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ESRC

ESRC Seminar Series

Mapping the public policy landscape

Well-being for children and young people



Foreword

Issues surrounding the UK's children and young people are rarely out of the news. Indeed the 'state' of Britain's children is now a matter of general public debate. According to the media, many of our children are out of control or involved in risky behaviours such as drugs, alcohol, unsafe sexual activity, fighting and crime. And now, a much-publicised 2007 UNICEF report (1) tells us that we are failing our children in a number of ways. Whether it's material well-being, family and peer relationships, health and safety, risky behaviours or children's own sense of well-being, the UK appears to perform poorly in a ranking of 21 industrialised countries worldwide. But what should we make of such widely reported studies or more generally voiced concerns? What are the real facts and what can the latest research tell us about the state of childhood and adolescence in the UK?



The Economic and Social Research Council (ESRC) runs an on-going series of public policy seminars that aim to bring the best social science concepts and evidence into the policy arena to stimulate discussion on how, in the light of these insights, policy can be developed. The purpose of these seminars is both to assist in the development of policy options but also to help identify those areas where further research is needed to strengthen the evidence base. These seminars bring researchers and policymakers together to debate the UK's most pressing public policy issues. Recent topics under discussion, for example, have included migration, health inequalities, demographic aspects of population ageing, health and well-being of working age people, and risk-taking among young people.

In March 2007, the ESRC and the Department for Education and Skills (DfES) hosted a seminar on well-being for children and young people. Speakers included Professor Jonathan Bradshaw, an expert on national and international indicators of children's well-being, Professor Marjorie Smith, an internationally renowned researcher on the issue of children's experience of childhood and Anne Jackson, Director of Strategy for *Every Child Matters* in the Children, Young People and Families Directorate at the Department for Education and Skills. These speakers outlined current evidence and offered their interpretations both of the current situation and future policymaking priorities.

This booklet highlights in brief some of the evidence presented and the discussion. It also presents some of the participants' conclusions on the most pressing priorities in terms of improving outcomes for our children and young people.

The well-being of our children is an issue of critical importance to individuals, the economy and society as a whole. We hope the seminar and this booklet will make a valuable contribution to a topic that so clearly deserves our attention.

A handwritten signature in black ink, which appears to read 'Ian Diamond'. The signature is fluid and cursive, with a large, looping 'D' at the end.

Professor Ian Diamond AcSS
Chief Executive, Economic and Social Research Council



Well-being for children and young people

The Contributors

PROFESSOR JONATHAN BRADSHAW BSS, MA (Dublin), DPhil (York), CBE, is Professor of Social Policy and Head of the Department of Social Policy and Social Work at the University of York. He is also Associate Director of the Social Policy Research Unit and Director of the Family Budget Unit. He is a Member of the Research Committee of the International Social Security Association. His research interests include social security policy, family policy, poverty and living standards, comparative social policy, demography and the well-being of children. He plays a major part in the measurement and monitoring of children's well-being and was an adviser to the 2007 UNICEF report on child well-being in economically advanced countries.

PROFESSOR MARJORIE SMITH is Professor of the Psychology of the Family and Director of the Thomas Coram Research Unit at the Institute of Education, University of London. Her current research interests are in normative studies of families and parenting; impacts and influences on child development; continuities in parenting; and parenting in disadvantaging or difficult circumstances. She is a Member of the Expert Advisory Group for the National Evaluation of Sure Start, the Joseph Rowntree Foundation Parenting Research and Development Committee and an Associate of Family and Parenting Institute. She is currently researching step-children and step-parenting, and evaluating the work of Parentline Plus and Family Support Grant projects.

ANNE JACKSON is Director of Strategy for *Every Child Matters* in the Children Young People and Families Directorate, Department for Education and Skills. Her post involves shaping future thinking on *Every Child Matters* strategy and finance and supporting Ministers on those aspects of the Comprehensive Spending Review. She is also the DfES 'champion' for the Third Sector. Anne spent her early career in Diplomatic Service working on East-West relations and arms control. Since joining the Department for Education in 1994 she has worked on different schools policy issues and DfES strategy issues before becoming Bill Manager on the Children Act 2004 and then on to her present post.

Executive Summary

Introduction

'The true measure of a nation's standing is how well it attends to its children – their health and safety, their material security, their education and socialisation, and their sense of being loved, valued and included in the families and societies into which they are born' **UNICEF, 2007 (1)**

Are we in the UK failing to attend sufficiently to our children? The 2007 UNICEF report on child well-being paints a fairly gloomy picture of the relative well-being of UK children in comparison with other OECD countries (1) A further piece of comparative research by the same authors on children's well-being in the European Union also suggests the UK is faring badly (2) In comparison with 25 European states, the UK ranks 21st, above only the Slovak Republic, Latvia, Estonia and Lithuania.

The accuracy and weighting of these rankings is clearly debatable. Some of the data is out-of-date and both rankings fail to capture some of the recent UK Government investment aimed at improving outcomes for our children. Nonetheless, it's clear that there is public concern and debate regarding the 'state of childhood'. Childhood seems to be changing and some believe for the worse. A number of authors and commentators express the view that childhood is 'under threat', 'toxic' or 'disappearing' whilst others see this as alarmist (3).

The UK Government, through its *Every Child Matters* (4) initiative, is placing the issue of childhood high on its agenda. In 2006, the Children's Society launched a major inquiry into what makes a good childhood, the changes we need to make to improve children's and young people's quality of life and the obstacles to achieving this (5). The *Daily Telegraph* is currently campaigning for Real Childhood. In 2007 the Conservative Party announced its own wide-ranging review of childhood in Britain.

How to secure our children's well-being is the question currently energising society as a whole. The issue demands robust, well-informed debate. With that aim in mind, this booklet:

- highlights some of the current evidence on child well-being
- explores the complexities of child well-being by focusing on one component – family change
- outlines the Government vision for addressing child well-being through its *Every Child Matters* initiative
- identifies key issues and priorities for future research.

What do we know about child well-being?

In addition to general information, the following section outlines some of the evidence presented by Professor Jonathan Bradshaw, Department of Social Policy and Social Work, University of York.

Well-being: what it is and how it's measured

'Well-being focuses on measuring multiple dimensions of a child's life' **THE CHILDREN'S SOCIETY, GOOD CHILDHOOD INQUIRY (5)**

Child well-being is multi-dimensional comprising a variety of physical, cognitive, behavioural and emotional components. But well-being can also be conceptualised in terms of rights. The United Nations Convention on the Rights of the Child (UNCRC) contains 54 articles that cover every aspect of a child's life, applying without exception or discrimination to all children under 18. These articles can provide a framework for examining well-being. The articles of the UNCRC divide into the broad areas of survival rights, development rights, protection rights and participation rights. The Convention states that the primary consideration in all actions concerning children must be in their best interest and their views must be taken into account (6).

For purposes of measurement, child well-being is most often presented as a set of domains, which are informed by a variety of indicators. Some of the domains and indicators are concerned with children's well-being – how they are here and now, and some are concerned with their well-becoming – how they will do in adulthood.



Measuring child well-being: three examples

1 Based on consultation with children and young people, parents and carers and professionals working with or for children, the Government's former Children and Young People's Unit (CYPU) developed an outcomes framework comprising five domains of well-being. This is the outcomes framework on which the Government Green Paper *Every Child Matters* (7) is based.

The Children and Young People's Outcomes Framework, DfES

- Economic well-being: having sufficient income and material comfort to be able to take advantage of opportunities
- Being healthy: enjoying good physical and mental health and living a healthy lifestyle
- Staying safe: being protected from harm and neglect and growing up able to look after themselves
- Enjoying and achieving: getting the most out of life and developing broad skills for adulthood
- Making a positive contribution: developing the skills and attitudes to contribute to the society in which they live.

2 The 2007 UNICEF report on *Child Well-being in Rich Countries* (1) is based on six different headings or dimensions of child well-being, and 40 separate indicators:

- Material well-being
- Health and safety
- Education
- Peer and family relationships
- Behaviours and risks
- Young people's own subjective sense of well-being.

3 The 2007 *Index of child well-being in the European Union (2)* published by Jonathan Bradshaw, Petra Hoelscher and Dominic Richardson, offers a rights-based, multi-dimensional understanding of overall child well-being based on 51 indicators summarised into 23 domains which, in turn, are summarised into eight clusters. For example, the cluster 'material situation' is based on the three domains of relative child income poverty, child deprivation and parental worklessness. Each domain has one or more indicators drawn from data collected by international bodies. The eight clusters are:

- Material situation
- Housing
- Health
- Subjective well-being
- Education
- Children's relationships
- Civic participation
- Risk and safety

Clearly current attempts to measure child well-being and compare it across different countries are hindered by data limitations. Nonetheless, most agree that monitoring and comparison of child well-being is playing an increasingly valuable role in stimulating discussion and in the development of policies to improve children's lives.

What the evidence tells us: findings from the 2007 Index of Child Well-being in the European Union

Building the evidence

Professor Bradshaw considers that his *Index of Child Well-being in the European Union (2)* offers the best available way of assessing the evidence on child well-being across the 25 EU countries. But, as he concedes, the index should not be viewed as comprehensive. "In searching for data we were guided by our understanding of the concept of child well-being as multi-dimensional," he writes. "However, in the end, the index has been data driven. As we shall see when we explore the eight clusters of well-being domains, there are some elements of child well-being not represented by any of the available comparable indicators. There are also many elements which are represented less than perfectly – either because the data is out of date, incomplete in its coverage of age groups, incomplete in its coverage of countries, or incomplete in the extent to which it represents a given domain of well-being. However the perfect has been the enemy of the good in previous efforts to represent child well-being. This... is not the last word on the subject – in fact it is more or less the first word (8)."

This Index is, Professor Bradshaw believes, a significant advance on previous studies which have used income poverty as a proxy measure for overall child well-being. Income poverty is a measure of the proportion of children under 16 living in households with equivalent income before housing costs less than 60 per cent of the median and using the modified OECD equivalence scale. However income poverty is a poor proxy measure particularly in terms of international comparison for a variety of reasons including the fact that the relative poverty threshold is very different in different countries. According to this Index, child poverty explains only one quarter of the variation in rates of child well-being.

Hence, Professor Bradshaw and his colleagues built their index based on two main types of sources of information available on child well-being: sample surveys and indicators of various kinds collected routinely by international organisations such as, for example, the 2003 European Quality of Life Survey (28 countries at 2003), and the Eurostat (2004) Labour Force Survey. The initial data base containing 627 indicators was pruned to 51 variables or indicators grouped into 23 domains and then the eight clusters outlined previously.



How UK child well-being measures up

Figure 1, Overall child well-being in 25 EU countries reveals that when the 23 domains are summarised into an overall child well-being index, Cyprus emerges as the EU country with the best record in terms of child well-being. Lithuania, is the poorest performing country. The UK ranks 21st out of 25 EU countries.

Figure 1: Overall child well-being in 25 EU countries



Source: Fig 30 in Bradshaw J, Hoelscher P and Richardson D (2007) An Index of Child Well-being in the European Union 25, *Journal of Social Indicators Research*, 80.

Six key points from the Index of Child Well-being in the European Union

1. What the UK does well

UK is ranked highest of all EU 25 countries in terms of the quality of children's housing and the environment in which they live. For example, UK has the least overcrowding (in terms of rooms per person in households with children) by some considerable margin among the EU 25. The UK is in the top end of the ranking in terms of reported housing problems such as rot in windows, floors or doors, damp/leaks, and the lack of an indoor flushing toilet.

The UK also does well in terms of accidental and non-accidental deaths per 100,000 young people aged under 19. Child mortality rates range from seven per cent to 43 per cent with Malta, Sweden, the UK and the Netherlands enjoying mortality rates below ten per cent. Children in the Baltic States are most vulnerable with mortality rates between 32 per cent and 43 per cent.

2. What the UK does badly

The UK performs poorly (in the bottom quarter of the ranking) in terms of material situation, child health and risk and safety. Moreover, in several areas the UK's performance is markedly poor. For example, Figure 2 shows the UK to be bottom of the ranking in terms of children engaging in risky behaviour (smoking, drunkenness, cannabis, inhalants, teenage pregnancy and sexual intercourse).

Figure: 2 Children engaging in risky behaviour



Source: Fig 26 in Bradshaw J, Hoelscher P and Richardson D (2007) An Index of Child Well-being in the European Union 25, *Journal of Social Indicators Research*, 80.

The UK also has the highest percentage of children in workless households and most children living in either lone parent families or stepfamilies. The UK also ranks bottom in terms of children's relationships with their peers and second bottom in terms of relationships with parents. Children's relationships with their peers, as well as their wider social networks, are crucial in terms of children's psychosocial development (9). Reliable comparative data on the quality of children's peer relationships is scarce. But, data on the proportion of young people that find their peers kind and helpful, reveals that while 80 per cent of children in Portugal view their peers as kind and supportive, the same is true for only 43 per cent of UK children.

Existing research clearly indicates a significant association between the quality of parent-child relationships and young people's subjective well-being (10). And qualitative research shows that poorly-off adolescents who have a trusting and supportive relationship with at least one parent are better able to deal with problems (11). Little comparative data on the quality of children's relationships with their parents is available. But using proxy indicators focusing on the time parents and children spend together eating and talking, Italy appears to have the best relationships with parents by some margin: Austria and the UK have the worst.

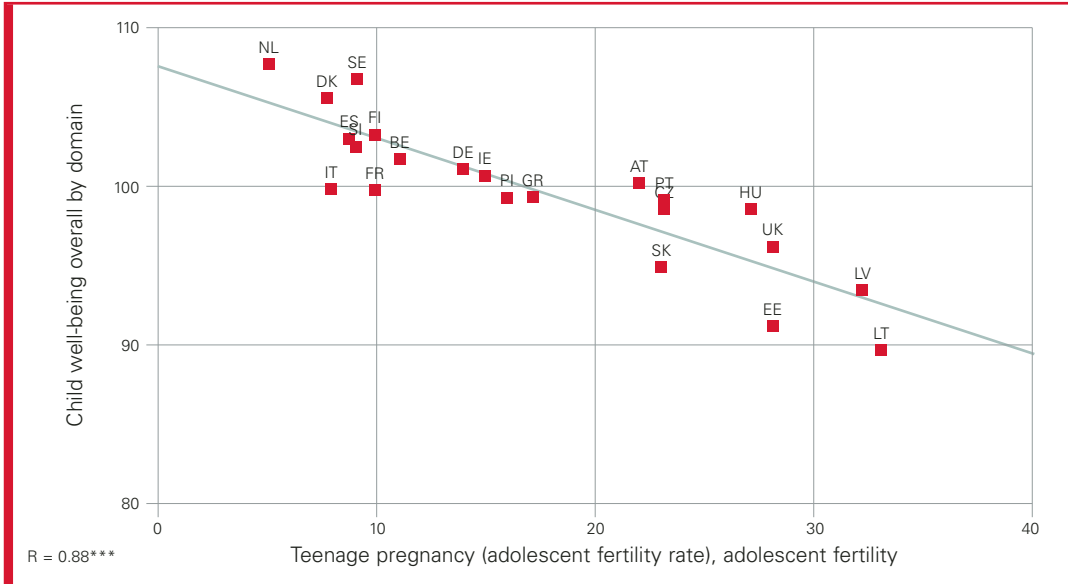
3. Limitations of the data

While the data used in the Index is the best available across the EU countries, it is not completely up to date. There is more recent UK data for some of these indicators. Gaps in cross-EU data include any information on looked after children, crime, refugees and homelessness. The data is also mainly based on older children – aged 11-15. More comprehensive data on child well-being, in the UK and elsewhere, is clearly required. Professor Bradshaw argues that it is unacceptable to rely on World Health Organisation data to discover how children think and feel in the UK. The forthcoming *The Children's Society Inquiry* (5) that is gathering the views of children, young people and adults is much needed.

4. The best proxy measure of child well-being

Interestingly, the teenage fertility rate (Figure 3) is the single indicator which shows by far the closest association to overall child well-being. This extraordinarily close relationship suggests that countries which protect their young women from giving birth at a very young age are those that, overall, care best for their young people.

Figure 3: Child well-being and teenage fertility rate



Source: Graph produced for ESRC/DfES seminar using data from J Bradshaw et al (2).

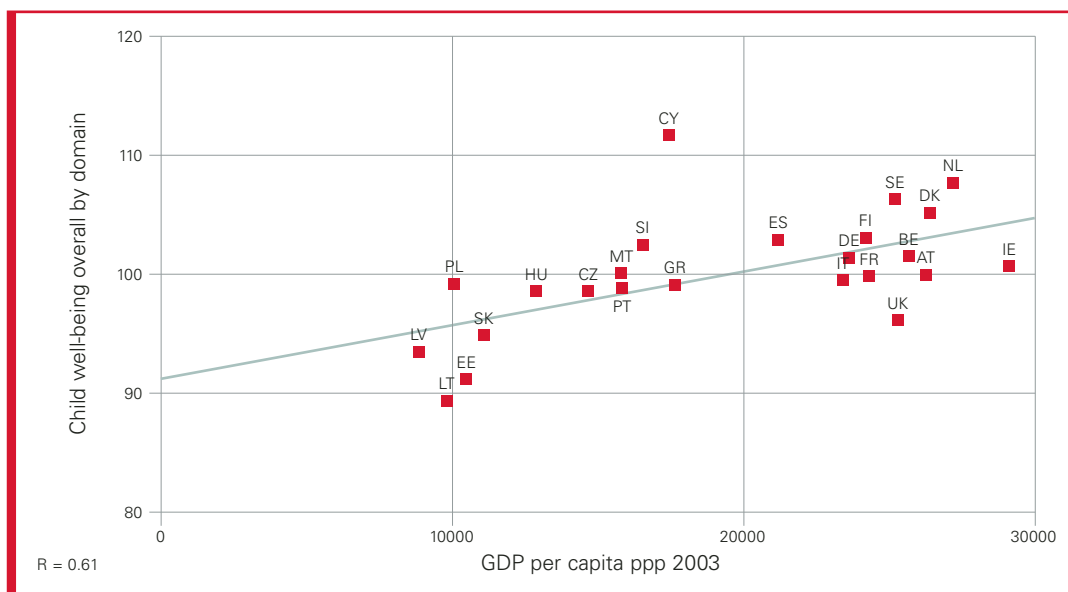
Key: AT – Austria, BE – Belgium, CZ – Czech Republic, DE – Germany, DK – Denmark, EE – Estonia, ES – Spain, FI – Finland, FR – France, GR – Greece, HU – Hungary, IE – Ireland, IT – Italy, LT – Lithuania, LV – Latvia, NL – Netherlands, PL – Poland, PT – Portugal, SE – Sweden, SI – Slovenia, SK – Slovak Republic, UK – United Kingdom.



5. National wealth matters

National wealth does appear to make some difference in terms of improving child well-being. More research is needed, but as Figure 4 shows, there appears to be some link between national wealth and overall child well-being. Policy effort also makes a difference: countries with a larger welfare state (spend a larger percentage of GDP on social protection benefits) appear to fare better in terms of child well-being than those who do not. But more detailed research is required before these associations can be fully understood.

Figure 4: Overall child well-being (EU) and GDP per capita



Source: Graph produced for ESRC/DfES seminar 2007 using data from J Bradshaw et al (2).

Key: AT – Austria, BE – Belgium, CY – Cyprus, CZ – Czech Republic, DE – Germany, DK – Denmark, EE – Estonia, ES – Spain, FI – Finland, FR – France, GR – Greece, HU – Hungary, IE – Ireland, IT – Italy, LT – Lithuania, LV – Latvia, MT – Malta, NL – Netherlands, PL – Poland, PT – Portugal, SE – Sweden, SI – Slovenia, SK – Slovak Republic, UK – United Kingdom.

6. Explaining UK child well-being

Child poverty rates in the UK are improving, yet the UK's record on well-being is still poor. Why should this be? No obvious answer is forthcoming but researchers point to three areas worth further exploration:

- Income inequalities in the UK remain very high and have not diminished since 1997
- Children were a low Government priority in the 1980s and early 1990s and although the *Every Child Matters* programme has been introduced it is difficult to rectify years of neglect quickly
- Could our dislike of state interference in family life and culture of personal liberty and individualism be partially responsible for our poor performance on child well-being?

Is child well-being in the UK improving or deteriorating?

Well-being in the UK varies by country and region, by the age of the child, by gender, family type, ethnicity and socio-economic level. Moreover, it is sometimes difficult to decide whether a trend is a well-being improvement or deterioration – for example, is it good that children are spending more time with their parents if this is associated with a loss of independence?

But, trends outlined by Professor Bradshaw in 2005 (12) and highlighted in Table 1 suggest:

- The lists of improving and deteriorating indicators are more or less equal in length
- Most income/living standard indicators are improving
- Most indicators of educational attainment are improving
- A large number of health indicators are moving in the wrong direction
- The record of child homelessness is a huge blot on the record
- On balance, researchers judge that the UK *can* claim that children's lives are getting better. However, there are still far too many domains of child well-being which are getting worse or not improving. (See Annex 1 for Government view on how well-being is improving).

Table 1 Assessment of trends in child well-being in the UK

Well-being improving

- Absolute child poverty
- Relative child poverty
- Children in workless families
- Infant mortality
- Child accidental deaths
- Breastfeeding
- Reported good health
- Increased use of contraception
- Smoking
- 15-24 suicide rate
- Time spent with parents
- Domestic violence
- Adoptions up
- Drop in young people leaving care at 16
- Proportion leaving care with one or more GCSE
- Daycare nursery places
- Out-of-school places
- Educational qualifications
- Narrowing class differential in attainment
- Not in education or training (NEET) numbers falling
- Special Educational Needs in mainstream schools
- English, Maths and Science at Key Stages 2 and 3
- Truancy
- Housing conditions
- School exclusions



No change in well-being

- Persistent child poverty
- Child mortality
- Whooping cough immunisation
- Diphtheria, tetanus and polio immunisation
- Longstanding illness
- Risky sexual behaviour
- Teenage conception rate (a)
- Playing sport
- 0-14 suicide number
- Youth crime
- Illicit drug use
- Victimisation
- English, Maths and Science at Key Stage 1
- Statemented pupils

Well-being deteriorating

- Stillbirths
- Class gap in infant mortality
- Low birth weight
- MMR vaccination (b)
- Measles
- Mumps
- Asthma
- Sexually transmitted diseases
- Diabetes
- HIV/AIDS
- Alcohol consumption (c)
- Obesity
- Conduct, hyperactive and emotional problems
- Playing out/liberty to play
- Children born to drug users
- Children looked after for longer periods
- Increase in unaccompanied asylum-seeking children
- Childminder places
- Playgroup places
- Drug and violent crime
- Girls offending
- Child homelessness

Source: Bradshaw J and Mayhew E (eds) (2005) *The Well-being of Children in the UK*, 2nd ed (Save the Children, London), pp 320.

(a) rate has been improving in England (b) MMR vaccination rates are now recovering (c) alcohol consumption has now stabilised and some signs of decreasing amongst 11-15 year olds.

UK child well-being in international context

In February 2007, UNICEF published its report assessing the well-being of children and young people in 21 industrialised countries (1). This report was developed out of Professor Bradshaw's work on the 25 EU countries (13) and brings together the best currently available data – in total some 40 separate indicators of child well-being measuring aspects ranging from relative poverty and child safety, to educational achievement and drug abuse. Table 2 presents the findings in summary form. A light blue background indicates a place in the top third of the table; mid-blue denotes the middle third and dark blue the bottom third.

Some key UNICEF findings:

- The UK and the United States are in the bottom third of the rankings for five of the six categories covered
- No country features in the top third of the rankings for all six dimensions of child well-being, although the Netherlands and Sweden come close to achieving this
- No single dimension of well-being stands as a reliable proxy for child well-being as a whole and several countries find themselves with widely differing rankings for different dimensions of child well-being
- North-European countries dominate the top half of the table, with child well-being at its highest in the Netherlands, Sweden, Denmark and Finland
- Some 80 per cent of children in the 21 countries are living with both parents – this ranges from 90 per cent in Greece and Italy to less than 70 per cent in the UK and 60 per cent in the US
- Overall, the UK is as the foot of the rankings for young people's risk behaviours (eg smoking, being drunk, using cannabis, fighting and bullying, and sexual behaviour) by a considerable distance
- Children's subjective sense of well-being appears to be markedly higher in the Netherlands, Spain and Greece and markedly lower in Poland and the UK.



Table 2 Child well-being in rich countries: a summary table

		Dimension 1	Dimension 2	Dimension 3	Dimension 4	Dimension 5	Dimension 6
Dimensions of child well-being	Average ranking position (for all 6 dimensions)	Material well-being	Health and safety	Educational well-being	Family and peer relationships	Behaviours and risks	Subjective well-being
Netherlands	4.2	10		6	3	3	1
Sweden	5.0	1		5	15	1	7
Denmark	7.2	4		8	9	6	12
Finland	7.5	3		4	17	7	11
Spain	8.0	12		15	8	5	2
Switzerland	8.3	5		14	4	12	6
Norway	8.7	2		11	10	13	8
Italy	10.0	14		20	1	10	10
Ireland	10.2	19		7	7	4	5
Belgium	10.7	7		1	5	19	16
Germany	11.2	13		10	13	11	9
Canada	11.8	6		2	18	17	15
Greece	11.8	15		16	11	8	3
Poland	12.3	21		3	14	2	19
Czech Republic	12.5	11		9	19	9	17
France	13.0	9		18	12	14	18
Portugal	13.7	16		21	2	15	14
Austria	13.8	8		19	16	16	4
Hungary	14.5	20		13	6	18	13
United States	18.0	17		12	20	20	–
United Kingdom	18.2	18		17	21	21	20

Source: UNICEF, Child Poverty in perspective: An overview of child well-being in rich countries, Innocenti Report Card 7: UNICEF Innocenti Research Centre, Florence. pp2.

Family change: its causes and implications for child well-being

In addition to general information, the following section outlines some of the evidence presented by Marjorie Smith, Professor of the Psychology of the Family and Director of the Thomas Coram Research Unit at the Institute of Education, University of London.

Why focus on family change?

In terms of child well-being, no-one is entirely certain which factors exert the most influence nor in what ways. However, a variety of commentators increasingly point to the family as the most important mediating factor:

Many see family change and disruption as playing a major – and typically negative role – in terms of influencing family relationships and hence child well-being. Closer examination of family change, therefore, offers an excellent illustration of the complex interplay of factors influencing child well-being and the insight that rigorous research can offer.

The dynamic nature of UK families

In considering family change, the UK has:

- high rates of family separation and divorce – one in four children experience parental separation (14)
- a relatively high proportion of lone parent families – almost one in four children live in a lone parent family (15)
- one in ten children live in stepfamilies – stepfamilies are the fastest growing family form and eight per cent of all families with dependent children are stepfamilies (16).



Crucially, however, family status in the UK must be viewed as *dynamic* rather than *fixed*. Some children will be born in and remain in a two parent family throughout their childhood. But another group will experience changes, and often repeated changes, in family status. In other words, these children's living arrangements may change many times during their childhood as most parents who divorce or separate subsequently repartner and, in some cases, separate or divorce again. Remarriages are less stable than first marriages.

'40 per cent of mothers will spend some time as a lone parent. The duration of lone parenthood is often short, one half remaining lone-mothers for 4.6 years or less. About three-fourths of these lone mothers will form a stepfamily [...]. Stepfamilies are not very stable: one quarter dissolve within a year'. *J. Ermisch and M. Francesconi (17)*

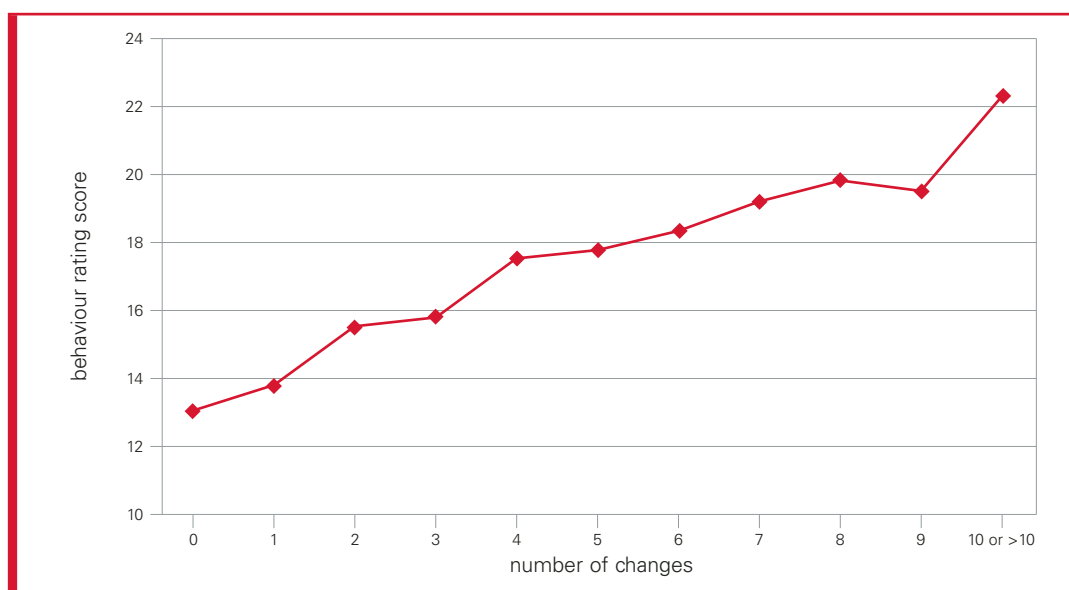
Each change in family status is likely to precipitate other changes:

- in housing
- in income/financial circumstances
- in schools
- in contact with friends/grandparents.

How children experience change

Change in a child's life – whether parental separation, house move, change of school, parents changing jobs or becoming unemployed, changes in the family's financial circumstances, births of new siblings or deaths of significant others (even loss of a pet) – are stressful and disruptive to parenting, as well as to children. Figure 5 reveals that, according to a sample of mothers, more changes in a child's life are associated with increasingly poor behaviour. In this study, the impact of ten or more changes, for the nearly 60 children who had experienced them, was a near doubling of their poor behaviours.

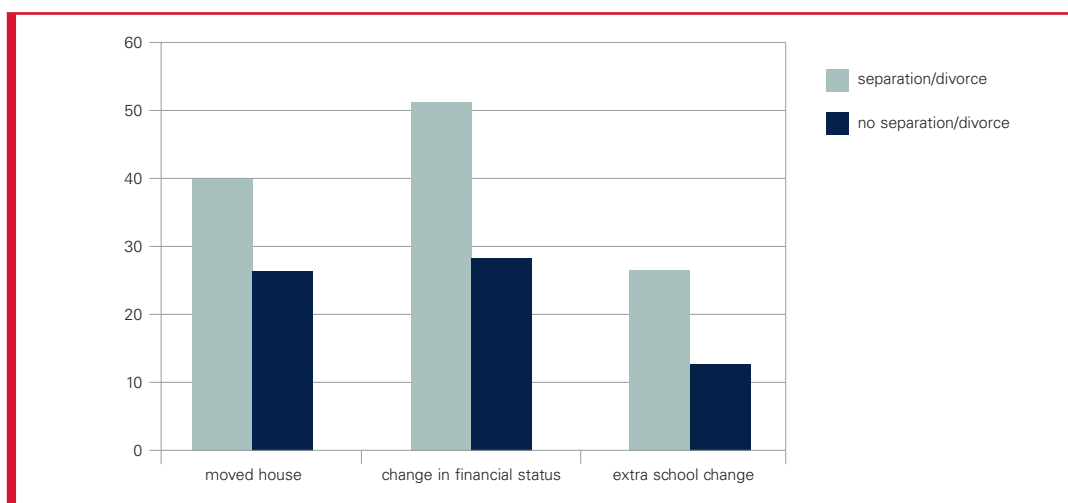
Figure 5 Number of changes and child behaviour score



Source: Smith, M, (2006) Family type and family functioning: changes and stability. Paper presented at invited symposium (Children's responses to family separation) at International Society for the Study of Behavioural Development (ISSBD) 19th Biennial Meeting, Melbourne, Australia (July 2006).

And, as shown in Figure 6, change in family status is often the trigger for a sequence of other changes. In other words, children of separated or divorced parents in general experience significantly more disruptions and changes than children in two-parent families.

Figure 6 Other changes experienced (% children)



Source: Smith, M, (2006) Family type and family functioning: changes and stability. Paper presented at invited symposium (Children's responses to family separation) at International Society for the Study of Behavioural Development (ISSBD) 19th Biennial Meeting, Melbourne, Australia (July 2006).

The risks of change and disruption for child well-being

While more changes in a child's life are associated with more negative behaviour, lone parent or stepfamily status is not necessarily associated with more negative behaviour in children. This more positive view emerges from a Canadian study investigating the impact of mothers' employment patterns on children. This study shows that mothers' employment status is a factor affecting children's behavioural outcomes, but also that changes in maternal employment impacted on children. But, crucially, children in **stable** lone parent families or stepfamilies did better (and indeed, better than those in two parent families on several measures, when control variables are taken into account) than children who change family status, either 'entering or exiting' lone parent status (18).

Hence, it is perhaps useful to view change and disruptions as risk factors for children (like poverty) that have negative impacts on child outcomes. Family type *per se* provided it is **stable**, does not result in negative impacts on children.

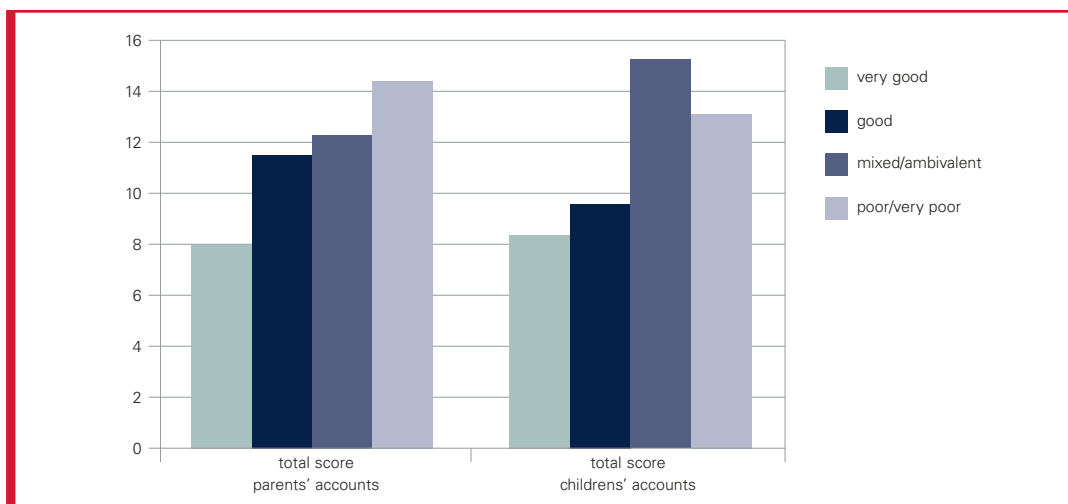
What are the important variables for child well-being?

Researchers suggest that **stability** (or lack of disruption and change) is an important variable in child well-being. In terms of stability, it is well established that conflict between parents is associated with negative outcomes for children in terms of their health and behaviour (19). But it is worth remembering that inter-partner conflict, for example, about contact arrangement or financial support, can continue post divorce/separation. Hence, this conflict may or may not continue for some in children after separation or divorce. Again, it is not family type *per se* which equates to stability or its lack in the child's life, but the quality of relationships within the family.

Recent studies point to strong associations between the **quality of relationships** within the household (the parent/child relationship and the quality of the marital relationship), and child outcomes. Figure 7 is based on child and mother's accounts of their relationship (including factors such as positive recognition,

warmth, criticism, loss of control) and also a 31-item measure of symptoms linked to child well-being (eg anxiety, school refusal, irritable moods, attention seeking). Figure 7 (with the extent of the child's symptomatology measured 0-16) highlights the point that a better mother/child relationship is associated with higher levels of child well-being (ie fewer symptoms).

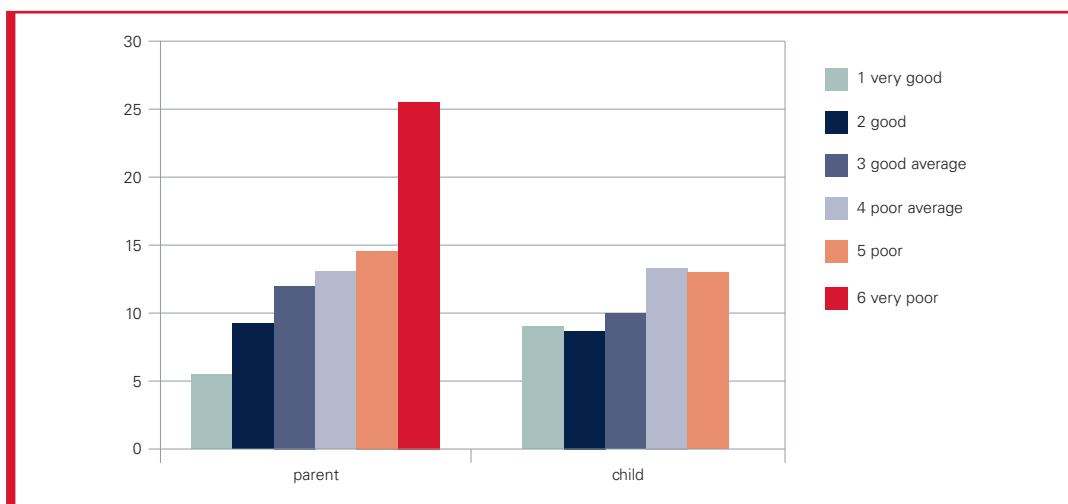
Figure 7 Mother/child relationship quality and child well-being



Source: Smith, M, (2006) Family type and family functioning: changes and stability. Paper presented at invited symposium (Children's responses to family separation) at International Society for the Study of Behavioural Development (ISSBD) 19th Biennial Meeting, Melbourne, Australia (July 2006).

A range of recent studies very clearly identify the negative influence of marital disharmony on children's well-being (19, 20, 21). Figure 8 shows, based on either the mother's or the child's own account of their own well-being, poor marital relationships are associated with a lower level of child well-being. Interestingly, there are no 'very poor' marriages in the children's accounts (of their own symptoms and well-being) because the mothers in these marriages did not consent to their children being interviewed or the children themselves did not consent to being interviewed.

Figure 8 Marital quality and child well-being



Source: Smith et al, 2001 (p 41) A study of stepchildren and step-parenting. Unpublished report to the Department of Health.

It's relationships that matter

Canadian researchers investigated more than 800 adolescents, some of whom were in lone parent households after the separation of their parents, and others who had not experienced parental separation, and were in two parent households. Researchers looked at 'family style', and assessed family functioning and the quality of the relationship between the parent and adolescent. They measured adolescent stress and depression. They found that parenting style, not family type, determined both family functioning and adolescent outcomes (22).

Family functioning is influenced by many things, such as whether the parents are depressed or stressed. One of the clearest demonstrations of the effects of poverty and the resultant stress on parenting came from studies of the two parent (predominantly farming) families in the American mid-east, who suffered a severe drop in income as a result of a prolonged drought. The economic pressure led to:

- increased depression in both mothers and fathers
- increased marital conflict and irritability

and this resulted in disruptions to parenting, such as:

- increased hostility to children
- more coercive parenting
- disruptions to relationships in the family.

As a result, children's well-being was affected, with an increase in behaviour problems. Put simply, it's how the family works that is the most important thing for child and family well-being (23).

Family change and child well-being: research conclusions in brief

- Family status for children should be viewed as dynamic – not fixed.
- Family change, such as separation, divorce or repartnering, is often the trigger for a series of other changes. Children in 'atypical' family situations experience more changes than others.
- Changes and transitions of all sorts impact negatively on child well-being and are disruptive to parenting. Indeed, change should be seen as a risk factor for child well-being.
- Family functioning and parenting are disrupted by parental conflict, parental depression (24) and stress, such as that caused by poverty (23).
- It is not what type of family (eg lone parent, stepfamily) a child grows up in that determines child outcomes, but how the child is parented, and the quality of the interactions and relationships within the household.
- Family functioning is more relevant to child well-being than family status. Indeed, the quality of parenting and of relationships in the family emerge as the key variables in determining child well-being.

Every Child Matters and well-being

Background to *Every Child Matters*

In 2003, the Government published a Green Paper called *Every Child Matters*. This was published alongside the formal response to the report into the death of Victoria Climbié, the young girl who was abused, tortured and eventually killed by her great aunt and the man with whom they lived.

The Green Paper prompted an unprecedented debate about services for children, young people and families. There was a wide consultation with people working in children's services, and with parents, children and young people.

Following the consultation, the Government published *Every Child Matters: the Next Steps*, and passed the Children Act 2004, providing the legislative spine for developing more effective and accessible services focused around the needs of children, young people and families.

Every Child Matters: Change for Children was published in November 2004 and the website launched shortly afterwards: <http://www.everychildmatters.gov.uk>



Every Child Matters: Change for Children

Anne Jackson, DfES Director of Strategy, *Every Child Matters*, explains the Government vision for addressing child well-being through its Every Child Matters initiative and the progress that is being made:


In 2003 the Government set in train a major programme of reform of services for children and young people. *Every Child Matters* builds on the Government's investment in early years, education, health and the alleviation of child poverty. The outcomes at its heart are that every child should be healthy, stay safe, enjoy and achieve, make a positive contribution and achieve economic well-being. (Progress against these five outcomes is highlighted in Annex 1.)

Every Child Matters works across Government to integrate services for children from conception to the age of 19. Traditionally services have operated in professional silos that sometimes failed to recognise the needs of children and young people. Children and their families often faced multiple assessments, uncoordinated provision and risked falling through the gaps between different services.

The starting point for *Every Child Matters* is that services should promote well-being by working across professional boundaries to co-ordinate support around the needs of individual children and young people and provide more effective support to parents and families. There is a strong focus on improving access to services for the most disadvantaged families and vulnerable children – vital if we are to promote social justice and tackle social exclusion.

Strong universal services are a powerful means of raising standards and improving outcomes for all, and provide a route to more specialist services. Children's Centres model the vision, offering information and integrated services, including health, early education and family support to meet the needs of families in their community. There are now 1,250 children's centres offering services to over a million children under five and their families and we are on track for 3,500 centres by 2010.





Extended Schools enrich the education of older children by offering a wide range of activities for them to enjoy and access to specialist support services. Research shows that Extended Schools can lead to better mental and physical health and better social outcomes for children and young people. There are currently over 4,000 schools offering extended services and by 2010 this provision will be available to every school-age child.

Every Child Matters emphasises the importance of giving children and young people the environment and the opportunities through which to play, have fun and take part in a range of social, sporting and cultural activities. Children's sense of well-being and happiness is heavily influenced by the quality of their relationships with family and friends that Government can nurture by creating the right environment. Strengthened arrangements for safeguarding will give children the protection and security that they need to flourish.

Progress since 2003 has been rapid across central and local government, and front line practitioners. Local areas are developing the necessary mechanisms for delivery and increasingly seeking the views of service-users, including children and young people, in planning and designing services.

Ofsted's Tellus 2 survey will further help embed the views of children and young people. It will run annually in every local authority area with the first survey in May 2007 and results available in the autumn. It asks children and young people a series of questions about how they feel about their lives and the services they receive locally, across the five *Every Child Matters* outcomes.

The survey has several purposes: to give local areas a tool to compare how local children feel and to inform local planning; to inform Ofsted's Annual Performance Assessment (APA) inspections of local authorities; to give the DfES more detailed information to compare Local Authority performance and to inform policy.

For more information please see:

<http://www.ofsted.gov.uk/portal/site/Internet/menuitem.455968b0530071c4828a0d8308c08a0c/?vgnnextoid=69e46c472b6b1110VgnVCM1000003507640aRCRD>

Tellus 2 will provide some user perception indicators for the new National Indicator Set. This is a set of up to 200 outcome-focused indicators that are being developed for local government as the basis for a new performance management regime which will begin next year. The indicators will be more outcome-focused than previous sets, and reflect our priorities, with a particular emphasis on reducing the gap between disadvantaged children and their peers.

Key issues and future priorities

Leading experts from Government, academia and the voluntary sector offer the following views on the current state of child well-being and the most pressing priorities:


PROFESSOR JONATHAN BRADSHAW, Department of Social Policy and Social Work, University of York: “The findings on child well-being in the UK are dire. The reasons for the UK performance probably varies from domain to domain – for example we do badly on education for different reasons than we do badly on health. But underlying it all is the relative neglect of children in the UK in the 1980s and 1990s, the huge increase in poverty and inequality that took place during those decades and the fact that we ended up with one of the highest child poverty rates in the OECD. Child poverty is now falling but it is still double the rate it was in 1979 and the Government missed its five-year target. The latest data shows an increase in child poverty in 2005/6. We must continue to drive down child poverty, to invest in childcare, to improve education participation and attainment and to focus health resources much more than at present on child health and prevention.

But we also need to find ways to improve what children think about their lives and relationships. Tackling bullying in schools is a very important priority. We need to do more to improve social competence, patterns of relationships between peers, children and their parents and children and the wider community.

This leads to research. It is outrageous that the best source of data we have on what children think and feel is the World Health Organisation HBSC survey carried out every four years. We need a national survey of child well-being. We need much more detailed comparative research on child well-being and the social institutions that influence outcomes for children.”

ANNE JACKSON, Director of Strategy Every Child Matters, Department for Education and Skills: “The well-being of children and young people is a key priority for the Government. Extra investment in education, health, early years and other children’s services has aimed to offer children, young people and their families the information, the practical help and the quality of public services they need to make the most of life. *Every Child Matters* sets the framework for services to work together to improve outcomes for all children and tackle inequalities.





There are already encouraging results eg an offer of early education to all three and four year olds, which almost all parents take up; higher educational attainment in schools and further education; declining rates of teenage pregnancy; 600,000 children having been lifted out of relative poverty since 1997 – even allowing for a downturn in the most recent year's figures.

But there is much more to do. The Government is consulting on its priorities for children and young people for the next spending review period. These are likely to mirror the five *Every Child Matters* outcomes and to focus on: improving the physical, emotional and mental health of children and young people, improving child safety, raising educational standards while narrowing the gap, increasing the numbers of young people on the path to success, and working to eradicate child poverty by 2020.

Many national and local programmes are addressing these issues effectively. The priority for research will be to identify effective practice and ensure it is widely shared so that public investment can be best focused to improve outcomes for all children and young people."

BOB REITEMEIER, Chief Executive, The Children's Society: "Since the second half of the last century our wealth as a nation has risen consistently, yet this has not been matched by improvements in children's well-being. In some key areas such as mental health and drug and alcohol use for example, children appear to be worse off.

Children consistently tell us that friendship and family are tremendously important in their lives, yet the levels of bullying experienced by children are alarming. The well-being of children in Britain simply does not compare favourably to other countries.

At The Children's Society, there is no question in our mind that children's experience of childhood is different today from what was experienced in previous generations. We need to build a better understanding of what accounts for these differences and how to improve children's well-being. The Children's Society has launched *The Good Childhood Inquiry*, the UK's first independent national inquiry into childhood, to examine these questions and to help build a new vision for childhood.

This requires that we listen to the voices of children and young people themselves. *The Good Childhood Inquiry* will combine children and young people's views with those of adults and professionals, together with clear evidence and research. The inquiry will identify the conditions for a good childhood, the obstacles to these conditions and what we can do to make things better. Its recommendations will shape how we view children and how future policy should evolve so that every child experiences the good childhood they deserve."

To learn more about *The Good Childhood Inquiry* or get involved – www.goodchildhood.org.uk

PROFESSOR MARJORIE SMITH, Thomas Coram Research Unit, Institute of Education, University of London: "The quality of parenting and of relationships in the family emerge as the key variables in determining child well-being, so we need to understand more about the development of good mother/child and father/child relationships, and the maintenance of these as children grow up and move into adolescence. Although it is clear that early relationships are important for later outcomes, good communication and 'getting on well' have been demonstrated to be important in relationships between parents and children in middle childhood and adolescence, but the precursors of this, and why it goes wrong in some families, particularly between fathers, and with boys, are not well understood.

A fuller understanding of parenting processes and the bidirectional nature of parenting would enable the design of better interventions to support parents in transition, or parenting in difficult contexts to continue to parent well in stressful circumstances.

Parental education about factors that promote child well-being, such as reading to children, spending time with them, and providing positive feedback, would promote good relationships, and act to enhance parents' sense of self efficacy and confidence in parenting, and their enjoyment of their children."

Further information

Papers presented at the Well-being for Children and Young People seminar, held at the DfES in London are available on the ESRC Society Today website at: www.esrcsocietytoday.ac.uk

What do we know about child well-being?

Professor Jonathan Bradshaw

<http://www.york.ac.uk/inst/spru/profiles/jrb.htm>

email: jrb1@york.ac.uk

Family change: its causes and implications for child well-being

Professor Marjorie Smith

http://ioewebserver.ioe.ac.uk/ioe/cms/get.asp?cid=470&470_0=7854

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Every Child Matters and well-being

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ANNEX I

Progress Against the Five Every Child Matters Outcomes

Being healthy

Since 1999 we have:

- Reduced teenage pregnancy rates to their lowest level for 20 years.
- Introduced clear standards for children's healthcare through the *National Service Framework (NSF) for Children, Young People and Maternity Services*, published in 2004.
- Set up over 1,250 Sure Start Children's Centres offering health advice, childcare and other services to parents of over 1,000,000 young children and their families.
- Raised the proportion of patients with access to Child and Adolescent Mental Health Services for those with learning disabilities to almost 90 per cent compared to only 50 per cent in 2005-06.
- Increased investment in the National Health Service from £33billion in 1996-97 to £92.2billion in 2007-08.

Staying safe

Since 1999 we have:

- Almost halved the number of children injured in road accidents by 2005 compared to the average for 1994-1998.
- Achieved a 34 per cent increase in the proportion of children adopted from care between 1999-00 and 2005-06.
- Introduced Local Safeguarding Children Boards in every local area, bringing together local authorities, health bodies the police and others to identify and respond to signs of abuse quickly and effectively.
- Created a new system, through the Safeguarding Vulnerable Groups Act 2006, for vetting and barring those who may be unsuitable to work with children.
- Introduced a statutory requirement from April 2008 for evaluation of child deaths.
- Created a Common Assessment Framework to help practitioners across universal and specialist services assess children's needs and provide coordinated support.

Enjoying and achieving

Since 1999 we have:

- Helped over 375,000 more young people achieve 5+ A*-C GCSEs (or their equivalent) in 2006 than did so in 1997.
- Narrowed the gap in the achievement of minority ethnic pupils, with the proportion of both Black Caribbean and Bangladeshi pupils achieving 5 or more A* to C grades at GCSE and equivalent in 2006 up 10 percentage points since 2003, compared to a national increase of six percentage points for all pupils.
- Raised participation among 16 year olds to its highest ever level, with 89 per cent in some form of learning in 2005-06.
- Trebled the number of apprentices in learning from 75,000 in 1997 to 255,000 today.
- Raised expenditure on Special Educational Needs by 60 per cent, from £2.8billion in 2001-02 to £4.5billion in 2006-07.
- Raised our investment in education to £64.9billion in 2007-08, – over £30billion more than in 1996-97.
- Introduced the Early Years Foundation Stage (from 2008) to set high standards and deliver best practice in young children's early learning.
- Created real diversity and choice in our schools through the creation of specialist schools, Academies and Trust schools.



Making a positive contribution

Since 1999 we have:

- Given over 250,000 young people the opportunity to take part in positive activity as part of our Millennium Volunteers scheme, with over 125,000 having completed over 100 hours of volunteer work.
- Invested over £130million since 2002 in Creative Partnerships, involving over 500,000 children in creativity and arts projects.
- Created the Youth Opportunity and Youth Capital Funds, investing £115million over 2006-08 to provide young people with more choice and influence over facilities in their area.
- Provided £166million since April 2003 to fund positive activities for young people aged 8-19 who are at risk of social exclusion.
- Placed a statutory duty on local authorities to secure access for young people in their area to sufficient positive activities.
- Provided over £1.5billion of investment between 2003-04 and 2007-08 to enhance school sport facilities and provide opportunities for children to take part in sports in and out of school.
- Helped 69 per cent of pupils in partnership schools take part in two or more hours of high quality PE and school sport a week, an increase of 11 per cent compared to 2003/04.
- Introduced free entry to National Museums for children.

Achieving economic wellbeing

Since 1999 we have:

- Lifted over 600,000 children out of relative poverty since 1998-99, and seen a faster fall in child poverty in the UK than any other EU country over the same period.
- Introduced an entitlement to 12.5 hours a week of free early education for all three and four year olds, with 96 per cent of three year olds and all four year olds benefiting from some form of early education by January 2006.
- Made childcare more affordable through the childcare element of the Working Tax Credit, from which 396,000 families are now benefiting. Over 1.8million children were enrolled in childcare in 2005.
- Introduced Child Trust Funds for every child born since 1 September 2002, for children to spend once they reach 18, providing £250 at birth and a further £250 for families with low incomes and children in care.
- Supported children and families through tax credits which are now benefiting around ten million children, with families with children £1,500 a year better off in real terms in 2006 than in 1997, and the poorest fifth £3,350 a year better off.
- Improved support to children in care through the Children (Leaving Care) Act 2000, since which the proportion of care leavers participating in education, employment or training at age 19 has increased from 46 per cent in 2002 to 63 per cent in 2006.
- Provided financial support for young people who remain in education, with over half a million learners benefiting from education maintenance allowances of up to £30 per week in 2006-07.
- Trebled the number of apprentices in learning from 75,000 in 1997 to 255,000 today.
- Halved the number of young people leaving school with no qualifications since 1997, and seen a 14.8 per cent fall in long term youth unemployment.



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