



Research Briefing

The social gradient in children's social care

Rick Hood and Allie Goldacre, with Adam Davies, Ed Jones, Calum Webb and Paul Bywaters

There is a significant social gradient for children's social care services, which means they disproportionately intervene with children from more deprived backgrounds. Higher social gradients were found in certain types of areas and for certain types of children. Addressing these inequalities will require a shift away from late intervention and investment in a public health approach to child welfare.

Extracts from the national Children in Need returns for all English local authorities (LAs) held by the Department for Education were combined with data on income deprivation. The analysis identified the social gradient of referral, assessment and intervention for all children involved with statutory services, and investigated the different factors influencing the steepness of the gradient.

Key findings

- There is a strong social gradient in children's social care. When comparing 32,000 small neighbourhoods in England, rates of referral increased from 100 per 10,000 children for the least deprived neighbourhoods to more than 1,370 per 10,000 children for the most deprived neighbourhoods.
- For children who received statutory services after referral, the social gradient of intervention increased at every subsequent threshold. In an averagely deprived local authority, rates of child protection plans went up 80% for every 10% increase in the proportion of families on low incomes in the neighbourhood.
- A social gradient was also found to exist between LAs, in that more deprived LAs had higher average
 rates of intervention. However, when similarly deprived neighbourhoods were compared across LAs,
 rates of intervention were actually higher in more affluent LAs the 'inverse intervention' effect.
- More affluent LAs also had a steeper social gradient. This means that services in those LAs were even more disproportionately focused on poorer neighbourhoods than services in more deprived LAs.
- Social gradients were steepest for younger children, White children, children assessed with concerns about neglect, and children on protection plans under the category of neglect.
- Children from more deprived neighbourhoods tended to have longer periods of involvement with statutory services but also higher rates of re-referrals.
- After adjustment for neighbourhood deprivation, the highest rates of re-referrals and repeat CP plans were found in more affluent local authorities.

These findings suggest that the shift from prevention to intervention in children's social care is exacerbating inequalities and encouraging a disproportionate focus on poorer families. There is no evidence that a higher social gradient leads to better outcomes for children. A public health approach to child welfare is needed alongside policies to address the social problems impacting children's health and wellbeing.