



Friday message

Friday 17 May 2013

Dear everyone

New developments in neuroscience have confirmed that children's brain development and architecture is profoundly affected by their experiences in early life. Maternal depression, poor general health, and living in poverty in a workless household all combine to have a toxic impact on the life chances of our children. Trouble is on the way big time for these children before they have barely drawn breath, yet collectively we have the knowledge, the evidence and the experience to intervene early enough to divert the coming misery and distress, as we heard on Wednesday at our first conference on Early Intervention and Public Health held in partnership with the Early Intervention Foundation (EIF) – a charity with cross-party support founded by Graham Allen MP – and addressed by the Secretary of State. That is why early intervention and prevention are priorities also for PHE. There are two national programmes supporting troubled children by working with and through their extended families: the Family Nurse Partnership and the Troubled Families Programme led by Louise Casey. They are evidenced interventions that break the inter-generational cycle of damage and poor health experienced by too many children.

Honor Rhodes of Hackney Clinical Commissioning Group introduced us to the 'Turner' family, where parenting was an adult shouting at the children from an armchair. Obesity in the adults was mirrored in the children; the adults had poor teeth and so had the children; they all had an exceptionally poor diet; the adults had diabetes and the children had hyper-activity disorder; both had asthma; the adults had mental health problems, depression, anxiety and phobias while the children had mental health problems, school refusal, speech and language needs; the adults suffered from high blood pressure, cancer and limited movement while the children had no regular health surveillance, were not fully immunised and were frequent attenders of A&E, but not their GP. This was set against a background of violence – so habitual the children thought it normal – heavy drinking and smoking, and early pregnancy. Seventeen separate support teams poured years' worth of their best efforts into the family to no discernible effect. And then along came the family intervention approach now promoted by the Troubled Families Programme. The team changed tack, focused on the whole extended family and coordinated everything through a single worker. This is not for the faint-hearted, but few could say they did more worthwhile work. For example, one of the daughters avoided early motherhood and was supported in making different choices. She went on to university and gained the key to a better life – she broke the mold, the first in her family to do so.

In local government, in the EIF, in the voluntary and community sector and the local NHS we have all the authority we need to pool our resources, our experience and our expertise. Every upper tier and unitary local authority will be involved in the Troubled Families Programme and my hope is that each of you will consider augmenting, and perhaps even match funding where possible, the national contribution from your public health allocation. This is a great example of where Local Authorities could use their public health money to add value and accelerate the impact of this work.

With best wishes