



Enquiries: 0300 33 00 770
Press Office: 0870 7703238
Email: policyresearch@nct.org.uk
Website: www.nct.org.uk

NCT Document Summary^a

Child Health Strategy: Healthy lives, brighter future (pregnancy and the early years of life)

The Department of Health (DH) and the Department for Children, Schools and Families (DCSF) have jointly issued *Healthy lives, brighter futures*¹ the long term strategy for children and young people's health, which sets out for the first time what children and their families can expect from child health services in their areas, from birth through to the age of 19, as well as additional support for children and young people in need of acute or ongoing healthcare. Alongside £340m investment for children with disabilities and their families, the strategy has a demonstrated a strong focus on improving health and well-being in the first years of life.

Healthy lives, brighter future sets out how Government will work in partnership with local authorities and primary care trusts and those working across children's health services to build the quality of support for families at key stages in their children's lives. It focuses on how the range of services in contact with children and young people can work better together, with families to achieve common aims. The strategy will help the Government deliver its 2020 ambition of making England the best place for children to grow up.

This long-term strategy aims to underpin the policy recommendations, standards and ambitions set through the *National Service Framework for Children, Young People and Maternity Services* and the *Every Child Matters* programme for improving outcomes for children. It builds upon the consistent approaches of the *NHS Next Stage Review* and *The Children's Plan* and reinforces the guidance set out in *The Child Health Promotion Programme*.

Summary

The key principle underpinning the child health strategy is to ensure that parents get the information they need to support their children's health. This strategy recognises that parents are the key to achieving the best physical and mental health outcomes for their children, and sets out the principles of the relationship between parents and services. The strategy will be delivered via The Healthy Child Programme. Local areas will be expected to set out what children and families can expect from their health services locally – to help all parents access the support they need, when they need it in pregnancy and the early years, with intensive support given to the most vulnerable families. To ensure that the right services are in place to meet the needs and expectations of children and their families the Government has committed to:

^a NCT document summaries present a précis of the content or main messages in documents published by government, research organisations, parliament, etc with relevance to maternity care, the transition to parenthood and life with a baby or toddler. The language is usually taken directly from the source document so it is not the view or policy of the NCT. Comment from the NCT is provided labelled clearly in a separate section or sections.

- the development and testing of a **new antenatal programme and preparation for parenthood package** for mothers and fathers, including those from disadvantaged backgrounds;
- **more health visitors** to deliver the Healthy Child Programme;
- a **strengthened role for Sure Start Children's Centres**, with each Children's Centre having access to a named health visitor and through delivery of health-based programmes focusing on smoking and obesity
- **expansion of the Family Nurse Partnerships programme** to support first time mothers from 30 to 70 sites by 2011, with a view to rolling it out across England over the next decade.

The document states that 'better support in the early years (and through childhood and adolescence) will lay the foundation for better health and life chances into adulthood' and sets out that it 'means doing more for the most vulnerable, to reduce persisting inequalities in health and wellbeing outcomes for different groups'.

NCT Comment

This strategy sets out how the government plans to implement the Child Health Promotion Programme, which addresses so many issues of importance to parents and to the NCT. The NCT works with parents and for parents. We support, inform and value parents' views and experiences as part of our delivery of services for parents. We act as advocates for parents, researching and communicating their views and priorities to government, and to local commissioners and professionals. We believe that by supporting mothers and fathers to become the parents they want to be we are also supporting the best start in life for children. The Government set out very similar objectives in the Child Health Promotion Programme,² this strategy shows where there will be additional funding and where new practical measures put in place centrally or expected to be implemented locally.

What is new in the Child Health Strategy (Pregnancy and the early years of life)?

1 Enhancing the visibility, impact and workforce support for the Healthy Child Programme

The Government believes parents have *'a good level of knowledge about specific parts of the Healthy Child Programme such as the child health record (red book) and the role played by midwives and health visitors'* and wants them to have *'the same level of awareness about all the local support on offer or how to access it'.*

The strategy proposes:

- providing accessible, comprehensive information about health services to children and families in local area, including information provided through NHS Choices and the Pregnancy Care Planner;
- that the national standard contract for community services will include a service specification for the Healthy Child Programme, to ensure ongoing monitoring of the quality of this programme;
- to recruit more health visitors;

- Developing an e-learning programme for health professionals to include modules on attachment, neurological development, speech and language development, the promotion of a healthy weight and relationship support, recognising that the birth of a child is a period during which relationships are most at risk.

2 Improving antenatal and postnatal support, including for fathers

The government believes that *'The important role that fathers play is too often overlooked particularly during pregnancy and the early years'*. The Child Health strategy aims to ensure that fathers, as well as mothers, are fully engaged in the range of services supporting healthy child development

The strategy proposes:

- research with SHAs to identify best practice in maternity services in terms of training for midwives to engage and support fathers; and provision for fathers to stay in hospital when their partners are in labour wards;
- ensuring that families are aware of the arrangements for fathers staying with their partners when they are in labour, to help inform the choices they make over their maternity care;
- developing a new Antenatal Education and Preparation for Parenthood Programme, to improve access to antenatal education and prepare parents for parenthood using a model of progressive universalism, so that there is a particular focus on the most vulnerable parents such as teenage mothers and young fathers, who often feel excluded from antenatal education;
- Improving postnatal support by identifying and piloting new methods of engaging mothers and fathers, informed by the highly personalised principles of the Family Nurse Partnership Programme;
- new guidance on children's 2-2 ½ year review;
- roll-out of the NHS Early Years Life Check, a web based tool to support parents and carers with babies who are 5-8 months old, which includes information and advice on playing and learning, protection against disease, sleeping and feeding;
- development of a Fathers' Early Years Life Check, which will provide fathers with tailored information on their baby's health and development;
- investment of £4m during 08/09 to promote the UNICEF Baby Friendly Initiative in both hospitals and community settings in areas with the lowest numbers and rates of breastfeeding;
- provision of a strengthened focus on breastfeeding through Sure Start Children's Centres and primary care including more staff training to promote and support breastfeeding; and establishment of peer support groups;
- Commissioning Guidance (by summer 2009) to assist PCTs provide coherent services to promote breastfeeding and reduce health inequalities;
- provide practical support to further help Sure Start Children's Centres engage with and support fathers;

3 Strengthen the role of Sure Start Children's Centres in promoting child health

The Government says: *Sure Start Children's Centres help deliver the Healthy Child Programme, but they also help parents access high quality early years learning and childcare services. They have a particular focus on improving support to families who have been less inclined to access traditional services. Sure Start Children's Centres provide an opportunity for effective integration and coordination of services to provide a joined-up approach for families*

The strategy proposes:

- To establish Sure Start Children's Centres on a statutory legal basis as part of the Apprenticeships, Skills, Children and Learning Bill. This will ensure that all partners have greater clarity about the role the centres play in the community, and that families are able to access high quality services in every area.
- To ensure joint working between health visitors and Sure Start Children's Centres, with every centre having access to a named Health Visitor to work as part of the team and oversee the health work of the centre.
- To ensure that health visitors have clear responsibilities and support to lead the Child Health Programme, including support and supervision for outreach work and home visiting with families in pregnancy, with a new baby or young child - to secure, safe and high quality care and practice and to clarify accountabilities in local settings.
- Extension of successful health-based programmes delivered through Sure Start Children's Centres such as tackling childhood obesity and Stop Smoking services for mothers and fathers. A new focus on promotion of closer working between substance misuse treatment services and maternity services.

4 Expanding the Family Nurse Partnership model and strengthening early intervention

The Government says: *One of the most important developments for vulnerable families has been the piloting of the Family Nurse Partnership Programme. It is an evidence based programme targeted at some of the most vulnerable teenage mothers and their families. The nurses work with young first time parents to help them adopt healthier lifestyles for themselves and their babies, provide good care for their babies and plan their future life goals.*

The strategy includes:

- Increasing the number of *Family Nurse Partnership programme* sites from 30 to 70 between 2009-2011, with a view to extending across England over the next decade, if the programme is successful.

NCT comment

The NCT welcomes this new strategy which recognises that new parents need support in the early months and early years. The NCT has known for decades that by supporting mothers and fathers to become the best parent they can be, we are also supporting the best start in life for children.

We welcome the emphasis on the valuable role that parents play in their children's lives, a role that has often been overlooked or taken for granted. It is important to acknowledge that becoming a mum or dad for the first time, or adding to your family, is a major social and emotional transition involving uncertainty and new challenges that often cause anxiety and stress. As families come in a variety of shapes and sizes, lone parent families, step-families, cohabiting families, extended families, first-time families and so on, it is vital that those working with new parents are aware of the issues involved and sensitive to different individuals' needs.

The NCT is working with One Plus One to develop our work on supporting strong couple relationships. We welcome the strong focus on the role of fathers and commitment to involving fathers during the early years, in particular in the hospital setting during labour and postnatally. We have a long history of working with fathers in antenatal classes and have consistent positive feedback for the parent-led approach used in our courses. But there is always scope for improvement. As we update our strategic plan (in 2008-09) we will review father's needs, including non-resident fathers, and how we can respond.

We welcome the renewed focus on antenatal education and postnatal support. Antenatal preparation for birth and parenting is invaluable yet access has been restricted in some areas in recent years and the most disadvantaged parents tend to lose out. The investment in a new antenatal programme will provide more parents, including those from disadvantaged backgrounds, with the best platform to begin parenthood and the assurance and confidence in their own abilities. We support the development of services in areas with more disadvantaged families and a lack of support networks, but highlight the need to include rural and remote communities as well. We are fully committed to the development of accessible postnatal services and groups so that all mothers and fathers can meet other parents with young children and parents-to-be in their local area. We know from experience that mutual support and information sharing can be an affirming and empowering experience that builds parents' confidence and often leads to life-long friendships.

The £4m commitment to improve the rates of breastfeeding in areas with the lowest rates is welcome. Breastfeeding makes a major contribution to public health and has the potential to reduce health inequalities.³ New mothers need individualised, timely and accessible support to help them establish successful breastfeeding. Investment in training for frontline staff will help promote the benefits of breastfeeding and increase the support available to women. We fully support the establishment of peer support programmes, involving and empowering local mothers working in their own neighbourhood to help other new mothers breastfeed their baby.

The NCT welcomes the emphasis on the importance of one to one supporter services with the Family Nurse Partnership, which provides intensive support and continuity for some of the most vulnerable families, particularly teenage mothers. Teenage pregnancy is strongly associated with social disadvantage. Teenage mothers are less likely to consume an adequate pregnancy diet and more likely to smoke, both which has negative health consequences for themselves and their babies. Young mothers are also less likely to breastfeed. The programme has demonstrated success in engaging and building relationships with young mothers and fathers.⁴ Parents involved in the pilots reported a better birth experience, increased rates of breastfeeding and development of a strong bond with their new baby. We support the targeting of services to the most vulnerable groups to ensure pregnancy and early parenthood is a positive experience, and all mothers and fathers start life as parents physically and mentally healthy.

The investment in greater numbers of health visitors is also welcome. Parents value this service for advice on child health, parenting and child development, its open access and individualised support for health issues such as postnatal depression.⁵ Over the past years there has been a

reduction in the number of health visitors which has impacted on the support available to new parents. Studies have shown that families would like more visits from health visitors but this service has increasingly been targeted at the most vulnerable families. We would like to see all parents having access to a named health visitor to ensure that those most in need get the support and help they require, but also parents who may require less support can access individualised and timely support as and when they need it.

Under the model of 'progressive universalism' there will be new opportunities for the NCT to contract with local authorities to provide drop-in groups, practical tips and evidence-based information, and one-to-one support, including access to our helplines, breastfeeding counsellor services and peer support. There will also be greater need, and opportunities, for mothers and fathers to join NCTs informal support networks.

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The NCT wants all parents to have an experience of pregnancy, birth and early parenthood that enriches their lives and gives them confidence in being a parent.

Donations to support our work are welcome.

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