

# Why Early Intervention is crucial for healthy development of children between 0-5 years

## Parents think that social and emotional skills are crucial. Parents seek advice, support and guidance most commonly from their health visitor.

The Early Intervention Foundation (EIF) (2015) conducted a poll to understand what parents think matters for their children's development and which services they accessed for support. The results found that **health visitors are the most common source of guidance**, closely followed by friends and family. Parents look for support, advice and guidance from their health visitor **twice as often** as they would from children centres.

It is now recognised that the earliest years of a child's life can have an important impact on his or her long-term development. These are formative years, physiologically, cognitively, socially and emotionally. Furthermore, these developmental areas are inextricably linked, and deficits in one area can cause future problems in another. The EIF (2015) report highlights some of the recent research which shows, for example, that prolonged stress in an infant's life can produce physiological changes that can impact on their social, emotional and cognitive development (NSCDC 2014). For a child to flourish and fulfil their potential, they need their environment to provide them with specific types of support from conception to the age of five.

Attachment has long been recognised as a key factor in positive child development, and research shows that the ways in which parents interact with their children influences how their children regulate their own emotions and behaviour, and depends on the attachment relationship (Tronick, 2007). Research in the EIF (2015) report explains that, as babies grow into toddlers, children need parents who are able to act as a "secure base" from which they can

explore the world. The research highlights that positive and secure parent-child interaction not only enables children to develop good social and emotional skills, but also gives them the best possible foundation for cognitive development, before, during and beyond their school years.

**Health visitors** are the lead health professional in the 0-5 years services. They are highly trained and skilled in areas such as **Perinatal Mental Health, Infant Mental Health, Domestic Violence & Abuse and Safeguarding** to provide the highest quality support and guidance for families with very young children. These skills are utilised during every contact with families to ensure that children have a secure base for the rest of their lives. From the EIF (2015) it is clear that parents also agree that health visitors are the key professional to provide this support.

The iHV has developed face-to-face and online training for health visitors, and created a raft of local Champions and Expert health visitors to strengthen practice in each of these areas.

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In England, universal health visitors are required to have contact with parents and children **5 times as a basic minimum in the 0-5 years period**. Health visitors report they have on average **300 – 1000 children** on their caseloads. The iHV believes that over 300 is too many to achieve the best outcomes for children. The Department of Health (2015) advises that to meet the intentions as set out above, a minimum floor should be introduced, below which no Local Authority should fall.

In Wales, the Flying Start programme aims to improve outcomes for children in some of the most disadvantaged areas across the country. This is done through providing four key Flying Start entitlements to children under four years old and their families: enhanced health visiting, parenting support, support for early language development (primarily in the form of Language and Play programmes) and free, high quality, part-time childcare for two to three year olds. Flying Start health visitors have no more than **110 children** on their caseloads and have contact with parents and children **20 times in the 0-5 years period**.

Drawing on the data from the Welsh Government's Flying Start summary statistics for 2012/13, there is evidence that:

- In 2012, the proportion of the Flying Start cohort reaching or exceeding their milestones at age two was 70 per cent or higher in some areas.
- At age three, the outcomes for three-year olds were better (sometimes markedly so) than for two-year-olds in 14 authorities, particularly in some of the areas with the poorest outcomes for the younger children.

Flying Start has had a positive impact on parents/carers as well as children. For example, parents/carers reported improvements to their child's language development and social, literacy and numeracy skills. Parents/carers reported that they benefited from parenting advice and felt less isolated and more likely to take up training courses. In addition, high-need parents reported that Flying Start had led to changes to their family as a whole such as better routines.

Since the implementation of Flying Start, there have been some marked changes for Flying Start local practice, notably the development of stronger inter-service referral routes, the recruitment of a wider group of professional staff to meet local needs, an emphasis on staff training and the development of a multi-agency approach to service delivery.

### Flying Start health visitor funding led to:

- more comprehensive and faster assessment of need;
- more effective referral to other support within Flying Start and to wider generic or health teams (including dietitians, speech and language therapists and behavioural support);
- more flexible and intensive support for families pre- and post-birth and on weaning.

As English services start to be commissioned by local authorities it is essential that they consider this evidence. It makes a strong case for strengthened health visitor capacity for recognising risk and very early intervention through reduced caseloads for English health visitors, if the aspiration of school readiness and a reduction in mental illness is to be achieved.

### Further reading

Flying Start Health Visiting Core Programme

[bit.ly/1e3Adml](http://bit.ly/1e3Adml)

Flying Start Synthesis Report

[bit.ly/1FJILX8](http://bit.ly/1FJILX8)

National Evaluation of Flying start: Impact Report (2013)

[bit.ly/1cM30dt](http://bit.ly/1cM30dt)

The Early Intervention Foundation (2015) Best – Start – at – Home report.

Available online and accessed on 16.5.15

[bit.ly/1FSCNBe](http://bit.ly/1FSCNBe)

The Early Intervention Foundation (2015) Brain Hero Video

[bit.ly/1L1Q8yJ](http://bit.ly/1L1Q8yJ)

### References

Department of Health (2015) *Transfer of 0-5 children's public health commissioning to Local Authorities: 0-5 Public Health Allocations for 2015/16*  
[bit.ly/1KXLMYz](http://bit.ly/1KXLMYz)

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