Exploring the roles of Midwives and Health Visitors in addressing child poverty.

Findings from the Healthier, Wealthier Children (HWC) project.

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Background

- Like other UK cities, Glasgow faces the challenge of addressing high child poverty levels – in some parts of the city, 52% of children live in poverty.
- The Scottish Government’s Child Poverty Strategy sets out measures to address inequalities and child poverty through maximising household resources and improving children’s wellbeing and life chances.
- Within NHS Greater Glasgow and Clyde, the Scottish Government-funded Healthier, Wealthier Children (HWC) Project was set up in October 2010 with the aim of developing referral and information pathways between universal NHS Early Years health services and Welfare / Money Advice services to support pregnant women and families with young children experiencing, or at risk of, poverty.

HWC in Practice

- HWC workforce: Across NHS Greater Glasgow and Clyde, 12 Development Workers were employed within local Health Improvement teams with another post located within Addictions Services. Through a commissioning process, 12 Money Advice Workers were recruited by local Advice services, to respond to HWC referrals from the NHS Early Years workforce.
- The main focus of HWC development work was initially with Midwives and Health Visitors to encourage referrals of patients fitting the inclusion criteria.
- HWC criteria: pregnant women, families with children under 5 yrs or children with additional support needs, up to 19 years.
- Other specific criteria included: (1) minority ethnic groups (e.g. Roma), kinship carers and mental health/addictions problems; (2) Household income less than £40,000 per annum.

Workforce survey aims

- To explore the attitudes of Midwives and Health Visitors towards the HWC project
- To examine changes in knowledge and behaviour with regard to child poverty and financial inclusion
- To investigate the impact of the project on working practices

Methodology

- A postal survey was carried out with a 30% random sample of the total combined population of Midwives and Health Visitors (n=1127) across all Community Health (and Care) Partnerships in NHS Greater Glasgow and Clyde, resulting in a study sample of 400 (Figure 1).

Figure 1. Early Years Health Workforce Study Sample

Results

80% of all project referrals to welfare / money advice services were received from Midwives and Health Visitors.

- More Health Visitors indicated referring patients to HWC (83%) than Midwives (36%).
- Over three quarters of Midwives (76%) and Health Visitors (79%) thought they were both the most appropriate workforces to refer patients to HWC advice services.

Change in attitudes towards financial inclusion enquiry

- Health Visitors ranked Income Inequalities and Poverty as a priority above three HEAT targets (NHS Performance framework in Scotland) - Smoking Cessation, Child Healthy Weight and Child Oral Health.
- Slightly more Health Visitors than Midwives reported a change in their attitudes (48% vs. 35%).
- Comments suggested they are more likely to discuss the subject of finances with patients as a result of HWC.

Change in knowledge and awareness of financial inclusion issues

- More Health Visitors than Midwives reported increased knowledge and awareness of a range of financial inclusion/poverty issues.
- The largest differentials were in relation to Child Poverty (31% vs. 13%) and ‘Other’ issues such as fuel poverty and employability (28% vs. 6%).

Additional Comments:

- “Already aware of some of above” (MWx2; HV x 2)
- “Don’t become overly involved” (HV)
- “Don’t have time within job - happy to refer to other areas that can help” (HV)
- “Don’t have time within job - happy to refer to other areas that can help” (HV)
- “I have always tried to keep myself up to speed about what is available” (MW)

Impact of HWC on practice

- A majority of both Midwives and Health Visitors intend to continue referring patients to money advice services, post-HWC.
- However, a higher proportion of Health Visitors (77%) than Midwives (32%) intend to continue referring.

Conclusions

- More Health Visitors than Midwives were aware of, and referred patients to, the HWC project. This may reflect their more community-based role and more in-depth knowledge of the wider social context of their patients’ lives.
- The HWC project has prompted both workforce groups to enquire further referring patients to money advice services, post-HWC project. This positive engagement in mitigating child poverty provides scope for developing this work across the wider Early Years health workforce.

References