

Education Committee

Work and Pensions Committee

Oral evidence: [Child Poverty Taskforce](#), HC 894

Tuesday 20 May 2025

Ordered by the House of Commons to be published on 20 May 2025.

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Education Committee members present: Helen Hayes (Chair); Jess Asato; Mrs Sureena Brackenridge; Dr Caroline Johnson; Darren Paffey; Manuela Perteghella; Mark Sowards; Caroline Voaden.

Work and Pensions Committee members present: Debbie Abrahams (Chair); Johanna Baxter; Damien Egan; Amanda Hack.

Questions 1 - 33

Witnesses

I: Baroness Longfield CBE, Executive Chair and Founder, Centre for Young Lives, and Children's Commissioner from March 2015 to February 2021; Rt Hon Lord Blunkett, former Secretary of State for Education and Employment and former Secretary of State for Work and Pensions; Naomi Eisenstadt CB, Chair, NHS Northamptonshire Integrated Care Board, former director of Sure Start and the Social Exclusion Task Force, and non-executive director of the Department of Health and Social Care.

II: Tom Waters, Associate Director of Income, Work and Welfare, Institute for Fiscal Studies; Mike Brewer, Deputy Chief Executive and Chief Economist, Resolution Foundation; Professor David Taylor-Robinson, Chair in Health Inequalities, Professor of Public Health and Policy, University of Liverpool; Dr Katriona O'Sullivan, Professor of Psychology, Director of the Centre for Excellence and Inclusive Higher Education, Maynooth University.

Examination of witnesses

Witnesses: Baroness Longfield CBE, Rt Hon Lord Blunkett and Naomi Eisenstadt CB.

Q1 Chair (Helen Hayes): I welcome members and witnesses to the first joint session in this Parliament of the Education Committee and the Work and Pensions Committee. I am Helen Hayes, Chair of the Education Committee. Halfway through the session, when we come to our second panel of witnesses, I will swap places with Debbie Abrahams, who is Chair of the Work and Pensions Committee.



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Before we go any further, I will ask all Members to introduce themselves and as, they do so, to make any declarations of interest they may have. Then I will ask witnesses to introduce themselves.

Mark Sowards: Mark Sowards, Member of Parliament for Leeds South West and Morley.

Amanda Hack: Amanda Hack, Member of Parliament for North West Leicestershire.

Johanna Baxter: Johanna Baxter, Member of Parliament for Paisley and Renfrewshire South.

Darren Paffey: Darren Paffey, Member of Parliament for Southampton Itchen.

Mrs Brackenridge: Sureena Brackenridge, Member of Parliament for Wolverhampton North East.

Debbie Abrahams: Debbie Abrahams, MP for Oldham East and Saddleworth and Chair of the Work and Pensions Committee. I am a former colleague of Professor David Taylor-Robinson in the second panel.

Jess Asato: Jess Asato, Member of Parliament for Lowestoft.

Damien Egan: Damien Egan. I represent Bristol North East.

Dr Johnson: Caroline Johnson, Member of Parliament for Sleaford and North Hykeham. I am a consulting nutritionist.

Manuela Perteghella: Manuela Perteghella, Member of Parliament for Stratford-on-Avon.

Chair (Helen Hayes): Thank you very much. I invite the witnesses to introduce themselves, starting with Lord Blunkett.

Lord Blunkett: I am David Blunkett. I am here today because I was Education and Employment Secretary for four years and latterly Work and Pensions Secretary, so I have covered the field.

Naomi Eisenstadt: I am Naomi Eisenstadt. I am here today because I was the first director of Sure Start, but I also had a long career in child poverty and was the independent adviser on poverty to Nicola Sturgeon for three years.

Baroness Longfield: I am Anne Longfield. I have worked for many years in this area. I ran a national charity that was very involved in the development and roll-out of Sure Start children's centres, I was Children's Commissioner for six years, and I am the executive chair of the Centre for Young Lives.

Lord Blunkett: I ought to have said, Helen, that along with other people, but primarily with Tessa Jowell, I was the initiator of Sure Start.

Q2 **Chair (Helen Hayes):** Thank you very much. I do not think any of us



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would forget that. I will begin our questioning this morning and I would like all three witnesses to answer, but I might start with Anne Longfield. How do you assess the current state of child poverty in the UK? In particular, how does the recent rise in relative child poverty to 30%, which we saw in 2022-23, compare with historical trends that you have seen over the course of your work in this field?

Baroness Longfield: Of course, at this point everyone says it is shocking, but we should not be shocked by now because these figures have been in plain sight for many years. It is appalling. It is inexcusable that a third of our children are living in poverty. We know that the impact of that on every element of their life chances is not only challenging but, for many, a disaster. We also know that the Government can change that trajectory and those outcomes, and we have seen that.

I am sure we will be delving into what the previous Labour Government were able to achieve. However, the impact of poverty for individuals is that every element of their life chances is held back, and for the country, the economic cost and consequence of those individuals not being able to succeed to the extent that they could is limiting in every way, too. With the taskforce, we now have an opportunity to look at a child poverty strategy that puts it back centre stage, and of course I want it to be ambitious.

It would also be appalling to think that the first Labour Government for some time oversees an increase in poverty. I know no one wants that and everybody—the leader of the party and the Chancellor—are all very committed to this. However, we need to be alive to the consequences and risk that it might happen unless we are bold—and that is something we absolutely need to be.

Naomi Eisenstadt: All I would add to what Anne said is about the impact of poverty at different life stages. Certainly, the impact of poverty on the under-fives is much more severe because of the whole business about a good start and what that means. I think that in some sense we won that argument about investment in early years. I will always argue that there is not enough and it should be done differently, but I think that the missing piece is late adolescence. I am thinking about the data that has just come out on NEETs among 16 to 24 year-olds. There should be a narrative on second chance. We do not have an evidence-based narrative on young people entering into adulthood.

I think about the work that was done many years ago by Paul Gregg. The scarring of leaving school with no work, without a positive destination, lasts well into an adult's 40s and 50s in terms of their income possibilities. We have to think of this as the life cycle across childhood, not just the early years, although it is true that the longest scarring is in the early years because of the developmental opportunities that are missed, particularly for zero to three-year-olds.

Lord Blunkett: Three things strike me immediately. One Naomi has mentioned, which is that economic inactivity at the level we are talking about with the under-25s is bound to have a devastating effect both on



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them and on the wider family income, not least when they are living at home.

Secondly, the stats that we have been provided with—I have to say that it is quite difficult to get accurate stats; they come from different directions and I have not found a single source that could be said to be entirely reliable—indicate that the level of disability and family poverty has risen substantially. Even with only three weeks to go before the spending review, that is something that the Government might be able to reflect on. Obviously, it has an impact overall, not just because of the challenges of those with disability moving into training and work, but because of their income power. I know from dealing with this myself just how horrendous it is that three out of four people with a defined disability in adulthood will not be in work. Worklessness is an obvious one.

Another aspect is the change in the nature of the labour market. Very briefly, while we have had high levels of employment, we have had very low levels of good employment. We have had insecure temporary work and, until the rise in the national living wage recently, quite poor pay—that still prevails—and a flatlining of the income of most people in the country.

Finally, and linked to that, there has been a massive drop in training. I am obsessed with something for something, with conditionality, but 20 million fewer skilled days than 15 years ago is what we are dealing with at the moment, with a massive drop in the adult learning budget. As this is such a complicated area, all these things really come together in a toxic mix.

Q3 Chair (Helen Hayes): Thank you very much. Those are interesting thoughts on the current state of play. Can I ask you now for your reflections on the current state of political discourse in our country, across society, on child poverty, and any progress that is already being made towards addressing it?

Lord Blunkett: There is a genuine upsurge of concern, but it is diffuse. Some people are very keen to engage in cash transfer to overcome and ameliorate immediate poverty. Clearly, if you give people enough money, their level of poverty is reduced, but it does not deal with the underlying cause of family poverty—children are in poverty because the family is in poverty. There was a scheme called Supporting Families—previously, rather innocuously, known as the Troubled Families schemes. As far as I can gather, that money has been rolled into the family hubs initiative, but I am not clear if anybody actually knows now where it is going. That was supposed to be a holistic approach to looking at the comprehensive needs and support to a family that will help each individual be able to succeed.

A question that has taken less salience recently is what happens with absent fathers. My mum was a single parent because she was a widow. Most children have two parents but one of them may have copped out. We should not duck that one either, because there should be a drive to ensure that both parents are contributing.



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Obviously we need cash transfer to ameliorate the immediate tragedy of children being on the breadline, but some resource needs to go into enabling the family to be independent long term and to be able to drive themselves out of the pit into which they have they have fallen. We have to have what I call mutuality and reciprocity. We have to do our bit, and they do their bit.

Naomi Eisenstadt: My argument is similar to the argument that David is making but framed in a slightly different way. Carey Oppenheim and I wrote a book, "Parents, Poverty and the State", about the Government's role in supporting families. We did it via a structure of the Government's role being to reduce pressures and build capabilities. Our argument was that through the period of austerity, there was some commitment in the coalition Government to build capabilities, but at the same time they were increasing pressures by benefits cuts.

There must be balance between how you do cash transfers and at the same time have the kind of reciprocity that David is talking about, in terms of how you build capabilities. My line is always: "I'll go to the parenting class if there is a free launderette—if I can do my washing at the same time." That was the magic of what we did on Sure Start. It was a reciprocal agreement between local families, about what they thought would help them, and what professionals thought they needed. I think that too much of what we do is about what we wish they would want and somehow we get annoyed when they don't.

Cash transfers is part of reducing pressure, but good parental leave also reduces pressures, flexibility of work reduces pressures, and quality of work reduces pressures. Cash transfers is a very important part of the picture, but it is not the only part. However, I do not think that we can do the things that will improve the family home learning environment and the other stuff that we know really matters to children if we are not reducing pressures on families.

Baroness Longfield: I agree entirely that it is both cash transfers and that springboard of support—that sense that you are standing alongside people to be able to support them to become financially independent. We know how that works. We have seen it work before. We have had a massive dilution of that infrastructure of support over the last 15 years—Sure Start, the family hubs, Supporting Families. We have also had covid, which rocket-boosted so many of those insecurities and we saw them become baked in.

What we did not say in the first one, of course, is that most families with children that are in poverty are actually working now. That is different from a couple of decades ago, and it is for all the reasons we have heard about. The discussion is about how we resolve—how we reduce—poverty. I have felt over recent years that sometimes there is almost a squeamishness about talking about poverty. This is the moment when we can start action, which is what most families that do not have enough money really want—long-term action.

I think we have also realised the cost of not doing anything—the cost of



crisis. We are now helping, for the same money, fewer and fewer children with more and more acute needs. That means that most children are getting less and less because the cost of crisis is so high. It is not sustainable for us as an economy. We have to reset ourselves towards helping all families, but that help has to be alongside a respectful, challenging, supportive relationship about how we help people to get to a different place. Again, there are many examples from the past of how that can be done, but it is complicated. People's lives are complicated. Respect and having people with trusted relationships is what people need, but also for the long term; this has to be a 10 or 20-year vision.

Q4 **Manuela Perteghella:** There are several poverty measurements and many recommendations on measures of living standards. What measures of poverty—material deprivation or other indicators of poverty—do you think are most useful in discussions and actions on child poverty?

Lord Blunkett: I am aware that Rowntree has been doing some work on what, in our country at this moment in time, would be a baseline for living acceptably; in other words, trying to cut through the absolute and relative poverty arguments. I am also familiar with the Social Metrics Commission, although I have some real doubts about how calculations are made.

We cannot use averages. Michael Gove once said he wanted all schools to be at the average. Well, once you have the average, the average has changed, and all the calculations you have to make are about whether people have floated up or floated down. Normally it is the former, hopefully, rather than—well, you very rarely get the latter; let us put it that way. Incomes very rarely come down as a cohort. If we can get incomes up, the average changes.

Rowntree has been trying to do something about what it would look like to have an income that allowed you to live acceptably. I think that is a much better way of approaching it. It is difficult because you have to have a starting point and you have to work towards it, but otherwise, you are always chasing your tail. We could argue all morning about what absolute poverty is. We could argue about what is relative in the situation I described a minute or two ago where we have had a decade when general incomes have flatlined. They are rising now because earned incomes are rising above inflation and the national living wage has risen above inflation. There is a gradual increase in income generally, which is bound to have an impact on people's living standards.

I am very keen that we try to get off something that moves as you move, because otherwise we will never get there. In fact, the more the average goes up, the more people will fall into your definition of poverty, so you never get yourself out of it. Sorry, but it is something that exercises me, especially reading the Social Metrics Commission stuff.

Naomi Eisenstadt: I am going to reference some of the work that David just spoke about. Donald Hirsch did the original work that the Rowntree research is based on. He did work on what is called a minimum income standard. It is brilliant work, but the difficulty of establishing a poverty



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line, or what a minimum income standard is, is that it is incredibly variable depending on where you live.

Lord Blunkett: Forgive me, this is not universal basic income.

Naomi Eisenstadt: No, absolutely not. It completely is not universal basic income, which I—anyway. I will not comment on that.

The minimum income standard is really quite interesting. They did multifaceted focus groups all around the country asking, “To be a participant as a citizen, what’s the minimum that you need?” There was huge variability. For example, part of the variability—in London, it was a meal out once a month, because people have much smaller kitchens in London and they cannot have people over for meals.

I was then a trustee of the Trust for London. We commissioned Donald Hirsch to do it just for London, and housing costs in London are just beyond anywhere else in the rest of the country. It was Loughborough University that did this work. We also looked at it when I was doing the poverty work for the Scottish Government. Believe it or not, what is really, really expensive is being in the highlands and islands in Scotland, where they are not particularly poor in terms of income, but the cost of living is massive, because it is so cold and because everything has to be flown in. Their access to a paediatric child psychiatrist was once a month. If your child needed that kind of help, you had to take them to the mainland.

Working out what it should be regionally, working out what it should be depending on where you live, and working out the public acceptance for the idea of what a minimum standard looks like, is really important. But I do think the Rowntree work is brilliant.

Baroness Longfield: We need to settle on one definition, and pretty sharpish. I think Rowntree’s is going in a good place. My frustration has been that we spend so many months—years, even—arguing about what is poverty and what is not poverty. If you talk to any family or child who is living in poverty, they will be able to tell you, in the rawest detail, what it means day in, day out and, for some, everything about the agony of that. It needs to reflect real lives. It needs to be able to reflect the different kinds of lifestyles that we have heard about.

Understanding regional disparities, entrenched poverty and the impact of that is slightly beyond the notion of what is a measure, but that is something where different aspects combine and have a particular deep impact. I think the time for discussion is over; we just need to go for it and understand. Then it moves on to the next question, of course, which is: what would a good outcome look like and how would a measurement enable you to get there? We will come to that.

Q5 Johanna Baxter: You have touched on the question that I was going to ask: how important do you think it is for poverty measures to take account of individual circumstances? For example, those inescapable costs you have referred to—obviously, in the north of Scotland, the price of energy is one, but I am also thinking about the costs related to



disability and childcare, looking at the Social Metrics Commission work that Lord Blunkett referred to.

Baroness Longfield: I think it has to reflect real life. We do not want this to become a dot on a graph or a data point; it has to be real enough to reflect real life. Of course, how we do that is what the Social Metrics Commission took us into. There is also the broader discussion around the Joseph Rowntree work on the views of individuals and what it would mean to be able to have a baseline income.

Again, I just go to the frustration: it is a job to be done, it needs to be done well and it needs to reflect real life, but it needs to be done quickly, because we need to move on from this. The real work comes in how you actually change things, reduce poverty and move families to a better place.

Lord Blunkett: I imagine that the issue of disability is close to all our hearts. If there are two adults in the family, it makes it more difficult for both adults to work full time, and if there is only one adult, struggling to work part time and support someone with severe disabilities, obviously you are going to have to tailor what you are doing to help them the most. These are quite tricky delivery aspects, aren't they? You are having to try to tailor what you do, not to people fitting in with the system, but the system backing people.

Naomi Eisenstadt: The framing is really important for me. The difficulty is that the reason that the Government brought in universal credit was that we had an impossibly complex benefits system that even benefits advisers found really difficult. On the other hand, the simpler you make it, the more rigid it is and the less capable it is of being flexible for various disabilities, for ages of children, for lone parents. That balance between flexible but overly complex, simple and rigid, is something that policymakers really struggle with.

There is not an easy answer to it, but I think that Anne is right about coming to some notion of what a decent living is and then working out how to ensure that happens in different family circumstances. That is the task. Having been involved locally with very poor families and also with in Government on policy, I know that it is easy to ask the questions but it is really hard to deliver.

Q6 **Johanna Baxter:** How crucial is the de-politicisation of discussions on child poverty and facilitating meaningful progress on tackling it?

Lord Blunkett: It is extremely difficult. I am so old and I go back so far that I remember that in the lead-up to the 1992 general election—forgive me reminiscing for a second—there was a very substantial commitment by the Labour party, under shadow Chancellor John Smith, to a massive cash transfer. It undoubtedly lost us the general election. You sometimes have to decide whether you want to make progress slowly or whether you want to make no progress at all.

That was about people who felt that they were being asked—and they were struggling—to provide to others who they did not necessarily



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believe were putting in the same shift. Now, it could be completely untrue, but in politics perception is very important. Taking people with you in terms of something for something, and knowing that you are doing the right thing but you are also doing the right thing for the medium and long term, is really tricky. On the one hand, you can be seen as completely heartless, and there is plenty of that about. On the other, you can be a complete soft touch and actually not achieve what you set out to achieve, because you might feel better about it, but has it changed the lives of the people that you really care about?

Naomi Eisenstadt: There is a political framing that I get very annoyed about: are you blaming the individual or are you blaming the system? There was a lot of blaming the individual. There was a lot of redefining poverty as being about lone parents, or alcohol and drug problems—defining it in terms of the behaviours of the family in poverty. The truth is that it was disrespectful to poor people. That is what infuriated me about it. There are a lot of poor people who do not beat each other up and do not drink too much, but just do not have enough money. We have to separate these things. That is a political argument in the sense of how you win people over. In terms of what David is saying, of course, it is really important that you win over the electorate, otherwise you cannot do anything. On the other hand, I think blaming the poor is wicked.

Baroness Longfield: I agree. Also, we all know, down this end, what happens when you get alongside people who do want to change the situation they are in; with a very small amount of help and support, sometimes, you can help them to go to an absolutely different place. It is not that you are in some way having to garner long-term dependency; this is about knowing what people need and standing alongside them.

However, going back to the political buy-in within this place, not really the rest of the country—although I do think covid brought into more people's understanding the reality of being poor and having a mountain to climb day in, day out. They knew what it meant to live in poor accommodation because they heard about it more and they saw it, whereas they normally would not have done. Obviously, people move on and not everyone remembers, but I do think that something happened there.

In here, we saw the consequence when there was not that political buy-in last time, when the Sure Starts were starting to be dismantled before some of them were even open, when the Child Poverty Act was dismantled in 2015, and in the move away from cash transfer. These things happen, but we have to make sure that this is something that absolutely is rooted in that common belief, which I think everyone has, that we all want as many of our kids to succeed as possible, and we all want our country to grow well and be as prosperous as it can be.

Then there needs to be that understanding that some kids and some families need extra help for those things to be possible. If we ground it in that way, with what I still think of as a relatively measured way of moving forward to help families, it is more likely to get political buy-in



across the piece, and it is more likely that families will know that everyone needs a bit of help now and again and that is something that is good for everyone.

Lord Blunkett: Chair, indulge me for a second. On Anne's point about lived experience, I have never been better off in my life, for all kinds of reasons—because some of the burdens are lifted off me as well. I have to nip myself to remember what it was like as a child, when there was literally bread and dripping in the house. I have to do it, because otherwise you can get completely detached. When the £20 supplement was withdrawn, I kept having to remind myself that I would pay that for a bottle of wine for a Saturday night, but for other people it was a lifeline to actually eating reasonably. These perceptions are really important.

Q7 **Mark Sowards:** Thinking broadly about the New Labour Government, the coalition Government that followed and the Conservative Governments that came after that, what changes to social security policy over that entire time had the biggest impact on child poverty? In addition, were there things outside of social security policy, outside of the Government's direct control, that also had an impact?

Lord Blunkett: Sure Start, full employment and the child tax credit system. Robert Reich, who way back in the '90s was the Labor Secretary in the US, was in a meeting that I was in with Gordon Brown, and he said to Gordon, "It's a really good idea, this, but the Government don't get the credit for tax credits," and of course he was right. A combination of those things made a significant difference.

It was true that the Chancellor of the Exchequer, supported by the Prime Minister, believed strongly that this was a moral imperative and that we needed to do something about it, but it was a mixture, underpinned by the things that Naomi and Anne are talking about—not least because we loved Sure Start, because it transported the lives of adults and not just of children. It was not just about nurturing and developing the child, critical as that was, and it was not just about professionals coming in and then leaving at tea time; it was about a transformation of the community.

I have been chided before that I still believe in communitarianism and building from the community. You can make a big difference, not just to the lives of individuals, but to their ambition, their hope and their expectation of what is possible for them, if you get this right.

Naomi Eisenstadt: My colleagues may disagree with this, but I think it is about the evidence on Sure Start. Sure Start worked when it was targeted in the poorest areas. When it was rolled out across the country for everywhere, its effectiveness was not enough in the poorest areas, and for the non-poor areas, it did not make a difference because there was not so far to travel. I think the notion of geographical targeting in neighbourhoods is really important. That is what we know from the evidence actually worked. Everybody has a different think bubble about Sure Start, but I the notion of targeting in the poorest areas is extraordinarily important.



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My second point, which picks up on David's point, is about one of the reasons that it worked. I was not terribly popular among my colleagues, because I made the staff go out to the centres. I made them visit. The nature of the civil service is that it is made up of really clever people who are largely drawn from a particular class. They had never been on these estates. They had never spoken to people who live on these estates. They came back astounded. That link between national policy and how people live their lives was extraordinarily important.

One more thing that was interesting is that I would not let the civil servants who worked in the unit travel first class, because the local partners would know what end of the train you got off when you visited. Things like that were symbolic. This is an anti-poverty programme: we do not go first class on the train. Nobody is allowed to go first class any more, but in those days it was grade related. Some of the higher-grade staff were slightly irritated about that. It is something about, as far as you can, understanding what it is you are trying to do and for whom.

Baroness Longfield: You are obviously getting the idea that Sure Start was a good thing down this end, but David is right about cash transfers as well. The thing about the pullback from Sure Start is that it left people alone, back where they were, to just get by. It is never easy to bring the machinery of government together in terms of real people's lives, but the thing about Sure Start was that it did that. When the Government went out and delivered Sure Start, and Naomi had people on buses and trains all over the place doing that, behind the scenes were lots and lots of Government Departments, as there were around the poverty strategy that was feeding into it—be that health, education, childcare or work; it was all of those things—and it almost felt to communities that they had a Government that wanted to come to them on their terms. When that goes, you are left to rattle around on your own devices.

When it comes to a point where work becomes more insecure, when covid comes along and the like, you get the feeling that there is no one on your side. You have to navigate your housing office, you have to navigate your school, and every one of those is a mountain to climb, whereas if you have people on your side, they can often help you through some of those things. The impact, obviously for communities but for individuals too, is something about leaving people slightly to sink or swim.

Lord Blunkett: You will have seen the Institute for Fiscal Studies work on the original Sure Start programmes—to pick up your point, Naomi—which is very interesting and, for some of us, extremely rewarding.

The other bit, which Anne has just touched in passing, is that we did not build enough houses from 1997—we all know that—but there was a massive refurbishment programme in the social housing sector in particular, and I think that made a difference to people's lives. Poverty is not just about the money; it is about the circumstances in which you are living.

David Sewards: Thank you very much for that definitive answer.



Chair (Helen Hayes): Before I bring in Caroline Johnson, I will mention that we hope to be able to finish this panel by 10.55 am, to enable Lord Blunkett to give evidence at another Select Committee somewhere else on the estate. I have five more Members who want to ask questions, so I encourage you to be succinct, in both questions and answers.

- Q8 **Dr Johnson:** I want to ask you a bit more about Sure Start. I remember from having young children around that time myself that Sure Start offered some very good opportunities for babies—baby classes, baby massage classes; lots of things—but they were attended in my area almost entirely by relatively well-off parents who did not necessarily need them. It was not well targeted. Naomi, you mentioned targeting by postcode, and estates have been mentioned as well. That might work in a town or city where the geography suits it, but how do you target it in rural areas where poverty is much more hidden by postcode averages? How do you encourage people to attend those events? In my locality, Sure Start events were held in the Sure Start centre, so they were put in areas of relatively high deprivation, but they were still attended more by those who were not economically deprived. How do you get those services to the people who really need them?

Naomi Eisenstadt: On the issue of non-poor using them, there was good social mix; it benefits both communities to mix. Some areas were not as good at doing the outreach and some organisations—particularly NHS organisations—were not co-operative about giving us the data on where people lived so we could do the home visits. If you had the data on where the people who you thought needed it the most lived, you could do home visits and then bring them in. The whole principle of open access but locating in poor areas is really important.

We did have a special exception for rural areas. The way it worked in rural areas was by linking it to whatever was there in a rural area already. In Gloucestershire, we had the centre attached to a leisure centre that had swimming and all that kind of stuff. In the north-east, we attached them to disused fire stations. You just looked for where there was a building in a rural area and then you did a lot of outreach. It costs more in rural areas, there is no question about that. You can do it, but you have to have good data. Sometimes we had the good data; sometimes we did not.

Baroness Longfield: There was good social mix in many places. It depended where you were. If you were in Peckham, then you would get lots of people from the wealthier areas around it coming, because it was great. If you were in outer Lancashire, in a very poor, deprived, outer-urban place, you probably would not; you would get people from within the estate. Each one of them was what you made of it. They were different. They were open for different lengths of time. They had different levels of sophistication. They were only in their first few years of operation. They were all in their infancy, learning as they went along.

Naomi talked about data, and one thing I will mention is getting the NHS data. My charity used to run some and it took years, sometimes, to even



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start to get it. How can you start to target, for want of a better word, and reach out to those families if you do not have the data about who they are?

Naomi Eisenstadt: You do not know where the babies are that are just born.

Baroness Longfield: That is really important.

Lord Blunkett: There are cities—London, obviously—where there is poverty and reasonable wealth side by side. My own city is not like that. It is split right down the middle. It is very difficult to get the mix.

Q9 **Mrs Brackenridge:** I would like to consider what impact the national minimum wage, and increases to eligibility and the rate of payment, made to child poverty.

Lord Blunkett: The national minimum wage was a bit of a campaign along with Rodney Bickerstaffe and Ian—now Sir Ian—McCartney. People forget the massive effort that went in. It was transformational in two ways. Obviously, if you have a national minimum, now national living wage, you are immediately lifting the floor, but you are also changing the terms and conditions of people relative to their employer. At last, people were beginning to see that they were valued and that it was worth going into work. I will leave it at that. If it is worth going to work, it is worth going to work. The problem, with in-work benefits as well as out-of-work benefits, is trying to get that balance right. People are human and they react in normal psychological ways. If it is not worth it, it is not worth it.

Baroness Longfield: I agree with David.

Naomi Eisenstadt: I agree with David.

Q10 **Mrs Brackenridge:** To what extent should successive Governments rely on increases to the national minimum wage and the national living wage to further address child poverty? Lord Blunkett, I will go to you again.

Lord Blunkett: We have just seen a relative, percentage-wise—Alan Fisher, who was once the general secretary of the National Union of Public Employees, of which I was a member, said, “100% of bugger all is bugger all”. Sorry, I am not supposed to do that in Select Committees, but that is what he said. The relative increase is really important. Keeping the pressure up on that creates cries from small businesses, understandably—particularly retail—saying the trade-off is between employing people or not employing people. I do not believe that. I believe that if you do it carefully and steadily, you can raise people’s living standards, they will have money to spend in the local community and you will alleviate their poverty. That has got to be, morally, the right thing to do.

Naomi Eisenstadt: I have two things to say. One is that poor people will spend their money locally—that is really important—but the other thing is that employment is good for your mental health. It brings you into social contact and gives you a reason to get up in the morning. High-quality work is beneficial not just in terms of poverty but in terms of one’s sense



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of self-esteem and mental health, and it is good role modelling for children.

Baroness Longfield: We want to help as many families as possible be as financially independent as possible. It is absolutely at the core of the way we will get there.

Q11 **Amanda Hack:** We have already discussed some of the key areas of policy that have made a difference in educational, social and wellbeing terms for children, and in trying to mitigate the impacts of child poverty. I will not ask your view on the most effective policy—I think we have had that answer already—but I will look at some specific measures, such as pupil premium and the education maintenance allowance. What impact do you think they had on child poverty?

Lord Blunkett: Pupil premium has helped in terms of lifting the investment in children in specific schools; obviously, it is based per pupil, but it cumulatively makes a big difference to what the school can do. We piloted this under the heading of pupil learning credit between 2000 and 2002 and then the Treasury “rolled it in” to the general budget, and then of course it was reinvented under the coalition. There is a lot we could still do with that.

I mentioned the IFS earlier. I had a meeting with Paul Johnson and his colleagues, because they do not like what came out of the education maintenance allowance, but in 2006 there was a longitudinal study that showed the impact had been very substantial in helping young people to stay in college post-16, and to be able to make the choice as to what they wanted to do and, by staying on, have opportunities that would otherwise not have been available to them. The argument is that if you get young people connected with the world of work earlier they might stay in and get a job. That is fine, but tell that to those whose sole ambition for their children is to go to university.

There is nothing simple about this except—as Naomi said earlier—if the money is very clearly focused and targeted, you know what you are doing with it and you join it up with other programmes. I will stress that joined-up-ness is such an important part of what we need to do. We did it with Sure Start; we did not do it in other areas of government. There is no question about that. The challenge for the Government is to make the missions real, so that something is happening that joins up the bits. There is quite a lot of resource, even with all the pressures on the Treasury, but most of it is being dealt with in tramlines rather than together.

Naomi Eisenstadt: One thing that has not got a mention yet but is really important is early education and childcare. There is a tension between the quality of the childcare and childcare that is affordable and accessible. I think that we have erred too far on the side of affordable and accessible in terms of employment and not enough on the quality of the staff working with young children. There is very good evidence on this. The best universal lift you can do is high-quality early education.



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The structures are in place; it is just that the quality is not good enough. We should be working on that.

Baroness Longfield: We are investing a substantial amount in childcare compared with where we were years ago, but it is not done in a way that has that mission-driven approach that would start to release more money for the things that Naomi is talking about. The other part is around how we have the early education and the childcare, but also the child development, acting as one. Not wanting to go back to Sure Start, obviously, and family hubs, but the potential is there to do that. However, you have to make all of these things happen and you have to make them join up. At the moment the machine of government serves up ingredients to make a meal but not enough to make a meal in itself. We need to use the engine of government to lean into this, because that is where we will start to see the movement we want to see.

Lord Blunkett: Chair, it is outside of my remit and yours, but we have two different Ministers—one dealing with childcare and the other dealing with family hubs—and two different budgets. Well, make your own decision about that.

Q12 **Amanda Hack:** That is a useful point to go on to the next question, which is about how you pull together Government Departments to have more impact. Going back to Sure Start, there were some real signs, such as reductions in accidents and attendance at A&E among nought to fives, their development age at the point at which they went into primary school—there was a lot of connecting. What other things do you think we can do to look across Departments to try to deal with child poverty?

Baroness Longfield: First of all, when you had a child poverty unit—that is something I would strongly advocate for, and David will tell you much more about the workings—you had a unit that worked on behalf of the Government overall to look at all Departments, to measure and support progress, and to challenge progress as well. Leadership from the top, and the drive, was also a really important part of that. That brought together all of these things. Of course, real people do not necessarily live their lives in compartments that relate to Government Departments. A unit of this kind as a mechanism across Government—I think we have lost some of the mechanisms, or engines, that allow joined-up policies to become reality for people, and those are the areas that we need to rebuild.

Naomi Eisenstadt: I will be very quick. Leadership from the top—the Prime Minister and the Chancellor believing in it—will make it happen. Secondly, I have this strong view about love and money. No matter where you put things, there will always be joins. There is no perfect structure for Government; there is no perfect structure for anything—there will always be joins.

Sure Start was magic because Tessa Jowell and David were old friends and agreed on what they wanted to achieve, and one was in education and one was in health. There was that magic of Ministers getting on with each other and wanting the same things to happen. How do you make that happen? You cannot. On the other hand, you have to look at those



relationships and figure out how you make people work towards the same ends even if they are in different Departments. You cannot bring it all together; it is too complicated, and there will always be joins.

Lord Blunkett: I am wanted in the Thatcher Room so give me one minute. Professor Carol Black produced an excellent report on the back of which we set up a joint unit between Work and Pensions and Health, which I presume still exists. What we did not do was then translate that into the local. Jobcentre Plus and the local health service at place level, as opposed to what is now the ICBs—which is a piece of bureaucracy—could have done a replica of that working group, and I would strongly recommend it.

Chair (Helen Hayes): I will go to Damien for our next question. We will understand, Lord Blunkett, if you need to leave us at this point. Thank you very much for being with us this morning.

Lord Blunkett: Thank you for your indulgence. It is nice to get it off my chest.

Q13 **Damien Egan:** I have a couple of questions on Sure Start. You have covered much of it, but Naomi, I was really interested when you talked about the reciprocal agreement with Sure Start users. I want to ask about the importance of local input. My background is local government so when I think of that I think of speaking to the council, the local agencies and Health, but I had not caught on that bit about engaging with people who will be using the service, so the example you gave—"Can I get my washing done?"—was really interesting to me. I wonder if you could draw out other examples of the process of how that worked.

My other question is about the more recent programme of family hubs. How does that compare with Sure Start, and in terms of challenges and parenting skills, what is different about what parents might need from the family hubs in today's environment?

Naomi Eisenstadt: I will give you a specific example on the reciprocity question. We required from the first 60 trailblazers evidence in the plan that they submitted. Every area that we chose that was very poor was going to get one, so it was not competitive; it was more that you got the money when we agreed the plan. Part of the plan was: "Did you speak to local parents?" We had a test for whether they spoke to local parents, and it was dog poo. If they came back and said, "We spoke to local parents, and they wanted more health visitors and speech therapists," then we knew they spoke to health visitors and speech therapists. If they had spoken to local parents, they would have said, "We're worried about the dog doo in the park. We're worried about needles. We're worried about broken glass." They were worried about the environment. They did not ask for more services. It is that notion of understanding what it is like to live in these very poor areas and how scary it is to leave your house and make sure your kids do not get ill because they are playing in areas that are unclean. That was a really good example of reciprocity.



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We actually had—I mean, this is the golden day—£50,000 advance capital funding to do whatever we wanted before the programme was approved, to convince people, “This is really going to happen. This is really for you.” It was about working with people on what was important to them and then talking to them about what we thought was good for their children. I can bore for England on this so I will stop.

Q14 Chair (Helen Hayes): Anne, would you could speak to the family hubs point, please—and be super brief, if that is okay?

Baroness Longfield: Yes, of course. I agree with all of those things. I would say as well that none of this is about soft, easy options for families. You have someone who is bugging them all the time: “Have you got your housing sorted? Have you done this?” I will leave that one there.

On family hubs, for ease, we should think that family hubs and children’s centres could be in the same place. At the Centre for Young Lives, we have undertaken research and FOIs of local authorities, with 80% results. The amount that is being spent at the moment is about a quarter as much and 40% of the centres have closed. The amount that is going in is much, much less; however, there is something there to be built upon.

What you have now is an ambition about an extended age range, nought to 19. Again, we can discuss this, even between us, for many hours at a time, but most of the attention—80% or 90% of it—has been on under-fives already. I think most people will say, “We don’t actually care what we call family hubs. What we want is really high-quality services that are in the areas that they need to be and have that depth of quality that is able to deliver the results we want, which is about raising people out of poverty.”

At the moment family hubs are pretty disparate and there are relatively few, but if you combined them with children’s centres and started to rebuild, we think it would cost £1 billion to take you to a first phase and £2 billion to take you to about 2 million children, but it is quite possible to do. It falls into the land of “you’ve got to want to do it” and then it starts being able to repay its investment.

Q15 Jess Asato: How effective was the Child Poverty Act 2010 and should we have another one with a clear target to reduce child poverty set out in law?

Baroness Longfield: Again, it was in its infancy. What was important was that it embodied the targets and, with that, the mechanisms within Government to reach them. I cannot overstate the importance of the mechanisms, because none of this happens by itself; it has to be a determination—it has to be an obsession. Whether legislation is needed or not, in my view the targets are absolutely needed, because they focus minds and bring clarity to what good outcomes look like—we can all think we know but there will be many views—and they drive the different parts of Government to effectively work together at their best. Obviously you have to make that happen too.



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Naomi Eisenstadt: Well, it was not effective, because we have more poor children than we had in 2010. The evidence is that it was not effective. We did it because we thought that once you put it in legislation it would last, but it was very easy to unpick. How do you make it so it cannot be unpicked? I do not know what the answer is. The evidence is that we had child poverty legislation and child poverty went up.

Chair (Helen Hayes): Thank you. I will go to Darren for the last question.

Q16 **Darren Paffey:** It is a nice, light, easy one to finish with. Can you tell us your views on the current Government's approach to developing its child poverty strategy? Do you think there are any key areas that we as a Committee should focus on in our work?

Baroness Longfield: The first thing to say is there is a child poverty strategy being delivered, so that is a very welcome change. The unit was established straightaway; that, again, is great to see. We are of course awaiting the outcome. There has been a lot of discussion and debate, and I welcome the fact that it has been about both the financial transfer and support for people's real lives.

In terms of what comes out, there are big discussions about things like the two-child limit, which I know is a very live issue. It is the way you would get the most instant response. By itself it will not be the driving force, but it would remove something that we know is putting so many children in poverty, and we would absolutely support it.

The whole issue about how you drive and co-ordinate Government into action, which we have banged on about down this end the whole way through, has to be part of what that strategy is able to deliver—and then those ambitious targets for the long term. Of course, this is very much in the discussion now, and it is raised in height and status, but it will take long slogs, and that is what families want. They do not want a headline; they want a long slog over five, 10 or 20 years that means that we drive down, in a very determined way, poverty, which we know is avoidable if we can get our public services, our public money and our relationship with families and communities to work together. That is what the ambition has to be.

Naomi Eisenstadt: I am not going to answer the question, because there is something I want to say that is slightly different. There is another real difficulty in how we carve policy: is it the 30% or the 5% or the 2%? My view is that Sure Start and other big programmes were about the 30% in terms of poverty levels, and that as soon as you get down to the 5% and the 2% you have families with very complex difficulties—what the Treasury used to call high cost, high harm—but you will not shift the curve. You could spend all your money on children in care and not shift the curve on child poverty. You have to be quite difficult with yourself and quite disciplined on what it is you are trying to achieve. It is not that you do not do the other things, because legally we have to do them, but what are you trying to achieve?



If you go for the 30%, your unit costs are much less, because it takes a little bit to shift people over. Anne said this as well: it does not take a lot of money per unit cost, whereas it does in the highly complex families. The reason that I link that to things like Supporting Families and family hubs is that family hubs became for the 3% to 5%, not the 30%. They became very social work focused; they became focused very much on individual family difficulties. I hate the word “vulnerable” because it implies some weakness within the family rather than, “You know what my problem is? I just don’t have enough money.” If we think more carefully about our language we will make more progress.

Baroness Longfield: Sure Start became something you were referred to and that is not what we want. We want somewhere that people see as part of their community and that they are able to participate in. All of those points are really well made, but ultimately we have to make the money we have available work for those families. It has been leaning away from so many of those families for so long. We need to lean it back in.

Chair (Helen Hayes): Thank you very much. On that note, can I thank both of you very much for coming to give evidence to us this morning? We will change over to our second panel of witnesses, and Debbie and I will also swap places.

Examination of witnesses

Witnesses: Tom Waters, Mike Brewer, Professor David Taylor-Robinson and Dr Katriona O’Sullivan.

Q17 **Chair (Debbie Abrahams):** A very warm welcome to our second panel for this inaugural child poverty inquiry session. It is a pleasure to welcome Katriona O’Sullivan, David Taylor-Robinson, Mike Brewer and Tom Waters. Would you like to introduce yourselves and the organisations you represent, starting with Katriona?

Dr O’Sullivan: I am Professor Katriona O’Sullivan. I am the director of the Centre for Inclusive Higher Education in Maynooth University in Ireland. I actually grew up poor, poor—I am one of the high-cost 5% of families—in Hillfields in the middle of England. Lone parent, benefit dependent, homeless—wicked. I am one of the only women I know who has not only escaped their destiny—because poverty is a destiny, the same way privilege is—but is thriving. I am here to talk about the people and the policies and the practices that saved me.

Professor Taylor-Robinson: Hi there. I am Professor David Taylor-Robinson. I am Professor of Public Health and Policy at the University of Liverpool, and consultant in child public health at Alder Hey children’s hospital in Liverpool.

Mike Brewer: Hello. I am Mike Brewer, the deputy chief executive of the Resolution Foundation.



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Tom Waters: Hi, I am Tom Waters. I am an associate director at the Institute for Fiscal Studies. I am also part of the expert advisory group for the child poverty strategy.

Q18 **Jess Asato:** What is your assessment of the current state of child poverty in the UK? How has this changed over time and to what extent has the two-child limit had an impact on trends of child poverty?

Tom Waters: Typically we think of two kinds of poverty: we think of absolute and relative poverty, and we think about income poverty. Over longer periods of time we usually expect absolute poverty to fall: as incomes generally rise, the number of people below a fixed income line tends to decline. On relative poverty, it is less clear how well lower-income families are keeping up with those around the middle.

If we look at recent trends in absolute poverty, there has not been a tremendous amount of change in the last 10 to 15 years. Depending on exactly which time period you are looking at, maybe you can talk about a one or two percentage-point fall, but that would be quite small compared with historical standards, where we have tended to see absolute poverty decline.

Relative poverty has gone up in recent years, certainly since 2010, and it does look like the two-child limit probably is an important contributing factor. If you look at families that have one or two kids, their relative child poverty has fallen, whereas it has increased for those with three or more children. That is enough to bring the overall child poverty rate rising.

Mike Brewer: In terms of how the nature of child poverty has changed over a two or three-decade time period, as the previous panel said, there is more working poverty now because more parents are working but they are finding that their earnings are not enough to get them above the poverty line. I would say that housing costs are a bigger drag on poverty, with poverty becoming a little more skewed towards those in social housing and the private rented sector.

The 2010s definitely saw relative poverty begin to creep up again, and that was driven by larger families. The two-child limit is definitely important in that, but the rise started before 2017, and that is because in the first half of the 2010s the Government were cutting back in tax credits and uprating benefits more slowly than inflation and cutting back on local housing allowance. It is not just the two-child limit that matters for large families; it is the whole package of income they get from the benefit system, because for a large family in poverty, the benefit system is providing a huge amount of their income.

Professor Taylor-Robinson: We are seeing a child poverty crisis. We know that 31% of kids—one in three—are in relative income poverty. That is 4.5 million children. It is 35% of children in the north-west; it is 40% of kids where I work in Liverpool. As part of the Child of the North initiative we collected everyday stories of poverty and hardship. We heard about parents using watered-down evaporated milk in babies' bottles



because of the cost of formula, children routinely turning up to school without shoes, schools buying kit and shoes for pupils. In Alder Hey we regularly see kids unable to attend medical appointments because of the cost of appointments.

We know a lot about the epidemiology of poverty. We know that it is a much greater risk in lone-parent families—43% of children—and in families with other axes of inequality. If you are in a family with a disability, it is 44%, and there is double the risk of poverty in ethnic minority families. It is clear from trends over time that poverty reached a peak in the early '90s at 35% relative poverty, there was a clear reduction under the New Labour as part of the English health inequalities strategy, and then we have seen all of that reversed under the banner of austerity. Speaking from a public health perspective, it is crystal clear how those poverty trends have impacted the dire health trends that we are seeing for children and adults at the moment.

Dr O'Sullivan: I think more people are experiencing financial pressure, so we are talking more about poverty now, but my experience of poverty as a young person—going to school with wet pants, not being washed, having to be given food in school because I did not have it at home because my family could not feed me—changed with the change in government and the Labour Government in the late '90s. Now we are seeing those experiences more and more. I wrote a book about this. Every day I get messages about teachers who are experiencing children who cannot participate in education because they are hungry. That is not necessarily just to do with employment issues; that hard case of poverty seems to have got more entrenched and more difficult.

One of the difficulties is the rhetoric that has gone on in the last 15 years about who is responsible. The individualisation of poverty and the way that we are taught, "You can change your own life. You need to work harder. You need to do better in school," makes people feel that they are responsible for their own poverty and their own difficulties, which is completely untrue.

The idea of choice in poverty is a myth. I had no choice as a young person growing up in Hillfields in large classes with no consistent benefit support, no mental health support for my family and no food in the schools. Even the cutting of free school meals—the only meal I had in a day was the free school meal. The idea that that is being reduced and that families are being taught that it is their responsibility to engage in services or to do better for themselves is really harmful, because you walk around feeling responsible when really the system is responsible.

Q19 **Mark Sewards:** I asked the last panel this question and their definitive answer was that the Sure Start centres had had the biggest impact. Over the last 25 years, what changes to social security policy have made the biggest positive changes to child poverty, and what changes have made the most negative impact on child poverty?

Dr O'Sullivan: I cannot answer that fully. I can talk from my own experience. In terms of social security, what got me out of poverty was



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secure housing and secure benefits. I grew up and I was socialised into being completely benefit dependent. That was what I was taught; you get your benefits and you get your council house, and that was your goal. You might judge me for that, but I was poor of opportunity, poor of values and poor of money. There are differences across the three things. What helped me was having the security of my benefits while I was able to explore adult education opportunities—and they were free—while I was attending family resource centres and community places. Having no threat to the security of my benefit was really important for me.

What I have seen over the years is that people who are trying to escape poverty, especially in adulthood, may be exploring the opportunity of education, but there is a financial cost to that in terms of losing benefits or access to support, or there is a trade-off between systems. That is really harmful for people who are in that 5%. I am the 5%, and that is what I am talking about—the 5% of people who are in long-term, entrenched poverty. We are the most costly in terms of society. In terms of mental health and prison supports, we are the ones who cost the most money to society.

Security of benefits, and making sure that I did not lose anything while I was exploring the supports and services that were in place, was really important for me.

Professor Taylor-Robinson: We have seen that, through purposeful policies, you can dramatically reduce child poverty and then all of that action can be very quickly undone. From a public health perspective, the 10-year English health inequalities strategy, which was implemented when New Labour came in, is seen as the largest and longest-lasting experiment in trying to reduce social inequalities in health at scale. It was cross-governmental and it involved a whole range of factors: targets on inequalities; resource allocation in more disadvantaged areas, particularly through the NHS; area-based regeneration; changes to the tax and benefit system—the minimum wage and the establishment of Sure Start, which we have heard a lot about already—and focused support on adult chronic diseases.

We have done some of the papers. My colleagues Ben Barr and Margaret Whitehead published a paper in *The BMJ* showing how the strategy worked to narrow social inequalities in life expectancy and also infant mortality. In terms of having targets on child poverty and concrete action to reduce child poverty linked to all of these other anti-poverty actions, it is clear that that was very effective.

We have seen the converse with austerity policies, where £40 billion was removed from the social welfare benefit. We know that it is the two-child limit that is the main driver of children being in poverty, and the single most important thing that we could address to overcome that. At the same time, we saw cuts to services like Sure Start that protect children in the early years and we saw much bigger cuts in the most disadvantaged areas. We have done a range of studies, which I hope to be able to talk



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about, showing the adverse health effects of that policy reversal on numerous aspects of children's health and also adults' health.

Mike Brewer: I had lots of facts about what happened in the 2010s, but I realised that they were from a paper written by Tom, so I might let him say them and maybe I will focus on the New Labour years.

The New Labour Government massively increased spending on families with children through the social security system. In a report last month we estimated that that was £40 billion in today's terms, comparing the end of their 13 years with the start of their 13 years. That is on families with children overall, not just families in poverty. Much of that went on universal child benefit and on their progressive universalism of tax credits, but that was a huge amount of money and incredibly important in supporting the incomes of low-income families with children.

I have two buts to that. One is that the pattern was not uniform across the 13 years in which New Labour was in power. Much of that increased spending came in the first parliamentary term, or the first five or six years. After that the money seemed to run out and progress was a lot less impressive. It really was the late '90s/early 2000s when the New Labour Government did the most.

The second is that they had to spend a lot of money increasing benefits for low-income families with children just to keep poverty standing still, as it were. This was a time when the economy was growing dramatically and average real earnings were growing strongly, which, with a relative poverty measure, meant the poverty line was rising rapidly. Yes, the New Labour Government did lower child poverty, compared with doing nothing, but if they had done nothing child poverty would have gone up. That is very much a story of spending the proceeds of growth. Growth was strong, tax revenues were buoyant and the New Labour Government were able to direct a lot of that into social security for families with children, principally through tax credits.

Tom Waters: Following on from that, the experience of the 2010s in one sense was the inverse, in that we had cuts to benefits, which tends to push up child poverty, for obvious reasons, but the increases to child poverty that we saw were not as large as many people had expected. It seems like part of what was going on there was exactly the opposite of what Mike was describing in the 2000s. Earnings growth was pretty poor, which meant that the poverty line was not racing away as much, and there was lots of employment growth, so lots of workless families were becoming working families. That meant that despite the cuts to benefits and the increase in relative child poverty, it perhaps was not as much as you might have expected.

One interesting thing about Sure Start is that we have quite good evidence on its effects. I think that is part of why it gets a lot of attention. There are a lot of other things where we do not have such strong evidence. To some extent it depends a bit on what you mean by poverty. We will probably get into this a bit later, but Sure Start seems to have had positive impacts on educational and health outcomes for the



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kids, for example, but in terms of income poverty, it does not have particularly large impacts, in the way that changing the social security regime does. There is an important aspect here: we need to pin down what we are talking about to really say what things are most effective at reducing poverty.

Q20 Darren Paffey: What contributions have employment support policies made to tackling child poverty over the last 25 years?

Tom Waters: If you take the lone parent obligation, which required lone parents who were out of work to look for a job in order to keep getting their benefits, we have good evidence that that increased employment, but an important aspect about that—I think this is a general risk with employment support policies—is that it increased employment in very part-time, quite low-paid work, so its impact on poverty did not seem to be quite as dramatic. That is an important thing to keep in the background: what kind of work are we pushing people into?

Mike Brewer: Certainly the employment situation of lone parents has changed enormously over the last two and a half decades: the employment rate was about 45% when New Labour came into power, and it is now about 67%. There is a very positive story told about the New Labour years where they introduced a new deal for lone parents, which was a voluntary employment programme, there was more help for childcare, and there was a minimum wage. The idea is that all these things work together in harmony—and indeed they do—to get the lone parent employment rate up, but the lone parent employment rate went up by just as much in the 2010s as it did in the 2000s, and the 2010s is not a period when we would normally say that the Government were introducing lots of supportive measures for lone parents. The policy that Tom described is more of an obligation than support.

If you looked at the 2000s you would definitely say that employment support programmes can be really helpful for parents with children, but the 2010s tell you, as Tom said, that it may be that some obligations and compulsion can also make a difference. However, the 2010s were characterised as a period during which earnings were low and families were just feeling more pressure to work, and that seems to have put the lone parent employment rate up too.

Dr O'Sullivan: Can I come in for a second? I was one of those lone parents. I used to have to go to the jobcentre and pretend that I was looking for a job to keep my benefits. I remember going into the jobcentre and every job was a low-skill job.

When we talk about employment opportunities, we need to think about social mobility and whether we want to keep people like lone parents or marginalised groups in low-income, part-time, precarious work, or whether we actually want to transform the future of families. When we talk about lone parents, we need to give them access to skills and opportunities that allow them to choose good employment that is long-lasting and will transform their families.



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For me, because of my poverty, nobody noticed that I am extremely intelligent and that I had the potential to be a professor and work in a university. Any employment programme needs to consider social mobility and how we recognise that talent exists everywhere, and opportunity does not, and empower people to become mobile. Lone parents in particular are a really important group. From my research and from evidence, if we empower a mother with skills, we transform the future of their family. If we are thinking of long-term eradication of poverty, lone parents and women in the household are the most important group to give opportunities to high-skills and good employment.

Professor Taylor-Robinson: To add to that, 72% of children who are poor are in households where at least somebody is working. At the moment employment is not the way out of poverty. That is a big problem. We know that the two-child limit and the changes to social security have been the main drivers of child poverty.

Speaking from a public health perspective, employment is clearly a major determinant of population health and of children's health, but only under the right circumstances. You have to think of the consequences of pushing a lone parent into a low-paid, insecure job that damages mental health. We know that that is very bad for children's mental health.

I work at the University of Copenhagen, where they have very high levels of maternal employment and there is high-quality, universal kindergarten provision at the end of every road, staffed by people with qualifications in child development. In that context, you can be very happy sending your children to childcare, knowing that they will achieve good outcomes. It is not just about the employment figures; it is about the whole of society, and thinking about the productivity of those children subsequently, which I can come to.

Q21 Darren Paffey: If I am hearing right, you are saying that employment support policies have shifted the dial on employment figures but not necessarily overall on child poverty itself. Is that because of the nature of those particular policies or is it because that category of policy alone can never achieve that, or do you think that it is feasible for employment support to shift the dial on child poverty?

Dr O'Sullivan: If the employment support is focused on social mobility and empowering people to participate in good-quality employment, definitely. It should not be penalising, though. The idea that we need to penalise people for not engaging in employment opportunities is a flawed approach, and actually separates people from employment and eradicates trust. But I definitely think that employment programmes, if they are focused on high-quality employment, have the potential to empower families to move out of poverty long term and for it to be intergenerational.

Q22 Darren Paffey: It sounds like you are saying that it has to be about employment and the skills development to get into the social mobility.

Dr O'Sullivan: Yes, the skills and the opportunities.



Q23 **Manuela Perteghella:** I would like to focus on the raft of changes proposed in the “Pathways to Work” Green Paper. The Government’s own impact assessment of the planned reforms to health and disability benefits suggests that they will increase child poverty. The Government have claimed that that will be offset by any increase in employment. Do you find this claim persuasive, or will these cuts become another driver of child poverty?

Tom Waters: An important part of the context here is that of the people who are on health-related benefits, only about a quarter of them have children. To a large extent, those who will be affected by these policies do not have kids, so it will not have any direct impact on child poverty.

The Government’s estimate is that overall poverty goes up by 250,000, of which 50,000 is child poverty. That is a relatively small change in child poverty. It is a tenth of the size of the effect of removing the two-child limit, for example. It is mostly worth thinking of this as affecting childless adults. Those numbers—the 50,000 and 250,000—are before accounting for any impacts on employment.

It is pretty optimistic to think that you would be able to get an employment effect from that that would more than offset 50,000. We do not have an estimate from the OBR yet about how much the increase in employment would be, but based on estimates from previous reforms, we are talking about policies that will affect potentially millions of claimants and the employment effects will probably be in the tens of thousands. It seems unlikely that that would be able to offset the direct loss of income from benefit cuts.

Mike Brewer: I agree with Tom that the changes to disability benefits will mean very large losses for some families, but there are not that many children in those families, so it is not the most important thing when you think about child poverty. You also asked about the employment effects. By coincidence, we have some research published this morning, which Tom obviously has not seen—that is fair enough—in which we tried to do what the OBR did not do and estimate what the employment effects would be.

Our number was about 100,000 more people in work, on the most optimistic scenario, thinking about the cuts to PIP and the changes to the universal credit health element. But of course a massive unknown in what the Government have set out is the nature of the extra employment support that they are promising. That has the potential to move that 100,000 number a long way if they were to invest or spend the money on the best possible employment support for people with ill health and disabilities.

At the moment, the Government have given us no details of that and the extra money is very backloaded towards the end of Parliament. The 100,000 figure that I gave is by the end of the Parliament. But if half the extra money for employment support is coming in the final year of the Parliament, we cannot expect that to radically transform the employment rate of disabled people by the end of Parliament, if you see what I mean.



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Professor Taylor-Robinson: There are a number of risks. There is a risk that the policies increase poverty, or that they have effects on health and wellbeing, and they may improve employment outcomes. We know that there is an intersection between children living in poverty and adults with disabilities. A third of all children in the UK live in a family that contains at least one disabled person. We also know that 44% of kids living in a family with a disabled person are likely to be poor. That intersection is important.

We know from the impact assessment that between 50,000 and 100,000 more children will be pushed into poverty as a result of the strategy, which is not great when you are trying to implement a child poverty strategy to do the opposite. Health Equity North—the organisation that I co-direct—has looked at where the cuts to PIP will fall. They predominantly take money out of the economy from northern areas where there are high levels of social disadvantage—the areas that have already been hit by the covid pandemic and austerity measures. In terms of levelling-up interventions, it does not look very promising in that respect.

My colleague Ben Barr, who presented at the Select Committee last week, has done previous work on the work capability assessment and other changes to welfare benefits that have restricted eligibility and focused on conditionality, which showed large negative mental health impacts: suicides, antidepressant prescriptions and cases of mental ill health. Another study that we published showed that the strategy did not move people into employment. Indeed, systematic reviews of similar strategies have shown that there is not very strong evidence that these measures have positive effects on people returning to the labour market. There are lots of risks inherent in what we are seeing with disability benefit cuts.

Dr O'Sullivan: I do not know if it will have a good or a bad effect on child poverty or on employment rates. What I do know is that the rhetoric around cutting benefits makes assumptions about why people are on benefits. It was briefly mentioned in the last session. Everybody wants a better life, everybody wants a fulfilled life, and everybody wants to achieve happiness. The idea of cutting benefits is suggesting that people are making bad choices.

We have consistently underserved communities for many generations, which has made them benefit dependent in some cases. To penalise that and suggest that that will increase their likelihood of moving to employment—I think we need to be careful about the language that we use and how we pathologise people who have been socialised into state dependency for many generations because of lack of opportunity. I would be concerned about what we assume about people.

There is an assumption also that poor people—or poor people like me—do not want a better life, that we want to stay on benefits, that we want to be served all the time. If I had known how wonderful it is to be educated and employed wonderfully and I could have chosen that, I would have



chosen it at any moment, but I did not have that choice. I just think we need to be careful about what we communicate to people when we talk about benefit cuts. The assumption is that they are on benefits because they do not want to be employed or they do not want to have a better life. I would be mindful of that.

Q24 Amanda Hack: I want to move back to education and the types of policies and interventions that have been the most important to help children in poverty remain accessing education. Could you give me a view on those policy measures?

Dr O'Sullivan: What changed my life was the education I received here. It was having teachers who were qualified, understood what poverty and trauma looks like within the classroom and were able to educate me with that knowledge. Early education is essential for people who are living in poor communities. Twenty hours per week at three to four years of age would be the ideal. We need to reform the funding formula and give more money back to the schools. When we were giving schools who were serving disadvantaged communities more money, we were having better outcomes in terms of education.

We need to make sure that no child is going hungry. All children on universal credit should get free school meals; we need to reinstate that. Reduce segregation in terms of admissions policies. Fund evidence-based practices within education. Put the best teachers in the worst schools. In an ideal world we would reduce poverty within the family—family and community is where we would restore—but that will take generations. The biggest place where a child spends their time, hopefully, if they go, is school. That is the place at the younger age where we need to do the most work.

We need to have outstanding educators in the most disadvantaged communities. What I mean by “outstanding educators” is that they need to have small class sizes, we need to ensure that they understand poverty and what it presents like—that when you are a naughty kid, you are a clever kid; it just means that maybe you are struggling with whatever is going on at home—and we need to restore pupil premiums. I definitely think that that worked. There is a lot of evidence that it works. Expand it to post-16. Those are some of my experiences.

Also, just allow teachers to care. One of the responses to me telling my story has been the overwhelming response from teachers who cannot care the way they want to for poor children, because they are restricted by the pressures within the education system because of the changes in the last 10 or 15 years. Allow teachers to lead and change and care within the school system.

A child just needs one good adult to place a light in them. That light guides them for their life and becomes an attachment figure. That is what I got. Mrs Arkinson—I will mention her—was the first, and then there was Mr Pickering, and then there was Ms Lockwood. We just need to make sure that our educators are allowed to do the work that they want to do



and that we get rid of the bad ones. I could tell you how to do that as well, but I probably should not.

Professor Taylor-Robinson: Building on what Katriona said, I spoke to all of the headteachers in Liverpool recently and we looked at some of the data on education. A life-course perspective to these things is clearly critical, because a lot of the damage to children's life chances, as we know, is done in the early years and it is related to poverty and the home environment. We are working on a study at the moment looking at the ages and stages data that is collected on all two-and-half-year-old children. We see children impacted by covid—more children having problems with communication and not achieving a good level of development. There is a cohort of kids coming through and there are large inequalities. That tracks into school readiness. We are seeing an increasing regional, north-south divide in attainment at different levels, including GCSE and A-level. We are seeing increasing educational inequalities.

The same issues that apply to local authority budgets apply to schools. We saw the biggest cuts to educational budgets in the most disadvantaged areas. We have submitted a study that looks at the natural experiment of the change in educational funding and how that has impacted GCSE results in England. We show an effect of those cuts to funding, which has particularly hit large secondary schools in places like Liverpool. Big budget cuts to schools have affected educational outcomes. Teachers want to improve children's life chances, but they are struggling because of the poverty outside the school doors. The two big pressures that teachers speak about are the increasing spend on special educational needs and mental health problems, which are related to levels of child poverty. That means that we need funding proportionate to need across the life course to support children's development, first in Sure Start and early years and then in the school system.

Q25 **Helen Hayes:** Professor O'Sullivan, I have read your book, and in it you write very powerfully about the teachers, who you have mentioned, who really saw you as a human individual and did their job in helping you and providing what you needed, and you write about some other professionals along the way who were transformative in the impact that they had on your life. But you also write in a devastating way about some professionals who did not see you as a child in need. You write about the ambulance drivers who attended your father when he was overdosing, who looked at you and judged you as a child rather than seeing you as a child in desperate need. What changes are needed to ensure that professionals across the board are doing the best that they can, and playing the roles that they need to play, to help children in poverty?

Dr O'Sullivan: As I wrote in my book, my parents were heroin addicts. The two of them were poor. My mam was poor; her mam was poor; her mam was poor before her. Poverty reproduces itself like privilege does, so there is no blame. Heroin addiction was their management of the hurt. It is a mental health difficulty, not a bad choice—just to say that. My hurts during my childhood were more from the services and the supports



outside of my home than my parents' addiction: policemen holding up my mam's dirty underwear in my house and saying, "Look at the state of your mother"; ambulance men roughing my dad when he had overdosed, ignoring me at seven, telling me my dad was a dog; or teachers refusing to teach me because I did not sit still with my fingers on my lips as you were supposed to.

As an adult who woke up through education, I am surprised at how little people know about poverty and what it actually looks like in human beings, especially people in frontline services. There is a lack of training for police, for ambulance men—for you, policymakers—on what real poverty looks like and how it manifests. It manifests in difficult people. We do not follow rules. We are not easy to deal with. I would fight you—not any more. The reality of meeting services that did not understand that we were not making bad choices was really harmful to me and to my family.

The harm was that it made it very difficult to access services when I needed them. You are all kind of the same: modest people, privileged—you know, people who work in services. There is the same kind of middle-class group that works in services, which is wonderful, but because of the negative experiences it made it very difficult for me to access services. The services that I would access were community services, because they were a bit of me and I trusted them more than I did people like you—well, maybe not all of you, but that was the truth.

I would suggest that it is compulsory for people in services and supports to be trained and understand what poverty looks like. I am talking about long-term, intergenerational poverty; I am not talking about situational or employment poverty. I am talking about the 5%—the ones of us that use the services all the time, that are in prisons, in social services, in care. That would be the other thing. The most important thing is to educate people.

The other thing that really shocked me as an adult is how we allow teachers, particularly, to continue to teach when they are not very good and they are actually harming young people. We are kind of complicit in that. I would be calling for us to ensure, especially in schools with high concentrations of disadvantage, that teachers understand poverty and are able to care and be kind and understanding within those circumstances.

One bad teacher can rob you of school, and it has done for many of my friends. I was very lucky that the couple of bad ones I had did not steal it from me, but I we definitely need to educate people on poverty and make sure that, if they are on the frontline, they understand that we are not bad people who are making bad choices. That would be really important.

Chair (Debbie Abrahams): I will bring in Caroline Johnson. I am conscious that we have just under quarter of an hour before we are due to finish, so succinct questions and answers, please, colleagues.

Q26 **Dr Johnson:** You have talked about the importance of education and



giving everyone an opportunity to achieve their best in life. The attainment gap fell quite considerably between 2010 and 2020, but since the pandemic, perhaps because children's access to education was quite different during the pandemic and the school closures, it has started to rise again. How can the Government best get on top of that so that the attainment gap reduces and people get the best opportunity to thrive?

Professor Taylor-Robinson: We have been doing work on children not in education, employment or training—so-called NEET. It builds on work that I have been involved with in Denmark. If you will allow me to describe what we did in the Danish population, because there is linked data in Denmark, you can look at all the types of experiences that children face as they are growing up and then outcomes in later life.

In the Danish population we were able to characterise children's experience of poverty and other adversities, and then we looked at how that affected, first, survival. We had a paper in *The Lancet* showing that child poverty affects survival. If you are just transiently exposed to poverty it increases your risk of death. We have gone on to do studies showing impacts on chronic disease over the life course.

There are two papers out recently in *The Lancet* and in *Social Science & Medicine* that show those same adversities drive high levels of social welfare use and NEET and inequalities in educational attainment in the Danish population. That evidence in that population shows that if you want to address mental health problems, welfare dependency and young people not transitioning into the labour market, you need to address trajectories of poverty and the adversity that comes with that poverty.

We have done the same in UK data and we see the same thing. We have done a study looking at NEET in the Millennium cohort study and we show that children growing up in poverty who also experience family mental health problems have five times the odds of being NEET in the UK population. Again, if we want to address the tidal wave of mental health problems that we are dealing with at the moment that affect educational outcomes and transition into the labour market, the data is crystal clear: we need to address child poverty, and we know exactly how to do that.

Q27 **Dr Johnson:** Can you tell me a bit more about the attainment gap? We saw it fall consistently over 10 years between 2010 and 2020 up until the pandemic. What do you think drove that change and how do we reverse the trend since the pandemic for the attainment gap to widen?

Dr O'Sullivan: There have been cuts to disadvantaged schools in recent times, in the funding for disadvantaged schools and the reduction of the pupil premium funding. Maybe what we are seeing now are the consequences of that. The rise from 2010 to 2020 might have been because of investment prior to that.

School attainment is just one piece of a really big puzzle. Definitely with covid, we are seeing high rates of absenteeism and school refusal; that is a horrible term. Sometimes that is an adaptive response for young



people, because they are not necessarily getting their needs met within the education system.

The attainment gap has always been an issue. We have never reduced it and there has always been a gap between the rich and the poor in terms of outcomes. Ideally, we need to make sure that schools are places where students want to go and learn, and continue to learn, and where they are supported to do that and the school is supported to do it really well.

That there is really good evidence of what works in disadvantaged communities around increasing attainment. The Sutton Trust, for example, has lots of evidence that shows how you can increase attainment and reduce the distance. For policymaking we need to use evidence-based practice to try to implement what is working in some communities and transfer it across all the schools where the gap is there.

I am also thinking about where you can go afterwards. Sometimes the supports stop post-16. What is the value in reducing the gap if the opportunities for social mobility afterwards are not there for young people? I think that the cost of higher education might be another issue in devaluing attainment, because where can you go afterwards with this big cost to progress elsewhere?

Q28 Chair (Debbie Abrahams): Professor Taylor-Robinson, I came across this quote from Margaret Whitehead and Göran Dahlgren: "No law of nature decrees that children of poor families should die at twice the rate as children born into rich families." That is from 2006. In terms of these health inequalities, we have known about that for a long time, but how has that changed with the increase in child poverty in recent years?

Professor Taylor-Robinson: It is clear that inequalities have mirrored the changes that we have seen in spending. We have done a number of studies showing the impact of austerity on a whole range of children's outcomes and it has been devastating. One of the first studies to show a causal effect of changing child poverty on infant mortality was one that we led. It was published in *The BMJ*. It showed that there had been continuous reduction in infant mortality and reductions in inequalities that were related to the English health inequalities strategy, and then they reversed in about 2012-13 and we saw a rise in infant mortality and a stagnation subsequently. That was caused partially by the rise in child poverty. We calculate there were 600 infant deaths in just over a three-year period as child poverty rose.

We have fallen down rankings when it comes to children's mortality; we are towards the bottom of the OECD infant mortality rankings. This report that we did looks at the latest data on infant mortality and shows that we have seen 14 years' stagnation of the inequalities gap in infant mortality. That is just one health outcome.

To summarise what we are seeing at the moment for children's health, we are seeing rising inequalities in infant mortality; in life expectancy at birth; in healthy life expectancy; in the modern epidemics of childhood—



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obesity and child mental health problems—in maternal mortality, so women dying in pregnancy; in children being taken into the care system; in educational attainment; and in vaccination uptake. It is a sorry story, and we can track many of those rising inequalities back to rising poverty and cuts to preventive services that support children.

That is not to mention the trends that we have seen in adult health, where, pre-pandemic, we saw stalling life expectancy and life expectancy going backwards, particularly in women in the poorest areas. Again, we have shown that that was strongly related to austerity measures.

Q29 Chair (Debbie Abrahams): There has been lots of discussion of NEETs—young people not in education, employment or training. Do you want to comment on the relationship with poverty and particularly young people's mental health?

Professor Taylor-Robinson: Building on the earlier answer, the changes to disability benefits are being driven by the large rise in young people with mental health problems. That is what is concerning the Treasury. That same population is the population that we study in the Millennium cohort study, so those young people are 25 now. Millennium is a nationally representative study, and we can clearly see the impact of poverty and adversity on the risk of all sorts of outcomes for children in Millennium. We have done a range of studies, and we have characterised the main adversities that children face growing up in Millennium. Forty per cent of kids are exposed to either persistent poverty or persistent parental mental health problems or a combination of both.

Chair (Debbie Abrahams): Forty per cent?

Professor Taylor-Robinson: Twenty per cent of kids in Millennium are always in poverty, 10% are always exposed to parental mental health problems and another 10% are exposed to both. It is those adversities that drive, for example, mental health problems. We show that kids in the group who are exposed to poverty and parental mental health problems are eight times more likely to develop mental health problems themselves.

Then we have looked at NEET, and again that is strongly related to those adversity trajectories. We calculate population-attributable fractions around the estimate. If you believe the analysis, it suggests that you could reduce the proportion of children who are NEET by about half if you reduced levels of poverty and adversity.

The Danish studies that I have talked about show clearly in the Danish population that it is poverty and childhood adversity that drive mental health problems in children, and that partially explains why those young people do not transition into the labour market. They are the same young people who have high-intensity use of the social welfare system, healthcare system and criminal justice system. This is a really important body of evidence.

Dr O'Sullivan: It was mental health supports that saved me. I was given lots of opportunities to move out of poverty. I know that this is not about



my story, but it was only when I was able to engage in free, local mental health supports that I was able to take the opportunities to engage in the wonderful practices and policies that were on offer to me when I was looking to get better. Mental health supports are fundamental.

Employment, education and finances are not the only thing in this. Poverty is a trauma within itself. When you live in long-term stress, it affects your capabilities mentally. It changes your biology. We know that in psychology. Therefore, it is really important that we offer supports and services and policies around mental health that go hand in hand with any employment or education policies.

Chair (Debbie Abrahams): Mike or Tom, do you want to comment?

Mike Brewer: I cannot think of work related to child poverty but a year or two ago we finished a two-year programme of work looking at young people in the labour market and mental health and showing all the connections. Yes, of course, mental health is getting worse and worse for 18 to 25-year-olds and, yes, there is a strong link between that and their labour force experience, but what struck me the most was when we did some of our qualitative work with them and went to talk to young people with mental health problems who were not working. So many of them went back to their school years. This was not to do with covid. These were people who were hit by covid when they were young adults; their schooling was pre-covid, and so many spoke about the fact that their mental health problems began when they were in school and they were not addressed properly or satisfactorily. When you do the transition from being a dependant to an adult, your ability to access mental health services becomes even harder. Schools have a great deal of work to do in providing mental health support, which can help prevent the next generation of NEETs.

Tom Waters: One important aspect is that we have seen an increase in people getting disability benefits for mental health reasons across the board. You see it among younger people all the way up to those of state pension age; we have seen a notable shift up. That suggests that there is something broader going on. This has all happened over a very short space of time—just a few years. The correlations between young adults' outcomes and where they grew up—their childhood circumstances—are very well established. One thing that makes it very difficult for policy is that it is very difficult to separate those correlations out into how much of it is causal. That makes it hard to know what the right direction is for policy.

Q30 **Caroline Voaden:** Can I just say, Katriona, how powerful it is to sit here and listen to your testimony? It makes such a difference to hear from somebody who has actually lived this. You have made those changes in your life, and it is really good for us to learn from your experience.

Dr O'Sullivan: Thank you.

Caroline Voaden: We know that children growing up in poverty are much more likely to be taken into care. You have written in your book



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about the impact of your parents' substance misuse and mental health issues. This is a huge question, but in a nutshell, what do you think is the most effective way that the system can support families that are in entrenched poverty?

Dr O'Sullivan: Have you got an hour—or 10? I had a really wonderful experience in care. It was one of the best experiences of my childhood when I was taken into care. I think that I should have been kept in care, and one of the challenges that I have as an adult is why I wasn't. I think we have swung a little bit more the other way now; maybe people have been taken into care too easily. So, obviously, family support and community support.

One of the flaws with all of poverty work is the charitable mindset that goes along with it, as if we need to be saved. When I went to Trinity College I was taken to the National Gallery to learn about art because I needed to be culturalised into the middle-class way. No one recognised that there was skill and talent in my community. Poverty, if you do not die from it, actually forges talents and a type of skill that is not always evident. I definitely think how we talk about poverty, how we consider people who are poor, the language we use about being saved or taken out of our communities, needs to be challenged, because we are great people and I had great role models. That is about, from a policy point of view, how we pitch this work.

Having some people in my community who I could access and go and talk to about what was happening with me in an honest, trusting way was really important. I think that would have been helpful to my mam as well. Good treatment and medical support, and not having to wait for rehab if you are a drug addict, or having to wait for medical supports, is important. Generally, a person who is addicted because of poverty will ask for help, especially a mother. We have such long waiting lists and such inadequate services for people when they do ask for medical help, especially for addiction, and that can be problematic.

I had one adult who really believed in me, and if we could provide that to children and adults, whether it is through community work, family hubs, Sure Start or whatever it is—if we could just think about making sure that there are beacons of light across people's lives—it would really help. I would always have responded to people from my community, who were in my community.

The loss of adult education and community investment has been a big gap for someone like me in that 5%. You have to think differently for the different types of poverty. Financial poverty is different from poverty of value. My values differed, so I was not going to respond to an activation programme. My hand needed to be held, and I needed to find someone who I trusted and some who believed in me.

I do not know if that is a good enough answer, but in all the supports and services that we have, we need to have good people who believe in our potential, who recognise that we are talented and excellent, who do not try to middle-class us and change us.



Caroline Voaden: Grassroots funding in communities.

Dr O'Sullivan: Community funding is a big thing. With the cut in community funding, I would not be here. I would not have been able to change my life today. If I had asked for help today, I would not be here—this great person that I am, this professor, published in *Nature*, £3 million in funding. I would not be here, because the supports and services have been completely cut. Community, childcare, free education, second chances—someone mentioned that earlier. The chance to fail.

I know I am waffling, so I will finish on this. I always think about how privileged children get the opportunity to try things and fail. My son is trying at university and he does not really like it, and I am going to support him to try something else. We need to be affording the same opportunities to kids who are poor, and we need to be doing it in a meaningful way where we know that there is talent in that pool of people and giving them opportunities. One good adult.

Q31 **Caroline Voaden:** Do you think all teachers should be trained in trauma?

Dr O'Sullivan: It is very buzzword-y, “trauma-informed”. I think we need to ensure that our teachers’ values are good and that they align with what we want, and that is an issue. We do not always recruit teachers based on their values. The Nordic model of recruiting teachers is excellent. They got rid of private education and changed how they recruit teachers, and that reduced the distance between the rich and the poor. The rich did not go downwards; the poor went upwards. I definitely think that we need to educate teachers about poverty, but I do not like the buzzwords like “trauma-informed”. It needs to be real and meaningful.

Professor Taylor-Robinson: We showed that rising child poverty caused 10,000 extra children to enter care between 2015 and 2020. That is again published in *The Lancet*. These are causal effects and the short-term cost of that just for local authorities was £1.4 billion. It is the No. 1 cost pressure on local authorities. You could avoid all of that by reducing child poverty. That pays for half of getting rid of the two-child limit and it shows the false economy of running a society with high levels of child poverty.

Q32 **Johanna Baxter:** I have been really moved by your testimony, Katriona, and in particular what you said about teachers being able to believe in kids. It was Dr Vincent Oates for me—thank you. What measures and indicators of poverty have been the most useful in work to reduce child poverty? Who wants to give me a very brief response?

Tom Waters: This gets to the point of what we really mean by poverty. We often talk about income poverty, and one natural reason to do that is that it is comparatively easier to measure. That is what New Labour’s child poverty targets were based on. There is a good case for that. Income captures a lot of things. Obviously, it is not everything, but it is not possible to have a measure that captures absolutely everything.

One thing that it is worth thinking about is that, on the headline poverty measures, something of the order of a third of children are in relative



poverty. You could move a bunch of people from just below the poverty line to just above, and potentially get that number down quite a bit, but in real terms it would not be massively affecting the lives of those children. Their income would have only gone up by a small amount. It is worth considering deep poverty as well.

In particular, thinking about scrutinising the Government on their strategy, we certainly would not want to be in a position where the Government were gaming that entirely arbitrary threshold. There is nothing magic about the poverty line; it does not have any particular grounding. It is worth not just considering those headline measures, but thinking about deeper poverty too.

Q33 Caroline Voaden: I will be very brief with the big question at the end. What is your view of the Government's current child poverty strategy, what areas should we be focusing on as a Committee and, given the high levels of child poverty, how likely is it that the Government can deliver significant change in the short and long term? It is a huge question.

Mike Brewer: Well, the Government do not yet have a child poverty strategy. They are still thinking about it, and they will tell us the answer later this year, so I can duck that question. I think that the Ministers involved have a very tough task. Our modelling shows that relative child poverty is set to rise over the Parliament, if the Government do nothing. That is essentially because of the cuts to social security that are baked into the forecasts, whether they come from not uprating local housing allowance or the continued roll-out of the two-child limit.

I think they have a very tough task ahead of them. What we have seen from how the DWP and the Treasury seem to have been negotiating behind the scenes about welfare cuts suggests that it will be difficult for the DWP to persuade the Treasury to spend much money on the child poverty strategy. The situation seems fairly bleak at the moment.

Tom Waters: One smaller but potentially quite important thing is that we might not know if they have succeeded. If we are talking about income poverty, the way in which that is measured is from a survey called the family resources survey, and unfortunately the quality of that survey—the number of people responding to it and the representativeness of those responding to it—has got much worse since the pandemic. At the moment we do not have a very clear idea of what child poverty is. If that continues, we simply will not know if they have met their targets or not.

Professor Taylor-Robinson: As a child public health doctor, it is baffling to me that we let an exposure as toxic as child poverty wash over a third of kids. It makes absolutely no sense from a public policy perspective. I am optimistic. We know exactly what we need to do, which is to get rid of the two-child benefit cap and uprate child benefits. It is clear what needs to be done to reverse that, which will reap huge benefits for society. The consequences of not doing that are increasing mental health problems, welfare dependency and all of the things that we have discussed. The stakes are very high, but I am optimistic, if the



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policy goes large. Ambitious social transformation and achieving those missions will cost a little bit of money.

Caroline Voaden: Invest to save.

Dr O'Sullivan: I am really grateful to be here. It shows that you are meaningfully considering what happens next in terms of child poverty, so I am happy to say that I am glad that you are doing that. We need to think about income and the measures for today, but social mobility is also a really important indicator, so it is how we are transforming the future of people's lives as well. If I was thinking about success I would be measuring that.

I am a geeky academic and we have lots of measures of poverty that do not just look at blunt income. I think that income is a very small part in some cases. It adds stress, but for me it is values and your ability to access opportunities. If I was looking at measures of success I would be looking at school completion, progressing to higher education—Russell Group higher education, not necessarily any higher education. I would be looking at skills and access to skills, high-status professional development and high-status employment opportunities for people who are coming from poorer communities. I would definitely be looking at social mobility.

What we want is the eradication of poverty. We do not want just to reduce it now and increase income for this generation; we want the future of people to change. We do that by implementing education, employment skills, financial and health supports, and mental health supports. I would advise you to look across the board and include education and employment skills in your plans, and include social mobility as a metric for the future, rather than just the blunt indicator of at risk of poverty or in poverty.

Chair (Debbie Abrahams): Thank you. That concludes our rather long session this morning. It has been incredibly valuable. Thank you so much to all of you for providing evidence to us today.