

## Written evidence from the British Psychological Society (CPM0036)

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Under its Royal Charter, the objective of the British Psychological Society is "to promote the advancement and diffusion of the knowledge of psychology pure and applied and especially to promote the efficiency and usefulness of members by setting up a high standard of professional education and knowledge". We are committed to providing and disseminating evidence-based expertise and advice, engaging with policy and decision makers, and promoting the highest standards in learning and teaching, professional practice and research.

The British Psychological Society is an examining body granting certificates and diplomas in specialist areas of professional applied psychology.

	<p><b>The Committee would like to hear your views on the following questions. You don't have to answer all of the questions. You can respond on behalf of an organisation, or as an individual.</b></p> <p><b>Measurement and targets</b></p> <p><b><u>Measurement and targets</u></b></p> <p><b>How should child poverty be measured and defined?</b></p>
	<p>We would support the new definition of poverty as proposed by the ongoing work of the Social Metrics Commission (see: <a href="http://socialmetricscommission.org.uk/MEASURING-POVERTY-SUMMARY-REPORT.pdf">http://socialmetricscommission.org.uk/MEASURING-POVERTY-SUMMARY-REPORT.pdf</a>). The clear strength of their measure is that it includes inescapable costs that many families face, such as the extra costs of disability, estimated to be at least £650 a month, and costs of childcare, which has only increased in recent years. Such a measure and definition that includes inescapable costs recognises that poverty is not simply a choice, or one emerging from poor budgeting, but a lack of adequate resources to meet outgoing that cannot be avoided.</p>
	<p><b>The measures of child poverty changed in 2016. What has the impact of those changes been?</b></p>
	<p>Please see Disadvantages section below.</p>
	<p><b>What were the advantages and disadvantages of having a set of targets for reducing child poverty?</b></p>
	<p>Strategic progress was made via increased investment in Child Benefit and Tax Credits.</p> <ul style="list-style-type: none"><li>- Child poverty fell by over one million (REF 1)</li><li>- Debt and deprivation fell and child wellbeing improved on 36/48 of the Organisation for Economic Co-operation and Development's (OECD) indicators.</li></ul>

- The largest fall of in child poverty (UK) in the whole OECD occurred between the mid-90s and 2008 (REF 2)
- There was an increased spending on resources for healthy standard of living (vegetables, children's clothes + books) and a decrease of spending on illicit substances (tobacco, alcohol (REF 3)
- Parental employment rates rose from 45 – 57 per cent to present rate of 70 per cent (REF 4).
- The education attainment gap began to close (REF 5)
- Official government target to boost Child Tax Credits post-2008 financial crash inspired international Governments to follow suit (REF 6).
- During the period 2000-2007 absolute poverty fell 8 per cent when using the 2000's measure (REF 7)

**Advantages**

- When backed with both genuine political intent tangible changes were made. Setting targets in policy to end far-reaching and layered societal issues are a first step of utmost importance that define the desired end points of action, crucially helping to display the effectiveness of proposed models and setting a direction for actors to successfully drive these changes with minimum compromise to the original intentions.

**Disadvantages**

- Setting targets can lead to an inherent trap of driving policy only in the short-term, distorting policy choices made from a bias towards the proposed models that provide these more tangible results quickly.
- However, the definitions of concepts such as 'poverty' change over time and are debated across different institutions, making them harder to quantify, and hence certain models may not have been prioritised as they should when looking retrospectively. As a result, future targets should ensure a largely intersectional perspective to account for the many links between different sub-groups of both quantitative and qualitative data that will undoubtedly have an impact. Undoubtedly, time is a constraint in this matter, as there are indeed endless sub-groups of data that a research team could incorporate into their projections which ultimately leads crucial decision making to stall and issues to persist.
- Although the health inequalities strategy failed to reach its stated target, the outcomes of complex interventions can often emerge in time. It is now clear that inequalities in life expectancy and child mortality between rich and poor areas narrowed (REF 8).
- There were also reductions in inequalities for key determinants of child health: unemployment, child poverty, housing quality and educational attainment (REF 9).

**What has been the effect of removing from law the targets in place between 2010 and 2016?**

- Austerity has seen a social security budget decrease of £35 billion today compared to the budget of 2010 (justified as 'deficit deduction'), including 85% savings from cuts to benefits and public services. (REF 10)
- UK Child poverty number depends on benefit system to keep the national statistic as having a 'middling', rather than 'high' rate of poverty when compared to EU figures, and so this number is sensitive to changes in the benefit system (REF 11). As a result, these cuts led to a foreseeable and drastic increase in UK child poverty figures on international tables.

- With the stagnation of annual pay increases (largely affecting parents in poverty) and the incessant increase of housing costs over the past decade, the median CPAHC (Children in Poverty After Housing Costs) poverty gap has increased by approximately 30% from 2012/13 – 2017/18 (REF 12)
- By 2023/24, the CPAHC number is anticipated to reach 4.8 million, a record high. (REF 13) More worryingly is that this figure assumes no further social security cuts and was estimated before COVID-19 presented itself as a national concern. Given the current circumstances it is highly likely that the CPAHC number will exceed far beyond 5 million children in poverty.
- 2017/18 statistics saw the first increase of absolute poverty after year on year declines since 2000 (REF 14)
- £36 billion in social security budget cuts has left the bottom 20 per cent of families losing on average 8 per cent of their incomes (REF 15). This is harder hitting considering these families did not have enough to begin with, and are the least equipped to deal with such reductions.
- Policy changes such as the benefit cap and two-child limit have led to a disproportionate increase in child poverty among ethnic minority groups. (REF 16)
- Since 2010, ring fenced funding for early years services was removed and local authority budgets have been drastically cut. Increased commitments on childcare meant there was even less funding available for children’s centres (established from the ‘Sure Start’ programme of the late 90’s) which overall has led local services for families to disappear (REF 17)
- Social security (including child benefit) was protected by the Labour government after the financial crash in 2008. However, since 2010 the Coalition and Conservative governments have reduced child benefit in real terms, meaning it has now lost 23 per cent of its value (REF 18)
- Data has shown that Sure Start spending per child eligible has almost halved from 2011 to 2018 (REF 19)
- Children in temporary accommodation rose from approximately 70,000 in 2011 to over 120,000 in 2019 (REF 20)
- Since 2010, the bottom 10 per cent by income have lost 11 per cent – by far the most of any group. Families with children in this group in many cases lost 20 per cent of their household income. (REF 21),

**What is the impact of child poverty and how can it best be measured?**

- Quantitative and Qualitative analyses find that children as young as eight are aware of the stigma of being poor, which shows itself in bullying amongst peers, for being from a lower income family. (REF 22)
- This stigma has also extended from adults such as in school environments, manifesting in scenarios such as the children in question being provided smaller meals due to prejudices of them being in recipient of free school meals. (REF 23)
- Children from lower socio-economic groups are over-represented in lower sets in school environments (REF 24), allegedly due to “behaviour” (REF 25)

	<ul style="list-style-type: none"> <li>- A child born in the most disadvantaged tenth of areas of the UK can expect to live around 10 years less than a child born in the most advantaged tenth of areas. (REF 26) The gap increases to almost 20 years when we consider years lived in good health, so-called 'Healthy-Life expectancy' (REF 27)</li> <li>- Numerous studies have shown that child poverty is toxic for child health (REF 28).</li> <li>- Data from the Millennium cohort study (REF 29) found that persistent poverty tripled children's likelihood of having mental health problems in adolescence, and doubled the likelihood of being obese or having a chronic illness.</li> <li>- Predictably, we have witnessed a great leap backwards for child health in the UK (REF 30). Infant mortality is on the rise mostly in poor areas. (REF 31) Improvements in life expectancy at birth have stalled, and life expectancy is now going backwards (REF 32). These demographic changes are highly unusual and deeply concerning: infant mortality and life expectancy at birth are sensitive indicators of the overall health of societies, and act as an early warning system for future adverse trends.</li> <li>- There is evidence that child poverty is a key determinant of the risk of children experiencing abuse or neglect and subsequently entering social care. (REF 33)</li> <li>- Poor housing conditions can lead to a 25 per cent higher risk of severe ill health and disability during childhood and early adulthood: meningitis, asthma and slow growth, a greater chance of mental health and behavioural problems, lower educational attainment and a greater likelihood of unemployment and poverty in the future. (REF 34)</li> </ul>
	<p><b>What links can be established for children between financial hardship, educational under-achievement, family breakdown and worklessness?</b></p>
	<p>No comment.</p>
	<p><b><u>Joint working</u></b></p> <p><b>How effectively does the Department for Work and Pensions work with other Government departments, particularly the Department for Education and the Treasury, to reduce child poverty?</b></p>
	<p>No comment.</p>
	<p><b>How effectively does the Department for Work and Pensions work with local authorities and with support organisations to reduce the numbers of children living in poverty and to mitigate the impact of poverty on children?</b></p>
	<p>No comment.</p>
	<p><b>What would be the merits of having a cross-government child poverty strategy? How well has</b></p>

## this worked in the past?

The government must commit to developing a comprehensive, cross-departmental Anti-Poverty Strategy. In doing so, policy makers and strategists should take a systemic, structural and psychologically informed approach to addressing the foundations of poverty that seeks to increase access to societal and community resources to create flourishing families and communities.

The anti-poverty strategies in Scotland and New Zealand have worked to good effect. For example, see <https://www.gov.scot/policies/poverty-and-social-justice/latest/> and <https://childyouthwellbeing.govt.nz/resources/current-programme-action>

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