



STARTING IN A FEW MINUTES AT 15:30

Health Visiting supporting families experiencing poverty

24 October 2024

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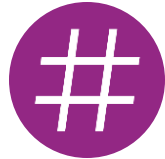
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- Access recording of live session after the event on our website (no recording on other devices is allowed)
- Attendance at this event and engagement with the iHV reflection template will support you with demonstrating CPD activities that align to the 2022 NMC Standards of Proficiency for SCPHN Health Visiting.

The Institute of Health Visiting is a charity and centre of excellence for health visiting. Its core purpose is:
To improve outcomes for children and families and reduce health inequalities through strengthened health visiting services

Agenda



Welcome

- Georgina Mayes - Health Visiting Professional Lead (Quality and Policy), iHV

Guest Speakers

- Professor Monica Lakhanpal - Professor of Integrated Community Child Health Population, Policy & Practice Dept, UCL GOS Institute of Child Health
- Corrine Cunningham - Expert with lived experience
- Claire Scothern - General Manager – Children’s Services for Derbyshire Community Health Services Foundation Trust

Q&A with Speakers

Close and Evaluation

Next speaker



Professor Monica Lakhanpal

Professor of Integrated
Community Child Health
Population, Policy & Practice Dept,
UCL GOS Institute of Child Health



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think of them during the
presentations

Use the Zoom Q&A function

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iHV National Webinar

Supporting families experiencing poverty

24th October 2024

Professor Monica Lakhanpaul

Professor of Integrated Community Child Health,

UCL Great Ormond Street Institute of Child Health, University College London

UCL Global Strategic Academic Advisor (India)

Honorary Consultant Pediatrician, Whittington Health

X: [@ProfLakhanpaul](#)

E: m.lakhanpaul@ucl.ac.uk



WE ARE NOT THE SAME

They came into this world
With no expectations
No religion, no name
They all seem the same

They came from one place
With their cry and their smiles
No religion, No name
We should be the same

But soon it all changed
The world with its glory
No warmth, no food
We can't be the same

Only animals to play with
Dirty air to inhale
No warmth, no food
We won't be the same

Monica Lakhanpaul 2021



Poverty in the UK

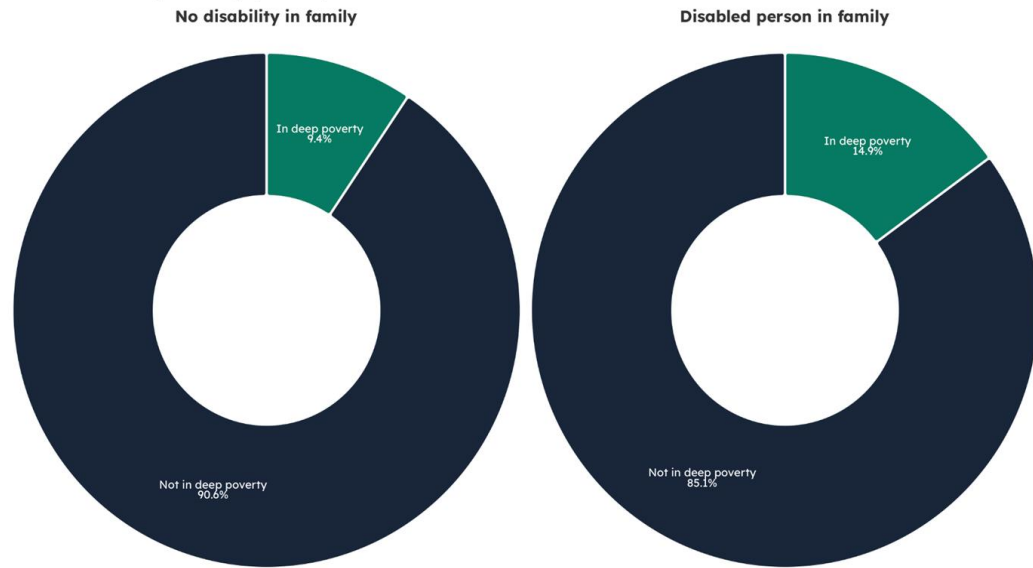
- 4.3 million children in the UK, or 30% , are living in relative poverty (IFS, 2024)
- 151,630 children in England are homeless (Shelter, 2024)
- The UK has some of the highest child mortality rates in Europe (Office for National Statistics, 2024)
- Mortality rate for infants living in the 10% most deprived areas in England was almost X 3 than for infants living in the 10% least deprived areas (Office for National Statistics, 2024)
- Cost of living crisis - inflation remains above 5%, impacting everyday essentials like food and household goods (ONS, 2024)



Risk Factors

From disability to deep poverty

From disability to deep poverty

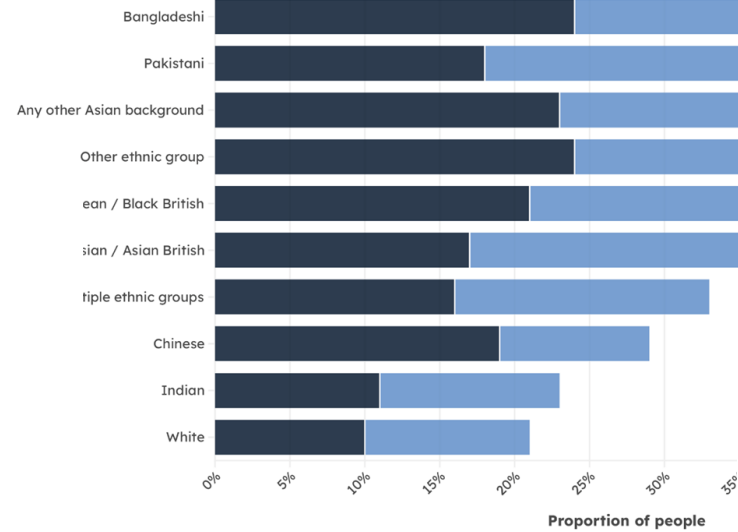


Source: Source: JRF Analysis of 2019/20 Family Resources Survey

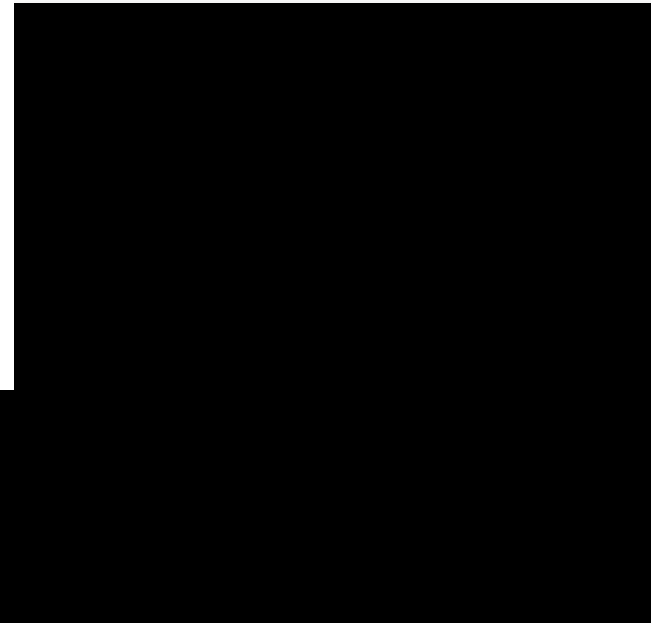
JRF JOSEPH ROWNTREE FOUNDATION
* A Flourish chart

Poverty rates and very deep poverty are much higher for many minority ethnic groups

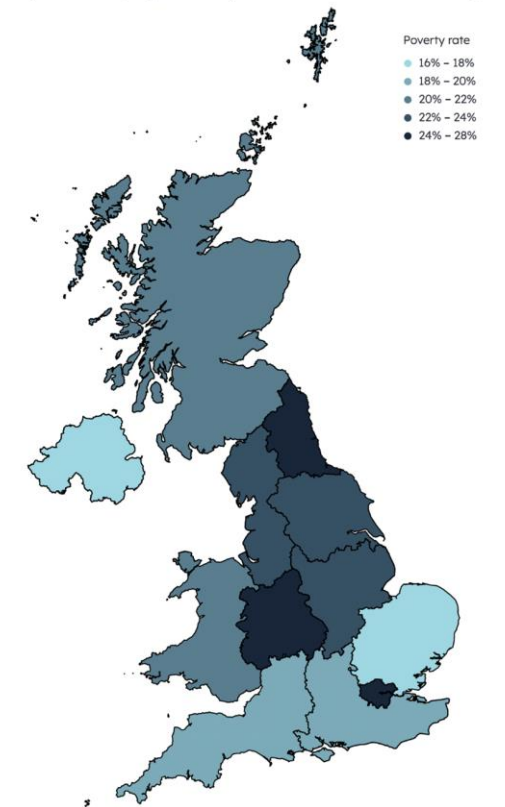
Very deep poverty In non-deep poverty



Family Resources Survey



Poverty rates vary significantly between UK nations and regions



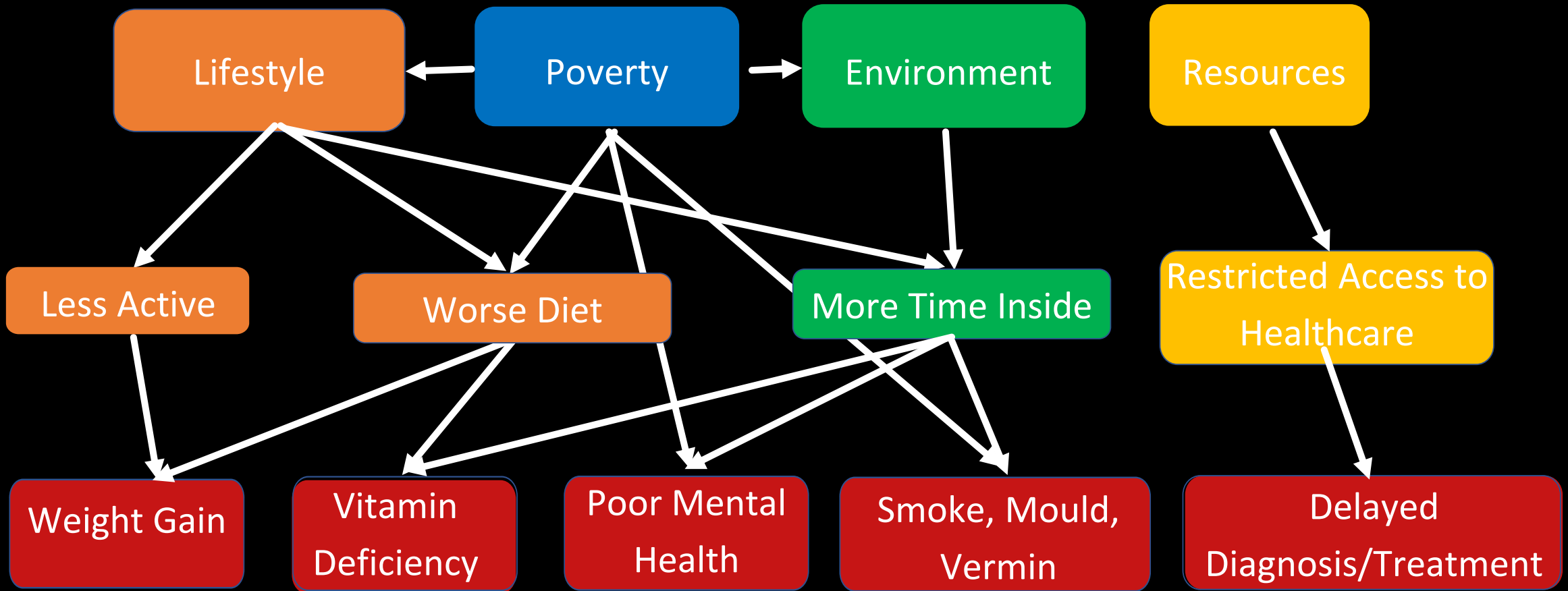
Source: Households Below Average Income, 2019/20 and 2021/22, DWP

(Joseph Rowntree Foundation, 2022)

Impact on Existing Inequalities



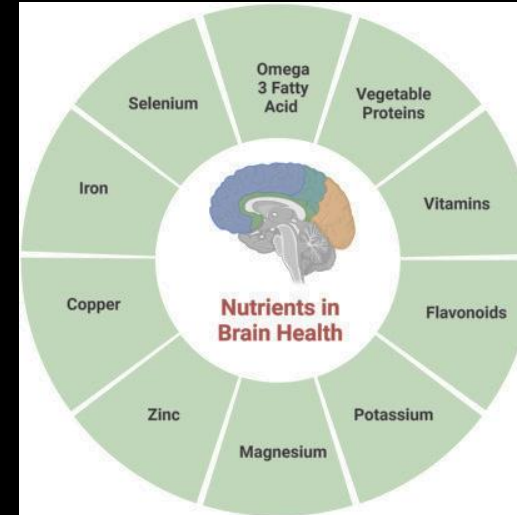
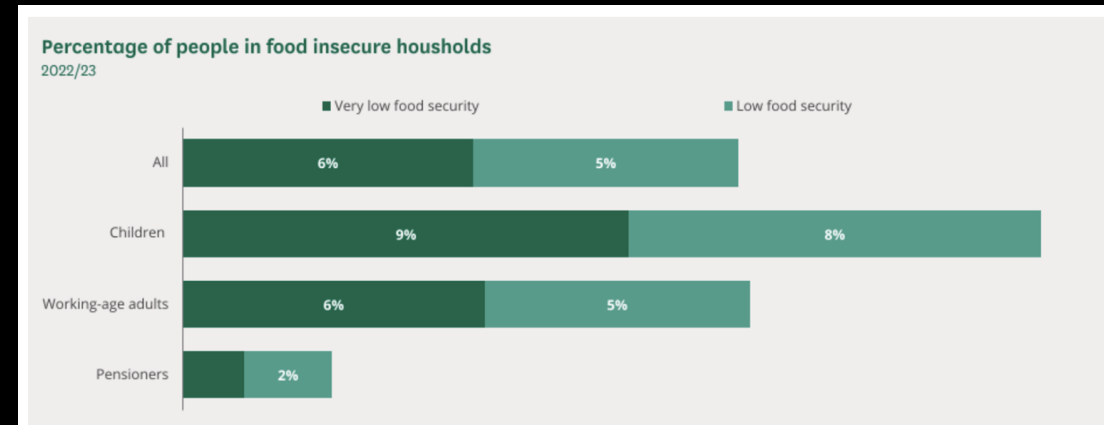
(CHAMPIONS, 2024)



Nutrition & Food Poverty

- Household can broadly be defined as experiencing 'food poverty' or 'household food insecurity' if they cannot (or are uncertain about whether they can) acquire "an adequate quality or sufficient quantity of food in socially acceptable ways".
- In 2022/23 there were 7.2 million people, or 11% of the UK population, in households experiencing food poverty, including 17% of children.
- The Trussell Trust, a charity and network of foodbanks, supplied the highest recorded number of three-day emergency food parcels.
- 11.3 million people found to be in relative poverty before housing costs, 22% were in food insecure households, including 30% of children.

(Francis-Devine et al., 2024)



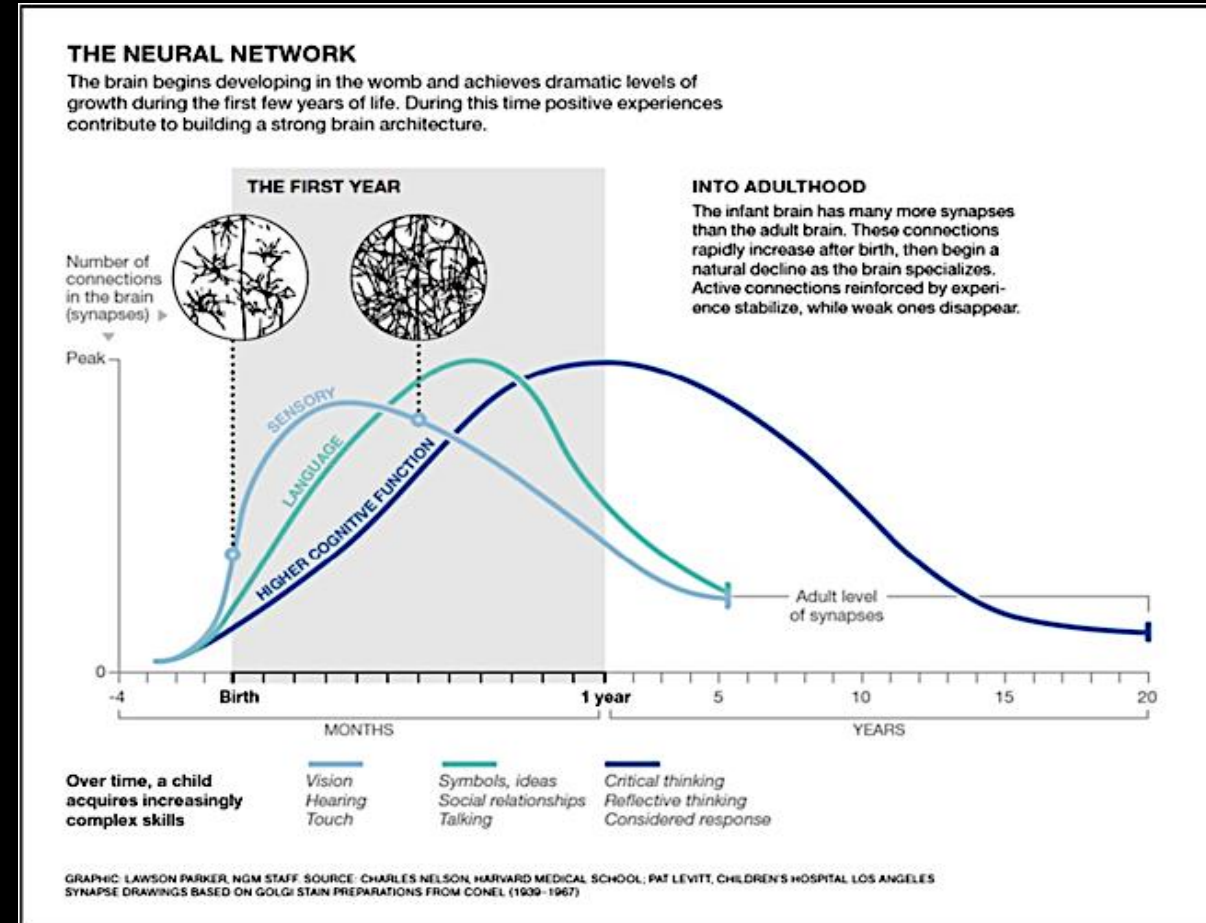
(Ahire et al., 2024)

9/15 risk factors for morbidity, including high body mass index (BMI), high blood pressure, cardiac disease, diabetes and malnutrition, associated with poor diet.

(WHO, 2024)

Early Neurodevelopment

- 80-85% of brain growth taking place during the first two years (Knickmeyer RC et al., 2008)
- Functional capacity is defined in the first 1000 days (UNICEF, 2017)
- Neural connections form at a rate of 700-1,000 per second (UNICEF, 2017)
- Human autopsy studies have also shown that infants with severe acute malnutrition have fewer brain cells than well-nourished infants (Prado and Dewey, 2014)



(Nelson, 1967)

Poverty & Environment



Overcrowding

Little room for toys or movement

Unsafe Neighbourhood

Kids unable to play outside safely

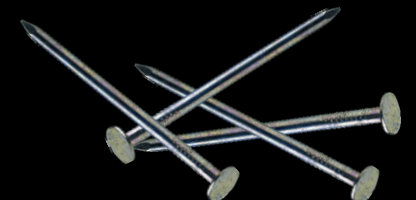
Risk of Injury

Almost 4 times greater for a child living in a household needing repair (Dal Santo, 2004)

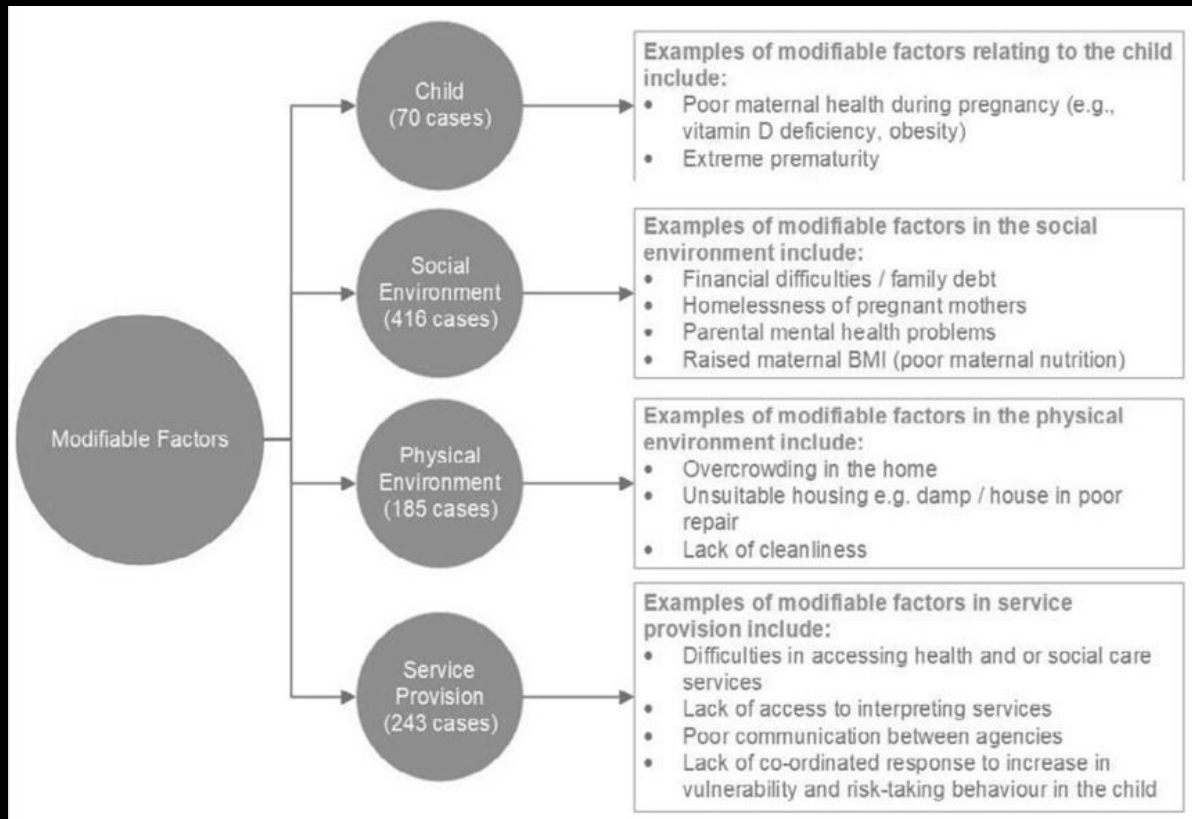
Internal Pollutants

Vermin, damp/mould, lack of ventilation, waste, passive smoking

(CHAMPIONS, 2022)



Child Mortality



- Linked each child's address to the UK government's 10 deciles of deprivation (calculated using 7 indicators of income, employment, education, health, crime, access to housing and services, and living environment).
- Poisson regression model was used to estimate the relative risk of death for each decile of deprivation.
- Average relative risk of death overall increased by 10% for each increasing decile of deprivation.

(CHAMPIONS, 2022)

Co-Developed Interventions



1. Co-developed an intervention toolkit with South Asian Communities in East London - cultural recipe book with healthy baby (6months-2 years) feeding practices, a list of local support services, and participatory community asset maps (for example, identifying low-cost fruit and vegetable shops and play areas).
1. Community members trained as co-researchers to shape the aims and approach of the programme.
1. Local, bilingual women were trained and introduced into local women's groups as community facilitators to lead the NEON intervention.

These groups helped to reduce language barriers and literacy issues so that communities were given health advice that they could better understand and could turn into action.



(Lakhanpaul et al., 2020)

Community-Led Interventions

“The stress experienced by especially vulnerable parents, such as those fleeing violence or trafficking, exacerbates the health risks of poverty, contributing to poor perinatal health outcomes for babies born into such circumstances” (Happy Baby Community, 2023).

Happy Baby Community UK NGO helps mitigate these challenges through holistic support to marginalised mothers via:

1. providing psychological
2. welfare i.e. doula/birth companion pilot 2020
3. language support.

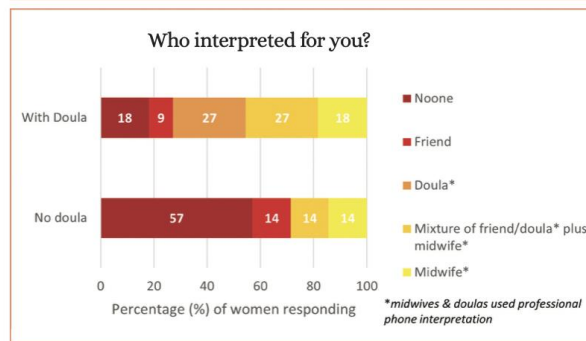
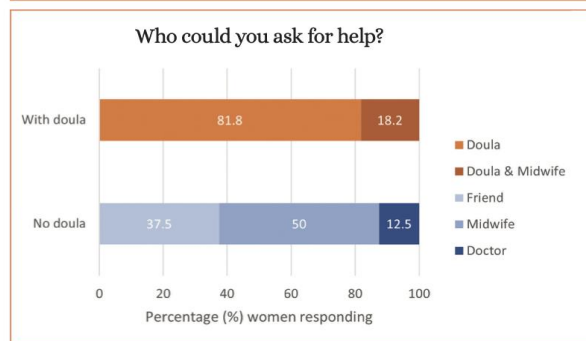
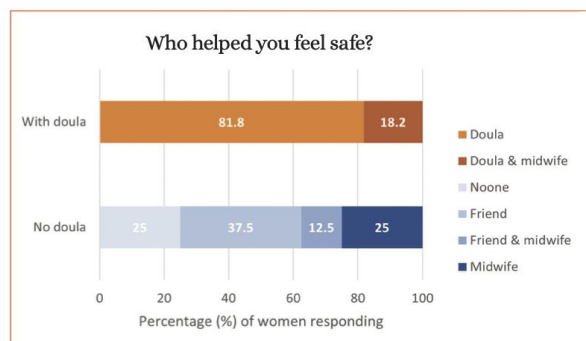
(Transformation Partners in Health and Care, 2023)

BIRTH COMPANION PILOT FOR LONDON INITIAL ACCOMMODATION FOR ASYLUM SEEKERS — AN EVALUATION OF IMPACT

“The maternity, it’s not any case you know. You feel yourself is between the earth and the sky.”

To cite this report, please use: Happy Baby Community (2020), Birth companion pilot for London initial accommodation for asylum seekers. London, [Online].

Registered Charity – 1181633



Midwife Experience Questions	Percentage (%) of midwives answering:			
	Fluent	Medium	Basic	No English
What was the mother's level of English?	4	4	22	70
How did the presence and support of a Happy Baby Community doula affect your ability:	Much easier	Easier	More difficult	Much more difficult
1. to communicate with the mother?	26	70	4	0
2. to care for the mother's overall wellbeing during labour and birth?	70	26	4	0
3. to care for the mother's overall wellbeing during the immediate postnatal period?	79	14	7	0
4. to offer the mother choices during labour and birth?	50	45	5	0
5. to enable the mother to give informed consent during labour and birth?	48	48	4	0
Was it possible to work in partnership with the doula to support the mother?	Very easy	Easy	Difficult	Very difficult
	83	13	4	0

Improving Family Support Services

1.

Prolonged **lockdowns**, **social isolation**, **poor environments**, and **lack of support** during the COVID-19 pandemic has exacerbated existing, and introduced new, **physical and mental health**, **developmental and behavioural issues** for children under 5.



2.

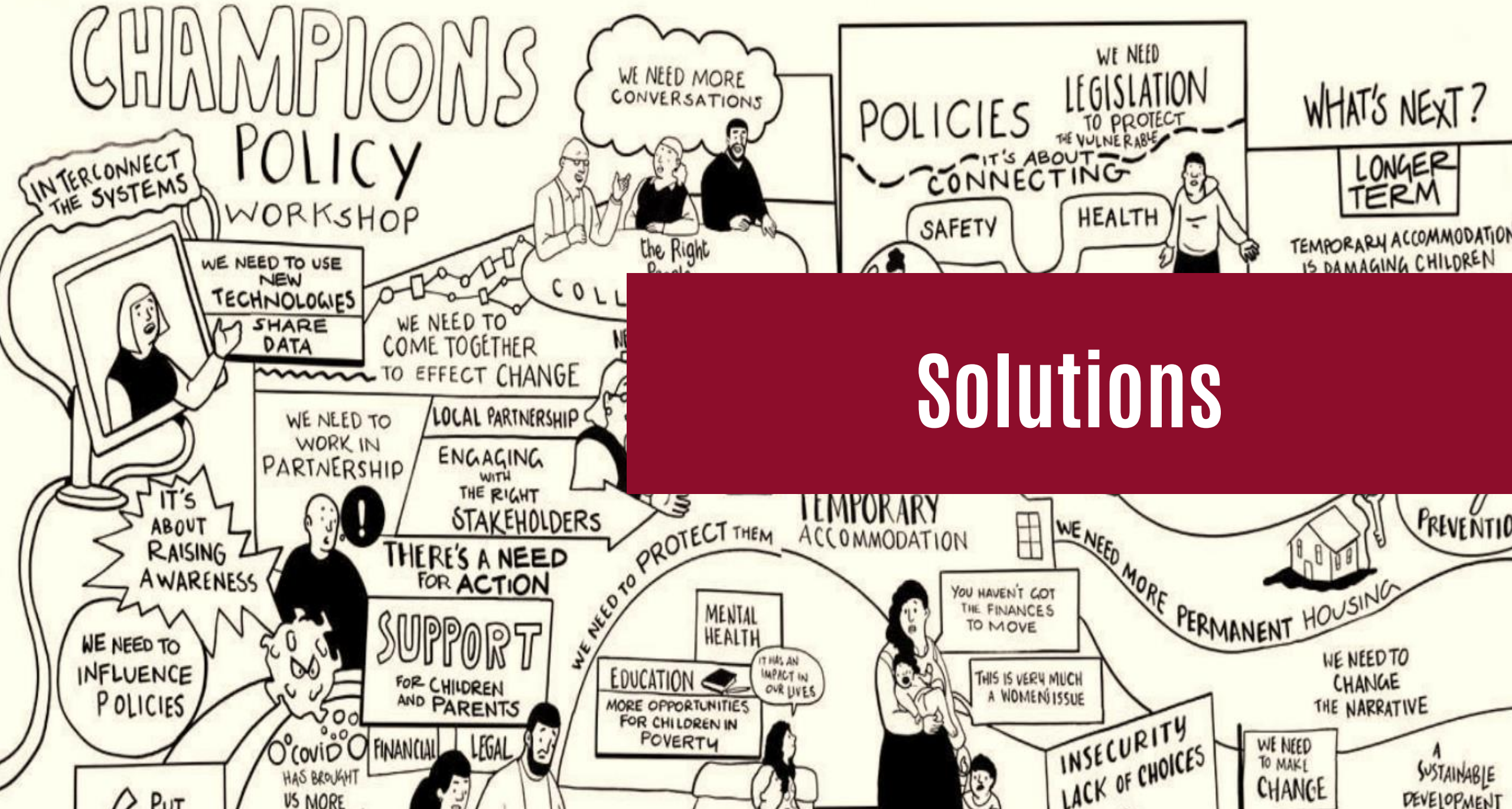
Service provision broke down during the pandemic for the **most vulnerable group (families with young children living in TA)**.

3.

Effective solutions depend on the integration of child-centred services (housing, health, education, social care, and the third-sector).



(CHAMPIONS, 2023)



Policy Recommendations

1. Implement a mandatory child-centred minimum standards framework for Temporary Accommodation (TA) which is clear and usable, with accountability and monitoring in place.

2. Introduce community service navigation advisors to aid and direct families to helpful information and support.

3. Develop materials to support families with navigating local services.

4. Collaborate and share relevant information across sectors using secure data-sharing methods in order to create notification systems that enable service providers to alert relevant sectors when a new family is rehoused, this allowing for quick access to health, education, and social services.

5. Change the narrative and stigma around families experiencing homelessness.

6. Local areas should ensure the adequate provision of doctors, health visitors, and midwives for the timely assessment and support of children in line with the Healthy Child Programme.



SHE Framework
(Lakhanpaul et al., 2022)

(CHAMPIONS, 2023)

SHE Framework



The SHE Framework (Lakhanpaul et al., 2022) is about identifying the main things that a child needs during their development.

Safe

Healthy

Educated

(CHAMPIONS, 2022)

CHAMPIONS PROJECT
TEMPORARY ACCOMMODATION (TA) GUIDE ON
WHO TO CONTACT FOR YOUR CHILD

SHE SAFE CHILD TIPS
SAFE HEALTHY EDUCATED

EMERGENCY SERVICES 999
If there is an emergency, call **999** and ask
For an ambulance, police, or fire service.
FREE and no consequences.

GETTING HOUSING
Contact your local council if you are
homeless (including temporary
accommodation) or will be in 8 weeks.
They will try to find you somewhere to
live. Find your council:
<https://www.gov.uk/find-local-council>

PROBLEM WITH HOUSING
Talk to the owner of your accommodation
if there are problems with it.
Normally this is your landlord or the
council depending on your accommodation.
Problems might be water coming in,
mould, insects and vermin inside, and other
things. Ask Citizen's Advice for help if not
sure what to do or who to contact:
0800 144 8848

SOCIAL WORKER & SERVICES
Social services can help if you have
disabilities or other problems. They can help
you make changes to your house so it is
more suitable for your needs if you have a
disability.
Social workers can also advise on how to
get help with benefits like child welfare or
extra support for children. Ask your council for
details.

LEGAL ADVICE
Talk to a lawyer for legal problems,
such as being evicted or suffering
from violence. A lawyer can advise
you what to do. You may be able
to get help to pay:
<https://www.gov.uk/check-legal-aid>
Use this to find a legal aid solicitor:
[https://find-legal-
advice.justice.gov.uk/](https://find-legal-advice.justice.gov.uk/)

ORGANISATIONS TO CONTACT FOR HELP
Talk to Crisis, Shelter, Citizen's
Advice for free and privately about
lots of things with no consequences.
Citizen's Advice: **0800 144 8848**
Shelter emergency helpline for
housing: **0808 800 4444**

Project PI: Prof. Monica Lakhanpaul | m.lakhanpaul@ucl.ac.uk | [@ProfLakhanpaul](https://www.ucl.ac.uk/people/monica-lakhanpaul)

Project Leads: UCL, DE MONTFORT UNIVERSITY
Project Partners: The Children's Society, UK Homelessness Network, UK Housing Foundation
Funders: Economic and Social Research Council

Thank you

X: @ProfLakhanpaul

Email: m.lakhanpaul@ucl.ac.uk

Next speaker



Corrine Cunningham

Expert with lived experience



Type your questions as you think of them during the presentations

Use the Zoom Q&A function

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- Brief **question**
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Next speaker



Claire Scothern

General Manager – Children’s
Services for Derbyshire
Community Health Services
Foundation Trust



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0-19 & Citizens Advice Direct Referral Initiative

**iHV Insights | Health visiting supporting
families
experiencing poverty**

Claire Scothern - General Manager, Childrens Services



This service is funded by Derbyshire County Council and provided by Derbyshire Community Health Services NHS Foundation Trust.



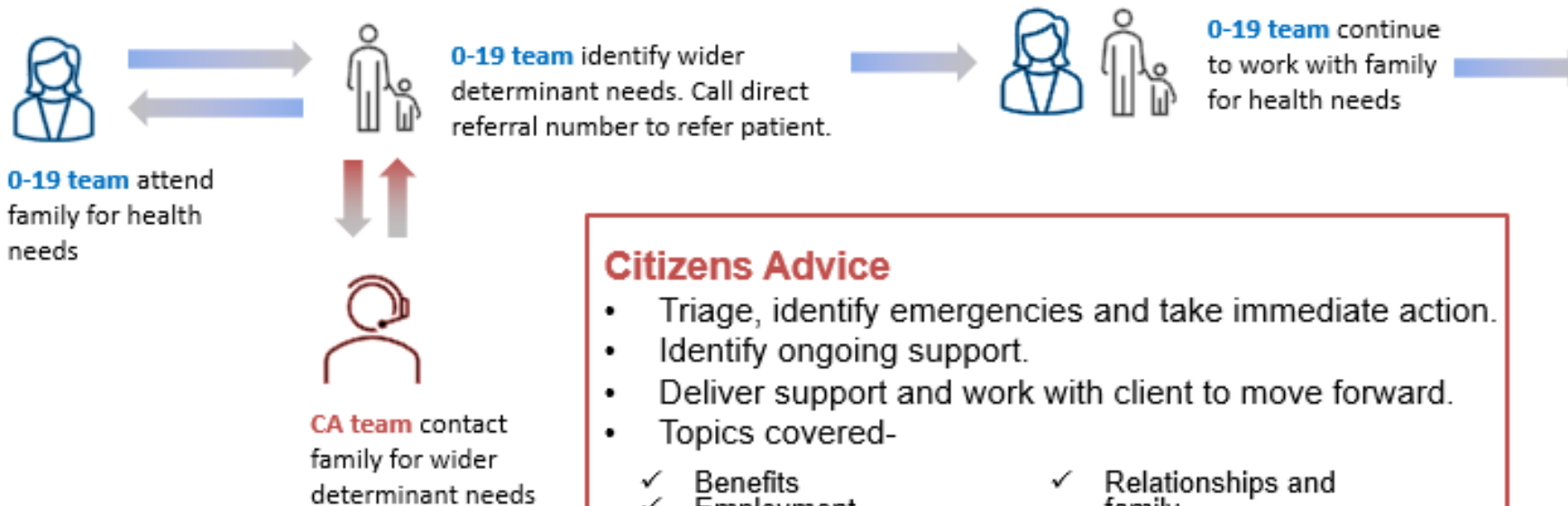
The issue:

- Health Visitors were visiting families and identifying wider determinant factors beyond the immediate health needs - exacerbated for many families during (and continuing from) the pandemic.
- The links between poverty and the impact on the wellbeing and life chances for children and young people are well documented.
- The team identified that while addressing wider social determinants lies outside the scope of their Health Visiting service, partnering with and funding Citizens Advice (CA) could:
 1. enable these to be addressed, and
 2. provide a practical solution to the wider issues families were facing beyond the immediate health needs.

The initiative in practice:

0-19 Service

- Given telephone number of direct referral line for 0-19 staff to use (not given to clients).
- No referral forms, dedicated line to share basic information. CA then contact the family via a phone call.



Citizens Advice

- Triage, identify emergencies and take immediate action.
- Identify ongoing support.
- Deliver support and work with client to move forward.
- Topics covered-
 - ✓ Benefits
 - ✓ Employment
 - ✓ Debt and money
 - ✓ Housing
 - ✓ Relationships and family
 - ✓ Discrimination
 - ✓ Energy

Family Feedback

4 main themes identified from the family feedback questionnaire:

Quick and easy to use service:

- Families view the service as very responsive, having been contacted quickly after referral.
- *“Contacted by the adviser within 48 hours which was really impressive.”*
- *“Very easy and not at all stressful when I expected it to be.”*



Advisors knowledgeable and helpful:

- Families responded very positively about the advisors, their knowledge, and the support they were able to provide.
- *“Adviser was really good. Contacted me again to follow up the enquiry. Can't fault the service.”*

Broad range of support and information:

- Families discussed a broad range of issues they received support for.
- *“They deal with wide range of things - not just benefits.”*

Families more able to manage issues:

- Families report now being able to better manage the issues they sought advice about.
- *“I felt had enough information to pursue things myself but the adviser offered further help if I needed it... I wouldn't have known otherwise where to make a start.”*
- *“Full discussion on my query, advice was practical to follow.”*

Unanimously respondents would make use of the Citizens Advice service again in the future if needed and recommend the service to family / friends.

Evaluating value and impact:

Why did the evaluation take place?

- A service evaluation was undertaken to provide appropriate assurance regarding the value and impact this service provides for staff and families.

The evaluation:

- Took place mid-January to end-February 2023 (service had been running for 1 $\frac{3}{4}$ years at point of evaluation);
- Used a Mixed methods approach including service user questionnaires, staff interviews, and data analysis, and
- provided **measurable** evidence of the **success** of our initiative.

Health and Operational Benefits

Health benefits

- Over half of respondents reported a **health benefit**, majority of these reporting a mental health improvement.
- Literature on the impact of welfare rights advice support our findings, suggesting it improves appropriate health care utilisation, and various health outcomes for adults and children.
- Evidence indicates childhood experience of poverty increases risk of adolescent mental ill health at age 17 (suggesting **actions alleviating childhood poverty may reduce adolescent mental health problems**) (2023).

Operational benefits

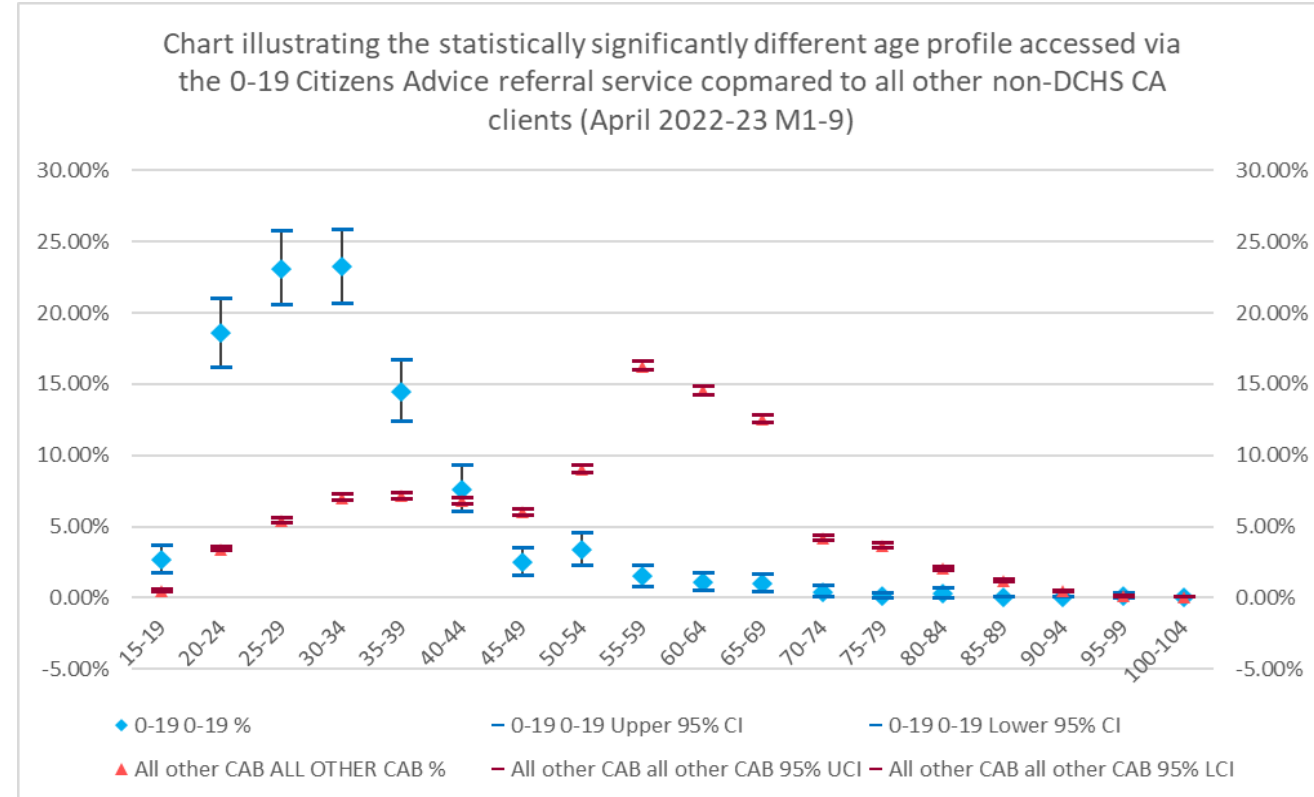
- Staff expressed losing the service would be a great loss, with some describing it as disastrous “**it would be a disaster if we lost this service now**”.
- CA is viewed as time saving and an enabler for staff to focus on their commissioned roles and help families address the wider determinants of health through CA. “**Having Citizens Advice means we can focus on health**”.

Income identified & issues resolved

- Family's referred received greater income improvements than the Citizens Advice average for families seen by the standard Citizens Advice service.
- Families presented with a broad range of issues, beyond financial concerns.
- On average, **for every £1 invested, £9.36 of additional income** is identified for families accessing the DCHS commissioned program, equivalent to 57% greater than the standard CA family group additional income identified.
- Since April 2021 CA have undertaken **5,390** contacts with **2,042** families, dealing with **12,012** issues
- The **total income to date** gained for all families referred to CA via the 0-19 direct referral pathway is **£2,544,442**
- The **total debt managed or written off** for all families referred to CA via the 0-19 direct referral pathway is **£554,590** to date.

Higher proportion of younger females referred

- **Age - A marked difference in the age profile** accessing CA via the 0-19 route compared to the usual family group was identified, with the 0-19 group being younger overall.
- **Gender-** Stark gender differences were seen in 0-19 programmes. The service saw approximately **1.5-1.6x greater proportion of females** presenting to the service compared to the usual family group.
- **New families-** The majority of family survey respondents **would not have contacted** Citizens Advice had they not been referred.



Transferrable

- Health Inequalities-: The CA direct referral project is **addressing unmet need** in the local population and **enabling a demographic** that would have otherwise not have sought help to access support
- The initiative is **relatively low cost** to deliver and is **transferrable**
- Following the Nursing Times Award award in October 2023, the service has been visited by England CNO Duncan Burton and Professor Jamie Waterall, Chief Public Health Nurse Office, Office for Health Improvement & Disparities (OHID) to discuss how the project could be upscaled.

Learning

What we would do differently

- Socialising more widely the impact of wider determinants
- Improved methodology of coding to support the evaluation

Challenges

- Ongoing funding and sustainability
- Staff awareness and training
- Balance between truly local and national.

In summary:

- CA **improves financial stability**; this scheme targets a statistically different cohort than routine advice services securing more income for families than the standard family group.
- CA **improves health outcomes** for patients, particularly mental health outcomes. Relevant evidence (The Low Commission and Advice Services Alliance, 2015). (Action for Children, 2023). (Institute of Health Visiting, 2024). (Creer et al 2022)
- A **different cohort attend** the 0-19 CA service (younger, more females and many who would otherwise not seek advice).
- Financial stability and reduced financial stress can result in **better engagement and uptake of health services**.
- **Improved service delivery and efficiency** through freeing staff to focus on health with wider determinants issues addressed via CA.
- The advice service can act as a **buffer to mitigate further health decline** in the population, which is a particular concern given the disproportionate impact of the ongoing cost of living crisis in particular population cohorts/groups.



Contact Us

0-19 Children's Service Senior Management Team Inbox

dchst.childrenssmt@nhs.net

Citizens Advice Derbyshire Districts – Melanie Mallinson Senior Operations Manager

melanie.mallinson@ddcab.org.uk



We will aim to answer as many questions as possible during the live session.

Use the Zoom Q&A function

- **Name of presenter** you would like to answer your question
- Brief **question**
- **Your name** (if you wish to do so)

Over to you!



Help us to tailor our events to meet **your** needs!

- Submit your anonymised responses to the poll
- What more can we do to support you in your practice?
- Email events@ihv.org.uk with any suggestions



Thank you so much for joining us



Continue your CPD!

After this event you will be able to access the following resources on the iHV website:

- Just launched – A Good Practice Point (GPP) on supporting babies, children and families experiencing poverty
- A recording of this live session (no recording on other devices is allowed)
- This slide set
- Links and background reading
- A link to download a Record of Attendance & reflection template

Log in at www.ihv.org.uk and head to the Insights page

Good Practice Points for Health Visitors



Supporting babies, children and families experiencing poverty

This Good Practice Point aligns to the Nursing and Midwifery Council 2022 Standards of Proficiency for SCPHN Health Visitors – in particular: Sphere of Influence C: Critically analyse and apply evidence-based knowledge of the determinants of health, intergenerational cycles of deprivation and health inequalities that affect the mental, physical, cognitive, behavioural, social, and spiritual health and wellbeing of children, parents, carers and families (C.HV1). See the [NMC website](#) for more details.

What is poverty: Prevalence and impact on child and family health and wellbeing

Action for Children describes child poverty as the *“lack of money that leaves families struggling to afford the essentials, enjoy a decent standard of living, share the simple family experiences that all children should get to enjoy”*.

4.3 million children (around **3 in 10 children**) across the UK now live in poverty, up from 3.6 million in 2010-11¹.

In 2023, UNICEF ranked the UK against 42 high income and upper middle-income peer countries on the outcomes of policy responses to child poverty. It placed the UK at the “bottom of the rankings” based on two indicators: rates of child income poverty between 2019 and 2021 and the proportional change in child income poverty over a seven-year period (2012–2014 and 2019–2021)². Children have consistently had the highest rates of poverty compared to any other age group since 1994 (see Figure 1)³.

Figure 1 - Poverty rates across the life course



Source: Households Below Average Income, 2021/22, Department for Work and Pensions (DWP)

Child poverty rates vary across the UK, with the highest rates in the West Midlands, inner London, and North West England, and lower rates in Scotland, Northern Ireland, and Eastern England⁴.

How poverty is affecting babies, children and families across the UK

- 69% of poor children are from working families.
- 46% of children in families with 3 or more children are living in poverty.
- Child poverty is increasing, with 600,000 more children living in poverty compared to 2010/11.
- 36% of all children in poverty are from families with a youngest child aged under five.
- 47% of children in Asian and British Asian families are living in poverty, compared to 51% of children in Black/African/Caribbean and Black British families, and 24% of white children.
- 44% of children in lone parent families are living in poverty.
- 34% of children living in families where someone has a disability are living in poverty.

(Source: [Department for Work & Pensions, 2024 - Households below average income series: quality and methodology information report FYE 2023](#))

More information on page 2

For additional resources see www.ihv.org.uk

The information in this GPP version was created on 21/02/2024.
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Future iHV Member Benefit Event Dates

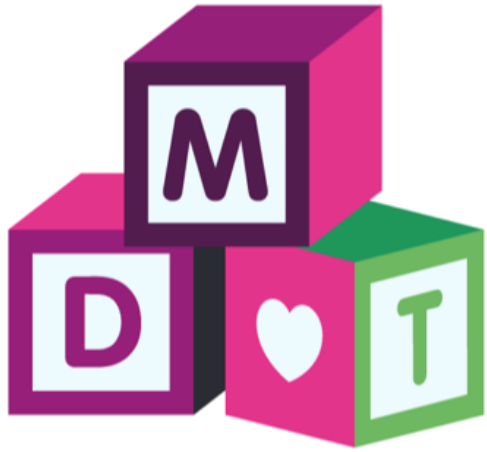


TOPIC	DATE
iHV Insights – Launch of the iHV Motor Development Toolkit	21 November 2024
iHV Research Networking Event	27 November 2024

All future dates
can be found at:
bit.ly/4enHn2H



Join us again!



MOTOR DEVELOPMENT TOOLKIT



Launch of the iHV Motor Development Toolkit

21 November 2024 at 3:30pm

#iHVInsights

www.ihv.org.uk



Change for the better

Wednesday 4 December 2024 | London



iHV Leadership Conference



Hybrid Conference