Supporting Young People’s Health & Wellbeing
A Summary of Scottish Government Policy
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The Scottish Government’s *Early Years Framework*, published in 2008, is about giving all Scotland’s children the best start in life. The Framework recognises that it is during the very earliest years and even pre-birth that a large part of the pattern for future adult life is set. The significance of the early years for influencing future health outcomes should not be underestimated.

In my 2011 Annual Report I said that the most significant issue I have to face as Scotland’s Chief Medical Officer is the problem of health inequalities. Action on health inequalities requires action across all the social determinants of health. If we are to have the greatest chance of influencing the determinants of health and wellbeing, we should focus efforts on actions to improve the quality of care for children and families. We should start by making efforts to ensure a safe and healthy pregnancy, a nurturing childhood and support families to bring up their children in a safe, healthy, supportive and stimulating environment. Efforts to enrich early life represent our best hope of breaking the intergenerational cycle of disadvantage. A recent manifestation of Scotland’s collective commitment to this is the establishment of the multi-agency Early Years Collaborative.

However, we should in addition look for ways of increasing opportunities for improvement across the life course. A life course approach recognises that early experiences, including risk and protective factors, affect later health. Health-related behaviours that usually start in adolescence (e.g. smoking, alcohol misuse) can result in poorer health outcomes in later life.

This second decade of life - youth - is critical to the development of future health behaviours. Youth is typically defined as a transitional and risky stage between childhood and adulthood. It is a period of experimentation, of biological and psychological change, and one which spans key transitions. It is a period of considerable change and we must support young people to negotiate their way through what is an increasingly complex world.

It is therefore critical we continue our action to encourage positive health behaviour development beyond the early years. And while we want to support all young people, we must ensure we target those most at risk of poor health outcomes, such as those exposed to chaotic early lives. We must work with these young people to improve their life chances.

**Young people matter.** But policy that aims to improve young people’s health and wellbeing spans many Scottish Government Directorates and we have been told that the policy landscape is difficult to navigate. This paper attempts to simplify some of that complexity by bringing together key policies from across a range of Scottish Government Directorates. I hope it is helpful in setting out key policy in relation to youth health and helps to inform policy implementation.

Sir Harry Burns
March 2013
SUPPORTING YOUNG PEOPLE’S HEALTH & WELLBEING

Introduction

This document has been prepared for the Youth Health Improvement and Health Inequalities Strategic Leads Group. It sets out the key government policies that aim to support young people’s health and wellbeing. It is a broad overview and does not attempt to describe every policy or initiative that will have an impact on the health of young people in Scotland. An underlying theme is that much of the policy outlined here, either directly or indirectly, aims to narrow the gap between the health of the best-off and worst-off young people in Scottish society - that is, to reduce health inequalities.

The main focus of this paper is on youth health. However, for completeness the paper briefly sets out key policy in relation to pre-birth and the early years.

No single Scottish Government Directorate is responsible for policy development relating to children and young people’s health and wellbeing. This paper aims to draw together the plethora of policy into a single document.
SECTION 1 - CONTEXT

National Policy Context

Health policy is not developed or delivered in a vacuum. In order to understand the broader policy context, some overarching national policy context is provided below:

The Scottish Government’s overarching Purpose is “to focus government and public services on creating a more successful country, with opportunities for all of Scotland to flourish, through increasing sustainable economic growth”.

At present, it is clear that global economic conditions remain challenging and the impact of the financial crisis will resonate for a number of years to come. The Scottish Government’s top priority is therefore accelerating economic recovery, boosting jobs and promoting economic security. The Government Economic Strategy sets out the series of measures which will be taken to secure the recovery and build the foundations for long-term sustainable economic growth. See: http://www.scotland.gov.uk/Resource/Doc/357756/0120893.pdf

Actions across the life course to improve health and wellbeing contribute to delivering the Government’s overall Purpose of increasing sustainable economic growth. Improving Scotland’s health record is both an essential driver of growth and a key outcome of economic success. The Purpose is supported by the Strategic Objective for Health which is “Helping people to improve and sustain their health, especially in disadvantaged communities, ensuring better, local and faster access to health care”, and by 16 National Outcomes, a number of which are particularly relevant to children and young people’s health and wellbeing:

- Our children have the best start in life and are ready to succeed
- Our young people are successful learners, confident individuals, effective contributors and responsible citizens
- We have improved the life chances for children, young people and families at risk
- We live longer, healthier lives
- We have tackled the significant inequalities in Scottish society

Key Scottish Government Objectives 2012-13

The key objectives set out in *Working for Scotland* that relate directly to young people are:

**A Smarter Scotland**
- Ministers will introduce the **Children and Young People Bill** which will make real the Scottish Government’s aspirations for Scotland to be the best place in which to grow up by putting children and young people at the heart of planning and delivery of services and embedding their rights across the public sector.
- The **Post-16 Education Reform Bill** will support wider reforms of Post-16 education and training. In particular, the Bill will support Ministers’ aim of developing a system which is better aligned to the needs of learners and employers.

**Economic Recovery**

### Public Service Reform

In the current economic climate, public service reform is critical to meeting the long-term financial and demand challenges of the future. In September 2011, the Scottish Government published its response to the Christie Commission on the Future Delivery of Public Services – **Renewing Scotland’s Public Services – Priorities for Reform in response to the Christie Commission.**

The approach set out there is built on four pillars all of which are pertinent to the delivery of health services in Scotland, including those for young people:

- a decisive shift towards prevention;
- greater integration of public services at a local level driven by better partnership, collaboration and effective local delivery;
- greater investment in the people who deliver services through enhanced workforce development and effective leadership; and
- a sharp focus on improving performance, through greater transparency, innovation and use of digital technology.


### Recent Approaches to Policy Development

In addition to the approach set out in *Renewing Scotland’s Public Services*, **asset based approaches** increasingly inform Scottish Government policy development. Across Scotland, national and local delivery organisations are developing asset based approaches as a means to tackle the deep rooted social problems that persist across Scotland. These approaches focus on the assets within individuals and communities rather than on their deficits (needs
or problems) and were highlighted in the 2010 Annual Report of Scotland’s Chief Medical Officer (2011).

The asset approach to health improvement is based on Aaron Antonovsky’s concept of salutogenesis (the creation of positive health and wellbeing). It is a set of concepts and actions which seem to offer the most coherent and evidence based approach to the creation of health and wellbeing. A key aspect of Antonovsky’s theory is the idea that having control of one’s life and circumstances is health enhancing. Central to the asset approach is the idea of helping people to be in control of their lives by developing the capacities and capabilities of individuals and communities. It draws on existing approaches that foster effective and appropriate involvement of the people and the professionals who serve them.

See Chapter 5 of the Chief Medical Officer’s 2010 annual report for a fuller discussion of the assets based approach: http://www.scotland.gov.uk/Publications/2011/12/14120931/0

Co-production is the process of active dialogue and engagement between people who use services and those who provide them. It is a process which puts service users on the same level as the service provider. It aims to draw on the knowledge and resources of both to develop solutions to problems and improve interaction between citizens and those who serve them (SCDC, 2011), (Needham and Carr, 2009). The key characteristics of co-production exemplify asset based principles (Stephens et al., 2008):

- Recognising people as assets rather than as problems
- Building on people’s existing skills and resources
- Promoting reciprocity, mutual respect and building trust
- Building strong and supportive social networks
- Valuing working differently, facilitating rather than delivering
- Breaking down the divisions between service providers and service users.

Co-production changes the dynamics between individuals and communities, creating more collaborative relationships. Frontline staff are more able and confident in sharing power and are more ready to accept user expertise (Needham and Carr, 2009). Co-produced services work with individuals in a way that treats individuals as people with unique needs, assets and aspirations, but also as people who want support tailored to their needs (Slay and Robinson, 2011). Services learn to work with people and not do things to them.

The influence of protective and risk factors on health

Asset based approaches are concerned with identifying and utilising the protective factors that support health and wellbeing. They offer the potential to enhance both the quality and longevity of life through focusing on the
resources that promote the self-esteem and coping abilities of individuals and communities. At present, policy generally reflects a dual strategy of enhancing protective factors for health (e.g. health promoting behaviours, psychosocial factors such as personal resilience, self-esteem, motivation, self-control), while seeking to reduce risk factors to health such as alcohol or drug misuse.

In terms of reducing risk factors, it is increasingly argued that policy makers should move away from siloed, single issue approaches to integrated, multiple risk behaviour approaches which recognise that risk behaviours tend to co-occur. At the same time there should be continued focus on strengthening the protective factors that are understood to mitigate against young people’s involvement in health risk behaviours.

**Health – Strategic Policy Context**

The strategic narrative *Achieving Sustainable Quality in Scotland’s Healthcare: A 20:20 Vision* (September 2011) provides the context for taking forward the required actions to improve efficiency and achieve financial sustainability to meet the significant challenges that Scotland’s health services face. Key challenges include Scotland’s public health record, changing demography and the economic environment:

<table>
<thead>
<tr>
<th>Our vision is that by 2020 everyone is able to live longer healthier lives at home, or in a homely setting.</th>
</tr>
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<tbody>
<tr>
<td>We will have a healthcare system where we have integrated health and social care, a focus on prevention, anticipation and supported self management. When hospital treatment is required, and cannot be provided in a community setting, day case treatment will be the norm. Whatever the setting, care will be provided to the highest standards of quality and safety, with the person at the centre of all decisions. There will be a focus on ensuring that people get back into their home or community environment as soon as appropriate, with minimal risk of re-admission</td>
</tr>
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The '20:20’ Vision also confirms the Scottish Government’s commitment to the values of NHSScotland - collaboration and cooperation, partnership working across NHSScotland, with patients and with the voluntary sector; of continued investment in the public sector rather than the private sector; of increased flexibility, provision of local services and of openness and accountability to the public.


The Quality Strategy is a development of *Better Health Better Care* (2007) which sets out the Scottish Government's programme to deliver a healthier Scotland by helping people to sustain and improve their health, especially in

Service providers should ensure that services for young people reflect the Quality ambitions and the 2020 vision.

### Health Inequalities - the Social Context

Despite the drive outlined above to provide better healthcare to communities across Scotland and the knowledge that overall, Scotland’s health is improving, the rate of improvement in the poorer areas of Scotland remains significantly slower than in the more affluent areas. Inequality in health outcomes continue to exist across Scottish society. Indeed, in his 2011 annual report (December 2012), Scotland’s Chief Medical Officer states that the most significant issue he has to face is the problem of health inequalities.

What is clear from the gap in health between rich and poor in Scotland is that the origins of health inequalities is complex and are to be found in the many interactions between social, economic, educational and environmental determinants. Action is required across all the determinants of health. It is widely recognised that the NHS alone will not reduce health inequalities.

### The key Social Policy Frameworks

*Equally Well: Report of the Ministerial Task Force on Health Inequalities*, along with the *Early Years Framework* and *Achieving Our Potential: A Framework for Tackling Poverty and Income Inequality in Scotland*, set out the Scottish Government’s and COSLA’s shared approach to tackling the major and intractable social problems that have affected Scotland for generations. These three social policy frameworks recognise that children’s start in life, cycles of poverty and poor health are interlinked. These are complex problems, involving complex solutions, and which require a long-term approach. Scottish Government policy advocates early intervention, moving from crisis management to prevention and breaking cycles of poor outcomes in people’s lives.

The three social policy frameworks share a commitment to tackling inequality and promoting equality. See:

*Equally Well: Report of the Ministerial Task Force on Health Inequalities*

*Achieving our Potential: A Framework to Tackle Poverty and Income Equality in Scotland*

*Early Years Framework*

In addition, the Child Poverty Act 2010 sets out UK-wide targets relating to the eradication of child poverty. It provides that it is the duty of the UK Government to ensure that the child poverty targets are met in relation to the year commencing 1 April 2020. These targets relate to levels of child poverty in
terms of: relative low income, combined low income and material deprivation, absolute low income and persistent poverty.

Child poverty in Scotland is affected by a mix of devolved and reserved policy measures. The Child Poverty Act requires that the UK Government produce a UK-wide child poverty strategy. This will be relevant to tackling child poverty in Scotland in so far as it covers reserved policy measures which apply to and impact on Scotland, such as policy on personal taxation and benefits.

The Child Poverty Act also requires Scottish Ministers to produce a Scottish strategy. The Child Poverty Strategy for Scotland focuses on policy matters that are devolved to the Scottish Parliament and Scottish Ministers. See: http://www.scotland.gov.uk/Publications/2011/03/14094421/0

Principle Policy Frameworks that support Young People’s Health & Wellbeing

In Scotland, the policy landscape in respect of children and young people is underpinned by Getting it right for every child (GIRFEC) and Curriculum for Excellence (CfE).

The Scottish Government is committed to improving the health and wellbeing of all children and young people to ensure they have the best start in life, are ready to succeed and live longer, healthier lives. Government expects partners to adopt and promote a range of common approaches in delivering services for young people underpinned by the GIRFEC approach and the principles of prevention and early intervention. In relation to delivering learning opportunities and experiences, the Curriculum for Excellence principles of Curriculum design would apply. See: http://www.educationscotland.gov.uk/thecurriculum/howisthecurriculumorganis ed/principles/index.asp

The GIRFEC approach overarches all policies relating to children and young people. It is a national approach which enables early, single and multi-agency intervention when there is a concern about a child or young person’s wellbeing before the issue escalates. See: A guide to Getting It Right For Every Child

GIRFEC is child centred, founded on the principles of early intervention, through appropriate, proportionate and timely support. The vast majority of children and young people receive all the support they need to ensure their wellbeing from their parents, carers and families. The GIRFEC approach ensures that from birth all Scotland's children, young people and their families have additional consistent and co-ordinated support, when they need it. It specifically promotes co-ordinated action by services to improve the life chances and outcomes for all children and young people in Scotland. To achieve this it encourages a shared understanding by all services of a child’s wellbeing in eight areas i.e. that children and young people must be Safe; Healthy; Achieving; Nurtured; Active; Respected; Responsible and Included (SHANARRI).
Ministers intend to legislate for key elements of GIRFEC, including the Named Person, single Child’s Plan and a duty on public bodies to co-operate when there is a concern about a child or young person’s wellbeing. They also propose putting the definition of wellbeing and the SHANARRI indicators on a statutory basis in relation to GIRFEC.

**Curriculum for Excellence** is a key vehicle for improving the life chances of children and young people and for contributing to the reduction of health inequalities. It aims to provide a coherent, flexible and more enriched curriculum from age 3-18. Within CfE, learning in Health and Wellbeing ensures that children and young people develop the knowledge, skills and attributes which they need for mental, emotional, social and physical wellbeing now and in the future.

Both GIRFEC and CfE are discussed in greater detail later in this document.

### Structure of Paper

In this paper, key Scottish Government policies that aim to support children and young people’s health and wellbeing are organised around two key life stages:

- Pre-birth and Early Years (page 11)
- Youth (page 14)

Within the “Youth” section, the eight GIRFEC Wellbeing indicators have been used to structure the information contained there. It is important to note however, that in many cases information referred to under one indicator will also be relevant to other indicators **AND** that GIRFEC is equally applicable to the early years.
SECTION 2

Pre-birth and Early Years

The Early Years Framework defines early years as **pre-birth to 8 years old.** This broad definition recognises the importance of pregnancy in influencing outcomes and that the transition to primary school is a critical period in children’s lives. Many aspects of the Framework are equally relevant to children beyond the age of 8.

The Framework espouses the GIRFEC approach and recognises the right of all young children to high quality relationships, environments and services which offer a holistic approach to meeting their needs. Such needs should be interpreted broadly and encompass play, learning, social relationships and emotional and physical wellbeing. This approach is important for all children but is of particular benefit in offering effective support to those children and families requiring higher levels of support.

At the heart of the Framework is a desire to see a shift in investment in early years from crisis management to **early intervention and prevention.** Early intervention has relevance to a wide range of policy but it is particularly relevant in early years, which will often be the earliest and best opportunity to intervene. In addition to a wealth of evidence demonstrating that investment in early years and early intervention leads to improved outcomes for children and young people, there is also powerful international evidence showing that investment in the early years yields significant savings later in an individual’s life.

The Scottish Government has initiated a significant shift to preventative spend through the establishment of an **Early Years Taskforce.** This co-ordinates policy across Government and the wider public sector to ensure that early years spending is prioritised by the whole public sector. The Taskforce was established by the Minister for Children and Young People, who co-chairs it, along with Scotland’s Chief Medical Officer and COSLA.

An Early Years Collaborative and Practice Development Team has also been established. The Early Years Collaborative is a multi-agency, local, quality improvement programme delivered at a national scale, which is taking forward the vision and priorities of the Early Years Taskforce. The Collaborative is centred on 3 workstreams based on a family centred, life course approach with a focus on conception to one year, one year to 30 months and 30 months to starting Primary School. The Practice Development Team offer tailored and practical support to local partnerships in improving their approach to early years locally.

Contact: Anncri Roberts – 0131 244 7852.

The Scottish Government’s aspiration is to make Scotland the best place in the world for a child to grow up. Parents are key to this ambition. The **National Parenting Strategy** will support parents and carers of children up to 18 years.
Work is ongoing in respect of further development and implementation of the commitments in the National Parenting Strategy. This includes taking forward a specific workstream on parenting of teenagers. See: [http://www.scotland.gov.uk/Resource/0040/00403769.pdf](http://www.scotland.gov.uk/Resource/0040/00403769.pdf)

**Contact:** Hilary Third 0131 244 7340.

Other key Scottish Government policy documents with a focus on health in the early years include:

**A Refreshed Framework for Maternity Care in Scotland** (2011) is designed to address all care from conception, throughout pregnancy and during the postnatal phase. The term “maternity care” is intended to refer to any NHS service providing maternity care to women and their babies - including care provided by Midwives, Obstetricians, General Practitioners, Anaesthetists, Paediatricians, Neonatologists, Public Health Nurses, Pharmacists, Optometrists, Dentists and Allied Health Professionals. Effective collaboration and communication between all of these disciplines and services, and particularly between primary care, public health nursing and maternity services, is essential for person centred, safe and effective maternity care. See: [http://www.scotland.gov.uk/Resource/Doc/337644/0110854.pdf](http://www.scotland.gov.uk/Resource/Doc/337644/0110854.pdf)

**Contact:** Lynne Nicol 0131 244 3524.

The [Maternal and Infant Nutrition Framework for Action](http://scotland.gov.uk/Publications/2011/01/13095228/0) aims to improve maternal and infant nutrition in Scotland, recognising that the diet and nutritional status of the mother before conception and during pregnancy, the feeding received by the infant in the first few months of life, the process of weaning onto solid foods and the diet and nutrition status of the growing infant all contribute significantly to the long term health of the population. The Framework is aimed at a wide variety of organisations, including the NHS, with a role in improving maternal and infant nutrition in Scotland.

**Contact:** Louise Scott 0131 244 3264.

The fourth edition of **Health for All Children** (“Hall 4”) provides a framework for connecting a range of different policies and spheres of activity that support children and young people’s health and development in the early years and beyond. **Guidance on Implementation in Scotland** was published in 2005 and that guidance is supplemented by **A New Look at HALL 4: The Early Years: Good Health for Every Child** (2011) which re-introduces the 24-30 month review. Consideration was given on the best age to carry out the review. A short life working group determined that the appropriate time to review the child’s parameters of development, identifying and addressing areas where additional support is required is between 27 and 30 months. Therefore the review will be renamed as such. Guidance on the 27-30 month review was published in December 2012. See: [http://www.scotland.gov.uk/Publications/2005/04/15161325/13269](http://www.scotland.gov.uk/Publications/2005/04/15161325/13269)
Contact: Gillian Garvie 0131 244 4086.

The national guidance, Pre-Birth to Three: Positive Outcomes for Scotland’s Children and Families (December 2010) was developed by Learning and Teaching Scotland in collaboration with the Scottish Government. It aims to guide and support people working with and on behalf of Scotland’s youngest children and their families. The guidance and accompanying multimedia resource includes important information on pre-birth and brain development and reflects the principles and philosophy of early intervention which underpin Getting it Right for Every Child, The Early Years Framework, Achieving our Potential and Equally Well. It reflects the complex and multi-faceted nature of the challenges faced by some children and families, making clear that these challenges cannot be dealt with by a single agency, but require multi-agency collaborations.

It also lays a sound foundation for children’s learning and development and will ensure a smooth and coherent transition for all children as they begin to engage with Curriculum for Excellence 3–18, the single curriculum for this age group. Curriculum for Excellence provides guidance about the delivery of pre-school education (see 'A Curriculum for Excellence').

An integral component of Curriculum for Excellence is improving the transition from pre-school to primary through the use of more active learning in Primary 1. The early level of Curriculum for Excellence encompasses both pre-school and Primary 1.

'Building the Curriculum 2: Active Learning in the Early Years' (2007), provides guidance on how to ensure that all children in pre-school and primary school settings experience stimulating, effective learning in ways that are appropriate to their needs to enable children and young people to develop their capacities as successful learners, confident individuals, responsible citizens and effective contributors. See: http://www.educationscotland.gov.uk/publications/b/publication_tcm4533529.asp?strReferringChannel=thecurriculum&strReferringPageID=tcm:4-685173-64&class=l3+d148554
SECTION 3

Youth

The Scottish Government recognises that youth is a unique and critical period for influencing future health outcomes. Supporting young people’s health and wellbeing is at the core of both Getting it right for every child (GIRFEC) and Curriculum for Excellence (CfE).

Getting it right for every child

GIRFEC specifically aims to promote co-ordinated action by services to improve the life chances for all children and young people in Scotland. To achieve this it encourages a shared understanding by all services of a child’s wellbeing in eight areas i.e. that children and young people must be Safe; Healthy; Achieving; Nurtured; Active; Respected; Responsible and Included (‘SHANARRI’). These are the basic requirements for all children and young people to grow and develop and reach their full potential.

The Scottish Government believes that a child or young person’s network of support will almost always have at its heart their parents, carers and family.

However, children and young people will progress differently depending on their circumstances and every child and young person has the right to expect appropriate support from adults and services if and when they need it, to allow them to develop as fully as possible across each of the Wellbeing indicators.

GIRFEC is founded on ten core components which can be applied in any setting and in any circumstance:

1 A focus on improving outcomes for children, young people and their families based on a shared understanding of wellbeing
2 A common approach to gaining consent and to sharing information where appropriate
3 An integral role for children, young people and families in assessment, planning and intervention
4 A co-ordinated and unified approach to identifying concerns, assessing needs, and agreeing actions and outcomes, based on the Wellbeing Indicators
5 Streamlined planning, assessment and decision-making processes that lead to the right help at the right time
6 Consistent high standards of co-operation, joint working and communication where more than one agency needs to be involved, locally and across Scotland
7 A Named Person for every child and young person, and a Lead Professional (where necessary) to co-ordinate and monitor multi-agency activity
8 Maximising the skilled workforce within universal services to address needs and risks as early as possible
9 A confident and competent workforce across all services for children, young people and their families
10 The capacity to share demographic, assessment, and planning information electronically within and across agency boundaries. See: www.scotland.gov.uk/gettingitright

Contact: Boyd McAdam: 0131 244 5320.

Curriculum for Excellence

Children and young people's wellbeing in both the early years and youth is supported by CfE, an ambitious programme which has a key role in improving the life chances of all young people by raising and realising ambition and improving attainment.

The curriculum in Scotland is not statutory. Local authorities and schools are responsible for the delivery of the curriculum, based on local needs and circumstances. As such, the Scottish Government does not prescribe to schools how they will deliver CfE, which has been implemented in every school in Scotland since 2010.

Health and Wellbeing (HWB) constitutes a core part of CfE. CfE aims to provide a coherent, flexible and more enriched curriculum from age 3-18, and includes the totality of experiences which are planned for children and young people through their education, wherever they are being educated. At its core, CfE seeks to enable each child or young person to be:

- a successful learner;
- a confident individual;
- a responsible citizen; and
- an effective contributor.

The curriculum is structured around all the experiences that are planned as part of learning and teaching. This includes the eight curriculum areas and subjects, the school community and interdisciplinary projects. Health and Wellbeing is both one of the eight curriculum areas and is also considered a ‘Responsibility of All’, alongside literacy and numeracy – i.e. there are aspects of HWB which are the responsibility of everyone in the learning community to deliver.

Within each of the eight curriculum areas, there are a set of statements which describe the expectations for learning and progression – these are called ‘experiences and outcomes’. There are 51 experiences and outcomes for HWB, structured under the following six ‘organisers’:

- Mental, emotional, social and physical wellbeing (including behaviour, bullying, exclusions, attendance and absence)
- Physical education, physical activity and sport
- Food and health
- Substance misuse
- Relationships, sexual health and parenthood (also including aspects of behaviour)
- Planning for choices and changes

Executive Agency Education Scotland provides support and advice to local authorities and schools, drawing on examples of best practice gathered throughout the country.

For more information visit:  
www.scotland.gov.uk/Topics/Education/Schools/HLiv and  
www.educationscotland.gov.uk/learningteachingandassessment/curriculumareas/healthandwellbeing/index.asp

Contact the Support and Wellbeing team: 0131 244 4914.

**Structure of the remainder of this Section**

Because the expectation is that the GIRFEC approach will be threaded through all existing policy, practice, strategy and legislation affecting children, young people and their families, the remainder of this section is organised around the eight GIRFEC Wellbeing indicators. Underpinning the policies and strategies that follow, the GIRFEC approach means that concerns about the child or young person’s wellbeing in relation to any of the indicators should be made known to the Named Person at an early stage. This enables earlier intervention with the aim of addressing the issue before it escalates.
SAFE….children and young people should be protected from abuse, neglect or harm

Child Protection

The Children (Scotland) Act 1995 states that local authorities have a duty to protect and promote the wellbeing of children in need in their area. This includes giving families appropriate support to help ensure their children are getting the best start in life.

The National Guidance for Child Protection in Scotland (Scottish Government, 2010) provides a national framework within which agencies and practitioners at local level – individually and jointly – can understand and agree processes for working together to safeguard and promote the welfare of children. It sets out expectations for strategic planning of services to protect children and young people and highlights key responsibilities for services and organisations, both individual and shared. It also serves as a resource for practitioners on specific areas of practice and key issues in child protection. This guidance replaces the previous version, Protecting Children – A Shared Responsibility: Guidance on Inter-agency Co-operation, which was published in 1998 and incorporates the Scottish Government guidance, Protecting Children and Young People: Child Protection Committees (2005).

The guidance is for all services, agencies, professional bodies and organisations, and for individuals working within an adult and child service context who face, or could face, child protection issues. Children, young people and their families come into contact with services at different points for different reasons and with different needs. Often, those needs can be met by the family themselves or by a single agency; but where children and families are particularly vulnerable and/or have complex needs, services must work together to take a collective and co-ordinated approach. Protecting children means recognising when to be concerned about their safety and understanding when and how to share these concerns, how to investigate and assess such concerns and fundamentally, what steps are required to ensure the child’s safety and well-being. See:

National Guidance for Child Protection in Scotland 2010

To support the implementation of the guidance, a number of other initiatives are in place. These include:

• We have developed a national risk assessment framework for child protection to support practitioners with a robust, consistent approach to identifying child protection concerns across Scotland;

• We have published a national learning and development framework for child protection, making clear the expected skills and competencies different parts of the children’s workforce should have with respect to child protection;
• We are updating our practice guidance (‘Getting Our Priorities Right’) for professionals specifically working with children and families where substance misuse is a factor. This is due to be published in Spring 2013; and

• A new scrutiny model for inspecting children’s services across Scotland is being taken forward by the Care Inspectorate.

Contact: Eni Bankole 0131 244 0294

Child Protection Guidance for Health Professionals

The child protection guidance for health professionals was published in December 2012. It is intended to act as a practical reference point for all healthcare staff working within an adult and child service. It is supplementary to and should be read in conjunction with the National Guidance for Child Protection in Scotland. See: http://www.scotland.gov.uk/Publications/2012/12/9727

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Looked After Children

Under the provisions of the Children (Scotland) Act 1995, 'Looked After Children' are defined as those in the care of their local authority. There are currently over 16,000 looked after children in Scotland and the majority will come into one of the following categories:

Looked After at home

Where the child (or young person) has been through the Children's Hearing system and is subject to a Supervision Requirement (regular contact with social services) with no condition of residence. The child then continues to live in their regular place of residence (i.e. the family home).

Looked After away from home

Where the child (or young person) has either: been through the Children’s Hearing system and is subject to a Supervision Requirement with a condition of residence; is subject to an order made or authorisation or warrant granted by virtue of Chapter 2, 3 or 4 of Part II of the Children (Scotland) Act 1995; or is placed by a local authority which has made a permanence order under Section 80 of the Adoption and Children Act 2007. In these cases the child is cared for away from their normal place of residence, by foster or kinship carers, prospective adopters, in residential care homes, residential schools or secure units.

The legal framework for Looked After Children in Scotland is based in a number of legislative acts and statutory instruments. The main acts and regulations are listed in the table accessed via the attached web link. Relevant
guidance documents - published by the Scottish Government to accompany the legislation - are listed separately. See: \texttt{http://www.scotland.gov.uk/Topics/People/Young-People/protecting/lac/about/lacregs}

Looked After children and young people and care leavers have historically experienced poorer health than their peers and are less likely to engage with health services. This is partly as a consequence of disruptive early family lives and sometimes due to being moved frequently when in care.

\textbf{We Can and Must Do Better} set out an action plan to improve the life outcomes of this group. Action 15 stated that ‘\textit{Each NHS Board will assess the physical, mental and emotional health needs of all Looked After children and young people for whom they have responsibility and put in place appropriate measures which take account of these assessments. They will ensure that all health service providers will work to make their services more accessible to Looked After and accommodated children and young people, and to those in the transition from care to independence.}’

Recommendations designed to address this action were issued to Health Boards in \textbf{CEL 16 (2009)}. This letter set out the requirement for Health Boards to:

- nominate a Board Director who will take a corporate responsibility for Looked After children and young people.
- ensure that every Looked After child and young person in their area has a health assessment within 4 weeks of notification to the Health Board.
- ensure that a mental health assessment is offered to every Looked After child or young person by 2015.
- ensure that the person undertaking that health assessment takes responsibility for ensuring their care plan is delivered/coordinated as appropriate.
- report performance annually to the Scottish Government.

The Looked After Children Strategic Implementation Group (LACSIG) was set up by the Scottish Government in 2010 to lead and drive forward progress to improve outcomes for Looked After children, young people and care leavers. LACSIG will work with existing groups, such as the Children and Young People’s Health Support Group and Child Health Commissioners, to promote the LACSIG health agenda.

\textbf{Contact:} Jennifer Willoughby 0131 244 7445.

\textbf{Children Affected by Parental Substance Misuse}

The Scottish Government is currently reviewing its dedicated guidance for all children’s and adult service practitioners working with vulnerable children and families where problem alcohol and/or drug use is a factor: \textit{Getting Our Priorities Right}. This guidance is grounded in the core principles that govern
the Scottish Government’s common approach to improving services for children, young people, adults and families - that early intervention is critical to ensure that problems in vulnerable families do not become more damaging and more difficult to address later. It is steeped in the GIRFEC approach to services, not least the principles of joined-up working across the public sector and putting the child and the family at the heart of all service design and delivery. It also complements the revised National Child Protection Guidance (2010). Lastly, it supports the wider Recovery Agenda for families facing substance use issues, ensuring that child protection, recovery and wider family support concerns are brought together as part of a coordinated approach to giving children, young people and families the best support possible. The revised guidance is due to be published in early 2013. See: http://www.scotland.gov.uk/Resource/0039/00396490.pdf

Contact: Graeme Hunter 0131 244 7131.

**Domestic Abuse**

Children and young people living with domestic abuse are at increased risk of significant harm, both as a result of witnessing the abuse and being abused themselves. Scottish Government officials are currently working on a refresh of *Safer Lives, Changed Lives: A shared approach to tackling violence against women in Scotland* (2009). The aim is to develop a more strategic approach to tackling domestic abuse - with a focus on prevention.

It is estimated that 100,000 children in Scotland live with domestic abuse. The impact of domestic abuse on children and families has been well documented elsewhere and further information on it can be found in the *National Domestic Abuse Delivery Plan for Children and Young People* (2008).

Initiatives involving young people include Voice Against Violence and Mentors in Violence Prevention (see page 21). In terms of Voice Against Violence (VAV), the Scottish Government and its partners have worked closely with an advisory group of young experts aged between 18 and 23 with personal experience of domestic abuse. VAV have advised Ministers and other partners on how to make a lasting difference to children and families across Scotland. This initiative was the first in the history of the Scottish Government (and indeed in the wider UK) which engaged with young survivors in such a way. It culminated in an event in 2011 at which VAV premiered their film ‘One Voice at a Time’ and delivered a legacy working pack which is informing the content of training across the statutory and third sectors. VAV have now come to an end in their present form, but will hopefully continue in the future. Scottish Government officials are giving consideration to the most appropriate model.

A leading initiative to address men's domestic abuse and to improve the lives of women, children and men is the Caledonian System, developed for the Scottish Accreditation Panel for Offender Programmes and the Scottish Government’s Equality Unit. The Caledonian System represents an integrated approach to address domestic abuse by advocating the development of
protocols for the safe sharing of information, both between Caledonian workers and with external agencies.

**Violence**

Young people’s sense of personal safety is also impacted by violence in Scottish communities. Enforcement activity is supported and complimented by early education and intervention which supports positive life choices and addresses the contributing factors which can lead to involvement in violence and knife crime. A key to tackling violence and knife crime is prevention, especially through education aimed at children and young people, and this forms a key part of learning in and through health and wellbeing in Curriculum for Excellence. By addressing associated risks and offering diversionary activities that promote positive life choices the Scottish Government aims to reduce incidences of violence and knife crime across Scotland. Key initiatives include:

- **No Knives, Better Lives**, an innovative partnership between the Scottish Government, police, voluntary sector and local authorities, aimed at educating young people about the consequences of carrying knives and providing healthy alternatives. The programme currently operates in 10 local authority areas across Scotland that have been identified as having a high prevalence of knife crime. It builds on existing services by providing a range of activities in schools and in the wider community, including diversionary activities, youth work interventions and events. See: [http://www.noknivesbetterlives.com/](http://www.noknivesbetterlives.com/)

- **Medics Against Violence** is a group of medical professionals, including oral and maxillofacial surgeons who use their experiences of dealing with victims of violence, to provide S2 pupils with an understanding of the consequences of violence and how to avoid it. This programme is delivered in schools and over 7000 young people have engaged with the programme so far. Any school in Scotland can request a visit - the presentation fits within a standard class period and is aligned with the Curriculum for Excellence.

- **Mentors in Violence Prevention** is a pilot operating in Portobello High School in Edinburgh and St Stephen’s High School and Port Glasgow High School in Inverclyde (these schools will be sharing a new joint campus). It aims to provide S6 pupils with peer mentoring training that allows them to support their S2 counterparts with the ‘Bystander Approach’. This approach educates those mentors and mentees about violence with a focus on issues of domestic and dating violence, promotes discussion and empowers people to speak up in the face of aggressive, coercive or disrespectful conduct.

Contact: Jennifer Stoddart 0131 244 2120.
Offending

Preventing Offending by Young People – A Framework for Action, launched in June 2008, reflects a new approach to dealing with young people who offend, or who are at risk of offending, and aims to deliver better outcomes for children and young people who offend.

The Framework consists of five key themes that provide the basis of implementation:

- Prevention
- Early and Effective Intervention
- Managing High Risk
- Victims and Community Confidence
- Planning and Performance

The Framework is formally owned by the Scottish Government, COSLA, the Association of Chief Police Officers Scotland (ACPOS), Scottish Children’s Reporter Administration (SCRA) and the Crown Office and Procurator Fiscal Service (COPFS), as key delivery agencies. The Framework is also endorsed by the relevant Inspectorates, professional organisations and third sector organisations.

See: http://www.scotland.gov.uk/Publications/2008/06/17093513/0

Development of the Framework has culminated in the Scottish Government prioritising work that supports partners to take forward the development of a whole system approach. This approach involves putting in place streamlined and consistent planning, assessment and decision making processes for young people who offend, ensuring they receive the right help at the right time. The ethos of the whole system approach suggests that many young people could and should be diverted from statutory measures, prosecution and custody through early intervention and robust community alternative. Following a successful pilot in Aberdeen, another 22 Local Authorities and their partners are progressing with implementation. The approach is supported by Government funding and guidance including:

Guidance for Alternatives to Secure Care and Custody: This guidance has been written for local authorities and community planning partners and promotes the use of alternative service to secure care and custody; through appropriate risk and need assessments and providing decision makers with accurate information.

Guidance for Reintegration and Transitions: This guidance focuses on the role of local authorities, community planning partners, Scottish Prison Service, secure estate and partners. The guidance highlights the importance of supporting young people throughout their time in secure care or custody to ensure a successful reintegration back to communities. The transitions young people make and the support that is needed at each stage is highlighted in this section.
**Framework for Risk Assessment and Management of young people:** This guidance has been written in line with the Risk Management Authorities Framework for Risk Assessment, Management and Evaluation (FRAME). Under 5 Standards, working with young people to manage their risk, by taking account of age and stage appropriate needs is discussed within this guidance.

**Toolkit for Diversion from Prosecution for young people under 18:** This toolkit offers guidance to service providers and decision makers on what they need to do to provide a more effective, tailored and appropriate intervention - in the form of diversion from prosecution - for young people who offend. View the annexes that accompany the toolkit.

**Toolkit to support Young People aged 16-17 in Court:** The purpose of this toolkit is to share the best practice which has emerged, and to assist those who are involved with young people under 18 who are appearing in Court, to develop efficient and effective local approaches to handling these cases.

Contact: Claire McDermott 0131 244 7679.

** Forced Marriage**

The Forced Marriage etc. (Protection and Jurisdiction) (Scotland) Act 2011 came into force on 28 November 2011. This legislation provides protection to young people who may be at risk of forced marriage and a remedy to those who have already been forced into marriage. The Act introduces a power to make Forced Marriage Protection Orders, allowing the Sheriff Court or Court of Session to require those responsible for forcing another person into marriage to stop or change their behaviour.

Contact: Lesley Irving 0131 244 5001
HEALTHY….children and young people should experience the highest standards of physical and mental health, and be supported to make healthy, safe choices

Topic based Scottish Government policies and initiatives which support young people’s health and wellbeing include:

**Food and Health**

A healthy balanced diet is vital to long term health and the positive habits learned in childhood can last a lifetime. The Scottish Government is taking a range of actions to help children and young people gain the skills and knowledge they need to make healthier food choices.

Key drivers of diet and nutrition policy in Scotland are:

**Preventing Obesity and Overweight in Scotland Route Map (2010) and Action Plan (2011)**

The Route Map makes a long-term commitment (over 20 years) to tackling overweight and obesity. It sets out the factors that contribute to obesity, the scale of the problem, and the changes that are needed to our living environments in order to shift it from one that promotes weight gain to one that supports healthy choices and hence healthy weight. It recognises that obesity is not just a health issue – it is a consequence of our culture, society and lifestyle. The Route Map has an action plan which contains actions relating specifically to improving the diet of young people.

[http://www.scotland.gov.uk/Publications/2010/02/17140721/2](http://www.scotland.gov.uk/Publications/2010/02/17140721/2)

**Contact:** Tony Rednall 0131 244 1835.

**Recipe for Success: Scotland’s National Food and Drink Policy (2009)**

*Recipe for Success* aims to promote Scotland’s sustainable economic growth by ensuring our focus on food and drink addresses quality, health and wellbeing, and environmental sustainability, recognising the need for access and affordability. This policy underpins work on reformulation, assessment against the Scottish Dietary Goals, improving consumer awareness and exploring ways to constrain non-broadcast marketing of high fat, salt, sugar (HFSS) foods to children.


**Contact:** Louise Feenie 0131 244 4387.

**Nutrition in Schools**

The Schools (Health Promotion and Nutrition) (Scotland) Act 2007 places a duty on schools and local authorities to ensure that health promotion is at the heart of a school’s activities. A school is health promoting if it provides
activities and an environment which promotes the physical, social and mental and emotional health and wellbeing of pupils. This will help to ensure that our children and young people are taught about the importance of health and wellbeing in its widest sense.

The ‘Nutritional Requirements for Food and Drink in Schools (Scotland) Regulations 2008’, introduced in June 2008, set high standards for food and drink provided in schools ensuring that pupils are offered healthy, balanced and nutritious food at school, allowing them to try new foods and develop healthy eating habits from a young age. Supporting guidance was published in September 2008. See: http://www.scotland.gov.uk/Publications/2008/09/12090355/0

As part of the Health and Wellbeing curriculum in CfE, all children and young people will participate in practical, enjoyable food activities which will help build knowledge and learning about good food choices with the aim of understanding diet and hopefully develop lifelong healthy eating habits.

Contact the Support and Wellbeing team: 0131 244 4914.

Scottish Government interventions/initiatives to support food and health policy for children and young people include:

- **Child Healthy Weight Intervention Programme**

  The child healthy weight intervention programme HEAT target (Health Improvement, Efficiency, Access to Services and Treatment) enables NHS Boards to complement existing work such as the Active Schools programme as well as encouraging them to develop tailored services to support families whose children are struggling with their weight and want to take action. Delivery of the first HEAT target was supported by £6m (2008-2011) and funding of £2.1m has been allocated to support delivery of the second HEAT target in 2011-12, with a further £2m in 2012-13. Boards exceeded the 2008-11 target at a national level. All Boards also met or exceeded their individual targets and are now working towards the new overall target of 14,910 further interventions by March 2014.

- **The Healthier Scotland Cooking Bus**

  The Scottish Government supports the Healthier Scotland Cooking Bus which aims to encourage greater understanding of food and health issues by teaching healthy, practical cooking skills to pupils and teachers and their local communities across Scotland. The bus has visited schools in all 32 local authority areas since June 2008. Any school or community group can apply for a visit from the bus. The Bus is an important part of the Scottish Government’s efforts to improve the health of children and young people in Scotland. Further information is available at: http://www.focusonfood.org/cookingbuses.html
• **Community Food and Health Scotland**

Community Food and Health (Scotland) (CFHS) supports work within low-income communities to improve access to and take-up of a healthy diet by working with individuals, groups and agencies, including those that work with children and young people, at local, regional and national levels, providing networking, skills development and training, practice and policy development. Further information is available at: [http://www.communityfoodandhealth.org.uk/](http://www.communityfoodandhealth.org.uk/)

• **HealthyLiving Award**

The Scottish Government supports the HealthyLiving Award which helps food outlets prepare and promote the sale of healthier food options. The Award recognises and rewards caterers who reduce the amount of fat, salt and sugar in food they provide and make healthy options more easily available. Award holders which cater for children must provide children with healthy and nutritious food. Further information is available at: [http://www.healthylivingaward.co.uk/](http://www.healthylivingaward.co.uk/)

• **HealthyLiving Programme**

The Scottish Grocers Federation (SGF) HealthyLiving Programme aims to improve the supply and provision of fresh produce and healthier food choices in local convenience stores, particularly in low income areas, and to promote this work to the wider trade; generating increased participation, spreading effective sales models and improving the wholesale supply chain. Further information is available at: [http://www.scottishshop.org.uk/sgfhlp](http://www.scottishshop.org.uk/sgfhlp)

• **Beyond the School Gate**

An initiative in development to create a new Beyond the School Gate toolkit to give local authorities guidance on what they can do to promote a healthier environment around schools and facilitate information sharing across Scotland. The toolkit will help local authorities to identify and promote practice that encourages access to healthier food options and/or restricts foods high in fat, salt and sugar within the vicinity of schools.

• **Take Life On**

The 'Take Life On' campaign covers physical activity, healthy eating, wellbeing and alcohol consumption. The campaign’s major message is that simple switches in our daily lives can make a real difference to our health and give us a feel-good boost. Further information is available on the Take Life On website at: [http://www.takelifeon.co.uk/](http://www.takelifeon.co.uk/)
Substance Misuse – Alcohol, Tobacco and Drugs

As part of the health and wellbeing curriculum in schools, all children and young people will learn about a variety of substances including alcohol, medicines, drugs, tobacco and solvents. They will explore the impact risk-taking behaviour has on life choices and health. See: www.scotland.gov.uk/Topics/Education/Schools/HLivi/DAE

Contact the Support and Wellbeing team: 0131 244 4914.

Alcohol


Examples of key national prevention activities that focus on children and young people include:

- **You, Your Child and Alcohol** - refreshed advice for parents and carers published in January 2011. This provides information and supports parents/carers to talk to young people about the effects of alcohol consumption. It also encourages adults to reflect on their own consumption.

- Strengthened legislation through the **Licensing (Scotland) Act 2005** cracking down on those who sell alcohol to young people under 18 and rolling out the test purchasing of alcohol; and the **Alcohol (Scotland) Act 2010**, which restricts promotions and established a mandatory age verification policy.

- The **Alcohol (Minimum Pricing) (Scotland) Act 2012** will target the very cheap ciders and vodkas that are particularly attractive to young people.

- The HEAT Standard for delivery of **alcohol brief interventions** (ABIs) will help to ensure that those who are drinking at harmful or hazardous levels receive early support to cut down. Presently there is no evidence on the efficacy of delivery to those under 16. This does not preclude delivery of ABIs to under 16s, if GPs or other professionals considered these were appropriate. The priority settings are for delivery to over 16s in primary care, A&E and ante-natal. However, the standard also encourages extension of the evidence base into wider settings (in line with published ABI HEAT standard guidance) and the Scottish Government is aware of innovative practice emerging in youth justice, school and sexual health settings. In addition, the Scottish Government is funding a study to explore the feasibility and acceptability of ABIs delivered to young people. The results from this study will be known in March 2014. The standard therefore has the potential to benefit young people with alcohol issues,
while indirectly benefitting those whose parents or carers have alcohol
issues.

**Thinking Differently – Young People and Alcohol** is a new funding
opportunity created by a number of UK funders working in partnership, which
seeks to identify ways of reducing alcohol-related harm in young people, their
families and communities in Scotland. The Funders are the Robertson Trust,
the Joseph Rowntree Foundation, Comic Relief, BBC Children in Need and the
Tudor Trust.

These Funders have pledged over £1 million across the next three years, from
March 2013, to encourage the development and delivery of innovative early
intervention approaches. It is seeking to fund projects which will have a direct
positive impact on young people and that will:

- reduce alcohol related harm and associated risky behaviour within
  young people across whole community populations; and

- build practical sustainable skills and knowledge to empower young
  people parents/carers and the community to take action to address local
  alcohol concerns.

**Contact:** Heather Cowan 0131 244 3075.

**Tobacco**

Smoking remains the principle preventable cause of ill-health and premature
death in Scotland. Therefore, the Scottish Government now gives a greater
focus to preventing young people from taking up smoking in the first place.

There are currently two main Scottish Government policy documents:

**A Breath of Fresh Air for Scotland** (2004) provided the platform for a major
expansion of smoking cessation services in Scotland leading to record
numbers of quitters by 2010 and the smoking ban. While these aren’t directly
aimed at children and young people they aim to denormalise smoking and
reduce exposure to second hand smoke, both of which will impact on young
people’s attitudes and health outcomes. See:
http://www.scotland.gov.uk/Publications/2004/01/18736/31540

**Scotland’s Future is Smoke-free** (2008) was specifically aimed at
accelerating action to prevent children and young people from starting to
smoke in the first place. Action in the plan is set out under 4 broad headings:

- **Health Promotion & Education:** e.g. non-smoking being fostered
  through the work in schools under the umbrella of the Health Promoting
  School and Curriculum for Excellence, in higher & further education
  establishments, & youth work/community settings;
Reducing the Attractiveness Of Tobacco Products: e.g. new legislation to ban displays of cigarettes and other tobacco products in shops;

Reducing the Availability of Tobacco Products: e.g. stepping up enforcement of the tobacco sales law; overhauling tobacco sales including to ban cigarette sales from vending machines; and promoting a “no proof, no sale” culture, including through encouraging up take of the Young Scot PASS approved National Entitlement Card.

Reducing the Affordability of Tobacco Products: e.g. keeping pressure on the UK Government to ensure tobacco duty remains high; collaborating with HM Revenue and Customs to reduce the availability of smuggled tobacco in local communities.


This led to the *Tobacco and Primary Medical Services (Scotland) Act 2010* which, amongst a range of measures, included the ban on the display of tobacco in shops and banned cigarette vending machines (to come into force on 29 April 2013) and new offences of underage and proxy purchase and new police powers of confiscation.

The Scottish Government launched its new Tobacco Control Strategy “Creating a Tobacco-Free Generation” on 27 March 2013. Preventing young people from starting to smoke and protecting them from exposure to second hand smoke continue to be key themes. Scotland is the third nation in the world to set an ambitious target to become tobacco-free, by having less than 5 per cent of the population choosing to smoke by 2034. See:

[http://www.scotland.gov.uk/Publications/2013/03/3766/downloads#res417331](http://www.scotland.gov.uk/Publications/2013/03/3766/downloads#res417331)

Key prevention activities in addition to *Choices for Life* (see below) include:

- Young Scot Support Officer
- ASH Scotland Youth and Tobacco Development Work

Contact: Siobhan Mackay 0131 244 2576.

**Drug Misuse**

The Scottish Government published its national drug strategy *The Road to Recovery: A New Approach to Tackling Scotland’s Drug Problem*, in 2008. It focused on: increasing the rate of recovery from drug misuse; preventing drug use; reducing the supply of illegal drugs; and, protecting children at risk as a result of parental drug misuse. See:

[http://www.scotland.gov.uk/Publications/2008/05/22161610/0](http://www.scotland.gov.uk/Publications/2008/05/22161610/0)
Drugs education is positioned and embedded within wider health and wellbeing education. Key prevention activities include:

- The Scottish Government substance misuse information campaign, *Know the Score*, offers information and advice that is up to date, interactive and credible. It is supported by a free and confidential 24 hour helpline. See: [http://knowthescore.info/](http://knowthescore.info/)

- The Scottish Government funds the Scottish Crime and Drugs Enforcement Agency to deliver *Choices for Life*, the Substance Misuse Education Programme (alcohol, tobacco and drugs) for Scottish school children, from P7 to S6. Activity consists of online education broadcasts through GLOW, the schools intranet system, materials for teachers and an information website, for young people, parents and carers. See: [choicesforlifeonline.org/](http://www.sdea.police.uk/choicesforlife.html)

- Work with young people to develop innovative sources of information on substance misuse. For example, the Scottish Government's Drugs Policy Unit worked in partnership with Young Scot to ask young Scots directly what works for them in terms of substance misuse education. The report (2011) outlining the young people’s findings on a range of substance misuse issues, including legal highs, smoking and alcohol misuse and the role of schools can be found at: [http://www.youngscot.net/media/24133/sme_report_final.pdf](http://www.youngscot.net/media/24133/sme_report_final.pdf)

Contact: 0131 556 8400.
Sexual Health (including teenage pregnancy)

The *Sexual Health and Blood Borne Virus Framework* sets out the Scottish Government’s agenda in relation to sexual health, HIV, hepatitis C and hepatitis B for the four years 2011-15. The Framework has five high level outcomes, all of which are relevant to young people:

- Fewer newly acquired blood borne viruses (BBVs) and sexually transmitted infections; fewer unintended pregnancies
- A reduction in the health inequalities gap in sexual health and BBVs
- People affected by BBVs lead longer, healthier lives
- Sexual relationships are free from coercion and harm
- A society where the attitudes of individuals, the public, professionals and the media in Scotland towards sexual health and BBVs are positive, non-stigmatising and supportive.

The Framework asks that a multi-agency approach is taken to supporting young people around sexual health and BBVs. In particular, that local authorities should be taking a leadership role in addressing teenage pregnancy. It also confirms that sexual health and relationships education remains critically important. It is now well established that providing accurate age and stage appropriate information can support young people to avoid sexual activity until they are physically and emotionally ready (Currie et al., 2008). See: [http://www.scotland.gov.uk/Publications/2004/01/18736/31540](http://www.scotland.gov.uk/Publications/2004/01/18736/31540)


This brings together the range of current evidence and advice on the partnerships, strategies and interventions that need to be in place locally if teenage pregnancy rates are to be reduced (LTS, 2010). By reviewing this evidence and using the self-assessment tool on an annual basis, local authorities and their partners can build on existing good practice to address teenage pregnancy in the long term.

Other prevention activity relating specifically to young people includes:

- Encouraging the continued provision of drop-in services for young people in or close to schools, particularly in areas of greatest need.
- The delivery of Relationship, Sexual Health and Parenthood (RSHP) education to all young people, including those not in school.

The delivery of RSHP within the Health and Wellbeing component of Curriculum for Excellence provides the opportunity for linkages with other health improvement issues and risk-taking behaviours such as alcohol and drug misuse, smoking, and mental health.

Contact: Felicity Sung 0131 244 3817.
Relationships, sexual health and parenthood education is an integral part of the health and wellbeing area of the schools curriculum in Scotland. This aspect of the curriculum is intended to enable children and young people to build positive relationships as they grow older and should present facts in an objective, balanced and sensitive manner within a framework of sound values and an awareness of the law on sexual behaviour. See: www.scotland.gov.uk/Topics/Education/Schools/HLivi/sex-education

Contact the Support and Wellbeing team: 0131 244 4914.
Mental Health

In terms of mental wellbeing, the Scottish Government has published the *Mental Health Strategy for Scotland: 2012-2015*. Child and Adolescent Mental Health is one of four ‘Key Change Areas’. The commitments set out there focus on improving both short and long term mental health outcomes from infancy. See: [http://www.scotland.gov.uk/Publications/2012/08/9714](http://www.scotland.gov.uk/Publications/2012/08/9714)

The Strategy builds on ongoing work with Child and Adolescent Mental Health Services (CAMHS) and through a range of other initiatives which include:

- Properly articulated links between specialist mental health services and all schools.
- Investment in specialist CAMHS workforce.
- The publication of standards for integrated care pathways for child and adolescent mental health services
- The publication of Children and Young People Mental Health Indicators
- See me, the national campaign against the stigma surrounding mental ill health, have produced a children and young people resource pack aimed at 13-15 year olds [www.seemescotland.org/whatsonyourmind](http://www.seemescotland.org/whatsonyourmind) designed to support the health and wellbeing outcomes in *Curriculum for Excellence*.

Contact: Thomas Hogg 0131 244 2803.

The Scottish Government’s Support and Wellbeing Unit fund ‘Respectme’, the National Anti-bullying service, and provide some funding towards Childline to cover their bullying helpline service. See: [www.respectme.org.uk/](http://www.respectme.org.uk/) and [www.childline.org.uk](http://www.childline.org.uk).

Contact the Support and Wellbeing team: 0131 244 4914.

Children and Young People’s Specialist Services

The *Better Health Better Care National Delivery Plan for Children and Young People’s Specialist Services in Scotland* meets a key milestone in the commitments set out in *Better Health, Better Care* (see page 7). It establishes a national infrastructure for the sustainability of specialist children's services in Scotland, not just in the specialist hospitals but also in District General Hospitals and in the community: and it identifies work that needs to take place at a national and regional level to sustain and develop services. See: [http://www.scotland.gov.uk/Publications/2009/01/16113840/0](http://www.scotland.gov.uk/Publications/2009/01/16113840/0)

Contact: Fiona McKinlay 0132 244 3590.
Achieving…children and young people receive support and guidance in their learning – boosting their skills, confidence and self esteem

Children learn through the totality of their experiences, through their family and community as well as through the pre-school and school environments. Curriculum for Excellence, the 3–18 curriculum, aims to ensure that all children and young people in Scotland develop the attributes, knowledge and skills they will need to flourish in life, learning and work.

The curriculum includes all of the experiences which are planned for children and young people through their education, wherever they are being educated. By recognising and planning learning around different contexts and experiences, the curriculum aims to make better connections across learning.

1. Curriculum areas and subjects

The curriculum areas are the organisers for ensuring that learning takes place across a broad range of contexts, and offer a way of grouping experiences and outcomes under recognisable headings. The experiences and outcomes describe the expectations for learning. Taken together, experiences and outcomes across the curriculum areas sum up national aspirations for every young person: the knowledge and understanding, skills, capabilities and attributes we hope they will develop.

The eight curriculum areas are:

- Expressive arts
- Health and Wellbeing
- Languages
- Mathematics
- Religious and moral education
- Sciences
- Social Studies
- Technologies

2. Interdisciplinary learning

The curriculum should include space for learning beyond subject boundaries, so that children and young people can make connections between different areas of learning.

3. Ethos and life of the school

The starting point for learning is a positive ethos and climate of respect and trust based upon shared values across the school community.

4. Opportunities for personal achievement

Pupils need opportunities for achievement both in the classroom and beyond,
giving them a sense of satisfaction and building motivation, resilience and confidence. For more information see: structure of the curriculum.

Effective involvement of parents in their children’s learning is key to successful implementation of Curriculum for Excellence. In line with the Parental Involvement Act 2006, the Scottish Government is working in partnership with local authorities, Education Scotland, National Parent Forum of Scotland and other key partners to promote parental involvement in education at all levels.

Contact the Support and Wellbeing team: 0131 244 4914.

**Additional Support for Learning**

Some children need extra support to help them learn. This might be because of temporary medical conditions, family circumstances, bullying, language and communication disorders or sensory impairment. These needs can be short or long-term.

The Education (Additional Support for Learning) (Scotland) Act 2004 (as amended) provides the framework for education authorities and other agencies to support all children to overcome barriers to their learning. It provides duties on authorities to identify, plan and provide for the additional support needs of pupils for whose education they are responsible. In addition, the Act provides for resolution of concerns and disagreements through mediation, independent adjudication and the Additional Support Needs Tribunals for Scotland.

Where a child or young person’s needs are considered to be complex or multiple, they have the right to a co-ordinated support plan. The plan brings together the contribution by education authorities and other agencies towards overcoming the child or young person’s barrier to learning.

Young people and parents have a range of rights through the Act, including the right to request assessment, to make placing requests and to have concerns addressed. Looked After Children and Young People are automatically considered to have additional support needs until they are identified otherwise.

Further information on the provisions of the Act, the code of practice which supports the Act, and where parents can get further information, is available from [http://www.scotland.gov.uk/Topics/Education/Schools/welfare/ASL](http://www.scotland.gov.uk/Topics/Education/Schools/welfare/ASL)

Contact the Support and Wellbeing team: 0131 244 4914.

**Progressing to further learning, training or work post-16**

The Scottish Government’s wish is that all young people stay in learning after 16 since this is the best way of improving their long-term employability.
Health benefits of work

Research tells us that for most people, work is good for long term health outcomes. For those in employment, work can provide fulfillment and offers individuals a degree of control over decisions that bring benefits to health. In contrast, unemployment is associated with a higher risk of death and increased mental health problems. Job insecurity is also damaging to health, and has been linked to higher rates of hospital admissions, increases in heart disease and deterioration in mental health.

Opportunities for All

In response to the economic downturn and the resultant adverse effects on young people’s prospects in the labour market, the Government introduced Opportunities for All in its Programme for Government in September 2011. This is an explicit commitment to an offer of an appropriate place in learning or training for every 16-19 year old not currently in employment, education or training. Opportunities for All brings together a range of existing national and local policies and strategies as a single focus to improve young people’s participation in post 16 learning or training, and ultimately employment, through appropriate interventions and support until at least their 20th birthday. Opportunities for All became a live offer from 1 April 2012 and will ensure that the post-16 system delivers for all young people.

Opportunities for All focuses on supporting young people who have disengaged, seeking to re-engage them with appropriate learning or training from their 16th until at least their 20th birthday. Whilst Opportunities for All commits to offering a place in learning or training, those young people who wish to move into employment should be supported to do so. See: http://www.scotland.gov.uk/Publications/2012/11/7618

Contact: Martin McDermott 0131 244 6712.

Post 16 Transition Planning

Participating in learning beyond age 16 is the best way for a young person to improve their long-term employment prospects; successful post-16 transitions are key to enabling this. 16+ Learning Choices, the Scottish Government’s post-16 transition planning model, supports delivery of both Curriculum for Excellence and Opportunities for All. It facilitates the offer of an appropriate place in learning or training for every 16-19 year old in advance of them leaving school and before leaving subsequent episodes of learning or training. The offer focuses on personalisation, choice and progression and will encompass relevant supports to help young people to progress on their career path. http://www.scotland.gov.uk/Publications/2012/11/3248

Contact: Martin McDermott 0131 244 6712.
More Choices, More Chances

The Scottish Government’s *More Choices More Chances* strategy, introduced in 2006, is part of the Government’s broad strategic framework for improving outcomes for all young people and focuses on reducing the number of 16-19 year olds disengaging from learning or who are not in education, employment or training. It recognises the wide and complex composition of this group and the barriers which prevent or limit individuals’ engagement and promotes multi-agency collaboration as the driver for improvement, focusing on prevention, intervention and sustainability by ensuring:

- Curriculum for Excellence provides opportunities tailored to individual need, with flexibility and appropriate support (as early as possible) for those who need it;
- every young person has an offer of post-16 learning and a clear pathway into it, with supported transitions and sustained opportunities;
- learning is a financially viable option, by considering the financial support available to young people;
- the right support is available to young people to find out about, engage with and sustain learning and employment;
- joint commitment to action between central and local government, employers, learning providers and support agencies to develop the service infrastructure required to meet the needs of those at risk of disengaging and those who have already done so.

**Contact:** Martin McDermott 0131 244 6712.

Career Information, Advice and Guidance

Skills Development Scotland are modernising their service delivery in line with the Scottish Government’s Career Strategy, published in March 2011. This involves refocusing the way they work to offer a modern service that uses the latest technology, training and labour market research to ensure more individuals than ever before get the right support to help them build lasting careers. Career services will focus on providing a universal offer to all, directed predominantly through Skills Development Scotland’s online service - *My World of Work*. Individuals will also be able to access career centres across Scotland and telephone the Skills Development Scotland contact centre for further information, advice and guidance. Intensive, targeted services will be focused where most required.

**Contact:** Martin McDermott 0131 244 6712.

Youth Employment Strategy

The Scottish Government places a high priority on youth unemployment as is exemplified by its Programme for Government, the Government Economic Strategy and the Programme of Post-16 Education Reform. Ensuring young
people are well placed to take advantage of new and emerging jobs is one of the most important challenges the Scottish Government faces.

In order to deliver a cross Government approach to the issue, the Scottish Government has appointed a dedicated Minister for Youth Employment. This is the first such appointment anywhere in the UK and will ensure that all parts of Government work with employers, training providers and third sector organisations to support young people across Scotland.


**Contact:** Jackie Galbraith 0131 244 1360.

**Skills**


A key priority is to support employers by better understanding and assessing the skills required for future success, and ensuring that the supply of skills, training and qualifications is sufficiently responsive.

Homelessness

Tackling and preventing homelessness is a key priority in fighting poverty and inequality in Scotland, underpinned by the achievement of Scotland's 2012 Homelessness Target. From the end of 2012, the right to settled accommodation has been extended to all those assessed as unintentionally homeless by local authorities. These housing rights are unprecedented in Europe.

Prevention and Housing options

With the achievement of the 2012 target and equalising of housing rights for homeless households, preventing homelessness before it occurs remains an important objective. Prevention, particularly among young people, was a key focus of the Joint 2012 Steering Group which the Scottish Government established with COSLA in 2009 to drive progress towards meeting the target. The 2012 Steering Group promoted a Housing Options approach to homelessness which involves early intervention and considers all of the options available to an individual. It also requires local authority homelessness services to work closely with other services in a range of areas important to young people including employability, mediation and financial advice.

This approach, being progressed through five regional local authority led 'Housing Options' hubs, aims to deliver improved more sustainable outcomes for those vulnerable to homelessness, including young people. Recent homelessness statistics, collected by local authorities, indicate that this approach has led to falls in homelessness in Scotland, including among young people.

The Scottish Government also recognises that local authority homelessness services and other relevant agencies must work together to best meet the needs of children and young people facing homelessness. It published homelessness guidance for the Best Interests of Children in 2010.

Supported Accommodation

As part of the focus on prevention and securing better housing outcomes for individuals, the Scottish Government established the cross sector Supported Accommodation Implementation Group (SAIG) to provide proposals for developing consistent provision of supported accommodation across Scotland for those at risk of homelessness, particularly young people. The final report was published in November 2012.

SAIG members included Scottish Government policy interests from Getting it Right for Every Child, Leaving Care and Youth Employment. It focussed on some key themes including models of practice, employability, funding and the implications of welfare reform.
Housing Support Regulations

Housing Support Services (Homelessness) (Scotland) Regulations 2012, are due to be commenced on 1 June 2013. They will place a statutory duty on local authorities to assess whether homeless or potentially homeless applicants to whom they have a duty to secure settled accommodation need the housing support services that will be prescribed. The local authority must then ensure that housing support services are provided to those assessed as being in need of them. The duty will also extend to persons who reside with an applicant.

Health and Homelessness

Health and Homelessness Standards for Health Boards were established in 2005. The Scottish Government remains committed to this agenda In order to re-invigorate this area of work a cross sector Steering Group was established in 2011 by NHSScotland, including representatives from the housing/homelessness sector as well as Health Boards. A leads network of health and homelessness representatives from Health Boards has now been established and is working jointly with the Steering Group to ensure links are maintained to the housing/homelessness sector.

Contact: Matt Howarth 0141 271 3749.

Health and the Environment

In terms of place, Good Places Better Health (GPBH, 2011) is the Scottish Government’s Strategy on health and the environment. This new approach recognises that environment (both the social and physical environment) has a significant impact on the health of Scotland’s people and that action is required to create safe, health nurturing environments for everyone. GPBH has completed its prototype phase which considered the question “What is needed to deliver places that nurture good health for children?”. In particular the prototype put forward ten recommendations that addressed four health challenges facing children in Scotland: Obesity, Asthma, Unintentional Injury and Mental Health and Wellbeing as they affect children 0 – 8 years old. The recommendations covered neighbourhoods (including safe, healthy neighbourhoods; well maintained and managed public spaces; increased opportunities for outdoor play and access to the natural world; and supporting social capital within communities), the homeplace (including warm dry homes; generously proportioned, flexible and functional homes; and homes within lifetime communities), and transport (including child friendly active travel and public transport; and safe streets).

Physical education, physical activity and sport (PEPAS)

PEPAS forms a core part of the Health and Wellbeing curriculum in schools. The Government is committed to ensuring all primary pupils receive 2 hours of PE every week, and all pupils in S1-S4 receive 2 periods of PE. An additional £5.8m of national and local funding has been made available for authorities and schools to ensure this target is met across Scotland by 2014.

See: www.scotland.gov.uk/Topics/Education/Schools/HLivi/PE

Contact the Support and Wellbeing team: 0131 244 4914.

Sport and Physical Activity

The Scottish Government is committed to getting and keeping young Scots active and to use the 2014 Commonwealth Games to make Scotland a healthier and fitter nation.

Reaching Higher (2007) is Scotland’s national strategy for sport which sets out the roles and responsibilities for all key stakeholders along with plans for its delivery and evaluation. See: http://www.scotland.gov.uk/Resource/Doc/169113/0047106.pdf

The Scottish Government aims to increase and maintain the proportion of physically active people in Scotland, through the continued implementation of the National Physical Activity Strategy Let’s make Scotland more active (2003) which is consistent with World Health Organisation (WHO) policy and the five main strategies of the Ottowa Charter for Health Promotion (1986). See: http://www.who.int/healthpromotion/conferences/previous/ottawa/en/

Physical inactivity is increasing and is one of Scotland’s major health challenges, contributing to nearly 2,500 deaths in Scotland each year. In July 2012 The Lancet identified physical inactivity as being responsible for as many deaths as smoking worldwide, making it the joint second biggest killer. The cost to the NHS is around £91 million each year, and a further £58 million is associated with the cost of medicines to treat conditions that are associated with physical inactivity.

The Scottish Government is developing a number of new approaches to further support getting Scots active, including:

- developing a National Walking Strategy which will build on government investment to both the core path network and specific interventions to support people walking, such as Paths for All.
- launching a pilot study in early 2013 in Primary Care which will deliver accurate assessment, advice and intervention, and signpost to appropriate
resources including Paths for All, Community Sports Hubs, or other ways of staying active. This same model will be trialled in adult and paediatric hospital settings.

- taking forward a national physical activity implementation plan which will explore opportunities to embed physical activity in all areas of government policy.
- The Youth Sport Strategy, announced in September 2012, will aim to boost participation for all young people - from pre-school children to further and higher education students - and look at what more needs to be done to make sport and physical activity a habit that stays with young people throughout their lifetime.

The Scottish Government is continuing to invest in a number of initiatives to increase physical activity levels, including:

- investing almost £3 million on physical activity projects including Paths for All and Active Girls aimed at those furthest away from meeting the recommended physical activity guidelines.
- This investment is over and above National Programmes such as the flagship Active Schools Programme which provided almost 5 million opportunities in 2010/11 for young people to be active.
- The Scottish Government’s Health and Wellbeing campaigns including ‘Take Life On’ is continuing to promote a healthier, more active lifestyle to Scots highlighting the importance of children doing at least 60 minutes activity a day.

The Scottish Government is making significant investment to ensure that when enthusiasm is captured through the Commonwealth Games this is maintained and that people can get and stay active, with local access to facilities and activities as well as an environment that encourages walking and cycling:

- Scottish Government investment will ensure there is easy access to local facilities for local communities across Scotland with 70 Community Sports Hubs already beginning to work in their communities. The Scottish Government is committed to deliver at least 150 across all 32 local authorities by 2016, half of which are to be based in schools.

Further information on community sports hubs may be accessed here:- [http://www.sportscotland.org.uk/clubs/Community_sport_hubs/Community_sport_hubs](http://www.sportscotland.org.uk/clubs/Community_sport_hubs/Community_sport_hubs)

- This complements the Scottish Government’s wider approach to supporting sustainable transport activity such as cycling, walking and safer streets projects.
- The Scottish Government has invested £50 million to provide opportunities for over 600,000 young people from CashBack for Communities. Of this £24 million has been invested directly in sporting activities and facilities.
Physical Activity levels

The report on physical activity for health from the UK’s Chief Medical Officers *Start Active, Stay Active* includes guidelines on the volume, duration, frequency and type of physical activity required across the life course to achieve general health benefits. It updates existing guidelines for children, young people and adults and includes new guidelines for early years and older people for the first time in the UK. It is aimed at the NHS, local authorities and a range of other organisations designing services to promote physical activity. The document is intended for professionals, practitioners and policy makers concerned with formulating and implementing policies and programmes that utilise the promotion of physical activity, sport, exercise and active travel to achieve health gains.


The 2011 Scottish Health Survey (September 2012) revealed that 73% of children (76% of boys and 70% of girls) met the physical activity guidelines including school-based activity (i.e. do 60 minutes of moderate activity, including school based activity every day of the week). Although there was little change between 2008 and 2011 in this measure for boys, the proportion of girls meeting the recommendations increased from 64% in 2008. Let’s Make Scotland More Active National Target is 80% for children by 2022.

**Contact:** Chris Gosling 0131 244 0614.
RESPECTED….children and young people are given a voice and are involved in the decisions that affect their wellbeing

Children and Young People Bill

On 11 May 2012, the Scottish Government announced its intention to introduce a single Children and Young People Bill that would combine proposals to improve the delivery of children’s rights and services. The proposals for legislative change underwent a formal public consultation over summer 2012.

As a whole, the Bill's proposals are aimed at improving the focus of services around all children and young people while providing targeted improvements for specific groups. Consequently, all children and young people should benefit from the introduction of the Named Person and the proposals to embed children’s rights, while other provisions focus on children in the early years or the special needs of looked-after children. It addresses strategic planning as well as the planning around individual children.

The Bill is wide-ranging in its proposals, although each set of proposals builds on the foundation of a common vision for all children and young people. The Bill will:

Children's rights

- Embed children’s rights in the design and delivery of policies and services through duties on: Scottish Ministers to advance and raise awareness of the rights of children and young people, as set out in the UN Convention on the Rights of the Child (UNCRC); the wider public sector to report on what they are doing to advance these rights; and extending the power of the Children's Commissioner to enable him to investigate potential infringements of rights of individual children and young people;

GIRFEC

- Improve the way services support children and families by creating a single point of contact around every child and young person through the role of the Named Person; by ensuring that there is single, coordinated planning around all children who require support from services; by placing a definition of wellbeing on statute and duties on public bodies to report on outcomes;

Early Learning and Childcare

- Strengthen the role of early years support in all children’s lives by increasing the provision and flexibility of free early learning and childcare from 475 hours a year to a minimum of 600 hours for every 3 and 4 year old and looked-after 2 year olds;
Getting it Right for Looked After Children

- Ensure better permanence planning for looked-after children by: extending support to young people leaving care for longer (raising their entitlement age to 25); giving legal recognition to Kinship Carers through a new Kinship Care Order; extending corporate parenting across the public sector through a new duty; and making adoption quicker and more effective by making compulsory the use of Scotland’s national Adoption Register.

The formal analysis of consultation responses to the proposed Children and Young People Bill was published on 4 December 2012. It concluded that there is broad support for the aspirations of the Bill and the changes proposed. Ministers are now considering the Scottish Government’s response to the consultation findings, which will be published shortly and will detail what the final policy of the Bill will be.

Contact: Elisabeth Campbell 0131 244 0239

Self-Directed Support

Self-directed support (SDS) provides children with social care needs with a variety of options to arrange their care and support. Direct payments or individual service funds involve identifying a budget for the child to take an active role in directing their support. This is provided as an alternative to services which would otherwise be arranged by the local authority on the child’s behalf. The SDS approach - identifying a budget and passing much greater choice and control to the care service user and their family - entails a significant shift in approach for children’s social work teams. It also demands a similar reform in culture and approach for local authority, third and private sector providers of children’s support. In an 'SDS world' children and families should be able to choose from a variety of providers and they should be supported to develop more creative and innovative solutions. Self-directed support works best when professionals take a collaborative or co-production approach. It works best when the professional focuses their social care assessment on a person's outcomes and assets rather than their needs and deficits. Legislation on self-directed support, applying to councils' support to disabled children and young carers, was passed by the Scottish Parliament in November 2012 and is likely to be enacted by 2014.

For further information see: [http://www.selfdirectedsupportscotland.org.uk/](http://www.selfdirectedsupportscotland.org.uk/)

Contact: Craig Flunkert 0131 244 3721.
RESPONSIBLE….children and young people take an active role within their schools and communities.

Pupil Participation

Enabling young people to develop as responsible citizens with respect for others and commitment to participate responsibly in political, economic, social and cultural life is a key part of the purpose of Curriculum for Excellence. Pupil Councils are present in schools across Scotland and they have proven how successful they can be in developing learner voices. Pupil participation is also promoted and supported through Eco-Schools, Rights Respecting Schools and related approaches to promoting health and wellbeing. The Scottish Government is working with organisations including Young Scot, Children in Scotland, the Children's Parliament, the Scottish Youth Parliament, Youthslink and Scotland's Commissioner for Children and Young People to help ensure children and young people are actively involved in shaping issues impacting on them. Youth awards show the value of young people's voluntary effort to develop their skills and improve the communities around them. Amazing Things is a key document for youth work organisations, schools, colleges, universities, and employers capturing the youth awards: http://www.youthscotland.org.uk/resources/amazing-things.htm

Youth Work

Valuing Young People – principles and connections to support young people achieve their potential (2009) is the key policy driver for youth work services. It recognises that the vast majority of young people make a valuable contribution to their communities today and will play a leading role in building a more successful Scotland in the future. Nurturing and supporting young people to be successful learners, confident individuals, responsible citizens and effective contributors will help them navigate the challenges of adolescence and the transition into adulthood. Valuing Young People is designed to support statutory and voluntary organisations and services to deliver positive futures for all young people, while recognising that some may need more help than others at certain times in their lives: http://www.scotland.gov.uk/Publications/2009/04/21153700/0

Its principles draw on those that have been established in a range of related policies, including the Getting it right for every child and young person approach, Curriculum for Excellence and More Choices, More Chances.

The Scottish Government places great value on the role that youth work/community learning and development plays in delivering preventative services that help to improve young people’s life chances and employment prospects. Young people who become successful learners, confident individuals, responsible citizens and effective contributors, are young people who are more likely to make healthy and positive life choices in the longer term.

Contact: Jan Murray 0131 244 0104.
Strategic Action Plan for Youth Work

The Scottish Government is currently working with partners including Education Scotland and national youth work organisations to develop a new Strategic Action Plan for Youth Work. This Action Plan will underpin the Strategic Guidance for Community Learning and Development, and build on the actions set out in *Moving Forward: A Strategy for Improving Young People’s Chances Through Youth Work*, published in 2007.

Community Learning and Development Strategic Guidance

The Scottish Government launched its new strategic guidance for community learning and development (CLD) on 11 June 2012. The guidance:

- describes how CLD delivers SG policy outcomes in communities;
- clarifies the Scottish Government’s expectations of Community Planning Partnerships and other public sector partners for how CLD services should be delivered;
- highlights the role of CLD in public service reform and in delivering the outcomes of the Review of Community Planning; and
- re-emphasises the Scottish Government’s commitment to CLD’s aims and describes how these will be part of an overall strategic approach to be taken forward by a range of partners including Government itself, Education Scotland and the CLD Standards Council.


Implementation of the CLD strategic guidance will be delivered by Community Planning Partnerships with leadership and support from Education Scotland and other national and local third sector partners.

Young Carers


*Getting It Right For Young Carers* focuses on the needs of young carers and of young adult carers. It recognises that many young people can benefit from providing care to a relative or friend affected by illness, disability or substance misuse. However, the Scottish Government in partnership with COSLA are committed to ensuring that young carers are relieved of inappropriate caring roles and are supported to be children and young people first and foremost.

*Getting It Right For Young Carers* builds on a number of key Scottish Government policy developments, including the Children and Young People Bill, Additional Support for Learning, More Choices, More Chances and, in particular, GIRFEC. It presents a number of measures that aim to ensure that
Scotland's young carers are supported to achieve better outcomes and to become successful learners, effective contributors, confident individuals and responsible citizens.

The Young Carers Strategy has increased the profile of young carers’ issues, and encourages partners such as schools, health and other mainstream services to support children and young people who are young carers. The Scottish Government will continue to engage with young carers to identify their needs and priorities and to inform the development of policy.

Government will continue to support young carers in a range of settings to address young carers’ health and wellbeing. This includes support from NHS Boards, GPs, primary and secondary schools, further education, higher education and respite.

Young carers will have access to the full range of Self-Directed Support (SDS) options for any support that they receive under Section 22 of the Children (Scotland) Act 1995. As with disabled children, SDS can open up more creative options for young carers and the people they care for. For further information on SDS see page 45.

**Further Action in Hand**

- Work is ongoing to ensure that young carers’ interests are embedded in GIRFEC, Additional Support for Learning and the Children and Young People Bill.
- Work ongoing with NHS Education for Scotland/Scottish Social Services Council project on workforce development.
- Working with the Scottish Young Carers Services Alliance to ensure revision of dedicated young carer services’ assessment models, to achieve consistency with GIRFEC.
- Work is in hand to produce practice guidance for professionals to increase awareness of young carers.
- Continue to fund the Scottish Young Carers Festival. The festival is designed to give the young carers attending a fun break, a chance to try new activities and to meet other young people in similar situations from all over Scotland. The young carers attending also have the opportunity to meet with decision makers to have their say about the issues affecting them and how they feel support for young carers can be improved.
- Funding six pilots across Scotland for a young carers authorisation card. The card will help young carers to gain access to agreed information relating to the cared-for person to enable the young carer to fulfil their role. The card will also help health professionals and others identify, support and sign post young carers to other forms of support and services.

**Contact:** Elaine Garrick 0131 244 5437.
As stated earlier in this paper, Equally Well, along with the Early Years Framework and Achieving Our Potential set out the Scottish Government’s and COSLA’s overarching social policy framework for tackling social, educational, physical and economic inequalities in Scotland. There are a plethora of policies and initiatives which support this framework. Those that aim to tackle health and other inequalities among children and young people include:

Disabled Children and Young People

The Scottish Government is committed to equality for disabled children and young people in Scotland, and to ensuring that all children can achieve their potential. Early identification and support is of particular importance to disabled children, who are more likely to need targeted support from specialist services. Embedding GIRFEC will ensure that all services and agencies working with disabled children and their families can deliver a co-ordinated approach that is appropriate, proportionate and timely, which looks at the child’s needs as a whole.

The Scottish Government is taking forward a programme of work implementing policy for disabled children and young people in the context of GIRFEC. This includes participation work with young disabled people, capacity building and networking for parents and carers of disabled children and young people at both national and local level, the creation of a network of Disability Champions; outcomes modelling and the development of GIRFEC practice guidance and case studies for practitioners covering all needs of children including those who are disabled.

The Self-Directed Support Bill 2012 will offer disabled children and their families, greater choice in how their assessed needs should be supported, thereby shifting the balance of care to a more person centred and outcomes focused approach (see page 45).

The United Nations Convention on the Rights of the Child applies to all children and of particular relevance to disabled children are sections 12; 23 and 31, to seek their views and enable their participation and inclusion in activities.

National Review of Services for Disabled Children and Young People

The National Review of Services Group was first convened in 2010 to consider the landscape of disabled children’s services and set out actions for improvement. Their Action Plan was published in February 2011. Since then, the Scottish Government and partners have been working to implement the actions in the plan and a progress report was published in June 2012.

Actions in the plan include the following policy areas:
- Short breaks
- Developing practice briefing on GIRFEC for practitioners working with disabled children
- Moving and Handling Guidance
- Outcome and implications from the Doran Review
- Consultation with children and young people
- Housing
- Poverty
- Child protection and disabled children
- Integrated inspection services
- Staff training

Part of the National Review involved finding out the views of disabled children and young people about their lives and the services they use. A report of this project, and an easy read version was published in June 2012.

Contact: Carol Rice 0131 244 0253

**More Choices, More Chances**

*More Choices, More Chances* (2006) aims to reduce the proportion of young people not in education employment or training in Scotland. MCMC is described in greater detail on page 37.

**Behaviour in schools**

Curriculum for Excellence cannot be delivered without good relationships and positive behaviour. The starting point for learning is a positive ethos and climate of mutual respect and trust based upon shared values across whole school communities where everyone can learn and work in a peaceful and safe environment. Children and young people should feel happy, safe, respected and included in the learning environment and all staff should be proactive in promoting positive behaviour in the classroom and beyond. Schools use a range of approaches to promote positive behaviour and relationships in schools, including restorative approaches, the solution oriented approach and nurture groups.

For more information, see [www.educationscotland.gov.uk/supportinglearners/positivelearningenvironments/positivebehaviour/approaches/index.asp](http://www.educationscotland.gov.uk/supportinglearners/positivelearningenvironments/positivebehaviour/approaches/index.asp)

The *Behaviour in Scottish Schools Research 2012*, published in October 2012, ([www.scotland.gov.uk/Publications/2012/10/5408](http://www.scotland.gov.uk/Publications/2012/10/5408)), showed that the vast majority of staff in schools continue to see most pupils as generally well behaved and cited the development of positive whole school ethos and values as the most important factor in promoting positive behaviour. The research highlighted some areas of concern so the Government is working with the Scottish Advisory Group on Behaviour in Schools to agree an action plan in response to the research. This will be published in March 2013.
**Attendance, Absence and Exclusion**

In 2007, the Government published national guidance, *Included, Engaged and Involved* (www.scotland.gov.uk/Publications/2007/12/05100056/0) which focuses on promoting attendance and managing absenteeism. In recent years attendance and absence rates have remained steady.

Guidance for schools and local authorities published in 2011, *Included, Engaged and Involved Part 2*, (www.scotland.gov.uk/Publications/2011/03/17095258/0) stresses that exclusion is an extremely serious option of last resort, to be used within an ethos of prevention, early intervention and support for learners. Exclusion rates have dropped steadily in recent years, resulting in a 40% reduction from a peak in 2006/07.

**Contact the Support and Wellbeing team:** 0131 244 4914

**Antisocial Behaviour Framework**

In March 2009, the Scottish Government and COSLA jointly published their Framework for tackling antisocial behaviour, *Promoting Positive Outcomes*.

The Framework has been drawn together following a thorough review of national antisocial behaviour policy and recognises that prevention and early and effective intervention should be at its heart.

The four pillars of the Framework are prevention, integration, engagement and communication.

The main findings of the review include the need to:

- place prevention and early and effective intervention at the heart of approaches to tackle antisocial behaviour
- address the causes of antisocial behaviour, such as drink, drugs and deprivation, and not just the symptoms
- promote positive behaviour and the work of role models and mentors as well as punish bad behaviour in an appropriate, proportionate and timely manner. The Framework recognises role models and mentors can be a great way to provide a positive influence on young people and turn them away from such behaviour.
- create more choices and chances for people to succeed, reducing the likelihood of them being involved in antisocial behaviour
- work better together locally to meet the needs of individuals and communities by integrating services

Initiatives aimed at addressing inclusion include:

**CashBack**

The *Cashback for Communities Programme* is a unique Scottish initiative where the ill-gotten gains of crime, recovered through the Proceeds of Crime Act 2002 are invested into community programmes, facilities and activities largely, but not exclusively, for young people to the ultimate benefit of Scottish communities affected by crime and anti-social behaviour. Money is provided to local communities to support a wide range of sporting, cultural, educational and mentoring activities for children and young people aged 10 -25 years. The Programme includes a number of partnerships with Scottish sporting, arts, business, community and youth associations. CashBack also provides much needed funding to sports and community facilities.

Projects range from diversionary work to more long-term potentially life-changing intervention projects, which aim to turn an individual’s life around and provide them the opportunity of a positive destination such as employment, education, or volunteering. The key principles that underpin all CashBack activities include:

- **Positive** – broadly defined as wholesome, healthy, fun, active, engaging
- **Open to all** – accessible, well advertised, free of charge, of interest to all ages and to both boys and girls, ethnic minorities, young people with disabilities etc
- **Developmental** – changing behaviours and attitudes, developing personal and physical skills
- **Sustainable** – providing medium and long term as well as short term benefits; linked to mainstream funding
- Since the inception of Cashback for Communities in 2007, over £46 million recovered from proceeds of crime has been invested or fully committed to a wide range of sporting, cultural, educational and mentoring activities for children and young people throughout Scotland. This has generated over 11,000 volunteers and has benefitted over 600,000 young people.

See: [http://www.scotland.gov.uk/cashback](http://www.scotland.gov.uk/cashback)

**Contact**: Stuart Baxter 0131 244 3021.

**Walk the Talk**

*Walk the Talk* is a strategic initiative designed to improve young people’s access to health services provided by the NHS, local authorities and the voluntary sector. The initiative has been in existence since 1999 when the then Scottish Executive established 12 research projects to identify health inequalities affecting young people and any gaps in service provision. The research highlighted a clear need for health professionals to further develop appropriate and accessible services for young people. Concerns raised by
young people at the time included: a lack of consultation with young people; concerns over patient confidentiality; limited access to youth focused services; and a lack of information designed specifically for young people.

NHS Health Scotland has produced a website, resources and guidelines designed to support the development of health services relevant to young people. See:

www.walk-the-talk.org.uk/

**Youth Health website**

*The Lowdown* ([www.getthelowdown.co.uk](http://www.getthelowdown.co.uk)) is an information website and confidential phone line, aimed specifically at young people who are most at risk of poor health outcomes. Developed by the Scottish Government in partnership with Young Scot, it looks to address fundamental inequalities and develop resilience among young people by offering reliable and relevant information delivered in straightforward language. It provides information on mental wellbeing, physical health, sexual health and relationships of all kinds. As well as being aimed directly at young people, it provides a useful resource for those on the ground who work with them, supporting and enhancing local engagement activities around health with young people traditionally seen as “hard-to-reach”.

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Conclusion

No single Scottish Government Directorate has policy responsibility for young people’s health and wellbeing and there is no overarching framework that sets out the Scottish Government’s approach to youth health and youth health improvement. Much of the policy that relates to youth health is topic-based rather than integrated. The policy landscape for youth health is therefore complex and it can be difficult for service providers and practitioners to navigate their way through this complexity. This paper aims to draw together key Scottish Government policies on youth health into a single document in an attempt to simplify some of that landscape.

As policy continually evolves, the reader should bear in mind that this paper will only ever represent a snapshot of policy at a particular point in time.
References


Please note that in many cases policy will impact on several of the 8 GIRFEC Wellbeing indicators.