

## Online Policy Prioritisation Discussion - Wednesday 31st March 2021

### Attendees

- Ruth Dundas and Emma Stewart (Maternal and Child Health Network, University of Glasgow)
- Muriel Bailey (Director of Parenting NI – voluntary charity supporting parents/families)
- Ros Bragg (Director of Maternity Action – maternity rights)
- Dorian Kennedy (Head of Children, Families and Communities Team - Dept Health and Social Care, England)
- Heather Reid (Public Health Agency NI – Maternal and Child Health)
- Debby Wason (Public Health Scotland – Child and Maternal Health)
- Deirdre Webb (Public Health Agency NI – Assistant Director for Child and Maternal Health)
- Mark Willis (Child Poverty Action Group)

### SUMMARY POINTS

#### Policy priorities

- Key areas of policy consensus included: pregnancy grants, Universal Credit, and Early Years Education and Childcare Provision.
- The group also noted: Health Visiting Programmes, the Healthy Child Programme (which varies across the UK) and the Family Nurse Partnership.
- MatCHNet should be minded of existing evaluations of the policies listed (e.g. Minimum Unit Pricing, Early Years Education and Childcare Provision).
- Despite health backgrounds, the group strongly agreed that welfare was crucial for child and maternal health outcomes.
- Research into the impact of the £20 Universal Credit uplift as well as exploring variations across the 4 UK nations should be considered.
- Food poverty was identified as one specific area of interest.
- Attendees agreed on the need for cross-Government conversations to consider the wider determinants of health in tackling infant and child health. Evidence is required from analysis to be presented to this wider audience, and to leverage resources.
- Early Years Education and Childcare Provision was felt to offer good potential for analysis due to the varying provision across the UK.
- Stakeholders are interested in inequalities/social patterning of health outcomes. A key outcome for DHSC and PHS was school readiness. Other considerations were differential effects by deprivation and ethnicity.

#### National policies

- Maternity pay policies (although national) could be considered alongside Universal Credit provisions.
- Similarly, children's social care policies/services may not vary but capacity/waiting times may be different across UK nations (due to varying resources), that may potentially impact upon child health outcomes.

#### Missing policies

- The group identified invisible groups that do not have access to most policies, e.g. asylum seekers and migrant women with no recourse to public funds.
- The role of fathers/supportive male is potentially missing from the policy and outcomes list.

#### Data and policy

- The group identified a gap between policy and practice in the area of health policy.
- Attendees suggested that MatCHNet's research could contribute to making suggestions about how routine data collection could be improved or amended.