



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)

Wales UNCRC Monitoring Group



Grŵp Monitro CCUHP Cymru

About This Report

This Report has been prepared by the Wales UNCRC Monitoring Group, which is a civil society coalition facilitated by Children in Wales, to inform the UN List of Issues Prior to Reporting (LOIPR). The priority issues in this Report were captured through 2 round-table events which examined 8 thematic areas; a 6 week extensive Call for Written Evidence and an analysis of secondary sources.

Due to fixed word limitation (10,000 words), this Report does not contain details of all of the issues pertaining to children rights in Wales. However, it does provide an overview of the key priorities civil society organisations have identified.

Devolution:

Wales within the context of the UK

The Welsh Government has responsibility for the implementation of the CRC in many policy areas, as set out through the Government for Wales Act 2006, which include education, health, social care and the protection and wellbeing of children and vulnerable persons, with the Welsh Parliament able to pass laws to give effect to the CRC. The UK Parliament is responsible for legislating on matters which are non-devolved, including criminal and youth justice, immigration and social security.



Children in Wales
Plant yng Nghymru

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Barnardo's Cymru

Children in Wales

The Children Society

Children's Commissioner for Wales (Observer status)

EHRC in Wales (Observer Status)

National Deaf Children's Society

NSPCC Cymru

Play Wales

Save the Children

UNICEF UK

Wales Observatory on Human Rights of Children and Young People

WLGA (Observer status)

Contributions

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4C's
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HEIW
Home Start Cymru
Neath Port Talbot YJB
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Wrexham CBC
Y Bont

Disclaimer: Views expressed in this report may not reflect the opinions of the organisations/individuals listed above.

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Preamble:

Emerging Priorities

Impact of Covid-19

Wales imposed a full national lockdown on 23rd March 2020, with a nationwide order to ‘stay at home’ subject to periodic reviews. Restrictions were gradually eased throughout the summer as infection rates began to fall. Schools re-opened for all children in September 2020 despite an upturn in new cases. Wales went into a shorter national lockdown on 23rd October. At the time of writing, restrictions on movement have again been eased, but significant controls remain.

The impact of the pandemic on children lives, especially for those most vulnerable, has been profound and unprecedented, as a consequence of measures taken to manage the health risks and reduce transmission rates. Schools, childcare settings, youth clubs, primary health care and family support services have all experienced periods of closure or had their services severely disrupted, as national restrictions to minimise movement and social contact were imposed.

Whilst the full impact of the emergency may not be known for some time, it has to date served to exacerbate pre-existing inequalities, and raised particular fears around children’s mental health, wellbeing and education; of children being exposed to violence in the home and increased poverty, and of the effects of experiencing trauma and distress due to isolation, separation and possible loss.

The impact of COVID-19 has not been identical for all children, with school closures offering an opportunity for some children to enjoy quality time with their families; to be less exposed to peer and education pressures, and for personal growth.¹ Nonetheless, the pandemic continues to have a significant negative impact on children, with restrictions imposed on a population group undergoing critical periods of physical, social, and emotional development. Some sections of the population with particular characteristics and in certain situations have been disproportionately affected, notably BAME families², some vulnerable children living away from home, children in low-income households, disabled children and those children facing additional strains from balancing education demands with caring responsibilities³.

Civil society organisations (CSOs) have called for children’s rights to be prioritised and fully protected during this period, insisting that Children’s Rights Impact Assessments (CRIAs) be formulated to inform all policy decisions, and for children views to be integral to recovery planning as all levels of government take steps to manage the pandemic⁴.

1 See for example, [Centre for Population Health \(2020\)](#) & evidence received from Neath Port Talbot Educational Psychology Service

2 Public Health Wales (2020) [How are we doing in Wales?: A Focus on Ethnicity](#)

3 For example, children trying to balance their caring roles with school work see [Carers Trust Wales \(2020\)](#)

4 See CSO evidence provided to, and report of the W/Parliament CYPE Committee (2020) [inquiry into the impact of COVID-19](#)

Q –Will the W/Government

- Ensure that the rights of children are fully protected and not put at further risk as a result of measures to tackle COVID-19?
- Commit to protecting budgets for children’s services, including those which provide for those most vulnerable?

Impact of leaving the EU

In June 2016, the UK held a referendum amongst the adult population on whether to leave the European Union. Following a protracted period, the European Union (Withdrawal Agreement) Act 2020 received Royal Assent in January 2020 providing for a transition period until 31st December 2020.

As the UK and EU work towards the end of the Transition Period, there remains the distinct possibility that the UK will leave the EU without a deal, which will lead to significant challenges in the immediate term. The impact of leaving the EU for children is anticipated to be profound, with CSOs calling for there to be no diminution of rights protections in law following the UK’s exit.⁵ Whilst some existing EU protections will be transposed to the UK Government, the EU Charter of Fundamental Rights will no longer apply and the European Court of Justice will have no jurisdiction⁶.

Concerns persist that rights currently enjoyed by children could be diluted or deprioritised⁷ and that existing cross-border arrangements to protect children could be weakened⁸. Unlike other parts of the UK, Wales is a net beneficiary of EU Structural Funds, and uncertainty prevails as to the level of replacement funds Wales will receive to continue to support vulnerable children in disadvantaged regions⁹. The future of international exchange opportunities provided through European programmes is also uncertain¹⁰.

The Human Rights Act 1998¹¹, which provides additional safeguards for children is to be reviewed¹², amplifying concerns that legal protections could be threatened¹³. The UK Government should continue to cooperate with the Council of Europe on matters pertaining to the implementation of the CRC.

Q –Will the W/Government

- Ensure that existing protections for children are maintained or strengthened upon EU-exit?
- Strengthen their opposition to any repeal of the Human Rights Act 1998 and ensure that cooperation with the Council of Europe continues?

5 Children in Wales & Wales Observatory on Human Rights of Children (2017) [Brexit & Children’s Rights: A Briefing Paper](#)
6 [European Union \(Withdrawal\) Act 2020](#)

7 See evidence received by the W/Parliament EAAL Committee (2017) [European Union \(Withdrawal\) Bill and its implications for Wales](#)

8 [European Union \(Withdrawal Bill\) Briefing \(2018\)](#)

9 [W/Government \(2020\) Regional Investment in Wales](#)

10 Evidence received from Wales Alliance for Global Learning

11 [The Human Rights Act 1998](#)

12 Law Society (2020) [Government to Review the Human Rights Act](#)

13 Guardian (2020) [Government Plans to Remove Key Human Rights protections](#)



OUR REPORT

General Measures of Implementation

Legislation

Wales became the first UK jurisdiction to legislate to incorporate the CRC into domestic law¹⁴ requiring Welsh Ministers to have due regard to the CRC when exercising any of their functions¹⁵. Section 4 of the legislation requires Ministers to publish a periodic 'Compliance Report'¹⁶ with Section 6 giving power to amend legislation if it is considered desirable to give further effect to the CRC.

An EHRC Wales commissioned report¹⁷ was mostly positive about the primary impact of the legislation, including steps taken to embed the CRC as a framework for policy development and to support scrutiny and advocacy. However, as an example of indirect incorporation, it has done little to enhance judicial accountability as the CRC is not directly applicable in domestic courts. Welsh law does not confer a legal remedy on a child who is the victim of a violation of the CRC, nor does it give the CRC superior or equal status to domestic legislation.

The Wales Act 2017¹⁸ confirmed the competence of the W/Parliament to legislate to 'observe and implement' international obligations. The example of Scotland, which has introduced a Bill to directly incorporate the CRC into law, demonstrates the potential of a reserved model of devolution to enable incorporation in a manner which provides for directly enforceable rights at devolved level¹⁹.

Q –Will the W/Government

- Introduce legislation to fully and directly incorporate the CRC into Welsh law, and take steps to incorporate other relevant Conventions, given their impact on children?

Ratification of the Optional Protocol 3

The UK/Government has not ratified OP3²⁰ despite UN recommendations²¹ and calls from CSOs²² to do so. Ratification would provide individual children an opportunity to make direct representation to the UN and seek redress where they consider rights to have been breached.

Q –Will the W/Government

- Call upon the UK/Government to ratify OP3 at the earliest opportune moment?

14 [Rights of Children and Young Persons \(Wales\) Measure 2011](#)

15 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

16 The latest [Compliance Report](#) was published in 2018 and covers the period June 2015-January 2018

17 Hoffman, S. & O'Neill, S. (2018), [The impact of Legal Integration of the UN Convention on the Rights of the Child in Wales](#)
18 The [Wales Act 2017](#)

19 [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 CRC rights directly applicable, including in court

20 [OP3 - on a communications procedure \(OP3\)](#)

21 [UN Concluding Observations 2016](#)

22 All [documents submitted](#) can be accessed via the website of the UN Human Rights Office of the High Commissioner

National Policy & Strategy

Wales has been without a national strategy for children since the term of office for the last W/Government came to an end in 2016²³. Although the current Programme for Government²⁴ makes numerous references to delivering priorities for children across a range of thematic areas, there is no action plan for implementing the CRC or delivering the 2016 Concluding Observations.

Q –Will the W/Government

- Publish a comprehensive and fully resourced national strategy with CSO and child involvement; with achievable and measurable actions subject to robust monitoring, evaluation and scrutiny arrangements?

Children’s Rights Impact Assessment

Legislation requires the W/Government to publish a Scheme²⁵ setting out how it will comply with the due regard duty. The Scheme introduced a CRIA procedure to be applied to all proposals for legislation and policy which directly or indirectly impact on children.

Whilst research has confirmed the importance of CRIA to ensure the CRC is taken into account by Ministers in policy decision-making and for raising the profile of children’s rights, it considers the CRIA application to be inconsistent and variable²⁶. Weaknesses include the application of CRIA being too late in the policy process to make any difference; lack of relevant expertise during CRIA completion, and a failure to fully apply CRIA to some important policies affecting children. This included the W/Government’s budget, with a recent W/Parliamentary Committee recommendation for this to be rectified rejected²⁷.

COVID-19 has highlighted how CRIA may be overlooked. The W/Government failed to apply CRIA to initial emergency regulations introduced²⁸, despite the very obvious impact on children of measures such as school closure and restrictions on outdoor activity²⁹. This was compounded by a failure to apply CRIA to specific initial steps taken as lockdown restrictions were lifted³⁰.

Q –Will the W/Government

- Systematically complete and publish CRIA on all policy and legislative proposals which are likely to directly or indirectly affect children, and introduce legislation to make CRIA a statutory requirement?

Coordination

Existing coordination arrangements have come under scrutiny, with CSOs calling for these to be strengthened³¹. A central team should have ‘sufficient human, technical and financial resources’ to effectively implement Ministerial duties, and have embedded strategic relationships with senior personnel across the whole of W/Government, as well as with CSO/NHRIs.

23 Wales UNCRC Monitoring Group (2019) [Evidence to CYPE Committee Inquiry into Children’s Rights](#)

24 Welsh Government (2017) [Programme for Government](#)

25 Welsh Government (2014) [Children’s Rights Scheme](#)

26 Hoffman, S. & O’Neill, S. (2018), [The impact of Legal Integration of the UN Convention on the Rights of the Child in Wales](#) and UNICEF (2017) Briefing, Strengthening CRIA in Wales (2017)

27 Welsh Government (2020) [Response to the CYPE Committee recommendations from their Inquiry into Children’s Rights](#) following calls for an individual CRIA to be published

28 Evidence received from UNICEF UK

29 Evidence received from Wales Observatory on Human Rights of Children and Young People

30 For example in relation to school reopening see evidence received from Wales Observatory on Human Rights of Children and Young People

31 Wales UNCRC Monitoring Group (2019) [Evidence to CYPE Committee Inquiry into Children’s Rights](#)

The establishment of a Children’s Rights Advisory Group with CSO/NHRIs involvement has been a positive development³²

There is no named ‘Minister for Children’ with calls for this to be rectified rejected³³. Responsibility for children sits within the portfolio of the Deputy Minister for Health and Social Services, though it is unclear how CRC duties are discharged across all ministerial portfolios. Recent acceptance of calls for all Ministers to receive CRC training have been welcomed, yet should be made mandatory.

Local authorities and other public bodies have significant powers in respect of implementing the CRC. W/Government has imposed a due regard duty on some authorities and individuals³⁴. Whilst sectoral legislation is welcome, this has to-date been ad hoc with ineffective monitoring arrangements. CSOs have called for all public bodies to be placed under a specific duty, and for W/Government to monitor compliance through their coordination function³⁵. Regrettably, a recent W/Parliamentary Committee recommendation in support of this has been rejected³⁶.

Q – Will the W/Government

- Appoint a Minister for Children with oversight of the due regard duty, supported by a Cabinet Committee for Children and a well-resourced central team with sufficient expertise, capacity and authority to coordinate all matters relating to CRC implementation across all Ministerial portfolios?
- Introduce legislation to ensure all (devolved) public bodies have a due regard duty to the CRC, with robust monitoring, accountability and reporting arrangements in place to ensure compliance?
- Ensure that training for officials and ministers is made mandatory?

Allocation of Resources

The W/Government budgetary considerations are subject to the due regard duty to the CRC and should be subject to a CRIA. There is a lack of transparency on expenditure on children in public budgeting across all ministerial portfolios, and the W/Governments preference for a holistic Strategic Integrated Impact Assessment (SIIA) to accompany their draft budget means that it is not possible to assess whether the maximum level of available resources to fulfil CRC obligations are being used³⁷.

The CRIA template included within the SIIA neither meets international guidance³⁸ nor provides assurance that due regard to the CRC is fully applied. Whilst the budget explanatory memorandum refers to funding for children’s services, this is far from comprehensive³⁹. The recent Improvement Plan makes no reference to children or the CRC⁴⁰.

32 The W/Government has established a Children’s Rights Advisory Group (CRAG) with standing members: Children’s Commissioner for Wales, Children in Wales, UNICEF, and Wales Observatory on Human Rights of Children. CRAG advises the W/Government on matters relating the children’s rights at a strategic level, and is available to assist all departments with CRIA

33 Welsh Government (2020) [Response to the CYPE Committee recommendations from their Inquiry into Children’s Rights](#)

34 Section 7(2) of the [Social Services and Well-being \(Wales\) Act 2014](#) imposes a duty to have due regard to the UNCRC on any person exercising functions under the Act in relation to: a child who has, or may have, needs for care and support; a child who is a carer who has, or may have, needs for support; or looked after children (as defined in the Act). Section 7(1) of the [Additional Learning Needs and Education Tribunal \(Wales\) Act 2018](#) imposes a duty on to have due regard to the UNCRC on a relevant body exercising functions under Part 1 of the Act (relating to Additional Learning needs of a child or young person).

35 Wales UNCRC Monitoring Group (2019) [Evidence to CYPE Committee Inquiry into Children’s Rights](#)

36 Welsh Government (2020) [Response to the CYPE Committee recommendations from their Inquiry into Children’s Rights](#)

37 See the [Report](#) of, and evidence provided to the W/Parliament(2019) Joint Committee inquiry: assessing the impact of budget decisions add ref

38 UN Guidance on public budgeting for the realisation of children’s rights [UNCRC General Comment No. 19](#) (2016)

39 e.g. the 2019-20 memorandum only specifies funding allocated to support children’s social services to prevent children being taken into care, and additional funding for early years)

40 W/Government (2019) [Budget Improvement Plan](#)

If child rights budgeting⁴¹ was undertaken, it would encourage collection and publication of essential data and the development of indicators to help evaluate impact of spending and inform future budget allocation decisions. It would also encourage public bodies to apply similar mechanisms to determine their budget allocation on children.

Q –Will the W/Government

- Undertake child budgeting analyses, ensuring that CRIA on its annual budget is completed and published, and includes an assessment of the resources available to implement proposals in line with the CRC?

Independent monitoring

A review of the appointment, funding and accountability of the Children’s Commissioner for Wales (CCfW) recommended that they be transferred from the W/Government to the W/Parliament⁴². This was partially rejected⁴³. The CCfW has asked for more powers to be able to deal with matters which relate to children in Wales which fall outside devolved competences⁴⁴.

Q –Will the W/Government

- Transfer responsibility for the appointment and funding of the CCfW to the W/Parliament, and meet request for powers to respond effectively to any matter affecting a child in Wales?

Raising awareness & understanding

Existing legislation places a duty upon Ministers to promote knowledge and understanding of the CRC. The extent to which activities have directly achieved their intended aim is difficult to gauge, given that no analysis has been undertaken⁴⁵.

Research⁴⁶ has shown that whilst there are a plethora of CSOs delivering activities which contribute towards this aim⁴⁷, accessing knowledge about the CRC for children is often dependent on the school they attend and/or whether they are involved in formal engagement structures.

Whilst we support recent attempts to raise awareness⁴⁸, there is presently no strategy with measurable outcomes nor any national co-ordination of activities.

A national approach which provides an opportunity for all children to access information, knowledge and understanding about the CRC is urgently needed. This should be achieved through embedding human rights education in schools alongside strengthening existing structures which provide opportunities for learning.

41 In 2006, Wales became the only territory in the EU to attempt a child-focused budget analysis with work undertaken to identify the proportion of the Government budget spent on children. This showed that, in 2006–07 an estimated 28 per cent, or £4.4 billion, of W/Government expenditure was allocated to children. See evidence received from UNICEF UK

42 The Independent Review of the Children’s Commissioner for Wales, Recommendation 6: There are clear principles around independence of public bodies involved in human rights. The Welsh Government should acknowledge and adhere to them by transferring the appointment and funding of the Children’s Commissioner to National Assembly for Wales (now W/Parliament). See also Response from the Children’s Commissioner for Wales to all recommendations.

43 Welsh Government (2015) [Written Statement - Response to the recommendations from the Independent Review of the Role and Functions of the Children’s Commissioner for Wales](#)

44 Children’s Commissioner for Wales (2015) [Response to the Recommendations of the Independent Review into the Role and Function of the Children’s Commissioner for Wales](#)

45 Wales UNCRC Monitoring Group (2019) [Evidence to CYPE Committee Inquiry into Children’s Rights](#)

46 Hoffman, S. & O’Neill, S. (2018), [The impact of Legal Integration of the UN Convention on the Rights of the Child in Wales](#)

47 For example, through training to children and/or the workforce

48 through for example, the W/Government commissioning multimedia activity and engagement opportunities for children leading to a national event to mark the 30th anniversary of the CRC in 2019

We welcome the recent announcement that a national awareness-raising strategy is now being developed⁴⁹ which should be aligned to the CRC.

Q –Will the W/Government

- Develop a fully resourced national strategy for promoting knowledge and understanding of the CRC with CSO/child involvement, with measurable outcomes subject to monitoring and scrutiny arrangements?

General Principles

Non Discrimination

Age Discrimination

Whilst the UK Equality Act 2010⁵⁰ provides protections against persons with one or more protected characteristics, it is not unlawful to discriminate against children because to their age.

Q –Will the W/Government

- Call upon the UK/Government to amend legislation to protect children against age discrimination?

Addressing discrimination & hate crime

Many children with certain characteristics continue to experience discrimination, stigmatization, violence and greater threats from hate crime, and show differential outcomes in relation to health, education and wellbeing as will be presented throughout this report.

Data shows a rise in reported hate crime against children linked to race, sexual orientation, religion, disability and transgender⁵¹, with actual figures likely to be much higher⁵². Recent concerns focus on the impact of increased exposure to online hate incidents, particularly during COVID-19 enforced school closures⁵³.

Research⁵⁴ has exposed widespread levels of racial hate crime between children in schools, with calls for there to be enhanced reporting mechanisms and standardised recording templates, alongside increased support for victims and training opportunities for teaching staff, only 3% of which are BAME⁵⁵. There's a need for greater investment in hate crime prevention programmes and preventative action around racism by embedding anti-racist education and positive representation of ethnic diversity throughout the school curriculum⁵⁶. There are a limited number of face-to-face hate crime specific services to support children⁵⁷. Institutional racism and violence has been further exposed through media reporting of the Black Lives Matter campaign, and acted as a catalyst in calling for change amongst young people⁵⁸.

Gypsy, Roma and Traveller (GRT) children face particular barriers in respect of meeting their health,

49 Welsh Government (2020) [Response to the CYPE Committee recommendations from their Inquiry into Children's Rights](#)

50 [Equality Act 2010](#)

51 Victim Support Wales (2020) [Children and young people affected by Hate Crime in Wales](#)

52 Home Office (2018) [Hate Crime, England and Wales 2018/19](#)

53 Evidence received from EYST

54 For example, Show [Racism the Red Card Wales \(2020\) Racism in Wales? Exploring prejudice in the Welsh education system](#). See also evidence received from Swansea Community Integration Team

55 EYST (2018) [Experiences of Racism and 'Race' in Schools](#)

56 Race Alliance Wales (2020) [From Rhetoric to Reality: Our Manifesto for an Anti-Racist Wales](#)

57 Victim Support Wales (2020) [Children and young people affected by Hate Crime in Wales](#)

58 Evidence received from Neath Port Talbot Youth Council

education and housing needs. Despite a statutory duty on local authorities to undertake an accommodation needs assessment⁵⁹, there remains a lack of culturally appropriate housing available, which risks children losing their identity and understanding of their cultural way of life⁶⁰. Only 1 in 5 GRT children achieve expected educational outcomes at age 16 despite improved attendance⁶¹ rates and attempts to narrow the attainment gap⁶². GRT families face particular barriers in accessing health services and have poorer health outcomes⁶³.

LGBT children continue to face barriers in respect of their health and education, with research reporting high rates of poor mental health⁶⁴, bullying in schools⁶⁵, and a lack of support amongst some public sector frontline staff⁶⁶. LGBT young people are significantly more at risk of homelessness than their peers⁶⁷. More support for LGBT children, who often experience homophobic, biphobic or transphobic abuse and discrimination is required, alongside professional training.

Q –Will the W/Government

- Take steps to tackle discrimination experienced by particular groups of children, including through promoting cultural awareness, training and support to address bullying, hate crime and intolerance?
- Ensure that all frontline public sector staff receive mandatory diversity and inclusion training on how to tackle abuse, bullying and discrimination?
- Ensure that inclusivity and diversity are embedded in the school curriculum?
- Invest in hate crime prevention programmes and services which support victims.
- Ensure that local authorities discharge their duty to provide sufficient and appropriate housing provision for GRT families?
- Ensure that all children have equal access and improved outcomes in respect of their health and education?

Disaggregated data

There continues to be a lack of Wales specific and disaggregated data, which would provide a better understanding of the impact decisions, policy and legislation are having on particular groups of children.

Q –Will the W/Government

- Take steps to strengthen data collection mechanisms, including disaggregated data?

Respect for the Views of the Child

Whilst some progress has been made through the establishment of an independent Youth Parliament⁶⁸ accountable to the W/Parliament operating alongside other established national structures⁶⁹, it remains that children's views are not systematically heard on all decisions affecting them.

Many children continue to feel that they are not listened to by professionals and do not routinely have access to independent advocacy support. Many lack opportunities for collective meaningful participation locally,

59 [Housing Act \(Wales\) 2014](#)

60 Evidence received from TGP Cymru

61 Estyn (2019) [More Gypsy, Roma and Traveller pupils attend school, but further support needed](#)

62 Welsh Government (2018) [Enabling Gypsies, Roma and Travellers](#)

63 EHRC (2018) [Is Wales Fairer?: the State of Equality and Human Rights](#)

64 Stonewall (2018) [LGBT in Britain Health Report](#)

65 Stonewall Cymru (2017) [School Report Cymru](#)

66 Evidence received from Stonewall Cymru

67 End Youth Homelessness Cymru (2019) [Out on the Streets](#)

68 [Wales Youth Parliament](#)

69 For example, [Young Wales](#)

despite mandatory guidance in place⁷⁰. More should be done to ensure that children are involved in decisions earlier and routinely, with particular regard to those most underrepresented. Equitable models of participation should be embedded across all public services aligned to agreed national standards⁷¹ and legislation⁷², with strengthened monitoring and accountability arrangements to ensure that practice is of a sufficient quality⁷³ and involvement leads to evident change.

Whilst participation is well established within legislation and education policy, in practice there are more meaningful opportunities for children age 7 plus, as methods are often based around verbal communication, limiting both younger children and in some instances, children with additional needs. In the curriculum framework for children (3–7 years), participation is recognised as one of 12 pedagogical elements, yet there is little evidence that this is being routinely delivered as intended⁷⁴. Practitioners should be upskilled to enable young children to participate⁷⁵, and the interface between children’s voice in schools and local/national participation opportunities should be strengthened.

Positively, all 16-17 year olds will be able to vote in national elections in 2021⁷⁶ and most in the next local elections⁷⁷. The W/Government has worked with CSOs to engage with children on the implications of Brexit and on the impact of COVID-19⁷⁸.

Q –Will the W/Government

- Ensure that national and local arrangements for children’s participation promote a rights based approach, are sustainable, adequately funded and monitored against national standards, and that these include opportunities for children to discuss the issues of importance to them?
- Ensure there are equitable opportunities for younger children, and those most marginalised and vulnerable to participate at a local and national level?

Violence Against Children

Cruel or Degrading Treatment or Punishment

Despite the UN Committee recommending that the use of Tasers on children be banned, police firearm officers are permitted to use electronic stun guns on children. Data reveals that Tasers were used 55 times on children in Wales, some as young as 11 years old, and spit/bite guards were used 34 times, including once on

70 Promoting and facilitating children and young people’s participation is a duty on local authorities in the [Children and Families \(Wales\) Measure 2010](#)

71 The [National Standards for Children and Young People’s Participation](#), are endorsed by WG, should be adopted by Public Service Boards when consulting children.

72 [Well-being of Future Generations \(Wales\) Act 2015: guidance](#)

73 See for example evidence received from Children’s Rights Co-ordinator (Swansea)

74 Clement, J. (2019) Spatially Democratic Pedagogy: Children’s Design and Co-Creation of Classroom Space. A recent evaluation of the Foundation Phase identified children’s participation as their ability to ‘spontaneously direct their learning or their ability to ‘choose which activity to engage with’. However, these participatory practices are framed by spaces that already have predetermined ways of being and overpower the intentionality of the child. Taylor, C. et al. 2015. Evaluating the Foundation Phase: [Final Report](#). [Project Report](#). Cardiff: W/Government

75 See for example, evidence received from Swansea’s Children’s Rights Coordinator

76 [W/Parliament and Elections \(Wales\) Act 2020](#)

77 Local Government and Elections (Wales) Bill (recently passed). W/Government recently shelved plans for some adults in prisons and children in custody the right to vote due to the COVID-19 crisis
<https://www.bbc.co.uk/news/uk-wales-politics-52221041>

78 See Young Wales report on [young people’s views on Brexit](#) (2018) and Children’s Commissioner for Wales et al (2020) [Coronavirus and me](#)

a child under 12⁷⁹, despite research underlining how traumatic and distressing it is for children to be hooded⁸⁰.

There remains a lack of data on the use of restraint on children in many settings in Wales. We look forward to the W/Governments forthcoming revised guidance to reduce restrictive practices⁸¹ and the EHRC inquiry into the use of restraint in schools⁸².

Q –Will the W/Government

- Call upon the UK/Government to prohibit the use of Taser on children under 18 years old in Wales?⁸³
- Publish guidance on reducing restrictive practices; monitor implementation and improve data collection?

Ending Physical Punishment

We fully support and commend the W/Government for passing legislation which will remove the defence of reasonable punishment and provide children with equal protection in law following enactment in April 2022⁸⁴. W/Government must aim to fully realise Articles 19 and 37 and ensure effective implementation of legislation, by delivering an engaging public education campaign and support those services which enable parents to use positive non-violent parenting methods.

Q –Will the W/Government

- Ensure there is effective implementation of the legislation, through the provision of an awareness raising campaign, and resourced parenting advice and support services?

Violence and abuse

Child protection

In 2018, the rate of children under the age of 18 on the child protection register was 47 per 100,000 in Wales, one of the highest in the UK⁸⁵ with emotional abuse (43.2%)⁸⁶ being the most common reason recorded. However, official figures underestimate the true prevalence of child maltreatment, which often goes under-reported to child protection agencies and can remain hidden⁸⁷. COVID-19 will have exacerbated under-reporting as many children were not seen by universal services. Police recorded child homicides, as an important measure of child safety, have continued to decline though studies suggest the number of children who die where abuse is suspected are higher than recorded figures.⁸⁸

Physical abuse

W/Government and public bodies should continue to respond effectively to all incidences of physical abuse,

79 BBC Wales (2019) <https://www.bbc.co.uk/news/uk-wales-50867382> drawing on the UK/Government annual ‘use of force’ figures

80 CRAE (2016) [State of Children’s Rights in England: Policing and Criminal Justice](#)

81 Welsh Government (2019) Draft [Reducing Restrictive Practices Framework](#)

82 EHRC (2020) Inquiry: [How schools are monitoring the use of restraint](#)

83 Children’s Rights Alliance England are also recommending that, in the absence of prohibiting Taser and Spit-hood use on children, that the UK Government publish guidance and training for police on their use to ensure they are only used as a last resort.

84 [Children \(Abolition of Defence of Reasonable Punishment\) \(Wales\) Act 2020](#)

85 Evidence received from RCPCH - compared to 47.7 per 100,000 in Northern Ireland, 26 per 100,000 in Scotland and 45 per 100,000 in England

86 [Stats Wales](#) (2019)

87 [Child Abuse Extent and Nature](#) (2019) - Around 1 in 7 adults who called the NAPACs helpline in the latest year had not told anyone about their abuse before (Eng/Wal figures)

88 Brandon, M. et al (2012) [New learning from serious case reviews; a two year report for 2009-2011](#). See also ONS (2019) Homicide Rates in England and Wales

when someone deliberately hurts a child resulting in injury. COVID-19 restrictions have exacerbated the risk for some children, as a national helpline recorded a 53% increase in contacts concerned with children experiencing physical abuse during lockdown compared to before⁸⁹. Children accessing helplines also informed that physical punishment had been occurring more frequently⁹⁰.

Sexual Abuse (CSA)

Reports highlight the worrying drop in child protection plans for CSA in Wales⁹¹, with the number of children on the register because of CSA declining by 28% over 10 years⁹². This is in spite of high number of calls to national helplines about abuse and neglect, with 78% of calls concerned with abuse and parental behaviour⁹³. During lockdown specialist services working with child survivors highlighted concerns that support could not be provided to young children who couldn't access virtual support independently, including play-therapy. This is likely to have ongoing ramifications for children's recovery, particularly as social distancing measures persist. It is anticipated that a rise in online CSA offences during lockdown will emerge⁹⁴.

Whilst the W/Governments Action Plan on Preventing CSA is welcomed, concerns remain about the availability of specialist support services⁹⁵. Waiting times for Sexual Assault Referral Centres are lengthy⁹⁶, support is not consistently available geographically, and future funding levels are uncertain. There is a lack of data, knowledge of impact and services for children of a parent arrested for online CSA offences⁹⁷.

Q - Will the W/Government

- Adopt a long-term, sustainable, trauma-informed response to safeguarding children against violence and neglect?
- Ensure that children who have experienced abuse can access appropriate, child centred therapeutic services when needed?
- Take a public health approach to CSA and publish an impact assessment report of the National Action Plan by the end of 2022?

Criminal Exploitation / Child Sexual Exploitation (CE/CSE)

The increased risk of CE/CSE⁹⁸ amongst children, is driven in part by rising levels of poverty⁹⁹. There are believed to be over 1,000 'County Lines' drug networks across the UK - a four-fold increase in four years - recruiting vulnerable children as young as 13¹⁰⁰. Human trafficking forms part of this type of crime and abuse, and more children are being criminalised for drug related offences¹⁰¹. There are concerns that vulnerable children who may have experienced significant levels of trauma and not had support from statutory services as a result of high eligibility thresholds, are being criminalised for their involvement in criminal activity, rather than being recognised as victims of CSE¹⁰². Many lack support networks and are specifically targeted by criminal groups. Many children who are at risk of CSE/CE and other forms of abuse are not always heard or have no allocated social worker¹⁰³.

89 NSPCC (2020) [the impact of the coronavirus pandemic on child welfare: physical abuse](#)

90 ibid

91 The [Centre of Expertise on Child Sexual Abuse](#) (CSA)

92 Evidence received from NSPCC Cymru - from 160 in 2007/08 to 115 in 2017/18

93 Ibid (during June 2020)

94 Evidence received from Tarian Regional Organised Crime Unit

95 Evidence received from NSPCC Cymru

96 Crouch-Puzey, E. (2018) [State of the Sector](#) Welsh Women's Aid

97 Evidence received from Tarian Regional Organised Crime Unit

98 Hallet, S. et al (2019) [Keeping Safe](#) Cardiff University

99 Evidence received from Barnardo's Cymru

100 BBC Wales (2018) <https://www.bbc.co.uk/news/uk-wales-44127068>

101 Guardian (2018) [Rise in drug arrests](#)

102 Evidence received from Llamau

103 Evidence received from Action for Children

Q – Will the W/Government

- Work with public bodies to ensure that greater protection is provided to avoid children becoming victims of CE/CSE?

Harmful Practices

Whilst the UN Committee welcomed the enactment of the Serious Crime Act (2015)¹⁰⁴, enabling courts to issue protection orders to protect potential or actual child victims of FGM, concerns remain over the number of children affected by harmful practices, including FGM, honour based violence and forced marriage. Despite underreporting, statistics show that 1,196 cases of forced marriage were identified in 2017, with 30% of victims under 18 of which 16% were under 16¹⁰⁵. It is estimated that 144,000 girls under 18 are at risk of FGM in the UK, with the majority of cases thought to take place before a child is 8 years old¹⁰⁶. There is a distinct lack of Wales-only data.

Q – Will the W/Government

- Ensure that preventative and protection measures are strengthened to address all harmful practices against children; that professional and public awareness is enhanced, and data collection improved?

Domestic Abuse (DA)

It is well evidenced that experiencing DA in the home has a long-lasting, detrimental impact on a child's physical and mental health development and wellbeing, and can have implications for psychological and health behaviours in adulthood.

Rates of reported DA increased by 83% over the past 4 years¹⁰⁷, with children as victims and witnesses. It is estimated that at least 130,000 children live in households considered to be 'high risk' of DA in Wales and England¹⁰⁸. UK research shows that 12% of under 11s and 17.5% of 11–17s had been exposed to DA between adults in their homes during childhood¹⁰⁹. During COVID-19 lockdown there were concerns that children's voices were lost and that children were isolated from support providers and in potentially unsafe situations¹¹⁰. With universal services unable to see children, pressure mounted on the specialist services who saw an increase in demand. Helplines also experienced increased contacts¹¹¹.

Despite W/Government's ground-breaking legislation¹¹², implementation has been slow, resources limited with a lack of frontline services impacting on delivery. There is insufficient provision of services for child survivors across Wales. Specialist VAWDASV services report a lack of funding for this specific work, with some areas reporting little to no coverage.

CSO mapping of specialist DA service provision for children confirms the urgent need for resources to meet need¹¹³. During 2018/19, 4,263 children were known to access some form of specialist VAWDASV service in Wales, compared to the estimated 18,487 children who experience abuse in a year. It is estimated that 77% of children impacted by DA had no specialist support¹¹⁴.

104 [Serious Crime Act \(2015\)](#)

105 Home Office (2018) [Forced Marriage Unit Statistics 2017](#)

106 City University (2015) [Prevalence of FGM in England and Wales](#)

107 BBC Wales (2019) <https://www.bbc.co.uk/news/uk-wales-50565513> -Across all 4 Welsh Police forces, domestic abuse reports rose from 18,960 in 2015-16 to 41,532 in 2018-19

108 [SafeLives](#) (accessed 2020)

109 Radford, L. et al (2011) [Child abuse and neglect in the UK today](#) London: NSPCC

110 Welsh Women's Aid (2020) [Written evidence to W/Parliament CYPE Committee inquiry into the impact of COVID-19](#)

111 NSPCC (2020) [The impact of the coronavirus pandemic on child welfare: domestic abuse](#) - Contact to NSPCC helpline about DA 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, with Childline counselling for DA increasing from 50 to 65 a week.

112 [Violence against Women, Domestic Abuse and Sexual Violence \(VAWDASV\) 2015 Act](#)

113 Welsh Women's Aid (2019) [Children Matter](#)

114 Ibid

Q - Will the W/Government

- Ensure that sustainable and adequate funding for the specialist VAWDASV sector to provide support for all children who need it, including children's workers in refuges and therapeutic recovery support?

Bullying

The consequences of bullying can be far reaching, with children with particular characteristics and backgrounds at greater risk¹¹⁵. We welcome enhanced W/Government's guidance which considers various types of bullying including homophobic, sexual and racist bullying, with detailed support for schools, parents and children, and an emphasis on preventative models for schools to adopt. However, stronger action to prevent bullying, including online-bullying¹¹⁶ is needed, alongside monitoring the statutory duty placed on all schools to record incidents¹¹⁷.

Q – Will the W/Government

- Ensure that anti-bullying policies in schools are effectively implemented; that instances are routinely reported and teachers receive mandatory training on tackling all forms of bullying?

Family Environment and Alternative Care

Childcare and Early Years support

Wales 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 3-4 years of age¹¹⁸.

Many families can access some free or subsidised childcare, but availability is limited, eligibility is restrictive and coverage is declining¹¹⁹.

The W/Government funded Childcare Offer¹²⁰ is an all-Wales programme to support working parents, with over 15,000 children aged 3-4 now accessing free childcare. Whilst the recent evaluation¹²¹ found that the Offer had helped low-income families the most, there some confusion around eligibility and funding. Availability is highly inconsistent across the country, with many families excluded. Calls from CSOs for the Offer to be extended to non-working parents have yet to be accepted.

Wales also has Flying Start, a programme for children aged 0-3 years whose families live in specific areas of disadvantage. Around 25% of two year-olds in prescribed areas receive supply-side funded part-time childcare as part of a wider package of parenting and developmental support. However, around 44% of children from income deprived backgrounds are in-eligible as they live outside pre-defined geographical

115 For example, 54% of LGBT children and 73% of trans children faced bullying in schools - Stonewall Cymru (2017) [School Report Cymru](#), See also Children's Commissioner for Wales (2017) Sam's Story: Listening to Children and young People's experiences of bullying in Wales

116 See ONS (2020) [statistics](#) which show that almost 1 in 5 children experienced some form of online bullying in 2019 amid warnings that the problem has worsened during COVID-19 lockdown

117 Welsh Government (2019) [Rights, Respect, Equality: Statutory Guidance for governing bodies of maintained schools](#)

118 Wales UNCRC Monitoring Group & Children in Wales (2020) Thematic Report: Early Years (forthcoming)

119 Joseph Rowntree Foundation (2020) [Poverty in Wales 2020](#)

120 The [Childcare Offer for Wales](#) provides working parents with a mixture of 30 hours a week of free childcare or early education for children aged 3 or 4 for 48 weeks of the year

121 [Evaluation of the Childcare Offer for Wales: year 2](#)

areas¹²².

Overall, the childcare system is not fulfilling its full potential, with barriers prevailing in relation to sufficiency, accessibility, quality and cost¹²³. Providing a national high quality integrated ECEC system should be a key component to recovery from the economic effects of COVID-19, and help prevent disadvantaged children from falling further behind developmentally and educationally.

Q – Will the W/Government

- Ensure that all children have access to high quality childcare, as part of a coherent and integrated system?
- Widen the eligibility criteria for the Childcare Offer and Flying Start childcare to ensure that all children in poverty can access free childcare?

Family Support

Children thrive in happy, healthy home environments with strong adult-child relationships and attachments. COVID-19 has shone an unwelcomed light on challenges faced in that many children live in less than optimal home conditions, which requires a more holistic response than relying on schools and childcare settings to be a solution to wider family difficulties.

Families have access to a range of universal and specialist family support services, focused on early intervention and prevention, providing strength-based support to build and create resilient and self-reliant families¹²⁴. These services, complemented by a national parenting advice and support resource¹²⁵ offer a vital link between the home environment, statutory care services and education provision. However, more needs to be done to create an integrated wrap-around family support system to ensure children receive a full range of support aligned to their needs.

Statutory children's services have experienced significant budget cuts during the past decade. Whilst local authorities have been provided with additional funding to help address the fallout from COVID-19, concerns remain around their capacity to respond to the full consequence of the crisis on top of already significant social work caseloads.

Q - Will the W/Government

- Provide the necessary resources to enable public bodies to ensure that vulnerable children receive timely and adequate support, and have equitable access to high quality services to help prevent needs escalating?

Care-Experienced Children

In 2019, there were 6,846 children looked after in Wales, an increase of 7% on the previous year, and 37% over the past 10 years. 71% were accommodated in foster care placements and 66% received care because of abuse or neglect¹²⁶. There has been a sharp increase in the proportion of new-borns who became the subject

122 Save the Children (2018) [Little Pieces, Big Picture](#)

123 See for example, Coram Family and Childcare Trust (2020) [Childcare Survey 2020](#)

124 For example, [Families First](#) is a national programme providing multi-agency systems of support with a clear emphasis on early intervention, prevention and tackling child poverty

125 ['Parenting Give it Time'](#) website providing parenting advice and support promoting the many benefits of positive parenting.

126 Welsh Government (2019) [Experimental statistics: Children looked after by local authority](#)

of care proceedings¹²⁷. Children are more likely to come from deprived communities¹²⁸ with cuts to welfare payments and austerity identified as a driving factor for the rise¹²⁹. The increase in numbers could also be due to more informed practice and awareness of child abuse and neglect, and the responsibility of agencies to respond appropriately.

The W/Government have committed to safely reduce the numbers of children in care which has been cautiously welcomed. Decisions must however be made in the best interest of the child and be driven by a need to improve outcomes¹³⁰.

Placement choice, stability and sufficiency

All children have the right to family life, and appropriate matching and placement stability are conducive to helping to improve the education and health outcomes for care-experienced children¹³¹. Almost 1 in 10 children experience 3 or more placements per year¹³², with breakdowns detrimental and disruptive for the child, their family and ability to establish relationships¹³³.

Placement decisions must not be resource led and must always be informed by the views, wishes and feelings of the child and the desire to achieve stability. A wider pool of suitable placement options are needed, and children must be appropriately consulted on all available options to make an informed decision¹³⁴. Reports of children being placed in unregistered accommodation are particular concerning¹³⁵. All planned placement endings should be preceded by a review where children's views are recorded¹³⁶.

Q – Will the W/Government

- Take immediate steps to improve long-term placement stability, enhance choice and voice, and increase capacity of local placements?

Corporate Parenting

Existing corporate parenting arrangements should be strengthened by ensuring that all public bodies share responsibility to support children in their care, including taking a lead role in care planning; meeting their educational, health, social and employment needs, and involving CSOs and children as partners. Corporate Parenting legislation should be introduced to extend responsibility to all public bodies in Wales¹³⁷.

Q – Will the W/Government

- Introduce legislation, alongside guidance, training and monitoring arrangements, to extend corporate parenting responsibility to all public bodies in Wales?

127 Nuffield Family Justice Observatory (2019) '[Born into Care: new-borns and infants in 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.

128 Elliott, M. & Scourfield, J. (2017) [Identifying and Understanding Inequalities in Child Welfare Intervention Rates: Comparative studies in four UK countries. Single country quantitative study report: Wales](#) - Children are 16 times more likely to come into care if they come from the most deprived 10% of areas than the least deprived 10% areas.

129 BBC Wales (2019) <https://www.bbc.co.uk/news/uk-wales-47190227>

130 Evidence from NSPCC Cymru

131 See for example CASCADE (2015) [Understanding the educational experiences and opinions, attainment, achievement and aspirations of looked after children](#), Cardiff University

132 Welsh Government (2019) [Experimental statistics: Children looked after by local authority](#)

133 Park, M et al (2020) [What do children and young people looked after and their families think about care?](#) Wales Centre for Public Policy

134 See civil society evidence to the W/Parliament Public Accounts Committee (2017/18) [inquiry into care Experienced children and young people](#)

135 See for example TGP Cymru (2019) [Out of sight, out of rights?](#)

136 Evidence received from the Fostering Network Wales

137 Evidence received from Voices from Care Cymru

Mental Health

Research informs that care-experienced children have higher rates of mental health problems than the general population¹³⁸, with early exposure to abuse and neglect having a profound impact, leading to a range of mental health challenges¹³⁹, which can be lifelong. W/Government have taken positive steps to improve the mental health offer available to care-experienced children with a requirement for mental health assessments to be undertaken upon entry into care. However, research has reported that assessments are inadequate, guidance is lacking and training for staff is required¹⁴⁰.

Mental health support has been identified by care-experienced children as a priority issue, with reports identifying poor availability of emotional and therapeutic support services, particularly in relation to CAMHS¹⁴¹, compounded by lengthy waiting lists and high referral thresholds. For some children, access to advocacy support in mental health settings would be hugely beneficial in helping children navigate the system, ensuring their wishes are conveyed and to help prevent escalation of need¹⁴². Personal advisers should also prioritise support for the child's mental health as a key performance indicator¹⁴³.

Q – Will the W/Government

- Issue comprehensive guidance alongside training to health professionals, to enhance the initial mental health assessment, and monitor delivery?
- Ensure all care-experienced children are assessed on entry to care; receive timely access to advocacy support and appropriate therapeutic services, including CAMHS when needed, ensuring that mental health needs are met upon leaving care?

Information, Engagement & Advocacy

Care-experienced children should have accurate and timely information to make informed decisions during their care journey, yet often experience barriers to accessing information and engagement with named staff¹⁴⁴.

The W/Government have made encouraging progress in ensuring that all care-experienced children have access to statutory advocacy through a National Approach, which should be embedded in practice, regularly monitored and adequately funded. Arrangements for advocacy in residential care settings should also be strengthened¹⁴⁵.

Q – Will the W/Government

- Ensure that all care-experienced children have access to statutory advocacy, including those in residential care settings, and that sufficient resources are in place to meet demand and monitored?

Maintaining Healthy Relationships

Care-experienced children benefit from security and protection, and need strong, stable relationships with public bodies, past and present foster carers¹⁴⁶, family members and friends to nurture a better sense of identity and belonging. No child should be estranged from their siblings, unless it's in their best interest, and contact arrangements with siblings should be afforded the same importance as with birth parents. Fostering services should have a duty to promote personal relations and direct contact between the child and persons

138 NSPCC Cymru & Voices from care Cymru (2019) [Listen. Act. Thrive.](#)

139 Evidence received from Voices from Care Cymru

140 NSPCC Cymru & Voices from care Cymru (2019) [Listen. Act. Thrive.](#)

141 Care Inspectorate Wales (2019) [National Overview Report in relation to care experienced children and young people](#)

142 Evidence received from NYAS Cymru. See also W/Parliament(2018) CYPE Committee [Mind over Matter](#)

143 NYAS (2019) [Looked after Minds](#)

144 Evidence received from Tom Jones (Children's Rights and Participation Officer, Swansea)

145 Evidence from TGP Cymru

146 Evidence received from the Fostering Network Wales

that the child has an ongoing relationship with¹⁴⁷.

Q – Will the W/Government

- Enable all care-experienced children to maintain healthy relationships with those that most matter to them?

Kinship Care

Children in kinship care have commonly experienced early childhood adversity and similar pre-placement experiences to children in foster placements¹⁴⁸. Many have complex needs, long term health problems and disabilities¹⁴⁹. There are approximately 10,000 children living with a relative in kinship care arrangements in Wales, 95% of whom are there informally resulting in less support as many are not known to local authorities¹⁵⁰. Research shows that children experiencing multiple deprivations are 3 times more likely to be in kinship households compared to children not multiply deprived¹⁵¹. Research describes support offered to kinship carers as lacking and insufficient to meet their needs¹⁵².

Q – Will the W/Government

- Take steps to raise awareness of children in kinship care, ensuring there is parity to the targeted support that is offered to children in other care arrangements?

Transition from Care

Care-experienced children are exposed to processes of transition to adult life that are compressed and accelerated¹⁵³. They are disproportionately likely to experience homelessness, with 33% becoming homeless in the first two years after leaving care¹⁵⁴. Transitions from care should be seamless, rights-based and focus on housing stability¹⁵⁵. Care-experienced children should be adequately prepared with clear pathways into safe, stable and appropriate accommodation aligned to choice and needs; given appropriate and consistent advice and support, recognising that they may still need support once they have left¹⁵⁶. Sustainable funding should be secured for homeless prevention projects which have been robustly evaluated.

W/Government's When I Am Ready scheme¹⁵⁷ has great potential, but take up is low¹⁵⁸ and does not apply to children in residential settings. Concerns remain around the prevalence of children 16+ placed in unregulated semi-independent accommodation despite their vulnerability¹⁵⁹, and around progress to eliminate the use of B&Bs being slowed with increased pressure on local authorities post-lockdown¹⁶⁰.

147 See for example The Fostering Network [Keep Connected campaign](#) calling on governments to support fostered children to maintain their most important relationships.

148 Selwyn, J and Nandy, S., (2014) '[Kinship Care in the UK: Using Census Data to Estimate the Extent of Formal and Informal Care by Relatives](#)' Child and Family Social Work 19 44-54

149 Wiedasja, D. et al (2017) [Children Growing up in the Care of Relatives in the UK](#), Bristol: Hadley Centre for Adoption and Foster Care Studies.

150 Nandy, S. Selwyn, J. Farmer, E. and Vaisey, P. (2011) [Spotlight on Kinship Care: Using Census Microdata to Examine the Extent and Nature of Kinship Care in the UK at the Turn of the Twentieth Century](#), Bristol: The Hadley Centre and University of Bristol.

151 ibid

152 Wellard, S., Meakings, S., Farmer, E., & Hunt, J. (2017). [Growing Up in Kinship Care: Experiences as Adolescents and Outcomes in Young Adulthood](#). Grandparents Plus

153 See for example Children's Commissioner for Wales (2017) [Hidden Ambitions](#)

154 Stirling T, (2018) [Youth Homelessness and Care Leavers: mapping interventions in Wales](#)

155 Schwan K. et al. (2018) [Preventing Youth Homelessness; An International Evidence Review](#)

156 Evidence received from Llamau. See also End Youth Homelessness Cymru (2020) [Don't Let Me Fall through the Cracks](#)

157 [When I Am Ready](#) - this allows care-experienced children to remain with their foster family until the age of 21

158 Evidence received from Fostering Network - found that only 16 per cent (36 foster carers) of respondents to a survey had taken on a When I am Ready placement

159 BBC Wales (2019) <https://www.bbc.co.uk/news/uk-wales-50748323>

160 Evidence received from NSPCC Cymru

Q – Will the W/Government

- Promote the When I Am Ready scheme and enhance supported housing options for children leaving residential care arrangements?
- Eliminate the use of B&Bs and unregulated accommodation for children leaving care?

Young Carers

Young carers play a significant role in caring for family members, which puts added pressure on their education, health and social life. There are approximately 30,000 carers under the age of 25 in Wales¹⁶¹, though there is a lack of reliable data or tracking mechanisms. Many young carers remain hidden, do not get external recognition and their needs are not always assessed¹⁶² to then become eligible to receive respite support.

Restrictions from COVID-19 lockdown have exacerbated isolation and increased caring responsibilities, with many cut-off from extended family and support networks, as access to respite services were reduced. Many will have experienced family bereavement, trauma and faced competing demands during this period.

Education provision in schools varies widely¹⁶³. Early identification through a named teacher, can enable appropriate support to be put in place. We welcome renewed commitments in the proposed national Carers Plan including a national ID card scheme¹⁶⁴.

Q – Will the W/Government

- Promote the role of young carers, ensuring there is a named teacher in every school and that every child receives an annual health assessment and an ID card?

Disability, Basic Health and Welfare

Disabled Children

Disabled children are too often viewed through the lens of their disability, their additional needs or requirements, rather than as children with individual rights to access and enjoy the same pleasures and experiences as their peers. Many have faced particular challenges as a consequence of COVID-19 with disruption to their support, leading to feelings of isolation, difficulties with emotional wellbeing and educational development, as well as the impact of delayed diagnosis.

Whilst disabled children may technically be enabled to attend mainstream education, they are not always fully integrated into the whole school environment, with many barriers to inclusive education prevalent, including inaccessible physical spaces¹⁶⁵, and restrictions precluding participation in some lessons and opportunities. There is a lack of disability awareness and capacity building opportunities amongst school staff and pupils¹⁶⁶.

161 W/Government (2020) [Consultation for a National Plan for Carers in Wales](#)

162 Under the [Social Services & Well-Being Act](#) (2016) LA and LHBS must work in partnership to assess the needs of YCs and agree a support plan for them

163 Estyn (2019) [Provision for young carers in secondary schools, further education colleges and pupil referral units across Wales](#)

164 Welsh Government (2020) [Written Statement](#)

165 Children's Commissioner for Wales (2018) [Full Lives: Equal Access](#)

166 Whilst the forthcoming new curriculum emphasises the need to ensure children understand their rights and the rights of

Reform of education arrangements for children with Additional Learning Needs¹⁶⁷ are progressing and aspects of the reforms have been welcomed¹⁶⁸, yet children still face barriers when accessing appropriate and timely support.

Disabled children should be better supported to get their voices heard; have access to appropriately tailored advice and information, and be involved in all matters which affect them, including during periods of transition¹⁶⁹. Too often, they are not included in the planning of their medical care, their treatment or social care support. For children with complex disabilities and severe communication needs, there should be routine access to person-centred support services including specialist advocacy arrangements, to help them express choices and explore options.

For children with visual impairments, there is a severe shortage of specialist habilitation support services¹⁷⁰ despite legislation recognising their importance in enabling children to live as independently as possible¹⁷¹. Disabled children are also overrepresented in low-income families¹⁷², and face barriers when accessing transport, play and leisure opportunities.

Access to information for parents/carers on health¹⁷³ and education matters to help them support their children should be improved. Improvements to address delays in accessing services and physical equipment to enable disabled children to build independence, confidence and to fulfil their potential are required.

Q – Will the W/Government

- Support disabled children who have faced particular challenges due to COVID-19, including examining how risks around future impact of delayed diagnosis and reduced support can be mitigated?
- Ensure that education is fully inclusive; that teachers' skills and competencies to support disabled children are enhanced, and gaps and delays in accessing health & social care support services, including specialist provision, are addressed?
- Ensure effective implementation of ALN reforms, with investment, and that all children who have entitlement to an Individual Development Plan receive one?

Health Inequalities

The health of children is shaped by the conditions and circumstances in which they live. Despite a lack of disaggregated data to help identify particular groups of children who face poorer health outcomes, research shows a strong correlation between health inequalities and socio-economic disadvantage across a range of indicators, and the gap with peers is widening¹⁷⁴.

Infant mortality rates for children under 1 years have risen¹⁷⁵, with higher rates recorded in the most deprived

others, calls for disability awareness to form a compulsory part of RSE have been rejected - Evidence received following the workshop on Disabled Children led by National Deaf Children's Society Cymru. See also evidence received from Adele Rose emphasising the need for specialist training for teachers and the need for inclusive education

167 Welsh Government (2020) [Additional learning needs transformation programme](#). See also SNAP Cymru – [Individual Development Plan](#) (IDP)

168 National Deaf Children's Society Cymru (accessed 2020) [Additional Learning Needs](#)

169 Children's Commissioner for Wales (2018) [Don't hold back](#)

170 Evidence received from Guide Dogs Cymru who are calling for Habilitation services for children with Vision Impairment to be available in every local authority area in Wales

171 Part 2 (General Functions) of the [Social Services & Well-Being Act](#) (2016)

172 Joseph Rowntree Foundation (2020) [Poverty in Wales 2020](#)

173 For example, information on nutrition and breastfeeding for parents of disabled children

174 RCPCH Wales (2020) [State of Child Health](#)

175 [ONS](#) – in 2018, Infant mortality rates were 3.8 deaths per 1,000 live births in England and Wales compared with 3.9 the previous year but significantly above the lowest rate of 3.6 recorded in 2014.

areas¹⁷⁶. Child mortality rates are 70% higher amongst most than least deprived groups¹⁷⁷ and life expectancy rates are now declining¹⁷⁸.

Socio-economic deprivation is a predictor of childhood obesity, with the prevalence gap between most and least deprived areas increasing from 4.7% to 6.2%¹⁷⁹, as obesity rates at local levels reach 17.5%¹⁸⁰. 27.1% of children aged 4-5 in Wales are overweight or obese compared to 22.6% in England¹⁸¹. There is a strong correlation between socio-economic deprivation and higher dental decay¹⁸², smoking rates¹⁸³, lower fruit and vegetable consumption¹⁸⁴, sport participation¹⁸⁵ and increased exposure to air pollution¹⁸⁶.

Encouragingly, teenage conceptions have fallen sharply¹⁸⁷, relationship education is being reformed¹⁸⁸, innovative laws have extended smoking bans in cars, hospitals, school grounds and playgrounds¹⁸⁹, and further commitments to deliver safer environments for children have been published¹⁹⁰.

Early intervention, promoting healthy lifestyles and prevention of poor health amongst all children and parents, including within the first 1,000 days, require adequate levels of investment to support local partners to meet growing need. Individuals require better information to enhance understanding and help prevent and manage health conditions¹⁹¹. COVID-19 has brought this into sharp focus, exacerbating prevailing barriers to accessing primary care and specialist healthcare services, including palliative care¹⁹² and bereavement services.

Q – Will the W/Government

- Address the inequalities gap and improve access to primary care and specialist healthcare services for children?

Health research

Funding for child health research has been decreasing each year since 2011, with fewer mechanisms allowing children's views to be heard in the production of research for conditions that they are affected by¹⁹³. There is a lack of consultant academic paediatricians amongst the workforce.

Q. Will the W/Government

- Provide sufficient funds to support the development of paediatric research, and build sufficiency of the paediatric academic workforce?

176 [ONS](#) – in 2018, infant mortality rates were 5.7 deaths per 1,000 live births in the 10% most deprived areas in Wales

177 RCPCH Wales – [State of Child Health](#) Children aged 1-9 years

178 Chief Medical Officer for Wales (2019) [Valuing our health: Annual Report 2018/19](#)

179 Public Health Wales (2018) [Child Measurement Programme for Wales 2017/18](#) (amongst children aged 4-5)

180 *ibid*

181 *ibid*

182 Welsh Government (2017) [Taking Oral Health Improvement and Dental Services Forward in Wales](#)

183 Ash Cymru/Wales (accessed 2020) <https://ash.wales/wales-smoking-statistics/>

184 Hewitt G., Anthony R., Moore G., Melendez-Torres G.J., Murphy S. (2019) [Student Health and Wellbeing In Wales: Report of the 2017/18 Health Behaviour in School-aged Children Survey and School Health Research Network Student Health and Wellbeing Survey](#). Cardiff University, Cardiff.

185 Sport Wales (2018) [School sport survey 2018: state of the nation](#)

186 Welsh Government (2020) [Clean Air Plan for Wales](#)

187 ONS (2018) [Conceptions in England and Wales](#) and RCPCH Wales (2020) [State of Child Health](#)

188 See Section on Education

189 Welsh Government (2020) Written Statement - Existing Smoke free restrictions will be extended to hospital grounds, public playgrounds, outdoor children's care settings and school grounds from 1st March 2021 under existing legislation.

190 See for example. Welsh Government (2019) '[Healthy Weight, Healthy Wales](#)' guidance

191 See for example, Welsh Government (2019) [A Healthier Wales](#)

192 W/Government should implement recommendations from the [Cross Party Group on Hospices and Palliative Care 2018 Inquiry 'Inequalities in access to hospice and palliative care'](#), which relate to paediatric palliative care services.

Recommendations include: access to out-of-hours services and increased resourcing of community nursing. See also more detailed evidence received from Lynette Thacker (Clinical Nurse Specialist Paediatric Palliative Care)

193 Evidence received from Noah's Ark Children's Hospital for Wales

Breastfeeding

Breastfeeding is important for the health and development of infants, and preventing health inequalities. Whilst over 60% of women intend to breastfeed, this figure falls to 26% reporting breastfeeding at 6 weeks, with considerable variation in rates across Wales¹⁹⁴. Despite a 5-year plan¹⁹⁵ recommending that systems are established to routinely collect, analyse and disseminate infant feeding data, data collection remains incomplete and patchy¹⁹⁶.

Some progress has been made to regulate the marketing of breast-milk substitutes¹⁹⁷, however no regulations to prevent marketing of follow-on formula, milks marketed for children over one, or bottles/teats have been enacted¹⁹⁸. In terms of Baby Friendly Accreditation in hospitals, maternity, neo-natal and health visiting services, 78% of babies are born in baby friendly accredited units in Wales¹⁹⁹. However, no government mandate for all units to gain accreditation exists²⁰⁰.

Q – Will the W/Government

- Take steps to deliver, resource, monitor and evaluate its national plan, embedding whole system approach to promoting and supporting breastfeeding?

Mental Health

A landmark report²⁰¹ called for a step change in emotional and mental health support and services for children, recognising that many struggle to access support at an early stage to prevent problems emerging, and specialist services later on to prevent needs escalating. Whilst some progress is being made, the pace of change is too slow²⁰², and the impact of COVID-19²⁰³ has served to exacerbate existing barriers and predicted to increase need²⁰⁴, disproportionately effecting those most vulnerable²⁰⁵ and with pre-existing difficulties²⁰⁶.

Three children in every classroom has a diagnosable mental health condition, and half of all mental health problems are established by the age of 14, with levels of stress, anxiety and self-harm rising²⁰⁷, with some disadvantaged groups facing particular challenges²⁰⁸. Suicide as a leading cause of death amongst children 15+ is also increasing²⁰⁹.

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- 194 Eida, T.J. & Kendall, S. (2019) [Becoming Breastfeeding Friendly in Wales: Context, findings and recommendations](#)
- 195 Welsh Government (2019) [All Wales Breastfeeding Five Year Action Plan](#)
- 196 Data on breastfeeding initiation and prevalence is collected by each Health Board at birth and 10 – 14 days, but later data at 6 – 8 weeks and 6 months is not routinely collected
- 197 The UK has partially adopted the International Code of Marketing of Breast-Milk Substitutes and relevant resolutions of the World Health Organisation, to prevent marketing of infant formula and infant milks marketed as foods for special medical purposes.
- 198 Guide to UK formula marketing rules <http://www.babymilkaction.org/ukrules-pt1>
- 199 [Baby Friendly Accreditation Wales](#) (accessed 2020)
- 200 [World Breastfeeding Trends Initiative UK Report](#) (2016)
- 201 W/Parliament(2018) CYPE Committee [Mind over Matter](#)
- 202 W/Parliament(2020) CYPE Committee [Mind over Matter two years on](#)
- 203 See W/Government (2020) [Review of the impact of mass disruption on the wellbeing and mental health of children and young people](#)
- 204 Whilst it is too early for official data to show the full impact of the pandemic on children's mental health, many reports and articles are drawing attention to immediate concerns. See for example - <https://www.bbc.co.uk/news/uk-wales-politics-54470934> Barnardo's (2020) [In our own words](#)
- 205 Barnardo's (2020) [In our own words](#)
- 206 Young Minds (2020) [Coronavirus: Impact on young people with mental health needs](#)
- 207 W/Parliament(2018) CYPE Committee [Mind over Matter](#)
- 208 Evidence received from Place2Be
- 209 Public Health Wales (2019) [Child Death Review programme](#) and ONS (2020) [Suicides in England and Wales: 2019 registrations](#)

Whilst we welcome W/Government's progress in delivering a whole school approach²¹⁰ by promoting emotionally resilient children, good mental health and providing timely and appropriate support at the point of need, more must be done to achieve consistency.

Early identification and intervention is pivotal in the prevention of long-term mental health conditions²¹¹. As mental health difficulties severely impede development and access/engagement with learning, it is essential that provision exists to enable children to process and get support with difficulties at the earliest opportunity. Where trauma has occurred, all children have the right to receive both universal and targeted mental health support to aid recovery and help avoid crisis intervention. Universal provision is essential as this helps reduce fear and stigma²¹², making it part of everyday conversations²¹³ which help build resilience.

Too many children experience fragmented pathways²¹⁴, inadequate responses and delays, and often have to reach crisis point before they can access support²¹⁵. Access to child-centred, holistic counselling and mental health support across a child's time throughout education is needed²¹⁶. Schools should be positioned as community hubs with integrated non-medicalised multi-agency collaborative practices to help prevent and manage mental distress amongst children and their parents/carers²¹⁷, including through drop-in services²¹⁸. Routine cross-sector training should be prioritised and resourced, to improve awareness, communication and aid signposting²¹⁹.

For children with more acute needs, priority should be given to building CAMHS capacity²²⁰, improving access, waiting times and periods between assessment and treatment²²¹, as well as enhance²²² and monitor transitions to adult services²²³. This should coincide with increasing child-led therapeutic approaches for those children - the 'Missing Middle' - who do not meet CAMHS eligibility thresholds yet require therapeutic support²²⁴. There is a lack of 'intermediate' service options, as children fall between different levels of support as need deepens, with calls for a single point of access to be urgently established to enhance care pathways²²⁵.

The two inpatient units in Wales have limited capacity, leading to some children being admitted to hospitals far from home.

Q – Will the W/Government

- Invest in timely, appropriate and universally accessible early intervention support for all children, alongside integrated multi-agency community based support services for the 'missing middle'?

210 W/Government (2020) [Embedding a whole-school approach to mental health and well-being](#)

211 Evidence received from Place2Be

212 Time to Change Wales (2018) [Myths and Facts](#)

213 Welsh Youth Parliament (2020) [Let's Talk about Mental Health](#)

214 Evidence received from ProMo Cymru

215 Barnardo's (2020) [In our own words](#)

216 Statutory school base independent counselling services have been a significant benefit to children, but are often overwhelmed and should be made available to younger school aged children (see evidence submitted to the W/Parliament (2018) CYPE Committee [Mind over Matter](#))

217 Integrated approach should involve, for example children's social services, family support, children's voluntary sector, helplines, youth work sector as equal partners to support schools and health practitioners in delivering the whole systems approach.

218 Children's Commissioner for Wales (2018) position paper: [Children's Mental Health Services in Wales](#)

219 This should include initial teacher education see Estyn (2019) [Healthy and happy – school impact on pupil's health and wellbeing](#)

220 Including out-of-hours crisis care and support. See also points raised in evidence received from Hafal

221 80% of patients should wait no longer than 28 days from referral to assessment, yet this does not take into account the length of time a child has to wait for treatment or the quality of outcome.

222 Hafal et al (2016) [Making Sense: A Report by young people on their Wellbeing and Mental Health](#)

223 Many young people are automatically transitioned at 18 when they are particularly vulnerable. Welsh Government have issued [draft transition guidance](#) for all health services

224 Latest figures show that 68% of referrals to CAMHS were accepted, yet almost 1/3 were not

225 W/Parliament(2020) CYPE Committee [Mind over Matter two years on](#)

- Provide a well-resourced specialist CAMHS, accessible at the point of need, with greater accountability and performance, including through improved data collection?
- Ensure that there are enough spaces in specialist hospitals, close to the child's home, and to develop suitable community alternatives?

Standard of Living

Child Poverty

Children have a right to an adequate standard of living, yet rights are being denied to around 180,000 children trapped in poverty. Child poverty rates have remained persistently high and static, with pre-COVID-19 data indicating that 28% of children live in poverty²²⁶, with rates considerable higher in many local areas²²⁷. Children are more likely to be in relative income poverty compared to most other groups, disproportionately affecting those living in lone parent and larger families; some BAME families, workless households and in households with a disabled adult or child²²⁸.

Children in poor families are now on average living further below the poverty line than they were five years ago, experiencing greater hardship and poorer outcomes across a range of indicators²²⁹. Material deprivation is affecting a significant proportion of children, with around 11% of children experiencing combined low-income and material deprivation²³⁰, and 17% of children in single parent households materially deprived²³¹. A child has a 19% chance of being in persistent poverty²³², which increases the risk of poorer outcomes at the end of childhood.

Many situations have worsened as a result of the economic impact of COVID-19²³³. Families previously struggling have experienced declines in incomes through job losses and temporary/permanent reductions in working hours, coinciding with increased living costs due to lengthy periods at home. Research has found that 7 out of 10 families receiving welfare support cutback on essentials such as food, utilities, baby items and activities for children as a result of the pandemic²³⁴. Welfare reform, food poverty, debt, transport costs, employment barriers and unaffordable housing costs are obstacles consistently presented by low-income families²³⁵.

Work reduces the risk of poverty, yet 2/3 of children living in poverty live in households where at least one person is working, with low pay, insecure employment and high housing rental costs amongst the factors pushing working families into poverty²³⁶. Families often face additional barriers to earning a decent income, including difficulties accessing or affording childcare arrangements²³⁷. Parents in part-time work earn less by virtue of working fewer hours, but, importantly, part-time employees also earn less per-hour than those in full-time roles²³⁸. Employment levels have also fallen disproportionately in Wales compared with other parts of the UK as a consequence of COVID-19²³⁹.

226 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 \(3 year averages of financial years\)](#)

227 ECP (2020) [Local child poverty indicators 2018/19](#)

228 Joseph Rowntree Foundation (2020) [Poverty in Wales 2020](#)

229 Child Poverty Action Group (2020) [Dragged Deeper: how families are falling further and further below the poverty line](#)

230 Stats Wales (2019) [Material Deprivation headline figures](#)

231 Welsh Government (2019) [National Survey for Wales 2017-18: Poverty and deprivation](#)

232 DWP (2020) [Income Dynamics: Income Movements and the Persistence of Low-incomes](#)

233 Bevan Foundation (2020) [Reducing the impact of Coronavirus on Poverty in Wales](#)

234 Joseph Rowntree Foundation & Save the Children (2020) [A lifeline for our children: Strengthening the social security system for families with children during this pandemic](#)

235 Children in Wales (2020) [Child and Family Poverty in Wales Report on the Child and Family Survey 2019](#)

236 Stats Wales (2020) [Children in relative income poverty by economic status of household](#)

237 Chwarae Teg & Bevan Foundation (2019), [Trapped: Poverty amongst women in Wales today](#)

238 ibid

239 BBC News Wales (2020) [Unemployment: Wales sees largest rise rate across UK](#)

The W/Government published its statutory Child Poverty Strategy in 2010 which is now in urgent need of revision²⁴⁰. This should be actioned without delay, supported by ambitious milestones and targets aligned to the Sustainable Development Goals. Steps should be taken to focus on poverty prevention by reducing household expenditure, ideally through interventions based on the principle of universality. With over 60,000 families on the social housing waiting list²⁴¹, greater urgency is required to meet affordable housing targets²⁴².

Welfare

The UK social security system does not provide families with an adequate safety net, having been systematically dismantled through policies pursued which violate human rights²⁴³. Despite some positive yet temporary uplift of certain benefits introduced as a result of COVID-19, fundamental problems persist, notably concerning delayed payments, sanctions, the benefit cap and two-child limit²⁴⁴ which serves to increase financial hardship by restricting the amount of benefits low-income families can receive²⁴⁵, irrespective of need.

Whilst the administration of welfare is determined by the UK/Government, there are some important shortcomings with the approach taken in Wales to financially support low-income families. Despite a plethora of targeted schemes, there are significant variations in eligibility criteria; different application processes requiring multiple submissions, and insufficient levels of assistance to make a real difference²⁴⁶. Momentum is building for Wales to establish a Welsh Benefit System as a single point of access, with a consistent and expanded eligibility criterion based around entitlement not discretion²⁴⁷.

Q - Will the W/Government

- Publish a revised Child Poverty Strategy with Delivery Plan, with ambitious milestones, targets and monitoring arrangements?
- Establish a Welsh Benefit System, as a single point of access for assistance?
- Call upon the UK/Government to abolish the two-child limit and benefit cap, and retain the temporary uplift of Universal Credit?

Food Poverty

Every child has a right to food, yet children are going hungry and parents are going without²⁴⁸ due to inadequate incomes. Research highlights that 160,000 children in poverty live in households that can't afford the cost of a healthy diet²⁴⁹, impacting on their health, development and educational outcomes. Prior to COVID-19, a record number of referrals were received by foodbanks, with over 51,000 emergency food parcels for children distributed²⁵⁰. An average of 2,600 parcels have been distributed to children in the UK each day since the pandemic hit, with demand predicted to continue²⁵¹.

Whilst we applaud the steps taken by W/Governments to provide Free School Meals (FSMs) for eligible

240 End Child Poverty Network Cymru (2019) [Renewed Calls for a Child Poverty Delivery Plan](#)

241 BBC News Wales (2018) [‘Housing “Crisis”: Shelter Cymru urges investment’](#)

242 Welsh Government (2017) [Taking Wales Forward 2016-21](#)

243 Human Rights Council (2019) [Report of the Special Rapporteur on Extreme Poverty and Human Rights](#).

244 The 2 child limit restricts support through tax credits and universal credit to the first two children in a family. 911, 000 children live in affected households and almost 3 in 5 households have adults working (UK data). See Child Poverty Action Group (2020) [The Two-Child Limit Now Affects almost 1 million children](#)

245 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 [see [DWP/HMRC \(2020\) Child Tax Credit and Universal Credit: statistics related to the policy to provide support for a maximum of 2 children](#)]. 3580 families were having their benefits capped in May 2020, a rise of 58% between February and May of this year [see [DWP \(2020\) Benefit cap: number of households capped to May 2020](#)]

246 Evidence received from Bevan Foundation

247 Joseph Rowntree Foundation (2020) [Poverty in Wales 2020](#) and W/Parliament (2019) ELGC Committee -[Benefits in Wales: Options for Better Delivery](#)

248 Children in Wales (2020) [COVID-19 and the impact on low-income and disadvantaged families](#)

249 Evidence received from Food Sense Wales referencing research undertaken by the Food Foundation

250 Trussel Trust (2020) [End of Year stats](#)

251 Trussel Trust (2020) [Mid-Year stats](#)

children during school holidays²⁵² to help mitigate financial hardship, fundamental shortcomings with the system remain.

The FSM allowance scheme is operated in Wales, and remains a highly valued component in the drive to tackle hunger and help children access a nutritious meal. Nevertheless, the income threshold criteria²⁵³ restricts eligibility and take up, with over 50% of children living in poverty not entitled to receive free school meals because they are not seen as sufficiently poor²⁵⁴. The allowance is also insufficient to cover the full cost of a healthy meal, leading to some children going hungry or choosing food of low nutritional value²⁵⁵. Overall, FSM entitlement is more restrictive in Wales compared to other UK nations²⁵⁶.

The W/Government has introduced the School Holiday Enrichment Programme, yet the numbers of children reached are relatively small and significant investment is urgently needed to increase capacity. The Free Breakfast Scheme, whilst enabling some children to access a healthy start to the school day, is neither accessed by nor available to all children in low-income households.²⁵⁷

Q – Will the W/Government

- Increase eligibility for FSMs and Healthy Start Vouchers to all children whose parents are in receipt of Universal Credit; adopt auto enrolment across all local authorities and work towards universal entitlement?
- Embed a system where families are provided with cash in lieu of FSMs over the school holidays?
- Expand the school holiday enrichment programme geographically and across all holidays to support children to recover from the educational loss?

Education, Leisure and Cultural Activities

Education

Children have missed a significant portion of the school year, with disadvantaged and vulnerable children missing the most²⁵⁸. Whilst many have been able to undertake some school work through home-school learning opportunities, many have faced multiple barriers²⁵⁹. The full effect on children, particularly those at critical stages in their education, may not be known for some time, and more data will need to be gathered²⁶⁰. As children return to school environments, additional resources and services are needed to support children to safely transition²⁶¹.

252 Welsh Government (2020) [Marcus Rashford MBE backs Welsh Government decision to ensure free school meal provisions for every school holiday until Easter 2021](#)

253 Since 2018, households receiving Universal Credit are only be eligible for free school meals if their family income is below £7,400 (before benefits are taken into account)

254 Child Poverty Action Group (2020) [Expanding Eligibility for Free Schools Meals in Wales](#)

255 Food Foundation (2019) [Report of the Children's Future Food Inquiry](#)

256 Although the eligibility threshold in Wales is the same as for England and Scotland, those countries provide universal free provision for all children in the first 3 years of their education. Northern Ireland has a higher eligibility threshold of £14,000

257 Welsh Government (2020) [Free School Breakfast statistics](#)

258 Education Policy Institute (2020) [School attendance rates across the UK since full reopening](#)

259 EHRC (2020) [How coronavirus has affected equality and human rights](#)

260 Evidence received from Clybiau Plant Cymru Kids'Clubs

261 For example, nurture groups, counselling, support for children with Additional Learning Needs - Evidence received from Leader of Children's Rights, YGG Llwynderw

The W/Government are implementing a distinct curriculum framework for 3-16 year olds²⁶², introducing new assessment and qualification arrangements, designed to raise standards, tackle the attainment gap²⁶³, with greater emphasis on pupil wellbeing and pedagogy.

Positively, Relationship and Sexuality Education (RSE) is being reformed, becoming mandatory for all pupils from 2022, to help promote positive healthy relationships and contribute towards preventing gender-based violence. However, Menstrual Wellbeing Education will not be made compulsory, risking exacerbating inequalities by denying some children an opportunity to gain knowledge to enable self-advocacy, and enhance health and education outcomes²⁶⁴.

There has been no progress to repeal legal provisions for compulsory attendance at collective worship in schools as children continue to be denied the right to independently withdraw²⁶⁵. Reform of Religious Education has however been broadly welcomed.

Whilst the new curriculum proposes to make Human Rights Education mandatory in all schools, calls to place a 'due regard' duty to the CRC on the face of draft legislation have yet to be accepted²⁶⁶.

There is a need to enhance the advocacy offer for children in education settings to prevent problems arising or escalating²⁶⁷.

Q - Will the W/Government

- Ensure that RSE reform delivers positive outcomes for all children in all schools, and effective monitoring arrangements are in place?
- Repeal legal provisions for compulsory attendance at collective worship?
- Place a 'due regard' duty to the CRC on the face of the Curriculum and Assessment (Wales) Bill?
- Make menstrual well-being education a compulsory element of the new curriculum?
- Enhance the advocacy offer for children in education settings?

Education Attainment

Socio-economic background continues to have an impact on attainment levels²⁶⁸, with children in low-income households underperforming when compared with children from more affluent families²⁶⁹. Data shows that whilst the gap over time has narrowed between poorer children and their peers' at most key stages, the gap amongst 14-15 year olds has widened²⁷⁰. Boys, children with additional learning needs, care-experienced children and some children with protected characteristics generally achieve lower attainment levels than their peers²⁷¹. Based on international measures, attainment levels amongst children in Wales remain lower than other UK nations²⁷².

262 The new [national curriculum](#) will be based around 6 'Areas of learning and experience' (AoLE) rather than subjects

263 Curriculum and Assessment (Wales) Bill [summary](#)

264 Evidence received from Fair Treatment for the Women of Wales. Menstrual Wellbeing Education has been compulsory in England since September 2020. Points stressing the importance of Menstrual Health in the curriculum see Brook (2020) [Evidence to W/Parliament CYPE Committee inquiry into Curriculum and Assessment \(Wales\) Bill](#)

265 Evidence received from Wales Humanists

266 See for example written evidence from Children in Wales (2020) [W/Parliament CYPE Committee Curriculum and Assessment \(Wales\) Bill](#)

267 Nason, S. & Sherlock, A. et al. (2020) [Public Administration and a Just Wales](#)

268 Statistics (2019) [Achievement and entitlement to free school meals: 2019](#)

269 Evidence received from Save the Children shows that by age 5, around a third of children in poverty had fallen behind across a range of cognitive outcomes compared to a fifth of those from better off families

270 Statistics (2020) [Examination results: September 2019 to August 2020 \(provisional\)](#)

271 Statistics (2019) [Academic achievement by pupil characteristics: 2018](#) and Statistics (2020) [Wales Children Receiving Care and Support Census: as at 31 March 2019](#)

272 Wales Online (2019) [New international PISA schools tables show Wales remains behind other UK nations but is improving](#)

Q – Will the W/Government

- Address the attainment gaps in relation to socio-economic disadvantage and protected characteristics, in line with responsibilities prescribed by the Public Sector Equality Duty?

Access to Education: Digital Learning Inequalities

Statistics have highlighted the relationship between digital access and education performance²⁷³. As part of the inequity exposed by COVID-19, digital exclusion has been striking, due to the impact such exclusion has on the propensity for children to undertake distance learning. In spite of the W/Government's response being described as commendable²⁷⁴, many children in low-income families lack essential resources to complete school work²⁷⁵. This inequity has been impacting on children for many years as the W/Government's learning platform for schools (Hwb), has been a core part of school work²⁷⁶. As digital competency is poised to become a core part of the new curriculum, facilitating access to equipment for all children alongside enhancing existing connectivity, should be the priority in addressing the digital divide. Additional support is needed to help children, notably the most disadvantaged²⁷⁷, to undertake online learning, especially as COVID-19 outbreaks in schools continue to disrupt attendance and learning.

Q – Will the W/Government

- Secure safe digital connections for all children to enable them to continue their learning whilst at home; assessing measures recently taken with a view to making such measures permanent?

Post 16 Education

Data highlights a growing number of 16-18 year olds unemployed²⁷⁸ with the impact of COVID-19 expected to exacerbate existing barriers. Additional funding to support children from low-income families to maintain attendance in mainstream education is required²⁷⁹, along with an improved emphasis on achieving sustainable transitions into post-16 education, training and employment.

Q – Will the W/Government

- Increase the monetary value of the Education Maintenance Allowance to support children from low-income households to remain in education?

Schools Exclusions

Figures show a continued increase over 4 years, with 35 fixed term exclusion for every 1,000 pupils, and an overrepresentation of children from poorer backgrounds, pupils with ALNs, some protected characteristic groups and amongst white pupils²⁸⁰. The rate of permanent exclusions doubled between 2014/15 and 2017/18²⁸¹.

273 Statistics for Wales (2019) [National Survey for Wales, 2018-19 Internet use and digital skills](#)

274 Education Policy Institute (2020) [Education policy responses across the UK to the pandemic](#)

275 EHRC (2020) [How coronavirus has affected equality and human rights](#)

276 Evidence received from Barnardo's Cymru

277 W/Government (2020) [Education and Childcare: Coronavirus](#)

278 Careers Wales 5 Tier data 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

279 Evidence received from Llamau, See also Bevan Foundation (2020) [Learning a living, better support for post-16 learners.](#)– The value of the Education Maintenance Allowance (EMA) for example, has remained unchanged since 2004/5

280 W/Government (2019) [Permanent and fixed term exclusions from schools in Wales 2017-18](#)

281 ibid

There are currently 2,286 pupils who are in alternative arrangements to school, representing 3.8 per 1,000 pupils²⁸².

Q – Will the W/Government

- Take steps to reduce the high exclusion rates, including for those children with protected characteristics?

Play and Leisure

Wales became the first country in the world to legislate for play in 2010. Since 2014, local authorities are required to assess and secure sufficient play opportunities for children in their area²⁸³.

Annual analysis of local authority plans to deliver the duty has shown good progress in securing sufficiency of play²⁸⁴ in line with statutory guidance²⁸⁵. Yet, despite recognition of the value of play and the immediate and deferred benefits that playing brings, services for children remain vulnerable to budget cuts, with CSOs reporting that access to funding has reduced significantly. Financial austerity has hit local playwork provision hard, with a reduction of local staffed play development capacity as a result²⁸⁶.

COVID-19 has served to heighten pre-existing barriers for children's play. At a time of enormous stress, uncertainty and trauma²⁸⁷ when playing is of particular therapeutic value, opportunities to play and socialise have been diminished as movement and contact is controlled²⁸⁸. Access to outdoor spaces had been restricted, and many schools reduced play spaces during free time²⁸⁹. The inequalities of play for BAME children and children living in deprived areas, were also exposed during lockdown²⁹⁰. The recent announcement of a Play Opportunity Grant²⁹¹ to improve outdoor playing opportunities and a Playworks Project focused on the well-being aspect of play for children in vulnerable communities has been welcomed.

Prior to COVID-19, research reported that although overall children were satisfied with their play opportunities, many barriers existed, including from parents' well-meaning worries for their safety²⁹². Positive steps are being taken to promote active travel and implement traffic management systems in residential areas²⁹³ which, if uniformly applied, will support children's freedom to play outside in a safer, cleaner environment, and this ambition should be accelerated.

CSOs have reported parental concerns about the shortening of school days, resulting in reduced playtime, and its withdrawal as part of behaviour management policy²⁹⁴, in spite of the education inspectorate

282 Section 19(1) of the Education Act 1996 (the 1996 Act) gives local authorities the power to make: arrangements for the provision of suitable education at school or otherwise than at school [EOTAS] for those children of compulsory school age who, by reason of illness, exclusion from school or otherwise, may not for any period receive suitable education unless such arrangements are made for them. See W/Parliament [Briefing Paper](#)

283 Section 11 of the [Children and Families \(Wales\) Measure 2010](#) places a duty on local authorities to assess (since 2012) and secure (since 2014) sufficient play opportunities for children in their area.

284 Russell, W., Barclay, M., Derry, C. and Tawil, B. (2019) [Children's Right to Play in Wales: Six years of stories and change since the commencement of the Welsh Play Sufficiency Duty](#). Play Wales. See also evidence from a local authority parks service

285 W/Government A Play Friendly Country <https://gov.wales/wales-play-friendly-country>

286 Evidence from workshop session on Play

287 Evidence received from Play Wales

288 See for example, evidence received from Natural Resources Wales in respect of opportunities to play and learn outside in nature.

289 For example, through the length of playtime being reduced, and reduced space to play

290 Children's Commissioner for Wales (2020) [Coronavirus and Me: Experiences of children from Black, Asian and minority ethnic groups](#) in Wales and HAPPEN (2020) [HAPPEN at Home survey](#)

291 The All Wales Play Opportunity Grant (AWPOG) includes capital funding for local authorities to improve outdoor playing opportunities for children and revenue funding for a Playworks Project based on the successful Holiday Hunger Playworks Project which was piloted during school holiday in 2019-2020

292 Dallimore, D. (2019) 'I learn new things and climb trees' – [What children say about play in Wales](#).

293 For example, the W/Parliament (2020) decision to initially back plans to make 20mph speed limits the default in residential areas in Wales

294 Evidence received from Play Wales

stressing the importance of play to develop healthy and confident children²⁹⁵. Attention should be given to developing extended use of school grounds outside teaching hours, as supported by national guidance²⁹⁶ and reclaiming community spaces²⁹⁷.

The W/Government Ministerial Play Review, offers an opportunity to evaluate progress and ensure sufficiency of play opportunities for all children including adolescents. The involvement of children in this review is particularly welcome, given the importance they place on play and free-time outdoors²⁹⁸.

Q – Will the W/Government

- Take steps to improve well-being in schools by ensuring that the right to play is embedded in the new curriculum; that adequate breaks for play are mandatory, subject to inspection, and school outdoor spaces are available for playing when the teaching day ends?
- Ensure that adequate and sustainable funding is provided to support community-based playwork provision; extend the Playworks Project and support initiatives which enable children of all ages to freely and safely play in the community?

Special Protection Measures

Asylum Seekers, Refugees and Migrant Children

Children seeking asylum, especially those unaccompanied and separated (UASC), are extremely vulnerable, often at risk of exploitation, abuse, gender-based violence and trafficking. Many have experienced trauma and will require additional support on arrival in Wales. The majority of UASC arrive in Wales spontaneously, and precise figures are difficult to obtain.

The UK/Government is responsible for asylum policy and immigration²⁹⁹ and the W/Government has been a vocal critic of their decision to close the ‘Dubs Scheme’.

We welcome the commitment to make Wales a nation of sanctuary and the emphasis placed on valuing the assets migrants bring and their role in contributing to diversifying our communities.

W/Government can take steps to reduce inequalities, and provide both mainstream and culturally appropriate services to improve the education, health and social outcomes for children³⁰⁰. Yet, repeated calls to establish a Guardianship Service to provide wraparound legal advice and support for UASC³⁰¹, to complement existing advocacy arrangements³⁰² have not been met.

Calls have been made to address delays in age-assessment decisions, increase the number of suitable placements and housing options to provide stability and choice.

295 Estyn (2019) [Healthy and happy – school impact on pupils’ health and wellbeing](#) See also Play Wales (2019) [A play friendly school – Guidance for a whole school approach which provides policy and practice related information to help communities take a whole school approach to children’s right to play](#).

296 W/Government (2014) [Wales – a Play Friendly Country](#). See also Play Wales (2015) [Use of school grounds for playing out of teaching hours toolkit](#)

297 Evidence received from Clybiau Plant Cymru Kids’ Clubs

298 Children’s Commissioner for Wales (2018) [Spotlight Report Article 31](#)

299 This includes asylum application decisions, benefit support, legal aid, operation of resettlement schemes and provision & standard of accommodation and housing support

300 As set out in the UN endorsed W/Government (2019) [Refugee and Asylum Seeker Action Plan Nation of Sanctuary – Refugee and Asylum Seeking Plan](#) (add ref)

301 W/Parliament (2017) ELGC Committee report [I used to be someone](#) & evidence received from TGP Cymru

302 NYAS Cymru (2020) [Place of Safety? New ways to protect, support, empower and safeguard UASC in Wales](#)

Q – Will the W/Government

- Establish a system of legal guardianship to support children through the asylum process; expand and adequately resource specialist advocacy support for UASC?

Youth Justice (YJ)

The age of criminal responsibility is a reserved matter for the UK/Government, who continue to resist calls to raise it. At 10 years of age³⁰³, Wales and England have the lowest rates in the European Union³⁰⁴ which has been criticised³⁰⁵. Despite restrictions on Wales' ability to autonomously pass legislation in this regard, the W/Government initiated 'Commission on Justice in Wales' recommended that the age of criminal responsibility be raised³⁰⁶. If YJ policy were devolved to Wales, as recommended, there may be potential to progressively make amendments on its own terms³⁰⁷.

The provision of mental health and therapeutic support for children in custody are devolved matters. The recent HMIP unannounced inspection of HMYOI Parc identified that adolescent mental health services were not delivering interventions in line with national standards³⁰⁸. This should be urgently addressed, requiring greater join up between health and justice, particularly for children experiencing trauma-related difficulties.

Preventing children from entering the youth justice system is the cornerstone of a rights-based approach, with the recent YJ Blueprint for Wales prescribing a 'children first' approach to diversion from the criminal justice system³⁰⁹. The number of children in custody has decreased in part due to the focus on prevention and trauma-informed practice³¹⁰, and maximising opportunities for pre-court diversion.

Detention should always be used as a measure of last resort for any child, with distinct child-centred therapeutic environments for the minority who do need to be detained. There is an over representation of care-experienced children in the YJS³¹¹ and there are no facilities in Wales for girls who are held in institutions in England.

Police custody is not an appropriate place for children to be detained, with some children held overnight where local authority accommodation should be secured³¹².

Q – Will the W/Government

- Call upon the UK/Government to significantly increase the age of criminal responsibility³¹³?
- Ensure services that support emotional and mental wellbeing are available to every child in the YJS?
- Ensure there is sufficient local authority accommodation so that no child spends the night in police custody?

303 10 years of age is four years beneath the recommended age outlined in UN [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

304 [Independent](#) (2019) - along with England and Northern Ireland

305 [Council of Europe](#) (2020)

306 The Commission on Justice in Wales (2019). [Justice in Wales for the People of Wales](#)

307 Evidence received from UNICEF UK

308 HM Chief Inspector of Prisons (2019) [HMYOI Parc](#)

309 Youth Justice Blueprint for Wales - [Implementation plan](#) (2019)

310 Policy is focused on minimising the impact of adverse childhood experiences – those with four or more ACEs are 15 times more likely to commit violence and 20 times more likely to be imprisoned (ibid)

311 Evidence received from YJB

312 See for example BBC Wales (2019) <https://www.bbc.co.uk/news/uk-wales-48776513>

313 The UN General Comment No 24 calls upon state parties to 'increase their minimum age accordingly, to at least 14 years of age'