

Stage 3 Briefing

Children and Young People (Scotland) Bill

Making Progress toward *Putting the Baby IN the Bath Water*

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The basic story

There is near universal support for the idea of ‘primary prevention’ (that is, keeping harm from happening in the first place). There has also been a dramatic increase in understanding about the powerful, life-long impacts of what happens -- or fails to happen -- during the first 1,001 days of life (that is, from pre-birth to age 2). Thus, there is now near universal support for the idea of making the beginning of life as healthy and successful as possible for Scotland’s youngest children and their families.

The Scottish Government expressed these ideas well and often in the Policy Memorandum accompanying the introduction of the Children and Young People (Scotland) Bill. *Unfortunately, these policy intentions were **not** explicitly and robustly reflected in the Bill, as introduced.* Acting as ‘critical friends’, more than eighty key organisations and distinguished individuals joined together as signatories to *Putting the Baby IN the Bath Water*.

Our coalition offered five recommendations (see page 8) for how to close this gap in ways that advance Scotland’s aspiration to become ‘the best place to grow up’. Our collective recommendations were translated into numerous amendments at Stage 2. The Education and Culture Committee **unanimously** approved some of our suggested improvements to Parts 3 and 9 of this Bill. Most of the other coalition-backed amendments were defeated, but with assurances from the Minister that these policy intentions would be reflected in subsequent statutory guidance.

Our key requests to MSPs at Stage 3

- 1 Support Amendment 193 lodged by Liam McArthur. This would remove a major legislative obstacle to primary prevention and early intervention from birth to age 2.** This amendment to the Education (Additional Support for Learning) (Scotland) Act would offer the youngest children and their parents equal treatment under this landmark Scottish legislation. The same eligibility criteria and support already available to older children would now apply to the youngest ones, too. Appropriate additional support during the first 1,001 days of learning will strengthen primary prevention, allow the earliest possible intervention and avoid higher costs once these children reach school age.
- 2 Encourage Scottish Ministers to make a firm commitment to implement the five recommendations from *Putting the Baby IN the Bath Water* through the secondary legislation, regulation and statutory guidance (as appropriate) that will follow the enactment of the C&YP Bill.** We hope that the Minister will confirm and strengthen earlier indications that primary prevention and robust support during the first 1,001 days of life **will become explicit priorities** for public bodies involved in children’s services.
- 3 Provide sufficient support for, and maintain meaningful parliamentary oversight of, the implementation of the Children and Young People (Scotland) Act.** This legislation has the potential to significantly improve the wellbeing of Scotland’s newest generations. Realising that potential in real life requires adequate and wise public investments in the people, relationships, organisations and activities capable of making Scotland ‘the best place to grow up’.

This ranges from strengthening the quantity and quality of health visiting to preparing and supporting parents in a more positive, consistent, **relationship-building** manner. Rigorous parliamentary scrutiny of the return on those investments – *as measured by improvement in the lives and life chances of our nation's babies, children and young people* – will help keep everyone's eyes focused on the right prize.

No second chance to make a good first impression

The Scottish Parliament and Scottish Government have already accorded priority to preventative spending. That excellent decision can be given clearer meaning and enduring power through, and beyond, this legislation. As the Christie Commission concluded, Scotland's continuing challenge is to become more dedicated to, and more effective at achieving, *primary prevention*. This Commission estimated that 40% of public budgets are now spent on problems that could, and should, have been prevented.

*For all the good that this Bill can do, there still remains a great deal of **unfinished business** around the first 1,001 days of life.* The point is not that this is the only period that matters. It is almost never too late to promote and improve the wellbeing of a particular child or young person. Nevertheless, these earliest days, weeks, months and years are the focus of our coalition for two reasons.

First, we understand there is no second chance to make a good first impression on the brains, bodies and behaviours of babies and toddlers. Giving up drinking alcohol or smoking regularly during the seventh month of pregnancy is far better than not stopping at all – but it cannot undo damage done during the previous six months. Similarly, nature only gives a mother and baby one small window of opportunity in which both of them can receive the remarkable physical and emotional benefits of breastfeeding.

Second, we are very familiar with the overwhelming international scientific evidence that getting it right for children and their parents during the first 1,001 days of life creates a healthy biological, neurological, emotional, intellectual and psychological foundation for the rest of their lives.

Investment in this crucial period will result in major savings to the public purse during the short term, as well as in the long run. *Waiting to deal with significant vulnerabilities and emerging concerns until something bad happens – or until children reach school age – only makes the remedies more expensive and less effective.*

In conclusion

The C&YP Bill is a good start toward our nation living up to its high aspirations. We fully support the Scottish Government's stated intention to: "Put Scotland squarely on course to shifting the balance of public services towards early intervention and prevention by 2016." Acting favourably on our three requests in this briefing is an important step toward *actually* shifting this balance.

Our coalition has offered to share our expertise with the Scottish Government, and with relevant public bodies, as this new Act moves ahead through guidance to implementation. We are keen to help this legislation live up to its potential.

Finally, we wish to **thank** the many and varied participants who have contributed to the creation and on-going improvement of this significant legislation. The Education and Culture Committee – and the Minister for Children and Young People – kindly acknowledged our coalition's contributions and agreed that the recommendations from *Putting the Baby IN the Bath Water* should be reflected in the forthcoming statutory guidance. We thank Joan McAlpine and the Minister for lodging key coalition-supported amendments, which were *unanimously* approved by Committee members. We thank Liam McArthur, in particular, for bringing forward most of the amendments our coalition suggested. We believe the cross-party political will to really 'Getting it right for every child' is a great asset upon which Scotland can build.




























Note: All MSPs have received the original e-version of *Putting the Baby IN the Bath Water*. The list of organisational and individual signatories follows. MSPs are encouraged to discuss any concerns with, or ask questions of, any of the signatories directly. Information is also available from our coalition's informal coordinator:

Dr Jonathan Sher (Scotland Director, WAVE Trust)
jsher@wavetrust.org or on 0744 333 1953.

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Signatories to *Putting the Baby IN the Bath Water* Organisational Participants

-  Aberlour
-  Alcohol Focus Scotland
-  ASH Scotland
-  Barnardo's Scotland
-  Bedrock Charity
-  Centre for Excellence for Looked After Children in Scotland (CEL CIS)
-  Children 1st
-  Children's Parliament
-  Circle Scotland
-  Clan Child Law
-  Community Practitioners & Health Visitors Association (CPHVA/Unite)
-  CrossReach
-  Down's Syndrome Scotland
-  ENABLE Scotland
-  Families Outside
-  Fast Forward
-  Fathers Network Scotland
-  Fife Gingerbread
-  Govan Law Centre
-  Howard League Scotland
-  Institute of Health Visiting
-  Mellow Parenting
-  Mentor (Scotland)
-  Mindroom
-  National Childbirth Trust (NCT)

-  National Society for the Prevention of Cruelty to Children (NSPCC) Scotland
-  Parenting Across Scotland
-  Quarriers
-  Queen's Nursing Institute Scotland (QNIS)
-  Relationships Scotland
-  Royal College of General Practitioners (RCGP)
-  Royal College of Midwives (RCM)
-  Royal College of Nursing (RCN) Scotland
-  Royal College of Obstetricians and Gynaecologists (RCOG)
-  Royal College of Paediatrics and Child Health
-  Royal College of Speech and Language Therapists
-  Scotland's Commissioner for Children and Young People (SCCYP)
-  Scottish Association for Community Child Health (SACCH)
-  Scottish Association of Social Work (SASW)
-  Scottish Attachment in Action (SAIA)
-  Scottish Childminding Association
- Scottish Directors of Public Health
-  Scottish Health Action on Alcohol Problems (SHAAP)
-  Scottish Pre-School Play Association (SPPA)
-  Scottish Marriage Care
-  Scottish Paediatric Society
-  Scottish Women's Aid
-  Together (Scottish Alliance for Children's Rights)
-  YouthLink Scotland
-  Youth Scotland
-  WAVE Trust

Tackling the roots of violence

Signatories to *Putting the Baby IN the Bath Water*

Individual Participants

Dr Rowena Arshad OBE

Director, Centre for Education for Racial Equality in Scotland (CERES)
University of Edinburgh

Anne Black, Social Work Consultant

(former Chair of the GIRFEC Moving Forward in Kinship and Foster Care Group)

Professor Mitch Blair

Consultant Paediatrician and Specialist in Child Public Health
(Advisor to England DH on Healthy Child Programme)

Dr John Bryden

Emeritus Professor of Human Geography, University of Aberdeen
(and President of the International Rural Network)

John Carnochan OBE QPM FFPH

Founding Director, Scottish Violence Reduction Unit
(and former Detective Chief Superintendent, Strathclyde Police)

Dr Helen Cheyne

Professor of Maternal and Child Health (and Director, Nursing Midwifery and Allied Health Professions Research Unit)
University of Stirling

Dr Forrester Cockburn

Emeritus Professor of Child Health, University of Glasgow
(Past President of the British and European Societies of Perinatal Medicine)

Dr Linda de Caestecker

Director of Public Health
NHS Greater Glasgow and Clyde

Dr Jonathan Delafield-Butt

Lecturer in Early Years
University of Strathclyde

Aline-Wendy Dunlop MBE

Emeritus Professor of Education
University of Strathclyde

Dr Stewart Forsyth

Honorary Professor
University of Dundee
(Formerly Medical Director and Consultant Paediatrician, NHS Tayside)

Professor John Frank

Director, Scottish Collaboration for Public Health Research and Policy (SCPHRC)
University of Edinburgh

Rev Sally Foster-Fulton

Convenor
Church and Society Council
Church of Scotland

Dr Christopher Gillberg

Professor of Child and Adolescent Psychiatry
University of Glasgow (and University of Gothenberg)

Dr Pat Hoddinott

Professor and Chair of Primary Care, NMAHP
Research Unit, University of Stirling

Dr Patricia D. Jackson

Neuro-developmental Paediatrician
Honorary Senior Fellow
University of Edinburgh

Dr Jonathan Kotch

Distinguished Professor of Maternal & Child Health,
University of North Carolina
(Former Senior Fellow for Child Health, Children in Scotland)

Dr James Law

Professor of Speech & Language Science
University of Newcastle (formerly Queen Margaret University)

Kathleen Marshall

Child Law Consultant (Former Commissioner for Children and Young People in Scotland)

Dr Neil McIntosh

Emeritus Professor of Child Health
University of Edinburgh

Dr Helen Minnis

Senior Lecturer in Child and Adolescent Psychiatry
Institute of Health and Wellbeing
University of Glasgow

Professor James Mitchell

Chair of Public Policy, University of Edinburgh
(Past member, Christie Commission)

Sue Palmer

Literacy Specialist
Author of Toxic Childhood

Dr Moira Plant

Emeritus Professor Of Alcohol Studies
University of the West of England (formerly University
of Edinburgh)

Professor Mary Renfrew

Director, Mother and Infant Research Unit
University of Dundee
(Trustee, UNICEF UK)

Alan Sinclair CBE

Economist and Associate
Centre for Confidence and Well-Being

Dr David H Stone

Professor of Paediatric Epidemiology
University of Glasgow

Professor Julie Taylor

Co-Director, NSPCC Child Protection Research Centre
University of Edinburgh

Donald Urquhart

Community Safety and Child Protection Consultant

Professor Philip Wilson

Professor of Primary Care and Rural Health
University of Aberdeen

Dr Suzanne Zeedyk

Developmental Psychologist
The Science of Human Connection

The five recommendations from *Putting the Baby IN the Bath Water*

- 1** Government involvement in the initial training and continuing education of those working with mothers/fathers/carers during the first 1,001 days of every child's life should give priority to developing effective, positive, relationship-based support. The Government should also ensure that sufficient numbers of very skilled, knowledgeable, relationship-focused supporters for mothers/fathers/carers are available and sustained for at least these first 1,001 days. More and better support is necessary.
- 2** Public bodies should be required to promote, and accord priority to, effective policies and actions that result in positive/secure attachment between very young children and their mothers/fathers/carers. Universal services and supports, supplemented and extended as needed, should be designed and delivered in ways that result in the healthy emotional, social, intellectual and physical development of all children from pre-birth to age 2 throughout Scotland.
- 3** This Bill should require robust assessments/ measures of the extent to which – and reasons why – positive/secure attachment and other key dimensions of healthy emotional, social, intellectual and physical development are (or are not) being achieved with all children (pre-birth to age 2) in Scotland. These assessments should create the evidence base that generates effective interventions benefitting young children and their families swiftly and fully.
- 4** The Scottish Parliament should integrate prevention explicitly into the aims of children's services planning already listed in the Bill. This should lead to meaningful planning for, and regular reporting of progress toward, a better balance between prevention and reaction by public bodies. Priority should be accorded to 'primary prevention', which keeps harm to young children in Scotland from happening in the first place.
- 5** MSPs should act upon this unique chance to reinvent and reinvigorate the health visiting profession as an indispensable part of Scotland's early years workforce.