

**Essex**

**Joint Strategic Needs Analysis**

**Children's Chapter**

**March 2009**

Children are particularly vulnerable to social and environmental conditions within the household and wider community. Disadvantage in childhood compounds problems experienced in later life; healthy children are vital to the future health and productivity of society as a whole. Tackling inequalities and eliminating child poverty are thus major national priorities requiring multi-agency action locally.

The Children Act 2004 places a duty on county councils and unitary authorities to work in partnership with a range of specified agencies to deliver a co-ordinated service for children and young people. In itself this poses challenges for the three authorities in Essex with the list of statutory partners including three foundation NHS trusts, two acute NHS trusts, five primary care trusts, two mental health partnerships, Police, Fire Service, Learning and Skills Council, 12 borough/district councils and the voluntary sector. In addition there are some 571 schools working together through 25 school networks in ECC areas plus 54 in Southend and 55 in Thurrock. Essex is a large and diverse with very rural parts in the north of the county bordering Cambridgeshire and Suffolk and very urban parts towards the London border.

This chapter looks at the needs of children and young people within the *Every Child Matters* five priority outcome areas:

1. Be healthy
2. Stay safe
3. Enjoy and achieve
4. Make a positive contribution
5. Achieve economic well-being.

The analysis looks at where Essex, Southend and Thurrock are under performing against comparators and where the authorities are performing well, based on the information available for this Joint Strategic Needs Assessment. The data presented in this chapter cover different periods of time, but are the latest available. The data are presented by district/unitary authority where possible, but this may mask differences and inequalities within an individual area: this chapter should act as a starting point for further investigation at a lower level than district/unitary authority.

Comparisons between Essex, Southend and Thurrock local authority areas must also be treated with caution, due to the impact of the different demographic profiles of the three areas upon the incidence of poverty and health inequalities.

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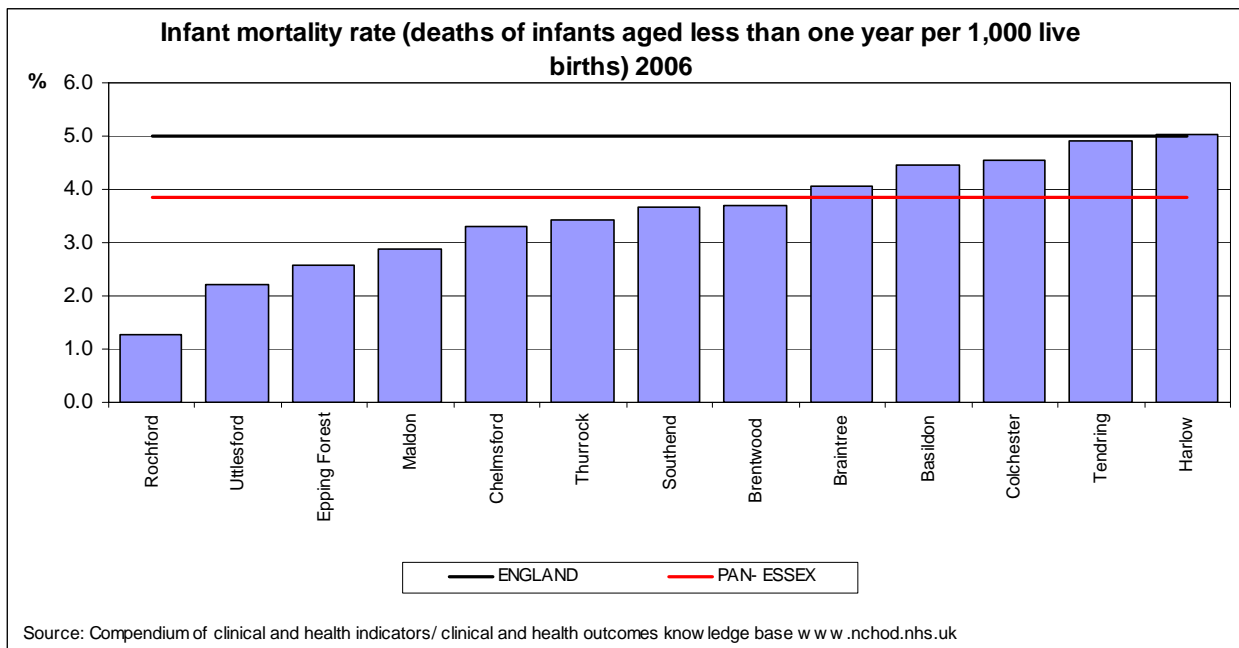
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# 1. BEING HEALTHY

## Overall child health

The factors that affect children's health generally are social disadvantage, poverty and poor access to education and other services. Children from poorer backgrounds suffer higher rates of accidental injury, infections, failure to thrive, general ill health, anaemia, dental caries and teenage pregnancy. In addition, poorer families are less likely to have access to, and make appropriate use of, health services than those from more advantaged circumstances, and they are less likely to benefit from health promotion services and advice.

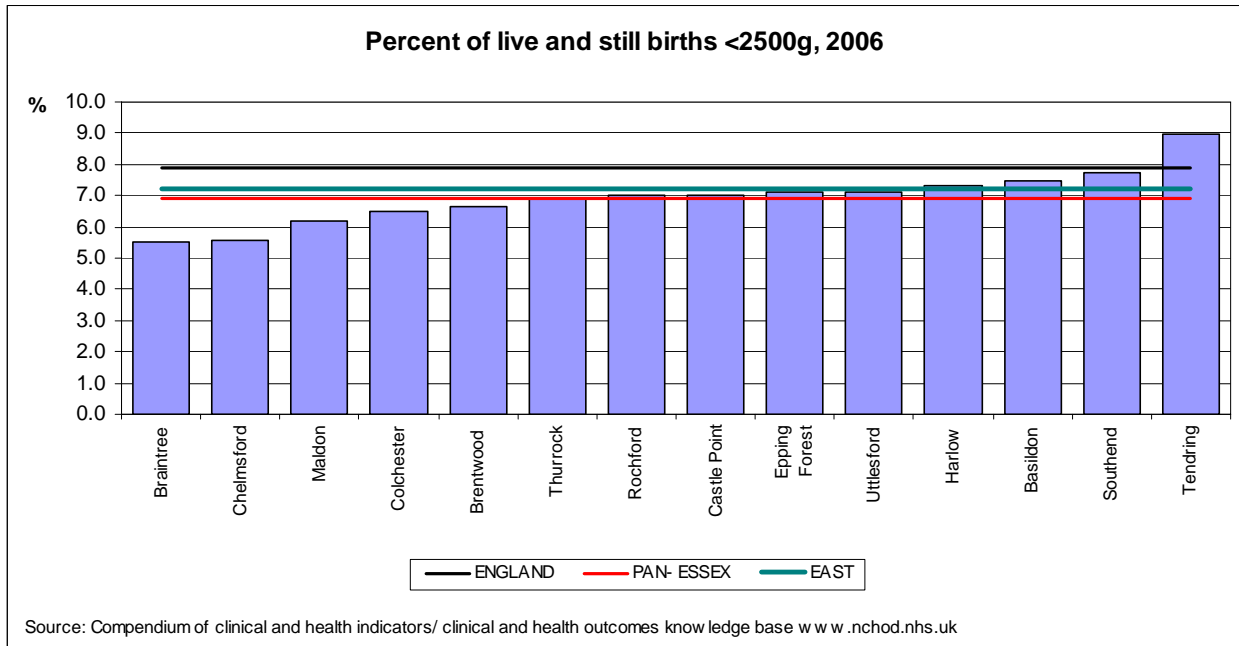
The infant mortality rate pan-Essex (for infants under one year of age) was 3.86 per 1,000 live births in 2006 compared to the England average of 5.0. Both rates have shown a slight decline since 2001. The infant mortality rate was 3.94 per 1,000 live births in ECC districts, 3.67 in Southend and 3.43 in Thurrock. Only one area is very slightly above the national average on infant mortality, all others are below it. It is important to note that there are small numbers behind these death rates, but that there is a strong relationship between deprivation and infant mortality which is clearly shown when looking at district level data in Essex.



Poor socio-economic circumstances may have lasting effects on both mental and physical health and development. Low birth weight, for example, which is more common among poorer families, is associated with higher rates of adult morbidity and age-specific mortality. It is a good indicator of a newborn's chances for survival, growth, long-term health and psychosocial development.

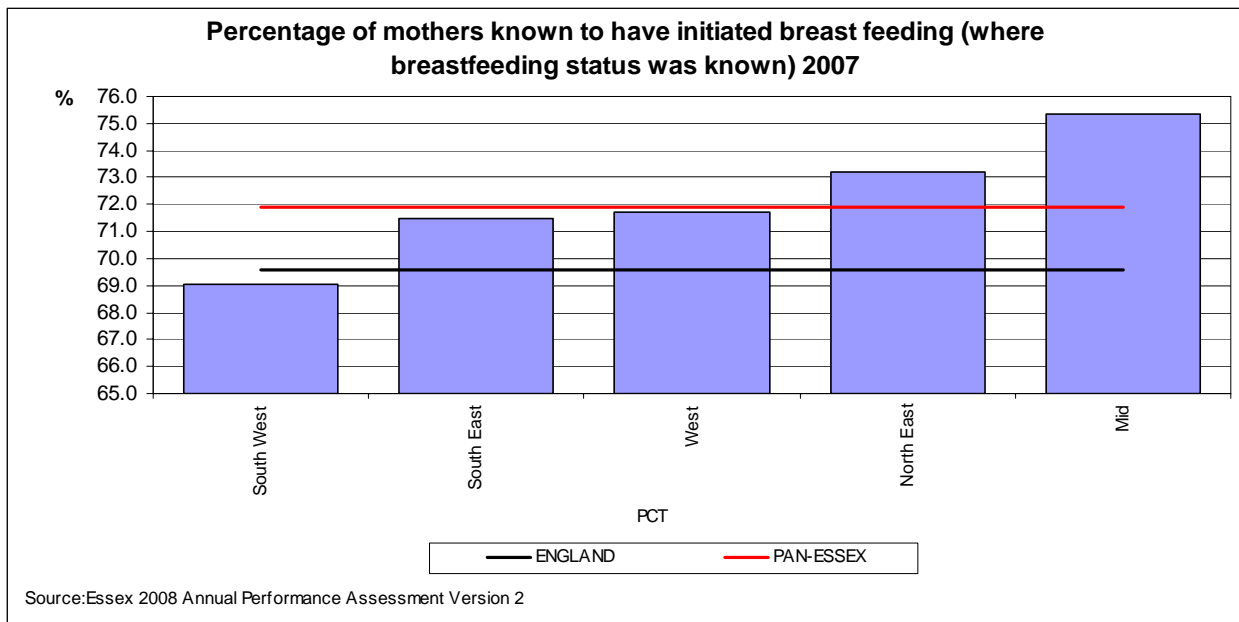
In 2006, 6.9% of babies pan-Essex had a low birth weight (under 2.5 kg) compared to 7.9% in England. This percentage was 6.8% of babies in ECC districts, 7.7% in

Southend and 6.89% in Thurrock. Tendring was the only district to have a rate higher than the England average but Harlow, Basildon and Southend were also above the pan-Essex average. Braintree and Chelmsford had the lowest rates.



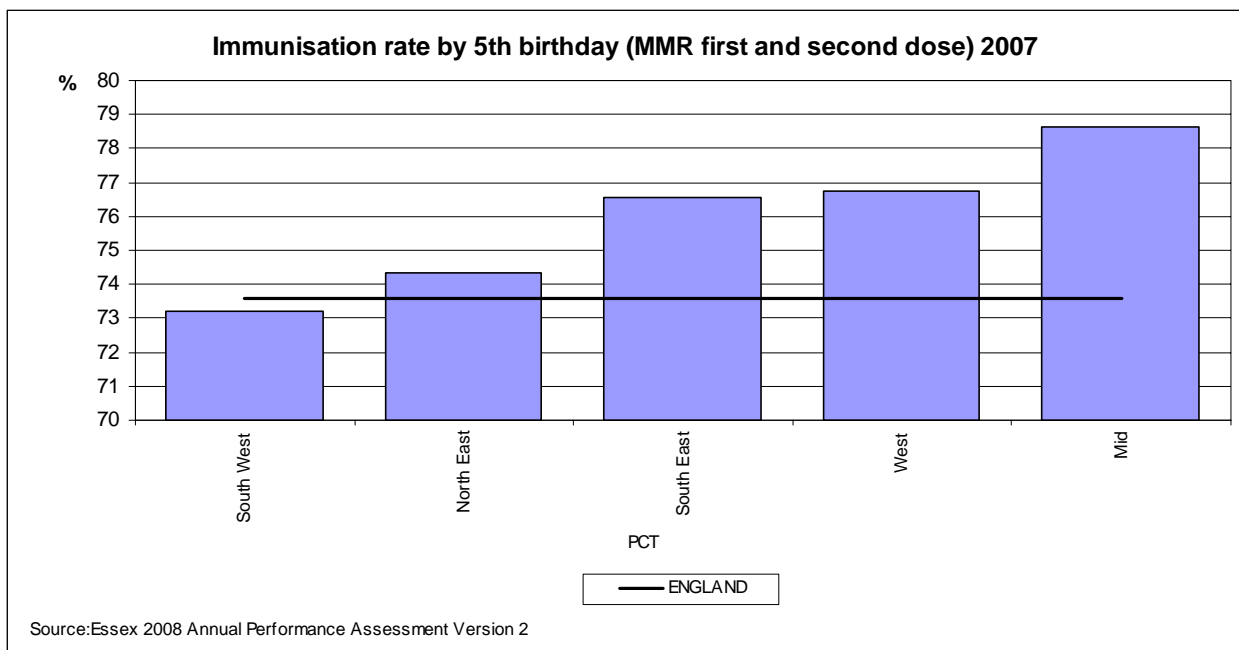
Breast milk is considered to be the best form of nutrition for infants and breast-fed babies are five times less likely to be admitted to hospital with common infections, such as gastroenteritis, during their first year of life. Breastfeeding initiation rates in the UK remain relatively low compared to other countries, particularly among women in lower income groups.

Overall the proportion of mothers initiating breastfeeding pan-Essex is above the national average of 69.6%. However the South West PCT area is below the England average. The UK infant feeding survey 2005 showed that 78% of women in England breastfed their babies after birth but, by six weeks, the number had dropped to 50%. Only 26% of babies were breastfed at six months. Exclusive breastfeeding was practised by only 45% of women one week after birth and 21% at six weeks.



MMR is the combined vaccine to prevent measles, mumps and rubella, all of which are diseases with serious complications. There has been some controversy following poor research about the MMR vaccine in recent years, which has resulted in a decrease in the number of children being vaccinated. World Health Organisation (WHO) recommendations are that at least 95% of children receive a first dose of a mumps-containing vaccine at age 12-18 months; and that at least 95% receive a measles vaccine by two years of age. The Department of Health launched an MMR catch up campaign in the summer of 2008 which should improve the uptake, but there is still much work to do to improve the confidence of families towards the MMR vaccine.

Figures show that 74.2% of children pan-Essex had received an MMR vaccination by their fifth birthday, compared to 73.6% in England. This proportion has been steadily declining over the last four years. The Mid Essex PCT area had the highest vaccination rate at 79.4% while the South West PCT area had the lowest (70.3%), but all areas are lower than the World Health Organisation recommended level of vaccination of 95%.



### *Children and young people with physical disabilities*

Disability and significant developmental delay may be detected immediately at birth for some children, while for others impairments will develop or become apparent only gradually. An increasing proportion of children will have complex and multiple disabilities, requiring co-ordinated interventions with the child and family from several professionals. Reasons for this include advances in medicine that have allowed premature babies to live, but with higher risk of disability. Some children can be expected to have high levels of development, if appropriate support is available. For other children the prognosis may be one of increasing difficulty and reduced life expectancy.

It is estimated that in the UK 2.67% of children aged 0-19 are disabled and 0.92% are severely disabled. The prevalence of permanent hearing loss is nearly 2 per 1,000 children at age 9-16 years. One per 1,000 babies are born with permanent deafness or hearing impairment that significantly affects their language and social development and a further 1 per 1,000 have a deafness that has some effect. There are no consistent national estimates of the prevalence of sight problems in children aged up to 16 but the epidemiological evidence is that there are 20 visually impaired children per 10,000.

The table below shows how many pupils<sup>1</sup> have a statement of Special Educational Need (SEN) or are on School Action Plus (SA+). This represents 8.4% of the total number of pupils in Essex and Southend and 11.2% of the pupils in Thurrock.

<sup>1</sup> This refers to pupils in state primary, secondary and special schools only

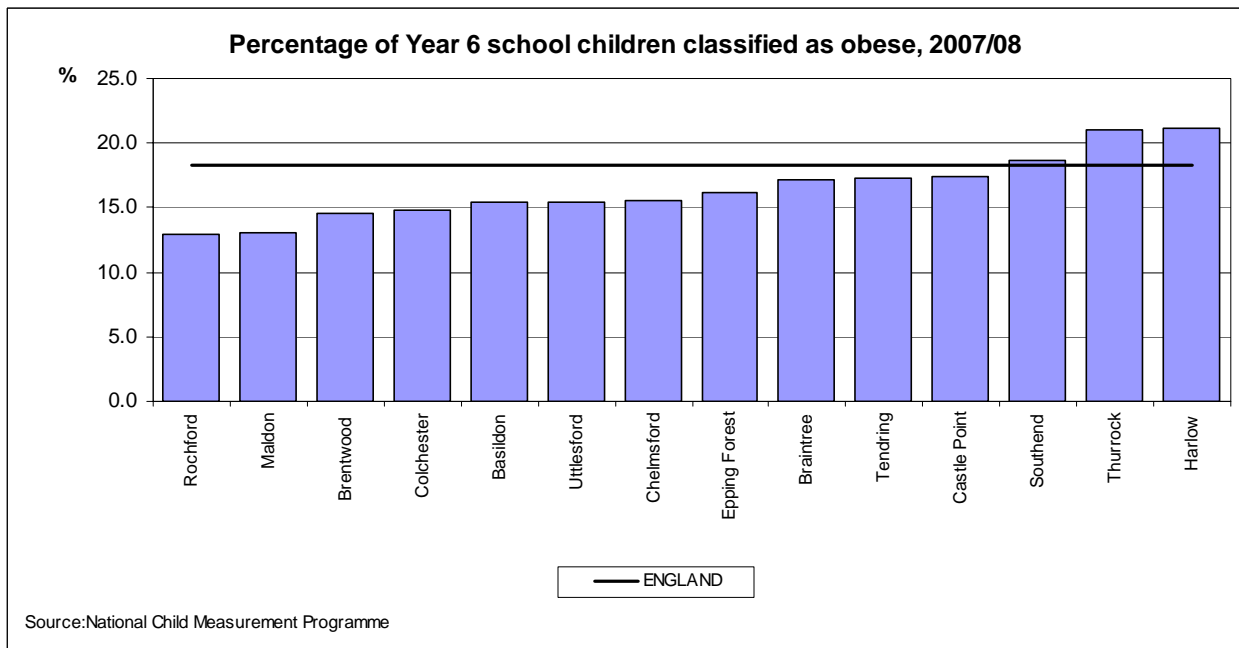
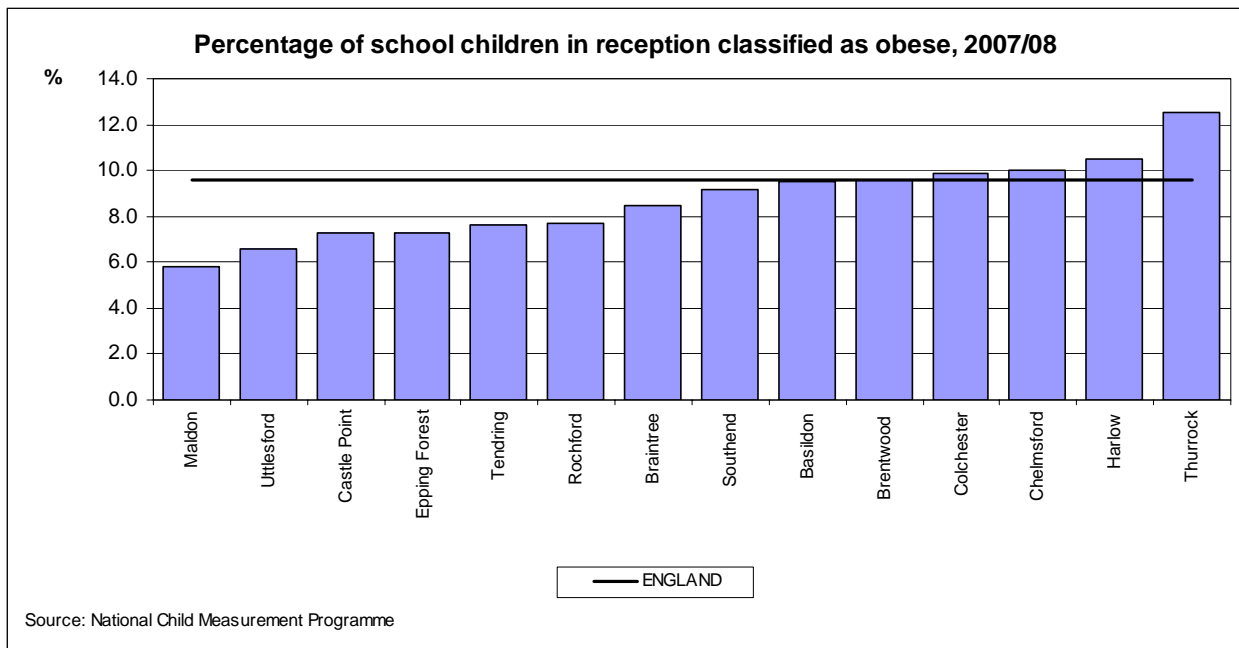
	<b>ECC</b>	<b>Southend</b>	<b>Thurrock</b>
Number of pupils with a statement of SEN or on School Action Plus	16,507	2,259	2,573
Number of pupils with physical disability	586	86	95
Number of pupils with a hearing impairment	281	15	47
Number of pupils with a visual impairment	173	20	35

### *Obesity and healthy living*

Childhood obesity is a complex public health issue that is a growing threat to health during childhood as well as later life. Being overweight and obesity increase the risk of a wide range of diseases and illnesses, including coronary heart disease and stroke, type 2 diabetes, high blood pressure, metabolic syndrome, osteoarthritis and cancer. Obesity reduces life expectancy on average by 11 years. The UK has seen an unprecedented rise in obesity; the most recent figures (2006) show that, among children aged 2-15, almost one third are overweight (including obese) and approximately one sixth are obese. It has been estimated that, if current trends continue, about one third of adults and one fifth of children aged 2-10 years will be obese by 2010, and about 25% of all children under 16 could be obese by 2050. If the number of obese children continues to rise, children will have a shorter life expectancy than their parents.

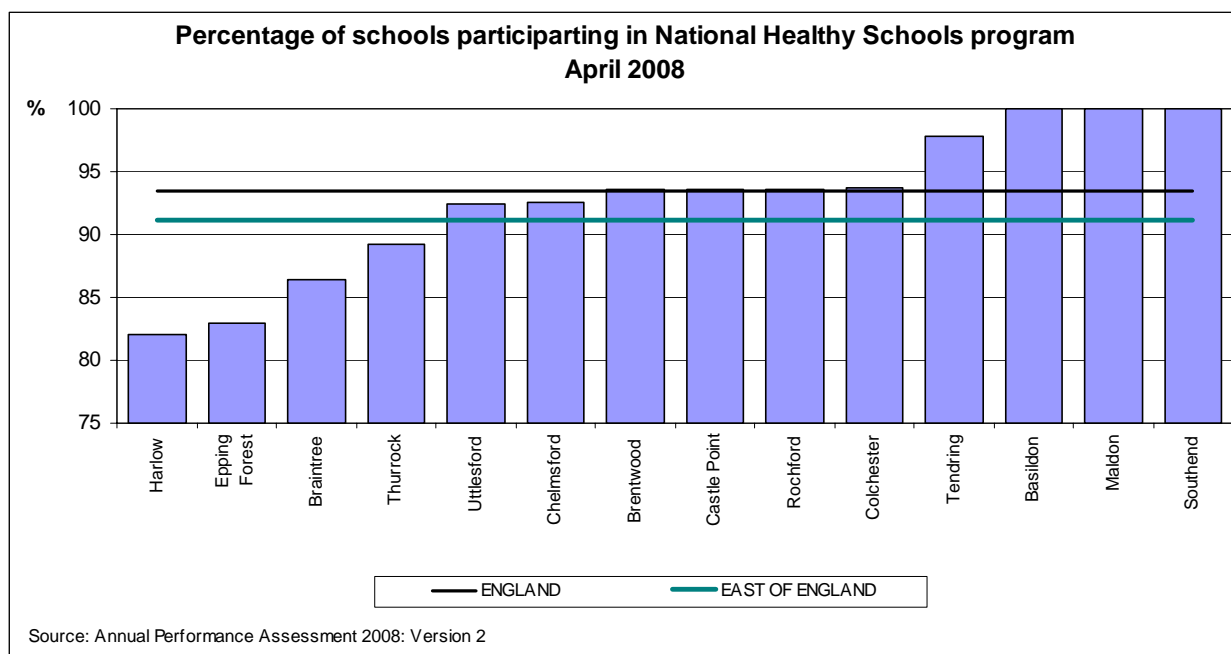
Tackling childhood obesity requires changes in the behaviour of individual children and their parents and of society in general and reflects recent trends across most developing countries to greater fat and sugar consumption and reduced physical activity. There is also evidence to suggest that babies who are breastfed are less likely to be obese in adulthood.

Since 2005, PCTs have been required to collect height and weight data for Body Mass Index on all primary school children in reception year (ages 4/5) and Year 6 (ages 10/11). In 2007/08 8.7% of reception year children in ECC districts, 9.2% in Southend and 12.5% in Thurrock were measured as obese, compared to an England average of 9.6%. 15.9% of Year 6 children in ECC districts, 18.7% in Southend and 21.0% in Thurrock were measured as obese, compared to 18.3% nationally. Thurrock and Harlow had the highest percentage of obese children in both years. Maldon had the lowest percentage in the reception year while Rochford and Maldon had the lowest percentage in Year 6.



Allied to issues of obesity is the development of healthy eating. The government has established the Healthy Schools Programme and invited schools to work to achieve the standards set within the programme, which has three strategic aims: to contribute to reducing health inequalities; to promote social inclusion; and to raise pupil achievement. Schools are encouraged to adopt a whole-school approach to developing their work on a range of health and education-related themes.

In April 2008 92% of schools in ECC, all schools in Southend and 89.3% of those in Thurrock were participating in the Healthy Schools programme. Within ECC, all of the schools in Basildon and Maldon were participating, but Epping Forest and Harlow had under 85%.



The 2008 Ofsted survey TellUs3 showed that the majority of children (88% in ECC and 87% in Thurrock) regarded themselves as ‘very’ or ‘quite’ healthy, in line with the national scores. In Southend, 90% of pupils said this through TellUs2 in 2007 (due to incomplete coverage in the TellUs3 survey in 2008 for Southend, where only Year 6 pupils responded, results are not comparable to ECC and Thurrock).

### *Child and adolescent mental health*

Nationally 10% of children aged 5-19 years have a diagnosable mental health condition and further 10% have an emotional or behavioural problem requiring targeted support. Within ECC districts this equates to a total of 50,600 children who will require some type of specialist (Tier 3 or 4) or targeted (Tier 2) type of provision by CAMHS or behaviour support workers. These children have a wide range of conditions including clinically significant conduct disorders, self harm, depression, hyperactivity and less common disorders such as autistic disorders and eating disorders.

Despite the relatively high prevalence of emotional, behavioural and mental health problems only 9,604 children and young people were treated by CAMHS tier 2 services in ECC districts in 2007/08 plus 2,647 were treated by tier 3 services. This would indicate an unmet need in the region of 75%. This is predominantly due to a lack of workforce at both Tier 2 and Tier 3. Both services are running with approximately 6wte per 100,000 population compared to an NSF standard of 20wte per 100,000.

Prevalence rates are higher amongst boys than girls and amongst 11-15 year olds when compared to younger children. The rate amongst children living in lone parent households is twice that of children living with two parents while children in low income families experience almost three times the rate of those in high income families. Half of the children with mental health disorders have seen the separation of their parents (compared with 29% with no disorder), 15% (compared to 5%) have problems with the police and 6% (compared to 3%) have experienced a parent or sibling dying. Mental

health difficulties are particularly prevalent among young prisoners, homeless young adults and young adults leaving care:

In comparison to the 10% of all 5-19 year olds who have a mental health condition the prevalence for vulnerable groups is as follows;

- 45% of looked after children.
- 40% of young offenders.
- 36% of children and young people with learning disabilities.
- 30% of children living in poverty

Many young people suffer from multiple problems: 35% of respondents in one national study had been diagnosed with learning difficulties (25% dyslexia) while 50% stated that they had been bullied, 30% verbally abused and 20% physically abused due to their mental health problems.

In evidence collected as part of the national 'Good childhood Inquiry' positive well being for children depended upon;

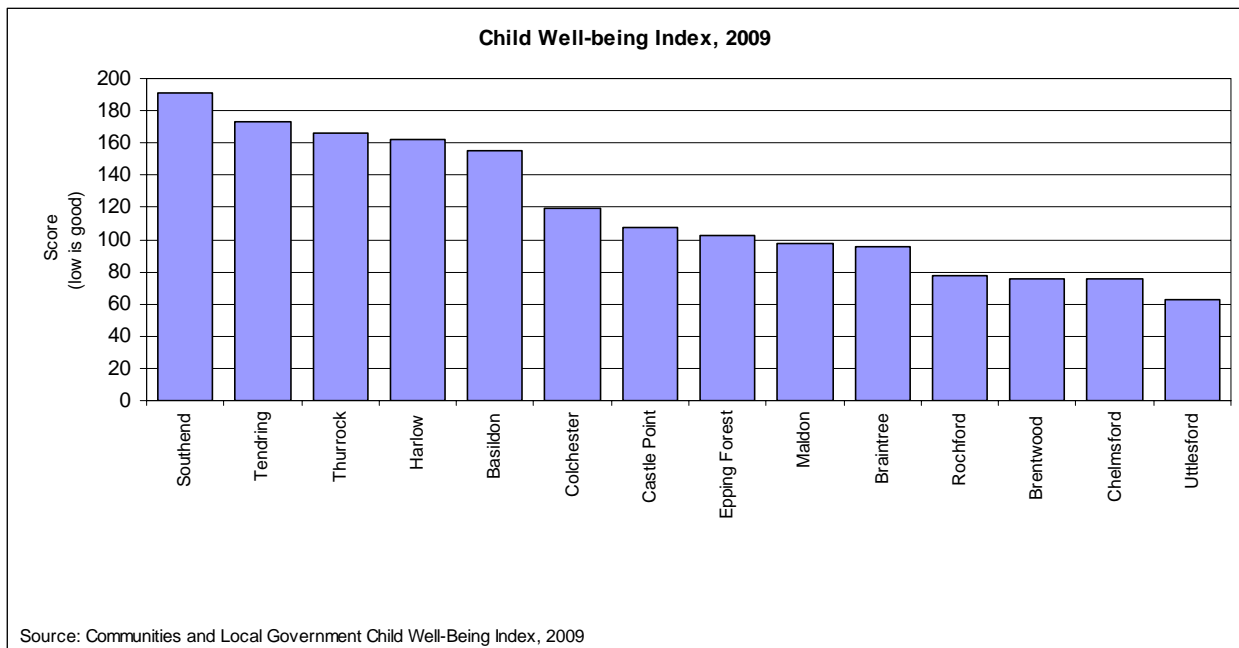
- good relationships, especially within the family
- a sense of purpose and achievement
- freedom and autonomy
- a positive sense of self.

When asked what makes for a good childhood, children mentioned friends above all other topics, yet adults often underestimate the importance of friendships for children.

Play opportunities are essential for children and young people to practise making and consolidating friendships and to deal with conflict. Children who have difficulties making and keeping friends feel isolated and depressed, and being separated from friends can result in poorer mental health. Being rejected by other children is consistently linked to problems such as depressive mood, aggressive, anti-social and delinquent behaviour.

When asked how happy with life they felt at the moment in the 2008 TellUs3 survey, 68% of young people in ECC and 70% in Thurrock said that they felt happy while 9% in ECC and 10% in Thurrock said that they did not. This is in line with the national findings. 68% of Year 6 children in Southend said that they felt happy while 6% did not (due to incomplete coverage in the TellUs3 survey for Southend, where only Year 6 pupils responded, results are not comparable to ECC and Thurrock.)

The Child Well-being Index covers the major domains of a child's life that have an impact on child well-being and that are available for LSOAs in England (the seven domains are material well-being, health, education, crime, housing, environment and children in need). ECC is ranked 33rd out of the 149 local authorities in England while Thurrock is ranked 66th and Southend is ranked 111th, based on their performance against all of the domains. Out of the 354 local authority districts, Uttlesford is ranked 20th while Chelmsford, Brentwood and Rochford all rank in the top 50. However, Southend is ranked in 287 place, Tendring is ranked 261, Thurrock is ranked 249, Harlow is ranked 243 and Basildon is ranked 230.



(NB: In the chart above a low score is good performance)

Young people with a mental disorder are much more likely to be behind in their intellectual development and have special educational needs than other children. A third of young people with mental health problems leave school with no qualifications. They also have more days off from school and are more likely to be considered as definite or possible truants. Young adults with mental health difficulties often lack the basic level of self-esteem and emotional stability that is required in order to develop full and happy lives. Feelings of low self-worth and isolation can cause them to develop a negative self-image, which can reinforce and perpetuate their mental health difficulties. Low self-esteem also prevents them from becoming engaged in learning, especially if their previous experience has been one of under-achievement.

The importance of psychological well-being in children and young people, for their healthy emotional, social, physical, cognitive and educational development, is well researched. There is now increasing evidence of the effectiveness of interventions to improve children's and young people's resilience, promote mental health and treat mental health problems and disorders, including children and young people with severe disorders who may need admission.

There are four tiers of services available for children and young people with mental health problems:

- Tier 1: provided by practitioners who are not mental health specialists working in universal services, offering general advice and treatment for less severe problems and referring to more specialist services.
- Tier 2: a targeted service provided by specialist individual practitioners in primary care including assessment, care and treatment for young people.
- Tier 3: a specialised multi-disciplinary service for more severe, complex or persistent mental health problems.
- Tier 4: essential tertiary level services for children and young people with the most serious problems, such as day units, highly specialised out-patient teams and in-patient units.

National Indicator 51 (NI51) is the government measure of CAMHS and is scored out of 4 for each of the 4 proxy measures below:-

- 24 hour/seven days a week cover to meet the urgent mental health needs of children and young people and assessment by CAMHS next working day.
- A full range of CAMHS services for children/young people with a learning disability.
- A full range of CAMHS for 16 and 17 year olds, appropriate to their age and level of maturity.
- Joint commissioning of universal and targeted services.

In 2008/09 North and South Essex mental health trusts scored 9 out of 16 against these measures. ECC was scored adequate by Ofsted and the Health Care Commission following a Joint Area Review of Children’s Services. Southend scored 12 out of 16, improving from 10 in 2007/08.

Proportion of CAMHS new cases by length of wait in 2006/07

	<b>North Essex mental health trust</b>	<b>South Essex mental health trust</b>	<b>England</b>
New non-specialist cases with length of wait under 4 weeks	69.1%	79.2%	39.8%
New specialist cases with length of wait under 4 weeks	100.0%	100.0%	89.7%
New non-specialist cases with length of wait under 26 weeks	100.0%	n/a	56.2%
New specialist cases with length of wait under 26 weeks	100.0%	n/a	94.2%

Both mental health trusts in Essex meet the targets for assessment of specialist and non specialist new referrals within the 4 and 26 week measures, However follow up treatments and intervention times are on average in excess of 6 months.

*Substance misuse*

There are some specific vulnerable groups who are more at risk of substance misuse. These are predominantly looked after children; young carers; young offenders; exploited young people; teenagers becoming pregnant/parents; young people with mental health issues; and truants/excluded pupils.

National research evidence suggests that young people may engage in high risk behaviours following excessive alcohol consumption. Adolescent binge drinking is a risk behaviour associated with significant later adversity and social exclusion. Young people sometimes say that they drink because there is nothing else for them to do in their spare time. National evidence shows that participating in high quality, constructive out of school activities has a preventative impact on alcohol use by young people.

According to the 2008 TellUs3 survey, 11% of young people (respondents from Years 8 and 10 only) in ECC and 9% of young people in Thurrock said that they had ever taken

drugs, compared to 11% of young people nationally. (There was no response available for Southend due to incomplete coverage – only data for Year 6 pupils is available. However, the 2007 TellUs2 survey reported that 85% of young people in Southend had never taken drugs and 4% preferred not to say if they had.) According to the SHEU survey in 2008, 17.6% of secondary school pupils (respondents from Years 7 to 13) in ECC districts said that they have ever taken drugs. The highest percentages of young people were in Brentwood and Harlow while the lowest were in Colchester and Basildon.

In the TellUs3 survey 16% of pupils (respondents from Years 8 and 10 only) in ECC and 13% in Thurrock said that they had been drunk once or more in the last four weeks, compared to 16% nationally. In Southend, 18% of pupils said this in 2007. 38% of pupils in ECC and 37% in Thurrock said that they have never been drunk, compared to 35% nationally. 20% of pupils in ECC and 22% in Thurrock said that they had never had an alcoholic drink, compared to 25% nationally. In Southend, 41% of pupils said this in 2007. Information from the 2008 SHEU survey showed that 12.8% of all secondary school pupils across ECC districts said that they drink regularly. The ECC districts with the highest percentage of young people saying they drink alcohol regularly were Maldon, Chelmsford and Colchester while the districts with the lowest percentages were Castle Point and Tendring.

76% of pupils in ECC and 77% in Thurrock (respondents from Years 8 and 10 only) said that they have never smoked a cigarette, compared to 75% nationally (the figure was 78% for Southend in 2007). 4% of pupils in both ECC and Thurrock said that they smoke cigarettes regularly/every day, compared to 5% nationally. The 2008 SHEU survey showed that although 69% of secondary school pupils in ECC districts said they have never smoked a cigarette, 6.7% said that they smoke regularly. The highest percentages of young people saying they smoke regularly are in Castle Point, Maldon and Harlow while the districts with the lowest percentages are Braintree and Rochford.

Some 10% of secondary school pupils in ECC districts (according to the TellUs3 survey) said that they take drugs or alcohol frequently (defined as at least twice in the last four weeks), suggesting a total of around 12,000 young people in ECC districts aged 11-18. Essex Drug & Alcohol Action Team (DAAT) data shows that in 2006/07, 153 young people were in tier 3 structured counselling and 599 in tier 2 one to one work, suggesting a mismatch between prevalence and treatment. In Southend 66 young people received structured Tier 3 treatment in 2007/08, a decline in treatment numbers from the 91 individuals reported a year earlier.

### *Sexual orientation*

There are no national statistics about the number of people by sexual orientation but one study estimated that between 5% of the population in rural areas and 25% of the population in cities such as Brighton and London is lesbian, gay or bisexual. Many young people know they are lesbian, gay or bisexual by the age of 11 or 12, or have feelings of being different. However, some do not come out to someone else until they are 15 or 16. This period (11-16 years old) is the most crucial for targeting support and information.

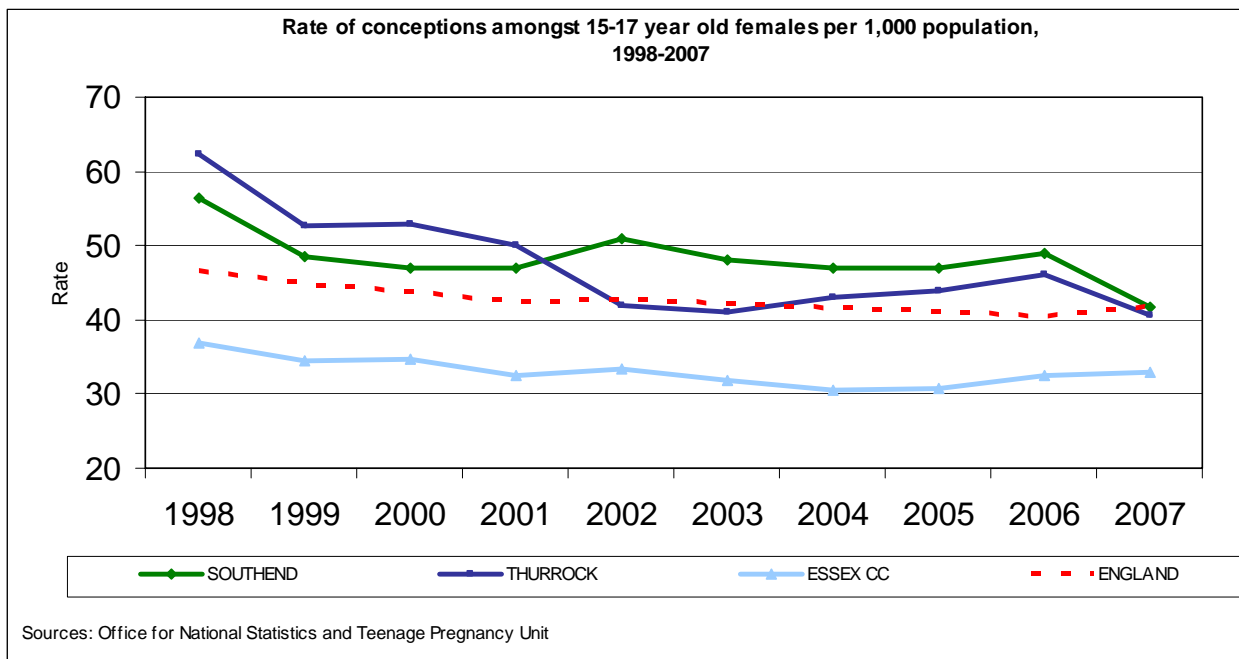
Young LGB people are particularly affected by mental health problems such as depression, anxiety, self-harm and suicidal tendencies: one in five have attempted

suicide. Experiences of bullying and harassment are extremely common for young LGB people, with the school environment being particularly problematic. Young LGB people may find themselves homeless once they have come out as LGB if family and friends disown them.

### Teenage pregnancy

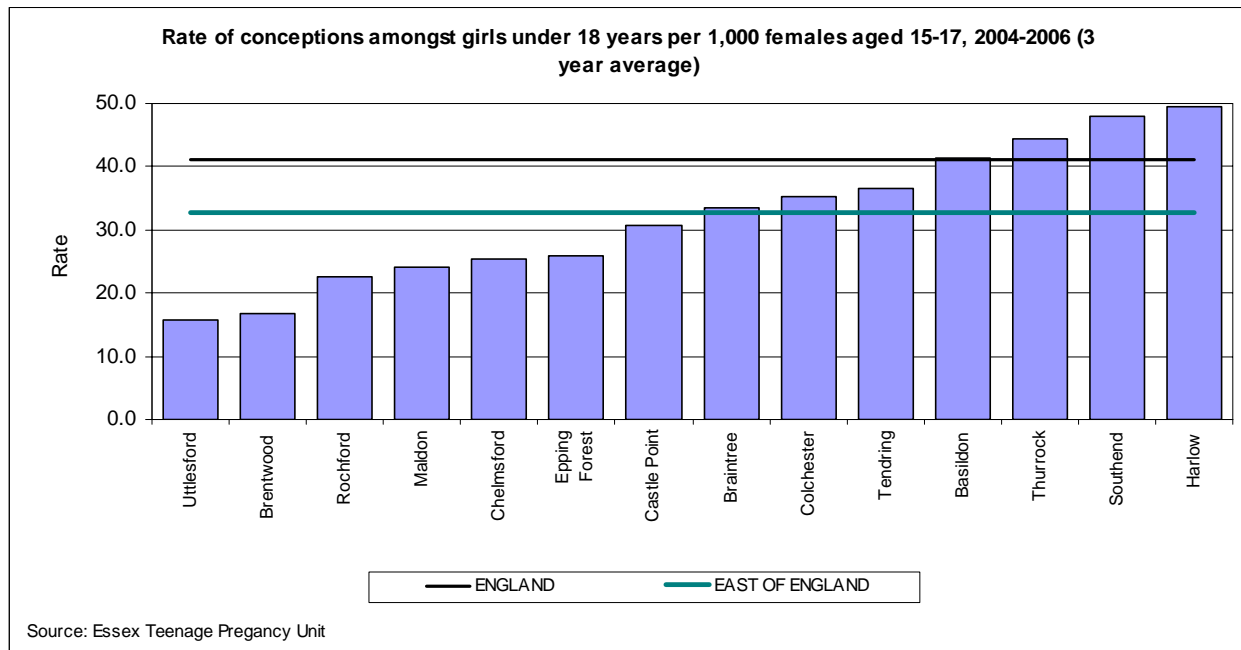
Teenage pregnancy is a complex issue, affected by young people's knowledge about sex and relationships and their access to advice and support; and influenced by aspirations, educational attainment, parental, cultural and peer influences and levels of emotional wellbeing. It is strongly associated with social deprivation, poor attainment and disengagement at school. National research shows that young people in care, those who are homeless, those involved in crime, those who have been excluded from school, children of teenage mothers and members of some ethnic minority groups are particularly vulnerable to becoming teenage parents. Around 20% of births conceived under the age of 18 are to young women who are already teenage mothers. Teenage fathers are more likely to come from a lower socio-economic group, and to have left school without qualifications.

The incidence of teenage conceptions pan-Essex has shown a steady decline from the 1998 benchmark figures, compared with an overall decline in England of 10.7% to 41.7 per 1,000 of the female 15-17 population in 2007. Between 1998 and 2007 (provisional figures) the ECC rate fell by 10.7% to 32.9 per 1,000, the Southend rate fell by 26.1% to 41.7 per 1,000 and the Thurrock rate declined by 34.7% to 40.7 per 1,000.



Harlow, Thurrock and Basildon all have rates that are higher than the national average while the rate in Southend is now the same as the England figure. The decline in the under-18 conception rate is greatest in Southend and Thurrock, while ECC rates have been rising again since 2004. During 2006 57% of teenage pregnancies led to abortion in ECC, 58% in Thurrock and 49% in Southend whilst the England rate was 51%. The

2007 rate of teenage pregnancy pan-Essex meant that around 620 young women terminated their pregnancies and about 490 young women continued with the pregnancy.



### *Teenage parents*

National research shows that the majority of teenage mothers bring up their children alone. Teenage mothers have three times the rate of post-natal depression of older mothers and a higher risk of poor mental health for three years after the birth. Nearly 40% of young mothers leave school without any qualifications (compared to 4% of all young people), and many have missed large parts of their secondary schooling, so that they face a high risk of deprivation and social exclusion in their adult life.

Children of teenage mothers are generally at increased risk of poverty, low educational attainment, poor housing and poor health, and have lower rates of economic activity in adult life. The health risks to the children of teenage parents include a much higher infant mortality rate (60% higher than older mothers) and the fact that teenage mothers are more likely to smoke during pregnancy and are less likely to breastfeed.

A simple estimate using three years of calculated live births indicates that there are around 1,100 young mothers aged under 18 years in the ECC area, just over 400 in Southend and just under 400 in Thurrock. Care to Learn data suggests at least 873 young mothers in ECC districts, 162 in Southend and 175 in Thurrock.

### *Sexual health*

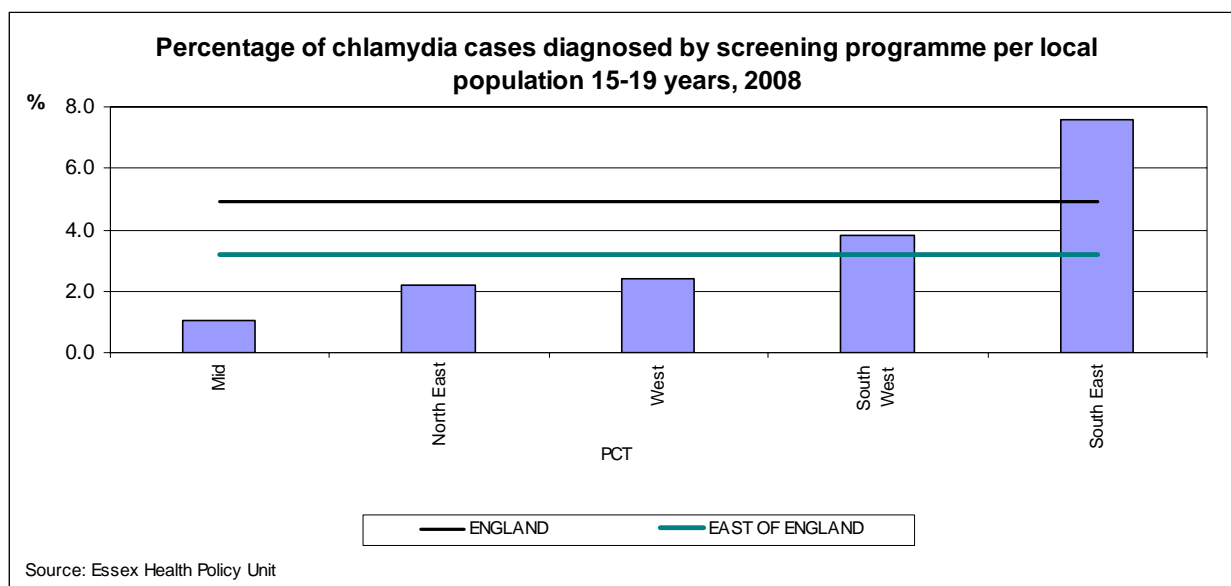
Sexually transmitted infection rates are not equally distributed in the population, with the highest levels seen in women, men who have sex with men, teenagers, young adults, minority ethnic groups and those in deprived communities. The incidence of sexually

transmitted infections (STIs) has increased significantly pan-Essex over the last ten years, mirroring regional and national patterns.

Number of new STI episodes seen at genitourinary medicine clinics in the East of England (2007)

STI	Number of new cases in East Anglia (all ages)	% change since 1998	New cases for young people under 19 in East Anglia
Chlamydia	9,832	+ 272%	2,632
Gonorrhoea	820	+ 144%	157
Herpes	1,894	+ 129%	327
Warts	7,286	+ 137%	1,472
HIV	360	+ 643%	-
Total new STI diagnoses	32,758	+ 180%	-
Other STI diagnoses	21,405	+ 198%	-

The highest diagnosis rate of Chlamydia amongst under 25 year olds, as detected through the national Chlamydia screening programme, was in the South East PCT area in 2007/08 with 7.6%, compared to the lowest rate in Mid Essex of 1.1%. The reason why South East Essex PCT has the highest percentage is that their screening programme is much more established than the other PCTs in Essex.



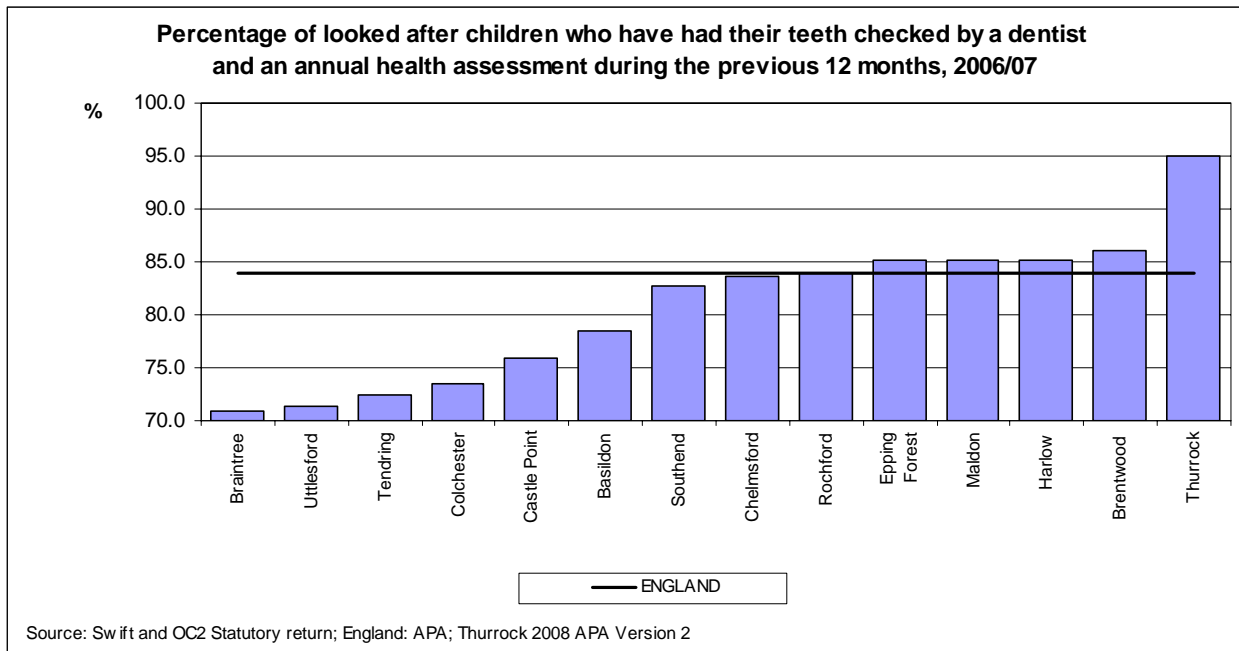
*Health of looked after children*

Looked after children and young people are among the most socially excluded groups in England and are at particular risk of health disadvantage, in childhood and the long term. Though just under half looked after children spend only a short time in local authority care, some return to care at a later date, and some return home to socio-economic hardship with its associated health risks. Government data suggests that there are relatively high levels of general unmet health need with just over half of looked

after children having health and/or behavioural needs. Research indicates that often, as a result of pre- and post-care experiences, looked after children and young people are vulnerable to self-harm and risk-taking behaviour, manifesting as high rates of teenage pregnancy, substance misuse and smoking.

Looked after children and young people and care leavers are more likely to need specialist health services than their peers, including child and adolescent mental health services, help with addictions and sexual health advice. However, they are also less likely to engage with universal health services such as GPs, dentists and opticians.

In 2007/08 77.8% of looked after children in ECC districts had had their teeth checked by a dentist and had had an annual health assessment, below the national average of 85%. Southend's percentage at 83.4% was slightly below the national average while the performance in Thurrock was very high at 96%.



The percentage of care leavers in ECC districts misusing drugs and alcohol was 10.7% in 2007/08, down from 15.9% a year earlier. In Southend the figure for 2007/8 was 6.2% and in Thurrock it was 7.9%.

## 2. STAYING SAFE

### *Children in need*

The Children Act 1989 places a duty on local authorities to work with children in need. Need relates both to the provision of services or support to children and families or more specific support to children who have been abused and/or neglected or at risk of abuse and/or neglect.

Research has identified a number of child and family risk factors or characteristics that may make children and young people vulnerable and at greater risk of abuse or neglect. Risk factors are cumulative – the presence of one increases the likelihood that more will emerge – and many are inter-dependent, including:

- Child-related: for example low birth weight, having a disability, having problems at school and having mental health problems.
- Parent-related: for example substance misuse, mental health problems, being a young parent, poor parenting skills, or having experienced abuse/neglect.
- Family-related: for example domestic violence, family of four or more siblings, frequent home moves, lone or step parent family, and low income.

Research also shows that the ability of children and young people to resist the effects of risk factors will be influenced by a number of other child and family ‘resilience’ or ‘protective’ factors. The most commonly cited resilience factors are as follows:

- Having a resilient temperament (biological resilience).
- Enjoying good health and development.
- Having good problem-solving skills/coping strategies.
- Having supportive and involved grandparents.
- Being brought up in a birth family (presence of at least one supportive parent).
- Parental or carer interest in activities, including school in particular.
- Access to high quality early years education.
- Having a pro-social peer group.
- Attending a school with good ‘ethos’, and a lack of bullying.
- Having access to challenging activities in and out of school.
- Living in a supportive community.

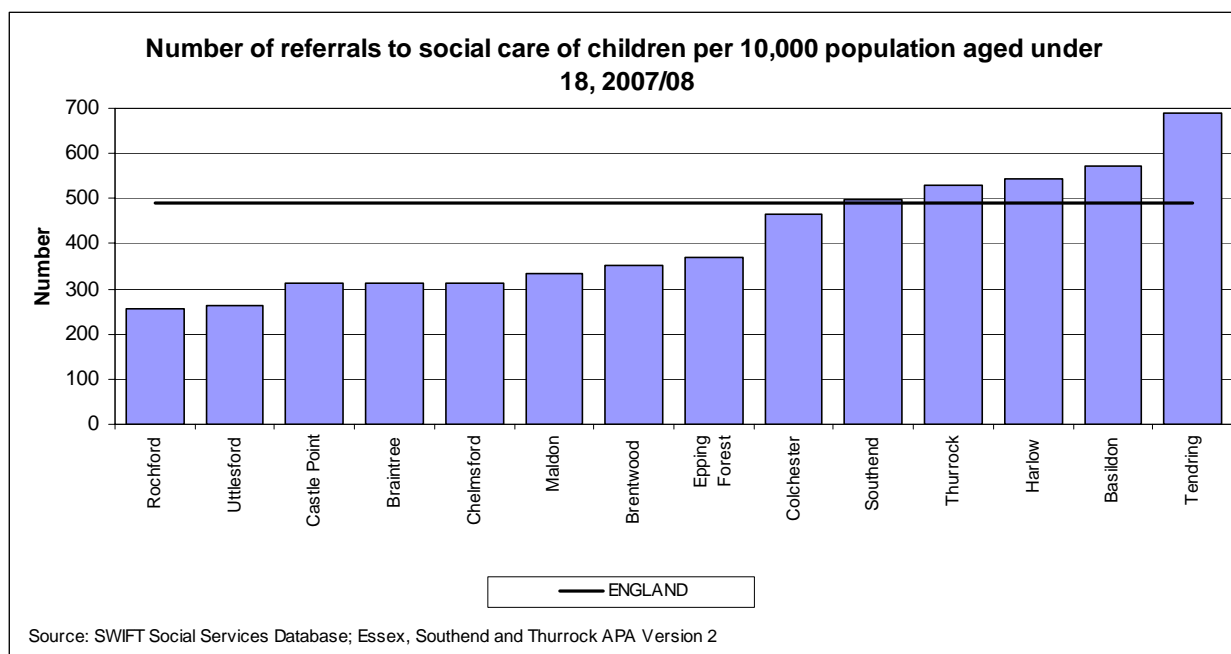
Where the cumulative chain of adversities can be broken, most children are able to recover from even severe exposure to adversities in early life. Acute episodes of stress are less likely than an accumulation of adversity to have long-term adverse effects on children’s development.

Number of referrals to social care of children per 10,000 population aged under 18

	<b>2005/06</b>	<b>2006/07</b>	<b>2007/08</b>
ECC	463	476	474
Southend	623	647	498
Thurrock	358	371	528
England	515	496	490

Source: SWIFT Social Care Database; Essex, Southend and Thurrock APA Version 2

While ECC has a consistently lower rate of referrals to social care than the national average (2005-2008) the Southend rate reduced to close to the national average and the Thurrock rate increased above the national average in 2007/08. Within ECC districts, Harlow, Basildon and Tendring all have referral rates above the national average.



**Percentage of repeat referrals of children per 10,000 population aged under 18**

	2003/04	2004/05	2005/06	2006/07	2007/08
ECC	20.8	21.4	23.5	26.0	28.7
Southend	18.0	25.0	24.0	22.0	26.0
Thurrock	20.6	21.8	23.9	22.3	18.7
England	22.2	22.1	23.3	22.7	24.3

Source: SWIFT Social Care Database; Southend and Thurrock APA Version 2

The number of repeat referrals per 10,000 children has generally increased over the last five years. In 2007/08, ECC and Southend had higher rates than the England average, while the rate in Thurrock was lower than the national figure. Data on repeat referrals are not yet available at an ECC district level.

*Referrals and assessments of children in need*

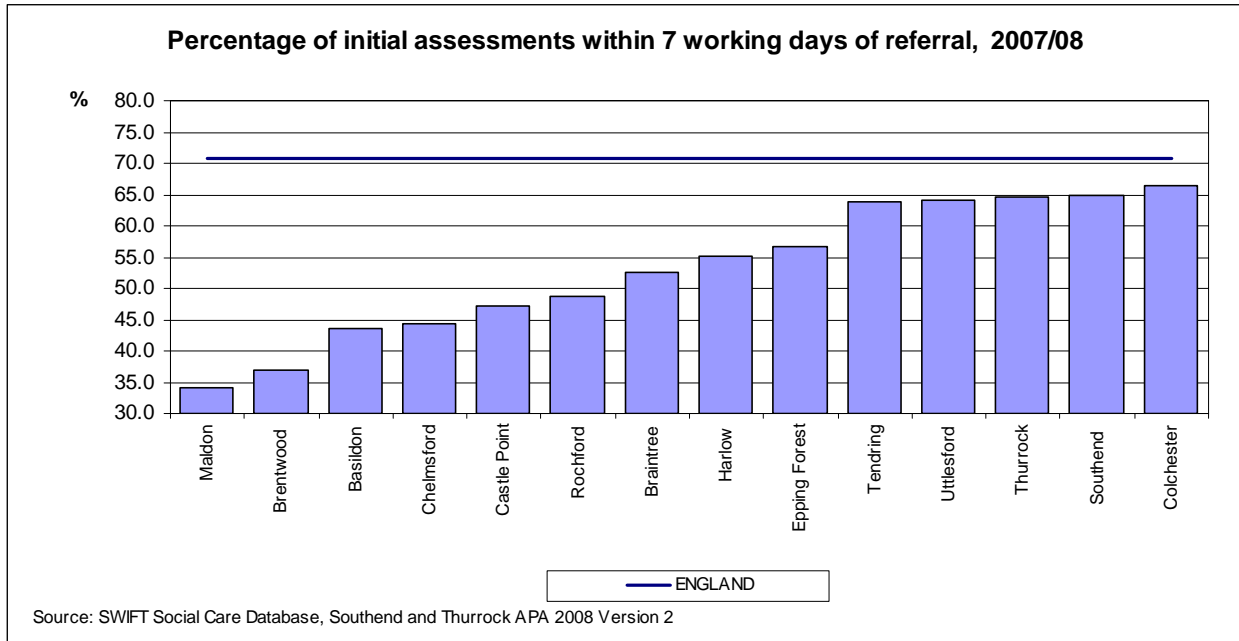
Assessment is the basic building block of services - good, timely assessment ensures that needs are identified and services can be allocated in an effective manner. Robust assessment, planning and review ensure that services are well targeted to reach the children who can benefit. The timeliness of assessment for children in need is a key indicator in keeping children safe and promoting good outcomes.

**Percentage of initial assessments within seven working days of referral**

	2003/04	2004/05	2005/06	2006/07	2007/08
ECC	68.2	76.0	50.1	46.4	58.5
Southend	51.0	72.5	50.0	46.5	65.0
Thurrock	46.7	40.7	46.9	57.6	64.6
England	58.1	61.7	64.9	68.4	70.7

Source: SWIFT Social Care Database; Southend and Thurrock APA Version 2

The percentage of initial assessments carried out within seven days of referral has increased over the last three years. The trend over the five year period suggests a decrease across ECC, a varied performance in Southend and an improvement in Thurrock and nationally. However, the performance of ECC, Southend and Thurrock remains below the England average and all districts in ECC are below the national average.

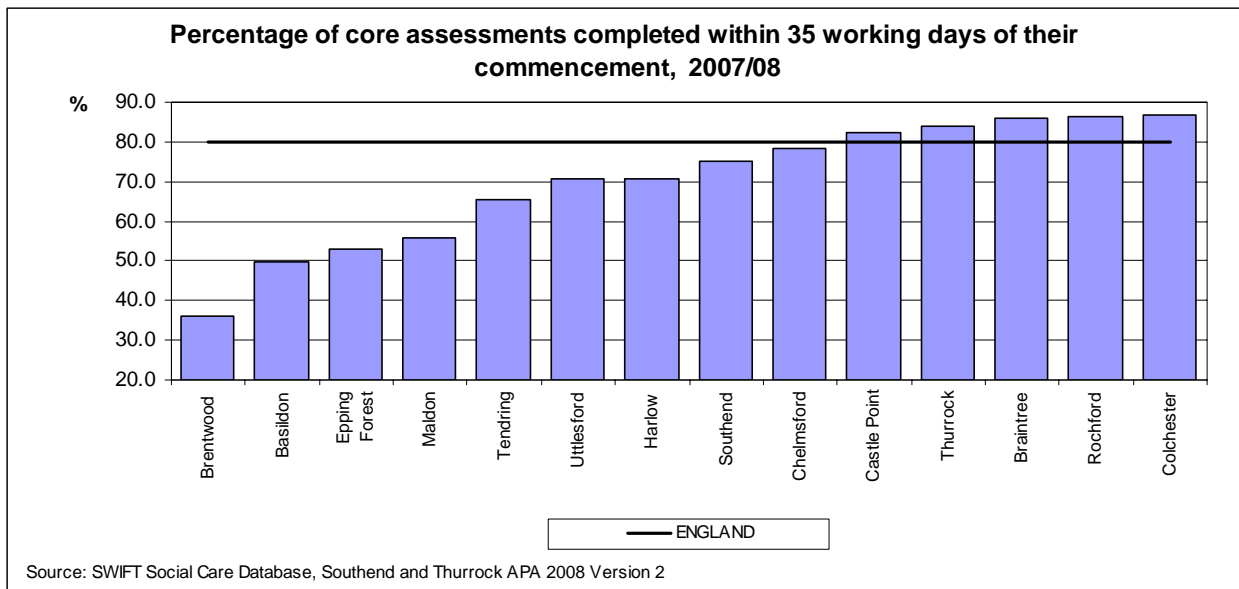


**Percentage of core assessments that were completed within 35 working days of their commencement**

	<b>2005/06</b>	<b>2006/07</b>	<b>2007/08</b>
ECC	60	63	73
Southend	31	41	75
Thurrock	65	73	84
England	74	79	80

Source: SWIFT Social Care Database; Southend and Thurrock APA Version 2

Despite increasing over the last few years, the percentage of core assessments carried out within 35 days is still below the England average for ECC and Southend, although the Thurrock performance is now above the national figure. Most of the districts in ECC also fall below this national figure.



### *Child Protection work*

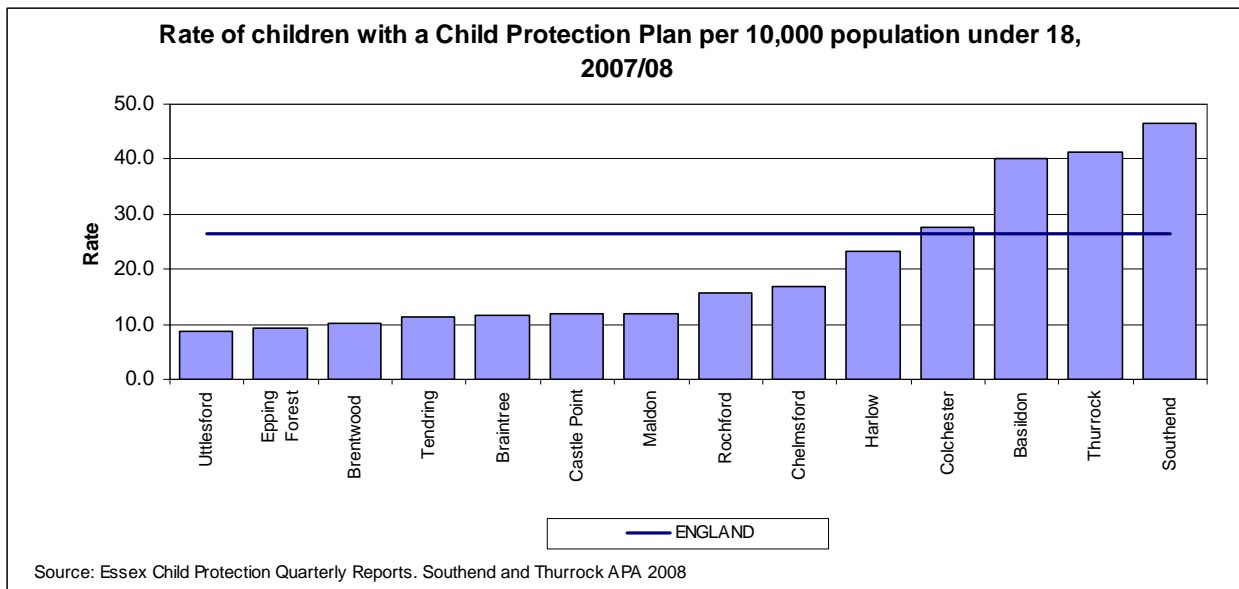
Child protection work is undertaken within the provisions of section 47 of the Children Act 1989. The Act and associated guidelines set out a process for the completion of child protection work and timescales for various stages in the process, including the completion of an initial and core assessment.

### Number of children who are the subject of a Child Protection Plan, or on the Child Protection Register, per 10,000 population aged under 18

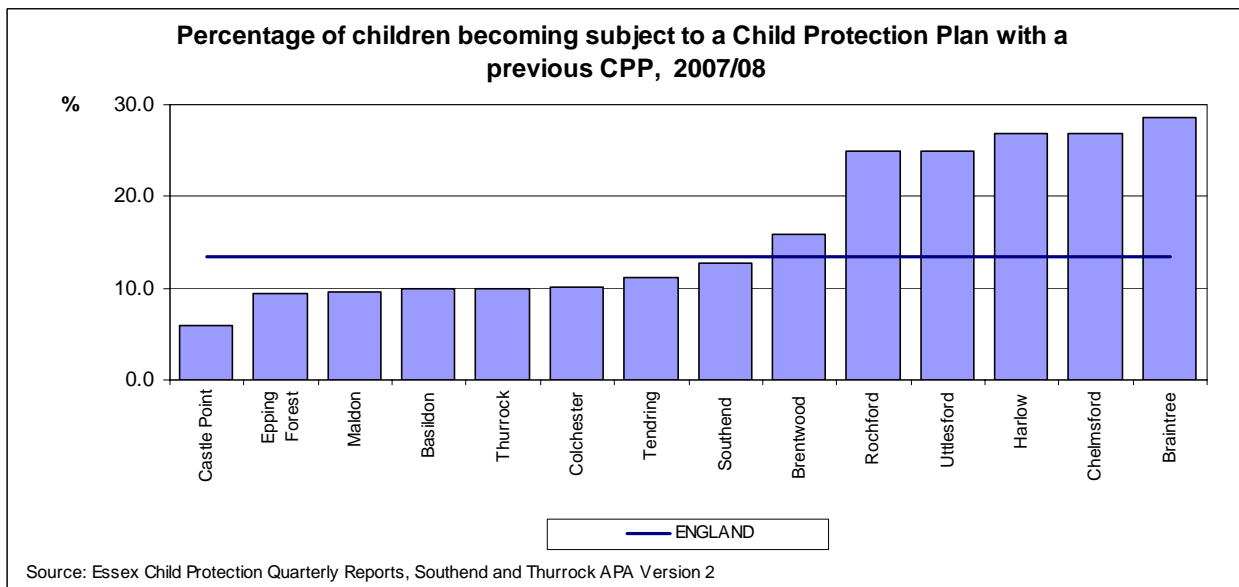
	<b>2003/04</b>	<b>2004/05</b>	<b>2005/06</b>	<b>2006/07</b>	<b>2007/08</b>
ECC	18.7	18.4	17.0	21.1	18.4
Southend	26.4	33.1	28.8	33.9	46.4
Thurrock	8.3	19.0	16.9	19.6	41.4
England	23.7	23.4	23.9	25.3	26.5

Source: Essex Child Protection Reports, Southend and Thurrock APA 2008

ECC has a lower rate of children and young people who are the subject of a Child Protection Plan (CPP) or on the Child Protection Register than England but Southend and Thurrock both have rates significantly higher than the national average, as does Basildon.



There will always be occasions where a child is subject to a Child Protection Plan for a second or subsequent occasion but, in general, a low figure is seen as giving some indication that the presenting issues have been effectively addressed to the extent that the child is no longer in need of a plan of protection into the future. Thurrock and Southend performed better than the England average in terms of the percentage of children who became the subject of a Child Protection Plan, or were registered during the year, who had previously been the subject of a Child Protection Plan or had been registered. However, ECC performed worse than the national figure on this measure, with five districts having a percentage that is nearly double the national average.



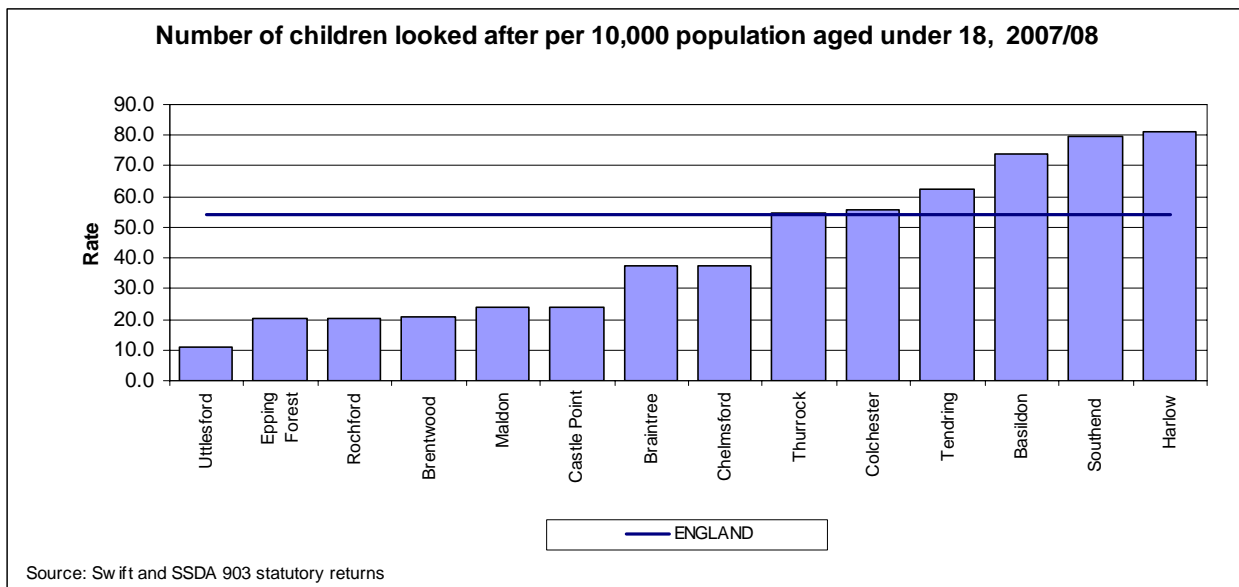
### *Looked after children*

Looked after children are those children who are looked after by the local authority either through a voluntary arrangement or court order and are, by definition, vulnerable

children. There is a particular responsibility therefore on the county council to provide these children with a safe and secure childhood.

Nationally, looked after children are seven times more likely than their peers in the wider population to suffer from mental health problems. 20% have a statement of special educational need (compared with 3% of the general population). Young people who were looked after at one point are twice as likely to become teenage parents. Looked after young people are over-represented in the youth justice system while about a quarter of adults in prison were looked after as a child. Between a quarter and a third of rough sleepers were looked after at one point in their lives.

The rate of children looked after by ECC and Southend remains high in comparison with the national average, while the Thurrock rate is close to the England figure. Harlow, Southend, Basildon and Tendring have the highest rates of looked after children pan-Essex. There are 1,272 looked after children in ECC districts, 280 in Southend and 197 in Thurrock.

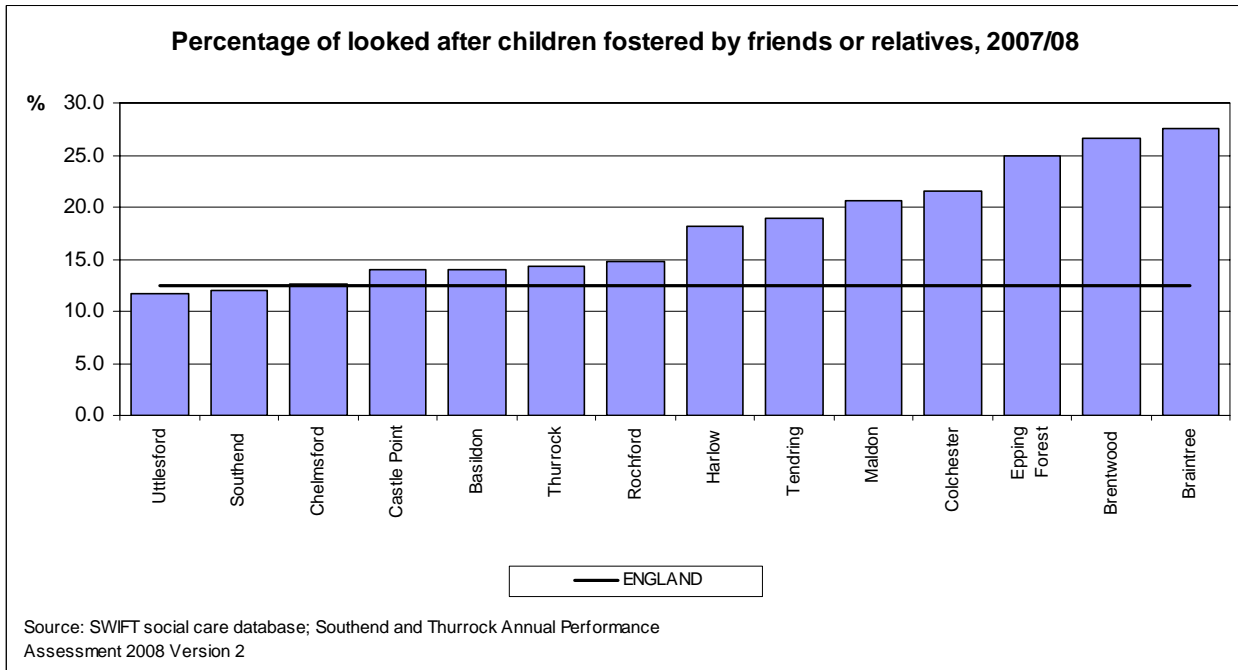
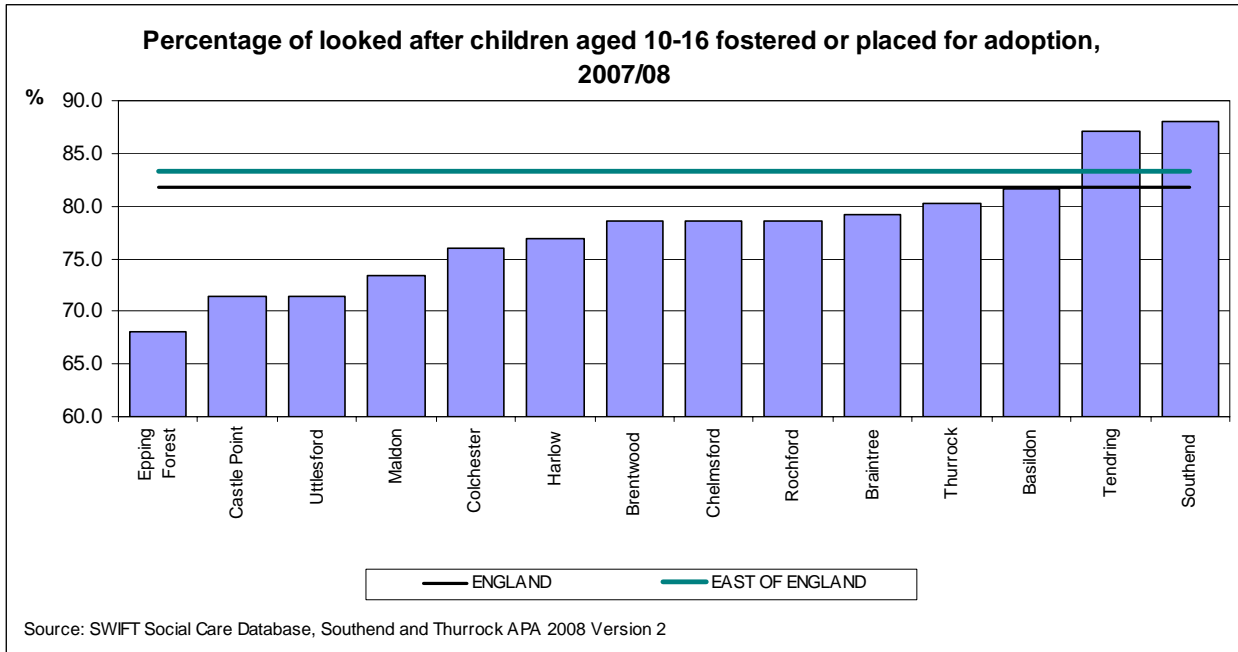


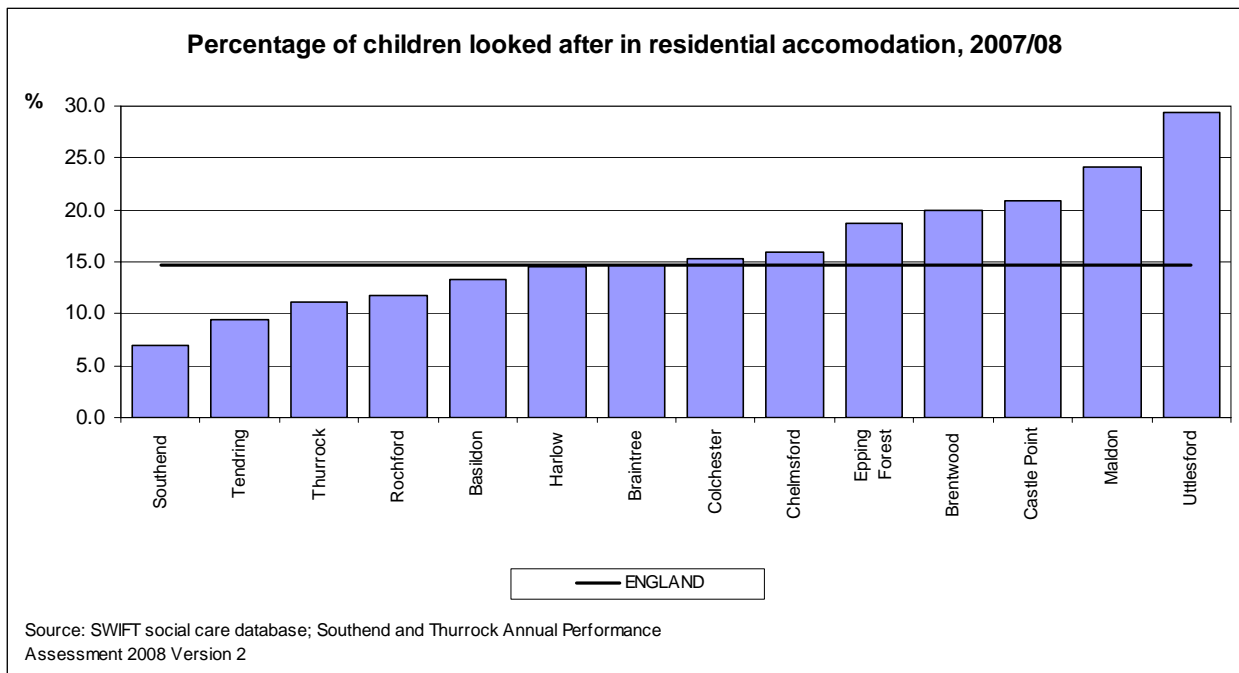
### *Placements of looked after children*

Current good practice considers foster care to be suitable for the majority of children, since most children's needs are such that they will make better developmental progress in family settings rather than in residential care. The next most suitable placement for children other than with their parents are kinship placements (also known as family and friends care, relative care and network care). Residential placements are considered to be suitable only for a relatively small percentage of children, including children with very complex needs in residential placements and boarding schools.

ECC and Thurrock place fewer children aged 10-16 with foster carers than in the whole of England, while Southend places more children with foster carers than the national average. However, ECC and Thurrock place a higher percentage of looked after children in kinship placements than England or Southend. Southend and Thurrock have

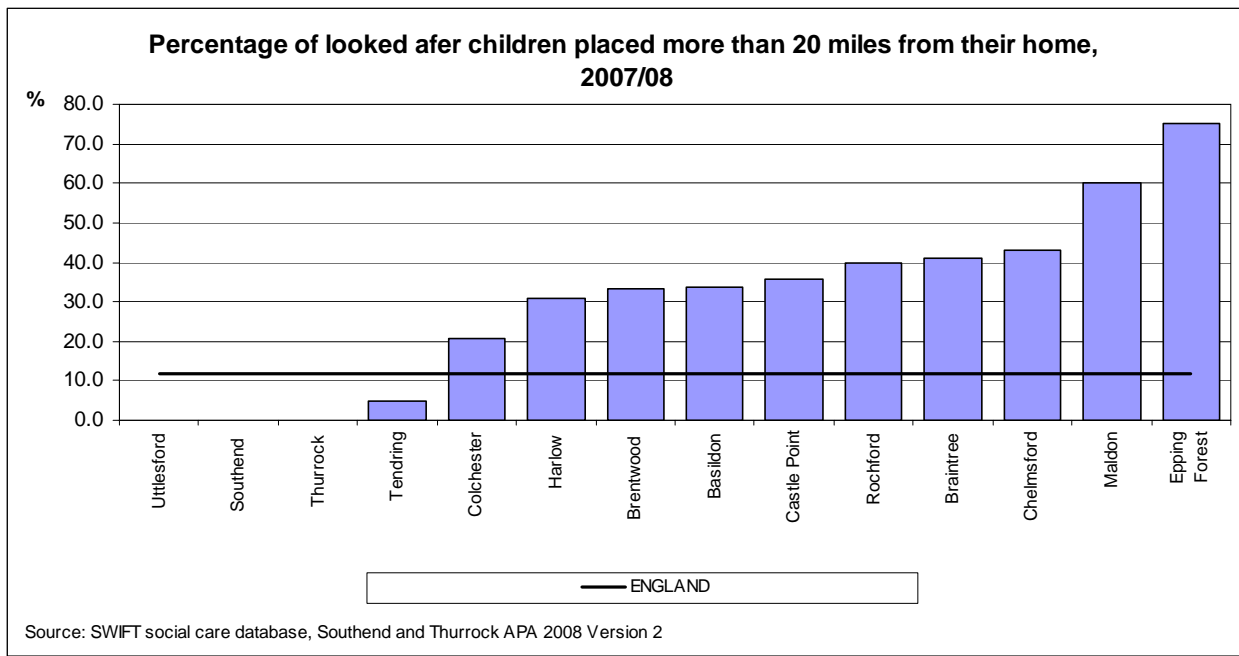
a much lower percentage of children placed in residential care than the national average, while ECC's percentage is the same as that of England.



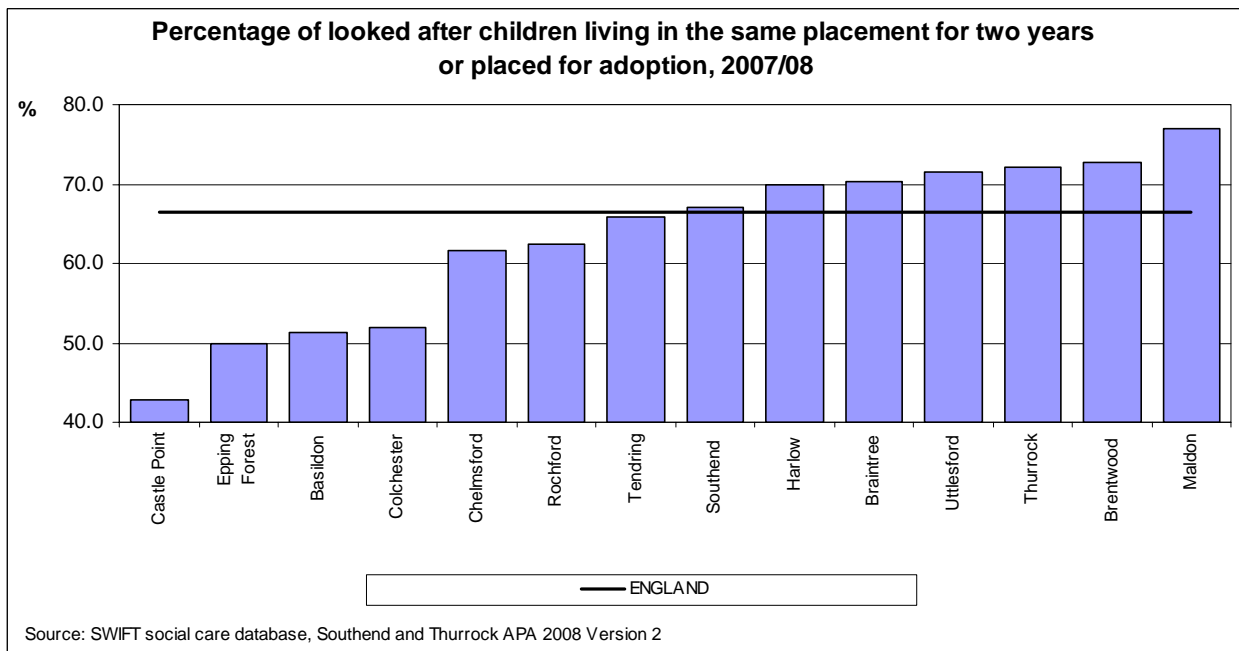


The Care Matters white paper states that “*a successful, stable placement is central to supporting the needs of children in care*”. Stability for young people encompasses stability of relationships, health care, education, community and personal identity, as well as placement moves. Stability of placement is associated with a range of better outcomes for looked after children: as well as contributing to emotional development and general well-being there is strong evidence that a stable placement is also key to educational achievement and to providing the continuity necessary to access other key services.

At the point of first placement ECC placed 32.0% of newly looked after children further than 20 miles of their home in 2007/08, more than double the England average of 11.9%. While Southend and Thurrock did not place any children more than 20 miles from their home, within ECC districts only children in Uttlesford were not placed more than 20 miles from their home



In 2007/08 60.0% of children in ECC districts (aged under 16 who had been looked after continuously for at least two and a half years) had lived in the same placement for at least two years, or were placed for adoption. This percentage has increased over the last five years both nationally and pan-Essex. The ECC percentage is lower than that for England (66.5%) while Southend (67%) and Thurrock (72.1%) are higher than the England percentage.



### Adoptions

Children prefer the sense of security that adoption gives them over long term foster placements but older children do not wish to make the complete legal break with their birth family that comes with adoption. There is clear evidence that children who remain

in the care system are likely to lead fragmented lives in leading to poor outcomes. Adoption provides stability and a sense of emotional and legal permanence.

The number of children referred to the ECC Adoption Service has fallen over the past three years, in line with the national trend. In 2007/08 56 children in ECC districts were placed for adoption, a slight decrease on the previous year. Southend and Thurrock also saw a decrease in 2007/08, to 16 and 11 children respectively.

#### Children placed for adoption

	<b>2005/06</b>	<b>2006/07</b>	<b>2007/08</b>
ECC	87	60	56
Southend	14	22	16
Thurrock	6	17	11

Source: ECC, Southend and Thurrock social care teams

Successful adoptive parenting of children placed as infants relies on: the parents' ability to accept the child's dual identity; the emotional significance which the birth family will always have for the child; and the adoptive parents' view of themselves as new parents. Placements and outcomes are more at risk the longer children are looked-after and the older they are at placement.

#### *Care leavers*

Half of the young people aged 16 or over who cease to be looked after in England every year are aged 16-17 when they leave care, while most of the rest leave on their 18th birthday. In contrast, the average age at which all young people leave home is 24. Housing is a critical area in which positive post-care intervention can make a significant difference. Young people in secure accommodation (ideally living with family members, in a substitute family structure, or in supported housing) are more likely to enter and remain engaged in their chosen activity. Care leavers report high levels of need for health services, particularly mental health services, but service provision for them is not well developed.

There were 600 care leavers in ECC districts in 2007/08, with the highest number in Basildon and Braintree. In Southend there were 27 care leavers in 2007/08. In ECC the proportion of care leavers in suitable accommodation increased from 81.4% in 2006/07 to 95.9% in 2007/08, higher than the England average of 88.4% for the first time in three years. In Thurrock the proportion rose from 65.5% to 85.7%, but was still lower than the national average. The highest rate was achieved in Southend where the proportion rose from 86.7% to 92.6%.

#### *Children in need from ethnic minority groups*

9.9% of looked after children and young people in ECC and 11.5% of those subject to a Child Protection Plan are from an ethnic minority background. This is compared to the 8% of pupils in both primary and secondary school who are from a BME background. The highest proportions of BME looked after children in ECC districts are in Brentwood, Harlow and Rochford while the lowest are in Maldon and Tendring. (Brentwood, Harlow

and Epping have the highest proportions of BME children, with around 13% of pupils coming from BME backgrounds in each district.) In Southend 10% of looked after children are from a BME background compared to 16% of the pupil population. In Thurrock 19% of looked after children and 22% of those subject to a Child Protection Plan are from an ethnic minority background, compared to the 21% of pupils in primary and secondary schools who are from a BME background.

In 2007/08 ECC was supporting 119 Unaccompanied Asylum Seeking Children (UASC). Of these, 23 children under 16 plus 17 young people aged 16-17 were looked after under Section 20 of the 1989 Children Act, 35 young people aged 16-17 were supported under Section 23a of the Children Leaving Care Act, and 44 young people over 18 were supported under S23c of the Children Leaving Care Act. There were no UASC in Southend and 20 in Thurrock.

### *Children and young people with disabilities*

There is a rising population of children with disabilities nationally, with two main elements: a growing number of children with profound learning disabilities and/or multiple complex health needs; and a growing number of children with autistic spectrum disorders some of whom have very challenging behaviour. There are no accurate figures to show the number of disabled children in England, and therefore in Essex. A rough estimate would suggest that there are approximately 700,000 children with disabilities in the country, of whom about 180,000 are severely disabled. This would represent around 23,000 children with disabilities pan-Essex, of whom about 6,000 would be severely disabled.

The ECC Children with Disabilities Team currently supports around 1,200 children, but not all of these have disabilities as the figure includes siblings (work is currently underway to establish disability need codes). There are around 175 children supported by the Children with Disabilities Team in Thurrock and 198 in Southend.

It has been estimated that the annual costs of bringing up a disabled child are three times greater than those for a child who is not disabled. Around 55% of families of disabled children have a low income: mothers of disabled children are less likely to have paid employment than other mothers and fathers' employment and earnings are reduced. Families with disabled children often face high levels of day-to-day stress, and many have high levels of unmet need for support services, which can lead to higher levels of stress and ill health than those experienced by other parents. Families of disabled children commonly experience exclusion from ordinary child and family activities, as well as some mainstream and community services, including education, healthcare, leisure activities, transport and housing

Many children and young people with complex health needs or life-limiting illnesses need psychological and emotional support to minimise stress. In addition, these children and young people are significantly more vulnerable to mental health problems than other children: 30-50% of young people with a learning disability also have a mental health problem. Disabled children have often found it difficult to access child and adolescent mental health services. There have been particular difficulties for children and young people who have autistic spectrum disorders or learning disabilities.

### *Transition for children and young people with disabilities*

Transition refers to the services and opportunities offered to young people with disabilities aged 13–25 as they grow up and move from childhood to adulthood. It involves a range of services, including children’s social care, special educational needs services, adult social care, schools, health, Connexions and the Learning and Skills Council. Around the age of 18 and 19 years most of these young people who have continuing support needs have to move from children’s services into adult services. The numbers of young people in ECC entering adult social care services (and the cost of new and existing cases) have been increasing over the last five years, as shown in the table below.

<b>Year</b>	<b>Number</b>
2002/03	87
2003/04	82
2004/05	122
2005/06	109
2006/07	114
2007/08	156

### *Young people and anti-social behaviour*

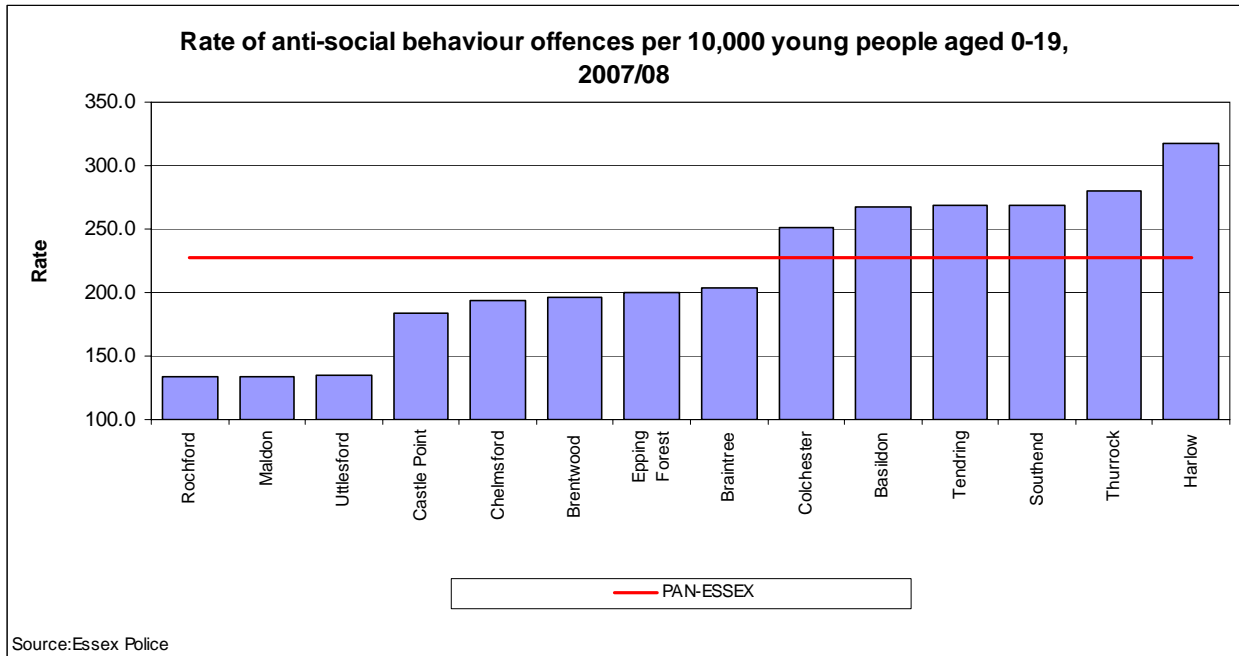
Of the 23% of young people nationally who have committed anti-social behaviour in the last 12 months, most have only done so once or twice. Similar to offending, males are significantly more likely than females to have committed anti-social behaviour in the last 12 months. 10-17 year olds are more likely than 18-25 year olds to have committed anti-social behaviour.

There are a range of factors which are strongly associated with anti-social behaviour by individuals. These factors tend to go together, so the chance that people will become drawn into anti-social behaviour increases as more are present. They include:

- **Parenting** – poor parenting skills, weak parent/child relationships and sometimes parental involvement in crime or anti-social behaviour.
- **School** – truancy and exclusion and schools where poor behaviour is not challenged enough.
- **Community factors** – living in deprived areas where there is disorder and neglect, peer involvement in anti-social behaviour.
- **Individual factors** – drug and alcohol misuse and early involvement in anti-social behaviour.

Anti-social behaviour at age ten is a powerful predictor of the total cost of public services used by 28 years of age, with criminal justice costs the highest. Children who engage in anti-social behaviour from an early age are disproportionately likely to face a lifetime of social exclusion and offending. There appears to be a lack of robust evidence about what works in preventing anti-social behaviour: the government plans to carry out an evaluation of the use and effectiveness of different approaches to tackling the causes of bad behaviour, effective ways of intervening early before problems become serious, and providing integrated support to young people.

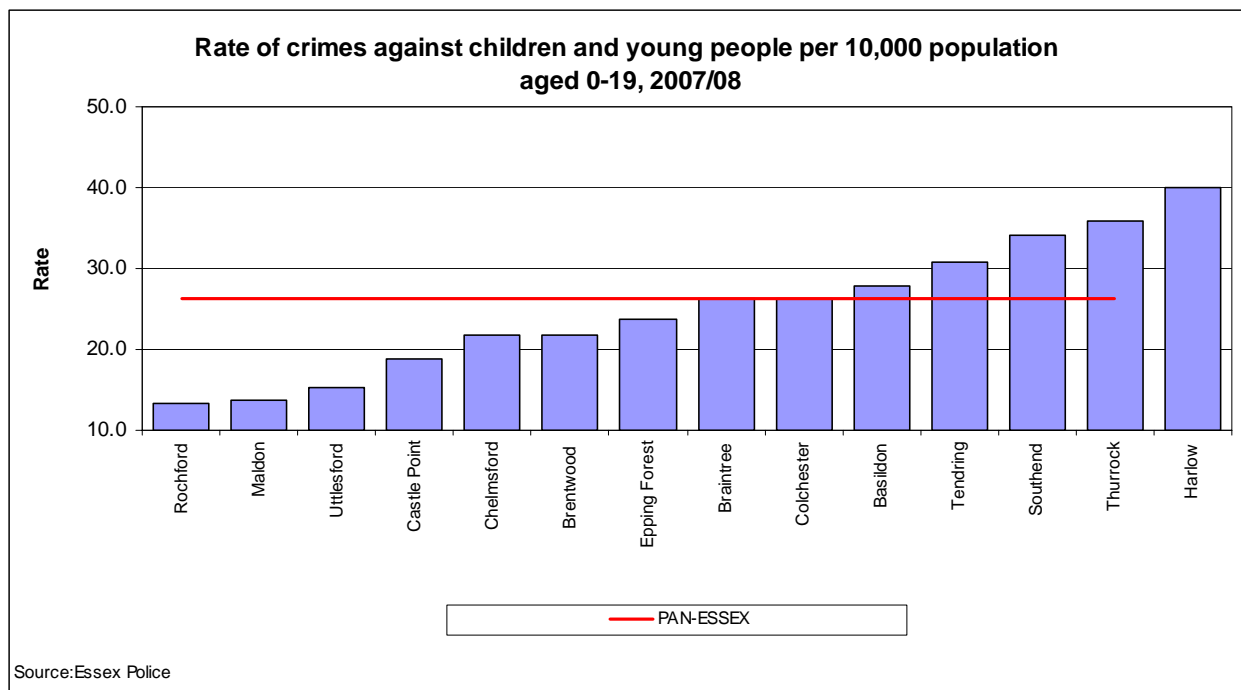
Essex Police recorded nearly 93,000 incidents of anti-social behaviour (covering offenders of all ages) pan-Essex in 2007/08, with the highest rates being recorded in Harlow, Thurrock, Southend, Tendring and Basildon.



### *Crimes against children and young people*

The SHEU survey in 2008 (covering ECC districts only) found that 14% of secondary school pupils said they have been the victim of crime in the past 12 months: 5% have been attacked and 3% have had their mobile phone stolen. Half of these pupils said that it happened at school and 78% said it was by someone under 18.

Data from Essex Police show that there were 10,696 offences pan-Essex involving victims of crime aged 0-19 in 2007/08, down fractionally from a year earlier. The highest rate of crimes against young people (per 10,000 population aged 0-19) were recorded in Harlow, Southend and Colchester while those with the lowest rates were Rochford and Maldon.



### *Children and young people experiencing domestic violence*

The British Medical Association estimates that in 75-90% of incidents of domestic violence, children are in the same or next room. Research has found that in initial child protection conferences there is evidence of domestic abuse in approximately half of cases. It is estimated that around 10% of children and young people under 16 years old will have lived with domestic violence in their families in the past 12 months. Conservative estimates indicate that 30% of children living with domestic violence are themselves physically abused by the perpetrator, and also use domestic violence against their mothers. It is widely accepted that there are dramatic and serious effects of children witnessing domestic violence, which often result in behavioural issues, absenteeism, ill health, bullying, anti-social behaviour, drug and alcohol misuse, self harm and psychosocial impacts.

Figures from Essex Police show that there were 13,605 domestic violence incidents recorded in 2007/08 in ECC districts and 2,862 in Southend. The percentage of reported cases of domestic violence reviewed by ECC social care managers within five days of receiving a report increased to 34.2%, but was below the target of 40% in 2007/08. (NB: with over 1,000 incidents of domestic violence each month, the police only refer those seen as high risk.) This data is not collected by Thurrock.

### *Bullying*

Children and young people in ECC districts and Southend have identified bullying as one of their main concerns/priorities (in surveys carried out by SHEU, the Young Essex Assembly of ECC, the Southend Youth Council and during consultation on the Children and Young People's Plan in both Essex and Southend). National research shows that although around 10-20% of children and young people are being bullied at school at any one time, over half may have experienced bullying at some point. Bullied children often

have other education problems such as truancy, exclusions and poor school achievement. Bullying can cause a range of problems for the victims of bullying, including physical harm, and they are often unhappy, fearful and isolated. Victims of bullying tend to have low self-esteem and limited friendship networks, problems which bullying compounds. More than one in five severely bullied children will attempt to take their own life. Stopping someone from being bullied may increase their willingness to attend school, concentrate more fully on their class work and take an active part in school life.

Over half of children in the TellUs3 survey in 2008 said they had never experienced bullying at school (63% in Essex and 58% in Thurrock, with 69% saying this in Southend in 2007 - due to incomplete coverage in the 2008 TellUs3 survey for Southend, results are not comparable to Essex and Thurrock). However, 17% of pupils in Essex and 14% in Thurrock reported bullying within the last month (13% in Southend in 2007), with 8% and 6% (5% in Southend in 2007) reporting being bullied "most days". According to the 2008 SHEU survey in ECC districts, fewer pupils in Tendring, Epping Forest, Chelmsford and Colchester said they were afraid to go to school because of bullying while Braintree and Maldon had the highest percentage of pupils saying this.

According to TellUs3 in 2008, 31% of respondents in Essex and 30% in Thurrock (57% in Southend in 2007) felt that schools dealt with bullying "very/quite well". A larger percentage in Essex (46%) and Thurrock (51%), compared to 44% nationally, felt schools dealt with bullying "not very well/badly", but only 31% in Southend in 2007.

Anti-bullying work is only a generation old and there is still limited evidence about what works well. There are a number of different approaches to working with bullies to change their behaviours, ranging along a dimension from punitive to non-punitive or restorative practices such as the support group method. There is little evidence that punitive approaches change behaviour, but some that problem-solving approaches can have a positive effect. The diversity of bullying and the diversity of children mean that one-size-fits all solutions are ineffective. Interventions need to be consistent, inclusive and cross-curricular with a whole school approach, and need to incorporate regular monitoring, evaluation and adaptation. There should be a layered approach to tackling bullying, consisting of three elements: prevention, assessment and intervention.

### *Homeless young people*

There are four groups of children and young people who are at particular risk of poor outcomes resulting from homelessness:

- 16 and 17 year olds who are homeless or at risk of homelessness.
- Care leavers aged 18 to 21.
- Children of families living in temporary accommodation.
- Children of families who have been, or are at risk of being, found intentionally homeless by a housing authority.

A fifth of 16-24 year olds experience homelessness at some time in their lives. The odds of experiencing homelessness are higher among young people who: have been in care; have experienced disruption or trauma in childhood (including domestic violence); were excluded from school; have no educational qualifications; were runaways under age 16; or are from disadvantaged socio-economic backgrounds. Homeless young people are

more likely to sleep in dangerous places, travel longer distances and have mental health, drug and alcohol problems.

In 2007/08 Essex districts councils accepted just over 2,000 cases as homeless and in priority need while Southend accepted 50 and Thurrock accepted 180. Based on these figures it is estimated that around 170 16/17 year olds and 18-20 year old care leavers were accepted pan-Essex as being homeless. In addition, just under 1,300 families with dependent children, around 260 people who were pregnant (with no other dependent children) and about 75 families experiencing domestic violence would have had homelessness applications accepted.

### *Young runaways*

The Children's Society estimates that around 100,000 young people under the age of 16 run away from home or care each year across the UK, a quarter of these being under 11 years old. This would indicate that there are around 2,300 young runaways in Essex, 250 in Southend and 250 in Thurrock.

Just over half of young runaways return to their home or care placement after one night away. However, around one in eight young runaways run at least three times, one in six sleep rough and one in 12 are hurt or harmed while they are away. Repeated running is especially destructive and likely to lead to greater risks of abuse and exploitation, involvement in criminal activity, prostitution or substance misuse. Running away at a young age is also a strong predictor of homelessness and social exclusion as adults.

## **3. ENJOYING AND ACHIEVING**

The 200,000 school pupils in ECC districts attend 571 schools: 80 secondary, 470 primary (including infant, junior and primary) and 19 special schools. Southend has 27,000 pupils attending 54 schools: 37 primary (including infant, junior and primary), 12 secondary and 5 specials. The 23,000 school pupils in Thurrock attend 55 schools: 10 secondary (one of which is an academy), 43 primary (including infant, junior and primary) and 2 special schools.

The 75,000 children aged 0-5 years in ECC districts have access to 1,575 registered child minders and 637 nurseries and pre-schools. There are an estimated 11,500 children aged 0-5 years in Southend and these children have access to 191 registered child minders and 77 nurseries and pre-schools. In Thurrock there are around 10,300 children aged 0-5 with 215 child minders and 77 other providers of day care.

The TellUs3 2008 survey shows that the county's children mostly mirror the national average with 49% in both ECC and Thurrock saying that they enjoy school "always/most of the time" compared to the national average (50%). The figure for Southend in 2007 was 59% (due to incomplete coverage in the TellUs3 survey for Southend, results are not comparable to Essex and Thurrock). 79% of children in ECC and 81% in Thurrock say that they tried their best "always/most of the time", compared with the national score of 81% (this is 77% for Southend in 2007).

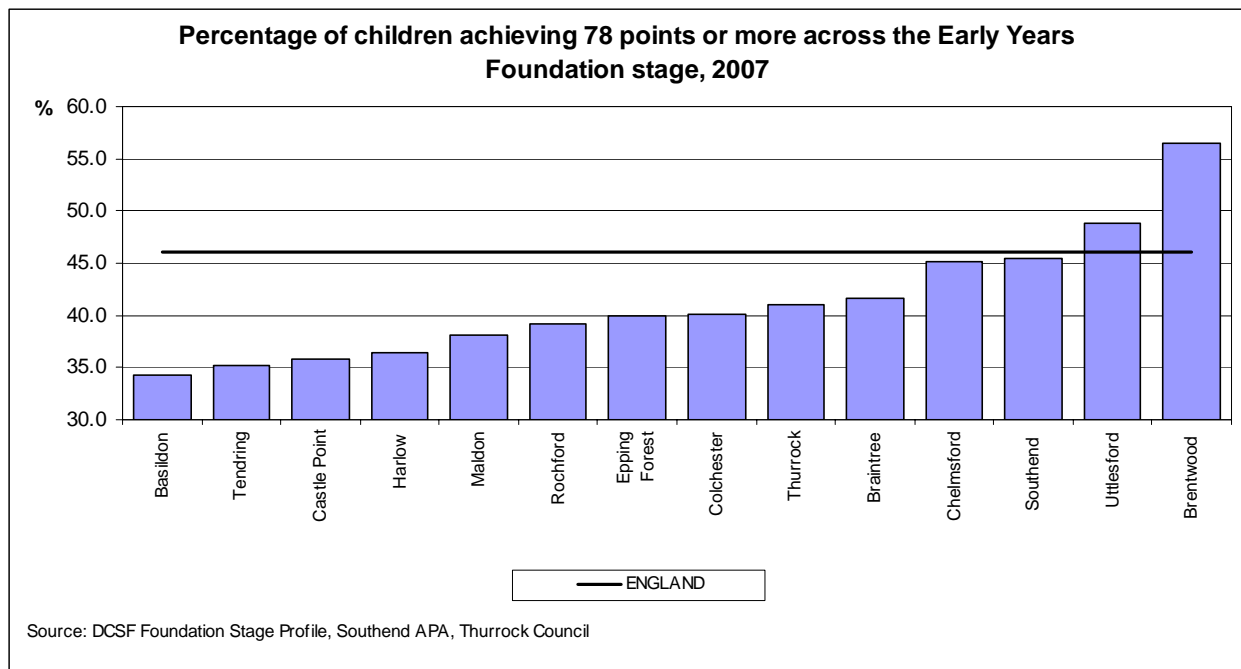
Children's Centres, developed from Sure Start local programmes, aim to provide multi-agency services that are flexible and meet the needs of young children and their families. Although the first phase created centres based in the 20% most disadvantaged wards in England, the latest phase of the national rollout will provide improved access to services for families living in less disadvantaged and more affluent areas. There are now 60 children's centres operating in ECC districts, 11 in Southend and 10 in Thurrock.

### *Overall attainment*

The early years are crucial to a child's chances of later success as children who achieve well in their early years are much more likely to be successful in future education and in later life. Children growing up in disadvantaged circumstances are at greater risk of developing cognitive and behavioural adjustment problems during childhood, which in turn influences later outcomes regarding education, employment, health and social integration. The Foundation Stage Profile assesses children according to 13 assessment scales.

### Foundation Stage achievement

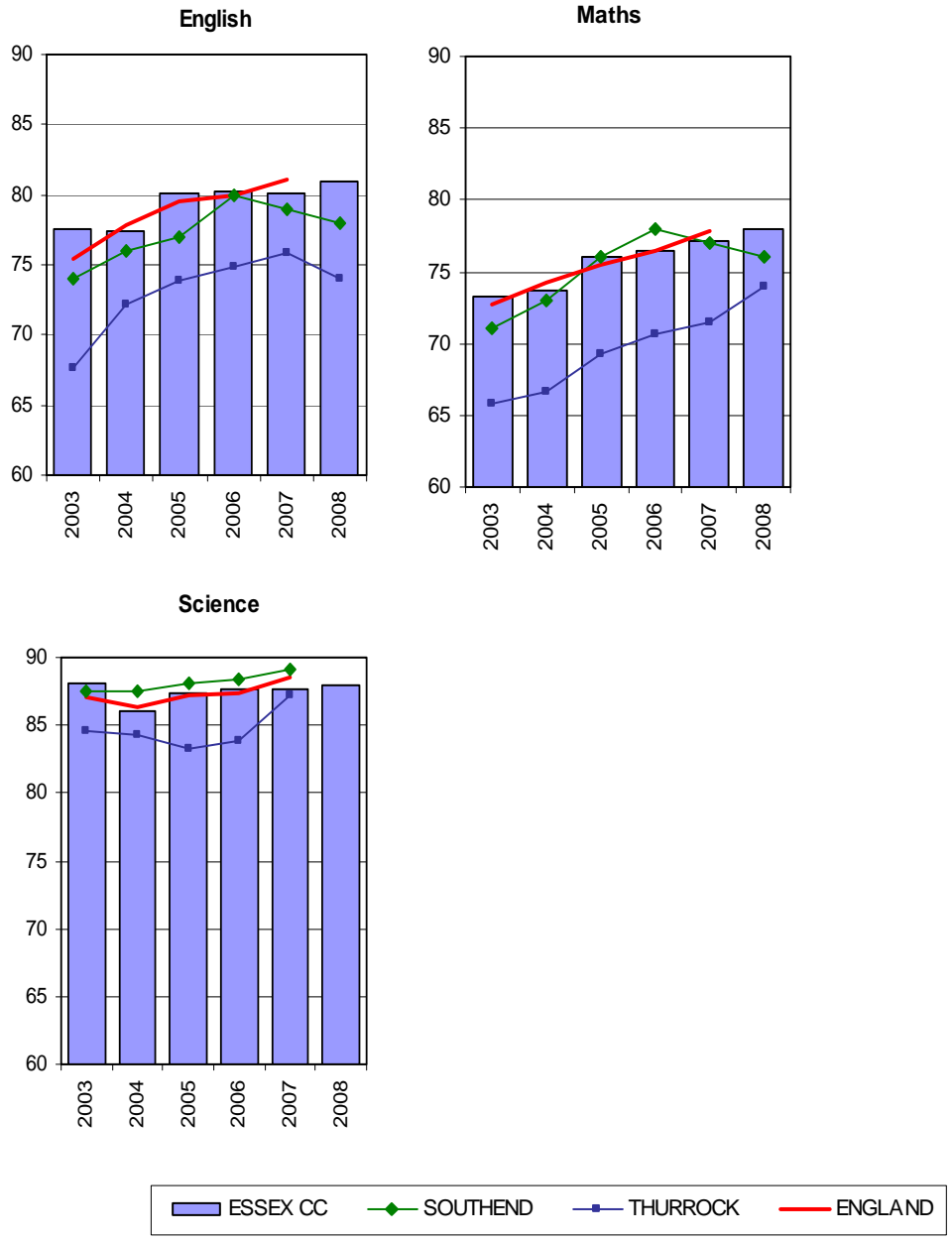
In 2007, achievement in the Foundation Stage (in terms of the percentage of children achieving 78 points or more across the Early Years Foundation stage with 6 or more in each of Personal, Social and Emotional (PSE) and Communication, Language and Literacy (CLL) skills) in all three authorities was lower than the England average. Only Brentwood and Uttlesford achieved a higher percentage than the national average.



Educational attainment at Key Stage 2 is a key indicator of attainment at the end of Key Stage 4 and, as a consequence, a key influence on a young person's life chances. Nationally, about 75% of pupils who achieve Level 4+ at Key Stage 2 go on to achieve 5+ A\*-C grades at GCSE. Of the children who do not achieve Level 4 at Key Stage 2, fewer than 20% go on to achieve these GCSE grades or equivalent.

Outcomes at the end of Key Stage 2 in 2008 were lower than the England average for all three authorities in 2007, although they improved in 2008 in all three subjects for ECC and in Maths for Thurrock.

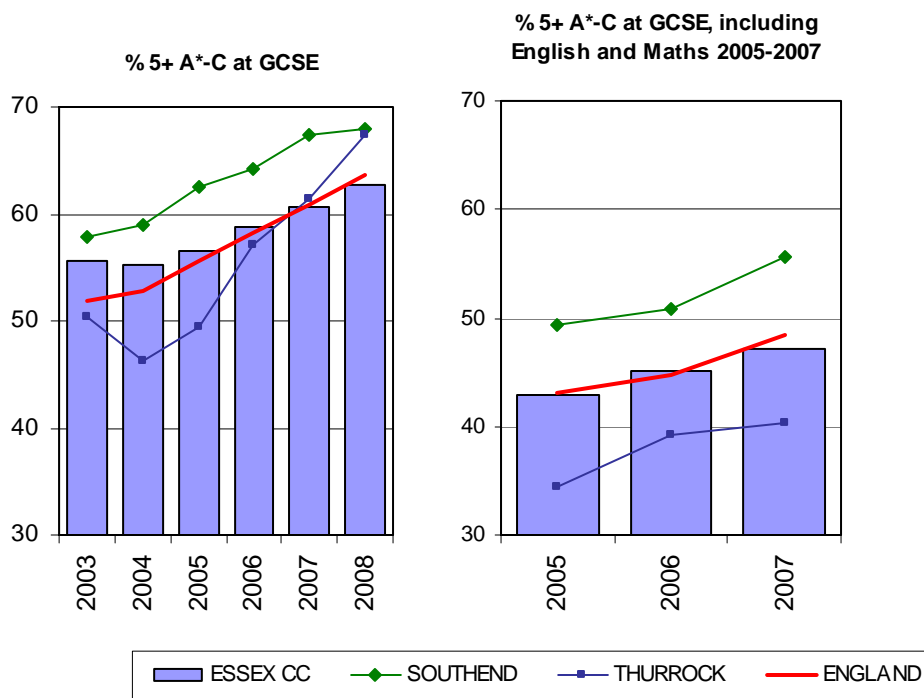
Percentage of children achieving Level 4+ at KS2 by subject



The percentage of young people achieving five or more A\*-C grade passes at GCSE continues to rise as does the figure if the five passes include English and mathematics. In 2008, Southend (68.0%) and Thurrock (67.3%) performed significantly above the England average of 63.7%, while ECC was slightly below the national average at 62.7%. In ECC districts Uttlesford had the highest percentage of young people achieving five or more A\*-C grade passes at GCSE (71.0% compared to 62.7% for ECC overall) while Braintree had the lowest percentage (55.6%). Tendring (59.3%), Epping Forest (58.3%),

Harlow (58.3%) and Maldon (58.8%) also had percentages that were considerably lower than the Essex average.

Percentage of children achieving 5+A\*-C GCSE grades



In 2004 the government defined the notion of the “floor target” setting out basic expectations of secondary schools in respect of GCSE outcomes. In 2004 the government set a target that in all mainstream, maintained schools 60% of pupils aged 16 years should achieve the equivalent of 5 GCSEs at grades A\* - C by 2008.

In 2005 ECC was performing well relative to the England average but more recent figures suggest that performance has weakened. In 2007, five ECC schools achieved below 30% of the floor target out of 80 mainstream, maintained schools in the county. In 2007 two from 12 Southend schools and 3 from 10 Thurrock schools achieved below 30% for 5+A\*-C including English and Maths.

### *Low attainment*

The factors associated with low achievement are eligibility for free school meals, levels of unemployment, single-parent households, having parents with low educational qualifications and being persistent truants. Disadvantaged students are more likely to attend poorly performing secondary schools. Poor reading and writing scores at primary school are significantly associated with later low achievement.

Boys outnumber girls as low achievers by 3:2. National data shows that Pakistani, Bangladeshi, Black Caribbean and Black African groups achieve a KS3 average points score around 3.0 points less than White British pupils, which equates to around a whole year of progress in terms of National Curriculum levels. Gypsy/Roma and Traveller of Irish Heritage pupils perform considerably below the national average at all Key Stages. Pupils who report having been bullied do substantially worse in their GCSE exams than those who did not. Young people engage in risky behaviours, for example smoking or taking drugs, have much poorer attainment than those who have not.

Ofsted has identified the features of local authorities that are judged to be excellent in terms of narrowing the gaps in attainment and achievement for particular groups. These higher performing councils: have developed strong partnerships with schools, other agencies and parents; provide a good start for children through high quality early years provision; provide strong support for schools; focus on standards and achievement from the early years through all the key stages; maintain a clear focus on raising standards and on narrowing the gap in outcomes achieved by different groups of children and young people; improve attendance; promote inclusion; and provide a wide range of universal and targeted out-of-school-hours learning and leisure opportunities.

### *Attendance and exclusions*

Reducing truancy and exclusion levels are an important part of Government social inclusion policy. Young people who attend school regularly are more likely to get the most they can out of their time at school, and are therefore more likely to achieve their potential, and less likely to take part in anti-social or criminal behaviour. There is some evidence that poor literacy levels are, in some cases, a causal factor of poor attendance and exclusions. Half of school exclusions and 46% of school non-attendance is in some way related to bullying. The permanent exclusion rate nationally among looked after children is ten times higher than the average while as many as 30% are out of mainstream education, whether through exclusion or truancy.

Truants tend to be older pupils, with parents who are in low skilled jobs, from poorer backgrounds, and more likely to be in local authority housing. For boys, living in a single parent family appears to be a risk factor. Young people who are permanently excluded from school are more likely to come from one-parent families, and have a much lower rate of adult involvement in their lives. National data suggests that boys are far more likely to be excluded than are girls, and are also more likely to be excluded at a younger age. Children with special educational needs are over three times more likely than the rest of the pupil population to be excluded. There are also significant differences in the rate of exclusion between different ethnic minority groups, with high rates particularly among children from traveller families, Black Caribbean and black African pupils.

Absence rates in primary schools

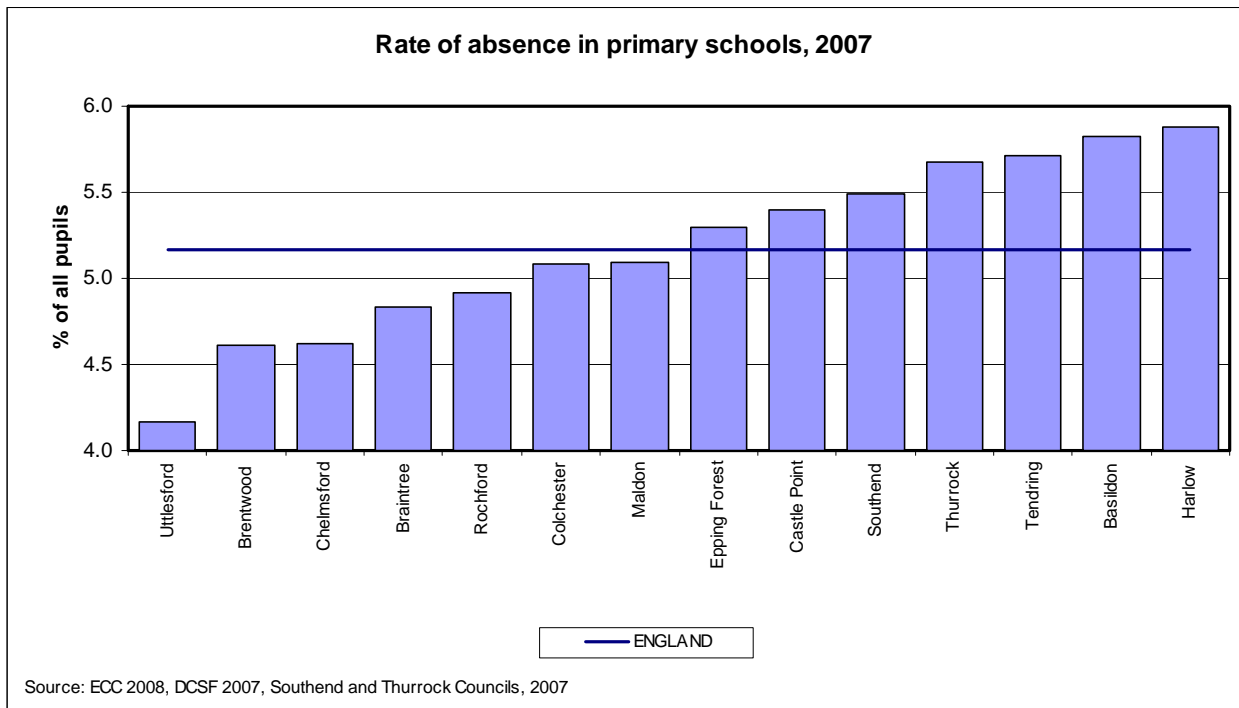
%	2003	2004	2005	2006	2007	2008
Essex	5.87	5.62	5.46	5.68	5.16	5.17
Southend	7.00	5.72	5.84	6.06	5.49	5.40
Thurrock	6.78	6.16	6.24	6.11	5.68	5.70
England	5.80	5.49	5.42	5.75	5.17	

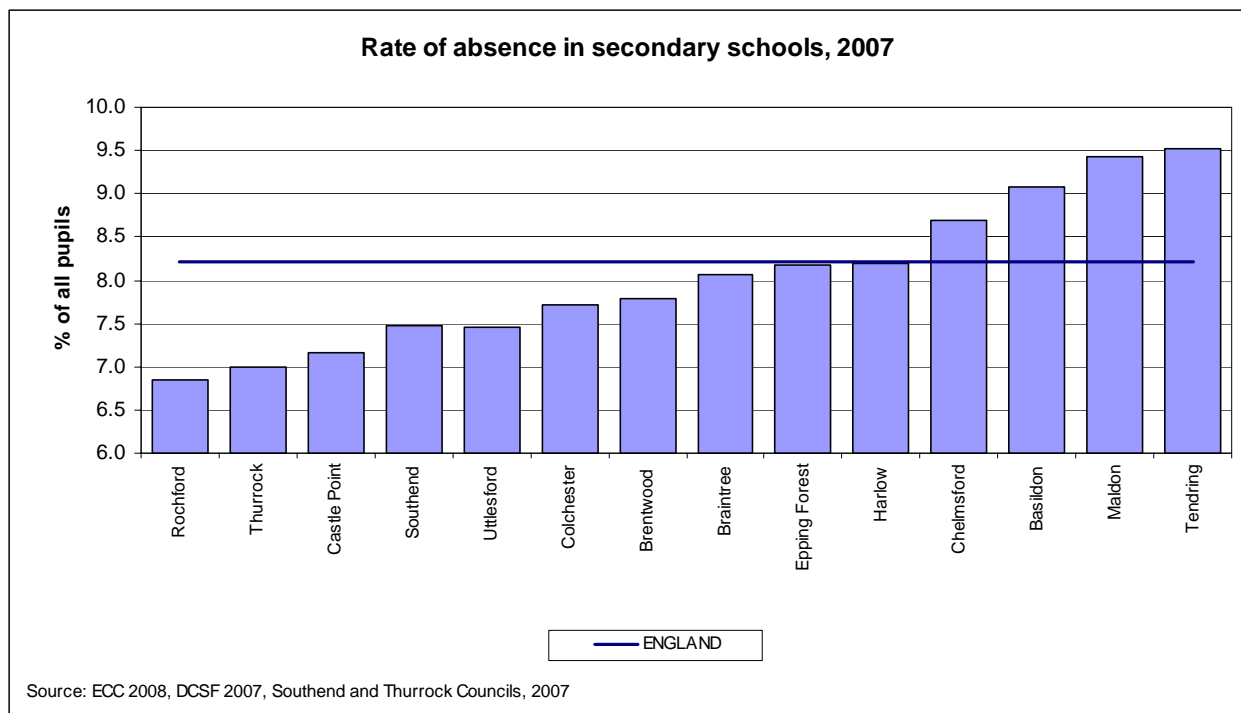
Absence rates in secondary schools

%	2003	2004	2005	2006	2007	2008
Essex	8.06	8.00	7.91	8.08	8.03	8.22
Southend	8.45	8.57	7.65	7.69	7.47	7.60
Thurrock	7.66	8.47	8.13	7.37	7.47	6.89
England	8.26	8.03	7.80	7.91	7.69	

Source of both tables above: ECC 2008, APA 2008 for Southend and Thurrock

Absence rates in primary schools are generally falling in all three authorities, in line with the national pattern. In secondary schools, absence rates in Southend and Thurrock are slightly lower than the national average while ECC rates are higher.





Fixed term exclusions were 1.37% in 2007 in ECC primary schools and 1.44% in Thurrock, higher than other primary schools in England (1.04%), whereas exclusions in Southend (0.54%) were well below the national average. In secondary schools, fixed term exclusions in ECC schools fell to 12.9% in 2007, compared to the England rate of 10.8%. Although they rose to 7.9% in Southend, fixed term exclusions were still lower than the England average while in Thurrock fixed term exclusions fell to 16.6%, considerably higher than the England average.

There is now a sufficient quantity and range of good practice to show that schools can substantially cut truancy. The most effective anti-truancy measure is to act quickly and consistently, and always to contact parents immediately children are absent. Other effective practices in schools are: having a clear policy on attendance that is communicated to all parties, (children, teachers, parents, ancillary staff and the local community); collection and regular analysis of reliable attendance data; unambiguous discipline policies, applied consistently to stamp out bullying and negative peer pressures; dealing early with children's literacy and numeracy problems so they catch up academically; offering an alternative curriculum; and providing extra-curricular activities.

There are often good reasons for schools to exclude pupils, but national studies show that too many children are being excluded for relatively minor reasons or because they needed help they didn't get. There is now enough good practice to show that exclusion and truancy are not insoluble problems. Effective solutions for reducing school exclusions depend on: having clear goals and a clear allocation of responsibility, encompassing not only schools but also parents, the police and local authorities; having high standards, discipline, committed teachers and school management; identifying pupils causing concern, monitoring behaviour and progress; preventive work with children at risk of exclusion; tackling disaffection; school-based inter-agency meetings plus inter-agency working; case-based meetings involving participation by young people

and parents/carers; having professionals who are seen as informal, equitable and non-judgemental.

A report investigating the impact on the life chances of a group of young people following their exclusion found that the following factors were important in achieving 'engagement':

- That the young people had belief in their own abilities.
- That they received ongoing support from a link-worker or other skilled local authority staff after the permanent exclusion.
- That they had supportive family members or friends who helped to 'network' the young people into their communities.

#### *Education other than at school*

One national survey suggests that providing education outside of school costs about four times as much as mainstream schooling but that children receive on average only 10% of full education.

The ECC performance in the provision of full time alternatives for excluded pupils has now significantly improved, having been in the bottom quartile nationally. As at April 2008, 98.8% of permanently excluded pupils were receiving full-time alternative education. However, the provision by the sixth day after exclusion was only 39.2% and timely, full-time provision for young people in the Youth Justice system is unsatisfactory. This information is not collected by Thurrock.

There were 600 children aged 5 to 16 in ECC districts who were home educated as at 1<sup>st</sup> October 2008. Although it is not always possible to record the reasons why children are home schooled, bullying is often cited by families as is the lack of a school place at a chosen school. As at 1<sup>st</sup> December 2008 Southend had 44 children who were home educated and Thurrock had 74.

#### *Post 16 attainment*

Average point scores of 16-18 year olds entered for GCE/VCE A/AS in school with sixth forms

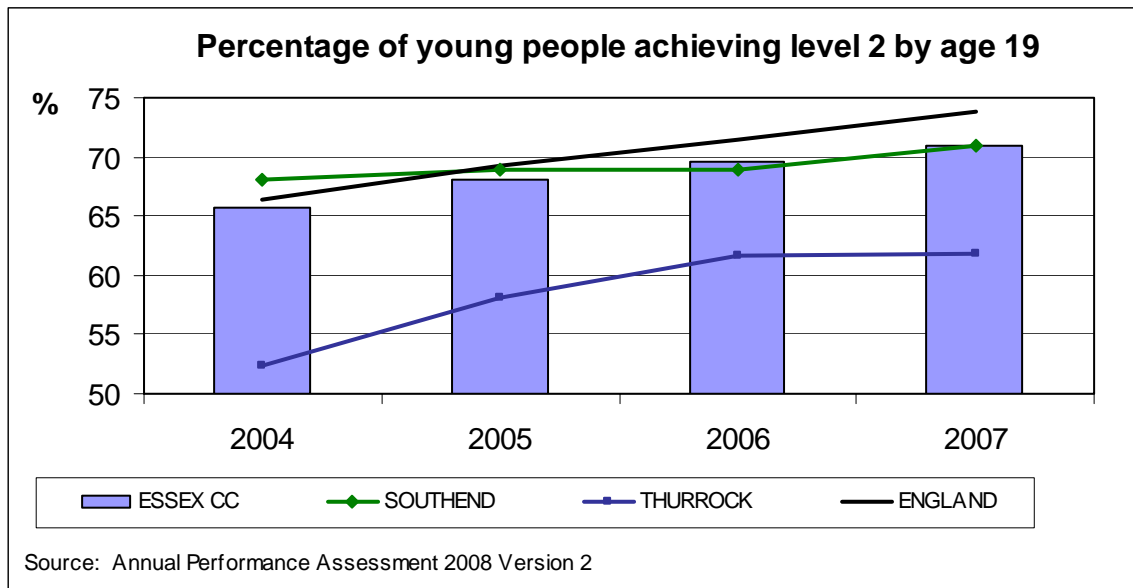
	<b>2005</b>	<b>2006</b>	<b>2007</b>
ECC	297.88	794.05	807.90
Southend	335.95	894.30	871.14
Thurrock	n/a	n/a	n/a
England	277.21	740.10	747.99

The average point scores in schools with sixth forms, based on the QCA tariff, in both ECC and Southend have been higher than the England averages for the last three years. The average point scores per subject have also been higher than the England averages. No data is available for Thurrock schools since the authority does not have any schools with sixth forms.

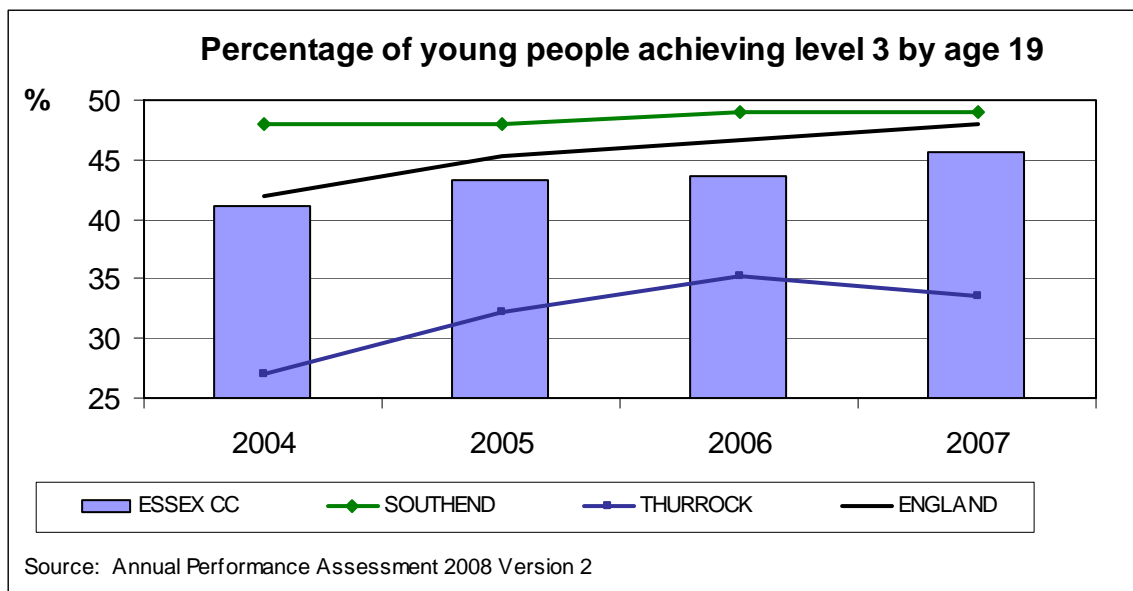
In college settings the success of students aged 16-18 in all three authorities across the range of course types (GCSE/A level, GNVQ etc) is broadly compatible across all areas with the national average scores achieved in those areas. Like the national averages the success achieved by ECC young people has increased between 2002/03 and 2005/06.

Young people achieving Level 2 and Level 3 by age 19

Improvements have been made in the percentage of young people achieving level 2 and level 3<sup>2</sup> by the age of 19. However the performance in Thurrock is significantly below that of ECC and Southend for both level 2 and level 3. All authorities are below the national average for level 2, but Southend is slightly above the national average for level 3 while ECC and Thurrock are below.



<sup>2</sup> Level 2 qualifications include 5 GCSEs at Grades A\*-C, BTEC First Diploma or OCR National Certificate Level 2, Level 2 NVQ, Intermediate GNVQ, RSA Diploma. Level 3 qualifications include 2 or more advanced level passes, 4 or more AS levels, NVQ Level 3 and GNVQ advanced, City & Guilds advanced.



### *Outcomes by gender*

National data shows that girls consistently outperform boys in attainment throughout each key stage. Boys are also more likely to be excluded from school than girls, accounting for 80% of permanent exclusions and three quarters of fixed term exclusions. Boys are more likely than girls to be identified with special educational needs: 70% of children with identified SEN are boys; boys are nine times as likely as girls to be identified with autistic spectrum disorder; boys are four times as likely as girls to be identified as having a behavioural, emotional and social difficulty (BESD).

Gender patterns remain relatively stable when looking at attainment across different stages of compulsory education nationally. Evidence from a variety of sources shows that the gender gap is wide in English and narrower in Maths with, on average, girls performing better than boys. The gender gap in the Sciences has been traditionally very small. There has been a long-standing gender gap at GCSE for those attaining five plus A\*-C, with the gender gap currently being nearly 10 percentage points nationally. There is a similar gap between the genders in ECC and Southend for pupils attaining five plus A\*-C grades in 2007 and a higher gap in Thurrock, with a similar pattern between the genders for five plus A\*-C grades including English and Maths.

### Percentage of pupils achieving 5+ A\*-C grades at GCSE

	<b>Boys</b>	<b>Girls</b>	<b>All pupils</b>
ECC	56.6%	65.0%	60.7%
Southend	63.8%	73.2%	64.7%
Thurrock	52.6%	68.1%	61.4%

Source: ECC, Southend and Thurrock councils

Girls are more likely to stay on in full time education at age 16 (82% of girls and 72% of boys nationally). Girls are also more likely to be entered for A Levels than boys (54% of entries are female). Gender differences in pass rate are much narrower at A Level than

at GCSE but gender differences still exist: across all subjects, the range of difference is four percentage points, in the context of a very high pass rate.

However, gender is not the strongest predictor of attainment. The social class attainment gap at Key Stage 4 is three times as wide as the gender gap while some minority ethnic groups attain significantly below the national average and their under-achievement is much greater than the gap between boys and girls. White, working-class, British boys have persistently been the worst performers over any other ethnic or gender groups in schools. The gap in attainment at GCSE between boys and girls does seem to vary by ethnic group, with Black Caribbean and Black Other pupils having wider gender gaps than other ethnic groups. In particular, Black Caribbean and Black Other boys are the least likely of any ethnic group to achieve 5+ A\*-C GCSE passes, but Black Caribbean and Black Other girls are not disadvantaged to the same extent.

### *Outcomes for young people from ethnic minority groups*

White British pupils (boys and girls) are more likely than other ethnic groups to persist in low achievement. Chinese and Indian pupils are most successful in avoiding low achievement while Afro-Caribbean pupils are the least successful, but their results are improving. National data shows that Pakistani, Bangladeshi, Black Caribbean and Black African groups achieve a KS3 average points score around 3.0 points less than White British pupils, which equates to around a whole year of progress in terms of National Curriculum levels. Gypsy/Roma and Traveller of Irish Heritage pupils perform considerably below the national average at all Key Stages.

In Essex, 69.4% of young people from a minority ethnic background achieved 5+ A\*-C grades at GCSE level in 2007, compared to 60.7% of all pupils. It was also the case in Southend and Thurrock that the performance of BME groups was higher than the average at 71.3% and 66.4% respectively, compared to 64.7% and 61.4% for all pupils.

### *Outcomes for looked after young people*

The young person's care experience impacts on their educational achievement. Because of their disrupted childhood (the majority of children who enter care are there because they have suffered abuse or neglect at the hands of their parents) a number are already struggling with their schoolwork when they enter care. Schooling is further affected by moves to new placements that sometimes also require a change of school. Getting behind in their work undermines young people's motivation and self-confidence. A third of looked after young people nationally reach 16 without any qualifications, compared to only 2% of all young people that age, and only 12% gain five GCSEs at Grades A\*-C, compared to 59% of their peers.

In 2003 the government set a target that 15% of looked after children would achieve five or more GCSE at A\* to C. In ECC districts just 9.6% of looked after children achieved 5+ A\*-C grades at GCSE in 2007 (compared to 60.7% of all pupils), below the England average of 10.7% and considerably below the 15% target. In Southend 11.1% of looked after children achieved 5+A\*-C grades at GCSE in 2007 (compared to 67.4% of all pupils), slightly above the national average but below the target. The percentage of looked after children in Thurrock achieving 5+A\*-C fluctuates widely from year to year, due to the small numbers of eligible children.

58.8% of looked after children in ECC districts, 59.3% in Southend and 54.5% in Thurrock had at least one GCSE at grade A\*-G or a GNVQ (compared to the England percentage of 57.3%) but this means that over 40% pan-Essex are gaining none.

While most looked after children have a school attendance similar to that of other children, there is a small but increasing group missing substantial periods of school. From 2002/03 to 2007/08 the percentage of children looked after by ECC for over 12 months missing at least 25 days of school rose from 6.7% to 17%, a rise that is much greater than the England average over this time which rose from 12% to 13%. (However, the reason for the sharp rise is due to more accurate measurement, and action taken during the year has led to an improvement in performance to 14.2% at the end of January 2009). The Thurrock performance has fallen during this period and is now in line with the national average at 13%, but the percentage in Southend has risen from 14.7% in 2006/07 to 16.9% in 2007/08.

#### *Outcomes for children with special needs*

The table below shows the number of pupils in 2008 with a Statement of Special Needs, on School Action Plus or on School Action.

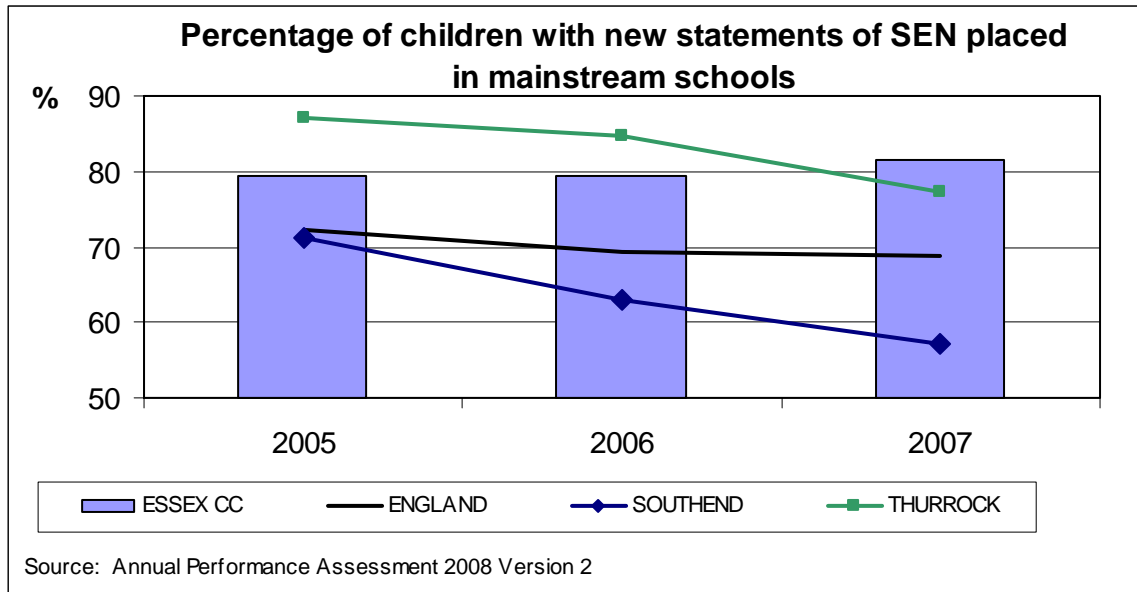
	<b>ECC</b>	<b>Southend</b>	<b>Thurrock</b>
Number of pupils with Statement of SEN	5,351	2,259	827
Number of pupils on School Action Plus	11,173		1,746
Number of pupils on School Action	17,865		3,231

The table below shows how many pupils with a Statement or on School Action Plus where the category of need was recorded, have a learning disability, have behaviour, emotional and social difficulties (BESD) and have a physical or sensory impairment.

	<b>ECC</b>	<b>Southend</b>	<b>Thurrock</b>
Number with learning disability	11,490	1,474	1,806
Percentage with learning disability	69.6%	65.2%	70.2%
Number with BESD	3,607	449	520
Percentage with BESD	21.9%	19.9%	20.2%
Number with physical/sensory impairment	1,040	121	177
Percentage with physical/sensory impairment	6.3%	5.4%	6.9%

In the UK the number of pupils with statements of SEN remains at just under 3% of the pupil population in England, but the number of pupils with SEN and no statement is estimated to be over 16% of pupils across all schools. ECC had 2.7% of pupils with a statement of SEN in 2008, Southend had 2.9% and Thurrock had 3.6%. The number of new statements of SEN in ECC has increased over the last three years, to 841 in 2007, compared to an overall decline in numbers in England. The number of new statements issued in Thurrock has fallen over the last three years to 101 in 2008. The number of new statements issued in Southend has risen over the last three years to 98 in 2007.

Of the children with new statements 81.6% were placed in mainstream schools in ECC, 57.1% in Southend and 77.2% in Thurrock, compared to 68.7% in England.



Nationally, the highest qualification of 48% of disabled young people aged 18/19 is at the equivalent of NVQ level 1 or below (including those with no qualifications) compared with 28% of their non-disabled peers. At foundation stage, just 7.1% of children with SEN in ECC schools achieved well in 2007 when Personal, Social and Emotional (PSE) and Communication Language and Literacy (CLL) are included, compared to 41 % of all children. 17.2% achieved 5+ A\*-C grades at GCSE, compared to 60.7% of all pupils. In Southend 15.4% of pupils with SEN (Statements, School Action Plus and School Action) achieved 5+A\*-C grades at GCSE, compared to 67.4% of all pupils.

#### *Outcomes for young people with mental health problems*

During adolescence most people begin to make decisions about their future. For many young adults perceived pressure from family and peers, and self-imposed expectations about life plans, such as education, careers and personal relationships, may trigger emotional and mental health difficulties. The onset of mental health difficulties during adolescence can have a major impact upon a young person's future and upon their desire and ability to access learning. Among people with common mental health problems, just under one in three have no qualifications, and only one-third have qualifications at GCSE level equivalent.

#### *Outcomes for young offenders*

National research shows that for a significant proportion of young offenders, experience of school has been very negative. Problems seem to surface at secondary school, as a result of which young people begin to truant. Almost 90% report having being absent from school at least once a week. Two-thirds leave school before the statutory leaving age, either because they are excluded or because they just stop going. Half of the young people in custody nationally are functioning below the level of the average 11-year-old on entry to the institution. More than a third of those of compulsory school age had a reading age of seven or less; and more than two-thirds are functioning below the

level of an average 11-year-old. Approximately half are functioning at or below the numeracy level of an average seven-year-old.

#### *Outcomes for young people who truant or are excluded from school*

Nationally only 13% of persistent truants achieve five or more GCSE grades A\*-C compared with 67% of those who never play truant from school. One fifth of those who persistently truant from school do not achieve any GCSE passes or equivalent in Year 11. 28% of young people who were persistent truants in year 11 are out of work, compared to 24% of truants who are in full-time education. Pupils with persistent absence are significantly more likely to engage in anti-social behaviour and youth crime and are more at risk of other negative outcomes (including teenage pregnancy, involvement in crime, drug and alcohol abuse, and being unemployed or homeless later in life). The pattern is similar for pupils who have been permanently excluded.

## **4. MAKING A POSITIVE CONTRIBUTION**

This outcome focuses on strategies and interventions that support the development of self confidence and self worth in children and young people through participation in decision making, positive activities and the encouragement of law abiding behaviour. There is a very limited data framework in this area and much is now dated.

#### *Participation in positive activities by children and young people*

One theme to emerge from the recent 'Good Childhood Inquiry' is that there are not enough structured activities available out-of-school, an opinion expressed by older children in particular. The cost of activities and public transport are sometimes seen as prohibitive but many children are also put off by the poor state of public spaces, which are often vandalised, dirty or feel unsafe. In addition, there is a wide gulf in access to stimulating and enriching experiences between the advantaged and the disadvantaged. The inquiry report suggests that this may contribute, at least in part, to some of the anti-social activity in which a minority of young people become engaged. Young people feel that a lack of leisure provision is forcing many of them to hang around in groups with nothing to do, sometimes causing trouble.

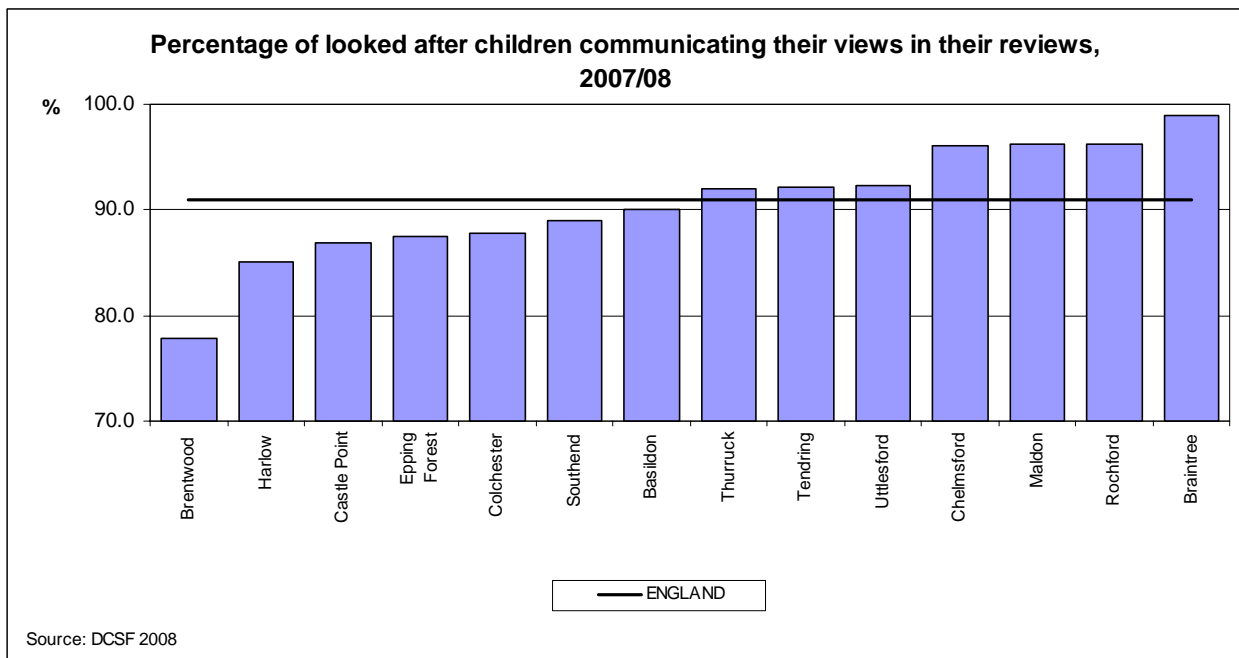
#### *Participation in decision making by children and young people*

In respect of "Making a Positive Contribution" children and young people pan-Essex mirrored the national average to a high degree in the TellUs3 survey. Over half (60% in Essex and 61% in Thurrock, compared to 57% nationally) felt that, in the local area, their views were listened to in decision-making "not very much/not at all". This percentage was 55% for Southend in 2007 (due to incomplete coverage in the TellUs3 survey for Southend, results are not comparable to Essex and Thurrock). In the previous 12 months 38% of children in Essex and 34% in Thurrock (72% in Southend in 2007) said that their views had not been sought in respect of local issues/facilities. The picture is different in the school setting: 56% of pupils in Essex and 61% in Thurrock (59%

nationally) felt that their views were listened to in the running of the school. This figure was 52% in Southend in 2007.

### *Participation by looked after children and young people*

The percentage of looked after children in ECC who participated in their annual reviews was 91.7% in 2007/08 against a target of 95% and up from 89% a year earlier, compared to 91% in England. In Thurrock, the percentage was very high at 97% and in Southend it was just under the national average at 89%. The lowest percentage participating in their annual reviews was in Brentwood (77%) while the highest was in Braintree (99%).



### *Youth work*

The teenage years should be an exciting time for young people, full of learning, new opportunities and new experiences. Young people are enthusiastic, creative and open to new ideas. Most enjoy their teenage years to the full, have good relationships with their parents and a strong commitment to their friends and local communities.

The teenage years are also a time of transition and many young people face difficult challenges - relating, for example, to study, money, employment, health, self-esteem and relationships. Most young people deal successfully with these challenges and make the transition to adult life without experiencing serious or lasting difficulties. A minority, however, can face more serious problems, for example: differences with their parents leading to them leaving or running away from home; health problems affecting their ability to learn and to achieve; becoming disengaged and disaffected at school, sometimes dropping out completely; forming smoking, alcohol and drug habits; getting involved in behaviour that is a serious problem for the wider community, including anti-social behaviour and crime.

While parents are the strongest influence in young people's lives, publicly funded services also have a key role to play. Services for teenagers need to expand opportunities for all young people while helping to tackle the range and complexity of problems faced by the minority who are at risk. Youth work helps young people by offering personal development, education and life skills programmes tailored to individual need and by providing social, economic, educational and recreational opportunities designed to encourage social inclusion and life-long learning. Through youth work, young people are helped to prepare for working life and to maximise their potential.

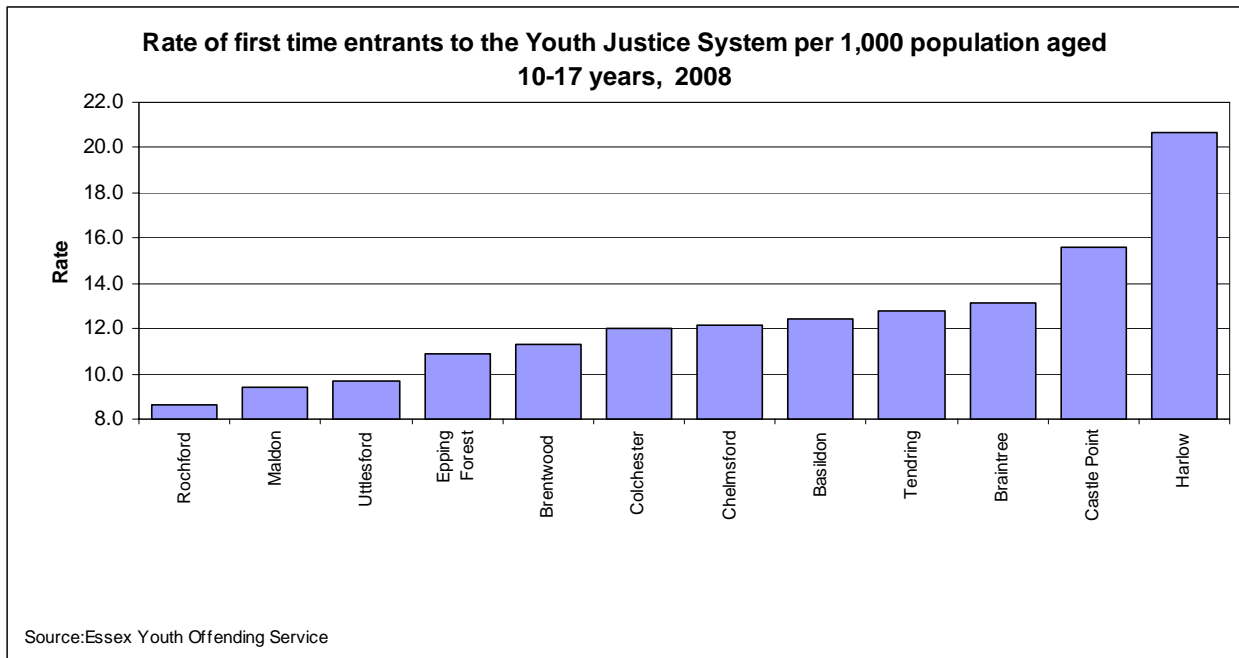
In 2007 27.7% of young people aged 13 to 19 (ie 32, 453 in number) were reached by publicly funded youth services in ECC districts and 27.8% in Southend, against a national target of 25% and a national average achieved of 28%. This information is not available for Thurrock as the voluntary return was not completed by the authority last year. (The definition of a contact with a young person is that the face and name of the young person are known to the youth worker. It is an 'informed' contact where the youth worker is consciously building a relationship with the young person. The young person may attend events occasionally, or the young person may seek information or advice, or the young person may be involved in issue-based session/s with a group at a school). Uttlesford and Colchester were the ECC districts with the highest percentages of young people in contact with the youth service while Braintree and Harlow had the lowest.

### *Young offenders*

While 25% of young people aged 10-25 nationally have committed at least one offence in the last 12 months, many have offended only occasionally or have committed relatively trivial offences. The government estimates that 5% of young people are responsible for over half of youth crime. 7% cent of all 10-25 year olds are classified as frequent offenders, i.e. they have committed an offence six or more times in the last 12 months. This group is responsible for the vast majority (83%) of all offences measured. Offending behaviour rises steeply as age increases, with over 80% of offences committed by 14-16 year olds and less than 3% committed by 10-11 year olds.

Up to a third of young offenders have mental health problems while a large minority, particularly women, have low self-esteem. They do not use many positive coping mechanisms and a large minority use alcohol or drugs as escape coping. The prevalence of drug use in the cohort is extremely high with alcohol, cannabis and tobacco being used extensively along with other substances. However, few of the cohort report dependence and only 15% are rated as at high risk of substance abuse problems (although this is about 10 times the prevalence of high risk youth found in a large school survey). Over 40% feel there is a relationship between their substance use and their offending.

The ECC Youth Offending Team's caseload for 2007/08 was 3,250 young people. Of these 1,717 were first time entrants, down 17% from 2006/07. There were 286 first time offenders in Southend in 2007/08, representing a slight increase over the last two years. This compares to an 8% decline in first time entrants nationally. (The Youth Justice Board changed the method of reporting in April 2006, so figures for previous years are not comparable.) Rochford, Maldon and Uttlesford had the lowest rates of first time offending while Harlow and Castle Point had the highest rates.



Around a third of young offenders (31.7% in ECC, 36.3% in Southend and 31.5% in Thurrock) in 2005 had re-offended after 12 months, lower than the England and Wales rate of 37.4%.

Long-term sustainable reductions in offending by children and young people are largely dependent on all relevant agencies, young people, parents/carers and the community working in partnership to tackle the risk factors associated with offending, while seeking to strengthen the factors that protect young people from it. Risk factors cluster together in the lives of the most disadvantaged children and the chances that those children will become anti-social and criminally active increases in line with the number of risk factors. The risk factors that are most closely linked with risk of reoffending are: thinking and behaviour, lifestyle and statutory education. Protective factors are those that moderate the effects of exposure to risk, helping to explain why some children can be exposed to clusters of risk factors, yet do not grow up to behave anti-socially or commit criminal offences.

The Youth Justice Board for England and Wales has developed a range of evidence-based, targeted youth crime and anti-social behaviour prevention models that are based on the early identification of those at high risk of offending, their effective engagement and assessment-based interventions. Strategies to promote individual life chances and prevent offending by young people should include: involvement of parents/carers in preventative and restorative approaches; effective relationships between schools and young people; whole school commitment to positively influence behaviour and preventative measures; consistent approaches and staffing; and multi-agency working.

### *Young carers*

56% of young carers live in lone parent families. Most young carers' parents are in receipt of welfare benefits and are outside the paid labour market so that experience of

poverty and social exclusion is common. The majority of people needing care are mothers. Half of those with care needs have problems of a physical nature, 29% are mental health problems, 17% are learning difficulties and 3% are sensory impairments.

Many young carers value the contribution they are able to make within their families. Caring can be a positive experience, helping to foster maturity and independence and strengthen family ties. However, extensive or inappropriate caring can be damaging, constraining young people's time and contributing to poor outcomes. 27% of all young carers of secondary school age are experiencing some educational problems. Many miss school and fail to attain any educational qualifications. This, combined with ongoing caring responsibilities, serves to exclude some young carers from the labour market. Substantial numbers of young carers report stress, anxiety, low self-esteem and depression and many report feeling isolated from their peers which has an impact on their own physical and mental health and wellbeing. They also feel that they lack the time and opportunity to socialise, and can also be reluctant to do so. Young carers also report bullying and anxiety about bullying.

Young carers are often reluctant to disclose their situation to professionals or other young people. Possible reasons for this secrecy include a fear of intrusion into family matters by social services, loyalty to parents, or a fear of ridicule or bullying. (National research estimates that one fifth of young carers and their families receive no support except for their contact with a specialist young carers' project.)

The 2001 census estimated that there should be around 5,000 young carers in ECC districts in total, 400 in Thurrock and around 425 young carers in Southend. National research would suggest that 100 young carers in ECC districts, 8 in Thurrock and 8 in Southend are providing over 50 hours of care per week while 800 in ECC, 64 in Thurrock and 68 in Southend are caring for over 20 hours per week. However, under 900 young carers have been assessed by or are supported by the young carers' teams in ECC, Southend and Thurrock.

### *Contribution of parents*

While the influence of parents is greatest when children are very young, parents matter at every stage in a child's life. Parenting in the home has a far more significant impact on children's achievement than parents' social class or level of education. From the very earliest years, the mother's nutritional intake, consumption of alcohol or drugs, even levels of stress during pregnancy can have a substantial impact on the health and wellbeing of the foetus and eventual baby. For children of primary school age, parental involvement – particularly in the form of good parenting in the home – has the biggest impact on their achievement and adjustment. The effect is greater than that of the school itself. A child that has not had the benefit of a positive, caring relationship with their parents is likely to have low self-esteem and be vulnerable to mental health problems. This can seriously impair their ability to achieve, enjoy and learn.

Parents continue to have a significant impact through secondary school years, as shown in staying on rates and educational aspirations, and also in the way that aspects of parenting also appear to be a reliable predictor of childhood obesity, offending and anti-social behaviour, smoking, drug and alcohol misuse and teenage pregnancy. Parental

support is also an important factor for young people making a successful transition to adulthood and independent living.

An estimated 2% of families experience multiple problems, which puts children at a higher risk of adverse outcomes. There is a greater concentration of families with multiple problems in deprived areas, although even in the most deprived areas only one in twenty families experiences five or more of the basket of disadvantages. Families living in social housing, families where the mother's main language is not English, lone parent families and families with a young mother all face a higher than average risk of experiencing multiple problems.

## **5. ACHIEVING ECONOMIC WELL-BEING**

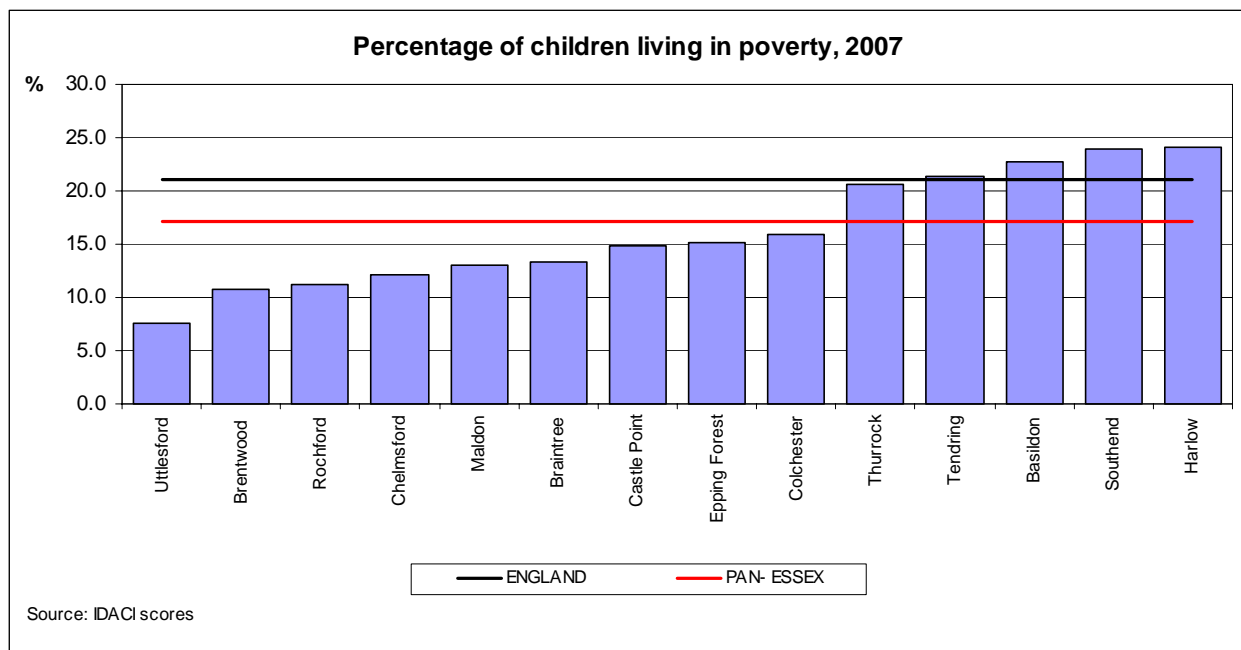
The TellUs3 survey in 2008 showed that in respect of "Achieving Economic Well Being" ECC children mirror the national average to a high degree with 75% of children in ECC and nationally saying they enjoy living where they live. However, this figures drops to 65% in Thurrock (no comparison is available for Southend as only Year 6 children responded to the survey in 2008).

In terms of future aspirations there were some contrasts. Slightly more young people in ECC districts aspired to leave school and find a job at either 16 or 18 years of age (13% and 22% respectively) compared to the national averages of 13% and 19% and significantly fewer (49%) aspired to go to university than the national average (54%). A similar pattern was observed in Thurrock where more young people wanted to leave school and get a job at 16 (16%) or 18 (28%) than nationally and significantly fewer (45%) wanted to go to university. However, in Southend in 2007 the percentages were much closer to the national average: 16% wanted to leave school and get a job at 16, 14% wanted to get a job at 18 and 53% wanted to go to university.

### *Families living in poverty*

The Government has set itself a challenging target to end child poverty by the year 2020, with local authorities having a key role to play in helping to achieve this ambition. In the UK as a whole, it is estimated that 23% of 16-19 year olds are poor while just over 20% of those in the 20-24 age group are. (A person is considered to be poor if he/she lives in a household where after-tax income, adjusted for household size, is less than 60% of median income in the country in which he/she lives.)

Although data for a new national indicator on the proportion of children in poverty is not yet available, one way of estimating poverty is the IDACI (Income Deprivation Affecting Children Index) scores, which show that 17.1% of children pan-Essex live in families that are income deprived (ie, in receipt of Income Support, Income based Jobseeker's Allowance, Working Families' Tax Credit or Disabled Person's Tax Credit below a given threshold). This is lower than the England rate of 21.0%. The rate in Thurrock is also slightly lower than nationally, but Southend has a higher rate, above the national average. Within ECC districts, Harlow, Basildon and Tendring have the highest IDACI scores (all over the national rate of 21%), while Uttlesford has the lowest at just 7.6%.



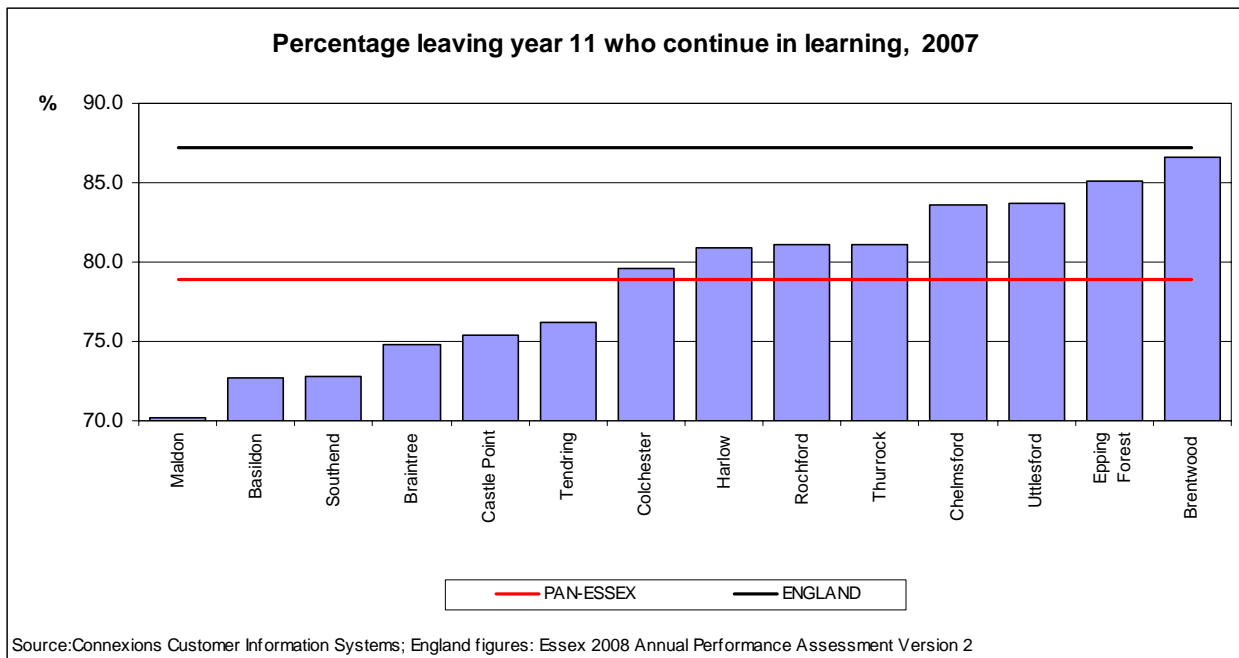
The most important predictor of a young person being poor is whether they still live with a parent: those who have left home are at a much higher risk of poverty. Living in a low-income household, in a lone-parent family or with a step parent, can accelerate the leaving-home process and result in low educational attainment, early partnership formation, teenage pregnancy and poor (independent) housing conditions. Having children is associated with a greater risk of poverty, especially in the year after birth.

The interconnected factors of educational qualifications and employment status contribute significantly to the risk of entering poverty. Employment protects young people from poverty. However, the protective effect of employment is apparent only after the young person has held a job for at least a year: it is not getting a job that is important, but getting and keeping a job.

#### *Post 16 education, training and employment*

Whether young people continue in education after the age of 16 is strongly determined by their GCSE attainment. National data shows that of those who do not attain five good GCSEs, a little over half stay on in full-time education, compared to 88% of those who do. Less than a third of persistent truants continue in full-time education. Young people whose parents are in higher professional occupations are much more likely to participate in full-time education than those whose parents are in routine occupations (86% compared with 62%). Consistently fewer males and fewer young people of White ethnic origin progress into full-time education with the Indian and Other Asian ethnic groups showing the highest proportions.

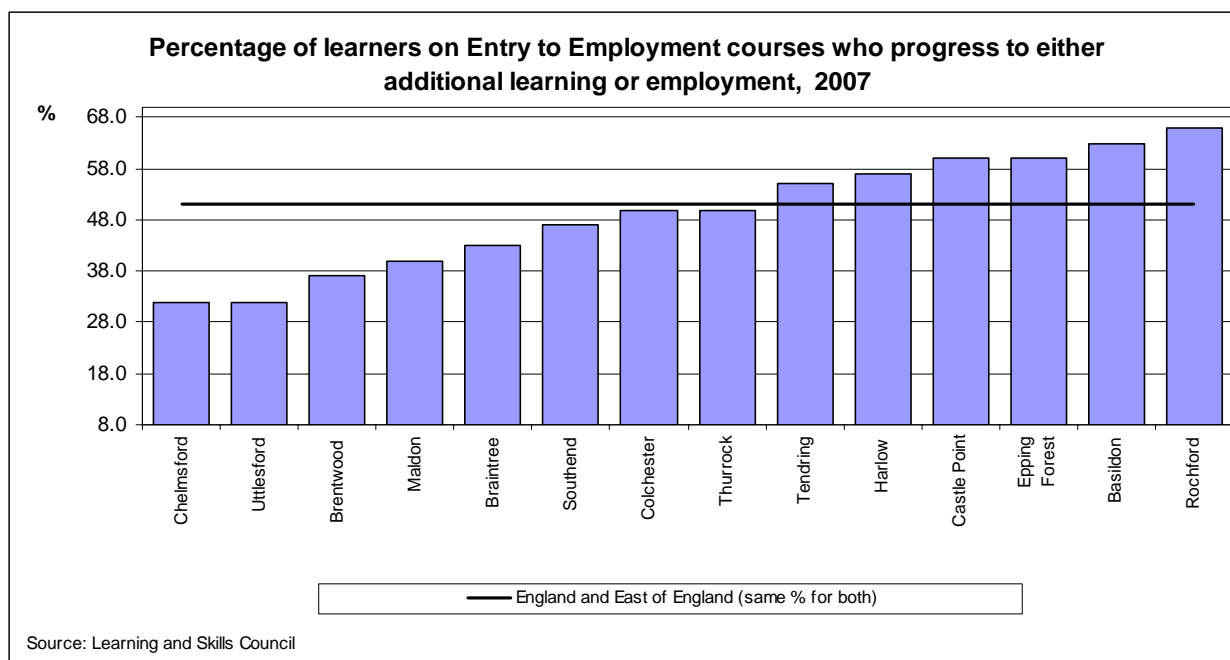
In 2007 81.2% of young people completing Year 11 continued in learning in Thurrock, 79.3% in ECC and just 72.8% in Southend, compared to 81.0% in the East of England as a whole and 80.0% in England. The ECC districts with the lowest percentage of young people continuing in learning were Maldon and Basildon while the districts with the highest percentages were Brentwood and Epping Forest.



Education Maintenance Allowance (EMA) supports 16-19 year old learners from low income households to continue in learning. Take up of EMA in ECC was 11,110 in the 12 months to August 2008, a figure that continues to rise in line with the national increase and statistical neighbours. In Southend 1,684 learners accessed EMA and 1,290 in Thurrock.

The Learning Agreement Pilot, a joint initiative between the LSC and Connexions in eight local authority areas (including Essex, Southend and Thurrock), was set up in 2006 to increase and improve training and learning options available to 16-17 year old in jobs without accredited training. Its core aim is to raise participation in education and training for 16-17 year olds who are in a job but without accredited training. In 2007/08 2,382 young people aged 16 and 17 were involved in the Learning Agreement Pilot, now branded Train for your Future.

In 2007 52% of learners on an Entry to Employment (E2E) course in EEC districts, 50% in Thurrock and 47% in Southend progressed either to additional learning or employment in 2007, compared to 51% achieved in England and the East of England. The rates were highest in Rochford and Basildon and lowest in Uttlesford, Chelmsford and Braintree.



### *Work based learning*

#### NVQ success rate for all work-based learners living in the area and aged under 19 at the start of their programme

	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
ECC	47.9%	54.5%	53.4%	64.8%
Southend	42.2%	52.3%	40.5%	56.7%
Thurrock	37.4%	39.2%	58.4%	100.0%
England	46.0%	50.4%	56.7%	64.8%

64.8% of work-based learners in ECC successfully completed their apprenticeship framework or the main NVQ element of their programme in 2007, the same as the England percentage and a steady increase since 2004. A similar pattern was achieved in Southend while Thurrock's performance improved to 100% in 2007.

Apprenticeship success rates have improved and in 2007 54% of young people in ECC and Southend and 57% in Thurrock completed work-based apprenticeships, compared to 61% in England and 60% in the East of England.

#### *Education, training and employment for looked after young people/care leavers*

Young people who have to cope with difficult issues and a significant amount of change after care struggle to stay in work or continue with a course of study. Training and benefit allowances reflect an expectation that a young person will be living in the parental home, without the costs associated with independent living. Although young people could find part-time work to supplement their income they are discouraged from doing so because of the complicated rules on housing benefit. A number of young people are ill-informed about care leaver benefits. Other factors that affect them include

substance abuse, poor health, the breakdown of a relationship and loss of other friendships/relationships, bereavement and frequent house moves.

The national proportion of care leavers participating in post-16 education is rising (35%), but sustaining participation is a challenge, as they have high drop-out rates. As few as 1% of young people leaving care go on to university. Nationally 59% of care leavers are in education, employment or training compared to 87% of all young people at 18-19. Estimates for the number of 16-24 year olds who have been in care who are unemployed range from 50% to 80%.

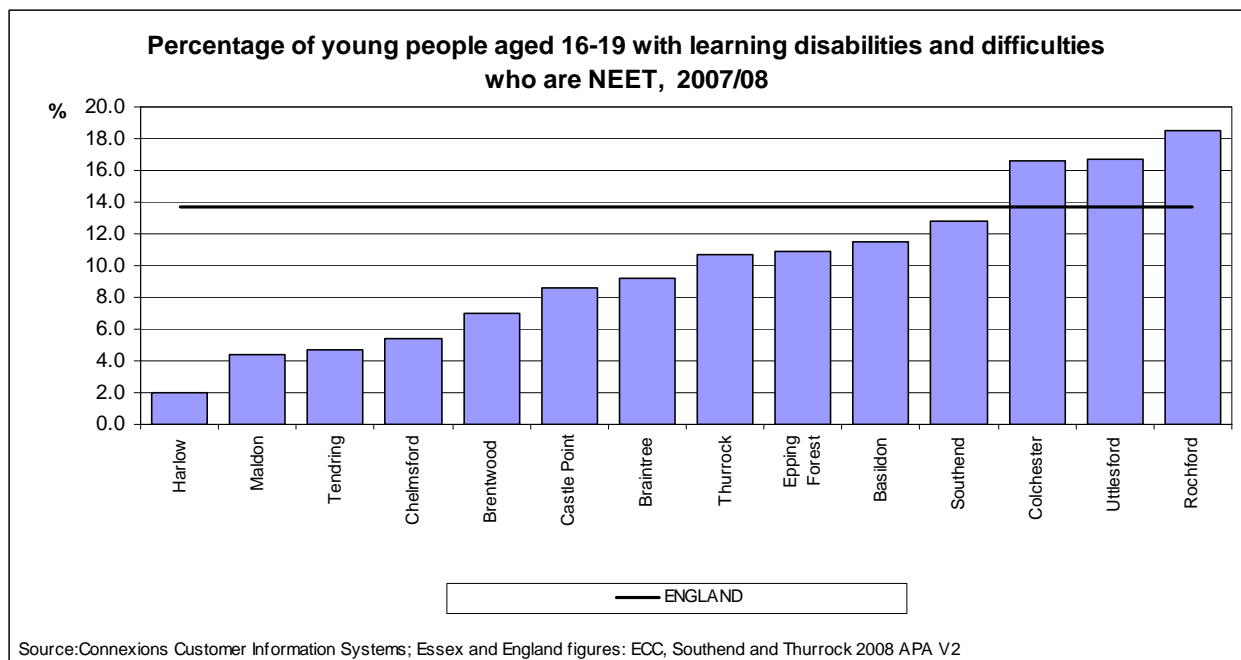
In ECC districts 74.5% of young people who had been looked after were in education, employment and training at the age of 19 in 2007/08, 77.8% of care leavers in Southend and 77.2% in Thurrock. The numbers of care leavers in EET has shown a steady upward trend.

### *Education, training and employment for young people with special needs*

Young disabled people have many aspirations for their future, whether linked to education and work or in other parts of their life. However, a significant number feel that there is little chance of them getting a job in the future, because of their disability or impairment. Also, the same variety and range of opportunities open to non-disabled young people is not available to young disabled people. Three fifths of non-disabled young people report that they got the education, training place or job they wanted after finishing compulsory education, compared to just over half of disabled youngsters.

At 16, young disabled people - including those who have been assessed as having a special educational need – are twice as likely as their peers to be not in education, employment or training (15% compared to 8%). By the age of 19, 27% will be NEET compared with 9% of non-disabled people. At age 26, disabled people are nearly four times as likely to be unemployed or involuntarily out of work than non-disabled people. Among those who are in employment, earnings are 11% lower than for their non-disabled counterparts with the same level of educational qualifications.

In ECC districts, 11.1% of young people with learning disabilities and difficulties aged 16-19 were not in education, employment or training in 2007/08 while for Southend the figure was 12.8% and for Thurrock was 10.7%. These are all lower than the England average of 13.7%. Colchester, Uttlesford and Rochford districts have a NEET percentage that is above the national average amongst young people with learning disabilities.



### *Education, training and employment for young offenders*

National research evidence suggests that engagement in education and training is one of the most important factors in reducing offending and reoffending. An analysis of Youth Justice Board education, training and employment schemes found that where students improved their literacy skills, gained qualifications or went on to further training or employment, their reoffending rates were lower than the rates of their less successful peers (even controlling for previous rates of offending). The evidence suggests that early and sustained intervention to maintain attachment and attainment has a greater chance of success than trying to equip older young people with literacy and numeracy skills, once they have become detached from mainstream learning.

Young people in custodial settings want to gain qualifications. However, young offenders who have reached school-leaving age have usually broken links with mainstream schools: any education, training and employment they undertake is facilitated by the YOT through community-based education, training and employment provision or by young offender institutions for those in custody. Only 45% of young people in the youth justice system nationally have access to full-time education, training or employment while 28% have no provision arranged at all: there is a similar pattern in ECC.

63.8% of all young offenders in ECC and 56.3% in Thurrock were in ETE in 2007/08, below the 71.1% average nationally, and against a national target of 90%. In Southend 83.7% of all young offenders were in ETE, above the national average.

### *Education, training and employment for teenage mothers*

Just 18.4% of young mothers aged 16-19 in ECC districts, 18.9% in Southend and 17.6% in Thurrock were in education, employment or training in 2007/08, considerably below the 28% achieved in the whole of England. Many young mothers are not willing to consider a return to any form of training, education or work for several years or until their

child/children start full time school. This often translates as the young women responding negatively to offers of support to reintegration to education or training, as they believe the only option is full time commitment. They enjoy parenting and are reluctant to leave the care of their babies to others - being a mother is a pleasure and a sign of being a good mother, which is particularly important to young women who are facing stigma and negative messages about their parenting abilities.

Young parents' main motivation for getting involved in learning activities is to combat isolation by meeting other young parents and sharing their experiences with others in a similar situation. Education for young parents, although important, is not a priority. Their second motivation is to reduce their child's isolation and increase their social development, by mixing with other children. Young parents' third motivation to learn is to improve their own career and employment prospects by gaining qualifications that lead to employment or further education, in order to provide a better lifestyle for both themselves and their children.

The biggest block to accessing education, training or employment is the lack of access to affordable and convenient childcare. Another problem is the lack of foundation-level training for those who have not gained qualifications while at school, and the difficulty of finding courses that are flexible enough to accommodate their needs as new mothers. Many have a history of disengagement from school with negative experiences of education, and this can put them off returning to formal further education. The Care to Learn programme provides financial support for young mothers to continue in education or training. In ECC districts 85 young mothers have taken up Care to Learn support (May 2008 data), around 10% of the total number of young mothers estimated and the lowest percentage of all of its statistical neighbours. Southend had 11 young mothers taking up Care to Learn support (6.8%), but Thurrock had only two young mothers (just 1.1%).

#### *Education, training and employment for young people from ethnic minorities*

There are large variations in the proportion of young people nationally who are not in education, training or employment (NEET) for different ethnic groups. Nationally 7.2% of White 16-18 year olds were NEET in 2007/08, compared to 1.3% of Chinese young people, 2.6% of Indian young people, 6.5% of Pakistani young people, 6.9% of Bangladeshi young people, 8.9% of Black Caribbean young people and 14.7 of Black African young people.

While 5.8% of white young people (aged 16-18) in ECC districts, 6.9% in Southend and 7.7% in Thurrock were NEET in 2007/08, few other ethnic groups had sufficient numbers to produce a calculation.

#### *Education, training and employment for young people from rural areas*

The NEET rate for the most rural areas of England is estimated to be 6.8%, just one per cent less than the national rate of 7.8%.

Young people in rural areas do not have adequate access to the education and training opportunities they need and want, and to which they are entitled. For some young people, sporadic periods of employment on short-term contracts (factory) or seasonal

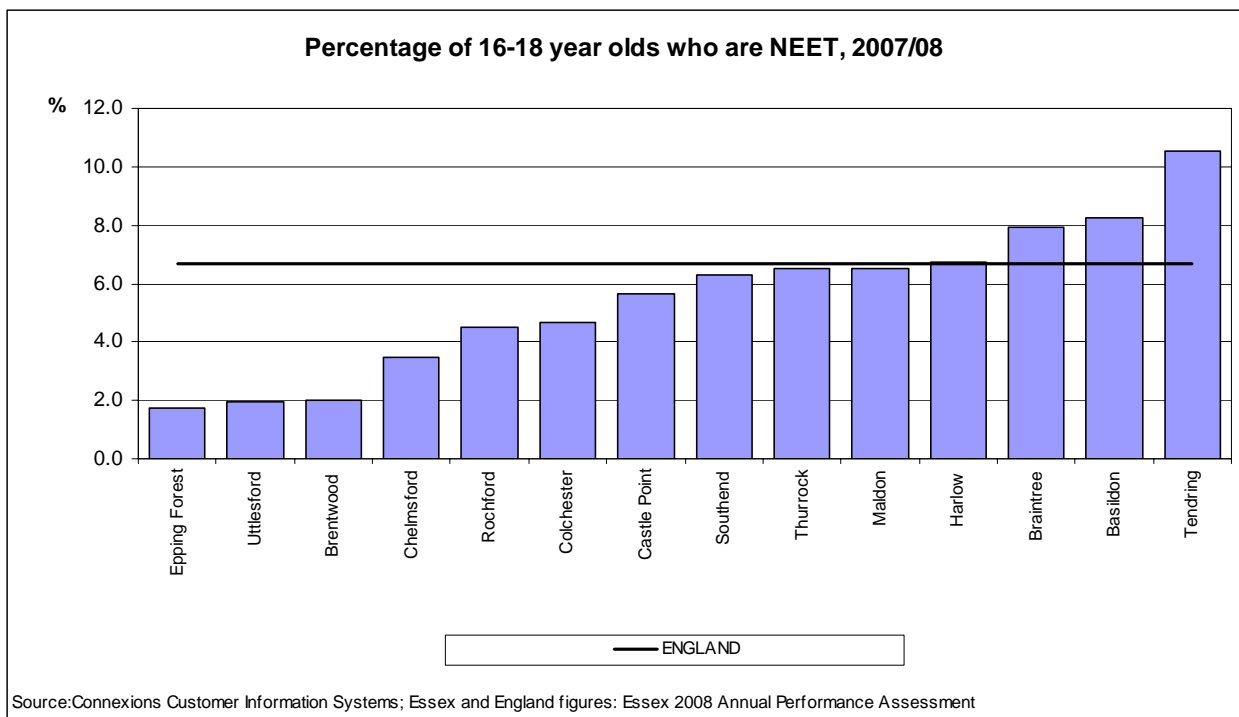
work (both agricultural and tourism) punctuates the NEET experience. Young people highlight seasonal employment as a factor contributing to greater NEET rates for 17-year-olds, as those who have taken temporary jobs straight from school come to the end of their contract. Many young people feel that their rural location and the local labour market impacts strongly on their employment chances or decision to continue in education; either through a lack of jobs, or the need for higher qualifications to find full-time, secure work. Employment opportunities, especially for young people with low levels of skills, appear to be concentrated in the main urban centres.

### *Young people not in education, employment or training*

The Connexions service aims to reduce the incidence of young people aged 16-19 years who are not in education, employment or training (NEET). Previously the service was provided by the Essex, Southend and Thurrock Connexions partnership but since 1<sup>st</sup> April 2008 has been provided directly by Essex County Council and Southend and Thurrock unitary authorities.

National statistics show that young people who are NEET are more likely to have parents with qualifications below that of A Levels, parents who are in routine or lower supervisory jobs, and to have been eligible for free school meals. 27% of persistent truants and 11% of occasionally truants are NEET, compared to 5% of young people who have not truanted. 36% of young people with no reported qualifications and 28% with under four D-G grades are NEET, compared to 2% who have received 5+ A\*-C grades at GCSE. Young people who report risky behaviours in Year 9 (such as smoking, trying cannabis, vandalism and graffiti) are at least twice as likely to become NEET after Year 11.

In ECC districts 5.6% of young people aged 16-18 were not in education, employment or training in 2007/08 (based on the three month average November 2007-January 2008), compared to 6.7% nationally. The NEET rate in Southend and Thurrock was 6.3% and 6.5% respectively. The geographical distribution of 16-18 NEET has changed slightly over the last three years but is still focused around the Thames and Haven Gateways, with a couple of hot spots in Braintree, Maldon and Colchester. Tendring and Basildon had the highest percentage of NEET young people pan-Essex (10.7% and 9.1% respectively) while Brentwood and Uttlesford had the lowest rates (2.4% and 2.6%).



A statistical modelling exercise using pan-Essex data established a set of factors that significantly affect whether a young person will become NEET at Year 11 and the associated odds of becoming NEET given these factors. This Essex model suggests there are six major factors that impact on NEET:

1. Being a teenage parent: this is the strongest factor determining the odds of becoming NEET at year 11. If a young person becomes a parent, their odds of becoming NEET increase almost 28 times.
2. Being supervised by a Youth Offending Team: those supervised by YOT are just over three times more likely to be NEET.
3. Attendance: those with less than 80% attendance are just over three times more likely to be NEET than those with 80% or more attendance.
4. Key Stage 3 average level: for every higher level achieved at Key Stage 3, the odds of becoming NEET at year 11 fell. For example, achieving level 5 and above decreases the odds of becoming NEET by between 3 and 5 times.
5. Ethnicity: those who are white are almost twice as likely to be NEET as those of any other ethnic background.
6. Social deprivation: those living in a highly deprived area are nearly 12 times more likely to be NEET than those living in the most affluent areas.

Although a higher proportion of males than females are NEET, being male did not come out as a strong factor in the model. This is because being male has a very high correlation with being a low achiever, so that the achievement factor overshadows gender in the statistical modelling.