



ALL PARTY PARLIAMENTARY GROUP FOR

CHILDREN

Chairs: Jess Asato MP, Tom Collins MP and Freddie van Mierlo MP

Secretariat: National Children's Bureau (NCB)

Wednesday 15th April, 5-6pm

Committee Room 17, Houses of Parliament

Attendees

Parliamentarians

- Jess Asato MP
- Tom Collins MP
- Freddie van Mierlo MP
- Jodie Gosling MP
- Andy MacNae MP
- Baroness Lister
- Lord Farmer
- Amrit Maan representing Baroness Verma

Officials

- Susie Owen, DfE, Director of Early Year's: susie.owen@education.gov.uk
- Sarah Hariss, DHSC, Deputy Director of Early Years and Healthy Babies: sarah.harriss@dhsc.gov.uk
- Eleanor Drury, DHSC, Priority Projects and Briefing lead: eleanor.drury@dhsc.gov.uk

Sector Representatives

- Keith Reed, Parent-Infant Foundation
- Catherine Barker, Spurgeons
- Tia Barham, Spurgeons
- Alison Morton, Institute of Health Visiting
- Nikki Freeman, Institute of Health Visiting
- Lucie Stephens, Early Education Childcare Coalition
- Kayla Halls, Middlesex University
- Ruth Naughton-Doe, University of York
- Will Quince, 1001 Critical Days Foundation
- Rachel Carter, National Lottery Fund
- Sally Hog, Start Strong
- Claire Dunne, National Children's Bureau
- Alice Bartoli, National Children's Bureau
- Sophie Woodhead, National Children's Bureau
- Pippa Goodfellow, National Children's Bureau
- Dustin Hutchinson, National Children's Bureau

- Jemima Colaghan, National Children's Bureau
- Bia Torres, National Children's Bureau

Minutes and Actions

1. Welcome and Introductory Remarks- Jess Asato MP, Chair

- Jess Asato MP opened the event by welcoming attendees and noting the significance of the parliamentary moment, with the Government's child poverty strategy providing an important backdrop to the discussion. She emphasised that the issues at hand- early years education, perinatal health, Family Hubs and child poverty- must be considered together rather than in isolation.
- Tom Collins MP set out the central question for the session: how do we build real, genuine collaboration? He noted that bringing together three APPGs was itself a reflection of the joined-up approach needed in policy and legislation.
- Freddie van Mierlo MP raised the importance of considering how Family Hubs will be delivered effectively in rural constituencies, and how they can reach families who might otherwise be missed.

2. Speakers

Parent-Infant Relationships- Keith Reed, Parent-Infant Foundation

- Keith Reed presented evidence on the importance of targeted support for parent-infant relationships. Around 15% of babies (approximately 90,000 per year) are at risk of disorganised attachment, which is linked to increased safeguarding concerns, speech and language delays, reduced school readiness and greater demand on Child and Adolescent Mental Health Services (CAMHS).
- Specialist parent-infant relationship teams deliver a return of £6–10 for every £1 invested within the first year, and approximately £40,000 in lifetime savings per child. However, only 51 specialist teams currently exist across the UK, meeting approximately 5% of need.
- Keith highlighted the challenge of joining up universal and targeted specialist services, and shared that the Parent-Infant Foundation is working towards a national parent-infant relationship framework to address this.

Best Start Family Hubs- Catherine Barker, Spurgeons

- Catherine Barker expressed that Family Hubs can and will make a significant difference to children and families, noting that £90 million in funding from the Department for Education (DfE) and the Department of Health and Social Care (DHSC) has been allocated for 2026–2029. She described this as an opportunity to change the system- but stressed that local authorities need to achieve a genuine shift in culture to make it work.
- The Best Start Family Hubs guidance enables cross-sector delivery by voluntary, community, faith and health organisations, which is a significant innovation that extends reach to families who might otherwise be missed.

- A concern was raised that the policy focus may be shifting from 0–19 to 0–5, risking leaving older children and young people aged 10–15 behind. Catherine urged that access for all families with children aged 0–19 must be maintained.

School Readiness and A Better Start- Claire Dunne, National Children's Bureau

- Claire Dunne shared findings from A Better Start, a ten-year programme backed by The National Lottery Community Fund. Evidence shows that school readiness is a journey from conception to reception- a shared outcome that no child or family can achieve alone.
- The most effective approaches were preventative, joined up and rooted in place. Workforce development, parental engagement and the home learning environment should be treated as essential infrastructure, not optional extras. Claire called for school readiness to be reframed as a shared, systemic outcome, with early years, health and education aligned accordingly.

Early Years Stronger Practice Hubs- Alice Bartoli, National Children's Bureau

- Alice Bartoli shared that practitioners involved in Stronger Practice Hubs have reported increases in knowledge, confidence and child outcomes, as well as improved wellbeing, and that the programme has been recommended to double in size.
- Integration with Family Hubs is beginning but remains inconsistent. Alice called for greater support to ensure that, as new Family Hubs come into operation, navigation to services becomes more seamless for settings and families.

Health Visiting- Alison Morton and Nikki Freeman, Institute of Health Visiting

- The Institute of Health Visiting highlighted that the health visiting workforce has been cut by 43% since 2015, with nearly three quarters of health visitors now working above recommended caseload levels. Families face a postcode lottery of support as a result.
- Health visiting is the only service that proactively and systematically reaches every family with children under five, including those who are isolated and babies who cannot ask for help. Nikki Freeman noted that health visitors are often the first professional to see the whole picture of a family's situation, and that the relational work they carry out- while not always visible in data- keeps families engaged with services. When health visiting is properly resourced, outcomes improve not only for babies but for whole families.
- The Institute of Health Visiting called for investment to reverse the 43% cut to the health visitor workforce, and for the public health grant for children's health visiting services to be ringfenced.

Early Years Workforce- Lucie Stephens, Early Education and Childcare Coalition

- Lucie Stephens emphasised that the working conditions of early years professionals are the learning conditions of babies and children. The Government's ambitions for the early years cannot be achieved without addressing pay, conditions and status in the sector.
- The Early Education and Childcare Coalition's Model for Change identifies seven interconnected lever- improved pay, funding reform, career progression, professional registers, public perception, worker voice and improved data- and

calls for a comprehensive, system-level workforce strategy rather than discrete pilots. Lucie also noted that 97% of the early years workforce is female, raising important questions about how the sector reinforces gendered assumptions about caring roles.

Baby Room Provision- Kayla Halls, Middlesex University

- Kayla Halls presented research showing that group sizes of 6–8 babies are associated with high-quality provision. However, group size is currently unregulated in England: 27% of baby rooms surveyed were operating with more than 12 babies, with a maximum reported capacity of 30 babies in a single room.
- Only 35% of baby room educators had accessed baby-specific professional learning in the previous year, and most Level 3 qualifications lack sufficient content on children under two. Kayla called on DfE to regulate maximum group size in baby rooms and to review Level 3 qualifications to increase content on child development from birth.

Perinatal Loneliness- Dr Ruth Naughton-Doe, University of York

- Dr Ruth Naughton-Doe opened with a personal account of postnatal depression, describing how signs of distress went unacknowledged and how the absence of support shaped the research she went on to undertake. She noted that both the human and economic costs of perinatal loneliness can be avoided with the right intervention.
- Research shows that loneliness in the first 1,001 days is widespread, more prevalent among parents experiencing multiple disadvantages, and strongly linked to mental illness and suicidal ideation. Parent mental health has become the leading cause of referrals to children's social care. Perinatal mental health problems are often preventable.
- There is currently insufficient support for dads and non-birthing parents, and parent/baby groups are too often designed around child development rather than building social connections. Ruth recommended well-funded health visiting and midwifery teams, universal accessible support through Family Hubs with a focus on social connection, and longer, better-paid parental leave for dads and non-birthing parents.

3. Roundtable Discussion

- Baroness Lister drew on Sure Start as an example of a programme that gave genuine voice and agency to parents, and asked to what extent Family Hubs would offer parents the same level of participation and co-ownership.
- Lord Farmer reiterated the importance of ensuring fathers are not overlooked in policy design, echoing Catherine Barker's earlier points, and asked where young people aged 10–15 and 15–19 fit within the Family Hubs model.
- A representative of Baroness Verma raised the issue of suicidal ideation among new mothers and the critical role health visitors play in identifying and responding to this.
- Andy MacNae MP, Chair of the APPG for Baby Loss raised the question of how to link the value of early years investment to economic outcomes, and how to address the low levels of pay within the early years workforce.

- Freddie van Mierlo MP highlighted the gap between birth and the point at which parents can begin accessing support through Family Hubs and parent/baby groups- a particularly lonely period that is made harder by the difficulties many men face in opening up to one another. He called for greater provision to bridge this gap.
- Jess Asato MP shared her personal experience of relying on Sure Start during her first pregnancy, and the very different landscape she faced when her second child arrived and Sure Start no longer existed. She reflected on the importance of outreach to home and community settings, particularly in rural areas, and the convening power of local hubs.
- Speakers emphasised the importance of involving parents in co-designing services, with A Better Start cited as a strong example of this approach. Ruth Naughton-Doe and others stressed the need to co-design inclusive spaces, noting the significant contribution of the voluntary sector in this area.
- The Early Education and Childcare Coalition underlined that all of the ambitions discussed depend on the premise of a skilled, well-supported workforce being in place. Without addressing pay, conditions and qualifications- particularly in baby rooms – the quality of education and care for children cannot be guaranteed.
- A link between SEND as an inherited issue and the absence of key early identification was raised, with Warwickshire cited as an example of a missing link between early years and SEND pathways.