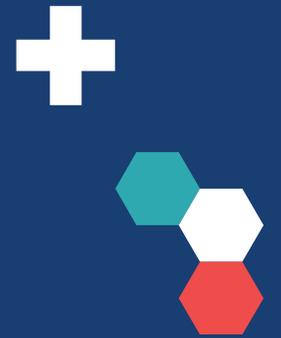


Equal access for equal need? 'Poverty Proofing' education and healthcare settings



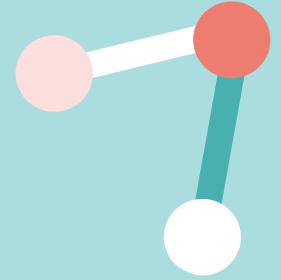
Luke Bramhall, Children North East

Jo Wildman, Newcastle University (HI&MC Theme)

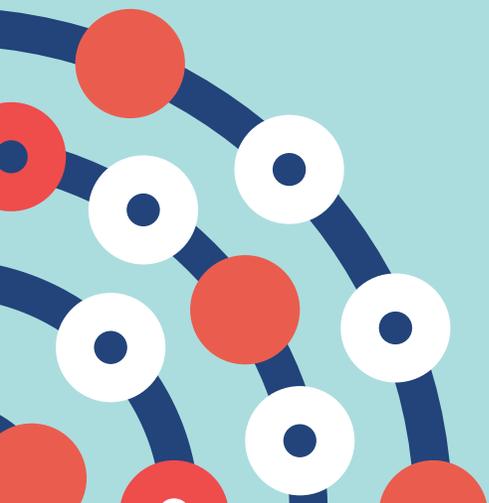
Judith Rankin, Newcastle University (C&F Theme)

Clare Bambra, Newcastle University (HI&MC Theme)



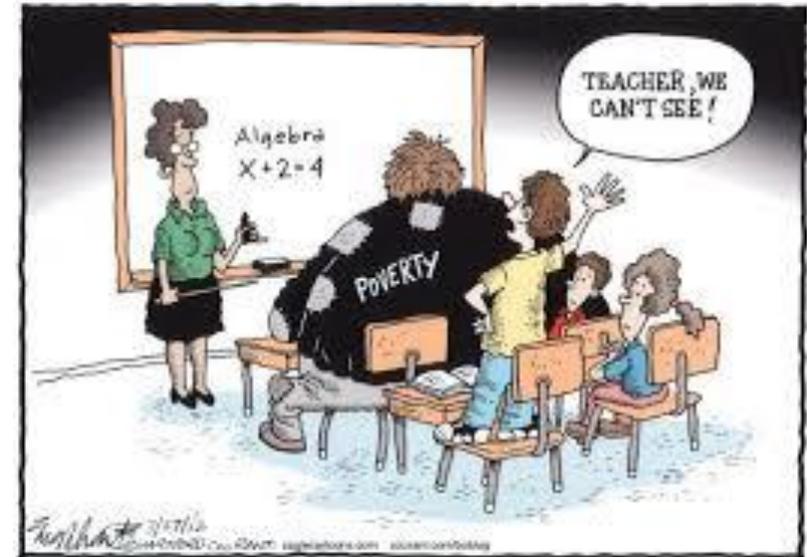


Part 1: Poverty Proofing the School Day



Problem – child poverty

- Child poverty rates in NENC are higher than average – 35% NE, 30% UK, 23% EU
- Poverty affects children's ability to access and benefit from education
 - 40% of children on FSM leave school without qualifications
 - 70% of parents report struggling to meet the costs of the school day



Response – ‘Poverty Proofing’

- ‘Poverty Proofing the School Day’ developed by Children North East (CNE)
- Audit:
 - School audit to identify how poverty affects the school day
 - Speaks to all students & questions staff, parents and governors
- Action plan:
 - Addresses stigmatising policies and practices
- Since 2014, 135 primary & secondary schools in NENC & 129 in other parts of England

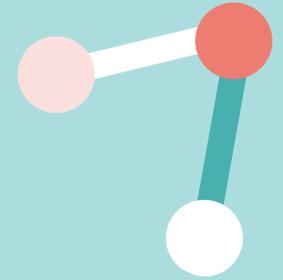


Because growing up can be hard

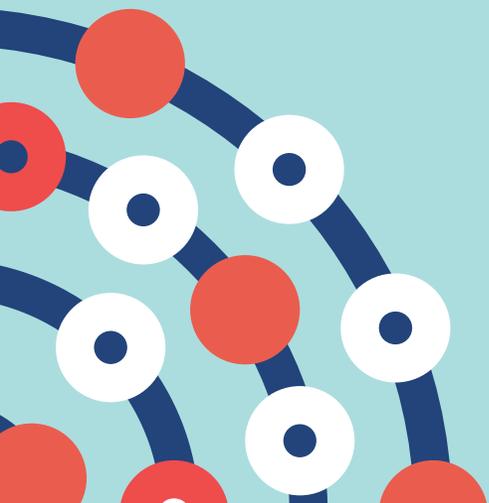


Project (part 1)

- Retrospective evaluation of the impact of 'Poverty Proofing the School Day'
- Conduct a natural policy experiment
- School-level data from the National Pupil Database
- Difference-in-differences analysis of 'treatment' and 'control' schools (with matching on pre-treatment characteristics e.g. location, size, type of school, pupil demographics)
- Outcomes: attendance, exclusions, attainment, FSM uptake



Part 2: Poverty Proofing healthcare settings



Problem – Child Poverty

- Horizontal inequities in healthcare access: poorer people consume more healthcare, richer people access care at an earlier stage and consume more preventive and specialist care
- NHS has a legal duty to tackle inequalities in healthcare access
- Health Equity Audits – rarely used, rarely engaged with & rarely acted on

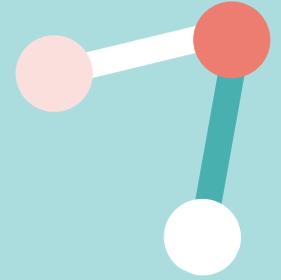
Response – Poverty Proofing Healthcare Settings

- CNE & Child Health & Wellbeing Network identifying range of primary & secondary healthcare settings for Poverty Proofing pilot
 - GPs
 - Dentists & opticians
 - Pharmacies
 - Hospitals
 - CAMHs
- Identify a range of issues mainly focused around costs



Project (part 2)

- Co-design a Poverty Proofing audit & action plan toolkit with stakeholders
- Data collection: healthcare setting observations(!), in-depth interviews, group discussions
- Pilot in three healthcare settings
- Process of feedback & refinement



Thank you!

