The State of London's Children Report

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Acknowledgements

Foreword

This is the second *State of London's Children Report*.

The report adopts the Government's new outcomes framework together with a range of regional indicators, putting together the most comprehensive picture to date of children's lives in London. It allows us to see in which areas London's children's lives are getting better, and what has deteriorated or stayed the same, compared to the rest of the country, since the last

report in 2001.

This report contains some good news for London's children and young people. There is a reducing trend in the number of children who are killed or seriously injured on the roads. There has been a marked rise in the proportion of pupils achieving five or more passes at A*–C GCSE/GNVQ levels, particularly in inner London. Young Londoners are less likely to smoke cigarettes, and more likely to consume fruit and vegetables than children and young people elsewhere, though there is still much scope
for improvement.

However, there is no room for complacency. London's children, particularly those in inner London, continue to experience the highest levels of child poverty and inequality of any region in the UK. Thirty-eight per cent of London's children are living in poverty, compared with an England average of 29 per cent. Twenty-nine per cent of London's children are living in overcrowded conditions, compared to 13 per cent in England as a whole. A continuing concern remains the access that children have to play, including to open spaces and in the public realm, and the links that levels of physical activity have with rising obesity.

London is also home to high numbers of refugee and asylum-seeking children and children in care, and has high rates of teenage pregnancies, together with continuing – and in some areas widening – inequalities of outcomes, which particularly impact on London's black and ethnic minority (BME) children. This second *State of London's Children Report* identifies important gaps in the data that are particularly significant given the enormous diversity of London's child population, with over two-fifths belonging to a black, Asian or minority ethnic group.

Over the coming months and years, the report – which we plan to update regularly – will be an invaluable tool for London Government and our partners involved in the ongoing implementation of my Children and Young People's Strategy.

We are still very far from a London in which the UN Convention on the Rights of the Child is a reality for each and every one of London's 1.61 million children, but the report will support all those making the case for further improvements in making London a truly child-friendly, safe and inclusive city.

Ken Livingstone
Mayor of London

Executive summary

1 The State of London's Children Report

Introduction

This is the executive summary of the second *State of London's Children Report* (SOLCR). The report aims to describe the position and circumstances of London's children, and to identify changes in their well-being by updating the data included in the first SOLCR (2001). It also includes an outcomes framework to measure progress towards the Mayor's Children and Young People's Strategy (CYPS) goals, in line with the national outcomes framework for children being developed.

It is envisaged that the comprehensive data that the report provides will provide a strong basis for further analysis and joint working by government and other agencies to address areas identified as having worsened or not improved for London's children, or where data is lacking.

In general, the report draws on the evidence in a descriptive analysis of the position and circumstances of London's children. It does not aim to explain the underlying causes for the state of London's children, although some contextual information is given.

London's children have much in common with children nationally, but whilst the national child population is declining, London's child population is growing. London's children are also unique in terms of their diversity and in terms of the inequalities, challenges and issues which they, their families and their communities face.

Two-fifths of London's children (41 per cent) belong to a Black, Asian or ethnic minority group,[1] compared to 13 per cent of children in England and Wales. London's children are more likely to be living in poverty and in overcrowded housing than children in any other English region. Social factors associated with poor housing, poverty, social exclusion and high mobility contribute to a complex profile of needs for the health, education and social care of many of London's children.

The diversity of London's children and their experiences of inequality are key themes in the first SOLCR and the Mayor's CYPS.

Another key theme is the focus, in line with young people's priorities, from the Mayor's CYPS consultation, on action to improve children's physical and social environments. Young Londoners' ideas of what will help make a child-friendly London are key influences on the concept of well-being and the associated outcome framework that we develop in this report.

Report structure and preview

The report draws on the original SOLCR sources and on more recent sources including the evidence base of the GLA and the 2001 Census. Children and young people's views are represented through a range of consultations and research, including a recent GLA Young Londoners' Survey of more than 1000 young Londoners aged between 11 and 16 years (2004).

The report is structured on eight themes: child poverty and economic well-being; being

healthy; enjoyment; achievement; transport and road safety; families, social care and protection; safe homes and communities;
a positive contribution.

These themes are similar to those used in the first SOLCR but have been adapted to reflect the five outcome areas identified by national government in *Every Child Matters* (2003) for monitoring children's
well-being (being healthy; staying safe; enjoying and achieving; making
a positive contribution; economic well-being).

The discussion of the eight themes forms the core of the report. Under each theme, or area of children's lives, the report considers:

• What research evidence is available in this area and what does this evidence tell us?

• What is government policy in relation to this area of children's lives?

• What does the available evidence tell us about London's children,
 in particular?

• Do the data highlight any trends (of improvement or deterioration) for London's children
 and their lives?

• Are there clear gaps in our knowledge about London's children, in relation to this area?

2   London and London's children

• London is home to 1.61 million children under the age of 18.

• London has a greater share of 0 – 4 year olds and a smaller share of
5 – 17 year olds than England and Wales. London also has more boys than girls, in common with England as a whole.

• The proportion of children within the total population varies throughout the city. Children under 16 make up a slightly larger proportion of the population in outer London (20.1 per cent) than in inner London (18.7 per cent).

• London's children are more likely to be living in a lone parent family, and less likely to be living in a couple family than children elsewhere
in England. This pattern is largely accounted for by the pattern in
inner London.

• Whilst the child population is forecast to fall nationally between 2001 and 2011, the child population of London is projected to grow.

3   Child poverty and economic well-being

This chapter describes what we know about poverty and London's children, by drawing on a range of evidence including studies which prioritise the perspectives of children themselves.

• Thirty-eight per cent of London's children are living in poverty, compared with an England average of 29 per cent. The proportion rises to 54 per cent in inner London, the highest rate in any region.

• London's child poverty rates do not appear to be being reduced in line with the national trend.

• Child poverty in London has spatial and ethnic dimensions. Rates are higher in inner (54 per cent) than outer London (30 per cent) and children from BME groups are more likely to experience poverty (particularly children of Pakistani or Bangladeshi origin).

• Key groups of London children are more vulnerable to poverty-linked inequalities in outcomes and access to services (including child refugees and asylum seekers (RAS), runaways and homeless children, gypsy and traveller children and disabled children).

• Child poverty impacts on children's future chances of social inclusion: on their health, education, social and psychological development.

• Child poverty has adverse impacts on children's current lives too – affecting their access to material goods, leisure activities and excluding them from the consumer culture of more affluent peers.

4   Being healthy

Child health has improved enormously over the last century. However, poverty continues to be the most significant impediment to child health. This chapter reviews evidence about the health of London's children in three areas: physical health, healthy lifestyle issues, and emotional health and well-being.

Physical health

•   Rates of infant mortality are being reduced in London and London's rate of 5.6 per thousand is just marginally higher than the England average. However, there are wide variations between the London boroughs.

•   The pattern of childhood mortality (deaths of children aged 1 – 19 by cause) is similar in London to that nationally, although London has a lower proportion of deaths from road traffic accidents.

•   Rates of childhood immunisation are low in London compared with other cities. This may link to London's ethnic diversity and high levels of mobility and social deprivation.

•   The general health status of London's children is similar to children nationally. However, London's children appear to be healthier when measured by the criteria of acute sickness.

•   Children in inner London are less likely to have good general health reports than children in outer London.

•   Young Londoners from black, mixed and Asian ethnic groups have marginally poorer general health reports than those from white and Chinese groups.

•   The prevalence of asthma is increasing nationally and there is some evidence that childhood respiratory problems are linked to living in a polluted area.

•   An estimated 17,000 children have diabetes in England. If prevalence rates are assumed to be the same, then approximately 2,500 London children have diabetes.

Healthy lifestyles

•   A pattern of restrictions on children's independent mobility is commonly linked, along with dietary factors, to rises in childhood obesity.

•   Children and young people express considerable concern about restrictions on their independent activity and about a lack of provision for exercise.

•   Recent survey research shows that London's children are more likely to engage in medium levels, and less likely to engage in high levels, of physical activity than children elsewhere.

•   London's children are generally no more likely to be overweight or obese than children nationally, although London boys are marginally more likely than boys elsewhere to be overweight.

•   Young Londoners consume more fruit and vegetables than children and young people elsewhere. However, the proportion eating five or more portions a day (around one-fifth) is small.

• Young Londoners are less likely to smoke cigarettes and to consume alcohol than children and young people nationally.

• More young Londoners (aged 16 – 29) claim to have taken illegal drugs than young people nationally.

• Teenage pregnancy rates are higher in London than elsewhere and rates do not show a reducing trend, as nationally. There are wide variations in rates between the boroughs.

• London has relatively large numbers of children who are affected by HIV within their families.

Emotional health and well-being

• Bullying can have a range of adverse effects. Just under one-fifth of young Londoners in the GLA survey reported that they had been bullied. The proportion rises to nearly one-third of those who are disabled.

• Rates of mental ill health are increasing among young people nationally. Survey research has suggested that rates are higher in inner London than in other areas (particularly for boys aged 11 – 15).

5 Enjoyment

Children and young people have the right to inhabit a shared public realm and to access freely their cities' public spaces. They also have the right, under Article 31 of the UN Convention, to engage in a range of play, leisure, cultural and sporting activities. This chapter considers whether these rights are ensured for London's children in 2004.

Children, young people and public space

• Children and young people's access to public space is affected by fears of traffic and 'stranger danger' and by public perception of young people as 'threats'.

Opportunities for active play

• Opportunities for play are critical for all young Londoners, but particularly for those on low incomes whose access to commercialised play and recreation facilities may be limited.

• Recent survey research has shown that children in inner city areas are less likely to engage in active play than children in other areas.

• Parks and green and open spaces provide a vital free resource in which children and young people in cities can play, exercise and have access to the natural world. However, there is variation in the availability and quality of London's parks and open spaces.

• There is no agreed national standard relating to accessibility to green spaces. The GLA Young Londoners' Survey found that just over half of young Londoners lived within a five-minute walk of a park or green space, but almost one in six lived more than 11 minutes walk away.

• There is variation in play funding and provision between local authorities, and an absence of data that maps the nature and extent of play services and provision. Many authorities do not have public realm strategies or outdoor play policies.

• BME children may be less likely to use mainstream play provision and community schemes may be the most effective in reaching minority children. Recent reductions in community-led play provision may have had adverse impacts on London's BME children.

Services and facilities for older children

• There has been a lack of an overarching or integrated approach to planning for older children's out-of-school lives. Research suggests that levels of provision are inadequate.

• There is considerable variation between the London boroughs in spending on youth services, and in the proportions of young people that youth services reach.

Access to sports, leisure, arts and cultural facilities

• Costs continue to pose a barrier to young Londoners' involvement in some leisure activities. There is good evidence that costs are a barrier to engagement in sports.

• Local authorities have a legal requirement under the Disability Discrimination Act (1995) to provide services that are accessible and inclusive. However, there are clear barriers to disabled children's participation in play and leisure activities.

6 Achievement

This chapter reviews the recent evidence about the achievement of London's children, and looks at what young Londoners have to say about their schools and their education. It begins by describing the unique circumstances facing education services in London.

The context for education in London

• London's extremes of wealth and poverty are reflected in the city's high proportion of independent schools and high numbers of pupils who are eligible for free-school meals.

• Thirty-six per cent of primary pupils and 32 per cent of secondary pupils in London have a first language other than English, compared with 11 per cent and 9 per cent in England as a whole.

• London schools have very high rates of pupil mobility, with rates of 10 per cent, rising to 14.2 per cent in inner London (the England average is 5.6 per cent).

• London has a highly competitive market in education, and research highlights inequalities between London's parents in their exercise of school choice.

• London has experienced for many years serious difficulties in the recruitment and retention of teachers.

Educational achievement

• London's children achieve less well than children in England as a whole at Key Stages 1, 2 and 3. This is largely accounted for by the lower achievement of children in inner London.

• London's fifteen year-olds achieved better than the national average at GCSE/GNVQ in 2002/03. There has been a marked rise in the proportion of pupils achieving five or more passes at A*– C, particularly in inner London.

• The value-added impact of London's schools is higher than the England average for Key Stage 1 – 2, lower for Key Stage 2 – 3, and higher again at GCSE/GNVQ.

• London's pupils do slightly less well than pupils nationally at GCE/VCE and A/AS level, although they are more likely to achieve advanced post-vocational qualifications and advanced extension awards.

• London's 17 year-olds are more likely to be in full-time education than 17 year-olds from any other region. However, the capital's 16 – 17 year-olds are more likely to be unemployed than young people elsewhere.

Inequalities in achievement and in access to education

• Children that are eligible for free-school meals, and boys, consistently do less well at all Key Stages and at GCSE/GNVQ.

• Chinese and Indian pupils generally make better than average progress, while the progress of black Caribbean and black African boys and girls is below average. Gypsy and traveller children have the lowest levels of attainment.

• The link between social class indicators and attainment is weaker in London for black Caribbean and black African groups. A key contributory factor is the under-representation of BME teachers in comparison to the school population.

• Rates of permanent exclusion are higher in London than the national average in secondary and special schools, and the same (as the average) in primary schools.

• London's black pupils are twice as likely as its white pupils to be excluded.

• The proportion of children with special educational needs (SEN) is higher in London than in any other English region. Rates are higher in inner than in outer London and there are wide borough variations.

• The proportion of London's SEN children at mainstream schools has increased in London, as nationally. However, studies involving disabled children and their parents identify concerns about their experiences
of inclusion.

• Schools can play a crucial role in helping RAS children and their families to rebuild their lives. However, recent research suggests that RAS children continue to experience barriers in access to education.

Young Londoners' views about their schools and education

• Young people in a London survey linked the quality of the school's physical and social environment with their well-being and their approach to learning. Young people had many ideas about how to improve the physical and social environment of their schools.

• In the GLA Young Londoners' Survey, young people were broadly positive about the quality of their schools. However, they wanted to have greater levels of involvement in school decision-making.

7 Transport and road safety

High quality transport is critical to promoting the well-being of London's children, to ensure their Article 31 rights and their independent mobility. For disabled children and children from low-income families the availability of accessible and affordable transport is fundamental to social inclusion.

Travel and London's children

• Both national and London survey data point to falls in the proportion of children walking or cycling to school, and increases in the proportion who travel by car.

• These changing travel patterns are linked to concerns about 'stranger danger' and about road traffic safety. Increased use of the car may also be associated with greater travel distances to school.

Children and road traffic accidents

• Deaths from road traffic accidents constitute a substantial proportion of childhood deaths. Children living in poverty and children from BME groups are over-represented among pedestrian casualties.

• There is a reducing trend in the number of children who are killed or seriously injured on the roads. London figures show an overall reduction of 31 per cent since the 1999 figures published in the first SOLCR.

• The total number of child pedestrian casualties in London has reduced by 34 per cent over the same time period.

• The greatest proportion of child pedestrian casualties is in outer London. Children are also more likely to be killed or seriously injured in outer London, and there are wide borough variations in the severity of child pedestrian casualties.

• Just under one-third of London's child pedestrian casualties took place on the journey to or from school, compared with just over one quarter in 1999. Just over half of these were in outer London.

• The proportion of child casualties in London's black Caribbean/African ethnic group significantly exceeds its proportion of the child population. The full explanation for this is not clear.

Children's use of transport and key access issues

• Young Londoners continue to be higher users of buses than of tubes or trains. Cost may be a factor, but it is also the case that young people tend to make shorter journeys.

• In the GLA Young Londoners' Survey, young Londoners were most likely to suggest reducing costs as the best way to improve London's transport. Other suggestions included improved time-keeping for buses and tubes and expanded service provision.

• One-fifth of the GLA survey respondents said that they felt very safe on public transport, 54 per cent that they feel quite safe and 22 per cent say they felt unsafe. Young people with a disability were more concerned about their safety.

• Recent research with a group of disabled young people in South London suggests that transport continues to constitute a barrier to access to London's cultural and leisure facilities.

8 Families, social care and protection

This chapter focuses on the support that is offered to London's children and families: from universal services to services for children 'in need' to child protection services. The chapter also provides updated information about looked-after children and care leavers.

Supporting London's parents and children

• Childcare has expanded in London, as nationally. However, London has lower rates of childcare than England. There is also wide variation in provision between the boroughs and high levels of turnover.

• The proportion that London's local authorities spend on preventative services for children 'in need' is similar in London to the national average and has increased since 2000/01.

• Children from black or mixed ethnic groups are over-represented, and children from Asian groups under-represented, in the 'in need' population.

Violence and London's children

• There has been no comprehensive attempt to measure the extent of all forms of violence experienced by children in the UK, and there are methodological problems with developing accurate estimates of child deaths (including homicides) and other forms of abuse.

• This means that it is difficult to give any estimate for London's children, although a range of data sources (including child death statistics and data from prevalence studies) can give some insight into this issue.

Child protection and looked-after children

• The proportion of London's children who are re-registered on the child protection register (CPR) has reduced in inner London, and remained more stable (and lower) in outer London.

• There have been improvements in London in the percentages of CPR cases that are reviewed on time. There have also been reductions in the proportion of children who remain on the CPR for a long time (more than two years) although London continues to have the highest proportion nationally.

• National research has shown that disabled children are more vulnerable to abuse. However, clear shortcomings have been identified in the child protection system's response to practices on this issue.

• Recent and current research in London has focused on identifying the needs of, and mapping the services to, children who are at risk of sexual abuse and exploitation, and who are victims of trafficking.

London's looked-after children and care leavers

• London has a higher rate of looked-after children than England. The rate of looked-after children has been rising, which is principally explained by rises in outer London. There are wide borough variations.

• London compares favourably with the national picture in the proportion of its young looked-after children who are in foster placements or placed for adoption. Performance on this indicator is less good for older children. London authorities also perform well in measures of placement stability.

• The proportions of London's looked-after children who receive annual dental and health assessments have shown marked increases. However, London authorities perform less well on this indicator than other English authorities.

• There have been considerable increases in the percentages of young care leavers attaining at least one GCSE or GNVQ since 1999/2000. However, the percentages in London are still lower than elsewhere.

• In a study of the implementation of the Children (Leaving Care) Act (2001) in eight London boroughs, many young people said that they thought that their educational, employment and training prospects had improved. Young people also said that they were receiving helpful support.

Social services provision and key issues affecting unaccompanied asylum-seeking children

• Issues affecting unaccompanied asylum-seeking children include continued variations in support for 16 – 17 year-olds; a shortage of placements for looked-after children under 16; and the adverse impact of children being viewed as asylum-seekers first and as children second.

9 Safe homes and communities

An adequate supply of affordable housing is vital for the health and well-being of London's children. Safe, welcoming and inclusive streets, neighbourhoods and communities also have a key role in the development of a child-friendly London. This chapter focuses on housing, homelessness and on young Londoners and crime.

Housing

• London has higher rates of overcrowding than any other region of the country. Households with children and Bangladeshi households are particularly affected by overcrowding.

• Twenty-nine per cent of London's children are living in overcrowded conditions, compared to 13 per cent in England as a whole. This rises to 41 per cent in inner London.

• London has a higher proportion of dwellings in 'poor neighbourhoods' than the England average and nearly one quarter of London's social housing is in this category.

• More than half of the young people in the GLA Young Londoners' Survey thought that traffic pollution, litter, dumped waste and rubbish, graffiti and dumped cars were major problems in London.

Homelessness

• Homelessness has increased in London, reflecting a fall in permanent affordable housing. Just over half of the households accepted as homeless in 2003/04 were families with children. The number of households with children living in temporary accommodation is higher than the number accepted as homeless.

• London also has a 'hidden' group of homeless households, many of whom contain children, who are 'self-placed' in temporary accommodation or living as part of someone else's household.

• Black Caribbean/African groups are over-represented in London's homeless population.

• The London boroughs have made good progress in reducing the use of bed and breakfast (B&B) accommodation for households with children.

• Research documents a range of adverse impacts on the health, well-being and education of children in poor and temporary accommodation. High levels of homelessness and mobility combine to affect the access of London's children to education, health and social care services.

• Homelessness amongst older young people is particularly acute in London. Young runaways under 16 are particularly vulnerable, especially repeat runaways and young people running away from care.

Young Londoners and crime

•   London has the highest rate of recorded crime in the English regions. Recorded robbery, violence and vehicle crime are all above national averages. However, London has lower than average levels of burglary and criminal damage.

•   Adults account for a much larger proportion of crime than young people, and young people are more likely than adults to be the victims of crime.

•   There has been a decreasing trend in youth crime in London. However, data for the whole of London mask considerable variation between
the boroughs.

•   In 2002/03, theft and handling was the most common crime committed by young Londoners, followed by violence against the person. A large proportion of street crime is committed by young people.

•   Youth street crime decreased sharply in London during 2002/03 and then stabilised during 2003/04, increasing very slightly in the second half of the year.

•   The level of youth victimisation has remained relatively static from April 2001 – March 2004. However, data are likely to under-estimate this as many young people do not report victimisation to the police.

•   Recent research has investigated differences in outcome for young people from different ethnic groups in the youth justice system. Whilst many of the outcome differences were accounted for by variations in case characteristics, some were suggestive of discriminatory treatment.

•   The number of young people in prison has shown an increasing trend since 1996 and serious concerns persist about the conditions and treatment of young people in custody.

•   Black young Londoners are over-represented among those remanded in custody and those given a Detention and Training Order. The extent of over-representation is less in London than nationally.

•   There is little research which documents the views of young people in the youth justice system. Recent studies have highlighted young people's feelings that they have little control over what happens to them within the system. Other research has pointed to serious concerns relating to young people's mental health.

10 A positive contribution

This chapter explores how far and in what ways children's rights to participation are being realised in London. It looks both at the role of children and young people in public decision-making and at the individual child's voice in decisions that are made about them in the context of national research. The chapter draws on a GLA CYPU audit of children and young people's participation activity; findings from the GLA Young Londoners' Survey; and on telephone interviews with London's advocacy services.

Children and young people's participation in public decision-making

• London has a complex governance structure and a large and diverse child population. To date, there has been a lack of a regional approach to participation in the capital.

• Participation activities are increasing across many service areas in London, as nationally, in line with a strong public policy impetus. However, children's participation in public decision-making is often dominated by formal group activities or one-off consultations. The kinds of decision that children and young people are involved in varies with the type of organisation. Participation with younger children is less developed.

• Young Londoners in the GLA Young Londoners' Survey were most likely to say that they could influence decision-making with their friends and their family and less likely to think they could have any influence in their local neighbourhoods and schools.

• About half the young people were involved in a range of activities to effect change in their local area.

Advocacy and London's children

• Advocacy services are key mechanisms through which children and young people can enforce their rights. Research suggests that advocacy for children can be extremely effective, both for the individual child and sometimes in obtaining policy changes.

• The development of advocacy services has occurred primarily in relation to social services. Almost all of London's advocacy services are contractually available to looked-after children and care leavers.

• Dissemination about advocacy services is variable and London's services have different patterns of use.

• Further research or monitoring is needed to identify whether the usual contractual arrangements allow for sufficient independence.

Future challenges for the development of children's participation in London

• Future challenges include: ensuring that children from lower income households are supported to engage in participation activities; ensuring that the diversity of children's experiences is reflected; widening participation in London; and ensuring strategic co-ordination.

11 Conclusion

This final chapter draws together the findings about the state of London's children in 2004, and attempts to address the question: Is the state of London's children improving or deteriorating? The chapter addresses this complex question by looking at London's children as a whole group and at inequalities between London's children.

The trends

• On many outcome measures, the well-being of London's children appears to be improving, in line with the national picture. In general, there are more areas of improvement for London's children than of deterioration.

• Child poverty and teenage pregnancy stand out as major areas where London differs from a nationally improving trend. London's child poverty rates have reduced but increased again in 2003 and teenage pregnancy rates in the capital are not falling in line with the national picture.

Current outcomes compare *favourably* for London's children in relation to:
• levels of acute sickness
• levels of doctor-diagnosed asthma
• consumption of fruit and vegetables
• prevalence of smoking
• alcohol consumption
• deaths from road traffic accidents.

In other 'less immediately quantifiable' but very important areas, the evidence is less clear. This is particularly so for issues relating to children's enjoyment and leisure and to children's participation.

Children's access to public space

Qualitative research highlights young Londoners' continuing concerns about traffic danger and 'stranger danger' and restrictions on their independent use of public space. There is also some limited evidence to suggest that the sale of school playing fields and open land in the recent past has led to reductions in the availability of open space.

However, current data sources are insufficient to allow for adequate monitoring and measurement of children's independent access to public space, their access to parks and green spaces, and the level and distribution of parks and green spaces in London.

Children's physical activity levels

There is some evidence to suggest that London's children engage less in active play and less sports and exercise than children nationally, and that this may be linked to income inequality.

Children's access to leisure, arts, culture and recreational activities

There is a lack of good data on both the level and nature of 'Article 31' provision for children in London. For example, there is an absence of data which maps play provision and we do not have a full picture of the distribution of London's parks and open spaces. There is also very little information on children's use of and access to such provision.

Children's participation

Whilst we can be confident in saying that children's participation activity in London is increasing, we know very little about the impacts of this increased activity on the quality and nature of public decision-making, or on services for children and young people. This is of concern in the light of the view of young Londoners that they have limited influence on decision-making within the public sphere, yet it should be acknowledged that there is similar under-development in evaluation of the equivalent impacts of adult participation activities.

The well-being of London's children appears to be *similar* to children nationally for:
• infant mortality
• general health reports
• overweight and obesity
• achievement at GCSE/GNVQ
• levels of SEN inclusion
• rates of exclusion at primary school
• proportions of children who walk to school
• proportions of children who go to school by car
• relative spend on preventative services for children in need
• timely review of CPR cases
• young children looked after in foster placement or placed for adoption • placement stability
• extent of participation activity.

There is good evidence to show that the well-being of London's children compares *unfavourably* with children nationally in relation to the following:
• child poverty
• rates of teenage pregnancy
• immunisation rates
• prevalence of mental disorder (inner London)
• pupil mobility
• achievement at Key Stage 1, 2 and 3
• exclusion rates at secondary schools
• unemployment among young people aged 16 – 18
• proportions of children who cycle to school
• proportions of looked-after children receiving health checks
• older children looked-after in foster placements or placed for adoption
• achievement of looked-after children
• proportion of children living in overcrowded housing
• levels of homelessness among households with children.

Inequalities between London's children

•   The first SOLCR highlighted that child poverty was a key factor in
child health inequalities, in inequalities in education, in access to transport, to housing and
to play and leisure. It pointed to a range of inequalities affecting London's BME children
and children from key disadvantaged groups.

•   This report has presented clear evidence to show that many of these inequalities
persist.

•   The report provides examples of how poverty-related inequalities continue to impact on
the health, education and housing of children and new data suggest that income is a key
factor affecting inner city children's participation in sports and exercise, and their belief that
they can have an influence in their school lives.

•   London's BME children are disproportionately affected by child poverty and poor and
over-crowded housing, by poorer educational attainment and exclusion from school. Black
children and young people are over-represented in the youth justice system and in child
pedestrian casualties. Black young people, and young people from lower income groups,
appear less likely to engage in voluntary and socio-political activities.

•   Evidence from qualitative research also points to the experience of continuing
inequalities for London's disabled children, especially in their access to leisure and to
transport.

•   Finally, the report highlights the difficulties in accessing key services that are faced by
London's highly mobile child population.

Gaps in data

•   Data are inadequate to allow for a full understanding of the relationship in London
between *ethnicity*, *child poverty* and a range of outcome inequalities. This is particularly
apparent in relation to child health, but there is also a lack of data preventing full analysis of
ethnic inequalities within the youth justice system, of active play participation, of access to
public space and of access to the range of Article 31 activities and opportunities.

•   This lack of data is particularly critical in a city which includes such a high percentage of
BME children and is characterised by its diversity.

Some key concluding points

•   High levels of mobility in the capital combine with high levels of poverty, homelessness,
poor housing and overcrowding. This unique combination of circumstances impacts
adversely on the lives of many of London's children, particularly those from BME groups.
This presents clear challenges to policy-makers when viewed in the context of London's
affordable housing shortage and growing child population.

•   There is insufficient data to allow for regular monitoring of those aspects of children's
lives and well-being that children themselves prioritise (enjoyment, participation and
improvement to their social and physical environments). Finding accurate ways of
measuring change in these areas will be critical to the development and improvement of

the SOLCR outcomes framework.

Note

1   Defined here, as in the first SOLCR and in the Mayor's Children and Young People's Strategy, as all ethnic groups not classified in Census data as 'white'.

1 Introduction

1.1 The State of London's Children Report

This is the second State of London's Children Report (SOLCR). The first report was published in 2001 by the Office of Children's Rights Commissioner for London (OCRCL), a demonstration project to protect and promote the United Nations Convention on the Rights of the Child for London's children (2000/03).[i]

The first report drew on a range of research data, including the views and experiences of young Londoners themselves, to provide a comprehensive picture of the position and circumstances of London's children. Evidence from this report, which described the uniqueness of London's children in terms of their diversity and their inequality, was used in the development of the Mayor's Children and Young People's Strategy (CYPS).[ii]

This second SOLCR aims to describe the position and circumstances of London's children in 2004. It updates the data included in the 2001 report and identifies and comments on changes in London children's well-being. The report has adopted the national outcomes framework, which can be developed and used in future editions, to measure progress towards the Mayor's CYPS goals.

In general, the report draws on the evidence to provide a descriptive analysis of the state of London's children. It does not aim to *explain* the underlying causes for the state of London's children, although some contextual information is given.

London's children have much in common with children nationally, but, whilst the national child population is projected to decline, London's child population is growing. The unique circumstances and characteristics of London's children also demand that we continue to improve our knowledge by developing and widening our evidence base.

This report will provide an accessible and comprehensive source of information for *all* who are concerned with 'making the case' to improve the lives of London's children. We envisage that it will provide a strong basis for further analysis and joint working by government and other agencies to address areas identified as having worsened or not improved for children, or where data is lacking. It will also build on and complement similar initiatives to monitor and document the position and circumstances of children and young people, both in the UK and internationally.

1.2 Measuring and regularly reporting on the state of children

Measuring and regularly reporting on the state of children has a central role to play in raising public awareness, achieving political support for improving children's living conditions and promoting and ensuring children's United Nations Convention rights.[iii] Put another way: if we do not have access to appropriate information about our children's well-being then we cannot hope to establish whether things are changing for them for the worse or the better.

Since 1979 UNICEF has reviewed basic indicators of children's survival and development in its *State of the World's Children Report*. There is evidence too, over the last decade, of a growing international interest in the use of social indicators as a way of measuring the well-being of children, both as a separate group and beyond the more traditional measures of survival and basic needs.[iv]

Work has been undertaken, in recent years, to develop a range of child well-being indicators and these have increasingly been used to monitor and evaluate discrete aspects of children's

services and policy. In addition to indicators that aim to measure dimensions of child well-being, new quality of life indicators (covering economic, social, community involvement and environment factors) are being developed as key tools in the promotion of sustainable communities.

More and more of the world's children are living in cities too, and there is a growing international movement to place children's needs and rights at the centre of city and urban planning strategies and sustainable development.[v] As adults of the future and citizens of today, children have a key role to play as active participants in the sustainable development process.

Together with this focus on urban childhoods, there have been several new initiatives to document the position and circumstances of children in European and other world cities; and there are worldwide policy strategies and programmes to develop and promote child-friendly cities.[vi]

1.3 Reporting on children in the UK: a changing climate

At the time of the first SOLCR there was a plethora of official statistics on children, but there was little evidence of any systematic reporting on children's well-being. Since 2001, the political climate has become increasingly favourable towards children and there is a growing consensus that if we are truly committed to improving children's lives, we must ensure that our actions are informed by high quality, child-focused research and information.

The past three years have witnessed the appointment of independent Children's Commissioners in Wales (2001), Northern Ireland (2003), Scotland (2004) and the announcement of such a post in England (2003). In terms of regular reporting, the Welsh Children's Commissioner has produced two annual reports and the second edition of Professor Jonathan Bradshaw's *The Well-being of Children in the UK* is to be published in 2005.[vii]

There is evidence, too, of an increasing emphasis on cross-government working and strategic planning to promote and monitor children's overall well-being. Children's rights to be involved as participants in the development of policy and services are also emphasised. The Welsh Assembly has, for example, developed new methods of planning children's services through local partnerships[viii] and has published *Children and Young People: Rights to Action*[ix] which sets out a strategic framework to ensure that every child in Wales reaches his or her full potential. Funky Dragon, a Children and Young People's Assembly, has recently published its annual report.[x, xi]

Here in England the government has set out its plans to ensure that all government departments involve children and young people in policy, service planning and delivery[xii] and the Children and Young People's Directorate at the Department for Education and Skills (DfES) has announced its potentially far-reaching plans to integrate the key children's services (education, social care, health, youth justice and Connexions) into new Children's Trusts.[xiii]

The Green Paper, *Every Child Matters*, describes the government's commitment to ensure the welfare of those children most at risk within a framework of universal services, and sets out major reforms aimed at supporting parents and carers.

Importantly, and for the first time, the well-being of the nation's children and young people is to be monitored and measured using an outcomes framework of five key areas:

- *being healthy* (enjoying good physical and mental health and living a healthy lifestyle);

- *staying safe* (being protected from harm and neglect and growing up able to look after themselves);

- *enjoying and achieving* (getting the most out of life and developing broad skills for adulthood);

- *making a positive contribution* (to the community and to society and not engaging in anti-social or offending behaviour);

- *economic well-being* (overcoming socio-economic disadvantages to achieve their full potential in life).

These outcome areas are being used by the government as the basis for a local and national accountability framework, which details objectives and corresponding progress measures for each of the five areas.

The same five outcome areas are adopted as a framework for regional policies and actions included in the Mayor's CYPS. They have also influenced and guided our choice of data sources and the overall structure of this report.

1.4 An introduction to London's children

London is in many ways wealthy, prosperous and thriving, a key driver in the UK economy and a great 'world city'. London has a major role to play in the global economy, attracts high levels of foreign investment, and its rich and varied cultural attractions bring in large numbers of tourists from across the world. The capital has also been coined the 'capital of diversity.' It is Britain's most ethnically diverse city, with a population that encompasses 14 faiths and 300 languages.

However, despite its position as a world leader and despite its strengths born of rich diversity, London continues to be a city divided between the extremes of wealth and poverty; a city that is marked by huge inequalities in income, in employment and in quality of life. Poverty in London has both spatial and ethnic dimensions with most wards in inner London showing high levels of deprivation and most ethnic minority groups experiencing high levels of poverty and unemployment.[xiv, xv]

The diversity and inequality, which so clearly characterise London, are even more apparent in relation to London's children. Indeed, London's children can be understood to be *unique*, both in terms of their diversity in relation to children nationally, and in terms of the specific inequalities, challenges and issues which they, their families and their communities face.[xvi]

The diversity of London's children

- Two-fifths of London's children (41 per cent) belong to a black, Asian or minority ethnic group,[1] compared to just one-quarter (25 per cent) of London's adults – and only 13 per cent of children in England and Wales.

- London's school children speak approximately 300 different languages and nearly one-third of them have English as an additional language, compared with less than 10 per cent in England as a whole.

- London's children are more highly represented than children nationally in all religious groups (excepting Christianity) and one-fifth of inner London's children are Muslim, compared to just 5 per cent in England and Wales.

The unique challenges faced by London's children

• London's children are more likely to be living in poverty than children in any other English region – 38 per cent of London's children live in poor households, and 54 per cent in inner London, compared with an England average of 29 per cent.

• More than one-third of London's children live in social rented housing, compared to 22 per cent of London's adults and 23 per cent of children in England and Wales.

• Twenty-nine per cent of London's children live in overcrowded households, compared to 19 per cent of London's adults and 12 per cent of children in England and Wales.

• London also has large numbers of children who are disadvantaged, not only by poverty, but also by discrimination, including refugees and asylum seekers, homeless children, young carers, disabled children, care leavers and lesbian and gay young people.

The challenges to service provision

• Social factors associated with poor housing, poverty and social exclusion contribute to a complex profile of needs for the health, education and social care of many of London's disadvantaged children.

• Mobility levels among London's children and their families are also very high (see Figure 1.1). This leads to difficulties in accessing key services and to the potential for children and their families to 'slip through the net'. London's high mobility levels also present enormous challenges for service co-ordination.

Figure 1.1   Types of mobility

International migration: labour/career cycles; refugees; settlement; students

Internal migration: labour/career cycle; life cycle; housing/environment: schooling: travellers

Institutional movement: exclusions; voluntary transfers; private/state school; special/mainstream

Individual movement: looked-after children; family fragmentation.

Source: Dobson, Henthorne and Lynas, 2000, cited in DfES, 2003

1.5 Key themes in the Mayor's CYPS and the State of London's Children Reports

The diversity of London's children and their experiences of inequality are key themes in both the first SOLCR and the Mayor's CYPS. Another key theme is the focus on taking action to improve children's physical and social environments. In the Mayor's CYPS consultation, young Londoners describe their vision of a child-friendly London – a city with safer parks and play spaces, more activities, more facilities for walking and cycling, improvements to public transport, to housing and to local neighbourhoods. These recommendations are being implemented as priority strategy goals.

These views of young Londoners of what makes for a child-friendly London have also influenced the concept of *well-being* and the associated *outcome framework* that we develop in this report.

It is vital, of course, that we understand and measure the well-being of London's children using the more traditional and commonly used measures such as child poverty, infant mortality, child pedestrian casualties and educational achievement. However, the well-being of London's children is also linked to a range of less quantifiable outcomes including: access to public places and spaces; opportunities for play, recreational and leisure activities; and the quality of their social relationships and their physical environments.

Data relating to some of these 'softer' measures are not widely or routinely collected or included in indicator sets. This report highlights where there are clear gaps. It draws, too, on some of the new quality of life indicators, which are closely linked to the strategy's emphasis on sustainability and to the priorities and concerns of young Londoners themselves.

1.6 Report structure and preview

The first SOLCR drew on a very wide range of data sources to describe the socio-political position of London's children within the broader national context. Also important were the findings of consultations with young Londoners themselves.[xvii]

This second report draws on a similarly wide range of data sources to update the previous report and to paint a picture of the well-being of London's children in 2004. It draws on the original sources, where available, and on more recent sources, as appropriate, especially on the evidence base of its publisher, the Greater London Authority (GLA). The 2001 Census is an important new source as it provides demographic information about young Londoners and new information about their households, their living circumstances and their health. Children and young people's ideas and views are represented through a range of consultations and research, including a 2004 GLA survey of more than 1,000 young Londoners.[xviii, 2]

In line with the UN Convention on the Rights of the Child, children are defined in the report as being under the age of 18.[xix] However, some data relating to older young people, in their late teens and early twenties, is also included, and children are not considered in isolation from their parents and carers.

The report is structured around the following eight themes or areas of children's lives:
- child poverty and economic well-being

- being healthy

- enjoyment

- achievement

- transport and road safety

- families, social care and protection

- safe homes and communities

- a positive contribution.

These themes aim, as far as possible, to do justice to the totality and complexity of London children's lives, views and experiences. They are similar to the eight themes used in the first report, but have been adapted to reflect the five outcome areas identified by the national government for monitoring children's well-being.

This change facilitates comparison between outcomes data at the London and national levels

and provides a basic structural framework for monitoring the CYPS.

The discussion of the eight themes forms the core of the report. Under each theme, or area of children's lives, we consider:

- What research evidence is available in this area and what does this evidence tell us?

- What is government policy in relation to this area of children's lives?

- What does the available evidence tell us about London's children, in particular?

- Do the data highlight any trends (of improvement or deterioration) for London's children and their lives?

- Are there clear gaps in our knowledge about London's children in relation to this area?

The main focus is on outcomes for children, although some data relating to service provision and evaluation is also included (principally in the chapters on achievement and on families, social care and protection).

The report begins by setting out some basic demographic data about London's children (Chapter 2). The concluding chapter focuses on the key question of whether the state of London's children has deteriorated or improved (Chapter 11).

At the end of each chapter, there are short policy boxes, which summarise national government targets and policies; pan-London, including GLA, policy; and relevant policies in the Mayor's CYPS or other mayoral initiatives.

Notes

1   Defined here, as in the first SOLCR and in the Mayor's Children and Young People's Strategy, as all ethnic groups not classified, in Census data, as 'white'.
2   Just over 1,000 (1072) London residents (aged 11 – 16 years) were interviewed in 150 randomly selected locations across Greater London, with profiles sourced from 2001 Census data. Quotas were set on the sex and age of the respondents, and on the working status and social class of the parents, to ensure that the survey sample was representative.

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vi   See www.childfriendlycities.org

vii   For the first report, see Bradshaw J (ed.), The Well-being of Children in the UK, Save the Children Fund, 2002

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xiii   Department for Education and Skills, Every Child Matters, DfES, 2003

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xv   Greater London Authority, The Case for London: London's Loss is No-One's Gain, The Mayor's Submission to Spending Review, GLA, March 2004

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xvii   See Office of Children's Rights Commissioner for London, Sort it Out! Children and Young People's Ideas for Building a Better London, OCRCL and 3,000 young Londoners, OCRCL, 2001

xviii   Greater London Authority, Young Londoners' Survey June 2004: draft report on key findings, report prepared for the GLA by Sherbet and ICM Research, 2004

xix   United Nations, Convention on the Rights of the Child, 1989

2 London and London's children

2.1 London's total population

London is one of the largest and most culturally diverse cities in the Western world. The total population of London is 7.36 million.[i] This is by far the largest population of any city in the UK – more than seven times bigger than Birmingham and more than 10 times bigger than Glasgow.

More than two million London residents – 29 per cent of the population – belong to a black and minority ethnic (BME) group, compared with just 9 per cent in England and Wales.[ii] People of Indian, black African and black Caribbean origin are the most highly represented among the BME populations.

GLA projections suggest that London's population will rise by just over one million between 2001 and 2021 (Figure 2.1). The proportion of London's population from BME groups is also projected to increase until it reaches a third (33 per cent) by 2011.[1]

Figure 2.1   London's rising population

2001 – 2006:	population rises from 7.31 million to 7.59 million
2006 – 2011:	from 7.59 million to 7.86 million
2011 – 2016:	from 7.86 million to 8.11 million
2016 - 2021:	from 8.11 million to 8.34 million

Source: GLA, 2003 Round Demographic Projections, DMAG Briefing 2004/05

2.2 London's child population

The total child population

London is home to 1.61 million children under the age of 18, accounting for almost 22 per cent of London's total population.[iii] Just under one-third (29 per cent) of all households in London have at least one dependent child.[iv] The proportion of London's children within the total population is similar to that for England as a whole, but it is higher than in the majority of European cities.

London has more boys than girls, in common with England as a whole. This pattern is largely replicated across the age groups and across the London boroughs[v] (Appendix tables 1 and 2).

The diversity of London's children

Two-fifths (41 per cent) of young Londoners under 18 belong to a BME group[2] (52 per cent in Inner London) compared to one-quarter of London's adults and 13 per cent of children in England and Wales.[vi]

Children of Indian origin are more highly represented in Brent, Ealing, Harrow and Hounslow. Tower Hamlets, Camden and the City of London have high proportions of Bangladeshi

children. The highest proportions of black Caribbean children live in Lambeth and Lewisham and black African children are highly represented in Hackney, Lambeth and Southwark.[vii] (see Appendix table 3).

Age structure and distribution of the child population

London has a greater share of 0 – 4 year olds and a marginally smaller share of 5 – 17 year olds than England and Wales as a whole (Figure 2.2).[viii] This difference is linked to a tendency for households with older children to move out from inner London, with negative impacts on Inner London's unemployment and poverty rates.

Figure 2.2   Population structure, mid-2001 population estimates, London and England

Source: ONS, mid-year population estimates

The proportion of children within the total population also varies throughout the city (see Appendix table 4).[ix] Children under 16 make up a slightly larger proportion of the whole resident population in outer London (20.1 per cent) than in inner London (18.7) (Greater London
19.6 per cent).

There is considerable variation in the distribution of children between the London boroughs. For example, children under 16 make up only 9 per cent of the total population in the City of London and 13 per cent in the City of Westminster compared to 23 per cent in Barking and Dagenham and Hackney and 25 per cent in Newham (Appendix table 4).[x]

Family type

London's children are more likely to be living in a lone parent family, and less likely to be living in a married or cohabiting couple family, than children who live elsewhere in England. One in seven (14.4 per cent) of London's children live in a lone parent family, compared with just under one in nine (11.5 per cent) in England as a whole. Just over 35 per cent of London's children live in a married or cohabiting couple family, compared with nearly 39 per cent in England.

However, this pattern is largely accounted for by the pattern in inner London. Whilst one in six (18 per cent) of inner London's children are living in a lone parent family, and just over 30 per cent are living in either a married or cohabiting couple family, the respective proportions in outer London are one in seven (14.4 per cent) and 37 per cent (see Appendix table 5).

The projected growth in London's child population

Whilst the child population is forecast to fall by 7 per cent nationally between 2001 and 2011, the child population of London will continue to grow during this period.[xi]

Figure 2.3   London's rising child population

2001 – 2006:   population rises from 1.62 million to 1.68 million
2006 – 2011:   population rises from 1.68 million to 1.75 million
2011 – 2016:   population rises from 1.75 million to 1.82 million
2016 - 2021: population rises from 1.82 million to 1.89 million

The under-fives population, already proportionately larger, is projected to grow at a faster rate than other age groups.

GLA projections suggest that BME children will account for an increasing proportion of London's child population growth from 2001 to 2021 and that the number of London's children who are from BME groups will increase to 1.1 million by 2021.[3]

Notes

1   The most recent provisional figures from the GLA

2   Defined here, as in the first SOLCR and in the Mayor's Children and Young People's Strategy, as all ethnic groups not classified in Census data as 'white' (these groups are 'white British', 'white Irish' and 'white other').

3   This estimate is based on a definition of BME groups as all ethnic groups other than white British.

References

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iii   ONS, 2002 mid-year population estimate

iv   Greater London Authority, 2001 Key Census Statistics: People, Families and Households, DMAG Briefing 2003/14, 2003

v   ONS, 2001 mid-year population estimates

vi   2001 Census data

vii   2001 Census data

viii   ONS, 2002 mid-year population estimate

ix   ONS, 2001 mid-year population estimates

x   ONS, 2002 mid-year population estimate

xi   Greater London Authority, 2004 Round Demographic Projections

3 Child poverty and economic well-being

3.1 Introduction

Poverty has serious and adverse effects on children's lives. A large body of evidence, gathered over many years, points to the immediate and longer-term impacts of poverty on children's chances of social inclusion: on their health, education, social and psychological development.[i] New research is focused on gaining a better understanding, from children themselves, about how poverty impacts on their everyday experiences.[ii, iii]

Since 1999, the government has given high priority to tackling poverty and social exclusion. Broad policy programmes have been introduced to promote social inclusion (such as Sure Start and the Children's Fund). Initiatives have also been established to promote working opportunities (such as the New Deal programmes and improved childcare) and to make work pay (such as the minimum wage and new tax credits). Where work is not possible, new tax and benefit measures have been introduced to raise incomes.[iv]

In March 1999, the government set targets, to reduce child poverty by one-quarter by 2004, by a half (by 2010) and to end it in a generation (by 2020). Child poverty is to be measured using a new tiered approach and the progress of the wider strategy to tackle social exclusion is being monitored and reported annually in *Opportunity for All*.[v]

This chapter describes what we know about poverty and London's children, by drawing on a range of different evidence including studies that prioritise the perspectives and experiences of children themselves. We set the evidence in context with a brief discussion of some definition and measurement issues.

3.2 Defining and measuring child poverty

The question of how to define and measure child poverty continues to be the subject of considerable debate amongst academics and policy specialists. The official UK child poverty measure is the proportion of children living in households with disposable income below 60 per cent of the median of the national income distribution for households, after taking differences in household size and composition into account (known as 'equivalisation'). Disposable income is recorded both before and after housing costs.

It is possible that this measure may omit groups whose members are particularly vulnerable to poverty (such as people in institutions, travellers, disabled people, refugees, asylum seekers and homeless people). Children, particularly London children, are highly represented in many of these groups.[vi]

Research has shown a clear link between low income and material deprivation[1] and measures of material deprivation, encompassing some idea of the practical effects of low income, can also be included when measuring child poverty.[vii] [2]

A new government measure, to be introduced in 2006, is based on three interrelated measures of absolute low income, relative low income, and material deprivation and low income combined. All three tiers will focus on income *before* (and not after) housing costs. This is important, as income before housing costs data *overstate* the living standards of people in areas of high costs relative to the standard of their accommodation.

The measure used by the GLA, and in Section 3.3 below, is the measure after housing costs, as this properly reflects the high costs of housing

in London.

3.3 Child poverty in London: relative income measures

London in the national context

Over the last five years, there has been a steady and welcome decline in the proportion of children in the UK who are living in poverty (as measured by the official poverty measure and after housing costs). However, the position in London is noticeably different and it is too early to talk confidently of a reducing trend in the capital's child poverty rate.

Between 1998/99 and 2000/01 London's child poverty rate ranged from 41 – 43 per cent, about 10 per cent higher than the national rate. In 2001/02 there was the first downward shift since the mid-1990s, and the London rate fell to 35 per cent.[viii] However, in 2002/03 child poverty in London rose again and it appears that the fall from 2000/01 to 2001/02 may have been due, in part at least, to a statistical error.[ix]

The most recently published Households Below Average Income (HBAI)[x] data show that London has the highest child poverty rate, after housing costs, of any region in the UK. Thirty-eight percent of London's children are living in poverty compared with an England average of 29 per cent (Table 3.1).

Table 3.1   Percentage of children in households below 60% median income, by geographical region, 2002/03

Region	Children in households below 60% median income (before housing costs) (%)	Children in households below 60% median income (after housing costs) (%)
England	20	29
North East	32	37
North West and Merseyside	22	30
East Midlands	24	30
West Midlands	23	29
Eastern	22	29
London	**25**	**38**
Inner London	**37**	**54**
Outer London	**18**	**30**
South East	12	20
South West	17	25
Scotland	23	27
Wales	25	30
Northern Ireland	22	27

Source: HBAI, 2004

Child poverty and inequalities between London's children

Child poverty, in London, has spatial dimensions[xi] with London's overall rate resulting from the combined effect of very different rates in inner and outer London. Outer London's child poverty rate (30 per cent) is close to the national average (29 per cent), whereas Inner London's rate (54 per cent) is far higher.

Borough level summaries of the new Income Deprivation Affecting Children Index (IDACI) for England allow for the most recent analysis of poverty across the London boroughs[3, xii] (Appendix table 6). The extent of income inequality between London's children is also demonstrated in wide variations between the boroughs, in the proportion of children who are eligible for free school meals[4] (Appendix table 7).

Child poverty in the capital has a clear ethnic dimension.[xiii] Children from BME groups are more likely to experience poverty and, because BME groups make up a far greater share of London's total child population, over half of London's poor children are from a BME group.[xiv] Children of Pakistani or Bangladeshi origin are particularly affected by child poverty. In 2001, 69 per cent of London's Pakistani/Bangladeshi children were living in poverty (after housing costs) compared to 27 per cent of white children.[xv]

London has proportionately more children, than nationally, in other groups which have been shown to be at high risk of poverty: children living in a lone parent household; children living in a family where the youngest child is under five; children living in a household where no one is employed.[xvi]

Indeed, London's high rates of poverty can best be explained in terms of:
- the relatively high rates of 'worklessness' experienced by London households with children (particularly in inner London) (see
  Appendix table 8)

- the London-specific barriers to employment which these
  households face.[xvii]

3.4 Poverty-linked inequalities and key groups of Londoners

Much of public policy concern about child poverty centres on the adverse effects on children's future adult lives. However, child poverty plays a critical role in determining the quality and experiences of children's current, as well as their future, lives.

The first SOLCR provided evidence to show how key groups of Londoners experience a range of poverty-linked inequalities, in relation to health, housing, education, transport and leisure and within the youth justice system.

These groups include:
- child refugees and asylum seekers (RAS)

- runaways and homeless children and young people

- gypsy and traveller children

- disabled children

- young carers

- care leavers

- teenage parents

- children excluded from school.

Children from some of these groups: RAS children, runaways and homeless children, care leavers, teenage parents and children who are excluded from school are more highly represented in London than in England as a whole. The experiences of these groups of children are discussed and reviewed in subsequent chapters of this report.

3.5 Children's experiences and accounts of poverty

Several recent national surveys have focused on children and their families' access to material necessities and their capacity to participate in social activities. There are also a range of studies and initiatives in the UK which combine to make a strong case for more participatory approaches to researching and tackling poverty, including hearing the voices of children themselves.[xviii] Research in this area adds greatly to our understanding about the impact of poverty on children's lives and makes an important contribution to the development of strategies to address its causes and impact.[xix]

National survey research has found that child poverty has a clear impact on children's access to material goods and to leisure opportunities. A recent study found that, in 2002, 'there were still families that went without items and activities many would regard as necessary'. Such families were most commonly deprived of leisure activities, such as holidays and money for trips and outings. Lone parent families were considerably less likely to be able to go on holidays, trips and outings than couple families. The quality and nature of the family diet was also affected.[xx]

Recent research,[xxi] involving in-depth interviews with children living in poverty, has shown how young people are excluded from the consumer culture of their more affluent peers and prevented from making and sustaining friendships because of the financial barriers posed by transport and because of the fear of stigma associated with their financial hardship. Children also experience exclusion from school activities and express concern about the stigma attached to receiving free school meals.

This research draws on children's own voices to show how child poverty affects the development of children's human and social capital. Child poverty permeates every aspect of children's lives, affecting their access to material goods and their social and emotional well-being. Whilst these are national, not London-based studies, their findings are highly relevant for our focus on London's children.

Key groups of London children experiencing poverty-linked inequalities

Child refugees and asylum seekers

The UK has for many years become home to refugees from other countries, and the majority of refugees live in London. London's RAS children include both children in their households and unaccompanied children.

Local Education Authority (LEA) data suggest that 6 per cent of London's children are refugees; in September 2003, the London boroughs were supporting 4,231 unaccompanied asylum-seeking children and 15,414 in families. These figures give some idea of the numbers involved, although they are likely to be underestimations.[5, xxii]

London's RAS children (and their families) experience a wide range of poverty-linked inequalities in access to the capital's education, health, and leisure and social care services. Unaccompanied children constitute a particularly vulnerable group.

Runaways and homeless children and young people

London has witnessed increasing homelessness over recent years, reflecting a continuing fall in the availability of permanent affordable housing. Many of London's homeless households include children – whose health, education and well-being is critically affected by living in poor and temporary housing.

Homelessness amongst young people is also particularly acute in the capital. The majority of young runaways have experienced family conflict or break-up. London's young homeless people, under 16, are a particularly vulnerable group.

Gypsy and traveller children

The Office of the Deputy Prime Minister (ODPM) estimates that there are about 5000 gypsies and travellers in London.[xxiii] Key groups include Romany gypsies, and Irish and English travellers. As gypsies and travellers are not included in national or local ethnic monitoring schemes, we cannot give an accurate estimate of the number of children in London.

Key issues affecting gypsy and traveller children include a lack of site provision, a lack of basic amenities, sites on polluted and hazardous areas, and a range of inequalities in health and in education and within the youth justice system.[xxiv]

Disabled children

Parents with disabled children are often unable to work because of a lack of suitable child care, and disproportionate numbers of disabled households live in poverty because of the additional expenses of bringing up a disabled child, together with confusion regarding benefit entitlements.[xxv] Disabled children also experience a range of inequalities in their access to leisure, transport and education.

There are difficulties involved in estimating the number of disabled children and young people in London because of the lack of a clear definition of what constitutes a disability, and because of problems of identification, even where a definition is agreed. The 2001 Census found that 4 per cent of London's child population had a long-term illness, health problem or disability that affected their daily activities.

Young carers

Young carers may face many inequalities in their access to education and to leisure. According to the 2001 Census, more than 22,000 young Londoners (1.4 per cent of London's child population) are caring for a member of their household; and 1,700 (8 per cent) of these are providing care for 50 or more hours per week.

Care leavers

Care leavers are more likely to have lower educational attainment; to be unemployed, to experience teenage parenthood, and to be homeless or living in poor housing. London has

higher rates of looked-after children and care leavers than England as a whole.

Teenage parents

Teenage motherhood is associated, in the UK, with an increased risk of poor social, economic and health outcomes. London also has higher rates of teenage pregnancy than national rates.

Children excluded from school

Nearly one and a half thousand (1,480) children were excluded from London schools, according to provisional data for 2002/03. This is at a rate of 0.14 per pupil, compared with a rate, for England, of 0.12. Children who are excluded from school have lower rates of achievement and young people who are out of education are more likely to become disaffected and to lack the qualifications that are needed to enter the labour market.

The government has set targets to reduce child poverty by one-quarter by 2004, by a half (by 2010) and to end it in a generation (by 2020). Child poverty is to be measured using a new tiered approach and the progress of the wider campaign to tackle social exclusion is being monitored in relation to income, health, education and housing indicators, and is reported annually in Opportunity for All (Department for Work and Pensions (DWP), 6th Annual Report, September 2004).

Major reforms, introduced in the Green Paper Every Child Matters (2003), reaffirm the government's commitment to promote children's economic well-being. The recent Child Poverty Review sets out the government's continuing strategy to address child poverty (HM Treasury, July 2004).

A new government measure of poverty, to be introduced in 2006, is based on three interrelated measures of: absolute low income; relative low income; and material deprivation and low income combined. Child poverty will be seen as falling when all three indicators are moving in the right direction.

The new measure will focus on income before housing costs, which overstates the living standards of people in areas of high costs relative to the standard of their accommodation. The GLA will continue to use the after housing costs measure, as this properly reflects the high costs of housing in the capital.

Notes

1   As time spent in low income increases, the severity of deprivation increases too.
2   It is important to note, too, that whilst most child poverty measures provide a 'snapshot' picture of the number of people in poverty at any one time, poverty may be transitional and short-lived for some children, and persistent and severe for others.
3   IDACI is a supplementary index of the Index of Multiple Deprivation 2004. The IDACI comprises the percentage of children (under 16) in a small area (SOA) who are living in families in receipt of Income Support and Job-seekers Allowance or in families in receipt of Working Families Tax Credit/DPTC whose equivalised income is below 60 per cent of median before housing costs.
4   Children whose parents are on income-related benefits are entitled to free-school meals.
5   Data on refugee and asylum-seeking children is collected by the LEAs, the Home Office, the London Asylum Seekers Consortium and the Refugee Council. The Greater London Authority is carrying out a review of these data sets, with a view to publishing an estimate, in 2005, of the total number of refugee children in London.

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4 Being healthy

4.1 Introduction

Research with children and young people has highlighted their concerns about the adverse health effects of poor diet, smoking, alcohol and drugs. It has also shown that children and young people link their health to a much broader concept of well-being. Health is linked, in young people's accounts, to their relationships with family and with peers, to safer communities and surroundings – in short, to the quality of their social, emotional and physical environments.[i, ii, iii]

This means that strategies to improve child health must adopt a broad approach which recognises that children's health is affected not only by the more traditional areas of health concern (usually physical health and social care services) but also by restricted activity, traffic danger, lack of access to appropriate play spaces, and by education policies which emphasise achievement at the expense of enjoyment. Qualitative studies with children also point to the importance of developing less tangible and quantifiable health outcomes to measure and monitor children's health and well-being.[iv]

This report adopts a broad and holistic understanding of child health as a positive state of physical, social and mental well-being, and it focuses in all chapters on 'health-related issues' and issues of 'well-being'. However, the framework for this chapter is informed by national and London-based health targets, which focus on quantifiable, more readily measurable aspects of children and young people's health and health-related behaviour.

The chapter begins with a brief look at the national and local policy context before reviewing the evidence about the health of London's children in three interrelated areas:
- physical health: including childhood and infant mortality, stillbirths, immunisations, general health status, long-term illness, asthma
  and diabetes

- healthy lifestyle issues: including physical activity, obesity and diet, smoking, alcohol and drugs, teenage pregnancy and sexual health

- emotional health and well-being: including bullying and disparagement; mental health and illness.

4.2 Children's health: the policy context

Children's physical and mental health and well-being is affected by individual, familial, social, environmental and lifestyle factors, as well as by their access to services.[v] Most of the key determinants of health (such as education, housing and the environment) lie outside the direct influence of health and social care services.[vi]

Child health has improved enormously over the last century in the UK. However, injuries and accidents are competing with childhood illnesses as the greatest cause of childhood death; rates of asthma and diabetes are increasing; and there are new child health issues emerging such as obesity, drug and alcohol use, sexually transmitted diseases and mental ill health. [vii]

Poverty continues to be by far the most significant impediment to child health. Child poverty is associated in the UK with childhood mortality, with neglect and physical abuse, teenage

pregnancy, smoking, lack of self-esteem and suicide and increased health risks in adulthood. It is a key factor in a range of health inequalities that affect BME families, young homeless people, looked-after children, children of refugees and asylum seekers, young carers and disabled children.[viii]

Tackling health inequalities is a central component of the national government's social exclusion agenda, and government policy aims to address both the determinants and outcomes of poor health.[ix] Particular emphasis is given to the need for stronger partnerships between health and education.[x] *Every Child Matters: the next Steps*[xi] describes how a National Service Framework (NSF) for Children, Young People and Maternity Services will 'set national evidence-based standards for the health and social care services for children and pregnant women, and the interface with education'.

In London, the London Health Commission (LHC) has taken forward work on a London health strategy, which was developed in 1999-2000 by a partnership of regional and local agencies and identified priorities for Londonwide action to improve health[xii]. The emphasis is on work towards reducing health inequalities, including black, Asian and ethnic health inequalities and inequalities in child health. The London Health Observatory has developed indicators to help support local action to achieve the national government's inequalities targets.[xiii] Many of these have direct or indirect relevance to children.

The LHC has also established a children and young people's forum in 2003 which aims to:
- highlight links and support joint working, between health and education services

- champion the cause of children and young people within London on behalf of the LHC

- act as the main advisory group on children and young people's health issues to the LHC, the GLA and Mayor.

4.3 The health of London's children: physical health

Childhood and infant deaths

Rates of childhood and infant mortality have decreased substantially in England and Wales over the past century. Mortality rates are at their highest at and just after birth. They fall in the post-neonatal period[1] and during childhood, with the lowest rates between the ages of 5 and 9 years.[xiv]

Social deprivation is linked to mortality, especially to deaths at over 28 days after birth. Research has pointed to a clear class gradient, with the highest rates of infant and childhood mortality in social classes IV and V.[xv]

Infant mortality

Infant mortality rates are commonly used as an indicator of general well-being within a community as they represent the extent to which a society is able to protect its most vulnerable members. Rates of infant mortality in London have fallen in recent years, in line with the national picture. Although the London rate (5.6 per cent) is higher than many other UK regions, it is only marginally higher than average rates for England and the UK (both 5.3 per cent) (see Table 4.1 below).

Table 4.1   Rates[2] of infant mortality: London, in relation to the UK:

1981 – 2002

	1981 (%)	1993 (%)	2001 (%)	2002 (%)
United Kingdom	**11.2**	**6.3**	**5.5**	**5.3**
North-East	10.4	6.7	5.6	5.0
North-West	11.3	6.5	5.9	5.4
Yorkshire and the Humber	12.1	7.3	5.8	6.2
East Midlands	11.0	6.6	5.0	5.6
West Midlands	11.7	7.1	6.4	6.5
East	9.7	5.4	4.5	4.4
London	**10.7**	**6.5**	**6.1**	**5.6**
South East	10.3	5.3	4.2	4.5
South West	10.4	5.8	5.4	4.4
England	10.9	6.3	5.4	5.3
Wales	12.6	5.5	5.4	4.7
Scotland	11.3	6.5	5.5	5.2
Northern Ireland	13.2	7.1	6.0	4.7

Source: Adapted from Table 7.4, in Office for National Statistics, Still births, perinatal and infant mortality, Regional Trends 38 (data set last updated 25.2.04)

There continue to be wide differentials in infant mortality rates at strategic health authority level[xvi] and between the London boroughs (Appendix table 9).

There is some evidence to suggest that rates of infant mortality are higher for children of gypsy and traveller groups than for children in the settled community.[xvii] However, we are unable to comment reliably on ethnic inequalities in infant mortality as data on ethnic background, births and childhood deaths are not routinely collected. Data sources linking mothers' country of birth to infant mortality are available, but these are inadequate as an indicator of ethnicity as those BME mothers who are born in this country are not included.[3,][xviii]

Childhood mortality

In London, in the years 2001 – 2002, there were 796 deaths of children aged 1 – 19. Fourteen per cent of these (111) were as a result of road traffic accidents, 8 per cent (63) from assault,[4] 7 per cent (55) from other accidents and injuries, and 6 per cent (49) were classified as deaths from self-harm. Cancer (16 per cent), diseases of the nervous system (11 per cent) and infectious diseases (4 per cent) together accounted for just under a third of all deaths (Table 4.2).

This pattern is similar to the pattern in England and Wales, although the proportion of deaths from road traffic accidents is notably lower in London.

Table 4.2   Childhood mortality in London, England and Wales, 2001/02

Cause of death	London: Total number of deaths	%	England and Wales: Total number of deaths	%
Land transport accidents	111	14	1036	19
Intentional self-harm	49	6	365	7
Assault	63	8	250	5
Other accident and injury	55	7	460	8
Cancer	130	16	826	15
Diseases of the nervous system	85	11	617	11
Infectious diseases	32	4	225	4
All other deaths	271	34	1736	31
Total	796	100	5515	100

Source: data provided by ONS

Childhood immunisations

Recent debates regarding the measles, mumps and rubella (MMR) vaccination reflect clear tensions, in relation to childhood immunisations, between questions of public interest and personal choice.[xix] However, evidence also illustrates the health benefits for children and their communities of high immunisation rates.[xx]

Rates of immunisation in London are particularly low, both in comparison with other world cities and with most major UK cities (Table 4.3).[xxi]

Table 4.3   Percentage of children immunised by their 5th birthday: 2001/02 – London and other major UK cities

	Number of children	Diptheria, tetanus and polio: primary (%)	Diptheria, tetanus and polio: primary and booster (%)	Pertussis: primary (%)	Hib: primary (%)	MMR: 1st dose (%)	MMR: 2nd dose (%)
England	608,436	94	81	93	93	91	74
London	90,274	89	70	88	88	83	58
Birmingham	14,539	96	79	95	95	95	75
Leeds	8,187	83	76	92	91	90	73
Manchester	6,950	77	60	75	74	75	54

| Glasgow | - | 95 | - | - | - | - | - |
| Liverpool | 5,639 | 96 | 71 | 94 | 95 | 93 | 63 |

Source: Department of Health, in London Assembly: Health Committee Report (2003)

London's low immunisation rates may be linked to London's high levels of mobility and to its ethnic diversity, together with high levels of deprivation. Poorer inner London areas, in general, have lower rates of coverage, a finding that is in line with other studies, which point to social inequalities in the take up of immunisation.[xxii] However, the full explanation for London's low rates is not clear and more research is needed in this area.

Large-scale survey data and general health status

The general health status of London's children appears to be similar to children nationally, as measured by self-report ratings.

The Health Survey for England (HSE) 2002 found that the majority of children aged 0 – 15 (93 per cent) had good or very good health ratings and only 1 per cent had ratings that were bad or very bad.[xxiii] There was little regional variation, although London's children were more likely than children in the North East to be reported to have good health. Positive health ratings were linked to income, with higher proportions in the top three income quintiles reporting good or very good health.[5]

This pattern is broadly in line with 2001 Census data. (90 per cent of London's under 16 year-olds were described as having 'good' health, 9 per cent fairly good and 1 per cent as not good, compared with percentages of 91 per cent, 8 per cent and 1 per cent in England). However, evidence from the HSE suggests that London's children may be healthier than children elsewhere using measures of long-term illness[6] and of acute sickness.[7]

Whilst the 2001 Census found that a similar proportion of London's children (aged 0 – 15) was affected by long-term illness as nationally (4.2 per cent in London/4.3 per cent nationally), the HSE found that the prevalence of long-standing illness was lower for London's children than for children in any other region; and among young adults the prevalence was lower in London than the national average (Table 4.4).

Table 4.5 (below) shows that the same pattern holds in relation to a measure of acute sickness.

Table 4.4   Prevalence of long-standing illness by Government Office region, age and sex

	% Boys (0 – 15)	% Girls (0 – 15)	% Young men (16 – 24)	% Young women (16 – 24)
North East	28	21	25	27
North West	26	22	25	23
Yorkshire and the Humber	25	21	21	24
East Midlands	28	21	26	29
West Midlands	23	20	27	23

East England	23	19	23	26
London	**19**	**15**	**23**	**25**
South East	24	20	29	29
South West	24	19	24	28
Total	**24**	**20**	**25**	**26**

Source: Health Survey for England, 2002

Table 4.5   Prevalence of acute sickness, by Government Office region, age and sex

	% Young women (16 – 24)	% Boys (0 – 15)	% Girls (0 – 15)	% Young men (16 – 24)
North East	15	14	10	14
North West	15	14	12	13
Yorkshire and the Humber	15	13	12	17
East Midlands	12	14	8	17
West Midlands	12	11	13	14
East England	13	14	15	15
London	**10**	**9**	**9**	**10**
South East	12	15	10	14
South West	13	12	12	13
Total	**13**	**13**	**11**	**14**

Source: Health Survey for England, 2002

Inequalities in general health status

Analysis of 2001 Census data shows that children[8] from inner London are less likely to be described as in good health and more likely to be described as in not good health than children in outer London although the differences are small (88.5 per cent of inner London's children were described as in good health and 1.5 per cent as in not good health, compared with 90.2 per cent and 1.2 per cent of children in outer London). Inner London children are also marginally more likely to be reported as having a limiting long-term illness (4.7 per cent of inner London's children compared with 4 per cent in outer London).[9]

BME groups are more likely than people from white British groups to report poor health, with Pakistani and Bangladeshi men and women over 50 years old reporting the highest levels of 'not good' health.[10, xxiv, xxv] The HSE does not provide any analysis by ethnicity of children

and young people's health.

The Research with East London Adolescents Community Health Survey (RELACHS) involved a sample of nearly 3,000 11 – 14 year olds, the majority of whom were from BME groups.[11] This study found that rates of self-reported ill health were high relative to national rates, and suggested that these high rates may be linked to high levels of social disadvantage, low income and ethnicity.[xxvi]

The Census highlights some ethnic differences in the reported health status of London's children. Children from black and from mixed ethnic groups were more likely than children from other groups to be reported to have a long-term illness. Children from mixed groups and from Asian groups were less likely to be reported as being in good health and more likely to be reported as being in poor health than children from other groups.

Table 4.6, which summarises this data, shows that the differences are small between the broad ethnic groupings. However, there are also some wide variations between particular groups. For example, more than 5 per cent of London's black Caribbean children and nearly 6 per cent of London's mixed (white and black Caribbean) children have a long-term illness, compared with just under 3 per cent of Chinese children, and 85 per cent of black Caribbean children are reported to be in good health, compared with 92 per cent of black African children.

Table 4.6   Health status, by ethnicity: London's children

	Good health (%)	Fairly good health (%)	Not good health (%)	Has limiting long-term illness (%)
White	90.7	8	1.3	4.0
Mixed	88.5	10	1.5	4.8
Asian	87.3	11.2	1.5	4.3
Black	87.3	11.4	1.3	5.1
Chinese	87.1	11.9	1.0	2.8
Other group	87.4	11.1	1.5	3.4

Source: Census 2001

Asthma

There has been an increase of about 50 per cent in the prevalence of childhood asthma in the UK over the last 30 years[xxvii] and a 1998 study found that the prevalence of severe wheezing was higher in the UK than in 56 world countries.[xxviii]

There has been much debate about the link between traffic-related pollution and asthma. The Mayor's Air Quality Strategy aims to reduce road traffic air pollutants in London by measures including the congestion charge zone. The strategy notes that a large number of London households are living adjacent to busy roads where traffic-related pollution exceeds air quality objective levels. It also notes that studies in Nottingham and the Netherlands have shown an

association between living in polluted areas and respiratory problems in children.[xxix]

However, there appears to be no convincing evidence to suggest that asthma is more common in urban areas than in rural areas of the UK.[xxx] Regional analysis of the HSE data shows that London and the South East were generally more likely to have lower prevalence of doctor-diagnosed asthma than in other regions.

Diabetes

Diabetes is one of the most common chronic conditions in children in the UK. Type 1 diabetes is much more common in children, than Type 2.[12]

The National Paediatric Diabetes Audit collects annual information about children with diabetes from paediatric diabetes units (including 16 in London). The 2002 Audit estimates that nearly 17,000 children (under 16) in England have diabetes (a prevalence of 1.62 per 100,000 children). Rural areas appear to show a higher incidence of diabetes than towns, so rates in London may be lower. However, if prevalence rates in London are assumed to be the same, then approximately 2,500 London children have diabetes.[xxxi]

This audit found a cause for concern in the proportion of children with blood sugar levels that were too low and too high. White children were more likely than BME children to have very low levels. The data also point to an increasing prevalence of Type 2 diabetes amongst white children, which may be linked to a lack of recreational facilities, together with the use of modified fats and sugars by the food and drinks industry.[xxxii]

4.4 The health of London's children: healthy lifestyles

Physical activity, obesity and diet

Traffic danger and of fear of 'stranger danger' have led, over the last decade, to restrictions on children's use of public space and on their independent mobility. These lifestyle changes are commonly linked, along with dietary factors, to rises in childhood obesity.

Children and young people express considerable concern about the restrictions on their independent activity,[xxxiii] and about the lack of provision for regular and enjoyable exercise.[xxxiv, xxxv] Concerns about eating badly, not exercising, depression and body size also featured strongly in a recent Young Voice study of more than 1,000 young Londoners.[xxxvi, 13]

The findings from the HSE provide some recent comparative data for London and England in relation to physical activity, obesity and consumption of fruit and vegetables.

The HSE found that boys (aged 2 – 15) were generally more physically active than girls. Children's overall activity levels did not differ according to household income. However, children from low income households were less likely to take part in sports and exercise.

London children were more likely to have medium levels of activity, but smaller proportions of children from London had high activity levels than in any other region (Table 4.7).

Table 4.7   Children's activity levels[14] (aged 2 – 15) by Government Office region and sex

	North East (%)	North West (%)	Yorkshire and the Humber (%)	East Midlands (%)	West Midlands (%)	East England (%)	London (%)	South East (%)	Total (%)
Boys									
High	74	70	74	73	70	68	64	72	70
Medium	13	14	8	11	14	15	19	11	13
Low	13	16	18	16	16	17	17	17	17
Girls									
High	64	65	62	65	64	63	53	56	61
Medium	15	14	13	16	14	15	25	17	16
Low	21	21	25	20	22	23	23	27	22

Source: Health Survey for England, 2002

The HSE found that about one in 20 boys and one in 15 girls (aged 2 – 15) were obese, and one in five boys and just under one in four girls were either overweight or obese. Amongst 16 – 24 year-olds, almost one in ten young men and almost one in eight young women were obese, and one-third were either overweight or obese.

Being overweight and obese was more common in the more deprived areas for both children and young adults, and there was a steady upward trend in the prevalence of obesity across sex and all age groups from 1995 to 2002.

No clear regional patterns were identified in the proportions of those groups who were overweight or obese, although the data suggest that London boys were marginally more likely than boys elsewhere to be overweight (Table 4.8).

Table 4.8   Age-standardised body mass index (BMI) and overweight and obesity prevalence (international classifications) in boys (aged 2 – 15) by Government Office region

	North East	North West	Yorkshire and the Humber	East Midlands	West Midlands	East England	London	South East	Total England
% overweight	17.1	15.8	14.8	16.8	16.1	15.7	19.4	14.9	16.3
% obese	7.6	4.4	4.1	6.1	5.9	6.6	7.1	7.1	5.5
% overweight including obese	24.8	20.2	18.8	22.9	22.0	22.2	26.5	26.5	21.7

Source: Adapted from Health Survey for England, 2002

There is no national survey data relating to obesity and ethnicity. However, the Research with East London Adolescents: Community Health Survey (RELACHS) found that rates of obesity were high in comparison to national rates and further research will be looking at whether obesity rates vary by cultural group and are related to diet and sedentary lifestyles.[xxxvii, 15]

With regard to diet, the HSE found that girls and young women reported eating more fruit and vegetables than boys and young men. Consumption of fruit and vegetables was directly linked to income, with higher levels of consumption amongst those in the higher income groups.

London's children and young adults consumed significantly more fruit and vegetables than children and young adults in any other areas (Table 4.9).

Table 4.9   The percentage of children and young adults eating 5 or more portions of fruit and vegetables per day, by region

	North East England	North West	Yorkshire & the Humber	East Midlands	West Midlands	East	London	South East	South West
Boys, aged 5 – 15	11	12	10	8	9	10	19	14	8
Girls, aged 5 – 15	8	8	11	10	13	10	17	13	10
Young men, aged 16 – 24	14	14	15	18	10	13	19	16	15
Young women, aged 16 – 24	15	19	18	18	15	16	22	18	17

Source: Health Survey for England 2002

Nevertheless, the proportion of young Londoners who eat five or more portions of fruit and vegetables per day is still small, at around one-fifth, and other reports raise concerns about the diet of London's children.

The London Development Agency (LDA) and London Food Link describe how many Londoners on low incomes lack access to fresh and nutritious food. Thirteen wards in East London boroughs are identified as 'food deserts' with no local provision of affordable fresh food.[xxxviii, 16]

A Kings Fund survey of nearly 400 young Londoners from secondary schools, found that 45 per cent of respondents did not have breakfast before school, that some did not eat at all in the school day and that young people were concerned about the prices of school food, particularly the healthier options.[xxxix]

Cigarette smoking, alcohol and drugs

Cigarette smoking and alcohol and drug misuse pose significant threats to the health of children and young people, and there are clear links between poverty, deprivation and these health-related behaviours. For example, children and young people from lower income households are more likely to smoke.[xl] Young people with a drug dependency are more likely than other young people to be runaways, to have been expelled from school, to have experienced violence in the home, to have been sexually abused and to have been bullied.[xli]

Data from a major national survey of over 10,000 secondary school children aged 11 – 15, shows that the prevalence of regular smoking (at least one cigarette a week) has remained stable at between 9 per cent and 11 per cent since 1998. Girls are more likely to be regular smokers than boys and there is a sharp increase in the prevalence of smoking with age.[xlii]

The HSE 2002 survey found that there was a tendency for London to show lower prevalence of smoking across all age groups than other regions (Table 4.10).

Table 4.10   Percentage of children and young adults with cotinine levels of 15 ng/ml or more,[17] by region

	North East	North West	Yorkshire & the Humber	East Midlands	West Midlands	East of England	London	South East	South West
Boys, aged 4 – 15	6	5	5	3	4	4	3	3	5
Girls, aged 4 – 15	4	4	4	4	4	4	2	4	6
Young men, aged 16 – 24	34	36	38	42	36	32	29	35	35
Young women, aged 16 – 24	42	36	36	30	38	35	28	34	44

Source: Health Survey for England, 2002

The prevalence of alcohol drinking amongst young people aged 11 – 15 increased markedly from 1996 to 1998 and has since fluctuated. The average amounts drunk also increased, over the same time period, from 5.3 to 9.9 units. In 2003 25 per cent of 11 – 15 year-olds had drunk alcohol in the last seven days[xliii]

The proportion of young men and women (aged 16 – 24) who drink more than the recommended weekly limit has increased in the last five years by almost one-third for men and by as much as a half for women.[xliv] There are notable increases in binge drinking amongst young women. In 1998 38 per cent of young women reported drinking six or more units on their heaviest drinking day. By 2001/02, this proportion had increased to 52 per cent.[xlv, xlvi]

However, young Londoners appear to consume less alcohol than young people in other regions. Young Londoners are also considerably more likely to report that they never drink (Tables 4.11 and 4.12).

Table 4.11 Children's self-reported frequency of drinking alcohol by region and sex

Drinking frequency	North East England	North West	Yorkshire & the Humber	East Midlands	West Midlands	East	London	South East	South West
Boys									
About once a week or more (%)	6	4	8	7	6	7	3	6	4
About once a fortnight (%)	4	4	3	2	5	4	3	3	7
About once a month (%)	4	6	7	8	5	6	4	6	4
Only a few times a year(%)	31	22	23	22	21	30	19	24	31
Never drinks (%)	54	64	59	60	63	52	70	62	54
Girls									
About once a week or more (%)	5	6	4	5	4	7	3	4	5
About once a fortnight (%)	3	3	5	6	3	5	2	4	5
About once a month (%)	5	4	7	7	4	7	3	6	5
Only a few times a year (%0	28	22	19	25	21	24	15	24	23
Never drinks (%)	60	66	65	57	67	58	76	61	61

Source: Health Survey for England, 2002

Table 4.12 Young adults' estimated usual weekly alcohol consumption, by region and sex

Drinking frequency	North East England	North West	Yorkshire & the Humber	East Midlands	West Midlands	East	London	South East	South West
Young men									
Have never drunk alcohol (%)	5	12	9	8	8	4	21	8	2
Mean weekly units	26.2	28.7	30.9	25.1	25.3	18.5	18.5	22.7	27.0
Young women									
Have never drunk alcohol (%)	6	6	9	9	10	4	24	7	5
Mean weekly units	18.0	14.3	13.9	10.8	12.5	11.9	10.3	13.0	11.5

Source: Health Survey for England, 2002

A major national survey shows that the prevalence of drug taking amongst 11 – 15 year-olds, in England, remained relatively stable between 1998 and 2003. Cannabis was the most likely drug to have been taken (13 per cent of 11 – 15 year-olds had taken cannabis) and 4 per cent of young people had taken Class A drugs, such as heroin and cocaine, in the last year.[xlvii]

We have been unable to access any large-scale data on the prevalence of drug taking amongst children in London. However, a 2001 Young Voice survey of more than 2000 young Londoners (aged 10 – 16) found that 15 per cent had tried drugs, with levels of drug awareness and the likelihood of being offered drugs varying substantially among schools.[xlviii] By the age of 15 young people were almost four times as likely to know someone who was taking drugs than they were at age ten.

The Greater London Authority Drug Alliance (GLADA) reports that 31 per cent of young Londoners (aged 16 – 29) claim to have taken an illegal drug in the past year, compared to a national average of 25 per cent; that Londoners are more likely than people elsewhere in the country to use Class A drugs; and that levels of cocaine use are more than double the national level.[xlix]

Nationally, people from BME groups are less likely to have used illegal drugs than white people.[18] The RELACHS study in East London also identified that rates of smoking, alcohol and drug use were comparable to, or lower than, rates among young people nationally.[l] The Young Voice survey found, conversely, that among those who had used drugs, black young people were more likely to be regular users of heroin or ecstasy than any other ethnic group. However, these findings must be viewed with caution as the numbers are small.[li]

Teenage pregnancy, sexual health, AIDS/HIV

Teenage motherhood is associated, in the UK, with an increased risk of poor social, economic and health outcomes. However, not all teenage conceptions are unplanned or unwanted and many teenage parents, and children of teenage parents, report positive experiences.

A recent research study, which included interviews with children of teenage parents and with adults who were previously teenage parents, found that teenage parenthood was strongly associated with dislike of school and low educational achievement. Violence in the home and bullying at school were also important themes in teenage mother's childhoods. This study found that key factors associated with positive outcomes included family support, a positive partner relationship and an enjoyable career or employment. The researchers observe that many of the negative experiences of teenage pregnancy result from factors relating to social exclusion, rather than to the teenage pregnancy per se.[lii, 19]

The UK has the highest rates of teenage births of any country in Western Europe; rates are higher than 26 other countries and second only to the USA.[liii]

Teenage conception rates in London have fluctuated from 1998 to 2002, with no clear trend. This is in contrast to the pattern in other regions, which show a reducing trend from 1998 to 2001 (with small increases from 2001 – 2002).

Table 4.13 shows that London had the highest rate of teenage conception of any English region in 2002.

Table 4.13   Under 18 conception rates, English regions and England and Wales, 2002*

1998 conception	1999 conception	2000 conception	2001 conception	2002 conception

	rate	rate	rate	rate	rate
England and Wales	47.6	45.8	44.1	42.5	42.8
England	47.0	45.3	43.9	42.3	42.6
North East	58.0	56.5	51.4	48.6	51.6
North West	51.4	49.9	47.9	45.1	45.2
Yorks & Humber	53.7	51.6	48.1	47.0	47.0
East Midlands	49.5	44.1	42.9	40.0	40.3
West Midlands	51.9	49.8	49.0	46.8	46.9
London	51.0	51.5	50.8	50.1	52.0
South East	37.7	36.2	36.1	34.8	34.4
South West	39.9	37.9	36.3	36.8	35.5

* Rates are per 1,000 female population aged 15 – 17.

Source: Office of National Statistics, adapted from table published by the Government Teenage Pregnancy Unit

London's high rate is linked to particularly high rates in inner London. There are also marked differences in teenage conception rates between the boroughs, ranging from 26.3 in Richmond upon Thames to 100.4 in Lambeth, (Appendix table 10).

There is very little data on teenage pregnancy and ethnicity although the Teenage Pregnancy Strategy includes action to improve information about ethnic variation in teenage conceptions. However, recent research shows that: teenage motherhood is more common amongst Caribbean, Pakistani and Bangladeshi young women; that young Indian women are less likely than white women to have a baby before they are 20; and that there has been a marked decline in early parenthood in South Asian communities in Britain.[liv]

Sexual health

Between 1995 and 2002 rates of diagnoses of gonorrhoea increased 270 per cent and chlamydia by 310 per cent, in young women aged 16 – 19.[lv] In 2002 young women aged 16 – 24 accounted for 72 per cent of all female chlamydia diagnoses, 66 per cent of gonorrhoea, 62 per cent of syphilis and 61 per cent of genital warts diagnoses in Genito-urinary Medicine (GUM) clinics in England, Wales and Northern Ireland. Young men accounted for 53 per cent of male chlamydia, 40 per cent of gonorrhoea and 43 per cent of genital warts.[lvi]

Most cases of gonorrhoea occur in inner city areas, including London, with teenagers from black Caribbean backgrounds particularly affected. There is considerable diversity among different minority ethnic groups' experiences of HIV and sexually transmitted infections (STIs), reflecting diversity in migratory patterns, socio-economic circumstances and discrimination.[lvii] Genital warts, the most common STI nationally, are less frequent in all minority ethnic groups than in the white population.

Children and young people affected by HIV/AIDS

Young people, aged 16 – 24, account for 10 per cent of all new HIV diagnoses in the UK. This figure has remained relatively constant over time.[lviii]

The prevalence of HIV in adults is increasing, however, and the majority of adults who are diagnosed with HIV live in London (54 per cent in 2002).[lix] This means that whilst there are small numbers of London children with an HIV diagnosis, a greater number are affected by HIV within their families.

Research shows that children and their families who are affected by HIV face a complexity of problems. Many are dependent on state benefits, experience poor housing and may be marginalised and isolated.[lx] The difficulties that these children and their families face may be compounded by the fact that many are of African origin and new to this country.[lxi] AIDS is also reported to be a source of fear and anxiety for many of the young callers to ChildLine.[lxii]

4.5 The health of London's children: emotional well-being and mental health

Bullying and disparagement

Bullying and fear of bullying are a major issues with effects including anxiety and depression, absence from school, poor self-esteem, isolation and even self-harm and suicide.[lxiii]

National studies suggest that the incidence of bullying is very high. A recent study with 7,000 young people, found that more than half had been bullied, one in ten severely so, with one-quarter saying that bullying was the main cause of stress in their lives.[lxiv] During 2002, the telephone helpline ChildLine counselled over 21,000 bullied children, and bullying was the biggest single reason for children's calls for the sixth year running.[lxv]

In the 2004 GLA Young Londoners' Survey,[20] more than half (54 per cent) of the young respondents thought that bullying was a problem in their local neighbourhoods, 61 per cent cited bullying as a problem at school and 46 per cent saw this as a problem on public transport. Just under one-fifth (22 per cent) of young people reported that they had been bullied, with the proportion rising to nearer one-third (29 per cent) of those who were disabled.[lxvi]

Another recent survey of nearly 3,000 young people in secondary schools in East London also found that one-fifth had been bullied, but as many as 64 per cent had experienced victimising behaviour.[lxvii, 21] Bullying and racism are closely related and may be more commonly experienced by young refugees and asylum seekers and young people from BME groups. Many young Londoners also experience disparagement on account of their sexual orientation, religion or gender.[lxviii, lxix]

Mental health

According to the HSE the prevalence of mental disorders has shown an increase across all the age groups, with the highest increases in boys and young women (Table 4.14).

Table 4.14   Mental disorders (per 1,000 of the population) children and young adults, 1997 – 2002

	Boys	Girls	Young men	Young women
1997	14	8	12	11

2002	30	11	21	25
Increase 1997 – 2002	16	3	9	14

A major national survey of the mental health of 5 – 15 year-olds in England, Scotland and Wales[lxx] found that 10 per cent of boys and 6 per cent of girls (aged 5 – 10 years), and 13 per cent of boys and 10 per cent of girls (aged 1 – 15) had a mental disorder. The prevalence of mental disorders was higher in boys, those living in a low income household, those living with a lone parent and those living in a household where neither parent was working.

This survey also found that rates of mental disorder were higher in inner London than in other areas; and particularly for boys aged 11 – 15
(Table 4.15).

Table 4.15 Prevalence of mental disorders, by region, age and sex

	Inner London	Outer London	Other Met England	Non-Met England	England	Scotland	Wales	All
Boys								
5 – 10 years	9.1	10.2	11.5	10.5	10.8	8.2	7.7	10.4
11 – 15 years	**20.4**	**13.9**	**11.2**	**13.4**	**13.1**	**10.1**	**12.1**	**12.8**
All boys	14.8	11.6	11.4	11.7	11.8	9.0	9.8	11.4
Girls								
5 – 10 years	6.1	8.2	6.0	5.5	5.9	7.3	5.0	5.9
11 – 15 years	8.0	5.8	11.1	9.3	9.6	8.8	11.9	9.6
All girls	6.9	7.1	8.1	7.2	7.5	8.0	8.3	7.6
All children								
5 – 10 years	7.5	9.2	8.7	8.0	8.3	7.7	6.4	8.2
11 – 15 years	14.6	9.4	11.2	11.3	11.3	9.4	12.0	11.2
All	10.9	9.3	9.8	9.4	9.6	8.5	9.0	9.5

A more recent study, focusing on three generations of 15 year-olds (in 1974, 1986 and 1999) reports some findings that are a cause for concern about the mental health of older young people in Britain. The study found that emotional problems, such as anxiety and depression, had increased markedly since 1986 and that there had been an increase in behavioural problems over the whole period. These findings could not be explained by rises in inequality (as the rates of increase were comparable across all social classes) or by changes in family structure (as there were increases across all family types).[lxxi]

There is little large-scale survey evidence on ethnicity, mental health for children and young people. However, the RELACHS survey of young people in East London found that rates of psychological distress were markedly higher than national rates.[lxxii]

Young Minds, the children's mental health organisation, notes that the higher levels of poverty and unemployment among minority ethnic families may increase the risks for some children. The children of refugees, who have witnessed or been involved in violence, torture and abuse, may be particularly vulnerable.[lxxiii]

Self-harm

Government research suggests that as many as one in seventeen 11 – 15 year-olds in Britain may have attempted to harm themselves[lxxiv] and the National Children's Bureau (NCB) is currently undertaking a European-wide study to provide better information on the scale and characteristics of self-harm.[lxxv]

A recent National Children's Home (NCH) study involving users of NCH projects who had self-harmed found that, whilst the majority of the young people had attempted suicide at least once, most saw self-harm as a way of coping with depression and emotional distress and as a means, therefore, of preventing suicide.[lxxvi] Most also linked the onset of their self-harming with particular problems in their lives, such as unwanted pregnancy, being bullied at school, not getting on with parents, parental divorce, abuse, rape, bereavement and entering care.

Suicide

Whilst suicide rates have been falling among older men and women, they are rising among young men and suicide is the largest single cause of death among young adults. Suicide is more common too among people from lower income groups.[lxxvii] ChildLine found that many of the young people with suicidal feelings that they counselled had also experienced bullying, and/or sexual or physical abuse.[lxxviii]

ONS data show that there were 49 childhood deaths from self-harm in London in the two years from 2001 to 2002 (see *childhood mortality*). This represents 6 per cent of all childhood deaths in London, compared with a proportion of 7 per cent in England and Wales.

The Government published the *Children's National Service Framework (NSF)* on 15th September 2004. This sets mandatory standards for children's health and social services, and the interface of those services with education, for everyone who comes into contact with or delivers services to children, young people or pregnant women. The NSF is to be implemented over ten years.

Starting with children under one year, the government has set a target to reduce by 2010, by

at least 10 per cent, the gap in mortality rates between routine and manual groups and the population as a whole.

Government policy on physical activity, obesity and healthy eating has included Department of Health (DH) consultations on exercise and diet *(Choosing Health; Choosing Activity and Choosing Health; Choosing a Better Diet)* and initiatives such as the National Healthy Schools Programme, the National Schools Fruit Scheme, and the DfES/Deparment for Culture, Media and Sport (DCMS)-led PE, *School Sport and Club Links* (PESSCL) programme. A new cross-departmental *Healthy Living: the Blueprint* to help schools support children in leading healthy lifestyles was launched in September 2004.

Key national targets include to:
• increase the proportions of children and young people consuming five or more portions of fruit and vegetables per day in the lowest quintile of household income distribution

• increase the percentage of 5 – 16 year-olds who spend at least 2 hours each week on high quality physical education (PE) and sport to 75 per cent by 2006.

The national government target is to reduce the prevalence of smoking amongst young people aged 11 – 15 from a baseline of 13 per cent in 1996 to 11 per cent by 2005 and 9 per cent or less by 2010.

The government's updated Drug Strategy places particular emphasis on early prevention and intervention with high-risk groups. The government aims to substantially reduce the numbers of young people aged under 25 reporting use of illegal drugs, and aims to halve the proportion using heroin and cocaine.

The government Teenage Pregnancy Strategy aims to reduce by 50 per cent the 1998 England under 18 conception rate (by 2010), with a 15 per cent reduction by 2004; including reducing the inequality between wards with the highest and average conception rates.

Infant mortality rates are also included as a key top-line indicator for the measurement of London children's health (London Health Commission, Health in London, 2004).

The Mayor is committed to supporting the work of the London Health Commission in the development and delivery of its 'healthy young London' campaign. The three strands of the programme are eating healthily, being physically active and promoting positive emotional well-being.

Action to reduce the harmful effects of alcohol on children and families is set out in The London Agenda for Action on Alcohol (2004), a joint publication by the Mayor of London and the GLADA. The Mayor and GLADA have separately published a report for tackling problematic drug use among young refugees and asylum seekers (Young Refugees and Asylum Seekers in Greater London: vulnerability to problematic drug use, July 2004).

Notes

1   Post-neonatal: after 28 days of age.
2   Deaths of children under 1 year, per 1,000 live births.
    3   These have shown that births to mothers born outside England and Wales have higher infant mortality rates than births to mothers born inside England and Wales.
    4   The new category 'assault' refers to homicides and also includes other unspecified events of undetermined intent with an inquest verdict pending.

5   The HSE provides ratings for children and young people's general health on a five-point scale, ranging from very good to very bad. Young people aged 13 and over rate their own health and parents/guardians provide ratings for those aged under 13.

6   The HSE asks whether children and young people have any long-standing illness, disability or infirmity that affects them, or is likely to affect them, over a period of time. The 2001 Census asks whether each person in the household has a long-term illness, health problem or disability that limits daily activities or work.

7   The HSE asked whether children and young people had experienced any illness or injury over the past two weeks that caused a decline in their usual activities.

8   The analysis is based on all London's dependent children. This includes all children (aged 0 – 15) in a household (whether or not a family) and young people aged 16 – 18 who are full-time students in a family with parent(s).

9   Comparison of these figures, with figures from the 1991 Census reported in the first SOLCR, show that there has been an overall increase, between 1991 and 2001, in the proportion of London's children reporting a limiting long-term illness (the figures from the 1991 Census are 3 per cent in inner London and 2.3 per cent in outer London). However, there appears to have been no widening of inequality between children in inner and outer London as the increase is the same (1.7 per cent) in both parts of the city.

10   Amongst those aged over 50 years in London, the percentage that reported their health as 'not good' (in the 2001 Census) was highest in the Asian British Bangladeshi and Pakistani groups and was also high in the Indian and black Caribbean groups.

11   Bangladeshi, 25 per cent; black Caribbean, black African, Somali and black other, 20 per cent; Indian, 9 per cent and Pakistani, 7 per cent.

12   Ninety-seven percent of children in the National Paediatric Diabetes Audit had Type 1 diabetes, for which the most likely cause is the abnormal reaction of the body to insulin-producing cells. Type 2 diabetes appears more commonly among middle-aged or elderly people and is mainly caused by the body no longer responding to its own insulin and/or the body is no longer producing enough insulin (http://www.diabetes.org.uk/diabetes/get.htm).

13   This study involved 1,032 young Londoners aged 10 – 28.

14   The HSE collected information about children's (aged 2 – 15) activity levels in four areas: sports and exercise, active play, walking, housework and gardening. Children's activity levels were rated as high (60 minutes or more on all 7 days of the week – in line with the British Heart Foundations recommendation of an hour's physical exercise a day); medium (30 – 59 minutes on all 7 days) or low (a lower level of activity).

15   See Footnote 11.

16   The LDA has established a new body, London Food, whose remit includes work to improve the diet of Londoners. London Food will seek to ensure that small retailers can flourish and supply fresh food, particularly to those on low incomes.

17   This level of cotinine in the saliva is indicative of smoking (cotinine is a chemical that is made by the body from nicotine, which is found in cigarette smoke).

18   The GLADA report notes that problem drug users from BME groups may find it particularly difficult to access appropriate drug services and identifies a need for more research into the nature of drug use amongst London's diverse population.

19   This multi-method longitudinal study combined secondary analysis of two data sets from studies conducted between 1986 and 1994 (The Social Support and Pregnancy Outcome Study) and from 1999 to 2001 (the Social Support and Family Health Study), together with follow-up data from both samples through questionnaire and in-depth

interviews.

20   See note 1, Chapter 1, for a description of the survey.

21   The King's Fund survey of nearly 400 young Londoners found a higher incidence of bullying than both these surveys. Over half the young people said that they had been bullied.

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5 Enjoyment

5.1 Introduction

Children and young people have the right to inhabit a shared public realm[1] and to access freely their cities' streets and public places and spaces.[i] They also have the right, under Article 31 of the UN Convention,[ii] to engage in a range of play, leisure, cultural and sporting activities.

However, evidence collated in the first State of London's Children Report demonstrates how children and young people's independent access to the public realm has been increasingly restricted, principally on account of traffic danger and 'stranger danger', and how these restrictions have a stronger impact on London's children. The report also highlights how the Article 31 rights of young Londoners have not been adequately met, with inequalities in access affecting refugee and asylum seeking children, children from black and minority ethnic (BME) groups, and disabled children.[iii]

This chapter reviews the recent evidence in relation to these trends and considers whether inequalities in these areas are continuing to have a disproportionate impact on London's children. The chapter focuses first on children and young people's access to the public realm, second, on opportunities for active play and third, on services and facilities for older children. The chapter ends with a brief discussion of London children's access to London's sporting and cultural opportunities, and key issues affecting disabled children.

We include some discussion of the role that both statutory and voluntary agencies play in the planning of public spaces and in the funding and development of play and leisure opportunities. This is a complex area involving many agencies, initiatives and funding schemes, and coherent planning for children's out-of-school lives is hindered by the lack of a clear national strategic framework.

5.2 Children, young people and public space

In line with its policy commitment to urban regeneration and to the promotion of sustainable communities, the government has committed to improving the quality of the nations' streets, parks and public spaces.[iv] But whilst policy efforts are being made to ensure that public spaces are cleaner, safer and greener, research continues to point to a pattern of restrictions on children's independent access to these spaces:

- The proportion of children who walk to school declined markedly between 1971 and 1990, and has continued to decline between1990 and 2002.[v]

- In 2004, a study with 10 – 11 year-olds found that many children preferred to spend time at home because of concerns about road traffic accidents, street safety and 'stranger danger'.[vi]

- A 2002 survey of more than 600 young people aged 11 – 18 reported that many young people felt restricted in their options for activities outside the home.[vii]

Children do, of course, continue to spend time unsupervised in their neighbourhood and streets, where traffic conditions allow this. A recent national travel survey found that nearly one-fifth of 5 – 15 year-olds had spent time playing out, talking to friends, riding bikes or skateboarding; and children spent quite long periods of time, sometimes between 2 and 3

hours, on the street.[viii]

However, a further area for concern is public perception about children and young people in public spaces.[ix] More than one in three adults, in a 2003 national survey, thought that children and young people were not generally welcome in public spaces such as shops, restaurants and leisure centres; and only half the children and young people said that they felt welcome most of the time in such places. Moreover, over 70 per cent of adults agreed with the statement that 'parents do not adequately control their young children in public spaces' and over half with the statement 'I feel threatened by groups of teenagers hanging around in streets and public spaces'.[x] In London, in a survey of young people's attitudes towards their use of public space, young people reported that 'adults are aggressive and horrible to us' and that 'adults think children are the scum of the earth'.[xi]

These examples illustrate how children and young people's access to public space is influenced by adult perceptions of them, not as equal citizens with rights to public space, but either as vulnerable people in need of protection or as potential 'troublemakers' and sources of threat. Most commonly, there is an age association, with younger children being viewed as in need of protection and older children as a threat to order. However, the recent establishment of evening curfews for under-16 year-olds is probably the best example of a policy initiative within which children are viewed both as vulnerable and as threats.[2]

5.3 Opportunities for active play: the position of London's children

The importance of active play for London's children

Children play in a range of places: at home, out on the streets near their homes, in public parks and open spaces and in a wide range of supervised and unsupervised designated play facilities.

For younger children, having the time and space to play is an essential element in their healthy development. Older children may not generally view their activities as 'play', but they also need time, space and freedom to meet their friends, to enjoy themselves and to engage in self-determined activities without adult supervision and control.[xii]

These opportunities for play are a critical and free resource for all young Londoners, but particularly for those on low incomes whose access to commercialised and costly play and recreation facilities may be limited.

Levels of active play

The most recent Health Survey for England (HSE) (2002) looked at the extent of children's active play[3] and found that, whilst the majority of children engaged in active play, children in inner cities were less likely than children in other areas to do so[xiii] (Table 5.1).

Table 5.1   Children's participation in active play: inner cities and other areas

	Inner city	Other areas
Boys aged 2 – 10 (%)	87	95
Girls aged 2 – 10 (%)	89	94

Source: adapted from Health Survey for England, 2002

Although the differences between the rates of active play for inner city and children elsewhere are not very large, these findings are still notable and important for London. This is particularly so when they are viewed alongside the findings of an earlier study, by Margaret O' Brien, that London's 10 – 14 year-olds were less likely than children in a town outside London, to be allowed to play in the street, ride a bike on the main road or walk alone to a friend's house.[xiv]

These differences in engagement in active play are almost certainly linked to road traffic danger in urban areas.[4] Concerns about road traffic are expressed in rural and urban communities, but the associated risks are perceived to be higher in cities.[xv] Indeed, the level and age at which children play out is linked to the speed and the frequency of traffic, with more and younger children playing out when traffic speeds are slow.[xvi]

It is possible that ethnicity may also be playing a part in the lower rates of active play among inner city children. O'Brien identified clear ethnic variations in independent activity outside the home, with Asian girls, in particular, being restricted;[xvii] and ethnicity is a key influence, along with age and gender, on children's patterns of use of their local neighbourhoods.[xviii] However, the HSE cannot provide us with any analysis by ethnicity.

Access to parks and to green and open spaces

Parks and green and open spaces provide a vital free resource, in addition to and away from the streets, in which children and young people in cities can play, exercise and have access to the natural world. For children in lower income families, who may lack access to a private garden, such spaces are vitally important.

Young Londoners attach particular value to their parks and open spaces.[xix] In O'Brien's study, London children were more likely than children in towns outside London to rate parks as the site of their favourite after-school activity.

However, increasingly high land value sales have led, in London, to the sale of playing fields, playgrounds and open land. This is often in inner London, where deprivation levels are higher, and where open spaces for children to play are already in short supply. There is also considerable variation across London in the availability and quality of parks, playgrounds and nature reserves.[xx]

The 2004 GLA Young Londoners' Survey[5] found that just over half (55 per cent) of young Londoners reported living within a five minute walk[6] of a park or green space. However, almost one in six (16 per cent) were living more than 11 minutes walk away[xxi] (Table 5.2).

Table 5.2   Time taken to walk from home to a park or green space

	Percentage of young people reporting
Less than 5 minutes	55
Between 6 – 10 minutes	29
Between 11 – 15 minutes	10
16 minutes or more	6

Appendix table 11 lists the area of London strategic parks by borough,[7] and gives a measure of this area in relation to the child population (under-18). This demonstrates wide variation between the boroughs. Barking and Dagenham and Newham appear to have the lowest levels of park space, in relation to their child population and the highest levels are in Richmond upon Thames and Southwark.

London also has one-third (16) of the UK's 48 city farms. These projects work with people, animals and plants and provide a range of activities including food growing, school visits, community allotments and community businesses. Some also provide play and sports facilities and after-school and holiday schemes. City farms provide an important resource for children in urban areas, particularly for those who may lack access to green space.[xxii]

Recent policy trends and London children's access to play opportunities

The government has recently commissioned an independent review of children's play services and needs[xxiii] and the importance of play is emphasised in initiatives including Sure Start and the Children's Fund. However, unlike Wales and Northern Ireland, England has no national play policy and 'play' has to operate without any statutory or national strategic framework. There is also considerable variation in play funding and provision between local authorities, with varying interpretations given to the responsibility to provide play space. Many authorities do not have public realm strategies or outdoor play policies.[xxiv]

There is an absence of data that maps the extent and nature of London's play services and provision. There is some evidence of improved play provision linked to programmes of regeneration work, local Sure Start and Children's Fund programmes.

However, London Play argues that the government's recent policy emphasis on supporting more adults into work, together with its concern to reduce the risks of social exclusion, has meant that childcare, youth crime and child protection have dominated the policy agenda, with local authorities moving resources out of play provision and into services that meet centrally determined targets.[xxv] Alan Sutton notes that these recent policy trends may be linked to reductions in play schemes and free open access play provision, and a corresponding move from community provision and nominally charged-for universal services towards more expensive private provision.[xxvi]

He suggests that this may have had a negative impact on children's access to play in the following ways. When subsidies for provision are removed from providers and the full costs are transferred to parents, it is likely that a reducing proportion of parents will be able to pay.[8] Moreover, such credits are not targeted at parents who, through illness or other reasons, are unable to work, and the children of these parents may miss out on play and childcare provision altogether.

A loss of embedded community play provision may also mean a loss of valuable community resources for London's BME children. Community groups such as BME self-help groups or tenants groups have commonly taken a lead in running local play schemes.[xxvii] Research carried out in London has suggested that there is a significant lack of use of mainstream play provision by BME children and that community schemes are the most effective in reaching

these children.[xxviii, xxix]

In addition, others have noted how concerns about child safety, child protection and possible litigation have played a critical role in shaping those play services which are maintained and developed.[xxx] An overly cautious approach to safety in play may satisfy adults' wishes to maximise children's protection but may lead to less challenging and exciting play environments for children and young people.

5.4 Services and facilities for older children

Youth services and facilities: the national picture

Many of the services for older children (aged 11 or over), such as Connexions, youth services, study support services and some out-of-school clubs are targeted interventions, focused on a particular group of young people, such as those at risk of social exclusion, educational underachievement or criminal behaviour. As with younger children, there has been a lack of an overarching or integrated approach to planning for older children's out-of-school lives, although a new government Green Paper on Youth (due to be published in late 2004) is expected to address the need for more co-ordination in service planning and delivery.

Research also suggests that levels of provision are inadequate and that for the majority of young people, there is nowhere to simply 'hang out' and have fun. The charity 4 Children[9] has estimated that just 13 per cent (616,580) of England's 11 – 16 year-olds have access to youth clubs and school-based clubs, leaving just under four million with no access at all.[xxxi,10]

Three-quarters of 15 – 16 year-olds in a recent survey thought that there wasn't enough for them to do (compared with 60 per cent of 11 – 18 year-olds) and only one in five attended youth clubs.[xxxii] A research project by the Institute of Public Policy Research (IPPR) supports these findings pointing to the inconsistent, unreliable and patchy services that are available to older young people.[xxxiii] These recent findings build on earlier studies in which young people have consistently described a lack of appropriate, enjoyable and affordable local opportunities.[xxxiv]

Youth services and facilities in London

London's youth services have seen considerable reductions in funding over the last decade, with wide disparities in levels of funding across the London boroughs.[xxxv] A 2000 survey of youth services found that the highest level of provision was in the voluntary sector with little local authority provision.[xxxvi]

The government has since laid down new standards and duties for local authorities in relation to the provision of youth services, including increases in funding with a local authority youth service budget of £100 per head, targeted to reach at least 25 per cent of 13 – 19 year-olds.[xxxvii] More recently, in its new 'youth offer', the Department for Education and Skills (DfES) has set out plans to create more opportunities for young people to get involved in their local communities and more places for young people to engage in enjoyable activities.[xxxviii]

What does the current evidence tell us about provision for London's older children, in relation to the national picture? Only 9 per cent of young Londoners (aged 11 – 16) in the GLA Young Londoners' Survey used youth clubs frequently. There is also a low uptake amongst young refugee and asylum-seeking children of non-targeted provision, and whilst many refugee

organisations offer services to young people, these organisations are limited by insecure funding and a lack of resources.[xxxix]

There appears to be a lack of clarity about whether the planned increases in youth service funding are materialising in extra cash for youth service managers and in extra spending on services for young people, and there are significant variations, in the accounts of some local authorities, between youth service budgets and official expenditure.[xl]

The most recent National Youth Agency audit data (2002/03) highlight considerable variations between the London boroughs in spending on youth services and in the proportions of young people that youth services reach.

Youth service budget as a percentage of the education budget:

Kensington and Chelsea and Wandsworth spend a greater proportion of their education budgets on youth services (2.9 per cent and 2.4 per cent, respectively), than any other London borough, and any authority nationally. Barnet and Hounslow spend a smaller proportion of their education budgets on youth services (0.7 per cent and 0.6 per cent, respectively) than any other London borough, and almost all areas nationally.

Spending per head on 13 – 19 year-olds

Islington and Kensington and Chelsea spend more per head on 13 – 19 year-olds (£223 and £211, respectively) than any other London boroughs and any national authority. Harrow and Brent spend the least per head of the London boroughs (£42 and £37, respectively) and they rank as very low spenders nationally.

Percentage of 13 – 19 year-olds reached

Sutton and Havering reach the highest proportions of 13 – 19 year-olds (56.4 per cent and 41.5 per cent, respectively) and come high in the national rankings. Enfield and Barnet reach the lowest proportions (8.4 per cent and 5.8 per cent, respectively) and are very low in national rankings.

Full details of these National Youth Agency audit findings are included in Appendix table 12.

5.5 Children and young people's access to sports, leisure, arts and cultural facilities and opportunities

Cost: a continuing barrier

London is a world-class centre of culture, the arts and entertainment. Its arts and cultural activities and facilities offer important opportunities for learning and are key to education in its widest sense. Libraries, museums and galleries provide an important source of enjoyment and learning. Opportunities for young people to engage in sport are critical to their enjoyment and have important health benefits too.

The first SOLCR identified that London's local neighbourhood facilities were beyond the financial reach of many young Londoners; that many of London's attractions and facilities were not child friendly; and that the cost, both of entrance tickets and travel to facilities and attractions, was a considerable barrier to children, young people and their families.

Recent studies point to young people's continuing concern about the costs associated with many of London's leisure activities. For example, costs were the second most commonly cited reason for not participating in activities by young Londoners in the GLA Young Londoners' Survey.[xli]

There is also some clear evidence, which shows that costs constitute an important barrier to London children's engagement in sports. The HSE points to a marked differential in sports and exercise participation between children in inner city and other areas (see Table 5.3). Children from low income groups were less likely than those in higher income groups to take part in these activities.

Table 5.3   Children's participation in sports and exercise: inner cities and other areas

	Inner city	Other areas
Boys aged 2 – 10 (%)	38	56
Girls aged 2 – 10 (%)	41	55

Source: adapted from Health Survey for England, 2002

More than half of the 11 – 18 year olds in the recent national Make Space survey took part in some kind of sport.[xlii] However, in the GLA Young Londoners Survey only 37 per cent of London's children (11 – 16) took part in sports frequently, and those in lower income households were less likely to participate.

MORI research carried published in February 2001 found that more than half of the visitors to galleries and museums were adults with children (53 per cent), and that the South East (including London) accounted for 4 out of 10 visits, whilst making up only 34 per cent of the UK population. Children from higher income families were more likely to visit. Children from BME groups were less likely to visit with parents and more likely to go with an organised group.[xliii]

The re-introduction of free entry to national galleries and museums, from December 2001, increased attendance by 62 per cent in the seven months following the move,[xliv] and the steepest increases in those using galleries and museums was reported to be in London.[xlv] However, whilst the proportion of visitors from lower income households increased from 14 – 16 per cent after the abolition of charges,[xlvi] the greatest increase has been among the higher income households.[xlvii] These findings suggest that cost is one of a range of factors that influence attendance.

Schools may have a particularly important role to play in promoting children and young people's access to museums and galleries, particularly for those children who may be less likely to go with family members. Recent (national) evidence suggests that the Renaissance in the Regions Education Programme has extended opportunities to a range of pupils, including many in areas of high poverty and social deprivation.[xlviii, 11]

Inequalities in access for disabled children

In 2001 the first SOLCR noted that 'all the available evidence points to the fact that, for children and young people with disabilities and learning difficulties, equality of opportunity with others in play and leisure activities does not exist'.

Local authorities now have a clear legal requirement, under the Disability Discrimination Act (1995), to provide services that are accessible and inclusive. However, across the country there continue to be clear barriers to disabled children's participation in play and leisure activities.

We do not have any London-specific data. However, an Audit Commission review highlighted a national shortage of both inclusive and specialist provision across the public, private and voluntary sectors.[xlix] A recent national survey by Contact-a-Family of just over 1,000 families with a disabled child found that many families were put off using services and facilities 'before they had even begun'.[l] Seventy-three per cent were put off by long queues; 68 per cent did not use leisure services because they were made to feel uncomfortable; 55 per cent had to travel outside their local area to find accessible facilities; 46 per cent found that their budget limited outings; and 25 per cent were put off by a lack of transport links. Bowling alleys were cited, in this study, as the most inclusive kind of facility, whereas parks and playgrounds were reported as being worst for disabled changing facilities and helpful staff.

Research carried out in Wales also suggests the particular importance of improving access to leisure for disabled teenagers, many of whom feel that they are 'missing out' on a good social life and need and wish to spend time away from their parents.[li]

The government has set out its commitment to children's play in a government-commissioned, national (Dobson) review of play services and needs (Department for Culture, Media and Sport (DMCS), 2004).

The Office of the Deputy Prime Minister (ODPM) recently published a guide to the provision of accessible play (ODPM, *Developing accessible play space: a good practice guide*, 2003), focused on the need for a major emphasis on the inclusion of disabled young people.

The DCMS aims to increase the participation in culture and sport by young people aged 16 – 19. There is a joint DH/DCMS public service agreement target to halt the year-on-year rise in obesity in under-11s by 2010. The Government will provide Creative Partnerships between schools and the arts for children; in the first two phases, five areas in London have been selected for the programme.

London was short-listed in its bid to host the Olympics (May 2004) and in recognition of this, and the benefits of sport, Sport England has published a *London Plan for Sport and Physical Activity* (also May 2004). This aims to increase levels of participation in sport and physical activity across the capital, including participation by under-represented groups.

The Mayor's *Draft Guide to Preparing Play Strategies* (GLA, 2004) includes guidance to the London boroughs on developing inclusive and accessible play environments and provision, through the collection of data on location, type and quality of children's play facilities.

The GLA Children and Young People's Strategy includes policies and actions to protect, enhance and promote children and young people's rights and access to play and open spaces in London. It has a particular focus too on ensuring inclusive access, both for disabled children and for other groups.

The Mayor is committed to improving access for children and young people in London, through initiatives including: free travel for schools to cultural venues (from April 2001); complementary initiatives include family tickets, 'pay as you can' and 'free entry' in museums and galleries; and a *Kids Swim Free* scheme with five London boroughs that doubled the number of swims for children under-16 in the 2004 Easter holidays.

The Mayor's Children and Young People's and Cultural Strategies set out a range of new initiatives, which prioritise new routes for young people to access arts activities from the early years. This includes a partnership project to develop a new national theatre in London, specifically for children.

Notes

1   The 'public realm' can be defined as including 'all spaces and places open to the public, including the inside of buildings where there is public access as well as streets, parks, squares and public transport interchanges'. The term 'public space', as used in this chapter, has the same meaning.

2   Using powers granted under the Anti-Social Behaviour Act (2003) the Metropolitan Police Service and local authorities designated, in 2004, 15 dispersal areas in London where any under 16 year-olds found unaccompanied by an adult between 9pm and 6am can be moved or picked up by officers and returned home.

3   Defined as riding a bike, kicking a ball around, running about and playing active games.

4   Fears of 'stranger danger' may also be important, although such fears have little basis in statistical evidence (see Chapter 8).

5   See note 1, Chapter 1, for a description of the survey.

6   There are no nationally agreed standards on accessibility to green spaces. The Audit Commission has provided guidance relating to the distance of citizens from public open spaces. The GLA Survey was informed by this guidance but adopted a temporal, rather than a spatial, measure as the researchers believed that this would be more meaningful to young people.

7   This does not include smaller open/green spaces, so the data should be viewed with caution.

8   The evidence has shown relatively low take-up rates in London of government tax credits to help with child care costs (see Chapter 8).

9   Formerly Kids' Club Network.

10   Estimate based on data from the National Association of Youth Clubs and Make Space Schools Survey.

11   Funded by the Department for Culture, Media and Sport (DCMS) and the DfES, the Renaissance in the Regions Education Programme aims to develop and improve the learning and educational potential of museums and to broaden participation.

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6 Achievement

6.1 Introduction

The government's education policy is built on the twin goals of ensuring economic prosperity and building a fairer and more inclusive society.[i]

Principal policy measures have included:

• a major expansion of pre-school education

• measures to improve the recruitment and retention of teachers

• measures to increase the numbers entering further education and

• a wide range of initiatives to raise standards, particularly for groups with poorer educational outcomes such as black Caribbean pupils and looked-after children.

London has some of the highest performing schools in England, including many Beacon schools.[1] However, London's extremes of poverty and wealth, its wide diversity, high levels of pupil mobility, high staff turnover and shortage of teachers, together contribute to a difficult context for the agenda to raise standards, particularly in secondary schools.[ii, iii] Many of these elements on their own are not unique to the capital but 'the multiplicity and concentrated severity of the difficulties faced by schools is unique to London'.[iv]

The government has also promoted a quasi-market in education. This market gives precedence to parental choice, is intended to increase equity and improve standards, and is predicated on competition. However, the challenges facing education in London are compounded by London's highly competitive education market. This is characterised by high pressure for places in the most popular schools, large numbers of children crossing borough boundaries to travel to school, and relatively low proportions of parents and children being offered a place in their preferred school.

This chapter reviews the recent evidence about the achievement of London's children and looks at what young Londoners have to say about their schools and their education. The chapter begins by providing some more detail about London's schools and about the unique circumstances facing education in London.

6.2 Schools and schooling in London

Early years' provision

There is a large body of research evidence which points to the role of high quality pre-school experiences in supporting children's cognitive and social development and which shows the benefits of early years intervention for more disadvantaged children (see Families, social care and protection, Chapter 8, for further discussion).[v]

The government has made a commitment to a considerable growth in early years provision. All three and four year-olds are guaranteed a free early education place and a new pilot will extend free part-time places to 12,000 two year-olds in disadvantaged areas.[2]

The number of three and four year-olds taking up free nursery education places has risen in the capital at a similar rate to England as a whole and the proportion of London's children who

took up places in 2003 (87 per cent) was also similar to the national figure (85 per cent) (Table 6.1).

Table 6.1   Numbers and percentages[3] of three and four year-olds taking up free nursery education, London and England, 1999 – 2003

	1999 **Number of** **children taking up** **free place**	**1999** **% of 3 – 4** **year-old** **population**	**2003** **Number of** **children taking up** **free place**	**2003** **% of 3 – 4** **year-old** **population**
London	132,300	70	165,800	87
England	819,500	68	1,024,000	85

Source: adapted from DfES, Provision for children under five years of age in England, January 2003

There were 90 maintained nursery schools and 1,300 maintained primary schools with nursery classes in London in 2003. Two-thirds of London's child population under the age of five were receiving education in maintained nursery and primary schools, compared with a national average of 59 per cent.[vi] Recent evidence from Ofsted suggests that children of gypsies and travellers are less likely than more settled groups to take up pre-school education.[vii]

Primary, secondary and other school provision

London had 1,862 primary schools and 407 secondary schools in London, as at January 2003, with the majority of these sited in outer London. There were also 157 special schools and 58 pupil referral units, 456 independent schools, 5 city technology colleges and 2 academies. The total number of London schools was just under 3,000 (2,947) (Table 6.2).

Table 6.2 Schools, by number and type in London and England, January 2003

	Primary	Secondary Academies	Special All schools referral units	Pupil Schools	Independent Technology Colleges	City	
Inner London 1	708	133	69	26	227	3	1167
Outer (London) 1	1,154	274	88	32	229	2	1780
London 2	1,862	407	157	58	456	5	2947
England 3	17,861	3,436	1,160	360	2,160	15	24,995

Source: Table adapted from DfES: All schools, number of schools by type of school, LEA and Government Office Region in England

These figures show some changes in the distribution of school provision since 2001, with a reduction of 17 in the total number of schools.[4]

6.3 The context for education in London

Socio-economic diversity

London's extremes of wealth and poverty are reflected in the city's high proportion of independent schools[5] and high numbers of pupils who are eligible for free school meals.

If we look at independent schools as a proportion of all schools in each region, we see that London has a greater proportion of independent schools than anywhere else in the country (15.5 per cent), and that this is largely accounted for by a particularly high proportion in inner London (19.5 per cent) (Figure 6.1).

Figure 6.1   Percentage of independent schools, as a proportion of all schools

Source: adapted from DfES: All schools, number of schools by type of school, LEA and Government Office Region in England

Table 6.3 shows that London's children have the highest rates of eligibility for free school meals in England, with particularly high levels in inner London (Appendix table 7 lists borough figures).

Table 6.3   Percentages of children known to be eligible for free school meals, January 2003

Region	Maintained nursery and primary schools (%)	Maintained secondary schools (%)
England	16.8	14.5
North East	22.1	18.1
North West	20.6	18.8
Yorkshire and Humberside	17.4	16.0
East Midlands	12.7	11.2
West Midlands	18.5	15.9
East England	11.7	9.6
London	**25.7**	**24.0**
Inner London	**37.2**	**39.4**
Outer London	**19.0**	**17.3**
South East	10.1	8.4
South West	11.3	8.9

Source: DfES, Statistics of Education, Schools in England 2003

Ethnic and cultural diversity

Nearly half of London's pupils are from black and minority ethnic (BME) groups,[6] compared with 14 per cent and 13 per cent, respectively in England. The proportion of BME pupils is much higher in inner than outer London (Table 6.4).

Table 6.4   Number and percentages of BME pupils, maintained schools in London and England, January 2004 (provisional data)

	Primary		Secondary	
	Number of BME pupils[7]	% of all pupils pupils	Number of BME	% of all pupils
Inner London	111,100	64	78,400	63
Outer London	122,400	40	109,400	38
Greater London	233,500	49	187,900	46
England	533,700	14	427,500	13

Source: Adapted from DfES, Maintained primary and maintained secondary schools: number of pupils by ethnic group

The diversity of London's school children is also reflected in the proportion of pupils whose first language is not English. Thirty-six per cent of primary pupils and 32 per cent of secondary pupils in London have a first language other than English, compared with 11 per cent and 9 per cent in England as a whole (Table 6.5). In some inner London boroughs the figure is as high as 68 per cent (Newham) and 74 per cent (Tower Hamlets) (see Appendix table 13 for borough figures).

Table 6.5   Number and percentages of pupils whose first language is known or believed to be other than English, the regions and England, January 2004 (provisional data)

Region pupils	Primary		Secondary	
	Number of pupils	% of all pupils	Number of pupils	% of all
England	377,700	11	300,800	9.1
North East	5,600	3.3	4,000	2.2
North West	36,300	7.4	24,500	5.2
Yorkshire and Humberside	34,400	9.5	26,800	7.7
East Midlands	20,700	6.9	18,800	6.3

West Midlands	51,600	13.5	39,700	10.4
East England	19,300	5.2	17,000	4
London	**175,300**	**36**	**132,300**	**31.5**
Inner London	**87,800**	**50.3**	**56,700**	**44.9**
Outer London	**87,500**	**28**	**75,700**	**25.7**
South East	28,000	5.2	32,500	6.4
South West	6,500	2	5,100	1.7

Source: adapted from DfES, Maintained Primary and Secondary Schools: Number and Percentages of Pupils by first language

Research has shown that pupils whose first language is not English generally perform well once they become fluent in English.[viii] London's specialised language support services are well developed in most of the capital's LEAs. However, language support is resource intensive and London's services are often thinly stretched.[ix]

Mobility and London's school children

Pupil mobility is defined by Ofsted as 'the total movement in and out of schools by pupils other than at the usual times of joining and leaving'[x]

London schools have very high rates of pupil mobility, with rates of 10 per cent, rising to 14.2 per cent in inner London, whilst the average for England, as a whole, is 5.6 per cent.[xi] These rates are linked to the high numbers of refugees and asylum seekers in London, many homeless families in temporary accommodation and relatively high numbers of gypsy and other travellers. The pattern of mobility in London varies between authorities, with high rates, for example, in Newham and low rates in Kingston and Havering.[xii] It also differs from the national picture as, unlike many other areas, London has high rates of mobility at secondary as well as primary school level.[xiii]

London's high mobility levels pose particular challenges to schools and may make demands on staff, systems, resources, and on the more stable community of pupils.[xiv, xv] Research has pointed to a gap in attainment between the mobile and stable school populations. (Young people who frequently moved schools talked, in one (national) study, of having to repeat school work and of missing whole sections of particular subjects because of variations in the way the curriculum is covered[xvi]). However, the relationship between mobility and attainment is complex, with pupil mobility occurring alongside other often disruptive factors, and schools varying in their capacity to respond well to mobility.[xvii] New arrivals may also bring considerable benefit to schools by increasing diversity and enhancing the commitment to learning.[xviii]

London's competitive market in education

A further aspect of mobility concerns the pattern of children's movement between primary and secondary schools. Government policy emphasises the concept of parental choice. However, a national study found that London's parents were three times less likely to be offered their

preferred school than parents in the Shire Counties. London's parents were also less likely to express satisfaction with the admissions process and more likely to make an appeal.[xix]

Recent research by the GLA has also demonstrated clear inequalities between London's parents in their exercise of school choice.[xx, xxi] There has been a growth in cross-border mobility, particularly in outer London, and nearly 15 per cent of London's children now attend a secondary school outside their home authority. However, children attending out-of-borough schools tend to live in higher income neighbourhoods, have lower levels of poverty, and have higher levels of attainment immediately before secondary transfer than their peers who stay in-borough. Secondary schools, which are their own admissions authority, and specialist schools (other than sports or arts colleges) are also more likely than other schools to recruit out-of-borough pupils.[xxii]

This kind of social selection is likely to reinforce, rather than reduce, income-related inequalities in attainment and it lends support to the view that the market in education favours those with wealth and 'cultural capital' over those without.[xxiii] Research with children about their experiences of changing schools also identifies that children are aware of, and have concerns about, the inequities of the current system.[xxiv]

Recruitment and retention of teachers

London has experienced serious difficulties in the recruitment and retention of teachers for many years. Reports by the Chief Inspector of Schools have highlighted that educational standards in London are clearly affected by the high teacher turnover rate in some schools.[xxv] Research by the University of North London has also shown that teacher shortages in London are leading to an ageing profession, with London's high housing, living and travelling costs contributing to difficulties in attracting new graduates.[xxvi]

The average wage of teachers in London is 9 per cent higher than the England average in primary schools, and 8 per cent higher in secondary schools. Whilst the average vacancy rate in London has gone down from 3.5 per cent in 2001 to 2.6 per cent in 2002,[xxvii] it continues to be higher than the national average (2 per cent and 0.9 per cent, respectively). Moreover 3.5 per cent of posts in London are filled temporarily compared to 1.7 per cent nationally. The turnover rate of teaching staff is more than 20 per cent in inner London and around 18 per cent in outer London, compared to a national average of 15 per cent.[xxviii] London also has inadequate numbers of BME teachers (see Ethnic inequalities in Section 6.5 below).

6.4 Educational achievement

Key Stages 1, 2 and 3: ages 7, 11 and 14

London's children generally achieve less well than children in England as a whole, at all three Key Stages. This difference is largely accounted for by the lower achievement of children in inner London. Attainment in outer London is broadly similar to the national average at Key Stages 1 and 3, and exceeds the national average (in English and maths) at Key Stage 2 (Table 6.6). This pattern, as reported in the first SOLCR, is the same as in 2000.

Table 6.6   Achievement at Key Stages 1, 2 and 3, LEA maintained schools, London and England

	Key Stage 1 **% achieving level 3** **and above**	**Key Stage 2** **% achieving level 4** **and above**	**Key Stage 3** **% achieving level 5** **and above**

	Eng	Math	Sci	Eng	Math	Sci	Eng	Math	Sci
Inner London	19	12	21	71	67	81	58	59	55
Outer London	26	15	28	77	73	86	69	71	67
Greater London	24	14	26	75	71	84	66	67	63
England	28	16	29	75	72	86	68	71	68

Source: Adapted from DfES, National Curriculum Assessments of 7,11 and 14-year olds in England, 2003

Value-added measures

These test results provide useful information about whether pupils are reaching expected levels. However, they do not tell us about the progress that schools are helping children to make relative to their different starting points. They don't provide a fair comparison, therefore, between schools with different kinds of pupil intakes. In order to allow for this kind of comparison, the government has developed a 'value-added' measure.[8]

Recent data show that, between Key Stage 1 and Key Stage 2, over one-third of LEAs (55 of 150) achieved a value-added measure of over 100. Just under half of these LEAs (27) were in London, suggesting that the value-added impact of London schools is higher than in the country as a whole. The average value-added measure for inner London (100.3)[9] is the same as for outer London (see Appendix table 14).

Appendix table 14 also lists the value-added measures for Key Stage 2 – 3. Sixty LEAs in the country achieved a measure of 100 or above, and eight of these were in London. This suggests that the Key State 2 – 3 'added-value' of London schools is less than for Key Stage 1 – 2. All eight of the highly performing London LEAs are in outer London.

GCSEs/GNVQs

London's fifteen year-olds achieved better than the national average at GCSE/GNVQ in 2002/03. The value-added impact of London schools
was also very high, particularly in inner London. Twenty-six LEAs across the country achieved a measure of over 100, and 21 of these were in London. Inner London's average measure is 101.9, higher than outer London's (100.3). (Appendix table 15 shows value-added measures for London's LEAs.)

By comparing the 2002/03 results with those for 1999/2000, we can see that whilst there has been no change in the proportions of London's children, achieving 5 or more A* – G passes, there has been a marked rise in the proportion of London's pupils achieving 5 or more passes at A* – C. The improvement in inner London is particularly notable (Table 6.7).

Table 6.7   Achievement at GCSE/GNVQ, 1999/2000 – 2002/2003, London and England

Achieving 5+ A* – C passes   Achieving 5+ A* – G passes

	1999/00 (%)	2002/03 (%)	Percentage point change	1999/00 (%)	2002/03 (%)	Percentage point change
Inner London	**36.3**	**43.7**	**+7.4**	86.5	87.7	**+1.2**
Outer London	49.8	53.9	**+4.1**	91.1	90.5	**−0.6**
London	45.5	50.7	**+5.2**	89.6	89.6	–
England	49.2	51.1	**+1.9**	88.9	89.4	**+0.5**

Source: from Hood S (2001) and DfES 2002/03

GCE/VCE[10] *and A/AS*

Table 6.8 summarises the achievement of London's 16 – 18 year-olds at GCE/VCE and A/AS level, in comparison with England. This shows that whilst London's pupils do slightly less well overall, they are more likely
to achieve advanced post-vocational qualifications and advanced extension awards.

Table 6.8   Average GCE/VCE A/AS point scores of 16 – 18 year olds, London and England, 2002/03

	Inner London	Outer London	London	England
Average point score, pupils achieving GCE/VCE				
A/AS qualifications: per candidate	192.6	233.3	222.4	244.5
Average point score, pupils achieving GCE/VCE				
A/AS qualifications: per entry	69.7	74.6	73.4	74.3
Average point score, pupils achieving GCE/VCE				
A/AS and Key Skills at Level 3 qualifications: per candidate	193.0	233.8	222.8	245.3
Average point score, pupils achieving GCE/VCE				
A/AS and Key Skills at Level 3 qualifications: per entry	69.8	74.7	73.5	74.4
% achieving post-vocational qualifications:				
Advanced	84.8	83.1	83.5	82.7
% achieving post-vocational qualifications:				
Intermediate	72.6	70.1	70.9	73.9
% achieving Advanced extension awards	58.7	54.0	55.1	49.9

Source: DfES, GCE/VCE A/AS Examination Results for Young People in England 2002/03

Table 6.9 provides information about the participation of 16 and 17 year-olds in education and work-based learning in England. London has the lowest rates of participation in work-based learning and high rates of participation in full-time education. London's 17 year-olds are more likely to be in full-time education than 17 year-olds from any other region.

However, London's 16 – 17 year-olds are also more likely to be unemployed than young people in any UK region and rates of unemployment amongst young people in inner London are particularly high (Table 6.10 below).

Table 6.9   Participation of 16 – 17 year-olds in education and training, by region, end 2001

	16 year-olds (%)				17 year-olds (%)			
	Full-time Total in education part-time education	Work-based learning	Other part-time education	Total in education and training (less overlap)	Full-time education	Work-based	Other learning	education and training (less overlap)
North East	67	14	8	88	53	16	8	77
North West	67	10	5	81	55	12	6	73
Yorkshire and Humberside	67	10	6	83	53	12	7	72
East Midlands	68	8	6	82	57	11	7	74
West Midlands	69	8	6	82	56	11	7	73
East of England	72	6	4	81	59	8	5	71
London	74	4	4	82	63	5	5	73
South East	74	5	3	82	61	7	4	72
South West	74	6	4	84	60	10	5	75
England	71	7	5	82	58	10	6	73

Source: DfES, Statistics of Education, participation in education and training of 16 and 17 – year-olds

Table 6.10   Economic activity of young people aged 16 – 18 by region, 2002/03[11]

	Economically inactive, % rate	In employment, %	Unemployed, % rate
rate			
North East	43.1	43.6	23.3
North West	47.9	41.6	20.2
Yorkshire and Humberside	42.0	47.8	17.6
East Midlands	41.0	49.7	15.7
West Midlands	39.5	48.3	20.2
Eastern	36.4	53.0	16.7
London	**59.0**	**30.3**	**26.2**
Inner London	**69.5**	**19.1**	**37.2**
Outer London	**53.1**	**36.5**	**22.1**
South East	32.2	58.5	13.6
South West	31.3	60.9	11.4
Wales	45.4	43.6	20.2
Scotland	37.0	48.1	23.7
Northern Ireland	62.3	32.9	**
UK	42.3	47.2	18.2

Source: ONS, Annual Local Area Labour Force Survey (March 2002 – February 2003)

** Estimates suppressed due to poor reliability. These data are survey-based estimates and are subject to a degree of sampling variability.

6.5 Inequalities in achievement and in access to education

Income and gender inequalities

Pupils who are eligible for free school meals consistently do less well, at all Key Stages and at GCSE/GNVQ, than those who are not eligible for free school meals. This pattern holds true, in London, as in England as a whole. Boys also do less well than girls at all Key Stages and at GCSE/GNVQ.

Ethnic inequalities

There are examples of high and low achievement within all the major ethnic groups. However, whilst Chinese and Indian pupils tend generally to make better than average progress, black boys and girls make below average progress at all key stages.[xxix] Gypsy and traveller children have the lowest levels of attainment.

In London, in 2003, 32.2 per cent of black Caribbean pupils, 34.5 per cent of 'black other' pupils and 43.6 per cent of black African pupils achieved 5 or more GCSE grades A* – C,

compared with an average for all pupils of 50.2 per cent.[xxx] Evidence also suggests that inequalities in attainment for black Caribbean pupils become greater as they move through the school system and such differences become more pronounced between the end of primary school and the end of secondary education.[xxxi, xxxii]

Socio-economic disadvantage is closely associated with low educational achievement but it is not the only explanatory factor for ethnic inequalities in achievement. Indeed, the correlation between social class indicators and attainment has been shown to be weaker for black Caribbean and black African groups.[xxxiii]

Research suggests that additional factors, which may influence the links between ethnicity and achievement, include:
• teacher expectations (teachers may have low expectations, particularly of black Caribbean boys)

• length of settlement and period of schooling in the UK

• parental education and aspirations

• fluency in English

• institutional racism.[xxxiv, xxxv]

Another key factor in London is the significant under-representation of BME teachers in comparison to the school population. Whilst London has about 1,740 black teachers (59 per cent of all black teachers in England and Wales) and 2,340 Asian teachers (46 per cent of all Asian teachers in England), just under 3 per cent of London teachers are black, compared with around one-fifth of all school pupils.[xxxvi]

Exclusion from school

Children who are excluded from school have lower rates of achievement and young people who are out of education are more likely to become disaffected and to lack the qualifications that are needed to enter the labour market.[xxxvii] Research has also shown that many young people feel let down, depressed and confused by their excluded status.[xxxviii]

Provisional data for 2002/03 show that rates of permanent exclusion were higher in London than the national average in secondary and special schools, and the same (as the average) in primary schools. Overall rates of permanent exclusion are down from 1998/99 (Table 6.11).

Table 6.11 Percentage of school population permanently excluded by type of school, London and England, 2002/03 (provisional) and 1998/99

	Primary: Total number of exclusions	Primary: % of the school population	Secondary: Total number of exclusions	Secondary: % of school population	Special: Total number of exclusions	Special: % of school population of exclusions	Total: % of the school population 2002/03	Total: % of the school population 1998/99
Inner London	60	0.03	390	0.30	20	0.39	0.13	0.18
Outer London	120	0.03	870	0.30	30	0.34	0.14	0.17
Greater London	180	0.03	1,260	0.30	40	0.36	0.14	0.17
England	1,300	0.03	7,690	0.23	300	0.32	0.12	0.14

Source: Adapted from DfES, Number of permanent exclusions by type of school, 2002/03 (provisional)

However, national data point to persisting gender and ethnic differences in exclusion. Recent provisional data show that 82 per cent of all exclusions were of boys. Black Caribbean pupils, those classified as from any other black background and gypsy and traveller children all had much higher than average rates (see Appendix Table 16).

These findings clearly have important implications for London in view of its ethnic and cultural diversity. Table 6.12 shows that whilst London has lower exclusion rates for black pupils than most other regions, its black pupils are still twice as likely as its white pupils to be excluded.

Table 6.12   Rate[12] of permanent exclusions by ethnicity and region, 2001/02

Region	White	Black	Asian	Other[13]	Total
North East	0.14	–	–	0.17	0.13
North West	0.15	0.30	0.12	0.17	0.15
Yorkshire and Humberside	0.13	0.13	0.63	0.12	0.17
East Midlands	0.15	0.31	0.06	0.29	0.15
West Midlands	0.13	0.52	0.05	0.32	0.14
East England	0.13	0.20	0.08	0.13	0.13
London	**0.15**	**0.27**	**0.06**	**0.14**	**0.16**
Inner London	0.15	0.23	0.08	0.16	0.16
Outer London	0.15	0.33	0.05	0.13	0.16
South East	0.13	0.22	0.06	0.10	0.13
South West	0.12	0.28	–	0.29	0.13
England	0.14	0.30	0.07	0.18	0.14

Source: DfES, Permanent exclusions of compulsory school age by government office region and ethnicity

Children with special educational needs (SEN)

The proportion of children with SEN is higher in London than in any other English region.[14] Rates are higher in inner than in outer London (Table 6.13) and there are wide variations between the boroughs (Appendix table 17).

Table 6.13   Percentage of special educational needs pupils: London and England, January 2003

	Primary			Secondary		
	SEN pupils with statements	SEN pupils without statements	Total SEN	SEN pupils with statements	SEN pupils without statements	Total SEN

statements

Inner London	1.8	19.1	20.9	3.1	19.4	22.5
Outer London	1.7	16.6	18.3	2.3	14.4	16.7
Greater London	1.7	17.6	19.3	2.6	15.9	18.5
England	1.6	15.9	17.5	2.4	13.0	15.4

Source: DfES, Statistics of Education, Special Educational Needs, January 2003

Travellers of Irish heritage, Roma gypsies and black Caribbean and black African children are all more likely than other groups of children to have SEN statements.[15]

The government is committed to the inclusion of SEN children and the proportion of London's SEN children attending mainstream schools has increased over recent years, in London as in England.[16] However, inclusion must also take account of the quality of children's experience and how far children are helped to learn, achieve and participate in the life of the school.[xxxix] Mainstream schools vary in their capacity to work with the full range of pupils and to call on specialist expertise and resources.[xl, xli]

Recent studies involving disabled children and their parents have also identified a range of concerns. An Audit Commission review found that disabled children, in mainstream schools, were frequently unable to take part in school trips and in PE, despite the new SEN and Disability Act 2001 which aims to address this kind of issue. Both parents and children had experienced negative attitudes from staff and other children.[xlii] Similarly, a study in Wales found that some children and young people felt that they were treated differently in mainstream schools from non-disabled students.[xliii]

Children of refugees and asylum-seekers

Many refugee and asylum-seeking (RAS) children will have experienced considerable distress and upheaval in their move to this country. Schools can play a crucial role in helping these children and their families to rebuild their lives and settle into their local communities. Where schools do not offer adequate help, children are often left with little formal support.[xliv]

A recent GLA report outlines how many of London's RAS children are without a school place owing, amongst other factors, to high mobility levels, a shortage of school places, and schools reluctance to admit children aged 14 – 16 in the exam years.[xlv] This evidence is supported by a study of 118 young refugees, which found that nearly half were not accessing any form of education.[xlvi]

When RAS children mange to secure a school place, they may face additional barriers to their participation. Many schools have developed effective procedures and forms of support. However, other schools may be less well equipped and children's difficulties in coping with past experiences, the disruption or absence of previous schooling, family mental and physical health problems, and experiences of poverty, racism and bullying, may combine to create considerable difficulties for RAS children at school.[xlvii]

Many RAS children achieve well at school, although there is some evidence to suggest that

Somali, Turkish Kurdish boys and eastern European Roma children are underachieving. Refugee children are also under-represented in the stages of the SEN Code of Practice. More research is needed to identify the reasons for this, but it may be that some children are not receiving the appropriate level of SEN support.[xlviii]

6.6 Young Londoners views about their schools and education

Young people in a King's Fund survey linked the quality of the school's physical and social environment with their overall well beimg and their approach to learning.[xlix]

These young Londoners had a range of concerns about litter and a lack of facilities such as lockers and toilets, but they also valued teachers' friendliness, individual attention and respect for cultural values. The young people had many suggestions and ideas about how to improve both the physical and social environment of their schools.

Young people, in the GLA Young Londoners' Survey,[17] were broadly positive about the quality of their schools. Nearly one-third of young people rated their school as very good (29 per cent), more than a half reported that they were quite good (55 per cent) and a minority said that their schools were quite bad (8 per cent) or very bad (6 per cent). Younger children (11 – 12 years) were more likely to be positive than older children (aged 15 – 16 years) and there were higher levels of dissatisfaction amongst young Londoners from the lower income groups.[l]

Young people's responses to a question about school improvement demonstrate clearly, however, that they want to have greater levels of involvement and participation in school decision-making. When asked what would most improve their school, nearly one-third (30 per cent) of young people said that they wanted more choice about what they learned and nearly one-third (27 per cent) said that they wanted to have more say in what happens. Also rated highly were better school facilities (27 per cent) and better teaching (24 per cent) (Figure 6.2).

Figure 6.2   Which of these things would most improve your school?

Source: ICM Research. Base: All respondents (1,072)

The government has published its *Five Year Strategy for Children and Learners* (DfES, July 2004) in relation to children's services, education and training. It aims to bring together a number of different strategies tailored to individual learning needs, including a new 'youth offer' to increase personal and social development opportunities for young people.

The government has set a range of national targets for LEA attainment at Key Stages 2 and 3, including that, by 2004, 75 per cent of 14 year-olds will separately achieve level 5 or above in English, mathematics and science. All LEAs have a target that not less than 65 per cent of their 14 year-olds will achieve level 5 or above in English and mathematics, and not less than 60 per cent in science.

By 2006, the targets include that 85 per cent of 11 year-olds will separately reach level 4 or above in Key Stage 2 English and mathematics and all LEAs should have at least 78 per cent of their 11-year-olds at level 4 or above both in English and mathematics.

Key government targets for GCSE/GNVQ levels include 92 per cent of pupils to achieve 5 or more grades A* – G and a minimum of 38 per cent of pupils in each LEA to achieve 5 or more grades A* – C by 2004.

There is a DfES public service agreement to improve levels of school attendance so that school absence is reduced by 8 per cent in 2008 compared with 2003.

The Education Maintenance Allowance (EMA) has been rolled out across England from September 2004. Sixteen year-olds planning to continue in full-time education will be eligible to apply. EMAs offer a weekly payment of up to £30, paid directly to young people, with the opportunity to receive bonuses of £100 for good progress.

Many London schools have also been involved in the four-year government initiative Excellence in Schools. This programme received a positive Ofsted evaluation in tackling the effects of child poverty in the most deprived communities through high quality provision of early years care and education (*Children at the Centre*, Ofsted, June 2004).

The Secretary of State for Education established the 'London Challenge' (2003), supported by a DfES unit, to improve standards in London's secondary schools and to tackle the link between social deprivation and poor performance in five targeted boroughs. A London Schools Commissioner with responsibility to oversee progress was also appointed.

A 2004 GLA report, *Offering More Than They Borrow*, outlines how many of London's refugee and asylum-seeking children are without a school place, owing, amongst other factors, to high mobility levels, a shortage of school places and schools reluctance to admit children aged 14 – 16 in the exam years.

The London Schools and the Black Child conference is an annual event, organised by the Mayor and Diane Abbott MP, which focuses on inequalities in educational attainment experienced by children of African and Caribbean heritage.

Notes

1   London has 58 Beacon schools (October 2004).
2   Announced in the July 2004 Spending Review.
3   This is as a percentage of the estimated three and four-year old populations (figures are based on 2001 census data and not on population data for 1999/2003).
4   There are 37 fewer primary schools, 11 fewer special schools, 14 more pupil referral units and 13 more independent schools (academies are a new type of school recently introduced by government).
5   There is an association, in most areas, between affluence and the use of independent schools.
6   Categories used by the DfES differ from those used in Census data. The figures in the table relate to all pupils who are not classified as white.
7   The numbers relate to all those pupils whose entry was classified.
8   Value-added measures are measures of the progress pupils make between each of the Key Stages and between Key Stage 3 and GCSE/GNVQ. To give an example, a pupil's value-added score for Key Stage 1 – 2 is calculated by comparing their KS2 results with the national median KS2 attainment of pupils with the same (or similar) KS1 attainment. The value-added measure is the average of pupil's value-added scores, added to 100.
9   Key Stage results and value-added measures are much higher in the City of London than in all other LEAs. The City of London measure has not been included, therefore, in the calculation of the inner London average value-added measure.
10   VCE stands for Advanced Vocational Certificate of Education. It is also sometimes abbreviated as AVCE.
11   The economically inactive rate expresses the number economically inactive as a

percentage of the population aged 16 – 18. Employment rates express the number in employment as a percentage of the population aged 16 – 18 and unemployment rates are the number unemployed expressed as a percentage of the economically active population.

12   Defined by the DfES as 'the number of permanently excluded pupils of compulsory school age and above expressed as a per cent of the sum of all part-time and full-time pupils of compulsory school age and above in the same ethnic group' (excludes pupils who are not classified according to ethnic group).

13   Includes pupils reported as Chinese or from any other ethnic group.

14   The percentages of primary and secondary pupils with SEN statements are broadly similar to the 2000 figures reported in the previous SOLCR. However, we are unable to make a direct comparison for SEN pupils without statements, as the 2003 figures are not comparable owing to changes in the SEN classification system.

15   Fifty-two percent of traveller children of Irish heritage and 45.7 per cent of gypsy/Roma children in English primary schools have SEN.

16   In 2000, 75.5 per cent of children in London for whom statements were newly made were placed in mainstream schools – rising to 76.2 per cent in 2001 and 76.5 per cent in 2002.

17   See note 1, Chapter 1, for a description of the survey.

References

i   See, for example, Department for Education and Skills, Delivering Results: A Strategy to 2006, DfES, 2002

ii   See Government Strategy Unit, London: Analysis, Strategy Unit, 2003

iii   Association of London Government, Class Acts: diversity and opportunity in London schools, ALG, 2003

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7 Transport and road safety

7.1 Introduction

Transport has a key role to play in maintaining and promoting London's place within the global economy. Transport policy and planning is also critical to promoting the well-being of London's children, to ensuring their rights to play, leisure and recreation, and to ensuring that they are provided with the opportunities to walk, to cycle and to become independently mobile. For disabled children and children from low-income families, the availability of high quality, accessible and affordable transport is fundamental to social inclusion.[i]

Road safety, environmental pollution and sedentary lifestyles related to motor vehicle use are major areas of government policy concern and increasing intervention. Increases in car use are linked to increasing levels of pollution and traffic congestion; higher traffic speeds are linked to the frequency and severity of road traffic accidents; and reductions in walking and cycling are seen as related lower levels of activity, obesity and poorer health outcomes.

The Mayor's Transport Strategy includes a range of measures that aim to benefit children and their families through promoting access to transport and by ensuring improvement to the transport system. Many of the strategy targets are concerned with promoting children's health and road safety.[ii]

The chapter has three sections. We begin by looking at recent trends in children's travelling patterns and mode of transport (Section 7.2). We move on to focus on road safety and child casualties in London (Section 7.3). In the final section we consider children's views about transport and issues of access (Chapter 7.4). Throughout we maintain a focus on inequalities, both in child casualty rates and in access to transport.

Our data come principally from national and London-based travel surveys as well as child casualty statistics provided by Transport for London (TfL). We also draw on TfL studies on alternatives to the school run, and on consultations with children and young people concerning their views on travel in London.

7.2 Travel and London's children

General travel patterns and trends: the picture in the UK

Over the last 20 years car use has increased considerably and walking and cycling have declined. Car travel now accounts for four-fifths of the total distance travelled in Great Britain.[iii] This trend is evidenced across the country, although car users in rural areas generally travel further by car than those in urban areas. Conversely, people living in urban areas, such as London, are more likely to travel further using public transport.[iv]

Travel patterns and trends: the London picture

London households are less likely to have access to a car than households elsewhere in the country.[v, 1] However, car ownership is considerably higher in outer than inner London and has shown increases in both areas. The number of cars per household in London increased from 0.81 to 0.86 between 1991 and 2001 despite a slight fall in average household size.[vi]

In line with this spatial distribution in car ownership, the 2001 London Area Transport Survey (LATS) household survey[2] shows that outer London residents were more likely to travel by car than those in inner London (51 per cent of trips compared with 29 per cent), less likely to walk (26 per cent compared to 38 per cent) and less likely to use public transport (20 per cent compared to 28 per cent). Cycling accounted for only 2 per cent of trips in London.[vii]

Travel patterns and trends: London's children

Both national and London survey data point to considerable falls in the proportion of children walking or cycling to school, and increases in the proportion who travel by car.

Between 1991/93 and 2002, the proportion of British primary school children walking to school declined from 60 per cent to 51 per cent, with a corresponding increase in those being taken by car from 29 per cent to 41 per cent. For secondary pupils, the proportion walking declined from 46 per cent to 38 per cent, whilst those travelling by car rose from 15 per cent to 24 per cent. Only 2 per cent of secondary school pupils cycled to school in 2002, compared with 4 per cent in 1991/93. (The percentage of primary school pupils cycling remained unchanged at just 1 per cent)[viii] (Table 7.1).

Table 7.1   Children's travel to school, Britain, 1991/3 – 2002

	Primary children (%)		Secondary children (%)	
	1991/93	2002	1991/3	2002
Walking	60	51	46	38
Car	29	41	15	24
Cycling	1	1	4	2

Source: DTR, National Travel Survey, 2002

Data from London Area Transport Surveys (LATS) carried out in 1991 and 2001 suggest a similar trend in London, although the reductions in walking and the increases in car use are less marked (Table 7.2).[ix] These comparisons should also be treated with some caution.[3]

Table 7.2   Children's travel to school, London, 1991 – 2001

	Primary children (%)	Secondary children (%)

	1991	2001	1991	2001
Walking	61	53	43	39
Car	31	37	16	20
Cycling	-	-	3	1

Source: LATS 1991 and LATS 2001 Household Survey (TfL Transport Network Planning)

The LATS (2001) found that just over half (53 per cent) of London's primary school children walked to school while 37 per cent were taken by car, and that 39 per cent of secondary school children walked while 20 per cent travelled by car (Table 7.3).

Secondary school children were much more likely to travel by bus than primary children (32 per cent of secondary, compared with 8 per cent of primary).

Children in outer London, where car ownership is higher, were more likely to be taken to school by car than children in inner and central London. The percentage of children who cycle to school in London is lower, in 2001, than the 2002 national figure.

Table 7.3   Mode share of children's travel to school by age and area of school

Primary children (aged 5 – 11)   Secondary children (aged 12 – 16)

	Central London (%)	Inner London (%)	Outer London (%)	All London (%)	Central London (%)	Inner London (%)	Outer London (%)	All London (%)
Walk	51	61	49	53	30	45	37	39
Bicycle	–	1	0	0	–	1	1	1
Bus/tram	13	10	7	8	27	31	32	32
Rail	1	0	0	0	11	3	3	3
Underground DLR	9	1	0	1	29	8	3	5
Car/van	26	27	43	37	3	12	23	20
All modes	100	100	100	100	100	100	100	100

Source: LATS 2001 Household Survey (TfL Transport Network Planning)

Explaining children's changing travel patterns

These changing travel patterns are linked to increasing levels of parental (and child) concern about 'stranger danger' and about road traffic safety.

The first SOLCR reported that many young Londoners were frightened of being killed or hurt

on the roads; they said that cars were dangerous and that they made playing unsafe. Recent studies suggest that children and young people continue to be concerned about road traffic safety and road traffic accidents.[4]

Increased use of the car may also be associated with increasing levels of car ownership, greater travel distances to school[5] and changing adult employment patterns (for example, dispersal of work locations).

Research carried out for TfL, with 500 parents in Greater London who drove their children to/from school at least once a week, identified 'child safety'[6] and 'distance' as key reasons for driving. However, the main reason identified for driving children to school was 'convenience or speed', with respondents, in this category, citing the following explanations:

- en route to work or shops (46 per cent)
- too slow to walk (15 per cent)
- public transport too time consuming (14 per cent)
- children go to different schools so other options impractical (6 per cent)
- quicker/easier (5 per cent)
- children have after school activities so need car (3 per cent).[x]

More than half (57 per cent) of these parents went straight on to work by car after dropping off their child(ren) at school.[xi]

7.3 Children and road traffic accidents

Children killed or seriously injured on the roads

Injury and accidents are a common cause of childhood death and deaths from road traffic accidents constitute a substantial proportion of these.[7] The most recent casualty figures point to a reducing trend in the number of children killed or seriously injured both nationally and in London.

National 2003 figures[xii] show a fall of 40 per cent from the baseline average (between 1994 and 1998) and London figures[xiii] show an overall reduction of 31 per cent since the 1999 figures published in the first SOLCR[8] (Table 7.4). This is a marked improvement, which is likely to be linked directly to traffic calming and other measures to promote road safety, but may also be linked to the decline in walking.

Table 7.4 Numbers of children killed or seriously injured in road traffic accidents, London, 1999 – 2003

	1999	2003	Change (%)
Pedestrian	503	324	−15.7
Bus and coach	15	16	+6.6

Car	146	109	−32.2
Pedal cycle	80	62	−22.5
Total	**744**	**511**	**−31.3**

Spatial inequalities in child pedestrian casualties in London

There were 1635 child pedestrian casualties in London in 2003, an overall reduction of 34 per cent on the 1999 total of 2,480 (Table 7.5).

Table 7.5   All child pedestrian casualties, London, 1999 – 2003

	Number in 1999	Number in 2003	Change (%)
Fatalities	12	8	−33
Serious injuries	491	316	−36
Slight injuries	1,977	1,311	−34
Total	2,480	1,635	−34

The greatest proportion of child pedestrian casualties is in outer London. Children are also more likely to be killed or seriously injured in child pedestrian accidents in outer than inner London, probably a consequence of outer London's higher average traffic speeds[xiv] (Table 7.6).

Table 7.6   Child pedestrian casualties, inner and outer London, 2003

	Inner London number	Outer London number	Difference (%)
Slightly injured	611	700	13
Seriously injured	124	192	35
Fatalities	3	5	40
Total	738	897	18
Total killed and seriously injured	127	197	36

Source: London Road Safety Unit, 2003

There are considerable variations too, between the boroughs, in the severity of child pedestrian casualties (Appendix table 18).

Child pedestrian casualties on journeys to and from school

Just under one-third (530) of London's 1635 child pedestrian casualties took place on the journey to or from school, compared with just over one-quarter in 1999. Fifty three per cent (282) of these were in outer London and 47 per cent (248) in inner London.[xv]

Deprivation, ethnicity and child pedestrian casualties

Child pedestrian casualty rates are known to be linked to deprivation and to ethnicity. For example, children from poor households are more likely to be killed on the roads[xvi] and children from BME groups (particularly younger children) are over-represented in pedestrian accidents across England.[xvii]

TfL carried out a detailed analysis of child pedestrian casualty data, for the years 1999–2002, relating to just over 4,000 children in London, in order to explore the relationship between the casualty rate, the index of deprivation and ethnicity.[xviii]

This study found that the child pedestrian casualty rate for the 10 per cent most deprived wards was around two and a half times that of the 10 per cent least deprived wards and that black Caribbean/African children had an accident rate that was double that of any other group (Table 7.7).

Table 7.7   Child accident rate by ethnic group, London

Ethnic group	Accident rate (child pedestrians per 1,000)
White	2.18
Black Caribbean/African	**4.54**
Indian/Pakistani/Bangladeshi	2.05
Chinese/other Asian	0.90
Black other	1.38
Average – all groups	2.77

Source: Transport for London

7.4 Children's use of transport and key access issues

Children's use of transport and road safety on non-school journeys

The recent policy emphasis on the development of safe routes to school is reflected in a predominance of data on child road safety and children's travel to school.[9] In contrast, there is relatively little data on the many journeys made by young people that are unrelated to school.

However, young Londoners spend much of their waking lives away from school. High quality transport for non-school journeys is key to facilitating children and young people's access to London's leisure, arts, cultural and recreational facilities and essential to promoting their independence as they grow older.[xix] It is important to note, too, that the majority (68 per cent) of London's child pedestrian accidents occur on journeys that are unrelated to the school run.

In the first SOLCR we drew on research with young Londoners that was not solely focused on the school run, to report that:

• Young Londoners were more likely to travel by bus than by train or by underground – a pattern which, as with adults, was cost-related.

• Costs of transport and personal security in and around public transport were key concerns of children and young people.

• London's transport system posed considerable problems of access to disabled children and to young children and babies.

Updated research findings for 2004 highlight the following points:

The use of transport by young Londoners

The London Area Transport Survey (LATS) data suggest that children and young people in London continue to be higher users of buses than of tubes or trains.[xx] Cost may continue to be a factor here, but it is also the case that young people tend to make shorter journeys.

The GLA Survey of young Londoners (2004) also points to a similar pattern with nearly half (46 per cent) of respondents saying that they travelled on buses every day, compared with

just 4 per cent and 3 per cent, respectively, travelling every day on tubes and trains. Nevertheless, almost one-quarter (23 per cent) used the tube and 15 per cent used trains weekly. Older teenagers were more likely to use all forms of transport than younger ones.

Costs of transport

The vast majority of Londoners, in the GLA Young Londoners' Survey had a view about how the city's transport could be improved, with the most common response being 'cheaper public transport' (26 per cent of respondents chose this from a prompt list). The second and third most popular suggestions were improved time-keeping for buses and tubes and an expanded provision of bus and tube services (both 20 per cent).[xxi]

Personal security

One-fifth of the GLA Young Londoners' Survey respondents said that they felt very safe on public transport, 54 per cent that they felt quite safe and 22 per cent said that they felt unsafe. Young people of black/black British descent were less likely to report feeling concerned about their safety than young people from other ethnic groups. Young people with a disability were more concerned.[10]

Access to transport for disabled children and for young children and babies[11]

The provision of adequate, appropriate transport is an essential element in the inclusion of children with disabilities. Recent consultation with a small group of disabled young people in South London suggests that public transport continues to constitute a barrier to young people's access to leisure and cultural facilities. Difficulties in accessing public transport were sometimes compounded for these young people by the attitudes of transport staff (for example, when bus drivers were impatient)[12]. The attitudes of individual drivers made a big difference to their travel experience. Young people also noted that bus stops would feel safer if they had better lighting and suggested better pavement markings (as used on sides of motorways to prevent drivers falling asleep) to improve walking conditions for the visually impaired.[xxii]

National research has similarly identified that transport access difficulties play a key role in restricting the access of disabled children and young people to a range of leisure activities.[xxiii]

Two main government transport initiatives relating to children are the Safe Routes to School Initiative and the Home Zone programme. A Draft *Schools Travel Schemes* Bill was published in March 2004 and a national *Walking and Cycling: an Action Plan*, was published in June 2004.

At London level, the above national initiatives and programmes are being implemented by TfL with the boroughs through, for example, the safer routes to school programme and traffic calming measures, to address particular London concerns about the impact of the 'school run' on traffic levels and congestion, as well as concerns about the health impact of an increased car dependency on children.

Following production of the Mayor's *Draft Local Implementation Plan Guidance for Consultation* (March 2004), the London boroughs will be required to produce local implementation plans, during 2004/05, containing their proposals for the implementation of the Mayor's Transport Strategy (July 2001).

The Mayor's *London Cycling Action Plan* was produced in 2003 and his Walking Plan for

London was launched in February 2004, as key areas to be developed and implemented by TfL with borough partners.

The Mayor's *Transport Strategy* set reduction targets from 2001 to 2011 in weekday traffic of 15 per cent in Central London, zero growth across the rest of inner London and reducing growth in outer London by a third. The target for central London has already been achieved with the congestion charge and 1999 – 2002 data show a reduction in traffic flow across the inner London cordon of –4 per cent and outer London cordon of –2 per cent.

Proposed London-wide Strategy Implementation Targets (GLA, March 2004) include: an increase of at least 80 per cent in cycling in London between 2001 and 2011; school travel plans to be in place for all schools by 2009; and 100 per cent of primary schools to have 20 mph speed limits on appropriate surrounding roads by 2011.

The Mayor's *Transport Strategy* adopts for London the national target (2000) to reduce by 50 per cent the number of children killed or seriously injured in road traffic accidents by 2010. There is an additional research focus on the greater vulnerability of black African and Caribbean children as road casualties, in order to improve the effectiveness of prevention initiatives.

A raft of cheaper fares initiatives for children and young people in London include free travel for school parties on public transport in London; a free bus travel scheme for under 11s; new plans to extend the free bus travel to under 16s from September 2005 (and to under 18s in full-time education from September 2006); and a range of family travel ticketing policies.

Notes

1   More than one-third (37.5 per cent) of households in London have no car or van (the highest proportion in any area) compared with an England and Wales average of 26.8 per cent (Census 2001 data).

2   A survey of 30,000 households across London.

3   The percentages of children who walk to school is likely to be understated in 1991 compared with 2001, owing to changes in definition. (In 1991 interviewers were instructed to record walks only if they were longer than 200 yards. This restriction did not apply in 2001.)

4   Young Londoners in the GLA Young Londoners Survey also rated pollution and traffic congestion as the two worst things about living in London (Greater London Authority, 2004). See note 1, Chapter 1, for a description of the survey.

5   In London, between 1991/93 and 2002, the average length of the trip to school increased from 1.8 to 2.5 miles for children aged 5 – 16 (National Travel Survey, 2002).

6   One in four respondents cited safety-related reasons.

7   However, the proportion of childhood deaths from road traffic accidents is lower in London than nationally (see being healthy chapter).

8   The total child casualty figures in the first State of London's Children Report did not include powered two-wheeler, goods vehicle and other vehicle casualties. Casualties in these categories (in 2003) were not included, therefore, in the computation of the comparison.

9   This emphasis positions children's lives as primarily school-oriented, and as dominated by the goals and agenda of formal education.

10   The consultation on the draft Mayor's Children and Young People's Strategy, with more than 1,000 responses from young Londoners, identified a high level of support for cheaper public transport and measures to improve transport security.

11   The Mayor's Transport Strategy recognises that the range of people whose transport mobility may be restricted is very wide and includes people travelling with young children too. We are not aware, however, of any research findings that relate to this issue.

12   TfL have reported a high proportion of low-floor and wheelchair accessible bus routes in the particular borough, so the young people may have been expressing concerns about the proportion of bus journeys where the 'kneeling' mechanism was not activated by the driver.

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8 Families, social care and protection

8.1 Introduction

Every Child Matters builds on the Climbié Inquiry findings[1] by setting out the government's commitment to ensure the welfare of children at risk within a framework of universal services. The government is committed to a graduated response to improving children's lives and emphasises support for parents and carers, early intervention, effective protection and multi-agency approaches.

In terms of early intervention and prevention, Sure Start Children's Centres, which provide health, family and parenting support, and early education and childcare, are being expanded to reach more children in disadvantaged areas. Extended schools are being developed as key sites for multi-agency provision for school-age children and their carers.[i]

In terms of child protection, a range of measures has been introduced. These include the replacement of Area Child Protection Committees with statutory Local Safeguarding Children Boards, improved 'Information Sharing and Assessment' through the use of a new Identification, Referral and Tracking (IRT, now Information Sharing Arrangements, ISA) system and the creation of a new Director of Children's Services post, under new Children's Trusts arrangements with accountability for local authority education and children's social services. These new processes and structures will attempt to integrate specialist and targeted services with universal services, putting improved outcomes for all children at the centre of delivery.

This chapter focuses on the support that is offered to London's children and families across the spectrum, from universal services (such as childcare and other forms of social support) and services for children 'in need'[2] to child protection services and more targeted and specialist provision. The chapter also provides a range of updated information about 'looked-after' children[3] and care leavers.

The chapter is in four parts:

- Section 8.2 is concerned with childcare and services for children 'in need'.
- Section 8.3 looks at the extent and nature of adult violence towards London's children.
- Section 8.4 focuses on London's child protection services and on evidence relating to London's looked-after children and care leavers.
- Section 8.5 discusses social service provision for London's unaccompanied asylum-seeking children.

8.2 Supporting London's parents and children

Childcare

The government is committed to a major expansion in high quality, affordable childcare and early education. Since the launch of the National Childcare Strategy (in 1998) childcare has expanded with the establishment of Sure Start programmes and Early Years Child Development and Childcare Partnerships (EYCDPs) and there has been a major investment in out-of-school clubs. In 2002 the government set out its plans for a further expansion in

childcare and the extension of Sure Start in disadvantaged areas, through the establishment of Children's Centres.[4]

Childcare in London: current provision

In March 2004, London had 96 Sure Start local programmes in 29 local authorities. These 29 authorities were finalising plans for an estimated 212 Children's Centres, with the number of centres in each authority varying between one or two to up to 20.[5, ii]

Analysis of the most recent Ofsted figures shows that London has lower rates of childminders, full day care, sessional day care and out-of-school places than England as a whole (Table 8.1).

Table 8.1   Rates[6] of registered childcare in London and England, 30th September 2003

	Childminders		Full day care		Sessional day care		Out of school day care		Crèche day care	
	Places	Rate	Places	Rate	Places	Rate	Places	Rate	Places	Rate
London	39,200	5.2	59,400	12.4	28,700	3.8	45,300	16.7	5,000	0.7
England	309,000	6.5	420,600	14.4	277,500	5.8	309,900	16.9	34,900	0.7

Source: Analysis of figures from Ofsted

There is also wide variation in types and level of provision between the London boroughs (Appendix table 19).

Childcare provision has expanded in London, in line with the national picture. However, levels are still inadequate to meet the needs of women in employment, let alone those wanting to pursue education and training. Childcare costs are also considerably higher in the capital; with nearly 30 per cent of non-working women citing costs and the lack of affordable childcare as a barrier to working (Table 8.2).

Table 8.2   Typical weekly childcare costs, London and England 2003

(£)	Nursery (under 2) (£)	Nursery (over 2) (£)	Childminder (under 2) (£)	Childminder (over 2) (£)
Inner London	168	152	139	139
Outer London	154	136	138	133
England average	128	119	118	112

Source: Daycare Trust, in Greater London Authority, The Case for London, 2004: p.48

The evidence also suggests that tax credits which are intended to help with childcare costs have not provided enough support to meet the costs of those seeking full (or near) full-time care. Whilst London is reported to be the only region in the country with more childcare places per 100 children in the 20 per cent most disadvantaged wards,[iii] this does not necessarily mean that it is the most deprived households who are actually accessing these places. In many London wards the economic position of households with children may differ from the majority of households; and income polarisation may mean that demand for places in deprived wards will largely come, not from the poorer, but from the more affluent families.[iv, v]

Childcare statistics also fail to give details of the level of turnover in provision, and this pattern in London is of considerable concern. A recent study of London's EYCDPs found that (over the last year) one nursery closed for every four that opened; one out-of-school club closed for every two that opened; and there was a 1:1 ratio between childminder start-ups and closures.[vi]

Table 8.3 shows the impact across London if this pattern were to be repeated across the boroughs.

Table 8.3   **Start-ups and closures of childcare providers, London, one year**

	Total start-ups (20 boroughs)	Total closures (20 boroughs)	Extrapolated start-ups, all London	Extrapolated closures, all London	Closures as % of start-ups	Closures as % of total Registered providers
Nurseries	81	23	134	38	28.4	2.5
Childminders	1504	1422	2482	2346	94.5	21.7
Out-of-school clubs	167	73	276	120	43.7	10

Source: Greater London Enterprise, Sustainability of Childcare in London, 2004

Key issues affecting the development and sustainability of childcare in London are described in this study, as follows:

• *Premises*: Long-term sustainability and expansion of existing provision as well as new development is held back by shortages of land, suitable buildings and locations, complex planning processes and London's high rents.

• *Costs*: The barriers posed by London's high childcare costs are exacerbated by uncertain and cumbersome funding streams and the complexity of the current tax credit system. This is particularly important in London in view of its high levels of poverty and high living costs.

• *Recruitment and retention of staff*: Issues of low pay and status compromise the recruitment and retention of skilled staff.

Childcare quality

Childcare needs to be both accessible and affordable. However, it is critical too that it is of high quality. As the Mayor's Children and Young People's Strategy notes, high quality childcare can 'give children a good start in life by supporting health and well-being, reducing stress and isolation, supporting parenting, promoting nutrition and healthy diets, promoting physical activity and reducing child accidents.' Quality childcare must pay positive attention to children's ethnic, cultural, religious and linguistic backgrounds and promote an open attitude to those with diverse backgrounds'.[vii] Children are also more likely to 'experience quality childcare where there are well trained and qualified staff' and where they receive stable and continuous care.[viii]

Research has increasingly sought to document children's views, including the views of very young children,[ix] on what they value and dislike within childcare services. A recent study used a combination of approaches (a literature review, a survey of the consultation results of English EYDCPs and consultations with 62 children in two contrasting authorities, one in London) to report findings and draw conclusions about children's views of childcare.[x]

The researchers observe that 'a good childcare setting from the perspective of children and young people, irrespective of age and type of setting, seems to be one where children can

have fun, play with their friends, where they are given a choice over what they can do and where interesting activities are provided in a safe, relaxed and welcoming environment.'[xi] On the basis of their findings, they suggest a list of 19 quality indicators.

Services for children 'in need'

Adequate provision of high quality preventative or family support services can prevent the need for children to be looked after by local authorities and may be more 'cost-effective'. (In England around 60 per cent of expenditure on children in need is accounted for by children who are 'looked after' even though this group accounts for only 27 per cent of these children).[xii]

The relative spend on preventative services (as measured by expenditure on children in need, but not looked after, as a percentage of expenditure on all children's services) is similar in London to the national average and has increased since 2000/01 (Table 8.4).

Table 8.4   Gross expenditure on children in need but not looked after, as a percentage of gross expenditure on all children's services 2000/01 – 2002/03

	2000/01	2001/02	2002/03
Inner London (%)	34	37	38
Outer London (%)	32	36	37
Unitary authorities (%)	32	37	38
Shire counties (%)	30	35	36
Metropolitan districts (%)	34	38	38
England (%)	32	37	38

Source: Social Service Performance Assessment Indicators 2002/03

Children from BME groups are more likely to be classified as 'in need', in London and in England, than might be expected from their proportion within the total population. This may be partly explained by language and other factors such as poverty and unemployment. However, further analysis of BME children 'in need' highlights an over-representation of children from black or mixed ethnic groups and an under-representation of children from Asian groups.

8.3 Violence and London's children

Key issues

Many children experience their home relationships as more democratic and respectful than their relationships with others outside the family and research has shown that children place great value on their homes in the context of an increasingly 'risky' outside world (with its threats of traffic and 'stranger danger').[xiii, xiv]

For the majority of children home is indeed a safe haven and children thrive in the loving and

caring environment that family life affords. However, for a sizeable minority of children this is far from the case. A major NSPCC survey of the prevalence of maltreatment found that one in 14 children in the UK had suffered serious physical abuse in childhood and one in 16 serious sexual abuse.[xv, 7]

The sheer scale of violence to children is made more apparent when one takes into account the psychological harm and the mental violence which is associated with neglect and emotional abuse; and the scale becomes larger still if one considers the prevalence of other forms of violence, such as hitting and smacking, which lie outside common definitions of child abuse.

In a recent study, two-thirds of mothers admitted to smacking their child before their first birthday, and about 25 per cent of children had been hit regularly with straps and canes.[xvi] In a national survey of parental discipline, more than half the parents reported the use of smacking or slapping.[xvii] As UNICEF observes, 'the hitting of children by parents and carers is, by a significant majority, the most common form of violence in the industrialised world'.[xviii]

Physical punishment of children constitutes a violation of children's fundamental human rights.[xix] It hurts children both emotionally and physically, is an ineffective form of discipline, and links have been shown to emotional and behavioural problems later in life. Moreover, adult violence to children can contribute to violence between children, and children who have experienced violence are more likely to grow into violent adults.[xx]

All the available evidence points to the fact that it is family members, not strangers, who are largely responsible for child maltreatment.[8] The only area outside the family where violence to children occurs with any frequency is between age peers at school or in other settings where young people congregate.[xxi]

Young Londoners who were consulted by the Office of Children's Rights Commissioner for London were disgusted and shocked by child abuse and many saw this as the most important issue to be addressed in London.[xxii]

Moreover, societal fears of 'stranger danger' are clearly not justified by child homicide statistics. Home Office figures show that child abductions and murders by strangers have remained constant at around 6 per year for the last 20 years.[xxiii] In 2002/03 just 17 per cent of children were killed by

a stranger, compared to 68 per cent by a parent or someone known to them (Table 8.5).[xxiv, 9]

Table 8.5   The relationship of child homicide victims (aged under 16) to the principal suspect, England and Wales, 2002/03

Relationship	Number	(%)
Son or daughter	55	56
Other family/friend/acquaintance	12	12
Stranger	17	17
No current suspect	15	15

| Total number | 99 | 100 |

NSPCC, analysis of Home Office data

The nature and prevalence of violence to children in London

There has been no comprehensive attempt to measure the extent of all forms of violence experienced by children either in the UK or at a regional level,[xxv] and there are considerable methodological problems in developing comprehensive and accurate estimates of child deaths (including homicides) and other forms of abuse.

This means that it is very difficult to give any reasonable estimate of the extent of violence to London's children. However, below we consider a range of data sources, which together offer some insight into this issue.

Child death statistics

From 1998 to 2002, there were 168 child homicide deaths in England and Wales, and there were 265 child deaths, which were classified as undetermined whether accidentally or purposefully inflicted.[xxvi] Many of these 'undetermined' deaths will also have been caused by maltreatment, greatly increasing the overall rates of death by maltreatment.[xxvii]

ONS mortality statistics show that in London, in the years 2001 – 2002, there were 63 deaths from 'assault' of children aged 1 – 19, representing 8 per cent of all London childhood deaths, compared with a national proportion of 5 per cent. These deaths from assault were deaths from homicide and from other specified events of undetermined intent with inquest verdicts pending.

Data from prevalence studies on hitting and child maltreatment

We are not aware of any prevalence studies that are either London-based or have been carried out in a regional analysis,[10] and it is possible that the picture in London may differ from that which is identified in national studies (see above). However, on the basis of these and, assuming an unchanging pattern, we can estimate that the majority of London children will have experienced hitting; approximately 116,000 will experience serious physical abuse (at some time in their childhood) and approximately 101,000 will experience sexual abuse.

Child protection registers

Child protection registers (CPRs) contain confidential details of children who are believed to be at continuing risk of physical, emotional or sexual abuse or neglect, and for whom there is a child protection plan. They only include those children who are known to child protection agencies and do not provide a measure, therefore, of prevalence or incidence of child treatment. They offer some useful information, nevertheless, about trends in child protection intervention.[xxviii]

Table 8.6 shows that the rate of registration in London, at March 2003, was higher than in all other English regions, with the exception of the North East. This table also shows that, whilst the rate of registration has fallen since 1999 across the English regions, the same trend is less apparent in London, where the rate has stayed relatively constant within a range of 28 – 30 per cent.

Table 8.6 Children and young people on child protection registers at March 31st 2003, London and England

Region	Rate per 10,000 population					Change (%)
	1999	2000	2001	2002	**2003**	1999 – 2003
North East	38	37	33	35	**35**	–3
North West	26	26	21	22	**24**	–2
Yorkshire and the Humber	35	30	25	25	**25**	–10
East Midlands	33	33	28	25	**26**	–7
West Midlands	30	29	25	24	**24**	–5
East of England	25	24	21	21	**21**	–4
South East	21	21	21	17	**18**	–3
South West	27	24	20	20	**21**	–6
London	**30**	**30**	**29**	**28**	**29**	**–1**
England	29	27	24	23	**24**	–5

Source: Adapted from DfES, Statistics of Education: Referrals. Assessments and Children and Young People on Child Protection Registers: Year ending 31st March 2003

In common with the pattern across the country, children on CPRs in London were most likely to be registered under the category of neglect (Table 8.7).[11]

Table 8.7 Children and young people on child protection registers at 31st March 2003 by category of abuse

Region	All children (numbers)	Neglect	Physical abuse	Sexual abuse	Emotional abuse	Multiple/ not recommended[12]
North East	1,920	38	16	7	13	26
North West	3,795	39	18	10	21	12
Yorkshire and the Humber	2,870	35	18	12	12	24
East Midlands	2,485	30	15	14	20	22
West Midlands	2,960	42	16	13	19	9
East of England	2,520	41	15	10	24	10
South East	3,220	48	14	8	18	12
South West	2,210	32	22	14	23	10
London	**4,600**	**46**	**13**	**7**	**18**	**15**
England	26,600	40	16	10	19	15

Source: DfES, Statistics of Education: Referrals. Assessments and Children and Young People on Child Protection Registers: Year ending 31st March 2003

8.4 Child protection and looked-after children

Child protection services

The government uses a range of Social Services Performance Assessment Framework Indicators to monitor the performance of social services departments. These indicators can provide some useful insights into the quality and responsiveness of London's social services, and we use 2002/03 data below to update the information presented in the first SOLCR in relation to child protection. However, the data must be approached and interpreted with caution.

First, the information that they provide should be understood in the broader context of the challenges that are faced by those working in London's social services departments. Social workers in London's local authorities, like nursing, teaching and other public sector workers, carry out their work in a complex environment and 'recruitment difficulties and a lack of managerial capacity have had a knock on effect on supervision and support for staff who handle child protection cases or investigations'.[xxix]

Secondly, the Audit Commission has noted that these indicators fail to provide a clear picture of some of the most important aspects of child protection and that over-reliance on performance indicators might actually encourage councils to compromise their standards in

order to reach government targets.[xxx]

Re-registration on the child protection register

When children are registered on the child protection register (CPR), local authorities are required to implement a child protection plan which leads to improvements in the child's safety and well-being. High levels of re-registration may suggest that professional intervention to bring about changes is ineffective.

Table 8.8 shows a declining trend in levels of re-registrations in London, as in England as a whole. However, whilst the proportion of re-registrations in inner London has fallen from 20 per cent (in 1997/98) to 11 per cent (in 2002/03), the proportion in outer London (though starting from a lower base) has remained stable at 10 – 11 per cent for five years and increased to13 per cent in 2002/03.

Table 8.8   Re-registrations on the child protection register, 1997/98 – 2002/03

	1997/98	1998/99	1999/00	2000/01	2001/02	2002/03
England (%)	19	15	14	14	14	13
Metropolitan Districts (%)	16	14	14	13	13	11
Shires (%)	22	15	14	14	15	15
Unitary authorities (%)	18	17	16	17	16	15
Inner London (%)	20	13	13	11	13	11
Outer London (%)	11	11	10	11	10	13

Source: Social Service Performance Assessment Indicators 2002/03

Child protection reviews

Regular and effective reviews are a key element in delivering child protection plans. Table 8.9 shows that almost all of London's child protection cases that should have been reviewed were reviewed in 2002/03 (97 per cent in outer London, 96 per cent in inner London) and that the rate of improvement on this indicator has been greater in London (from 1999/00) than in any other area.

Table 8.9   The percentage of child protection cases requiring review that were actually reviewed, 1997/98 – 2002/03

	1998/99	1999/00	2000/01	2001/02	2002/03
England (%)	87	81	87	93	97
Metropolitan Districts (%)	87	77	88	91	98
Shires (%)	89	87	88	91	96
Unitary authorities (%)	82	81	91	96	98
Inner London (%)	87	76	83	94	96

Outer London (%)	87	76	79	93	97%

Source: Social Service Performance Assessment Indicators 2002/03

Duration on the child protection register

Social service professionals, the child and the family should work towards specified outcomes that lead to de-registration within two years. The proportion of London children de-registered who had been on the register for two years or more has shown a marked reduction over the past six years. However, London authorities continue to have the highest proportions nationally of children de-registered after two or more years (Table 8.10).[13]

Table 8.10   Percentage of children de-registered from the child protection register who had been on the register for two years or more, 1997/98 – 2002/03

	England (%)	Metropolitan Districts (%)	Shires authorities (%)	Unitary authorities (%)	Outer London (%)	Inner London (%)
1997/98	13	18	9	12	19	19
1998/99	13	17	8	10	19	18
1999/00	12	15	9	10	19	15
2000/01	11	13	8	10	16	16
2001/02	10	11	7	8	16	17
2002/03	8	9	7	7	13	11

Source: Social Service Performance Assessment Indicators 2002/03

The protection of key groups of children in London

Children who experience domestic violence

Children who live in households where there is domestic violence can be seriously affected, emotionally and psychologically.[xxxi] Research has also shown how these children are much more likely than children in other households to experience physical maltreatment. For example, surveys across the industrialised world have suggested that 40-70 per cent of men who use physical violence against their partners also physically abuse their children; that about half the women who are physically abused by their partners also abuse their children; and that the greater the frequency and severity of violence between partners, the greater the risk to the child.[xxxii]

Disabled children

Whilst there is very little research into disabled children's experience of maltreatment in the UK, a recent American study found that disabled children were more than three times more likely to be abused than non-disabled children.[xxxiii]

Although UK guidance recognises that disabled children are at increased risk of abuse, there is no requirement on local authorities to record whether children on their child protection registers have a disability. Only half of local authorities claim to keep a record of disabled children who have been abused and only one third have specific guidelines for the protection of disabled children.[xxxiv]

A report of the National Working Group on Child Protection observes that, despite the evidence, there is a prevailing belief that disabled children are not abused and a generalised failure of the child protection system to protect disabled children adequately.[xxxv, 14]

Children and young people at risk of sexual exploitation

Some children and young people are at risk of being sexually exploited or abused through prostitution.[xxxvi] The Sexual Offences Act (2003) proposes a new criminal offence to address commercial sexual exploitation and trafficking of children. Every Child Matters describes a need for key agencies (police, immigration and social services) to work closely together in order to protect children from their traffickers.[xxxvii]

Barnardo's is carrying out a major piece of research, with the support of other agencies, to identify the needs of young people in London who are vulnerable to commercial sexual exploitation and trafficking and to map the current services that are available for these children. Two further pieces of research on trafficking in London have also recently been completed by the Metropolitan Police (MPS)[xxxviii, 15] and by ECPAT (End Child Prostitution, Pornography and Trafficking).[xxxix, 16]

London's looked-after children and care leavers

Children who are looked after by local authorities have poorer life chances, in general, than those who are not. Care leavers are more likely to have lower educational attainment, to be unemployed, to experience teenage parenthood, and to be homeless or living in poor housing. Between one-quarter and one-third of rough sleepers were previously in care and around one-quarter of adults in prison spent time in care as children.[xl]

These patterns are linked to a number of complex, interrelated factors, including the quality and stability of the parenting that is provided by the state. Young people in the care system have identified a lack of a child-centred approach, inadequate support, and a sense of stigmatisation that goes with being in care. Looked-after children and young people from BME groups are also more likely to have difficulties concerning their confidence, self-esteem and ethnic identity.[xli]

A London-based project, set up to develop a more child-centred approach to children and young people in care[xlii] has recently carried out an extensive review and summary of research on the challenges of leaving care.[xliii]

The government has taken action to promote the stability of looked-after children and to improve the life chances of care leavers through The Quality Protects Initiative (1998) and the Children (Leaving Care) Act (2001).

More recently, the Choice Protects Review (2002) has been established to improve placement choice and stability for looked-after children and a Choice Protects grant of £113 million has been made available to local authorities to expand and strengthen fostering services for children.

Recent research evaluating the impact of the Children (Leaving Care) Act suggests that there has been some success in improving outcomes for care leavers, with national improvements in the numbers in training, education and employment, receiving health checks and accessing accommodation and financial support.[xliv]

We review some of the key outcomes below with regard to London's children.

Who are London's looked-after children?

At March 31st 2003, there were 11,735 looked-after children in London. Fifty-four percent (6,400) of these were in outer London and 46 per cent (5,400) were in inner London. There were more looked-after boys than girls (57 per cent/43 per cent).[xlv]

The DfES does not publish regional data on the ethnicity of looked-after children. However, it does publish regional data on the numbers of looked-after unaccompanied asylum-seeking children and, in 2003, 71 per cent (1,700) of England's 2,400 looked-after unaccompanied asylum-seeking children were in London.[xlvi]

London in comparison with the national picture

Table 8.11 shows that London has a higher rate (per 10,000) of looked-after children than England. The number and rate of looked-after children in London has risen from 1999 – 2003, in line with a national rise, and the rise in London's overall rate is explained principally by rises in outer London.

Table 8.11 Number and rates of looked-after children*, 1998/99 and 2002/03, London and England

children	No. of children at 31 March 1999	Rate	No. of children at 31 March 2000	Rate	No. of children at 31 March 2001	Rate	No. of children at 31 March 2002	Rate	No. of children at 31 March 2003	Rate
Inner London	4,800	83	5,200	90	4,900	69	5,400	77	5,400	77
Outer London	4,800	41	5,200	51	5,500	60	6,000	65	6,400	70
London	9,600	55	10,400	63	10,400	64	11,400	70	11,800	73
England	55,300	48	58,100	51	58,900	53	59,700	54	60,800	55

Source: DfES, Children looked-after by local authorities, year ending 31st March 2003. *Numbers have been rounded to the nearest 100. Rates are per 10,000 children aged under 18 years.

Borough variations

The number of looked-after children (in 2003) ranged from 85 in Kingston upon Thames and 115 in Richmond upon Thames, to 680 in both Southwark and in Croydon.

Rates show a range from 26 children (per 10,000) in Redbridge and 27 in Kingston-upon Thames to 127 (per 10,000) children in Hammersmith and Fulham and 135 (per 10,000) in Islington.

The two boroughs with the most consistently high numbers and rates, from 2001 to 2003, are Southwark and Islington (see Appendix table 20).

The placement of London's looked-after children

Residential care may provide the best solution for some looked-after children, and children and young people themselves may show preferences for residential care.[xlvii, 17] However, the government also holds the view that young children, in particular, will generally make better progress in family settings.

All council types showed increases between 2001/02 and 2002/03 in the percentage of young children looked after in foster placements or placed for adoption, but inner and outer London, which had the lowest rates in 2001/02, showed the greatest improvement (Table 8.12).

Table 8.12   Young children (under 10 years) looked after in foster placements or placed for adoption 2001/02 – 2002/03[18]

(%)	England districts (%)	Metropolitan Shires (%)	Unitary (%)	authorities (%)	Inner London (%)	Outer London (%)
2001/02	96	95	97	97	93	93
2002/03	97	96	97	98	97	95

Source: Social Service Performance Assessment Indicators 2002/03

London's performance on this indicator is less good for older children. Table 8.13 shows that, despite an improving trend, both inner and outer London have lower percentages of older looked-after children in foster placements or placed for adoption.

Table 8.13 Older children looked after in foster placements or placed for adoption 2001/02 – 2002/03[19]

(%)	England (%)	Metropolitan districts (%)	Shires (%)	Unitary authorities (%)	Inner London (%)	Outer London (%)
2001/02	80.8	81	82	84	76	75
2002/03	81.7	82	83	85	77	77

Source: Social Service Performance Assessment Indicators 2002/03

Placement stability

In England, the percentage of children with three or more placements was reduced between 1998/9 and 2001/02, and has remained stable (at 12 per cent) between 2001/02 and 2002/03. There is no evidence of a similar reducing trend in London. However, London has had a smaller proportion of looked-after children with three or more placements.

In 2002/03, inner London had the lowest percentage of children in this group (11 per cent). Outer London's figure of 13 per cent was one percentage point over the England average (Table 8.14).

Table 8.14 The percentage of children looked after at 31st March with three or more placements during the years 1998/99 – 2002/03

	1998/99	1999/00	2000/01	2001/02	2002/03
England (%)	16	15	13	12	12
Metropolitan districts (%)	17	16	14	13	13
Shires (%)	16	15	13	12	12

Unitary authorities (%)	16	15	14	14	13
Inner London (%)	11	11	10	10	11
Outer London (%)	13	12	12	12	13

Source: Social Service Performance Assessment Indicators 2002/03

Out-of-borough placements

Over recent years there have been concerns raised about the use of out-of-borough placements for London's looked-after children.

Through the 1990s, a growing number of specialist private sector agencies, both for foster care and for residential care, developed in Kent. The continuing problem of finding good quality and specialist placements in London meant that London authorities began to place an increasing number of children in Kent. Despite national guidance ('Choice Protects') and London authorities' preferences for more quality placements in London, it has become increasingly apparent that parts of Kent have high levels of looked-after London children.

Reflecting the value of local placements for children in care by social service departments in London, the Greater London Association of Directors of Social Services (GLADSS) undertook a critical review of the value of existing placements in Kent. This voluntary action by London authorities has led to the numbers of London children living in Kent being reduced by 84 during 2003/04, that is a reduction of nearly 10 per cent or 1 in 10 of such placements.

Further discussion and work is taking place regionally, with GLADSS, the Association of London Government and local authorities in Kent, including continuing to work together to see what more can be done to develop more specialised foster placements for London's children in London.[xlviii]

Health care and London's looked-after children

The government also monitors the basic health care of looked-after children through a Social Services Performance Assessment Indicator.[20] Table 8.15 shows that there have been improvements across England (from 2000/01 – 2002/03) in the percentage of children having these health checks.

The increase in outer London (of 12 percentage points) is notably higher than in any other group. Inner London has shown only a small increase, however, and its average (of 64 per cent) is considerably lower than elsewhere.

Table 8.15 Average percentage of looked-after children who have had dental and annual health assessments during the past 12 months

(%)	England (%)	Metropolitan districts (%)	Shires (%)	Unitary authorities (%)	Inner London (%)	Outer London (%)
2000/01	64.3	60	68	68	62	65
2001/02	68.2	65	70	73	61	67
2002/03	71.6	68	73	75	64	77

Source: Social Service Performance Assessment Indicators 2002/03

London's care leavers

A total of 1,600 looked-after children (aged 16 or over) ceased to be looked after in London during the year ending March 31st 2003. Just over half (860) of these were from outer London and 740 were from
inner London.

Educational outcomes

Table 8.16 shows that there have been considerable increases in the percentages of young people attaining at least one GCSE or GNVQ since 1999/00. However, the percentages in London are consistently lower
than elsewhere.

Table 8.16   The percentage of young people leaving care aged 16 or over with at least 1 GCSE at grade A* – G or a GNVQ

(%)	England (%)	Metropolitan districts (%)	Shires (%)	Unitary authorities (%)	Inner London (%)	Outer London (%)
1999/00	31	27	36	31	24	27
2000/01	37	36	42	38	33	25
2001/02	41	39	47	42	35	33
2002/03	44	43	48	44	38	37

Source: Social Service Performance Assessment Indicators 2002/03

The attainment of looked-after children also continues to compare unfavourably with young people who have not been in the care system and, with the exception of 5 GCSE's A* – C, this attainment gap is slightly larger in London than in England as a whole (Table 8.17).

Table 8.17 GSCE or equivalent performance of looked-after children in Year 11 compared with all children, year ending 30th September 2003

	London	England
Number old enough to sit GCSE or GNVQ exams	1,220	4,600
% sitting one of these exams	54	56.8
1 GCSE grade A* – G or a GNVQ, Looked-after children (%)	50	52.9
1 GCSE grade A* – G or a GNVQ, All children (%)	95	95
5 GCSEs grade A* – G, Looked-after children (%)	34	36.8
5 GCSEs grade A* – G, All children (%)	90	89
5 GCSEs grade A* – C, Looked-after children (%)	10	8.7
5 GCSEs grade A* – C, All children (%)	51	51

Source: DfES, Outcome Indicators for looked-after children, twelve months to 30 September 2003

London clearly lags behind in the educational attainment of its looked-after children. However, Table 8.18 shows that London's looked-after children were more likely to be in full-time education than those in England as a whole.

Table 8.18 Education and employment status at 30th September 2003 of looked-after children in Year 11 in 2002/03 school year, compared with all children

	Total number of children	Full-time education (%)	Full-time training (%)	Full-time employment with planned training (%)	Full-time employment – no training (%)	Part-time employment, planned education or training (%)	Unemployed (%)
London, Looked-after Children	1,220	63	6	2	2	7	20
London, All children	77,200	78	3	2	2	1	7
England, Looked-after children	4,600	57	8	3	3	6	23
England, All children	608,000	72	7	5	3	1	7

Source: DfES (from the Connexions/Career Service Annual Activity Survey 2003)

London's young care leavers also express some optimism about their education. In Hai and Williams' study of the implementation of the Children (Leaving Care) Act in eight London boroughs, the majority of the young respondents said that they thought that their educational, employment and training prospects had improved. Young people also said that they were receiving helpful support from their social workers, from Connexions and from education workers who were attached to leaving care teams.[21, xlix]

Other outcomes for care leavers in London

Hai and Williams reported that young people were more likely to be living in suitable or appropriate accommodation following the implementation of the Children (Leaving Care) Act. Young people were more likely too to have no changes of social worker, and care leavers from BME groups reported receiving the same treatment as other care leavers.

However, the researchers noted serious concerns about the long-term planning for young people seeking asylum,[22] and variations in the level and quality of support that was offered to young parents and parents-to-be.[l]

8.5 Social services provision and key issues affecting unaccompanied asylum-seeking children

In its recent publication *Offering More than they Borrow*,[li] the GLA documents some of the principal issues affecting unaccompanied asylum-seeking children, as follows.

Continued variations in support for 16 – 17 year-olds

Whilst recent guidance from the Department of Health has clarified that all unaccompanied asylum-seeking children should receive services under Section 20 of the Children Act,[23] unless a full assessment indicates otherwise, many young people aged 16 – 17 have continued to receive services under Section 17 of this Act.

These young people are commonly placed in unsuitable bed and breakfast accommodation or in private accommodation or hostels (often in another borough) and they have a consistently lower standard of care than those looked after in foster or residential care under Section 20. Young people in this kind of unsuitable accommodation may also be at risk, as adults with drug and mental health problems may be living in the same setting.

Shortage of suitable placements for looked-after children under 16

Social service departments may have difficulty in finding culturally suitable foster placements for these children and young people in London. This can result in an increasing reliance on the use of private fostering agencies and placements outside London. This increases costs, may have an impact on the frequency of social worker visits and can lead to isolation for the children and young people.

Children viewed as asylum-seekers first and as children second

Social service provision for unaccompanied asylum-seeking children is organised in a range of different forms.[24] Even where there are specialist asylum teams that are aware of the distinct rights and needs of unaccompanied children, it is often the case that asylum-seeking children are viewed as asylum-seekers first and as children second in other social services sections. This view also leads to difficulties in accessing the appropriate services.

Care leavers and the Hillingdon judgement

In the important Hillingdon ruling, the judge found that it was the fact that a child had been

accommodated that determined whether they were entitled to leaving care services and not what section they were supported under. This means that unaccompanied asylum-seeking children are entitled to leaving care services, regardless of whether they have been supported under Section 17 or Section 20 of the Children Act.

The government has since made £10 million available for local authorities providing services to unaccompanied children under the Children (Leaving Care) Act. However, no funding is available for the first 44 asylum-seeking children who turn 18 within each borough. Both the Director of Hillingdon Social Services and the Association of London Government (ALG) have expressed concern about the inadequacy of this funding arrangement.

The *Children Bill* is expected to become law by the end of 2004, implementing many of the findings of the Climbié Inquiry and introducing significant structural and workforce changes. These include the replacement of Area Child Protection Committees with statutory Local Safeguarding Children Boards and the creation of new Director of Children's Services posts in each local authority.

The government plans to establish 2500 children's centres by 2008, extending the original commitment to a centre in each of the 20 per cent most disadvantaged wards in England. Their core provision will be the integration of early education with full day care, as well as parental outreach, family support, health services, service hub for childcare providers and links with other agencies and programmes.

Plans for extended schools, announced as part of the government's five-year education plan, involve the target of an extended school to be opened in every LEA by 2006 and 1000 extended schools by 2008. By opening for ten hours a day, the aim is to provide more welfare and childcare services for children and working parents.

The government will deliver a pilot offering a free part-time early education place for 12,000 two year-olds in 500 disadvantaged areas of England, building on the Sure Start programme for the under fives and the extension of childcare places.

In order to implement measures in the 2000 *Children (Leaving Care)* Act, the government has set a target for improving the level of education, training and employment outcomes for care leavers aged 19, so that levels for this group are at least 75 per cent of those achieved by all young people in the same area by 2004.

The GLA Children and Young People's Strategy contains specific child protection action points: to work with the London Child Protection Committee on improved data collection on the numbers of disabled children within the child protection system; to make the case to government for better protection for children in private fostering arrangements; and to establish a Londonwide forum to take forward a strategic approach to tackling the commercial exploitation and trafficking of children in London.

The *London Domestic Violence Strategy* (2001) set out a multi-agency approach to address issues of domestic violence at a Londonwide level, including its impact on children. Specific recommendations of the strategy relating to children are being progressed through the London Domestic Violence Forum's sub-groups on 'increasing women's and children's safety' and 'educating children and young people'.

The *London Childcare Strategy* (November 2003) sets out the Mayor's objectives: to increase the availability of good quality childcare provision in London (a commitment re-stated in his

second term manifesto), to make it more affordable by parents and to promote family-friendly employment practices. Through the London Development Agency, over £3 million was committed in 2003 – 2005 to gap-fund neighbourhood nurseries.

Notes

1   The Inquiry into the death of Victoria Climbié identified shortcomings in organisational arrangements for managing child protection, and in joint working, staff supervision and training.

2   The Children Act 1989 requires local authorities to provide appropriate services for children 'in need' (Section 17). A child 'in need' is defined in the act as 'any child whose health or development is likely to be impaired without the provision of services, or is unlikely to achieve or maintain a reasonable standard of health and development without the services, or who is disabled.'

3   The term 'looked-after' refers, under the Children Act (1989), to all children subject to a care order or provided with accommodation on a voluntary basis for more than 24 hours.

4   The July 2004 Spending Review provides a further investment in children's services and childcare, by planning 120,000 new childcare places and 2,500 children's centres by 2008.

5   Children's Centres are planned for all the London authorities, with the exception of the City of London, Harrow, Kingston-upon-Thames and Richmond.

6   Rates are provided on number of places per 100 children aged under 8 for childminders, sessional day care and crèche day care, per 100 children under 5 for full-day care (which includes day nurseries, children's centres and some family centres), and per 100 children aged 5 – 7 for out-of-school care.

7   It is likely too that this is an underestimate. The survey was carried out retrospectively and respondents were asked to recall any earlier experiences they may have had of maltreatment.

8   Within families, birth parents are primarily responsible for violence to children, although sibling and step-parent violence does occur.

9   NSPCC analysis also shows that the homicide rate for children aged under one year is consistently higher than for children in older age groups and boys outnumber girls across the age range.

10   The total sample sizes used in national prevalence studies may also be too small to allow for regional analysis. The NSPCC's national study of the prevalence of child maltreatment in the UK used a random probability sample of 2869 young people (aged 18 – 24) and had a response rate of 69 per cent.

11   This pattern has remained broadly unchanged since 2000.

12   'Multiple' refers to instances where there is more than one category of abuse. These children are not counted under other headings, so a child can only appear once in this table. 'Not recommended' refers to classification categories not recommended by 'Working Together' (1999).

13   This may possibly indicate some failings in long-term preventative work with London's most 'in need' and vulnerable children and families.

14   Recommendations from this major report are supported by the Ann Craft Trust, Barnardo's, the Council for Disabled Children, Mencap, NCB, the National Deaf Children's Association, the NSPCC, Scope, Triangle and Voice UK.

15   This study, which was concerned with defining the nature of child migration from non-EU countries to the UK, failed to identify any significant level of trafficking or exploitation, whilst recognising that the work was only focused on one port of entry (Heathrow) and on non-EU passport holders.

16   This research identified that there was an awareness of child trafficking by

London's social services, but there was also a lack of clarity on how to approach this issue. This study noted the need for cross-borough exchanges of information, and a more co-ordinated approach to trafficking, involving adequate training at a multi-agency level.

17   This study of 34 currently or previously looked-after children aged 15 – 25 reported that young people found residential care more relaxing than foster care and they enjoyed the contacts with other young people in residential care.

18   The source and definition for this indicator changed for 2000/01 so data for previous years is not directly comparable and has not been included.

19   See note 15.

20   This indicator is the average of the percentages of children looked after who had been looked after continuously for at least 12 months, and who had their teeth checked by a dentist during the previous 12 months and had an annual health assessment during the previous 12 months. Children do have the right, however, to refuse a health assessment or a dental check.

21   This study, which aimed to monitor the implementation of the Children Leaving Care Act, was carried out over two years from October 2001, and combined analysis of statistical information, with interviews with service managers, social workers and young people.

22   This is in the light of uncertainty about their status when they reached the age of 18.

23   These children are 'looked-after' and are entitled to a wide range of services and support.

24   Some departments have specialist asylum workers and others non-specialists based in children's teams. In some instances, asylum teams work with unaccompanied children as well as with families and single adults and such teams may be based in social services or housing departments.

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9 Safe homes and communities

9.1 Introduction

Research with children and young people consistently demonstrates
the value that they attach to the quality of their social and physical environments.

There is clear evidence too of an increasing public policy concern with ensuring the nation's quality of life and with promoting liveable, sustainable and inclusive communities. The government's *National Strategy Action Plan for Neighbourhood Renewal* sets out measures to promote economic prosperity, high quality education, decent housing, safe communities and better health in deprived neighbourhoods.[i] In *Sustainable Communities; Building for the Future* the government outlines a programme of action to ensure that our communities are places where people want to live and stay.[ii] Equally important is the input of a range of organisations that work with local communities, and with young people themselves, to develop ways of improving their neighbourhoods and local spaces.

In previous chapters of this report we have focused on areas that are key to sustainability (such as access to green, open spaces and the role of transport in improving children's lives). We have also reviewed the evidence on child poverty and the health and education of London's children.

The last of our themed chapters, focuses on housing (Section 9.2), homelessness (Section 9.3) and on young Londoners and crime
(Section 9.4).

An adequate supply of affordable housing is critical to ensuring the future sustainability of London, and vital for the current and future health and well-being of London's children. Safe, welcoming and inclusive streets, neighbourhoods and communities, in which young Londoners can make an active and valued contribution, also have a vital role to play in the development of a child-friendly London.

9.2 Housing

An introduction to housing in London

Since the mid-1990s, London's growing economy and population has led to an increased demand for housing. However, the supply of housing has been inadequate to meet this demand and London house prices have soared in relation to national prices.

A lack of affordable housing in the capital has led to outward migration and to staff shortages in London's public services. London's high housing costs have also had a negative effect on social welfare contributing to homelessness, overcrowding, rough sleeping and an over reliance on temporary accommodation. Spatial patterns of disadvantage have also been reinforced as people with low to average incomes have been unable to move away from low cost areas.[iii]

London's housing stock and tenure differs too from the pattern in the rest of England. Most of London's housing stock is older, with lower than average proportions of the stock dating post-1964. London has a higher proportion of households living in higher density dwellings such as flats and a lower proportion living in houses. London also has higher proportions of households in social and privately rented tenures and lower proportions in owner occupation, although the proportions of social housing vary considerably between the boroughs.[iv]

These patterns of housing tenure bear a direct relationship to household income and type. Workers from unskilled manual groups are more likely than professionals to live in socially rented housing. Couples and lone parents with dependent children are more likely than couples without children to be living in socially rented housing.[v] It is against this broad context that we turn now to discuss housing and London's children.

The condition of housing in London

Overcrowding

The Office of the Deputy Prime Minister (ODPM) has recently published an overview of overcrowding statistics. Using the 'bedroom standard' definition of overcrowding,[1] this shows that overcrowding is worse in London than in other parts of the country.[vi]

Whilst 2.4 per cent of households in England lack one or more bedrooms, the figure in London rises to 5.9 per cent. Of the three types of tenure, overcrowding is most marked in the socially rented sector and this difference is particularly marked in London (Table 9.1).

Table 9.1   Percentage of households below the bedroom standard, by tenure and region

(%)	Owner occupied (%)	Social rented (%)	Privately rented (%)	All tenures (%)
North East	1.4	2.1	3.2	1.7
North West	1.6	3.9	2.3	2.1
Yorks & Humber	1.3	3.1	3.6	1.9
East Midlands	1.2	3.4	2.1	1.7
West Midlands	1.6	4.4	3.8	2.4
East of England	0.9	3.7	3.0	1.6
London	**2.8**	**12.0**	**7.4**	**5.9**
South East	0.9	5.4	2.9	1.8
South West	1.0	3.7	2.5	1.6
England	**1.4**	**5.4**	**3.8**	**2.4**

Source: Adapted from Table 1 in ODPM, Overcrowding in England: the national and regional picture, 2004

The ODPM data also show that it is London households with children who are the most likely, of any households, to be living in overcrowded conditions. Lone parents with dependent children are the most seriously affected, with almost one-fifth (19.4 per cent) of London's single parents experiencing overcrowding (Table 9.2).

Table 9.2   Percentage of households below the bedroom standard by household type and region

(%)	Couple, no dependent children (%)	Couple with dependent children (%)	Lone parent with dependent children (%)
North East	0.8	3.7	4.4
North West	0.4	5.1	6.9
Yorks & Humber	0.2	5.3	6.1
East Midlands	0.4	4.2	5.8
West Midlands	0.5	5.0	9.3
East of England	0.4	3.8	6.6
London	**1.4**	**11.5**	**19.4**
South East	0.4	4.3	5.9
South West	0.3	4.1	6.5
England	**0.5**	**5.4**	**9.0**

Source: Adapted from Table 2 in ODPM, Overcrowding in England: the national and regional picture, 2004

Black and minority ethnic (BME) households are also more likely to be overcrowded than white households and this is particularly so in London (Table 9.3). These high rates of overcrowding are not simply a reflection of larger household size, as the rate of overcrowding of London's BME households is higher than that for white households of the same size in the same sector.[vii]

Table 9.3   Percentage of households below the bedroom standard by household ethnic group

(%)	White (%)	BME (%)	All (%)
North East	1.6	6.6	1.7
North West	1.8	11.2	2.1
Yorks & Humber	1.5	11.6	1.9
East Midlands	1.3	10.5	1.7
West Midlands	1.6	11.3	2.4
East of England	1.4	6.0	1.6
London	**3.6**	**12.6**	**5.9**
South East	1.5	6.9	1.8
South West	1.5	5.2	1.6

| England | 1.8 | 11.1 | 2.4 |

Source: Adapted from Table 4 in ODPM, Overcrowding in England: the national and regional picture, 2004

How many of London's children are living in overcrowded housing?

As London's households are more likely to be overcrowded than households nationally and as overcrowded households are more likely to include children, it follows that London's children are more likely to be living in overcrowded conditions than children elsewhere.

Analysis of 2001 Census data shows that 28.5 per cent of London's children are living in overcrowded conditions, compared to 12.5 per cent in England as a whole. Children in inner London are seriously affected, with 41.5 per cent in overcrowded housing, compared to 20.1 per cent in outer London.

There are wide variations between the boroughs in the proportion of children in overcrowded housing with rates ranging from 9 per cent in Richmond upon Thames and 10 per cent Bromley, to 47 per cent in Newham and 63 per cent in Tower Hamlets[2] (Appendix table 21).

These rates will be linked to variations in ethnic distribution. (Analysis of Census 2001 data by the Association of London Government (ALG) points to the wide variation in rates of overcrowding between London's ethnic groups with Bangladeshi households the most affected and white British households the least.[viii]

Is overcrowding in London getting worse?

The proportion of overcrowded households in London has increased from 5 per cent, in 1999/00, reported in the first State of London's Children Report (SOLCR), to 5.9 per cent, reported in the 2004 government overview (Table 9.1).[3] Moreover, analysis of 2001 Census data shows that the most severe overcrowding (households with over 1.5 persons per room) has increased sharply by 50 per cent since 1991.[ix] There is no reason to suppose that the rise in overcrowding has abated since 2001 as it is largely caused by a low supply of large social rented housing and an increasing lack of affordable housing.

Decent housing

In 2001, the proportion of London's dwellings that failed to meet the decent homes standard was slightly higher in London than across the country as a whole (Table 9.4) (see also Figure 9.1).

Table 9.4   Number and percentage of dwellings not meeting the 'decent homes' standard: London and England

	Number of homes, London (000's)	(%)	Number of homes, England (000's)	(%)
All tenures	1114	36.2	6,993	33.1
Private sector	789	34.7	5,419	31.9
Social housing	324	40.7	1,574	37.7

Source: Adapted from Table 22.6, ODPM, English House Condition Survey, 2001 London Regional Report

Figure 9.1   Decent homes

A decent home is one that:
• meets the current statutory minimum for housing

• is in a reasonable state of repair

• has reasonably modern facilities and services

• provides a reasonable degree of thermal comfort.

We have not been able to find more recent data on progress in relation to this target in London. However, a common concern amongst London tenants and councils is that the decent homes standard is too narrowly focused on individual units of housing, as opposed to the immediate external environment which surrounds these units of housing.[x]

If we look at the data relating to the much broader concept of 'poor neighbourhoods' we see that (in 2001) London had a higher proportion of dwellings in these neighbourhoods than the England average and that nearly one-quarter (23.7 per cent) of London's social housing was in this category (Table 9.5) (see also Figure 9.2).

Table 9.5   Number and percentage of dwellings in poor neighbourhoods, London and England

	Number of homes, London (000's)	(%)	Number of homes, England	(%)

(000's)

All tenures	435	14.2	2400	11.4
Private sector	246	10.8	1545	9.1
Social housing	189	23.7	855	20.5

Source: Adapted from Table 15, ODPM, English House Condition Survey, 2001 London Regional Report

Figure 9.2   Poor neighbourhoods

The English Housing Condition Survey classifies areas as being 'poor neighbourhoods' if they fail on any one of the following four measures:
* a local concentration of housing in substantial disrepair

* major problems with vacant sites and/or vacant/boarded up housing

* other forms of neglect or misuse (scruffy or neglected buildings/gardens/landscaping) vandalism, graffiti and serious problems with rubbish dumping/litter

* poor visual quality scores.

Young people's views about their local neighbourhoods

Recent government policy has emphasised the participation of local communities in the process of neighbourhood renewal and studies have sought to document the views of local people about their neighbourhoods and the kind of improvements they would like to see.[xi]

In surveys and consultations with adults, crime features as a key area of concern. Young Londoners, in the 2004 Greater London Authority (GLA) survey[4] were also concerned about crime. One-third of them reported this to be amongst the worst things about living in London. Only one-quarter of young Londoners felt very safe in their neighbourhoods, just over a half (51 per cent) felt 'quite safe' and one-fifth felt unsafe.

However, children and young people are critical commentators on the physical, as well as the social, environment of their city and neighbourhoods. More than half of the young people in the GLA survey thought that traffic pollution, litter, dumped waste and rubbish, graffiti and dumped cars were major problems in London. Noise and air pollution, a lack of green space and loss of plants and wildlife were also issues of concern.

These recent findings echo some findings from earlier studies, identifying young Londoners' concerns with the quality and cleanliness of their streets, parks, schools, housing and local environments.

9.3 Homelessness

Children in homeless households

London has witnessed increasing homelessness over recent years, reflecting a continuing fall in the availability of permanent affordable housing (Table 9.6).

Table 9.6   Number of homeless acceptances, London and England, 1997/98 – 2002/03

	1997/98	1998/99	1999/00	2000/01	2001/02	2002/03	2003/4
London	24,332	26,750	28,582	29,807	28,802	30,013	31,000
England	102,165	104,629	106,612	115,081	117,740	129,753	137,000

Source: ODPM, PIE homelessness returns

Office of the Deputy Prime Minister (ODPM) homelessness returns show that just over half of the 31,000 households accepted as homeless in 2003/04 were families with children and 12 per cent (3,930) were expectant mothers (Table 9.7).

Table 9.7   Number and percentage of households accepted as homeless in London, 2003/04

	Number	(%)
Households with one child	9,580	30
Households with two children	4,010	13
Households with three or more children	2,900	9
All families with children	16,480	52
Expectant mothers	3,930	12
Other households	11,120	35
All accepted households	31,530	100

Source: ODPM, PIE homelessness returns

The number of households with children living in temporary accommodation is known to be higher still (by about 70 per cent) than the number accepted as homeless. At the end of May 2004, there were almost 65,000 homeless households placed in all forms of accommodation by London boroughs under homelessness legislation, of which an estimated 45,000 were families with children.

London also has a 'hidden' group of homeless households, many of whom may contain children, who are 'self-placed' in temporary accommodation or living as part of someone else's household.[xii] In addition the ODPM homelessness data do not include many of the children in asylum-seeking households in London. Some of these are placed in temporary accommodation by the government's National Asylum Support Service (NASS), some are supported by social services[5] and others are likely to be living in overcrowded conditions with

friends or family (subsistence only).[6]

The number of asylum-seeking households in temporary accommodation supported by housing and social service departments and the NASS has been falling. However, the numbers claiming 'subsistence only' support are increasing and there are concerns about the quality of the living conditions of asylum-seeking households not placed by housing departments.[xiii]

Ethnicity and homeless households

BME groups are known to be over-represented in London's homeless population. In the final quarter of 2003, BME households accounted for 56 per cent of households accepted as homeless by local authorities (whilst making up 22 per cent of London's population).[7] Black African/Caribbean households are the most markedly over-represented, making up 30 per cent of acceptances, despite constituting just 11 per cent of London's population (see Table 9.8 below).

Table 9.8   Homelessness and ethnicity in London

	% of all households	% of households accepted as homeless
White	78	35
African/Caribbean	11	30
Indian/Pakistani/Bangladeshi	8	11
Other	4	16
Unknown	*	9
Total	100	100

Source: Data reported in Greater London Authority, Homelessness in London: Issue No 53, January 2004

*   There is no unknown category in Census ethnicity statistics

Research by Shelter (2004) has found that, nationally, twice as many black and Asian families are living in conditions judged as unfit for human conditions and they are seven times more likely to live in overcrowded conditions. During 2003/04, 30,000 ethnic minority households were homeless, accounting for 20 per cent of the families accepted as homeless by local authorities, even though they form only 7 per cent of families throughout the UK. This research indicates that possible factors include a lack of suitable accommodation for large families, the failure of service providers to consider issues of racial harassment and potential discrimination by housing workers.[xiv]

Bed and breakfast accommodation

The first SOLCR reported that many homeless families were living in unsatisfactory and overcrowded accommodation for long periods of time with associated problems of health and

well-being. The government has since committed itself to end the use of bed and breakfast (B&B) accommodation for households with children by March 2004. Progress made by London boroughs in relation to delivering this target has been very good, with the overall number of families with children in B&B falling from almost 4,000 to less than 200 between March 2002 and March 2004, and the numbers there for over six weeks falling from more than 2,500 to zero. However, many other families remain in other forms of temporary accommodation caught in a poverty trap of high rents and suffering the uncertainty of temporary housing.[xv]

The impact on children

There are strong links between child poverty, poor housing and poor health. Children who are living in poverty are more likely to be living in poor quality or sub-standard accommodation and there is a range of evidence that demonstrates the links between poor quality housing and poor health.[8]

The ODPM has recently published a review of the evidence of the impact of overcrowding on health and education. This found links between overcrowding and respiratory conditions, meningitis and childhood tuberculosis (TB). On the basis of very limited evidence, there was a strong independent relationship found between overcrowding and educational attainment.[xvi]

There is considerable evidence too that documents the adverse effects on children of living in poor and temporary accommodation. Shelter notes, for example, that children living in B&B are twice as likely to be admitted to hospital with burns and scalding, that people with asthma are twice as likely to live in damp homes and that 11 per cent of childhood accidents are a result of badly designed housing and dangerous fittings. Children in poor housing often lack space and privacy for homework, and the insecurity and stigma of living in poor housing may lead to emotional and behavioural problems and be linked to bullying in school.[xvii]

In a (national) survey by Shelter of more than 400 homeless households living in temporary accommodation, two-thirds of respondents said that their children had problems at school, with the average child missing 55 school days a year because of the disruption caused by homelessness. Most said that their health or their family's health had suffered and nearly half described their children as 'often unhappy or depressed'.[xviii]

Shelter has also carried out research with children (aged 4 – 16) who have lived in temporary accommodation. This documents the effects of being homeless on their health and well-being, on their schooling and their ability to make friends. The research concludes that a permanent home, in an area with safe places to meet with friends, is key to improving the lives of homeless children.[xix]

In London, children and their families experience high levels of mobility, together with high levels of homelessness (see Chapter 6 on Achievement). There is evidence that these high levels of both homelessness and mobility combine adversely to affect the access of homeless children and their families to education, health and social care services. This is particularly the case where increasing demand for housing has led to placements outside the home borough.[9]

Young homeless people and runaways

The population of young single homeless people in the UK has increased substantially since the 1980s. By the age of 16, one in nine young people have run away from home in the UK, amounting to around 129,000 runaway incidents, involving 77,000 under 16 year-olds.

Approximately 20,000 of these young runaways are under 11 years old. There are no reliable national figures on the number of 16 – 17 year-olds who run away.[xx]

Homelessness amongst young people is known to be particularly acute in London. However, there are many difficulties associated with documenting the numbers involved.

Centrepoint provides a place to stay, every night, for over 500 young people in its hostels, foyers and supported flats and nearly one-third (32 per cent) of these young people are 16 or 17.[xxi] In addition, thousands of young people sleep rough in London every year and many young people also stay with other members of their family, with friends or with strangers.[xxii] Young BME homeless people are less likely to sleep rough and may be less 'visible' as homeless.[xxiii] However, they are more likely to stay with friends and relatives[xxiv] and more than half (57 per cent) of the young people assisted by Centrepoint are from BME groups.[xxv]

The majority of young runaways have experienced family conflict or break-up. School problems and personal problems are also triggers for running away. Young people from poor backgrounds and young people in care are more likely to run away than other young people.[10] Young runaways are also seven times more likely than other young people to have experienced physical abuse.[xxvi] There is also a body of evidence which suggests that homeless young people are more likely to suffer from poor mental health.[xxvii]

Young runaways under 16 are particularly vulnerable, especially repeat runaways and young people running from care. Around 5000 each year survive on the streets through stealing, begging, drug dealing and prostitution and around one-quarter sleep in unsafe places, putting themselves at serious risk of harm and adult exploitation. Thirteen per cent of young runaways are physically hurt and 8 per cent sexually assaulted.[xxviii]

9.4 Young Londoners and crime

Introduction

There is a popularly held notion in the UK that young people constitute a significant threat to public safety, by virtue of their perceived tendency to criminal and anti-social behaviour. One-third of respondents to the 2003 British Crime Survey cited teenagers 'hanging around' on the streets as a big problem and 'teenagers hanging around the streets' was the third most popular reason that people gave for feeling unsafe in a 2003 GLA Survey of Londoners.[xxix]

This perception of young people as potential 'demons' or 'threats' is fuelled, to a great degree, by the way in which children 'in trouble' are portrayed in the national press. A recent report found that terms such as 'thug' 'yob' and 'lout' were commonly used to describe children and that children were portrayed as callous or disrespectful, with very little attempt made to convey the young person's own views or account.[xxx] A MORI survey for *Young People Now* magazine reports that the media consistently portrays young people negatively. One in three youth-related articles was about crime. Tabloids were particularly criticised for negative stereotyping while local newspapers were thought to be particularly 'polarised' in their views.[11, xxxi]

There is also a great deal of research concerning adults as the victims of crime, but until very recently the experiences of children and young people as victims have received little attention. It is likely that this research emphasis has contributed to the societal tendency to view young people as perpetrators, rather than victims.[xxxii]

Young people do, of course, commit crimes and youth crime is a serious issue, which needs to be addressed. However, in thinking about youth crime, it is important to remember that:

• Most young people never commit a crime.

• Adults account for a much larger proportion of crime than young people.

• Young people are more likely, than adults, to be the victims of crime.

There is no single cause or precipitating factor for youth crime, although teenage boredom and a lack of accessible and affordable activities for older young people are major catalysts for getting into trouble. Other identified risk factors include low family income, family conflict and parental involvement in crime, school disaffection and exclusion, and lack of community cohesion. Criminal behaviour is also linked to drug and alcohol abuse and to time spent homeless or in the care of the local authority.[xxxiii] Young offenders are at greater risk than non-offenders of having higher than usual rates of mental health problems.[13, xxxiv]

This section on youth crime looks at patterns and trends in offending and youth offending in London, including children as victims of crime. It also discusses children in custody and the representation of BME children within the youth justice system.

Crime in London: some key information

There are two principal data sources that are commonly used to describe the level and nature of crime. These are statistics for recorded crime (as recorded by the police) and data from the British Crime Survey (BCS), which cover both recorded and unrecorded crime.

London has the highest rate of recorded crime per head of population in the English regions. Recorded robbery, violence and vehicle crime are all above national averages. However, London has lower than average levels of burglary and criminal damage.[14] Rates of recorded crime are higher in inner London (than outer London) for violence, burglary and car crime.[xxxv]

The BCS (2002/03) shows that the prevalence of victimisation[15] is average for household crimes in London, but well above average for personal crimes. Perceived high levels of disorder and levels of worry about burglary, car crime and violent crime are significantly higher in London (than England and Wales as a whole), with the highest levels in inner London.[xxxvi]

Crime and young Londoners

There is, as yet, no equivalent to the BCS for young people, so we have to rely on recorded crime data to describe trends and patterns in youth crime.[16] These recorded crime figures are likely to underestimate the actual incidence of crime, as much youth crime and victimisation is unreported.

We have been unable to access and compare recorded youth crime figures for London and England, although analysis of regional data from the Youth Justice Board suggests that rates of offences that result in a disposal are similar in London to England and Wales.[xxxvii,17]

The Government Office for London (GOL) Youth and Crime Unit (YACU) use Metropolitan Police Service (MPS) data to produce regular bulletins about crime and young people in London, using 'youths accused'[18] as a proxy for the level of crime. We draw on data from one of these bulletins throughout this section.[xxxviii]

Trends in crime 2001 – 2004

Over the three years April 2001 – March 2004 there has been a decreasing trend in youth crime in London, with the rolling 12-month average at the end of 2003/04 approximately one-fifth lower than the rolling 12-month average at the end of 2001/02 (Figure 9.3).

Figure 9.3   Youths accused in London, April 2001 – March 2004

Source: GOL, YACU

Data for the whole of London mask considerable variations, however, between the London boroughs. Thus, whilst 15 of the London boroughs showed a decrease (of between 1 and 29 per cent) in crime during 2003/04, 17 showed an increase (of between 1 and 34 per cent) (Figure 9.4).

Figure 9.4   Percentage change in the number of youths accused, 2002/03 – 2003/04

Source: GOL, YACU

The three boroughs with the highest numbers of youths accused in 2003/04 were Westminster (1272), Newham (1150) and Croydon (1109) and the three boroughs with the lowest numbers were Kingston upon Thames (516), Richmond upon Thames (434) and Harrow (382).

These figures indicate which boroughs have the highest levels of youth crime in absolute terms. However, another indicator – youths accused per thousand of the youth population – gives an indication of the level of youth crime in relation to the number of young people living in the borough.[19]

The three boroughs with the highest level of youths-accused were Westminster (122 youths accused per 1,000 youth population), Hammersmith and Fulham (60) and Kensington and Chelsea (56) and the three boroughs with the lowest levels were Ealing (22), Brent (20) and Harrow (17). Figure 9.5 provides information for both indicators.

Figure 9.5   Number and rate of youths accused by London boroughs in 2003/04

Source: GOL, YACU

Street crime

In the first SOLCR we reported that young Londoners involvement in street crime was an area of key concern for young people themselves and for the Metropolitan Police Service.

However, while a large proportion of street crime is committed by young people,[20] this is not the most common category of crime. During 2002/03 theft and handling was the most common crime committed by young people across all the London boroughs (34 per cent of youths accused). The second most common crime was violence against the person (18 per cent), followed by drugs offences (15 per cent), robbery (10 per cent) and criminal damage (9 per cent).

YACU analysis of data for the period April 2001 – March 2004 shows that youth street crime decreased sharply in London during 2002/03 and then stabilised during 2003/04, increasing very slightly in the second half of the year. The boroughs with the highest increases in youth

street crime between 2002/03 and 2003/04 were Greenwich (with a three-fold increase), Hillingdon, Barnet and Harrow (all with more than twice as many youths accused). Camden, Hackney and Kingston-upon-Thames had the biggest reductions (with approximately 50 per cent fewer young people accused in 2003/04) (Figure 9.6).

Figure 9.6   Youths accused of street crime, London, 2002/03 and 2003/04

Source: GOL, YACU

Young people as victims of crime

YACU analysis shows that, despite considerable monthly variations, the level of youth victimisation has remained relatively static over the three-year period April 2001 – March 2004. The trend line (see below) shows a steady decrease in the level of victimisation throughout most of 2002/03, a slight upward trend in 2003/04 and a rolling 12-month average at the end of 2003/04, which is only marginally lower than at the end of 2001/02 (Figure 9.7).

Figure 9.7   Number of youth victims in London, April 2001 – March 2004

Source: GOL, YACU

The borough average for numbers of youth victims was 1996.6 in 2002/03 compared to 1813.2 in 2001/02 and the three boroughs with the greatest number of youth victims in 2002/03 were Croydon (3103), Lambeth (2630) and Newham (2518) (Figure 9.8).

Figure 9.8   Number of youth victims recorded in London boroughs: 2002/03 and 2003/04

Source: GOL, YACU

As we have suggested earlier, this is likely to underestimate the number of young people involved. A recent (national) survey of more than 1000 boys and girls aged 10 – 15 found that one in five had been a victim of crime. Amongst these, almost one-quarter said that they had been targeted by someone of their own age, and nearly half knew the identity of their assailants. Over half of the young people (51 per cent) did not report the crimes to the police and distrust of the police was one of the key factors behind this.[xxxix]

In London, the GLA Survey of Young Londoners found that one-fifth had been the victim of theft, although the numbers experiencing other violations, such as threats of violence, being attacked or burgled, were at much lower levels.[xl]

Ethnicity and crime

Young people from BME groups are known to be over-represented within the youth justice system. However, it is unclear how far these differences in representation are linked to ethnicity alone, or how far they are linked to other factors such as age, socio-economic circumstances, gender, criminal record and the nature and seriousness of the charge.

Young people from gypsy and traveller communities may often be stereotyped as criminals, although the evidence suggests that criminality is no higher than average in the gypsy and

traveller population.[xli] Research carried out in the 1990s found that travellers accounted for 38 per cent of admissions of all young people classified as white from London courts to Feltham Young Offenders Institution.[xlii] Another report notes that this 'abnormally high figure reflects the prejudice at court about the mobility of travellers and the corresponding risk that they will abscond'.[xliii]

The Youth Justice Board has recently researched the progress of 17,000 young people (aged 12 – 17) at all stages of the youth justice system, in order to examine the contribution of a range of factors to differences in outcome. The research was carried out in eight Youth Offending Teams (YOTs), seven of which were in urban areas, including three in London.

The study found that there were differences in outcome in the treatment of white, black, Asian and mixed-parentage young people at various points of the decision-making process. Whilst many of the outcome differences were accounted for by variations in the characteristics of the cases, the researchers concluded that some of differences were suggestive of discriminatory treatment. Key concerns included:

• a higher rate of prosecution and conviction of mixed-parentage young males

• a higher proportion of prosecutions involving black young males

• a greater proportion of black and Asian males who had been remanded in custody before sentence, especially a greater proportion of black males remanded whose proceedings had not resulted in a conviction

• a slightly greater use of custody for Asian males

• a greater use of the more restrictive community penalties for Asian and mixed-parentage males, especially those aged 12 – 15

• a much higher probability that a black male would, if convicted in a Crown Court, receive a sentence of 12 months or more

• a greater likelihood that black and Asian males (aged 12 – 15) would be under supervision for longer than 12 months if they received one of the more restrictive type of community sentences

• a much greater proportion of mixed-parentage females who were prosecuted

• substantial variations in outcomes between the YOT areas.

Young people in custody

A large body of evidence has developed, over many years, which demonstrates that children's rights are neglected in custody and that prison is a totally inappropriate place for children. This evidence shows that prisons commonly have a culture of security and discipline rather than care and rehabilitation, and that children who are already vulnerable may experience crime and violence in prison. The amount and type of education that children receive has also been shown to vary depending on where the child is placed and there are concerns that BME young people are highly represented in prison.[xliv]

In 2002, under a landmark ruling, the High Court held that the Children Act (1989) must apply to children held in custody. Local authorities now have a statutory duty, therefore, to safeguard the welfare of children when they are in prison. However, very serious concerns still remain about the conditions and treatment of young people in custody. These include the

use of segregation as a punishment, the use of control and constraint, and the continued use of prison for girls, despite a commitment by the government to remove all girls under 18 from prison by April 2000.[xlv]

We look below at what the current evidence tells us about the age, gender and ethnicity of young people in custody nationally, before considering the position of London's children.

Young people in prison in England and Wales

The number of young people (aged between 15 – 20) in prison has shown an overall increasing trend since 1996.

Table 9.9 provides information about the prison population in 2003. This shows that of 69,638 prisoners in custody, 85 per cent (63,136) were adults and 15 per cent (10,919) were young prisoners (aged 15 – 20). Among the young prisoners 8,665 (12 per cent) were aged 18 – 20 and 2,254 (3 per cent) were aged 15 – 17.

Table 9.9 Population in custody on 30th November 2003

	Male	Female	Total	% of total
Total	69,638	4,417	74,055	100
Young prisoners	10,395	524	10,919	15
Aged 15 – 17	2,189	65	2,254	3
Remand	470	15	485	
Sentenced	1,719	50	1,769	
Non-criminal	0	0	0	
Aged 18 – 20	8,206	459	8,665	12
Remand	1.872	125	1,997	
Sentenced	6,231	334	6,565	
Non-criminal	103	0	103	
Adults	59,243	3,893	63,136	85
Remand	9,719	833	10,552	
Sentenced	48,512	3,026	51,538	
Non criminal	1,012	34	1,046	
All remand	12,061	973	10,552	
All sentenced	56,462	3,410	51,538	
All non criminal	1,115	34	1,149	

Source: Home Office, Prison Population Brief, England and Wales, November 2003

Ethnicity and the prison population

Black males and females are markedly over-represented within the prison population. Among British nationals in the prison population 12 per cent of the male and 13 per cent of the female prison population were black (in February 2003) compared with a figure for the general population of just 1 per cent.[20] (Table 9.10) However, this national data is not broken down by age.

Table 9.10 Ethnicity amongst the prison and general population (British nationals) 28th February 2003

(%)	White (%)	Black (%)	South Asian (%)	Chinese and other (%)	Total (%)
Males in prison	83	12	3	2	100
Females in prison	83	13	1	3	100
The general population (British nationals aged 15 – 64)	95	1	3	1	100

Source: Home Office, Prison Population Brief, England and Wales, November 2003

London's children and the use of custody

Youth Justice Board data show that, in 2002/03, a slightly greater proportion of disposals in London were custody disposals (6 per cent) than nationally (4.2 per cent).[xlvi]

Table 9.11 provides information about the proportions of young people, by ethnic group, remanded in custody in London, and given a Detention and Training Order (DTO).[20] The table also includes information, from the 2001 Census, about the proportions of young people by ethnic group in the general London population aged 10 – 17.

By comparing the proportions of young people in the two groups, we can see that black young people are clearly over-represented both among those remanded in custody and those given a DTO. In contrast to this, young people from white, Asian and mixed groups are under-represented.

Table 9.11 Young people remanded in custody, by ethnicity, London, 2002

	White	Mixed	Asian	Black	Other	Unknown
Young people remanded in custody (%)	36.4	4.5	7.4	42	5.5	4.3
Young people given a Detention and Training Order (%)	41.1	5.9	6.2	41.7	3.3	1.7
% of young people (aged 10 – 17) in London	59.3	7.1	15.8	15.8	2.6	–

However, Table 9.12 shows that the extent of over-representation of black young people is less in London than in England and Wales. Table 9.12 also suggests that young people from mixed ethnic groups are marginally over-represented among those given these disposals in England and Wales.

Table 9.12 Young people given a Detention and Training Order, by ethnicity, England and Wales, 2002

	White	Mixed	Asian	Black	Other	Unknown
Young people remanded in custody (%)	75.1	3.3	3.4	14.3	1.7	2.2
Young people given a Detention and Training Order (%)	78.7	3.3	3.9	11.3	0.9	1.9
% of young people (aged 10-17) England and Wales	87	3	6.3	2.8	0.8	–

Source: Home Office, Statistics on Race and the Criminal Justice System, 2003 and 2001 Census data

Children of prisoners, and babies in prison

Children whose mothers are in prison are particularly vulnerable as they lose their principal and often their only carer. A study carried out in the late 1990s showed that 61 per cent of women prisoners were mothers of children (under 18) and nearly one-third of these children were under five.[xlvii]

The number of women in prison has been rising steadily since 1993. By March 26th 2004, there were 4589 women in prison representing about 6 per cent of the total prison population in England and Wales.[xlviii]

In 2001 there were four mother and baby units in prisons in England providing a total of 66 places for babies up to the age of 18 months. This number was well below that which would be required for all babies of prisoners.[xlix] Her Majesty's Prison Service reports that there are now five mother and baby units (one of which is in Holloway Prison in London).[l]

Young people's views and experiences within the youth justice system

There has been very little research documenting the views and experiences of young people in the youth justice system. However, those (national) studies that have taken place have demonstrated that young offenders often lack an understanding of the system and what is happening to them.[li]

A 2002 study of the experiences of 37 young offenders found that young people were often

bored, frustrated and anxious in police cells, that police interviews could be 'verbally and physically intimidating', and that feelings of intimidation and isolation were heightened by court experiences. Whilst some of those who were sentenced to custody said that there were some positive aspects of their relationships within custody, they spoke of disorientation and difficulties in settling after their release.[lii]

The researchers in this study note that young people started out feeling in control of their actions, but that their accounts became striking in their 'lack of agency'. They observe, in their conclusion, that 'giving in, submitting, becoming marginalised and losing power' are central themes in young people's accounts. These themes, they note, are 'quite contrary to the assumption of responsibility that the system hopes to achieve'.

More recently the Youth Justice Board has published 'Speaking Out' which highlights key concerns, from a survey of young offenders, about their mental health. Nearly half of the young offenders in the survey said that they often felt miserable or sad; nearly one-quarter (24 per cent) reported problems with eating or sleeping and nearly one-third (32 per cent) said that they worried about or had a problem with their health and would like some help.[liii]

The government's long-term aim is, by 2010, to bring all social housing into a decent condition, with most of this improvement taking place in deprived areas, and for vulnerable households in the private sector, including families with children, to increase the proportion who live in homes that are in decent condition.

The 2002 *Homelessness Act* constitutes a key element in the government's strategy to tackle homelessness, by giving more protection to those with a priority need for housing, including families. It also builds on previous legislation by extending the categories of priority need to include 16 and 17 year-olds and care leavers aged 18 – 21.

Responsibility for support for young runaways is now co-ordinated nationally by the Department of Health and 25 runaways development projects have been established to test out innovative approaches to working with young runaways. This reflects the need for better joint working, clearer lines of responsibility and a greater emphasis on prevention in the Social Exclusion Unit report (*Consultation on Young Runaways*, 2004).

Youth Justice: the Next Steps was published alongside the Green Paper, *Every Child Matters* (Home Office, 2003). This sets out the government's continued commitment to preventing offending and to reducing the use of custody. It includes measures to widen the use of parenting programmes, to develop simpler and more flexible sentencing and introduces new Intensive Supervision and Surveillance Orders as an alternative to custody for the most serious and persistent young offenders.

The GLA, in partnership with East Thames Housing Group and three east London boroughs, is currently undertaking a project to increase the employability of homeless families in temporary accommodation.

The GLA, with the ALG, has developed NOTIFY – a pan-London on-line notification system which aims to ensure that children and adults receive appropriate services by using information provided by London boroughs to inform housing, social services, education departments and primary care trusts about homeless households placed in, moving between, or leaving temporary accommodation.

The GLA co-ordinates a London-wide system of standards and inspection of bed and breakfast accommodation.

The Youth Justice Board was established in 1998 to lead and support the implementation of the youth justice system and youth justice reforms across England and Wales. Specific, targeted work at regional level is co-ordinated by the Government Office for London's Youth and Crime Unit, which was set up in 2001 to facilitate joint working on youth crime reduction work across London focused on 15 boroughs.

A *London Anti-Social Behaviour Strategy* for 2005/06 to 2006/07 is being produced by 11 pan-London agencies with shared responsibilities for tackling anti-social behaviour (ASB) at a regional level. The strategy states the requirement to operate within the UN Convention on Rights of the Child and will identify that ASB is committed by people of all ages, with children and young people being frequently victims rather than perpetrators.

The Mayor of London published *Young People/Big Issues* in June 2003, which set out young Londoners' views on crime and community safety in the capital. It provides a useful tool for agencies working with black, minority ethnic and refugee young people across London to actively involve young people in making changes. It also elicited their views on crime and community safety to be heard by those with the power to influence policy and practice.

Notes

1   According to the statutory definition of overcrowding, a household is not overcrowded if there is room to sleep in the kitchen or living room. The more modern definition, known as the 'bedroom standard', defines a household as overcrowded if it does not have enough bedrooms for its members, bearing in mind their ages, gender and relationship to each other.

2   Rates are based on the numbers of children in households with a Census occupancy rating of –1. This indicates that there is one room too few and that there is overcrowding.

3   The proportion of overcrowded households in England as a whole has also increased over the same period but the increase is smaller (from 2 per cent to 2.4 per cent).

4   See note 1, Chapter 1, for a description of the survey.

5   In mid-June 2004 there were 4,677 asylum seeking households, containing 8,962 children, accommodated by social services departments. There were also 3,853 unaccompanied asylum-seeking children, of which 2,937 were 16/17 years old and the remainder were under 16.

6   Where asylum-seeking households have chosen to remain in London and not be dispersed elsewhere, they lose their right to be provided with accommodation by NASS and have to make their own housing arrangements. They are also not entitled to benefits.

7   The proportion of households accepted as homeless by the London boroughs during the year 2003/04 that were from BME groups was marginally higher still (58 per cent) (personal communication: GLA Housing and Homelessness Unit).

8   See Hood, S op. cit for summary.

9   Shelter's 2004 survey of more than 400 homeless households (Living in Limbo) found that only one-fifth of families with children under four years were accessing Sure Start services. This was a national study, but the findings are relevant to London too.

10   Forty-five per cent of young people living in care have run away compared with 9.5 per cent of young people not living in care.

11   On 12 October 2004, this survey for Young People Now also launched a 'draft media code' for newspapers and broadcasters.

12   2002/03 recorded crime data.

13   The survey records proportion of the population who have been victimised at least once.

14   Young people (aged 12 – 15) took part in the British Crime Survey 1995 but they have not taken part since then.

15   The London rate, in 2002/03, was 2.3 per 10 young people aged 10 – 17, compared with a national rate of 2.2 (analysis based on Census population figures).

16   'Youth accused' refers to the number of young people aged 10 – 17 arrested and proceeded against. The YACU notes that 'youths accused' is more commonly accepted by the Metropolitan Police Service and by crime analysts as a better measure of youth crime than either recorded offence data (which rely primarily on victim and/or witness accounts for the age of the perpetrator) or youths charged data (which excludes offenders who were arrested and proceeded against but were not then charged).

17   It is important to note, when using this indicator, that these figures may also reflect 'imported' crime from other boroughs. Where this is the case, the rate of youth crime may be exaggerated, particularly where the borough's youth population is relatively

small.

18   In 2001/02 youths accounted for just under two-thirds of the total accused of street crime offences. In 2002/03 they accounted for exactly a half (GOL YACU – Bulletin 3, March 2003).

19   The Home Office compares data on British nationals within the prison and the general population. However, foreign nationals also make up a considerable proportion of the ethnic minority prison population.

20   From April 2000, the Detention and Training Order became the main method of detaining a young person to custody. Under the terms of a DTO a young person can be sentenced to a young offender institution (YOI), a secure training centre (STC) or a local authority secure children's home (LASCH).

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10 A positive contribution

10.1 Introduction

Children and young people have a right, under Article 12 of the UN Convention on the Rights of the Child, to say what they think about matters that affect them, and their views should be given due weight in accordance their age and maturity[i] This right can be broadly interpreted in two areas:

- decisions that affect them individually (for example which parent they want to live with if their parents separate or in other matters concerning their care or treatment)

- decisions that affect them collectively as children and the opportunity to participate in public decision-making processes.

This final themed chapter explores how far and in what ways children's rights to participation are being implemented and realised in and across London. It will look both at children and young people's role in public decision-making and at the individual child's voice in decisions that are made about them, including through advocacy services.

This is a broad and challenging task and we do not, and cannot, claim to present a definitive picture. However, the chapter sets out an initial framework for monitoring the level and nature of participation work in London, which can be built on and developed in future State of London's Children Reports.[1]

We draw on the findings from two Greater London Authority (GLA) projects: a mapping of children's participation projects across London (carried out in the summer of 2004)[2] and the Young Londoners Survey (2004).[ii, 3] The findings from these projects are discussed in the context of recent national studies, commissioned by the Department for Education and Skills (DfES), on participation activity[iii] and infrastructure.[iv] The chapter begins with a brief discussion of models of participation and the value of participation.

10.2 Children's participation: models and values

Models of participation

The broad concept of participation is open to different interpretations with very different practical implications. These interpretations have commonly been summarised in terms of levels or 'ladders' of participation; for example, in Hart's ladder,[v] which sets out eight different levels ranging from manipulation to child-initiated decision-making (Figure 10.1). More recently, alternative non-chronological and non-hierarchical models have also been proposed (Figure 10.2).

Figure 10.1 Hart's ladder of participation

1   Child-initiated, shared decisions with adults

2   Child-initiated and directed

3   Adult-initiated, shared decisions with children

4   Consulted and informed

5   Assigned but informed

6   Tokenism

7   Decoration

8   Manipulation

Figure 10.2 A non-hierarchical model of participation (Kirby et al., 2004)[vi]

Children/young people's views are taken into account by adults

Children/young people make autonomous decisions
Children/young people are involved in decision-making (with adults)
Children/young people share power and responsibility for decision-making with adults

The value of children's participation

The value of children's participation has been documented, as follows:

Where children and young people are actively involved in the processes of decision-making they are more likely to feel motivated, engaged and valued; and where they are not this can lead to apathy, disillusion, disengagement, exclusion and isolation.

The experience of participation teaches social and civic skills, such as listening, negotiating, recognising and valuing diversity, and accepting difference. These kinds of skills are essential to effective participation in civic life and in young people's development as responsible citizens contributing to their families and schools and enriching their local communities.

Children and young people's participation is also thought to play vital role in the improvement of services. Children, like adults, are consumers of a range of services and facilities, and their participation can lead to improvements in service outcomes and to more responsive, accessible and inclusive services.[vii]

10.3 Children and young people's participation in public decision- making

Voluntary sector organisations have been working to promote and develop children's participation over many years and the major children's non-governmental organisations (NGOs) have played a key role in promoting children's voice and participation rights. However, the requirement to promote children's participation in the statutory sector is relatively new.

In 2001, in *Learning to Listen*, the government set out its commitment to children and young people's participation in the 'design, provision and evaluation of services that affect them or which they use'[viii] and laid down a requirement that all government departments produce action plans for the promotion of children's participation within their departments.

Since then, there has been a strong public policy shift towards children's participation, both in London and nationally. Children and young people's involvement in service development and planning is emphasised in a range of government legislation and initiatives including: the

Health and Social Care Act 2001, the Education Act 2002, Early Years Child Development Partnerships, Children's Fund Partnerships, the Connexions Services and social care programmes such as Quality Protects and Choice Protects.

However, at this stage, there is very little research which examines the impact of participation activity on the quality of public decision making processes, the level of change or improvement in services for children and young people, or the level of children and young people's participation in civic society generally.

Although both national and London studies demonstrate an increase in the level of participation activities, they also suggest that participation in public decision-making is often dominated by formal group activities or one-off consultations, usually limited to pre-organised times and to just a sample of young people. There are still significant questions about widening participation activities so that more young people have the opportunity to get involved.

Participation activity in London

The most recent evidence of what Young Londoners feel about their ability to influence decisions in the public and the private sphere comes from the GLA Young Londoners Survey of 1000 11 – 16 year olds. The survey asked young Londoners' views about their capacity to influence decisions with their friends, their family, their school and their local neighbourhoods.[ix]

Young Londoners were most likely to say that they could influence decision-making with their friends and their family. (Almost half – 46 per cent – said that they could have 'a lot' of influence with their friends, and one-third – 33 per cent – said that they could have 'a lot' of influence with their families.)

However, young people were much less likely to think that they could have any influence in the public sphere. Only 7 per cent thought they could have any influence in their local neighbourhoods and 61 per cent said they had no influence at all.[4]

Young people were also asked, in the GLA Young Londoners Survey, if they had ever:
• been involved in campaigning

• had some form of active involvement (such as taking part in a school council, planning an event, been part of an advisory group)

• taken part in a consultation

• taken part in voluntary work, fundraising or sponsored activities

• helped with decision-making in other kinds of projects (such as music, drama projects).

Half of the young people said that they had taken part in at least one of these kinds of activities. A propensity to get involved was higher among those in higher earning households and lower among black young people than among other groups. Young people were also much more likely to have been involved in decisions on music, arts, drama projects, or to have done voluntary work, than to have engaged in campaigning activity or had some more active form of involvement.

The overall rate of involvement of young Londoners (at 50 per cent) is by no means low. It may also be the case that many of these young people may be increasingly engaged with

socio-political activities as they become older. The most frequently cited reasons for not getting involved were lack of interest or the fact that no one had asked them to.

Recent, national MORI research with older young people (16+) suggests that young people's involvement with voluntary and party political activities in the public sphere has held up and even increased over recent decades and that it is only in the field of party politics that participation has reduced.[x]

Opportunities for children and young people to influence public decision-making in London are variable, as nationally. National research found that despite large increases in organisational activity to involve young people in decision-making, structures and practices were more developed in the voluntary than the statutory sector. There was also a confusing complexity of mechanisms and overlapping structures for participation at the local authority level.

Early findings from the recent GLA mapping exercise suggest that participation activity in London mirrors that nationally in terms of the sectors that are active. Both the DfES national study and the GLA mapping exercise found that participation activities were taking place across many service areas (including generic and other youth initiatives, sports and leisure, community regeneration, health, education, social care, youth offending and crime, policy, play, arts and culture, child rights, the courts, youth parliaments and youth forums). The DfES found that service areas with the greatest number of projects were youth work and regeneration, whilst those relating to youth justice and the courts were least well represented.

Youth services

In London approximately half of the London boroughs had youth services that were supporting young people to engage in the UK Youth Parliament; more were facilitating a youth council or youth forum. Interesting examples include the young people of Lewisham, who have recently elected their first Youth Mayor, who is in control of a £25,000 budget.

The Connexions service has also taken a strategic approach to involving young people in service delivery, and all the Connexions partnerships in London have a participation or involvement co-ordinator. East London Connexions involve young people heavily in recruitment of staff, the youth board has equal status to the adult partnership board and there are a number of sub-groups looking at specific issues such as marketing. Most Connexions partnerships include information on their websites about getting more actively involved.

Voluntary youth organisations have a longer tradition of facilitating youth participation and frequently consult and more actively involve children and young people in decision-making. A number of projects have youth forums, some of which have direct representation on the board of trustees or a formal relationship with the trustees.

There are also some local projects that are part of national charities[5] supporting children and young people to get involved in their national decision-making structures.

Other examples of participation included:
• children and young people providing training for staff

• planning conferences/events

• young people writing policies

• planning session programmes

- use of creative arts to involve children and young people

- youth led projects

- writing newsletters/developing websites.

A small number of youth-led voluntary organisations exist in London. Most work with the older age range[6] of young people and the age definition of a young person is often extended to 25. For example, the Muslim Youth Helpline's Board of Trustees are all aged under 25 and the helpline is mainly staffed by young volunteers. Other projects like CityZen, Tolerance in Diversity, Fitzrovia Youth in Action and Boyhood to Manhood are all good examples of organisations where young people are heavily involved in leading project development and management.

Regeneration initiatives

The GLA audit highlighted a number of examples of regeneration initiatives involving children and young people in local community development. Some were initiated by charities such as Groundwork. Other examples include two New Deal for Communities projects (South Kilburn and New Cross Gate) both promoting the active involvement of children and young people in decision-making processes. There was also an example of a private company being commissioned to do a participatory consultation with young people about the Kings Cross development.

Children and Neighbourhoods in London is continuing to develop models of good practice for the involvement of children and young people in regeneration and urban renewal.[7] There are a number of projects to develop more child-friendly green spaces in the capital, and Landscape for Learning has worked with children and young people (and school staff) to improve the playgrounds and external settings of several London schools. Many examples of good practice in London are described in a recent report published by Groundwork, 'No Particular Place to go?[xi, xii]

Participation of younger children

Participation of younger children in public decision-making processes has a shorter history and the national study showed that the although participation activities were open to a range of age groups, young people aged 12 – 16 years were most commonly involved.

The Children's Fund in London appears to have had a significant impact on the number of participation activities focused on the younger age range (5 – 13). A large number of the Children's Fund projects responded to the GLA mapping exercise and demonstrated a wide variety of participation activities.

Common examples were:
- paper questionnaires and consultation activities (using arts and other media)

- advisory groups and forums

- children planning and facilitating conferences and meetings

- web based consultation

- website and information/newsletter design and development

- children conducting service appraisals
- video projects
- peer listening schemes.

There is much more limited participation activity among London's youngest citizens. Often Sure Start partnerships and Early Years services focus on the participation of parents and there was some uncertainty among projects, about what participation of young children means and how to put it into practice. Coram Family Care has recently been commissioned to provide training for local authority Early Years trainers in listening to young children. The intention is that this will in time filter through to local workers.

However there was evidence of services listening to very young children – some groups referred to the use of observational techniques to identify children's preferences. One Early Years Child Development and Childcare Partnership (EYCDP)[8] also referred to using simple questionnaires through schools and after school clubs. One particular project involved under-4s in the design of a garden for a new children's centre. A local artist was brought in to help with this. Another used puppets to explore how children felt about different issues.

Health

There seems to be great disparity in the amount and level to which children and young people are involved in informing health services. There are some very good specialist examples – in particular Great Ormond Street Hospital where children were involved in a number of forums and activities that give them a say. Targeted initiatives such as teenage pregnancy teams were also working well, with young people leading peer education and communications work with other young people.

A number of Primary Care Trusts also referred to targeted consultations with children and young people. They did not lead these, but co-ordinated other locally organised youth forums to feed in the issues that the young people from those groups raised about the issues of health. However it appears that a large number of health services are still at the stage of providing basic information that is accessible to children and young people.

Social services

Social services projects were engaged in a great deal of participation activity, including consultation and more active involvement. This is a reflection, perhaps, of a long-term and more established advocacy and right-based focus on participation within social services (see Section 10.4 on Advocacy and London's children below).

However, it was apparent that a number of social services departments were looking beyond the involvement of children in decisions that affect them individually and had developed forums and other approaches whereby children could influence the work of the department as a whole. Examples included peer mentoring and peer interviewing, forums, developing guidance for staff and a recruitment forum.

Education

The findings from a recent National Foundation for Educational Research (NEFR) survey suggest that the vast majority of secondary schools have school councils.[xiii, 9] However, we have not been able to find any evidence relating to the number of school councils in primary schools.

While children are being taught the values of citizenship in schools, research has also identified that children and young people express particular concerns about their lack of involvement as active participants in school decision-making processes.[xiv] In the GLA Young Londoners Survey, only 12 per cent of young people said they had a 'lot of' influence at school and 43 per cent said they have no influence at all. The opportunity to have more say in decisions in school was named by just over one-quarter (27 per cent) of the young people as the primary thing that would improve school and 30 per cent said that they wanted more choice in what they learnt. The GLA Survey also found that children from the lowest income groups were more likely to feel that they had no influence at school. This finding has particular significance given the higher levels of child poverty in London.

10.4 Advocacy and London's children

The need for advocacy provision

'Children have little control over many areas of their lives, have a high level of contact with statutory services and are vulnerable to exploitation and abuse.'[xv] Advocacy services are key mechanisms through which children and young people can enforce their rights. Such services need to be widely known about and accessible to children and young people across many settings. However, this is not generally recognised and many children have no ready access to advocacy support when they believe their rights are being infringed.

Individual children need advocacy support particularly when negotiating with the care system, child protection services, youth justice systems, immigration systems, services for disabled children, education services, health services and mental health services.

The national context: the Adoption and Children Act 2002

Over the last 15 years, the development of advocacy services has occurred primarily in relation to social services, reflecting the strong principle in the Children Act 1989 that children should be listened to, and their views taken account of, in decision-making processes. In 1998, as a result of a series of reports that outlined the poor outcomes for children in care[xvi] as well as several investigations into widespread abuse in residential establishments, access to individual advocacy was made one of the key objectives of the Quality Protects (QP) initiative. Funding was made available to local authorities to develop these services over the 5 years of this programme, 1999 – 2004. Between March 1999 and March 2004, there was a considerable growth in advocacy provision.

An amendment to the Children Act was made in the Adoption and Children Act 2002, giving children in care or 'in need' the legal right to have access to an advocate if they are making or considering making a complaint. Since this legislation, local authorities have been required (from April 2004) to provide advocacy consistent with the 'National Standards for the Provision of Children's Advocacy Services' and the Guidance, 'Get It Sorted'.[xvii] These requirements include:

- 'Making arrangements for the provision of advocacy services' (1.1) where 'Advocacy services provide independent and confidential information, advice, representation and support' (2.4)

- 'The child should understand that they have the right to choose an advocate whom they feel comfortable with...' (2.14)

- 'Giving information to children about the advocacy service' (2.21).

The legislation frames advocacy provision in relation to complaints or potential complaints but the guidance emphasises the importance of 'encouraging children to speak out' (2.1) and that 'children's interests can be promoted more effectively by having a personal champion in the form of an advocate who can help children and young people ensure their views and wishes are heard at all times' (2.3). Most advocacy services have in fact been developed to offer support to children within the normal decision-making processes as well as through the complaints procedure.

For all other children, not covered by the Children Act, the legislative framework for providing advocacy is complex. It ranges from complaints arising out of NHS provision, which entitles the complainant, adult or child, to an advocate (ICAS services), to many areas where there is no entitlement at all (and often no entitlement even to be involved in the decision-making process itself such as school admissions and exclusions).

Legislative implementation in London

Information on advocacy provision in London was acquired through administering a telephone survey of the advocacy services linked to each London local authority. Figures relate to the 2004/05 financial year.

Between March 1999 and March 2004, three common models emerged in London:

- the local authority contracting with a national voluntary organisation (in one instance a local voluntary organisation) to provide a children's rights service locally, which includes participation activities and advocacy to individual children (number: 10).

- the local authority employing internal children's rights officer(s) to provide participation activities and advocacy for individual children (number: 7). Four are sole workers who were appointed towards the end of the QP funding.

- the local authority employing an internal participation officer and setting up contractual arrangements for individual advocacy from an external provider (number: 9).

Some other arrangements were developed during the QP initiative, including one authority that set up a project within the youth service and recruited a small pool of volunteer advocates.

Approaching and following April 1st 2004 (the date for implementation of the legislation and the end of QP funding), there were an unusual number of changes in arrangements. Three well-established children's rights projects run by national children's charities were closed down with no permanent follow-up service in place.[10] On April 1st 2004, three other authorities still did not have any advocacy provision in place for their children, other than ad hoc arrangements. Two expect to continue for a while using a pool of their own sessional workers on an ad hoc basis.

How independent are advocacy services?

In a 2004 lecture, Mr Justice Munby said 'Children's advocates ... need to be people who are in fact, and can be seen to be, independent of the local authority, but equally people who can

win the trust and confidence of both 'sides''.[xviii]

There are different levels of independence and some of these differences are subtle. Total independence would be an outside organisation, financially independent of the local authority. However, for most advocacy projects in London, almost all the funding for advocacy comes through the child's local authority. The most common arrangement set up by the local authority is a contract with an outside organisation (number: 23); ten authorities are contracted with a service located outside the local authority and not involved in other service provision for that authority; and twelve authorities are contracted with mainly voluntary sector (one is a private company) organisations, located within the local authority, and some also providing other children's services. Two authorities plan to use sessional workers to take on pieces of advocacy and eight services are run by local authority employees. The Regulations now require the advocate, if employed by the local authority, to be outside the direct line management of the commissioning of children's services and in all those eight authorities the service complies with these Regulations.

Who has access to advocacy services?

Almost all of these services are contractually available to -after children and care leavers. There is one project whose contract does not include care leavers over-18 years. All the contracts with the national provider include children 'in need' but for about half the authorities, the availability of advocacy for children in need is still under negotiation. Owing to the particular vulnerability of looked-after children in residential establishments – and the recommendation in *People Like Us*[xix] that a visiting advocate can be an important additional safeguard for children – at least ten London homes have a regular visitor who can act as an independent advocate for the children in the home, including the one remaining secure unit in London, Orchard Lodge.[11]

Most advocacy services provide, in theory, a service for children with disabilities if they are looked after or in respite for the requisite amount of time to be considered as looked-after. In practice the time needed precludes access for this group of children. Three authorities have ensured that there is a specialist worker for this group of children and a further four authorities still have a one year contract with a voluntary sector project to provide advocacy for looked-after disabled children placed out of their authority. This project, set up with QP funding, has been reduced in size because some authorities have discontinued their involvement rather than identify funding from their mainstream budget.

Unaccompanied asylum-seeking refugees have very particular needs, which are not easily met within generic services. The Refugee Council provides children's advocates who focus almost exclusively on their immigration status. There is one advocacy project with a specialist post for this work and Voice for the Child in Care (VCC) now has funding to develop a project and promote advocacy for unaccompanied minors.

Outcomes of advocacy work for children

A broader context for measurement of some of the effects of regional advocacy services will be provided by a current research study.[12] This study aims to provide a better understanding of the variety of advocacy services in operation and to inform the development of policy and practice. There is also already considerable interest in identifying progress in the implementation of the 2002 legislation. The Local Government Ombudsman is conducting a national mapping exercise and the Commission for Social Care Inspection (CSCI) have included, for the 2004/05 annual Delivery Improvement Statement, a question to local

authorities on their priorities for the implementation of the new Regulations and Guidance.[xx]

Advocacy for children can be extremely effective, both for the individual child and sometimes in obtaining policy changes. Early research of VCC's service showed that, from the perspective of both the child and the advocate, in 93 per cent of the cases the advocacy achieved improvements for the child (sample of 65).[xxi]

A common issue that children raise is of an unwanted move from their placement. When these decisions are revoked as a result of advocacy intervention it can bring long-term security to their lives and allow meaningful attachments to their carers to be maintained into adulthood. Care leavers often use advocacy to support them in getting more help, for example financial help with fares or books for college. There are times when children find an advocate to speak to - or a family member – about abuse, which they had not dared discuss with their social worker, key worker or foster carer; hence advocacy is an additional method for helping children keep safe. As well as being a catalyst for significant changes in the child's lives, the process of advocacy itself empowers the child, relating to other aspects of educational attainment, employment opportunities, cultural enjoyment and involvement in participation and democratic engagement.

In terms of the issue of independence, further research or monitoring is needed over the coming years to identify whether the usual contractual arrangements, which range from one year to three years of services, allow for sufficient independence. Many of these arrangements limit the choice of advocate that children have and it is unclear how much choice they are being offered.

Finally, examination of the use of advocacy services demonstrates that it is unlikely the cases are being defined in the same way, especially given the low staffing levels in the two authorities that have a seemingly very high number of cases. However, overall, it does seem that where the advocacy service is offered locally, either by a voluntary organisation or by employed staff, more children have had access to the service. The dissemination of information about advocacy services is hugely variable and this is reflected in the wide difference in use of the services. It seems that where there is participation work taking place within the authority, there is more awareness and take up of the service. There are still a few authorities where very few children have access to advocacy.

10.5 Future challenges for the development of children's participation in London

London has a complex governance structure and a large and diverse child population. This presents specific challenges to developing effective participation regionally. However there has been a lack of a regional approach, to date, to participation in London:

- The only regional structure – the UK Youth Parliament Regional meeting – involves about half the London boroughs and about 40 young people aged between 12 and18 years.

- There are no pan-London structures for the younger age range.

- Whilst other regions have developed networks of participation workers to exchange practice, raise awareness and co-ordinate, such networks are undeveloped in London. (The Children's Fund is the only Londonwide organisation in the capital that holds regular meetings of its participation workers across boroughs.)

- The newly established post of Children and Young People's Participation Officer in the GLA Children and Young People's Unit (CYPU) is the only such post in a pan-London,

government or statutory agency.

Information in the Young Londoners Survey shows that although the policy drivers for, and the increases in, children's participation nationally are reflected in London, some of the challenges in London are unique. It is not yet clear whether the approaches to participation and regional co-ordination are developing to accommodate the needs and circumstances of London's children and young people.

In particular, national research suggests that although there is now a greater effort in London and elsewhere to encourage children and young people's participation opportunities, these are still limited to a small number of children and young people, quality of practice is variable and often it is a small number of children who repeatedly get the chance to take up the opportunities (who are often those who are well supported, confident and articulate, and may not be representative of more excluded or vulnerable groups).

Particular challenges for London include:
• given the higher level of child poverty, ensuring that children from lower income backgrounds are supported to engage in participation activities (the Young Londoners Survey suggests that they do not feel involved, or get as involved);

• ensuring that the diversity of children's experiences is reflected when involving children at a strategic level in London (again drawing on national research and the Young Londoners Survey, which suggest that differences in participation are dependent on socio-economic, ethnic and other backgrounds);

• widening participation in London (especially because of the large population size compared to other regions);

• strategic co-ordination of participation when there is a complex Londonwide governance structure and varying practice borough to borough.

The government set out its commitment to children and young people's participation in the 'design, provision and evaluation of services that affect them or which they use' (Children and Young People's Unit, 'Learning to Listen', 2001) and laid down a requirement that all government departments produce action plans for the promotion of children's participation within their departments.

The new Children and Young People's Unit (CYPU) in the GLA has a remit to co-ordinate the implementation of the Mayor's Children and Young People's Strategy, including to ensure that all young Londoners are provided with equal opportunities to exercise their rights of participation.

Specific mayoral policies and action points include promoting the participation of young Londoners in strategic decision-making across all areas of their lives; supporting the development of advice, support and advocacy services, and complaints procedures for young Londoners; and promoting appropriate mechanisms and structures to enable children and young people to have a proper voice in the democratic process.

Led by the GLA's CYPU, together with Government Office for London (GOL), the scope to share infrastructure and develop joint initiatives for pan-London children and young people's participation activities is being explored during 2004.

Within the GLA, current and recent initiatives include the Mayor's Question Time for 16 – 18 year-olds, the development of a School's Information Pack on the GLA by the Mayor and London Assembly, an International Children's Day event for young people on 20 November 2004, research and a report through Assembly scrutiny of young people's opinions on 'envirocrime' (environmental crime), the role of the Metropolitan Police Service's youth advisory group, and various consultations with children and young people by Transport for London.

Notes

1   Whilst the first State of London's Children Report discussed children's participation in public policy and drew extensively on children and young people's views, it did not include a separate chapter on participation. The inclusion of this chapter in this report reflects the considerable developments, since 2001, in this fast-moving area.

2   A questionnaire was circulated to over 700 organisations across London. Responses came from a variety of sectors including health, regeneration, children and youth services and the voluntary and community sector. In total 125 organisations responded (a number of which were local authorities describing a range of their activities). The full questionnaire is attached as an Appendix.

3   See note 1, Chapter 1, for a description of the survey.

4   These findings can be linked to the results of the Office of Children's Rights Commissioner for London's Sort it Out! research with more than 3000 young Londoners in which children reported experiencing more respect in their relationships with friends and family than in their contacts at school and in public places.

5   For example, ChildLine and the Children's Society.

6   Apart from some Children's Fund Projects and a few organisations, such as Children's Express, there do not appear to be many projects that support younger children to plan and manage their own projects.

7   The Children and Neighbourhoods in London project was established in 1996 by the Children's Society.

8   This EYCDP was working in childcare with a wider age range of children.

9   Ninety-seven percent of school head teachers said that their schools had a school council.

10   All three now have temporary contracts with a national provider just for advocacy.

11   The issue of secure unit provision outside London is being addressed by GOL and other partners.

12   Thomas Coram Research Unit, Institute of Education: 'Advocacy for looked after children and children in need; a survey' (to be published shortly).

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11 Conclusion

11.1 Introduction

This report has aimed to:
•   describe the position and circumstances of London's children in 2004

•   identify and comment on changes in London children's well-being, by updating data from the first State of London's Children Report (SOLCR).

This final chapter draws together the findings about the state of London's children in 2004 and attempts to address the question: Is the state of London's children improving or deteriorating?

This is a complex question to answer for a variety of reasons. Clearly, improvements in one area of London's children's lives may be offset by some deterioration in another and a judgement is required about the relative value that is attached to these differing trends.

Some aspects of children's lives (such as educational achievement, road traffic accidents and some aspects of health) are more readily accessible to monitoring and measurement than others (such as access to play and public space, level of engagement in public decision-making). This disparity affects our capacity to comment on both the current picture and on change.

For some of the themes we have covered there is a wealth of routinely collected national and regional data, which allow for comparisons between London and the national picture, as well as over time. For other themes, this kind of comparative data is lacking.

In considering trends in well-being, it is important to remember too that while the evidence might suggest an improving trend overall, income-related or ethnic inequalities between children may be persisting or even widening. Judgements about whether things have changed for the worse or for the better should take into account and distinguish between the trend for all children and the trend for particular groups. However, as we will show below, data sources do not always allow for this distinction to be made in relation to London's children.

With these issues in mind, we move on to the main body of the chapter, looking first at London's children as a whole group (Section 11.2) and second at inequalities between London's children (Section 11.3).

The reader may find it useful to refer to the summary data tables (at the end of this chapter) as these are a detailed summary of the report's findings, on which this chapter is based.

11.2 London's children as a whole group

The trends

On many outcome measures, the well-being of London's children appears to be improving, in line with the national picture. For example, infant mortality rates are decreasing in London, more young children are taking up early years education, there is an improving trend in achievement at GCSE/GNVQ, rates of exclusion from school and road traffic casualties are decreasing, health outcomes for looked-after children are improving and participation activity is increasing.

In general, there are more areas of improvement, for London's children, than of deterioration. However, rates of asthma, of overweight and obesity, of some sexually transmitted infections (STIs) of mental ill health, of limiting long-term illness and alcohol consumption are likely to be increasing in London, in line with the country as a whole, and there is a continuing trend in London, as nationally, towards a reduction in children's independent mobility.

Child poverty and teenage pregnancy stand out as the measures where London differs from a nationally improving trend. London's child poverty rates have decreased but increased again in 2003 and teenage pregnancy rates in the capital are not falling in line with the national picture.

Where the national trend is improving, the most recent data show that outcomes for London's children are less positive, in relation to some measures, than for children nationally. Exclusion rates are higher, for example, in London's secondary schools and London's looked-after children achieve less well than children in any other region.

Conversely, where there is a deteriorating national trend, outcomes for London's children are better in a few instances - such as alcohol consumption and asthma rates - than for children nationally.

The outcomes for London's children are similar in relation to obesity and better in relation to diet, than for children nationally. However, these are still major issues of child health concern for London's children. Just one-fifth of London's children eat the recommended five portions of fruit and vegetables per day and, the same proportion - one-fifth of London's boys (aged 2 - 15) is overweight.

London's children in 2004

Current outcomes compare *favourably* for London's children in relation to:
•	levels of acute sickness

•	levels of doctor-diagnosed asthma

•	consumption of fruit and vegetables

•	prevalence of smoking

•	alcohol consumption

•	deaths from road traffic accidents.

The well-being of London's children appears to be *similar* to children nationally for:
•	infant mortality

•	general health reports

•	overweight and obesity

•	achievement at GCSE/GNVQ

•	levels of special education needs (SEN) inclusion

•	rates of exclusion at primary school

•	proportions of children who walk to school

•	proportions of children who go to school by car

•	relative spend on preventative services to children in need

- timely review of child protection register (CPR) cases

- young children looked after in foster placement or placed for adoption

- placement stability

- extent of participation activity.

Gaps in data

In other 'less immediately quantifiable' but very important areas, the evidence is less clear.1 This is particularly so for issues relating to children's enjoyment and leisure and to children's participation.

Children's access to public space

Qualitative research highlights young Londoners' continuing concerns about traffic danger and 'stranger danger' and restrictions on their independent use of public space. There is also some limited evidence to suggest that the sale of school playing fields and open land in the recent past has led to reductions in the availability of open space.

However, current data sources are insufficient to allow for adequate monitoring and measuring of: children's independent access to public space, their access to parks and green spaces and the level and distribution of parks and green spaces in London.

Children's physical activity levels

There is some evidence to suggest that London's children engage less in active play and less sports and exercise than children nationally, and that this may link to income inequality.

Children's access to leisure, arts, culture and recreational activities

There is a lack of good data on both the level and nature of 'Article 31'2 provision for children in London. For example, there is an absence of data which maps play provision and we do not have a full picture of the distribution of London's parks and open spaces. There is also very little information on children's use of and access to such provision.

Children's participation

Whilst we can be confident in saying that children's participation activity in London is increasing, although we know very little yet, without greater evaluation, about the impact of this increased activity on the quality and nature of public decision-making, or on services for children and young people. This is a matter for concern in the light of young Londoners views that they have limited influence on decision-making within the public sphere.

There is good evidence to show that the well-being of London's children compares *unfavourably* with children nationally in relation to the following:
- child poverty

- rates of teenage pregnancy

- immunisation rates

- prevalence of mental disorder (inner London)

- pupil mobility

- achievement at Key Stage 1, 2 and 3

- exclusion rates at secondary schools

- unemployment among young people aged 16 - 18

- proportions of children who cycle to school

- proportions of looked-after children receiving health checks

- older children looked after in foster placements or placed for adoption

- achievement of looked-after children

- proportion of children living in overcrowded housing

- levels of homelessness among households with children.

11.3 Inequalities between London's children

The first SOLCR highlighted that child poverty was a key factor in child health inequalities, in inequalities in education, in access to transport, housing and to play and leisure and it pointed to a range of inequalities affecting London's black and minority ethnic (BME) children and children from key disadvantaged groups.

This report has presented clear evidence to show that many of these inequalities persist. Infant mortality rates, teenage pregnancy rates and rates of mental ill health and of limiting long-term illness are all higher in poorer inner London. Children from lower income households are more likely to be pedestrian casualties. London's poorer children are much more likely to be living in poor and overcrowded housing, and new data suggest that income is a key factor affecting inner city children's participation in sport and exercise. Children from low-income households continue to achieve less well at school, despite marked improvements at GCSE/GNVQ level and the Greater London Authority (GLA) Survey 20043 suggests that young Londoners from low-income households believe they have less influence at school.

London's BME children are disproportionately affected by child poverty and poor and overcrowded housing (particularly Bangladeshi and Pakistani children) and by poorer educational attainment and exclusion from school (particularly black Caribbean children). Black children and young people are over-represented in the youth justice system and in child pedestrian casualties, and black young people, and those from lower income groups, appear less likely to engage in voluntary and socio-political activities.

Evidence from qualitative research also points to the experience of continuing inequalities for London's disabled children (access to Article 31 provision and transport, educational inclusion, experience of abuse), London's refugee and asylum-seeking children (in social care and education) and London's gypsy and traveller children (in education and youth justice).

Finally, we have highlighted and drawn attention to the difficulties that are faced by London's highly mobile child population. High levels of mobility in the capital and high levels of homelessness are together linked to inequalities in access to London's health, social care and education services.

Gaps in data

Whilst our report has pointed to some continuing areas of inequality, the data are inadequate to allow for a full understanding of the relationship between ethnicity, child poverty and a range of outcome inequalities for London's children. This is particularly apparent in relation to child health.

There is a growing amount of child-specific data, which allows for comparative analysis of the health of London's children, and much of this includes information about the role and impact of income inequalities in relation to health.

However, national and regional data are not routinely collected in relation to ethnicity and infant mortality, so we are unable to comment on any ethnic inequalities in infant mortality. The Health Survey for England, which provides extensive information about children, young people and health across the country, does not collect or analyse information by ethnicity. The Census provides some useful comparative health data, but this is limited to a few areas. Ethnic diversity may be a contributory factor to the relatively high levels of fruit and vegetable consumption and relatively low levels of smoking and alcohol use among young Londoners, but we have no clear evidence on which to base this claim.

We also have inadequate information to comment fully on ethnic inequalities in London within the youth justice system, in active play participation, in access to public space and in access to the range of Article 31 activities and opportunities. This lack of data is particularly critical in a city that is characterised by its diversity and includes such a high percentage of BME children.

11.4 Key concluding points

This second SOLCR has collated and analysed data on a very wide range of factors affecting children's lives in seeking to provide a comprehensive account of the state of London's children. Some data gaps have been identified and there may be some data sources that have not come to light in researching and writing the report. However, the report has established an outcomes framework that can be further developed and used by all those who are concerned with seeking improvements in the lives of London's children.

Two areas - mobility and child poverty - merit a final emphasis in our conclusion and have strong implications for both research and policy-making agendas. High levels of mobility in the capital are combined with high levels of poverty, homelessness, poor housing and very high levels of overcrowding. This unique combination of circumstances has an adverse impact on the lives of many of London's children and has a disproportionate impact on many children from London's BME groups. When viewed in the context of London's shortage of affordable housing and growing child population, the challenges for the future are clear.

We have consistently highlighted that the well-being of young Londoners is linked, in their view, to improvements to their social and physical environments and we have sought, as far as is possible, to evaluate the evidence relating to young Londoners access to public spaces, improved opportunities for play, better leisure opportunities and greater opportunities for participation in decision-making.

However, there are insufficient data, at present, to allow for regular monitoring of the aspects of children's lives and well-being that children themselves prioritise. Finding accurate ways of measuring change in these areas will be critical to the future development and improvement of the SOLCR outcomes framework.

In researching and comparing the London and national data across the thematic areas (Chapters 3 - 10) to produce an outcomes framework of children's lives, this report has considered key regional indicators and the new national outcomes framework for children.

This report has drawn upon existing children's indicators from regional strategies, in particular Health in London: Review of the London Health Strategy high-level indicators (London Health Commission) and the 2004 report on London's Quality of Life Indicators (London Sustainable Development Commission), both published in April 2004.

Similarly, working with the Department for Education and Skills (DfES), data comparison was made between the regional data sources available for the State of London's Children's Report and the draft national and local performance measures being developed for the national Change for Children programme to take forward the five outcome measures of Every Child Matters (be healthy, stay safe, enjoy and achieve, make a positive contribution and achieve economic well-being).

The strategic partnership in each local authority area will be held accountable for delivering services against these core measures, which will be aligned with the current work by inspectorates to develop an integrated inspection and assessment framework across health, social services and education agencies.

The Londonwide approach by the GLA in this report to the research, analysis and ongoing monitoring of outcomes for children will provide a priority focus for the ongoing implementation of the Mayor's Children and Young People's Strategy. The core themes of this strategy - of reducing poverty and social exclusion, promoting inclusion and equality, and making the case for delivery of quality services - will be informed by the key findings of this report.

The strategy contains a ten-year timetable for delivery of 27 policies and 86 action points to make London a better place for the city's 1.61 million children and young people. This will be implemented through delivery by the GLA group, in partnership with other statutory and voluntary agencies in London, and by making the case to the UK Government for the required resources for service provision in areas of education, health, social care, community safety, environment and regeneration.

In the continuing absence of a regular, comprehensive report on the well-being of children nationally, the Mayor plans to produce regular State of London's Children Reports.

11.5 The summary data tables

These tables provide a summary of the information that is included in the report.

They are intended to be read as a supplement to and not as an alternative to the full report. The material they aim to summarise is complex and it is important that it is used and referred to alongside the much more detailed information that is set out in the corresponding themed chapters of the report.

For each of the eight themed chapters there are five column headings, as follows:

SOLCR indicator: a list of the outcome indicators. Some data relating to service provision and evaluation are also included.

National trend: includes a comment on whether the national trend, in relation to the indicator, appears to be decreasing, increasing, remaining stable or following no clear trend, or is not known (owing to insufficient data).

London trend: includes a comment on whether the London trend, in relation to the indicator, appears to be decreasing, increasing, remaining stable or following no clear trend, or is not known (owing to insufficient data).

The report includes some new indicators, not included in (or not directly comparable with) indicators in the first SOLCR. It has not always been possible to give any comment on trends in relation to these and they are marked with an asterisk.

Current picture: London/national: includes a comment, based on the most recent indicator data, about London in relation to the national picture.

Key inequalities: comments on inequalities between groups of children, in relation to the indicator. Some comments are based on national data and relate to children nationally. Where information about London children is given this is based on (and indicates the availability of) London-specific data relating to the inequality.

Summary data tables

Chapter 3 Child poverty and economic well-being

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
% of children in households below 60% of median income	Reducing	Reducing – but recent increase	London rate higher than national rate	Inner London rates higher than outer London. BME groups particularly affected
% of children eligible for free-school meals	Reducing	Reducing	London rate higher than national rate	Inner London rates higher than outer London. Large variations between London boroughs

Chapter 4 Being healthy

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Infant mortality rate	Reducing	Reducing	London rates marginally higher	Known to be linked to social deprivation nationally. Variations in London between Strategic Health Authorities and between boroughs
Childhood mortality rates and proportion of children aged 1 – 19 who die (by cause of death)	Reducing rates over the last century Recent trend not known (small numbers)	Reducing rates over the last century Recent trend not known (small numbers)*	Pattern of cause of death is similar in London to nationally, although a lower proportion of London's children die from road traffic accidents	
% of children immunised before their 5th birthday	*	*	London rates higher	Poorer areas are known to have lower uptake
% of children reported to be in good/very good health	*	*	London rates similar	No national analysis re ethnicity. Inner London children have slightly poorer health status. Some small ethnic differences
% of children reported to have a long-term illness	Increasing (between Census 1991 and 2001)	Increasing (between Census 1991 and 2001)	Unclear – Census data suggests London similar to national. Data from Health Survey for England suggests London's children doing better	Children from inner London more likely, than children from outer London, to have long-term illness. (Census data)

| % of children with acute sickness | * | * | Generally lower for London's children | |

Chapter 4 Being healthy – continued

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Prevalence of asthma	Increasing	Not known but likely to be increasing in line with national trend	Lower rates of doctor-diagnosed asthma in London and the SE	
Prevalence of diabetes	Prevalence of Type 2 diabetes may be increasing	Not known	Unclear – rates in London may be lower as rural areas may have higher prevalence than urban	White children, nationally, more likely to have very low blood sugar levels
Levels of physical activity	*	*	London's children more likely to have medium levels/less likely to have high levels of physical activity	Boys more active than girls. Children from low-income households less likely to take part in sports and exercise
% of children overweight and obese	Increasing	Not known but likely to be increasing in line with national trend	No clear regional pattern. London boys marginally more likely than boys elsewhere to be overweight	More common in girls and in older children. More common in deprived areas

% eating 5 or more fruit and vegetables per day	*	*	London's children and young people consuming significantly more fruit and vegetables, although overall rate still low	Girls and young women eat more fruit and vegetables. Lower levels of consumption in lower income groups
Prevalence of smoking	Stable (among 11 – 15 year-olds)	Not known but likely to be stable in line with national trend	Lower levels of smoking amongst children and young people in London	Girls more likely to smoke than boys. Prevalence higher in low-income groups

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Drug use	Stable (among 11 – 15 year-olds)	Not known but likely to be stable (among 11 – 15 year-olds) in line with national trend	Unclear – rates of illegal drug use may be higher in London among young adults (16 – 29)	Young people from BME groups are reported to be less likely to have used illegal drugs than young white people
Under-18 conception rates	Reducing	No clear trend	London has higher rates	Higher rates in inner than outer London. Wide variation between the boroughs
Prevalence of STIs	Increases in gonorrhoea and chlamydia (young women aged 16 – 19)	Not known but likely to be in line with national trends	Unclear – though rates of gonorrhoea are known to be higher in inner city areas	BME young people are disproportionately affected by poor sexual health
Children and young people affected by HIV/AIDS	Diagnoses amongst young people (16 – 24) stable. Prevalence in adults is increasing – affecting children who live with them	Numbers of London children affected by HIV likely to be increasing	As the majority of adults who are diagnosed with HIV live in London. London's children are more likely to be affected by HIV in their families	A range of poverty-linked inequalities
Experience of bullying	Not known. No comparable data – no suggestion of a decline	Not known. No comparable data – no suggestion of a decline	Unclear – no comparable data – London rates may be higher given links with bullying and	Bullying may be more commonly experienced by disabled children; and by young

| racism | people from BME groups |

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
			–	
Prevalence of self-harm	Not known but believed to be increasing	Not known	No London data	
Suicide rates	Increasing, particularly among young men	Not known	Appears similar to national picture	Young men particularly vulnerable

Chapter 5 Enjoyment

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Children's independent access to public space	Not known. Evidence points clearly to reductions in % of children walking to school. Research also points to children's continuing concerns re traffic and stranger danger – and to children being unwelcome in public spaces	Not known – as national	Fears of traffic danger are higher in city areas	Age, gender and ethnicity all influence children's patterns of use of their neighbourhoods and public spaces
Children's participation in active play	*	*	Children (aged 2–10) have lower rates of active play in inner cities	Ethnicity may be a factor
Children's access to parks and green spaces	*	Not known although evidence has suggested a worsening trend with the sale of school playing fields, playgrounds and open land		_

| Older children's access to leisure facilities | Not known. Young people continue to point to a lack of facilities | Not known – as national | Young people identify a lack of facilities and opportunities | _ |

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Provision and funding of youth services	Not known although some evidence of reducing levels	Not known – as national	Unclear – London has some of the highest and some of the lowest spending authorities in the country	Wide variations across London in spending on youth services and on % of young people reached
Children's participation in sports and exercise	*	*	Children in inner cities less likely to participate	Children in low income households less likely to participate
Children's access to galleries and museums	Increases in visits (not counted separately for children) associated with lower costs	Steepest increases are in London	Visitors from the SE account for 4 out of 10 visits whilst comprising 34% of the population	Increases in use are highest among the higher social classes
Disabled children's access to leisure facilities and opportunities	Not known but no suggestion of improvement	Not known – as national	No London–specific data. National research points to a range of barriers to disabled children's access	–

Chapter 6 Achievement

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
% of 3 and 4 year-olds taking up free nursery education	Increasing	Increasing	Similar in London to nationally	Children of gypsies and travellers may be less likely to take up pre-school education
Independent schools as a proportion of all schools	Stable	Small increases	London has a higher proportion of independent schools than nationally – particularly in inner London	
% of pupils from BME groups	Stable (very small increases)	Increasing	London has a higher proportion of children in BME groups, particularly in Inner London	Wide variation between boroughs
% of pupils whose first language is not English	Stable (very small increases)	Increasing	London has a higher proportion of children whose first language is not English, particularly in inner London	Wide variation between boroughs
Pupil mobility rates	*	Likely to be increasing	Higher in London – at secondary, as well as primary level	Wide variation between boroughs
% of children attending an out-of-borough secondary school	*	Increasing	London children are more likely to attend an out-of-borough secondary school	Children from higher socio-economic groups are more likely to attend out-of-borough schools
Teacher vacancy rates	*	Reducing	London rates are still higher than national rates	—

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Achievement at Key Stages 1, 2 and 3	*	*	London's children achieve less well at all 3 Key Stages. Value-added-value impact of London schools is higher at Key Stage 1 – 2 than nationally	Boys, black children, children on free school meals, gypsy and traveller children achieve less well at all stages
Achievement at GCSE/GNVQ	Small improvements	No change in proportions achieving 5 or more A* – G passes. A marked rise in proportions achieving 5 or more passes at A* – C – particularly in inner London	London's children achieve similarly to national children	
Achievement at GCSE/VCE and A A/S	*	*	London's children do slightly less well overall, but they are more likely to achieve advanced post-vocational qualifications and advanced extension awards	
Participation of 16 – 17 year-olds in education and work-based learning	*	*	London's 17 year-olds are more likely to be in full-time education	
Economic activity of young people aged 16 – 18	*	Unemployment and economic inactivity rates increasing	Young Londoners are more likely to be unemployed – particularly in inner London	
Ethnic inequalities in achievement	*	*	London's black children achieve less well	

Rates of permanent exclusion from school	Reducing	Reducing	Exclusion rates are higher in London's secondary and special schools; and the same in primary schools	Boys, black children and gypsy and traveller children are more likely to be excluded
Proportion of children with SEN	*	*	Proportions are higher in London, particularly in Inner London	Irish travellers, Roma gypsies, black Caribbean and black African children more likely to have SEN
The inclusion of children with SEN in mainstream schools	Increasing	Increasing	London similar to national picture.	Some parents and children identify a range of concerns relating to their experiences in mainstream schools
The access of RAS children to schools and education	*	Not known but may be improving	Unclear – examples of good practice, but London's RSA children experience a range of barriers	

Chapter 7 Transport and road safety

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Proportion of children who walk to school	Reducing	Reducing – at a slower rate (London data not very good for comparison)	Similar, though slightly smaller proportion in London than nationally (greater users of public transport)	
Proportion of children going to school by car	Increasing	Increasing at a slower rate (London data not very good for comparisons)	Similar, though slightly smaller proportion in London than nationally (greater users of public transport)	
Proportion of children who cycle to school	Stable (though v low) at primary. Decreasing at secondary	Decreasing at secondary	Very low and lower than national figure	
Number of children killed or seriously injured on the roads	Reducing	Reducing	Unclear – not directly comparable	
Number of child pedestrian casualties	*	Reducing	Unclear	Children from lower income households more likely to be casualties

Wide borough variations in severity of child pedestrian casualties |
| Disabled children's access to transport | Not known | Not known although a range of measures have been taken to improve access | Unclear – disabled children and young people and their families describe a range of barriers to access | |

Chapter 8 Families, social care and protection

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Childcare provision	Increasing	Increasing	London has lower rates of provision	Wide variations in level and type of provision between boroughs. Higher costs of childcare in

				London. High turnover rates in provision
Relative social services spend on preventative services for children in need	Increasing	Increasing	London similar to national average	Children from black and mixed ethnic groups are 'over-represented' in 'in need' population. Children from Asian groups under-represented
Prevalence of violence to children	Prevalence of all forms of violence not known. Child abductions and murders by strangers stable	Not known	Not known	Disabled children and children living in households where there is domestic violence are more likely to be abused
Rate of re-registration on the child protection register (CPR)	Reducing	Reducing in inner London. Stable in outer London (from a lower base)	Same as national average in outer London. Lower in inner London	
Timely review of child protection cases	Increasing	Increasing	Similar to national average	

Chapter 8 Families, social care and protection - continued

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Duration of time spent on CPR	Reducing	Reducing	London has higher proportions of children on CPR for 2 or more years than national proportion	
Rates of children 'looked after'	Increasing	Increasing	London has higher rates of 'looked-after' children than national average	Wide variation in rates between the London boroughs
Young children (under 10) looked after in foster placement or placed for adoption	Appears to be increasing but data only available for 2 years	Appears to be increasing but data only available for 2 years	London rates similar to national rates. London has shown the most marked improvement	
Older children looked after in foster placement or placed for adoption	Appears to be increasing but data only available for 2 years	Appears to be increasing but data only available for 2 years	London has lower rates than nationally	
Number of children with 3 or more placements in a year	Reducing – then stable	Stable	London similar to national picture	
Looked-after children receiving health checks	Increasing	Increasing – although only marginally in inner London	London has lower proportions of children receiving health checks	
% of young people leaving care with at least 1 GCSE at A* – G or a GNVQ	Increasing	Increasing	London has a much lower % than national average	

Chapter 8 Families, social care and protection - continued

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Social services and issues affecting unaccompanied RAS children	Not known	Not known	RAS children are affected by: variations in support, shortage of suitable placements and tendency to view them first as RAS and secondly as children	

Chapter 9 Safe homes and communities

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
% of overcrowded households	Appears to have increased since 1999/2000	Appears to have increased since 1999/2000	London has higher proportions of overcrowded households	Lone parent households; households with children and BME households are all more likely to be overcrowded
% of children living in overcrowded housing	*	Likely to be increasing	London has higher % of children living in overcrowded housing	There is wide variation between the boroughs
Proportion of homes not meeting the 'decent homes' standard	*	*	London has marginally higher proportions of homes not meeting the standard	Proportions not meeting the standard are higher in the socially rented sector
Proportion of dwellings in 'poor neighbourhoods'	*	*	London has a higher proportion of dwellings in poor neighbourhoods than national average	Proportions are higher in the socially rented sector
Level of concern among young people re the quality of their physical environment	Not known but young people continue to raise concerns	Not known but young people continue to raise concerns	Young Londoners express concerns about traffic pollution, litter, dumped waste, rubbish, graffiti and dumped cars	
Number of homelessness acceptances	Increasing	Increasing	London has high levels of homelessness	Just over half of households accepted as homeless include children. BME households are over-represented among homelessness acceptances

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Number of families with children in B&B	Reducing	Reducing	There has been progress in London to reduce the number of families with children in B&B	
Population of young homeless people	Increases since 1980s – recent trends unclear	Likely to have increased – but recent trends unclear	Homelessness among young people in London known to be acute – but difficulties in estimating numbers	
Youth crimes (as measured by youths accused)	*	Decreasing	Not reported – (although the rate of offences resulting in a disposal is similar in London to nationally)	Overall decrease masks wide variations across London, with increases in many boroughs
Street crime by young people	*	Unclear – decreasing (2002/03) then stable	Not reported	Wide variations between the boroughs in the level of street crime
Young people as victims of crime	*	Relatively stable	Not reported	Variations between the boroughs
Ethnic inequalities in the youth justice system	Not known	Not known	National research highlights a range of differences in outcome for young people from different ethnic groups. Some evidence of discrimination	
Young people in custody	Increasing (since 1996)	Not known	Not reported	Black males and females are over-represented in custody

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Ethnic inequalities in young people remanded in custody and given detention and training orders (DTOs)	*	*	Black young people are over-represented in London and nationally. Over-representation is greater nationally than in London	

Chapter 10 A positive contribution

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Extent of participation activity	Increasing	Increasing	Increases in participation activity across many areas of service provision in London, in line with national picture	
Level of children and young people's involvement in public decision-making	Not known May be increasing. Varies according to the type of organisation and service area	Not known. May be increasing. Varies according to the type of organisation and service area	Unclear – probably similar to national	Participation may often be dominated by formal group activities or one-off consultations. May also be limited to a small proportion of young people. Few examples of young-people led projects. Young people from lower-income households more likely to say that they had no influence at school
Level of children and young people's engagement in community, voluntary and socio-political activities	Young people's * (16+) involvement in voluntary socio-political activities may be increasing		No directly comparable data. About half young Londoners (11 – 16) in the GLA Survey were involved in these kind of activities	Propensity to get involved higher among young Londoners from higher-earning households and lower among black young people

SOLCR indicator	National trend	London trend	Current picture: London in comparison with national data	Key inequalities
Levels of advocacy services	Increases over the last 15 years, particularly. between 1999 and 2004	Increases over the last 15 years, particularly between 1999 and 2004	No directly comparable data. Some closures and changes in provision in London in 2004	Disabled, unaccompanied refugee and asylum-seeking, looked-after and excluded (from school) children may have particular needs for advocacy

Notes

1   See summary data tables for a full list of these areas.
2   UN Convention on the Rights of the Child.
3   See note 1, Chapter 1, for a description of the survey.

Appendices

List of appendix tables

1   London's female child population, by borough and by age group
2   London's male child population, by borough and by age group
    3   London's child population (aged under-18), by borough and by ethnic group, percentages
4   London's child population, by borough
5   London's dependent children, by borough and household type
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11   London strategic parks, by borough
12   Youth service spending and % of young people reached, 2002/03
    13   Number and % of pupils whose first language is known or believed to be other than English, January 2004 (provisional data)
    14   Key Stage 1 - 2 and 2 - 3 value-added measures in London LEAs, 2003
    15   GCSE/GNVQ achievement, and Key Stage 3 to GCSE/GNVQ value-added measures in maintained schools, London LEAs and England, 2002/03
    16   Maintained primary, secondary and special schools, permanent exclusions by ethnic group, 2002/03 (provisional estimates)
    17   Percentages of pupils with special educational needs, maintained primary and secondary schools, January 2003
18   Child pedestrian casualty severity ratios, London LEAs, 2003
19   Rates of registered childcare in London, 30th September 2003
20   Number and rates of children looked after, 2001 - 2003
21   Children living in overcrowded households, 2001 Census

Table 1   London's female child population, by borough and age group

County districts	0 to 4	5 to 9	10 to 14	15	0	to 15	16 to 18
City of London	132	94	89	13		328	81
Barking & Dagenham	6,253	6,173	5,201	1,096		18,723	3,354
Barnet	9,949	10,060	9,452	1,824		31,285	5,568
Bexley	6,547	7,155	7,487	1,416		22,605	3,955
Brent	8,157	7,925	8,149	1,594		25,825	5,005
Bromley	9,049	8,998	9,163	1,727		28,937	4,562
Camden	5,829	5,077	4,606	784		16,296	3,139
Croydon	11,056	11,101	10,934	2,034		35,125	6,097
Ealing	9,511	9,193	8,671	1,778		29,153	5,143
Enfield	9,008	9,146	8,700	1,680		28,534	5,153
Greenwich	7,591	6,756	6,784	1,319		22,450	4,034
Hackney	8,159	7,128	6,933	1,278		23,498	3,938
Hammersmith & Fulham	4,940	4,239	3,770	658		13,607	2,275
Haringey	7,296	6,770	6,733	1,287		22,086	3,789
Harrow	5,811	6,217	6,643	1,337		20,008	3,975
Havering	6,037	7,118	7,159	1,317		21,631	4,021
Hillingdon	7,751	7,857	7,973	1,469		25,050	4,399
Hounslow	6,892	6,622	6,491	1,304		21,309	3,833

Area					
Islington	5,422	4,869	4,734	842	
	15,867	2,851			
Kensington & Chelsea	4,871	3,597	3,049	546	
	12,063	1,854			
Kingston upon Thames	4,495	4,198	4,201	803	
	13,697	2,396			
Lambeth	8,832	7,688	7,167	1,364	
	25,051	4,056			
Lewisham	8,645	8,175	7,788	1,455	
	26,063	4,043			
Merton	6,188	5,392	5,200	960	
	17,740	2,716			
Newham	10,260	9,509	9,242	1,947	
	30,958	5,774			
Redbridge	7,622	7,982	7,805	1,514	
	24,923	4,513			
Richmond upon Thames	5,812	4,832	4,494	786	
	15,924	2,275			
Southwark	8,674	7,672	6,858	1,342	
	24,546	3,917			
Sutton	5,689	5,708	5,751	1,045	
	18,193	3,013			
Tower Hamlets	7,488	6,626	6,716	1,300	
	22,130	3,965			
Waltham Forest	7,490	6,928	6,836	1,301	
	22,555	3,785			
Wandsworth	8,164	6,472	5,367	911	
	20,914	3,041			
Westminster	4,659	3,651	3,253	545	
	12,108	2,126			
Inner London	108,225	95,275	89,748	16,808	
	310,056	52,611			
Outer London	126,054	125,653	123,651	23,768	
	399,126	70,035			
Greater London	**234,279**	**220,928**	**213,399**	**40,576**	
	709,182	**122,646**			
England	**1,425,001**	**1,519,264**	**1,577,855**	**304,331**	
	4,826,451	**888,784**			

Source: Office of National Statistics (ONS) mid-2001 population estimates

Table 2   London's male child population, by borough and age group

County districts	0 to 4	5 to 9	10 to 14	15	0
to 15	16 to 18				
City of London	112	107	101	14	
334	37				
Barking & Dagenham	6,241	6,305	5,987	1,112	
19,645	3,272				
Barnet	10,252	10,478	9,884	1,909	
32,523	5,659				
Bexley	6,725	7,444	7,664	1,448	
23,281	4,063				
Brent	8,184	8,058	8,301	1,693	
26,236	5,242				
Bromley	9,602	9,341	9,320	1,718	
29,981	5,213				
Camden	6,045	5,238	4,605	858	
16,746	3,139				
Croydon	11,467	11,895	11,740	2,228	
37,330	6,591				
Ealing	9,780	9,447	9,358	1,948	
30,533	5,890				
Enfield	9,128	9,412	9,051	1,717	
29,308	5,298				
Greenwich	7,942	7,523	7,314	1,419	
24,198	4,105				
Hackney	8,620	7,037	7,102	1,200	
23,959	3,792				
Hammersmith & Fulham	5,297	4,084	3,615	693	
13,689	2,199				
Haringey	7,463	6,863	6,845	1,296	
22,467	3,977				
Harrow	6,247	6,658	7,229	1,545	
21,679	4,527				
Havering	6,378	7,400	7,564	1,482	
22,824	4,176				
Hillingdon	8,361	8,470	8,077	1,509	
26,417	4,589				
Hounslow	7,314	6,797	6,844	1,360	
22,315	4,415				

Islington	5,693	4,955	4,860	858	16,366	2,642
Kensington & Chelsea	5,075	4,099	3,062	555	12,791	1,778
Kingston upon Thames	4,676	4,366	4,284	815	14,141	2,648
Lambeth	9,276	7,954	7,397	1,368	25,995	4,194
Lewisham	9,134	8,342	7,575	1,549	26,600	4,705
Merton	6,512	5,781	5,527	1,030	18,850	3,227
Newham	10,497	10,179	10,020	2,023	32,719	6,015
Redbridge	8,122	8,190	8,301	1,542	26,155	4,678
Richmond upon Thames	6,034	5,086	4,616	834	16,570	2,628
Southwark	8,661	7,971	7,181	1,325	25,138	4,093
Sutton	5,956	6,367	6,006	1,129	19,458	3,402
Tower Hamlets	7,651	6,758	6,906	1,367	22,682	3,997
Waltham Forest	8,006	7,635	7,179	1,399	24,219	4,273
Wandsworth	8,560	6,617	5,603	911	21,691	3,235
Westminster	4,872	3,809	3,236	585	12,502	2,342
Inner London	112,362	98,164	92,598	17,414	320,538	55,498
Outer London	131,521	132,502	129,756	25,025	418,804	74,543
Greater London	**243,883**	**230,666**	**222,354**	**42,439**	**739,342**	**130,041**
England	**1,494,484**	**1,596,640**	**1,655,589**	**320,261**	**5,066,974**	**938,875**

Source: ONS mid-2001 population estimates

Table 3 London's child population (aged under-18), by borough and by ethnic group, percentages

Ethnic group

	White			Mixed				Asian or Asian British				Black or black British			Chinese or other		All
	British	Irish	Other white	White & black Caribbean	White & black African	White & Asian	Other Mixed	Indian	Pakistani	Bangla-deshi	Other Asian	Black Carribean	Black African	Other black	Chinese	Other Ethnic group	Children
City of London	57.7	1.6	5.6	2.8	0.9	2.3	2.9	0.8	0.0	17.2	0.4	1.2	3.2	0.4	0.9	2.0	100.0
Barking and Dagenham	77.2	0.4	2.3	2.3	0.8	0.6	0.8	2.2	2.5	0.7	0.6	2.1	6.0	0.9	0.4	0.4	100.0
Barnet	57.7	1.4	7.8	1.4	1.1	2.2	2.1	8.5	1.8	0.6	2.1	1.3	6.6	0.7	2.0	2.8	100.0
Bexley	86.2	0.4	1.7	1.1	0.4	0.9	0.6	2.7	0.2	0.3	0.5	0.8	2.8	0.3	0.9	0.3	100.0
Brent	21.8	3.2	5.2	2.5	1.3	1.9	2.0	19.6	5.9	0.6	5.6	11.3	12.7	3.1	0.8	2.6	100.0
Bromley	84.2	0.5	2.5	1.9	0.5	1.3	1.1	1.6	0.3	0.6	0.5	1.9	1.7	0.4	0.6	0.4	100.0
Camden	42.8	1.6	10.2	2.4	1.4	2.0	2.7	1.5	0.6	15.1	1.2	2.1	12.1	1.1	1.1	2.1	100.0
Croydon	57.4	0.7	3.0	3.9	0.9	1.8	1.7	6.5	3.0	0.8	2.1	8.9	6.0	2.0	0.6	0.8	100.0
Ealing	37.6	1.9	5.4	2.7	1.0	2.6	1.9	18.7	5.7	0.5	4.6	4.7	6.5	1.2	0.9	4.2	100.0
Enfield	55.9	1.4	11.9	2.4	0.8	1.7	1.6	3.7	0.8	2.0	2.1	5.7	6.9	1.5	0.6	1.0	100.0
Greenwich	64.0	0.8	2.8	2.7	0.9	1.1	1.4	5.3	1.3	1.1	0.9	3.3	10.3	1.5	1.3	1.4	100.0
Hackney	35.2	0.8	10.6	3.3	1.4	1.1	1.8	4.7	1.4	5.0	1.0	9.5	16.4	4.4	1.1	2.4	100.0
Hammersmith and Fulham	51.1	1.2	10.5	3.7	1.5	2.1	2.2	1.4	1.9	1.3	1.6	6.3	9.7	2.6	0.5	2.3	100.0

Ethnic group

Area	White British	Irish	Other white	Mixed: White & black Caribbean	White & black African	White & Asian	Other Mixed	Asian or Asian British: Indian	Pakistani	Bangladeshi	Other Asian	Black or black British: Black Carribean	Black African	Other black	Chinese	Other Ethnic group	All Children
Haringey	36.1	1.8	13.2	4.0	1.6	1.9	2.4	2.6	1.3	2.2	1.5	10.4	15.2	2.8	0.8	2.2	100.0
Harrow	41.8	2.3	3.3	1.7	0.6	2.1	2.1	24.6	2.8	0.7	6.7	3.1	4.5	0.9	1.2	1.8	100.0
Havering	91.5	0.4	1.3	1.1	0.2	0.7	0.5	1.2	0.3	0.1	0.4	0.7	1.0	0.1	0.4	0.1	100.0
Hillingdon	68.5	1.0	2.4	1.5	0.5	1.8	1.3	11.5	2.2	1.0	2.0	1.4	2.6	0.4	0.7	1.0	100.0
Hounslow	50.8	1.0	3.9	1.8	0.8	2.4	1.6	18.8	6.2	0.8	2.8	1.4	4.2	0.6	0.7	2.3	100.0
Islington	49.8	2.1	8.8	3.8	1.6	1.6	2.6	1.2	0.6	5.2	0.9	5.4	11.3	2.2	1.6	1.3	100.0
Kensington and Chelsea	43.3	0.8	23.4	2.8	1.7	2.9	3.4	1.5	1.1	1.4	1.8	3.3	6.8	1.5	0.6	3.9	100.0
Kingston upon Thames	74.2	0.7	4.4	1.1	0.6	2.2	1.5	3.5	1.8	0.4	3.2	0.4	1.2	0.1	1.3	3.4	100.0
Lambeth	35.7	0.9	5.8	5.5	1.6	1.3	2.5	1.7	1.3	1.5	0.8	15.4	18.6	4.8	1.4	1.0	100.0
Lewisham	46.9	1.1	4.1	4.9	1.4	1.1	2.1	1.1	0.6	0.8	1.5	14.0	13.1	4.2	1.6	1.5	100.0
Merton	59.7	1.0	5.1	2.5	0.9	2.2	1.8	4.4	3.3	1.3	3.9	4.1	5.5	1.3	1.3	1.6	100.0
Newham	23.0	0.4	2.5	2.6	1.1	1.2	1.4	12.3	11.0	13.5	3.1	6.3	17.4	1.9	0.7	1.7	100.0
Redbridge	45.8	1.0	2.7	2.3	0.7	1.8	1.2	16.2	9.6	2.8	3.8	4.4	5.3	1.0	0.8	0.6	100.0
Richmond upon Thames	78.1	1.0	7.7	1.0	0.6	2.3	1.5	2.6	0.5								

White **Mixed** **Asian or Asian**
British **Black or black** **Chinese or**
All
British **other Children**

Ethnic group

0.7	0.8	0.3	0.6	0.1		0.7	1.4	100.0	
Southwark	40.2	0.9	4.0	3.6	1.8	1.1	2.2	0.9	0.4
2.6	0.6	8.5	25.7	4.3		1.8	1.4	100.0	
Sutton	82.0	0.6	2.3	1.9	0.5	1.6	1.0	2.5	1.0
0.5	1.6	1.1	1.8	0.3		0.6	0.8	100.0	
Tower Hamlets	23.5	0.3	1.6	1.7	0.6	1.0	0.7	1.1	0.8
58.3	1.1	2.2	4.0	0.8		1.2	1.0	100.0	
Waltham Forest	44.7	0.8	4.6	3.7	1.1	1.5	1.9	4.0	12.1
1.6	3.0	8.7	8.0	2.9		0.4	1.0	100.0	
Wandsworth	58.4	1.0	5.6	3.6	1.2	1.8	2.0	2.8	3.7
0.8	2.0	6.2	6.7	2.2		0.7	1.1	100.0	
Westminster	39.3	1.0	15.9	2.5	1.6	3.1	3.3	2.5	1.3
8.0	3.3	4.1	6.8	1.6		1.4	4.5	100.0	
Inner London	39.1	1.0	7.7	3.5	1.4	1.5	2.1	3.2	2.4
9.4	1.6	7.9	13.5	2.8		1.1	1.8	100.0	
Outer London	60.6	1.1	4.3	2.2	0.8	1.7	1.5	8.7	3.3
0.9	2.5	3.8	5.2	1.1		0.9	1.5	100.0	
Greater London	52.6	1.1	5.6	2.7	1.0	1.7	1.7	6.6	3.0
4.1	2.1	5.3	8.3	1.7		1.0	1.6	100.0	

Source: Census 2001, Table TT012

Table 4   London's child population, by borough

	0 to 15	0 to 17	16 to 18	0 to 15 as % of total borough population	Total borough population
City of London	662	740	118	9.0	7,377
Barking & Dagenham	38,368	42,843	6,626	23.1	165,851
Barnet	63,808	71,526	11,227	19.9	320,082
Bexley	45,886	51,382	8,018	21.0	218,757
Brent	52,061	59,032	10,247	19.3	270,434
Bromley	58,918	65,649	9,775	19.9	296,218
Camden	33,042	36,987	6,278	16.3	203,002
Croydon	72,455	81,180	12,688	21.6	335,653
Ealing	59,686	67,137	11,033	19.4	308,072
Enfield	57,842	65,024	10,451	20.8	277,719
Greenwich	46,648	52,147	8,139	21.4	217,805
Hackney	47,457	52,694	7,730	22.8	207,789
Hammersmith & Fulham	27,296	30,317	4,474	16.1	169,851
Haringey	44,553	49,766	7,766	20.1	221,856
Harrow	41,687	47,487	8,502	19.8	210,456
Havering	44,455	50,097	8,197	19.8	224,717
Hillingdon	51,467	57,390	8,988	20.9	245,930
Hounslow	43,624	49,200	8,248	20.2	216,445
Islington	32,233	35,885	5,493	17.9	179,821
Kensington & Chelsea	24,854	27,164	3,632	15.3	162,621
Kingston upon Thames	27,838	31,114	5,044	18.7	149,255
Lambeth	51,046	56,566	8,250	18.6	274,200
Lewisham	52,663	58,631	8,748	20.7	254,886
Merton	36,590	40,614	5,943	19.1	191,488
Newham	63,677	71,748	11,789	25.5	250,098
Redbridge	51,078	57,313	9,191	21.1	242,285
Richmond upon Thames	32,494	35,743	4,903	18.6	174,538
Southwark	49,684	54,995	8,010	19.8	251,060
Sutton	37,651	41,898	6,415	20.7	181,644

Tower Hamlets	44,812	50,225	7,962	22.2	201,645
Waltham Forest	46,774	52,231	8,058	21.0	222,472
Wandsworth	42,605	46,805	6,276	15.9	267,492
Westminster	24,610	27,400	4,468	13.2	186,392
Inner London	630,594	702,618	108,109	18.4	3,421,482
Outer London	817,930	916,312	144,578	21.0	3,886,429
Greater London	**1,448,524**	**1,618,930**	**252,687**	**19.8**	**7,307,911**
England	**9,893,425**	**11,128,488**	**1,827,659**	**20.0**	**49,369,505**

Source: ONS mid-2001 population estimates

Table 5   London's dependent children, by borough and household type

	Lone parent family	Male parent	Female parent	Married couple	Non-step couple family	Step family	Co-habiting	Non-step step couple	Step family	Not in step family	Total
City of London	18.7	4.0	14.7	26.4	25.4	0.9	4.3	3.4	0.9	1.2	100.0
Camden	17.6	1.6	16.0	27.1	24.9	2.2	4.5	3.0	1.5	1.6	100.0
Hackney	18.1	1.3	16.8	26.0	23.8	2.2	5.2	3.4	1.8	1.5	100.0
Hammersmith and Fulham	17.9	1.3	16.8	26.0	23.8	2.2	5.2	3.4	1.8	1.5	100.0
Haringey	18.6	1.2	17.5	26.1	23.9	2.2	4.6	3.2	1.4	1.5	100.0
Islington	21.5	1.4	20.1	22.7	20.8	1.9	5.2	3.6	1.7	1.3	100.0
Kensington and Chelsea	13.4	1.7	11.7	32.0	30.0	2.0	4.2	2.3	1.4	0.8	100.0
Lambeth	22.1	1.8	20.3	21.7	19.5	2.2	5.5	3.6	1.9	1.5	100.0
Lewisham	19.2	1.3	17.9	24.4	21.9	2.5	5.9	3.9	2.0	1.0	100.0
Newham	17.8	1.4	16.4	27.9	25.4	2.5	3.6	2.1	1.5	1.6	100.0
Southwark	20.8	1.5	19.3	22.2	19.8	2.4	6.4	4.0	2.4	1.3	100.0
Tower Hamlets	13.3	1.0	12.3	33.0	30.3	2.7	3.1	1.8	1.3	1.2	100.0
Wandsworth	15.0	1.1	13.8	30.1	28.1	2.0	4.5	3.1	1.4	1.0	100.0
Westminster	15.0	1.7	13.9	30.0	28.0	2.0	3.8	2.5	1.3	1.2	100.0
Barking and Dagenham	16.3	1.1	15.1	27.5	24.8	2.7	6.0	4.1	1.9	0.7	100.0
Barnet	10.4	0.7	9.6	36.3	34.4	1.9	3.1	2.1	1.0	0.6	100.0

Bexley			10.6	0.9	9.8	33.8	31.3	2.5	5.4		
3.5	1.9	0.4	100.0								
Brent			15.1	1.0	14.2	30.9	28.7	2.2	3.3		
2.2	1.1	1.2	100.0								
Bromley			10.7	1.0	9.7	34.2	32.2	2.0	4.9		
3.1	1.8	0.4	100.0								
Croydon			14.6	1.1	13.5	30.4	28.0	2.4	4.6		
3.0	1.6	0.8	100.0								
Ealing			12.5	0.9	11.6	33.7	31.7	2.0	3.4		
2.3	1.1	0.8	100.0								
Enfield			12.3	0.8	11.5	33.3	31.1	2.2	4.0		
2.7	1.3	0.7	100.0								
Greenwich			19.3	1.5	17.8	24.8	22.6	2.3	5.3		
3.4	1.9	1.3	100.0								
Harrow			9.1	0.8	8.3	37.6	35.9	1.7	2.7		
1.7	1.0	1.1	100.0								
Havering			9.8	0.7	9.1	35.3	32.8	2.4	4.8		
3.0	1.7	0.4	100.0								
Hillingdon			11.5	0.9	10.6	33.8	31.4	2.4	4.4		
2.7	1.7	0.6	100.0								
Hounslow			12.6	0.1	11.6	32.8	30.4	2.4	4.3		
2.8	1.5	0.7	100.0								
Kingston upon Thames			9.0	0.8	8.2	36.5	34.4	2.1	4.3		
2.9	1.4	0.5	100.0								
Merton			11.2	1.0	10.2	33.8	31.7	2.1	4.7		
3.1	1.6	0.7	100.0								
Redbridge			10.5	0.9	9.6	36.0	33.9	2.0	3.2		
2.2	1.0	0.6	100.0								
Richmond upon Thames			8.0	0.8	7.1	37.6	35.7	1.9	4.3		
3.0	1.3	0.4	100.0								
Sutton			10.2	0.7	9.5	34.3	31.9	2.4	5.3		
3.5	1.9	0.4	100.0								
Waltham Forest			16.2	1.1	15.1	28.7	26.5	2.2	4.7		
3.2	1.4	0.9	100.0								
Inner London			**18.0**	**1.4**	**16.6**	**26.6**	**24.4**	**2.3**	**4.7**		
3.1	**1.7**	**1.3**	**100.0**								
Outer London			**12.3**	**0.9**	**11.3**	**33.1**	**30.9**	**2.2**	**4.3**		
2.8	**1.5**	**0.7**	**100.0**								
London			**14.4**	**1.1**	**13.3**	**30.7**	**28.5**	**2.2**	**4.4**		
2.9	**1.5**	**0.9**	**100.0**								

England   **11.5**   **1.0**   **10.4**   **32.8**   **29.7**   **3.1**   **5.5**
3.1   **2.4**   **0.5**   **100.0**

Source: Census 2001

Table 6 Number of index of multiple deprivation summary measures (IMD) at local authority level,[1] London 1998 – 2004

	Number of ranks <50: 1998	Number of ranks <50: 2000	Number of ranks <50: 2004
Inner London			
Camden	3	2	5
City of London	0	0	0
Hackney	3	6	6
Hammersmith and Fulham	3	0	1
Haringey	3	6	6
Islington	3	5	6
Kensington and Chelsea	2	0	0
Lambeth	3	4	5
Lewisham	3	3	3
Newham	3	6	5
Southwark	3	6	5
Tower Hamlets	3	6	6
Wandsworth	3	0	0
Westminster	2	0	3
Outer London			
Barking and Dagenham	2	2	3
Barnet	0	0	1
Bexley	0	0	0
Brent	3	2	2
Bromley	0	0	0
Croydon	0	2	2
Ealing	2	2	1
Enfield	0	1	2
Greenwich	3	5	4
Harrow	0	0	0
Havering	0	0	0
Hillingdon	0	0	0
Hounslow	0	0	0
Kingston upon Thames	0	0	0

Merton	0	0	0
Redbridge	0	0	0
Richmond upon Thames	0	0	0
Sutton	0	0	0
Waltham Forest	3	1	3

Source: Summary analysis by Data Management and Analysis Group (DMAG), GLA - based on Office of the Deputy Prime Minister (ODPM) Deprivation Indices

Table 7 Percentages of pupils known to be eligible for free school meals, by borough, 2002/03

	Maintained nursery and primary schools, %	Secondary schools, %
Inner London		
City of London	30.6	0.0
Camden	42.6	29.8
Hackney	40.8	41.7
Hammersmith and Fulham	43.3	32.8
Haringey	33.6	37.6
Islington	40.1	42.9
Kensington and Chelsea	38.1	28.2
Lambeth	36.8	36.7
Lewisham	28.2	29.6
Newham	33.2	43.1
Southwark	35.7	46.9
Tower Hamlets	52.7	62.0
Wandsworth	28.3	25.7
Westminster	38.5	34.6
Outer London		
Barking and Dagenham	19.0	24.2
Barnet	23.1	14.9
Bexley	13.2	9.7
Brent	27.3	23.0
Bromley	13.4	10.9
Croydon	27.3	18.8
Ealing	13.4	29.4
Enfield	23.4	19.3
Greenwich	34.9	29.1
Harrow	14.5	17.7
Havering	11.5	10.0
Hillingdon	15.0	15.1
Hounslow	21.9	18.9
Kingston upon Thames	7.3	8.8
Merton	13.6	16.2
Redbridge	16.0	14.5
Richmond upon Thames	9.7	16.2
Sutton	12.4	8.0
Waltham Forest	25.8	27.9
Inner London	**37.2**	**39.4**
Outer London	**19.0**	**17.3**
London	**25.7**	**24.0**
England	**16.8**	**14.5**

Source: Department for Education and Skills (DfES), Statistics of Education, Schools in England 2003

Table 8   Households with no adults in work, by borough, 2001

	Households with no adult in work (% of total)	Households with dependent children: percentage with no adult in work	Households with no dependent children: percentage with no adult in work
City of London	28.7	25.9	29.0
Barking and Dagenham	41.0	28.7	47.3
Barnet	31.2	16.9	37.6
Bexley	33.5	14.1	42.2
Brent	31.7	22.5	36.2
Bromley	33.3	13.9	41.3
Camden	34.9	29.7	36.3
Croydon	31.1	19.4	36.6
Ealing	30.0	19.2	34.8
Enfield	34.5	21.6	40.7
Greenwich	39.1	29.1	43.4
Hackney	39.3	35.6	40.9
Hammersmith and Fulham	32.2	27.8	33.4
Haringey	35.0	33.3	35.8
Harrow	30.9	14.4	39.1
Havering	35.6	13.5	44.9
Hillingdon	31.2	15.5	38.5
Hounslow	29.4	18.9	34.3
Islington	37.8	36.9	38.1
Kensington and Chelsea	33.2	22.3	35.8
Kingston upon Thames	28.4	11.7	35.0
Lambeth	32.0	29.7	32.8
Lewisham	33.5	26.9	36.4
Merton	28.7	15.6	33.9
Newham	40.3	34.9	43.5
Redbridge	32.8	17.2	40.6
Richmond upon Thames	27.6	10.3	33.8
Southwark	35.4	29.7	37.7
Sutton	29.8	13.2	36.9
Tower Hamlets	38.7	41.5	37.6

Waltham Forest	33.9	25.8	37.5
Wandsworth	26.9	21.2	28.6
Westminster	34.2	27.8	35.5
Inner London	**34.6**	**30.8**	**35.9**
Outer London	**32.3**	**18.2**	**38.6**
Greater London	**33.2**	**22.8**	**37.5**
England	**35.7**	**16.4**	**43.8**
England and Wales	**36.1**	**16.6**	**44.2**

Source: 2001 Census Key Statistics KS21

Table 9   Infant mortality rates,[2] the London boroughs, 2002

	Infant mortality rate
London	**5.5**
Inner London	**6.0**
Camden	6.3
Hackney & City of London	9.3
Hammersmith and Fulham	4.3
Haringey	5.1
Islington	4.4
Kensington and Chelsea	3.7
Lambeth	7.5
Lewisham	5.5
Newham	7.1
Southwark	7.2
Tower Hamlets	6.0
Wandsworth	2.7
Westminster	6.3
Outer London	**5.1**
Barking and Dagenham	4.5
Barnet	3.8
Bexley	3.6
Brent	11.1
Bromley	4.1
Croydon	7.1
Ealing	7.2
Enfield	3.8
Greenwich	6.9
Harrow	4.7
Havering	6.6
Hillingdon	3.9
Hounslow	1.5
Kingston upon Thames	2.8
Merton	3.2

Redbridge	5.3
Richmond upon Thames	3.3
Sutton	5.2
Waltham Forest	4.5

Table 10   Under-18 conception rates,[3] the London boroughs, 2002

conception	1998 conception rate	1999 conception rate	2000 conception rate	2001 conception rate	2002 conception rate
London	**51.0**	**51.5**	**50.8**	**50.1**	**52.0**
Inner London	**67.1**	**67.4**	**67.7**	**65.6**	**67.4**
Camden	52.9	54.2	49.2	45.0	50.4
Hackney & City of London	74.4	79.6	80.3	76.2	73.9
Hammersmith and Fulham	74.1	83.9	63.8	62.2	64.7
Haringey	58.7	62.8	73.1	72.7	78.1
Islington	58.8	60.7	64.2	63.6	62.9
Kensington and Chelsea	49.1	42.6	51.4	46.6	43.9
Lambeth	90.8	90.7	89.8	90.8	100.4
Lewisham	77.4	77.2	68.6	65.1	74.2
Newham	56.2	54.1	55.6	57.2	56.2
Southwark	83.1	82.8	83.6	85.9	86.0
Tower Hamlets	53.6	44.7	48.3	54.5	45.6
Wandsworth	70.3	71.2	70.8	59.2	60.7
Westminster	57.6	60.8	72.5	45.5	53.1
Outer London	**41.9**	**42.7**	**41.5**	**41.5**	**43.4**
Barking and Dagenham	51.7	59.2	66.1	63.1	72.9
Barnet	25.5	30.6	28.7	25.2	32.0
Bexley	38.2	43.8	35.2	43.8	40.2
Brent	44.7	50.0	53.5	47.1	52.4
Bromley	32.5	34.2	35.1	33.3	34.6
Croydon	58.2	58.5	56.0	52.6	58.9
Ealing	43.9	39.3	40.7	37.8	35.0
Enfield	42.1	41.8	42.7	48.0	55.7
Greenwich	65.3	75.1	57.2	67.8	62.7
Harrow	26.2	27.4	21.3	24.1	27.9
Havering	41.3	36.6	38.0	32.2	35.6
Hillingdon	45.7	43.8	41.7	43.2	45.7
Hounslow	48.6	51.9	43.5	42.2	39.6

Kingston upon Thames	31.9	29.7	32.4	28.1	28.4
Merton	50.5	39.2	46.5	44.9	41.1
Redbridge	24.9	26.8	25.3	34.7	32.5
Richmond upon Thames	27.0	21.0	23.3	21.2	26.3
Sutton	38.2	33.2	35.6	35.1	33.6
Waltham Forest	52.9	53.7	56.6	55.4	57.4

Source: ONS, adapted from table published by the Government Teenage Pregnancy Unit

Table 11   London strategic parks, by borough

	Total area (hectares)	Total area per 1,000 children (under-18)
Barking and Dagenham	321.74	0.19
Barnet	691.66	2.16
Bexley	743.19	3.40
Brent	278.91	1.03
Bromley	705.03	2.38
Camden	322.57	1.59
City of London	0	0.00
Croydon	965.01	2.88
Ealing	449.78	1.46
Enfield	618.76	2.23
Greenwich	611.79	2.81
Hackney	104.16	0.50
Hammersmith and Fulham	76.56	0.45
Haringey	329.75	1.49
Harrow	331.29	1.57
Havering	1643.4	7.31
Hillingdon	927.24	3.77
Hounslow	1178.24	5.44
Islington	0	0.00
Kensington and Chelsea	20.84	0.13
Kingston-upon-Thames	75.18	0.50
Lambeth	93.47	0.34
Lewisham	203.33	0.80
Merton	809.68	4.23
Newham	55.39	0.22
Redbridge	1068.4	4.41
Richmond-upon-Thames	1941.27	11.12
Southwark	3874.74	15.43
Sutton	393.3	2.17
Tower Hamlets	136.32	0.68

Waltham Forest	2037.85	9.16
Wandsworth	530.06	1.98
City of Westminster	474.12	2.54
Greater London	3571.65	0.49

Source: GLA

Table 12 Youth service spending and % of young people reached, 2002/03

	% of 13-19 year olds reached		Youth service share of education budget		Spending per head on 13-19 year olds	
	rank	% reached	% share	National rank	£ spent	National rank
	(out of 138)		(out of 130)			(out of 129)
City of London	-	-	-	-	-	-
Inner London						
Camden	35	30	1.86	12	139.11	8
Hackney	-	-	-	-	-	-
Hammersmith and Fulham	88	19.76	0.99	84	86.81	29
Haringey	-	-	-	-	-	-
Islington	16	39.32	2.09	5	223.14	1
Kensington and Chelsea	55	25.44	2.91	1	211.08	2
Lambeth	-	-	-	-	-	-
Lewisham	-	-	-	-	103.72	14
Newham	18	38.69	1.32	46	100.96	15
Southwark	83	20.16	2.00	9	157.93	6
Tower Hamlets	97	18.13	1.50	25	163.54	5
Wandsworth	93	18.70	2.37	2	178.94	3
Westminster	70	21.19	2.02	8	171.81	4
Outer London						
Barking and Dagenham	-	-	-	-	60.75	-

82	19.95		86		
Barnet		0.66		125	45.03
118	5.77		129		
Bexley		1.26		53	85.13
33	10.43		124		
Brent		-		-	37.10
135	19.94		87		
Bromley		1.01		82	64.97
72	-		-		
Croydon		1.37		39	76.53
46	34.19		25		
Ealing		0.86		103	56.52
94	-		-		
Enfield		-		-	43.96
121	8.39		128		
Greenwich		-		-	131.11
9	28.80		42		
Harrow		0.76		117	41.77
128	13.23		115		
Havering		1.14		65	63.88
77	41.48		9		
Hillingdon		0.87		100	71.86
59	8.59		127		
Hounslow		0.60		128	43.39
123	17.10		101		
Kingston upon Thames		1.12		67	69.77
63	17.54		98		
Merton		0.67		123	44.70
120	15.00		110		
Redbridge		-		-	89.96
24	20.49		79		
Richmond upon Thames		1.04		75	57.52
88	39.55		15		
Sutton		1.11		69	88.75
25	56.41		2		
Waltham Forest		1.03		77	86.22
30	16.23		106		

Source: data supplied by the National Youth Agency

Table 13 Number and percentages of pupils whose first language is known or believed to be other than English, January 2004 (provisional data)

	Primary		Secondary	
pupils	Number of pupils	% of all pupils	Number of pupils	% of all
Inner London				
City of London	-	-	-	-
Camden	4,700	53.2	3,700	38.0
Hackney	7,300	53.6	3,600	49.4
Hammersmith and Fulham	3,000	41.0	2,500	35.3
Haringey	8,600	51.5	5,300	46.9
Islington	4,600	40.1	3,500	44.6
Kensington and Chelsea	2,700	49.4	1,500	41.7
Lambeth	6,800	45.3	2,900	37.7
Lewisham	5,000	29.2	2,700	23.4
Newham	15,900	67.7	10,700	59.1
Southwark	7,100	39.1	4,200	42.1
Tower Hamlets	12,200	73.9	7,900	61.2
Wandsworth	4,500	34.8	3,400	32.7
Westminster	5,600	67.6	4,700	55.4
Outer London				
Barking and Dagenham	2,400	16.8	2,700	22.1
Barnet	7,100	34.6	6,900	32.6
Bexley	1,300	7.4	1,400	7.7
Brent	9,400	53.5	8,300	52.0
Bromley	1,100	5.2	1,300	5.7
Croydon	4,600	19.2	3,200	17.3
Ealing	9,900	49.8	7,300	48.6
Enfield	7,600	35.5	6,800	31.4
Greenwich	4,400	27.3	3,500	24.5
Harrow	7,000	43.4	3,800	42.4
Havering	600	3.4	600	3.6
Hillingdon	4,300	23.6	3,800	21.4
Hounslow	6,500	44.9	7,200	43.3

Kingston upon Thames	1,800	20.6	1,700	18.6
Merton	2,700	26.1	1,800	20.6
Redbridge	8,300	45.1	8,700	43.3
Richmond upon Thames	1,300	13.3	800	11.5
Sutton	1,000	8.7	1,600	10.1
Waltham Forest	6,300	37.4	4,300	30.8
Inner London	**87,800**	**50.3**	**56,700**	**44.9**
Outer London	**87,500**	**28.0**	**75,700**	**25.7**
London	**175.300**	**36.0**	**132,300**	**31.5**
England	**377,700**	**11.0**	**300,800**	**9.1**

Table 14 Key Stage 1 - 2 and 2 - 3 value-added measures[4] in London LEAs, 2003

	Value-added measure – Key Stage 1-2	Value-added measure – Key Stage 2-3
City of London	101.6	-
Inner London	**100.3**	**99.0**
Camden	100.1	99.1
Hackney	99.9	99.3
Hammersmith and Fulham	100.8	98.9
Haringey	99.9	99.5
Islington	100.2	98.7
Kensington and Chelsea	101.1	99.3
Lambeth	100.4	99.4
Lewisham	100.3	99.5
Newham	100.6	99.0
Southwark	99.5	98.9
Tower Hamlets	100.3	97.9
Wandsworth	100.1	99.6
Westminster	100.9	98.6
Outer London	**100.3**	**99.7**
Barking and Dagenham	100.2	98.2
Barnet	100.6	100.2
Bexley	99.8	99.7
Brent	100.1	100.0
Bromley	100.2	99.8
Croydon	100.1	99.6
Ealing	100.3	100.0
Enfield	100.5	100.0
Greenwich	100.3	99.5
Harrow	100.5	100.2
Havering	100.2	99.5
Hillingdon	100.5	98.9
Hounslow	100.8	99.3
Kingston upon Thames	100.6	101.0

Merton	99.8	99.6
Redbridge	100.3	100.4
Richmond upon Thames	100.4	99.3
Sutton	99.9	100.4
Waltham Forest	100.1	99.8
England	**99.9**	**99.9**

Source: adapted from DfES: Key Stage 1 to Key Stage 2 value-added measures for 11 year-olds in England

Table 15   GCSE/GNVQ achievement, and Key Stage 3 to GCSE/GNVQ value-added measures[5] in maintained schools, London LEAs and England, 2002/03

	Average passes GCSE/GNVQ	Average KS3 - GCSE/GNVQ value-added measure	% of 15 year-olds achieving 5+ A*-C passes GCSE/GNVQ	% of 15 year-olds achieving 5+ A*-G passes GCSE/GNVQ	% of 15 year-olds achieving no passes GCSE/GNVQ
Inner London	**5.0**	**101.9**	**43.7**	**87.7**	
Camden	4.8	101.0	49.9	89.6	
Hackney	5.1	103.0	39.2	89.0	
Hammersmith and Fulham	3.7	100.8	51.6	89.3	
Haringey	9.8	101.9	39.0	82.0	
Islington	5.1	101.7	38.6	84.1	
Kensington and Chelsea	5.6	101.0	56.0	89.1	
Lambeth	4.0	102.7	41.7	88.3	
Lewisham	5.2	100.8	39.4	87.9	
Newham	2.0	103.0	45.8	93.2	
Southwark	5.2	102.8	40.0	86.1	
Tower Hamlets	3.9	103.8	42.7	89.3	
Wandsworth	7.2	99.8	49.8	82.2	
Westminster	4.9	100.0	44.3	86.9	
Outer London	**4.5**	**100.3**	**53.9**	**90.5**	
Barking and Dagenham	5.1	99.3	49.3	90.5	

Area				
Barnet	59.8	90.6	4.9	100.4
Bexley	54.2	92.6	3.4	99.2
Brent	50.7	89.7	4.1	101.3
Bromley	58.9	91.9	3.5	99.2
Croydon	48.5	88.8	4.6	99.8
Ealing	54,3	92.8	3.4	102.6
Enfield	48.5	90.3	4.5	100.6
Greenwich	35.7	85.7	6.5	99.9
Harrow	57.8	90.6	4.3	101.0
Havering	60.8	93.7	3.2	100.1
Hillingdon	47.6	87.0	6.4	98.8
Hounslow	52.0	89.8	4.9	100.0
Kingston upon Thames	67.0	91.3	5.1	100.6
Merton	45.5	84.2	7.8	98.6
Redbridge	65.6	94.8	2.2	102.3
Richmond upon Thames	56.8	91.1	3.4	99.7
Sutton	64.9	92.1	3.6	100.2
Waltham Forest	45.5	88.8	6.4	101.3
London	**50.7**	**89.6**	**4.6**	**100.8**
England	**51.1**	**89.4**	**5.0**	**99.1**

Source: DfES, GCSE/GNVQ achievement, and Key Stage 3 to GCSE/GNVQ value-added measures for young people in England, 2002/03

Table 16 Maintained primary, secondary and special schools, permanent exclusions by ethnic group, 2002/03 (provisional estimates)

	Number of permanent exclusions	Percentage of permanent exclusions	Percentage of school population
White	**6.880**	**74**	**0.12**
White British	6,690	72	0.12
Irish	30	0	0.10
Traveller of Irish heritage	20	0	0.51
Gypsy/Roma	20	0	0.36
Any other white background	130	1	0.09
Mixed	**380**	**4**	**0.22**
White and black Caribbean	180	2	0.29
White and black African	40	0	0.26
White and Asian	40	0	0.11
Any other mixed background	120	1	0.20
Asian	**250**	**3**	**0.06**
Indian	50	1	0.03
Pakistani	130	1	0.08
Bangladeshi	40	0	0.06
Any other Asian background	20	0	0.04
Black	**590**	**6**	**0.25**
Black Caribbean	360	4	0.37
Black African	130	1	0.12
Any other black background	90	1	0.32
Chinese	**-**	**0**	**0.02**
Any other ethnic group	70	1	0.12
Unclassified	1,110	12	-
All pupils	**9,270**	**100**	**0.13**

Source: DfES, Permanent Exclusions from schools and exclusion appeals, England 2002/03

**Table 17   Percentages of pupils with special educational needs, maintained primary and
secondary schools, January 2003**

	Primary			Secondary		
	SEN pupils with statements (%)	SEN pupils without statements (%)	Total SEN (%)	SEN pupils with statements (%)	SEN pupils without statements (%)	Total SEN (%)
Inner London	3.1	19.5	22.5	1.8	19.2	20.9
Camden	3.5	17.6	21.1	2.0	19.6	21.6
Hackney	2.4	23.0	25.4	1.8	24.6	26.5
Hammersmith and Fulham	2.4	15.9	18.4	2.8	22.9	25.7
Haringey	2.3	23.8	26.1	1.7	18.6	20.3
Islington	3.3	22.1	25.5	1.4	21.0	22.4
Kensington and Chelsea	2.5	17.9	20.5	1.7	14.9	16.6
Lambeth	2.6	21.0	23.7	1.6	21.4	23.0
Lewisham	3.2	16.8	20.0	1.4	20.4	21.8
Newham	3.6	19.6	23.2	1.2	14.1	15.3
Southwark	3.2	24.4	27.6	2.2	18.9	21.0
Tower Hamlets	4.1	15.0	19.1	2.3	15.9	18.2
Wandsworth	2.5	20.9	23.4	1.7	21.5	23.2
Westminster	2.9	15.1	18.0	1.9	19.0	20.9

Area					
Outer London	1.7	16.6	18.3		
	2.3	14.4	16.7		
Barking and Dagenham	2.0	13.3	15.2		
	2.8	14.6	17.4		
Barnet	1.9	20.2	22.2		
	2.6	15.9	18.4		
Bexley	2.0	16.2	18.2		
	1.9	12.1	14.0		
Brent	1.4	22.0	23.3		
	2.5	13.6	16.1		
Bromley	2.7	14.7	17.4		
	2.6	11.9	14.5		
Croydon	1.0	16.0	17.0		
	1.3	14.2	15.6		
Ealing	1.3	16.0	17.4		
	2.1	20.8	22.9		
Enfield	1.3	16.4	17.7		
	2.0	17.4	19.4		
Greenwich	2.0	22.1	24.1		
	3.6	22.0	25.6		
Harrow	2.0	17.1	19.1		
	3.0	17.5	20.4		
Havering	1.6	10.5	12.1		
	2.6	7.5	10.1		
Hillingdon	1.5	14.3	15.7		
	2.6	10.0	12.6		
Hounslow	2.0	20.0	22.0		
	2.6	17.4	20.0		
Kingston upon Thames	1.3	14.3	15.6		
	1.3	12.3	13.5		
Merton	2.0	16.7	18.6		
	3.0	16.9	19.9		
Redbridge	1.4	12.7	14.1		
	1.6	11.7	13.2		
Richmond upon Thames	1.7	11.7	13.4		
	3.4	12.6	16.0		
Sutton	2.0	15.2	17.2		
	2.0	7.7	9.7		
Waltham Forest	1.5	23.2	24.6		
	2.5	20.5	23.1		

London	**1.7**	**17.6**	**19.3**	
2.6	**15.9**	**18.5**		
England	**1.6**	**15.9**	**17.5**	
2.4	**13.0**	**15.4**		

Source: DfES, Statistics of Education, Special Educational Needs, January 2003

Table 18 Child pedestrian casualty severity ratios,[6] London LEAs, 2003

	Casualty severity ratio	Fatal	Serious	Slight	Total
City of London	-	**0**	**0**	**2**	**2**
Inner London					
Camden	31.2	0	10	22	32
Hackney	16.4	0	10	51	61
Hammersmith and Fulham	11.5	0	3	23	26
Haringey	22	1	12	46	59
Islington	19.6	1	8	37	46
Kensington and Chelsea	12.5	0	3	21	24
Lambeth	13.7	0	13	82	95
Lewisham	12.6	0	11	76	87
Newham	14.5	0	11	65	76
Southwark	14.8	0	11	69	81
Tower Hamlets	18.7	0	9	39	48
Wandsworth	26.3	0	15	42	57
Westminster	18.2	0	8	36	44
Outer London					
Barking and Dagenham	17.5	1	6	33	40
Barnet	28.6	1	15	40	56
Bexley	29.3	0	12	29	41
Brent	21.9	0	14	50	64
Bromley	7.8	0	4	47	51
Croydon	27.9	0	19	49	68
Ealing	11.3	1	7	63	71
Enfield	14	0	8	49	57
Greenwich	20	0	12	48	60
Harrow	36.4	1	11	21	33
Havering	15.5	0	7	38	45
Hillingdon	5.5	0	2	34	36
Hounslow	16.3	0	8	41	49
Kingston upon Thames	33.3	0	6	12	18

Merton	37.8	0	14	23	37
Redbridge	27.7	0	13	34	47
Richmond upon Thames	34.8	0	8	15	23
Sutton	42.3	1	14	20	35
Waltham Forest	18.2	0	12	54	66
London	**19.8**	**8**	**316**	**1311**	**1635**

Source: London Road Safety Unit, 2003

Table 19 Rates[7] of registered childcare in London, 30th September 2003

	Out of school day care		Childminders		Full-day care		Crèche day care		Sessional day care	
	Places	Rate	Places	Rate	Places	Rate	Places	Rate	Places	Rate
City of London	80	8.3	10	71	300	12.0	0	2.8	30	-
Inner London										
Camden	1,700	2.2	700	27	2,200	18.8	100	3.9	400	0.6
Hackney	500	1.6	700	5.9	1,900	11.3	30	2.8	400	0.4
Hammersmith and Fulham	700	2.0	500	13.8	1,900	18.7	300	3.3	300	2.0
Haringey	500	2.6	900	6.1	1,300	8.8	70	3.9	600	0.3
Islington	1,100	2.3	900	18.4	2,500	22.5	100	5.3	400	0.6
Kensington and Chelsea	1,400	4.8	200	29.3	1,600	16.1	200	1.4	700	1.4
Lambeth	1,400	1.8	1,000	14.8	3,100	17.2	200	3.6	500	0.7
Lewisham	1,500	2.9	1,400	15.4	2,300	12.9	200	5.1	800	0.7
Newham	1,400	0.9	1,100	11.8	1,700	8.2	300	3.4	300	0.9
Southwark	3,100	1.5	1,100	32.6	2,800	16.1	100	4.1	400	0.4
Tower Hamlets	1,000	1.7	300	12.3	1,800	11.9	70	1.3	400	0.3
Wandsworth	3,600	4.0	1,000	44.7	3,500	21.0	200	4.0	1,000	0.8
Westminster	1,200	4.3	300	26.3	1,800	19.2	80	2.2	600	0.6
Outer London										
Barking and Dagenham	600	3.5	900	8.0	600	4.8	200	4.5	700	1.0

Name										
Barnet	1,600	4.9	2,300	11.4	1,300	4.0	2,700	21.7	60	0.5
Bexley	2,000	9.1	800	6.0	1,400	6.4	600	6.9	200	0.9
Brent	1,200	4.6	2,200	13.5	600	2.3	1,100	11.4	100	0.4
Bromley	2,200	7.4	1,600	8.6	3,200	10.8	1,600	14.6	200	0.7
Croydon	2,400	6.6	3,100	13.7	1,400	3.9	2,400	17.7	100	0.3
Ealing	2,100	6.9	2,400	12.5	800	2.6	1,700	15.2	400	1.3
Enfield	1,600	5.5	1,500	8.3	1,400	4.8	1,300	11.8	100	0.3
Greenwich	1,800	7.5	1,300	8.4	700	2.9	1,800	21.3	300	1.3
Harrow	1,100	5.6	1,000	8.3	1,400	7.1	1,100	14.5	60	0.3
Havering	1,200	5.7	900	7.2	1,700	8.1	600	7.0	100	0.5
Hillingdon	2,300	8.9	2,000	12.4	900	3.5	800	8.2	200	0.8
Hounslow	800	3.6	1,400	9.9	600	2.7	1,600	19.9	90	0.4
Kingston upon Thames	1,100	7.7	1,000	10.9	900	6.3	1,200	23.5	200	1.4
Merton	1,300	6.7	1,400	11.0	500	2.6	1,500	22.5	200	1.0
Redbridge	1,500	5.9	1,700	10.8	1,200	4.7	1,000	10.5	90	0.4
Richmond upon Thames	1,200	6.7	1,900	16.1	1,500	8.4	1,700	28.4	100	0.6
Sutton	1,400	7.4	1,400	12.0	900	4.8	700	9.6	100	0.5
Waltham Forest	1,200	5.0	2,200	14.2	800	3.3	2,200	25.5	100	0.4
Inner London	10,010	3.5	28,700	15.1	7,100	2.4	19180	19.1	1950	0.7
Outer London	29,000	6.3	30,700	10.7	21,630	4.7	26200	15.4	2900	0.6

London		39010	5.2	59,400	12.4	28730		
3.8	45,380	16.7	4850			0.7		
England		309000	6.5	420,600	14.4	277,500		
5.8	309,900	16.9			44900	0.7		

Source: analysis of figures from Ofsted

Table 20 Number and rates[8] of children looked after,[9] 2001 - 2003

	Numbers			Rates		
	2001	**2002**	**2003**	**2001**	**2002**	**2003**
City of London	-	5	5	-	81	78
Inner London						
Camden	315	355	345	86	95	92
Hackney	495	460	455	94	87	86
Hammersmith and Fulham	395	435	390	134	143	127
Haringey	460	465	520	91	93	104
Islington	530	485	480	146	135	135
Kensington and Chelsea	235	240	240	91	88	86
Lambeth	775	710	645	134	126	116
Lewisham	545	550	565	93	94	98
Newham	480	550	675	66	77	95
Southwark	655	655	680	118	119	124
Tower Hamlets	270	330	330	53	66	66
Wandsworth	365	365	365	79	78	78
Westminster	265	285	305	99	103	111
Outer London						
Barking and Dagenham	285	350	385	67	82	90
Barnet	285	330	380	40	46	53
Bexley	205	225	230	40	44	45
Brent	320	360	355	53	61	61
Bromley	295	325	310	46	50	47
Croydon	480	575	680	59	71	84
Ealing	410	380	410	61	56	62
Enfield	275	300	310	42	46	48
Greenwich	510	540	555	98	104	106
Harrow	180	165	160	38	35	33
Havering	150	160	165	30	32	33
Hillingdon	420	420	460	72	72	80
Hounslow	320	340	320	65	69	66
Kingston upon Thames	95	80	85	31	26	27
Merton	180	200	175	44	49	43

Redbridge	140	175	150	24	31	26
Richmond upon Thames	110	125	115	32	35	33
Sutton	155	150	165	38	35	39
Waltham Forest	295	300	340	55	57	66

Source: DfES, Children looked after at 31st March 2001 - 2003

Table 21 Children living in overcrowded households,[10] 2001 Census

	All dependent children (number)	Children in overcrowded households (number)	% of children overcrowded
City of London	694	256	37
Inner London			
Camden	36,683	15,502	42
Hackney	52,771	24,163	46
Hammersmith and Fulham	30,049	11,845	39
Haringey	49,769	18,541	37
Islington	35,772	15,339	43
Kensington and Chelsea	27,224	10,284	38
Lambeth	56,328	20,198	36
Lewisham	58,279	17,515	30
Newham	71,557	33,756	47
Southwark	54.630	24,313	45
Tower Hamlets	50,248	31,562	63
Wandsworth	46,656	12,552	27
Westminster	27,040	11,886	44
Outer London			
Barking and Dagenham	42,092	11,153	26
Barnet	72,457	13,733	19
Bexley	51,069	5,572	11
Brent	60,006	22,991	38
Bromley	65,829	6,257	10
Croydon	80,641	14,089	17
Ealing	67,953	21,779	32
Enfield	65,430	16,021	24
Greenwich	51,457	12,806	25
Harrow	48,010	9,954	21
Havering	49,840	5,575	11
Hillingdon	57,099	11,243	20
Hounslow	49,274	13,699	28
Kingston upon Thames	31,435	4,239	13

Merton	40,841	8,375	21
Redbridge	57,967	11,964	21
Richmond upon Thames	35,881	3,365	9
Sutton	41,846	5,459	13
Waltham Forest	52,206	15,718	30
Inner London	**597,650**	**247,712**	**42**
Outer London	**1,021,333**	**213,992**	**21**
London	**1,618,893**	**461,704**	**29**
England	**11,006,702**	**1,375,593**	**13**

Notes

1 Where an authority is ranked at less than 50 this means that this authority is amongst the 50 most deprived authorities in the country on that particular summary measure. This means that boroughs with the highest number of ranks of less than 50 are the most deprived. Note that in 1998, three summary measures were produced. In 2000 and 2004 there were six summary measures, so for example Hackney was among the 50 most deprived local authorities in England according to all the summary measures produced for all years.

2 Deaths to children under 1 year, per 1,000 live births.

3 Rates are per 1,000 female population aged 15 - 17.

4 Key Stage 1 - 2 and 2 - 3 value-added measures are measures of the progress pupils make between Key Stages 1 and 2, and 2 and 3. A pupil's value-added score for Key Stage 1 - 2 is calculated by comparing their KS2 results with the national median KS2 attainment of pupils with the same (or similar) KS1 attainment. A pupil's value-added score for Key Stage 2 - 3 is calculated by comparing their KS3 results with the national median KS3 attainment of pupils with the same (or similar) KS2 attainment. The value-added measure is the average of pupil's value added scores, added to 100.

5 The KS3 - GCSE/GNVQ value-added measure is a measure of the progress pupils make between Key Stage 3 and GCSE/GNVQ. A pupil's value-added score is calculated by comparing their GCSE/GNVQ results with the national median GCSE/GNVQ attainment of pupils with the same or similar Key Stage 3 attainment. The value-added measure is the average of pupils' value-added scores, added to 100.

6 The percentage of fatal and serious injuries to all injuries.

7 Rates are provided on number of places per 100 children aged under-8 for childminders, sessional day care and crèche day care, per 100 children under-5 for full-day care (which includes day nurseries, children's centres and some family centres), and per 100 children aged 5 - 7 for out-of-school care.

8 Per 10,000 children aged under-18.

9 The term 'looked after' refers, under the Children Act (1989), to all children subject to a care order or provided with accommodation on a voluntary basis for more than 24 hours.

10 All children included in the Census living in households with an occupancy rating of -1, or less, implying at least one room too few according to set criteria.