

social exclusion



Social exclusion is a short hand term for what can happen when people or areas suffer from a combination of linked problems such as unemployment, poor skills, low incomes, poor health, high crime rates and family breakdown.

The Government set up its Social Exclusion Unit in 1997, aimed at reducing social exclusion by linking up services that were previously dealt with in isolation. There is now increasing focus for policy makers to consider how their work can reduce social exclusion, and the development of new joined up partnerships such as Local Strategic Partnerships are ideally placed to ensure that reducing social exclusion is considered at a local level.

The indicators considered in this chapter are an example of the broad range of determinants that contribute to social exclusion.

Indicator SE1 - Crime Re-offending (Recidivism Rates, Hertfordshire Youth (aged 16-20))

Many young offenders have real problems with education and only 71% were in education, training or employment in the period shown on the table. As might be expected, those who are lightly convicted (either pre-Court or first tier) are likely to be involved in education, whereas for those who come out of custody the figure drops to below 40%, reducing their life chances significantly. Additional problems around accommodation and relationships make the work of engaging those who come out of custody and keeping them involved particularly difficult. The Youth Offending Teams, with staff seconded in from specialist agencies to enable a holistic approach, are well placed both to challenge offending behaviour and to work with schools and colleges to ensure places can be found for those at risk of further offending.

The table opposite shows the percentage of young people (10 - 17 year olds) sentenced in 2001, who had re-offended one year later. These figures will be interesting to monitor for 2002, to consider what effect the newly established Referral Panels will have.

Type of Penalty	2001 sample % re-offending after 12 months
Pre-Court - eg. Police reprimand	19.3
First Tier (Action Plans, Reparation Orders, etc)	49.0
Community Penalties (Supervision Orders)	41.4
Custody - eg. prison or detention and training order	50

Increases in detection and arrest of young people have increased the number of young offenders worked with by the Youth Offending Teams, from 300 in 1999 to 845 in 2002/3. Concern about re-offending has led in 2003 to the development of Intensive Supervision and Surveillance Programmes (ISSP) to occupy and monitor those at high risk of offending for 25 hours a week, 17 of which will be in education.

Indicator SE2 - Educational Attainment of Children in Care

Many children in care go on to be successful later in life. However, for some, poor experiences of education and care contribute to later social exclusion. This has a high cost to individuals and also a high social and economic cost. Hertfordshire County Council has developed a proactive approach to address the problem of under-achievement of children in care and care leavers by creating Children, Schools and Families, a service that combines the services of the former social services and education departments and puts the child at the centre of joined-up planning. CSF has also developed a specific service that supports the educational achievement of all children in care and care leavers. As the corporate parent to children in care, Hertfordshire seeks to do all that a good parent would do to promote the education and welfare of the children in its care. The Governments long term policy objective is to ensure that every child in care is able to fulfil his or her potential and local authorities have been set

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new targets and increased funding in order to underpin delivery.

Percentage of care leavers participating in education training or employment	
2000/01	38
2001/02	62.9
2002/03	65.2

There has been a year on year improvement in the number of care leavers engaged in education, training or employment. Hertfordshire County Council's performance in this area is regarded as excellent.

The national picture for all young people is poorer with one in every six sixteen-year-olds neither in education nor training in 2002 - this figure remains unchanged since 1999.

Indicator SE3 - Transport - Access to Public Services

Access to transport, whether private or public, is a major determinant of social exclusion. Anyone who is unable to make a journey at reasonable cost, in reasonable time and with reasonable ease will be excluded from a wide range of key services such as employment, education and healthcare.

Measuring accessibility is difficult as people have individual as well as group needs. For example, one common measure of access to transport services is the number of people within a certain walking distance of a frequent bus service. This, however, does not take into account those who have mobility impairments, or those who are afraid to use a subway on the way to the bus stop.

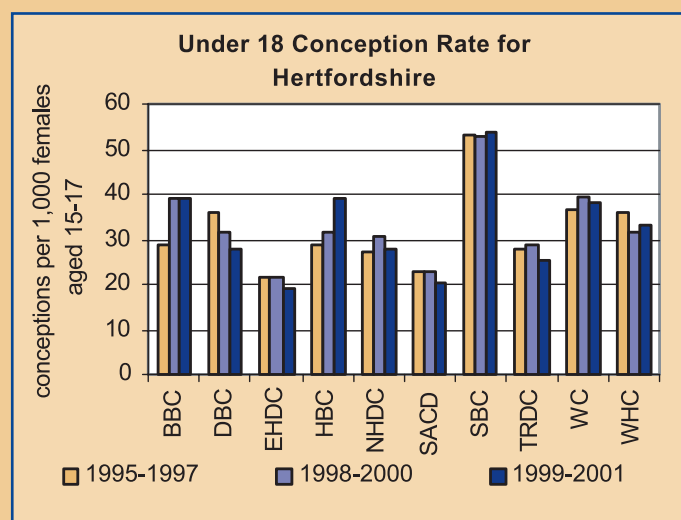
Local authorities and their partners will be required to look at accessibility planning for the next round of Local Transport Plans to be published in 2005. This work is only just beginning, and guidance is still awaited from central government.

Measurements of how easily people can reach particular services will be developed, and schemes to improve accessibility will then be delivered through the Local Transport Plan, community strategies and other strategic plans. Progress on

this work will be set out in next year's Quality of Life Report.

Indicator SE4 - Teenage Pregnancy

It is widely understood that teenage pregnancy and early parenthood can be associated with poor educational achievement, poor physical and mental health, social isolation, poverty and related factors (Health Development Agency, 2003). There is a growing recognition that health inequality and social exclusion can be both a cause and a consequence of teenage parenthood.



The UK has the highest rate of teenage pregnancies in Western Europe (UNICEF, 2001), at 42.5 per 1,000 pregnancies to girls under 18 (Office for National Statistics, 2001). A national Teenage Pregnancy Strategy was launched through the Social Exclusion Unit's Report in 1999 - with the main aims of halving the rate of conceptions among under 18 year olds by 2010 and increasing the participation of teenage parents in education, training and employment to reduce their risk of long-term social exclusion by 2010.

Hertfordshire has a 10-year Teenage Pregnancy Strategy with a rolling annual Action Plan of implementation, developed in line with government requirement. The strategy is a partnership document jointly led on by Hertfordshire County Council and the eight Primary Care Trusts and focuses on preventing teenage pregnancy and supporting teenage parents. Hertsmere PCT has overall lead for teenage pregnancy on behalf of all the PCTs.

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The partnership is working to local targets that have been set nationally to reduce the rate of conceptions among under 18 year olds by:

- 15% by 2004 (also NHS target)
- 45% by 2010 and;
- to increase by 60% the participation of teenage parents in education, training and employment to reduce their risk of long-term social exclusion by 2010

Hertfordshire's current under-18 conceptions rate is 29.1 per 1,000 females aged 15-17 (ONS, 2001), lower than the national average of 42.5 per 1,000 females aged 15-17. While there has been a downward trend in under-18 conceptions rate in the county, conception rates in some districts are higher than the county and national average, and we've seen a rise in conception rates in two or three districts in 2001.

The strategy is in its third year of implementation, steered by a countywide multi-agency Teenage Pregnancy Partnership Board. The Board will continue to work in partnership with local agencies including Schools, Youth Service, Connexions, Family Planning Services, Youth Offending Teams, etc, to build on ongoing work in improving delivery of Sex and Relationship Education in schools and community settings. 2004/05 will see further work on the prevention of teenage conception, with emphasis on vulnerable groups of young people (Looked After Children, young offenders, young people out of school etc), work with parents/carers and districts with high rates of conceptions.

Indicator SE5 - Poverty - Proportion of Children Under 16 Living in Low Income Households

Experiences of childhood including presence of poverty, discrimination and the absence of work and skills in the home can crucially shape and determine the experiences of adulthood and may contribute to continued poverty.

Child poverty for this table is defined by the Child Poverty Index as those children living in households that are dependent on means-tested benefits including income support, Job Seekers Allowance, Family Credit, and Disability Working Allowance. Although the Hertfordshire average rate

is relatively low (19%) the rate in particular wards, shown in the table, is much higher.

District/ Borough	% Under-16's living in poverty 2003 by District (overall average taken from ward data)	Ward containing highest % Under-16's living in poverty of district
Broxbourne	23.20	44.54 - Waltham Cross
Dacorum	17.71	38.90 - Highfield
East Hertfordshire	12.72	34.08 - Hertford Sele
Hertsmere	18.14	41.02 - Campions
North Hertfordshire	20.38	40.10 - Oughton
St.Albans	14.53	31.79 - Sopwell
Stevenage	30.43	47.29 - Bedwell Plash
Three Rivers	15.81	40.74 - Northwick
Watford	22.50	36.21 - Central
Welwyn Hatfield	20.19	41.24 - Peartree

Public services are working in partnership with the Voluntary and Community sectors and children and families to prevent current and future generations of children suffering poverty and disadvantage. This can be done by providing family and parenting education and support, raising educational achievement of children at risk or in need, providing free school meals and increasing numbers in education, training and employment and adult and family learning.

Early Years partnerships are increasing early years provision, childcare, and out of school places, including free and subsidised provision and integrated provision for special needs children, as well as the creation of an additional 33% of existing childcare places for 0-14 year olds where over 25% of children live in low income families. This supports employment of parents and achievement and future employability of children.

Other actions include: tackling health inequalities, promoting healthy lifestyles and good physical and mental health; subsidising and improving access to services; providing money and debt advice and promoting benefits take up.