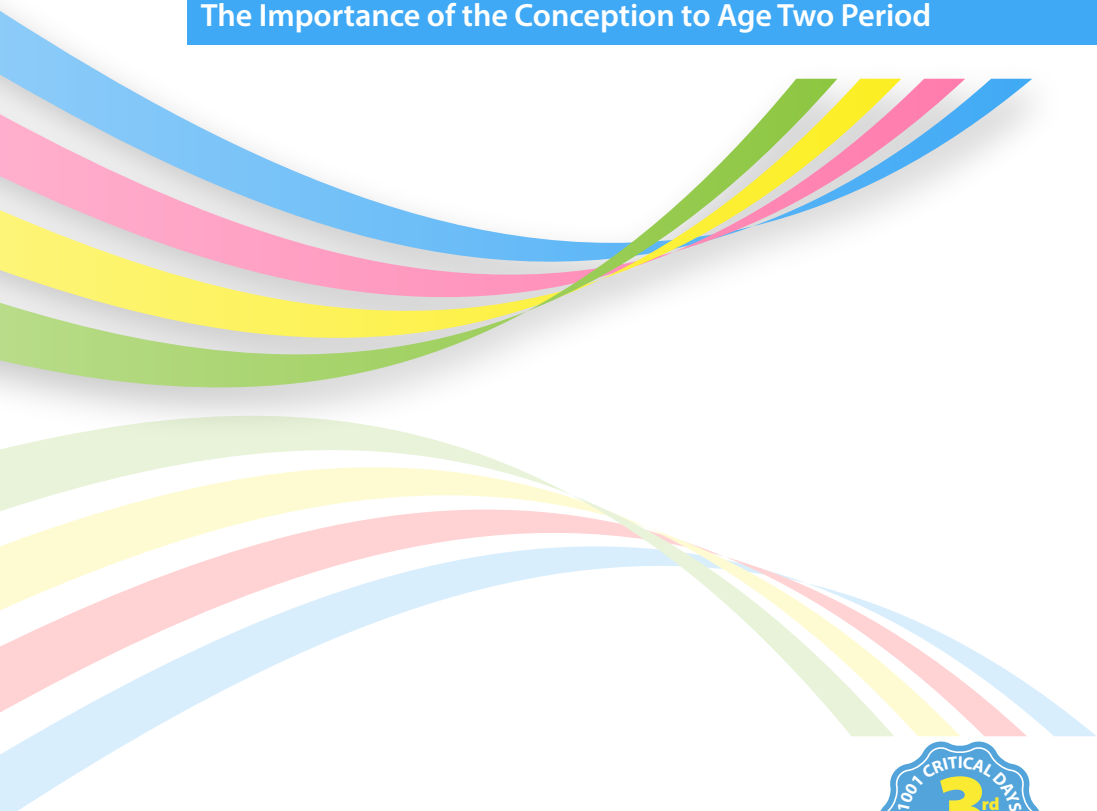


# The 1001 Critical Days

The Importance of the Conception to Age Two Period



A CROSS-PARTY MANIFESTO:

Life chances edition

Mark Durkan MP • Frank Field MP • Norman Lamb MP • Tim Loughton MP



Sally

## Foreword by **Sally Davies, Chief Medical Officer**

I am delighted to support this cross party manifesto. This manifesto highlights the importance of acting early to enhance the outcomes for children. Too many children and young people do not have the start in life they need, leading to high costs for society, and too many affected lives.

The early years of life are a crucial period of change; alongside adolescence this is a key moment for brain development. As our understanding of the science of development improves, it becomes clearer and clearer how the events that happen to children and babies lead to structural changes that have life-long ramifications. Science is helping us to understand how love and nurture by caring adults is hard wired into the brains of children.

We know too that not intervening now will affect not just this generation of children and young people but also the next. Those who suffer multiple adverse childhood events achieve less educationally, earn less, and are less healthy, making it more likely that the cycle of harm is perpetuated, in the following generation.

This manifesto is welcome as it seeks to use best practice to guide suggested interventions. The call to evaluate new interventions in a rigorous scientific manner is particularly important. I appreciate the emphasis on training of all staff who come into contact with children, young people and their families, in important areas such as attachment.

The current economic situation makes early intervention seem challenging. This manifesto recognises that without a focus on prevention and early intervention the costs associated with managing these issues will continue to rise.

Acting to improve the first critical 1001 days is a worthy goal. As CMO, I wholeheartedly support the aims of this manifesto because giving children and young people a good start in life should surely be more than just an aspiration!



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**Mark Durkan MP**  
SDLP



**Frank Field MP**  
Labour



**Norman Lamb MP**  
Liberal Democrats



**Tim Loughton MP**  
Conservative

## Introduction by MPs

As politicians from across the political spectrum, we have come together for the first time to acknowledge the importance of the 1001 critical days from when a baby is conceived until the age of two.

This period of life is crucial to increase children's life chances, and we pledge to work to ensure all babies have the best possible start in life.

We are missing an opportunity if we don't prevent problems before they arise. It is vital that a focus on the early years is placed at the heart of the policy making process, and in this manifesto we outline why this period of life is so critical, and how we intend to propel our objectives forward.



**Caroline Lucas MP**  
Green



**Liz Saville-Roberts MP**  
Plaid Cymru



**Jim Shannon MP**  
DUP



**Philippa Whitford MP**  
SNP

Special thanks to the **WAVE Trust**, the **NSPCC** and **PIPUK** for their support and contributions to produce the *1001 Critical Days Manifesto*.



*Tackling the roots of violence*





## Why is the Conception to Age 2 period so critical?

Pregnancy, birth and the first 24 months can be tough for every mother and father, and some parents may find it hard to provide the care and attention their baby needs. But it can also be a chance to affect great change, as pregnancy and the birth of a baby is a critical 'window of opportunity' when parents are especially receptive to offers of advice and support.

### The evidence shows that:

- Ensuring that the brain achieves its optimum development and nurturing during this peak period of growth is vitally important, as the foundations of the babies' mind are being put in place.
- From birth to age 18 months, it has been calculated that connections in the brain are created at a rate of a million per second! The earliest experiences shape a baby's brain development, and have a lifelong impact on that baby's mental and emotional health.
- A pregnant mother suffering from stress can sometimes pass on the message to the unborn baby that the world will be dangerous, so that as a child he or she will struggle with many social and emotional problems. The child's response to experiences of fear or tension have been set to danger and high alert. This will also occur at anytime during the first 1001 days whenever a baby is exposed to overwhelming stress from any cause within the family, such as parental mental illness, maltreatment or exposure to domestic violence.
- International studies show that when a baby's development falls behind the norm during the first years of life, it is more likely to fall even further behind in subsequent years, than to catch up with those that have had a better start.
- Attachment is the name given to the bond a baby makes with its caregiver/s. There is longstanding evidence that a baby's social and emotional development is affected by their attachment to their parents.
- Babies are disproportionately vulnerable to abuse and neglect. In England they are seven times more likely to be killed than older children. Around 26% of babies (198,000) in the UK are estimated to be living within complex family situations, of heightened risk where there are problems such as substance misuse, mental illness or domestic violence. 36% of serious case reviews involve a baby under one.

The best chance to turn this around is during the **1001 critical days**: conception to age two period. At least one loving, sensitive and responsive relationship with an adult caregiver teaches the baby to believe that the world is a good place and reduces the risk of them facing disruptive issues in later life.

Every child deserves an equal opportunity to lead a healthy and fulfilling life, and with the right kind of early intervention, there is every opportunity for secure parent infant relationships to be developed.

Whether out of concern for an individual baby's well-being or safety, or for the costs to society of poor attachment, it is imperative that how children are raised is guided and influenced by this principle and the evidence.

## Pregnancy and babyhood are an incredible window of opportunity.

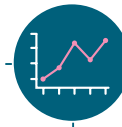
We're supporting parents, families and communities to make sure that all babies get the best possible start in life.



Collaborating with other organisations



Innovating by finding, creating and testing new services



Learning through research and evaluation



Influencing policy and practice

The care a baby receives from conception to age two provides the foundations for future learning, behaviour and health.

Babies need a healthy pregnancy, sensitive and attuned care, and a safe and stimulating environment.

We believe that every baby should be safe, nurtured and able to thrive.

Many families face pressures, that can affect the care babies receive.

Babies are



**8x** more likely to be killed than older children in England and Wales



**39%**

of serious case reviews in England relate to babies under one

Around

**79,000**

babies under one in England live with a parent classified as a 'harmful' or 'hazardous' drinker



We estimate

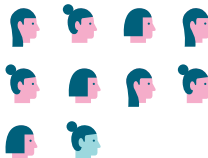
**11,800**

of 0-2 year olds have a parent in prison in England and Wales



**33,000**

babies under one in England live in homes affected by domestic abuse



Perinatal mental illness affects more than 1 in 10 women

At least

**15,700**

0-2 year olds in England live in families officially classed as homeless



i

For more information about our early intervention work, please go to [www.nspcc.org.uk/allbabiescount](http://www.nspcc.org.uk/allbabiescount)

# Tiered approach to parent-infant services

Psychiatric and parent-infant

treatment

i.e. in-patient mother & baby unit.

**TIER 4**  
Severe  
mental illness

**Specialist Clinical Intervention**  
i.e. PIPUK, NorPIP, OxPIP, LivPIP, Anna Freud

**TIER 3**  
Specialised services for  
families experiencing  
high levels of stress, where  
problems are already apparent

Programmes include:

Family Nurse Partnership, Baby  
Steps, Parents under Pressure, Watch,  
Wait and Wonder, Video Interaction  
Guidance & Mellow Babies

**TIER 2**  
Additional care for parents  
identified as needing extra  
clinical & universal care

GPs, Maternity Services,  
Health Visitors, Children's  
Centres, Paediatrics

**TIER 1**  
Universal support for every parent:  
Prevention & early Identification



## Our Vision

A radical change is required to our approach to the 1001 Critical Days.

Our goal is for every baby to receive sensitive, appropriate and responsive care from their main caregivers in the first years of life. Parents need to feel confident that they are raising their children in a loving and supportive environment.

A holistic approach to all ante, peri (around 20th week of pregnancy to around the 28th day of life) and postnatal services would enable seamless access for all families. This includes Midwives, Health Visitors, GPs, and Children's Centres, and services should engage with families as soon as possible – ideally during pregnancy. The contacts that all parents have with services before and after the birth of their child, provides a unique opportunity to work with them at a stage which is so vitally important to the development of children.

Specifically:

- Vulnerable families, or those experiencing difficulties, should be able to access specialist services which promote parent-infant interaction, for example video interaction guidance and parent infant psychotherapy, delivered by qualified professionals.
- A range of services must be in place in every local area to ensure that parents who are at risk or suffering from mental health problems are given appropriate support at the earliest opportunity. This includes specialist parent and infant mental health midwives and health visitors trained in this area, to improve identification and support for families who need it most.
- All parents should be able to access antenatal classes which address both the physical *and* emotional aspects of parenthood, and the baby's well-being and healthy social and emotional development.

To enable this to happen local services must identify and reach families who need additional services:

- Maternity services, health visitors, social care, adult mental health services and Children's Centres should work closely together to share vital data, ensuring those who need additional support receive appropriate, timely, and culturally sensitive help. The pooling of budgets for these services will encourage innovative commissioning and induce a culture of joined-up working.





- Every woman with a history of past or present serious mental illness should have access to a Consultant Perinatal Psychiatrist and specialist support in relation to mother-infant interaction as required, in accordance with the NICE guidelines.
- Birth registration should be offered by local registrars in Children's Centres, so that close to 100% of families have a better opportunity to engage with their local centre.
- The health and early years workforce should receive high quality training in infant mental health and attachment as standard, in order for practitioners to understand parent-infant relationships and the services required when difficulties arise. Specialist training should include identifying the 5-7% most seriously ill and at-risk parents.
- There should be increased evaluation of services in the first 1001 days to prove their evidence based practise is effective.
- Local commissioning and decision making boards should consider the social and emotional health needs of babies, and include information about this in their Joint Strategic Needs Assessment and Local Health and Well-being Strategy. Underpinning this should be a cost-benefit analysis to capture the full extent of the costs to society that can be avoided through effective investment in the first 1001 days.
- Childminders, nurseries and childcare settings caring for under 2s must focus on the attachment needs of babies and infants, with OFSTED providing specific guidance on how this can be measured effectively.
- Children's Centres must continue to provide universal services for all families, but with a focus on those families with the highest level of need.
- Outreach and volunteer services will potentially provide the greatest success in reaching the most vulnerable and isolated families.
- Health and early years professionals should encourage parents to read to their children as an effective and straightforward way of strengthening early attachment and language development.

# Pledges of Support

The following organisations have pledged their support for the 1001 Critical Days Manifesto:





**booktrust**  
Inspiring a love of books



## With thanks for their support to:

Professor the Baroness Hollins

Baroness Butler-Sloss

Lord Listowel

Lord Northbourne

Sir Richard Bowlby

Luciana Berger MP

Rachael Maskell MP

Caroline Ansell MP

Dr Phillippa Whitford MP

Dr Sarah Wollaston MP

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Rt Hon Sir Nicholas Soames MP

Sharon Hodgson MP

Sir Oliver Heald QC MP

Sir Peter Bottomley MP

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Alistair Burt MP

Ruth Cadbury MP

## Acknowledgements and References

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NSPCC – Chris Cuthbert and Gemma Wolfes

APPG Conception to Age Two – The First 1001 Days

Parent Infant Partnership (PIP) UK – Lucia Hodgson and Clair Rees

For more information, please see WAVE Trust's *Age of Opportunity* report, and the NSPCC's *Spotlight on perinatal mental health* report and *All Babies Count* reports alongside the APPG Conception to Age 2: *The First 1001 Days 'Building Great Britons'* report.

To join the 1001 Critical Days campaign, please email

**[clair.rees@pipuk.org.uk](mailto:clair.rees@pipuk.org.uk)**



**@first1001days**

**[www.1001criticaldays.co.uk](http://www.1001criticaldays.co.uk)**

