

Welfare cuts will have negative impact on poor children's health

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Dr David Taylor-Robinson and colleagues from the University's Institute of Psychology, Health and Society believe health outcomes for children and young people in the UK will become worse under the new proposals

after studying two recent reports from the Joseph Rowntree Foundation and the Resolution Foundation.

The Rowntree analysis shows that lone parents and families with children who depend on welfare support will see their income substantially reduced, whereas pensioners and workers without children are the clear beneficiaries.

Poor health outcomes

The Resolution Foundation analysis corroborates the damaging effect on children, suggesting that an extra 200,000 will be in poverty by 2016 as a result of the changes, potentially rising to 600,000 once all the policy measures have taken effect.

The poor [health outcomes](#) for children and [young people](#) in the UK is largely due to the high rate of child poverty.

These findings have been published as part of an editorial on The *British Medical Journal* website.

Support needed

Dr David Taylor-Robinson, said: "There are unacceptable inequalities in health outcomes for children in the UK that are clearly linked to early exposure to poverty and social disadvantage.

"For instance, by the time they are five-years-old children from the poorest fifth of homes in the UK are already on average over a year behind their expected years of development.

"The public policy implications of these findings is clear, we must

support families with young [children](#). It is important to support parents in work through paid parental leave, flexible work schedules, living wages, and affordable high quality child care, but we also need to provide adequate welfare benefits.

"We can invest now or pay more later for society's failure to promote healthy development in the earliest years of life."

More information: "Child health at risk from welfare cuts." *BMJ* 2015; 351 doi: [dx.doi.org/10.1136/bmj.h5330](https://doi.org/10.1136/bmj.h5330)

Provided by University of Liverpool

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