

Wales UNCRC Monitoring Group



Grŵp Monitro CCUHP Cymrum



# **Wales Civil Society Report to the United Nations Committee on the Rights of the Child to inform their List of Issues Prior to Reporting (LOIPR)**

Submissions to our Call for Evidence (August – September 2020)

## RESPONSE 1 – LYNETTE THACKER (Clinical Nurse Specialist Paediatric Palliative Care)

*[Also received – Article featured in the Journal of Pain and Symptom Management, and a Public Health Factsheet on Children's Palliative Care and Human Rights]*

Evidence regarding the rights of the child in Wales.

I am employed as a clinical nurse specialist in paediatric palliative care. I have worked as a paediatric nurse since 1989 and in the community since 1994 and in current position since 2010. I returned from England in 2005 and I was shocked as to how far behind some of the care for children was in Wales.

I am basing the information I give in this evidence from my personal views in relation to children with disabilities. I will also be making reference to my time in England.

Article 2 (non-discrimination) The Convention applies to every child without discrimination, whatever their ethnicity, sex, religion, language, abilities or any other status, whatever they think or say, whatever their family background.

- End of life care for infants' children and young people – choice of place care at the time of death. This only achievable if there is a fully functioning children's community nursing team 24 hours a day 7 days a week.
- Also needs the provision of registered nurses to provide a sitting service for some children like the Marie Curie nurses for adults. Hospice at home available to adults but not children.
- Look at the funding that is provided in Scotland and England. They have documents about commissioning services for children and young people with palliative care. Look at NICE guidelines, look at Sugar report 2008. Yes there has been changes but not far enough.

Article 3 (best interests of the child) The best interests of the child must be a top priority in all decisions and actions that affect children.

- This needs to be the case regardless of disability. Valued even if they are not actively contributing to society. Seen as a burden on society and a high user of scarce resources. Equally should not be subjected to futile treatments.
- Children need to have the right to their emotional needs being met as well as their physical needs. This includes the siblings having access to counselling and especially pre and post bereavement counselling. This has been investigated by Welsh government and there is now a post for 3 days a week to scope the whole of Wales but it includes adults as well as children. Why is there not a scoping exercise for services specific to bereavement in children and young people? The rights of the child bereaved of a significant adult, the rights of a child bereaved of a sibling, the rights of the child who knows they are dying, the rights of a child that knows they are going to be bereaved. The rights are wide and variable. This affects children's and young people's current and future mental health. Look at the admission rates to mental health services of bereaved children and young people.
- Look at admission rates to paediatric intensive care units of children with disability but also look how many times it is suggested that children and young people with disability should not be admitted to paediatric intensive care unit.
- Look how COVID 19 has altered the suggestion of ceilings of health care of young people with profound disabilities. Ask how many DNACPR forms have been completed for these young people. Are they appropriate, they probably are but is the decision based on right not to be subjected to futile treatments or use of scarce resources?

Article 4 (implementation of the Convention) Governments must do all they can to make sure every child can enjoy their rights by creating systems and passing laws that promote and protect children's rights.

- Children and young with profound disabilities and their siblings must not be denied this right based on resources and lack of systems that are effective for the many but not tailored for the few. Square pegs placed in round holes springs to mind.

- Children and young people with siblings who are severely disabled cannot enjoy time with parents because the NHS and Social Service argue about what is a health need and what is a social need. This is often down to resources and the way the laws are set up around systems such as direct payments and continuing care.

Article 6 (life, survival and development) Every child has the right to life. Governments must do all they can to ensure that children survive and develop to their full potential.

- Children and young people with rare condition do not have their right to life and develop their full potential because of the lack of funding to explore novel treatments that may only be available in other countries. The right to appropriate medication to maintain comfort even if not sustaining life. The right to have their condition researched and for governments to work together. The IPF funding for treatment outside of Wales is protracted. The Children's Hospital in Wales is missing so many paediatric specialities and the further west in Wales the less availability of specialities. If you cannot fund extensive specialities in Wales for paediatrics including transition, mental health etc. Make it an easier system for families to have a second opinion in England, especially when something is needed urgently or may be needed internationally. See evidence on fund raising pages.

Article 9 (separation from parents) Children must not be separated from their parents against their will unless it is in their best interests (for example, if a parent is hurting or neglecting a child). Children whose parents have separated have the right to stay in contact with both parents, unless this could cause them harm.

- Children and young people who are siblings of children and young people with complex health needs often have to be separated from one or both of their parents during prolonged hospital stays which can even be outside of Wales.
- Children and young people with complex health needs can be separated from one of their parents for a long time when hospitalisation is required. Make all hospitals family friendly with the provision of areas for families to meet up.
- Hospital wards have become more cramped with less facilities such as play area inside and outside for children. Parent rooms and dining areas have been made smaller and even lost on some paediatric wards. This may not make a difference to when there are infrequent short stays but when there are frequent and prolonged stays which is not uncommon as children and young people survive with more complex care needs and disability.

Article 12 (respect for the views of the child) Every child has the right to express their views, feelings and wishes in all matters affecting them, and to have their views considered and taken seriously. This right applies at all times, for example during immigration proceedings, housing decisions or the child's day-to-day home life.

- Children and young people with profound disabilities have their lives overtaken by professional bodies. Every effort needs to be undertaken to assess if they are comfortable with professional interactions within different settings including their homes.
- Many siblings of children and young people with profound disabilities do not have this right afforded to them when professionals are considering care plans and the effect on day to day home life.

Article 15 (freedom of association) Every child has the right to meet with other children and to join groups and organisations, as long as this does not stop other people from enjoying their rights.

- Children, young people and siblings do not have access have the opportunity to meet up with others because of the burden of care placed on their parents.
- Limited access to respite care at home for the parent to relinquish their responsibility of care to then provide care for the sibling.
- The care of the sibling is often left to extended family members if they are available resulting the sibling not having the relationship with their parent. Or worse the sibling becomes excluded from meeting with other children and joining groups.

Article 16 (right to privacy) Every child has the right to privacy. The law should protect the child's private, family and home life, including protecting children from unlawful attacks that harm their reputation.

- Children and young people and their siblings are not having a private family and home life because of the intrusion of many professionals from differing settings needing to provide care.
- Parents who are stressed by the situation they find themselves in often expose the nature of their disagreements about a child or young person's care on social media or other media. See Facebook, Twitter

or Wales on Line. There is a lack of support for these parents in relation to the protection of privacy for their child or young person.

Article 17 (access to information from the media) Every child has the right to reliable information from a variety of sources, and governments should encourage the media to provide information that children can understand. Governments must help protect children from materials that could harm them.

- Children, young people and their siblings are not given information about rare conditions in all formats.

Article 18 (parental responsibilities and state assistance) Both parents share responsibility for bringing up their child and should always consider what is best for the child. Governments must support parents by creating support services for children and giving parents the help they need to raise their children.

- In relation to some children there is too high an expectation for some parents to take on tasks that are normally the realms of registered professionals such as nurses, physiotherapists etc.,

Article 19 (protection from violence, abuse and neglect) Governments must do all they can to ensure that children are protected from all forms of violence, abuse, neglect and bad treatment by their parents or anyone else who looks after them.

- This is extremely difficult to do with children and young people who are profoundly disabled and whose families need additional support in relation to the stress they are under in relation to the care that they are required to undertake. They are not only at risk of physical and emotional abuse but fabrication of symptoms.

Article 23 (children with a disability) A child with a disability has the right to live a full and decent life with dignity and, as far as possible, independence and to play an active part in the community. Governments must do all they can to support disabled children and their families.

- Every one of the rights need to be assessed in a way that encompasses this right. Timely access to equipment that is fit for purpose when it arrives. During the early years of rapid growth and due to delays within the systems of funding and supply, equipment arrives and is not fit for purpose or only fit for purpose for a short time. This is not efficient use of resources. It neither benefits the child or young person or the system.

Article 24 (health and health services) Every child has the right to the best possible health. Governments must provide good quality health care, clean water, nutritious food, and a clean environment and education on health and well-being so that children can stay healthy. Richer countries must help poorer countries achieve this.

- Children with rare diseases need to have greater access to treatments which may be available in other countries (UK and international) because often research treatments may be the only chance to ease of suffering or reducing trajectory of the condition. Example Batten's Disease, Spinal Muscular Atrophy.

Article 26 (social security) Every child has the right to benefit from social security. governments must provide social security, including financial support and other benefits, to families in need of assistance.

- Benefits due not meet the additional cost experienced by parents in relation to loss of income, additional cost associated with hospital attendance, heating etc.
- Benefits are often age restricted and a young person at 16 should not be viewed as an adult and changed to PIP.

Article 27 (adequate standard of living) Every child has the right to a standard of living that is good enough to meet their physical and social needs and support their development. Governments must help families who cannot afford to provide this.

- Parents of children and young people with disabilities often have to rely on employers to be flexible with work arrangements and often one of the parents are unable to attend work and this impacts on family finance. This is not recognised with the benefits system as to the impact this has on the family.

Article 28 (right to education) Every child has the right to an education. Primary education must be free and different forms of secondary education must be available to every child. Discipline in schools must respect children's dignity and their rights. Richer countries must help poorer countries achieve this.

- Children and young people with disabilities (including life-limiting or life-threatening illnesses) have a right to attend school of their own and parental choice. They should have access to any treatments and medications

despite being in a school setting. Schools need to be able to adapt premises timely to allow child or young persons attendance/

Article 29 (goals of education) Education must develop every child's personality, talents and abilities to the full. It must encourage the child's respect for human rights, as well as respect for their parents, their own and other cultures, and the environment.

- Education should encourage the child or young person with disabilities (including life-limiting or life-threatening illnesses) to reach their full potential and make activities accessible for them to join their peers. Their potential should not be restricted by the lack of resources in relation to environment, equipment or adequately trained personnel.

Article 31 (leisure, play and culture) Every child has the right to relax, play and take part in a wide range of cultural and artistic activities.

- Lack of facilities for children and young people with profound disabilities to access independently of parents. This is often due to the amount of care they require.
- Equally their siblings are also experiencing lack opportunities because of the need of parents to provide ongoing care for affected child or young person.
- There are further restriction because of the lack of resources in relation to environment, equipment or adequately trained personnel. Good examples of inclusion are skiing sessions held in Pembrey Country Park.
- Where adapted play equipment is provided the access is often denied because adults of children with normal abilities will utilize the equipment. One such example that a family have told me about is they travelled to Gnoll Park in Neath to find a parent with a baby in a pushchair using a swing meant for a wheelchair. This family has suggested the provision of specialised keys to utilize this equipment.
- The other option is to make more accessible leisure equipment available in every park.

Article 32 (child labour) Governments must protect children from economic exploitation and work that is dangerous or might harm their health, development or education. Governments must set a minimum age for children to work and ensure that work conditions are safe and appropriate.

- Child carers need to be protected from the burden of caring for siblings or older relatives.

Article 36 (other forms of exploitation) Governments must protect children from all other forms of exploitation, for example the exploitation of children for political activities, by the media or for medical research.

- How can we ensure that children with rare conditions have access to medications and treatments that may be trialled without being exploited by researchers?
- Families are often fund raising for unique research that is available in other countries. Evidence on social media. If the government was purchasing on the families behalf they could ensure exploitation is reduced. Families could still help fundraise for the cost but maybe retrospectively?

Article 42 (knowledge of rights) Governments must actively work to make sure children and adults know about the Convention.

- Are the rights available in child friendly format that is appropriate to age and developmental stage? I have not seen evidence of this?

## RESPONSE 2 – NATIONAL DEAF CHILDREN'S SOCIETY WALES

### Headlines

- 1) Need to make sure that all services fit their systems to the child rather than trying to makes child fit the system. It is not about the disabled child fitting in- it is about every level of government/ society remembering that **all** children are children.
- 2) Advocacy and Child's voice- Need to have better options for disabled children to have their voices heard on both matters that relate to their disability (education, care, health etc.) but also on matters that interest and affect everyone (environmental, social, financial). Too often 'general' engagement processes are not disability friendly (i.e. forms are too complicated/ long, don't

accommodate communication needs (BSL/ Makaton etc.) or are held at too short notice to arrange additional support needed.

- 3) Children need educating about their rights- not enough children know about their rights. CYPE recommendation to increase UNCRC knowledge across Welsh population needs to be accessible and pitched at right level for all children to understand.
- 4) Place for both UNCRC and UNCRPD- Often, UNCRC doesn't meet the needs of disabled children. Disabled children would be better served if the UNCRPD had more strength and standing so the two conventions can be used simultaneously and in parallel/ conjunction with each other.

## Main themes

Disability is hugely cross cutting. It expands across education, health, social care, play as well as being a distinct category in itself.

## Education

**Disabled children are not seen as children:** There was the feeling that as soon as parents mention their child is disabled/ has ALN, the conversation takes a different turn and their child stops being a child with rights and becomes a disabled person with needs. This robs them of their rights under the UNCRC as they are no longer viewed as children but 'disabled children'. This results in an attitude of it not being necessary for them to have access to all the Articles- just the ones related to disability (23). For example, Article 31 and play is interpreted for disabled children as the right to play separately and with other children with disabilities/ ALN rather than with all children. You see this in council playgrounds that are not accessible to all.

**Mainstream education still not fully accepting/ integrated-** disabled children may be technically 'supported' to attend mainstream education, but they are not fully part of the school environment. Many physical spaces within schools are inaccessible to disabled children. The lack of disability awareness/ teaching means disabled children are always seen as 'other'. Not integrated into lessons like PE- told to sit out rather than adapt lessons for them that everyone can participate in.

**Need for disability awareness raising in school-** one of the 4 aims of the new curriculum for Wales is to support children and young people to be 'ethical, informed citizens'. Under this comes a commitment from WG to make RSE compulsory. The new curriculum emphasises the need to ensure children understand their rights and the rights of others. However, the WG has repeatedly rejected calls for disability awareness to form a compulsory part of RSE. We already know that whilst nondisabled children do not possess negative attitudes towards their disabled peers, they are less likely to include them in their friendship groups (<https://www.disabilityrightsuk.org/sites/default/files/DR%20UK%20Special%20or%20Unique%20August%202019.pdf>). This again further reinforces how disabled children are shut off from having access to their full rights under the UNCRC due to the segregation of them as 'other' to the mainstream children. Furthermore, by not educating all children in disability awareness, it may result in these prejudices following disabled people into the workforce due to their non-disabled colleagues lacking understanding and knowledge about the tremendous capabilities, as well as additional needs, of their disabled peers. If the new curriculum aims to truly make all children 'ready to play a full part in life and work' then disability awareness needs to form an integral part of the new curriculum.

**ALN reforms-** The Welsh Government are on the brink of making huge changes to how the educational needs of children and young people with disabilities Additional Learning Needs (ALN) are met. The Welsh Government held a consultation in March 2019. They have not responded or addressed any of the concerns that were raised in this consultation. Despite this, the Welsh

Government intends to continue their planned trajectory of laying the draft bill in front of the Senedd this autumn. The constant deferral and refusal to address the concerns made by both organisations representing children and young people and children and young people themselves means that the Welsh Government have not upheld Article 12 of the UNCRC. Not taking the views of children on board demonstrates a neglect of Article 23 with subsequent serious implications for Articles 28 and 29. This brings into question their due regard duty.

## Health and Social Care

**Disabled children need to be supported to have their voices heard-** Too often, children with disabilities are not included in the planning of their medical care and treatment and social care provision. For children with complex disabilities and severe communication needs, it is often assumed that they cannot express what they want for themselves. The reality is, that although a different communication method may be required, it is often the case that most children, no matter the severity of their disability, can express their needs if adequately supported. This may require a more inventive approach but shouldn't be avoided due to time restraints or inconvenience. By refusing to think outside the box, services are robbing children of Articles 12/ 23 and 24.

**Parents are not supported to help their child-** Just as no one is born knowing how to parent, a parent of a disabled child often has no prior knowledge to the condition that their child is born with and/or develops. Often parents are expected to find their own information. Article 24 discusses the need for state parties to take appropriate measures for health education on matters such as breastfeeding, nutrition etc. (24(e) ). General information may not be suitable for children with disabilities and parents have to find their own targeted information to meet the needs of their child. There is the feeling that the WG may be doing this well for 'mainstream' children but stop short at extending the resources to meet needs of parents of children with disabilities.

**Delay in equipment/ service/ IAA provision-** Too often, even when families manage to secure equipment/ information and advice or service provision, there is often a delay in delivering the 'product'. This can result in the child going a long time without provision which can have an impact on their ability to participate in education/ social activities/ family life. Often, by the time the provision is delivered, the child has outgrown what has been allocated- particularly the case with physical equipment.

**Alternative means of advocacy-** it is often very difficult to find someone with the knowledge to advocate for disabled children. Where they are able to, approaches can be too 'wishy washy'. There's an appetite for a more 'rights based' approach to advocacy that incorporates UNCRC, UNCRPD and UNHR.

## Disabled children are children

Finally, and probably one of the saddest point to arise. Children with disabilities are too often only viewed through the lens of their disability and needs. Too often, they are not viewed simply as children who have the right to and enjoy the same experiences, pleasures and rights as all children. Planning often neglects their hopes ambitions and visions, instead focussing on their needs and requirements.

## RESPONSE 3 – PEMBROKESHIRE YOUTH SERVICE

### Call for Evidence: State of Children's Rights in Wales

#### Thematic Area: General Measure of Implementation / Overarching Issues

More work needs to be done in Wales to ensure that children and young people are aware of their rights. We need to make sure that WG are framing policy and legislation under the UNCRC and Human Rights. Rights should be embedded into practice and accountability should be sort to evidence that this is happening. This would put an obligation on WG to take more responsibility of implementing a rights based approach.

#### Thematic Area: Education

*This has been written by a young person from the Pembrokeshire Youth Assembly as a policy statement for his position as MYP. He has agreed that I can share it with you as it a current and informed response to education inequality. This is an issue that young people have continued to raise over the last 23 weeks. The young person's name is Evan Price*

#### Main issue: End educational inequality: Improve provisions for online learning

The digital divide is a driving factor behind educational inequality in the UK. The government should increase and improve provisions for online learning in education to solve educational inequality.

Education is the most important issue that faces young people. It determines their quality of life in adulthood. As such, it is the responsibility of every government to ensure that each young person receives a good education that prepares them for life. The coronavirus lockdown necessitated that education be undertaken online. The benefits of online education are numerous however our recent experience has also exposed current educational inequality in this country through the digital divide. One million young people do not have adequate access to a device or internet connection. In the lockdown, 71% of state school students received less than one daily online lesson. We call on the government to improve provisions for online education through the development of a nation-wide online learning platform and to distribute necessary digital equipment to all schools.

#### Research on the issue

Study by UCL -

[https://www.llakes.ac.uk/sites/default/files/LLAKES%20Working%20Paper%2067\\_0.pdf](https://www.llakes.ac.uk/sites/default/files/LLAKES%20Working%20Paper%2067_0.pdf)

- ¼ of state school pupils received one or less offline lessons per day during lockdown.
- 75% of state school pupils more than one offline lesson per day during lockdown.
- 80% of private school pupils received at least one online lesson per day during lockdown.
- 71% of state school pupils received no or less than one online live lessons per day.
- 72% of private school pupils received one or more online live lessons per day.

A teacher's blog on education after COVID 19 - <https://bigeducation.org/lfl-content/kallipolis-academy-the-post-covid-school/>



- Discusses the various advantages of making education more digital. This includes better monitoring of pupils, the ability for students to tailor their education and a possible four-day school week.

Robert Halfon MP, Chair of Education Select committee - ***"I think this coronavirus exposes a deep digital divide in our country - the digital haves and the digital have nots."***

What needs to happen? An online learning platform should be developed under direction of government that can be used by all schools which will encompass the ability to upload and present resources and information. Teachers should be able to easily monitor students work – giving feedback and grades. As well as being accessible by parents so they can be more involved in their children's education.

<https://bigeducation.org/lfl-content/kallipolis-academy-the-post-covid-school/> - Teacher's blog

## **RESPONSE 4 – CARMARTHENSHIRE ASSOCIATION OF VOLUNTARY SERVICES (CAVS)**

### **Call for Evidence - State of Children's Rights in Wales (Please share your views)**

#### Definition of Play

"Play encompasses children's behaviour which is freely chosen, personally directed and intrinsically motivated. It is performed for no external goal or reward, and is a fundamental and integral part of healthy development - not only for individual children, but also for the society in which they live".

The local CVC was awarded a Big Lottery Grant (Healthy Families Committee) in 2007 for a 3 year project to set up a Regional Play Association for Carmarthenshire and Pembrokeshire, this duly happened although has since been disbanded.

During the existence CAVS were able to use the Play Association to gain further funding via Big Lottery Child's Play funds to run an Open Access Play provision across the two counties. Funding was received for a 3 year project in 2011, during the lifetime of the project it was evident that there would be a surplus of funds as staff were not recruited quickly so Big Lottery agreed that a further year could be gained with this surplus. The play project provided two teams one in Carmarthenshire and the other based in Pembrokeshire. The teams offered Open Access play provision both after school and during school holidays, come rain or shine. This project was well received by the children and their parents. The vans and staff were well known across the two counties. Play was also offered during lunch periods in schools by the teams. Attendance at big events such as Pembrokeshire Show each year raised the profile of the Purple Routes teams.

During the last year of the project funding was sought in order to keep the provision running, this had some success but unfortunately not as much as was hoped for.

Purple Routes managed to keep running albeit offering a much reduced service until November 2019.

It is my understanding that only a couple of play projects exist today in Wales from the millions that were received initially. Lack of investment by Welsh Government (even though there is a Play Policy 2002) and play is written into law has meant lack of local investment too.

In 2014 Groundwork Wales were awarded a contract to provide open access play provision across Wales, a strange move especially as most of the Child's Play projects still existed and were never contacted by

Groundwork either to work together or even pass over the reins of running provision to local projects. This major project now has finished, there are some legacies from the project however nothing that fully replaces provision across both counties.

“Wales: A Play Friendly Country” is Statutory Guidance to Local Authorities on assessing for and securing sufficient play opportunities for children in their areas. It is published by Welsh Ministers to give detail to the duty on Local Authorities under section 11, Play Opportunities, Children and Families (Wales) Measure 2010. This section of the Measure fully came into effect on 1 st July 2014. This Statutory Guidance combines “Creating a Play Friendly Wales”, the Statutory Guidance to Local Authorities on assessing for sufficient play opportunities (2012), along with new guidance to Local Authorities to support in securing sufficient play opportunities for children in their areas, 2014.

Each Local Authority area is responsible for producing a Play Sufficiency Audit, however this can be skewed as it incorporates all types of play provision not just open access play provision.

Children’s right to play is enshrined in Article 31 of the United Nations Convention on the Rights of the Child (UNCRC). The Welsh Government formally adopted the United Nations Convention on the Rights of the Child in 2004, and we are committed to making the principles of the UNCRC a reality for all children and young people.

There are three articles which particularly relate to this duty:

Article 31 (Leisure, play and culture): Children have the right to relax and play, and to join in a wide range of cultural, artistic and other recreational activities.<sup>2</sup> , which must be read in combination with the General Comment No17 on the right of the child to rest, leisure, play, recreational activities, cultural life and the arts (art. 31): “ The general comment seeks to enhance the understanding of the importance of article 31 for children’s well-being and development; to ensure respect for and strengthen the application of the rights under article 31”

Article 15 (Freedom of association): Children have the right to meet together and to join groups and organisations.

Article 12 (Respect for the views of the child): When adults are making decisions that affect children, children have the right to say what they think should happen and have their opinions taken into account.

In Wales play is established as one of children’s rights under Core Aim 4 - Play, In Wales play is established as one of children’s rights under Core Aim 4 - Play, Sport, Leisure and Culture, of the Welsh Government’s 7 Core Aims for Children, set out in Children & Young People: Rights to Action, 2004. (This has been superseded and not relevant today.)

The Welsh Government wishes to create an environment in Wales where children have excellent opportunities to play and enjoy their recreation time. Our Play Policy<sup>5</sup> states that: “Play is so critically important to all children in the development of their physical, social, mental, emotional and creative skills that society should seek every opportunity to support it and create an environment that fosters it. Decision making at all levels of government should include a consideration of the impact of those decisions, on children’s opportunities to play.”

<https://www.playwales.org.uk/login/uploaded/documents/Play%20sufficiency/Wales%20a%20play%20friendly%20country.pdf>

With the demise of Purple Routes it is recognised that open access play provision has diminished across the rural and urban counties of Carmarthenshire and Pembrokeshire, leaving children under the age of 15 years without safe places to play and without supervised play in nature something that is very much required in order for them to develop more holistically.

For me it is vital that children are able to play out in nature after school and during school holidays.

Play is a child's work.

No matter what is legislated for play seems to be down at the bottom of the agenda.

I worked in the field of Open Access Play for over 35 years, across the United Kingdom, I felt that Wales had got it right when they invested in this provision and bought it into their legislation.

However, over the years this has not been recognised as much as Education. Many of the Play Sufficiency reports include Schools as addressing the play needs of children by the introduction of the Foundation Phase, Flying Start and other programmes. In my mind these do not adequately cover Play.

I firmly believe that Play should be higher on everyone's agenda and it should be encouraged, especially play in nature as this also leads to a healthy childhood.

#### **References:**

Welsh Government - Play Policy

Welsh Government - Wales a Play Friendly Country UNCRC - Articles

## **RESPONSE 5 – WALES ALLIANCE FOR GLOBAL LEARNING & THE WELSH CENTRE FOR INTERNATIONAL AFFAIRS**

I'm responding as Chair of the Wales Alliance for Global Learning, and am also the Chief Executive for the Welsh Centre for International Affairs. My apologies in advance that I'm not able to submit more detailed feedback due to time and capacity constraints – I've been able to summarise some bullet points below and am happy to clarify if any points are unclear.

Our responses related particularly to the key themes:

- Education, leisure & cultural activities (with a focus on education)
- General principles (non-discrimination, rights of the child)
- Overarching issues (impact of Brexit and COVID in particular)

Within these categories, we have quite specific areas of expertise and interest – there will be other pressing priorities that we do not highlight here because they are outside our expertise and scope.

***What are the main issues that the Welsh Government and public bodies should be prioritising and why? (Please provide as much information as you can to justify your reasons) + supporting evidence (where available)***

- Within education, prioritise the implementation of the new curriculum in a way that ensures all learners receive the depth and breadth of education outlines in the new Curriculum for Wales. In particular:
  - o Developing knowledge and understanding of global issues, the skills to think critically and understand these issues, and the ability and confidence to take informed action – we broadly define this as global learning which incorporates global citizenship education, peace education, rights-based education and environmental education, recognising the cross-overs between these areas in terms of skills and values developed and the potential for pupil voice throughout.

Children are being impacted by global issues outside of their control – in the pandemic they had access to education and other freedoms severely restricted without having a political voice. This is equally relevant in the case of the climate and nature crises and the structures and systems that give rise to inequality and poverty. Concerns about these issues can cause anxiety and leave feelings of powerlessness and hopelessness. It is essential that young people have the opportunities to explore these issues within their education and to identify ways they can take action. Within this falls the essential media literacy skills that ensure they can navigate a complex information landscape. On another level, global learning also develops the essential ‘[Soft](#)’ and ‘[entrepreneurial](#)’ skills children will need for the [jobs of the future](#)

The new curriculum offers space for these kinds of activities but there is a potential for uneven implementation, but also for rich experiences that support global learning to be curtailed due to COVID as schools focus on ‘catching up’ missed education, and are hesitant about coordinating external provision in the classroom, or taking young people out of the classroom.

- Global learning also develops [empathy and value placed in equality and diversity](#) – it can therefore be helpful in tackling discrimination. A draft paper exploring this link further is attached **[please not for further circulation as it is a draft – the final version will be available shortly]**
- Finally, when approached correctly, global learning should develop pupil voice – putting young people at the centre of learning and action. This can support them to feel empowered in these complex and global issues, rather than simply subject to the decisions and actions of others. There are four global learning case studies [on our website as evidence](#).

- **Brexit, COVID and opportunities for young people**

- Experiences to develop skills, knowledge and values should be central to curriculum implementation; it is vital we find creative ways so COVID restrictions do not limit what is available to young people. As we try to organise events this year, teachers are informing us that there will be challenges taking part in digital events due to restrictions put in place by schools, councils or because of ICT limitations. Safeguarding is cited as the reason but this doesn’t explain the inconsistencies across regions and schools. Digital exclusion is an issue in homes, but also schools have very different access to digital resources. While many global learning providers have rapidly made the shift to be able to deliver online they are coming up against restrictive policies that differ between councils and schools.
- There are a number of international exchange opportunities that can be transformational to schools and young people (for example: <https://www.wcia.org.uk/blogs/volunteers-stories-calums-story-the-life-changing-magic-of-volunteering-abroad/>). These offer opportunities for young people to experience other cultures, develop solidarity and respect, and to transform their own opportunities. These are entirely funded by the Erasmus+ and European Solidarity Core funding. There is currently no evidence that these kinds of schemes will be replaced either at the UK or Wales level, severely restricting the opportunities of young people. This is particularly unfortunate as COVID19 has also had significant impact on available opportunities. On the plus side, there are these opportunities for the next 2 years which might provide some young people with valuable experiences throughout school and as they transition to working life.

***What policy changes/recommendations do you wish to make to ensure positive change for children?***

- Rather than putting in blanket bans on activities or software, schools and Councils should enable a flexible approach based on appropriate consents and risk assessments that are developed based on the age and stage of the young people and the facilities available in a given location. Safeguarding is absolutely vital, but should not be used as an excuse to avoid examining how different digital interventions can support rich education.
- Ensure the strong connectivity combined with sufficient ICT provision within schools which means young people can continue to experience rich and diverse educational experiences without the need for external providers going into schools, and without the need to travel and mix with other pupils.

To give an example, WCIA and Walk the Global Walk ran an online Model United Nations Conference and a Climate Change Summer school during lockdown (<https://www.walktheglobalwalk.eu/en/news/wales/1393-cynhadledd-model-y-cenhedloedd-unedig-ar-newid-hinsawdd-ar-lein> and <https://www.walktheglobalwalk.eu/hr/news/1412-international-summer-school-wales>) the latter of which involved pupils and teachers from Wales, Lesotho, France and Romania coming together to draw up recommendations on climate change.

- During curriculum implementation, support and inspect schools so the essential global learning elements outlined above (best captured in the new curriculum in the 'local, national and international contexts', 'diversity' and 'integral skills' as well as the four purposes) are supported adequately through professional learning, initial teacher training, whole school approaches, inspection and assessment frameworks. Moreover, in light of COVID, support and encourage schools to be creative in bringing rich experiences into the classroom digitally to overcome COVID movement restrictions. Some schools will need additional funding to ensure the appropriate digital infrastructure is in place.
- Promote the remaining Erasmus+ and ESC opportunities widely while they are still available.

Kind regards,

Susie Ventris-Field

Chair / Cadeirydd

Wales Alliance for Global Learning

Cynghrair Dysgu Byd-Eang Cymru

07495522387

[www.wcia.org.uk/global-learning/research-and-policy/wagl/](http://www.wcia.org.uk/global-learning/research-and-policy/wagl/)



## RESPONSE 6 – BARNARDO'S CYMRU

Credwch  
mewn plant  
Believe in  
children



Barnardo's  
Cymru

**Response to: State of Children's Rights  
in Wales: call for evidence.**

**11th September 2020**

Barnardo's Cymru has been working with children, young people and families in Wales for over 100 years and is one of the largest children's charities. We currently run more than 60 diverse services across Wales, working in partnership with local authorities. We aim to secure better wellbeing outcomes for more children by providing the support needed to ensure stronger, families, safer childhoods and positive futures.

We use the knowledge gained from our direct work to campaign to improve the lives of children, young people and families by promoting positive change in policy and practice. We believe that with the right help, committed support and a little belief, even the most vulnerable children can turn their lives around.

## **Emotional wellbeing and mental health**

We are concerned that:

- Accessible and appropriate responses to support children and young people's emotional wellbeing and mental health problems remain varied across Wales.
- Developing a 'systems approach' led by health risks marginalising the valuable input of children's social services and the third sector and youth services that work with them. These services provide relational, therapeutic and child led approaches that ensure we avoid medicalising distress and stress responses to adverse circumstances. They play an important role in addressing the needs of the 'missing middle' as identified in the Mind Over Matter report (2018). However the health approach to closing this gap seems to be focussed on creating a framework for extending Local Primary Health Provision and marrying it with SCAMHS without considering the contribution that other sectors provide in addressing children's needs in this space.
- Strengthening the provision of psychological and psychotherapeutic resource and capacity in CAMHS would facilitate a more effective interface between health and social services/education through shared language and understanding of child development. However there has been little progress in this regard. Neither do we have a Matrics for Children, though it seems a draft has been shared internally with health colleagues.
- Work carried out to develop a whole school approach to wellbeing and the early work on developing a systems approach to addressing primary mental health has included the third sector. However the third sector organisations invited to participate have been primarily those working in mental health whose primary focus and experience, traditionally, has been in adult mental health. The extensive experience and knowledge of children's third sector organisations, steeped as they are in attachment, relational and ACE awareness and trauma-informed practice, has been overlooked. We fear that this will be to the detriment of the development of effective service provision for children and young people.

## **Context:**

In 2018 the CYPE committee published its report Mind Over Matter which highlighted the need for more support in schools, for those in high need and for those in the 'missing middle' who experience mental distress and behavioural problems, but don't meet the threshold for a CAMH service. It has since pursued government to deliver against the recommendations in the report. Despite some positive developments, including work on a whole school approach to mental health, progress overall has been slow as the follow-up consultation work carried out by the committee in December 2019 evidences.

The Children's Commissioner for Wales has been persistent in her pursuit of improved emotional wellbeing and mental health support for children and young people, calling for an integrated health and social care approach easily accessed via a 'no wrong door' system. The Commissioner recognises that:

‘Overall, it is clear that no single service, and certainly not the NHS alone, can meet our children’s mental health needs.’

Welsh Government has provided some additional funding for Regional Partnership Boards to address both early support and specialist therapeutic services for children who have high end residential need; however they have not required this to be part of an integrated model.

In ABUHB a model has been developed which incorporates a team of psychologists and a family approach delivered by Action for Children, which is the best example we have in Wales of an integrated model. However this remains very much a health aligned model. Whilst we welcome a model which includes a strong psychologically informed approach, it is not easily replicated across Wales due to the paucity of psychological and psychotherapeutic provision.

It is widely recognised that Children’s Services and the Third sector organisations they work with provide a valuable range of services to address the emotional well-being and mental health of children and families. Failing to develop a fully integrated, cross sector approach to addressing the emotional wellbeing and mental health children and young people risks missing a wealth of knowledge and service provision.

### **Covid-19 – impacts on emotional wellbeing and mental health**

We are concerned that due to the lack of progress in developing psychotherapeutic and psychological resources within CAMHS and in establishing a cross-sector approach to addressing the emotional wellbeing and mental health of children and young people, Wales is not well placed to address the additional burden of Covid-19 driven distress and ill health in children and young people.

#### **Context:**

A consultation carried out by Barnardo’s with children and young people reported that:

- The impact of Covid-19 has not been equal - Covid-19 and the measures to contain it have had a disproportionate impact on children and young people’s mental health and wellbeing, especially the most vulnerable and marginalised in society.
- Too many children and young people have to meet crisis point before they access support - children and young people said they wanted to be supported with their mental health and wellbeing at the earliest possible stage, before their needs escalate.

Young Minds conducted a survey research with children and young people with pre-existing mental health problems post Covid-19 and found that the pandemic and associated restrictions had led to serious deterioration on their mental health.

There is evidence that prolonged quarantine, especially if this involves separation from care givers, can have an impact on mental health. However it is children in the lowest socio-economic groups that are at highest risk of developing mental health issues as their families are more likely to fall into poverty, a known risk factor for mental health.

Wales has high levels of poverty therefore is not well positioned for weathering the impact of a pandemic which comes with a long tail of economic slump. More families will fall into poverty and more children will have their emotional wellbeing and mental put at risk as a consequence.

### **Child poverty**



- **Food poverty**

Prior to Covid-19 the All Wales Food Poverty Alliance reported that;

‘The safety net of our social protection system is failing to protect some of the most vulnerable people in our communities and half of all Welsh households experiencing poverty have at least one adult in paid employment.’

Due to an ineffective welfare system, low pay and poor quality employment, work is no longer a guaranteed way out of poverty. The economic slump that is happening in the wake of the health crisis will drive more families and their children into poverty. Food security and having access to healthy food is fundamental to child health and development. It has implications for children and young people’s learning, mental health and both short and long term physical health and mortality.

A report published by Herriot-Watt University, supported by the Trussell Trust, assessing the potential impact of the Covid-19 crisis on destitution and food poverty indicates that the call for food vouchers will remain well above pre-Covid-19 levels into 2021.

Prior to the pandemic the top three reasons for people needing food aid were:

- Low income
- Benefit delays
- Benefit changes

Emergency funding has been allocated to food provision during the pandemic period. However it is clear from Trussell Trust data that food poverty has become a deep rooted and established problem in Wales and across the UK. This will require rigorous long term planning to address fully.

- **Provision and take up of free school meals:**

In light of the above, addressing the impact of food poverty on children, young people and their families is an imperative. Welsh Government has continued the provision of FSM during the pandemic and has provided food support over the school summer holidays. However this doesn’t mean that food will have reached all children and young people impacted by food poverty.

In 2018 Welsh Government changed the terms of entitlement to FSM in response to the roll out of Universal Credit setting a threshold of £7,400 annual income, rather than including all children in families accessing Universal Credit. The Children’s Society estimated that this leaves 55,000 children, who are living in poverty excluded from receiving a free school meal (FSM). FSM are a passport to other support with school uniform, access to leisure and support with school trips and music lessons.

Welsh Government recently completed a Child Poverty Review which, disappointingly, will not be made public. Reporting to the last ECPN meeting in August the review lead outlined that Government recognise that Covid-19 will exacerbate child poverty and are focussing on ensuring that people who are entitled to financial support are getting all that is available. However, given that child poverty campaigners were calling for action to tackle escalating child poverty prior to the health crisis it is concerning that no new measures have been announced, aside from ensuring that system that was already in place is working properly.

- **Digital exclusion**



As part of the inequity exposed by the Covid-19 crisis digital exclusion has been striking, due to the impact such exclusion has on education. This inequity will have been impacting on children and young people over time as Hwb, the Welsh Government's learning platform for schools, has been a core part of school work and support and advice for families for a number of years. As digital education is poised to be part of the core curriculum in Wales, facilitating access to digital in all homes should be a government imperative.

It is the least of three challenges to fund tech equipment for pupils. The second, thornier challenge is ensuring all families can afford good internet access, which is clearly a child poverty related issue. As the child poverty review is going to remain unpublished we have little information on thinking in relation to this. Finally there is the issue of the unequal infrastructure across Wales in terms of connectivity, which adds to the inequity. Addressing digital inequalities will require considerably more attention from government going forward.

### **Vulnerable children and looked after children**

- We welcome the Welsh Government's action plan to prevent CSA; however we are concerned about increased risk of sexual exploitation and criminal exploitation, driven in part by rising levels of poverty.
- There is some evidence that during the lockdown gangs involved in criminal exploitation have adapted their methods and have shifted from recruiting in urban areas to transport drugs into market towns to local recruitment.
- During the lockdown there were reports of increasing levels of domestic violence. The Welsh Government responded with their 'Home shouldn't be a place of fear' campaign. As children return to school this autumn there is an expectation that further reports on the abuses children will have experienced at home will come to light.
- Our view is that there are insufficient services to support young families with inter parental violence and domestic abuse available through early intervention and children's services in Wales. Early experience of violence in the home is strongly correlated with later risk of CSE and HSB. It is well evidenced that violence in the home can have a detrimental impact on child development and wellbeing and can have implications for psychological and health behaviours in adulthood.
- Children's services experienced significant budget cuts during the decade prior to the pandemic. Whilst local authorities have been provided with additional funding to address the fallout from the pandemic we remain concerned about the capacity of Children's Services to respond effectively to the potential fallout from the crisis on top of already significant social worker caseloads.

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## RESPONSE 7 – PROMO CYMRU & MEIC



### State of Children's Rights – Submission by ProMo-Cymru and Meic

- What are the main issues that the Welsh Government and public bodies should be prioritising and why? *(Please provide as much information as you can to justify your reasons)*
- What information or evidence do you have to support this? *(Please provide as much information as you can, such as links to reports, case examples, statistics etc.)*
- What policy or changes in law need to happen and why? Any gaps?
- What recommendations do you wish to make to ensure positive change for children?

#### 1. Introduction:

This submission is by ProMo-Cymru, the organisation commissioned by the Welsh Government to deliver Meic, the information, advice and advocacy helpline service for children and young people up to the age of 25 in Wales.

This submission is based on the voices of the children and young people in Wales contacting Meic with their concerns, their thoughts, their wishes and their feelings.

#### Meic Headline figures as @ July 2020

- Between April 2011 and June 2020, 67,000+ issues were presented out of a total number of 52,000+ contacts.
- 52,000+ contacts, 67,000+ issues (lifetime)
- 57% IM, 20% text, 23% call (per quarter)
- top issues (lifetime): mental health and emotional well-being, family relationships, other relationships, physical health, rights and citizenship
- 4,000+ social media followers (lifetime), since Covid-19 increased to 5000+
- 250,000+ social media impressions (per quarter, high of 400,000), including advertising, and since Covid – 19 increased to 1 million+

- 10 - 20,000+ social media engagement (per quarter, high of 140,000)
- 30,000+ video views (per quarter), since Covid -19, increased to 60,000+
- 15,000+ website visits (per quarter, high of 20,000), since Covid-19 increased to nearly 40,000
- 300 – 500,000 website impressions (per quarter, high of 700,000)

For more information about Meic and ProMo-Cymru, please see Appendix 1.

This submission is set out as follows:

- a) Key messages and recommendations, focusing on mental health, respect for Views of the Child / Participation, and the impact of Covid-19
- b) Appendix 1: About Meic and ProMo-Cymru (PC)
- c) Appendix 2: Amended extract from PC response to consultation on mental health delivery plan
- d) Appendix 3: Note on Meic and Suicide and Self Harm,
- e) Appendix 4: copy of evidence submitted to CYPE Inquiry into Impact of Covid-19 on CYP
- f) Appendix 5: Supporting Evidence –pen pictures and links to / extracts from various research and reports

## Key messages and recommendations:

**CYP experiences as reflected in in contacts to Meic, emphasise the following key points (for quotes, please see below, Appendix 4, for pen pictures, please see below, Appendix 5):**

- **Unhelpful responses** received by the CYP when they disclose or seek help from trusted family, friends or professionals such as GPs or counsellors, inhibits CYP from seeking further help
- **Fragmented pathways** which do not match the CYP's individual journey and window of opportunity when CYP presents, inhibits help seeking behaviour and exacerbates underpinning mental health condition and / or aggravates well-being through heightened stress anxiety, frustration
- **Lack of CYP understanding / awareness of rights and advocacy whether universal or targeted (NASA)** and how these impact on expectations and entitlements inhibits, and is a barrier to accessing services
- **Lack of CYP awareness / understanding of face to face services, and online / digital services and resources** offering a range of available options, choices available, is barrier to self efficacy, and self care
- **Lack of CYP participation, involvement, collaboration challenge perpetuates traditional system design** which is not fit for purpose, not person-centred, and so, often, unattractive and inaccessible to a range of CYP – whole population as well those with additional barriers, challenges, disadvantages

- **Lack of (independent professional) advocacy accessible to CYP when voice not heard, little to no form of legal redress / challenge (as last resort)**

It is clear from these messages that **improvements and changes informed by a rights based approach to CYP mental health and the Views of the Child and Participation are essential, and must include the following:**

- Transition, and the need for agile services and pathways in to, out of, and between services
- More efficient and effective pathways for CYP in crisis or distressed from point of contact, to place / person of safety and care, with police being last resort not first
- Ensuring safe spaces, relationships and communities
- Coproduction and the voice and influence of CYP, and not seeing CYP as passive recipients of service and decisions
- Taking online digital messages and information to enable and empower CYP to take responsibility for their own self care, to them, in their spaces and not the other way round – expect them to access our websites and apps
- Central repositories and single points of contact for information, resources, and tools, complemented by multiple checkpoints, underpinned by holding / checking in facility, brief intervention, signposting and referral (including when in distress / crisis), and social media campaigns, reach and engagement
- SSWB Act (Independent professional) advocacy to be extended to all CYP ie: those not covered by current statutory regulations and frameworks eg: IMCA, IMHA, NASA, CHC
- CYP to be defined as up to age 25, on the basis of: i) research and evidence about the development of the brain, ii) lifestyle / experience transitions eg: school, college, university, employment, parenthood, independent living, iii) triggers of early life experience / trauma impacting later in life when young adult

Much of current Welsh – specific legislation and policy driving forward changes and development in health, social care, education are rights based and informed.

**Much more needs to be done to embed the connection to reality as experienced by CYP in their day to day lives, and including the organization, planning, and decision making about:**

- **investment and allocation of funding, commissioning and service specification**
- **design, implementation, quality and accountability of service delivery systems, and the interface / relationship between them**
- **design, implementation, quality and accountability of discrete services, and the interface and relationship between them**

- **dissemination, promotion, awareness and understanding of online tools and resources as well as face to face services**
- **local, regional, and national approaches and relationships in respect of the above**
- **involvement and co-production to inform the above**

All of the above have been drastically and mostly adversely exacerbated by the impact of restrictive legislation, policy and guidance in the wake of Covid-19, the implications and consequences of which remain to be played out.

The rights of CYP in this environment have been radically diminished: already inaccessible, unsatisfactory services closed and made completely inaccessible at a time when most needed.

The CYP voice has been mostly unheard, if not extinguished, with some notable exceptions from consultation exercises, surveys and Inquiries recently undertaken, reinforcing much of what is already known.

One example of the systemic and structural inadequacy of the response to CYP MHEWB needs, followed on the back of several contacts from CYP to Meic trying (and failing) to access school based counselling during lockdown and when most schools were closed to most learners.

A review of local authority school-based counselling provision, based on following up a centralised list of websites and links published on the Welsh Government website showed the following:

- a big variation in the access / navigation to the specific information on local authority provision and availability; some websites were very informative and easily navigable, others OK, others poor
- there was similar variation in response to emails to the designated emails requesting further information where this was needed / sought
- when / where information was confirmed concerning provision, availability and eligibility during the lockdown, there was again a significant variation between authorities and the services they contracted with about alternatives to face to face provision, with most offering a digital alternative, but not offering choice of digital platform, and variation in ease of access via online self referral

There were similar issues reported by CYP contacting Meic regarding difficulty accessing information about, contact with professionals and services including crisis mental health teams, CAMHS, advocacy. Services which seemed more accessible and responsive to the changes needed were helpline support services, as well as housing / accommodation services, relationships / domestic abuse services, benefits / finance.

## **Appendix 1: Overview of Meic and ProMo-Cymru (PC)**

**About Meic:** <https://www.meiccymru.org/> Strapline: Someone on Your Side

1. Meic is a WG commissioned service which ProMo-Cymru designed and has been managing since its inception in 2008/9.
2. Its reason for being is the need to ensure the safety of vulnerable children and young people particularly in the looked after system as triggered by a journey stemming from:
  - 2000: Waterhouse Report, and WG: Working Together to Safeguard Children,
  - 2001 Children's Commissioner appointed,
  - 2003: Telling Concerns Report (CC review into complaints against the authority), WG review of CYP advocacy services,
  - 2005 WG: Keeping Us Safe,
  - 2007, Jane Hutt Minister for Children and Education: "any new framework for delivering advocacy services should make some form of universal provision, as well as more specialist provision for particularly vulnerable groups. In this way, all children and young people in Wales, wherever they are, and whatever their circumstances, will be able to safely and straightforwardly access advocacy support"
  - 2011: Rights of Children and Young Persons (Wales) Measure
  - 2012: Children's Commissioner's Report: Missing Voices – review into CYP IPA
  - Social Services and Well-Being Act:
- "Local authorities, working with their regional partners, must ensure that extant advice services and helplines such as Meic...are linked and used effectively to develop reliable coverage for all client groups"
- Meic is part of the solution in helping local authorities deliver Part 2: Section 15: signposting people to preventative wellbeing services, and Section 17: co-productive approach and provision of information, advice and assistance (IAA) to promote early intervention and prevention
- Part 10: external, independent advocacy – potential single point of contact for statutory CYP advocacy (IPA and National Approach, active offer)
3. Operating 7 days per week, 8am – midnight, 365 days per year, accessible via instant message (IM or live chat), text, phone, and covering all issues – the main issues being relationships, and mental health and emotional well-being - Meic aims to help children and young people "speak up for themselves, to access information and their rights and entitlement, and to get something stopped, started or changed." (Missing Voices Report, 2012).

Our aim is to maximize participation supporting the child or young person to be an active, autonomous and fully informed agent in determining their help-seeking journey. This may include building resilience and self efficacy, signposting and referral to face to face support or digital / online helping

platforms and channels, challenging decisions / decision – makers about decisions affecting them, ensuring their entitlements are met where these exist, if / when these are not being met, or not known about.

What is Meic +

- Signposting / referral to local independent professional advocacy services, local services (subject to issue / need), national helplines
- Transfer to Samaritans, Childline, NHS Direct Wales (when busy, out of hours)
- Supporting families, professionals, any with interest in / caring for CYP
- CYP engagement, participation and involvement
- On line and social media campaigns and engagement
- Awareness raising and training

Aims and Outcomes

- facilitating / securing rights and entitlement
- empowering and enabling informed decisions
- equipping people with skills and information to make changes
- enabling voices to be heard to influence change and make a difference

Interventions

- stop / start / change model
- explore / challenge / action
- brief / solution – focused
- information, signposting
- self efficacy and self care
- advocacy incorporating:
  - self advocacy
  - informal advocacy
  - formal advocacy
  - direct representation

### **Headline figures as @ July 2020**

- Between April 2011 and June 2020, 67,000+ issues were presented out of a total number of 52,000+ contacts.
- 52,000+ contacts, 67,000+ issues (lifetime)
- 57% IM, 20% text, 23% call (per quarter)
- top issues (lifetime): mental health and emotional well-being, family relationships, other relationships, physical health, rights and citizenship
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- 15,000+ website visits (per quarter, high of 20,000), since Covid-19 increased to nearly 40,000

- 300 – 500,000 website impressions (per quarter, high of 700,000)

4. Helpline contact details:

- 080880 23456 (phone)
- 84001 (text)
- <https://www.meiccymru.org/> (instant message, contact form)
- [help@meic.cymru](mailto:help@meic.cymru) (email)

5. Useful Meic links:

Meic articles

<https://www.meiccymru.org/articles/>

Resources

<https://www.meiccymru.org/resources-for-professional/>

FAQs, including confidentiality

<https://www.meiccymru.org/faqs/>

6. Q&A: Funding:

Meic is funded by Welsh Government. ProMo-Cymru is an independent charitable organisation commissioned by WG to deliver Meic.

The commissioning process is subject to competitive tendering.

This means:

1. Meic is a completely independent service and cannot be compromised by other organisations or interests
2. PC is accountable to WG for the delivery of its service
3. PC satisfies the strict checks by WG ensuring PC is a credible organisation that is capable of delivering a quality and effective service

7. Q&A: difference between Meic and Childline:

We are an information, advice and advocacy service NOT a pure counselling/listening/emotional support service

We use counselling, listening, emotional support skills as part of our stop/start/change model which is solution focused and covers all issues

Meic is delivered by employed paid, trained, experienced staff whose professional learning and development is ongoing; it is not delivered by volunteers

Meic is a Welsh service, delivered by staff located in Wales, employed by PC registered and located in Wales, available to people in Welsh, and compliant



with Welsh Language standards

Meic is available to children and young people up to the age of 25, and does not stop at 18.



**About ProMo-Cymru:** <https://www.promo.cymru/>

1. ProMo-Cymru is a company limited by guarantee, registered charity, and has a trading arm
2. It is 30 years old and is founded on a value base built on rights, participation, and digital expertise
3. The legislative and policy drivers for our work and approach stem mainly from the UNCRC, The Children Act, the Rights of Children and Young Persons (Wales) Measure 2011, WG Youth Strategy, and the Social Services and Well-being (Wales) Act 2014. Essential to our work is understanding and promoting the benefits of digital, online, artificial intelligence developments
4. PCs services and projects are all about facilitating participation through information, advice, assistance and advocacy – directly, in most cases, but also through capacity building and the sharing of knowledge and passing on of skills

5. This has resulted in a number of high value and high profile projects and services which PC has designed and managed, such as CLIC, Meic, Family Point, Sprout
6. As well as business (design and development) services facilitating coproduction through the use of creative media – in particular radio, video and social media platforms
7. This is being done through digital / online platforms, providing added value, and improved access and reach in respect of the face to face social / health care service delivery market
8. Recent developments and innovation based on our Transform, Engage, Communicate (TEC) model include:
  - partnership with Public Health Wales, Yr Lab, and Cardiff University, to prototype an online tool to improve young people's timely access to correct sexual health information
  - partnership with Cardiff and Vale UHB facilitating service design workshops aimed at substance misuse service stakeholders and commissioners aimed at informing and improving the recommissioning process
  - member of ERYICA, and partnering with European states to design a youth information service design toolkit for youth information workers

## **Appendix 2: Together for Mental Health Delivery Plan – Response to Consultation (extract)**

There are many similarities between the emotional well-being and mental health needs of adults and children/ young people. However, there are also significant differences...

- **Standardised value and rights based language** (embedded in provision and delivery): young people have the right to have access to information, support and help in order to ensure every opportunity is given to them to help them (help themselves to) thrive and develop into well adjusted, content, healthy, active citizens – this means ensuring they have a voice that is listened to, heard and acted upon, where their wants, expectations and risks are respected and appropriately managed across all the disciplines and sectors working with young people to promote their emotional well-being and mental health

- **Transition, and the need for agile services and pathways between services:** for many CYP their emotional, social, cognitive, neurological, material transition from childhood to adulthood is long and tortuous; there is a swathe of CYP not known to services, struggling alone, inhibited by internal and external influences, as well as those known to services and also struggling perhaps in part due to ACEs and trauma. During this time they will manifest varying behaviours, abilities, capacity to

have insight, empathise, take on information, make decisions and put changes into place. Safeguarding, best interests and protection need to be balanced against rights and agency, promoting resilience in the face of adversity, and making mistakes (and learning from them, or not). There needs to be a greater understanding and awareness as well as skills base and service provision that reflects the spectrum of psycho – socio-economic contributors and determinants of poor mental health including – but not exclusive to adverse childhood experiences (ACEs), poverty, deprivation, exclusion

- **Safe spaces, relationships and communities:** CYP need a choice of preferred safe, suitable, user friendly accessible spaces to communicate and interact with each other, with trusted adults, with professionals, sometimes in confidence, in private and with anonymity – face to face, on the phone, social media, on line; they do not all respond (well) to face to face provision, talking therapies; they need to learn and understand how to (re)search) on line and distinguish between reliable / trusted information and not

- **Coproduction and the voice and influence of CYP, and not seeing CP as passive recipients of service and decisions:** young people must have a voice that influences not just their own personal journeys and the decisions made by professionals affecting them, but also be active actors in influencing change and scrutinising the quality of service delivery, design, system, planning, resource allocation, policy

- **Coproduction and training, awareness raising, and campaigning:** there needs to be cross sector and co-produced training and awareness raising to know and understand universally applicable interventions and skills to promote strength, assets, resilience – aimed at CYP, schools, youth services, parents, families, communities

### **General overarching observation:**

1. **A general overarching point we wish to make is the difficulty in knowing, retaining and using information that is to be found in the plethora of services, and policies and recommendations** (eg: 31 recommendations from Everybody's Business, 27 Recommendations from Mind over Matter).

1.1. This difficulty is further perpetuated and exacerbated by the use and reference to language that is inconsistent, when it should be driving universal and positive messages about key principles and values that are person-focused and rights based, and which inform so much of our devolved legislation.

1.2 A further challenge relating to the above is not just about the amount of funding resource that is allocated, but also the way in which the financial investment is planned and deployed through national, regional and local planning and commissioning and other arrangements that do not dovetail nor have the flexibility to most effectively match CYPs needs, transition, and journey; where service specifications still refer exclusively to traditional face to face services - where more and better reach and engagement could be achieved with significant economies of

scale and better value through smarter cross boundary regional / all – Wales deployment. Online/ digital platforms are not geographically restricted, presenting a valuable but, as yet, unrealized opportunity, to reach and engage with a sizeable audience.

### **Specific comments:**

#### **1. CYP Focus and Experience**

The focus of policies remains on discrete services and processes governing these as stand alone entities.

Our experience tells us that CYP are concerned to get the help needed at the time it is needed; in order for this to happen, they need to be able to find it easily and receive an appropriate, helpful, and timely response.

CYP need to be able to access, as well as pass seamlessly through, into, and out of a range / number of services to meet their needs as they change.

If the CYP receives this, they are likely to be very satisfied, and not concerned about what the service is called nor who runs it.

Our experience tells us that this is not happening and there remain significant blocks and challenges.

#### **2. CYP access to information, advice, assistance and advocacy through Multi Platform channels**

There remains a lack of understanding and buy in to non face to face platforms offering opportunities and choice to deliver help and support to CYP in respect of their emotional well-being and mental health. It is increasingly understood and recognized that online and digital platforms and channels offer significant advantages and benefits in terms of accessibility and user friendliness, that can also help to “hold” individuals as they wait for (other) services and interventions, that promote self efficacy, and that yield cost savings. Our experience demonstrates this. Furthermore there are signs that online developments are in danger of repeating and perpetuating the mistakes of face to face design and delivery with a plethora of go to sites (websites, helplines and apps) none of which speak to each other, which are difficult to locate, and are not curated. Finally, evidence is showing that certain population groups are moving away from websites and apps, and more towards social media platforms and direct messaging – it is essential to understand these trends if messages are to be effectively targeted, especially in the context of theory of change models, where trusted information is an important stepping stone to change.

#### **3. CYP Co-production and Service Design**

There remains a deficit in addressing the issue of the active engagement and participation of CYP in influencing change and improvement: i) from their own personal experience of having a voice and being heard, having choice in knowing about and having access to options, and control over their own journey, including decision-making processes that are led by professionals ii) in developing, designing and implementing new services, iii) in reviewing and evaluating existing services to make them fit for purpose and / or improve them, iv) reviewing and evaluating

quality and accountability, v) sharing decision- making responsibility and being represented at decision-making structures. Our experience shows better outcomes and solutions are achieved when this happens.

#### **4. Universal and Targeted Promotion and Awareness raising – Communication Strategy**

There remains a deficit in ensuring clear, succinct, coherent messages to the general public as well as to targeted audiences. We would argue that this is key to CYP taking responsibility for their own emotional well being and good mental health, as well as facilitating a service design and system that is agile enough to accommodate multiple, complex, changing needs presented by individual CYP. Our experience shows better CYP and professional awareness, trust and confidence when this happens.

There needs to be cross sector and co-produced training and awareness raising to know and understand universally applicable interventions and skills to promote strength, assets, resilience – aimed at CYP, schools, youth services, parents, families, communities

In addition, and linked to this is the “missing middle”: those young people who get in touch with Meic and similar services who are not known to services and struggling / stuck on their own eg; sofa surfing and not know about local homelessness provision and entitlement to housing and support

OR who may be known to services but wish not to engage with them in relation to particular issues due to internal inhibitors eg: shame, embarrassment, stigma, and / or external inhibitors such as lack of availability outside of office hours when in crisis, not being aware of rights and entitlements.

### **Appendix 3: Suicide and Self Harm**

**The Meic helpline** receives an average of between 20 - 30 suicide per quarter, self harm related contacts from a diverse range of situations, levels of crisis and distress, and reflecting intent. An average of between 5 – 10 contacts in any given quarter will be deemed threat to life, resulting in referral to emergency services – the police - to enable the police to locate the individual concerned and ensure their safety / preventing the loss of life.

The helpline demographic is mainly those aged 11+, (there have been contacts from children as young as 8), male and female, across Wales. Demographic intelligence is gathered only at the discretion of the HAA and / or if offered voluntarily by the individual, and so offers only a sample snapshot. Many have current or had previous involvement with various face to face services, and many do not, some have tried. Many of the YP contacting us are fearful, sad, lonely, introverted, do not wish to /

are unable to reach out and speak to trusted adults or friends, are stuck and overwhelmed.

The impact of Covid-19 has significantly increased the proportion of contacts presenting to Meic with MHEWB concerns - including suicide and self harm – and has served to trigger previous and first time self harming behavior and suicideation. The HAAs are now concerned about the impact of new guidance to call before walk to A&E.

The Meic HAA Team offer help and support in the following ways:

- Giving young people the space to discuss their situation without judgment
- Supporting the young people to retain as much control as possible over their situation and the information they give us, even when emergency services need to be contacted
- All HAAs are ASIST and YMHFA trained – it is a multi skilled, experienced and knowledgeable professional team; individuals come from a range of backgrounds including social work, youth work, criminal / youth justice, teaching, legal – they are also trained in restorative practice, coaching skills, skilled helper, children's rights, advocacy, and ACES
- Where young people can identify a specific cause for their suicidal thoughts (e.g. homelessness, substance misuse, abusive relationship etc.) we support the young person to tackle these issues
- Advocating on behalf of young people to access mental health support services that they are entitled to
- Helping young people resolve issues that can be contributing to suicidal thoughts and feelings
- Helping young people to identify on-going support through existing support networks and via outside agencies such as primary care, the Samaritans, specialist suicide support services such as Papyrus' Hope Line, CALL, Shout, Young Minds, local voluntary sector services
- Directing young people to on line information and resources for their own self efficacy
- Contacting the police when a young person is in immediate danger or at risk of significant harm when a safety plan cannot be formulated, and a young person discloses that they intend to carry out a plan and die by suicide
- Referral to safeguarding if not immediate threat but risk, often relating to trigger of past / historic abuse

## **Pen pictures:**

### **Distress, signposting, emergency services**

Young woman phoned Meic very down very sad and tearful. She stated that she was considering taking an overdose and had done so before. She stated that she had the tablets with her. HAA talked to YP and explored situation about her situation and circumstances, trying to establish rapport and trust while also trying to encourage YP to putting the tablets out of reach while she was on the phone in

order to make a safe space to talk; she refused to do this and confirmed she was home alone while her family, who she is close to, were out shopping. During course of conversation, YP confirmed she had experienced depression since she was 13 and that despite having been in hospital, following previous overdoses she is not currently receiving any support from Mental Health Services, and did not want to bother GP; she was taking medication. Hospital had said they were going to refer her for counselling but this had not happened. HAA suggested signposting to online services and gave links, including to Papyrus, revisited close relationships with family, explored what made her happy, while also trying to ascertain safety and encourage putting aside tablets, and explaining responsibility for ensuring her safety. The line cut out ending the contact without establishing safety but having already obtained personal details, so decision made to breach confidentiality and contact the police who confirmed follow up as emergency and for welfare check to be undertaken.

### **Distress, self harm, emergency services**

Instant Message (IM) from young woman saying she had been directed to Meic by CMHT, which now closed. The YP said she had bad news from home and was managing a difficult situation and feels broken. The YP spoke about feeling unsafe, thinking about self-harm, worrying about her physical as well as MH as she hadn't eaten for 3 days and had been drinking alcohol. She said she is currently under a 'fit to practice' restriction due to her MH, and is feeling self-destructive. She confirmed that she wasn't going to self-harm but thought that she might need medical attention, possibly fluids or foods. The YP didn't feel she deserved to get medical attention, or to eat and that it would be a waste of time to call the emergency services. She confirmed that the police had attended previously and had had to knock the door down as she had collapsed. After an hour and a half of veering between wanting help and not wanting to trouble anyone, the YP agreed to share her details with the police, and for the HAA to ring the CMHT. The CMHT confirmed they were only available via out of hours GP referral. On contacting the police, the operator asked for confirmation if the YP had anything on her with which she could use to self harm; she confirmed she didn't. The operator confirmed that a MH practitioner based with the police would call the YP, and the ambulance service would be sent to the YP's address. The HAA remained in contact with the YP until she confirmed that she had been called by the paramedic and they were on their way. The YP thanked the AA for her time and help, and ended the chat.

### **Suicidal thoughts, self harm, past intervention, range of pressures, signposting:**

A young person (YP) contacted Meic by phone to discuss his suicidal feelings. He confirmed he had no immediate plans to kill himself. He explained that his relationship had broken down, school was stressful and the relationship between him and his mum had broken down, following his parents' split, resulting in him moving to live with his dad after his mum's repeated late night abusive behaviour towards his dad. He also explained that he had self-harmed in the past by cutting

and bruising himself and had recently stopped eating properly. Further details about his history revealed various interventions including a mental health assessment resulting in no further follow up, and counselling which was felt to be of little help. The YP confirmed he did not really want to die in spite of the suicidal thoughts, he just wanted to feel better. The YP confirmed he had a good support network and that he could talk to his dad; he didn't feel he could go to his friends who had their own issues. The HAA clarified that the YP did not intend to kill himself, and signposted the YP to Papyrus for more specialist support as well as The Mix, and Meic's calming sites for further information and resources on mental health issues and how to deal with them. The YP thanked the HAA for talking to him and said he felt a lot better.

### **Plan for suicide, acute distress, history, holding intervention, police intervention:**

24 year old male very upset crying on the phone, said he was suicidal and needed help. HAA asked if he had a plan, he said he wanted to kill himself and said he could do it a few ways, then hung up. YP called back in a few mins and same HAA took call. YP gave name and local town, said he needed help, had tried to stab himself earlier on today but knife was too blunt. Asked if he had another plan YP said he had taken cocaine and drunk 24 cans. HAA explained concern for his safety and requested further contact / identifier information, which he refused. YP acknowledged need for help, had been on medication years ago but hadn't been to see his GP and no mental health support at the moment; he had found his Mum dead a few months ago, he had been in prison when he was younger. He had tried to kill himself several times before, overdosed and jumped out of window. YP broke down in tears again, talking about finding his dead mother. He said he wanted to talk about her, YP was crying and unable to talk at the point. Then YP said he had rope in his room and he had tied it around his neck; voices were telling him to do it. HAA instructed YP to listen to her voice not the voices in his head and that he needed to take the rope from his neck and to take 5 steps away – HAA reassured him she was there to help him to keep him safe. YP said he couldn't and was sobbing, HAA repeated reassurance and instructions. YP silent, prompting HAA to ask if still there and YP confirmed had taken rope from neck and stepped away. HAA praised YP, told him that he needed to make sure to listen to her voice now. YP said he had lost his cocaine, spent time looking for it, HAA engaged in this conversation with him to distract him from the rope, YP then said he needed to throw up and went to the toilet to be sick. YP said he had tied the rope around his neck again, HAA repeated instructions as before and YP complied for which he was praised and reassured. HAA explained to YP that help was on the way and could get to him sooner if provided his details, which he did and which were forwarded to the police. HAA kept him on the phone while waiting for the police to arrive, instructing him to stay on the phone until their arrival and then hand over the phone to them police which he did – his safety ensured.

## **Appendix 4: Evidence to CYPE Committee Enquiry: Impact of Covid-19 on CYP**



## **1. About Meic:**

### **Meic is unique –**

- Universal, low threshold and easily accessible central point for information, advice and advocacy support service for children and young people (CYP) in Wales up to the age of 25 in Wales
- Commissioned by Welsh Government through tendering, designed, delivered and managed by ProMo-Cymru since inception in 2008 to the present
- Access to Helpline Adviser Advocate (HAA) from 8am – midnight everyday 365 days per year through instant message, text, phone, email
- Participation and engagement by whole Meic community facilitated via Facebook, Instagram, Twitter, YouTube, and Website
- Meic offers children and young people the chance to have a voice and be heard, listened to and helped, without criteria, without judgment
- Value base embedded in UNCRC and SSWB Act: information, rights, advocacy, safeguarding, early intervention, prevention

## **2. Meic's experience and expertise is steeped in knowing and understanding:**

- Knowing something, and acting on this to make a change, is hard
- Adjusting to change imposed on you is hard
- Both are influenced by a complex interplay of control, influence, power, and motivation – all of which are often hard or out of reach for many children and young people
- Adolescence for many is a difficult transition; the journey that takes place over several years from dependent childhood to independent adulthood is fraught and influenced by many internal and external drivers – some toxic and inhibiting, and others nurturing and empowering
- A rights based approach is essential in giving young people a voice

## **3. Covid-19 has introduced disruption and uncertainty into all aspects of children and young people's day to day lives: education, family life, relationships.**

Extrapolated from this is an implied question: the extent to which CYP rights (and outcomes) are being disproportionately compromised for the sake of wider protection concerns. The immediate impact is clear:

- The key feelings being expressed are: alone and overlooked, fearful and scared, worried and anxious
- The key issues being presented are: Covid-19+ mental health and well-being, relationships, education, family life, living arrangements. Bullying has decreased from 3% to 1% of all contacts.
- The proportion of Covid-19 related contacts to HAAs is approximately 30% of all contacts; this is likely to be an underestimate.
- Less clear are the longer term impacts, as we emerge from lockdown in the short term, adjust to life with the pandemic in the medium term, and return to a new normal in the longer term.

## **4. Successes and difference made: Helpline Adviser Advocates have been able to intervene across a range of situations and issues to provide**

**information, signposting, support self efficacy, facilitate access to services, protect life – a very few examples include:**

- supporting care experienced young person to establish contact with advocate – having lost contact during transition from face to face to alternative provision,
- support young person resolve family conflict after being forced to return home to Wales from university in England during lockdown,
- supporting grandmother concerned about grandson whose mother is frontline NHS worker to explore options around communication about living and care arrangements,
- supporting the father of 17, soon to be 18 year old, concerned about son's discharge from psychiatric unit into community in context of Covid-19 and transition to adult services, and signposting to advocacy service for YP,
- supporting young carer of alcohol dependent mother, to access alternative help and support following closure of service she was using due to Covid-19,
- supporting young person to access school counseling via different route and pathway following changeover to online platform,
- clarifying lockdown regulations in respect of young person wishing to be with their partner,
- supporting young person with strategies to relax and help reach calm when anxious and stressed,
- supporting young person with communication strategies for resolving / avoiding / minimizing arguments with family in household

**5. Information:**

**The Meic online and digital engagement work** reaches a very large audience in their 100000s. 65% of the audience is CYP, 35% is adults. The demographic reflects all-Wales coverage, mostly in keeping with the general population figures for the health board footprint. The content is being accessed mostly through the phone, but also through other devices including tablets and PCs. The channels and platforms through which Meic content is being distributed includes: Instagram, Facebook, Twitter, Meic website, and YouTube, and are being accessed through various strategies including advertising, content management, search engine optimization.

As a result – per quarter:

25000+ website visits per quarter, 80+ websites directing traffic to Meic

60000+ video views

280000+ social media impressions, 6000+ engagement

What this means and **why this is important** (in respect of prevention, early intervention):

- we are going directly to CYP and the virtual spaces that they occupy as routine, rather than expecting them to find and come to us
- they are getting messages and information that they can choose to engage with: acquiring information / knowledge - to help their

understanding, empower them to help themselves (and others) through self efficacy and self care, to find additional support to meet other needs

- this means many are getting what they need, and so, may never need further, more resource intensive help
- professionals, practitioners, parents and carers are equipped with information to support CYP in their roles as trusted adults
- following the arrival of Covid-19 ProMo-Cymru significantly scaled up Meic's Covid-19 specific and related communication and engagement strategy in order to mitigate the need and gap resulting from CYPs' reduced face to face contact with education settings, youth services, social care services, community / voluntary sector support services;
- this has resulted in exponential increases in segmented audience reach and engagement during April and May compared with previous months;
- the focus has been on 4 key young person friendly and accessible messages and messaging: i) Covid-19 – what is it, what are the regulations, ii) how to stay safe, iii) reclaiming control, iv) Meic is still here

#### **Website:**

- i) accessed by the broad Meic community including CYP and adults (parents, carers, relatives, social care and health professionals, support workers, practitioners, teachers...),
- ii) device breakdown and YouTube video views suggests demographic is mostly YP – estimated breakdown: 65% CYP / 35% other
- iii) all-Wales coverage mostly aligned to population spread
- iv) doubling of number of visitors from 12,000+ to 25,000+ and sessions from 16,000+ to 35,000+ pre / post Covid,
- v) most popular pages: homepage and get help, most popular articles: Worried About Coronavirus, Activities during lockdown, Tips to Keep Calm, Covid-19 Tag Archive, Getting Parents to let you go out with Friends
- vi) much of this has been picked up and included in the new mental health toolkit developed by WG and going live 1 June

#### **Instagram:**

- i) accessed mainly by CYP 13 – 34 year age range, two thirds female
- ii) 4-fold increase in output - including new designs and graphics, stories, and playlist - increase in impressions from 1,000+ to 100,000+, increase engagement, from less than 100 to more than 1000
- iii) creation of linktree linking Instagram to key links on Meic website

#### **Twitter and Facebook (FB):**

- i) FB demographic: half aged under 25, one third 35+, mostly female, Twitter mostly adult – professional,
  - ii) output (posts) doubled, impressions increased from 32,000+ to just over 400,000, engagement increased from 400+ to 9,000+
- **Most popular post across social media platforms:**



## 6. What children and young people are telling us:

### 6.1 Feelings:

- *i don't know what's wrong with me and don't know who to talk to*
- *I just feel sad, and empty. Like my whole body just feels out of energy and sad, I'm eating well, exercising, getting good sleep but I feel unmotivated*
- *I think it's just a combination of feeling stressed about school work and feeling lonely from not seeing friends. Even though I'm stressed I also just can't seem to care, I just don't know what I'm doing*
- *I'm having panic attacks*
- *i have had these voices for a while now, but being in lockdown has only made them worse*
- *I struggled previously with depression. And with this lockdown. I feel like I'm struggling with it again I feel like I'm going down hill and i don't know how to stop it*

### 6.2 What they are coming to the helpline for:

- *because im already struggling enough with lockdown i dont need relationship problems aswell*
- *are we now officially in lockdown? what does this mean? i live in a household filled with hatred towards me and also work in a food shop. will i still be working, and can i decide where i go into lockdown? im very confused*
- *am i able to go to my mums or boyfriends and continue to stay there for the lockdown*
- *I need advice on how to deal with things better I guess? Like when my parents argue,*
- *Maybe some encouragement and motivation to get my college work done to go to uni?*
- *I think it would be helpful if you had any idea on how to lift ones mood when they are in a bad place*

- *i need someone to talk to about another coping mechanism which may work better for me*
- *I'm 30 and my younger sister is 13. All is not well in her house with my mum and her stepdad. I think it would be best for them to have a break from one another, but I'm not sure what to do in light of coronavirus. Is it reasonable to have her come stay with me for a while? She is also under CAMHS*
- *I had a mentor in school. A counsellor. But they are stopping my session because of lockdown. I have been to camhs previously struggle to talk to her. Only because she didn't talk to be as I was in school. She was hardly there and when we arranged a chat. She always had to cancel*

### **6.3 Why to Meic helpline:**

- *I'm not the type to talk to people, I understand that it could help but It wouldn't make a difference or make things any easier. When I say not the type to talk about people, I mean about problems and struggles.*
- *i don't want to give the impression that I'm weak or can't deal with it.*
- *I thought i was doing okay without any support but it's not getting any better*
- *I never really reach out as I don't really know what could help*
- *i'm not receiving any kinds of support like that because nobody really knows about it.*
- *i don't really want to talk to my parents about it because i have talked to them about things like this before but they just didn't really understand. i have a sister but she is younger than me so that's not very helpful and i don't really have way of getting in contact with people like my GP. i have tried to hint slight things to one of my friends but they just don't really take it seriously because they don't really know how to respond.*
- *I don't find that I talk to people that much about it, I don't want to be a hassle. I very rarely will tell 2 of my friends when they ask how im doing but i don't go into details. The only family I have is my father but I don't have a particularly good relationship with him. But he suffers from depression and I haven't told him of my mental health struggles because i don't want him to get worse worrying*
- *I've come to meic before and I found that it helped*
- *i can vent*
- *She told me that I wasn't trying enough to get better. It made me feel like I wasn't good enough*
- *My mam works in the nhs so is in work all the time. And I don't want to add more stress on her I just feel like I'm struggling but don't want to talk to my family*

## **7. Road map out of lockdown and beyond:**

- While there is some clarity, there remains a lot of uncertainty about the details and impact of what will happen to children and young people's day to day

lives, and the longer term consequences on their development, outcomes and opportunities.

- The immediate crisis has generated considerable solidarity, agility, flexibility, and creativity across a spectrum of life (not least the NHS), while at the same time exposing weaknesses and gaps.
- Some of these gaps and weaknesses include (this is not an exhaustive list): i) on-going issues with information: access to it, its accuracy and accessibility, navigating round it to ascertain pathways and processes, ii) inequalities as evidenced with (lack of) access to tech / online / digital alternatives, iii) perpetuating traditional barriers between statutory services and CYP eg: insistence on using Microsoft Office or Skype, when CYP more likely to use What's App, Zoom
- In moving forward to mitigate and reduce the adverse impact of the pandemic specifically on children and young people as they navigate a fraught journey into independent adulthood, now is certainly the time to seize the day and review traditional models of face to face CYP focused service delivery and awareness raising, and ensure transformational change and alternatives fit for the 21<sup>st</sup> century.

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## Appendix 5: Supporting Evidence

### Pen Pictures

#### 1. Suicide, mental health, financial issues – Direct representation, Advice

**SITUATION:** Telephone contact from male with a belt ready to hang himself, a lethal amount of a variety of prescription drugs in front of him and a suicide note written. Contacted Meic in desperation at 6pm, to speak to someone before he "goes". Male had contacted Meic initially for emotional support in process of a suicide plan. Confidentiality and breach process explained and what Meic could do to help him make a plan to stay safe for now.

ASIST process followed and a reason to live eventually identified as extended family. Emphasis placed on suicide as an option not being removed entirely, but delayed for now, at least until HAA had explored and identified possible sources of support and "hope" with the person.

The catalyst this evening was running out of gas, electric and food. The male has ongoing physical and mental health issues which have resulted in hospital

stays. Hospital stays impacted on his PIP and benefits which have been entirely cut off, he has been denied access to emergency benefits and has mounting debt. He has tried to reach out for help but he doesn't feel that anything is actually do-able to change his situation so he has no option but to end his life.

**CHOICES:** The HAA explored support from mental health services such as accessing the mental health team through his GP, Mind, Samaritans and Hywl (a meeting was arranged but not due for couple of weeks - discussed bringing forward). Number taken for Samaritans. HAA explored the options for help with reduction of debt but at this stage the contact was convinced nothing would change.

Breach issue revisited. HAA negotiated with the contact that he would stay safe until Meic had identified a way to make a positive change in the immediate short term, that evening and provide evidence that things could improve with the right help. The contact agreed to this. HAA suggested that Meic advocated for him with his Gas and Electric company to see if anything could be done about heat/light in his flat as it was something which was clearly causing him considerable distress. The contact accepted the offer and the information he wanted to get to the dual fuel provider taken. The contact said that he wanted to let Meic know that he appreciated the time HAA had taken to give him hope and that he thinks he will stay safe tonight but that if he does carry out suicide it was only delayed because of our help and not to feel any blame because we had been "amazin' love". The HAA and contact agreed to reconnect after advocacy had been carried out.

**ACTIONS and OUTCOMES:** HAA made contact with the customer services department for the energy provider and explained the situation and advocated. Customer Services representative empathised and arranged a call back to be made to Meic from the internal department who could act on the information provided. HAA was reassured that something could and would be done to alleviate the distress caused.

HAA updated contact and reassured him that something was likely to improve once Meic received the call back. Agreement reached to temporarily put the pills and belt out of view. Discussion had around the availability of immediate human support from friends/family to reduce likelihood of carrying out suicide this evening.

Callback received from energy company. Background and advocacy provided. HAA negotiated a call being made on the client's behalf to the National Grid - they have engineers with the ability to perform emergency resets and add credit for those in dire need. Appointment made by the customer service staff member for an engineer to visit the client at home within the next three hours. Appointment made with the customer service staff member to call the contact. During this call the customer service staff member was able to clear debt and service provision arrears, provide a better tariff, as well as arrange non repayable credit at local shop. HAA expressed deep gratitude to the staff member on behalf of the contact .

HAA phoned the contact and provided details of all of the changes that would be taking place this evening and tomorrow. The contact was surprised, overwhelmed and extremely grateful. He said "I can't believe what you done for me like I can't thank you enough. Can't believe this is happenin' like you know? What you done is amazin' love"

HAA said that meic were pleased to have been able to have made a difference. HAA confirmed with the contact that he would stay safe. He said the steps meic had taken with him meant he could "see the light like" and following our advice he had invited a neighbour in to keep him company at the flat.

Reissued advice to contact the Samaritans who are available 24/7 when needed. HAA provided a recap of services available and the agreed plan for the next four days.

The plan was developed in pockets throughout the contact and included contacting CAB again as finance advice had been offered; filling in the online form or calling National debt advice and Turn 2 us; attending a drop in at the Hwyl MH support service; getting in touch with his local Mens Shed's Cymru group and joining them on Monday (name and number taken). When the opportunity presented, the HAA gently explored his relationships with family who he did not want to burden with his issues. With questions aimed at getting the contact to reflect and consider actions and weigh against consequences he recognised that if his sister was going through similar he would rather she talked to him than take her own life and wouldn't think she was a burden. He agreed he would have a very honest chat with her as she did not know how desperate he is feeling. He will call the Samaritans if he needs emotional support and revisit his GP for referral to secondary mental health support. The contact took notes of the plan including contact details for him to refer back to.

## **2. Family relationships – Advocacy and advice on support for younger sibling with poor mental health**

### **Desired Outcome**

24 year old YP wanted advice on how best to address 17 year old younger sister's poor mental health.

### **Situation**

YP worried about sister's mental health, and gave background: their father killed himself 6 years ago, and mum entered a new controlling relationship shortly after. Their mother started drinking and recently attempted suicide. The triggers for the YP's contact were based on younger sister experiencing very low mood, lack of motivation, loss of interest in education.

Based on this discussion, having also checked the scenario out with social services, and having established there was no immediate threat to life or risk of significant harm, the HAA explored avenues of support that might be helpful.

### **Choices/Options**



HAA discussed possible support options that might be available to the YP and to her sister, including pastoral services offered by the college, community-based and helpline mental health services aimed at young people, generally, as well as specific to children of parents with alcohol problems, and early intervention support for the family from the local authority.

### **Action / Outcome**

After discussion and exploration, it was agreed: YP would act as informal advocate on behalf of sister in discussions with college. It was also agreed that HAA would forward (by email) list of services available to help and support for sisters to explore and decide on appropriate follow up, including whether referral to action early intervention support required.

## **3. Mental health issues – Self- help – Advice and emotional support**

**OUTCOME** - YP seeking advice and support with managing depression and self-harm.

**SITUATION** - YP contacted meic by text on boxing day because they are feeling like their depression has returned and needed some advice and support. YP explained they had depression before, self- harmed and attempted suicide. They recovered in hospital and accessed counselling but they found visiting friends the most helpful aid to their recovery.

**CHOICES AND OPTIONS** - HAA confirmed with the yp that they were safe and had no intention to carry out suicide. YP expressed a desire to stay safe and continue to avoid self- harming. A discussion around people they could turn to ensued and the yp was encouraged to reach out. YP agreed that the people who love them would not want them to feel sad.

**ACTION** - HAA reassured the yp they did not have to face this alone and empathised with how they were feeling. YP decided to consider the options discussed and finish the chat. Before the YP left the HAA recommended Calm Harm and provided the details for the YOUNG MINDS crisis text service for additional support.

## **4. Direct representation: Referral to IPA: Active Offer of Advocacy for a young person looked after by the local authority.**

**Issue/ Outcome:** YP currently looked after by the local authority, in a local foster placement. YP felt that the social worker wasn't listening to her views and wishes, with regards to her desire to move back to live with her mother and father.

**Situation:** YP contacted Meic, requesting an Advocate to support her with this situation, so that her views, needs and wishes were being heard and represented appropriately. On several occasions, she explained that the Social Worker had not

listened to her, and that in her own words: "The Social Worker thinks that it is just my parents that want me to go home, but I want this also."

A LAC review meeting was planned for the forthcoming Monday, but the YP explained that her parents had requested to postpone the meeting, due to their solicitor not being able to attend the meeting. She was unable to confirm whether this meeting had been rescheduled.

**Choices and Actions:** HAA explained the "active offer" to the YP and informed YP that she was eligible for an advocate (explaining her rights and entitlements under the Social Services Wellbeing (Wales) Act 2014) as she was looked after by the local authority. HAA explained to the YP how the advocate would be able to help, with the emphasis on ensuring that her views, wishes and feelings were heard and represented, during the LAC review process and possibly future decision making processes to do with her care proceedings. HAA consulted with YP and agreed to make a referral to TGP, who are the provider for IPA in her area. HAA also advised that they would make representations to the advocacy provider to aim to potentially postpone the meeting, so that all parties could be present, and represented.

**Result:** Referral proceeded, and YP informed. YP returned to the helpline later and confirmed that the advocacy provider (TGP) had contacted her that Monday. With the support of a professional independent advocate, the YP was able to ensure that she was being listened to and that her views, wishes and feelings were represented. Her views were taken forward by the advocate and were represented to the Social Worker.

## **5. Direct representation: Referral to IPA: Housing/ Learning Disabilities**

**Outcome:** YP wanted advocacy to change his situation regarding his housing.

**Situation:** Male aged 25 contacted Meic to request advocacy support with accommodation issues. He is currently living in supported accommodation and has encountered a number of concerning issues with other service users. The emergency services have been needed and attended on a number of occasions. The service user is very worried about his placement and strongly feels it is completely inappropriate for him. The service user does not feel that his concerns about the suitability of the accommodation for him have been taken seriously by social services, and that they have not listened to him.

The Service user has barriers to participation including: communicating his needs, views and wishes around his care and support, has care and support needs and social services involvement, has no other appropriate individual to support him, so entitled to IPA. He has a diagnosis of a Mild Learning Disability, and suffers with Anxiety. He is currently receiving support from the Adult Learning Disabilities Team, and was previously supported by the LAC SS Team. He has a meeting with Social Services at which he requires the services of an advocate.

**Choices/ Options:** HAA discussed yp's rights and entitlements and assisting yp to obtain an advocate. Contact made with Dewis Community Independent Living by email to submit an IPA referral.

**Result:** Dewis confirmed acceptance of the referral and that they had been in touch with yp and social worker.

**6. Mother of 18 year old male phoned Meic for advice and information regarding the education, rights and benefits arrangements for her son with high functioning autism.**

**Desired Outcome**

Following lockdown and change of circumstances and resident / living arrangements, mother wants to identify benefits she may be entitled to cover her rent and how that will impact on her financial situation. She also wants to identify her son's rights regarding holding his specialised school placement.

**Situation**

The mother resides in the Wirral 4 days per week and in Wales 3 days per week. The son has a court appointed school boarding placement in Oxford at a special school for children with Autism, funded by Wirral County Council.

The property in Wales is on a long term lease, shared by a friend. The parent has a daughter with Cancer in Wirral and had moved to the Wales property when Covid-19 started, but before lockdown as a precaution. When lockdown was announced her son joined her in Wales. The friend who was sharing the lease on the property contracted Covid-19 and died, leaving the parent to pay the full amount of rent. She has been using some of her son's PIP to top up the rent. She wants to identify benefits she may be entitled to and how that will impact on her financial situation.

She is not able to travel between England and Wales during lockdown and does not want her son to return to his school in Oxford while coronavirus is still such a risk. She does not want to lose his place in the school and wants to identify her son's rights regarding holding his specialised placement.

**Choices/ Options**

The HAA explored all issues using open and probing questions.

HAA signposted to CAB, Turn2Us, SEN Funding Council- education department, Children's Commissioner in Wales + England to cover benefits advice, his school placement and challenging any outcome that was undesirable. HAA explained how each of the organisations may be able to help and advised a process to follow. HAA informed the parent that in Wales parents had been advised that they would not be penalised if they chose to keep their child away from school until the next academic year, and that they should check the guidance for England.

## **Action and Outcome**

The parent was interested in finding out about the regulations around pending school attendance in Wales and will look into this. She will contact CAB in the first instance and then the Wirral education department for advice on his schooling and temporary benefits entitlement. She thanked the HAA for providing the information, advice and signposting.

## **7. Information, advice, support, complaint - family following death of father to COVID-19**

### **Desired Outcome**

Family (of Christian faith, an Philippines origin) wanting support for 10 year old boy struggling with coping with death of father to Covid-19 and feelings of loss and grief spilling over into expressing suicidal feelings

### **Situation**

The initial contact was with the aunt – the mother and YP were both present as well - who described the YP talking about wanting to die with his mother, so that they could be reunited with his father in heaven. YP also very worried about his mum's health as she too had had COVID but recovered from it. The YPs school was arranging counselling, and he was due to see an educational psychologist, but aunt and mum were both anxious that he speak to someone sooner. Mother and father are/were nurses.

### **Choices/ Options**

Before being handed over to the YP, the HAA passed on information to the aunt with details of Winston's Wish and Hope Again websites, explaining that they have some helpful resources for children who have lost loved ones.

The AA offered her condolences to the YP, acknowledging how difficult his and his family's loss must be. She offered reassurance, saying it was understandable that he wanted to be with his dad, then explored with him if these were just thoughts he was having or whether he planned to carry them out. The YP said he wasn't planning to kill himself as his father would want him to be strong and positive. The AA asked him what kind of things have helped him so far since his dad died, he said that remembering happy times together helped him and knowing that he died with a smile on his face (which his mum had told him). He added that sometimes he finds it hard to be positive as all he sees is 'shadows and pictures' of his dad. He appeared to question his faith, saying that positive thinking and praying to Jesus hadn't saved his dad's life. The AA said it was terribly sad that these things hadn't helped his dad, but that the advice to think positively was good and would hopefully help him as he goes through life. They explored other things might help, the yp said his friends have been really supportive and kind, but lockdown was preventing them from spending time together. The AA suggested he write about his feelings, perhaps in a poem as he sounded very expressive. She suggested he look at the bereavement sites for children.

The AA was then passed on to the mother; the AA suggested the need to manage her son's expectations of counselling, as children think it will be a fix bring an end to their pain. The mother asked what support she could access for herself, as she is trying to be strong for her son but is heart-broken. The AA gave her details of Cruse. The mother then spoke about her anger at what she believed was neglectful treatment of her husband – he had been due for discharge, but was 'found dead' in the early hours of the morning. She feels strongly that his ethnicity was a factor in how he was treated, as well as the hospital itself being one with serious weaknesses. She believes that her husband would still be alive if he'd been treated in the hospital in which he had worked. The AA mentioned that the local Community Health Council might be able to offer support.

### **Action and Outcome**

The yp agreed to look at the bereavement websites as well as chat to his friends over social media as he has been doing. He said he would write about his dad when he feels ready. The mother planned to call her son's school on Monday 'to chase' the counselling referral. She said she'd ring the Cruse helpline, and also stated her intention to pursue a complaint about her husband's treatment.

## **8. Information, Advice, advocacy, direct representation: Sexual health and sexual assault.**

**Issue/ Outcome:** YP seeking information and advice about sexual health and assault.

**Situation:** Contact, aged 20, initially enquired about accessing the emergency contraceptive pill. YP disclosed that she was raped by her partner while she was sleeping yesterday. No contraception was used and yp concerned that they may become pregnant. YP concerned that if she tried to access emergency contraception that the police would be called and the yp was currently undecided about whether they want to prosecute.

**Options/Choices:** Meic HAA responded with empathy, and praised the yp for taking the brave step to seek support. Confidentiality and Safeguarding discussed and made clear. The yp was informed about how they could access emergency contraception locally (Hospital and Pharmacy - yp specified walking distance), and about Sexual Assault Referral Centres (SARCs). HAA advised the YP that they might want to consider collecting and keeping evidence in case they decided they wanted to report it to the police later. HAA provided links to the local health board's page on sexual health, including contact numbers and an extract from SARCs website explaining what they do and how they can help.

**Action:** YP explained that they had bagged up their clothes and refrained from washing in case they were needed for forensic examinations.

**Situation:** YP expressed emotions of self loathing and blame; YP disclosed that they had been abused when they were 9 and raped at 20, for which they were receiving

counselling. She had been in a happy relationship until last night when her partner raped her when she was asleep.

**Action and Result** - HAA reassured the yp that they were not responsible in any way for what happened; common for people who have been abused or raped to feel they are to blame. HAA clarified that the only guilt lay with the rapist or abuser and in disregarding the yp's right to choose had committed a serious crime.

**Situation:** YP disclosed that they had tried to call SARC but panicked and ended the call.

**Options/Choices:** HAA offered to contact SARC and advocate on the yp's behalf. HAA informed the yp that any questions or concerns they have could be addressed by professionals in the field. YP was grateful and accepted the offer of an advocate. The HAA used open questions to identify what they wanted the advocate to communicate on their behalf.

**Action and Result:** HAA made the call with the yp's permission and after a discussion was transferred to the nearest SARC. YP kept informed of progress. Situation explained to SARC professional who offered to contact the YP. YP agreed to be contacted and their number was passed on to the professional. HAA remained with the YP until contact had been made a few moments later and the two parties had agreed to communicate by text so they couldn't be overheard. The yp thanked Meic and after some reassuring words from the adviser and the offer of further Meic support, the chat was closed.

## **9. Information, advice and advocacy: emotional abuse, cultural issues**

**Desired outcome:** yp to be accepted for who she is, for her family to trust her, and not say hurtful things, and for the school to listen to her.

**Situation:** Yp came through to Meic via IM and began contact by saying that she's all over the place, feels horrible, wants to leave her home, and doesn't want to be here. AA empathised, and explained the Meic confidentiality policy, which the yp accepted. She went on to say that her parents are highly critical of her, of everything she does, she feels she has to put on a fake persona to be accepted by them, and that they say things to her that they know hurt her. Her family criticise her if she expresses sadness or cries, so she tries not to as it's easier that way, but she feels things are building and that she might explode soon. She wishes she was 18 so she could leave home. School is the one place where she feels she can be 'normal', though there are pressures there too, but at least it gets her away from home (which she dreads going back to). Her friends know about her home life, as do a couple of teachers. She said that things became really bad once and her dad became aggressive and prevented her from going to school, but she managed to get out and tell someone. From her description, it appears the school monitored the situation but no action was taken.

**Options/choices:** The AA and yp explored options available to her, starting with her speaking to teacher again and being clear about what she wants them to do or to happen. The yp thought this might work, but mentioned that her drama teacher, to whom she has spoken about life at home, has advised her to try to put it out of her mind.

The AA said that from what the yp had described, she might be experiencing emotional abuse at home, and pointed out that she has a right to live without fear of being criticised and humiliated on a regular basis. The AA explained that Meic or her school could make a referral to social services based on what she had said. She was interested in this option, saying that she feels this needs to happen, but was also scared about the consequences of her parents finding out. The AA gave information on the referral process and what cyp can expect when social services become involved, including any safety measures that, in some circumstances, might need to be put in place post-referral. The yp said something was holding her back.

The AA offered reassurance, saying this is understandable and that there's no pressure to decide at this point. She asked the yp if her parents' expectations of her were cultural, the yp confirmed that they're religious and cultural, and that she hasn't, for example, told her parents which 'A' levels she's applied to do as they won't approve. She wants to do performing arts at uni but thinks she won't ever be able to. AA asked yp if she wanted a link to the Muslim Women's Helpline (which is for girls to), as they offer support and advice on all kinds of issues affecting females in their community. The yp asked if she could try it out and still come back to Meic, the AA reassured her that this would be fine, and gave her a code which she could use when she next comes back to save her having to repeat what she'd said in this contact.

**Actions:** Yp to think about whether she wants her school or Meic to support her in getting help from social services. YP to try out the Muslim Women's Helpline, and come back to Meic if she wants further help.

## **10. Covid 19: Education, family conflict, rights, self advocacy**

### **Desired Outcome**

YP contact Meic seeking advice on how to resolve disagreement between her and family about her living arrangements and location during Covid-19 crisis.

### **Situation**

YP, 21, student at English university, sharing a house with 4 student friends. Has been in touch with Meic as source of advice and guidance since GCSEs, and contacted Meic on this occasion as feels under pressure by family to return to family home in Wales during and because of Covid-19 crisis. Most recent conversation resulted in an argument as YP wishes to stay where she is with friends and to continue with studies. She is close to her family (parents and younger sister, with depression) and upset over disagreement; parents are insisting she returns home and they will come to collect her if necessary.

### **Choices/ Options**

Choices and options explored included: i) YP staying put, and the benefits and consequences of this, and ii) YP returning home, and the benefits and consequences of this. YP feels strongly that education more important than allaying family anxiety over well-being.

### **Action and Outcome**

Agreed that, as emotions and feelings running very high, not best time to make important decisions, and helpful to reflect and sleep on situation and delay decision until everyone more calm and rational. Agreed YP to contact and communicate with friend of family as informal mediator. Agreed also YP to acknowledge family concern over her well-being and safety during this time and let family know steps she is taking to keep herself safe. HAA advised that she can always speak to Meic again and that her parents could also contact Parent Line to talk through their concerns. YP thanked HAA and said she was going to speak to family friend now. HAA restated that if needs be, YP could come back to Meic again.

## **11. Covid 19: Rights, information**

### **Desired Outcome**

Female aged 17 contacted Meic by text to ask for clarification relating to a number of concerns about Covid-19.

### **Situation**

The YP asked for information and advice about:

Her work in a food shop – health and safety and rights

Moving out from her current accommodation with her father and step mother (who she doesn't get on with), to live with her mum or boyfriend

What "lockdown" means in relation to daily activities, expressing anxiety about not being able to see her boyfriend and mother

Her rights vs the current rules around isolation, expressing frustration and anxiety about the restrictions

### **Options/ Choices**

The HAA acknowledged the huge challenge and impact of the Covid-19 crisis on YP and reassured her that the feelings she was experiencing were normal under the circumstances and that many people would be feeling similar things as they coped with and adjusted to the new temporary way of living, and needing to protect selves and others from transmission and spread of the virus.

The HAA signposted YP to trusted verified sites providing further information and guidance in respect of her specific queries about social distancing and movement between households, employment rights and the right to be kept safe and protected by the employer.

The HAA also signposted her to other sites offering support around self care and managing her feelings of anxiety and frustration.



## **Actions / Outcome**

it was agreed the YP would consider all these things, make further enquiries and undertake more research in order to process and better understand her situation, before making any decisions to change / challenge anything.

The HAA suggested the YP could come back to Meic if needed. The YP thanked the HAA.

## **Links to and extracts from reports and research:**

Reports by Children's Commissioner Wales: i) No Wrong Door, and ii) Coronavirus and Me (survey)

<https://www.childcomwales.org.uk/categories/research-reports-and-other-publications/>

Report by Cardiff University Children's Worlds – Wales – state of well-being among 10 and 12 year olds in Wales

<https://wiserd.ac.uk/news/international-study-reveals-low-levels-well-being-amongst-children-wales>

Report by Youth Access on evaluation and review of remote mental health interventions for CYP:

<https://www.youthaccess.org.uk/resources/practice-resources/74-remote-mental-health-interventions-for-young-people>

Report by Youth Access on benefits and outcomes of CYP co-production in campaigning to influence higher level and systems change:

<https://www.youthaccess.org.uk/news-and-events/latest-news/post/52-independent-evaluation-finds-numerous-positive-benefits-of-make-our-rights-reality-project>

## **Research commissioned by NSPCC on the effectiveness of child focused helplines**

Extract from: Outcomes and Effectiveness of Children's Helplines: A systematic evidence mapping, by Mariya Stoilova, Sonia Livingstone, Sheila Donovan on behalf of NSPCC – September 2019

- *The work of child helplines is vital for reducing children's risk of harm and vulnerability and improving child protection and wellbeing.*
- *Child helplines are now recognised as a key component of child protection services that contribute to creating accessible and child-friendly reporting systems and can help to ensure the implementation of child rights (UNICEF, 2007).*
- *The systematic evidence mapping identified a range of outcomes associated with the work of helplines, ranging from the individual level outcomes (such as changes to attitudes, knowledge and behaviour) to social (or societal) level outcomes (notably, changes in relations between organisations, community dynamics, social attitudes and protection policy).*
- *Key positive outcomes include a competent, efficient and approachable service. The evidence demonstrates that helplines can achieve improvements in relation to a range of child-centred outcomes, notably children's wellbeing, self-confidence, levels of anxiety and distress, and ability to deal with their current situation. It shows that children value professionals they can trust, who are effective, knowledgeable and available to them.*
- *Benefits sought and valued by children include the competence of the service provider, feeling welcome, and being able to talk about issues of concern. In some cases, help-seekers put more emphasis on emotional support than on problem-solving (Law et al, 2015). Indeed, the most positive effect of a helpline for a child can be establishing in the child's mind that they are being listened to and understood*

- *The existing evidence suggests that online support offers distinct benefits over telephone services. The positives include more efficiently engaging with children seeking help, particularly seldom heard groups, such as lesbian, gay, bisexual, transgender and queer (LGBTQ) youth, or those struggling with mental health issues or with a speech impairment (Burns & Birrell, 2014; Childline, 2016). Online services are usually seen as more accessible (for those with internet access) as they have no geographical or time boundaries. Arguably, for some they can offer greater emotional safety and security due to the reduced emotional proximity. This makes online support preferred among children who feel uncomfortable contacting a telephone helpline, particularly those with more complex and emotionally charged issues.*

**END**

## **RESPONSE 8 – PLAY WALES**



### **State of children's rights in Wales call for evidence The right to play**

Play Wales is the national charity for children's play. We work to raise awareness of children and young people's need and right to play and to promote good practice at every level of decision making and in every place where children might play.

We drafted the recent *Thematic Briefing Paper in respect of Play and Leisure*<sup>i</sup>, published by the Wales UNCRC Monitoring Group. Our submission to this call for evidence provides information gathered from our networks during recent months. We facilitated a breakout session at the State of Children's Rights consultation events held in August 2020. This submission reflects on that session, provides some information for consideration regarding children's play in the wake of the coronavirus pandemic and closes with some policy priorities.

#### **Reflecting on the play breakout session**

In general, there was agreement that playing and playfulness brings immediate and deferred benefits for children and this is particularly important during times of stress, uncertainty and trauma.

The group identified the diminished staffed opportunities to play and socialise in communities. It was recognised that although heightened during Covid-19, that generally, financial austerity has hit local playwork and youthwork provision hard. There has been a reduction of local play development capacity as a result, with a decrease in the availability of locally based staffed playwork and youthwork provision, and insufficient outdoor space for play.

There was a recognition that children play through ages 0-18, but that messaging on play tends to focus on younger children. It was agreed that there is a need to recognise and proactively promote the play needs and behaviours of older children and young babies.

## **Priorities**

- **Financial investment in playwork and youthwork provision and neighbourhood-based interventions**

Supporting the development of neighbourhood-based play opportunities (such as safer streets and better use of school grounds) will support children to recover from the stress and uncertainty of lockdown conditions. There is a need to reclaim communities for children and legitimise their use of space.

- **Better access to the outdoors and nature for all communities**

Children's access to outdoor space for play, exercise and enjoyment differs greatly across Wales and these differences were clear during lockdown conditions. Some children live in accommodation with outdoor gardens, ample outdoor neighbourhood space and supportive carers with time to support play, whilst others don't.

- **Recognition of the therapeutic value of play for all children and the immediate and deferred benefits in terms of health and well-being**

## **Play and coronavirus**

Following the introduction of the Coronavirus Act 2020, the Welsh Government moved quickly to introduce numerous emergency regulations and issued guidance in an effort to reduce transmission of the virus while balancing this against the desire to limit restrictions to only what is strictly necessary.

The regulations and guidance have had a direct and significant short and long-term impact on everyone in Wales, including children. It might be argued that they will have the greatest impact on children as they have imposed restrictions on a population group undergoing critical physical, social, and emotional development. Social distancing and social isolation will have had a particular effect on children, and we therefore consider that special attention should be given to children in all decisions regarding recovery post-Covid.

Some decisions were also made by Welsh Government with regards to play policy; the placing on hold of the Ministerial Play Review, funding for open-access staffed playwork provision (the Holiday Hunger Playworks Project), and the review of the Childminding and Daycare Regulations.

Subsequently, Welsh Government announced £1.6m to fund summer provision for the most vulnerable children. Whilst this was welcomed, the timescale and targeted nature of this funding means that much work still needs to be undertaken to ensure sufficiency of play opportunities for all children post Covid-19.

## **Thinking ahead – valuing play**

## ***Play development and playwork provision***

As part of the response to the coronavirus pandemic difficult decisions regarding funding and face to face playwork provision had to be made by Welsh Government and local authorities. All community based playwork provision ceased and many local authorities cancelled their summer programmes for children. In particular, partnership funding for holiday provision has been lost for summer of 2020. There is concern that this funding may be permanently lost, which would have serious sustainability issues for the future of community-based play provision.

Playwork is a *‘highly skilled profession that enriches and enhances children’s play. It takes place where adults support children’s play but it is not driven by prescribed education or care outcomes’*.<sup>ii</sup> There is strong evidence that staffed playwork provision contributes to stronger, more play friendly communities having wide reaching impacts on children, young people and adults.<sup>iii, iv</sup>

Community based playwork provision appeals to families who most benefit from early preventative services, as there is no formal referral system. Most staffed playwork provision is offered free at the point of access. This means that children and families in the most need can access without stigma and gain the support of highly trained playwork staff working in quality, community-based play provision. Where children are traumatised by adverse childhood experiences (ACEs), the playwork approach supports the playing out and re-creation of difficult experiences in a sensitive and non-judgemental way.

At regional and local level there is a history of inadequate accompanying guidance for funding programmes. This ambiguity of advice has often resulted in misinterpretation in decision-making at local level, often compounded by a lack of local transparency in decision-making. Evidence<sup>v, vi</sup> suggests that complimentary initiatives, such as Integrated Children’s Centre funding, Communities First, and Community Focused Schools, were not used to best effect for children’s play.

## ***Schools***

Play Wales welcomed Welsh Government’s funding commitment to better support the mental health of our children, through counselling and other school-based initiatives, to help with the uncertainty and challenge that the coronavirus pandemic has caused.

We advise that interventionist programmes can be useful in minimising some of the damaging impact, but they must be complemented by a focus on supporting children to be active participants in building their own resilience. Every aspect of children’s lives is influenced by their urge to play. Self-directed, self-determined playing increases children’s opportunities to build their own resilience and support their own health and well-being.

Prior to schools closing as part of the Covid-10 response, Play Wales had seen an increase in parents getting in touch with concerns about the shortening of school days which is resulting in reduced playtime, and also, the withdrawal of it as part of behaviour management policy. This increase in parental concern and recommendations within Estyn’s *Healthy and happy – school impact on pupils’ health and wellbeing* report<sup>vii</sup> prompted us to produce guidance for schools. *A play friendly school – Guidance for a whole school approach*<sup>viii</sup>,

published by Play Wales, provides policy and practice related information to help communities take a whole school approach to children's right to play.

For all children, efforts to improve well-being in schools should focus on providing sufficient time and space for play. This will enable children to be given time to rebuild relationships, social skills and connections with the school environment.

### ***Outdoor space – better use of community assets***

Making better use of community assets will support children, parents and communities feel more confident about playing out, and therefore, better connected to their neighbourhoods. Attention should be given to developing extended use of school grounds when the teaching day ends and during weekends, as noted in Welsh Government guidance<sup>ix</sup> and supported by the Play Wales *Use of school grounds for playing out of teaching hours* toolkit<sup>x</sup>.

Attention should also be given to secure safer streets. Parents and children often report traffic as a limiting factor to play in neighbourhoods. We welcome the Senedd decision to initially back plans to make 20mph speed limits the default in residential areas in Wales. We would like to see support for street play projects which encourage attitudinal shifts for road users. These are often resident-led but can also be school-led or supported by community development organisations. Our work with Councils around street play demonstrates that children are learning road awareness and cycle/scooting skills, parents report greater confidence in children's capabilities around traffic and drivers report a greater awareness of the presence of children and others in and around roads.

In August 2019, the UK Government announced play street guidance for councils<sup>xi</sup>, encouraging them to support resident-led play streets and making it easier to put a policy in place. We know from our work with Welsh local authorities, that they would value similar guidance and support from Welsh Government.

### **Setting priorities**

Welsh Government should continue its strong tradition of supporting children's right to play. It should continue to prioritise it for the immediate and deferred benefits that playing brings to families and communities. Welsh Government should:

- commit to resuming the Ministerial Play Review
- note the positive evaluation of the *Holiday Hunger Playworks Project* pilot and make every effort to ensure that this playwork intervention is funded in the future
- commit to reviewing the National Minimum Standards for Regulated Childcare (NMS) to ensure best efforts are made to safeguard children
- identify a funding stream to support community-based playwork provision
- provide clear and concise guidance within family and children funding programmes that sets out that playwork and youth work provision is a valid service
- instruct Estyn to make the provision of adequate breaks for play mandatory and to inspect them as part of its statutory inspections
- actively encourage school communities to consider making their outdoor space available for playing when the teaching day ends and during weekends
- more strongly support street play projects, in a similar way to the UK Government

- continue to make steps towards active travel and 20mph zones in residential areas and making the links between these initiatives and children's freedom to play out in their local community.

- <sup>i</sup> <https://www.childreninwales.org.uk/news/news-archive/thematic-briefing-paper-respect-play-leisure-released/>
- <sup>ii</sup> SkillsActive (2005) cited in Welsh Government (2014) *Wales – a Play Friendly Country*. Cardiff: Crown copyright Available online: <https://gov.wales/wales-play-friendly-country>
- <sup>iii</sup> Lester, S. and Russell, W. (2008) *Play for a Change: Play, Policy and Practice: A review of contemporary perspectives*. London: National Children's Bureau for Play England Available online: <https://www.playengland.org.uk/resource/play-for-a-change-play-policy-and-practice-a-review-of-contemporary-perspectives/>
- <sup>iv</sup> The Means (2016) *An analysis of the economic impact of Playwork in Wrexham*. Cardiff: Wales Council for Voluntary Action. Available online: <http://www.socialvalueuk.org/app/uploads/2016/08/Analysis-of-the-economic-impact-of-playwork-in-Wrexham-final.pdf>
- <sup>v</sup> Play Wales *State of Play*. Cardiff: Play Wales Available online: [www.playwales.org.uk/eng/stateofplay](http://www.playwales.org.uk/eng/stateofplay)
- <sup>vi</sup> Lester, S. and Russell, W. (2014) *Towards Securing Sufficient Play Opportunities: A short study into the preparation undertaken for the commencement of the second part of the Welsh Government's Play Sufficiency Duty to secure sufficient play opportunities*. Cardiff: University of Gloucestershire and Play Wales Available online: [www.playwales.org.uk/login/uploaded/documents/Play%20sufficiency/Towards%20Securing%20Sufficient%20Play%20Opportunities.pdf](http://www.playwales.org.uk/login/uploaded/documents/Play%20sufficiency/Towards%20Securing%20Sufficient%20Play%20Opportunities.pdf)
- <sup>vii</sup> ESTYN (2019) *Healthy and happy – school impact on pupils' health and wellbeing*. Cardiff: Crown Copyright
- <sup>viii</sup> <https://www.playwales.org.uk/eng/publications/schoolsguidance>
- <sup>ix</sup> Welsh Government (2014) *Wales – a Play Friendly Country*. Cardiff: Welsh Government (Crown Copyright)
- <sup>x</sup> <https://www.playwales.org.uk/eng/publications/schoolsgroundstoolkit>
- <sup>xi</sup> Excerpt from the guidance:
- 'There is a specific power to close roads for children's play under section 29 of the RTRA. However, the requirement to advertise s29 orders makes them prohibitively expensive for parents. For this reason, special event orders (which do not need to be advertised) are increasingly being used for this purpose. Play streets are not only good for the health and well-being of children, they also encourage other residents to get together, leading to increased adult activity and greater community cohesion.*
- As play streets are frequent events, it would be impracticable to submit individual consent applications for each repeat closure. However, it is possible to apply for repeat closures using a single consent application. Moreover, it can cover multiple closures in more than one road. It is therefore possible to use a single consent application to close several roads repeatedly for children's play over any 12 month period. For example, it could cover:*
- *closing road A every Saturday and Sunday between 14.00 and 16.00*
  - *closing road B every Saturday between 13.00 and 16.00*
  - *closing road C every Sunday*
  - *The 12-month period is not restricted to calendar years'.*

## RESPONSE 9 – UNICEF UK – GENERAL MEASURES OF IMPLEMENTATION

FOR EVERY CHILD  
IN DANGER



### Wales - General Measures of Implementation:

- Legislation
- Strategy
- Children's Rights Impact Assessment
- Budgeting
- Independent monitoring



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## Introduction

At a plenary debate in January 2004, NAW formally adopted the CRC as the basis for policy-making relating to children and young people up to the age of 25. In 2009 Rhodri Morgan, then First Minister, announced that the Welsh Ministers intended to explore ways of legislating to “embed the [CRC] in law.” In March 2011, the *Rights of Children and Young Persons (Wales) Measure* became part of Welsh law. Since May 2012, Welsh Ministers are required to have due regard to the requirements of the CRC and its Optional Protocols when making decisions about a provision to be included in an enactment, or the formulation of a new policy and/or legislation, or a review of or change to an existing policy and/or legislation. This requirement was extended to cover all ministerial functions from May 2014.

Compliance with the duty should involve ensuring adequate internal controls, education, training (in particular of civil servants), data collection and monitoring, impact assessments – of precisely the kind urged by the UN Committee on the Rights of the Child. It also requires the development of a comprehensive strategy to promote knowledge and understanding of the CRC in Wales for Government officials and all practitioners working with and for children and young people.

The research carried out by Professor Simon Hoffman and Sean O’Neal showed that the Measure had been successful in promoting proactive behaviour by the Government and in ensuring the Convention is to some extent embedded into legislation, as well as the culture, policy and practice of all those working with and for children.

Wales remains the leader in the UK in implementation of the CRC when it comes to GMI but that progress has not been entirely straightforward and consistent since 2016. Indeed, in some areas of implementation there has been either stalling or even regression.

## Incorporation

The *Rights of Children and Young Persons (Wales) Measure* is an example of an indirect incorporation of the CRC and has been successful in Wales and influencing internationally. However, in September this year, another devolved nation of the UK, Scotland, tabled a parliamentary bill for full and direct incorporation of the CRC in Scots law. The United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill is expected to be passed in early 2021. The text of the CRC has been transposed into the Bill and will make the Convention rights directly applicable, including in courts. The Scottish government has adopted a ‘maximalist’ approach by incorporating all those provisions within the CRC that are under devolved powers of the Scottish parliament.

Has the time arrived for Wales to consider if it could incorporate the CRC into its domestic law? Indeed, in 2016 the UN Committee recommended that “the UK State Party and devolved governments should fully incorporate the Convention and its protocols into domestic legislation at the earliest opportunity and work towards the incorporation of other Conventions, such as the UNCPRD, CEDAW and ICESCR, given their impact on children and young people”.

Question:

- Please inform if the Welsh Government plans to establish, in collaboration with the UK Government, if it is within its jurisdiction to fully and directly incorporate the CRC and the UNCPRD?

## Legislation

The 2016 recommendation by the UN Committee was that “UK State Party and devolved governments should take measures to bring its legislation in line with the Convention. To this aim,



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the UK State Party and devolved governments should systematically review existing legislation to determine whether it should be amended to ensure compliance with the Convention.”

The 2011 Measure does give Ministers the power to amend legislation that does not comply with the CRC and its Optional Protocols, although the power is limited to devolved matters. But that power has been used only sporadically, e.g. voting age, corporal punishment.

Question:

Does the Welsh Government plan to systematically review existing legislation to determine whether this should be amended to ensure compliance with the Convention?

### Strategy

Regretfully, there has been a regression in this area.

In 2009, the Welsh Assembly Government published a five-year rolling action plan called *Getting it Right* (GIR). This was a 5-year rolling Action Plan for Wales setting out key priorities and actions to be undertaken by the Welsh Assembly Government in response to the Concluding Observations of the UN Committee on the Rights of the Child 2008.

But no such action plan was adopted after the Concluding Observations and recommendations were published in 2016.

Question:

Does the Welsh Government plan to publish a national action plan for implementation, setting priorities and actions to ensure continuous progress in implementing the Convention in the exercise of devolved governmental functions?

### Child Rights Impact Assessment

There have been welcome developments throughout the UK in recent years to improve the levels of scrutiny of children’s rights and adopt a more systematic approach, led by efforts in Wales since 2011.

However, in its 2016 examination of the implementation of children’s rights in the UK, the UN Committee on the Rights of the Child called for the UK to introduce “*a statutory obligation at national and devolved levels to systematically conduct a child rights impact assessment when developing laws and policies affecting children*”, and to “*publish the results of such assessments and demonstrate how they have been taken into consideration in the proposed laws and policies*.”

UNICEF UK research (attached in a separate document) found that, used properly and at an early stage in the development of a policy, CRIA are powerful tools that both serve the best interests of children and provide them with a voice in adult-dominated processes, preventing potential harm and minimising the risk of costly policy failures and mistakes.

Although Wales is a leader in conducting CRIA process, its application has not always been systematic. Specifically, the Government failed to conduct CRIA on its first measures in response to the Covid-19 pandemic.

Questions:

- Does the Government intend to introduce a statutory CRIA?
- Does the Government intend to resume mandatory child rights training for officials?

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## Child budgeting

Status: another area of regression!

Wales is the only territory in the European Union to attempt a child-focused budget analysis to date. In 2006, work was undertaken to identify the proportion of the Welsh Assembly Government budget spent on children. This showed that, in 2006–07 an estimated 28 per cent, or £4.4 billion, of Welsh Government expenditure was allocated to children. This was justified in “response to a requirement to understand the resources which are spent on children, in order to inform policy development, and to comply with a responsibility under the UN CRC to report on the amount and percentage of national budgets spent on children.” In 2009 and in 2010 another analyses were carried out which looked at the financial provision for children over the 2005-10 fiscal period.

In 2009, the Children and Young People Committee of the National Assembly for Wales issued *Children's Budgeting in Wales*, which recommended that the government publish Children and Young People's Budget Statements. This called for a child budget analysis to be carried out at least every three years that presents past and projected spending. Despite the call for routine reporting, the Welsh government's latest contribution to the United Kingdom's State Party Report to the Committee on the Rights of the Child (Government of Wales 2013) makes no reference to any budget statement for children, indicating that this exercise is no longer being carried out.

Question:

- Does the Welsh Government plan to resume child budgeting analyses?

## Independent monitoring

Wales was the first UK legislature to refer to the CRC in legislation in regulations setting out the powers of the Children's Commissioner for Wales in 2001. The Welsh Commissioner has the power to provide advice and support to children, review and monitor complaints and advocacy systems, and examine individual cases.

Nevertheless, in 2016 the UN Committee expressed its concern that the powers of the Commissioners for Northern Ireland and Wales were still limited. With reference to the UN Committee's general comment No. 2 (2003), the Committee recommended that the State party further strengthen the independence of established Children's Commissioners, in line with the principles relating to the status of national institutions for the promotion and protection of human rights (the Paris Principles).

Questions to the Welsh Government:

Please provide information on measures to

- promote legislation giving the Commissioner powers to respond effectively to any matter affecting a child in Wales;
- make the Commissioner accountable to the National Assembly for Wales rather than the Welsh Government;
- adequately resource the Commissioner to conduct research and to engage with children and young people from all sections of society

Dragan Nastic

UNICEF UK

## **RESPONSE 10 – DR. AMY BROWN**

Here is Dr Amy Brown's response to the call for evidence; it will be included in the EY report in its entirety but feel free to take elements for the wider reporting

### **Breastfeeding**

The All Wales breastfeeding five-year action plan recommends that clear systems and processes are put in place to collect, analyse and disseminate infant feeding data. Routine data on breastfeeding initiation and prevalence is collected by each Health Board at birth and 10 – 14 days. However later data at 6 – 8 weeks and 6 months is patchy and often incomplete<sup>1</sup>. The UK Infant Feeding Survey, which collected comprehensive UK wide infant feeding data every five years was discontinued in 2013, although discussions, disrupted by COVID-19, are in place to consider its reinstatement<sup>2</sup>.

The Welsh Infant Feeding Network (WIFN), consisting of infant feeding leads and specialists from each health board in Wales was established in 2015. The Network feeds into the National Infant Feeding Network which is UK wide. In 2019, the 'All Wales breastfeeding five-year action plan' was launched. It included recommendations to develop an All Wales strategic steering group and to appoint a strategic Infant Feeding Lead in every health board, and to support the work of WIFN in providing operational leadership to increase breastfeeding rates. No appointments have been made to the strategic steering group or infant feeding lead positions at present<sup>1</sup>.

The UK has partially adopted the International Code of Marketing of Breast-Milk Substitutes and relevant resolutions of the World Health Organisation. We have enactment to prevent marketing of infant formula and infant milks marketed as foods for special medical purposes. However, there are no regulations to prevent marketing related to follow on formula, milks marketed for children over one year, foods marketed under six months or bottles and teats<sup>3</sup>.

In terms of Baby Friendly Accreditation in hospitals, maternity, neo-natal and health visiting services, current statistics show that 78% of babies are born in baby friendly accredited units in Wales. Wales has accreditation of some maternity, neo-natal and health visiting services with others having a certificate of commitment to engage. However, some services do not hold accreditation or a commitment to engage<sup>4</sup>. There is encouragement but no government mandate for all units to gain accreditation<sup>5</sup>.

Public Health Wales has commissioned recent research into barriers and facilitators to breastfeeding in low income communities in Wales. The work was conducted by academics at Cardiff and Swansea University in collaboration with the NCT and produced a logic model evidencing best practice to target support<sup>1</sup>. In 2018 Public Health Wales and Welsh Government, alongside infant feeding specialists and academics, participated in the international 'Becoming breastfeeding friendly' project led by Yale university. This benchmarking exercise examines how far a country meets known facilitators of breastfeeding and provides recommendations for improvement<sup>6</sup>.

1. All Wales Breastfeeding Five Year Action Plan [https://gov.wales/sites/default/files/publications/2019-06/all-wales-breastfeeding-five-year-action-plan-july-2019\\_0.pdf](https://gov.wales/sites/default/files/publications/2019-06/all-wales-breastfeeding-five-year-action-plan-july-2019_0.pdf)
2. UK Infant feeding survey <https://digital.nhs.uk/data-and-information/publications/statistical/infant-feeding-survey/infant-feeding-survey-uk-2010>
3. Guide to UK formula marketing rules <http://www.babymilkaction.org/ukrules-pt1>

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4. Baby Friendly Accreditation statistics for Wales <https://unicefbfi.secure.force.com/Events/Awards>
  5. World Breastfeeding Trends Initiative UK Report (2016) <https://ukbreastfeeding.org/wbtiuk2016/>
  6. Becoming Breastfeeding Friendly in Wales: context, findings and recommendations <https://kar.kent.ac.uk/78271/>

## RESPONSE 11 – GUIDE DOGS CYMRU



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09/09/2020

Sean O'Neill

[CRCWales@childreninwales.org.uk](mailto:CRCWales@childreninwales.org.uk)

Dear Sean

### State of Children's Rights in Wales

Guide Dogs Cymru welcomes the opportunity to respond to the call for evidence to assist with the examination of the Welsh Government's progress in implementing the UN Convention on the Rights of the Child (UNCRC).

Guide Dogs Cymru provides services that support the independence of children and young people, CYP, who are blind or partially sighted in Wales. Alongside our services, we campaign to remove barriers that prevent blind and partially sighted CYP achieving their full potential. Recent estimates from studies we have

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undertaken suggest there are around 2000 CYP in Wales with a visual impairment of enough severity to require specialist support.

The main issue that the Welsh Government and many of the 22 Local Authorities in Wales should focus on is ensuring every CYP in Wales with a visual impairment has access to support from a qualified habilitation specialist. Without this these public bodies are not paying due regard to the UNCRC articles dealing with disability and education.

Habilitation support is essential if a child with a vision impairment is to achieve their full potential. A child with a vision impairment cannot observe and develop everyday skills in the same way as a sighted child.

A child who can see develops skills as they grow up by imitating what they see other family members/siblings and other people do. Habilitation involves training children and young people with a vision impairment in early movement, mobility and independent living skills - and supporting parents to do the same. Habilitation helps a child with vision impairment to become an independent and confident adult.

The Welsh Government, following extensive lobbying by us, recognized the importance of habilitation. It is referenced in the Code of Practice and guidance on the exercise of social services functions and partnership arrangements in relation to part 2 (General Functions) of the Social Services and Well-being (Wales) Act 2014. Paragraphs 185-186 of the Code state: -

**Habitation is central in enabling children and adults with a disability to live as independently as possible as it is key to acquiring and developing skills that otherwise would have been learnt incidentally. It is vital where an individual has been unable or delayed in developing those skills. Identifying preventative services that help people to learn, keep or improve skills and functional ability is integral to promoting well-being. As with reablement, effective habilitation should support physical, sensory, social and emotional needs and be delivered in partnership between the local authority and the Local Health Board. Habilitation support may differ from standard reablement services and require a different approach; one that focuses on the specific support may differ from standard reablement services and needs of the individual and their family. As a result, a more structured programme of support may be required, and for a longer period. Effective reablement and habilitation should be delivered in partnership between the local authority and the NHS.**

Alongside this the Welsh Government has provided some temporary funding, through its additional learning needs transition grant, to support the training of 4 new habilitation specialists in some Local Authorities. It has also supported a pilot School Pupil Eye Care Service where children in special schools received appropriate eye health screening. This progress has been welcomed but fundamental problems remain in Wales.

Unfortunately, in Wales there continues to be a severe shortage of specialist habilitation support. Indeed, in some Welsh Local Authorities CYP have no habilitation support.

Attached for information is a 2019 State of the Nation Report that we formally presented to the Welsh Government in June 2019. This updated an earlier report, also attached, that we published in 2016. Both studies received 100 per cent response rates. This means the accuracy of our data is good.

The 2019 report notes that In May 2016 only 8.6FTE children's habilitation specialists were employed in Wales, with 10 Local Authorities not employing any. The situation has deteriorated. At the time of the report there were only 7.6FTE children's habilitation specialists employed in Wales, with 8 Local Authorities not employing any (as noted above 4 more are now being trained). However, it is estimated that the number employed, directly or indirectly, should be between 16 -20 FTE to meet need. This lack of essential provision cannot continue. Geography should not be the determining factor in determining if a child with a visual impairment achieves their full potential.

We are currently running yet another major campaign to remind governments across the UK about the right of every child with a visual impairment to have the support they need. This link:

<https://www.facebook.com/guidedogsUK/videos/334047114670297>

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provides an example of support we provide to a child named Nell in North Wales. Nell was just one and a half, when she met Branwen Jones for the first time, a habilitation specialist from Guide Dogs. This was the first specialist support the family received.

“Branwen was so positive and just what we needed” says Rachel, “She was just so encouraging about what Nell could do. She gave us all a much-needed boost.”

Even as a young toddler, Nell was showing the aptitude to begin learning how to use a cane, and she was keen to have one ‘just like Daddy’s’ so the work started in earnest.

“Nell is an amazing little girl”, says Branwen, “and the whole family are fantastic. We’ve been able to provide training as she grows which has helped her become as independent as possible. When I first started working with Nell, she was quite young to be using a cane, but she was showing all the right skills so I thought why not give it a go, and she quickly got the hang of it.”

Nell and Branwen began by learning routes close to home; to Garth their neighbour’s house, to the post box at the end of the road, then to the bus stop so Nell could walk to meet her beloved big brother Isaac when he comes home from school, and her favourite of all, to the park.

The support Nell is receiving should be available to every child with a visual impairment in Wales. Nell should have been supported from birth. As our reports demonstrate early years provision in Wales is not good.

In the attached reports we clearly set out what policy changes need to take place to ensure the rights of children in Wales with sight loss do not continue to be overlooked. These are our key asks:

- **Habilitation services for Children and Young People with Vision Impairment must be available in every local authority area in Wales**
- **When available, the level of service provision must meet good practice ratios (1 accredited habilitation specialist per 100) throughout Wales.**
- **To be effective, habilitation must be delivered by a qualified habilitation specialist or a rehabilitation worker formally accredited to work with children.**
- **There is a need for a continued focus on workforce planning for habilitation specialists.**
- **Education, health and social care must collaborate to support the child in all aspects of development.**
- **Early years support needs more careful thought and should be family centred. Services should support the child from birth or the point of diagnosis.**

The Welsh Government has still not published their new Additional Learning Needs Code of Practice. They could deal with these asks in that document if they are serious about meeting the rights of CYP in Wales with visual impairment.

The Welsh Government needs to end the postcode lottery of services in Wales. We urge the monitoring group of the UNCRC to hold the Welsh Government to account about why many children in Wales with visual impairment are being failed by public bodies. Until something is done these children with disabilities are not receiving all human rights and fundamental freedoms on an equal basis with other children.

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Taking account of our two research reports we have provided a lot of information for consideration. We would be happy to discuss.

Yours sincerely

P R Jones

Peter Jones

Wales Policy and Campaigns Officer

#### ALSO SUBMITTED

- A Research Study of Habilitation Service Provision for Children and Young People With a Vision Impairment in Wales May 2016
- State of the Nation – services for children and young people with sight loss in Wales, and Annex
- Letter to, and response from Kirsty Williams MS Minister for Education, Welsh Government

## RESPONSE 12 – HAFAL



### Hafal's Evidence for the State of Children's Rights in Wales Report

This response is endorsed by the editorial group of our Youth Access project which draws on the experiences of over 100 young people affected by mental health across Wales. This project is designed to look at young people's rights in accessing mental health services, including informal and school/community based provision.

#### Context

"Far too many referrals to Child and Adolescent Mental Health Services (CAMHS) today turn out not to be in need of that specialist service. With this goes a great deal of frustration for those children,

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young people and their families who learned that they have been sent down a route which will not best meet their needs.

“It causes frustration for CAMHS staff in finding time and money being soaked up in assessments which need not have happened. Ultimately, it can cause harm for those young people who really do need the mental health expertise of a CAMHS service but will find their referral to that service delayed by assessments of others who will turn out not to have needed it.

“For many children and young people their emotional needs are better met by talking through issues at the time with their families, school counsellors and youth workers. This is rather than their problems - often related to normal issues about growing up and maturing - being labelled as mental illness with the possible consequences of stigma.”

Mark Drakeford A.M. (now First Minister of Wales) Welsh Government conference on CAMHS, 2015

### **Summary**

**The failure of mental health services in Wales to focus their work where it is needed has led to two serious consequences for children's rights:**

- (1) Because resources are stretched too widely children in greatest need do not get timely care and treatment**
- (2) Children who have lower level problems are treated inappropriately**

**There is an urgent need for mental health services to define their role clearly, refocus their work, and avoid medicalising normal life events.**

### **Rationale:**

- The welcome recognition in recent years that mental wellbeing is an issue for all children does not mean that mental health services should expand their role.
- The mental wellbeing of children and young people depends on supportive families, schools and colleges which take their responsibility for pastoral care seriously, and well-supported training and work opportunities.
- CAMHS and other specialist mental health services should be available immediately for young people who have serious mental health challenges; they should act quickly to resolve problems or sustain support for as long as needed. This will only be possible if there is a clear threshold of need for their services: because of unclear and inconsistent referral practice at present the typical experience is one of long delay and consequent deterioration and increased risk.
- Children using secondary mental health services should all have a Care and Treatment Plan as required under the Mental Health (Wales) Measure 2010: these Plans routinely fail to follow the Measure's Code of Practice by failing to engage young people in developing their Plans and agreeing an holistic Plan covering all areas of life.
- But having a clear threshold for use of mental health services should not mean that any child should fall between different levels of support: multi-agency consideration of all children in difficulty should always result in a positive referral, whether to pastoral care within a school, advice services, primary care, or indeed to mental health services if appropriate.
- Meanwhile the inappropriate extension of mental health services mean that too many children are treated with behavioural drugs for problems which arise from unstable family environments or insufficient educational support: this is a serious abuse.



- This abuse is not just a result of mental health services misunderstanding their role: it also reflects a widespread and dangerous tendency in society at large to see challenging life events as problems which should be treated medically.

## RESPONSE 13 – WELSH HUMANISTS

### CHILDREN IN WALES: CALL FOR EVIDENCE ON STATE OF CHILDREN'S RIGHTS IN WALES

Response from Wales Humanists,  
September 2020



## ABOUT WALES HUMANISTS

Wales Humanists is a part of Humanists UK. We want a tolerant world where rational thinking and kindness prevail. We work to support lasting change for a better society, championing ideas for the one life we have. Our work helps people be happier and more fulfilled, and by bringing non-religious people together we help them develop their own views and an understanding of the world around them. Founded in 1896, Humanists UK is trusted to promote humanism by over 85,000 members and supporters and over 100 members of the All Party Parliamentary Humanist Group. Through our ceremonies, pastoral support, education services, and campaigning work, we advance free thinking and freedom of choice so everyone can live in a fair and equal society.

We have a long history of work in education, children's rights, and equality, with expertise in the 'religion or belief' strand. We have been involved in policy development around the school and the curriculum for over 60 years. We also provide materials and advice to parents, governors, students, teachers and academics, for example through our Understanding Humanism website<sup>1</sup> and our school speakers programme. We have made detailed responses to all recent reviews of the school curriculum in Wales (and the rest of the UK) and submit memoranda of evidence to MSs, MPs, civil servants, and parliamentary select committees on a range of education issues.

We are an active member of many organisations working in education in the UK, including the Religious Education Council for England and Wales (REC), of which we are a founding member, and our Chief Executive was until recently the Treasurer; the Welsh Association of Standing Advisory Councils on RE (WASACRE), of which our Wales Coordinator is an executive committee member; and, in England, the Sex Education Forum, the PSHE Association, and the Children's Rights Alliance for England (CRAE). We have been on all Welsh and UK government steering groups that have reviewed RE in recent years and currently sit on the Welsh Government working groups for RVE and RSE.

Our primary interests in children's rights relate to issues surrounding education (in particular RVE, PSE/RSE, citizenship, and science), collective worship/school assemblies, state-funded religious schools, and the removal of the defence of 'reasonable punishment' in cases of physical assault against children.

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## SUMMARY

In response to the call for evidence, we raise the following issues:

- 1) Incorporation of the UNCRC into Welsh law;
- 2) Legal requirement to conduct Christian collective worship in schools;
- 3) Religiously selective school admissions policies;
- 4) Inclusive provision of religious education (RE/RVE);
- 5) Relationships and sexuality education;
- 6) Regulation of home education and unregistered schools.

Issue 1 is an overarching issue, and issues 2-6 fall primarily under thematic area 5 of the call for evidence – Education, Leisure, and Cultural Activities. However, issues 5 and 6 also fall under area 3 – Safeguarding Children including Violence against Children.

### 1. INCORPORATION OF THE UNCRC INTO WELSH LAW

In the years following the last set of Concluding Observations, the Rights of Children and Young Persons Measure 2012 has been reasonably successful in facilitating the Welsh Government to begin implementing policies that demonstrate respect for and promote knowledge and understanding of the United Nations Convention on the Rights of the Child (UNCRC) in schools and education.

We strongly welcome the fact that the UNCRC is fully embedded into the new curriculum for Wales, and that it directly motivates one of that curriculum's four key purposes, namely, to create 'ethically informed citizens of Wales and the World'.<sup>3</sup> We have also heard from those working on the ground that the training offered to schools by the Children's Commissioner's Office and Local Authority youth forums has been of a high standard and, along with the availability of UNCRC materials in all schools, this has meant that many more children are now aware of their rights and school staff are better able to support them than was previously the case. This knowledge and understanding is likely to be further enhanced by the explicit inclusion of teaching about human rights in the Humanities Area of Learning and Experience (AoLE).<sup>4</sup>

We nevertheless think that, to fully consolidate these changes, the UNCRC itself ought to be incorporated directly into Welsh law. This would send a clear message that Wales is committed to children's rights and make the Convention directly enforceable rather than, as is currently the case under the 2011 Measure, something which retains an optional status as long as the Government pays it 'due regard' during the policy-making process. We note that such legislation is currently passing through the Scottish Parliament.<sup>5</sup>

We further note that the duties arising from the Measure have not been fully embedded across the activities of the Welsh Government or, as explained in more detail below, at local authority level.

This is most clearly demonstrated by the number of policy areas remaining which do not as yet fully comply with the UNCRC. This is particularly evident in the area of religion or belief where the continuing existence of compulsory collective worship and faith-based selection policies undermines the freedom of conscience outlined in Article 14 of the Convention.<sup>6</sup>

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## 2. LEGAL REQUIREMENT TO CONDUCT CHRISTIAN COLLECTIVE WORSHIP IN SCHOOLS

Despite the UN Committee's recommendation that the requirement be repealed,<sup>7</sup> schools are still legally mandated to carry out a daily act of collective worship that is 'wholly or mainly of a broadly Christian character'.<sup>8</sup> Although schools can opt – through a process called 'determination' – to have worship that aligns with an alternative faith, they are not permitted to opt out of delivering worship altogether.

Compliance with the law on collective worship is inspected by Estyn. This differs from England where Ofsted ceased such inspections in 2004.<sup>9</sup> Similar legislative requirements don't exist in Scotland. As a result, Welsh schools are far more likely to carry out this practice than their counterparts elsewhere in Britain.

In Wales, England and Northern Ireland, parents have a legal right to withdraw their children from collective worship. And, since 2006, sixth-form pupils in Wales and England have been permitted to withdraw themselves from these sessions. However, this ignores the fact that, under both the Human Rights Act 1998 and Article 14 of the United Nations Convention on the Rights of the Child (UNCRC), younger children also have the right to freedom of religion or belief; a right that is not respected when religious worship is imposed upon them. Furthermore, by treating Christian worship as the default, the current system illegitimately favours one faith perspective over other religious and non-religious beliefs and presupposes that children will participate in religious activities unless they or their parents opt-out. This not only risks the freedom of conscience of pupils and families who are not aware of the right to withdraw, but indirectly requires those who do exercise this option to reveal information about what they believe in a way that could risk the right to privacy outlined in Article 16.

By only allowing children to opt out of collective worship at the age of 16, we do not think that UK law currently enables children to fully realise their 'Gillick competence'<sup>10</sup> rights in a 'manner that is consistent with' their 'evolving capacities', as established in European case law and reflected in

Articles 12 and 14 of the UNCRC. This view has been repeatedly endorsed by the UK Parliament's Joint Committee on Human Rights (JCHR), for example in reports in 2006 (prior to the devolution of education law to Wales),<sup>11</sup> 2008 (with reference to the English law, which is identical in this area),<sup>12</sup> and 2010 (ditto).<sup>13</sup> The issue of withdrawal is particularly pertinent for young people in the latter stages of secondary education who may even have reached the age of 16 but, because they have not yet begun sixth-form, may still not be able to opt out of worship.

What's more, even when parents request an exemption, the process of withdrawal is often difficult (not least because the law is often poorly understood by schools). Children who have been removed from worship are rarely given a meaningful alternative of equal educational value during the time their peers are attending worship. Indeed, in 2019 two non-religious parents, Lee and Lizanne Harris (supported by Humanists UK), took a legal challenge against their children's school in England because it refused to provide just such an alternative.<sup>14</sup> When the Trust that runs the school eventually backed down after the Harrises won permission to have their case heard at the High Court, the school agreed to provide an inclusive alternative to the Harris children and any other withdrawn children whose parents wished them to receive it.

As the law is identical in England and Wales, this logically ought to mean that similar arrangements are possible at other schools. However, most parents who would like to see a meaningful alternative to collective worship in their child's school won't be in a position to mount time-consuming legal proceedings. What's more, such action may risk alienating the family from the school. For this reason, this is clearly not the most desirable means by which to ensure that children get the kind of non-discriminatory provision to which they are entitled under Article 2 of the UNCRC. Instead, this aim would be far better met by a change to the law.

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Unfortunately, however, the Welsh Government has said that it won't take action on the issue of collective worship in the current Senedd term.<sup>15</sup> This is despite the fact that the continuation of statutory Christian worship contradicts much of the rationale for the new curriculum, particularly the requirement to ensure that children and young people develop into ethical citizens of Wales and the world (which is predicated on understanding and exercising 'human and democratic responsibilities and rights'<sup>16</sup>). Given that, in other respects, this is likely to be the most inclusive curriculum in the UK, this undermines its purpose and risks diminishing the impact of the important changes this innovative curriculum seeks to make.

The Minister has also explicitly accepted that the current law on collective worship raises human rights issues and has said that if she personally was 'starting from a blank piece of paper,' she would be unlikely to 'enshrine the law in the way it currently is'.<sup>17</sup> Seemingly, the decision not to take action on the issue was motivated by the view that the Government must prioritise the changes to the curriculum over ostensibly less important changes to collective worship. However, here it is worth noting that this separation of the curriculum from what happens in other aspects of the school day is largely artificial. For pupils, worship delivered by teachers in a school environment is very likely to be experienced in a similar way to a lesson, making the fact this form of spiritual, moral, social, and cultural development is inconsistent with the proposed changes in the wider curriculum all the more difficult to defend.

For all these reasons, we strongly believe that the UNCRC can only properly be considered to have taken effect once collective worship has been abolished. We therefore urge the Welsh Government to remove the requirement for collective worship in all schools in Wales and replace it with fully inclusive assemblies, which do not discriminate and demonstrate respect for children and families from all religion and belief backgrounds.

## **Recommendations**

- In line with the last set of Concluding Observations, the Welsh Government should take steps to repeal the legal requirement for Christian collective worship in schools as soon as possible;
- To ensure that all children in Wales receive a broad and balanced education that fosters their spiritual, moral, social, and cultural development, collective worship should be replaced with a requirement to conduct inclusive assemblies that are suitable for all regardless of background;<sup>18</sup>
- In the period between now and when this new requirement is introduced, all children who are withdrawn from collective worship should be provided with a meaningful alternative to collective worship that follows the inclusive model and the requirement for Estyn to inspect compliance with collective worship rules should be abolished.<sup>19</sup>

## **3. RELIGIOUSLY SELECTIVE SCHOOL ADMISSIONS POLICIES**

State-funded schools designated with a religious character enjoy an exemption to the Equality Act which means they are legally permitted to select their pupils on the basis of faith.<sup>20</sup> Religious discrimination in school admissions clearly violates Article 2 of the UNCRC, as well as Article 14, since the right and ability of children to be autonomous and hold different beliefs to their parents is severely limited by the ability of faith schools to discriminate on the basis of parental belief and practice.

Further, there is a wealth of robust evidence to demonstrate that religious selection not only segregates pupils according to religion, but also along ethnic and socio-economic lines, as well as

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by prior attainment.<sup>21</sup> As studies that control for pupil background show,<sup>22</sup> it is this, rather than a faith ethos, that accounts for any enhanced levels of attainment or performance in national league tables. However, this data tends to fuel the idea that faith schools are 'better' than other types of school and encourages parents (particularly the highly educated and those from more advantaged socio-economic groups) to use all the means at their disposal to gain a place, and exacerbating existing inequalities.

To put it another way, faith schools are socio-economically selective, because their religious admissions policies enable them to skim the richest, most advantaged pupils from their areas while the rest fail to meet their more complex admissions criteria. Evidence from England shows that, overall, comprehensive secondaries with no religious character admit 5% more pupils eligible for free school meals than live in their local areas. But comprehensive Church of England secondaries admit 15% fewer; Roman Catholic secondaries 28% fewer; Jewish secondaries 63% fewer; and Muslim secondaries 29% fewer.<sup>23</sup> Research by the Sutton Trust has also established a trend for faith schools to be some of the most socially selective, both at the primary level<sup>24</sup> and among top-performing comprehensive secondaries.<sup>25</sup>

Religious admissions policies have also been demonstrated to segregate along ethnic lines. For example, Catholic schools in England take 4.4% fewer Asian pupils than would be expected given the makeup of their local areas.<sup>26</sup> There is a well-established relationship between poverty, disadvantage, and being a member of a Black, Asian, or Minority Ethnic (BAME) group. Given this, it seems plain that the issue of socio-economic diversity simply cannot be addressed without acknowledging the detrimental impact of religiously selective admissions.

Religiously selective policies clearly do not 'reduce the effects of the social background... on... achievement in school' or 'guarantee the right of all children to a truly inclusive education in all parts of the State party.'<sup>27</sup> Indeed, unlike other schools (which are legally obliged to prioritise looked after and previously looked after children in their admissions policies), faith schools are permitted to prioritise all children who share the faith over looked after and previously looked after children who do not. Forthcoming research from Humanists UK demonstrates that, in England, 76% of state-funded Catholic schools and 100% of state-funded Jewish schools do this.<sup>28</sup>

Not only does religious selection involve discrimination that violates Article 2 of UNCRC and contradicts the recommendation, outlined in the 2016 Concluding Observations, that the Government should 'strengthen... preventive activities against discrimination and stigmatization'.<sup>29</sup> But the segregation it perpetuates also means many young people are denied the opportunity to mix with those from differing backgrounds. This robs such pupils of the meaningful interactions necessary to build sustainable inter-communal relationships and fails to properly prepare them for 'a responsible life in a free society' as required by Article 29.

Research by a team from the University of Oxford shows that pupils in ethnically mixed schools are more trusting and have more positive views of children from different backgrounds than do pupils in segregated schools.<sup>30</sup> Elsewhere, the authors of the same study argue that 'faith schools, to the extent that they are segregated, deprive young people of the opportunity to mix across ethnic and religious lines' in a manner that thwarts positive attitudes to members of so-called 'outgroups'.<sup>31</sup> For this reason, religiously selective policies actively work against the Committee's recommendations on tackling bullying in schools by 'building capacities of students and staff members to respect diversity.'<sup>32</sup>

## Recommendations

- The law permitting denominational schools to select pupils on faith grounds when oversubscribed should be abolished;

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- All schools should be encouraged to actively recruit pupils from diverse backgrounds and the Government should take steps to reward good practice in this area.

#### **4. THE INCLUSIVE PROVISION OF RELIGIOUS EDUCATION (RE/RVE)**

The inclusion of religions and humanism equally in the new religious education (RE) curriculum via the Curriculum and Assessment (Wales) Bill<sup>33</sup> is a hugely positive step which, if implemented, will begin to bring Wales into line with the Human Rights Act 1998 and the UNCRC with respect to freedom of religion or belief.

Here it is important to note that the changes proposed in the Bill do not involve a substantive change to the law. The Human Rights Act (following the European Convention on Human Rights) already dictates that humanism must be treated equally to religions, and the judgment in the only domestic case law on the issue found that a curriculum which systematically excluded the teaching of humanism would fail to meet the legal standard of being 'objective, critical, and pluralistic'.<sup>34</sup>

The most recent British Social Attitudes Survey suggests that 52% of British and 57% of Welsh adults belong to no religion,<sup>35</sup> a figure that rises to 63% amongst those Britons aged 18-24.<sup>36</sup> It would presumably be even higher for Welsh young people. The failure to include adequate coverage of the beliefs of such a significant proportion of the population is not in keeping with the spirit of Article 13 of the UNCRC, which guarantees the right of the child 'to seek, receive and impart information and ideas of all kinds,' or with the overall principles of non-discrimination in Article 2, or the freedom of religion or belief enshrined in Article 14.

The Government in Wales has explicitly sought to reform the law by clarifying that humanism must be taught on an equal footing with world religions, and humanists may sit on the bodies that develop and oversee the syllabus (known as Agreed Syllabus Conferences, or ASCs, and Standing Advisory Councils on Religious Education, or SACREs). To reflect the broader scope of the subject, its name is to be changed to Religion, Values, and Ethics (RVE). It is also proposed that, to protect the right to freedom of religion or belief in light of the removal of the right to withdraw from the subject, the parents of learners attending voluntary aided faith schools will be permitted to demand objective RVE lessons in accordance with the locally agreed syllabus as a meaningful alternative to the faith-based RE that is usually taught in these schools.

But, while progress has been made at a national level, such developments have not always been reflected at the local level. Local authorities have been slow to recognise the need for change in areas of equality that help to support children's rights. This can be seen, for example, in cases where LAs have refused to grant humanist representatives full membership of SACREs and ASCs, therefore depriving children – particularly those from non-religious backgrounds – of adequately inclusive provision. This change is now gradually taking place thanks in part to support from the Education Minister who, in 2018, directed local authorities to ensure that SACREs and ASCs treat those with non-religious beliefs equally to those with religious beliefs.<sup>37</sup> And, as mentioned above, the Government is now also proposing to change the wording of the law so that it adequately reflects this position. However, despite this guidance and these proposals, some LAs are yet to take steps to improve the situation and appoint a humanist member to these bodies.

The continued existence of SACREs and ASCs which fail to adequately include humanist representatives is highly likely to entail the production of syllabuses which misrepresent or caricature humanist perspectives. Since it is deemed essential that religious groups are given the opportunity to ensure the curriculum presents their beliefs in an authentic way, the same right must be afforded to humanists.

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For all these reasons, the proposed introduction of a group on SACREs and ASCs which is composed of 'persons to represent such non-religious philosophical convictions... as, in the opinion of the authority, ought to be represented'<sup>38</sup> is not only welcome, but vital.

## **RVE in faith schools and the abolition of the right to withdraw**

The law in Wales permits schools with a religious character to provide religious instruction and collective worship in line with a particular faith. In our view, 'confessional' practices that aim to inculcate children into a particular religious perspective like this fly in the face of the requirements of the UNCRC because they ignore the freedom of belief of children and generally treat their Article 14 rights as identical with those of their parents. This is starkly illustrated by the fact that, in most cases, those with sufficient maturity are not empowered to opt out of 'confessional' religious activities.

To improve this situation, policy makers must, at the very least, consider permitting young people who are capable of making decisions about the education they wish to receive on religious matters to withdraw from this type of activity even when they attend faith schools. One way to ensure that this happens in the context of the new curriculum would be to transfer the proposed parental right to demand inclusive RVE lessons (taught in accordance with the locally agreed syllabus in place of faith-based education) to older, sufficiently mature pupils.

In order to ensure that pupils have access to the full curriculum, the Curriculum and Assessment (Wales) Bill proposes to abolish the parental right to withdraw from RVE and relationships and sexuality education (discussed in point 5 below). We were initially concerned about the proposal to remove the right to withdraw because it currently acts as an important safety valve for the protection of the freedom of religion or belief in the event that these lessons are taught in a partisan or insufficiently pluralistic way.<sup>39</sup> We were particularly worried about the removal of the right to withdraw from RVE in faith schools, where religious bodies will retain the right to teach the subject from a faith perspective in a way which, because it endorses a particular religion, would constitute indoctrination under human rights law.<sup>40</sup>

Many parents, particularly those living in rural areas, have little choice over where to send their children.<sup>41</sup> This means many pupils end up in faith schools when they and their families do not share the religion of the school. These families are currently forced to decide between religious indoctrination or opting out of religious education altogether, thus socially isolating themselves, and missing a vitally important aspect of their education. However, despite our earlier concerns, we believe that the provision in the Curriculum and Assessment (Wales) Bill for voluntary aided schools with religious character to provide RVE in accordance with the locally agreed syllabus when parents demand this<sup>42</sup> is an innovative solution to this problem and marks a significant improvement on the current situation. We nevertheless think that a number of minor amendments are required to make these proposals fit for purpose.

First, as already mentioned, the right to demand objective RVE according to the agreed syllabus should transfer from parents to pupils from Year 10 onwards. This would bring the policy into line with the case law on Gillick competence.<sup>43</sup> It would also better respect the conscience rights of children and young people<sup>44, 45</sup> and fits more closely with the requirement, outlined in the Rights of Children and Young Persons Measure 2011,<sup>46</sup> that policy decisions take proper account of the UNCRC. What's more, given that children are currently expected to exercise a degree of choice over what they will be taught in years 10 and 11 when they select their GCSE options at the end of year 9, there is a clear point at which it would be reasonable to begin to offer this alternative. Further, whether it is the parent or the child responsible for deciding to participate in agreed syllabus RVE, the Welsh Government must establish a process to ensure that parents and children are regularly informed of their rights in this regard (e.g. at the start of every academic year

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or at the point any new pupil joins the school). Ideally, VA schools should be required to explicitly ask parents (or, where relevant, children) to select the type of R(V)E they prefer, rather than simply defaulting to faith-based RE unless told otherwise. This will help to ensure that all parents make the choice right for their children, and would prevent children feeling singled out when they or their parents make this choice.

Second, to ensure the alternative provision complies with the statutory regulations and is adequately 'objective, critical, and pluralistic', it must be taught by competent teachers who understand the difference between this and faith-based religious instruction. This is unlikely in schools where all of the teachers are employed on religious grounds – as is currently permitted. For this reason, VA schools should be required to retain a suitable number of 'reserved' teachers who are trained to teach pluralistic RVE, and the legal provision that allows these teachers to be selected, remunerated, promoted, or dismissed according to faith should be removed.

Finally, agreed syllabus provision should be inspected by a neutral body, preferably Estyn, rather than the denominational bodies that currently inspect faith-based RE and which are unlikely to have the requisite expertise or impartiality to judge when provision meets the pluralistic standard.

This is evidenced by the fact that some religious bodies that run faith schools in Wales, notably the Catholic Education Service, are arguing that the introduction of non-religious perspectives will mean that RVE is not as intellectually rigorous as existing religious education and constitutes 'dumbing down'.<sup>47</sup>

## **RVE in non-denominational schools**

We firmly believe that children attending schools with no religious character ought to receive a fully inclusive education in RVE that treats religious and humanist perspectives equally. We are, nevertheless, concerned about the greater flexibility afforded to individual schools by the Curriculum and Assessment (Wales) Bill. At present, schools are expected 'to teach in accordance with' their locally agreed syllabus. However, under the new Bill they will only be required to 'have regard' to that syllabus, granting them more discretion over what they teach.<sup>48</sup> This could risk the Article 14 rights of children, especially if the guidance given to ASCs regarding what it means for a syllabus is insufficiently detailed.

As already noted, it is imperative that the RVE curriculum is objective, critical, and pluralistic. However, if schools and teachers are granted a great deal of flexibility with respect to how they meet this standard, it will become more likely that oversight and failures occur. At present, the right to withdraw acts as a partial safeguard for freedom of religion or belief in the event of poor practice. Once this is abolished, lessons which fail to meet the statutory standards will immediately jeopardise the human rights of those receiving them. In other words, when RVE is introduced there will be less room for error than under the current regulatory regime, so it is more important that the subject is taught well and the curriculum meets the required standards. Granting schools the freedom to innovate before these standards have been properly digested and understood puts learners' rights at risk and opens schools up to litigation on this basis.

Of course, many of these issues could be eliminated by the provision of an RVE code similar to the one proposed for RSE (see below). Alongside this, the Government should consider issuing comprehensive guidance which explains the law – including on what it means for a curriculum to be objective, critical, and pluralistic, and what 'having regard to' the agreed syllabus constitutes in this context – as well as on the content of RVE itself. This could also be supplemented by additional training for teachers and proper oversight by school inspectorate Estyn.



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Of course, in circumstances where the ASC has failed to adequately meet the necessary standards (a situation which, unfortunately, has been all too common in the past), greater flexibility might actually enable schools to provide a better syllabus than the one developed at a local level.

Nevertheless, it is worth pointing out that, unlike other areas of the curriculum where the link to human rights law is not so direct, RVE is particularly open to misinterpretation. For this reason, a more prescriptive approach may be desirable, especially while the new curriculum is being embedded.

### **Recommendations**

- Grant older pupils in voluntary aided faith schools (year 10 and 11) the power to opt-in to RVE taught according to the agreed syllabus to fully respect their rights to freedom of religion or belief;
- Ensure that inclusive RVE taught according to the locally agreed syllabus is inspected by Estyn rather than denominational bodies;
- Ensure that teachers in all schools, but particularly those in schools with a religious character, understand the difference between objective, critical, and pluralistic RVE and that taught from a faith perspective, as well as the legal ramifications of not taking this difference seriously. Welsh Government should consider publishing guidance on this issue;
- Require that a suitable number of 'reserved' teachers in VA schools are trained to teach pluralistic RVE and remove the legal provision that allows such teachers to be selected, remunerated, promoted, or dismissed according to faith;
- Require that VA schools with a faith character provide parents and older pupils with an explicit choice between faith-based and agreed syllabus RVE, or at the very least, fully inform them of their right to demand the subject in accordance with the agreed syllabus. This should be done through school policy documents, the school website, and parents should be provided with regular reminders every academic year/when new pupils join the school.

## **5. COMPULSORY RELATIONSHIPS AND SEXUALITY EDUCATION IN THE NEW CURRICULUM FOR WALES**

The introduction of compulsory relationships and sexuality education (RSE) for all children aged five to sixteen in 2022 will have a hugely positive impact on the rights and interests of all young people, and particularly for those with a range of protected characteristics, including LGBT pupils, women and girls, and people with disabilities.

All the best evidence<sup>49</sup> shows that teaching about different types of relationship, including sexual relationships, as well as about consent, sexual health, and the advantages of delaying sex, ensures that young people grow up healthier, happier, and more able to keep themselves, and those around them, safe. RSE also plays a very important safeguarding role which brings it into line with Article 19 of the UNCRC which requires that 'States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child'.<sup>50</sup> For these reasons, we agree with the proposal, outlined in the Curriculum and Assessment (Wales) Bill, that there should be no right for parents to withdraw their children from this vital, fact-based aspect of their education.

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We agree with the Welsh Government's view that the 'existing legislation around sex and relationships education in Wales is outdated and not fit for the current world in which children and young people exist'.<sup>51</sup> For this reason, it is essential that the legislation is updated to ensure that these children and young people receive a statutory, standardised curriculum which is both inclusive and developmentally appropriate. It is true that the introduction of such a curriculum will require a high degree of commitment from teachers and school leaders. However, the risks of not providing this curriculum, particularly to marginalised groups (e.g. LGBTQ people or women and girls) as well as members of insular religious communities where issues (perceived to be) related to sex are treated as taboo, far outweigh the costs of making these changes.

As is evident from the various controversies arising from the introduction of statutory RSE in England,<sup>52</sup> it is possible that some groups in Wales will attempt to stymie the introduction of the new RSE curriculum (or the proposal to remove the parental right to withdraw) on religious grounds. This kind of resistance could threaten the potential of the subject to have the necessary impact on the aforementioned rights of children and young people. For this reason, the requirements of the UNCRC, including freedom of religion or belief, and protected characteristics like sex, sexual orientation, and gender identity must be kept front and centre when making policy decisions on the matter. Religious groups of all kinds include individuals with the full range of protected characteristics, and of course young people frequently decide during the course of their education that they hold a different religion or belief from their parents. It remains to be seen whether the Welsh Government will adequately take this into account when deciding what pupils should learn and whether to ensure that all children, irrespective of background, are given the opportunity to receive factually accurate, non-judgemental RSE as part of their broader education. However, the proposal to implement an RSE code<sup>53</sup> which sets out non-negotiable content for the subject and will include teaching in six key areas derived from the UNESCO technical guidance for sexuality education<sup>54</sup> – Rights and Equity, Relationships, Sex, gender and sexuality, Bodies and Body Image, Sexual Health and Well-being, and Violence, Safety and Support – certainly appears to constitute a strong step in the right direction.

## **Recommendations**

- The RSE Code and associated guidance must ensure that the curriculum is fully LGBT inclusive;
- All pupils, regardless of background, religion, or belief should be granted access to the full, objective RSE curriculum;
- Schools with a religious character should be expected to cover the same content in RSE lessons as other schools, with no option to offer a differentiated curriculum on faith grounds.

## **6. REGULATION OF HOME EDUCATION AND UNREGISTERED SCHOOLS**

In 2019, the Welsh Government consulted on new statutory guidance on elective home education. In spring 2020, it consulted on a proposal to implement local authority databases to assist LAs in the identification of children of compulsory school age, including those educated otherwise than at school.<sup>55</sup>

While neither the proposed guidance or database was perfect – not least because they did not include a legal duty for home educating parents to register their children – we believe that both marked a significant step towards protecting the rights of children in Wales. We were therefore dismayed to learn, ostensibly due to the coronavirus crisis, that the Government would not be taking either proposal forward during the current Senedd term.<sup>56</sup>

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In our view, the requirement for local authorities to maintain and populate a database of compulsory school-aged children in their area (featuring basic information to assist them to identify those who are and are not on a school roll) is particularly essential. This is not only because such a register will enable LAs to ascertain which children and young people are at risk of not receiving a suitable education, and address the situation accordingly. It is also because it will help to prevent unscrupulous providers of illegal or unregistered schools from using legal loopholes relating to supplementary education for home educated pupils as a cover for their activities.

In England, illegal schools are a particular problem, with over 6,000 children currently thought to be receiving their only education in such establishments.<sup>57</sup> Many are taught by unqualified teachers in appalling conditions and there is a total lack of safeguarding. When these schools have a religious character, the curriculum is usually narrow, focused on learning religious scripture (sometimes including extreme misogynistic and homophobic content) to the exclusion of other basic subjects such as English and Maths. Indeed, we have worked with former pupils from these schools who grew up in England but left unable to speak English and found themselves ill-prepared for life in modern Britain. As adults, they now say the language barrier was ‘deliberately implemented’ as a way for community leaders to ‘[limit] contact between community members and outsiders’.

Investigations we conducted into the practices of illegal schools, including a joint investigation with BBC News at Six and Ten,<sup>58</sup> have also found that corporal punishment and physical abuse is often the norm.<sup>59</sup>

The existence of illegal and unregistered schools clearly undermines a number of key Convention rights, including Article 19 – which requires state parties to ‘take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment [and] maltreatment’, be that by parents or in school; and Article 28 – the right to education, which also explicitly requires that school discipline should be administered in a manner consistent with the child’s human dignity and in conformity with the present Convention. Pupils in unregistered schools with a religious character are also denied their Article 14 freedoms of religion or belief through being forced to study a narrowly religious curriculum that is designed to indoctrinate only one perspective.

We are therefore keen that such establishments are not able to open or operate in Wales. We think that the clear guidance on what constitutes full-time education set out in the Welsh Government consultation on new guidance on home education, alongside a dynamic register of home educated pupils that parents are legally obligated to use, would help to prevent those hoping to run such settings from claiming that they are merely providing supplementary education for home-educated pupils.

Here it is worth noting that the draft guidance the Welsh Government produced was explicitly based on the UNCRC and demonstrated a clear intent to fully support children’s rights on their part. This was particularly evident in the sections which emphasised the necessity of respecting and giving due weight to children’s own views under article 12 of the Convention, but also in the list of suggested characteristics of a suitable and efficient education. This included the expectation that the education on offer in the home environment ‘[responded] to the needs and the best interests of the child’<sup>60</sup> (putting it firmly in line with Article 3 of the Convention) and ‘[enhances] the child’s potential’. The latter is necessary under Article 29, which states that the ‘education of the child shall be directed to: The development of the child’s personality, talents and mental and physical abilities to their fullest potential’. Nevertheless, we were concerned that the proposed guidance was relatively silent on the issue of relationships and sexuality education, as well as on health education for those educated otherwise than at school. It also contained insufficient advice on how local authorities may best support the freedom of religion or belief of home educated

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children (independently from that of their parents), which is protected under Article 14 of the Convention.

In our view, the decision to drop the various proposals on elective home education are to be regretted. Joined-up legislation on the issue is vital if the rights of children who are educated outside of school settings are to be protected and if the issues that have arisen in England relating to illegal, unregistered settings are to be avoided.

## Recommendations

- A legal duty on home educating parents to register their children on the relevant LA database in addition to the one placed on LAs to maintain such a database;
- Joined-up legislation on home education and all out-of-school settings (including after school clubs, tuition centres, etc.) to ensure that illegal schools do not become a problem in Wales. This should include a register of such settings, alongside a duty to share information on the children attending them;
- The Government should also introduce a statutory definition of full-time education so that it includes any setting where a child receives all or most of their education.

1 Understanding Humanism (2020) <<https://understandinghumanism.org.uk/>> [accessed 18 August 2020].

2 Rights of Children and Young Persons (Wales) Measure 2011 <<https://www.legislation.gov.uk/mwa/2011/2/c/contents>> [accessed 4 September 2020].

3 Curriculum for Wales Guidance (January 2020), p.11 <<https://hwb.gov.wales/curriculum-for-wales>> [accessed 4 September 2020].

4 Area of Learning and Experience: Humanities (2020), Section 4 <<https://hwb.gov.wales/curriculum-for-wales/humanities/descriptions-of-learning/>> [accessed 4 September 2020].

5 Humanists UK, 'Scotland to enshrine UN Convention on children's rights into law' (2 September 2020) <<https://humanism.org.uk/2020/09/02/scotland-to-enshrine-un-convention-on-childrens-rights-into-law/>> [accessed 10 September 2020].

6 Convention on the Rights of the Child (1989) <<https://www.ohchr.org/en/professionalinterest/pages/crc.aspx>> [accessed 04 September 2020].

7 UN Convention on the Rights of the Child, Committee on the Rights of the Child, Concluding observations on the fifth periodic report of the United Kingdom of Great Britain and Northern Ireland (July 2016) <<http://docs.tore.ohchr.org/SelfServices/FilesHandler.ashx?enc=6QkG1d%2FPPRiCAqhKb7yhskHOj6VpDS%2F%2FJqg2Jxb9gncnUyUgbnuttBweOlyfyYPkBbwffitW2JurgBRuMMxZqnGgerUdpjxij3uZ0bjQBOLNTNvQ9fUIEOvA5LtW0GL>> [accessed 18 August 2020].

8 School Standards and Framework Act 1998 <<https://www.legislation.gov.uk/ukpga/1998/31/part/II/chapter/VI/crossheading/religious-worship>> [accessed 18 August 2020].

9 Polly Curtis, 'End daily worship in schools, says Ofsted head', The Guardian, (11 June 2004) <<https://www.theguardian.com/education/2004/jun/11/schools.uk>> [accessed 7 September 2020].

10 See *Gillick v West Norfolk and Wisbech AHA* [1985] UKHL 7 (17 October 1985).

11 Joint Committee on Human Rights, Legislative Scrutiny: Thirteenth Progress Report, Twenty-fifth Report of Session 2005-06, paragraphs 2.1-2.6 <<https://publications.parliament.uk/pa/jt200506/jtselect/jtrights/241/241.pdf>> [accessed 19 August 2020].

12 Joint Committee on Human Rights, Legislative Scrutiny: Education and Skills Bill, Nineteenth Report of Session 2007-08, paragraphs 1.40-1.45 <<https://publications.parliament.uk/pa/jt200708/jtselect/jtrights/107/107.pdf>> [accessed 19 August 2020].

13 Joint Committee on Human Rights, Legislative Scrutiny: Children, Schools and Families Bill; other Bills, Eighth Report of Session 2009-10, paragraphs 1.30-1.40 <<http://www.publications.parliament.uk/pa/jt200910/jtselect/jtrights/57/57.pdf>> [accessed 19 August 2020].

14 Humanists UK, 'School concedes in collective worship case – will provide alternative assemblies' <<https://humanism.org.uk/2019/11/20/school-concedes-in-collective-worship-legal-case-will-provide-alternative-assemblies/>> [accessed 19 August 2020].

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15 Humanists UK, 'Disappointment as Welsh Government refuses to act on collective worship during current assembly term' (8 January 2020) <<https://humanism.org.uk/2020/01/08/disappointment-as-welsh-government-refuses-to-act-on-collective-worship-during-current-assembly-term/>> [accessed 9 September 2020].

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## **RESPONSE 14 - RIGHTS AMBASSADORS PROJECT, VALE YOUTH SERVICE**

### **Vale Youth Service response to Call for Evidence State of Children's Rights in Wales**

Education, Leisure & Cultural Activities  
*Education, Play & Leisure, Cultural activities*

**What are the main issues that the Welsh Government and public bodies should be prioritising and why?**

- Adequate funding to increase open access youth club provisions.
- An increase in opportunities for play and leisure for young people - park facilities to be more inclusive for young people – sport facilities / dedicated areas for different ages.
- Disparity amongst schools – closing the gap between schools that are deemed high achieving to those low achieving. Support given to ensure education is the same standard across Wales as well as within a local authority.
- 21<sup>st</sup> Century schools – school facilities and resources to be the same – currently disparity amongst schools.

**What information or evidence do you have to support this?**

- Meetings with local participation structures e.g. youth cabinet / youth action
- Make Your Mark campaign results
- Consultations with young people – young people have raised on numerous occasion that park facilities are not adequate.

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- School Council Network meetings - school buildings and opportunities have been raised as being different from one school to another. Such as when pupils start GCSE work / exams, some do this in year 9/ year 10 and lack of work experience opportunities.

**What policy or changes in law need to happen and why? Any gaps?**

- Recognition of the youth work profession and how it compliments education and should be seen as an integral part of a child/young person's education.

**What recommendations do you wish to make to ensure positive change for children?**

- More youth service support in schools to increase opportunities for young people.

**Disability, Basic Health & Welfare**

*Disabled children, Health inequalities, Mental Health, Environmental Health, Child Poverty*

**What are the main issues that the Welsh Government and public bodies should be prioritising and why?**

- Period Poverty – is an ongoing issue that young people have raised, unable to easily access products and affordability.
- School Counselling Services / Mental Health support in schools. Young people have raised that there is a lack of support from schools, and waiting times for self-referral are a barrier towards accessing services.
- Environmental / Green Issues – Recycling / making schools plastic free. Number of schools are tackling this but facing barriers.

**What information or evidence do you have to support this?**

- Meetings with local participation structures e.g. youth cabinet / youth action – this has been raised as agenda items.
- Make Your Mark campaign results – littering and plastic recycling has featured quite high on the list.
- Consultations with young people.
- School Council Network – pupils have raised work that they have undertaken with their eco committee / school council in tackling the issue but feel more guidance/pressures can be put on school to become plastic free.

**What policy or changes in law need to happen and why? Any gaps?**

**What recommendations do you wish to make to ensure positive change for children?**

- Additional support for schools / funding / staff training.

**General Principles**

*Non Discrimination Race, Hate Crime, Gypsy Travellers, Respect for Views of the Child / Participation*

**What are the main issues that the Welsh Government and public bodies should be prioritising and why?**



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- Increase participation opportunities / ensure young people's views are not tokenistic and are fully embedded in decision-making.
  - Increase pupil participation within school setting, giving young people more opportunity to have their voices heard.
  - Anti-bullying / hate crime reporting.

#### **What information or evidence do you have to support this?**

- Meetings with local participation structures e.g. youth cabinet / youth action
- Make Your Mark campaign results
- Consultations with young people
- School Council Network and school council audits

#### **What policy or changes in law need to happen and why? Any gaps?**

- Review of School Councils (Wales) 2005 Regulations
- Review of school curriculum on equalities topics.

#### **What recommendations do you wish to make to ensure positive change for children?**

- Facilitate more opportunities for young people to get involved in having their views heard, finding ways to overcome barriers.

## **RESPONSE 15 - NYAS CYMRU**



### **NYAS Cymru perspective for State of Children's Rights in Wales: UNCRC Monitoring Submitted to Children in Wales on 10th September 2020**

#### **Introduction**

Thank you for the opportunity to provide written evidence, as well as the opportunity to attend one of your recent online stakeholder events. We are writing on behalf of NYAS Cymru (National Youth Advocacy Service Wales), a leading children's rights charity that supports and empowers care-experienced children and young people across Wales. NYAS Cymru works with hundreds of care-experienced children and young people, providing services such as rights-based statutory advocacy, independent visiting, peer mentoring, youth participation, mental health support and bespoke services for families with the aim of keeping them together.

We have put together this evidence in collaboration with a group of care-experienced children and young people we work with, listening to them to identify the main issues that Welsh Government should prioritise to ensure greater compliance with the UNCRC and put children's rights at the heart of decision-making. We have focused our submission on five areas in particular.

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1. What are the main issues that the Welsh Government and public bodies should be prioritising and why?

We answer specifically in relation to care-experienced children and young people:

- A) Mental Health and Wellbeing
- B) Corporate Parenting
- C) Criminalisation
- D) Homelessness
- E) Unaccompanied Asylum-Seeking Children

We go on to deal with the following two questions together under the heading of each of our five priorities:

- 2. What policy or changes in law need to happen and why?
- 3. What recommendations do you wish to make to ensure positive change for children?

#### **A) Mental Health and Wellbeing**

Two in every three (68%) care-experienced children and young people enter care in Wales because of abuse or neglect.

This exposure can have a profound impact, and lead to the development of known mental health difficulties, including PTSD (post-traumatic stress disorder) and depression. The effects of which can be lifelong, with one in every three adult mental health conditions relating directly to adverse childhood experiences.<sup>1</sup>

Article 39 of the UNCRC states that “children who have experienced neglect, abuse, exploitation, torture or who are victims of war must receive special support to help them recover their health, dignity, self-respect and social life.”

Mental health support has been identified by care-experienced children and young people themselves as priority issue, as well as by Care Inspectorate Wales.<sup>2</sup> The latter’s recent report said that throughout Wales there was “poor availability of emotional and therapeutic support services, particularly in relation to CAMHS.”<sup>3</sup> Whilst we acknowledge that there have been some improvements in CAMHS waiting times across Wales, the Welsh Government’s target for 80% of children to be seen by CAMHS within 28 days is still not being met, and half of patients are waiting more than four weeks for a first appointment.<sup>4</sup>

However, Welsh Government have taken considerable steps to improving the mental health offer available to care-experienced young people in recent years. Since 2014, there has been a requirement for an assessment of mental health upon entry into care, and in 2019, Care Inspectorate Wales reported that 86% of plans included a health plan.<sup>5</sup> The initial assessment varies across local authorities in Wales.

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According to Article 12 of the UNCRC, all children and young people have the right to have their voices heard in decisions made about them. This includes when understanding and navigating mental health services.

The Mind over Matter report produced by the Children and Young People's Education Committee has a strong recommendation for advocacy for all children and young people experiencing mental health issues.<sup>6</sup> NYAS Cymru strongly supports this recommendation and has been working tirelessly towards making this a reality. We are encouraged by the work of Ministers in Wales to support this and wish to see children and young people's mental health take priority in the COVID-19 recovery.

Advocates could:

- a) Guarantee children and young people's right to have their wishes and feelings taken into account in decisions made about them.
- b) Help children and young people to navigate the mental health system, to understand what is happening and what support is available to them.
- c) Hold CAMHS answerable on services and waiting times, using trends and issues raised through advocacy to lead to continual improvement in mental health services.
- d) Provide support, advice and representation at critical times; working from a child's rights approach.

Whether children and young people are having difficulty accessing services, need support at mental health appointments or want to put their voice across in care plans, an active offer of advocacy at the earliest possible stage could prevent escalation of mental health issues and give individuals greater control in their lives.

Our own Looked After Minds report sets out a number of further recommendations on mental health and wellbeing.<sup>7</sup> Every care-experienced young person's Personal Adviser should prioritise support for the young person's mental health and wellbeing as a key performance indicator. Mental health support must be proactive, preventative, and meet the mental health needs of the individual as they are leaving care. Where a child or young person is waiting for or denied access to CAMHS or adult mental health services, other support options must still be timely, tangible and led by a genuine dialogue with the young person.

Every care-experienced child and young person must have timely access to evidence-based support and understanding for trauma-related mental health needs. Social care staff should receive mandatory evidence-based training around the potential influence of trauma exposure on children's development and wellbeing. Further, any service offering trauma-related mental health support to care-experienced children and young people should ensure assessments and treatments are evidence-based.

Welsh Government should create statutory guidance for professionals and carers on Positive Childhood Experiences. Adverse Childhood Experiences and Positive Childhood Experiences are two sides of the same coin - it is not enough just to take a child out of an adverse or traumatic environment and then assume their mental health will improve.

Children need love and support in order to flourish. Recent research in the USA showed that 'Positive Childhood Experiences' focused on safe, stable and nurturing relationships for children, can reduce the risk of poor mental health in adulthood.<sup>8</sup>

## **B) Corporate Parenting**

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We support recent developments from Welsh Government and the sector to strengthen Corporate Parenting duties, and that every minister must pay “due regard” to children when making policy decisions, in line with the UNCRC.

We recommend the duties of corporate parenting to be extended to housing, health, education, youth services and the Children’s Commissioner for Wales. We also call for the legislation to change so care leavers up to the age of 25 have a statutory right for leaving care support. The Scottish Model of corporate parenting should be followed, as set out in the Children and Young People (Scotland) Act 2014.<sup>9</sup> This assigns corporate parenting duties to a whole range of public bodies, giving legal recognition of the role every department and body must play to support care-experienced children and young people. This is a clear way to embed UNCRC Article 20 into the fabric of Welsh Government, setting out the special protection and assistance to be given to children who cannot be looked after by their immediate family.

### **C) Criminalisation**

We recognise that policing and criminal justice are not devolved issues for Welsh Government, although regional Police and Crime Commissioners now possess considerable strategic powers. However, the Home Office and partners in Wales must do more to reduce the unnecessary criminalisation of care-experienced children and young people.

The Crime Survey for England and Wales estimates that 1 in 10 children aged 10 to 15 were victims of crime last year, with 48% of these offences (305,000 across England and Wales) being violent crimes.<sup>10</sup> A breakdown to Wales-only was not possible however.

A tiny fraction (4%) of children entering the care system in Wales were recorded as becoming looked after due to ‘socially unacceptable behaviour’, which can include offending.<sup>11</sup> However, many more (68%) enter the care system having been victims of abuse and neglect. It is unacceptable that these children go on to disproportionately be treated as criminals.

Research has found that children in care in England and Wales are 15 times more likely to be criminalised than other children.<sup>12</sup>

Looked after children in custody show greater levels of mental health need (as a group) compared to other incarcerated children, receive less emotional and practical support and have worse outcomes in areas such as responding to behaviour incentive schemes and resettlement planning.<sup>13</sup>

There is a further disproportionality relevant to young people with BAME backgrounds. The Youth Justice Board for England and Wales estimates that 44% of looked after children in custody are from an ethnic minority background, which is more than one and a half times the proportions in the general population and the looked after population.<sup>14</sup>

NYAS Cymru founded and chairs the All-Wales Missing the Point steering group, made up of charities, Police and Crime Commissioners and public sector organisations including the Youth Justice Board Cymru. We brought together our Missing the Point campaign steering group to explore the links between care-experienced children and young people with serious crime, missing episodes, and exploitation.

The steering group recently wrote to Welsh Government setting out the following two recommendations.<sup>15</sup>

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1. Independent return home interviews (debriefs) should be a statutory requirement and offered to every care-experienced child and young person when they return from being missing.
  2. Welsh Government should work with the Home Office, Welsh PCCs and other partners to develop a national framework for a child's rights approach to policing, accompanied by a protocol for reducing the unnecessary criminalisation of care-experienced children and young people.

Over 10,000 children and young people are reported to the police as missing in Wales every year - approximately one child every hour - and almost half (43%) of these missing incidents in Wales relate to children in the care system.

Statistics show that children and young people in care who go missing or runaway are disproportionately at risk of harm or danger, including sexual exploitation or grooming for criminal activity such as 'county lines' drug running. They are also at an increased risk of being arrested or imprisoned; or being caught up in serious violence.

Welsh Government should encourage and promote the development of joint working protocols between the police, children's services and other statutory and voluntary sector organisations in each local authority to reduce the known risks of exploitation that are associated with missing episodes and the unnecessary criminalisation of care-experienced children and young people. These protocols should draw on regulations and guidance under the Social Services and Wellbeing Act 2014 and be developed with the Welsh PCCs.

We also recommend reforming the outdated and unfair criminal records system presided over by the UK Government. Research has shown when comparing the international treatment of childhood criminal records in 16 jurisdictions (which included ten European countries, three American states, Canada, and Australian state and New Zealand), the system in England and Wales was found to be one of the most punitive, if not the most punitive.<sup>16</sup>

England and Wales hand out formal disposals which have serious criminal records consequences far more frequently than many other places. Most jurisdictions have separate systems for child and adult criminal records, but England and Wales treat them in substantially the same way.

Unlike most jurisdictions, Wales has no provision for deleting criminal records – they can only be 'spent', where they will not show up on a basic DBS, but will for any enhanced check or vetting. In Italy all non-custodial records are deleted at 18 years, in France most childhood records are deleted after 3 years, in Germany most records are deleted when the person turns 24, and Canada and Poland have automatic deletion after a specified period depending on the offence.

The UNCRC concluding observations in 2016 included for the UK Government to ensure "that diversion measures do not appear in children's criminal records." Unfortunately a lack of direction from the Home Office has resulted in a postcode lottery of access to diversion schemes, and inconsistency across police forces when applying criminal records as part of diversion scheme conditions.

England and Wales have a strong prevailing culture of criminal record checks when compared to other countries, and results often form the basis of hiring decisions.

## **D) Homelessness**

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Our recommendations here have been developed as part of the End Youth Homelessness Group for Care Experienced Young People, facilitated by Llamau and made up by representatives from the statutory and voluntary sector. This group is chaired by NYAS Cymru.

All care experienced young people should have a right to sustainable, appropriate accommodation, regardless of the risk they are perceived to present. Appropriate supported accommodation must be provided for young, care-experienced people in need of it. Tiered provision should be phased out. Greater choice of accommodation types and appropriate location should be made available to them with support for tenancy sustainment.

No care-experienced young person should need to present as homeless, as part of a planned move-on process (e.g. to access funds from a housing team with which to gain access to the private rented sector).

Training flats should be accessible to all care-experienced young people across Wales. N.B. a model needs to be considered to ensure that training flat availability is not reduced due to use for emergency placements.

L/As should pledge to strengthen corporate parenting responsibilities across all relevant departments. The pledge would focus on a renewed commitment to improving the outcomes for care-experienced young people and never accepting an outcome for them which would be unacceptable in any other parent-child relationship. As part of this, all corporate parents should offer care-experienced young people guarantees to help them to access the private rental sector.

No care-experienced young people should face eviction from supported housing. Alternative placements should be made available to reduce risk, where necessary. This should not result in 'cherry picking' the young people with low level needs.

Data collection needs to be much improved; a uniform national data-recording template should be mandated by Welsh Government to be completed for all care-experienced young people who present as homeless, to enable an improved understanding of the links between the two experiences and the support required. Recording numbers of presentations by priority need owed (i.e. "care leavers or persons at particular risk of sexual or financial exploitation, 18 years or over but under the age of 21") is too imprecise, and gives no real insight into how many care-experienced young people are made homeless in Wales, meaning that our abilities to respond appropriately are limited.

Legislation and guidance for care-experienced young people should be harmonised to ensure equal provision of support up to the age of 25. NYAS Cymru would urge the Welsh Government to ensure that care-experienced young people have 'priority need' to housing extended until the age of 25, as recognition that care leavers need a safety-net from their corporate parents when it comes to housing.

Peer mentoring should be made available to all young people in the period prior to and upon leaving the care system, for as long as they feel that it is beneficial.

Increasing unemployment is likely to continue during the COVID-19 recovery, which could result in young people getting into debt and struggling to pay their rent and bills. A crisis fund for care leavers along with employability schemes will be critical. NYAS Cymru recommends that all care leavers are given an opportunity to access jobs and training which is supported directly by the Local Authorities corporate parenting duties.

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NYAS and NYAS Cymru recently compared homelessness policies and legislation in both Wales and England for care-experienced children and young people, in our 'Across the Border' briefing.<sup>17</sup> While Wales appears to have a broader range of support available, Welsh Government does not give priority housing need to care-experienced young people over the age of 21.

### **E) Unaccompanied Asylum-Seeking Children**

At NYAS Cymru, we recently released a new report, *Place of Safety?*, which recommends new ways for Welsh Government to protect, support, empower and safeguard unaccompanied asylum-seeking children in Wales.<sup>18</sup> Too many children tell us they feel unsafe, scared and isolated without knowing what to expect. This needs to change to ensure all children experience a place of safety in Wales. Here are our four recommendations:

1. Protect children and young people's mental health and wellbeing. Unaccompanied asylum-seeking children are provided with clear summaries in their native language as to the mental health and wellbeing offer in Wales, including how to access that support.
2. Support children and young people through the Age Assessment process. Welsh Government should create clear guidance for Local Authorities and practitioners on the role of the Appropriate Adult in Age Assessments and ensure that every unaccompanied asylum-seeking child has the right to an independent Appropriate Adult who has been trained for their role.
3. Empower children and young people with independent advocacy. Every unaccompanied asylum-seeking child must have an active offer of independent advocacy so that their rights and entitlements are protected throughout their asylum journey.
4. Safeguard children and young people from trafficking and exploitation. Welsh Government should make statutory provision for every child in Wales to be offered an independent return interview after a missing episode, conducted by someone independent of the police and local authority. Every unaccompanied asylum-seeking child must be given information about trafficking and exploitation in their own language.

In terms of the UNCRC, all of these recommendations relate to Article 22 (refugee children) which states that if a child is seeking refuge or has refugee status, governments must provide them with appropriate protection and assistance to help them enjoy all the rights in the Convention.

Point 1 about protecting mental health relates especially to Article 39 (recovery from trauma and reintegration) which entitles children to receive special support to help them recover.

Point 4 about safeguarding from trafficking and exploitation also relates to Article 19 (protection from violence, abuse and neglect), Article 34 (sexual exploitation) and Article 35 (abduction, sale and trafficking).

#### **Endnotes**

1 <https://gweddiill.gov.wales/statistics-and-research/children-looked-after-local-authorities/?lang=en>

2 <https://vfcc.org.uk/wp-content/uploads/2019/04/ListenActThrive.pdf>

3 [https://careinspectorate.wales/sites/default/files/2019-06/190619-national-overview-report-en\\_2.pdf](https://careinspectorate.wales/sites/default/files/2019-06/190619-national-overview-report-en_2.pdf)

4 <http://www.pulsetoday.co.uk/clinical/clinical-specialties/mental-health/camhs-referral-waiting-times-in-wales-improved-by-13-in-a-month/20039758.article>

5 <https://vfcc.org.uk/wp-content/uploads/2019/04/ListenActThrive.pdf>

6 <https://senedd.wales/laid%20documents/cr-ld11522/cr-ld11522-e.pdf>

7 <https://www.nyas.net/wp-content/uploads/NYAS-looked-after-mind-report.pdf>

8 <https://jamanetwork.com/journals/jamapediatrics/fullarticle/2749336>

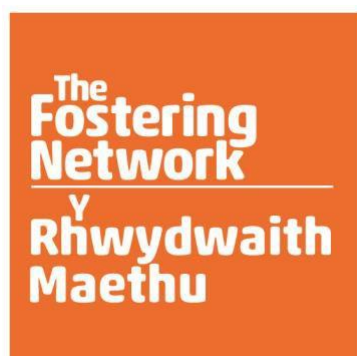
9 <https://www.legislation.gov.uk/asp/2014/8/contents/enacted>

10 <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/crimeinenglandandwales/yearendingjune2018>

11 <http://www.prisonreformtrust.org.uk/Portals/0/Documents/In%20care%20out%20of%20trouble%20summary.pdf>

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- 12 <https://www.unlock.org.uk/wp-content/uploads/Priorities-for-government-2020.pdf>  
13 [https://www.justiceinspectors.gov.uk/hmiprisoners/wp-content/uploads/sites/4/2015/12/HMIP\\_CP\\_-Children-in-custody-2014-15-FINAL-web-AW.pdf](https://www.justiceinspectors.gov.uk/hmiprisoners/wp-content/uploads/sites/4/2015/12/HMIP_CP_-Children-in-custody-2014-15-FINAL-web-AW.pdf)  
14 <http://www.prisonreformtrust.org.uk/Portals/0/Documents/In%20care%20out%20of%20trouble%20summary.pdf>  
15 <https://www.nyas.net/wp-content/uploads/Missing-the-Point-All-Wales-Steering-Group-submission-Welsh-Government-Post-COVID-Recovery-Jul.2020.pdf>  
16 <http://scyj.org.uk/wp-content/uploads/2016/04/ICRFINAL.pdf>  
17 <https://www.nyas.net/wp-content/uploads/Tackling-Youth-Homelessness-in-England-and-Wales.pdf>  
18 <https://www.nyas.net/place-of-safety-nyas-cymru-launches-campaign-on-rights-of-unaccompanied-asylum-seeking-children-in-wales/>

## RESPONSE 16 – THE FOSTERING NETWORK



### State of Children's Rights in Wales: Evidence from The Fostering Network, September 2020

#### About The Fostering Network

The Fostering Network is the UK's leading fostering charity. We have been leading the fostering agenda for more than 40 years, influencing and shaping policy and practice at every level. We are passionate about the difference foster care makes to children and young people, and transforming children's lives is at the heart of everything we do. As a membership organisation we bring together individuals and services involved in providing foster care across the UK. In Wales we have a strong membership base with over 5,400 foster carers, all 22 local authority fostering services and the majority of independent fostering agencies. Our views are informed by our members, as well as through research, in this way we aim to be the voice of foster care.

#### Introduction

We welcome the opportunity to share evidence with Children in Wales about the state of children's rights in Wales for the development of the report for the UN Committee to help inform their forthcoming review on the Welsh Government's progress in implementing the UN Convention on the Rights of the Child (UNCRC).

In Wales, there are 6,845 children in care<sup>1</sup> and 71 per cent of these children live with a foster family<sup>2</sup>. There are several aspects of fostering policy and practice across Wales that impact children's rights as defined by the UNCRC. The following subheadings will provide evidence on some of these key issues.

All figures, unless otherwise stated, are from our State of the Nation's Foster Care 2019 survey data and are specific to Wales. Not all of these figures were published in the State of the Nation's



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Foster Care: Full Report. Further evidence we have gathered through meetings with stakeholders, FosterLine Wales, foster care advisory forums and The Fostering Network's numerous programmes of work with children, young people and foster carers across Wales. If you wish to discuss any of the evidence further, The Fostering Network would welcome further discussion and collaborative working.

## **Evidence from The Fostering Network**

### **1. Enshrining the UNCRC in law**

At the beginning of this month, the Scottish Government announced that they are introducing a Bill to enshrine the UNCRC in Scots law<sup>3</sup>. If passed through parliament, children's rights will become more meaningful in society and legal action can be taken if their rights are not respected. We would recommend that the Welsh Government considers taking the same approach.

### **2. Hearing and listening to the child's voice**

The UNCRC states that every child has the right to express their views, feelings and wishes in all matters affecting them, and must have their views considered and taken seriously. We welcome that all looked after children in Wales have a right to advocacy and that there are checks built into the system to ensure children and young people are aware of this right.

There are other procedures within fostering where the child's voice is supposed to be considered and captured, for example in end of placement reviews. However, we know through meetings with our members that there is sometimes a lack of scrutiny on placement endings which means that the child does not have the opportunity to express their views about a decision that directly affects them, despite end of placement reviews being mandatory. In addition, some other areas where children's voices need to be more consistently encouraged, included and listened to are: about their placements (more detail on this topic provided below), within their reviews, about their relationships with social care staff and about the services they receive.

### **3. Foster care allowances**

In our 2019 State of the Nation survey 61 per cent of foster carer respondents in Wales felt that the foster care allowance and expenses they can claim do not cover the true cost of looking after a child. In the comments provided by foster carers (from the whole of the UK) about why allowances and expenses were not meeting the costs of looking after children, the four most commonly cited were: travel costs, holidays, the rising cost of living, and extra-curricular activities for children.

It is essential that allowances are sufficient enough to provide high quality care for children. Children in foster care should enjoy a decent standard of living sufficient to promote their wellbeing and development, be treated as favourably as other members of the fostering household, be able to participate fully in their community, and maintain appropriate contact with their family. We would like to see a review of the level of the national minimum fostering allowance at each age band to ensure it covers the full cost of caring for a child or young person.

### **4. Maintaining relationships**

Relationships are the 'golden thread' running through a child's life. It is important that as well as mother and father relationships, that effort is made to maintain sibling and all other sibling-like relationships for the child, if it is in their best interest. Additionally, for many children, their foster

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carers become some of the most significant adults in their lives. It can be destabilising for them to move on and leave their foster carers, particularly if they cannot keep in touch. This is why The Fostering Network launched the Keep Connected campaign calling on the Welsh Government, alongside other governments of the UK, to support fostered children to maintain their most important relationships.

Our work on this national campaign thus far has involved numerous surveys and reports, as well as the development of the Keep Connected Principles. One of these surveys was of young people in care and care leavers and found that 55 per cent were not supported to keep in touch with their foster carers, despite 81 per cent saying it was important<sup>4</sup>. Another survey found that fewer than half of foster carers (45 per cent) said they always or usually keep in touch and more than one in four foster carers (28 per cent) had been prevented from keeping in contact with a child they have fostered<sup>5</sup>.

Fostering services should have a duty to promote, on a regular basis, personal relations and direct contact between the child and any one that the child has a personal and ongoing relationship with.

## **5. Placement decisions**

Placement decisions should not be resource led and maintaining stability in the placement should be paramount. All children have the right to family life and all placement decisions should have the needs of the child at the heart, not budgets.

All children should have the right to appropriate alternative care should they need it. They therefore must be appropriately informed about all the placement options available in order to make an informed decision about what would be best for them, and their views, wishes and feelings need to be considered. In addition, appropriate planning should be carried out such that the child has access to the full range of placement options, for example, the introduction of the When I am Ready scheme to ensure procedures have been put in place in time for the child's 18th birthday.

When I am Ready has the potential to transform the lives of hundreds of care experienced young people every year, providing them with extra time in a stable home. Our State of the Nation survey found that only 16 per cent (36 foster carers) of respondents had taken on a When I am Ready placement. While there are other contributing factors as to why uptake of the scheme is low, in some cases, the placement has not been able to go ahead because of local policies or lack of planning which mitigated against a seamless transition from child to adult services.

## **6. Access to appropriate services: mental health**

In our State of the Nation survey we asked foster carers in Wales if they cared for any children or young people who they felt should have access to mental health support, but who were not accessing this service: 38 per cent said yes. Further evidence on this topic and more detailed recommendations can be found in our response to the Welsh Government's inquiry into the emotional and mental health of children and young people in Wales.

## **7. Education**

Children in foster care have the same aspirations as other children, however it is well documented that looked after children and young people can face particular challenges in relation to education and some researchers believe this is linked to the trauma they may have faced and the number of placement moves and education disruptions they may have experienced.

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We have conducted numerous education programmes and research on looked after children's education throughout Wales and by doing so, have gained a unique insight into the issues prevalent.

## **8. Delegated authority**

Delegated authority is the process that enables foster carers to make common sense, everyday decisions about the children and young people they care for, such as allowing them to go to friends' houses for sleepovers, signing consent forms for school trips and even arranging haircuts.

Holders of parental responsibility can delegate authority to foster carers to undertake such tasks and decisions. Foster carers never have parental responsibility for a fostered child, so they can only make decisions about the fostered child where that authority has been delegated to them by the local authority and/or birth parents.

Clarifying who is best placed to make everyday decisions depends on many factors: the young person's age, views, legal status and care plan, the parents' views and the experience and views of the foster carers. Collaboration and consultation are essential for successful working partnerships and ensuring children and young people have the ability to access a range of educational and social opportunities without delay.

In our State of the Nation survey, we asked foster carers in Wales about the decisions that they have the delegated authority to make on behalf of the child and found that:

- 29 per cent of foster carers were not clear what day-to-day decisions they have the authority to make in relation to their fostered children.
- Only 12 per cent of foster carers who had children in short-term placements and 30 per cent of foster carers who had children in long-term placements felt that they were always able to make day-to-day decisions for their fostered children.
- When asked about the decisions foster carers did not have the authority to make, 45 per cent felt that social workers always/usually responded in a timely manner and 55 per cent sometimes/rarely/never replied in a timely manner.

The impact of this bureaucratic process of decision making for children in foster care is ultimately felt by the child, as it can hinder their ability to participate in normal family, school or social activities.

## **9. Digital access**

The coronavirus pandemic highlighted the importance of digital access for all children to maintain relationships and continue education at home. Having access to a digital device, such as a laptop or tablet, and a good internet connection can open up a wealth of opportunities and information for children and young people that can improve their educational outcomes. In addition, particularly for those children in foster care, having digital access was essential to maintain important relationships with birth family and wider networks.

## **Conclusion**

We hope this evidence is useful in the writing of Children in Wales' report to the UN Committee. At the beginning of next year we will be launching the next State of the Nation's Foster Care survey,

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collecting the views and experiences of foster carers and, for the first time, fostering services across the UK. If there are any issues you wish to discuss further please do get in touch.

## **Recommendations for Welsh Government**

- To consider enshrining the UNCRC in Welsh law.
- To ensure that all planned placement endings in Wales are preceded by an end of placement review where children's voices are included and considered.
- To ensure that children have the opportunity to make their voice heard in all decisions made that affect their lives.
- To re-evaluate the national minimum foster care allowances in Wales, at each age band, such that they reflect the true cost of catering for the needs and development of a child.
- Local authorities and fostering services should have a duty to promote, on a regular basis, personal relations and direct contact between a child in foster care and any one that the child has a personal and ongoing relationship with, if it is in their best interest, this may include siblings or former foster carers. The Keep Connected Principles should be included in national guidance.
- Local authorities need to ensure that all the information about placement options are made clear to the child such that they can make informed decisions about where they would like to live, and their wishes, views and feelings about potential placement choices need to be considered.
- Children in foster care should have access to a mental health assessment and have their assessed needs met.
- Every child has the right to an education and looked after children need to be supported to engage and achieve in their education, recognising that their needs may be different to their peers'.
- Mechanisms should be in place to ensure foster carers are enabled to make everyday decisions that mean that their fostered child is not treated differently from their peers and feels part of their family. It should be made clear to foster carers at the outset what decisions they can and cannot make, and social workers should deal swiftly with any requests for decisions that are outside of the foster carer's authority.
- Looked after children should be provided with the appropriate equipment, including laptops and internet access, if necessary, in order to uphold their rights to an education and to maintain relationships with birth family.

1 Stats Wales Children looked after at 31 March by local authority, gender and age 30 October 2019

2 Stats Wales Children looked after in foster placements at 31 March by local authority and placement type 30 October 2019

3 Scottish Government Human rights: Children's rights 1 September 2020

4 Swain V Keep Connected: Maintaining relationships when moving on (The Fostering Network, January 2016) 5 Roberts I Not forgotten: The importance of keeping in touch with former foster carers (The Fostering Network, November 2019)

### **Contact details:**

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Author: Daisy Elliott September 2020

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## RESPONSE 17 - NATURAL RESOURCES WALES



### Call for Evidence:

### State of Children's Rights in Wales

## 1. Background and Context

1.1 This document provides Natural Resources Wales' (NRW) priorities in relation to the sustainable management of natural resources and children's rights in Wales.

1.2 Natural Resources Wales' purpose is to pursue sustainable management of natural resources (SMNR) in all of its work. This means looking after air, land, water, wildlife, plants and soil to improve Wales' well-being, and provide a better future for everyone.

1.3 The three identified priorities all support the mitigation of the Climate and Nature Emergencies declared by Senedd Cymru and NRW and the support the role our children and young people will play in the future management of our natural environment whilst ensuring they realise the multiple benefits our wonderful land and seascape can provide now and in the future.

1.4 The priorities support activity across all of the thematic areas but the main focus lies within:

#### Education, Leisure & Cultural Activities

- Education
- Play and Leisure
- Cultural activities

#### Disability, Basic health and Welfare

- Disabled children
- Health inequalities
- Mental health
- Environmental health
- Child poverty

#### Family Environment and Alternative Care

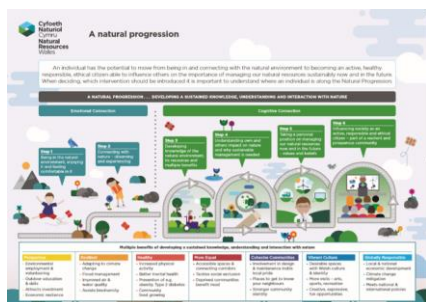
- Childcare
- Care experienced children
- Children of prisoners
- Young Carers

## 2. Priority one – Developing Connections to Nature to realise the multiple benefits it can provide

2.1 **Although** many children and young people in Wales already enjoy, appreciate and understand the natural world, there are considerable challenges to consistently and effectively connect all our younger citizens to the natural environment.

2.2 Everyone should be encouraged in the responsible use and enjoyment of the outdoors, have opportunities for **play** and **physical activity** in nature and be able to **“learn in, about and for”** the natural environment, maximising the multiple benefits for attainment, physical health and mental well-being that Wales’ natural environment provides.

2.3 Connection to nature is the extent to which individuals include nature as part of their identity and is made up of three components:



- The emotional component is established once an individual is comfortable and enjoys being in nature beginning to observe and experience aspects firsthand.
- The cognitive component is the core of nature connectedness and sees us develop an understanding of the natural world and its multiple benefits, start to understand our own impact and take a personal position on managing our natural resources now and in the future.
- The behavioural component is the realisation of the previous steps leading to meaningful behaviour change and an individual's commitment to protect the natural environment and influence others to do so. - see NRW's [natural progression steps](#) for more information.

2.4 Ideally, pro-environmental behaviours are laid down in early life, however, these natural progression steps can apply no matter what age a person may be, as progression is experience dependant. A strong connection to nature should be an integral part of everyone's life and begin in early childhood.

### 3. Priority two – Access to Safe Natural Environments for Learning and Play

3.1 Natural Resources Wales is a Children's Rights organisation and recognises that children and young people have a right to live, learn and play in a healthy environment.

Specific UNCRC articles that NRW sees as priorities include:

- Article 6 - Right to life, to grow up and reach your full potential
- Article 12 - Right to be listened to and taken seriously
- Article 13 - Right to freedom of expression
- Article 17 - Right to information
- Article 19 - Right to be kept safe from harm
- Article 24 - Right to clean air and water
- Article 28 - Right to learn
- Article 29 - Right to be the best you can be

3.2 Short, medium and long term effects from Covid–19 on children’s ability to play and learn outside in nature shows significant impacts on learning, physical activity and mental well-being with more than 28,500 young people in the UK not having benefitted from outdoor learning experiences since the COVID-19 pandemic.

3.3 The outdoor environment presents a far lower risk for virus transmission therefore, as restrictions are lifted, and children return to school, outdoor play and learning is being advocated as a tool for schools to adopt widely with the wider recognition that outdoor space is part of the classroom.

3.4 There is a need to support schools and other learning groups in a consistent and effective way, to redefine what green space is, promote green infrastructure in and around a setting’s grounds and provide opportunities for outdoor learning and play that supports health, wellbeing and academic attainment whilst promoting the development of a life-long appreciation and understanding of the natural environment and its sustainable management.

## 4. Priority three – High Quality Outdoor Learning Pedagogy

4.1 NRW recommends that Senedd Cymru establishes an environmental champion role held by a member of teaching staff in every education setting in Wales regardless of age and ability provision. This role would function in the same way as any department lead and would support and coordinate outdoor learning and play. At school level a recognised role within a setting will support delivery across all 6 AoLE’s and significantly contribute to converting knowledge into positive behaviours. This role would hold a recognised level 3 qualification and support all aspects of learning in, about and for the natural environment, school grounds development and SMNR education. They would be at the cutting edge of understanding knowledge and have the tools to translate that for their individual settings via bespoke curriculums.

4.2 Accredited training is already available to facilitate this role and would elevate professional learning and skills. The qualifications are available on the CQFW Framework, are Wales focused and administered by Agored Cymru. This function would support the sustainable management of natural resources and help to address the Climate and Nature Emergencies.

4.3 NRW recommends that Initial Teacher Education and associated courses such as Child Care Studies, incorporate deep level learning on the importance of nature connection and its multiple benefits that encompass holistic child development and health. An understanding of outdoor learning pedagogy supports the 4 purposes of the Curriculum for Wales and helps to address the Climate and Nature Emergency.

## 5. Relevant Research and Information

This list is not exhaustive but represents a small selection of evidence and research to support the three priorities identified.

Childhood nature connection and constructive hope	British Ecological Society	<a href="#">Link</a>
Connection to Nature Evidence Briefing	Natural England	<a href="#">Link</a>

Links between natural environments and physical activity: evidence briefing	Natural England	<a href="#">Link</a>
High Quality Outdoor Learning in Wales	Wales Council for Outdoor Learning	<a href="#">Link</a>
Links between natural environments and physiological health:	Natural England	<a href="#">Link</a>
Links between natural environments and obesity: evidence briefing	Natural England	<a href="#">Link</a>
Monitor of Engagement with the Natural Environment	Natural England	<a href="#">Link</a>
Revaluing Parks and Green Spaces	Fields in Trust	<a href="#">Link</a>
Physical activity at Forest School	Forestry Commission Scotland	<a href="#">Link</a>
Natural Childhood	National Trust	<a href="#">Link</a>
Benefits of walking on sand	Discover Walking	<a href="#">Link</a>
Early life determinants of physical activity in 11 to 12-year olds	BMJ	<a href="#">Link</a>
Measuring Connection to Nature in children aged 8 to 12	RSPB	<a href="#">Link</a>
How to get vitamin D from sunlight	NHS	<a href="#">Link</a>
A Potential Natural Treatment for Attention-Deficit/Hyperactivity Disorder	NCBI	<a href="#">Link</a>
Nature, Childhood, Health and Life Pathways	University of Essex	<a href="#">Link</a>
Every Child Outdoors	RSPB	<a href="#">Link</a>
Education Outside the Classroom	House of Commons Education and Skills Committee	<a href="#">Link</a>
BMI Survey	Public Health Wales	<a href="#">Link</a>
Developing an indicator for the physical health benefits of recreation in woodlands	Moseley et al Ecosystem Services	<a href="#">Link</a>



Article 31. the right for all children to have rest and leisure, to engage in play and recreational activities and to participate in cultural life and the arts	Children's Commissioner for Wales	<a href="#">Link</a>
Physical Activity of Children and Young People	National Assembly for Wales	<a href="#">Link</a>
Improving Access to Greenspaces	Public Health England	<a href="#">Link</a>
Common Cause for Nature	Produced in collaboration with thirteen UK conservation organisations	<a href="#">Link</a>
Outdoor learning during the COVID-19 pandemic	www.gov.scot	<a href="#">Link</a>
Outdoor Learning Covid-19 Impact Survey for Organisations and Outdoor Professionals Sector Report	Various	<a href="#">Link</a>
An assessment of the effects on health and wellbeing of COVID-19 and control measures, with a specific focus on natural resources and the services they provide for people in Wales	Natural Resources Wales	Draft

## 6. For further information please contact:

Natural Resources Wales

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## RESPONSE 18 - UNICEF UK – YOUTH JUSTICE

### Call for Evidence – State of Children's Rights in Wales

1. Submission by **Aaron Brown, Youth Justice Specialist at Unicef UK.**
2. Special Protection Measures (arts. 22, 30, 32, 33, 35, 36, 37 (b)-(d) and 38-40)
3. Administration of Juvenile Justice

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#### 4. The Minimum Age of Criminal Responsibility<sup>xi</sup>

The task of setting the Minimum Age of Criminal Responsibility (MACR) in Wales currently sits with the UK Government located in Westminster. As such, the Welsh Government has no autonomous legislative capability to modify MACR in Wales. Presently, the MACR in Wales (and in England and Northern Ireland<sup>xi</sup>) is ten years old, meaning that a child who is ten years of age or above can be arrested for perpetrating a criminal offence and can be sent to court and can potentially end up in youth detention. Wales' MACR of ten years of age sits four years beneath the recommended MACR outlined in the most recent General Comment No.24 on 'Children's Rights in the Child Justice System', which calls on States parties to: "*increase their minimum age accordingly, to at least 14 years of age.*"<sup>xi</sup> The UK Government has regularly been admonished (see for example, UNCRC, 2002, 2008, 2016) for its position on MACR – condemnation that has also extended to Wales as a consequence of the current devolved arrangement in respect of MACR. Domestically, concerns over MACR have been consistently echoed by the Wales UNCRC Monitoring Group as part of their role scrutinising and promoting the UNCRC in Wales.<sup>xi</sup>

5. In respect of policy, the current MACR of ten years old in Wales sits uneasily when set beside Wales' and the Welsh Government's wider post-devolution aspiration to recognise and promote the rights and entitlements of 'all' its children. A commitment that over the last two decades has been demonstrated via the construction of a number of distinctive 'child-orientated' policy documents and pieces of legislation, including: Extending Entitlement (National Assembly Policy Unit, 2000); Children and Young People: Rights to Action (Welsh Assembly Government, 2004) and the Rights of Children and Young Persons (Wales) Measure 2011 (Welsh Government, 2011). In respect of specifically youth justice policy, the All Wales Youth Offending Strategy (Welsh Assembly Government and Youth Justice Board, 2004); Children and Young People First (Welsh Government and Youth Justice Board, 2014), and most recently, the Youth Justice Blueprint for Wales (Welsh Government and Ministry of Justice, 2019) have all been influential and underlined the importance of a rights-based, children-first philosophy towards children who are in conflict with the law. It is equally the case that the current MACR in Wales also sits uneasily alongside the expanding body of maturation and developmental evidence which exists and which supports progressive reform of MACR (see for example, Arthur, 2012, Delmage, 2013, McDiarmid, 2013), whilst, it is also apparent that Wales' MACR of ten years old is noticeably 'out-of-step' with MACR in the rest of Europe (see **Table 1**).

Member state	Age (MACR)	Member state	Age (MACR)
Austria	14	Italy	14
Belgium	12	Latvia	14
Bulgaria	14	Lithuania	16
Croatia	14	Luxembourg	16
Rep of Cyprus	14	Malta	14
Czech Rep	15	Netherlands	12
Denmark	15	Poland	15
Estonia	14	Portugal	16
Finland	15	Romania	14
France	13	Slovakia	14
Germany	14	Slovenia	14
Greece	14	Spain	14
Hungary	14	Sweden	15
Ireland	12	United Kingdom	10 (England, Wales and Northern Ireland)

**Table 1:** Minimum Age of Criminal Responsibility (MACR) in Other Parts of Europe<sup>xi</sup>

6. Notably, despite restrictions on Wales' ability to autonomously pass legislation in regard to MACR, fresh political developments have placed MACR back at the forefront of the political agenda and discussion in Wales. The then Welsh First Minister, Carwyn Jones, in 2017, initiated a 'Commission on Justice in Wales'. The scope of the Commission involved exploring criminal justice and policing; civil, commercial, family and administrative justice; legal, education and training; the legal professions and economy; and the legal jurisdiction. The Commission's findings were published in 2019 in the report 'Justice in Wales for the People of Wales' and central amongst its recommendations were that: *"The age of criminal responsibility should be raised to at least 12 years old in Wales."*<sup>xi</sup> If youth justice policy were devolved to Wales, as recommended by the Commission on Justice in Wales and also the Silk Commission, there may be the potential for Wales to progressively amend its MACR on its own terms (see Brown and Charles, 2019 for more detail). It is worth noting, however, that the Ministry of Justice in response to the Commission on Justice in Wales recommendations has asserted that the present MACR arrangement works and will not be altered.
7. The above analysis concerning Wales current MACR evidences the fact that from an international children's rights standpoint, ten years of age is inadequate (see General Comment No.24; see also, UNCRC 2002, 2008, 2016). Ultimately however, as described, for the Welsh Government to be able to initiate any tangible progressive MACR reform in Wales further devolution of powers in respect of youth justice (and associated legal structures) will be required. Until that point in time, the UK Government will continue to hold the determination over MACR reform. Given this fact, the Welsh Government should in the meantime take action to influence the UK Government to consider raising MACR for England and Wales at every possible opportunity.

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## 8. Recommendation

A current Wales MACR of ten years of age lacks compatibility with current international children's rights standards. The Welsh Government should take action to persuade the UK Government at every opportunity to raise the MACR in Wales to 'at least 14 years of age' in accordance with General Comment No.24.

## 9. Mental Health Services

In its 2016 Concluding Observations, the UN Committee on the Rights of the Child expressed concern that: "*Access to education and health services, including mental health services, is insufficient for children in custody.*"<sup>xi</sup> The most recent HMIP unannounced inspection of HMYOI Parc (Bridgend) took place in November 2019 and identified: "*that child and adolescent mental health services were not delivering treatment and interventions in line with national standards.*"<sup>xi</sup> In light of the Committee's concerns, this is an area that needs to be addressed at the earliest possible opportunity.

## 10. Recommendation

Given the Committee's concerns in this area, action should be taken at the earliest possible opportunity to ensure that children situated in youth detention at HMYOI Parc in Wales can always access appropriate mental health services/provision.

## 11. Violence against children (arts. 19, 24 (3), 28 (2), 34, 37 (a) and 39)

## 12. Torture and other cruel or degrading treatment or punishment

## 13. Taser

In its 2016 Concluding Observations, the UN Committee on the Rights of the Child expressed concern around the use of Tasers on children and called for their use to be prohibited. Despite this clear recommendation, there is evidence that police forces in England and Wales are increasingly equipping their police officers with Taser capability. For example, as recently as March 2020, it was announced by the Home Office that police forces in England and Wales would receive £6.7 million pounds to purchase 8,155 devices.<sup>xi</sup> Significantly, a number of police forces in Wales submitted bids and were allocated the full funding they requested: Dyfed Powys received £99,000 in funding to purchase 120 Taser; South Wales received £273,075 to purchase 331 Taser; North Wales received

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£137,775 to purchase 167 Taser and Gwent received £66,000 to purchase 80 Taser. The available evidence suggests that greater numbers of police officers in Wales will potentially have the capability to use Taser moving forward, and it remains the case despite the Committee's call for their use to be prohibited, that currently there is nothing to stop their being used on children (as evidenced by the latest statistics around 'police use of force').<sup>xi</sup>

#### 14. Recommendation

Given the Committee's concerns in this area, the Welsh Government should take action to call on the UK Government to prohibit the use of Taser on children under 18 years old in Wales.<sup>xi</sup>

Additionally, the impact on children's rights presented by increasing numbers of police officers in Wales being equipped with a Taser should also be reviewed.

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## Tables

**Table 1:** Minimum Age of Criminal Responsibility (MACR) in Other Parts of Europe

## **RESPONSE 19 - CLYBIAU PLANT CYMRU KIDS CLUBS**



**September 2020**

Please find below comments for the State of Children's Rights in Wales report, from our team at **Clybiau Plant Cymru Kids' Clubs**.

As an organisation we are committed to advocating for Children's Rights and encourage the Play and Childcare Sector to implement, support and campaign for Children's Rights. Thank you for the opportunity to contribute to the report.

We have concentrated on the 4 key priorities to identify and determine areas for change.

**1) What are the main issues that the Welsh Government and public bodies should be prioritising and why?** (Please provide as much information as you can to justify your reasons)

### **Children's Right to Play (article 31)**

Covid-19, whilst providing some children with more positive family centred play experiences, has undoubtedly had a negative impact on children's right to play, with playground closures, limited outdoor time (particularly during early lockdown), closure of indoor play opportunities, schools, Childcare and Play Settings and limited ability for 'play dates' and socialising. Whilst schools have reopened, some are coping with staggered start and end times by altering the length of lunch breaks/play times, and with limited opportunities to play outside within year group 'bubbles'. Cross

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age group play has many benefits for children and is something that they will be missing out on for the foreseeable future.

Children have missed out on social and play interactions throughout lockdown, through not being able to attend school and other social activities such as sport, clubs and generally being able to spend time with friends.

We need to focus on making Article 31 and play a priority; and an onus should be put on supporting families and professionals to fully understand the importance of children having the fundamental need and right to rest and leisure, and to engage in play and recreational activities of their choosing. And more importantly this should also include time away from screens, time spent engaging face to face with their friends and peers and being outside, taking risks, expending energy and enjoying time to relax and play.

### **Children's Right to have their mental health supported (Article 24)**

Mental health, which was already impacting on the wellbeing of many children and young people, has taken a further hit due to Covid-19, with insufficient services to cope with this and with many issues being missed due to schools and other services closing.

A considerable amount of funding has been invested to help improve child and adolescent mental health services (CAMHS) and to support the whole-school approach to improve mental health and wellbeing in schools for children and young people. However, there is still a long way to go to ensure that there are sufficient services made available to all children, with many children that are referred to CAMHS currently finding themselves on a very long waiting list. More work could also be done to help parents support their children during this waiting time.

Secondary schools tend to have a pastoral care unit within the schools but due to cut backs, the pastoral teachers are often used elsewhere within the school and are not always available within the unit for children that may need them.

### **The Right to be Safe – (article 19)**

Covid and lockdown has impacted on the ability of professionals to support the safety of some children. Domestic violence was a key concern of the Policy service throughout lockdown, and for some children the lockdown will have negatively impacted their right to be safe. Typical sources of support for families providing safe environments, such as schools, Childcare and other community services, were all very suddenly removed.

### **Children's Right to an Education (article 28)**

Children have missed out on a significant portion of the school year during 2020 and whilst some will have had the opportunity to learn through play during this time, or been supported with some school related work at home, others will not. The 'lower class/poverty' impact on educational attainment frequently outlined by statistics is likely to be exacerbated, and further lockdowns (whether local or national) may compound this. The full effect on children, particularly those at critical stages of education (e.g. approaching exam years) may not be seen for some time –concerns about impact on educational attainment may also be adding to the mental health issues noted above.

**The Right to Good Health (physical/nutritional) (Article 24)** - food prices are rising, and some households have spent the majority of 2020 on a reduced income. Unemployment is increasing and the full economic impact of Covid is as yet unknown, with these factors impacting on the affordability of healthy food for many families.

**2) What information or evidence do you have to support this?** (Please provide as much information as you can, such as links to reports, case examples, statistics etc.)

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Maslow's hierarchy of needs(5) demonstrates clearly the areas of need which have not been possible to meet throughout the Covid 19 pandemic. Some children may only be experiencing the very basic of physiological needs currently. Whilst psychological needs may be being met through immediate family and online interaction, this cannot make up for not being able to see, touch, or even be close to extended family/other loved ones at this time. It is difficult then to expect that communities and children are able to achieve self-actualization, or one's full potential during time of crisis and limited interaction. Childhood is a critical developmental period and concerted effort will be required to reverse the detrimental effects imposed on children during this time.

Older children, who were already heavily reliant on online platforms for social interaction, have become even more dependent on them with no school, no sports clubs/other hobbies, no wider family relationships and limited parental interaction as parents continue to work. Helping children become social beings in the physical sense rather than through technology will become more challenging.

The Access to Play for Children in crisis(7) report considers the effects of crisis' such as pandemic on children's play.

*'The Committee on the Rights of the Child has expressed a deep concern, that in situations of conflict or disaster children's right to play is often given lower priority than the provision of food, shelter and medicines. This is despite the fact that play is known to be crucial to children's wellbeing, development, health and survival in these circumstances.'*

The report reiterates that...

- Play is a fundamental part of childhood
- Children's play is essential for healthy development and wellbeing
- In situations of conflict or disaster, opportunities for play have a significant therapeutic and rehabilitative role in helping children recover a sense of normality and joy after their experience of loss, dislocation and trauma
- Children's play spaces are important environments that should be protected and cared for
- We need to understand that children's idea of a desirable place to play may differ from that of an adult
- Adults should listen to what children say about playing and genuinely value their contributions
- We should protect children's time to play freely
- Agencies can support children by recognising the value playing brings to children's life experience and sharing that knowledge with others'

**A report by the Joseph Rowntree Foundation in 2009** considered child poverty figures in Wales; the last available published data shows us that approximately 32% of children in Wales – 192,000 children – live in poverty. The Welsh Government (WG) has supported the UK Government's target to eradicate child poverty by 2020, and is preparing a new child poverty strategy.

The evidence suggests that to meet the specific target of eradicating income poverty, the Welsh Government should:

- increase help for parents to find employment, in partnership with DWP, through enhanced welfare-to-work programmes, seeking additional powers to do so where necessary;
- dramatically improve Childcare provision, including before and after school care and holiday care, and enhance support for carers who want to work;
- promote flexible and good quality employment, including family friendly working and decent pay and conditions, in public and private sectors;
- encourage public and voluntary sector employers to participate in Local Employment Partnerships;



- considerably improve the skills and qualifications of adults, taking account of specific needs of parents; and - review benefits, grants and allowances administered by the Welsh Assembly Government and Local Authorities and promote benefit take-up

**Care Inspectorate Wales registered Childcare and Play Services across Wales address many Rights of Children:** the right to play (with qualified Playworkers supporting their development), the right to be safe, the right to good health and the right to have their mental health supported. Childcare is not only beneficial for children themselves, but is also essential for the economy and economic recovery post Covid-19 will not be possible without it. However, we are currently faced with a Childcare Sector that is on its knees. Childcare is not a profitable venture for many, and most voluntary committees, Managers and Playworkers are spurred on to continue through a passion for supporting children and their local community.

However, as the Voice for Out of School Childcare Clubs pan Wales, we are aware of the many challenges currently facing the Sector in terms of sustainability and staff retention. 65% of Out of School Childcare Clubs have reported to us that they have significant sustainability concerns – Clybiau Plant Cymru Kids' Clubs Survey, April 2020. The Childcare Provider Grant is a welcome source of funding for those who are eligible, but there are still a number of Providers slipping through the net, and those who are eligible for the funding are still facing reduced income from fees while the economy gradually recovers.

Children have the right to be cared for by qualified Playworkers and Childcare Practitioners who understand their needs and rights, and who are equipped to safeguard them and support their development. Any loss of Care Inspectorate Wales registered Childcare Places in Wales is a blow to this Right – priority needs to be given to support these Providers over unregulated, unregistered alternatives who cannot offer the same protection of children's rights.

Statistics, further information -

1. <https://gov.wales/sites/default/files/statistics-and-research/2019-10/youth-work-april-2018-march-2019-289.pdf>
2. <https://www.sport.wales/beactivewalesfund/>
3. <https://gov.wales/apply-childcare-providers-grant-coronavirus>
4. <https://gov.wales/protective-measures-childcare-settings-keep-childcare-safe.html>
5. <http://www.phdinparenting.com/blog/2010/1/14/childs-hierarchy-of-needs.html>
6. <https://www.playwales.org.uk/eng/news/1398-childrens-rights-in-wales-have-never-been-more-important>
7. <http://ipaworld.org/wp-content/uploads/2017/07/IPA-A4-ACCESS-TO-PLAY-IN-SITUATIONS-OF-CRISIS-TOOLKIT-LR.pdf>
8. <https://jamanetwork.com/journals/jamainternalmedicine/article-abstract/2764404>

### 3) What policy or changes in law need to happen and why? Any gaps?

When looking at Children's Rights, particularly the right to play, sufficiency should not just be about focusing on the spaces available to play and the opportunities available in communities (for all ages), but also looking at community members views on children's play (and views of children themselves, particularly teenagers). Considerations should be made as to how to support communities to be more involved in making spaces 'safe' to play. There needs to be partnership agency working between all organisations involved in planning, housing, parks and facilities, in order to ensure that we are effectively engaging children and young people as important and vital members of the community.

All children need to have the opportunity to access play provision such as that offered by registered Childcare Providers, not just children with working parents. As noted in Q1, the impact of lockdown has been of particular concern for vulnerable children, who, like other children, have not been able to access school or play provisions or services. Children have the right to have their mental and physical wellbeing made a priority and this is of even greater significance to mitigate the impact of Covid-19 and lockdown.

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Utilising WG funding made available to support vulnerable children, Newport Local Authority and Clybiau Plant Cymru Kids' Clubs worked in partnership during Summer 2020 to fund places within existing Care Inspectorate Wales registered Childcare Providers for vulnerable children referred by Social Workers. The scheme was an excellent example of how the Out of School Childcare Sector, with qualified Playworkers, can be utilised to support positive outcomes for vulnerable children... *"The girls fed back to me that they absolutely loved attending the Childcare Setting, they have talked about the new friends they have made and all the things that they do there (outdoor play, toasting marshmallows and all sorts). I have seen an improvement in self-confidence, and both parents have acknowledged how it has helped the girls develop interest in other things again, they are now wanting to do arts and crafts, go out for picnics etc. So overall improvement in their general wellbeing, back to the happy and enthusiastic children that they once were."* - Newport Social Worker)

#### **4) What recommendations do you wish to make to ensure positive change for children?**

1. Processes/plans put in place to avoid the need for future park/playground closures.
2. Improvements to pastoral care within Primary Schools.
3. Recommend that play is a priority – play is just as important as education (if not more so) to support children's mental health and recovery following Covid-19
4. Ensure that children remain involved and engaged in decisions that affect them – the best way to support change and to be positive is to address the needs they report themselves. Children's views should be heard and considered in all processes.
5. Ensuring that play spaces are provided for all, from babies, toddlers, school age, young people and those with additional needs; all need to feel that they belong to their community and have a space and a voice. We need to address the lack of space for children and young people to meet with their friends and play freely in their own neighbourhoods. Welsh Government should establish and endorse initiatives where community spaces and unused community buildings are reclaimed for children and young people's play and leisure. Local Authority and community buildings could be reclaimed and utilised to create safe spaces where children of all ages can meet with their friends. Many vacant buildings are just left empty to rot, when our committed community members and children could be working together to 'do up' old buildings and reclaim spare ground to make their own, giving them a focus and ownership of their space and community.
6. Promoting play, leisure, relaxation of children and young people in a positive way and educating adults in the community as to the benefits of play and the importance of positive communication and engagement. We, as a Nation and as adults need to treat and respect children and young people as individual human beings and not only as human becoming's! By providing children with a sense of belonging and ensuring that we are respecting, valuing and protecting the time that children and young people get to be young and youthful.
7. Welsh Government should put a 'quality' measure on Local Authorities to ensure that they provide quality play opportunities for children of all ages, possibly as part of the Play Sufficiency Assessment.
8. Holistic viewpoints in relation to funded schemes to ensure that Children's Rights are protected and supported, without being a detriment to other priorities impacting on Children's Rights. For example, priorities linked to schemes such as School Holiday Enrichment Program and Holiday Hunger, and the need for quality, sufficient, registered Childcare across Wales to support the poverty and health and wellbeing agendas.

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## RESPONSE 20 - RICHARD HAIN

Thanks for asking for my views on Children's Rights in Wales. I am all-Wales lead for paediatric palliative care and also a clinical ethicist. There are two points I would like to make:

1. I don't think the distinctive needs of children are adequately recognised in healthcare in Wales at the moment. Paediatric subspecialties are still all too often bracketed with their adult counterparts, meaning that important decisions that will affect the care of children are taken by people whose experience is largely or entirely with adults. Each subspecialty that exists in children as well as in adults needs to be represented by both an adult and a paediatric lead; one person cannot do both.
2. I think the language of rights is very important in effecting that sort of change because it unambiguously expresses the conclusions of complex moral arguments. The idea of rights itself is ethically unclear, but there is no doubt about its importance in changing behaviour in practice. Here, children are not being treated fairly because decisions are being made about them by people who lack the necessary knowledge and experience.

Best wishes,

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## RESPONSE 21 - TARIAN REGIONAL ORGANISED CRIME UNIT (ROCU)

### Call for Evidence

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#### Indirect Victims of Indecent Images of Children Investigations

##### **Background:**

Tackling Child Sexual Abuse and Exploitation (CSAE) is a priority across the UK with at least 300,000 people in the UK estimated as posing a sexual threat to children (ITV article, 2020<sup>xi</sup>). Every month, law enforcement across the UK are currently arresting up to 450 online CSAE offenders who were accessing/downloading and/or sharing indecent images of children (IIOC) online. As a result of this law enforcement action, up to 600 children are safeguarded each month (Independent article, 2020<sup>xi</sup>). Additionally, it is anticipated that there will be a rise in online CSAE offences during the COVID-19 period which will come to light as lock down eases.

Through the voices of ex-partners of IIOC offenders, it has become clear that the impact on the family once a loved one has been arrested for IIOC offences from the outset are not fully understood, and may well contribute to the children in the family experiencing Adverse Child Experiences (ACEs). Therefore, the children of these offenders are Indirect Victims of IIOC Investigations (IVIIC).

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## Existing research:

There has been very limited research into the emotional, wellbeing impacts on a family once a loved one has been arrested for IIOC offences. Families Outside, which is a national Scottish charity that works solely on behalf of children and families affected by imprisonment noted a marked increase in contacts from families of people convicted of sexual offences. Their search showed that specific support for families in this situation quickly demonstrated that there was very little support available to them (Loucks & Loureiro, 2018<sup>xi</sup>). Families are often left on their own to deal with an incredibly traumatic period in their lives, through no fault of their own. It is also important to note here that not all online CSAE offenders receive a custodial sentence, the majority are likely to instead receive community orders with Sexual Harm Prevention Orders.

Families Outside conducted a review of the literature and a scoping study of what support is available for families of sex offenders (not just online CSAE offenders) within the UK. The review reflected that despite the detrimental impact on families and the clear need for support, very little support is available for families (Loucks & Loureiro, 2018).

Many of the issues that these families face are identical to those of anyone with a family member involved in the justice system which could include;

- Loss of income, especially if the person convicted was the main breadwinner (Dickie, 2013<sup>xi</sup>).
- Stress which can impact on physical and mental health, with children up to three times more likely than their peers to develop significant mental health issues (Jones et al. 2013<sup>xi</sup>). In fact, imprisonment of a household member is one of the ACEs which could increase an individual's risk of developing health-harming behaviours (Bellis et al. 2016<sup>xi</sup>).

## Additional considerations:

Additional impacts on the families of IIOC offenders and considerations include:

- Negative community judgement: due to the nature of the offence, families of online CSAE offenders are often exposed to negative community judgement, unfortunately sometimes even from their close family and friends. These cases can sometimes be reported in the media and even though the child's names are not mentioned, the offenders full name, employment details, marital status can be sometimes be listed. As a result of this or the fear of the case hitting the media, families may relocate so that their children can attend school without the risk of them being negatively targeted at school for their parent's crime. This could have detrimental impact on the child's mental health and wellbeing, and the child may be living in fear that their peers may uncover what has been highlighted online/through the media.

[“But, they must have known!”](#) is a blog on NOTA written by an ex-partner of an offender presenting her experience and emotions and how she imagines her two children feel since her partner at the time was arrested for IIOC offences.

## Recommendations:

- More research is needed into both the short and long-term impact on the children, once a family member is arrested for online CSAE offences, in particular the impact on the criminal justice process. Similar reports to that of; [“The multi-agency response to child sexual abuse in the family environment”](#), [“No child left behind – a public health informed approach to improving outcomes for vulnerable children”](#), and [“Sowing the Seeds: Children's experience of domestic abuse and criminality”](#)<sup>xi</sup> are needed to look at IIOC.
- Similar to the findings from the 'Sowing the Seeds: Children's experience of domestic abuse and criminality' 2020 report, consideration should be given into recognising children whose parent has

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been arrested from online CSAE offences as a victim, or at least an IVIIC and have access to additional specialist support.

**Work currently ongoing:**

- From August 2020 a National Working Group chaired by three leading charities (NWG Network, Marie Collins Foundation & Lucy Faithful Foundation), has been formed to look at three key aspects of this issue; the prevalence, the impact on children, and what support for families is needed to reduce that impact. This working group will consist of representatives from authority bodies such as: NPCC; Home Office; National Crime Agency.
- Tarian ROCU produced a 'Family Pack' for partners and families of IIOC offenders arrested as a result of POLIT teams. The pack aims to answer the questions partners may have upon arrest e.g. what is bail, what is happening to my devices etc. Along with a list of services who can help after the arrest has taken place. The pack has now been promoted as good practice across the UK.

<sup>xi</sup> ITV. 2020, 3<sup>rd</sup> April. *At least 300,000 people in UK pose sexual threat to children, says crime agency*. Retrieved from: <https://www.itv.com/news/2020-04-03/at-least-300-000-people-in-uk-pose-sexual-threat-to-children-says-crime-agency>

<sup>xi</sup> Dearden, L. Independent. 2020, 12<sup>th</sup> March. *Up to 450 paedophiles arrested a month in UK as internet drives 'explosion' of child sex abuse*. Retrieved from: <https://www.independent.co.uk/news/uk/crime/paedophile-uk-arrest-child-sex-abuse-police-internet-a9396661.html>

<sup>xi</sup> Loucks, N., & Loureiro, T. (2018). Support for families of people convicted of a sexual offence. In *Contemporary Research and Analysis on the Children of Prisoners: Invisible Children* (pp. 190-208). Cambridge Scholars Publishing.

<sup>xi</sup> Dickie, D. (2013). The financial impact of imprisonment on families. *Families outside*.

<sup>xi</sup> Jones, A., Gallagher, B., Manby, M., Robertson, O., Schützwohl, M., Berman, A. H., ... & Christmann, K. (2013). *Children of prisoners: Interventions and mitigations to strengthen mental health*.

<sup>xi</sup> Bellis, M. A., Ashton, K., Hughes, K., Ford, K. J., Bishop, J., & Paranjothy, S. (2016). Adverse childhood experiences and their impact on health-harming behaviours in the Welsh adult population. *Public Health Wales NHS Trust*.

<sup>xi</sup> Wedlock, E., & Molina, J. (2020). *Sowing the Seeds*.

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## **RESPONSE 22 - LLAMAU**



**Call for Evidence – State of Children’s Rights in Wales Llamau’s Response**  
Llamau is a charity whose mission is to end youth homelessness and homelessness for women in Wales. Much of our focus is on early intervention and the prevention of homelessness before it happens, ensuring that children and young people are supported to avoid homelessness and to build positive and purposeful futures for themselves.

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The following constitutes Llamau's priorities and evidence for change, including views gathered from the children and young people we support.

### **Child Poverty and Adverse Childhood Experiences**

Research over the last few years has identified a much clearer link between Adverse Childhood Experiences and homelessness amongst young people. Llamau's own analysis of ACEs amongst the homeless young people we support, found that 90% of young homeless people had experienced 1 ACE (compared to 47% of the Welsh population) and 54% of homeless young people had experienced three or more ACEs (compared to just 13% of the Welsh population). Our experience shows that too many young people are not able to access the support they need to deal with the trauma they experience in childhood which can often force them into using poor coping mechanisms, which are perceived in later childhood as 'challenging behaviours'. Welsh Government statistics show that in 2018-19, 732 children aged 16-17 asked their local authority for help with homelessness. Without the stability of a home, it simply is not possible for children and young people to achieve their potential. Furthermore, research by Dr Peter Mackie ([https://www.crisis.org.uk/media/20608/crisis\\_nations\\_apart\\_2014.pdf](https://www.crisis.org.uk/media/20608/crisis_nations_apart_2014.pdf)) shows that 48% of homeless people first became homeless when they were under the age of 21. The research also shows that 73% had been homeless more than once. For too many people, the path to homelessness begins when they are still children.

We would like to see much earlier support for young people who have experienced trauma and poverty in childhood, supporting them to avoid health-harming behaviours and situations, including homelessness, later in life.

### **Protection from Violence, Abuse and Neglect**

At Llamau we are concerned that older children do not have their rights protected as much as younger children, as they are often assessed as having the capacity to make their own decisions, particularly in relation to risk taking behaviours. We are currently seeing worrying numbers of young people living in our supported accommodation projects who are being criminalised as a result of their involvement in criminal activity, rather than recognised as the victims of Child Criminal Exploitation. Many of these young people have experienced significant levels of trauma in their lives and have not been supported by statutory services as a result of the high thresholds in place for those services. They lack the support networks around them and are specifically targeted by criminal groups. This exploitation leads to young people being criminalised and left with few opportunities for positive and purposeful futures, simply as a result of their vulnerability. We would like to see a change in approach from statutory services in Wales, ensuring that children and young people are protected from the threat of criminal exploitation in the first place. Where they are forced into becoming victims of Child Criminal Exploitation we want to see a supportive approach taken by police which takes account of and understands the context of their involvement in criminal activity.

### **Mental Health**

Too many young people are still experiencing significant mental health issues and are unable to access high quality mental health provision which supports them to avoid turning to negative coping mechanisms. Llamau's own research, conducted in partnership with Cardiff University showed that 90% of young people who are homeless meet the criteria for at least one psychiatric condition, with only 35% of those young people accessing mental health support. The Covid19 pandemic has undoubtedly exacerbated mental health issues for many of the people we support, and a recent survey we conducted showed that 46% of people we support had increased depressive symptoms as a result of the pandemic and lockdown. Although additional funding has

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been given to support child and adolescent mental health services, this is often uncoordinated and provides a level of support which is much lower than required for many young people. There is often a gap in provision for those young people who do not meet the high threshold for statutory mental health services or those for whom the mental health services being offered are simply not appropriate for them (eg those who are too frightened or not ready to attend groups or those who cannot organise or maintain outpatient appointments).

We would like to see a more coordinated approach to mental health support for children and young people, which funds meaningful interventions which meet the needs of young people who have often experienced significant trauma in their lives.

## **Education**

Every young person is entitled to 25 hours of statutory education a week, but there is insufficient support to enable the most vulnerable children and young people to achieve this. The youth engagement and progression framework has seen a steady decline in NEETs over the last five years, but last year started to increase again. Careers Wales 5 Tier data shows a growing number of young people in Tiers 1-3 (unemployed) between the ages of 16 and 18, and the Covid19 pandemic will have exacerbated the situation further for the most vulnerable young people.

We would like to see additional funding provided to support children who cannot maintain attendance in mainstream education. We would also like to see greater accountability, with schools being required to keep those children who are not attending on the school roll and schools being measured on the sustainability of children's destinations for a year after they have left, thereby encouraging sustainable transitions into post-16 education, training and employment. We would also like to see greater flexibility in post 16 education provision to allow a greater period of time to work with those young people who are furthest away from progression to achieve.

## **Experience of Care**

Care experienced young people are disproportionately likely to experience homelessness – 33% become homeless in the first two years after leaving care and 25% of all single homeless people have been in care at some point in their lives (evidenced in Youth Homelessness and Care Leavers: mapping interventions in Wales, Stirling T, 2018).

As outlined in Schwan et al, Preventing Youth Homelessness; An International Evidence Review, transitions from care into adulthood should be “seamless, rights- based and focus on housing stability”. All young people make mistakes as they transition into adulthood, but society places an expectation on care experienced young people that they will avoid making these mistakes. Young people who have experience of care should be given appropriate and relevant support throughout their transition to adulthood, recognising that they may still need support once they have left care – just like their peers who would rely on parents for that support. This support should also ensure that they are fully prepared for the transition to adulthood, with clear pathways into stable and secure accommodation which is based on their choices and their needs.

## **Special Protection Measures**

We are increasingly concerned about children in families considered to have no recourse to public funds. This means that very vulnerable children whose families do not have recourse to public funds, including those experiencing domestic abuse, are left without an appropriate level of support and safety. Service providers, whose funding is often precarious, will sometimes refuse to accept referrals of families with no recourse to public funds because of the lack of funding available to support those families, leaving vulnerable children in unsafe situations.

We would like to see a commitment to supporting children from families with no recourse to public funds, in order to ensure that the right of all children to live safely and free from abuse, is protected.



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## RESPONSE 23 - NEATH PORT TALBOT EDUCATION PSYCHOLOGY SERVICE

### State of Children's Rights in Wales Report

#### Written evidence provided by Neath Port Talbot Educational Psychology Service

**What are the main issues that the Welsh Government and public bodies should be prioritising and why?**

1. **The emotional health and wellbeing of children** – This is an important precursor to an individual's learning and development. A positive wellbeing is required for children to be able to engage in learning effectively (Zins, Weissberg, Wang & Walberg, (2004). Yet, the wellbeing of children has been highlighted as one of parents and carers biggest concern following lockdown in the UK (The Cost of Lockdown report by Child Poverty in Action, 2020).

Neath Port Talbot Educational Psychology Service recently carried out a piece of research exploring the views and experiences of Yr6 and Yr10/11 pupils through lockdown. In this study, pupils were asked to reflect on how their wellbeing had been affected through lockdown. For year 10 pupils, over 80% reported that they were using social media and electronic devices 'a little more' or 'much more' than before. Those who reported more use of social media and devices were also less likely to report favourably on positive measures of wellbeing such as 'feeling calm', 'being in a good mood', and 'being able to find fun things to do.'

Qualitative data also indicated that for Year 6 and Yr 10/11 pupils, the lockdown period has led to many worries, the most commonly reported among these are: Falling behind with school work, failing exams, worry about the possibility of losing loved ones, and contracting COVID 19. A small number of young people also shared concerns about the impact of lockdown on their existing mental health issues. These research findings highlight the urgency for the health and wellbeing of children to be prioritised as we continue to navigate a way through the COVID 19 crisis.

2. **Ensuring that education is viewed holistically** – Education needs to focus much wider than academic learning. There needs to be a greater recognition that there are a range of different areas of development that are important for an individual's success e.g., wellbeing and happiness (as above). There should also be focus on celebrating an individual's strengths and interests, in addition to supporting their unique needs. This strength-based focus is important for later independence and success (e.g., Lopez & Louis, 2009).

The research carried out by Neath Port Talbot Educational Psychology Service found that pupils recognised that there were some welcomed benefits to the lockdown and school closures that provided opportunities to spend quality time with immediate family time, time to engage in hobbies and 'feel good' activities, and to focus on self-care. A high number of children reported feeling less pressure, reduced anxiety and valued a slower pace of life whilst learning at home. This highlights the need to consider a shift in education focus to one that focuses on developing a balance between academic achievement and personal, spiritual and emotional growth.

Research into the use of 'mindfulness' in schools has shown that such practices can bring improvements in pupils wellbeing (Kuyken et al., 2003). Other studies have also highlighted that the use of self-care and reflective processes, such as mindfulness, can have a positive impact on cognitive processing. For example, increasing activity in the pre-frontal cortex, the logical command centre of the brain (Chiesa & Serretti, 2010).



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As educational psychologists, we use systemic theories/models, such as the Eco-Systemic Model (Bronfenbrenner, 1977; 1979) to understand child development and education. In this model children are considered to be at the centre of a number of different systems e.g., their family, peers, school, local authority and community, that can impact on their development. We need to understand how these systems interact and impact on an individual in order to support development.

Nottingham Educational Psychology Service and Southend Educational Psychology Service (2002) recently carried a collaborative piece of research exploring the views of children and young people in the Nottingham and Southend areas during lockdown (surveying 1758 pupils across all school aged year groups). The authors of the research highlight the need to *“shift away from [the] dominant narrative of “catch up”, which does not reflect the scale of the impact of the pandemic and which sits within a narrow construct of a National Curriculum. Instead, we advocate a narrative centred on a recovery curriculum, a focus on emotional health and well-being and the enjoyment of, and motivation for, life-long learning”*.

3. **The Early Years**- The first 1001 days (approximately first two years of life) is widely considered as key stage of child development (Parent Infant Foundation). It is understood that during this stage, children learn at the quickest rate, and that children often learn the basis of key skills required later on in life. If we focus on ensuring support is right at an early stage, this is likely lead to more positive outcomes later on.

Children of a very young age might also be overlooked in terms of their rights, because of their young age or communication abilities, and they often rely on adults to interpret their views, ensure that their needs are met, and advocate for them. We need to ensure that we are proactive and creative at capturing the feelings, emotions and preferences of young children.

4. **Participation** – Lockdown has brought new and different challenges in ensuring children are actively engaged and participate in their lives. For example, there has been an increase in remote working by support services and professionals, which has increased challenges in accessing the ‘voice’ of all children. This also appears to have also led to increased inequality, for example, for very young children (Lockdown Babies Report, 2020), children and families who have a lower income (The Cost of Lockdown Report, 2020), and children who are considered to be vulnerable (Childrens Commissioner for Wales, 2020). These vulnerable children might include those who have additional learning needs, looked after children, or young carers. Due to their needs, these children are might be at greater risk of not having their ‘voices’ heard and therefore their rights and needs met, if we do not ensure that there are accessible ways for them to give their views.

We feel there also needs to be an increase in awareness of some conditions that are believed to be common, but that are difficult to assess. For example, there is a lack of awareness about Fetal alcohol spectrum disorders (FASDs). Recent research by McQuire et al., (2019) supports the idea that FASDs are likely to be a prevalent but hidden issue that affects a large number of children in our society, especially those who are looked after.

5. **Play** – Play is important for a child’s emotional health and wellbeing, as well as their general development. Research has suggested that children perceive play as one of the most important aspects of the lives (IPA, 2010). Children can develop a range of skills whilst playing e.g., social, emotional and cognitive skills (Lester & Russell, 2008, 2010). Play is also an important way for children to express themselves, and also to help regulate and recover from difficult/stressful events (Clark, 2006). We need to ensure that children of all ages and needs have access to appropriate spaces and opportunities to engage in play.

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## ALSO SUBMITTED

- 2 x research posters – COVID-19 pupil perceptions of school closures and its educational impact

## RESPONSE 24 - END YOUTH HOMELESSNESS CYMRU



### Response to Children in Wales/ Wales UNCRC Monitoring Group call for evidence

Homelessness is a major issue in Wales, with a significant impact on children. International research and insights from frontline services show that children and young people experiencing homelessness have a different pathway into homelessness and distinct needs, which require specific youth-oriented solutions to enable them to exit homelessness.

Following extensive consultation with agencies across Europe, including Welsh organisations, FEANTSA, the European Federation of National Organisations working with the Homeless, have recently defined youth homelessness as:

*“Youth homelessness occurs where an individual between the age of 13 and 26 is experiencing rooflessness or houselessness or is living in insecure or inadequate housing without a parent, family member or other legal guardian”.<sup>1</sup>*

End Youth Homelessness Cymru is a national coalition, led by Llamau, determined to end

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youth homelessness within 10 years; a mission we believe is both vital and achievable. We believe that every young person should have a safe place to call home with the support needed to leave homelessness behind and lead a happy, fulfilled life. We aim to create the systemic and cultural change necessary to prevent and end youth homelessness in Wales.

Young people experiencing homelessness are at a key developmental period. They often have no experience of independent living and lack the resilience of adulthood. Some will have involvement with youth-specific systems, notably the care system, which increase their risk of homelessness. For all of these reasons, youth homelessness requires a distinct approach from that taken to combat adult homelessness.

Of the 31,170 presentations from households seeking support with homelessness, or the risk of homelessness, in Wales last year (2018-19) 732 were by 16- and 17-year olds.<sup>2</sup>

Research shows that in a sample of homeless people in Wales, 48% first became homeless before the age of 21.<sup>3</sup> Further, 73% had been homeless more than once, showing that once you become homeless once, it is likely to recur. This shows that to build on the response to homelessness during COVID-19 it is necessary to intervene early and prevent children and young people from becoming homeless.

Specific, evidenced recommendations for policy changes which will positively improve children and young people's lives follow. These span a number of the priority areas highlighted in the call for evidence, such as:

- Care Experienced Children (see below and the attached report, *Don't Let Me Fall Through The Cracks: Homelessness amongst Care-Experienced Young People in Wales*)
- Non-Discrimination (LGBTQ+ young people are disproportionately affected by homelessness, see below and the attached report: *Out On The Streets: LGBTQ+ Youth Homelessness in Wales*)
- Legislation and Strategy (our recommendations below set out key components of a Welsh Government strategy to end youth homelessness in Wales which we view as a necessity).

Article 27 (adequate standard of living) of the UNCRC states: "Every child has the right to a standard of living that is good enough to meet their physical and social needs and support their development. Governments must help families who cannot afford to provide this." That children in Wales experience homelessness means that, as a country, we have progress to achieve in order to meet our obligation to our children and young people.

## **Recommendations:**

The next Welsh Government should publish a strategy for ending youth homelessness in all its forms, as can be found in the Irish Programme for Government.<sup>4</sup> This should focus on effective early intervention and prevention – treating homelessness like a public health emergency to address its earliest symptoms.

Universal prevention<sup>5</sup> should be a principle focus, so we ask that, specifically, the Welsh Ending Youth Homelessness Strategy should tie in with a comprehensive and renewed Child Poverty strategy, an issue at the root of much youth homelessness.<sup>6</sup> Social deprivation is associated with enduring, complex physical and mental health problems for children, young people and their families.<sup>7</sup> These issues are, in turn, linked to homelessness.

Continuing the theme of universal prevention, the Welsh Government needs to address housing quality, affordability and availability for young people (including children with young parents or young people who are moving on from care). The United Welsh/ Llamau Youth Housing Choices model<sup>8</sup>, based on NAL (the Finnish Youth Housing Association)<sup>9</sup>, which is funded by Welsh Government, needs to be evaluated and, if it can be found to meet the needs of young people,

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swiftly delivered at scale across Wales. We want the next Welsh Government to set out a new vision for housing for young people, which reflects what young people say they need and affirms a legal commitment to a human right to adequate housing. This vision should include:

- An increase in affordable accommodation designed specifically for young people and planned for in the Local Authorities' Local Development Plans.
- To facilitate an effective response to young people in crisis, the strategy should set out that all young people will be considered in priority need, when presenting as at risk of homelessness.
- New minimum standards of temporary accommodation, agreed in consultation with young people, and a commitment to dramatically limit the length of time that any young person should be expected to remain in TA. (for more on this, please see the recommendations in the attached, as yet unpublished, End Youth Homelessness Cymru report: "Don't Let Me Fall Through The Cracks: Homelessness amongst Care-Experienced Young People in Wales". Please consider the additional recommendations included in this paper, which provides evidenced recommendations to address care-experienced young people's disproportionate likelihood to experience homelessness, as part of this exercise).

There should be significant support for targeted prevention, building on interventions that are proven to work (e.g. school-based intervention, such as Upstream Cymru, a Welsh pilot of the uniquely effective Australian model, the Geelong Project, which achieved a 40% reduction in youth homelessness).<sup>10</sup> As with other innovative approaches based on successful models imported from abroad, the Welsh pilot must be evaluated and implemented rapidly and at scale, if demonstrably effective in a Welsh setting.

The strategy should also clearly set out commitments to ensuring Wales-wide access to demonstrably effective, youth-focussed, crisis prevention interventions, such as Family Mediation and Supported Lodgings. Responses to the specific needs of those at greatest vulnerability to youth homelessness will need to be laid out within the strategy (e.g. housing related support for care-leavers, ensuring Wales-wide availability of LGBTQ+ focussed projects, specific responses for those who have experienced trauma).<sup>11</sup>

Emergency prevention, i.e. support for those young people at immediate risk of homelessness, especially sleeping rough, needs to be incorporated into a future strategy. Specifically, this means significant investment in additional Housing First for Youth in Wales. We are seeing a number of successes from early pilots of the model in Wales (based on the demonstrably effective Housing First model) and a recent study of a Scottish Housing First for Youth pilot confirms its suitability for application at scale in the UK.<sup>12</sup>

Welsh Government must also ensure provision is made available for recovery prevention, i.e. prevention of repeat homelessness. In the wake of COVID-19, young people are predicted to bear the brunt of associated economic hardship. Many young people in Wales at greatest risk of homelessness (care-leavers, for instance) are also 'at the back of the queue' for employment.

The next Welsh Government should urgently:

- Deliver a Wales-wide supported job-guarantee scheme (an existing model, Llamau's Symud Ymlaen/ Moving Forward project could provide the blueprint).<sup>13</sup>
- Address the welfare issues which negatively affect the abilities of some young people living in supported housing to work.
- Increase and protect traineeship funding to enable young people to achieve qualifications.

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## Contact

To discuss these recommendations further, please contact Hugh Russell, End Youth Homelessness Project Manager on: [hughrussell@llamau.org.uk](mailto:hughrussell@llamau.org.uk)

## Accompanying Material

Please find attached to this submission two papers:

*Don't Let Me Fall Through The Cracks: Homelessness amongst Care-Experienced Young People in Wales* (due for publication in 2020)

*Out On The Streets: LGBTQ+ Youth Homelessness in Wales* (2019)

Please feel free to use the recommendations in these papers, or refer to the case studies provided, as you see fit.

<sup>1</sup> [https://www.feantsa.org/download/framework-for-defining-youth-homelessness\\_final\\_pdf3614092469143708469.pdf](https://www.feantsa.org/download/framework-for-defining-youth-homelessness_final_pdf3614092469143708469.pdf)

<sup>2</sup> <https://statswales.gov.wales/Catalogue/Housing/Homelessness/Statutory-Homelessness-Prevention-and-Relief/householdsforwhichassistancehasbeenprovided-by-outcome-age-gender>

<sup>3</sup> Mackie, P. (2014), *Nations apart? Experiences of single homeless people across Great Britain*. Accessed at: [https://www.crisis.org.uk/media/20608/crisis\\_nations\\_apart\\_2014.pdf](https://www.crisis.org.uk/media/20608/crisis_nations_apart_2014.pdf)

<sup>4</sup> Irish Government. *Programme for Government – Our Shared Future* 2020 Pp61. Accessed at: <https://static.rasnet.ie/documents/news/2020/06/draft-programme-for-govt.pdf>

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<sup>8</sup> Price, J and Russell, H. *Youth Homelessness: Moving Towards Prevention*. WCPP 2020. Accessed at: <https://www.wcpp.org.uk/commentary/youth-homelessness-moving-towards-prevention/>

<sup>9</sup> Schwan et al (2018) *Preventing Youth Homelessness: An International Evidence Review* WCPP 2018. pp14-15 Accessed at: <https://www.wcpp.org.uk/wp-content/uploads/2018/10/Preventing-Youth-Homelessness-full-report.pdf>

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<sup>11</sup> Russell, Bridgeman, Jenkins (2019), *Out on the streets: LGBTQ+ Youth Homelessness in Wales* End Youth Homelessness Cymru, accessed at: <https://www.llamau.org.uk/out-on-the-streets>

<sup>12</sup> Blood, Alden, Quilgars (2020), *Rock Trust Housing First for Youth Pilot: Evaluation Report*. Rock Trust. Accessed at: <https://www.rocktrust.org/wp-content/uploads/2020/07/HF4Y-Evaluation-Report-July-2020-Final.pdf>

<sup>13</sup> <https://www.llamau.org.uk/symud-ymlaen-moving-forward>

## RESPONSE 25 - GRANDPARENTS PLUS

### State of Children's Rights in Wales, Kinship care

Kinship care is the term used to describe the circumstances of children who are unable to live with their parents and are being raised by someone with whom they have a prior relationship (Selwyn and Nandy 2014). In the UK there are two types of kinship care, formal and informal. Formal kinship care describes arrangements made at the direction of the local authority, either through a court order or due to child protection concerns (Hunt 2003, Selwyn and Nandy 2014). Informal kinship care describes a private arrangement between the child's parents and the kinship carer and where the local authority have not put any restrictions on whether the child can return to their parents' care (ibid).

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An analysis of the last UK census in 2011 identified approximately 180,040 children were living with a relative in kinship care (Wijedasa 2017) approximately 10,000 of which were living in Wales. This is a significant amount of children and research into the 2001 census identified 95% of children in kinship care are there informally which meant they were less eligible for support and many would not be known by their local authorities (Nandy et al 2011).

Kinship care families are often complex. Children in kinship care have commonly experienced early childhood adversity and had similar pre-placement experiences to children in stranger foster care (Farmer and Moyers 2008, Selwyn et al 2013). These experiences often resulted in the children presenting with complex needs (Saunders and Selwyn 2009). Compared to children living with at least one parent, children in kinship care are twice as likely to report disabilities and long term health problems (Wijedasa 2017)

## **Recommendations**

- Support for children in kinship care to have parity with that offered to children in adoption and foster care
- Children in kinship care should be given access to the same health, education and care prioritisation as children in care

Research commonly identifies kinship carers as a vulnerable group. When compared to the general parenting population, kinship carers were more likely to be older, have a chronic health condition or disability, single, live in a poverty, unemployed, be poorly housed, and be socially isolated (Aldgate and McIntosh 2005, Farmer and Moyers 2008, Nandy 2011, Selwyn et al 2013, Wiedasja 2017). The combination of these complexities meant most kinship families would benefit from additional support from their local authorities (Saunders and Selwyn 2009, Selwyn et al 2013). However, research consistently identifies support offered to kinship carers is lacking and insufficient to meet the needs of the families (Hunt and Waterhouse 2012, Selwyn et al 2013; Wellard et al 2018; Grandparents Plus 2018; 2019). Although kinship families are faced with a myriad of adversities along with a lack of support, research continuously identifies the outcomes for the children are generally good and the placements are stable (Aldgate and McIntosh 2005, Farmer and Moyers 2008, Selwyn et al 2013; Wellard et al 2018).

## **Recommendations**

- Need for a greater awareness of children in kinship care and their carers within health, education and social care systems in order to enable more targeted, timely and appropriate support.
- All kinship carers should be offered advice, preparation and support for their role in line with that offered to adopters and foster carers in order to achieve better outcomes for children in their care

Kinship carers are more likely to live in disadvantaged neighbourhoods, public or overcrowded housing (Cox, 2014, Andersen and Fallesen, 2015). People providing kinship care for children are often economically vulnerable and have the highest rates of poverty of any housing type (Kreider and Ellis, 2011). Many need to dramatically re-evaluate their economic situation once they become carers, return to work, work much longer hours than their peers and postpone retirement or need to give up work entirely (Bailey et al., 2013, Brennan and Cass, 2014). Those living in rural communities face further challenges because there are fewer community resources, transportation and social isolation. (McCartan et al, 2018). They also have poorer access to childcare, limited support services, foodbanks, job opportunities and mental health services (Kropf and Robinson, 2004, Probst et al., 2004). Research shows two thirds of children living with relatives in Wales live in households in the poorest 40% of areas. Children experiencing multiple deprivations in Wales are also 3 times more likely to be in a kinship household compared to children not multiply deprived (Nandy et al 2011)

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## Recommendation

- Government strategies to address poverty and deprivation should specifically address kinship families who are likely to need additional help and services
- All kinship carers should be entitled to financial support

The transition to adult life for young people who have been in kinship care is a complex process, their transition into the adult world tends to be more abrupt and with fewer resources than those brought up by parents (del Valle, 2011) In general, young people who have been raised within their extended family are exposed to processes of transition to adult life that are compressed and accelerated, just like the rest of young people who have been raised without parental care (Wade, 2008) Children's needs do not end when they reach 16 or 18. Kinship care families should be offered support for as long as the children are in education, in line with 'When I Am Ready' This will allow young people to have the time and support to develop the necessary skills and resilience to make successful transitions to independent living.

## Recommendation

- When I Am Ready scheme to be extended to include all young people in kinship care to avoid disruption in their living arrangements while they are in education or training, or developing skills for living independently

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## RESPONSE 26 - PLACE2BE



### **Response to Children in Wales' Call to Evidence – The State of Children's Rights in Wales Submitted by Place2Be**

Main issues, concerns & priorities:

- Statutory provision of counselling across a child's time in primary and secondary education
- CAMHS Capacity
- The need to address provision for the so called "missing middle"

Recommendations:

- Review of national policy; statutory provision of counselling in primary schools

We believe there should be access to child-centred, holistic counselling and mental health support across all primary and secondary schools in Wales and that sufficient statutory funding be made available for provision to be on a whole school level and planned for the long term.

Early intervention is pivotal in the prevention of long-term mental health conditions. We know that three children in every classroom has a diagnosable mental health condition and that half of all mental health problems are established by the age of 14. A child or young person facing either general wellbeing concerns or more discrete mental health challenges is likely to see an impact on their capacity to learn which can go on to exacerbate existing difficulties. As children have the right to an education (article 28) it should be noted that where mental health difficulties impede access or engagement with learning it is essential that provision exists to support the child or young person to process, make sense of and get support with these difficulties to support their ongoing educational development.

With regards to educational development, children experiencing poverty are more likely to have mental health challenges, which in turn impacts on learning and further exacerbates the educational attainment gap. Article 6, point 2 refers to the maximum possible development for every child and therefore how to reduce the educational attainment gap needs further scrutiny at policy level. Our view is that access to child-centred, holistic counselling and mental health support across a child's time in primary and secondary education would support the implementation of this article.

Articles 24 and 39 of the UNCRC make it clear that children should have the right to the best possible health and, where trauma has occurred that they have the right to receive special support to help them recover. This supports a focus on both universal and targeted mental health provision for all children and young people. We would argue that universal provision is essential as this helps to reduce stigma around mental health, making it part of everyday thinking and conversations around wellbeing i.e. so that mental health is not only talked about when there is a



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difficulty or crisis point. This approach seeks to build resilience within children and young people and give them the best chance to fulfil their potential. This is also in support of article 29 as fulfilling one's potential is linked to provision within education to develop your personality, talents and abilities in full.

Priority also needs to be given to CAMHS capacity across Wales. The Mind over Matter (2018) report refers to the "missing middle", the group of children and young people who do not meet the threshold for specialist CAMHS but for whom alternative services are not available. We welcome the development of the "CAMHS In Reach" pilot work currently being undertaken and await the end of pilot review as well as any recommendations around policy implementation going forward. If the "missing middle" continues to exist it compromises children's rights under articles 24 and 39 – therefore scrutiny should be given to what measures are being taken to address this so called "missing middle".

We welcome Welsh Government's work and development on the whole school approach draft framework currently in consultation. The focus on statutory provision of counselling support extends down to those in year 6 only and we would argue that priority needs to be given to children and young people across their school career to truly align with early intervention.

Our work in Wales in the 2018/2019 academic year, which was based solely in primary schools, highlights the context some of our children and young people are facing:

- we provided 1:1 counselling to more than 100 (113) children in schools in Cardiff in 18/19
- some of these children were particularly vulnerable - they were on a Child Protection Plan (5%) or had a Care Order (5%) and most (62%) had Additional Learning Needs (ALN)
- some lived in complex families - 2% had four or more different agencies (such as social care, police and criminal justice and domestic violence services) involved with their family
- there is a relationship between poverty and mental health difficulties reflected in just over half (55%) of the children we supported, measured by those receiving free school meals
- overall, the children we work with and provide school-based counselling for, are more likely than their peers to have these characteristics which make them vulnerable and at risk of reduced life chances in their future.
- although these are primary aged children, and only aged between 4 and 11, it is evident that they can have real mental health difficulties - just over half (52%) of the children who used our 1:1 counselling service were assessed as having severe mental health difficulties according to the teacher completed Strengths and Difficulties Questionnaire (a validated measure of mental health). A similar proportion (48%) had severe difficulties according to the same measure completed by parents. This has been a consistent picture of children mental health needs across the 11 years Place2Be has been providing our service in Wales

Children who come to our service are thoroughly assessed and the clinicians identify the main presenting issues. Our recent paper [Toth, K., Samad, L., Golden, S., Johnston, P., Hayes, R., & Ford, T. (2020). What issues bring primary school children to counselling? A service evaluation of presenting issues across 291 schools working with Place2Be. Counselling and Psychotherapy Research.] indicated the complexity of the mental health needs of this age group. Across our service in Wales, Scotland and England, they presented with, on average, 10 presenting issues. These were most commonly anxiety (73%), low self-esteem (71%), experiencing family tensions (67%) and mood swings (67%). A notable minority presented with issues that might be more often associated with adolescence including eating difficulties (15%), self-destructive thoughts or acts (13%) and suicide ideation (5%).

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Our evidence and experience over years, therefore, shows that primary aged children in Wales do experience mental health difficulties and there is a need among this age group - yet provision is more focused on adolescents than on this younger age group.

- Where they do receive counselling support through our service, there is evidence that their mental health improves. For example, 65% improved in their mental health after counselling according to the SDQ measure of mental health completed by teachers and 69% improved according to parents. Of those who had severe mental health needs before they had Place2Be's support, 36% clinically recovered and no longer had severe difficulties after counselling according to teachers and 61% of those who had severe difficulties clinically recovered according to parents. This further supports the case for early intervention with younger age children to address their mental health issues.
- Our evidence indicates that improving children's mental health can also contribute to reducing barriers to learning and supporting children to be ready to learn. For those children whose mental health difficulties were having an impact on their classroom learning before they had counselling, 54% had improved so it had less impact after. Moreover, some children's mental health difficulties caused problems for their teacher or class before they had Place2Be's support and, for 40% of these, this improved so they caused fewer problems after.

What recommendations do you wish to make to ensure positive change for children?

Provision of universal schools based mental health service across Wales taking a preventative approach to mental wellbeing accessible by children and young people at the point of their need in line with their rights under UNCRC Article 29.

## **RESPONSE 27 - VOICES FROM CARE CYMRU**

### **Voices From Care Cymru: Call for Evidence, State of Children's Rights in Wales**

Voices from Care Cymru is Wales's leading charity up holding the rights of care experienced children and young people. We exists to improve the lives of care experienced children and young people in Wales and We achieve this by being an independent voice for care experienced children and young people in Wales. The things we value are:

- Being Young-Person Led
- Equality For Everyone In Care
- Creating A Care Family
- Being Aspirational
- Celebrating Individuality

### **Our Care Experienced Communities Priorities**

We are delighted to provide evidence from our community on the issues of importance to them. In Spring 2019 Voices From Care Cymru worked with care experienced young people from across Wales to discover the topics they wished to enact change on. Over a series of 8 interactive workshops, young people selected their top 5 priority area; from a list of 14, that they wish Voices From Care Cymru to influence change on.

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The 5 areas chosen by care experienced young people where:

- 1) The Importance of mental health and emotional wellbeing
- 2) The importance of sibling relationships
- 3) The Importance of being loved
- 4) Breaking the Stigma
- 5) The importance of stability

### **Why these areas?**

Emotional Wellbeing and Mental Health – “This is important for individuals who are unable to deal with their own issues. Past experiences, anxiety and depression can cause mental health issues which then have a knock on affect with life.”

Sibling relationships and contact – “this will help young people feel like they are able to keep the relationship and bonds with their families and not be cut off from them. Also helps to make them feel secure and protected.”

Importance of being loved – “this is important for care experienced young people to feel that they are loved by someone. It does not have to be in any particular way but everyone wants to be loved and by having someone doing that can increase their moral and help them to feel they are worthy.”

Breaking the Stigma- “Young people in care have the label/stigma that they cannot do things that others can do. It does not matter that they are care experienced, it is about recognising that they have hopes and dreams just like everyone else!”

The Importance of stability- “this is important for a young person to feel happy and stable within their home. Whether it’s foster care, residential or independent living young people do not want to keep moving around as they are unable to build positive relationships with others and they are made to feel that they cannot settle anywhere as their placement is not stable.”

### **Voices From Care Cymru’s priorities**

Care experienced children and young people already face a wide range of social and financial inequalities when compared to their peers. Young People are the experts though their experiences that should play a vital role in the development of policy, practice and legislation that impact their lives and the lives of the care experienced peers in Wales.

Therefore, we wish to see the voices of care experienced children and young people at the heart of Welsh Government and Local Authorities, building a looked after system built on coproduction, nurturing relationships and aspirations.

#### **Our Calls**

- Corporate Parenting: Support for care experienced children and young people should be backed up in law by the extension of the Corporate Parenting principles to all public bodies in Wales.
- Mental Health & Emotional Wellbeing: Corporate Parents such as Welsh Government, Regional Partnership Boards, Health, Social Services, and Education departments, should work together to provide a joined-up approach to emotional and mental health services for care experienced

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children and young people. Including the funding dedicated CAMHS resources for care experienced children and young people.

- Lasting Loving Relationships: Relationships should be a key consideration in all decisions, providing consistency throughout childhood and into adulthood. Strong relationships provide young people with a sense of stability, identity and belonging. These relationships can include individuals from statutory agencies, past and present foster carers, family members and friends. Most importantly no young person should be separated from their siblings, only in exceptional circumstances and 'contact' with siblings should be afforded the same importance as with birth parents.
- Creation of a Care Leavers Commitment Cymru: A national commitment to our care leavers up to 25. Offering a series of clear benchmarks in support including help in the transition to living independently, providing work experience, paid apprenticeships, opportunities to broaden their horizons, support with finding accommodation and with any costs of participating in education, training and employment.
- For long-term stability to become a goal for every care experienced child. Through increased capacity across foster and residential care settings and through increased support for kinship carers and children returning to their families.

## **RESPONSE 28 - OBSERVATORY ON HUMAN RIGHTS OF CHILDREN, AND THE CHILDREN'S LEGAL CENTRE**

### **Call for Evidence**

#### **State of Children's Rights in Wales**

This submission is on behalf of the Observatory on Human Rights of Children (Observatory) and the Children's Legal Centre (CLC). The Observatory and the CLC are based at the Hillary Rodham Clinton School of Law at Swansea University and are established to pursue a common mission of supporting and promoting better implementation of the UN Convention on the Rights of the Child.

In this submission we focus on General Measures of Implementation, specifically legislation and impact assessment. The Observatory has also contributed to the preparation of the Wales UNCRC Monitoring Group Thematic briefing on General Measures of Implementation.

### **Legislation**

1. In 2011, Wales became the first jurisdiction in the UK to legislate to incorporate the UNCRC into domestic law when the National Assembly for Wales passed the Rights of Children and Young Persons (Wales) Measure 2011 (the Measure) requiring Welsh Ministers to have due regard to Part 1 of the UNCRC, as well as specified articles of its 1<sup>st</sup> and 2<sup>nd</sup> Optional Protocols, when exercising any of their functions.

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2. In August 2018 the Equality and Human Rights Commission in Wales (EHRC Wales) published a report, 'The impact of Legal Integration of the UN Convention on the Rights of the Child in Wales' examining the impact of the Measure.<sup>xi</sup>
  3. While the EHRC Wales report is mostly positive about the impact of the Measure, in particular as an underpinning for scrutiny and policy advocacy, it notes that it has done little to enhance judicial accountability for children's rights in Wales. The Measure does not make the UNCRC directly applicable in domestic courts. It is an example of indirect incorporation. Welsh law does not as yet confer a legal remedy on a child who is the victim of a violation of the UNCRC, nor does it give the UNCRC superior or even equal status to domestic legislation.
  4. The Wales Act 2017 has confirmed the competence of the Senedd to legislate to 'observe and implement' international obligations, which include children's rights. The example of Scotland, which has recently introduced a Bill to fully and directly incorporate the UNCRC in Scots law, demonstrates the potential of a reserved model of devolution to enable incorporation of the UNCRC in a manner which provides for directly enforceable rights at devolved level.<sup>xi</sup> Wales should follow Scotland's example and bring forward legislation to fully and directly incorporate the UNCRC in Welsh law.

### **Child Rights Impact Assessment**

5. Section 2 of the Measure requires the Welsh Government to publish a Children's Scheme setting out how it will comply with the due regard duty. The first Scheme was published in 2012 and revised in 2015. Both the 2012 and 2015 schemes set out a CRIA procedure to be applied to all proposals for legislation and policy which directly or indirectly impact on children.
6. The EHRC Wales report in 2018 notes that the primary impact of the Measure has been to embed the UNCRC as a framework for policy development in Wales, including through the introduction of CRIA. It concludes that the introduction of CRIA has helped raise the profile of children's rights in policy development in Wales, but goes on to note the application of CRIA in practice is 'patchy and inconsistent', undermining the substantive application of the due regard duty. This is similar to findings from an earlier review of Welsh Government CRIA in 2015 which found inconsistencies in application and CRIA practice.<sup>xi</sup> A UNICEF-UK briefing in 2017 on CRIA makes the same point.<sup>xi</sup>

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7. While EHRC Wales report confirmed the importance of CRIA to ensure the UNCRC is taken into account by Ministers in policy decision-making, it also pointed to a number of weaknesses. These included: application of CRIA too late in the policy process to make any difference; lack of relevant expertise when completing CRIA; and, failure to fully examine the impacts of policy. Another key weakness was the failure to apply CIA to some important policies affecting children, most notably the Welsh Government's budget.
  8. The Welsh Government has recently introduced a Strategic Integrated Impact Assessment (SIIA) bringing together all the impact assessments it is required to complete in one place. While this development may see more resources available to undertake CRIA, and might make it more likely that CRIA will be applied, the early signs are not positive. The EHRC Wales report noted that the Welsh Government had not undertaken CRIA of its draft budget 2017-18, reasoning that this was adequacy covered by a broader SIIA.
  9. The Covid-19 pandemic has highlighted how easily CRIA may be overlooked. The Welsh Government failed to apply CRIA to any emergency regulations introduced in response to the pandemic, despite the very obvious impact on children of measures such as school closure and restrictions on outdoor activity. This was compounded by the failure to apply CRIA to specific steps taken relating directly to children as the lockdown restrictions were lifted, e.g. in relation to school reopening.
  10. The Welsh Government should ensure that CRIA is completed on all proposals for policy or legislation which is likely to directly or indirectly affect children. To ensure this takes place it should bring forward legislation to make Welsh Government CRIA a statutory requirement, and for all completed CRIA to be published during consultation on any proposal for policy or legislation.

**11<sup>th</sup> September 2020**

Enquiries about this submission should be directed to:

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## RESPONSE 29 - FAIR TREATMENT FOR THE WOMEN OF WALES



11/09/2020

### **FTWW Submission for *The State of Children's Rights in Wales***

## **Introduction**

### **About us**

Fair Treatment for the Women of Wales (FTWW) is the only patient-led voluntary organisation in Wales dedicated solely to women's health equality.

We support, inform, educate, and advocate for girls and women in Wales who are living with a range of health conditions and who are not receiving adequate (or fair) treatment, whether this is due to lack of accurate information, delayed diagnoses, or inaccessibility of appropriate and specialised services.

### **Background to this report**

In 2017, as a result of FTWW's campaigning, we became the patient representative body on a Welsh Government-funded Task and Finish Group looking at endometriosis provision in Wales. Subsequently, we were appointed to the then newly created Women's Health Implementation Group (WHIG) designed to oversee the fulfilment of recommendations.

One of the recommendations made and accepted by the Health Minister, Vaughan Gething, was for all pupils in Wales to receive menstrual well-being education, with the aim of destigmatising gynaecological health, reducing normalisation of menstrual pain and heavy bleeding, speeding up diagnoses and treatment of menstrual health-related conditions, and consequently reducing associated absenteeism whilst improving individuals' well-being.

Since 2018, FTWW has been working hard to persuade Welsh Government's Education Department to include Menstrual Wellbeing Education as a mandatory component within its soon-to-be implemented school curriculum, specifically within the newly devised Health & Wellbeing Area of Learning and Experience (AoLE).

## **Why is Menstrual Wellbeing Education so important?**

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Menstrual health affects all female / those assigned female at birth pupils in Wales, approximately 52% of the classroom and the population at large. Indirectly, menstrual health will also affect other genders, as they can be expected to have relationships with family members, friends, and loved ones who have / had periods.

Most girls are starting their periods at the same time they start secondary school. In the UK, periods can commence anywhere between the ages of 10 and 15 years of age. At present, despite the large numbers affected, Menstrual Wellbeing Education is not mandatorily provided in schools in Wales and there are no plans to make it so, unlike England where it became a compulsory element of the secondary school curriculum from September 2020.

We believe that Menstrual Wellbeing Education in schools is vital in order to teach young people what to expect from periods, what is and isn't normal, and when to seek medical help.

International data ([https://www.jpagonline.org/article/S1083-3188\(20\)30244-8/pdf](https://www.jpagonline.org/article/S1083-3188(20)30244-8/pdf)) on the impact of periods on young people of school-age revealed the following:

- **84% of young women thought pelvic pain during their periods was normal**
- **65% thought that pelvic pain when not having a period was normal**
- **Almost 40% thought nausea and vomiting were part of a normal period**
- **20% missed school due to painful periods**

Data extrapolated to Wales suggests that:

- **There are 15,600 girls in year 11, studying for their GCSEs, in Wales**
- **3,120 girls (1 in 5) will experience heavy menstrual bleeding**
- **As a total across Wales, 1 in 5 girls missing 1 day a month at school due to menstrual bleeding and pain equates to 29,640 days of education lost in a year**
- **Over 4 years, this equates to 118,560 days of education lost**
- **The average age of a girl starting her period in Wales is 12; if she misses 1 day of school per month, she will miss out on 38 days of her compulsory secondary education**

Symptoms of various and common benign gynaecological conditions can begin at around the same time as menarche. For all of them, combating normalisation of symptoms is vital, so that young people can seek help and access treatment promptly. The prevalence of some of these conditions can be seen in the table below:



<b>Heavy Menstrual Bleeding (HMB)</b>	<b>affects</b>	<b>1 in 5 women</b>
<b>Endometriosis</b>	<b>affects</b>	<b>1 in 10 women</b>
<b>Polycystic Ovary Syndrome (PCOS)</b>	<b>affects</b>	<b>1 in 20 to 1 in 10 women</b>
<b>Premenstrual Dysphoric Disorder (PMDD)</b>	<b>affects</b>	<b>1 in 20 women of childbearing age</b>
<b>Premature Ovarian Insufficiency (POI)</b>	<b>affects</b>	<b>1 in 100 women before the age of 40</b> <b>1 in 20 women before the age of 45</b>

Compulsory, standardised Menstrual Wellbeing Education, delivered by specially-trained individuals throughout Wales, would serve to destigmatise menstruation, combating both societal taboos and the prevailing sense of embarrassment which prevent open discussion and accurate information-sharing.

It would ensure that all young people, irrespective of location, background, or school, would receive the same high-quality information about menstrual health, empowering them to make informed choices about how best to manage their periods, if / any treatment(s) required, and be aware of support and services available to them. It would also support the principles of prevention and early intervention, enabling young women to recognise symptoms early on, and seek help from the most appropriate healthcare professionals.

Not only this, mandatory Menstrual Wellbeing Education in schools will eventually lead to a future generation of clinicians who are better-equipped to overcome any unconscious biases they may hold about the experience of period-related symptomatology and are more informed about gynaecological health in general.

## The Situation in Wales Currently

As we write, Welsh Government's Education Department remains resolute that this subject should not be mandatory and that content of the Health and Wellbeing AoLE should, instead, be entirely up to individual teachers, schools, and local authorities' discretion. FTWW is concerned that this will leave thousands of young people without sufficient knowledge and confidence to seek help for menstruation-related issues and health concerns.

Furthermore, FTWW believes it is unreasonable to expect teachers without specialist training to deliver Menstrual Wellbeing Education 'discreetly', by embedding it within the delivery of their own academic coursework, and has represented this issue to Welsh Government, the Minister for Education, Kirsty Williams and the Minister for Equalities, Jane Hutt MS.

Ms Williams introduced the Curriculum and Assessment (Wales) Bill to the country by describing its aim to 'reduce the attainment gap, raise standards...(to) ensure that our children and young people are equipped with the knowledge, skills and experiences they need to get on and get ahead in life'

<https://neu.org.uk/blog/coronavirus-supporting-teachers-our-national-mission-towards-new-curriculum->

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[wales](#) ). Despite the essential role universal menstrual well-being education would play in making this a reality, there is still no intention to make the topic mandatory.

At the end of September 2020, Welsh Parliament's Children and Young People's Education Committee begins its scrutiny of the Bill by considering its general principles, examining any evidence submitted as part of its consultation process, and making recommendations on any amendments required to improve the Bill.

In partnership with Endometriosis UK, a letter signed by various organisations across Wales and the UK, calling for Mandatory Menstrual Wellbeing Education in Wales, has been collated and will be submitted as part of our two organisations' evidence to the Committee. A copy of the letter can be found in Appendix 1 to this report. FTWW would ask that the letter be considered alongside this paper for inclusion in *The State of Children's Rights in Wales* Report, helping to inform the UN Committee's review of Welsh Government's incorporation of the Convention on the Rights of the Child.

It is FTWW's belief that to not make Menstrual Wellbeing Education mandatory will result in severe detriment to the attainment, health, fertility, and prospects of a significant number of young people in Wales and does not appear to be in line with either existing Welsh legislation or UN treaties, including both the CRC and CEDAW.

## Menstrual Wellbeing Education in a UN and Legislative Context

### i) UN CONVENTION ON THE RIGHTS OF THE CHILD (UNCRC)

<https://www.ohchr.org/en/professionalinterest/pages/crc.aspx>

***Article 3 - in all actions concerning children, the best interests of the child shall be a primary consideration***

We believe that by not making Menstrual Wellbeing Education mandatory in all secondary schools, the new Curriculum for Wales is not fulfilling its obligation to prioritise and ensure the wellbeing of all young people in its care

***Article 24 - parties should recognise the right of the child to the enjoyment of the highest attainable standard of health, including ensuring that appropriate pre-natal healthcare is available to mothers; that all children should have access to education on their health, and that preventative healthcare, including family planning education, should be developed for all.***

We believe that allowing Menstrual Wellbeing Education to be optional denies the right of every young person in Wales to the highest attainable standard of health because there is no guarantee that schools will cover the topic, thereby making it less likely that children will know when they are experiencing a menstrual health condition which requires medical intervention.

Given the impact that delayed diagnosis and treatment of gynaecological disorders can have on fertility and pregnancy outcomes, education on this matter would form part of essential pre-natal care. Further,

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the Article places emphasis on prevention, which would include early detection of health issues pertinent to family planning. This in itself would also incorporate education around periods and menstrual wellbeing.

***Article 28 - parties should recognise the right of the child to education and on the basis of equal opportunity. Educational information and guidance should be available to all children, and measures must be taken to encourage regular attendance at schools and the reduction of drop-out rates.***

We believe that data around the impact of period pain and heavy bleeding on pupils' attendance rates and, consequently, their educational attainment, clearly demonstrates the need for mandatory teaching on this topic. By providing all young people with the information, skills, and support they need to seek help for menstruation-related issues, early intervention and access to any required treatment is made possible, thereby improving attendance and attainment.

In allowing the topic to remain an optional extra, there is the very real risk of variation in what is delivered in schools, where and by whom, resulting in inequality of outcomes for students, and harm caused to both health and educational prospects. Failure to make this topic mandatory will have particular impact on females and those assigned female at birth, resulting in reduced equality of opportunity for this population.

ii) **UN CONVENTION ON THE ELIMINATION OF ALL FORMS OF DISCRIMINATION AGAINST WOMEN (CEDAW)** <https://www.ohchr.org>

***Article 2 – taking all appropriate measures to either modify or abolish existing laws, regulations, customs and practices which create discrimination against women (includes legislation)***

The Curriculum and Assessment (Wales) Bill will soon become law; in its current form, it does not mandate the inclusion of Menstrual Wellbeing Education for all. Given the impact menstruation has on the education, health, and long-term prospects of those who are female / assigned female at birth, Welsh Government's failure to make the topic compulsory will see the continuation of associated absence and reduced attainment in schools and beyond.

The omission of Menstrual Wellbeing Education creates and perpetuates existing discrimination against women as it allows existing taboos and misconceptions around menstruation to go unchallenged, prolonging diagnostic delays for menstrual-related medical conditions, and impacting negatively on women's future health, fertility, employment, and wellbeing. Welsh Government should amend its Curriculum and Assessment (Wales) Bill accordingly, thereby ensuring it is taking the steps necessary to reduce inherent discrimination.

***Article 3 – making certain of the full development and advancement of women, to guarantee they are able to exercise their human rights and benefit from them, and ensure their fundamental freedoms on a basis of equality with men.***

Without mandatory Menstrual Wellbeing Education for all, the new Curriculum for Wales will play a significant role in preventing the full development and advancement of girls and women. Lack of information, delayed help-seeking, and subsequent reduced access to medical intervention has considerable impact on future educational and career prospects.

Research conducted by Cardiff University in 2018 (<https://gov.wales/sites/default/files/publications/2019-03/endometriosis-care-in-wales-provision-care-pathway-workforce-planning-and-quality-and-outcome-measures.pdf>, appendix 5) showed that women in Wales were already more likely to give up on their education and be unemployed as a result of menstrual-related symptoms than their counterparts

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elsewhere in the UK, a finding which can probably be attributed to the longer diagnostic delays and reduced access to health services reported by respondents.

***Article 10 – taking all appropriate measures to eliminate discrimination against women in order to ensure to them equal rights with men in the field of education and in particular to ensure, on a basis of equality of men and women. This includes the reduction of female student drop-out rates and the organization of programmes for girls and women who have left school prematurely, and access to specific educational information to help to ensure the health and well-being of families, ie information and advice on family planning.***

Failure to provide mandatory Menstrual Wellbeing Education in Wales will perpetuate the existing difference in educational attendance between boys and girls from age 13 onwards (12.9 years being the average age of menarche in the UK) as reported by Plan International (<https://plan-uk.org/file/plan-uk-state-of-girls-rights-report-2020pdf/download?token=42bpRbf8> page 62).

We believe that the decision to allow such a vital subject to be optional builds inequality into the educational system, both in terms of sex discrimination against young women and also between schools themselves, with some providing information and others not. Additionally, in the absence of standardised content and delivery, there will be no measures in place to scrutinise the quality of any resources provided. As such, there can be no certainty that all pupils in Wales will receive the same accurate, evidence-based teaching on the topic, further exacerbating inequalities.

***Article 12 – Parties shall take all appropriate measures to eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning.***

Cardiff University's 2018 research (ibid) shows that women in Wales with endometriosis already experience longer diagnostic delays and poorer health outcomes than their UK counterparts. With Menstrual Wellbeing Education mandatory in England from September 2020, this inequality will persist and potentially worsen.

The current legislative status quo, which sees the topic merely optional in Wales will promote inequalities between students and schools, with some girls and women sufficiently empowered to challenge misconceptions and seek medical help whilst others aren't. Furthermore, the potential long-term repercussions of this are fewer future medical professionals in Wales specialising in women's health, reducing access to health services further.

## **UK LEGISLATION**

### **iii) EQUALITY ACT 2010 - INDIRECT DISCRIMINATION**

<http://www.equalityhumanrights.com>

***Protects people from discrimination with regards to public services like education. Indirect discrimination happens when there is a policy that applies in the same way to everybody but disadvantages a group of people who share a protected characteristic, like women.***

The policy decision not to make Menstrual Wellbeing Education mandatory indirectly discriminates against females and those assigned female at birth as it will see them unlikely to access formally approved, standardised resources and teaching on a topic that most particularly impacts them. In turn, the policy will exacerbate the school attendance gap between girls and boys from age 13, consequently reduce educational attainment for girls affected, damage their career prospects, and negatively impact women's health outcomes.

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## WALES LEGISLATION

### iv) WELL-BEING FOR FUTURE GENERATIONS ACT (WALES) 2015

<https://www.futuregenerations.wales>

***Equality of health outcomes: Understanding the causes and symptoms of health inequalities, including Adverse Childhood Experiences and Violence against Women, Domestic Abuse and Sexual Violence.***

Teaching all young people in Wales about period health would inform and empower those affected to seek the right care, improving their long-term prospects and wellbeing as is core to the Act. This would also create a future generation of healthcare professionals who are knowledgeable and unbiased, reducing health inequalities experienced by girls and women in Wales with gynaecological conditions.

### v) SOCIAL SERVICES AND WELL-BEING ACT (WALES) 2014

<https://socialcare.wales-Resource-Guide>

***Voice and control: having a strong voice and real control is central to the Act as this optimises everyone's opportunity to achieve well-being and an appropriate level of independence.***

Without compulsory education on menstrual wellbeing, periods and associated issues will remain taboo and subject to myths and misinformation. Girls and women cannot be expected to advocate effectively for themselves if they lack the knowledge and skills to make their voices heard. As a consequence, their ability to control their own health, choices, and future is diminished.

## Concluding points

In closing, FTWW would like to draw the attention of Children in Wales, the Wales UNCRC Monitoring Group, and the UN Committee to the following key points:

- 1) In its present form, the new curriculum for Wales has the potential to see Menstrual Wellbeing overlooked, leaving young people without the information they need to know what a normal menstrual cycle is, and when to seek medical help;
- 2) Those assigned female at birth make up 52% of the Welsh population. Despite this, a survey by The Eve Appeal ([https://www.huffingtonpost.co.uk/entry/what-is-abnormal-vaginal-bleeding-survey-finds-most-women-wouldnt-get-it-checked\\_uk\\_5f4e06a1c5b6cf66b2bcc72f](https://www.huffingtonpost.co.uk/entry/what-is-abnormal-vaginal-bleeding-survey-finds-most-women-wouldnt-get-it-checked_uk_5f4e06a1c5b6cf66b2bcc72f)) found that 72% of women 'weren't taught how to identify when something was wrong with their periods and bleeding at school';
- 3) Menstrual health conditions affect a significant proportion, including heavy menstrual bleeding (20%), fibroids (20%), endometriosis (10%), polycystic ovary syndrome (10%), and premenstrual dysphoric disorder (5%). Most of these conditions will begin to cause troublesome symptoms during puberty, around the time of the onset of periods. In the UK, the average age of menarche is 12-13 years;
- 4) Despite the large numbers affected, many do not realise they have a medical condition that can be treated: for example, 50% of women with heavy menstrual bleeding do not appreciate that it is a medical condition; consequently, diagnosis can take many years. Similarly, research conducted in 2018 by Cardiff University (ibid) found that the average time to diagnose endometriosis in Wales is 8.5 years. The result is that many young people suffer silently with symptoms for the majority of their school lives, resulting in frequent absences from school and missed exams. The potentially

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devastating impact menstrual health conditions can have on someone's education, future career, and their physical and mental health must not be under-estimated;

- 5) Plan International's research (ibid) found that one in seven girls (14%) didn't know what was happening when they started their period, whilst more than a quarter (26%) didn't know what to do about it. The same study also found that 48% of girls in the UK feel embarrassed by their period, and 49% of girls in the UK have missed school because of their period;
- 6) All menstruating individuals will experience menopause (cessation of periods) at some point in their lives. However, until this year – and only in England - when and what to expect from menopause had never been explicitly taught in schools before, leaving generations of women misinformed and confused;
- 7) To overcome taboos and reduce health inequalities in Wales, all young people need access to reliable, accurate information about menstrual wellbeing. This is so that the topic can be openly and unashamedly discussed, myths debunked, and individuals sufficiently empowered with the knowledge they need to seek medical advice when appropriate. The problem with allowing the topic to be discretionary is that pre-existing taboos will likely influence both teachers and pupils, with both parties reluctant to open up discussion and teachers ill-equipped to answer impromptu questions about health issues which are frequently – and erroneously – normalised, such as pelvic pain and heavy bleeding;
- 8) We believe it is vital that all schools are sufficiently prepared and resourced to cover menstrual well-being in the classroom, as it cannot be assumed that young people feel comfortable and confident discussing menstruation and related issues with a parent, carer, or vice versa. Many face additional cultural barriers to talking about menstrual wellbeing in the home, whilst those in non-traditional family units, care, or boarding school are all examples of pupils who may not necessarily have ability to discuss the topic with parents;
- 9) Whilst it is clear that the Welsh Government wishes to equip pupils with the knowledge to 'overcome barriers to learning and achieve full potential' (<https://hwb.gov.wales/curriculum-for-wales/summary-of-proposed-legislation/>) the decision not to explicitly include menstrual wellbeing education actually perpetuates such barriers. FTWW believes it is vital to provide students with the information they need to recognise indicators of mental or physical problems, the ability to communicate these, and the means to seek support. Given the evidence demonstrating the extent and impact of menstrual-related issues on the school population, failure to act in this regard is quite clearly in contravention of pupils' right to receive an education;
- 10) As pointed out in our introduction, Welsh Government's Department of Health has already recognised the vital importance of compulsory menstrual wellbeing education. The report, *Endometriosis Care in Wales*, commissioned by the Welsh Government in 2018 and supported by the Health Minister, Vaughan Gething, concluded that menstrual wellbeing education should be compulsory in Wales in order to de-normalise pelvic pain, heavy bleeding, and associated symptoms, speed-up help-seeking, reduce diagnostic delay, and improve patient outcomes. We therefore ask that the Welsh Government maintains its commitment to this stance by amending the draft Curriculum accordingly;

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11) Compulsory menstrual wellbeing education will be on the school curriculum in England from September 2020; failure to follow suit in Wales will compound existing inequalities, as evidenced by the year-longer diagnostic delay for endometriosis patients in Wales (8.5 years) compared to England (7.5 years) and data showing that young women in Wales were more likely to fail to complete their education or maintain employment due to symptoms / disease progression than their counterparts in the rest of the UK (Cardiff University, *ibid*);

12) In line with the UNCRC, we would ask for Welsh Government to amend the new Wales school curriculum's Health and Wellbeing Area of Learning and Experience to incorporate the following two points: firstly, that pupils should understand the concept of menstrual wellbeing, including the key facts about the menstrual cycle, what constitutes a 'normal menstrual cycle', and how to spot the warning signs of a menstrual condition; secondly, that pupils will be given the knowledge, confidence, and skills to seek help if they are concerned that they have a menstrual health condition.

We would call upon *The State of Children's Rights in Wales* report to include reference to the need for mandatory Menstrual Wellbeing Education, recommending that Welsh Government make the necessary amendments to its Curriculum and Assessment (Wales) Bill to guarantee all pupils in Wales receive the same high-quality, evidence-based material, delivered by those with specialist training, and with dedicated teaching time.

Without a compulsory course of this nature, pupils in Wales won't have equal and timely access to accurate information; menstrual health will remain an uncomfortable subject rarely discussed openly, and the cycle of misinformation and delayed help-seeking will continue, impacting unfairly on the rights of children – and future generations of adults - in Wales.

## Appendix 1

### **Don't leave Wales behind – teach menstrual wellbeing in schools**

Dear Members of the Children, Young People and Education Committee,

We are writing with regards to the Curriculum and Assessment (Wales) Bill to request that menstrual wellbeing is made a compulsory component of the new curriculum, specifically within the Health & Wellbeing area of Learning and Experience.

At present, the curriculum offers schools and teachers the flexibility to decide whether or not to teach menstrual wellbeing. This has the potential to see the topic overlooked, leaving young people without the information they need to know what a normal menstrual cycle is, and when to seek medical help.

Menstrual health conditions affect a significant proportion of girls, women and those assigned female at birth across the UK, such as heavy menstrual bleeding (20%), fibroids (20%), endometriosis (10%), polycystic ovary syndrome (10%), and premenstrual dysphoric disorder (5%).

Despite these large numbers, many do not realise they have a medical condition that can be treated: for example, 50% of women with heavy menstrual bleeding do not appreciate that it is a medical condition, and diagnosis can take many years. The average time to diagnose endometriosis in Wales is 8.5 years, meaning many young people will suffer in silence for the majority of their school life, resulting in frequent absences from school and missed exams. The potentially devastating impact menstrual health conditions

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like endometriosis can have on someone's education, future career, and their physical and mental health cannot be overstated.

A study by Plan International<sup>xi</sup> found that one in seven girls (14%) didn't know what was happening when they started their period, whilst more than a quarter (26%) didn't know what to do. The same study also found that 48% of girls in the UK feel embarrassed by their period, and 49% of girls in the UK have missed school because of their period.

To overcome taboos and reduce health inequalities in Wales, all young people need access to reliable, accurate information about menstrual wellbeing. This is so that the topic can be openly and unashamedly discussed, myths debunked, and individuals sufficiently empowered with the knowledge they need to seek medical advice when appropriate.

We believe this work is vital in schools as it cannot be assumed that young people feel comfortable and confident discussing menstruation and related issues with a parent, carer, or vice versa. Many face additional cultural barriers to talking about menstrual wellbeing in the home, especially those from minority communities. Additionally, those in non-traditional family units, care, or boarding school are all examples of pupils who may not necessarily have ability to discuss the topic at home.

It is clear that the Welsh Government wishes to equip pupils with the knowledge to 'overcome barriers to learning and achieve full potential'<sup>xi</sup>. This includes giving students the information they need to recognise indicators of mental or physical problems, the ability to communicate these, and the means to seek support. We believe that to follow through on these intentions, menstrual wellbeing needs to be mandatory within the curriculum.

The Welsh Government has already recognised the vital importance of compulsory menstrual wellbeing education. A report, *Endometriosis Care in Wales*, commissioned by the Welsh Government in 2018<sup>xi</sup> and supported by the Cabinet Secretary for Health & Social Services, Vaughan Gething, concluded that menstrual wellbeing education should be compulsory in Wales. We therefore ask that the Welsh Government does not go back on this commitment and request that the draft Curriculum is amended accordingly.

Compulsory menstrual wellbeing will be on the school curriculum in England from September 2020; failing to follow suit will leave children in Wales unfairly behind those in England.

We request two very simple amendments to the new Wales school curriculum's Health and Wellbeing Area of Learning and Experience as follows:

- Pupils should understand the concept of menstrual wellbeing, including the key facts about the menstrual cycle. As part of this, pupils will understand what constitutes as a 'normal menstrual cycle' and how to spot the warning signs of a menstrual condition.
- Pupils will be given the knowledge, confidence, and skills to seek help if they are concerned they have a menstrual health condition.

We ask that you acknowledge the huge impact menstrual health conditions have on a young person's education and future career and ensure that menstrual wellbeing education in Wales's schools is mandatory for all pupils.





Kind regards,



supported by the Welsh Parliament's Cross-Party Group for Women's Health



## **RESPONSE 30 - FOOD SENSE WALES**

### **Child Poverty and Right 2 Food**

10th September 2020 – Submission to Children in Wales for UNCRC

This submission focuses on Article 27 and draws in issues surrounding the impact of Brexit and Covid 19.

Article 27 of the UNCRC says that children and young people should be able to live in a way that helps them reach their full physical, mental, spiritual, moral and social potential.

For this to happen, they should have access to adequate food and housing. Good nourishment and nutrition are essential for children and young people to reach their full potential.

### **Main issues**

The main issues Welsh Government and Public bodies are facing is an increase in health inequalities as a result of poor diets relating to access, affordability and the food environment. Over a quarter of children in Wales are overweight or obese, including 12.4% who are obese. The prevalence of obesity in 4-5yr olds is 6% higher in those living in the most deprived areas of Wales compared to the least deprived (PHW 2019). PHW also found that less than a third of adolescents in Wales reported eating a portion of vegetables once a day (against the Eatwell Guide recommended of 3.5 portions).

These issues are being exacerbated by Covid 19. 12% of adults reported food insecurity affecting their children in the last six months (YouGov/Food Foundation Sept 20). Similarly Trussell Trust provided food parcels to 101% more children in April 2020 than in April of the previous year.

Primary school children cannot currently access the Welsh Government Free breakfast scheme because of Covid 19 (although senior school pupils are getting an extra £1 on the free school meal

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allocation to cover breakfast) and questions remain over how children will access free school meals if asked to isolate or if there are local school lockdowns.

Indications suggest that Brexit will lead to an increase in food prices and potentially challenges with supply, especially for fresh fruit and vegetables. This could lead to greater dietary inequalities.

Children's right to nutritious food should be fulfilled through one of two mechanisms:

1. An adequate benefits and emergency support system that covers the cost of a healthy diet
2. Sufficient family income secured through income from fair work

The analysis of the Family Resource Survey (2015-16 to 2017-18) shows there are more children living in relative income poverty in working households than there are in workless households – 67% of children living in relative income poverty are in households where at least one person is working. As a result, 29% of children in Wales live in poverty.

Research from the food foundation found that there were 160,000 children living in poverty in Wales that lived in households that couldn't afford the cost of a healthy diet. Figures estimated by the Children's Society in 2018 estimated that there were 55 000 children living in Poverty in Wales who were not eligible for Free School Meals under revised eligibility criteria.

Whilst Welsh Government has made significant progress with the development of the School Holiday Enrichment Programme, the numbers of children reached through this scheme are still relatively small and significant investment is required to urgently increase reach and capacity.

## **Recommendations**

1. Welsh Government should use all possible levers to ensure recommendations from the Fair Work Commission are enforced, such as deployment of the Economic Contract, to ensure public funds only go to those employers that support the Living Wage for Wales.
2. Welsh Government should consider a range of options to create a Welsh Benefits System, adopting a cash first approach, as proposed by the Bevan Foundation .This should consider:
  - Increasing eligibility for Free School and nursery meals to all children whose parents are in receipt of Universal credit and adopt auto enrolment across all local authorities.
  - Increasing the eligibility and value of Health Start Vouchers in line with recommendations made in the National Food Strategy (Universal Credit as a passport and increasing the voucher value to £4.25)
  - Evaluate the impact of the Covid 19 free school meal payment on eligible families over summer 2020 and consider maintaining and extending to all holidays
  - Urgently expand the school holiday enrichment programme across all holidays and geographically to support recovery from the educational loss and increase in health inequalities caused by Covid 19
3. Local Authorities /PSBs should have responsibility under the socio-economic duty to ensure that all children receive their right to good food through measuring and monitoring Food Insecurity according to recognised standards (USDA Food Insecurity Module). Measurement of Food Insecurity could be considered as part of the Childhood Measurement Programme.

Many of these recommendations are included in the Children's Right2Food Charter (also available in Welsh) which Beth and Fayeth as Ambassadors for Wales have helped create. Beth can be heard talking about the impact of Covid here in lock down life . The accompanying report also

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highlights where progress has been made across the 4 UK nations. The charter suggests that a UK commission should be convened to oversee progress on actions within the Charter, something Welsh Government should consider.

Katie.palmer2@wales.nhs.uk

## **RESPONSE 31 - TGP CYMRU**



### **Response to Children in Wales Call for Evidence - State of Children's Rights in Wales**

TGP Cymru is the leading provider of Advocacy and Children's Rights in Wales working with the following:

#### **Looked after Children and Care Experienced Children**

What have the Welsh Government done - The Welsh Government have lead on and partly funded an initiative called the National Approach to Statutory Advocacy and Active Offer of Advocacy with the aim that all care experienced children can access advocacy support for them to be consulted on decisions that affect their lives and also to help keep them safe.

What difference has this made - Part of this initiative is a reporting template to collate the statistics of CYP accessing advocacy across Wales so that information is now available for future planning of services.

Recommendations – Welsh Government need to embed the National Approach to Statutory Advocacy (NASA) and the Active Offer into practice by ensuring that there is a Commissioning Framework for Independent Advocacy Services for Care Experienced Children, and to ongoing collation of the statistics as part of a National Reporting Framework for NASA.

#### **Residential Visiting Advocacy**

What have the Welsh Government done - Following on from the Waterhouse inquiry in 2000 the Welsh Government set up the office of the Children's Commissioner and tightened regulations and inspection on Children's homes and residential settings.

What difference has this made – TGP Cymru do not believe this goes far enough to safeguard these very vulnerable children. The Waterhouse Inquiry 2000 recommended ensuring that an independent person visiting the homes regularly to gain the trust of the children to further safeguard them but this was never enacted. We believe a Residential Visiting Advocate fulfils this role while ensuring that rights under the UNCRC are also upheld.

Recommendations Our Research into Residential Visiting Advocacy in Children Homes in Wales 2019 "Out of Sight Out of Rights" calls for Welsh Government to make Residential Visiting Advocacy a requirement of Registration and Inspection for all children's homes and residential schools in Wales.

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**Prevention of Homelessness Support for Care Leavers** (For more information contact Sophie.morris@tgpcymru.org.uk)

What have the Welsh Government done – Welsh Government have provided funding via Youth Innovation Fund for preventing youth homelessness. St David's Day Fund also helps with prevention of homelessness and has been important for care leavers to access although we are finding some professionals within local authority claim to not have any knowledge of this fund.

Evidence – TGP Cymru have received 224 referrals for their Team Around the Tenancy service funded by the Youth Innovation fund since October 2019 supporting young people with a variety of issues ranging from homelessness, poor home conditions, council tax arrears, rent arrears, utility arrears, money mules, substance use, mental health issues etc.

Recommendations – There needs to be long term funding for projects and services. There also needs to be additional funding for expansion across the country so there is consistency for young people in the services they receive regardless of where they are located in the country. Short term funding is not suitable for people experiencing homelessness as the entrenched problems they face don't disappear quickly.

**Gypsy Roma and Traveller Children and Young People** (For more information contact trudy.aspinwall@tgpcymru.org.uk)

What have the Welsh Government done? Provided funding under the equalities grant

What are the main issues? – ACCOMODATION - For Gypsy and Traveller children there is still a significant lack of culturally appropriate housing available. Local authority sites are, despite the GTAA (Gypsy and Traveller Accommodation Assessment) severely lacking in availability. While Local authorities have a duty to provide sites, the reality is this is not happening. This is leading families to having to go into bricks and mortar which they do not want to be doing, but are left feeling they have to so their children can have water, toilets, bath/shower etc. The results are that parents are worried that their children are not growing up immersed in their culture and their way of life will be negatively impacted. With this lack of housing we risk children from the Gypsy and Traveller culture losing their identity and understanding their cultural way of life – living in more of an outdoor environment, living surrounded by extended family, growing up closely with cousins as well as their siblings.

Recommendations – i. Need to ensure that when Welsh Government and public bodies are making decisions, discharging their public sector equality duty and designing and resourcing services including advocacy, they champion and take account of the specific experiences and barriers faced by Gypsy, Roma, Traveller, migrant, refugee & asylum seeker young people and families who continue to experience high levels of inequality and discrimination in Wales; ii. Welsh Government need to include specific measures for these groups to ensure equal access to education, healthcare, culturally appropriate accommodation and employment; and that Welsh Government in its post-Brexit strategy ensures that EEA citizens' rights and access to services are protected after the UK leaves the EU; iii. Welsh Government tighten up and put clear sanctions in place where local authorities fail in their duty to provide culturally appropriate housing provision. Homeless policies and procedures are only relevant to settled communities and not to Gypsy and Traveller families and there is a lack of understanding and knowledge of staff who are supporting families through the homelessness procedure. Include homelessness provision for Gypsy and Travellers as a visible requirement in meeting legislation for homelessness in Wales.

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**Unaccompanied Asylum Seeking & Refugee Children and Young people** (For more information contact [lee.evans@tgpcymru.org.uk](mailto:lee.evans@tgpcymru.org.uk))

What have the Welsh Government done? Provided funding under the equalities grant

What are main issues – NATION OF SANCTUARY DELIVERY PLAN -Prioritise and continue to meet the objectives; AGE ASSESSMENTS – Ensure young people who are to be Age Assessed are accommodated without delay and monitor the process across Wales; TRAINING – Continue to ensure access to a range of training including use of interpreters, immigration process, cultural differences; PLACEMENTS – Increase number of suitable placements and housing options to ensure stability and choice; DEVELOP POLICY – LA's should be ensuring there is clear and accessible policy to show how the rights of UASC, care leavers and other asylum and refugee children accessing services are respected and promoted. Evidence – Supported over 70 age assessment or disputed assessment.

Policy or changes in law - SOCIAL SERVICES & WELL-BEING ACT (WALES) 2014 – A change in the requirement that a child is in care for 13 weeks before they turn 18 in order to qualify as care leavers in the case of all UASC; AGE ASSESSMENTS – Where there has been a delay in age assessing and it is accepted after they turn 18 would be good to see care leavers care and support offered; Clarity around support post 21 and change in policy to extend support to UASC care leavers until 25; Ensure LA's fulfil responsibility to support UASC and care leavers through immigration process.

Recommendations – System to monitor Age Assessments; Guardianship service for UASC; Specialist 'Asylum' social work teams within each LA; Legal Advice centre for Asylum seeker and Refugees; In absence of Guardianship service, a continuation / expansion of specialist Independent Asylum Advocacy for UASC; Independent Advocacy for all refugee and asylum seeking children; Participation opportunities; Consultation opportunities.

### **Education and Health including Mental Health**

What have the Welsh Government done? Education policy and interventions have been numerous and multi-faceted. The Minister for Education and the Chair of the Senedd's Children and Young People's Committee are promising new initiatives such as a review of the curriculum and to increase mental health support to Children and Young People to help them deal with any trauma they may have experienced as a result of the Covid 19 pandemic. In May an additional £5m was announced to support under 11's in school

What difference that makes – It is too early to say what the effect of Covid19 will be on the mental health and learning opportunities of school aged children.

Recommendations – Welsh Government need to provide the resources to ensure that young people can recover and thrive. This includes ensuring that children and young people in schools have a voice, are listened to and have access to independent advice, information and support. Health and Education services need to commission Advocacy Services for Children and Young People in line with the National Approach to Statutory Advocacy. This will enable all children and young people to have support to access their rights under the United Nations Convention on the Rights of the Child and to access the best education and health services available, particularly mental health services.

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## RESPONSE 32 - BEVAN FOUNDATION

### Bevan Foundation response to Children in Wales consultation

The Bevan Foundation is an independent, charitable think-tank that develops solutions to poverty and inequality. We are grateful for the opportunity to respond to Children in Wales' call for evidence to support its examination of government's progress in implementing the UN Convention on the Rights of the Child (UNHRC). Our evidence will focus primarily on the broad thematic area of Disability, Basic Health & Welfare and more specifically on poverty. Our extensive work on poverty and inequality provides us with some insights into the difficulties faced by children living in low income households. Though focusing on poverty, its cross-cutting nature means that some of our comments will also be relevant to other thematic areas such as Education, Leisure and Culture Activities.

The call for evidence asks respondents to address four questions:

- What are the main issues that the Welsh Government and public bodies should be prioritising and why?
- What information or evidence do you have to support this?
- What policy or changes in law need to happen and why? Any gaps?
- What recommendations do you wish to make to ensure positive change for children?

Our response will be divided into three broad sections to, in part to reflect these questions:

- How significant a problem is child poverty in Wales today and why does it matter?
- Why has more progress not been made in solving child poverty in Wales?
- Our ideas for policy change and how to ensure positive change for children

#### Poverty in Wales today

Everyone in Wales has a right to an adequate standard of living, including food, clothing, housing, medical and social care, and support if they are unable to work.<sup>xi</sup> Many of these rights are denied to the 700,000 people, including the 180,000 children who are trapped in poverty.<sup>xi</sup>

Some modest progress has been made in reducing child poverty in Wales over the past decade. According to the most recently available data, 28 per cent of children were living in poverty in Wales in 2016-17 to 2018-19, down from 33 per cent in 2009-10 to 2011-12.<sup>xi</sup> Despite this, far too many children are still missing out on their rights as a result of poverty.

Child poverty matters not just because children are missing out on protections afforded by the UNHRC in the short term, but because it also has long term implications. It is well documented that children growing up in poverty are more likely to develop long term health conditions than children in higher income households, whilst children who grow up in poverty are less likely to get the best grades in school.<sup>xi</sup> All of these factors mean that children who grow up in poverty are more likely to live in poverty as adults, with any children they may have being at a heightened risk of missing out on the protections afforded by the UNHRC.

The situation is likely to have deteriorated further as a result of Covid 19.<sup>xi</sup> Families who were already struggling may have seen their incomes fall as a result of losing their job, seeing their working hours cut or as a result of being put on furlough. At the same time, families have still had to find money to cover essential living costs, some of which have increased as a result of families having to spend more time at home.<sup>xi</sup> Staggeringly, recent research by the Joseph Rowntree Foundation and Save the Children found that seven out of ten families with children who were claiming Universal Credit or Child Tax Credits have had to cut back on essentials such as food, utilities, nappies and activities for children (including books) as a result of the pandemic.<sup>xi</sup>

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## **Why has more progress not been made?**

There are three primary drivers of poverty in Wales.

- Work is not providing workers with enough income to enjoy a decent standard of living.
- The social security system is not providing families with enough support.
- High costs of living, especially housing costs.

## **Work and poverty**

Being in work significantly reduces the risk of living in poverty for a whole family.<sup>xi</sup> An expected rise in unemployment as a result of Covid 19 is therefore very concerning.<sup>xi</sup> Despite this, prior to the pandemic, two thirds of children who were living in poverty in Wales lived in households where at least one person was in work, with low pay and insecure work being amongst the factors that are pushing working families into poverty.<sup>xi</sup> Families with children face some additional barriers to earning a decent income through work.

A child's risk of living in poverty halves for every parent that is in work.<sup>xi</sup> Barriers preventing mothers from being in work or being in full time employment are therefore an important driver of child poverty. There is a 10 percentage point gap between the number of men and women who are in work aged 25-49.<sup>xi</sup> The difficulties of balancing childcare around work is a key driver of this gap, with women more likely to take on childcare responsibilities than men.<sup>xi</sup>

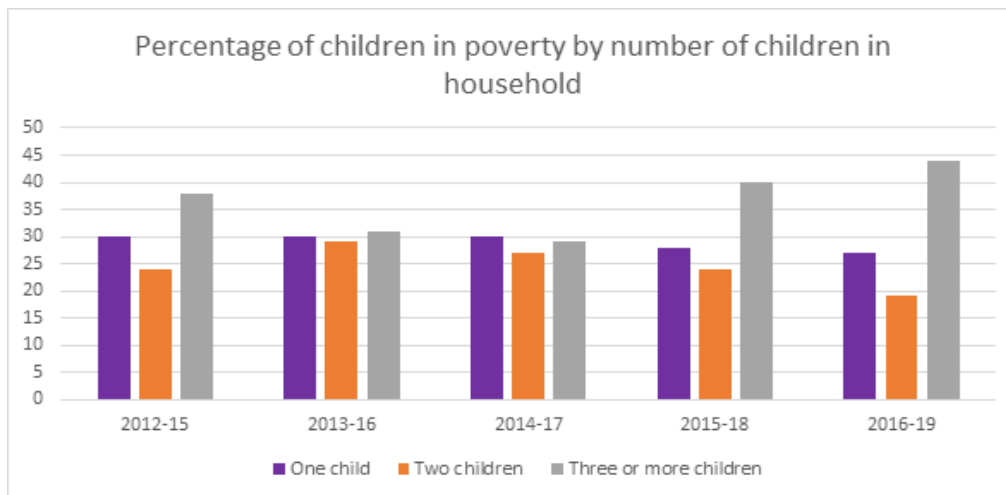
Not only do childcare considerations mean that women are less likely to be in work than men, women are also significantly more likely to work part time for the same reasons.<sup>xi</sup> Only 6 out of 10 women work full time compared with 9 out of 10 men.<sup>xi</sup> This reduces a household's income for two reasons. Parents in part time work earn less by virtue of working fewer hours, but, importantly, people in part time work also earn less per hour than people in full time roles.<sup>xi</sup> These challenges are particularly acute for lone parent households, putting children growing up in lone parent families at particular risk of living in poverty and missing out on the protections afforded by the UNHRC.<sup>xi</sup>

## **Social security and poverty**

The social security system does not provide families with an adequate safety net. Whilst many of the key levers around social security are held at Westminster, there are also some important weaknesses with the approach taken in Wales to supporting families.

At a UK level the issues with the UK Government's welfare reform programme are well known. Despite some temporary changes as a result of Covid 19, fundamental issues such as the 5 week wait for the first Universal Credit payment, monthly assessment periods and the benefit cap remain. Furthermore, there is no guarantee that some of the temporary measures introduced by the UK Government in response to Covid 19 will be retained, with sanctions already being reintroduced to the system.<sup>xi</sup>

One policy that is having a particular impact on child poverty in Wales is the two child limit on benefits. There has been a rapid rise in the percentage of children living in large households who are living in poverty over the past two years. This policy is placing families in real hardship and denying children their rights under the UNHRC, simply because they are living in larger families.



Source: Stats Wales, *Children in relative income poverty by number of children in the household* available at <https://statswales.gov.wales/Catalogue/Community-Safety-and-Social-Inclusion/Poverty/childreninrelativeincomepoverty-by-numberofchildreninthehousehold>

Whilst powers over the social security system per se are not devolved to Wales, the Welsh Government and local authorities provide a range of different types of financial and in-kind support to people on low incomes. Some of these support schemes are targeted at supporting children and young people, yet, shortcomings highlighted in recent research by the Bevan Foundation show that these schemes are failing many and denying some children their right to learn and to access food.<sup>xi</sup>

Amongst the schemes operated by the Welsh Government and Welsh local authorities are Free School Meals, the Pupil Development Grant Access and the Education Maintenance Allowance.<sup>xi</sup> There are four broad concerns about the way that support is currently provided.

### **Eligibility criteria are arbitrary and inconsistent**

Despite having broadly similar goals there is significant variation in the eligibility criteria for many of the support schemes. This makes it difficult for people to know what support they are entitled to and makes it difficult for those administering the schemes to passport families from one support scheme to another, limiting take up.<sup>xi</sup>

Not only are the eligibility criteria for each scheme different they are often set at levels which lock out families who are trapped in poverty from receiving support. For example, to be eligible for Free School Meals a family must either be in receipt of certain legacy benefits or be in receipt of Universal Credit and have an earned income of less than £7,400 a year.<sup>xi</sup> The income cap for those in receipt of Universal Credit was introduced by the Welsh Government over the summer of 2018. At the time, it was estimated that as many as 55,000 children who were living in poverty would be ineligible for support as a result of this additional barrier.<sup>xi</sup> Many of these children are forced to take packed lunches with them to school as their parents cannot afford school meals. These packed lunches are often of poorer nutritional value impacting the development of the children.<sup>xi</sup> The number of children living in poverty but not eligible for Free School Meals because they are not poor enough may have increased further as a result of the falls in income resulting from Covid-19.

### **Accessing support**

It is not just differing eligibility criteria that makes it difficult for people to access all the support they are entitled to from the Welsh Government and local authorities. The wide range of organisations who are responsible for the various schemes mean that families must submit multiple applications to access all the support they are entitled to, risking families missing out on support.

### **The support is insufficient**



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Not all support schemes provide people with sufficient assistance to make a real difference to their lives. The Education Maintenance Allowance for example provides young people from low income families in post 16 education with £30 a week. This figure is unchanged since 2004/05. Had this increased in line with inflation it would now stand at £45 a week.<sup>xi</sup> The limited value of EMA is a barrier preventing young people from being able to afford to continue in education, denying them their right to learn.<sup>xi</sup>

Similar concerns appear when looking at the Free School Meal allowance provided in many secondary schools in Wales. There are concerns that it is inadequate to cover the full cost of a lunch and a drink, leading to children going hungry or forcing them to choose food of poor nutritional value.<sup>xi</sup>

### **Families are faced with other costs where no support is available**

Many parents who receive Free School Meals and Pupil Development Grant Access, struggle with the cost of the school day, be this paying for trips, extracurricular activities or purchasing materials for going to school.<sup>xi</sup> These extra costs can deter some children from going to school or denies them the ability to take advantage of opportunities available to further their learning.

### **Living costs**

The cost of essential items can be too much for many families, pushing them into poverty. By far the most significant living cost faced by most families is the cost of housing, yet for many this is unaffordable. The rent of an average two bedroom home is unaffordable for the lowest quartile of earners in all local authority areas in Wales be this social or private sector rent, with real concerns that this situation could have worsened as a result of the pandemic with many households falling behind on their rent and mortgage repayments.<sup>xi</sup>

Living in unaffordable housing has knock on implications for low income families, leaving them with less money to afford other items such as food, clothing and essential utilities. This creates a real pinch point at times of the year when parents see their incomes reduced or spending increased, for example during the school holidays, leading to many families being pushed into holiday hunger.<sup>xi</sup>

Families with children are often faced with significant extra living costs. The need for more bedrooms for example, means that they must pay more for their housing, whilst the extra food and clothing families must purchase all add up. The cost of childcare, however, is a unique pressure faced by families with children.

Issues with the childcare system in Wales manifests itself in a number of ways. A lack of available childcare is a barrier preventing parents entering work, reducing their household income.<sup>xi</sup> Where childcare is available, it is often unaffordable. A full-time place for a child up to the age of two takes more than half of the take-home pay of a typical female full-time worker, while the cost of an after-school club for two school-age children takes around a quarter of her pay.<sup>xi</sup> This leaves very little left to cover essential living costs.

Households on low incomes may be eligible for help with childcare costs – those receiving Working Tax Credit can receive up to 70 per cent of the costs of childcare up to a maximum of £175 per week for one child and £300 for two or more children, while those receiving Universal Credit can receive up to 85 per cent of the costs up to the same maximum contribution.<sup>xi</sup> It is worth noting that even with this help, parents need to contribute any fees in excess of the maximum as well as contributing their share of the costs.<sup>xi</sup>

The Welsh Government's childcare offer also provides families with extra support. Under the scheme all three year old are entitled to 30 free hours of childcare a week as long as the parents work an average of 16 hours a week.<sup>xi</sup> The fact that the support is restricted only to those families who work 16 hours a week locks out families who are only in part time work from receiving support. These are some of the families which are most at risk of poverty and are least able to afford childcare costs. Furthermore, restricting access only to children whose parents work 16 hours a week excludes children from workless or part working households from the learning opportunities afforded by good quality childcare, breaching their UNHRC rights. The scheme also does little to resolve the pressures faced by families with children under the age of 2, and the support available for parents who work irregular hours is limited.<sup>xi</sup>

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## **Our ideas for change**

We believe that it is vital that a focus on ending child poverty is retained and strengthened if the UNHRC is to be truly put into effect in Wales. To achieve this, it is important that the UK Government, the Welsh Government and Welsh local authorities take action to tackle the three causes of poverty. We have identified some particular measures that could be taken by the Welsh Government and local authorities to ease the grip of poverty in Wales.

### **A Welsh Benefits System**

The range of mostly means-tested schemes that provide cash or in-kind assistance to people below an income threshold, by the Welsh Government and local authorities should be radically overhauled to create a Welsh Benefits System. This new system would offer cash or in-kind services that reach the people who need them, be easy to access, be efficiently and consistently administered and, crucially, improve people's lives by lifting them out of poverty. The key features of our proposed Welsh Benefits System are:

- It focuses on households on low incomes, defined as being eligible for Universal Credit, and uses the same criterion across all schemes.
- It provides cash or in-kind help that is sufficient to make a real difference to households' incomes or costs.
- It has a single point of access for several benefits, using online, phone or postal methods.
- It is based on eligibility for and an entitlement to assistance, not discretion.
- Applicants are treated with dignity and respect.

This would increase the money in families' pockets, loosening the hold of poverty.

### **Universal childcare**

To address the shortcomings with childcare the Welsh Government should introduce a new childcare offer, phasing out the current mix of provision and replacing it with seamless, universal free provision.<sup>xi</sup> Crucially this should be on offer to all parents, regardless of whether they are in work or not. More details about how such an offer could be designed can be found in our recently published report with Chwarae Teg.<sup>xi</sup>

### **Take action to close the attainment gap**

There are a number of measures that the Welsh Government could take to close the attainment gap. These include increasing resources allocated to schools and students with lower attainment, by doubling the Pupil Development Grant and ensuring schools make the most effective use of it.

### **Increase the opportunities available for young people in post 16 education.**

No child should be denied the opportunity to continue in education due to the fact that they are living in poverty. Amongst the actions that the Welsh Government should take is to restore the Educational Maintenance Allowance to its mid 2000 levels, increasing both the eligibility threshold and the value of the grant, and thereafter being uprated by inflation, as part of its efforts to establish a Welsh Benefits System.<sup>xi</sup>

### **A Welsh Emergency Fund**

Many families who currently fall on hard times must rely on discretionary support schemes or charities such as food banks. The system is not fit for purpose. A Welsh Emergency Fund should be established to replace the Discretionary Assistant Fund to ensure families are able to access money if their income falls unexpectedly to substantially below Universal Credit levels, for example, because of the 5 week wait for Universal Credit or unpaid wages.

### **Action on food insecurity**

There are a number of steps that the Welsh Government could take to ensure that every child's rights to food under the UNHRC are safeguarded. These include ensuring that every child from a low income family (i.e.

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all families in receipt of Universal Credit whether in or out of work, including families with no recourse to public funds) is eligible for Free School Meals and Healthy Start Vouchers. The Welsh Government should also roll out a system where families are provided with cash in lieu of Free School Meals over the school holidays.

## Clothing

No child should have their right to learning deprived because they can't afford the correct clothing or equipment. The Welsh Government should strengthen its statutory guidance to schools to cap the cost of compulsory uniform and equipment at £120 per child. As part of the Welsh Benefits System, the Welsh Government should also expand PDG-Access so that so that every child in any family that receives Universal Credit (including children in families with no recourse to public funds) is eligible for a grant and that the grant is available at the start of every school year to reflect children's growth and wear and tear on uniforms.

## More social housing

To solve poverty in Wales it is vital that the Welsh Government invests in a new generation of social housing whilst taking steps to ensure rents remain affordable. Increasing the availability of social housing is an important step that we must take if we are to ease the grip of poverty on Wales.

<sup>xi</sup> Article 25, UN Human Rights Convention <https://www.un.org/en/universal-declaration-human-rights/> and the United Nations Charter on the Rights of the Child, available at - <https://www.childcomwales.org.uk/uncrc-childrens-rights/uncrc/>

<sup>xi</sup> Stats Wales, *Percentage of all individuals, children, working-age adults and pensioners living in relative income poverty for the UK, UK countries and regions of England between 1994-95 to 1996-97 and 2016-17 to 2018-19 (3 year averages of financial years)* available at - <https://statswales.gov.wales/Catalogue/Community-Safety-and-Social-Inclusion/Poverty/householdbelowaverageincome-by-year>

<sup>xi</sup> *ibid*

<sup>xi</sup> For fuller discussion see, Bevan Foundation, *Lifting children out of poverty, the role of the Welsh Benefits System* (June 2020) available at - <https://www.bevanfoundation.org/publications/children-out-of-poverty/>

<sup>xi</sup> Bevan Foundation, *Reducing the impact of Coronavirus on Poverty in Wales* (September 2020) available at <https://www.bevanfoundation.org/publications/coronavirus-poverty-wales/>

<sup>xi</sup> *ibid*

<sup>xi</sup> Joseph Rowntree Foundation and Save the Children, *A lifeline for our children: Strengthening the social security system for families with children during this pandemic* (June 2020) available at - <https://www.jrf.org.uk/report/call-stronger-social-security-lifeline-children>

<sup>xi</sup> Whilst 77 per cent of children in workless households live in poverty, this drops to 39 per cent where one but not all adults are in work and 15 per cent where adults are in work. Stats Wales, *Children in relative income poverty by economic status of household*, available at - <https://statswales.gov.wales/Catalogue/Community-Safety-and-Social-Inclusion/Poverty/childreninrelativeincomepoverty-by-economicstatusofhousehold>

<sup>xi</sup> Bevan Foundation n(5)

<sup>xi</sup> Stats Wales n(8)

<sup>xi</sup> *ibid*

<sup>xi</sup> Chwarae Teg and the Bevan foundation, *Trapped: Poverty amongst women in Wales today* (December 2019) available at - <https://www.bevanfoundation.org/wp-content/uploads/2019/12/Trapped-Poverty-amongst-women-in-Wales-today.pdf>

<sup>xi</sup> *Ibid*

<sup>xi</sup> *ibid*

<sup>xi</sup> *ibid*

<sup>xi</sup> *ibid*

<sup>xi</sup> Stats Wales, *Children in poverty by family type and work status* available at - <https://statswales.gov.wales/Catalogue/Community-Safety-and-Social-Inclusion/Poverty/childreninrelativeincomepoverty-by-familytype-workstatus>

<sup>xi</sup> Bevan Foundation n(5)

<sup>xi</sup> Bevan Foundation n(4) and Bevan Foundation, *Learning a living, better support for post-16 learners* (February 2020) available at - <https://www.bevanfoundation.org/publications/learning-a-living-better-support-for-post-16-learners/>

<sup>xi</sup> *ibid*

<sup>xi</sup> *ibid*

<sup>xi</sup> Bevan Foundation n(4)

<sup>xi</sup> *ibid*

<sup>xi</sup> *ibid*

<sup>xi</sup> Bevan Foundation n(19)

<sup>xi</sup> *Ibid*

<sup>xi</sup> Bevan Foundation n(4)

<sup>xi</sup> *ibid*

<sup>xi</sup> Bevan Foundation n(5)

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<sup>xi</sup> Bevan Foundation, 'Kids on the Breadline, Solutions for Holiday Hunger' (7 May 2020) available at - <https://www.bevanfoundation.org/publications/kids-on-the-breadline-solutions-to-holiday-hunger/>

<sup>xi</sup> Chwarae Teg and Bevan Foundation n(12)

<sup>xi</sup> ibid

<sup>xi</sup> ibid

<sup>xi</sup> Ibid

<sup>xi</sup> ibid

<sup>xi</sup> ibid

<sup>xi</sup> ibid

<sup>xi</sup> Ibid

<sup>xi</sup> Bevan Foundation n(19)

## RESPONSE 33 - RCPCH (Youth)

The Royal College of Paediatrics and Child Health (RCPCH) is responsible for training and examining paediatricians, setting professional standards and informing research and policy. RCPCH has over 19,000 members in the UK and internationally. We work to transform child health through knowledge, research and expertise, to improve the health and wellbeing of infants, children and young people across the world.

Young people aged 11-17 from RCPCH &Us and connected organisations, RCPCH Members and staff in Wales took part in a survey to prioritise key issues for the UNC. The key issues within the survey were identified using a grounded theory approach from responses by children and young people to RCPCH &Us activity, consultation and projects between 2018-2020 alongside evidence identified through policy work at RCPCH.

### Priority areas for consideration in the UNCRC review (full data responses will be submitted next week)

- **General UNCRC provisions:** Lack of services involving children and young people in decisions that affect them
- **Poverty/Housing:** Lack of strategy to reducing health inequalities and child poverty (including food insecurity, poor quality housing, poor indoor air quality)
- **Safeguarding:** Lack of routine data collection on child protection referrals
- **Education:** Lack of support for children and young people with health needs to actively participate in school (trips/extra-curricular) and be supported to maintain good attendance at school (challenge due to their conditions)
- **Health:** Increasing prevalence of mental health conditions combined with poor provision of mental health support services, lack of understanding and awareness of GP's/A&Es of long term conditions and how to manage them (e.g. Sickie Cell, Asthma, Epilepsy, Diabetes)

### New data available since the last UNCRC review

- [State of Child Health](#) – evidence published for Wales in 2020 by RCPCH linked to indicators to support improvements in child health outcomes
- [Impact](#) of COVID-19 on CYP – evidence published in 2020 by RCPCH &Us children and young people
- [Inside Story](#) – evidence published in 2020 by RCPCH relating to the impact of poor indoor air quality on children and young people's health
- [Rights Matter](#) – evidence published in 2019 by RCPCH relating to improving child health (Article 24)
- [Poverty and child health: views from the frontline](#) – evidence from RCPCH paediatricians published in 2017 about the impact of Poverty on child health outcomes

Further information will come next week from the RCPCH Wales office which will include data linked to regression on the points above and key lines of enquiry for the review.

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## RESPONSE 34 - Early Years

## RESPONSE 35 - EYST WALES

EYST Wales submitted 5 pdf documents as evidence in support of the inquiry. The documents are three forums and two responses to Senedd inquiries.

- All Wales EYST forum on COVID impact on young people
- All Wales EYST forum Return to Schools
- EYST Wales response to Senedd CYPE Committee COVID inquiry
- All Wales EYST forum submission to above inquiry
- All Wales EYST forum impact of COVID on BAME young people

## RESPONSE 36 - SWANSEA MUSEUM

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? *(Please provide as much information as you can to justify your reasons)***

In relation to Article 31 and culture and heritage.

In Swansea we feel overall, that there are many positives in relation to children accessing culture and heritage but there are a few gaps.

Decline in school visits

We have noticed a reduction in school visits in recent years and prior to Covid 19. Anecdotal evidence from us and other museums in the area indicate that this is due to the squeeze on school budgets and in particular the coach cost involved with trips outside school.

BAME Children

Another area of concern is we feel that museum collections need to reflect the communities that make up the population. Objects tend to be donated at a later stage in life or left by will. Newer communities in an area are therefore not represented and children from those communities are likely to feel excluded. We feel that specific object purchase budgets and or targeted funding would be a significant help.

Children with a Disability

Schools are regular visitors to the museum but museum objects by their very nature cannot be touched. We feel that specific funding for sensory and handling objects again would make a significant difference. Targeted funding to help with facilitation for more bespoke visits for young people with sensory issues or a disability e.g. autism or visually impaired groups, so delivery could be more focused to their learning needs and delivered in smaller groups

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**What information or evidence do you have to support this? (*Please provide as much information as you can, such as links to reports, case examples, statistics etc.*)**

Anecdotal

**What policy or changes in law need to happen and why? Any gaps?**

Reserved budgets for school visits and targeted access

**What recommendations do you wish to make to ensure positive change for children?**

As above

## **RESPONSE 37**

RESPONDENT DID NOT WISH TO BE NAMED AS A CONTRIBUTOR IN THE FINAL REPORT. HOWEVER THE EVIDENCE RECEIVED IN RESPECT OF THEIR PRIORITIES (BELOW) WERE CONSIDERED IN THE DEVELOPMENT OF THE REPORT

- Children's well being post lock down and through the continuation of uncertainty following the pandemic
- Online safety
- Sharing knowledge on appropriate internet and screen time use

## **RESPONSE 38 - TOM JONES, CHILDREN'S RIGHTS PARTICIPATION OFFICER**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (*Please provide as much information as you can to justify your reasons*)**

CYP who are looked After need to have the right information at the right time to make the best decisions during their journey thru care

CYP from Swansea who are Care Experienced have told us in consultations and in conversations with practitioners that it takes too long to have calls answered, they find it difficult to access their information and they are not informed when staff change or when staff go on sick leave

This has been exacerbated over covid

**What information or evidence do you have to support this? (*Please provide as much information as you can, such as links to reports, case examples, statistics etc.*)**

I have been in post as Children's Rights and Participation for over 10 years and this is a recurring theme during my tenure from talking to CYP.

We are reviewing and rewriting the Swansea Children's Services Comms policy and have been working with CYP over the Summer to address this and we have consultation notes to back this up.

Also there is a link between this dearth of information sharing and an adhoc Delegated Authority/Parental Responsibility policy in the regions as CYP in Swansea are not aware of who has sign off for what part of their life

**What policy or changes in law need to happen and why? Any gaps?**

A stronger DA/PR Protocol with greater accountability if inaccurate

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**What recommendations do you wish to make to ensure positive change for children?**

Greater accountability by Children's Services to the voice of Care Experienced CYP

**RESPONSE 39 - GARY MAHONEY, EARLY YEARS COORDINATOR, SWANSEA**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? *(Please provide as much information as you can to justify your reasons)***

Children have rights from birth but this is often not considered by practitioners:

Voice/Autonomy:

Recognising that young children have competency to be involved in decisions that affect them. An example would be that practitioners often decide what is best for young children without consulting them, this can be on a range of topics, such as nutrition (i.e. lack of choice of fruit at snack times, or when they can access drinking water). Other examples include would be gender stereotyping and nutrition.

Nutrition:

Although many practitioners focus on healthy nutrition, there are still plenty of examples where, practitioners assume that because they work with children, they must provide 'sweets, squash and biscuits'.

Physical Activity:

Ensuring that the youngest children are given adequate opportunity to be active. To help counter the growing body of evidence (see below) that suggest children are not meeting their developmental physical needs.

Policy Making:

In terms of a priority, there is no clear national strategy that holds practitioners or authorities to account over tackling childhood obesity. In Leeds, where childhood obesity in age 4/5 years has been reduced, a clear strategy and 'buy in' from practitioners was evidenced as a reason behind this (see below).

The Pathfinder programme is a welcome policy, but the process of scrutiny and accountability on achieving integrated services needs to be robust.

**What information or evidence do you have to support this? *(Please provide as much information as you can, such as links to reports, case examples, statistics etc.)***

Voice and Autonomy:

Children from the youngest age can be involved, and affect, decisions that affect their lives. An example include;

- CSA consultation in Swansea with 2/3 year olds, case study (pg 9-14)

- Learning report from Sue Lyle (to be complete)

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UNCRC and Early  
years course handbook

- GSGS report from Middlesex University

St Helen's Flying Start  
GSGS Report FINAL.pdf

- Example of a Big conversation county wide forum) extended to primary age children age 5+ years (instead of 11+ years)

Primary School Big  
Wellbeing Conversations

- Best Start consultation around campaign characters

who-are-the-jacks.pdf

- Children's rights early years staff training – changing mind-sets around competency of young children

EY workforce  
development CR - example

- Children can cook – Healthy pre school participatory cooking programme

#### Nutrition:

- Experience as Healthy pre school co-ordinator, observations through assessment (evidence through email trail and early years settings)

#### Physical Activity:

Physical  
development in the early years

#### Policy Making:

<https://www.phc.ox.ac.uk/news/leeds-becomes-first-uk-city-to-lower-its-childhood-obesity-rate>

#### **What policy or changes in law need to happen and why? Any gaps?**

##### Voice and Autonomy:

More explicit policy toolkits detailing statutory duties around children's voice in early years.

#### **What recommendations do you wish to make to ensure positive change for children?**

##### Voice and Autonomy:

Workforce development around young children as competent.

More detail in statutory duty on participation around early years.

##### Nutrition:



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A clear national strategy, with robust accountability measures should be developed. This could be discharged through PSB's.

**Physical Activity:**

Greater emphasis on the consideration of the evidence based SKIP programme as delivered by University of Wales Trinity St David, and the Wales Institute for Physical Literacy

**Policy Making:**

To consider other countries and counties response to childhood obesity and learn and implement.

## **RESPONSE 40 - KATIE SPENDIFF, CHILDREN'S RIGHTS COORDINATOR, SWANSEA**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (Please provide as much information as you can to justify your reasons)**

Participation rights enabling children to be involved in decision affecting their lives are underpinning in the UNCRC, and yet remain a category of rights that can be overseen, ignored, or vetoed when adults act in the best interests of children instead. Quality assurance, monitoring and evaluation of quality, accessibility and equity of participation opportunities as a human right needs to be strengthened. Participation is not seen as everybody's business and a clearer strategy for ensuring robust mechanisms is required to address the following gaps:

**Quality:**

- National Participation Standards need to be strengthened and robust accountability of organisations required.
- More audit of the quality of mechanisms for participation are required, particularly in respect of the reach of opportunity for vulnerable children to engage in county wide participation mechanisms.
- Closing the loop about how what cyp say influences decisions must be strengthened.

**Accessibility:**

- Access to being heard for any category of vulnerable child is well-known. E.g ALN children, children whose first language is not English, homeless young people, care experienced children, etc are less likely to be able to engage in traditional participation mechanisms. More robust scrutiny of what authorities do/need to do to better facilitate accessible opportunities for ALL children and young people to engage in civic governance and policy decisions that affect their own lives. Opportunity for new ways of participation have arisen during lockdown (digital) but concerns exacerbated about engaging hardest to reach.
- Equitable opportunities for all young people to be heard need to be scrutinised. Clear strategies for how those who struggle to be heard need to be emphasised. If all children have the right to be heard, how do we ensure this? Thought and guidance needs to be given to the support required for those who hold the statutory duty for participation (in local authorities) within their remits. How can WG ensure that LA's can adequately monitor and report that the widest possible participation of CYP are engaging in decisions that affect them.
- Age: work to engage younger children remains a gap in Wales. Recognising that young children have competency to be involved in decisions that affect them is not a given in Early Years. Work is required to upskill and enable practitioners in early years to understand and facilitate the engagement of young children. This includes both recognising children as able and in developing opportunities that are appropriate and relevant to young children based on their age and maturity. Involvement in county wide participation work is often limited to young people in secondary schools. Big Conversations in Swansea have been reviewed and extended to involve younger children, recognising the worth of their views and input

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into decisions that affect their lives (see example in evidence). Schools are very good at integrating pupil voice in primary but this needs to be strengthened through strategy for county wide and national participation work.

**What information or evidence do you have to support this? (*Please provide as much information as you can, such as links to reports, case examples, statistics etc.*)**

Academic review of local enactment of policy that mirrors Children's Rights Measure, showing how easily participation can be forgotten, overseen, or given less weight or priority in comparison with, for example, safety or education:

Katie Spendiff MSc  
Dissertation.docx

There is a gap in workforce development for EY practitioners in children's rights, and understanding how rights based issues affect early years. Workforce development sessions in Swansea have been successful in making links between the UNCRC and how children are seen as competent. These have been facilitated to national organisations suggesting appetite to learn more in this area. Workforce development session run locally have been received with success, and an appetite further afield has led to national sessions facilitated by Swansea. Example:

EY workforce  
development CR - ex

South Wales Participation Workers notes – outlining opportunities and concerns for engaging hardest to reach (to be written up from meeting on 8.9.20) – to follow.

Children from the youngest age can be involved, and affect, decisions that affect their lives. Examples include;

- CSA consultation in Swansea with 2/3 year olds, case study (pg 9-14)

Sections 7, 9 and 10  
AW review.doc

- Learning report from Sue Lyle (to be complete)

UNCRC and Early  
years course handbo

- Example of a Big conversation county wide forum) extended to primary age children age 5+ years (instead of 11+ years)

Primary School Big  
Wellbeing Conversati

These can be used to place emphasis that participation in EY is not only essential but achievable.

Difficult to evidence lack of feedback, but continuous issue in Swansea. Currently, a working group has been established to address the issue and to strengthen participation standards within infrastructure.

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### What policy or changes in law need to happen and why? Any gaps?

Participation policy at a centralised, national level is missing in general. A duty for participation arrangements is not explicit enough in respect in the quality and character of participation for ALL. Work is required to upskill and enable practitioners in early years to understand and facilitate the engagement of young children. This includes both recognising children as able and in developing opportunities that are appropriate and relevant to young children based on their age and maturity

### What recommendations do you wish to make to ensure positive change for children?

- A focus on voice, and listening to children should be strengthened and prioritised within Children's Rights Scheme.
- National Participation Standards need to be strengthened and robust accountability of organisations required. Accountability to the standards should be included with SLAs and commissioning contracts, and be explicit within the statutory duty for participation (Child and Families Measure (2010))
- More audit of the quality of mechanisms for participation are required, particularly in respect of the reach of opportunity for vulnerable children to engage in county wide participation mechanisms.
- Clear strategies for how those who struggle to be heard need to be emphasised. Toolkits on participation mechanisms wider than youth forums are welcomed, enabling more accessible spaces for children and young people to be heard in their own right, rather than representatives of cohorts.
- Support for those who hold the statutory duty for participation (in local authorities) within their remits is required. WG need to ensure that LA's can adequately monitor and report that the widest possible participation of CYP are engaging in decisions that affect them, and have opportunity to highlight and address challenges in doing so.
- Workforce development around young children as competent should be developed.
- More detail on statutory duty on participation around early years would be welcomed.

## RESPONSE 41 - CLLR. MARY SHERWOOD, POLICY REDUCTION POLICY DEVELOPMENT COMMITTEE, SWANSEA

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? *(Please provide as much information as you can to justify your reasons)***

Helping families achieve Minimum Income Standard. Ensuring that disposable income is adequate for a basic, minimum standard of living, covering the costs of necessities, can be achieved by increasing incomes **and/or** reducing the cost of essentials. The latter could be given more attention. Advances in free childcare support, breakfast clubs etc are welcome: these ideas must be built upon. Nutrition as well as hunger is an issue: mass farming methods are not globally responsible or sustainable and do not deliver the best nutrition: AGRICULTURE policy should link to HEALTH policy as Wales seeks to feed itself post-Brexit. **Transport** needs urgent attention. Trips to the supermarket are increasingly costly, as is the bill at the checkout. Food deserts are still a problem. Increasing food and energy security, reducing food, energy and transport bills and cutting childcare costs will bring down the MIS for Welsh families. Benefit take-up support is also needed, on a proactive outreach basis so families don't have to work so hard to navigate opaque and confusing systems to access their entitlements. Wales should learn from Scotland and embed "Dignity, Fairness and Respect" in the benefits system, whether or not aspects of welfare benefits are devolved.

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**What information or evidence do you have to support this? (*Please provide as much information as you can, such as links to reports, case examples, statistics etc.*)**

There are so many reports and pieces of research to support these approaches. Child Poverty has been being discussed in earnest in the UK for over 20 years and the position has shifted very little. Interventions to support isolated outcomes like education have failed to deliver significant impacts because the benefits are lost in the broad context of a family struggling financially.

**What policy or changes in law need to happen and why? Any gaps?**

Sorry – don't have the legal knowledge to answer this. I expect specific legal changes would be needed to implement the above but I can't comment on what they are.

**What recommendations do you wish to make to ensure positive change for children?**

As well as linking agriculture to health policy, pursuing greater energy and food security/sovereignty for Wales post-Brexit, seeking greater nutrition density in Welsh produce to feed Welsh families, embedding "Dignity, Fairness and Respect" in the benefits system, seeking to reduce household expenditure on food, fuel, transport, childcare and other essentials, ideally through interventions based on the principle of universality and better promoting the Real Living Wage (ideally making this compulsory for all public bodies) I would recommend pressing for a trial of a Universal Basic Income in Wales

## **RESPONSE 42 - SWANSEA PLAY SERVICE**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (*Please provide as much information as you can to justify your reasons*)**

- **The loss of play opportunities and play space and the detrimental impact on children and young people as a result**

One of the main issues arising from the 2019 Play Sufficiency Assessment and other documentation is the reduced opportunity to get out and play in local areas, particularly due to prevalence and speed of car users. It is rarely safe for children to walk to friends, play out in their community and perhaps most ominously, even out in cul de sacs or other residential areas where car users – many of whom are parents – will drive in a manner that would leave little chance for a child stepping out to get a ball or cross the road.

20 mph signs are largely ignored and very little regard for others is shown.

It is also a concern in Swansea, that main arterial roads are often so time consuming to navigate due to traffic light arrangements or others, that road users are increasingly using residential rat runs to get ahead of the queues. The 'easy' option is then to put traffic calming into the residential streets, which does not solve the problem as it is generally still quicker, there needs to be a focus on making main roads the most viable option to save diverting cars onto side roads where children are often at play.

- **The loss of recognition of Article 31 and the Right to Play, as opposed to providing play opportunities to support other agenda**

There is a growing concern that play as every child's right is receiving reduced consideration within policy and planning. Whilst the increased recognition of play's contribution to addressing issues of poverty, family cohesion and supporting the most vulnerable is beneficial, the significance of play as 'every child's right' is reducing. Universal play provision is taking a backwards step across the board and play services are increasingly required to contribute to other agenda. As a result, opportunities for and funding towards 'play for play's sake' is largely disappearing.

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- **The importance of schools as offering a play experience that isn't always utilised**

It is recognised that schools have potential to provide a valuable play opportunity and that (as a separate issue) learning through play is invaluable.

We are increasingly hearing of play time being lost, play space being reduced and the PSA target of increasing access to school grounds is in conflict with policies around reducing public access on school grounds (pre-Covid)

**What information or evidence do you have to support this? (Please provide as much information as you can, such as links to reports, case examples, statistics etc.)**

2019 Swansea Play Sufficiency Assessment

<https://www.swansea.gov.uk/playsufficiency>

Happen (Swansea University) Research into How Children are Coping with Lockdown

<https://popdatasci.swan.ac.uk/happen-at-home-survey-shows-that-children-are-being-more-active-and-feel-safer-in-their-local-areas-during-lockdown/>

**What policy or changes in law need to happen and why? Any gaps?**

Further consideration needs to be given to developing an approach to residential areas in particular that treat the child as a greater priority to the car user.

Alongside this, traffic management should be encouraged to improve flow on main arterial roads to encourage road users to utilise them.

Current guidance on play sufficiency should reinforce article 31 and ensure play is supported in its own right, not just as a tool for addressing other agenda.

Guidance to schools should emphasise the importance of play as a right, not a privilege that is removed due to unrelated issues.

School grounds which offer play opportunities should be made available wherever possible.

**What recommendations do you wish to make to ensure positive change for children?**

As above

Additionally, making authorities and other services accountable for children's rights.

## **RESPONSE 43 - BIRCHGROVE COMPREHENSIVE SCHOOL**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (Please provide as much information as you can to justify your reasons)**

I think there will be a massive emotional and academic disparity now between pupils. Some are more resilient and have parents that have been able to do home schooling, others are struggling emotionally or have not completed any work whilst off school. I think these pupils need to be identified and basic catch up and support is needed. Supporting those more vulnerable emotionally and academically is needed before the disparity grows

**What information or evidence do you have to support this? (Please provide as much information as you can, such as links to reports, case examples, statistics etc.)**

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Increased reports of domestic violence in Swansea around vulnerable pupils, calls and conversations with parents about their child's mental health and emotional state and the range of work returned to teachers whilst on lockdown

**What policy or changes in law need to happen and why? Any gaps?**

A push for mental health to be prioritised to support young people to become more resilient and able to adapt to change and be successful. A change to the referral system and clearer, unified and available advice lines for parents/carers and young people

**What recommendations do you wish to make to ensure positive change for children?**

Community support out of school hours for parents to call for advice and guidance on their child's mental health and academic ability

## **RESPONSE 44 - CLLR. JENNIFER RAYNOR, CABINET MEMBER EDUCATION, SWANSEA**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? *(Please provide as much information as you can to justify your reasons)***

Hearing the voices of children and considering how rights are applied when children's wishes and interests conflict.

Assisting children of all ages to have the vocabulary and confidence to make their views and opinions known.

**What information or evidence do you have to support this? *(Please provide as much information as you can, such as links to reports, case examples, statistics etc.)***

Estyn Reports on some Swansea school comment on the ability of children to self-assess, set own targets and show empathy where Rights are embedded and supported by restorative language and behaviour training.

Bad examples are watching adult mediators not use or understand children's comments at Looked After Children sessions

**What policy or changes in law need to happen and why? Any gaps?**

Education and training and re-design of EIAs to reduce tick box approach and silo working.

**What recommendations do you wish to make to ensure positive change for children?**

We need to ensure information is child friendly and be brave enough to sometimes say we disagree with a child and give reasons

## **RESPONSE 45 - COMMUNITY INTEGRATION TEAM, SWANSEA**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? *(Please provide as much information as you can to justify your reasons)***

Listening to children and young people and allowing them to be a part of decisions that affect them and providing them with opportunities to be involved in the implementation of those decisions.



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Young people not being aware of their right to be heard the right to relevant information and supporting young people to access that right i.e identifying when their rights are not being met, understanding what hate crime is, and creating common understanding of this across varied platforms and communities. Lack of robust reporting systems in place for young people to say when they are not accessing their rights.

Lack of understanding and commitment from adults and stakeholders to provide ongoing support to young people who are victims of hate crime and therefore not receiving their right to be safe.

The right to receiving information and support that is relevant and appropriate to the needs of the young person – ie, free, confidential, timely and appropriate support for LGBTQIA+ young people (or signposting to relevant agencies and organisations). Support and information for children young people that are intersectional in communities (e.g BAME and LGBTQIA+).

Young People's exposure to extremism in an online and offline context. Awareness of issues of extremism such as political and religious beliefs, violence against women and girls, rejecting democracy and harmful conspiracy theories etc.

**What information or evidence do you have to support this? (*Please provide as much information as you can, such as links to reports, case examples, statistics etc.*)**

Show Racism the Red Card's Racism Exclusions Report (updated February 2020) shows that some schools may not reporting hate crimes accurately. This could be a result of a poor reporting mechanisms and lack of training for staff in what constitutes an issue to report and how to report it.

<https://www.theredcard.org/publications>

[https://ec.europa.eu/home-affairs/what-we-do/networks/radicalisation\\_awareness\\_network\\_en](https://ec.europa.eu/home-affairs/what-we-do/networks/radicalisation_awareness_network_en)

**What policy or changes in law need to happen and why? Any gaps?**

No requirement on schools to submit Hate Crime reporting on a regular basis to Local Authorities. There should be a statutory requirement for all schools to submit hate crime reporting data to the relevant authorities to map the picture in Wales more accurately and allow for a more targeted response in terms of proactive training and reactive support for victims.

**What recommendations do you wish to make to ensure positive change for children?**

Recommend that

Increase awareness of hate crime among children and young people – what it is and how to identify it for themselves and others.

Increase awareness of how to report hate crime through robust and sustainable mechanisms.

Increase support available in the first instance and provide ongoing support for victims of hate crime.

Embed UNCRC and Hate Crime awareness into PCGE teacher training programmes.

Estyn school inspections to require a report on the levels of hate crime reporting and the measured responses to the reports and ongoing support provided as a result.

Reporting mechanisms should be accessible and relevant to young people (eg, through an app or popular websites).

Information about Victim Support should be available in different formats and languages across all schools, colleges and other institutions.

Standardised reporting procedures for bullying and hate crime so that policies and mechanisms are the same across counties or Wales as a whole.

WG should dedicate funding and resources to make this happen.

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## **RESPONSE 46 - PRIMARY PHASE TEAM - EDUCATION**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (Please provide as much information as you can to justify your reasons)**

### **Emotional & Mental Health**

The mental health of children and young people was a growing concern prior to the pandemic crisis. Schools were increasingly seeking professional development to deepen knowledge and understanding of mental health and how to support and nurture positive mental health from people like Charlotte Lowe (who spoke at a headteacher meeting at in the last academic year).

The WG's action plan, Our National Mission, identifies the importance of mental health. This four-year plan ends in 2021. Any new plan should continue to prioritise the ambition for our children and young people to have strong and positive mental health and for schools to continue to deepen and extend their knowledge and understanding of the how to identify a young person experiencing difficulties with their emotional and mental health and, of course, how to support those individuals.

As mentioned above, this area as a growing concern for schools before the pandemic. It is even more so now. WG recognise this in their Learning Guidance issued to schools in preparation for the autumn term.

### **Education**

WG remains committed to its programme of educational reform. WG should work with leading experts and the National Academy of Educational Leadership to provide unambiguous, practical guidance for schools to use when planning their new curriculum using WG's existing framework. This is especially important now, as many schools had planned to release teachers to develop their approach to preparing and adopting the CfW. This will be difficult and possibly counter-productive now as teachers need to be with their pupils to address the impact of the pandemic and closure of schools on their learning and progress.

There have been recent moves away from a high-stakes accountability system and this needs to continue. Schools have felt under pressure to attain performance indicators that do not align with the Curriculum for Wales framework and the four purposes. The suspension of categorisation and inspections is welcome, especially at this time. A more mature way for schools to evaluate and self-improve needs to develop. Assessment should be formative and diagnostic, helping schools identify what their learners need and allow them the freedom to provide it.

### **Child Poverty**

The attainment gap of children and young people from disadvantaged families widens as they progress through the phases and stages of education. This is despite huge amounts of money being invested to address this. Why hasn't this investment had the desired effect? What can be done to provide an education system of true equity? A system that has high expectations and aspirations for all learners, identifies what learners' needs are to help them achieve those expectations and aspirations and puts in the right support at the right time to help them get there.

For Swansea LA, securing improved communication between relevant stakeholders and directorates, particularly under child poverty, vulnerable and disadvantaged pupils.

**What information or evidence do you have to support this? (Please provide as much information as you can, such as links to reports, case examples, statistics etc.)**

### **Child Poverty**



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## **Challenging Education - Supporting Schools to Tackle the Barriers Faced by EFSM Learners - Session One**

### **The challenges facing schools and pupils in September 2020 (NfER co-funded by Nuffield Foundation)**

Research investigates the impact of Covid-19 on mainstream primary and secondary schools in England during the June/July partial return.

Survey response from 1176 senior leaders and 1782 teachers in 1305 (7.6%) primary schools and 898 (26.5%) secondary schools.

- Nearly all teachers indicated that pupils had fallen behind (on average by 3 months).
- 61% report the “disadvantage gap” has increased.
- Catch-up needs to be a long-term endeavour rather than a ‘quick fix’.
- In a partial lockdown, ‘blended learning’ must provide equity for pupils.
- Schools need to take an evidence-informed approach to preparing for local lockdown.

### **What policy or changes in law need to happen and why? Any gaps?**

Legislation linked to categorisation – i.e. remove the need for categorisation permanently.

### **What recommendations do you wish to make to ensure positive change for children?**

Continue the good work of the 17-21 National Mission in a new action plan and ensure all aspects of the education system support the realisation of the ambitions of the CfW and do not stifle it. The work of school improvement and support officers (Challenge Advisers as is) can contribute to this.

Continue the move away from high-stakes accountability and create an accountability system that monitors what we value and strive for, i.e. the four purposes.

Promote research and evidence-led strategies/approaches to ensure leaders, teachers and other staff in the system are well-informed on the best methods to improve outcomes for children.

Continue and extend the useful work of the Children’s Commissioner for Wales.

## **RESPONSE 47 - GLYNN VIVIAN ARTS CENTRE**

### **What are the main issues that the Welsh Government and public bodies should be prioritising and why? *(Please provide as much information as you can to justify your reasons)***

We would like to see Asylum Seekers and Refugee families given free bus passes. They are often housed on the outskirts of the city and bus prices are high. This prevents them from fully participating in the cultural offer of the city centre. We currently fund travel to our Welcome Art Class but it is impossible to afford as many travel passes as are needed. We feel this is a wider issue that prevents Asylum Seekers and Refugees fully integrating into society.

We also feel both primary and secondary schools do not have enough money to visit cultural venues as often as they would like. Swansea is very lucky to have a gallery with a strong contemporary art programme and a historical collection. Our learning team provide a range of educational packages. It would be great if more schools were able to afford to come to build cultural awareness into the curriculum from first hand experiences.

### **What information or evidence do you have to support this? *(Please provide as much information as you can, such as links to reports, case examples, statistics etc.)***

We have over 8 years experience working with Asylum Seekers and Refugees and regularly hear of difficulties in terms of location of housing in relation to local amenities and the isolation this causes.

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Our information regarding school visits is largely anecdotal in conversation with local schools and teachers.

**What policy or changes in law need to happen and why? Any gaps?**

Free bus passes for Asylum Seekers and Refugees

A higher percentage of money given over to cultural visits by schools

**What recommendations do you wish to make to ensure positive change for children?**

That first hand experience of Art and Culture be given higher priority and that the obstacles to participation be removed.

**RESPONSE 48 - GORSEINON PRIMARY SCHOOL**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (Please provide as much information as you can to justify your reasons)**

**Firstly**:-At the present time I believe it is necessary for the Welsh Government to commit and further develop all aspects – provision, entitlement, resources and awareness for home learning. This could be tackled by providing each child with the same resource to enable home learning, in addition free wifi in all homes. Extended facilities would then be provided by home as their choice. Thus providing each child with the right to an education, use of technology, freedom to learn, non-discriminatory, supporting all children at all levels,

On returning to work this week I have chatted with the children and there has been a huge disadvantage to those pupils who were not able to access their accounts and in some cases not understanding how to access and learn from home. Therefore parent/carer classes and instruction would need to take place so that parents can understand HWB and how their child is to access all work provided.

Maybe Primary children could also have 'Teams' provided so that they can chat to teachers whilst learning from home.

Costing would involve providing a tablet for each child.

Plus ensuring wifi is enabled within areas of the community to be accessed by each tablet.

Tablets linked to HWB accounts and all learning tools to be accessed from HWB set by responsible teachers and specific tasks by class teachers. But available to all.

Parent instruction on how to access and use HWB with their child.

Community teachers reaching out to children who are below standards and require consistency within their learning.

**Secondly** I believe there is a need to further develop the work on tolerance and speak out against hate crime. Children should see others as no different to themselves and respect each other. The hatred that is provoked from what ever source needs to have a positive balance within schools. So any/all aspects of bullying, prejudice, racism is not tolerated and positive attitudes encouraged and developed.

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**What information or evidence do you have to support this? (*Please provide as much information as you can, such as links to reports, case examples, statistics etc.*)**

Pupil conversation. Evidence of pupil work on HWB during lockdown, in some cases no evidence at all.

**What policy or changes in law need to happen and why? Any gaps?**

Probably would need guidance on establishing safe networking for children whilst learning from home. Improved IT facilities, parent charters and agreement which would need to be provided

**What recommendations do you wish to make to ensure positive change for children?**

Technology needs to have an equal footing for all pupils to be able to access in the home setting.

## **RESPONSE 49 - YGG LLYNDERW – CHILDREN'S RIGHTS LEADER**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (*Please provide as much information as you can to justify your reasons*)**

Emotional and mental health of children.

Following uncertain times for children in Wales during Lockdown period following Covid-19, many children under the age of 18 will have experienced challenging times at home, i.e. physical abuse, emotional abuse, domestic abuse, neglect and so on.

On their return to school, children will find the changes difficult and will need time and support to make this transition run as smoothly as possible.

**What information or evidence do you have to support this? (*Please provide as much information as you can, such as links to reports, case examples, statistics etc.*)**

Experience from working as a teacher in a Primary school – conversations with parents who have experienced challenging situations at home – anxiety, behavioural issues and so on.

<https://www.ox.ac.uk/news/2020-06-16-children-show-increase-mental-health-difficulties-over-covid-19-lockdown>

<https://www.bbc.co.uk/news/health-53037702>

**What recommendations do you wish to make to ensure positive change for children?**

As schools face the challenges of vulnerable children returning to school, extra funding is required in order to put in place the support that they need following lockdown.

This could fund extra staff members to run nurture groups, counselling, support children with Additional learning needs, who very much need extra support at this time in particular.

## **RESPONSE 50 - OLCHFA SCHOOL**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (*Please provide as much information as you can to justify your reasons*)**

Mental health- every year we see more and more pupils suffering with mental health conditions and we have limited resources to refer them to with long waiting times to be seen.

health inequalities- local authorities have different approaches to referrals

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Neurodevelopmental assessments- it's now taking more than 2 years for pupils to get to the front of the queue to be seen.

Employment opportunities for school leavers

Prioritise more vocational training for pupils

EAL- encouraging more community and cross cultural links

Better provision for trans pupils in school- toilets, changing facilities, uniform options.

**What information or evidence do you have to support this? (*Please provide as much information as you can, such as links to reports, case examples, statistics etc.*)**

[https://youngminds.org.uk/blog/new-figures-show-a-rise-in-young-peoples-mental-health-problems-since-](https://youngminds.org.uk/blog/new-figures-show-a-rise-in-young-peoples-mental-health-problems-since-2004/#:~:text=One%20in%20eight%20(12.8%25),2004%20to%205.8%25%20in%202017.)

[2004/#:~:text=One%20in%20eight%20\(12.8%25\),2004%20to%205.8%25%20in%202017.](https://youngminds.org.uk/blog/new-figures-show-a-rise-in-young-peoples-mental-health-problems-since-2004/#:~:text=One%20in%20eight%20(12.8%25),2004%20to%205.8%25%20in%202017.)

Health inequalities- as a result of the Covid-19 pandemic pupils and parents waiting for health care/treatments and assessments have had these pushed back indefinitely.

Pupils at Olchfa have been told that they are looking at a minimum of a two year wait for neurodevelopmental assessments.

School leavers are struggling to get employment or apprenticeships as there are so few available.

This has been made worse by the downturn in many sectors following lockdown.

Schools need to be able to provide more flexible learning for pupils who cannot access the complexities of GCSE's. More vocational options for low ability pupils- e.g. bring back life skills courses.

Local authorities need to develop more opportunities for blended communities or community inclusion following rising backlash to the BLM movement.

There should be statutory requirements for schools to provide toilets, changing facilities and uniform options for trans pupils.

**What recommendations do you wish to make to ensure positive change for children?**

Less focus on pushing children into boxes and allowing them the freedom to follow their dreams, if covid has taught us anything it's that some jobs are not that important.

Focus more on wellbeing in primary schools.

Get mental health and emotional literacy into the primary curriculum, and get pupils referred earlier.

## **RESPONSE 51 - CERI DAVIES, SPECIALIST PARKS AND TECHNICAL MANAGER**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (*Please provide as much information as you can to justify your reasons*)**

The main issue from a Parks Service perspective is lack of ongoing investment. Since 2008 (start of austerity) we have suffered constant budget cuts where it has come to the point that our only available budget for play and leisure is just for limited maintenance and inspections. In total we are responsible for 86 playgrounds, 22 MUGA's and 10 skate Ramps, the majority of this equipment is 15years plus. The only investment we have received for play provision within the past 12 years is either from Ward Members environment funds, play sufficiency grants, S106 contributions from new housing developments or grant funding which Friends Groups have sourced.

My opinion is if there is no funding made available to upgrade and replace some of the equipment then at least 10% of our playgrounds/facilities will immediately have to close due to safety concerns. Out of the remaining 90% I would envisage a further 40% being closed within the next 5 years.

**What information or evidence do you have to support this? (*Please provide as much information as you can, such as links to reports, case examples, statistics etc.*)**

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This information is based on our RAG list (annual inspections) where there are 40 playgrounds which are Green (ok), 36 which are Amber (just ok) and 10 which are Red (need replacing). 9 of the skate ramps are coming to the end of their natural life and are constantly being repaired due to wear and tear.

**What policy or changes in law need to happen and why? Any gaps?**

Facilities of this nature should be exempt from budget cuts and ongoing funding should be made available.

## **RESPONSE 52 - PENTREHAFOD STUDENT PARLIAMENT**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (Please provide as much information as you can to justify your reasons)**

As a Rights Respecting School, the Pentrehafod School Student Parliament believes that all of the above are important issues for young people. Of those listed above, there are three areas that, as a student body, we feel particularly strongly about. These are as follows:

**1. Emotional and Mental Health:** This is a growing concern amongst young people and society as a whole. The pace of life, exam pressures, the impact of modern living such as social media bring an unrealistic expectation to conform (see our research below).

**4. Education:** As a student body, we felt that education is key to addressing all of the above issues and investment (in time, money and resources – including legislation) will lead to a “better deal” all round for young people (Please see evidence section below)

**6. Non-Discrimination:** Our school has proudly been a School of Sanctuary for the past eight years. This means that we are fully inclusive of all young people, regardless of colour, race, religion or social class. We also believe that discrimination on any of the “protected Characteristics” is wrong and fully support the legislation introduced in 2010 to address this (Please see further information below)

**What information or evidence do you have to support this? (Please provide as much information as you can, such as links to reports, case examples, statistics etc.)**

**1. Emotional and Mental Health:**

According to the WHO, mental illnesses are both common and universal, and the mortality rates linked to this across the world are only just behind Heart Disease. UK Government research suggests that 75% of adult mental health issues occur by the age of 18 (UK Gov., “Future in Mind”, 2015). Some Health Studies suggest that nearly 10% of 5-16 year-olds have mental health issues at any given time. These figures suggest that, on average, three students in a class of thirty may be experiencing a mental impairment at any one time. There is also a link between poverty and Mental Health and our school has a high eFSM intake.

During a recent survey School Health and Research Network (2019/20) our students were asked how satisfied they were with their life. Year 10 (now year 11) students highlighted a significant concern. As a result, a working party for Mental Health was established and a meeting with the head teacher and AoLE lead for Health and Wellbeing was held with a cross sample of the year group. As an outcome of the meeting the students had a meeting with the organisation Platform and from September 2020 the students will complete a State of Mind workshop where they will have the skills to educate their peers on mental health.

All of the above information demonstrates the need for further research, support and awareness in this area.

**4. Education**

What could be more important at the moment than Education? Having just returned to school from a lengthy break due to Covid 19, we are fully aware of the need to be in school, not just in terms of learning but also in terms of developing socially.

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Although our teachers worked hard to help us with home-learning, an analysis showed that 45% of the students, especially lower down the school, completed the bare minimum of work. 30% of students regularly had to access the home learning from their phones because they did not have lap tops at home.

A significant number of our students come to Secondary School with a reading age below their chronological age. We do not want to be disadvantaged further by limited resources when things happen in society that are beyond our control.

We are fortunate to have recently had our school building upgraded, but feel government could do more to make sure that we have an equality of opportunity and are not limited by our social circumstances.

We also feel that Careers Education is important and that schools in Working-Class areas should have opportunities to visit universities and meet employers from as many industries as possible so that we can widen our aspirations. As a Student parliament, we have worked for many years to ensure that all students have a “fair deal” and we regularly represent our peers at Governors Meetings and noteworthy events to support this. We were involved in writing our Learning Charter, and we have worked hard to develop our status as an Empathetic School. Our Student Parliament has worked with our Cluster Primaries to develop this vision. We believe that schools should teach children to be kind and respectful of others so that we will all grow up to be responsible and valuable members of our community.

Before submitting this form, we asked a sample of students for their views and many said that education was the most important because it covered all of the other issues.

## **6. Non-Discrimination**

Our school has a Minority Ethnic Population of 19.2%. Of these students, a high proportion would also consider themselves to belong to the Muslim Faith. Our student Parliament has taken a stand against discrimination on the grounds of race, creed and colour on several occasions. On one occasion we trialled a series of lessons developed by Welsh Government to minimise Islamophobia in schools. During these lessons, we were shown clips of Muslim students explaining the discrimination that they face on a daily basis in society, and we were shocked to discover that two of the students were past students of our school. This shows that these issues are real and in need of being addressed by our Government.

When we asked students their views before submitting this form, one Year 11 student shared that, while he had never been a victim of racism, some people (he stressed that this was a very small number) in the community found out that his name was “Mohammed”, he became the victim of teasing and insults against his religious beliefs. This made him feel uncomfortable.

As a school our students also believe that discrimination around sexual orientation and gender identify should be highlighted and more could be done to support minority groups in general.

## **What policy or changes in law need to happen and why? Any gaps?**

We recommend that laws around the above are reviewed. Although legislation is in place in respect of these issues, it would be worth highlighting these and making sure that schools across Wales do not shy away from difficult and politically sensitive issues. Education should embrace all members of society!

We would like to see laws come in for Careers Education from Year 7 to support young people from all backgrounds to make informed choices about their futures.

The Laws need to make sure that students from all backgrounds have the same access to resources in schools

## **What recommendations do you wish to make to ensure positive change for children?**

1. Emotional and Mental Health needs of young people to be taken extremely seriously. There needs to be joined up thinking across all agencies to support this. Strategies for improving mental health should be taught across PSE programmes in school and there should be more documentaries and adverts to support parents. Also, a wider PE Curriculum which supports all young people to develop a “love” of sport would help young people to make healthy choices. Older students have discussed very serious issues like self-harming and suicidal thoughts and would like to develop systems to support younger students so they can avoid similar experiences.

4. Education: Equity for all. Does this happen? School closures highlighted the gaps in provision between the “haves” and the “have-nots”.



6. Schools should be encouraged to ensure that the curriculum does not marginalise any student, and that any groups, such as we, the Student Parliament, are proportionally representative of our community.

## RESPONSE 53 - HELEN DAVIES, CHILDHOOD TRAUMA PRACTITIONER

What are the main issues that the Welsh Government and public bodies should be prioritising and why? *(Please provide as much information as you can to justify your reasons)*

- **Children's mental health as a priority** – Mental ill health in children is on the increase – One in eight (12.8%) children and young people aged between five and 19 has a diagnosable mental health condition. The prevalence of 5-15-year olds experiencing emotional disorders (including anxiety and depression) has increased by 48% – from 3.9% in 2004 to 5.8% in 2017. Only a quarter (25.2%) of 5-19-year olds with a mental health condition had contact with mental health specialists in the past year, meaning that three-quarters had not had any contact with mental health services.(1) - We have yet to see the extent of COVID on our children's mental health.
- **Children's Mental health to be taught at university to teachers** – "Research shows that many teachers feel frightened and deskilled about working with mental health issues e.g. 2 out of 3 teachers feel that if they talk to a child about self-harm, they will make things worse". "Teachers are leaving the profession in droves due to feeling unsafe, and suffering from secondary trauma". (3)
- **All schools to have a trained Trauma practitioner** to identify early signs of mental ill health and to intervene to avoid escalation into later life – "Relationships and conversations with emotionally available adults in a school culture, aware of safety cues of mental health will help to heal within the school environment" (2)
- **All schools to be ACE aware** and the impact on learning and outcomes (4)
- **Schools to be mentally healthy environments** – children spend 190 days a year in school, a counsellor coming in once a week to see a few children will not help with the increase of children in need we are seeing – it makes sense to create an enriched, mentally healthy environment, free of shame where all behaviour is seen as communication. Children to have access to an emotionally available adult at school - this means we aim to help children BEFORE they get mental health problems – to catch them as they are falling not after they have fallen. 7 minutes with an emotionally available adult is enough to repair brain connections. (2)
- **Easier referral system into mental health services and shorter waiting times for help.** – "It takes on average 10 years for a young person to receive the specialist mental health help they need". (2)

What information or evidence do you have to support this? *(Please provide as much information as you can, such as links to reports, case examples, statistics etc.)*

- 1 - [www.YoungMinds.co.uk](http://www.YoungMinds.co.uk)
- 2 - [www.traumainformedschools.co.uk](http://www.traumainformedschools.co.uk)
- 3 - [www.teachersassurance.co.uk/documents/2013/stress-and-wellbeing-research.pdf](http://www.teachersassurance.co.uk/documents/2013/stress-and-wellbeing-research.pdf). TES.27 Feb2017 poll on teachers wellbeing
- 4 - [www.acestoohigh.com](http://www.acestoohigh.com)

What policy or changes in law need to happen and why? Any gaps?

- 
- A policy change that ensures a Trauma Practitioner is placed in every school.
  - A change in the law that ensures that each child will not be failed by a mental health service that cannot cope with ever increasing numbers requiring their support.

#### **What recommendations do you wish to make to ensure positive change for children?**

- I feel there needs to be more collaborative working between school, agencies, and health services to ensure a holistic approach to childhood, where each child is guaranteed to receive help they need with mental health, as they need it – children's mental health is everyone's business, if we are to raise a generation of children who are mentally resilient to be fully functioning members of society in the future.

**“It is easier to build strong children than to repair broken men” – Fredrick Douglas, Abolitionist & Author**

### **RESPONSE 54 - TACKLING POVERTY SERVICE, SWANSEA**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (Please provide as much information as you can to justify your reasons)**

**Swansea Council** defines poverty in its Tackling Poverty Strategy as:

- Income below the [Minimum Income Standard](#).
- Inadequate access to necessary services of good quality.
- Inadequate opportunity or resource to join in with social, cultural, leisure and decision making activities.

[The Children's Society](#) state that 'Four million. Almost a third of children in the UK live in poverty. The situation is getting worse, with the number set to rise to five million by 2020. Shockingly, two thirds of children living in poverty have at least one parent in work. Thousands more families are living on the cusp of the poverty line. One unexpected setback - like redundancy or illness - could push them into the poverty trap.'

They go on to say that 'Growing up in poverty can damage children's well-being and their future life chances.

Children living in poverty are more likely to:

- Have poor physical health
- Experience mental health problems
- Have low sense of well-being
- Underachieve at school
- Have employment difficulties in adult life
- Experience social deprivation
- Feel unsafe
- Experience stigma and bullying at school.'

The **Joseph Rowntree Foundation** Report '[Poverty In Wales 2018](#)' states that, 'Poverty among couples with children has been rising since 2003/06. There has been good progress in Wales on three important drivers of working - age poverty: worklessness has fallen, employment rates have risen and adults skills have improved. However, this has not delivered lower poverty and the risk of poverty has increased for working and workless households. The drivers of rising poverty across the country are reductions to working - age benefits, rising living costs (particularly for housing) and poor quality work. Since 2010, children from lower-income backgrounds have been



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catching up with those from better-off backgrounds on educational attainment, but they remain much less likely to leave school with good qualifications.'

The **Bevan Foundation** in its 2020 Report '[Lifting Children out of poverty, the role of the Welsh Benefits System](#)', states that 'The Welsh Benefits System should, at the very least ensure that every child is guaranteed:

- A healthy and nutritious diet
- Access to good quality education
- Access to adequate clothing
- A warm and secure home.'

The report also suggests that the following core principles for a benefits system could be adopted in a Welsh context:

- 'Welsh benefits are an investment in the people of Wales,
- Welsh benefits are a human right and are essential to the realisation of other human rights,
- the delivery of Welsh benefits is a public service,
- respect for the dignity of individuals is to be at the heart of Welsh benefits,
- Welsh benefits should contribute to reducing poverty,
- Welsh benefits should be designed with the people of Wales on the basis of evidence,
- Welsh benefits should be continuously improved
- Welsh benefits are efficient and deliver value for money.'

The report also contains experiences of families which highlight the lived experience of families experiencing poverty in the context of current systems.

### **Swansea Council, Tackling Poverty Service**

We recognise that the main contributing factors to rising child poverty are:

- Rising living costs
- Low wages and insecure employment
- Cuts to the benefits system

We also recognise that children are also the age group that is most likely to be at risk of living in poverty.

It is the view of Swansea Council's Tackling Poverty Service that the main issues that Welsh Government could prioritise are:

1. To reduce income poverty by:
  - Ensuring a fair benefits system
  - Supporting the take-up of benefit entitlements
  - Supporting parents to into flexible, good quality, secure work with decent pay
2. To reduce living costs by:
  - Ensuring the provision of accessible and affordable childcare including before and after school and during school holidays
  - Enhancing support for carers
  - Ensuring financial support for disabled students especially between the transition of relevant education and higher education
  - Enhancing Free School Meals provision
  - Increasing housing affordability
  - Enhancing financial inclusion provision
3. To further reduce the educational attainment gap by:
  - Ensuring the stigma of poverty is removed from the school day
  - Ensuring the hidden costs of school are not a barrier to full participation

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- Enhancing high quality provision that supports early childhood development
4. To strengthen families and communities by:
- Increasing the financial resilience of low income families
  - Reducing the additional stresses that low income families experience
  - Ensuring free accessible independent advice to those that require it

**What information or evidence do you have to support this? (*Please provide as much information as you can, such as links to reports, case examples, statistics etc.*)**

**Joseph Rowntree Foundation**

[Poverty in Wales Report 2018](#)

**The Children's Society**

[What is Child Poverty?](#)

[What are the effects of Child Poverty?](#)

**The Bevan Foundation**

[Lifting children out of poverty, the role of the Welsh Benefits System](#)

**Institute of Health Equity**

[Marmot Review 10 Years On](#)

**Stats Wales**

[Households below average income](#)

**Child Poverty Action Group**

[The Safety Net Is Gone](#)

[The Cost of Learning in Lockdown](#)

**Gov.uk**

[Children in low income households](#)

**ONS**

[Families and the labour market](#)

**Annual Population Survey**

[Children living in long-term workless households](#)

**Welsh Government**

[Child Poverty Strategy: 2019 Progress Report](#)

**What policy or changes in law need to happen and why? Any gaps?**

1. Removal of the benefit cap, as this particularly affects families with more than two children
2. Removal of the two child limit as this directly penalises children through no fault of their own

Removal of the bedroom tax (Spare Room Subsidy) and increasing the number of bedrooms required based on the number of children aged 7 and over in the household as opposed to their age and gender.

**What recommendations do you wish to make to ensure positive change for children?**

1. The removal of the family element of child tax credit and the removal of the higher element for the eldest child within Universal Credit born after April 2017 should be reinstated via a tax allowance to replicate what these previously replaced.
2. To revise the definition of 'approved childcare providers' in order for family members to access financial support via childcare costs provision within the benefit system.

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## RESPONSE 55 - THE SHARING TABLE

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (Please provide as much information as you can to justify your reasons)**

- Child hunger and its link to poorer educational outcomes
- Lack of opportunities for some children enjoy the health and social benefits of sports and exercise
- The disadvantages experienced by children in rural communities

All of these can be factors driving poor health and impaired life chances. Hunger is a widespread issue with an estimated 19% of children in the UK in moderate to serious food insecure households (1); anecdotal evidence suggests that the situation is getting worse (2). Studies have established the link between food poverty and educational outcome (3). The correlation between increasing childhood obesity and reducing levels of physical activity is also well established (4). Rural poverty – primarily loss of access to services – is prevalent in Wales, although hidden by its geographic proximity to affluence (5). In our own region, the two LSOAs, Gower 1 and Gower 2, are in the bottom 10% of Welsh LSOAs with regard to service access (6).

**What information or evidence do you have to support this? (Please provide as much information as you can, such as links to reports, case examples, statistics etc.)**

Sources:

1. UNICEF 2017 “prevalence and correlates of food insecurity”
2. NAHT conference, May 2019.
3. Adolphus et al (2016). “The effects of breakfast composition on cognition in children”
4. HSCIC health survey 2013
5. Public policy institute for Wales “Rural poverty in Wales”, 2016

**What policy or changes in law need to happen and why? Any gaps?**

1. A policy that considers those families who do not quite meet the threshold for UC – likely to be a growing issue given economic forecasts going forward
2. Creative thinking to generate policy for children in rural communities – e.g. if they can't access services, how do services access them?

**What recommendations do you wish to make to ensure positive change for children?**

Consideration of the two policies suggested above

## RESPONSE 56 - YGG BRYNIAGO

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (Please provide as much information as you can to justify your reasons)**

Emotional/ mental/ physical health and signposting clinics to be provided on site within schools (mobile form ideal). Having on site resources to support children and parents with these health/ social/ wellbeing clinics could be vital for many parents and families and invaluable to teachers and schools in getting the right help for people, quickly. Bringing a resource like this to school would also help with signposting to many other resources that schools can't access.

School counsellors should be available on a weekly basis for schools (possibly by cluster). It is evident with the increase in referrals made and the length of the waiting lists that children's mental health should be a top priority.

**What information or evidence do you have to support this? (Please provide as much information as you can, such as links to reports, case examples, statistics etc.)**

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Many parents have reported they feel more comfortable opening up within school. Having the opportunity to speak to not just school ALNCO but to other agencies within the school setting may open more avenues to help and support families. This could include healthcare, counselling, monetary issues, food bank work, benefit support etc.

Very often, when a referral is made for counselling, the child needs that support immediately. The lack of resources means that children are waiting months to be seen.

## **RESPONSE 57 – YGG GWYR**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (Please provide as much information as you can to justify your reasons)**

**(translated version)**

- As a result of the recent situation with COVID-19, we are concerned about the impact on young people's education and attainment. In particular, we are concerned about the impact of lock-downs in certain areas e.g. if a particular school is forced to keep their Yr.11 pupils at home and virtual educate them, how can fairness be ensured in GCSE examinations where pupils have had less face-to-face learning time with teachers?
- We are concerned that the current pandemic will also affect pupils' mental health and that this in turn will affect their academic achievement. There is a need to invest more on providing a national emotional support / counseling service that could be offered virtually to pupils.
- Equally, consideration must be given to how pupils and parents who are distressed / refusing to allow their children to return to school can be supported, despite every effort by schools to convince them that returning to school is safe.
- Advice on shadowing in the wake of the pandemic needs to be considered. If a child is medically vulnerable or a member of their family is vulnerable, consideration should be given to how to educate them at home if being on the school site is not an option. This does not necessarily mean virtual remote teaching but rather more extensive use of home tutors.
- With pupils suffering from deprivation, schools offered them laptops to be able to work virtual in the lock-down phase. Can this provision be extended to all pupils in receipt of free school meals, even after the pandemic is over? Also can steps be taken to ensure strong and adequate internet access?
- For young people, there is youth club provision, drama groups, the Urdd Eisteddfod etc. all cancelled / postponed due to social isolation. Can virtual youth clubs be provided? Can face-to-face provision be adapted to offer support and opportunities to young people in a COVID-safe context?
- During the lock-down period, many young people were less willing to turn to teachers for help as this would have had to happen in a virtual or telephone manner. Is there a source where young people can be referred if they need emotional or pastoral support?
- It is also felt that there is inconsistency in the message that governments receive and this leads to prejudice against young people. On the one hand, young people are blamed for spreading the Coronavirus by socializing but at the same time saying that it is acceptable for them to sit side by side with 30 pupils in a class. As a result, the message to young people is not clear and this inconsistency causes others to blame it for spreading the virus.

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**What recommendations do you wish to make to ensure positive change for children?**

**(translated version)**

- Wider investment in mental health resources, especially in the context of the pandemic.
- Online clubs and activities available to all (possibly free). Welsh-medium provision to ensure that pupils in the Welsh-medium education sector do not suffer from lack of practice of the language in their homes.

## **RESPONSE 58 – ‘ANON’**

RESPONDENT WISHED TO REMAIN ANONYMOUS, HOWEVER THE EVIDENCE RECEIVED IN RESPECT OF THEIR PRIORITIES WERE CONSIDERED IN THE DEVELOPMENT OF THE REPORT

## **RESPONSE 59 – ACTION FOR CHILDREN**



### **Response from Action for Children, State of Children's rights in Wales**

Action for Children promotes the existence of and encourages the implementation of the UNCRC across all our services in Wales and amongst our staff that support the organisation centrally.

Our vision is one in which every child and young person in the country has a safe and happy childhood and the foundations they need to thrive. We protect and support children and young people, providing practical and emotional care and support, ensuring their voices are heard, and campaign to bring lasting improvements to their lives. We are Passionate, Ambitious, Collaborative, and Inclusive.

Action for Children note the forward steps Wales has made with regards to adopting a 'rights-based approach'. We know that this journey has many steps to go before all people including children undertake an active role as right holders. These rights need and must be fully known and respected by all. Therefore, Action for Children welcomes the opportunity to comment on the State of Children's Rights in Wales Report.

**We have asked our staff to respond, please see the responses below:**

- **What are the main issues that the Welsh Government and public bodies should be prioritising and why?**

General Principles

Non-Discrimination Race, Hate Crime Gypsy Travellers Respect for Views of the Child / Participation

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- I would like to see more routes for people of different races to hold places on boards of decision making especially black and mixed-race young people. For their voices to be heard. It is a key topic currently and the opportunity needs to be seized and change implemented.

-

Education, Leisure & Cultural Activities, Education Play & Leisure Cultural activities.

- Creativity and leisure always seem to be last on the agenda or not prioritised or valued within youth work. Money is usually focused on 'problems' not often to promote creativity and play and fun.

• **What information or evidence do you have to support this?**

**Creativity**

The Durham commission on creativity and education 2019 is a great read!

Creativity makes a valued contribution to personal wellbeing and can help with emotional resilience. (DCCE, 2017)

Also, the National youth council of Ireland has carried out some good research

The new curriculum for Wales 2019 states that those who are engaged with and experience creative arts are nurtured emotionally in well-being, resilience, and self-esteem.

The Donaldson report (WG 2015) highlighted 6 areas of learning for young people one of them being 'Expressive arts' it expressed that young people should have the opportunity to learn outside of school.

A document by the Welsh Government titled 'Arts in Education in schools of Wales' 2017, found that when disadvantaged learners engaged with the arts there was a strong indication that the impact of poverty was reduced.

• **What policy or changes in law need to happen and why? Any gaps?**

**Creativity**

Creativity needs to be prioritised and added to agendas – not as a last resort.

Creativity is not an option for young people in disadvantaged areas because of the cost, music lessons, equipment, opportunities to see and experience theatre or cultural events are limited and yet it is the very thing that could help with well-being and inspiration.

Money needs to be focused on creating opportunities and making the arts accessible.

• **What recommendations do you wish to make to ensure positive change for children?**

**Creativity**

I would like to see more focus on creativity and fun for young people rather than focusing on problems that young people face. Especially in the curriculum for youth work. – outside of school settings.

**Race**

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A greater awareness of the lack of people of colour making decisions about issues that affect them.

A plan to support and raise leaders of colour.

### **Violence against children.**

I believe that agencies need to be held to account as there are hundreds of children experiencing different forms of violence that have slipped or are slipping through the net.

### **We need to prioritise funding in the right areas so the signs can be spotted also.**

Through Co-vid quite a few services have been unable to deliver, but some front-line staff have continued. I believe youth workers are front line staff and were missed during this time. Young people and children were still out, yet youth workers (the ones who have the trust of these children and young people) were furloughed or not allowed to do any outreach. A lot of abuse would have been missed during this time. Youth workers should have been allowed to continue to do street outreach and I feel that this needs to happen more. Money needs to be placed into youth worker street outreach so that they can build credibility and see some of the signs that maybe aren't always visible in other settings.

I know that there are Children/YP who have been failed/are being failed through Local authorities who have children where the social worker is saying there is a threat to life and yet this has not been actioned quickly enough by those above the social worker. These are children/YP who have already been attacked, set up by others to be badly hurt/killed and who have a bounty on their head for a specific sum of money.

The local authority has an unacceptable amount of unallocated cases where children who are at risk of CSE/CE and other forms of abuse have no allocated social worker. There are cases where the child had a social worker and was being brought into the CSE/CE arena but then became unallocated so the CSE/CE meeting was cancelled and all concerns put on hold until a social worker was re-assigned. In some cases, they have been left for significant periods of time which has meant more harm has occurred in the process. Children are passed over to new social worker teams without any form of handover most of the time and therefore information can be missed in the process. Cases land on social workers desktops without any form of conversation and supervisions rarely happen which can again lead to things being missed with children.

This goes against articles 19, 34, 35, & 36 of the UNCRC. These children are not being appropriately protected if they are unallocated.

### **My recommendations to ensure positive change for children would be**

- Partner agencies working together more fluidly so that our children have a greater level of protection.
- Including the community more in plans to make positive changes e.g getting the local boxing clubs, gyms, horse riding clubs, art clubs, karate clubs, churches etc involved. Maybe they could put programmes together to encourage young people through their doors. These are all things that can help when it comes to violence against children.
- A change in the way social work is approached (smaller caseloads and more staff).
- Looking into the heart of all areas within Children's Services to ask them how they are protecting their unallocated caseloads from different forms of violence? Greater accountability is needed.
- To have some of these agencies under one roof or a whole service that was split into different areas under the same umbrella. Social workers, Exploitation practitioners, substance misuse workers, mental health, harmful practices workers, peer mentors, edge of care workers etc.
- Street based youth work back on the forefront.

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- The employment of more Peer mentors throughout agencies who have experienced some of these atrocities and have come through the other side to be able to work alongside these children.

I am extremely passionate about safeguarding our children as I know many other professionals, I have the privilege of working with are also. I also know there is a lot more that can be done.

### **Disability basic health and welfare.**

Families/young people often struggle accessing Mental Health services. A lot of young people and parents say that Waiting lists are often too long. Lots of families receiving CAMHs support have their own vulnerabilities, one being parents suffering from mental health issues. These vulnerabilities often lead to families struggling to attend appointments which result in non-engagement and being discharged with no further action or support put in place.

In my own personal experience with working for young people over a number of years, I feel more young people are suffering from mental health issues e.g. anxiety, depression along with adverse childhood experiences which are deeply rooted and need support from agencies.

Vulnerable Families and young people need support to access and attend appointments to enable them to engage with professionals.

### **Violence against children.**

When working with young people that are at risk of Child sexual exploitation, serious organised crime, and abuse, I have seen that when disclosing information, the young person's word alone is not always enough. At multi agency meetings, professionals seem apprehensive to act on what has been said as there is no concrete evidence. Whilst waiting for this evidence to emerge, granted sometimes this does not happen, the young people are being exposed to more risks, making them even more vulnerable, resulting in them becoming deeper involved in the crime or the exploitation that was originally disclosed.

When in multiagency meetings, the Police do not tend to investigate the incident straight away, their initial response is to try to find evidence to back the disclosure up. I understand that at present they must find evidence, but could something be changed in the law where the police can act upon information young people provide? In my experience, we have discussed issues such as known CSE hotspots and even though we all believe that the incident is indeed happening, the police have said that they can't go into that property/area until enough evidence is gained. The longer it takes to wait for evidence, the higher the risk that the young people are being abused and other young people are being exploited.

The young people's voices should be heard and believed. By listening to them and valuing their disclosures, empowers them to speak up. It takes a lot of courage to disclose information and the child risks serious harm if found out, so why should a young person disclose information, if it is not going to be believed or taken seriously?.



### UNCRC Call for Evidence – Response from NSPCC Cymru/ Wales

NSPCC Cymru is responding on the thematic areas of violence and abuse against children, including care experienced children. Our response also considers the ongoing impact of Covid-19 on children and young people and their rights.

Our response is underpinned by the following key UNCRC articles related to violence and abuse:

#### **Article 19**

1. States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.
2. Such protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment described heretofore, and, as appropriate, for judicial involvement.

#### **Article 34**

States Parties undertake to protect the child from all forms of sexual exploitation and sexual abuse. For these purposes, States Parties shall in particular take all appropriate national, bilateral and multilateral measures to prevent:

- (a) The inducement or coercion of a child to engage in any unlawful sexual activity;
- (b) The exploitative use of children in prostitution or other unlawful sexual practices;
- (c) The exploitative use of children in pornographic performances and materials

#### **Article 37**

States Parties shall ensure that: (a) No child shall be subjected to torture or other cruel, inhuman or degrading treatment or punishment.

#### **Article 39**

States Parties shall take all appropriate measures to promote physical and psychological recovery and social reintegration of a child victim of: any form of neglect, exploitation, or abuse; torture or any other form of cruel, inhuman or degrading treatment or punishment; or armed conflicts. Such recovery and reintegration shall take place in an environment which fosters the health, self-respect and dignity of the child.

### **Introduction**

Child homicides are an important measure of child safety and an important indication of how many children die as a result of violence and abuse. Studies suggest that the numbers of children who die where abuse/neglect is suspected are higher than the recorded police homicide figures, in part, as police will only record cases where there is sufficient evidence<sup>xi</sup>.

In the last 5 years police recorded the homicides of 9 under 18s in Wales and the 5 year average rate of homicides of under 18s was 2.9 per million between 2014/5 – 2018/9 <sup>xi</sup>. This rate has significantly declined

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over the last 15 years from a high of 9.3 per million in 2002/3<sup>xi</sup>. Despite this welcome decline, a significant number of children and young people are exposed to violence and abuse in Wales. The UN's review into the government's adherence to the UN Convention for the Rights of the Child (UNCRC) is an opportunity to ensure that the Welsh Government adopts a long-term, sustainable, trauma-informed response to safeguarding children against violence and neglect.

## **What are the main issues that the Welsh Government and public bodies should be prioritising and why?**

### **Physical abuse**

Welsh Government and public bodies need to continue to focus on physical abuse, when someone deliberately hurts a child, which can result in injuries such as broken bones, bruises, burns and non-accidental head injuries in babies and in some cases death. The restrictions created by the coronavirus pandemic exacerbated the risk for some children who were experiencing physical abuse within their family home. Increased stresses led to more family conflict and this could escalate into physical violence. The NSPCC helpline saw a 53% increase in contacts from people with concerns about children experiencing physical abuse during the lockdown compared to before the lockdown<sup>xi</sup>. Some children and young people told Childline that physical punishment had been occurring more frequently since lockdown began and some children asked Childline whether the physical punishment they were experiencing was physical abuse. Some children's description of their physical punishment was physical abuse<sup>xi</sup>.

NSPCC Cymru/ Wales welcomes Welsh Government's Children Abolition of the Defence of Reasonable Punishment Wales Act 2020 and the steps Welsh Government are taking to make physical punishment unacceptable in Wales. Welsh Government must aim to fully realise Articles 19 and 37 and ensure effective implementation of the Act, delivery of a public education campaign and services ready to support parents to use positive non-violent parenting methods.

### **Domestic Abuse**

Despite Welsh Government's ground-breaking Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV) 2015 Act, slow implementation and limited resources have impacted the pace of change. There is a gap between the policy intent of the Act and the reality on the ground. There is insufficient provision of services for child survivors across Wales and specialist VAWDASV services report a lack of funding for this specialist work, with some areas reporting little to no coverage. Children's workers in refuges when the family is in crisis and therapeutic recovery support for children must be available consistently across Wales, as well as prevention and early intervention work. The gap in such service provision breaches Article 39.

We welcome decisions taken by Welsh Government on making RSE mandatory for all children which we believe will help prevent unhealthy relationships and support children in seeking support when they experience abuse.

However Covid-19 has brought into focus a human rights violation that was always there; through isolation and lockdown, the risk increased for some and services reported an increased pressure on their work with children and young people since the pandemic. With other services unable to see children in the usual way, such as schools or other universal services, the pressure mounted on the specialist VAWDASV sector.

### **Child Sexual Abuse**

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We warmly welcomed the National Action Plan on Preventing Child Sexual Abuse by Welsh Government, but remain concerned about the availability of specialist support. Waiting times for Sexual Assault Referral Centres (SARCs)<sup>xi</sup> are too long or support is not consistently available across Wales. Clarity on whether funding will be increased for sexual violence services in Wales would be welcome.

## **Bullying**

The Children's Commissioner for Wales has called for stronger action to prevent bullying. In a [briefing paper](#), she called for action at a national level, including a duty on schools to report incidents of bullying.

The Commissioner makes the link between a poor response to bullying and a denial of children's rights under the UNCRC. Welsh Government's guidance is comprehensive, considering various types of bullying including homophobic, sexual and racist bullying, with detailed support for schools, parents, children and young people. As well as anti-bullying strategies and preventative models for schools to adopt and detail on Welsh Government's expectations of schools. We welcome this guidance but agree that anti-bullying work should be placed on a statutory footing as part of the whole school approach, with a duty to report incidents of bullying.

## **Child protection and Care Experienced Children**

There is a relentless increase in the numbers of children and young people in need of child protection as evidenced by numbers of children looked after and in need of care and support<sup>xi</sup>. We note Welsh Government's commitment to safely reduce the number of children in care in Wales, but advise caution, as the number itself is not an adequate measure either of progress or lack of it. The continued rise in numbers of children in care could be due to more informed practice and awareness of child abuse and neglect and the responsibility of agencies to respond appropriately. Therefore, we are cautious about any attempt to reduce numbers and are clear the best interests of the child must be paramount. However, we do note the number of care experienced children in Wales is high. Given this cohort of children can have poor outcomes compared to children without experience of care, effort is needed to ensure better outcomes. Mental health needs, stability of placement and support when leaving the care system all require improvements to better serve the needs of care experienced children. In addition it is vital that children's social services are fully resourced, both social work capacity and specialist services, to ensure children and young people at risk of or who have experienced abuse and neglect receive the support and protection to which they have a right.

The Children, Young People and Education Committee has been monitoring the progress of The Mind Over Matter report from Welsh Government. Despite progress being made in some areas, we were disappointed to note the emotional and mental health of vulnerable groups, such as care experienced children was not highlighted a priority area in the response to the report. NSPCC's and Voice's From Care Listen, Act Thrive consultation highlights the calls from Looked after children (LAC) nurses on the need for more guidance and clarity on how to assess the emotional and mental health needs in initial health assessment, citing a lack of consistent, clear guidance and training on how to use it effectively.

Frequency of moves is also impacting on access to support. NSPCC Cymru found children on waiting lists for CAMHS faced being placed at the bottom of a new waiting list if they moved out of area to a new placement. This is of course compounded by the already long waiting lists and high threshold for a referral to CAMHS.

We welcomed the introduction, under the Social Services and Wellbeing Act, of 'The When I'm Ready Scheme' allowing care experienced young people to remain with their foster family until the age of 21, However, we call for this to apply to all young people leaving care, including those in residential care, but the scheme does not currently extend to that. Nor does the responsibility of the local authority to young people up to 25 who are not in education, training or work, despite this cohort, arguably, being more likely to need additional support.

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We are concerned that the progress to eliminate the use of B&Bs for care leavers may be slowed with the increased pressure on local authorities post lock-down. The monitoring group recognises that there was already a shortage in housing stock for local authorities to utilise in Wales pre-lockdown. We welcome the expectation from Welsh Government on local authorities to ensure support for homeless people during the outbreak, but appreciate this will create more pressure on stretched authorities. These local authorities may also see an increase in approaches as job losses due to the pandemic leads to housing insecurity.

### **What information or evidence do you have to support this?**

NSPCC's research has shown that twelve % of under 11s, 17.5 % of 11–17s and 23.7 % 18–24s in UK had been exposed to domestic violence between adults in their homes during childhood<sup>xi</sup>. Experiencing domestic abuse in the home has a long-lasting, detrimental impact on a child's physical and mental health, wellbeing and ability to learn

However, in terms of specialist domestic abuse services, Welsh Women's Aid's mapping of service provision for children confirms the urgent need for better funding and resources to meet need<sup>xi</sup>; During 2018/19 4,263 children and young people were known to access some form of specialist VAWDASV service in Wales, this is compared to the estimated 18,487 children and young people who experience abuse in a year. Welsh Women's Aid therefore estimated that 77% of children and young people impacted by domestic abuse had no specialist support<sup>xi</sup>. Their mapping found that specialist services are offering a lot on limited staff and resources, but because of the shortfall, those children and young people who are receiving support are still waiting up to 12 months for services.

The report highlights the inconsistency in coverage across Wales; a full time equivalent member of staff could serve a population size of 4,005 children and young people in one area and 27,694 in another, while some areas only have one part-time worker or indeed no dedicated CYP workers at all.

During lockdown the specialist VAWDASV services saw an increased demand for their services and NSPCC helplines also saw increased contacts about domestic abuse. The number of people contacting the NSPCC helpline about domestic abuse, rose from an average of around 140 contacts a week before lockdown, to an average of around 185 contacts a week since the government's stay at home guidance was issued<sup>xi</sup>. There has been a similar increase in the number of counselling sessions Childline has delivered about domestic abuse, rising from an average of around 50 a week before lockdown, compared to an average of around 65 a week since the government's stay at home guidance was issued<sup>xi</sup>.

The Centre of Expertise on Child Sexual Abuse has highlighted the worrying drop in child protection plans for CSA in Wales. For example, the number on the register because of sexual abuse has declined by 28% in decade from 160 in 2007/08 to 115 in 2017/18. This is despite the high number of calls to the NSPCC helpline about abuse and neglect. During June 2020, 78% of calls were concerned with abuse and parental behaviour. During lockdown specialist services working with child survivors highlighted their concern that support could not be provided to young children who couldn't access virtual support independently, or whose support is based around play-therapy. This is likely to have ongoing ramifications for children's recovery; particularly as social distancing measures remain in place.

Recent statistics demonstrate a steady rise in the numbers of children looked after in Wales. Welsh Government's last statistical release shows that in March 2019, there were over 6,800 children looked after, a rise of 7% on the previous year<sup>xi</sup>. The Nuffield Family Justice Observatory report, 'Born into Care: new-borns and infants in care proceedings in Wales', highlighted the sharp increase in the proportion of new-borns who became the subject of care proceedings in Wales; the rate has doubled between 2015 and 2018 and infants less than 1 year old comprised around 30% of all Section 31 cases in Wales.

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### **What policy or changes in law need to happen and why? Any gaps?**

- We welcome the UK Government's decision to introduce an amendment to the Domestic Abuse Bill for England and Wales which is currently working its way through parliament. The amendment now recognises children as victims of domestic abuse but we now call on the UK Government to underpin this with a further amendment for provision of sustainable and resourced support services to help children recover and move forward with their lives and Welsh Government to work with the UK Government on maximising support for child VAWDASV victims in Wales.
- There is a gap in the 'When I'm Ready Scheme' within the Social Services and Wellbeing Act – it must be available to all children in care as they reach their 21<sup>st</sup> birthday.
- Welsh Government should consider strengthening the Housing (Wales) Act 2014 to ensure no care leavers are placed in B&B, including improved support for local authorities to meet demand.
- A whole school approach must include an anti-bully strategy on a statutory footing.

### **What recommendations do you wish to make to ensure positive change for children?**

- Following the passing of the Children Abolition of the Defence of Reasonable Punishment Wales Act 2020, the government in Wales must ensure effective implementation, including delivery of public awareness campaigns and enabling services to respond proportionately and effectively to incidents of physical punishment in future
- We must see the promise of secure and sustainable funding for the specialist VAWDASV sector in Wales realised. With dedicated, ring-fenced funding to ensure support for all children who need it, wherever they are in Wales.
- Learnings from the child house model and how this can be incorporated into the Welsh model for SARCs is needed. Some examples of good practice from the child house model which could work in Wales include:
  - Multiagency teams providing consultation to other areas, including outreach service
  - Whole family approach including parent education courses
  - Await the evaluation of child psychologists undertaking ABE interviews. It may also be worth considering practice in some parts of the UK, like Scotland where social workers undertake these.
  - Learn lessons from delivering support virtually, which could be relevant in the Welsh context where children and young people must travel some distance to
- Welsh Government and local authorities need to resource children's services, both social work capacity and specialist services, to fully realise children's rights to Articles 19 and 39 in particular.
- An expert panel should be convened to review how emotional and mental health of care experienced children and young people is currently being assessed. As well as developing a comprehensive emotional and mental health assessment framework which includes an evidence based assessment of need.
- All new policy and legislation impacting on looked after children must be fully underpinned by the UNCRC. Welsh Government must also do everything in its power to mitigate the impact of cuts to services for looked after children.
- A continued public health approach to CSA, following publication of a progress review of the current action plan in 2022. A key priority should be; work with perpetrators including interventions and support when young people display harmful sexual behaviours

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- <sup>xi</sup> Brandon, M. et al (2012) New learning from serious case reviews; a two year report for 2009-2011
- <sup>xi</sup> Ibid
- <sup>xi</sup> Jutte, S. et al (2015) How Safe are our Children? 2015 NSPCC: London
- <sup>xi</sup> <https://learning.nspcc.org.uk/research-resources/2020/coronavirus-insight-briefing-physical-abuse>
- <sup>xi</sup> <https://learning.nspcc.org.uk/research-resources/2020/coronavirus-insight-briefing-physical-abuse>
- <sup>xi</sup> Crouch-Puzey, Elinor, Welsh Women's Aid, State of the Sector <https://www.welshwomensaid.org.uk/wp-content/uploads/2019/01/State-of-the-Sector-2018-Eng.pdf> page 16
- <sup>xi</sup> <https://stats.wales.gov.wales/Catalogue/Health-and-Social-Care/Social-Services/Childrens-Services>
- <sup>xi</sup> Radford, L. et al (2011) *Child abuse and neglect in the UK today* London: NSPCC
- <sup>xi</sup> Welsh Women's Aid, Children Matter <https://www.welshwomensaid.org.uk/wp-content/uploads/2019/11/Children-and-Young-People-participation-report-FINAL.pdf> 2019
- <sup>xi</sup> Ibid, Page 15
- <sup>xi</sup> <https://learning.nspcc.org.uk/research-resources/2020/coronavirus-insight-briefing-domestic-abuse>
- <sup>xi</sup> Ibid
- <sup>xi</sup> <https://gov.wales/children-looked-after-local-authorities-april-2018-march-2019>

## RESPONSE 61 – NEATH PORT TALBOT YOUTH SERVICE

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (Please provide as much information as you can to justify your reasons)**

From a service point of view not in any particular order the following:

Emotional & Mental Health/Education

Play & Leisure/Disadvantaged Young People

Child Poverty

Non-Discrimination (Race/Hate Crime)/Poverty Health

Young Carers

Homelessness

**What information or evidence do you have to support this? (Please provide as much information as you can, such as links to reports, case examples, statistics etc.)**

### Emotional and Mental Health Issues/Education:

- Consultation with young people at the start of lockdown highlighted many young people were struggling with their emotional and mental health. Issues included loneliness, missing friends, isolation, lack of information and worries about the impact on their education and their futures.
- The Youth Council then wrote to welsh government demanding that young people be consulted on the pandemic so their voices could be heard. The leader of the council also signed the letter. The Youth Council called for a special broadcast for young people as there was a lot of misinformation on social media regarding COVID 19. Unicef was the model directing the youth council's approach. A month later the Children's Commissioner released a consultation for young people to have their say which was a positive result.
- NPTCBC immediately worked with the youth council/Youth & Deputy Mayor to communicate support for young people through posters, information on social media/websites/app. The deputy youth mayor wrote a positive supportive blog highlighting services who could support them. Our Deputy Youth Mayor is now the Ambassador for

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Mental Health for Inspirational Futures and is currently engaged in promoting mental health and emotional well-being resources for schools.

- NPT Youth Mayor issued a statement recognising the challenges young people faced and praising young people for staying within the guidelines.
- Improve Mental health services was also one of the top three issues identified for young people in NPTCBC results from the Make Your Mark Campaign 2019 with 550 votes.
- NPT Youth Service delivered 'Talk to a Youth Worker' every Thursday staffed by professionally qualified youth workers to give support and signpost to outside agencies if needed.
- NPT Youth Council campaigned to improve mental health services in NPT by writing to Welsh government. The letter asked for additional funding for another councillor for the Legacy Counselling service for NPT. The response back stated that our local authority has monies from WAG and the authority should decide where to spend it however a proactive approach would be to have monies for mental health services as an addition to any budget so it is prioritised for young people and would possibly save the NHS/other providers considerable monies at a later date by mental health interventions being addressed earlier.

### **Play & Leisure:**

During the pandemic and especially during lockdown NPTYs provided a number of different interventions to ensure young people had access to play and leisure activities via social media and through platforms such as Zoom and Microsoft teams.

This approach supported young people to get engaged in positive interests and activities and in some cases win prizes. This also combatted social isolation especially for young people in rural areas. Disadvantaged Children & Young People also attended a safe summer provision across NPTCBC delivered by the Youth Service.

NPT Youth Mayor wrote a message to all young people and worked with the youth service on a number of different online activities they could get involved in.

### **Young Carers:**

- NPT Youth Council successfully campaigned for Young Carers to have ID Badges during Lockdown. They took this approach as many young carers were being turned away from shops despite shopping for disabled or infirm parents/guardians during the special shop opening hours for key worker and carers. Social services along with NPT Youth service were involved in this successful campaign NPT Young Carers now have key worker status.
- Weekly Zoom meetings weekly were delivered by the Families First teams for Young Carers and they were also contacted weekly to check on their well-being.
- Food parcels were delivered to Young Carers and their families during lockdown.
- The Deputy Youth Mayor wrote a blog especially for young carers highlighting her own experience and signposting to agencies who could support if needed.
- The Deputy Youth Mayor was selected to participate in the 4 Commissioners Question Time on Covid 19 to get information for Young Carers along with other young people in NPT.

### **Non Discrimination Race/Hate crime:**

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- The Youth Council issued a statement following the death of George Floyd stating their solidarity with the BAME communities in the UK along with condemning the violence towards peaceful protestors in the US.  
The Youth Council also voiced their solidarity with communities suffering discrimination and poverty quoting the Covid 19 Report which highlighted health inequalities across the UK not just in BAME communities. . The Youth Council stated this should be a catalyst to addressing these issues, protecting all communities and making real change now. They went on to say Everyone should be able to stay safe physically and mentally through these hard times.  
NPTCBC are now consulting staff and young people on how the local authority can work with and better for BAME communities.

### **Violence Against Children/Young People:**

NPT Youth Council consulted on the Swansea Bay UHB Youth Board's Domestic Abuse/Live Fear Free information for schools. The youth council suggested some changes to make it more appealing to children and Young People The information was then sent out to schools.

### **Homelessness:**

- The lack of beds within the county borough and moving young people into safe supported accommodations was an issue during the pandemic.
- A multi-agency task group was then set up to address and prioritise the young people in need which included the Youth Support Team (YST).
- Young people were contacted weekly and supported in accessing their benefits, budgeting along with getting involved in online quizzes and received arts and crafts resources to combat social isolation/boredom.
- Young people were also supported with accessing foodbanks and grants e.g. mi-fi units so they could access college/job centres/universal credit and some monies towards essential goods during lockdown. Some young people in crisis also had support with gas and electric during this time. Medication was, in emergency cases picked up and delivered to young people by staff. Support for young people included weekly well-being checks by youth workers.
- During the pandemic positive measures by welsh government to protect the homeless community included additional support for local authorities to keep the community safe and off the street within hotels, hostels and B&B accommodations.
- The pandemic also caused a delay in young people adults moving on from supported accommodation and from floating support. This is moving slowly now.

Currently there is a lack of accommodation for young people aged 16 – 17 presenting as homeless who need additional support such as supported housing or floating support due to their needs and ages.

### **What policy or changes in law need to happen and why? Any gaps?**

Homelessness measures during the pandemic needs reviewing when easing of lockdown procedures can safely take place in order to prioritise young people in crisis and free up beds within authorities, along with keeping the homeless community safe as well. Part 2 of the Housing (Wales) Act 2014.

This is especially important for 16 – 17 years olds as a decision made at Head of Service/Director level was young people 16-17 are not to be placed in B & B, hotels or hostels.



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The rationale was that many Adult occupants placed there have complex issues.

**What recommendations do you wish to make to ensure positive change for children?**

**Emotional & Mental Health**

- Separate additional funding streams from WAG to support combat and prevent young people escalating into adult mental health services.
- Young people/Children have special broadcasts from welsh government in the event of any pandemic or emergency situation TV, Radio. Social media etc.
- More funding for youth services/youth provisions
- Better responses from welsh government re consulting with young people
- Involve/Consult with Young People on policies decisions regarding their education in order to avoid the shocking way welsh government Ministers worked out the A Level results and then left it to young people to sort out their mistake.

**Play & Leisure**

- Welsh Government should be prioritising play and leisure activities on line during any pandemic or lockdown for children and young people by giving additional funding to local authorities. These could then be to be pre planned resulting in a co-ordinated approach across Wales.

**Young Carers:**

- ID Badges to be issued across Wales  
Support for Young Carers through Youth Services as in NPT.

**Non Discrimination Race/Hate crime:** Child Poverty along with Health inequalities needs addressing. The BAME community need additional support and protection during any pandemic/lockdown

**RESPONSE 62 – THINK FAMILY PARTNERSHIP**

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? (Please provide as much information as you can to justify your reasons)**

- Emotional & Mental Health
- Play & Leisure

**What information or evidence do you have to support this? (Please provide as much information as you can, such as links to reports, case examples, statistics etc.)**

**Emotional and Mental Health Issues/Education:**

- At the beginning of the COVID-19 lockdown, discussions took place with samples of our Families First service users, which included children and young people. Children and young people were concerned with the inability to have direct face to face contact with friends/family and were concerned for their mental health and wellbeing. Some young people explained that had previously experienced mental health issues and were concerned that that these issues would resurface.
- Families' First projects continued to provide emotional and mental health support during lockdown, despite being unable to provide face to face work with service users. Projects provided telephone contact sessions with qualified counsellors, as well as online video calls. Wellbeing packs were delivered to service users and online courses were made available.

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- A survey was undertaken by all Families First commissioned projects to try to consider the impact that the Covid-19 pandemic and social distancing guidelines had on families in NPT and the services that are provided under the Families First Programme. Given the various implications (i.e. – changes to routine, bereavement, relationship breakdown and financial pressure) most projects anticipate more demand to provide emotional wellbeing support moving forward. This will include: -
    - Emotional support and counselling needs due to a number of strains being put on families including financial and relationship.
    - Increased mental health support
    - Low level poor mental health in young people
    - More physiological issues related either to mental health issues or poor diet due to lack of finances.
    - Increase in negative coping strategies such as substance misuse, self-harm and suicidal ideation as they see no way out of the unavoidable recession that will follow the end of the immediate pandemic situation.
  - The Sandfields West Children's Community project which aims to improve the lives of children and their families, ensuring families that need support can access. Ongoing partnership work with local services during COVID-19 and conversations with families/schools highlighted concerns around mental health and wellbeing. Plans have been made with services to focus and include support for this in their programmes as restrictions ease. We are preparing for small group work alongside the mental health legacy workers, schools and families to provide any support that is necessary.

### **Play & Leisure:**

- Playgrounds were closed for a significant period of time during lockdown, thereby potentially hindering the development of children and young people. For some communities, playgrounds provided the only available outdoor play spaces for children and young people.
- The Think Family Partnership posted online challenges to encourage fun and imaginative play opportunities for families to utilise during lockdown.
- Community Play Day events did not take place this year because of lockdown. The Think Family Partnership campaigned for families and childcare settings to organise their own family play days. An online competition was also created for families to win 'play packs' and promote Play Day.

### **What recommendations do you wish to make to ensure positive change for children?**

#### **Emotional & Mental Health**

- More funding for services to support families, children and young people with emotional & mental health issues given the increase in demand.

#### **Play & Leisure**

- More needs to be done to support local authorities in providing and maintaining play opportunities for C&YP.
- Additional funds through the All Wales Play Opportunities Grant would help NPT better meet priorities that make up the Play Sufficiency Action Plan.

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## RESPONSE 63 – TORFAEN YOUNG PEOPLE’S FORUM

During the Torfaen Young People’s Forum meeting last night we discussed what key priorities the young people felt the UN should priorities in their upcoming report. Are you able to add their views to the others please? here they are:

1. Tackle Child Poverty: The forum are concerned about the increasing impact of poverty on children and young people due to Covid-19. The increase in people accessing foodbanks and benefit support is a great concern to them
2. Support Children and Young People’s Mental Health. The local (Torfaen) results for the ‘COVID & Me’ survey and data from a consultation with the Royal College of Paediatrics suggests there is an increase in children and young people needing to access appropriate support for mental health in a timely manner. They feel this is an important priority as it has far reaching consequences on many other areas of a child’s life.
3. The Right to be safe. Again, during COVID we have seen evidence to suggest young people do not feel safe (based on results from Torfaen data for COVID & me). Although we appreciate we need to do more work to unpack this and identify what in particular young people don’t feel safe about it is an important discovery. We are also aware there have been less safeguarding referrals since children and young people are not accessing school as often and there has been an increase in those requiring support from Domestic Abuse services.

## RESPONSE 64 – PONTYBERIN PRIMARY SCHOOLS

**What are the main issues that the Welsh Government and public bodies should be prioritising and why? *(Please provide as much information as you can to justify your reasons)***

A child-rights based approach should be explicit and woven throughout the Curriculum for Wales, 2022 to ensure all children and young people learn about their rights throughout their education.

The UNCRC should not just be noted in policy documents if we are to ensure every professional working with children understands how a rights-based approach can improve outcomes for children and young people. If the UNCRC is effectively woven throughout AoLE’s and teachers are supported with examples and training, it will ensure that the rights of children are taught, realised and respected in every school.

If schools are going to adopt a rights-based approach, this needs to be reflected at a strategic level and made explicit with full support from Welsh Government.

**What information or evidence do you have to support this? *(Please provide as much information as you can, such as links to reports, case examples, statistics etc.)***

We have worked hard to ensure that a child rights-based approach is embedded throughout policy and practice at Pontybrenin. This has led to several improved outcomes for our children including increased levels of peer to peer empathy and respect, activism and a greater desire for children to advocate for their rights and the rights of others. The UNCRC has also provided the whole school community with a shared values system that is understood by all. This was evident in our [Estyn inspection report](#)

**What policy or changes in law need to happen and why? Any gaps?**

Full incorporation of the UNCRC to ensure a due regard is given to the UNCRC throughout Wales.

**What recommendations do you wish to make to ensure positive change for children?**

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Teaching, upholding and realising children's rights should not be optional for schools and inconsistently recognised at different levels of education across Wales. To make the UNCRC an explicit and integral part of the new Curriculum for Wales, 2022 will ensure that every child will attend a school where their rights will be taught and respected. This will help to ensure improved outcomes for children and young people as they will be able to understand their entitlements, have an international agreed Convention to better understand theirs (and others) lives, use a right-based approach to seek support when needed and be empowered to act as local and global citizens of Wales and the world.

## **RESPONSE 65 – ADELE ROSE**

### **Children in Wales – State of Children's Rights in Wales project – Call for Evidence**

I am forwarding the email that I wrote to Welsh Government 'Our Future Wales'

I have been passionate about inclusive education for some time. I run a parent carer online Facebook group which radiates out of Swansea – I am constantly listening to the issues parents face. Due to having a disabled child I have been unable to go back to work as my child is different so therefore my options of continuing my career and having a pension went a long time ago. My other 2 children who also had some additional needs have had to go without as we only have one wage coming in. Many parent carers are also women so this is also a gender issue, also it is a poverty issue as often these female parent carers are single parents. It is assumed as I have a disabled child that this is my lot in life - its my problem. My son is not viewed as being part of the community other than being a novelty, additional, special, needs separate. I have vision of a life that by son belongs in his local school and that he grows up being connected with his local community. Even though he is disabled I have a vision that he will do a job and that he will be supported to do that job but this is far from what he is being set up for at the moment. To be able to understand it you need to experience the discrimination. I believe that Inclusive Education is one of the answers to this and so does the United Nations 🌍

### **Inclusive education**

Inclusive Education is one of the SGD's but it is really hard to see that this is on the agenda in Education, our Laws around Education as well as school culture.

The UNCRPD is mentioned in the new ALN law but not sure what the people leading on the law or those in education understand about the human right to Inclusive Education and what that looks like. I believe that due to bias and lack of understanding it's hard to see whether the new law is just reinventing the wheel or going effecting real change. From what I've seen when I have talked to some of the decision makers is that they really do not understand rights and how this lack of understanding this can lead to discrimination, prejudice and consequently lack of adequate support and education.

***Some common phrases used by schools, specialist teachers, lawyers etc–***

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- Sorry we cannot cater for your child's needs.
  - Wouldn't it be better to find a more suitable school.
  - Wouldn't he be better with his own kind ( Yes this was said to me – his own kind would be children who do not fit a certain level of understanding or are deemed 'normal' or 'average' – none of whole are similar at all apart from them being unable to keep up)
  - At special school he will have his needs met – not true!

### ***Common practices –***

- Separate classrooms
- Special schools
- Different entrances
- Different start and finish times
- Taken out of classes for catch up
- Streaming
- Always referred to as being deficient/ something wrong.
- Always 'othering'
- Often grouped together with other children with perceived deficits – even socially
- Not giving out letters for activities that the mainstream children are offered so therefore not an equitable education. An example of this is that children are often excluded from learning musical instruments, school trips as well as opportunities to be involved with roles like monitors or prefects.

### ***Some key issues –***

- Dual system of education drives segregation
- Curriculum doesn't include together children who are at different levels of understanding
- At secondary school its all about gaining GCSE's and A levels but those who cannot attain those get sidelined into other 'Special/Accessible' courses which actually means they are segregated based on ability/learning disability. The content of GCSE's needs to be multi-faceted so that it allows everyone to stay together and qualify at their level.
- Teachers do not consider themselves to be teachers of all children regardless of ability.
- Teachers aren't trained to teach all children so are out of their depth.
- Class sizes are far too big to allow for Inclusive Education.
- School buildings aren't built for all children.
- Changing places toilets and other accessible features – and not separate entrances – this message isn't good!
- BSL needs to be the alternative language rather than Makaton for ALL learners. If you think about language then learning Makaton is basic language – I've experienced

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issues with this as my son has learning disability as well as being deaf. I could expand on this.

- Special units within mainstream schools is segregation and schools are discriminating just by the way they organise the timetables or staff – its been shocking to experience!
- Language used like SEN children/parents or ALN – it others children as some different species in practice.
- If 80% of communication is body language and facial expression then that prejudice is coming across silently when there is a lack of understanding by the professionals. Things don't need to be said to be felt.

The Charity Model, Medical model and economic model is very prevalent at school! We need more of the social and HR model!

## Models of Disability

### **Charity Model**

- Person with disability is not an agent of their own life but rather a recipient of care, cure, and protection

### **Medical Model**

Person with disability purely as someone with a part of the body or mind which is not working and needs to be fixed or cured

### **Economic Model**

- Value based on productivity

### **Social Model**

- People are disabled by society- aim is to remove barriers

### **Human Rights Model**

- Persons with disabilities should have access to everything within their society and community on an equal basis with others

These messages sent to our future generation is that if you don't fit a certain way then you don't belong. We aren't encouraging or embedding in our future generation a sense of belonging whoever you are and whatever your ability. The education system perpetuates inequality and discrimination. Until our main decision makers understand this we aren't going to make any headway. To achieve this you cannot really have huge class sizes.

Teachers need to be trained to teach ALL children regardless. If a child is in your school that requires extra expertise then teachers should be given the training. I spoke to a friend who worked in a special unit. I asked him why he applied for the job and what qualifications he needed. He told me that he just fancied a change and that he had a general teaching degree. I then asked him if he had on the job training and he replied hardly anything. This was backed up by the answers teachers gave to me when I visited their schools when considering secondary school for my son Rhys.

Unconscious Bias, discrimination and prejudice is rife in education. How can we tackle this? Training? - I would love to get help with developing this! As well as allowing me through the door!

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The frustrating thing for me is that there is always money for policies and laws, big consultation events which rarely include people with lived experience of the issues yet everything that our children need is rationed 😞

Everything needs to connect from birth to 25 years and beyond. My son who is 14 years old is being led along to eventually go to day services and dependency as there is no aspiration or path for him in our system. A friend's daughter attends day service and is 24 years old – it's awful. Local provision offers respite with older people as ONLY option 😞 - She attends a day service that doesn't even have anything that interests her – her only option is to stay home in her bedroom which is often what she chooses to do! Where are her human rights in all of this?

Inclusive education and Universal Design for learning would allow for disabled and non-disabled people/children to be educated together. Learning together in the local school where they live would ensure they belong to their community. I need to emphasise this point - **Schools staff really need to understand bias, prejudice, othering, discrimination and ableism** as these people spend loads of time with our future generation! Decision makers also need educating in these things. The system is perpetuating these issues and affecting poverty and inequalities.

Some reading around Human Rights, right to inclusive education and universal design etc –

<https://www.downs-syndrome.org.uk/news/new-educational-guidelines-for-learners-who-have-downs-syndrome/>

<https://www.unicef.org/education/inclusive-education> worth also reading the blog posts at the bottom of this link.

[https://en.unesco.org/gem-report/report/2020/inclusion?fbclid=IwAR2HBoIRa0yo9GkDUTCMjwr5M2\\_u5t22q-KRyMiDwnGI\\_IXvwSm1bGFh5M4](https://en.unesco.org/gem-report/report/2020/inclusion?fbclid=IwAR2HBoIRa0yo9GkDUTCMjwr5M2_u5t22q-KRyMiDwnGI_IXvwSm1bGFh5M4)

[https://www.vitalsource.com/en-uk/products/inclusive-education-for-the-21st-century-linda-graham-v9781760873448?duration=180&gclid=Cj0KCQjwu8r4BRCzARIsAA21i\\_BQ8kS5u\\_9DApYAiMeXzYPq1PjO2Fiq4c-\\_P1VtWGqa7qYCY78dG4oaAiWdEALw\\_wcB](https://www.vitalsource.com/en-uk/products/inclusive-education-for-the-21st-century-linda-graham-v9781760873448?duration=180&gclid=Cj0KCQjwu8r4BRCzARIsAA21i_BQ8kS5u_9DApYAiMeXzYPq1PjO2Fiq4c-_P1VtWGqa7qYCY78dG4oaAiWdEALw_wcB)

Ted Talk on reimagining disability - <https://www.youtube.com/watch?v=MRZWjCaXtQo>

Ted Talk on Universal Design for Learning [https://www.youtube.com/watch?v=CtRY\\_1mZWwG](https://www.youtube.com/watch?v=CtRY_1mZWwG)

Worth talking a look at Shelley Moore for solutions <https://fivemooreminutes.com/about/>

Beth has been working with me on inclusion for my son

[https://lightbulbmomentsinsendandaln.weebly.com/?fbclid=IwAR3tyBqLnISQ3k7bjJPdXjfggjzNJf0AMcaFmJGJl\\_p\\_nAEH9rLaTt4ayU](https://lightbulbmomentsinsendandaln.weebly.com/?fbclid=IwAR3tyBqLnISQ3k7bjJPdXjfggjzNJf0AMcaFmJGJl_p_nAEH9rLaTt4ayU)

Inclusive solutions - they are in Nottingham but have worked in Wales <https://inclusive-solutions.com/>

Centre for Studies on Inclusive Education <http://www.csie.org.uk/>

I've written twice for Alliance For Inclusive Education in their magazine 'Inclusion Now' <https://www.allfie.org.uk/news/inclusion-now/inclusion-now-48/inclusion-welsh-perspective/> and <https://www.allfie.org.uk/news/inclusion-now/inclusion-now-50/voices-for-inclusion/>

I would love to talk to someone about this below – to me it is simple – I am better talking about it rather than writing it. I would love the opportunity to be able to chat to someone about this.

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## UNCRPD Article 24

<https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/article-24-education.html>

**IMPORTANT READ - and general comment No.4** <https://www.refworld.org/docid/57c977e34.html>

## Article 24 – Education

*1. States Parties recognize the right of persons with disabilities to education. With a view to realizing this right without discrimination and on the basis of equal opportunity, States Parties shall ensure an inclusive education system at all levels and lifelong learning directed to:*

*a. The full development of human potential and sense of dignity and self-worth, and the strengthening of respect for human rights, fundamental freedoms and human diversity;*

*b. The development by persons with disabilities of their personality, talents and creativity, as well as their mental and physical abilities, to their **fullest potential**;*

*c. Enabling persons with disabilities to participate effectively in a free society.*

*2. In realizing this right, States Parties shall ensure that:*

*a) **Persons with disabilities are not excluded from the general education system on the basis of disability, and that children with disabilities are not excluded from free and compulsory primary education, or from secondary education, on the basis of disability;***

*b) **Persons with disabilities can access an inclusive, quality and free primary education and secondary education on an equal basis with others in the communities in which they live;***

*c) **Reasonable accommodation of the individual's requirements is provided;***

*d) **Persons with disabilities receive the support required, within the general education system, to facilitate their effective education;***

*e) **Effective individualized support measures are provided in environments that maximize academic and social development, consistent with the goal of full inclusion.***

*3. States Parties shall enable persons with disabilities to learn life and social development skills to facilitate their full and equal participation in education and as members of the community. To this end, States Parties shall take appropriate measures, including:*

*a) **Facilitating the learning of Braille, alternative script, augmentative and alternative modes, means and formats of communication and orientation and mobility skills, and facilitating peer support and mentoring;***

*b) **Facilitating the learning of sign language and the promotion of the linguistic identity of the deaf community;***

*c) **Ensuring that the education of persons, and in particular children, who are blind, deaf or deafblind, is delivered in the most appropriate languages and modes and means of communication for the individual, and in environments which maximize academic and social development.***



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**4. In order to help ensure the realization of this right, States Parties shall take appropriate measures to employ teachers, including teachers with disabilities, who are qualified in sign language and/or Braille, and to train professionals and staff who work at all levels of education. Such training shall incorporate disability awareness and the use of appropriate augmentative and alternative modes, means and formats of communication, educational techniques and materials to support persons with disabilities.**

**5. States Parties shall ensure that persons with disabilities are able to access general tertiary education, vocational training, adult education and lifelong learning without discrimination and on an equal basis with others. To this end, States Parties shall ensure that reasonable accommodation is provided to persons with disabilities.**

I do have much more to go with this but unable to write it down at present. I believe that this would solve a lot of issues with poverty and social care if education was done properly. I sit on our Regional Partnership Board and struggle to listen sometimes as I feel that so much money is ploughed into trouble shooting instead of early intervention and prevention. I am better discussing these things in a group rather than writing things down.

Thanks for listening 😊

Adele Rose-Morgan

## **RESPONSE 66 – NOAH’S ARK CHILDREN’S HOSPITAL FOR WALES**



### **Access to medicines and good quality paediatric research: children’s human rights issues of concern in the Welsh context**

Evidence submission to UN Committee on the Rights of the Child September 2020

Authors:

Dr Phillip Connor (R&D Lead, Children and Women Clinical Board, Cardiff and Vale UHB, Speciality Lead, Child Health, Health and Care Research Wales), Rhian Croke (Children’s Human Rights Adviser), Dr Martin Edwards (Consultant Paediatrician), Rhian Thomas Turner (R&D Lead, Noah’s Ark Children’s Hospital for Wales), Dr David Tuthill (Consultant Paediatrician).

### **Noah’s Ark Children’s Hospital for Wales Children and Young Adult’s Research Unit**

This evidence is supported by the Royal College of Paediatrics and Child Health for Wales

#### **1. Introduction**

This evidence concerns Welsh Government’s decision-making regarding allocation of resources for health services research in Wales, specifically addressing the issue of access to medicines and clinical paediatric research in Wales and also a child’s right to be heard in health research decision making.

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We submit there is as yet little evidence of implementation in the practice of the duty of due regard to the UNCRC to these requirements in Wales and this impacts heavily on children with complex health conditions.

In this submission to the UN Committee on the Rights of the Child, we outline our concerns and make a number of recommendations.

We make reference to the UN Committee on the Rights of the Child's UK Concluding Observations 2016<sup>1</sup> in relation to:

- Children's Rights Impact Assessments para 10 a and b
- Allocation of Resources 12-13 a-e
- Respect for the Views of the Child 30 a and 31 b
- Health and Health Services para 58 a and b

## **2. Why is access to medicines and good quality paediatric research a children's human rights issue?**

Access to essential medicines is entrenched in the right to the highest attainable standard of health, which is enshrined in international human rights law and the development of essential medicines requires good quality paediatric research. States are obliged under international human rights law to respect, protect and fulfil the right to health, which includes an obligation to adopt legislative, administrative and budgetary measures to facilitate access to medicines that are affordable, accessible, and culturally acceptable and of good quality. These are a core set of minimum obligations which are not subject to progressive realisation, including access to essential medicines.<sup>2</sup>

### **United Nations Convention on the Rights of the Child (UNCRC)**

With respect to the UNCRC and the provisions of the Rights of Children and Young Person's Wales Measure 2011 the two key articles of the United Nations Convention on the Rights of the Child in relation to the child's right to health are:

Article 6 of the UNCRC states that:

1. States Parties recognize that every child has the inherent right to life.
2. States Parties shall ensure to the maximum extent possible the survival and development of the child.

Article 24 of the UNCRC states that:

1. States Parties must recognize the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health. States Parties shall strive to ensure that no child is deprived of his or her right of access to such health care services.

Additionally the UN Committee on the Rights of the Child General Comment No. 15 explains that services should comply with their obligation to adhere to what is commonly referred to as the AAAQ framework.<sup>3</sup> States should ensure that all children's health services and programmes comply with the criteria of availability, accessibility, acceptability and quality.

According to General Comment No. 15 of the UNCRC, realizing the right to access medicines is contingent upon the realization of these four interrelated elements.

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There are many articles of the UNCRC that are essential to realising a child's right to health. In considering the implications of this response we would like the Committee to take into account these further articles, summarised below:

Article 2: No child should be discriminated against on any grounds.

Article 3: The best interests of children should always be considered in individual care decisions, but also in the planning, delivery, and setting of service standards

Article 4: Economic, social and cultural rights (including the right to health) must be implemented to the maximum extent of available resources.

Article 12: All children should be involved in decisions that affect them, from individual care decisions through to shaping health services that they might use.

Article 23: All children with disabilities have the right to be involved, which includes having appropriate communication support.

Article 27: Every child should have a standard of living adequate for the child's physical, mental, spiritual, moral and social development.

Article 28: Every child has the right to education, including as an inpatient, structuring services to avoid missing school due to participation in clinic appointments.

Article 31: Every child has the right to rest, relax and play when engaging with health services.

### **3. The Areas of Concern**

#### **3.1 Inadequate paediatric research across the UK**

"Children are not small adults; they need biomedical and health services research that takes account of their changing physiology, and addresses their problems directly, generating evidence to improve the quality of the treatments and healthcare they receive, and the policies that affect their wellbeing" (Royal College of Paediatrics and Child Health (RCPCH) 2012)

The prevailing Research and Development (R&D) model is currently ill-prepared to respond to the child population which has little purchasing/voting power, which sees child health research neglected overall and a lack of development of medicines across the UK (and globally). The UK ranks 19th in Europe for neonatal mortality and 20th for under 5 mortality dropping significantly from its position in 1990.<sup>4</sup> Cancer is the leading cause of mortality in children aged 0-9 years in Wales.<sup>5</sup> Paediatric research is critically important in developing new medicines and many interventions still lack a robust evidence base. Improvements in health care in children will potentially have the longest (lifetime) impact.

According to the Royal College of Paediatrics 'Turning the Tide report' 2018<sup>6</sup>:

- Consultant academic paediatricians are still a very small percentage of the UK paediatric workforce
- Consultant paediatricians have limited time for research in their work plans.
- Children's interests are not currently represented adequately in the UK life sciences industry's strategy
- Not enough paediatricians on national research boards or committees promoting the interests of children.
- Funding for child health research has been decreasing year on year since 2012

It is discriminatory and not in the best interests of children as a social group that they are not gaining the benefits of good quality research. A progressive programme of work has been undertaken by the European Union through the 'Paediatric Regulation' that has encouraged increased access to medicines for children since 2007. However given that the UK has now left the European Union, a clear framework of accountability for children is essential. Research has

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demonstrated that with legal systems with legislative provisions in place the availability of a higher number of new paediatric medicines for children has been achieved.<sup>7</sup> According to the RCPCH, if the UK is; 'not completely aligned with the European Paediatric Regulations, the volume of commercial research in the UK will be reduced with strong negative impacts on child health'.<sup>8</sup>

### **3.2 Welsh Health Research Infrastructure neglects Paediatric Research**

This is set against a context whereby paediatric research in Wales is already underrepresented and resourced. From 2010-2015 children's paediatric research was included in the Welsh Health Infrastructure through the Children and Young People's Research Network; however, the change from the old infrastructure to the new Centres and Units in 2015 resulted in a loss of focus on paediatric research. The creation of a Clinical Research Facility for children was one of the National Centre for Population Health and Wellbeing's objectives, however no funding was made available for this and Cardiff and Vale University Health Board was forced to move forward with this as a solo project. Since 2015 paediatric research across Wales has been supported in 2 ways: a) through the Children's Speciality Lead and b) through Activity Based Funding (ABF). This is wholly inadequate; the Speciality Lead (currently held at the Noah's Ark Children's Hospital for Wales (NACHfW) is funded for one session of consultant time (3.75 hours) a week to encourage and increase paediatric research across Wales and the ABF model does not compensate for the complexity of paediatric trials and the fact that numbers will always be a very small proportion of adult studies

Despite these challenges, in 2017 the Children and Young Adults' Research Unit (CYARU), the first Clinical Research Facility in Wales dedicated to children was opened. CYARU is wholly funded at risk by Cardiff and Vale University Health Board's Activity Based Funding allocation and a grant from LATCH, the Children's Cancer Charity to pump prime the development of early phase oncology research.

The aim is to build on the work of the CYARU and the work of the Speciality Lead and develop Wales-wide paediatric research; however, for this to happen, core funding must be secured. In April 2019 the Children's Hospital in partnership with Wales-wide collaborators put forward an application to the Health and Care Research Wales infrastructure fund. The application, after being considered by an External Review Board (ERB) failed to receive funding. Basic feedback regarding the ERB's decision was offered in the outcome letter; however the letter also stipulated that no further feedback would be forthcoming. The Wales wide collaborators understand the competitive nature of research funding, however, without further feedback it is impossible to determine whether due regard was paid to the UNCRC when the funding decision was made.

### **3.3 Activity Based Funding Model: Discriminatory towards children**

Activity Based Funding (ABF) is a Welsh Government formula for paying for each patient recruited in to a portfolio study. Portfolio studies are those deemed of sufficient quality to qualify for such recognition and are placed on an All Wales register of research studies. Studies are categorised in to three bands and funded per patient recruited: interventional (£976), observational (£311) and large sample studies (£89). ABF does not work for low recruiting, highly complex studies that are prevalent in paediatric research.

The ABF model should be assessed for compliance with the UNCRC. Although the model may not be prima facie discriminatory against children however when practically applied there is a discriminatory impact. This can result in accessing fewer opportunities to develop critical and age appropriate medicines. This indirect discrimination may breach a child's best interests (article 3 of the UNCRC), the child's right to survive and develop (article 6) to their fullest potential and to the

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highest attainable standard of health (article 24). Any health funding model should treat all patients equally and without discrimination (article 2)

It is also discriminatory because of the resulting limited opportunities to participate in a clinical study in the Welsh context. Early Phase Paediatric Oncology research is a prime example of this issue. Children and their caregivers who, following discussions with clinical teams have decided they would like to consent to participate in early phase studies currently have to travel out of Wales to participate in such studies. Adult patients do not have to do this. Children and caregivers may have to travel long distances to participate in clinical studies, take longer periods of time off work and face negative impacts on their household economy (Article 27). This may also have a negative impact on the child, who consequently does not have regular access to siblings, extended family and to friends who can offer support to the child and the caregiver, in addition to their education (Article, 28 of the UNCRC).

Children's views and perspectives should also be considered and in particular the children who are directly affected by these funding decisions (Article 12 UNCRC) and is an important aspect of compliance with the Rights Measure. In Wales, there are currently few mechanisms allowing children's views to be heard in the production of research for conditions they are affected by. This is also demonstrated by other mechanisms e.g. Health Wise Survey that does not consult children who are under the age of 16.9 The 2019 Parliamentary Review of Health and Social Care recommended, 'Strengthening through voice and control in health and care and ensuring all ages and communities have equal involvement',<sup>10</sup> additionally the Prudent Health Care Principles emphasise the importance of co-production.<sup>11</sup> Children currently do not have equal involvement in health care decision making that affects them.

This was also emphasised as an area of concern by the UN Committee on the Rights of the Child in 2016 that children's views are not systematically heard in policy making on issues that affect them and to:

'establish structures for the active and meaningful participation of children and give due weight to the views in designing laws, policies, programmes and services and the local and national levels'.<sup>12</sup>

### **3.4 Lack of transparency with regards to health budget decision making**

Recommendations were made by the UN Committee in 2016, in relation to transparency in budgeting, the importance of children's rights impact assessments in relation to budgets and spending to the maximum extent of available resources.<sup>13</sup> We are concerned that there is still a lack of visibility of children in the Welsh Government health research budget. We would urge more detailed analysis on specific areas of spend in particular in relation to health research.

Although requested from the Health and Care Research Wales Support Centre, the figure for what is currently spent by Welsh Government on paediatric research is not forthcoming. The lack of transparency in public expenditure on paediatric research means that it is currently not possible to tell without more detailed analysis, whether the Welsh Government is using sufficient levels of expenditure to fulfil children's right to the highest attainable standard of health. Under Article 4 of the UNCRC, Ministers have a clear obligation to demonstrate whether they are fulfilling children's economic, social and cultural rights 'to the maximum extent of available resources'. We believe that transparent evidence of spending on children in relation to health research is an essential tool in both meeting this obligation and evidencing how planned spending and indeed spending cuts are impacting on the outcomes for children and young people in the enjoyment of their rights.

In October 2019 Rhian Croke, Dr Philip Connor and Rhian Thomas-Turner gave evidence to the Welsh Parliament's Children, Young People and Education Committee during a National

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Children's Rights in Wales Inquiry. The full report was published in August 2020 and highlighted that Welsh Government are currently not paying due regard to the UNCRC when making budgetary decisions on children's paediatric research in Wales and complying with their obligations under Article 4.14 We are pleased that the Welsh Parliament's Children and Young People's Education Committee considered this an area of concern and have issued a series of recommendations that we support and endorse. We urge that these are implemented and that in accordance with the Rights Measure that all decision making, including budgetary decisions are assessed for compliance with children's rights.

## **5. Conclusion**

Even though there is a strong national commitment to the human rights of children in Wales, it is apparent that currently health policy and decision making around access to medicines and paediatric research has not incorporated the accountability framework of children's human rights and international human rights treaty obligations. These obligations could have greater significance given the UK is leaving the European Union and the protections and regulatory framework the EU Paediatric Regulation provides. We therefore outline a number of recommendations below:

### **Recommendations to the Welsh Government**

- Welsh Government must urgently dedicate funding to the development of paediatric research and a paediatric academic workforce. A fully funded Wales-wide Research Infrastructure for paediatrics will be essential to delivering this goal and should be underpinned by a children's human rights approach.
- The current Welsh Government funding models for funding clinical research in Wales unfairly impact on the paediatric population. We recommend that Welsh Government funding models no longer discriminate against children and are designed in such a way that instead fulfils children's human right to health, survival and development and other interrelated human rights.
- The Welsh Government should incorporate the positive elements of the EU Paediatric Regulation and also take this critical opportunity to honour their obligations under the Rights of Children and Young Persons (Wales) Measure 2011.
- The Welsh Government must urgently deliver on the 2016 Concluding Observations of the UN Committee on the Rights of Child in relation to allocation of resources and publish the results of children's rights assessments particularly with regards to health care decision making and decision making in relation to paediatric research
- The Welsh Government must urgently deliver on the recommendations of the Welsh Parliament's Children and Young People and Education Senedd Committee National Children's Rights Inquiry published August 11th 2020.<sup>15</sup>
- The Welsh Government and all health boards across Wales must honour their obligations under Article 12 of the UNCRC and ensure children's voices are heard in health research decision making.

1 Committee on the Rights of the Child (2016) Concluding observations on the fifth periodic report of the United Kingdom of Great Britain and Northern Ireland

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRC/C/GBR/CO/5&Lang=En](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRC/C/GBR/CO/5&Lang=En)  
[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRC/C/GBR/CO/5&Lang=En](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRC/C/GBR/CO/5&Lang=En)

2 UN Committee on Economic, Social and Cultural Rights, General Comment No.14: The Right to the Highest Attainable Standard of Health E/C.12/2000/4 para 47

3 UN Committee on the Rights of the Child, General comment No. 15 on the right of the child to the enjoyment of the highest attainable standard of health CRC/C/15/2013

4 Office of National Statistics Data 2017

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/childhealth/articles/ukdropsineuropeanchildmortalityrankings/2017-10-13> accessed January 2020.

5 Royal College of Paediatrics and Child Health, State of Child Health 2020: Wales (RCPCH 2020) 11

6 7 Royal College of Paediatrics and Child Health (2018) [https://www.rcpch.ac.uk/sites/default/files/2018-03/turning\\_the\\_tide\\_-\\_five\\_years\\_on\\_2018-03.pdf](https://www.rcpch.ac.uk/sites/default/files/2018-03/turning_the_tide_-_five_years_on_2018-03.pdf) p.7

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7 European Commission (2017) State of Paediatric Medicines in the EU 10 years of the EU Paediatric Regulation. COM (2017) 626 [https://ec.europa.eu/health/sites/health/files/files/paediatrics/docs/2017\\_childrensmedicines\\_report\\_en.pdf](https://ec.europa.eu/health/sites/health/files/files/paediatrics/docs/2017_childrensmedicines_report_en.pdf)

8 Royal College of Paediatrics and Child Health (2018) [https://www.rcpch.ac.uk/sites/default/files/2018-03/turning\\_the\\_tide\\_-\\_five\\_years\\_on\\_2018-03.pdf](https://www.rcpch.ac.uk/sites/default/files/2018-03/turning_the_tide_-_five_years_on_2018-03.pdf) p.7

9 <https://www.healthwisewales.gov.wales/>

10 UK Parliament, Parliamentary Review of Health and Social Care in Wales: A revolution from within: transforming health and care in Wales (UK Parliament January 2018)

11 Prudent Health Care (2016) Prudent Health Care; Securing Health and Well-being <http://www.prudenthealthcare.org.uk/Generations1.pdf>

12 Committee on the Rights of the Child (2016) Concluding observations on the fifth periodic report of the United Kingdom of Great Britain and Northern Ireland [https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRC/C/GBR/CO/5&Lang=En](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRC/C/GBR/CO/5&Lang=En)

13 <http://senedd.assembly.wales/mglIssueHistoryHome.aspx?lId=25724>

14 <https://senedd.wales/laid%20documents/cr-ld13405-r/cr-ld13405-r-e.pdf>

15 Welsh Parliament Children and Young People Education Committee, Children's Rights in Wales August 2020 <https://senedd.wales/laid%20documents/cr-ld13405-r/cr-ld13405-r-e.pdf>

## RESPONSE 67 – RCPCH

Taken together, these things set out the headlines from us, both in terms of what Children and Young People are Telling us, insight from paediatricians UK wide and in terms of the newest evidence we have available and policy calls in response to that evidence.

However, there is a bit more detail from a specifically Welsh perspective that I can share on some of the issues that Emma highlighted and which we set out in the response to the UK government which I forwarded previously and which I hope was useful in setting out our headlines and evidence base.

Specifically, these are around:

### **Poverty/Housing: Lack of strategy to reducing health inequalities and child poverty (including food insecurity, poor quality housing, poor indoor air quality)**

State of Child Health (SOCH) data in Wales paints a concerning picture around child poverty and inequality.

- In 2017/18, 22% of UK children were living in poverty before housing costs, 30% after housing costs.
- In 2017/18, 29% of children in Wales were living in poverty after housing costs, compared to 31% in England, 24% in Scotland and 24% in Northern Ireland.
- In 2017, 7.8% of UK children were living in persistent poverty

The SOCH report for Wales highlighted the impact of poverty and inequality in a number of child health issues in Wales.

- In 2017/18, the most deprived children aged 4-5 years in Wales were 1.4 times more likely to be overweight or obese than the least deprived.
- The child mortality rate in Wales is 70% higher for children in the most deprived groups than the least deprived children.
- In 2010, there was a 20% difference in the breastfeeding initiation rate between the most deprived (60%) and least deprived (80%) women

Based on this evidence, we made the following policy recommendation:

Welsh Government should acknowledge high child poverty rates, review existing programmes and publish a revised Strategy to reduce child poverty. The Strategy should provide national targets to reduce child

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poverty rates and specific health inequality targets for key areas of child health, with clear accountability across Government

### **Safeguarding: Lack of routine data collection on child protection referrals Children in the child protection system**

In 2018, the rate of children under the age of 18 on the child protection register was 47 per 100,000 in Wales, compared to 47.7 per 100,000 in Northern Ireland and 26 per 100,000 in Scotland. In Wales, the most common reason for being on the child protection register was emotional abuse (43.2%).

We made the following policy recommendation for Wales:

- Welsh Government should publish an impact assessment report from the National Action Plan Preventing and Responding to Child Sexual Abuse by the end of 2022.
- We welcome Public Health Wales' adverse childhood experiences (ACEs) hub, which should be regularly updated with information and resources.

### **Health: Increasing prevalence of mental health conditions combined with poor provision of mental health support services, lack of understanding and awareness of GP's/A&Es of long term conditions and how to manage them (e.g. Sickle Cell, Asthma, Epilepsy, Diabetes)**

In addition to the UK wide trends identified in our submission to UK government, there are areas of particular concern in Wales. The SOCH report for Wales highlights issues for children with epilepsy in Wales: in 2017/18, the rate of emergency admissions to hospital for epilepsy was 87.9 per 100,000 under 19 year olds in Wales, compared to 66.8 per 100,000 in England and 73.8 per 100,000 in Scotland.

Also, mental health remains a real concern and a challenge:

- In 2017, 11.2% of children and young people aged 5-15 in England reported having any mental health disorder. 5.8% of these were emotional disorders, 5.5% behavioural disorders and 1.9% hyperactivity disorders.
- There is no comparable mental health prevalence data available for Wales.

### **Mental health services**

- In 2016/17, the rate of mental health admissions for young people under the age of 18 was 13 per 100,000 in Wales, compared to 33 per 100,000 in England, 61 per 100,000 in Scotland and 40 per 100,000 in Northern Ireland.
- In 2016/17, the rate of available mental health beds for young people under the age of 18 was 3 per 100,000 in Wales, compared to 11 per 100,000 in England, 10 per 100,000 in Scotland and 9 per 100,000 in Northern Ireland.
- In 2016/17, the average length of stay on CAMHS inpatient wards was 99 days in Wales, compared to 72 days in England, 50 days in Scotland and 52 days in Northern Ireland.

Responding to these data, we made the following recommendations:



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- The Together 4 Children and Young People programme and the Ministerial Group delivering the recommendations made in the 'Mind Over Matter' (2018) report, provide structures to improve children and young people's mental health services. We welcome continued funding for Together 4 Children and Young People which should continue beyond 2021. In particular, we welcome commitments to work with Regional Partnership Boards to understand current provision and enhance early help and support; and to implement the Neurodevelopmental (ND) pathway and standards developed during the first phase, working coherently to deliver ALN Act provisions and an enhanced response for children and young people with ND.
  - Welsh Government should resource and support these programmes to ensure delivery of a whole system approach and support the 'missing middle' who need services but do not meet the criteria for Child and Adolescent Mental Health Services (CAMHS) services. This system should incorporate education and a Whole School Approach, early intervention, community based support and targeted support for vulnerable groups.
  - Welsh Government should continue to resource Time to Change Wales, which provides a national campaign to reduce stigma of mental health problems (delivered by Mind Cymru and Hafal).
  - Welsh Government should collect data on prevalence of mental health conditions in children and young people and report this at a minimum of every three years.
  - We welcome the NHS Benchmarking Unit's data collection on the performance of CAMHS services across the UK. All Health Boards should report their data into the benchmarking data collection.

You can find all of the data and policy recommendations for Wales from our State of Child Health report for Wales, which is here: <https://stateofchildhealth.rcpch.ac.uk/evidence/nations/wales/>

I hope these supplements have arrived in time to be of use. Apologies again for the delay and for the fractured nature of our response. This isn't ideally how we'd usually respond: a number of issues caused difficulties for us on this occasion.

**ALSO SUBMITTED – RCPCH DETAILED RESPONSE TO THE CALL FOR EVIDENCE IN ENGLAND**

## **RESPONSE 68 – ANN SHERLOCK**

Attached are the Welsh and English summary versions of the report on administrative justice and education that was part of Sarah Nason's overall project on administrative justice in Wales funded by the Nuffield Foundation. The even more lengthy full report is available [at https://mk0nuffieldfounpg9ee.kinstacdn.com/wp-content/uploads/2019/11/Admin-Justice-Wales-Education-Full.pdf](https://mk0nuffieldfounpg9ee.kinstacdn.com/wp-content/uploads/2019/11/Admin-Justice-Wales-Education-Full.pdf)

(The attached summaries are available also at: <https://mk0nuffieldfounpg9ee.kinstacdn.com/wp-content/uploads/2019/11/Admin-Justice-Wales-Education-Summary.pdf> (English version) and <https://mk0nuffieldfounpg9ee.kinstacdn.com/wp-content/uploads/2019/11/Gweinyddiareth-Gyhoeddus.pdf>)

The report is focused on the administrative justice system rather than the substantive rights of children and young people. Given that the focus is on how things are implemented and how disputes are avoided or resolved, it may be that some points may fit better in sections other than education eg discrimination, Art 12 etc. The key point is that if substantive rights are not accompanied by effective and accessible methods of avoiding and resolving disputes, then they are not realised in practice. So maybe our report will provide specific examples of some general underlying problems about the implementation of rights in practice.

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As it says in the report, the two issues on which most concern was expressed in our workshops and focus groups were fairness in exclusion proceedings and the need for independent advice, advocacy and assistance in relation to SEN/ ALN issues.

## **RESPONSE 69 – CHILD POVERTY ACTION GROUP (WALES)**



# **THE STATE OF CHILDREN'S RIGHTS IN WALES**

## **Evidence submission**

**September 2020**

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### **About Child Poverty Action Group**

Child Poverty Action Group works on behalf of the more than one in four children in the UK growing up in poverty. It doesn't have to be like this. We use our understanding of what causes poverty and the impact it has on children's lives to campaign for policies that will prevent and solve poverty – for good. We provide training, advice and information to make sure hard-up families get the financial support they need. We also carry out high-profile legal work to establish and protect families' rights. [cpag.org.uk](http://cpag.org.uk)

### **About this submission**

Child Poverty Action Group welcomes the opportunity to contribute to the review of our national progress in realising children's rights in Wales. As a compassionate nation, especially when it comes to children, we need to address the root causes of child poverty and ensure all children can enjoy happy, healthy lives. We observe with great regret that the UK Government's commitment to eliminating child poverty has slowly petered out, and we call on the Welsh Government to strengthen its resolve to do all it can to improve the lives of families currently locked into poverty. Child poverty is not inevitable, and when governments prioritise child poverty and show leadership, significant progress can be made.

Child Poverty Action Group has particular expertise in the policy areas of poverty, social security and education. This submission particularly focuses on education, because we have rich, nation-specific data on the experiences of children from low-income households in the education system in the Wales.

It is important to note that poverty affects all areas of children's lives, and that tackling child poverty is an essential first step to realising children's rights across all areas of life in Wales. As the Children's Commissioner for Wales notes, poverty prevents children from enjoying all of their rights and developing to their fullest extent.<sup>1</sup>

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## **Using a children's rights approach to tackling poverty in Wales**

The final report of the Senedd's Children, Young People and Education Committee<sup>2</sup> inquiry into children's rights in Wales rightly recognises that policymakers do not always give reference to the UNCRC when developing child poverty strategies in Wales. We agree that the Welsh Government could be more transparent in the approach it is taking to address the UN's Concluding Observations. Children's rights and well-being should be at the heart of our national strategy to address child poverty.

### **Recent growth in child poverty**

Child poverty exists in every corner of Wales. There is not a single council ward anywhere in the country that has a child poverty rate below 12%, once housing costs are taken into account.<sup>3</sup> Analysis by the End Child Poverty Coalition and researchers at Loughborough University found the child poverty rate in some parts of Wales has risen by up to 3% since 2014. The areas seeing the steepest growth in child poverty rates in Wales over the last year have tended to be more rural, with Ceredigion, Pembrokeshire and Powys all seeing rises above 1.5%.<sup>4</sup>

CPAG's recent analysis demonstrates that not only is the number of children living in poverty increasing, but also that families with children who are in poverty are now living, on average, further below the poverty line than they were five years ago.<sup>5</sup> This is a relatively recent trend. In 2010, child poverty in the UK was at a 13-year low, following co-ordinated work across governments to end child poverty. This reversal is extremely concerning from a children's rights perspective. Living further below the poverty line means children are experiencing greater hardship, and realising their human rights is more difficult. For example, their right to an adequate standard of living, good health, their ability to benefit from healthcare, education, and cultural activities, and their right to play will all be severely compromised by growing up in deep poverty.

Material deprivation is an additional way of measuring living standards and refers to the self-reported inability of individuals or households to afford particular goods and activities that are typical in society at a given point in time. Data from the National Survey for Wales shows that material deprivation affects a significant proportion of families with children and young people in Wales. Using Family Resources Survey estimates, DWP estimate that 11% of children living in Wales between 2016-17 and 2018-19 were experiencing both low-income and material deprivation.<sup>6</sup> Children in these households miss out on a wide range of essential resources and experiences, such as a winter coat or celebrating their birthday. Material deprivation is more likely to affect children in some family types than others. 17% of Welsh children in single parent households are materially deprived, compared with 6% of children in other households.<sup>7</sup>

The longer a child remains in poverty, the greater the chance it will have a deleterious effect on their outcomes at the end of childhood.<sup>8</sup> The most recent data shows a child in Wales had a 19% chance of being in persistent poverty between 2014 and 2018 (measured after housing costs).<sup>9</sup> The likelihood increases for children living in lone parent families and those living in rented accommodation. In recent years, we have also seen a steep growth in families affected by in-work poverty. Many households have moved into paid employment, but have still been unable to escape the grip of poverty, primarily caused by a combination of low wages, low hours and rising living costs. Welsh Government analysis shows single working parents are particularly susceptible to being trapped in persistent in-work poverty.<sup>10</sup>

### **Punitive social security reforms are affecting more and more families:**

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In the last examination, the CRC committee rightly focused on recent reforms to the social security system and the challenges these present for children's rights. These reforms are now reaching an increasing number of families, and they are one of the primary reasons why child poverty is rising so steadily in the UK. For example, two policies that are particularly worrying - the two-child limit and the benefit cap - are now affecting the lives of thousands of children in Wales. Both of these policies limit the amount of benefits certain low-income households can receive regardless of need – one by limiting support to two children per household<sup>11</sup>, and the other by capping the total amount a household can receive from benefit payments.

Prior to the pandemic, the cumulative impact of these policy changes was already predicted to lead to a steep rise in child poverty rates in Wales. Relative child poverty (after housing costs) in Wales was expected to increase substantially, with the reforms pushing an extra 50,000 children into poverty by 2021-22 (an increase of around 8 percentage points from 29.6% to 37.4%). In total, this would increase the number of children in relative income poverty in Wales from around 200,000 to 250,000.<sup>12</sup> It is still too soon to say what impact Covid-19 and the current recession will have in addition to the ongoing impact of these welfare reforms.

Recent research conducted by CPAG estimates that the two-child limit is now affecting 860,000 children across the UK and we expect this number to rise to 2 million children by the end of 2024.<sup>13</sup> In Wales, 11,320 households are unable to claim support for at least one of their children due to the two-child limit, a 56% increase in just 12 months<sup>14</sup>.

The benefit cap is also being applied to more and more families; recent government statistics show that across the UK 154,000 families are now affected by the benefit cap (based on figures from August 2020). In Wales, 3580 families were having their benefits capped in May 2020, a rise of 58% between February and May of this year.

These statistics reveal that the hardship of the pandemic is being compounded by policies that claw back the additional welfare support intended to help people cope through the crisis.<sup>15</sup>

CPAG is also extremely concerned that there has been very little analysis conducted by the government into the impacts of these policies on child poverty – including the impact on different equality groups, for example children from black and minority ethnic (BME) backgrounds.

### **Information on issues of special concern to specific or minority groups of children and young people**

CPAG is particularly concerned that black and minority ethnic children are more likely to be living in poverty in the UK, and social security reforms are hitting certain groups particularly hard. For example, 60% of Bangladeshi children, 54% of Pakistani children and 47% of black children are living in poverty in the UK, compared to 30% of children generally.<sup>16</sup> These households are more likely to have certain demographic characteristics, for example having larger families. Policies like the two-child limit and the benefit cap – both of which disproportionately affect larger families – are affecting BME children in particularly high numbers.

Although Welsh Government carry out limited analysis of the impact of these policies on children and families with protected characteristics, we are concerned that small sample sizes in Wales mean we know very little about the dynamics and impacts of poverty for different minority ethnic groups in Wales.

Disabled children, and children who live in a household with a disabled person, are much more likely to be living in poverty. In Wales, 37% of children who lived in a household where someone is disabled are in

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relative income poverty, compared to 24% of households where no one is disabled<sup>17</sup>. Households affected by disability face higher costs, and are more reliant on the social security system, so although some rates of disability-related benefits have been protected, these households have borne the brunt of many of the social security reforms implemented over the last decade, including the change from Disability Living Allowance to Personal Independence Payment.

### **The effect and impact of Coronavirus on children's rights in Wales**

It is well documented that the Coronavirus pandemic has had a huge impact on children's rights – with every aspect of children and young people's lives disrupted in some way. Children have been deprived of months of education in schools and early years' services, as well as suffering a range of health and wellbeing affects as a result of extended periods of lockdown.<sup>18</sup> The economic impacts of the pandemic are also making it harder for parents to provide their children with an adequate standard of living, with low income workers worst affected.<sup>19</sup> With employment disrupted, more and more families are turning to the social security system to get by, and the ability of the UK government to provide children and families with a safety net at their time of need has been tested at scale during the pandemic - for many it has proved completely inadequate.<sup>20</sup>

#### **The impact of poverty on a child's right to education in Wales**

It is increasingly difficult for schools to support low-income families - schools need to be adequately funded in order to effectively support learners in poverty, and their families too. Total education spending per pupil in Wales was cut by 9% (or £500 per pupil in real terms) between 2009-10 and 2017-18. Even though 2019-20 expenditure on schools has risen in real times for the first time since 2010-11, it still represents a 7.3% real terms decrease over the period since 2010-11.<sup>21</sup>

In many cases, families have had to bear the brunt of the cuts to school budgets, with parents more frequently being asked to contribute to school costs. In 2019, 76% of parents said the cost of sending children to school was increasing and 53% of disadvantaged families believed that pressure on school budgets was negatively impacting their children's education.<sup>22</sup>

Research by the Bevan Foundation found many families on low incomes were not able access help for school uniform costs because PDG grants are limited to certain year groups and usually require a household to be eligible for free school meals in order to qualify.<sup>23</sup> Analysis by the Children's Society shows that changes to eligibility criteria for FSM now means as many as 43% of children living in poverty in Wales are not entitled to receive free school meals.<sup>24</sup> While FSM receipt is used as a proxy measure for poverty, it risks overlooking the increasing number of children now living in in-work poverty, whose families are deemed 'not quite poor enough' to get help with the cost of uniforms, school trips, school meals, transport, learning materials and musical instrument tuition. The Children's Commissioner's Charter for Change report includes testimony from some of the families in such circumstances, unable to afford the cost of living due to low wages, but unable to get help from schemes that are ostensibly there to help families struggling to make ends meet.<sup>25</sup>

### **Eligibility criteria for free school meals have been tightened**

Since the last CRC examination in 2016, the Welsh government has put greater restrictions on which families are eligible for means-tested free school meals. In 2013, when the Universal Credit roll-out began, measures were introduced so that all families in receipt of Universal Credit were eligible for FSM. However, in 2018 a new criterion was set meaning that households receiving Universal Credit would only be eligible for free school meals if their family income was below £7,400 (before benefits are taken into account).

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Despite certain transitional protections, it was estimated that 55 000 children living in poverty in Wales would miss out on free school meals.<sup>26</sup>

During the Covid-19 pandemic, the government temporarily extended free school meals to children with no recourse to public funds, many of whom live in deep, long-term poverty. This is a welcome policy that we agree should be made permanent by government; however, the government must also look at reviewing FSM eligibility more broadly. Child Poverty Action Group believe that all children, regardless of income, should be able to access a free cooked meal as part of their normal school day. CPAG has long been an advocate for making free school meals a universal part of the school experience. As well as being an anti-child poverty measure, the provision of school meals to all pupils has a number of well document benefits, including improved wellbeing and improved academic progress.<sup>27,28</sup>

CPAG urgently calls for:

1. An increase in the threshold for those eligible for free school meals to all families receiving Universal Credit (or equivalent benefits)
2. A permanent extension of free school meal entitlements to families with no recourse to public funds

### **The impact of the pandemic on children's access to education**

CPAG carried out research with families across Wales during the national lockdown, to better understand how school closures were affecting children and their parents and carers.<sup>29</sup> We have also recently completed a study of the education and support needs of families across Rhondda Cynon Taf as schools and settings begin to admit all pupils on a full time basis.

Our findings show that many children in Wales live in families that do not have sufficient incomes to provide the most basic of learning materials. Low-income families were more likely to tell us that they did not have all the resources they needed for their children to take part in learning during school closures. 45 per cent said they were missing at least one essential resource, compared to 32 per cent in better off families. As well as lacking laptops and PCs, significant numbers of children do not have access to printers, stationary, books or art and craft materials.

Some families told us that they lacked a suitable space for children to do their schoolwork. Often families were all trying to make use of the same small space, with parents working from home and siblings taking turns on the only computer in the house. Families with disabled children, including those with additional learning needs, told us that having the whole family trying to work at home could be particularly difficult.

Although many schools provided excellent pastoral support during the lockdown, we also heard from families who struggled to cope with little information or support from their child's school. Many parents reported that lockdown was affecting their children's wellbeing, which had an impact on how well they were engaging with learning. For families with children with additional learning needs, these issues were even more acute, often due to the pressures of living on a low income, combined with the withdrawal of the support services that their child requires to be able to participate equally in their education. Our ongoing work in Rhondda Cynon Taf has highlighted how disability and poverty intersect to place specific barriers to accessing education during Covid-19. For example, we asked families whether their children attended check-in and catch-up sessions at the end of the summer term. A third of families did not and the most likely reasons for non-attendance were worrying about a child catching Covid-19 (34%), or because someone in their household was shielding (33%). We also found differences by income for these reasons,

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with low-income families who did not attend being more likely to have someone shielding than better-off households.

Analysis of our data showed that low-income parents in Wales were more likely to have bought learning materials like stationery, arts and crafts materials and printing resources during lockdown, compared to those in better-off homes. Our qualitative research suggests that this is because low-income families were less likely to own these resources prior to lockdown, often relying on schools to help offset the cost of providing learning resources. Many families in Wales do not have enough money to buy all the food that they need<sup>30</sup> or heat their homes<sup>31</sup>, so it is understandable that they may not have adequate resources for learning at home.

As the long shadow of Covid-19 will loom over childhoods well into the future, it is important to recognise the disproportionate impact it is having on certain groups right now. Poverty, whether alone or intersecting with other types of disadvantage, places children at a greater risk of missing out on their right to an education, and the chance to develop their personality, talents and mental and physical abilities to their fullest potential.

1 A Charter for Change: protecting Welsh children from the impact of poverty, Children's Commissioner for Wales, 2019

2 Children's Rights in Wales, Children, Young People and Education Committee, 2020

3 Child Poverty in Your Area, End Child Poverty (2019)

4 D Hirsch and J Stone, Local child poverty indicators 2018/19 – distribution and trends, Centre for Research in Social Policy, 2020

5 T Lee, Dragged Deeper: how families are falling further and further below the poverty line, Child Poverty Action Group, 2020

6 Statistics for Wales, Material Deprivation headline figures, financial year ending 2019, 2019

7 Statistics for Wales, National Survey for Wales 2017-18: Poverty and deprivation, 2019

8 Eric T C Lai and others, 'Poverty dynamics and health in late childhood in the UK: evidence from the Millennium Cohort Study', Archives of disease in childhood vol. 104(11), 2019, pp1049-1055

9 DWP, Income Dynamics: Income Movements and the Persistence of Low Incomes, 2020

10 Welsh Government, Child Poverty Progress Report, 2019

11 To be affected by the two-child limit, any third or subsequent children must have been born on or after 6 April 2017 – when the policy came into force.

12 Welsh Government, Analysis of the impact of the UK Government's welfare reforms on households in Wales, 2019

13 No one knows what the future can hold, Child Poverty Action Group and Church of England, 2020

14 DWP/HMRC, Child Tax Credit and Universal Credit: statistics related to the policy to provide support for a maximum of 2 children, 2020

15 See Benefit cap: number of households capped to May 2020, Department for Work and Pensions, 2020

16 O Khan, 'Understanding and responding to ethnic minority child poverty', in 2020 Vision: ending child poverty for good, Child Poverty Action Group, 2020

17 Statistics for Wales, Relative income poverty: ethnicity and disability, financial year ending 2019, 2019

18 See Poverty in the Pandemic and The Cost of Learning in Lockdown, both Child Poverty Action Group, 2020

19 Supporting families through the Covid-19 pandemic, Child Poverty Action Group, 2020

20 See Poverty in the Pandemic (Child Poverty Action Group, 2020) for testimonies from families on the inadequacy of the benefit system

21 Children, Young People and Education Committee, School funding in Wales, 2019

22 Annual Parent Survey 2019, Parentkind, 2019

23 Back to School: local variations in help with costs of school meals and uniforms, Bevan Foundation, 2019

24 Free School Meals and Universal Credit in Wales, The Children's Society, 2018

25 A Charter for Change: protecting Welsh children from the impact of poverty, Children's Commissioner for Wales, 2019

26 Free School Meals in Wales, The Children's Society, 2018

27 Evaluation of Universal Infant Free School Meals, Education Policy Institute, 2018

28 DFE, Evaluation of the free school meals pilot impact report, 2012

29 The Cost of Learning in Lockdown, Child Poverty Action Group, 2020

30 Food Standards Agency, Food Insecurity in Wales, 2018

31 StatsWales, Fuel poverty estimates for Wales 2018: Headline results, 2019

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## RESPONSE 70 – YOUTH JUSTICE BOARD



Youth Justice Board  
Bwrdd Cyfiawnder Ieuencid

### Call for evidence: state of children's rights in Wales

## Response by the Youth Justice Board for England and Wales 18/9/20

### **The Youth Justice Board for England and Wales Our role**

The Youth Justice Board for England and Wales (YJB) is a non-departmental public body (NDPB) established by the Crime and Disorder Act 1998. Its primary function is to monitor the operation of the youth justice system and the provision of youth justice services. It has a legal duty to advise the Secretary of State on matters relating to the youth justice system, to identify and share examples of good practice and to publish information about the system: reporting on how it is operating and how the statutory aim of the system ('to prevent offending by children and young people') can best be achieved. The YJB is the only official body to have oversight of the whole youth justice system and so is uniquely placed to guide and advise on the provision of youth justice services. While the YJB is responsible for overseeing the performance of youth justice services including multi-agency youth offending teams (YOTs), the YJB does not directly deliver or manage these services

### **Vision**

Every child and young person lives a safe and crime-free life, and makes a positive contribution to society.

### **Disclaimer**

This submission was prepared by the YJB using information available in the public domain. To clarify, this is an open response to your consultation as we would like to share our views with a wider audience interested in youth justice matters.

### **Introduction**

The YJB welcomes the opportunity to provide comment and respond to the Children in Wales' call for evidence into the state of Children's rights in Wales. This response does not seek to give an opinion on each of the questions posed, but rather to address those areas which the expertise of the YJB can contribute to and are pertinent to children in, or at risk of entering, the youth justice system (YJS) specifically.



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The statutory aim of the youth justice system is to prevent offending by children and young people. The Social Services and Well-being (Wales) Act 2014 and the Well-being of Future Generations Act 2015 set out legislative requirements to ensure that local authorities provide services to prevent children and young people from offending and to promote their future welfare.

The risk and protective factors associated with offending behaviour are well documented:

- Family-related risks include poor parental supervision, family conflict, parental and sibling involvement in crime.
- School-related factors are disengagement (including truancy and exclusion), lack of commitment to school and education and low attainment.
- Within the community the availability of drugs, the prevalence of anti-social behaviour and lack of constructive activity are contributory factors.
- Personal and individual factors include hyperactivity, impulsivity, cognitive impairment and involvement with anti-social peer groups.

Children entering (or at risk of entering) the youth justice system face issues and barriers to achieving their potential in every one of the thematic areas set out in your call for evidence.

There is growing awareness that adverse childhood experiences (ACEs), which are stressful and traumatic events experienced in childhood can contribute to detrimental experiences in adult life. This is because of maltreatment due to abuse and/or neglect and the impact of growing up in an environment where parental behaviour is damaging and distressing. ACEs can alter how a child's brain develops and the way they interact with the world. Those with the greatest exposure to ACEs can develop health-harming behaviours and be more prone to perpetrating violent behaviour, experiencing violent victimisation and being incarcerated. There is a strong correlation between ACEs and the risk factors which make a child/young person more vulnerable to offending behaviour. The experiences described here are also relevant to looked after children who are over represented in the youth justice system, often because they have experienced abusive or neglectful home lives.

Justice and devolved services in Wales need to work together to deliver good outcomes for children and young people and enable them to lead crime-free lives, by:

- Improving educational outcomes and attainment
- Improving emotional and physical health and wellbeing
- Strengthening positive and supportive relationships
- Developing pro-social networks and peer groups
- Improving life skills
- Reducing substance misuse
- Increasing safety and reducing risky behaviours
- Developing resilience and coping mechanisms

## **Youth justice blueprint**

Youth justice in Wales is a success: the number of first-time entrants has reduced by 85% since 2007. A similar reduction is seen in the number of children in custody; there are currently 18 Welsh children in custody and we believe there is scope for further reductions. This is in large part due to the focus on prevention practice which has been preserved in Wales due a national strategic agreement and significant funding from the Welsh Government.

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Preventing children from entering the youth justice system is the cornerstone of a rights- based approach. Article 40 of the United Nations Convention on the Rights of the Child (UNCRC) states that a variety of options should be available to children to deal with them in a manner that is 'appropriate to their well-being and proportionate to their circumstances'.

Preventing children from entering the criminal justice system, minimising their contact with it and maximising opportunities for diversion increases the likelihood that they will lead crime free lives.

Despite this success, there is scope to further improve outcomes for children in Wales and support the rights of some of the most vulnerable children to achieve their full potential.

In 2018 YJB set out recommendations for UK and Welsh Government in "Improving outcomes for children in the youth justice system: a blueprint". It set out a vision for trauma informed and rights-based approach to youth justice in Wales.

The Blueprint is founded on the following principles:

- Children are treated within the youth justice system as 'child first, offender second', thereby aligning the Welsh Government's commitment to the United Nations Convention on the Rights of the Child and the YJB's values of ensuring a child- centred, rights based, practice approach .
- Acknowledge, and build on, the achievements of the youth justice system in Wales in relation to prevention, pre-court diversion and community practice through Enhanced Case Management (ECM).
- Embed trauma-informed approaches into Wales-wide community and secure practice to deliver consistent and holistic services to meet the needs of children and young people and to recognise and respond to Adverse Childhood Experiences (ACEs).
- Commission therapeutic and trauma-informed custodial provision for all Welsh- resident children and young people.
- Integrate and align devolved and non-devolved services through a shared vision, values and approach. To underpin the design and delivery of services to achieve a service delivery framework that is distinct to Wales.

Welsh Government published a summary of the blueprint recommendations and an outline implementation plan in 2019. Their commitment was shared by UK Government. Since lockdown, Welsh Government has included the blueprint in their contingency and recovery planning with a focus on prevention and pre-court diversion and trauma informed practice (ECM). The youth secure estate remains a high priority for youth justice in Wales.

## **Mental health**

The Blueprint recognises the need for improved mental health services for children in Wales, to underpin trauma informed practice and support children in the youth justice system to overcome the significant barriers they face in reaching their potential.

Since 2013 we have worked with the Welsh Government and the Forensic Adolescent Consultation and Treatment Service (FACTS) and more latterly with Public Health Wales and the South Wales Police and Crime Commissioner to test ECM and embed trauma- informed approaches.

ECM provides a psychology-led methodology for multi-agency case formulation and intervention planning, which enables youth justice staff to tailor and sequence interventions more effectively, according to the developmental and mental health needs of individual children, recognising the

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trauma and adversity they have experienced. In terms of sustainability the greatest challenges have been;

- Structural barriers in health and between health and youth justice
- Reliable, consistent and sustainable access to psychology expertise,
- Application of theory and evidence in practice; and
- Maintaining the knowledge and expertise of the youth justice workforce.

FACTS also provides the in-reach to HM Parc under-18 Young Offender Institution and the challenges noted above are replicated in the provision of this service. Hillside Secure Children's Home is the only other secure provision in Wales but operates its health services separately to the NHS through contractual arrangements. This mixed economy of service planning and delivery between community and secure further supports the need for a clearly articulated strategy. If the vision in the Blueprint is to be delivered there needs to be a join up between health and justice particularly for children experiencing trauma-related difficulties.

The YJB has given its full support to the strategic review of FACTS being led by Wales Health Specialised Service Committee (WHSSC) which includes within scope the provision of psychology input to Enhanced Case Management. It is our hope that this review will provide the impetus needed to improve the range and accessibility of mental health services for children in, or at risk of entering, the youth justice system.

Welsh Government has launched several measures to improve mental health for children. They have provided additional funding for services in schools, wellbeing is a key element of curriculum reform and Welsh Government is consulting on the whole school approach to wellbeing and mental health. YJB has concerns that children in the youth justice system, or at risk of entering it, who are often disengaged from mainstream provision may not be able to benefit from these policies unless the due regard duty is used during the formulation of policy and in operational guidelines.

### **Local Government and Elections (Wales) Bill**

This landmark legislation extends voting rights in Wales to 16 and 17 year-olds. This is a significant step in enfranchising children and giving them a say on matters that affect them. These children will be able to exercise their right to vote in local elections. The YJB and other organisations such as Safer Wales advised Welsh Government to extend the franchise to all 16 and 17 year old children in Wales including those who are in secure and custody.

The Equalities, Local government and Communities Committee supported that position and recommended the right to vote be extended to children in secure and custody, however during Stage 1 Debate on the general principles of the Bill, the Minister for Housing and Local Government announced that in taking forward the Bill the Welsh Government would not seek to amend it to provide for prisoners and young people in custody to vote in local government elections. While this may be the result of the impact of COVID on the Welsh Government Legislative timetable, it leaves a number of vulnerable children disenfranchised,

which is in tension with the Convention on the Rights of the Child. YJB will continue to press for legislation to provide voting rights to all children.

### **Youth Work Strategy for Wales 2019**

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The work of the Interim Youth Work Board and the publication of the new Youth Work Strategy for Wales is a significant development in supporting children's rights and delivering positive outcomes. The Strategy re-affirms Welsh Government's commitment to Extending Entitlement and the principle of a universal open access youth work offer to all young people in Wales (up to the age of 25). We have seen Welsh Government increase its youth support funding on mental health and well-being and youth homelessness. The strategy aligns with the prevention focus in the youth justice blueprint. Effective youth work is a vital element of prevention work in Wales, but sustainability requires investment from Welsh Government.

We await with interest the first report of the Youth Work Board as it seeks to establish a sustainable delivery model for youth work in Wales.

## **Ministerial Responsibility**

There is no question that Welsh Government is committed to the UNCRC. This is most clearly demonstrated in the due regard duty established by the Rights of Children and Young People (Wales) Measure 2011. The YJB believes that this commitment would be strengthened further by a Ministerial appointment in the Welsh Cabinet. A Minister for Children and Young People with responsibility for setting an over-arching vision for children and young people in Wales, providing scrutiny and oversight for the delivery of services and support, ensuring children's rights are given due regard with a focus on improving the life chances of all children and young people in Wales.

## **RESPONSE 71 – STONEWALL CYMRU**

Please see below a response from Stonewall Cymru on the State of Children's Rights in Wales. This highlights our priorities and areas of concern on children's rights.

- Tackling discrimination in all its forms facing LGBT in children, whether this comes from education, healthcare or access to services (such as sports clubs). Relevant to Article 2 of the UNCRC. LGBT children and young people in Wales continue to face wide-spread discrimination.
- Ensuring that the implementation of the new Curriculum for Wales protects and furthers the rights of Children. This should look to underpin Article 28 of the UNCRC, particularly by providing children and young people in Wales the opportunity to access developmentally appropriate relationships and sexuality education as well as a curriculum that embeds diversity and inclusion throughout. Stonewall Cymru want to see the new Curriculum for Wales implemented under the principle of embedding Children's Rights from its core.
- Providing children and young people a comprehensive understanding of hate crime and human rights, what these are and how to seek recourse when these are impinged upon. With a recent swell in hate crimes against [LGBT people in Wales](#) it is vital that this is cut out at the earliest stage. Our outreach for the Welsh Government's upcoming LGBT Action Plan for Wales (yet to be published) also highlighted how many LGBT people in Wales do not have a thorough understanding of their human rights, it is thus vital and in the context of the UNCRC article 42, the need for children to understand their rights is vital. We

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want to see public bodies and the Welsh Government to continue to invest in hate crime prevention programmes in schools across Wales.

- Ensure that all frontline staff interacting with children in Wales are adequately trained in supporting LGBT young people. During recent outreach with LGBT young people, we found that they often felt a lack of support from members of staff in educational institutions, in health and social care services, often feeling the need to 'educate the educator' when it comes to matters of LGBT life. More needs to be done to provide support to LGBT young people, who often experience homophobic, biphobic or transphobia abuse and discrimination from pupils and pupils alike (as evidenced in [Stonewall Cymru's School Report, 2017](#)). Such support to frontline workers should include providing access to training on how to tackle abuse, bullying and discrimination. These efforts should work towards embedding a zero-tolerance approach and will help fulfil Articles 2 and 17 of the UNCRC.
- Tackling LGBT youth homelessness. Research by homelessness charity [Llamau](#) suggests that LGBT young people are significantly more at risk of homelessness than the general population. Stonewall Cymru would thus like to see Welsh Government provide further commitments to funding LGBT specific services for LGBT homeless young people.
- Supporting the mental health of LGBT children and young people. LGBT people are at more risk than the wider population of depression and suicidal thoughts according to [Stonewall's Health Report](#). The lack of available and adequate mental health services in Wales for children and young people therefore disproportionately and distinctly impacts the welfare of LGBT young people in Wales. We would therefore like to see more targeted action to support young LGBT people with poor mental health and provide distinct solutions to combat this.
- Supporting LGBT young people to establish their own LGBT support / action groups. Many LGBT young people are dependent on local LGBT social groups for support and friendship from their peers, particularly in those living in more rural areas of Wales. Stonewall Cymru believe that the Welsh Government should consider how best to support the development of LGBT groups for young people both in and outside of educational settings as well as commit to finding a long-term funding solution to the currently underfunded and typically voluntary organisations which provide such valuable support to LGBT young people.

## RESPONSE 71 – SAVE THE CHILDREN



**Save the Children**  
Achub y Plant

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## **Save the Children Submission for calls to highlight the key priority for Children's Rights Issues in Wales.**

### **Introduction**

Founded in 1919, Save the Children is a global organisation helping children to survive and thrive in 120 countries, including here in Wales. We are committed to ensuring all children's rights are recognised and work with both governments and other organisations to ensure children's rights are on the political agenda. Save the Children's belief is that Child Poverty represents a violation of children's rights in Wales and the effect of living in poverty impacts on a child's Right to an Education. In 2016, the UN Committee expressed its concern that children living in poverty were not meeting the expected level of language development at preschool level, and recent studies continue to observe persistent developmental inequalities between children from disadvantaged backgrounds and their more affluent peers in all four nations of the UK.<sup>xi</sup>

Even before the current Covid 19 crisis, there was a significant gap in educational attainment in the early years between children in poverty and their peers. Without clear interventions now, we anticipate this gap to widen, threatening the life chances of a generation. It is vital that children do not miss out on the opportunities they need to learn and develop during this crisis, we must ensure that children, parents and early years services have the support they need throughout this time and in the ongoing period of recovery.

The stresses of living through the pandemic are having a huge impact on all children in Wales and is particularly affecting the most disadvantaged. Families already struggling on low incomes before the crisis are hardest hit, and many do not have the tools, resources and skills to adequately support their child's learning and development at home. This is particularly important in the early years, when children's experiences form the foundation for their later learning.

### **Child Poverty**

#### **Article 28 and 29: Right to an Education**

Figures from the Joseph Rowntree Foundation show that around 185,000 children in Wales are living in poverty, the child poverty rate in Wales is now similar to that in England but higher than those of Scotland or Northern Ireland.<sup>xi</sup> The rates change over years but child poverty in Wales has persisted, and barriers to disadvantaged children fully accessing their rights remain. We see many impacts to a child's early development, including on their educational attainment and the home learning environment. The long-term effects from these on young children and their future of a particular concern.

There is long-standing, consistent evidence that shows that there is a significant relationship between living in poverty and young children's early learning outcomes, that then can lead to further negative impacts throughout their education and future lives.

Our own evidence shows that by age five around a third of children living in poverty (30-35%) were already falling behind across a range of cognitive outcomes (i.e. vocabulary, problem solving, dexterity and coordination) compared with a fifth of those from better-off families (20-21%). Being behind in the early years also means it's more likely children will be behind throughout their education and also shows that almost half of children who were in the lowest performing group at the beginning of primary school remain behind at ages 7, 11 and 14 on different measures of cognitive development.<sup>xi</sup>

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The early years are a crucial time in a child's life, children's experiences in these years form the foundation for their later learning.

Experiencing poverty can make it harder for families to consistently create and provide stimulating, enriching interactions, experiences and materials. Children are less likely to benefit from having rich exposure to language, words and interactions. This can have significant impact on children's cognitive competencies, such as communication, language and literacy skills which are reliable predictors of later achievement. Without clear interventions, this gap widens, threatening the life chances of a generation. It is vital that children do not miss out on the opportunities they need to learn and develop not just while in an education setting but also at home.

## **Home Learning environment**

Poverty increases family stress and reduces the opportunities for parenting that supports children's early learning. It reduces access to material resources and activities which support learning, and to services and information. Parents play a crucial role in supporting their children's learning, the level of formal education, particularly for mothers, is one of the biggest influences on the quality of the home learning environment and of children's educational attainment.<sup>xi</sup> Parents in poverty face additional stresses and pressures that make it harder for them to provide the resources and activities that children need, and as a result, children in poverty are less likely to access high quality learning at home. The current pandemic has exacerbated this inequality and a recent study has found that children in lower-income families are spending less time on home learning than children in better-off families and have access to fewer resources both from their schools and at home.<sup>xi</sup>

Resources such as access to the internet and digital devices are a key issue for struggling families during this crisis. We have heard from families and partners that we work with that digital access is a lifeline, but due to financial constraints many low-income households lack the devices and connectivity they need to access valuable online learning and support information. Recent evidence from CPAG research, conducted across the UK, has shown that low-income families were twice as likely to say that they lacked all the resources they needed to support learning at home, with 40 % saying they were missing at least one essential resource. A third of people most worried about money had needed to purchase a laptop, tablet or other device during lockdown.<sup>xi</sup>

Having children at home due to school and nursery closures means that parents were facing additional costs associated with educating and playing with their children, with the challenge of home-schooling particularly amplified for single parents. Research by JRF and Save the Children into the impact of the pandemic on families claiming Universal Credit has shown that 28% of parents surveyed encountered extra costs associated with home-schooling such as pens and books, 23% reported that they had to spend more on internet access, and 26% had to spend more on general items like nappies, toys and clothes. In Wales 81% of parents asked had faced extra costs for things like food, utilities or items for children.<sup>xi</sup>

## **Early Education and Care**

Most children attend some form of early years setting before they start school. Children need quality early education and care during this period to develop the foundations of their development and for future learning. It can play a key role in supporting children living in poverty by providing high quality early learning experiences and activities, high quality early years education is known to have a significant impact on children's learning and development, particularly for the most disadvantaged children. Save the Children is concerned that during the current crisis children have been missing out on this crucial support available in early years settings, and that due to the inequality of access to resources faced by disadvantaged families many will not be accessing a sufficient quality of learning at home to make up for this lost support.

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## Evidence we have from families about the impact of Covid 19 pandemic on children.

“We’re just running after him because he doesn’t get any exercise outside...he’s getting frustrated all the time and he can’t tell me why, because he’s only three, so it’s hard for him to express his feelings. He doesn’t understand at all...”

“Oh, he loves nursery. He loved playing with all the kids, his best friend is Joe\*...I’m worried that he’s gonna slip back into his not playing with other kids or anything... he hasn’t seen any other kids in seven weeks... So I can’t wait until the day he goes back to school and just sees everyone, it’s gonna be amazing.”

“He wants to eat a lot more since lockdown I’ve noticed, like he’s just constantly eating so financially it’s not that good. ...But the vouchers did come in real handy, like ‘cause he started potty training we needed to get bedding for him and things like that so it’s really good. Save the Children has helped a lot.”

\*the names have been changed to anonymise these quotes.

## Recommendations

- The impact of Child Poverty is felt in both a child’s educational and home environment, with the long-term effects on young children a particular concern. We urge Welsh Government to refresh its Child Poverty Strategy alongside producing a clear measurable Child Poverty Delivery Plan to reflect these changes in circumstances and ensure that no child is disadvantaged in realising their rights under the UNCRC because of family income.
- Continued monitoring and evaluating of the additional support now being offered by the Welsh Government, to ensure that digital devices are reaching, and aiding children as intended, and ensuring that ongoing technical support is available as part of this new digital offer for children.
- Increased access to the internet presents many opportunities for children and young people, however it also presents risks and dangers so parents must be supported to ensure children are safe online.
- We recommend that additional funding is provided to all early years settings to enable them to support children and engage with parents, for example providing children with language recovery programmes, providing higher staff ratios to enable one to one and small group work to take place, supporting social and emotional development and wellbeing. This funding could take the form of a standalone fund, or through existing mechanisms such as through increases to the free entitlement funding, for example:
  - non-working parents must be able to access the Government’s Childcare Offer by extending the minimum eligibility for ECEC hours for 3-4-year-olds in non-working households from 10 to 15 hours per week.
  - an increase in the Early Years Pupil Development Grant.

For more information on this response please contact [c.rees@savethechildren.org.uk](mailto:c.rees@savethechildren.org.uk) or [s.drysdale@savethechildren.org.uk](mailto:s.drysdale@savethechildren.org.uk)



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## RESPONSE 71 – SWANSEA UNIVERSITY & SAVE THE CHILDREN



Hillary Rodham Clinton  
School of Law | Ysgol y Gyfraith



**Save the Children**  
Achub y Plant

### Child Poverty in Wales: Policy Avenues

Written by Charlotte Morgan

#### Abstract

This report examines law and policy surrounding child poverty in Wales adopting a children's rights-based approach. Issues discussed, such as housing and education, fall within devolved competence and so it is argued that policy in these areas will be key to mitigating the effects of poverty for children. A key suggestion within this report is the need for the Welsh Government to produce a Child Poverty Delivery Plan. There is also a focus on the importance of early years as a crucial stage in tackling the disadvantages that children face.

#### Introduction

This report deals with issues relating to child poverty in Wales. Currently, 29 percent of children are living in relative poverty in Wales, with this figure estimated to increase.<sup>1</sup> Reducing the impact of child poverty has been one of the most significant challenges the Welsh Government has faced since devolution. To deal with this issue it has sought to adopt a children's rights-based approach, to reflect the guarantees provided to children under the United Nations Convention on the Rights of the Child (UNCRC).<sup>2</sup>

Child poverty remains a major policy issue for government at all levels in the United Kingdom (UK). Research shows that current UK tax and welfare reform, as well as a lack of devolved powers in Wales, hinders the Welsh Government's ability to deal with child poverty.<sup>3</sup> The Welsh Government often states that it does not have control of 'either the benefits system or the key economic levers' and that it would use them very differently if it did.<sup>4</sup> Whilst this is true, this report finds that further governmental efforts to mitigate the effects of poverty are possible within the boundaries of devolution. The topics discussed in this report, such as housing and education, fall within devolved competence and policy in these areas will be key to mitigating the effects of poverty for children.

The report stresses that poverty is not simply an inequality of economic resources but also an issue of inequality of access to quality education, and poor social wellbeing for children. It aims to identify how devolved law and policy might be used to help child poverty in Wales. There is a particular focus on the importance of early years as a crucial stage in tackling the disadvantages that children face. The report draws on UNCRC Wales Monitoring Group reports and UN Committee on the Rights of the Child's Concluding Observations to assess the Welsh Government's progress.

#### A note on COVID-19

As the UN Special Rapporteur on Extreme Poverty and Human Rights has stated, the COVID-19 pandemic poses a particular threat to those living in poverty.<sup>5</sup> Across the UK, Trussell Trust's latest figures show that during the last two weeks of March this year, it saw a 122 percent increase in food parcels for children compared to the same period in 2019.<sup>6</sup> In Wales, the importance of ensuring children from disadvantaged areas can access their right to education and wellbeing during school closures continues to have an impact on Welsh Government guidance and policy.<sup>7</sup> Several measures have been introduced to combat the inequalities that children in poverty face during the pandemic. Of particular note are the continuation of Free School Meals (FSM) throughout school holidays and the acknowledgement that disadvantaged children are more likely to be digitally excluded learners.<sup>8</sup> As no assessment of these measures has yet been undertaken, they will not be a focus of this research. However, it should be noted that

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the Welsh Government has the opportunity to create long-term impact with the adoption of such temporary measures permanently.

## **Law and Policy Context**

Since devolution in 1999, the Welsh Government and National Assembly for Wales (NAW) have sought to ensure that Wales leads the UK with their human rights approach through law and policy and the NAW stance on children's rights particularly distinguishes its policymaking from that of the UK Government. Welsh Government divergence from UK Government policy can be seen as early as 2001, when it became the first government in the UK to appoint a Children's Commissioner. The Welsh Government's commitment to tackling child poverty was realised through the Children and Families (Wales) Measure 2010, which places a statutory duty on Welsh Ministers to publish a Child Poverty Strategy for Wales, and to set objectives for improving the outcomes for disadvantaged families.<sup>9</sup> Most notably, in 2011 Wales became the first country in the UK to incorporate the UNCRC into domestic law. The Rights of Children and Young Persons (Wales) Measure 2011 places a duty on Welsh Ministers to take due regard to children's rights in decision-making when introducing new legislation and policies.<sup>10</sup>

The NAW's 'Seven Core Aims for Children and Young People' summarise the UNCRC, and the seventh core aim, to ensure that children 'are not disadvantaged by poverty', is a key focus in Welsh Government policymaking.<sup>11</sup> The most recent legislation reflecting the Welsh Government's concern for social issues in Wales, the Well-being of Future Generations (Wales) Act 2015 (2015 Act)<sup>12</sup> will have implications for children's rights. The 2015 Act focuses on addressing persistent problems that Wales faces and aims to enable people to fulfil their potential regardless of their socioeconomic background, creating a more equal Wales. Through the passing of the 2015 Act, Wales became the first legislature in the world to 'enshrine in law a duty, falling on public bodies, to safeguard the well-being of future generations'.<sup>13</sup>

## **Legislative Competence**

The Government of Wales Act 1998, and subsequently the Government of Wales Act 2006 – as amended by the Wales Act 2017 - have enlarged the powers of the NAW, enabling it to pass such legislation.<sup>14</sup> The Wales Act 2017 established Wales' devolution settlement as a reserved powers model.<sup>15</sup>

Importantly, Section 45 of the Wales Act devolved power to the Welsh Government to commence the socioeconomic duty of Part 1, Section 1 of the Equality Act 2010.<sup>16</sup> The Welsh Government's consultation period for the commencement of this duty ended earlier this year. Once commenced, it will require public bodies, when 'deciding priorities and setting objectives', to consider the effects these will have on reducing socioeconomic inequalities, building on duties introduced by the 2015 Act.<sup>17</sup> The duty has potential to underpin a wide range of Welsh policies, and to support better coordination across Government to help achieve its wellbeing goals, particularly that of a 'more equal Wales'.

## **A Child Poverty Delivery Plan?**

The main issue concerning tackling child poverty in Wales, one highlighted by organisations and experts, is an implementation gap between Welsh Government policy ambitions and the way children actually experience their rights. The UK Children's Commissioners noted this in 2016, stating that whilst the Welsh Government's promotion of children's rights was commendable, it still had a long way to go to ensure their successful implementation.<sup>18</sup> For example, although the Welsh Government realised a commitment to Section 2, Part 1 of the Children and Families (Wales) Measure<sup>19</sup> when it published a Child Poverty Strategy (the Strategy) in 2011, there has been no follow-up Delivery Plan.

In 2015, the Strategy was revised to coincide with targets of the non-statutory Tackling Poverty Action Plan (the 'Action Plan'), which the Welsh Government asserts, provides a more 'holistic', family-centred approach towards poverty.<sup>20</sup> However, the lack of a direct focus on children's issues in this Plan carries the risk that children's rights are being side-lined. Reporting in 2016, the United Nations Committee on the Rights of the Child (UN Committee) commented on the need for all governments in the UK to 'set up clear accountability mechanisms for the eradication of child poverty including re-establishing concrete targets with a set frame time and measurable outcomes'.<sup>21</sup> As well as lacking a delivery plan, Wales currently lacks a child poverty eradication target. This followed the announcement from both the UK Government and Welsh Government in 2016 that the goal to eradicate child poverty would not be achieved by 2020.<sup>22</sup> In contrast, responding to the disappointing changes to child poverty law made by the UK Government, the Scottish Government passed its Child Poverty (Scotland) Act 2017, setting statutory income-based targets.<sup>23</sup> Targets in Scotland for 2030 include: less than 10 percent living in relative poverty; and less than 5 percent living in absolute poverty. The legislation also requires Scottish Ministers to publish delivery plans with annual reports to measure progress.

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The Welsh Government's failure to implement the Strategy has been perceived as demonstrating a 'lack of appetite'.<sup>24</sup> The End Child Poverty Network Cymru (ECPN Cymru) lobbied for an Action Plan as early as 2016 and renewed this call last year. A Delivery Plan for Wales would provide a focus on children's rights, reaffirming the Welsh Government's commitment to the Children and Families Measure and to working together across government and other public bodies to ensure the delivery of the statutory obligations under the Measure.<sup>25</sup> Furthermore, a 2030 target for the eradication of child poverty in Wales would be in line with the Sustainable Development Goals<sup>26</sup> and would greatly complement existing law and policy regarding children's wellbeing, particularly the 2015 Act.

The Children's Commissioner for Wales has also called for the publication of a Child Poverty Delivery Plan. The Commissioner's most recent report, *A Charter For Change: Protecting Welsh Children from the impact of poverty* (2019), stresses that children living in poverty benefit most from a multi-agency approach.<sup>27</sup> A delivery plan reflecting this approach would ensure clarity for local governments and public bodies and require that they assess the impact on disadvantaged children in decision making, building on the socio-economic duty.

Both the Strategy and the Action Plan focus on an early years 'prevention' approach and both note the importance of 'multi-agency working and integrated services' to ensure effective delivery through local initiatives.<sup>28</sup> The Delivery Plan should maintain this focus and could underpin this delivery.

### **Right to Education: The Poverty Gap**

One of the biggest challenges the Welsh Government faces is reducing the educational attainment gap that children in poverty fall victim to. Young children are especially vulnerable to poverty and the effects it can have on their physical and emotional wellbeing.<sup>29</sup> By the age of three, children from disadvantaged backgrounds can be as much as a year behind their peers and this attainment gap widens by the time they enter school.

In 2016, the UN Committee expressed its concern that children living in poverty were not meeting the expected level of language development at preschool level<sup>30</sup> and recent studies continue to observe persistent developmental inequalities between children from disadvantaged backgrounds and their more affluent peers in all four nations of the UK.<sup>31</sup> As the educational effects of poverty can hinder a child's development throughout their life, early intervention is essential. Welsh Government has recognised the importance of a preventative approach to child poverty in the early years and has introduced several area-based initiatives to reduce this gap. The Flying Start Programme, for example, which originated in 2007, is targeted towards children living in the most deprived areas, providing free, quality childcare for 2-3-year-olds and integrated family support for parents.<sup>32</sup>

More recent efforts towards ensuring children's right to development have had a positive impact on reducing the attainment gap in the early years, as shown by the Equality and Human Rights Commission (EHRC).<sup>33</sup> The Welsh Government's recent announcement, that it will be launching its Early Childhood Education and Care (ECEC) approach is particularly welcomed, as it adheres to the UN Committee's recommendation 'for the development and expansion of early childhood care and education' through a single, holistic policy framework and Save the Children's recommendation for a 'Single Quality Framework' for ECEC.<sup>34</sup> To ensure equal access to quality ECEC, and to provide additional support to disadvantaged children, Save the Children Wales have also called for an extension of the minimum eligibility for ECEC hours for 3-4-year-olds in non-working households from 10 to 15 hours per week.<sup>35</sup> This would effectively target disadvantaged families who need help most, and ensure that children are not falling behind at such a crucial educational stage.

As children in Wales leave the Foundation Phase, the educational attainment gap between children in poverty and their more affluent peers sadly widens. Data gathered by the Joseph Rowntree Foundation shows that the attainment of children eligible for FSM at age 11 is 16percent lower than those who are less disadvantaged and that in 2018-19, this attainment gap widened by more than 1 percent for the first time since 2004-5.<sup>36</sup>

Disadvantaged children eligible for FSM are also entitled to the Pupil Development Access Grant, which provides £125 'to buy school uniform, equipment, sports kit and kit for activities outside of school'.<sup>37</sup> Welsh Government's Final Budget for 2019-20 dedicated a further £1.6 million to the Grant to show its ongoing commitment to reducing child poverty in Wales.<sup>38</sup> Although a welcome addition, there is compelling evidence to suggest that the amount of financial help available through this grant is inadequate in providing children in poverty the essentials they need to take part in social, extracurricular activities in school. For example, a case study in *A Charter for Change* (2019) reveals that the grant often barely covers basic uniform costs.<sup>39</sup> The result is an inequality in opportunities for poorer children and feelings of social isolation, impacting heavily on their emotional wellbeing and academic performance.

Furthermore, there are many children in poverty that do not qualify for FSM in Wales and as a result, miss out on achieving their full potential in school. These children marginally fall outside of the FSM threshold, but still struggle to afford food and admit to often going hungry through the school day.<sup>40</sup> The current income threshold for this service, and access to the Pupil Development Grant, is £7,400 in Wales. There have been many calls to increase this threshold to ensure that those on the margin are not left behind. The NAW Equality, Local Government and Communities Committee has recommended that the Welsh Government undertake a feasibility study of increasing the

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threshold to £14,000.<sup>41</sup> It is important to note that this would still only bring Wales in line with Northern Ireland. ECPN Cymru (2018) have also stressed the need to increase the threshold to include currently excluded disadvantaged learners and ensure that they enjoy their right to healthy development and quality education.<sup>42</sup>

Overall, many children in Wales cannot access the help they desperately need. Recent investment in early years has improved attainment levels for disadvantaged children in the Foundation Phase. However, for children living in poverty but who do not qualify for FSM, the failure of the Welsh Government to achieve its seventh wellbeing goal, that children are not disadvantaged by poverty, is stark. To address this, a consideration of the benefits of increasing the threshold for FSM and funding for the Pupil Development Grant is needed from the Welsh Government.

## **Right to an Adequate Standard of Living**

As well as in the context of educational attainment, the Welsh Government acknowledges that early childhood is a critical period for realising a child's rights<sup>43</sup> in terms of play and health. A number of policies have been introduced to ensure that children from all socio-economic backgrounds can access these rights, with the centrality of play contributing to long term improvements in health and educational outcomes a particular focus in recent Welsh Government early years efforts.<sup>44</sup> However, the rights of young children to play, health, quality home education, and especially to development, cannot be obtained without adequate living standards in which to exercise them. Despite children spending 80 percent of their time outside of school,<sup>45</sup> the Welsh Government's approach to ensuring that the right of the child to Article 27 of the Convention, an adequate standard of living, has been inadequate. General Comment No. 7, Implementing child rights in early childhood (2005) specifically states that all young children are 'entitled to a standard of living adequate for their physical, mental, spiritual, moral and social development' and notes the adverse consequences of deprivation of this right.<sup>46</sup>

Housing is a key area of mitigation within the Welsh Government's powers, yet it can be suggested that a lack of governmental commitment to addressing the inherent link between poverty and social housing exists. Research by Shelter Cymru has found that over 60,000 families are on the social housing waiting list in Wales.<sup>47</sup> Whilst the Welsh Government's recent commitment to building 20,000 affordable homes is welcomed<sup>48</sup>, the proposed budget allocation for 2020-21 does not support this action. The allocation of £188 million to the social housing grant seems insufficient in comparison to the £62 million given to the Help to Buy Scheme, a scheme put in place to help a smaller amount of people already in a position to consider buying a house, as the Bevan Foundation highlights.<sup>49</sup> In this respect, a lack of a clear-cut focus on alleviating poverty in this budget can be noted. To fully commit to its wellbeing goals, notably a more equal Wales, the Welsh Government should work to reprioritise its funding expenditure to target the widespread inequalities that those living in poverty endure.

Increased guidance from the Welsh Government to local authorities is also needed to enhance disadvantaged families' access to the help they are entitled to. The Department of Work and Pensions Use of Discretionary Housing Payments (2019) reveals that local authorities in Wales continue to underspend on payments and fail to apply for extra funding from Westminster.<sup>50</sup> The County Borough Council of Merthyr Tydfil, in which the seventh most deprived area in Wales, Penydarren, resides,<sup>51</sup> spent less than 50 percent of its payments in 2019.<sup>52</sup> Worryingly, 27 percent of Penydarren's population are aged under 16, far higher than the 18 percent average for Wales.

Hoffman's Right to Adequate Housing in Wales: Feasibility Report (2019) demonstrates how the incorporation of the Right to Adequate Housing<sup>53</sup> in Welsh law would benefit existing legislation, particularly the Rights of the Child Measure.<sup>54</sup> The Measure already places a duty of due regard on Welsh Ministers of the UNCRC and an age-inclusive incorporation of this right into Welsh law would offer protection to the child's caregiver too. Furthermore, it would support the need stated by the UN Committee (2016) to 'take necessary measures...to progressively guarantee all children stable access to adequate housing,'<sup>55</sup> placing a duty on local authorities to ensure that they take full advantage of the economic resources available to them.

In the Welsh Government's tackling of child poverty, a focus on accessible housing in Wales is therefore needed. As the Children's Commissioner's Report's qualitative approach shows, high housing costs greatly exacerbate the impact of socioeconomic disadvantage that children and parents in Wales experience. A focus on the child's right to adequate living standards is essential to their development.

## **Conclusions and Recommendations**

Child poverty in Wales persists, and barriers to disadvantaged children fully accessing their rights remain. The need for the Welsh Government to produce a clear Child Poverty Delivery Plan, with a focus on key areas of mitigation within the framework of devolution, has never been more urgent. Important areas that need to be addressed in this Plan are included in this report and can be achieved through a coordinated approach towards reducing the socio-economic impact of poverty that affects children and parents every day. This impact is felt in both the child's educational and home environment, with the long-term effects on young children a particular concern.

To combat this, it is recommended that the Welsh Government should:

- Give a clear commitment to provide households with an adequate standard of living.
- Produce a clear Child Poverty Delivery Plan with a focus on key areas of mitigation within the framework of devolution, particularly education and housing.
- Consider the benefits of extending FSM to currently excluded disadvantaged learners.
- Extend the minimum eligibility for ECEC hours for 3-4-year-olds in non-working households from 10 to 15 hours per week.
- Whilst it is important to acknowledge that Welsh Government efforts to alleviate child poverty are hindered by challenging UK Government economic policies, it is also important that Wales commits to an eradication target that unites Welsh Government, public bodies and relevant organisations to realise policy aspirations and ensure the wellbeing of children as effectively as possible.

1 Welsh Government, Child Poverty Progress Report (December 2019) 7, Equality and Human Rights Commission (EHRC), Is Wales Fairer? The State of Equality and Human Rights (October 2018) 58.

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3 Welsh Government, Analysis of the impact of the UK Government's welfare reforms on households in Wales (Cardiff 2019) 7.

4 Welsh Government, Building Resilient Communities: Taking Forward the Tackling Poverty Action Plan (Cardiff 2013) 2.

5 Philip Alston, United Nations Special Rapporteur on Extreme Poverty and Human Rights, "Responses to COVID-19 are failing people in poverty worldwide" – UN human rights expert' Office of the United Nations High Commissioner for Human Rights (22nd April 2020) <<https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25815&LangID=E>> accessed 22nd April 2020.

6 Trussell Trust, 'Food banks report record spike in need as coalition of anti-poverty charities call for strong lifeline to be thrown to anyone who needs it' Trussell Trust (1st May 2020) <<http://www.trusselltrust.org/2020/05/01/coalition-call/>> accessed 3rd May 2020.

7 Welsh Government, 'Press Release: Wales has become the first country in the UK to guarantee ongoing funding for children to continue to receive free school meals during the coronavirus pandemic' Welsh Government (22nd April 2020) <<https://gov.wales/wales-has-become-first-country-uk-guarantee-ongoing-funding-children-continue-receive-free-school>> accessed 24th April 2020.

8 See Welsh Government, 'Education and Childcare: Coronavirus' <<https://gov.wales/education-coronavirus>> accessed 4th May 2020.

9 Children and Families (Wales) Measure 2010.

10 Rights of Children and Young Persons (Wales) Measure 2011.

11 Welsh Government, Programme for Children and Young People (Cardiff 2015).

12 Well-being of Future Generations (Wales) Act 2015.

13 Haydn Davies, 'The Well-being of Future Generations (Wales) Act 2015: Duties or aspirations?' (2016) 18 (1) Environmental Law Review 41.

14 For a detailed examination of the legislative competence of the Welsh Government see Richard Rawlings, 'The strange reconstitution of Wales' [2018] Public Law 62-83.

15 Wales Act 2017, s 1.

16 Wales Act 2017, s 45, Equality Act 2010, s 1.

17 Jane Hutt, Deputy Minister and Chief Whip, 'Written Statement: A More Equal Wales - Commencing the Socio-economic Duty' (Welsh Government, 21st November 2019) <<https://gov.wales/written-statement-more-equal-wales-commencing-socio-economic-duty>> accessed 26th March 2020.

18 United Kingdom Children's Commissioners, UK Children's Commissioners' response to the Replies of the United Kingdom of Great Britain and Northern Ireland to the List of Issues of the UN Committee on the Rights of the Child (April 15th 2016) para 2(4).

19 Children and Families (Wales) Measure 2010, s 2.

20 Welsh Government, Tackling Poverty Action Plan (Cardiff 2012).

21 United Nations Committee on the Rights of the Child, Concluding Observations on the fifth periodic report of the United Kingdom of Great Britain and Northern Ireland (12th July 2016) para 71 (a).

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**RESPONSE 72 – EARLY YEARS COALITION** - Contributions from: David Goodger (Early Years Wales), David Dallimore, Amy Brown (Professor of Child Public Health), Jacky Tyrie (Acting Programme Director for BA Early Childhood Studies) and Anna Westall (Children in Wales).

## **Early Years (0-7year olds)**

An interim perspective of the extent to which law, policy and practice in Wales has progressed since the UN Committee on the Rights of the Child issued their Concluding Observations to the UK and devolved governments in 2016

In 2016, the United Nations Committee on the Rights of the Child issued their Concluding Observations in respect of the UK and devolved governments progress in achieving compliance with the principles and standards as set out in the UNCRC. Informed by the State Party report and the shadow report submitted by the Wales UNCRC Monitoring Group, the Concluding Observations provide a series of actions that governments should take to advance children's rights in their country.

The Wales UNCRC Monitoring Group produced a document combining these recommendations which can be accessed here - MGs Combined Report

In advance of the next reporting round, the Wales UNCRC Monitoring Group identified a number of thematic areas and considered the extent to which law, policy and practice in Wales has progressed since 2016 in line with the UNs recommendations.

This Thematic Briefing Paper provides this in respect of Early Years

## **United Nations Convention on the Rights of the Child**



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The United Nations Convention on the Rights of the Child (UNCRC) applies to all children and young people under 18. The aim of the UNCRC is to recognise children's rights and ensure that children grow up in the spirit of peace, dignity, tolerance, freedom, equality and solidarity. The UNCRC is the most widely ratified human rights treaty in the world and applies to every child and young person without exception. There are 54 articles that cover all aspects of a child's life, setting out the civil, political, economic, social and cultural rights that all children in the world are entitled to.

In 2019, the UNCRC celebrated its 30th Anniversary. Since 1991, when the treaty came into force across the UK, every child has been entitled to a series of specific rights. These include:

- the right to life, survival and development
- the right to have a say in decisions and have their opinions taken into account
- the right to have their best interests considered at all times
- the right to receive information, to have privacy and a name and nationality
- the right to be properly cared for, and protected from violence and abuse
- the right to an education, play, leisure, culture and the arts
- the right to live in a family environment and properly cared for
- the right to good quality health care and be protected from harmful work
- special protection for refugee children, disabled children, children in the juvenile justice system, children deprived of their liberty and children suffering exploitation and harm.

The Welsh Governments seven core aims for children and young people summarise the UNCRC and form the basis for decisions on priorities and objectives nationally. They should also form the basis for decisions on strategy and service provision locally.

- Have a flying start in life (Articles 3, 29, 36)
- Have a comprehensive range of education and learning opportunities (Articles 23, 28, 29, 32)
- Enjoy the best possible health and are free from abuse, victimisation and exploitation (Articles 6, 18-20, 24, 26-29, 32-35, 37, 40)
- Have access to play, leisure, sporting and cultural activities (Articles 15, 20, 29, 31)
- Are listened to, treated with respect, and have their race and cultural identity recognised (Articles 2, 7, 8, 12-17, 20)
- Have a safe home and a community which supports physical and emotional well-being (Articles 19, 20, 25, 27, 32-35, 37, 38, 40)
- Are not disadvantaged by poverty (Articles 6, 26, 27, 28)

## **Early Years**

'Early Years' incorporates a broad range of thematic policy areas e.g., health, education, poverty, family environment etc.; therefore many Articles of the UNCRC are of relevance for this thematic area. This report focuses on responding specifically to the concluding observation 2016 and will highlight other areas of Early Years which require recognition in today's climate.

The convention is an international treaty; it outlines children's rights under the three main umbrellas: the right to provision (such as provision of health and educational services), protection (such as right for protection against violence) and participation (such as participation in decisions affecting the child).

Young children are closely linked to a family unit hence the Convention strongly recognizes and supports parents and families and their crucial role and responsibilities for protecting and caring for children and helping them acquire values and standards (Articles 5, 9, and 18)

How a society views children can have a strong relation to policy development. Are they 'empty vessels' at the start of life and are made 'ready to learn' and 'ready for school' during the early years or are they curious, capable and intelligent individual, a co-creator of knowledge who needs and wants interaction with other children and adults.

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In Wales the 'early years' is one of the Welsh Government's stated five cross-cutting priorities and is defined as the period of life from pre-birth to the end of Foundation Phase or 0 to 7 years of age. These years are a crucial time for children. Children grow rapidly and both their physical and mental development are affected by the environment in which they find themselves in. The first three years of life are particularly important for healthy development due to the fast rate of neurological growth that occurs during this period. There is an abundance of research showing that investing in the first years of a child's life improves outcomes for them throughout the rest of their lives.

Today, politicians and policy makers, along with researchers and academics are aware of the significance of the early years and Wales's Policies strongly recognise; acknowledge and invest in the Early Years as seen in Building a Brighter Future: Early Years and Childcare Plan; Flying Start and First 1000 days.

While awareness of the early experiences having a key role in the health outcome of later life, science has further explained that the quality of the environments around children greatly impacts their early experiences and shapes their health outcomes.

In order to understand child development in general, and the development of any particular child, we need to keep in mind three aspects; the child as an individual, their environment, and the socioeconomic culture which surrounds the child and family (Siraj-Blatchford et al, 2012).

Every child is unique and their needs will reflect this; most of what children learn in the first few years, they often discover naturally for themselves and they do it in their own way and time. The environment children grow up in both in terms of physical space and social environment play a vital role in their development. Hence the need for positive and nurturing interactions and care from primary caregivers.

However development also happens within the socioeconomic culture surrounding the child. In Wales 29% of children are living in Poverty<sup>1</sup>. We need to be aware that children are affected by policy across a wide canvas. For example, the effect of policies relating to tax, benefits and incentives will have implications for many children. Many aspects of the UNCRC have direct and discrete impact on the first 7 years of a child's life.

1. Welsh Government, Child Poverty Progress Report 201

Concluding Observations  
May 2016

Wales UNCRC Monitoring Group Recommendations March 2016

List of Issues report to UN Committee (UK)  
April 2016

#### Family Environment

The Committee acknowledges that there are good practices in the State party and the devolved administrations in providing childcare to those who need it. However, the Committee is concerned about the negative effect of the high cost of childcare on children and their family environment.

The Committee recommends that the State party and the devolved governments conduct a rigorous child rights impact assessment of the recent reduction of funding for childcare and family support and adjust the family support policy in order to make childcare services available to all those who need it.

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While recognising that employment is a key route out of poverty, develop actions to address in-work poverty and promote activities to support engagement in work such as addressing sufficiency levels in childcare provision and promote a living wage

The UK Government should exercise non-devolved powers so that Universal Credit support for childcare with a tax-free child care scheme is introduced to create a single and fair system.

### Education

Taking note of Sustainable Development Goal 4, Target 4.2 on access to quality early childhood development services, allocate sufficient human, technical and financial resources for the development and expansion of early childhood care and education, based on a comprehensive and holistic policy of early childhood development, with special attention to the children in the most vulnerable situations.

### Nothing noted

The UK State Party and devolved governments should intensify efforts to reduce the effects of the social background of children on their achievement at school, focusing on the early years, on parents' engagement and improving the home learning environment (echoes Children's Commissioners). In particular, the UK State Party and devolved governments should ensure that:

- The entitlement to early education is taken up among under-represented or disadvantaged groups;
- The professionalism of early years' education is increased by, for example, requiring that each setting must have at least one member of staff who is a graduate;
- Data collection, research and evaluation is improved to enable schools and local authorities to draw on to inform their approaches to tackle the attainment gap and inform professional development. This should include national mapping and scrutiny of specific services including speech and language therapy, classroom assistants and educational psychologists;

### Breastfeeding

(66c) Promote, protect and support breastfeeding in all policy areas where breastfeeding has an impact on child health, including obesity, certain non - communicable diseases, and mental health, and fully implement the International Code of Marketing of Breastmilk Substitutes.

The UK State Party and devolved governments should:

- To enable progress to be measured, routinely collect comprehensive UK-wide national breastfeeding initiation and prevalence rates;
- Establish a national infant feeding strategy board in each nation, task the boards with developing a national infant feeding strategy and implementation plans;
- Enact the International Code of Marketing of Breast-Milk Substitutes and relevant resolutions of the World Health Organisation;
- Ensure all hospitals, maternity, neo-natal and health visiting services maintain baby friendly accreditation;
- Investigate the low increase or static incidence of breastfeeding and provide more targeted support.

### Respect for the Views of the Child

With reference to its General comments NO.12 (2009) on the right of the child to be heard, the Committee recommends that the State party:

Establish structures for the active and meaningful participation of children and give due weight to their views in designing laws, policies, programmes and services at the local and national level, including in relation to discrimination, violence, sexual exploitation and abuse, harmful practices, alternative care, sexual and reproductive education, leisure and play. Particular attention should be paid to involving younger children and children in vulnerable situations, such as children with disabilities;

Ensure that children are not only heard but also listened to and their views given due weight by all professionals working with children

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The UK State Party and devolved governments should:

- Ensure that children's rights to express their view, and to have these views given due weight according to their age and maturity, are enshrined in all laws relating to children and apply to all children, including those in the armed forces;
- Demonstrate how arrangements for children's participation (of all ages) result in influence on its decision-making. Where children's views are sought, mechanisms should be created to provide feedback regarding how their views and experiences have influenced decision-making. This is of particular importance where a decision appears to directly contradict the views expressed by children (echoes Children's Commissioners);
- Develop a comprehensive national strategic approach to children and young people's participation, informed by the views of children, including provision of clear, measurable objectives to encourage consistency. This should ensure that their voices are considered and taken into account.

Demonstrate how its arrangements for young people's participation result in influence on its decision-making

Develop a comprehensive national strategic approach to children and young people's participation including the provision of clear measurable objectives to encourage consistency

To what extent have the various recommendations been addressed?

### **Family Environment and Education**

The majority of children living in relative income poverty live in a household where at least one person is working. Childcare is often cited as the reason why some parents work where they do, work the hours they do, or don't work at all. The introduction of the Childcare Offer for Wales (<https://gov.wales/childcare-3-and-4-year-olds>) acknowledges the pressure on hard working parents, supporting them with their childcare costs and enabling them to access wider employment choices. The Childcare Offer provides working parents with 30 hours of Government funded early education and childcare for their 3 and 4 year olds for up to 48 weeks a year. The Offer is available across the whole of Wales and over 15,000 children are now accessing the funded childcare. We know from the evaluation of the first year of the Offer that 60 per cent of parents accessing the Offer said it had provided more opportunities for in-work training and learning and development. 60 per cent of parents accessing the Offer were earning the equivalent or below the Wales median annual salary; with 30 per cent earning £15,599 or less. 88 per cent of parents reported having more money as a result of the Offer. For a typical family accessing 20 hours of Government funded childcare per week during school term time, they could potentially be getting the equivalent of £90 more money in their pockets per week. For families accessing 30 hours childcare per week in the school holidays, they could be getting the equivalent of £135 more money in their pockets every week. 1

In Wales, the main strategy adopted by the devolved government to mitigate the negative effect of the high cost of childcare on children and their family environment has been the Childcare Offer. Since 2018, eligible 3 and 4 year olds are able to receive up to 30 hours of childcare per week. This provides funded 'childcare' of 20 hours per week in addition to the 10 hours of Foundation Phase early education. The policy rationale for the Offer is primarily to support working parents. Evaluation finds that the Offer has helped low-income families most, but that there is still much confusion around eligibility, funding during holidays and how the scheme works alongside other demand-side funding subsidies. For parents of younger children, the proportion of fees paid can lead to financial pressures and limits access, a situation exacerbated by the complexity of funding arrangements. Availability of childcare is also highly inconsistent across the country.

Since 2016, more children are receiving Flying Start services. Flying Start is a compensatory programme of early intervention focused on how parents, and mothers in particular, can support

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school readiness. Around 25% of two year olds living in the most deprived areas of Wales receive supply-side funded part-time childcare through Flying Start as part of the wider package of parenting and developmental support. However, Flying Start is an area-based initiative, and not all of the children receiving the service will be living in poverty. Similarly, this also means that many children experiencing poverty in Wales will not be reached because they do not live in a Flying Start area.

Measures that mitigate against grouping children through social status' should also be sought by all levels of administrations. Current, well-intentioned provisions that are planned through post codes to target children in deprivation inadvertently result in grouping children from similar socio-economic backgrounds. Evidence proves that, enabling children to mix across socio-economic groups has a significant impact on attainment. Furthermore, later in education, children receipt of free school meals (a proxy indicator of poverty) self-report in that they prefer to be in mixed groups and not provided for as a group on their own.

There is concern around the impact of Universal Credit that seemingly delays receipt of important funds and exposes more children that necessary to child poverty. Any improvement into the use of non-devolved powers to support families in greatest need of support will help prevent the repeating pattern of deprivation. Evidence demonstrates that children in lower socio-economic groups have the most to gain from early socialisation and learning in childcare and this would be a mitigation towards avoiding an attainment gap within the early years education. The recent Sutton Trust Report<sup>2</sup> (although based on data from England) would suggest that, post-Covid more than ever, those in poverty, with ALN, or with limited social connectivity are more expose to disadvantage than ever.

There is also a rise in 'in-work' poverty and families with limited job security through zero-hour contracts is another consideration that UK Government must consider. Noting the possible benefits to an employer from these contractual arrangements, it will inevitably preclude families from planning in the knowledge that work and earning potential is reliable.

1. Welsh Government, Child Poverty Progress Report 2019
2. <https://www.suttontrust.com/our-research/coronavirus-impacts-early-years/>  
Early Childhood Education and Care (ECEC)

Wales currently has a split system of ECEC with childcare focused on parental employment support (with a range of demand and supply-side subsidies) and a supply-side funded universal early education (Foundation Phase) offer for children aged 3 and 4 years of age. Foundation Phase provides developmentally appropriate practice explained as providing school readiness, but with an emphasis on the individually paced development also resonates with a child-led right's approach. Take-up of Foundation Phase by 4 year olds is near universal, and over 90% for 3 year olds. However, despite the Childcare Offer, combining Foundation Phase with childcare to provide a coherent package for working families can be difficult.

While most children receive Foundation Phase in maintained schools, they can choose to attend non-maintained settings with integrated childcare and early education. However, funding, regulation and availability of such settings is inconsistent across Wales. In 2019, the devolved government made a commitment to integrating childcare and early education and has started to use the language of ECEC. Nonetheless, policies to facilitate integration have yet to be published.

Work within Wales to move to an ECEC model, implementing a Quality Framework and developing the knowledge base for staff in non-maintained sectors is imperative. There is no doubt that, a professional, qualified and supported sector is required to transform the childcare sector from the traditions from which it grew, into a robust and uniformly quality experience for all children.

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## Recommendations

- Building on their commitments, the Welsh Government should develop coherent policies for the delivery and funding of integrated ECEC services – including Flying Start.
- A consistent regulatory approach to ECEC in Wales would create opportunities for public, private and voluntary ECEC providers to create coherent and continuous services that promote the well-being, development and learning of children, support the Welsh language, and help parents organise work and family-life.
- While some progress has been made, reducing the high cost of childcare for families with younger children is needed to avoid negative effects on children and the family environment.

## Breastfeeding

The All Wales breastfeeding five-year action plan recommends that clear systems and processes are put in place to collect, analyse and disseminate infant feeding data. Routine data on breastfeeding initiation and prevalence is collected by each Health Board at birth and 10 – 14 days. However later data at 6 – 8 weeks and 6 months is patchy and often incomplete<sup>1</sup>. The UK Infant Feeding Survey, which collected comprehensive UK wide infant feeding data every five years was discontinued in 2013, although discussions, disrupted by COVID-19, are in place to consider its reinstatement<sup>2</sup>.

The Welsh Infant Feeding Network (WIFN), consisting of infant feeding leads and specialists from each health board in Wales was established in 2015. The Network feeds into the National Infant Feeding Network which is UK wide. In 2019, the 'All Wales breastfeeding five-year action plan' was launched. It included recommendations to develop an All Wales strategic steering group and to appoint a strategic Infant Feeding Lead in every health board, and to support the work of WIFN in providing operational leadership to increase breastfeeding rates. No appointments have been made to the strategic steering group or infant feeding lead positions at present<sup>1</sup>.

The UK has partially adopted the International Code of Marketing of Breast-Milk Substitutes and relevant resolutions of the World Health Organisation. We have enactment to prevent marketing of infant formula and infant milks marketed as foods for special medical purposes. However, there are no regulations to prevent marketing related to follow on formula, milks marketed for children over one year, foods marketed under six months or bottles and teats<sup>3</sup>.

In terms of Baby Friendly Accreditation in hospitals, maternity, neo-natal and health visiting services, current statistics show that 78% of babies are born in baby friendly accredited units in Wales. Wales has accreditation of some maternity, neo-natal and health visiting services with others having a certificate of commitment to engage. However, some services do not hold accreditation or a commitment to engage<sup>4</sup>. There is encouragement but no government mandate for all units to gain accreditation<sup>5</sup>.

Public Health Wales has commissioned recent research into barriers and facilitators to breastfeeding in low income communities in Wales. The work was conducted by academics at Cardiff and Swansea University in collaboration with the NCT and produced a logic model evidencing best practice to target support<sup>1</sup>. In 2018 Public Health Wales and Welsh Government, alongside infant feeding specialists and academics, participated in the international 'Becoming breastfeeding friendly' project led by Yale university. This benchmarking exercise examines how far a country meets known facilitators of breastfeeding and provides recommendations for improvement<sup>6</sup>.

1. All Wales Breastfeeding Five Year Action Plan

[https://gov.wales/sites/default/files/publications/2019-06/all-wales-breastfeeding-five-year-action-plan-july-2019\\_0.pdf](https://gov.wales/sites/default/files/publications/2019-06/all-wales-breastfeeding-five-year-action-plan-july-2019_0.pdf)

2. UK Infant feeding survey [https://digital.nhs.uk/data-and-](https://digital.nhs.uk/data-and-information/publications/statistical/infant-feeding-survey/infant-feeding-survey-uk-2010)

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3. Guide to UK formula marketing rules <http://www.babymilkaction.org/ukrules-pt1>

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4. Baby Friendly Accreditation statistics for Wales  
<https://unicefbfi.secure.force.com/Events/Awards>
  5. World Breastfeeding Trends Initiative UK Report (2016)  
<https://ukbreastfeeding.org/wbtiuk2016/>
  6. Becoming Breastfeeding Friendly in Wales: context, findings and recommendations  
<https://kar.kent.ac.uk/78271/>

### **Respect for the Views of the Child**

There were several concluding observations referring to Participation and voice of the child; however only one element highlights the need to focus on younger children.

‘Particular attention should be paid to involving younger children and children in vulnerable situations, such as children with disabilities.’ (page 15 MGs Combined Report)

Reflecting on the GENERAL COMMENT No. 7 (2005) which is a comprehensive document that explains how the Convention on the Rights of the Child should be interpreted when it comes to young children; we can begin to look at why younger children’s voice is either undervalued; misunderstood or hidden within wider policy.

Although the UNCRC provides a framework for a right-based approach to early child development and realisation of rights for children, it is not clear how child rights should apply to children younger than 8 years of age. General Comment 7 provides a road map of how to implement UNCRC during these crucially important years. Securing rights articulated in UNCRC is an effective approach to improving the quality of early experiences.

Older children can express themselves more clearly, articulate their rights and make their voices heard, a younger child may not be able to do so in the same way; however this does not mean they are unable to.

UNCRC Article 12 states: “the child who is capable of forming his or her own views [has] the right to express those views freely in all matters affecting them, the views of the child being given due weight in accordance with the age and maturity of the child.”

Babies are developed and “mature” enough to form and express views about when they are hungry, tired, contented or afraid. Adults can care well for them only when they listen to babies’ views, clearly expressed through their cries and body language. 1

If Babies and young children can express themselves, they have the right to express their views; feelings and thoughts on things that matter to them and for these to be considered and weighed by their adult care takers and other stakeholders in decisions that affect their lives. We have a responsibility to find creative ways to facilitate this.

How children’s voices, are ‘heard’ by policymakers, and how this feeds through into policy can be difficult as we try to ensure that children’s perspectives are accurately represented; for example, there may be differences between how children perceive something compared to how a parent/adult perceive it.

Child participation can be executed within a wide spectrum. It starts from consultation which is merely seeking children’s views in order to become aware of their lives and experience to collaboration where children are actively engaged at any stage of a decision to the child-led initiatives where children are provided with the space and opportunity to identify issues of concern, set off activities, and campaign for themselves.<sup>2</sup>

Here are some uniform features of listening and participation with young children:

Knowing the Children - consultation is not as effective with strangers

Respect – Is key to all relationships. This needs to be a fundamental part of listening. The children will learn from An early age the life skill that is respect for others.

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Capable Children - This is again a part of respect. Children need to be seen as capable in order for the practitioners to treat them as capable.

Cycle of consultation - Consultation does not have to be an additional feature of working with very young children. It is a part of ongoing daily practice and practitioners need support to identify opportunities.

Treating all children as individuals – Each child is different and has different needs. It is important that these are identified when listening to children so that the child can be interpreted properly and can be given the opportunity to use different means of communication.

Consultation with all stakeholders -The parents/guardians of the children also need to be involved in the consultation process. The child's family and culture is a part of their identity and will affect the way they respond to adults. 3

This isn't a quick process participation on young children takes time, effort and resources.

### **Responding to concluding observations**

There is clear Welsh Government support for Participation and the embedding on The Rights of Children and Young Persons (Wales) Measure 2011 and the implementation process around this do demonstrates a desire to support children rights. However all policy and legislation at this level does not distinguish in the age of the child and should be applied for all 0-18 year-olds. In terms of the implementation it appears more are aimed at children 7 plus and methods are based around verbal communication; limiting both younger children and children with additional needs (in some cases).

There are an array of National programmes; initiatives and structures in place for children and young people aged 7 plus to communicate their views: Young Wales, Youth Council, School councils, Little Voice etc. Whereas national programmes and pathways for participation for under 8's are patchier; more ad hoc and locality based. There may be a number of reasons for this; a lack of national guidance; lack of funding; a lack of understanding and awareness on how to communicate and involve young children or a need for a more individualist approach due to the uniqueness of early childhood.

Children's rights and participation is well established within legislation and education policy in Wales. Young children's participation has been specifically foregrounded as a pedagogical element within education policy in Wales. It is recognised as one of 12 pedagogical elements in the Foundation Phase, the curriculum framework for all children aged 3–7 years (Welsh Government 2015; Taylor et al. 2015). However, there is currently little evidence that this policy concerned with participation has been enacted.<sup>4</sup> Recent research has questioned how this participatory rhetoric is enacted within schools (Croke and Williams 2015; Lewis et al. 2017). A number of research studies have investigated why this might be. A recent evaluation of the Foundation Phase, Taylor et al. (2015) identified children's participation as their ability to 'spontaneously direct their learning, e.g. making mud cakes for the café' (p. 136) or their ability to 'choose which activity to engage with' (p. 139). However, these participatory practices are framed by spaces that already have predetermined ways of being and overpower the intentionality of the child (Goouch 2010)<sup>5</sup>

There could be a number of reasons why limited enactment in practice is happening and some are summaries below.

Lewis et al (2017)<sup>6</sup> summaries some of the reasons for this

"To further exemplify the gap between rhetoric and enactment, we might consider the evidence relating to children's participative rights and decisions that affect them. These rights are embedded within a Welsh, UK and an international context and in Wales is seen increasingly in relation to



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children having opportunities to contribute to the design of their learning experiences, albeit in limited capacity. Nevertheless, processes such as school councils do not necessarily support the voice or contribution of the young child in a manner that is appropriate for their interests and development. Perhaps this is a consequence of a national perspective in which young children are regarded as incapable in some capacities; or alternatively, perhaps we are not sufficiently imaginative to consider how best to support young children in their enactment of this right. It could, of course, be a combination of the two. A further explanation is suggested by Bae (2009) who claims that there may be a tendency for practitioners to act quickly to meet policy demands, without critically reflecting on the underlying concepts associated with enacting children's rights. In order to reduce or close the gap between rhetoric and reality and to improve the enactment of young children's rights in educational practice we put forward the following recommendations."

As Wales embarks on developing the Early Childhood Education and Care (ECEC) approach and a new curriculum there is an opportunity to focus on the Pedagogy we want for younger children and how we embed participation into this, building a culture of understanding and awareness of its importance.

A Children's Rights in Early Years Network (CREYN) was established in 2014 to bring together professionals to fulfill the aims of the Network.

The CREYN network is the only known network focusing specifically on Early Years. A workshop hosted by Children in Wales was held in 2019 with the aims of answering the following questions:

- What does research suggest about embedding / enacting children rights in 0-3 childcare settings and workforce
- What examples do we have of children's rights in early years settings? Day to day things / projects / one off examples.
- How can we support practitioners in embedding children rights in practice?
- How much do Early Years practitioners understand about children rights and how to transfer these to children and care givers?

The workshop results provide us with an idea of where we are at and some good examples of children's rights and participation work in practice.

There are a range of small scale OR one off examples across Wales of how young children are being given a voice and effective methods are being used to involve children in a participatory way; these highlight what can be done and what more there is to achieve.

- Reggio Emilia based on a pedagogy of listening to children
- The Mosaic approach which brings together a range of methods for listening to young children about their lives <https://learningaway.org.uk/wp-content/uploads/RL56-Extract-the-Mosaic-Approach-EARLY-YEARS.pdf>
- Bitw Bach includes eight lesson plans and the resources to introduce children's rights to foundation phase children, top tips for embedding rights in the classroom. <https://www.childcomwales.org.uk/resources/foundation-phase-resources/>
- Childcare sufficiency Assessment in Swansea where children as young as 2 were consulted with what childcare settings look like, inviting people to come and listen to children.
- New born Observational tool
- Child initiated activities / learning pathways

These examples show us how and why it is so important to listen to children of all ages and importance this has on their early development.

Participation needs to be meaningful and sensitive to the needs and requirements of each child; listening happens best when adults have good relationships with the child. Hence this requires those caring for and educating children to be the ones to understand and offer opportunities to listen and support them to share their views.

The primary caregiver in a child's first years of life is often the parents; most parents enjoy listening to babies, they love the reaction from babies when they engage with them, a gurgle, smile or laugh can bring great joy. Parents continue to listen to their children as they develop and in most cases a mutual understanding and way of communicating is nurtured.

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We need to support parents and caregivers to understand their vital role and support and upskill them to help promote the voice of young children in all matters relating to them. Creating an environment of respect and services them 'do with' not 'do too'.

1. (BABIES' RIGHTS Priscilla Alderson (2020) in The Sage Encyclopaedia of Children and Childhood Studies, Cook, D. (ed) London and New York: Sage. ISBN. 978147394292)
2. (Gerison Lansdown. Evolving capacities and participation; [http://www.acdi-cida.gc.ca/inet/images.nsf/vLUIImages/Childprotection/\\$file/CAPEvolvingcapacities\\_0%5B1%5D.pdf](http://www.acdi-cida.gc.ca/inet/images.nsf/vLUIImages/Childprotection/$file/CAPEvolvingcapacities_0%5B1%5D.pdf) 2)
3. Listening to the staff is a part of creating a listening culture in the setting 'When are we having candyfloss?' Report on a project to investigate consultation with very young children in early years services 2002-3 Ann-Marie McAuliffe April 2003
4. Spatially Democratic Pedagogy: Children's Design and Co-Creation of Classroom Space Jennifer Clement; Published online: 30 October 2019 © The Author(s) 2019
5. Spatially Democratic Pedagogy: Children's Design and Co-Creation of Classroom Space; Jennifer Clement, 2019
6. Exploring the Extent of Enactment of Young Children's Rights in the Education System in Wales, Lewis et al 2017.

### **RECOMMENDATIONS:**

- National recognition of the importance of listening to and gathering young children's views.
  - Bridging the gap between policy and enactment of rights in practice
  - Embedding of children's rights in all areas of policy with specific recognition of rights in the early years.
  - A clear pathway for young children's views to be heard and used in policy development, with appropriate timescales.
  - Guidance on effective methods to elicit young children's views.
  - Training in children rights specific to EY for all working with children. Opportunities to learn how to listen effectively to children and build a listening and participation culture.
  - More joined up approaches to consultation allowing Families to be consulted with as a whole rather than 'parents' and 'children' separately.
  - Funding to allow effective and robust participation methods to be undertaken locally and fed into a wider structure.
  - Consultation and policy timeframes which allow for effective and meaningful consultation and participation of young children.
- Further areas that need consideration
- Use of digital technology and digital play