

POVERTY AND INEQUALITY COMMISSION'S REVIEW OF THE LOCAL CHILD POVERTY ACTION REPORTS 2019

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1. Summary

1.1 Introduction

The Poverty and Inequality Commission was delighted to accept the Cabinet Secretary for Communities and Local Government's request to review the first set of Local Child Poverty Action Reports. We appreciate the important role that local partners have in tackling child poverty and welcome the opportunity to understand more about the innovation and enthusiasm in tackling child poverty across the country.

We randomly selected 10 reports, ensuring a good range of sizes of local authorities, rates of child poverty and urban/rural coverage, and considered them against a range of criteria. We have chosen not to name the areas we have selected. Our review is designed to provide general feedback for all areas to improve, rather than picking up specific points on individual reports.

1.2 Main Findings

Guidance for developing the Local Child Poverty Action Reports. We carefully read the guidance developed by the Child Poverty Local Action Reports Reference Group. We found this guidance to be helpful, clear and excellent at setting out exactly what is expected from the reports. It formed the basis for a lot of our review as we based some of our analysis on assessing whether the reports were following the advice set out in the guidance document.

Involvement of people with direct lived experience. The Cabinet Secretary asked the Commission to look for evidence of involvement of people with direct lived experience of poverty in the local action plans. We were not just interested in whether people with direct lived experience were asked for their views, we were also interested in what impact this was having and how their views and experience were being used by local areas in the development of their action plans.

It was disappointing for us to note that 6 of the 10 reports we looked at did not mention involving people with direct lived experience. Whilst this in itself may not be evidence that engagement with people with direct lived experience did not take place it may, unfortunately be an indicator of a continuing failure to attach importance to such work.

There were two reports which described how they involved people with direct lived experience and two which described their intention to do so in the future. The two areas which had involved people with direct lived experience described how they had set up panels or Commissions of people with direct lived experience to work with the local authority on a range of issues around poverty. Both the areas had groups which were well-established and set their own work programme, discussing areas of interest to them. One of the reports described the impact that people with direct lived experience had on the development of the action plan. We were pleased to see this as it indicates that people with direct lived experience have more than a token role to play in decision making and that their work is making a real difference.

Level of commitment to tackling child poverty. Tackling child poverty is one of the key priorities of the Scottish Government,¹ and we were keen to see how this was reflected at a local level. We did this by looking across all 32 reports and noting who had authored an introduction or provided “sign-off” for the reports. Of the 27 reports that were easily available to us at the time of writing, 4 provided an introduction signed by the chief executive of the local authority and/or the health board. Some had no signed introduction, others were provided by the head of a department within the local authority and/or health board. We believe that the buy-in to the child poverty agenda at the highest level indicated by chief executives signing off reports should be encouraged as this would help mobilise resources, facilitate partnership working and effectively deliver change.

Contextual information. All the local reports we looked at showed a good understanding of the different strengths, challenges and opportunities of their local area.

Evidence of partnership working. There was evidence of collaboration in developing the action plans and some reports included details of structures and working practices which supported partnership working. Many local authorities were making good use of already established Community Planning Partnerships. In some reports however, only a passing reference was made to partnership working. We appreciate it may be difficult to incorporate this type of information into a report so this in itself may not be evidence that partnership working is not happening.

Use of evidence. Most reports used data well in describing their local area. Some reports included helpful tables of key statistics. As well as helping identify the specific issues of that particular area, these could also provide a baseline with which to measure progress in future years which would be particularly useful in on-going monitoring and evaluation.

However, there were not many reports which had given careful consideration towards monitoring and evaluation. In terms of overall progress, we did not see any report which had set out clear targets of what it was working towards. This could greatly help focus actions and would also be useful in future years of highlighting where things were working and where a different approach may be needed.

However, we do recognise that it may not always be straightforward to access relevant and reliable data at a local level which may be hindering attempts to monitor and evaluate progress.

Action plans. We reviewed the action plans through considering the following aspects:

1. How the information is presented
2. Whether the right actions are being taken
3. Understanding of the priority groups
4. Partnership working and lead agency
5. Measuring impact and evaluation

¹ <https://news.gov.scot/news/challenging-uk-austerity-and-uncertainty>

6. Income maximisation activities

We found that some action plans did not include enough information to allow proper scrutiny. Not only does this make it difficult to assess the action plans on many of the above criteria, it also has implications for sharing best practice and learning across areas.

In terms of the actions themselves, we were impressed with the range of work which is being undertaken. We identified four different types of action:

1. Actions which are fundamental to tackling poverty and, as such, are very closely linked to the drivers. We have recommended that if local areas do not have these in their action plans, then they should have. For example, encouraging the payment of the Living Wage, maximising uptake of benefits and providing advice on how to reduce food and energy costs.
2. Actions which tackle child poverty but need a better articulation of how they do so. Many action plans include actions such as the expansion of early years childcare and work around closing the attainment gap, without fully explaining how these link to child poverty. We suggest this could be improved by better understanding and articulating the links between these actions and how they will impact on the targets.
3. Supporting actions which create the right conditions for tackling child poverty. These are things like transport which have wider aims but are also crucial in tackling poverty. We welcome the inclusion of this type of action as it demonstrates that the responsibility for tackling child poverty goes right across local authorities and health boards, i.e. it is not just the role of children's services.
4. Actions which do not directly tackle child poverty, i.e. are either around the mitigation of poverty or targeted at all families. We appreciate how valuable these actions are and do not wish to detract from the good work going on across Scotland. However, the reports would be enhanced by being more streamlined and focusing on actions which directly tackle the drivers of poverty.

Most local areas are good at listing the priority groups and most identify which target group an action is directed towards in the table. The more impressive attempts to consider this have clearly articulated why these groups are high risk and the specific interventions that may be needed.

It was sometimes difficult to assess the extent to which there was successful partnership working in delivering the actions. Some action plans did indeed include a column which mentioned different partners. However, the great majority of reports only included the name of the partner organisation. There was no information provided on the role played by each organisation in the delivery of the actions, or the challenges and successes of working in partnership.

Many of the action plans do not include detailed information on their plans for evaluation. However, we recognise this is the first year and that evaluation will likely become more prevalent in future years.

1.3 Conclusions

One of the key questions is whether or not the action plans represent a step change in how tackling child poverty is approached. Overall, we were impressed with the quantity and range of actions included in the reports and saw some examples of truly excellent work. However, we also found that many of the reports have gaps in the information they provide or do not provide a coherent narrative around how the plans were developed and how they will be evaluated. This is somewhat surprising as the guidance which was designed to support local partners is very good. We feel there is an important role for the national partners group to understand why the guidance is not reflected in the reports and further consider what additional support local partners might need to develop, implement and evaluate effective action plans.

2. Introduction

On 8 November 2017 the Scottish Parliament unanimously passed the Child Poverty (Scotland) Act 2017 setting in law four targets relating to ending child poverty, which the Scottish Government is expected to ensure are met by 2030. In recognition of the important role that local areas play in tackling poverty, the Act included an annual local reporting duty where local authorities and health boards need to report on what they are doing and plan to do to reduce child poverty. The first of the Local Child Poverty Reports were due to be published by each local authority on 30 June 2019.

A group of national partners was set up to support local authorities and health boards in developing their reports. This group consists of academics, NHS Health Scotland, Scottish Government and the third sector. There is also a dedicated National Child Poverty Co-ordinator, based at the Improvement Service, who sits on the group and supports local authority and health board leads.

A Child Poverty Local Action Reports Reference Group developed detailed guidance for the development of the local action reports. This was published by the Scottish Government and outlines what the reports could include.²

As this was the first year of the reports, the Cabinet Secretary for Communities and Local Government asked the Poverty and Inequality Commission to review the Local Child Poverty Action Reports. The Cabinet Secretary asked the Commission to provide a report which encourages local partners to improve, both in their reporting and also in the action they are taking. There was a particular interest in looking for evidence of partnership working, areas of good practice and the involvement of people with lived experience of poverty.

We appreciate the important role that local authorities and health boards have in tackling child poverty so we were pleased to accept the request. In particular, we welcomed the opportunity to understand more about the innovation and enthusiasm in tackling child poverty which is being expressed across the country.

2.1 *Our approach to reviewing the reports*

Our review consisted of an analysis of a selection of reports. We chose 10 reports, ensuring a good range of sizes of local authorities, rates of child poverty and urban/rural coverage and assessed these reports against a range of questions.

In deciding upon the questions to assess the reports against, we drew upon the guidance, and particular areas of interest to the Commission, and set out questions to identify the extent to which the reports reflected the suggestions made in the guidance and other areas of interest.

The questions are:

- To what extent is there a clear understanding and articulation of the local area's context and challenges around child poverty?

² <https://www.gov.scot/publications/local-child-poverty-action-report-guidance/>

- How are existing action plans and strategies identified and interpreted?
- What evidence is there of partnership working and how has this been articulated?
- To what extent do people with direct lived experience of poverty feature – in planning and prioritisation, co-designing service delivery and evaluation of actions?
- To what extent has evidence been used in the reports – in developing the action plans and also in evaluating and monitoring actions?
- Do the plans include the actions which are likely to have an impact on tackling child poverty?
- Is there evidence of a step change in how tackling child poverty is approached?

We have not named the local authority areas we have looked at. This review is designed to provide general feedback for all areas to improve, rather than picking up specific points on individual reports.

It is also worth noting that as well as this being the first year of the reports, it is also the first year the Commission has reviewed the reports. We are keen for feedback on our approach and would welcome discussion on how helpful our review is. We intend to scrutinise these reports in future years but may take a different approach.

3. Findings of our review

3.1 Guidance for developing the Local Child Poverty Action Reports

In developing our approach to review, we examined the guidance for developing the Local Child Poverty Action reports and found it to be very helpful and clear.

It sets out exactly what is required from the reports and provides support on the more challenging aspects of the reports, e.g. involving people with lived experience and identifying useful data sources. The Commission would like to commend the Child Poverty Local Action Reports Reference Group for developing this comprehensive guidance.

3.2 Involvement of people with direct lived experience

Over the past decade or so, there has been a real shift across Scotland in the way communities are involved in decision making. There is a recognition that empowering communities to make things happen and influence decisions can lead to more effective and responsive services. However, in relation to poverty, it has been noted that the views of people with direct lived experience are often used to illustrate a point, rather than to shape agendas, explain or increase understanding of the key issues relating to poverty.³ It also is not always clear what impact involving people with direct lived experience has on policy and practice.

Therefore, in looking through the reports for evidence of involvement of direct lived experience in the local action plans, we were not just interested in whether people with direct lived experience were being heard, we were also interested in what impact this was having and how their views were being used by local areas in the development of their action plans.

It was disappointing for us to note that six of the ten reports we looked at did not mention involving people with direct lived experience. Whilst this in itself may not be evidence that engagement with people with direct lived experience did not take place, it may, unfortunately, be an indicator of a continuing failure to attach importance to such work.

There were two reports which outlined how they involved people with direct lived experience and two which highlighted their intention to do so in the future. The two areas which had involved people with direct lived experience described how they had set up panels or Commissions of people with direct lived experience to work with the local authority on a range of issues around poverty. Both the areas had groups which were well-established and set their own work programme, discussing areas of interest to them. One of the reports described the impact that people with direct lived experience had on the development of the action plan. We were pleased to see this as it indicates that people with direct lived experience have more than a token role to play in decision making and that their work is making a real difference. There is a lot that other local areas could learn from this approach.

³ <https://povertyinequality.scot/wp-content/uploads/2019/04/SPIRU-Final-Report.pdf>

It is worth noting here that the guidance describes that there is support available to assist local areas to set up their own community bodies to bring people with direct lived experience of poverty into strategic decision making. This is being provided by the Scottish Government and there is also the 'Get Heard Scotland' initiative being developed by the Poverty Alliance. The Scottish Community Development Centre also support community anchor organisations and participatory budgeting.⁴ Given that there is this support available, it is surprising that more reports do not incorporate the views of people with direct lived experience.

Recommendations

Local authorities and health boards should consider how they can better involve people with direct lived experience. They should ensure that people's voices are heard and helping to shape agendas. There are many organisations and community groups that could help with this and local authorities and health boards should look to make use of these resources.

The national partners group should consider what more they could do to support the involvement of people with lived experience. They could also investigate why the support offered in the guidance does not appear to be taken up.

The Cabinet Secretary could single out authorities that have provided detailed engagement work involving people with direct lived experience as "exemplars" whose practice can be drawn on as a route to continuous improvement. Having the Cabinet Secretary do this would show the importance attached to this aspect of the reports.

3.3 What is the level of commitment to tackling child poverty?

Tackling child poverty is one of the key priorities of the Scottish Government,⁵ and we were keen to see how this was reflected at a local level. Leadership at all levels, and that is demonstrable across all sectors, is crucial in effectively delivering this agenda. This is difficult to assess through the reports alone and we have not attempted to do so.

What we did do however, was look across all 32 reports and noted who had authored an introduction or provided "sign-off" for the reports. Of the 27 reports that were easily available to us at the time of writing, 4 provided an introduction signed by the chief executive of the local authority and/or the health board. Some had no signed introduction, others were provided by the head of a department within the local authority and/or health board. Although leadership does not end at the top, it does start there. We believe that the buy-in to the child poverty agenda at the highest level indicated by chief executives of local authorities and health boards

⁴ <https://www.scdc.org.uk/news/article/2019/5/15/scdc-supporting-communities-programme-people-planning-and-place>

<https://www.scdc.org.uk/hub/participatory-budgeting>

⁵ <https://news.gov.scot/news/challenging-uk-austerity-and-uncertainty>

signing off reports should be encouraged as this would help mobilise resources, facilitate partnership working and effectively deliver change.

Recommendation

Chief Executives of local authorities and health boards should make clear their commitment to tackling poverty.

3.4 Contextual information

All the local reports we looked at showed an excellent understanding of the different strengths, challenges and opportunities of their local area. Most reports use statistical evidence to tell the stories of their local area, sometimes backed up by a bit of history. These sections were often a fascinating insight into local areas and provided good context for subsequent sections in the report.

The guidance suggested that it would be helpful for local partners to make clear in the annual local child poverty action reports how links are being made to existing related statutory planning and reporting duties. This would ensure a streamlined approach as well as representing joined-up delivery of public services as recommended by the 2010 Christie Commission. All of the sampled ten reports we looked at mentioned other strategies and action plans. These included overarching strategic plans for the local authority area, Local Outcome Improvement Plans (LOIP), Children's Services Plans and economic plans.

The reports which were strong here provided a rationale for why they had included the reports they had and some also included helpful diagrams which show how different plans/strategies/reports overlap and feed into each other. The reports which were slightly weaker tended to provide a list of related strategies but offered no background as to why these had been chosen or how they linked together. Such background reasoning would be a useful addition to future reports. As none of the reports we looked at provided evidence of how linking strategies or plans together was providing efficiency savings we believe that this would be a useful piece of additional evidence to be incorporated into future reports.

Recommendation

Future reports should provide more of a rationale for including different plans, strategies and reports and also evidence of how linking these together is leading to efficiency savings.

3.5 Evidence of partnership working

The Cabinet Secretary for Communities and Local Government asked the Commission to specifically look for evidence of partnership working. The Commission is of the view that working together is better, it leads to quicker action and successful outcomes. In our view, partnership working and collaboration is key

to success in the planning, prioritisation and delivery of the actions necessary to tackle child poverty in isolation.

In this section we consider the extent to which partners were involved in the development of the action plans. A subsequent section on the action plans looks more closely at who was delivering the actions.

The guidance provides a very good starting point in identifying a list of likely partners that local authorities and health boards could work with. There is further useful information from a National Foundation for Educational Research report⁶ which sets out some key ingredients for successful partnerships in tackling child poverty at a local level. This included a clear understanding of roles – including identifying the impact of the work on individual partner organisations and how each will benefit from the collaboration, good leadership and a shared commitment to a common goal.

There was evidence of collaboration in developing the action plans and some reports included details of structures and working practices which supported partnership working. Many local authorities were making good use of already established Community Planning Partnerships. In some reports however, only a passing reference was made to partnership working. We appreciate it may be difficult to incorporate this type of information into a report so this in itself may not be evidence that partnership working is not happening.

Within the theme of partnership working, there is also the issue of how effectively local authorities and health boards are working together. It is difficult to determine this accurately from looking at the reports but we noted that half of the reports we looked at separated their action plans in some way that was according to who delivered the actions. This ranged from different tables for the local authority and the health board to including the NHS Board actions in a separate annex. We do not want to impose how these are reported but we do want to emphasise that these should be developed and delivered in partnership.

Recommendations

There is scope to improve how partnership working is reflected in future reports. The Commission recommends that local authorities and health boards consider their approach to partnership working and how they can better reflect it in next year's reports.

We encourage all local authorities and health boards to think about the following:

- **Are they working with the right partners? The guidance included a list of potential partners and we would suggest that all local areas revisit this list to determine if they are working with the right partners. In particular, local authorities and health boards should ensure they are working with the third sector and also the private sector.**
- **How can the reports best set out the collaborations in place and how these are working and resourced?**

⁶ <https://www.nfer.ac.uk/media/1934/lqcp01.pdf>

- **What partnership working has enabled local areas to do which they wouldn't have been otherwise able to do? What have the outcomes and benefits been?**

The national partners group should consider what they can do to support the area of partnership working. This could involve highlighting areas which are demonstrating a strong approach to partnership working and sharing the learning from this.

3.6 *Use of evidence*

Across the reports, we were keen to see the use of a range of evidence including local surveys, national surveys which provide local data and 'what works' evidence.

As previously mentioned, most reports used data well in describing their local area. However, the reports would greatly benefit from a clear linkage between the local contextual evidence to the action plans. For example, if an area shows lower than average employment then we would expect the reports to show an understanding of why that is and actions in place to address this. This narrative was often missing from the reports but would greatly help us understand why some actions were prioritised over others.

Another aspect missing here was an appreciation of "what works" in tackling poverty. There are a number of comprehensive reviews which set out the importance of local action and identify the types of actions that may be successful.⁷ This type of important evidence would greatly assist local partners in developing their action plans.

There is also strong potential to use this section in thinking about how to measure impact over time. Some reports included tables of key statistics. As well as helping identify the specific issues of that particular area, they can also provide a baseline with which to measure progress in future years.

There were not many reports which had given careful consideration towards monitoring and evaluation. In terms of overall progress, we did not see any report which had set out clear targets of what it was working towards. This could greatly help focus actions and would also be useful in future years of highlighting where things were working and where a different approach may be needed.

However, we do recognise that it may not always be straightforward to access relevant and reliable data at a local level which may be hindering attempts to monitor and evaluate progress. For example, local partners do not often report on equivalent measures of child poverty to those used in the child poverty targets. The reports we looked at mainly reported the End Child Poverty estimates⁸ and supplemented this

⁷ <http://whatworksscotland.ac.uk/publications/tackling-child-poverty-actions-to-prevent-and-mitigate-child-poverty-at-the-local-level/>

https://www.povertyalliance.org/wp-content/uploads/2019/05/ISSUE-24_SAPR_SPRING-17.pdf

https://policyscotland.gla.ac.uk/wp-content/uploads/2018/02/Local-Poverty-Report-Feb_2018.pdf

⁸ <http://www.endchildpoverty.org.uk/poverty-in-your-area-2019/>

with proxy measures (e.g. number of children entitled to free school meals, number of parents in employment). We feel that more could be done to ensure local authorities and health boards have access to local data; understand the data available, its limitations and what the best measures to use are.

Recommendation

Some local areas were better than others at setting out relevant data and using this to measure progress. The Commission recommends that local authorities and health boards could review their use of data – in particular identify national surveys which provide local level data, consider how they can use their local surveys, and make better use of academic evidence (e.g. from What Works Scotland). The national partners group could also consider what they could do to support this.

3.7 Action plans

We scrutinised the action plans through considering the following aspects:

1. How the information is presented
2. Whether the actions being taken are those likely to have the biggest impact on child poverty
3. Understanding of the priority groups
4. Partnership working and lead agency
5. Measuring impact and evaluation
6. Income maximisation activities

1. How the information is presented

The guidance suggested that the action plans are presented in a table but did not make this mandatory. Most of the reports we looked at took this advice and included a table. We agree that the reports should present the information in a way that best suits the needs of their local area, rather than imposing a mandatory approach. However, we found that some action plans did not include enough information to allow proper scrutiny. Not only does this make it difficult to assess the action plans on many of the above criteria, it also has implications for sharing best practice and learning across areas.

Therefore, we would like to set out the aspects which we saw in the presentation of the action plans that worked well.

- The best approach to presenting information appeared to be reports which included their action plans within a table but also included focused case studies of a couple of actions. For example, those actions judged to be the most innovative or likely to have a large impact on tackling child poverty. This is particularly important to facilitate the sharing of good practice.
- Within the tables, it is important to include sufficient information so as to be clear on what the action is. For example, “tackle low pay” does not make clear *what* is being done. In contrast, “tackle low pay through working with local

employers to explore what support would help them offer a fair wage and contract conditions for all workers” provides much more information.

- The example table provided in the guidance provided a strong steer on what information could be included. Within the action plans, we found that some information was better considered than others. While we do not think a mandatory template should be provided, local areas should consider whether they have included all the necessary information within their action plans. In particular, we found that many areas did not include a column on “how impact will be assessed”. This is an important aspect of tracking progress and if not included in the action plans should be covered elsewhere in the reports.
- We found the reports which separated their action plans by the key drivers particularly helpful. It was also important to separate out existing and planned actions into different tables.

Recommendation

Local partners should consider the presentation of their action plans carefully and ensure that they provide sufficient information across all aspects mentioned in the guidance. They could also consider whether they have any actions that they feel are particularly important and share these as case studies in the reports to facilitate the sharing of good practice.

2. Whether the actions being taken are those likely to have the biggest impact on child poverty

We identified four types of actions included in the action plans.

The first of these are actions which are fundamental to tackling poverty and, as such, are very closely linked to the drivers. In identifying these fundamental actions we have drawn on the guidance, what works reviews and our own knowledge. These are the actions we would expect to see in every action plan. Exactly *how* they are delivered is a matter for local partners. However, the Commission believes that if these are not included in an action plan then local partners should consider implementing them in the future.

Increasing income from employment:

- Bringing better jobs to the area
- Encourage the payment of the Living Wage across the local area
- Providing in-work support
- Employment support programmes

Maximising income from benefits:

- Maximise uptake of benefits
- Automate systems that ensure access to the school clothing grant, Education Maintenance Allowance and other grants/benefits.
- Improve access to information and advice about benefits

Reducing household costs:

- Increase availability of affordable housing⁹
- Provide advice on how to minimise costs for energy and food
- Work to reduce the cost of the school day
- Childcare provision (including increasing uptake of offering to eligible 2 year olds)
- Provision of low cost credit and debt reduction services.

Recommendation

Local authorities and health boards should examine the list of actions and consider whether they are taking all of these actions. If not, they should consider including any they are not yet undertaking.

The second type of action are those which tackle child poverty but need a better articulation of how they do so. Many action plans include actions such as the expansion of early years childcare and work around closing the attainment gap, without fully explaining how these link to child poverty.

For instance, the expansion of childcare is often discussed in terms of improving outcomes for children or reducing household costs. However, the potential of this is far greater as increasing the number of childcare hours also opens up employment and education opportunities for parents.

Similarly, closing the attainment gap is often described in terms of preventative outcomes. However, the funding allocated around the attainment gap can also be used to reduce household costs through providing after school childcare and holiday clubs.

Recommendation

Local authorities and health boards should ensure that they are adequately articulating how actions contribute to tackling poverty.

The third type of action are supporting actions which create the right conditions for tackling child poverty. These are things like transport which have wider aims but are also crucial in tackling poverty.

Transport matters in relation to poverty because of its potential impact on income, household expenditure and mitigating the impact of poverty. Actions which help ensure good, affordable transport can enable people to access jobs, education and training. On the other hand, poor access to transport can lock people into poverty by limiting access to these opportunities to increase income.

⁹ As the Joseph Rowntree Foundation's recent report showed, lower housing costs in Scotland have played an important role in Scotland's comparatively lower poverty rates (when compared with the rest of the UK) <https://www.jrf.org.uk/report/poverty-scotland-2019>

We welcome the inclusion of this type of action as it demonstrates that the responsibility for tackling child poverty goes right across local authorities and health boards, i.e. it is not just the role of children's services.

Recommendation

Local authorities and health boards should consider whether they are taking actions which create the right conditions for tackling poverty.

The final type of action included in the plans are those which do not directly tackle child poverty. These tend to be either around the mitigation of poverty or targeted at all families.

We appreciate how valuable these actions are and do not wish to detract from the good work going on across Scotland. However, the reports would be enhanced by being more streamlined and focusing on actions which directly tackle the drivers of poverty.

Recommendation

The action plans should remain focused on actions which directly tackle poverty. Recognising that other actions are important, they could be included in a separate table.

3. Understanding of the priority groups

Most local areas are good at listing the priority groups and most identify which target group an action is directed towards in the table. The more impressive attempts to consider this have clearly articulated why these groups are high risk and the specific interventions that may be needed. So for example, lone parents and parents with a disabled child are less likely to be working than the overall population. Showing this understanding helps explain why there are actions targeted at increasing or improving employment opportunities of these groups.

Recommendation

Where appropriate, the action plans should do more to articulate why priority groups are the targets of particular actions.

4. Partnership working and lead agency

It was sometimes difficult to assess the extent to which there was successful partnership working in delivering the actions. Some action plans did indeed include a column which mentioned different partners. However, the great majority of reports only included the name of the partner organisation. There was no information provided on the role played by each organisation in the delivery of the actions, or the challenges and successes of working in partnership.

Recommendation

Action plans could be clearer around which organisation is taking the lead in delivering actions and the roles played by any supporting organisations.

5. Measuring impact and evaluation

We also looked at how individual actions were being evaluated within the action plans. As we found with overall monitoring and evaluation, this was an aspect of the action plans that needs some improvement.

Many of the action plans do not include detailed information on their plans for evaluation. However, we recognise this is the first year and that evaluation will likely become more prevalent in future years.

As outlined in the guidance, robust monitoring and evaluation is crucial for ensuring that we understand how local actions are contributing to the national targets and also for knowing which actions are not having the intended effects.

Having looked through the action plans, we are of the view that not all actions require the same level of monitoring and evaluation. There are some actions where it would be appropriate to fully evaluate using a range of quantitative and qualitative approaches. It may also be an opportunity to seek views of people with direct lived experience in assessing the impact of certain actions. The types of actions which would benefit from this type of more thorough approach are those which require a lot of resource and those which are innovative or using a previously untested approach.

On the other hand, there are the smaller or more straightforward actions for which baseline monitoring will be appropriate. In these cases, it would be proportionate to identify some quantitative measures to track over time. An example here would be measuring the impact of actions to increase the uptake of free school meals through monitoring the number of children accessing free school meals.

Recommendation

There is scope for the approach to evaluation and monitoring progress to be improved. The guidance is comprehensive here and we are aware of efforts being made to support this work. Therefore, the Commission recommends that the national partners group explore the barriers to good evaluation and consider what more they could do to support this area.

6. Income maximisation activity

The Act further requires that, in the context of reporting on activity that has been taken or is proposed in support of meeting the child poverty targets, local authorities and NHS boards must report in particular on:

income maximisation measures taken in the area of the local authority during the reporting year to provide pregnant women and families with children with:

- a) information, advice and assistance about eligibility for financial support, and
- b) assistance to apply for financial support

Within the action plans of the ten reports we looked at, half do not appear to be adequately addressing this requirement. While all reports include actions around income maximisation addressed towards families, five did not include mention of how they would specifically provide pregnant women with more support. As this is a legislative requirement, it would be good to see more information provided on what is being done around this specific priority group and how the impact is being measured.

Recommendation

The Commission recommends that actions to support pregnant women in particular are highlighted and if these are not included in this year's action plans then there should be work to ensure they are in next year's.

The Commission believes that the actions taken are the heart of the child poverty local action reports and therefore the most important aspect to focus on getting right next year. There are a number of suggestions provided here which indicate where improvements could be made which will hopefully be of help in doing so.

Recommendations

The Commission recommends that local partners take time to understand how close they are to taking the right actions and whether they are addressing all of the aspects the Commission has looked at.

The Commission also suggests that the national partners group develops a good practice depository. We saw examples of good actions being taken around the country and this would be an ideal way of sharing that. Local partners should contribute to this and also make good use of the knowledge that is shared.

3.8 Additional aspects of interest

As a Commission, there are certain areas of interest which are important to us and which we have looked for evidence of.

These are whether the reports make reference to the UN Convention for the Rights of the Child, what actions are being taken to support particularly vulnerable groups (for example, asylum seekers, homeless people, victims of domestic abuse etc.) and how the reports are being disseminated and communicated.

We looked through 30 of the reports to identify whether they mentioned the United Nations Convention on the Rights of the Child (UNCRC). The UNCRC is the most complete statement of children's rights and the most widely-ratified international human rights treaty in history. The Convention has 54 articles that cover all aspects of a child's life and set out the civil, political, economic, social and cultural rights that all children everywhere are entitled to.

We found that five reports mentioned the UNCRC. Of course this is not a requirement but setting actions to tackle child poverty within this context sends an important message around the understanding of the rights of children and the

responsibilities of local authorities and health boards in ensuring all children enjoy their rights.

We also looked at the action plans for the 10 selected reports to understand more about particularly vulnerable groups. As we have previously mentioned, the level of detail mentioned in the action plans does not allow for a great deal of scrutiny. Therefore, it is not always clear how much is being done to support these groups. Some local areas do have actions to support these groups which the Commission welcomes. However, given the significant disadvantages that these groups face, there is scope to do more to support them.

A final area of interest for the Commission is how these reports are being disseminated and communicated. Our approach to reviewing the reports this year did not involve gauging awareness of the reports across local areas but we are keen to see strong promotion of child poverty action plans as we believe that this will strengthen actions and working across areas.

4. Conclusion

4.1 *Is there evidence of a step change?*

One of the key questions is whether or not the action plans represent a step change in how tackling child poverty is approached. Although this is the first year of producing these reports, it is not the first year of tackling child poverty.

Overall, we were impressed with the quantity and range of actions included in the reports and saw some examples of truly excellent work. So in one sense, the fact we now have these reports represents a step change. However, we feel that it is too early for us to draw the conclusion that these action plans represent a new approach to tackling child poverty. As we have described throughout our report, many of the reports have gaps in the information they provide or do not provide a coherent narrative around how the plans were developed and how they will be evaluated.

We would be keen to see the reports develop in such a way that this question can be answered next year. We would particularly like to highlight the fact that we felt the guidance for developing Local Child Poverty Action Reports was very clear. Therefore, it was somewhat surprising that this does not appear to have translated into fully developed Local Child Poverty Action Reports. We have anecdotal evidence that local partners also found the guidance helpful so there is a need to understand why the reports do not always reflect the guidance. We feel there is an important role for the national partners group to understand why this is the case and further consider what additional support local partners might need to develop, implement and evaluate effective action plans.

4.2 *What will the Commission look for next year?*

We intend to look at a sample of reports again next year to assess how these have improved based on the feedback provided throughout this document.

We would like highlight the three aspects which we feel are most important to get right quickly:

First of all, the involvement of people with direct lived experience. We saw how this can be done very well and would encourage local partners to make use of the support available and to learn from others in how to do this. As we would rather this is done meaningfully, and wish to avoid tokenistic efforts to engage, if there is insufficient time to get this in place for next year's report, there should at least be an outline of what plans local partners have for taking it forward.

Second, the action plans. A focus on getting the actions right will have the most impact on what matters – i.e. the number of children living in poverty. Therefore, we would like to see local partners taking the actions that we know work and explaining how these are being evaluated. We believe that if the actions being taken are the right ones, and if they are being planned and undertaken in partnership, then the reports will be far easier to produce.

Third, leadership. It is important this is present at the top of organisations but also filters down to all levels.

We may also touch upon the other aspects of the reports. For example, considering how the background context sections have evolved and whether local partners have thought how they can use these to provide baseline information against which to measure success, how partnership working is described and whether evidence is being used successfully.

Recommendations

Local partners should use the recommendations in this report to understand where they need to improve for next year. At the very least, they should focus on the three areas the Commission has highlighted as priorities.

The national partners group should work with local partners to understand the challenges and barriers in producing the reports. They could further consider whether there is additional support they could provide to local partners to help ensure the reports better reflect the guidance.

5. Full list of recommendations

1. Local authorities and health boards should consider how they can better involve people with direct lived experience. They should ensure that people's voices are heard and helping to shape agendas. There are many organisations and community groups that could help with this and local authorities and health boards should look to make use of these resources.
2. The national partners group should consider what more they could do to support the involvement of people with lived experience. They could also investigate why the support offered in the guidance is not being taken up.
3. The Cabinet Secretary could single out authorities that have provided detailed engagement work involving people with direct lived experience as "exemplars" whose practice can be drawn on as a route to continuous improvement. Having the Cabinet Secretary do this would show the importance attached to this aspect of the reports.
4. Chief Executives of local authorities and health boards should make clear their commitment to tackling poverty.
5. Future reports should provide more of a rationale for including different plans, strategies and reports and also evidence of how linking these together is leading to efficiency savings.
6. There is scope to improve how partnership working is reflected in future reports. The Commission recommends that local authorities and health boards consider their approach to partnership working and how they can better reflect it in next year's reports.
7. We encourage all local authorities and health boards to think about the following:
 - Are they working with the right partners? The guidance included a list of potential partners and we would suggest that all local areas revisit this list to determine if they are working with the right partners. In particular, local partners should ensure they are working with the third sector and also the private sector.
 - How can the reports best set out the collaborations in place and how these are working and resourced?
 - What partnership working has enabled local areas to do which they wouldn't have been otherwise able to do? What have the outcomes and benefits been?
8. The national partners group should consider what they can do to support the area of partnership working. This could involve highlighting areas which are demonstrating a strong approach to partnership working and sharing the learning from this.
9. Some local areas were better than others at setting out relevant data and using this to measure progress. The Commission recommends that local authorities and health boards could review their use of data – in particular identify national surveys which provide local level data, consider how they can use their local

surveys, and make better use of academic evidence (e.g. from What Works Scotland). The national partners group could also consider what they could do to support this.

10. Local partners should consider the presentation of their action plans carefully and ensure that they provide sufficient information across all aspects mentioned in the guidance. They could also consider whether they have any actions that they feel are particularly important and share these as case studies to facilitate the sharing of good practice.
11. Local authorities and health boards should examine the list of actions and consider whether they are taking all of these actions. If not, they should consider including any they are not yet undertaking.
12. Local authorities and health boards should ensure that they are adequately articulating how actions contribute to tackling poverty.
13. Local authorities and health boards should consider whether they are taking these actions which create the right conditions for tackling poverty.
14. The action plans should remain focused on actions which directly tackle poverty. Recognising that other actions are important, they could be included in a separate table.
15. Where appropriate, the action plans should do more to articulate why priority groups are the targets of particular actions.
16. Action plans could be clearer around who is taking the lead in delivering actions and the roles played by any supporting organisations.
17. There is scope for the approach to evaluation and monitoring progress to be improved. The guidance is comprehensive here and we are aware of efforts being made to support this work. Therefore, the Commission recommends that the national partners group explore the barriers to good evaluation and consider what more they could do to support this area.
18. The Commission recommends that actions to support pregnant women in particular are highlighted and if these are not included in this year's action plans then there should be work to ensure they are in next year's.
19. The Commission recommends that local partners take time to understand how close they are to taking the right actions and whether they are addressing all of the aspects the Commission has looked at.
20. The Commission also suggests that the national partners group develops a good practice depository. We saw examples of good actions being taken around the country and this would be an ideal way of sharing that. Local partners should contribute to this and also make good use of the knowledge that is shared.

21. Local partners should use the recommendations in this report to understand where they need to improve for next year. At the very least, they should focus on the three areas the Commission has highlighted as priorities.
22. The national partners group should work with local partners to understand the challenges and barriers in producing the reports. They could further consider whether there is additional support they could provide to local partners to help ensure the reports better reflect the guidance.