



# **The Families at Risk Review**

## **Implications for tackling complex disadvantage**

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## Why we did the Review, what we found out, what was done about it, ongoing dilemmas

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- Review commissioned by Number 10 in 2007
- Purpose to investigate the nature of families who had not been helped by the wide range of family and social policy reforms since 1997:
  - Who are they
  - How many
  - What are their problems
  - What can be done about it



## A short history of public service reform.....

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- 19<sup>th</sup> century clean water, for everyone, and everyone gets the same
- 20<sup>th</sup> century universal NHS: for everyone, but based on clinical need, style of delivery same for everyone
- 20<sup>th</sup> century education: for everyone, but structured around 'talent', nature of offer determined by the State
- 21<sup>st</sup> century childcare: co funded, flexible, designed in collaboration with benefit system

**All these reforms were largely successful. But a significant minority still missed out.**



## Why haven't we cracked the problems of exclusion

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Inequality gaps widen as policy success for the many leaves a few even further behind

- Even with the recession, most people in Britain are healthier, wealthier, and wiser (?) than thirty years ago
- Successive successful policies have left behind individuals and families with increasingly complex, inter-related and persistent problems
- Public health messages and policies that work for the many, still miss some; need to address a highly segmented market; a more nuanced approach to targeting



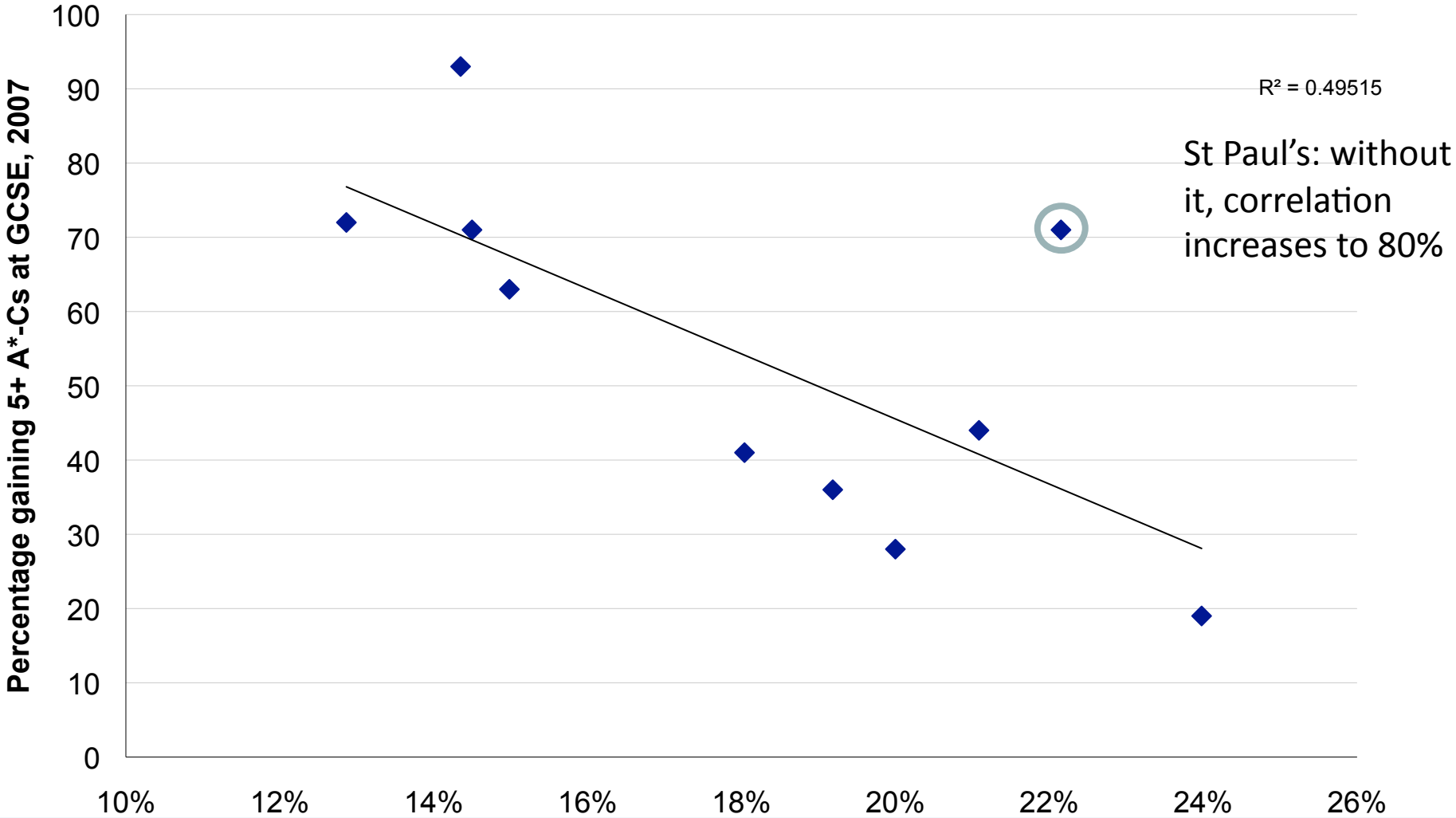
## What we know about disadvantage and transfer of disadvantage

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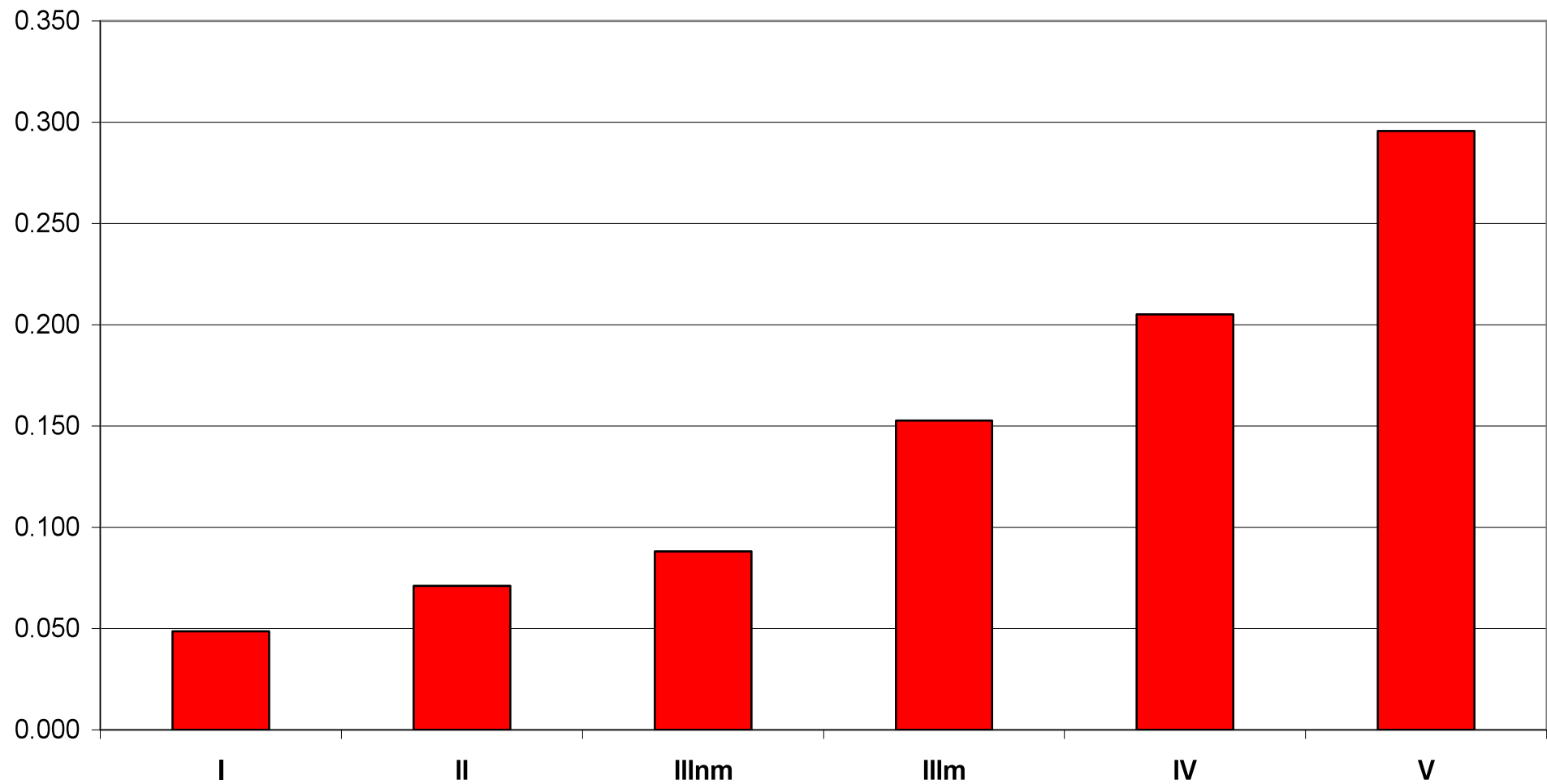
- Inequalities interact with each other: poor mental or physical health in childhood leads to poor educational outcomes, leads to poor employment prospects, leads to poor health in adulthood
- Clear gradient, disadvantage not only in the bottom quintile, but very bottom 2-3% characterised by complex and inter related problems
- Children fall in and out of risk during childhood; stuff happens
- Disadvantage has negative impact across generations



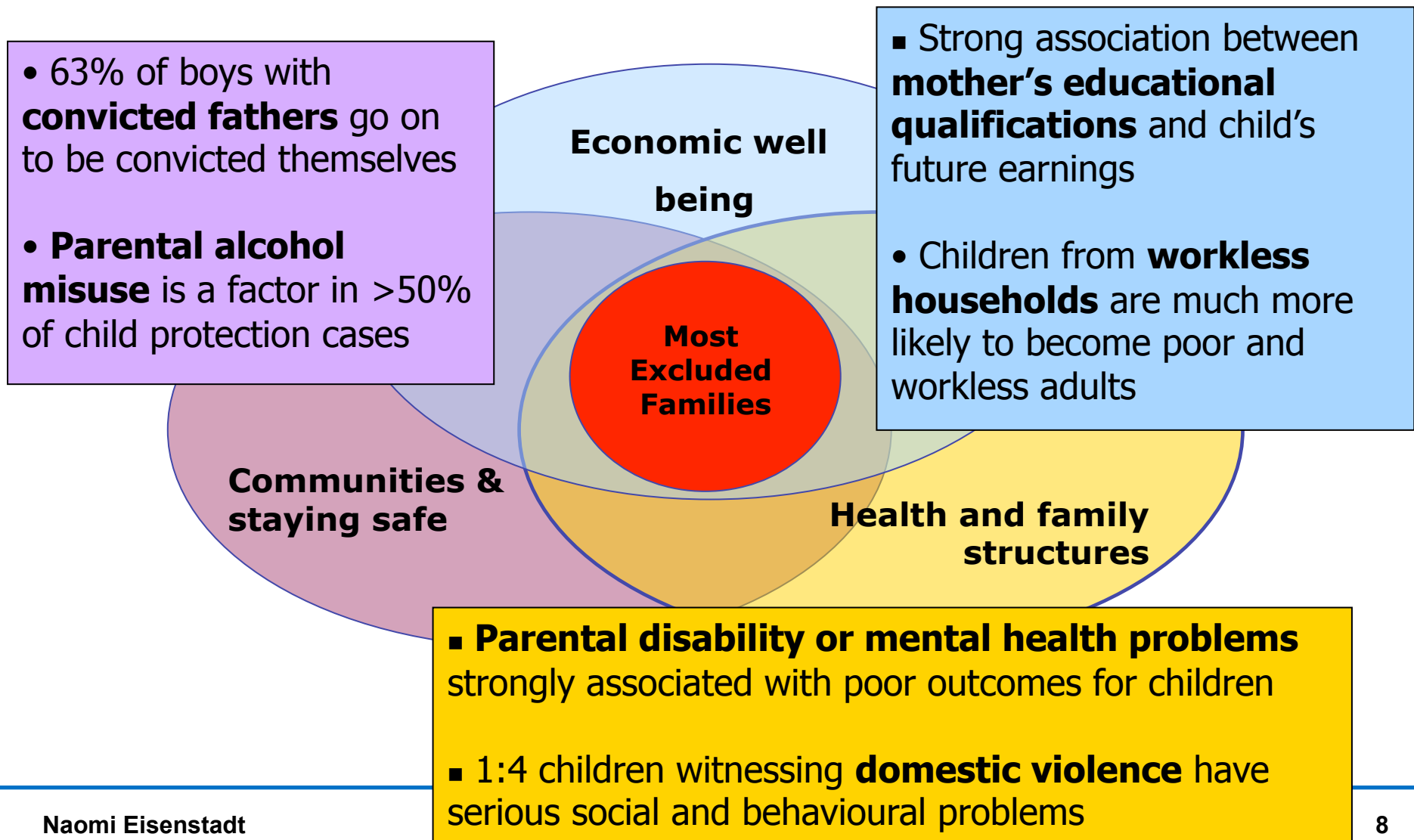
# Interrelationship: health and education inequality



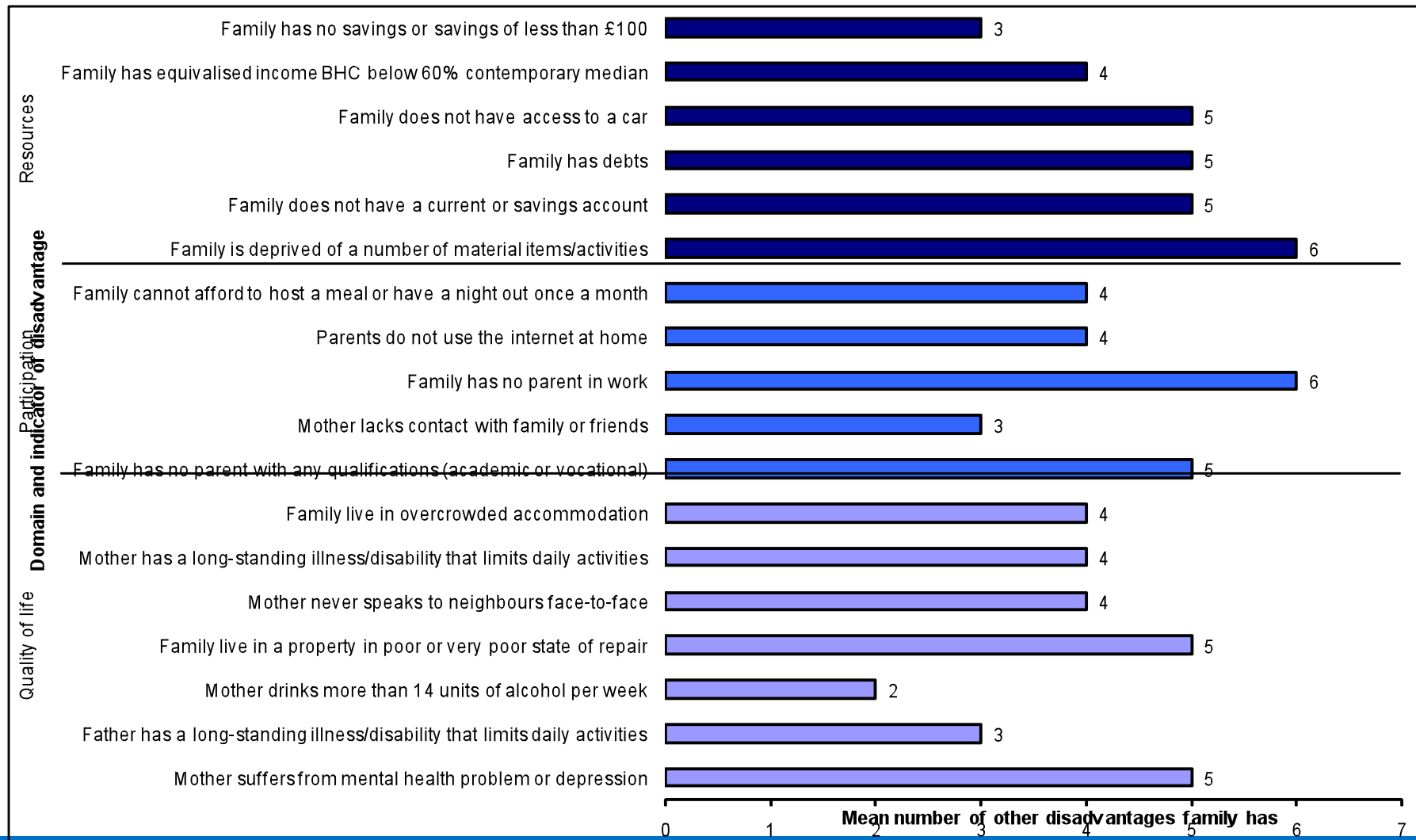
## Probability of multiple deprivation at 30 years, by birth SES, 1970 Cohort Study



# Most risk factors for poor outcomes relate to adults in the family



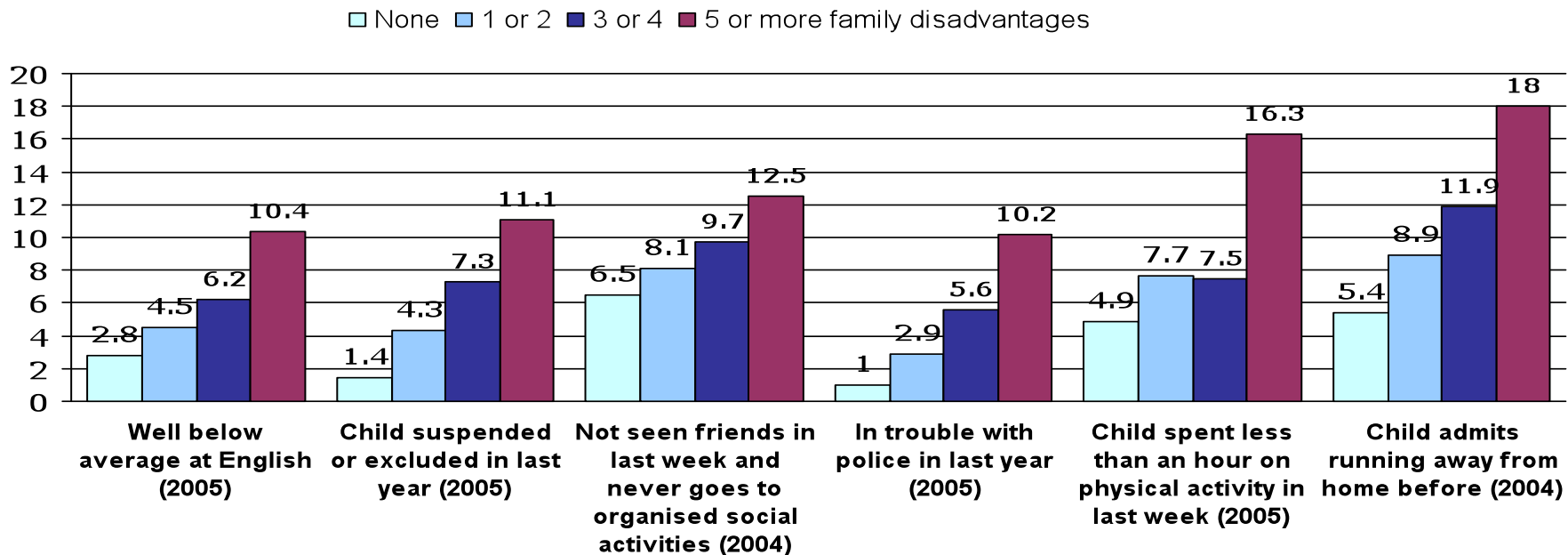
## How disadvantages clump together



# Children from families facing multiple disadvantages are at greater risk of a range of negative outcomes

7 Key disadvantages that  
In combination lead to poor  
outcomes For children

- Worklessness
- Poor housing
- Mother or father has no qualifications
- Mother has mental health problems
- One adult with long term disability or illness
- Below 60% median income
- Cannot afford a number of food and clothing items



## Significant developments in children's services and in adult services, but no coherent in approach; Service integration for children created new silos

### ✓ Children's services

#### Investing in the individual child

- integration of children's services
- Investment in education
- Expansion of early years provision

### Opportunities and outcomes for children and families



### ✓ Parenting support

#### Promoting effective parenting

- Increased investment in parenting support
- National Academy of Parenting Practitioners
- Expansion of Family Intervention Projects

### Adults' services ?

- Do adults' services recognise and respond to the parental and family roles of their clients?
- Are we exploiting the opportunities to tackle the parent-based drivers of poor child and family outcomes?

## The Role of Government: supporting parents and parenting; critical to have mix of universal and targeted approaches

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### Reduce pressures

- Rights and legal protection
- Financial support
- Support in kind
- Access to maternity and paternity leave
- Flexible working and flexible childcare
- Targeted benefits

### Enhance capabilities

- Information and guidance
- Skills and training
- Intervention

#### All families

- Before and after birth, midwife and health visitor support,

#### Some families who seek help

- Parenting initiatives

#### Highest Risk Families

- Family Intervention projects
- Family Nurse Partnerships

**Intervening to safeguard children**



# Think Family: The key characteristics

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## 1. No wrong door

Contact with any service offers an open door into a system of joined up support

## 2. Look at the whole family

Services working with both adults and children take into account family circumstances and responsibilities

## 3. Build on family strengths

Practitioners work in partnership with families recognising and promoting resilience and helping them to build their capabilities

## 4. Provide support tailored to need

Tailored and family-centred packages of support that knit together relevant interventions are offered to all families at risk



## Challenges to delivery of this approach

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- What changes do we need in the workforce to make no wrong door really work?
- How do we deal with the sometimes genuine tensions between child and adult best interests?
- How do we make 'joining up' work at the front line without impossibly complex lines accountability?
- Measuring outcomes becomes very bureaucratic
- Key to adult issues: **housing, employment, maternal mental health**, all very expensive
- In times of fiscal constraint, more to be gained by collaboration, but also stronger resistance to share budgets.
- This stuff is hard....

