

## **Health and Social Care Select Committee- Prevention of ill health inquiry. Written evidence submitted by the Institute of Health Visiting**

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### **1. About the Institute of Health Visiting**

The Institute of Health Visiting (iHV) is an independent charity, professional body and centre of excellence for health visiting, established to strengthen the quality and consistency of health visiting for the benefit of all children, families and communities.

### **2. Our key points**

The Committee has an important opportunity to tackle the root causes of ill-health.

There is indisputable evidence that:

- The first years of life provide a foundation for future health and wellbeing.
- Babies are our most vulnerable citizens – disadvantage starts early, the effects are cumulative and impact health, educational attainment and success across the life course.
- Inequalities are not inevitable – much of the health-related adversity in the UK is preventable with actions to keep harm, illness, and disability from happening in the first place.
- Cuts to the health visiting service in England have had knock-on consequences across the system with more families turning to A&E for support, immunisation uptake is falling, childhood obesity is increasing, inequalities are widening, and the late identification of clinical and safeguarding vulnerabilities in babies and young children is a national concern.
- Investment in prevention and intervention in the earliest years of life is the most cost-effective means to improve health and reduce inequalities, yielding high return on investment compared to the long-term costs of not intervening. When families are supported, babies thrive and the whole of society benefits.

Despite this evidence, the current health care system is disproportionately focused on costly late intervention and the treatment of established disease. Primary prevention is the key to lowering demand for health care and related services. Action is also needed to address the commercial and social determinants of health, particularly the pernicious impacts of poverty in childhood that will no doubt be covered by many submissions to this consultation.

**Getting it right from the start:** Health visiting has been described by UNICEF-UK as the ‘backbone of the early years, a safety net for all families’. The benefits of an effective health visiting service accrue to numerous government departments and address key priorities for babies, children and their families described in “Health Visiting in England: a Vision for the Future”<sup>1</sup>. Whilst all areas of primary prevention and early intervention presented in our 15 high impact areas are within the remit of the UK government to act, we draw attention to:

- 1) **Healthier pregnancies, improved birth outcomes** - Poor preconception health limits women's choices and impacts on the safety of pregnancy and childbirth, with potentially long-term consequences on child health<sup>2</sup>. Prevention and early intervention improve outcomes<sup>3</sup>, focused on the biggest risk factors of maternal weight, smoking, alcohol/substance misuse, folic acid intake, immunisations, physical and mental health conditions, pregnancy complications, consanguineous relationships, pregnancy spacing and domestic abuse.
- 2) **Transition to parenthood, perinatal mental health and parent-infant relationships** - Health visitors use a strengths-based approach that supports parents to build on their personal and community assets during this dynamic period of change that many families find challenging. Mental illness is the most common serious health problem in the perinatal period with significant societal costs largely related to adverse impacts on the child<sup>4</sup>. Providing support during this time can prevent problems and avoid families reaching crisis point.
- 3) **Managing common childhood illnesses** – action is needed to tackle the root causes of the 60% increase in children's A&E attendances<sup>5</sup>. Most of these additional attendances do not lead to an increase in admissions, but they tell us that parents are worried about their unwell baby or child and are unable to get the help that they need elsewhere. It is perfectly normal to worry when your child is unwell – in the past, many parents would have sought support for a range of common childhood illnesses, feeding difficulties and infant's distress from their health visitor. There is good local evidence that when parents received consistent, explicit safety-netting advice from a health visitor they felt more confident and were less likely to re-attend. However, with 40% fewer health visitors compared to 2015, many drop-in 'baby clinics' in communities have now closed and the whole system is at breaking point.
- 4) **Immunisations**- vaccine uptake figures are a national concern<sup>6</sup> and large outbreaks of measles are almost inevitable. These can be prevented! Vaccination is straightforward and works, but it desperately needs the workforce to reach all families.
- 5) **Healthy weight** - efforts to reduce the obesity crisis will be impossible without recognition that adult health starts in the womb<sup>7</sup>. More than 1/5 children start school with overweight or obesity. Preventative measures must start early and include preconception, pregnancy and early years support, including support for breastfeeding.

Health visitors' contribution to child safeguarding and the early identification of health conditions and disabilities have also been compromised by workforce shortages. This is a national concern that warrants government attention. Health visiting was categorised as one of six priority services in the government's Start for Life Vision for the first 1001 days<sup>8</sup>. However, this commitment is at risk without investment and a plan to rebuild the health visitor workforce. We also encourage the Committee to look ahead and ensure that the health visiting workforce is strengthened to support its future plans, including the newborn genome programme and the inevitable shift in focus to reduce non-communicable diseases and their growing threat to population health.

Further details on health visiting's input and impact across the health and care system are set out in the Institute of Health Visiting's response to the Hewitt Review<sup>9</sup> with recommendations in our most recent State of Health Visiting UK survey report<sup>10</sup>.

<sup>1</sup> Institute of Health Visiting (2019) Health visiting in England: a vision for the future. <https://ihv.org.uk/wp-content/uploads/2019/11/7.11.19-Health-Visiting-in-England-Vision-FINAL-VERSION.pdf>

<sup>2</sup> Public Health England (2019) Making the case for preconception care. <https://www.gov.uk/government/publications/preconception-care-making-the-case>

<sup>3</sup> Sher J (2022) Preconception Health, Education and Care: Making and celebrating progress. International Journal of Birth and Parent Education. 9(2) 3-8. <https://ijbpe.com/journals/volume-9/58-vol-9-issue-2>

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<sup>4</sup> Knight M et.al., (2022) MBRRACE-UK: Saving Lives, Improving Mothers' Care 2022: Lessons to inform maternity care from the UK and Ireland Confidential Enquiries in Maternal Death and Morbidity 2018-20.

[https://www.npeu.ox.ac.uk/assets/downloads/mbrpace-uk/reports/maternal-report-2022/MBRRACE-UK\\_Maternal\\_MAIN\\_Report\\_2022\\_v10.pdf](https://www.npeu.ox.ac.uk/assets/downloads/mbrpace-uk/reports/maternal-report-2022/MBRRACE-UK_Maternal_MAIN_Report_2022_v10.pdf)

<sup>5</sup> <https://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/ae-attendances-and-emergency-admissions-2022-23/>

<sup>6</sup> <https://www.gov.uk/government/collections/vaccine-uptake>

<sup>7</sup> The Food Foundation (2023) Preconception, pregnancy and healthy weight in childhood.

[https://foodfoundation.org.uk/sites/default/files/2023-02/Early%20Years%20report\\_A4\\_NEW\\_0.pdf](https://foodfoundation.org.uk/sites/default/files/2023-02/Early%20Years%20report_A4_NEW_0.pdf)

<sup>8</sup> HM Government (2021) The best start for life: a vision for the 1001 critical days.

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/973112/The\\_best\\_start\\_for\\_life\\_a\\_vision\\_for\\_the\\_1\\_001\\_critical\\_days.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/973112/The_best_start_for_life_a_vision_for_the_1_001_critical_days.pdf)

<sup>9</sup> Institute of Health Visiting (2023) Response to the Hewitt Review consultation. <https://ihv.org.uk/wp-content/uploads/2023/01/iHV-Hewitt-review-open-consultation-submission-January-2023-FINAL.pdf>

<sup>10</sup> Institute of Health Visiting (2023) State of health visiting UK survey report. <https://ihv.org.uk/wp-content/uploads/2023/01/State-of-Health-Visiting-Report-2022-FINAL-VERSION-13.01.23.pdf>