote-ref-5)
6. Murphy M and Fonagy P (2012). Mental health problems in children and young people. In: Annual Report of the Chief Medical Officer 2012. London: Department of Health. [↑](#footnote-ref-6)
7. NSPCC The Right to Recover: <https://www.nspcc.org.uk/globalassets/documents/research-reports/right-to-recover-sexual-abuse-west-scotland.pdf> [↑](#footnote-ref-7)
8. NSPCC The Right to Recover: <https://www.nspcc.org.uk/globalassets/documents/research-reports/right-to-recover-sexual-abuse-west-scotland.pdf> [↑](#footnote-ref-8)
9. <http://www.careinspectorate.com/index.php/news/3362-joint-inspections-of-services-for-children-and-young-people-2014-16> [↑](#footnote-ref-9)
10. Research from Glasgow Caledonian University Scottish Poverty and Inequality Research Unit published in March 2018 [↑](#footnote-ref-10)