

THE EARLY YEARS INVESTMENT: PAY NOW OR PAY LATER

Conference held in Edinburgh on June 24, 2008

This was a one-day conference, with four very intensive sessions, chaired by Jacquie Roberts, Chief Executive, Scottish Commission for the Regulation of Care, The Care Commission, who introduced the first speaker, Adam Ingram, Minister for Children and Early Years in the Scottish Government. He assured us that early intervention was at the heart of the Scottish Government's agenda, as too many children are at present not having their needs met. Too often those most in need of help are not identified, so that only the symptoms are presently being treated, not the causes. The impact of poverty and deprivation is such that by the age of three, some children living in such circumstances are already up to a year behind their peers in development. The Government is focused on preventing risk from becoming harm, and has moved from crisis management to prevention and early intervention. In the autumn it will announce a new framework on four themes:

- a) building family capacity: parents need to feel equipped to provide a nurturing environment.**
- b) rebuilding deprived communities: strong families need strong communities. Poverty and deprivation need to be tackled**
- c) Delivery of policies through holistic working of agencies**
- d) Building a workforce: the sharing of common values across agencies**

He emphasised that the cycle of prevention needed to start now, and required a cultural shift in society and policy-makers about how we think and quantify success in the early years – “there is no magic wand!”

A question and answer session followed: This illustrated that the Government are looking to Sweden as a possible model, where there is a continuum, with children moving at their own pace, and a unified workforce. (unlike here, where there is segmentation into different professional groupings)

Session 1 – A Healthier Scotland

The second speaker was Alan Sinclair, Visiting Fellow of the Work Foundation, who started by asking the question “where are we?”, and presenting the scale of the challenge, illustrated by statistics from the UNICEF ranking recently published ,with the UK at the bottom. There is disparity across the country, and if Glasgow were removed, the place in the table would rise. He compared the challenge to the ranking of football teams – how can Stirling Albion or Clyde get as good as Rangers or Celtic?

He considered that many of Scotland’s intractable problems - poverty, obesity, alcohol use, anti-social behaviour etc – were not so much different problems, but the same problem stated different ways . Scotland is moving in the right direction by having the debate – PEOPLE have to change what they do. We need universal services that are powerful before identifying the extra needs that some children have. We need to be better at prevention, and be able to identify what skills are required to get people to be better parents, especially people who have had either no or bad experiences of parenting. The challenge is huge, but in the long term we must give it serious priority in policy and practice.

Dr Jacqueline Wallace - Research Scientist and Leader of the Early Life Nutrition Group at the Rowatt Research Institute – was the next speaker, and emphasised how early intervention for public health considerations needed to begin. She presented a wide range of research linking foetal nutrition to infant mortality, low birth weight, childhood and lifelong obesity and other long-term health conditions. Predisposition to such conditions could cause health inequalities perpetuated across generations. There is a disparity in foetal nutrition and prenatal care between socio-economic groups, which is of particular relevance for the 1 in 10 pregnancies occurring across Scotland in adolescents, as well as the rising low birth weight of babies being born across the country, born to adolescent mothers who are themselves still growing! It was noted with interest that over the last two decades, there has been little change in the numbers of adolescents giving birth. Many biological factors were in place by birth, and could not be altered by good behaviour later in life. A baby’s internal organs are almost entirely developed by birth, and can be irreparably damaged if foetal nutrition is restricted. Thus it is essential for mothers and health professionals to get it right during pregnancy as a vital step to maximise our children’s life chances.

Dr Linda de Caestecker – Director of Public Health, NHS Greater Glasgow and Clyde – was the final speaker in the first session. ‘If you are poor, you die younger’ – a stark fact.. She dealt with the range of risk factors for young children and families, and what the future focus of public health should be in dealing with the early years;

- a) **smoking – around 24% of people still smoke, with higher proportions in the poorer groups. Smoking cessation initiatives are important during pregnancy, and providing incentives seems to work. We need to protect children from second-hand smoke, and have smoke-free homes initiatives.**

- b) **breast feeding – there are health benefits for both mother and child. There is a class gradient, with as few as one fifth of those in the lower socio-economic classes breast feeding regularly. More support for breast feeding is required.**

- c) **oral health - this is an indicator of early nutrition, and registering with a dentist early needs to be encouraged.**

- d) **obesity - a problem for the whole of society – the increase in obesity in children is still happening, although not all overweight children become overweight adults. It is an epidemic that must be taken seriously, and she was in favour of the ‘nanny state’ when it comes to diet! Advertising and marketing works – it DOES influence children’s diet, and we need legislation to prohibit these poor models of advertising. She is encouraged by the Government’s attitude to alcohol and tobacco.**

Good parenting can counter the effects of poverty, and she called for greater support for parenting programmes, in a way that removes any stigma attached to such programmes. As long as parenting programmes are seen as indicators of failure as parents, they will not be taken up as the ‘norm’

Session 2 – A Smarter Scotland

Prof. Kathy Silva, Educational Psychology, University of Oxford introduced new results from the Effective Provision of Pre-school Education (EPPE) project, where a sample of 3,100 children from across six local authority areas have been followed from pre-school to their present age of 10-11years to assess and measure the impact of staying at home versus high, medium or low quality preschool provision. Quality was shown to have a huge impact on the effectiveness of preschool provision, with the level of qualification of the staff being the key factor. Preschool can help children be resilient, but low quality provision can be worse than staying at home – need high quality to show improvement. How long a child was in preschool also had an

impact, the longer the better, despite disparities developing between high and low quality provision. A major factor in the quality of the home learning environment was the level of qualification held by the parents, particularly the mother, so that increased attention to parental education was important if Scotland wanted to take the 'long view'. Even low quality provision was good for improving social behaviour, with the exception of hyper-active children who did better if they stayed at home.

Ian McLaughlan, Chief Executive of the Scottish Pre-school Play Association argued for a seismic change in our attitude towards play, and hoped that play would be a key component of the early years framework. Play is VITAL to child development, and is NOT an add-on. Parents should be wary of filling the child's day with structured education too early as a result of undervaluing the role of play in learning and development. Children take play very seriously – it is their 'work', and integral to neural development in babies and toddlers. If these neural networks are stimulated early, physical connections will develop to support further learning. Through play children deal with painful processes, relationships with others, how other people think. They make rules, break rules, process direct experiences – a process of learning that gives a key foundation for later life in the practice and mastering of skills, making friends, gaining confidence and self-reliance. Nature and the outdoors give children a cupboard full of activity, and society should be aware of becoming too risk-averse. We should take our cues from our children – they play best!

Session 3 - Panel Debate

Participants: Jean Carwood Edwards, Early Years Team Leader, Learning and Teaching Scotland

Karyn McCluskey, Deputy Head, Violence Reduction Unit, Scotland

Mary Howden, Head of Education and Workforce Development, Scottish Social Services Council

Marie Garrity, Health Visitor, NHS Greater Glasgow & Clyde

The discussion addressed the balance between targeted versus universal care provision in early years. The concensus was that a range of universal services needed to be provided, and then targeting within those services to reach those in greatest need. There was discussion as to what the universal services should encompass and how best to target within that. The point was raised that no new money was coming with the early years framework, so the emphasis was on encouraging effectiveness through inter-agency co-operation, integration and reducing the doubling up of a lot of ongoing work, to make services more streamlined and effective.

Session 4 – Strategic Partnerships for Early Years

Dr Jacqué Fee, Assistant Director of the Childhood and Families Research and Development Centre, University of Strathclyde

The focus here was on how best agencies and individuals can work together to integrate services for children and families, bearing in mind the confusion many parents feel when trying to engage with the wide range of services available. Also, many people are intimidated by the current pace of change. She outlined five laws of integration to effectively move forward the integration of service provision:

“ You can integrate some of the services some of the time, but you can’t integrate all of the services all of the time;

integration costs before it pays;

your integration is my fragmentation;

you can’t integrate a square peg and a round hole;

she/he who integrates calls the tune

Carol Ball, Chair of the Education Issues Group, UNISON Scotland and former nursery nurse addressed the major challenges for workforce development in the early years. Workforce issues have been going on for 50 years, and she called for a greater emphasis on holistic development of the workforce with better pay and conditions, and a greater gender balance. There is a wide array of potential qualifications, many of which do not meet the needs of the sector, and it could be difficult for those wanting to get a qualification to identify the most appropriate one. It was also important to ensure that the child-care responsibilities of early years workers were met, particularly those whose nursery working hours were currently not family friendly.

The final speaker was Dr Margy Whalley, Director of Research, Training and Research Base, Pen Green Research Centre, who provided an insight into the work undertaken by her organisation in the last 25 years in Corby, to create an integrated children, family and community centre. When she went to Corby it was suffering from ‘zone fatigue’, in one of the most disadvantaged communities in England (full of ex-pat Scots from Glasgow) - but she found it full of feisty women, who were some of the most powerful and passionate parents. The role of integration of services should not be underestimated – to challenge our professional relationships we have to give up our power, get out of our silos, and work differently. The service has to be high quality. It has to be flexible, and change as the community changes – caring for children in need; for all children on the Child Protection Register; for special

educational needs. The parents wanted to learn along with the children, and are involved in service provision for children at the centre as well as in the separate parents' groups. There are Family Support services – a whole range of universal services, and they now know they have to target services. There are special infant and adult mental health groups – groups for dads (they take over at week-ends!) – groups for single women – groups for drug and alcohol abuse. The Centre is open 48 weeks in the year, with a multi-disciplinary team providing the range of services. Forty-five percent of the staff at the Centre are parental users of services, furthering integration with the community. The parents run three charities on the site, and a fully developed research and education centre offering everything from early years education to related qualifications up to PhD. The challenge was to keep children at the centre of services, because in every small community there should be a service for children and their families and the service should honour the needs of young children and celebrate their existence.

You might think by the end of a very full day that the last speaker had a mammoth task in keeping the attention of the audience, but Dr Margy Whalley was superb – interesting, funny, extremely enthusiastic, and communicating her energy and dedication to one and all. After lunch, and last to deliver, but she was worth the wait!!

Altogether a good conference, full of good information, re-inforcing lots of our training as panel members, but with the usual caveats that while 'interagency' makes sense, in practice it never seems to be effective, and unless the money is there to implement ideas, it is difficult to see how effective change can be made to happen.

Joyce Noble, SACP