

20's Plenty



Where People Live



PERCEPTIONS AND REALITIES
A CLOSER LOOK AT THE RISKS WHICH CHILDREN AND
YOUNG PEOPLE FACE IN BRITAIN TODAY
AND WHAT WE CAN DO TO REDUCE THEM

PERCEPTIONS AND REALITIES

Our perceptions about risks to children have led to policies focused primarily on preventing violent assault. In reality children are far more likely to come to harm on the road.

28 children and young people are killed or seriously injured on British roads every day.

Summary and Recommendations

Failing to protect the well-being of children and young people is both costly and morally unacceptable. The biggest non-natural killers of children and young people are road-traffic accidents. Yet policy direction has been greatly influenced by the shocking nature of a small number of violent assaults and abuse cases. This has skewed our perceptions of risk, which in turn have further influenced policy direction on child safeguarding and well-being.

- Many factors, such as age, gender and socio-economic context, significantly impact on the risk of non-natural death and injury faced by children and young people in the UK. The strategies which are deployed to prevent violent and malicious harm take careful account of these risk factors – but these strategies rarely look at the wider risks to children, particularly those faced on the road
- The argument to reduce the occurrence of non-natural death and injury is not simply ethically, socially and emotionally driven but also an economically sound policy area that will deliver real cost savings. The value of prevention of road death and serious injury of people aged 0-25 alone was estimated to be over £3 billion in 2008.¹
- In reality, although neglect and abuse are horrific, the risk of violent abuse has considerably reduced as a result of significant improvements in the social service system. As the numbers of children at risk of violent death falls, it is important that evidence is central to policy directions moving forward.
- Evidence must lead decision making and guide policy interventions which aim to improve the well-being of children and young people.
- The links between prevalence of non-natural death and other factors such as age, gender and socio-economic context are sufficiently important that a preventative and joined-up approach should be taken to alleviate conditions rather than treat symptoms.
- More research looking into the links between varying causes of non-natural death and the latent conditions which encourage them with the aim of identifying potential preventative and where suitable joined-up policy approaches should be commissioned by government.
- Government should consider changes in the allocation of resources to ensure that spending is based on need and is as effective as possible.
- We need to protect but not restrict children and young people.
- Local and National Government must take a holistic approach to preventing non-natural death and injury among children and young people.
- Spending decisions should be based on the most effective resource allocation which will contribute to life saving and injury prevention objectives.
- Effectiveness of spending on child injury prevention should be improved by making evidence-led decisions which maximise the efficiency of the work force and which identify the potential for synergy across policy areas.

¹ <http://www.dft.gov.uk/pgr/statistics/datatablespublications/accidents/casualtiesgbar/>



“In today’s economic climate it is vital that we get the best possible value out of every pound spent. We have to rely on an evidence-led approach to protecting our children and young people and ensure that where appropriate a joined-up approach is taken to prevent death and injury. The risk of death and injury to children and young people is an area which has been subject to a divergence between perceptions and reality – this report shows us the importance of bridging that gap.”

Barry Sheerman MP – Chair of PACTS trustees and former chair of the Children, Schools and Families Committee

Context

- The new government has placed budget deficit reduction at the top of its priority list, highlighting that in 2009 the Public Sector Net Borrowing forecast was the largest in Britain's peacetime history. Over the course of this parliament, the government is committed to accelerating the reduction of the deficit largely through reductions in spending rather than increased taxation.²The Treasury has begun to consult on a spending review which is expected to be completed in the autumn.
- Local government will be expected to be more efficient with less funding. The reduction of ring-fencing is intended to allow local objectives to be worked towards in a more efficient manner with spending going where it is really needed. Although local self-determination and more relevant use of funding offer great potential, there are accompanying risks.
- Local government, like national government, is subject to great levels of disparity in terms of conditions, competence, effectiveness and influence. In today’s conditions, it is important that spending decisions are as effective as possible based on their outcomes. Here we review the evidence around the protection of children and young people from risk of death and injury.

Definitions and Clarifications

- The term ‘children’ means different things in different government departments, and by association, in different areas of policy. ‘Young people’ are rarely given specific definition or considered as a specific group. The transparency of these definitions must be improved and should be led by evidence showing a requirement for policy intervention. The following age group definitions have been deemed relevant for this briefing:
 - 1) Children: 0-16
 - 2) Young people: 17-25
- Within these two wide groups there will undoubtedly be a number of sub-groups which will have relevance in terms of health outcomes and the policy approach which is appropriate.

² http://www.hm-treasury.gov.uk/d/spending_review_framework_080610.pdf

However, for high-level policy analysis such as this, the associated independence of the transition from 16 to 17 is a useful break which proves statistically significant.

- Using mortality statistics is not a perfect science. However, in the lack of comparable data sets surrounding injury and other measures of risk, this briefing relies on the social science approach outlined by Durkheim which showed that patterns of mortality are a mirror of what is happening in a society.³
- Non-natural death is death which is not a result of disease or old age but rather the result of external factors such as violence or as a result of an accident.
- Accident is an undesirable term. In road safety, the difficulty is that a road traffic 'accident' implies no person is at fault. Alternatives could be 'preventable' or 'avoidable' but these terms do not necessarily exempt the frequently preventable diseases which arise as a result of obesity or carbon emissions. Non-natural cannot be used as a synonym for accident as it includes wider causes such as violent and self harm deaths.

"Children and young people growing up today are in many respects safer than they have ever been. Yet tragedies continue to happen, destroying the lives of thousands of children and families each year. The world is not risk-free, and we cannot make it so even if we wanted to. What is more, we know that for the foreseeable future, we will have fewer resources than in the past to devote to keeping children reasonably safe and improving their life chances. So which risks should government focus on, and which children should be the priority?"

It may be hard to reach agreement on these questions. But the one thing everyone can surely agree on is that we need to be more thoughtful about how we manage risk in childhood. We need an approach that is less influenced by emotion, and more strongly grounded in facts and evidence. Good data is not the end of the matter - hard decisions still have to be made. But until we learn to shift our eyes beyond the glare of individual tragic events and look at the wider picture, we will continue to waste time and money, and children will continue to die needlessly."

Tim Gill: Writer on childhood and author of *No Fear: Growing up in a risk averse society*

The Perception

- Child abuse, assault and homicide are high profile issues. The intent associated with each is intolerable and generates extreme public and media interest.
- Common perception would suggest that our children were at very high risk of abuse and assault.

The Reality

- In reality, statistics surrounding child death highlight a divergence between perceptions and actual levels of risk. Having had the fourth-highest figures for child killings in the Western

³ Durkheim E. 1968. *Le Suicide*. Translated by JA Simpson and C Simpson. Routledge, Kegan, Paul: London.

world 30 years ago, we now have the third lowest.⁴ Our system has been improved to the extent that our children and young people are at little risk of violent death by assault.

- Despite low levels of risk, the difficult nature of intentional harm to children has resulted in high levels of public and media interest in a number of well-known cases which have heightened societal fear and encouraged significant political attention and policy actions.
- However intolerable child homicide is, the success story should be noted and systematic improvements recognised.
- As the numbers get lower, it is vital that an evidence-led approach is taken to improve the well-being of children and young people. This will require a three-pronged approach:
 - 1) Using the evidence to identify the highest risk activities and locations and ensure they are treated in such a way that prevents death and injury.
 - 2) Using statistics to identify correlation between causes of death and injury to children and young people.
 - 3) Analysis of data to identify the latent conditions which cause children and young people to be at higher risk of a range of causes of death and injury.

The Statistics – How Children and Young People Die

- Excluding deaths from all causes of those under 28 days, 5,114 children and young people under 25 died in 2008.
- 89 of those deaths were classed as assault and 307 deaths among children and young people were the result of intentional self-harm.
- 1,214 deaths were classed as ‘accidental’, of which 764 took place on the road. Road Traffic Accidents (RTA) were the dominant cause of non-natural death among children and young people.

Characteristics of ‘Non-Natural’ Death among Children and Young People

Socio-demographic Conditions:

- There are strong links made within the individual fields of road safety^{5,6,7}, suicide prevention^{8,9}, and child abuse and neglect¹⁰ which show important relationships with occurrence of deprivation, social exclusion, income inequality and unemployment.
- It is important that more extensive research is carried out across policy areas in order to gain better understanding about the links between the occurrence of all non-natural death and the latent conditions which affect levels of risk.

⁴ Prichard C. Presenting to a discussion round table organised by PACTS as research for this briefing. Data from ONS. See also <http://www.guardian.co.uk/society/2010/mar/04/childprotection-bulger>

⁵ <http://www.roadsafetyanalysis.org/wp-content/uploads/2010/08/Child-Casualty-Report-2010.pdf>

(Specific to children under 16)

⁶ <http://www.dft.gov.uk/pgr/roadsafety/research/rsrr/theme5/poorwaytodie.pdf> (Specific to all ages)

⁷ <http://www.tfl.gov.uk/assets/downloads/deprivation-and-road-safety.pdf> (Specific to London)

⁸ Department of Health, 2002, National Suicide Prevention Strategy for England.

⁹ <http://www.ncbi.nlm.nih.gov/pubmed/12821009>

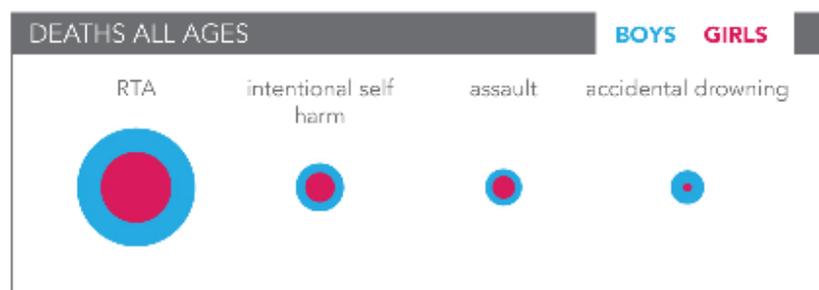
¹⁰ http://www.nspcc.org.uk/Inform/research/Briefings/poverty_wda56897.html

Activity:

- 10,246 children and young people under 25 were Killed or Seriously Injured on British roads in 2008. The value of prevention of these deaths and injuries was estimated to be over £3 billion.¹¹ That amounts to 28 KSI every day.
- 10 children and young people under 25 were killed or seriously injured each day whilst walking or cycling in 2008. In 2007, the Government Office for Science presented 5 'top policy responses' which would have the greatest average impact on levels of obesity. One of those was 'Increased walkability/cyclability of the built environment' to build physical activities into our lives.¹²
- It is vital that the risks which children and young people experience every day on the roads are prioritised cross-departmentally to ensure that we can achieve safe and active travel, thus joining-up policy agendas.

Gender:

- ONS data¹³ shows not only that public perceptions around risk diverge from the realities faced by children and young people, but also that males account for a much higher proportion of 'non-natural' death than females.
- Between the ages of 10 and 14, road death makes up 16 per cent of all male deaths – nearly twice the percentage for females in this age range.¹⁴
- In men aged 15-24 years the suicide rate rose from 9 per 100,000 population in 1979 to 13 per 100,000 in 1999. Young women in the 15-24 year age group are at the lowest risk. The suicide rate in this group has remained fairly constant since 1979, and is now fewer than 3 per 100,000 population.^{15, 16}
- Perhaps contrary to public perception, young British males are at far higher risk of non-natural death than their female counterparts. Further research is required in order to understand the behavioural associations of gender and the related impact on risk. Policy interventions must be evidence-led and appropriate to ensuring that males at much higher risk are sufficiently supported.



The largest non-natural causes of death among children and young people aged 1-19

¹¹ <http://www.dft.gov.uk/pgr/statistics/datatablespublications/accidents/casualtiesgbar/>

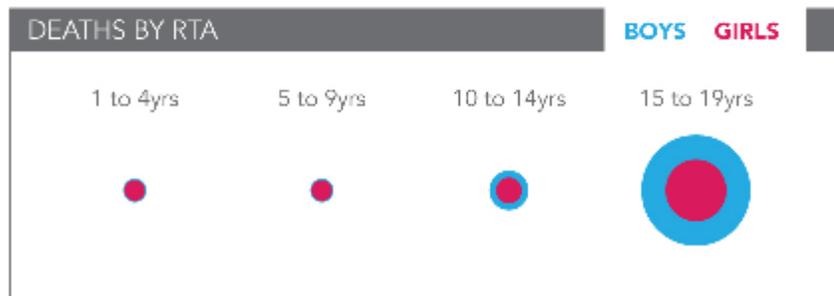
¹² Ibid p28

¹³ <http://www.statistics.gov.uk/CCI/nscl.asp?ID=7441>

¹⁴ <http://www.dft.gov.uk/pgr/statistics/datatablespublications/accidents/casualtiesgbar/rrcgb2008>

¹⁵ http://www.mind.org.uk/help/research_and_policy/statistics_2_suicide#whichage

¹⁶ ONS, 2007, Mortality Statistics, Series DH2 nos. 30 and 32.



*Road Traffic Accident deaths among children aged 1-19 by age and by gender.*¹⁷

Age:

- Non natural death is significantly impacted upon by age. As independence is gained and riskier behaviours are adopted, children and young people are at far greater danger of death and injury.
- Many government departments have focussed on reducing the level of death and injury among children. In road safety for example, the previous strategy set a 50 per cent reduction target based on a 1994/98 baseline to reduce the number of KSI among children under 16. The target had already been met by 2007.
- Looking at the statistics today, it is evident that young people over 15 are at far higher risk across a range of non-natural causes of death and should be prioritised using specific and preventative interventions.

Joining-up: The Possibilities

- It is vital that policy makers and those responsible for policy delivery identify areas of synergy and work together to achieve joint and related policy objectives. Ultimately, every agency and individual working in child care, child health and child protection and all employers and associates of young people should be working towards the improvement of the overall well-being of children and young people. In many cases and for many reasons, this overarching objective has been lost in the pursuit of vital but more specific policy aims such as preventing violent death, treating asthma more effectively, increasing activity levels and reducing injury in the home or on the road.
- There is a great deal of potential for synergy between safeguarding and safety of children. Likewise, there are a wide range of connections which can be made across policy areas which work towards the elimination of injury, illness and inequality among children. These connections should be built on and work should become more joined-up so that spending and efforts can be made more efficient at lower costs. Additional links should be made with wider public health outcomes of dependence on the motorcar such as increases in prevalence of asthma, obesity, allergies, respiratory problems and diabetes – all latent health problems that can be initiated during childhood through pollution and surface in later years as reduced lifespan and quality of life.
- Implicitly, there are barriers to collaborative approaches. We already know that national and local communication structures can hinder the process and policy empathy can be hard to come by. Often the quality of data and evaluation of interventions at the local level are poor

¹⁷ <http://www.statistics.gov.uk/CCI/nscl.asp?ID=7441>

and delivery teams too busy to reflect on efficiency savings. However, as we begin to see spending cuts trickle down, fighting one's own corner may or may not result in the acquisition of required funding but may also result in funding losses elsewhere and thus a reduction in overall wellbeing of children and young people.

- As local government begins to see the removal of ring fencing and is asked to make significant spending cuts, it is important that specific objectives regarding child well-being are considered together and funding is shared and allocated appropriately. Government should consider changes in allocation of resources based on need.

“The Bradford District has established a joined-up approach to protecting children from injury. A Childhood Injury Prevention Coordinator has been appointed to work across safeguarding and unintentional injury and bring together the wide range of stakeholders who work towards the improvement of child well-being. Strong links and partnerships were established with the concept and delivery of the Neighbourhood Road Safety Initiative in Bradford (2004-2007). From this initiative it became a natural progression for Bradford Safeguarding Children Board to host the position of Childhood Injury Prevention Coordinator. This role is tasked with bringing agencies and communities together to deal with all unintentional injuries to children within the District and to develop and deliver the Childhood Injury Prevention Strategy. The benefits of this approach are in the shared aims, outcomes, and particularly funding opportunities through Safer Communities and the Road Safety Grant. This has enabled engagement with sections of the community that may be difficult for road safety alone to reach, for example children’s services and children’s centre networks (those agencies who have direct contact with hard to reach and vulnerable families whose children are at increased risk of suffering unintentional injuries). It also brings a greater insight into social and community networks that can be used to deliver road safety initiatives alongside initiatives to prevent other types of unintentional injury and the support needed from Parents / carers in order to keep their children safe. It is a holistic approach which encompasses all aspects of child safety and aims to give the most vulnerable families the information and support which they need to ensure the safety of their children. This has enabled the district to provide a coordinated response to local needs.”

Davina Hartley: Childhood Injury Prevention Coordinator, Bradford City Council

Good Practice Examples

Better, more joined up and more effective spending decisions can be achieved without incurring additional cost. Below are a series of good practice examples including a policy perspective, a structural approach, a local government action and a specific intervention.

Policy Perspective:

- The Total Place¹⁸ concept should be considered as a model. Total Place is an action learning process which seeks to give local providers the incentive to work together in new ways for the benefit of their clients and citizens. Total Place is also a chance for local agencies to ‘get ahead’ by examining how they can deliver better services at less cost. Total Place has been used in a number of policy areas to analyze spending against costs and priorities and to identify the most effective resourcing approaches in terms of achieving the widest number of objectives. This initiative which considers how a ‘whole area’ approach to public services

¹⁸ <http://www.localleadership.gov.uk/totalplace/>

can lead to better services at lower cost is particularly timely and has been designed to combat the effect of the economic downturn.

Structural Approach:

- Making the Link¹⁹ is an important programme set up under the previous government which recognises the impact which effective partnership working could have on reductions in injuries and deaths of children and young people. Making the Link provides tools to encourage effective partnership working to reduce deaths and hospital admissions from child accidents.

Local Government Action:

- Bradford City Council has already established a joined-up approach to protecting children from injury. A childhood Injury Prevention Coordinator has been appointed to work across safeguarding and road safety and bring together the wide range of stakeholders who work towards the improvement of child well-being.

Specific Intervention:

- Portsmouth has become the first city in Britain to have a 20mph safety limit on almost all residential roads. The new speed limit, designed to protect pedestrians and cyclists in residential roads, became citywide by the end of March 2008. Although it is too soon to conduct a comprehensive analysis, the first year evaluation looks positive and estimates the following reductions in child KSIs :-

Pedestrians 40% lower
Passengers 100% lower
Driver/Riders 100% lower
Overall 63% lower

In 1996, TRL reviewed 20 mph zones in Great Britain (Webster and Mackie 1996). The uncontrolled study included 72 20 mph schemes and used 5 years of before data and at least 1 year of after data (the average was 30 months). The researchers found that overall collision rates decreased 61%, pedestrian collision rates decreased 63%, child pedestrian collision rates decreased 70% and overall child casualty rates decreased 67%. The ratio of KSI to all collisions fell from 0.21 to 0.16.

Conclusion

The next few years will not be easy for Local Government or the voluntary sector. Against a background of cuts in expenditure it is likely that people will focus on self-preservation, possibly at the expense of more coordinated interventions. The protection of children and young people offers an opportunity to encourage joined-up action and generate greater benefits.

¹⁹ <http://www.makingthelink.net/about>

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Child Accident Prevention Trust (CAPT) <http://www.capt.org.uk>

DBDA <http://www.dbda.co.uk/index.php>

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