

Minister for Children and Young People
Clare Haughey MSP
Minister for Mental Wellbeing and Social Care
Kevin Stewart MSP



Scottish Government
Riaghaltas na h-Alba
gov.scot

T: 0300 244 4000
E: scottish.ministers@gov.scot

Health, Social Care and Sport Committee
By email: HSCS.Committee@Parliament.scot

HEALTH, SOCIAL CARE AND SPORT COMMITTEE REPORT: 'HEALTH AND WELLBEING OF CHILDREN AND YOUNG PEOPLE'

06 July 2022

Dear Convenor,

We enclose with this letter the Scottish Government's response to the recommendations made in the Health, Social Care and Sport Committee's report on the Health and Wellbeing of Children and Young People.

We would like to reiterate our thanks to your Committee members for this Report and to the individuals who came forward to share their experiences.

The enclosed response offers the Government's view on each of the Committee's recommendations. However, we would also like to take this opportunity to comment on a few key areas which we think will be of interest to the Committee.

Supporting children and young people's mental health remains a high priority for the Scottish Government, particularly as we seek to provide support to those impacted by the pandemic, and address the need to improve mental health services that existed prior. The voices and experiences of children, young people and their families will remain central to this. This will be both in terms of how we support good mental wellbeing, and how we provide the right help and support. We acknowledge that evidence suggests children and young people's mental health and wellbeing, as well as that of their parents or carers, may be particularly affected by the impact of Covid-19.

Under this Government, we have record levels of investment in mental health, record numbers of staff, and we are providing more varied support and services to a larger number of people than ever before. NHS mental health expenditure has already been increased from £651 million in 2006-07 to £1.250 billion in 2020-21, a rise of 92%.

Our Transition & Recovery Plan, published in October 2020 and backed by an additional £120m of recurring funding, is transforming services, with a renewed focus on prevention and

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early intervention. There is a significant focus on children and young people's mental health, including:

- An additional investment of £40m last year for CAMHS, with the latest national performance data now showing that over 5,000 children and young people began treatment in the last quarter - the highest ever recorded.
- Ongoing work to eliminate CAMHS and Psychological Therapies waiting times backlogs by March 2023.
- More than 18,500 children, young people, parents and carers accessed our newly-established community services in the six months between July and December 2021. We have committed to doubling funding, from £15m to £30m, by the end of the Parliament.
- Ensuring access to counselling support services in all secondary schools in Scotland.

It is recognised that schools have a particular role in supporting children and young people's health and wellbeing through actions to support health promotion and curriculum delivery through Curriculum for Excellence.

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. The Act also ensures that all food and drink provided in schools will meet tough nutritional standards that will help to change eating habits in Scotland. A school is defined as health promoting if it provides activities, environment and facilities which promote physical, social, mental and emotional health and wellbeing of pupils in attendance at the school.

Health and Wellbeing is one of the eight curricular areas in Curriculum for Excellence. Its substantial importance is reflected in its position at the centre of the curriculum and at the heart of children's learning – as well as a central focus of the Scottish Attainment Challenge and the National Improvement Framework for Education. Along with literacy and numeracy it is one of the three core areas that are the responsibility of all staff in the school.

Learning in Health and Wellbeing is designed to ensure that children and young people develop the knowledge and understanding, skills, capabilities and attributes which they need for mental, emotional, social and physical wellbeing. Health and Wellbeing isn't a single subject or class but is organised into six areas: Mental, emotional, social and physical wellbeing; Planning for choices and changes; Physical education, physical activity and sport; Food and health; Substance misuse; and Relationships, sexual health and parenthood. Some areas are the responsibility of all staff in a school. Others have a specific focus, with links to other health and wellbeing organisers and other curriculum areas. This response will set out the contribution that schools make aligned to strategic approaches to support health and wellbeing of Scotland's children and young people.

Tackling child poverty is a national mission for this government and we have recently set out, through '*Best Start, Bright Futures*' our second Tackling Child Poverty Delivery Plan, how we will work together with partners to drive forward action to tackle and reduce child poverty in Scotland. To effectively tackle child poverty, a balanced approach is needed. That is why we will deliver wide ranging action focused on increasing household incomes, reducing household costs, improving the wellbeing and outcomes of families and improving the life chances of children and young people.

Our efforts in 2022-23 will be backed by up to £113 million of additional investment, including new parental employability support, further increasing the value of our Scottish Child Payment to £25 per child, per week and mitigating the UK Government's Benefit Cap as fully as

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possible. Through these and wider actions we will continue to drive progress against our ambitious targets and will work to break the cycle of poverty.

A further in-depth response to each of the Committee's recommendations can be found within the Annex. We hope the Committee finds this response helpful.

Yours sincerely,



Clare Haughey MSP
Minister for Children and Young People

Kevin Stewart MSP
Minister for Mental Wellbeing and Social
Care

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Annex A – List of Recommendations and Individual Responses

Note to the Committee, the numbers referenced in the table below refer to the specific numbered lines from the Summary of Recommendations in the Committee’s report.

Recommendation	Response
Improving Physical Health	
<p>1. The Committee notes extensive evidence to the inquiry which demonstrates the multiple benefits to their health and wellbeing of encouraging greater physical activity and participation in sports by children and young people.</p>	<p>See response to recommendations 2 and 3.</p>
<p>2. The Committee believes that Scottish Government commitments to increase funding for sport and physical activity over the course of this Parliament need to be accompanied by an overarching national strategy with clear and measurable goals for achieving increased physical activity and improved physical health of Scotland’s children and young people and a multi-year funding programme.</p>	<p>Our Active Scotland delivery plan offers a shared vision for sport and physical activity and provides actions that we and our partners are undertaking, working together to encourage and support people in Scotland to be more active, more often. It sets out our ambition to foster collaboration across and between stakeholders to ensure a comprehensive and integrated approach.</p> <p>Increasing the amount of Physical Education that pupils receive in school has been a priority of this government for a number of years, recognising that increased physical activity can have a positive impact on a pupil’s health, educational attainment and life chances. In 2021, over 97% of all schools in Scotland have been meeting the established target on the provision of PE to pupils. Despite the impact of the COVID-19 pandemic during this period, this remains a remarkable improvement from the position in 2004-05, when only 10% of schools were providing this amount of PE.</p>
<p>3. The Committee also believes that one explicit goal of this strategy should be to achieve a significant increase in physical activity and sports participation by children and young people from disadvantaged groups and deprived communities and by girls.</p>	<p>Outcome 3 of our Active Scotland Outcomes Framework identifies the importance of developing physical activity and competence from the earliest age, as a key component of delivering our vision of a Scotland, where more people are more active, more often.</p> <p>An ongoing priority for the Scottish Government will be to support participation across all groups and tackle inequalities in participation. We are working with SportsScotland, organisations and individuals across Scotland to break down the barriers, financial or otherwise, that keep too many people from leading active lives.</p>

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	As is set out above, our universal approach to the provision of physical education and physical activity in schools includes children and young people who are from disadvantaged groups, deprived communities and girls.
Sexual and Reproductive health	
<p>4. In light of evidence submitted to the inquiry, the Committee highlights the need for a renewed focus on supporting young people with their sexual health and wellbeing.</p>	<p>In a schools context, Relationships Sexual Health and Parenthood (RSHP) education focuses on equipping children and young people with the knowledge, skills and values to make informed and positive choices about forming relationships. Teachers can use a range of resources to deliver age-and-stage appropriate education in a way that enables children and young people to make informed decisions about their lives. RSHP education should be presented in an objective, balanced and sensitive manner within a framework of sound values and an awareness of the law.</p> <p>Education Scotland have produced Experiences and Outcomes and Benchmarks on RSHP to provide a set of clear and concise statements about children’s learning and progression as they move throughout school. The experiences and outcomes are differentiated into early to fourth stage to show how children’s learning should develop as they move through school.</p> <p>Work is also underway to review and update the 2014 statutory teaching guidance for RSHP education. Reviewing this teaching guidance was an action from the LGBT inclusive education recommendations and the Personal and Social Education Review. The review is underway and involves a wide range of stakeholders with expertise on the content and delivery of RSHP education. The updated teaching guidance will set out how schools can ensure consent education is age and stage appropriate. It will also support schools to address the issues facing children and young people in today’s society, especially from online influences.</p> <p>In addition, the online, nationally available teaching resource for relationships, sexual health and parenthood education, rshp.scot, was launched in September 2019 by the Deputy First Minister. The resource provides 133 learning activities for use in all education settings and is aligned with Curriculum for Excellence.</p> <p>Topics include healthy relationships, consent, sexual health and reproduction, emotional wellbeing, equalities, gender and parenthood. These are the areas children and young people have told us they want to learn about. The resource provides teachers with factual resources and information about sexual and reproductive health, in a non-judgemental manner. The resource necessarily covers sensitive topics, and does so in an age and stage appropriate way.</p> <p>The rshp.scot website and the resources it contains were developed and published by a collaborative partnership of health boards and local authorities, to help improve delivery of the curriculum. In developing the resource, it was ensured learning outcomes remained age-appropriate in all Curriculum for Excellence levels.</p> <p>All of the content available from this online resource was quality assured and peer reviewed by a partnership of educators, health professionals and third sector organisations. The resource was also informed by extensive feedback over the 2018/19 academic year. Draft content was posted online during 2018 and educators, parents and carers were encouraged to comment and use the drafts. This allowed for a process of review and refinement until final content was</p>

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	<p>agreed and the resource was published in September 2019. As well as an open process that allowed anyone to contribute, a number of schools were recruited as pilot settings. During this period the resource was informed by over 1,000 primary and secondary teachers and piloted in 38 schools across the country.</p> <p>It is designed to cover gaps identified by practitioners as well as children and young people. A network of around 1,500 professionals and parents engaged in its development. It is designed to be inclusive for learners with additional support for learning needs. The resource also aims to better reflect the diversity and rights of all children and young people, including girls and LGBT young people.</p>
5. The Committee recognises the particular needs care-experienced young people will have to be able to access proactive support and advice with their sexual and reproductive health.	The response to recommendation 4 on provision of Relationships Sexual Health and Parenthood education within all school settings also applies to care experienced children and young people.
6. The Committee calls for a renewed focus on the delivery of health and wellbeing support in this area that is suitably pro-active, supportive, non-judgemental, rights based and trauma-informed.	The response to recommendation 4 on provision of Relationships Sexual Health and Parenthood education within all school settings sets out the enhanced approach to this issue within schools and the ongoing steps.
Mental Health: Impact of the Pandemic	
7. The Committee acknowledges the significant negative impact experience of the pandemic has had on the mental health of children and young people. It highlights concerns that the full extent of this impact and how long-lasting it will be have yet to be fully understood.	<p>We know that the Covid-19 pandemic has been exceptionally difficult for the mental health and wellbeing of many children, young people and their families. We made £11.25 million available to local authorities in 2020-21 to support children and young people’s mental health and emotional wellbeing issues arising as a result of the pandemic. We have followed this up with a wide range of additional investment and support.</p> <p>We have continued to engage with children and young people throughout the Covid-19 period, working with a range of children and young people’s organisations to listen to their voices and include their feedback in the development of policy and services. We continue to monitor and evaluate the mental health and wellbeing of children and young people and to assess the impact of the COVID-19 pandemic on their mental health and wellbeing and where additional support is needed.</p> <p>Schools have a key role to play in supporting children’s and young people’s mental health. Our work on supporting children and young people’s mental health and wellbeing is set within a context of much wider focus and support for children and young people’s mental health within communities and in relation to specific concerns.</p>

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	<p>We have continued our support for children and young people’s mental health and wellbeing through the provision of counselling through schools. This is now in place across Scotland.</p> <p>We have supported school staff to understand and recognise the range of mental health and wellbeing concerns that young people may experience in a new professional learning resource introduced in June 2021. We have also introduced new guidance to support whole school approaches to mental health and wellbeing, complementing the work that education authorities and schools already do to support children and young people’s mental health and wellbeing.</p> <p>We will work with the Mental Health in Schools Working Group to embed these approaches across Scotland.</p> <p>The six monthly reports provided by local authorities on the school counselling commitment will provide evidence on how many young people are accessing school counselling, the impact the service is having, as well as information on the issues young people are experiencing.</p> <p>The Health and Wellbeing Census will also provide evidence on children and young people’s mental health and wellbeing. The response to recommendation 55 provides more detail on this.</p>
<p>8. The Committee calls on the Scottish Government to ensure that the long-term impact of the pandemic remains a key consideration in the future design and development of mental health services and support for children and young people.</p>	<p>As with all aspects of mental health and wellbeing, we are acutely aware that the COVID-19 pandemic has had a significant impact of the mental wellbeing and resilience of children and young people and have put in place significant additional investment to mitigate this.</p> <p>We have continued to engage with children and young people throughout the COVID-19 period, working with a range of children and young people’s organisations to listen to their voices and include their feedback in the development of policy and services.</p>
<p>9. To inform that work, the Committee recommends that the Scottish Government commissions further research on the prevalence of mental health conditions amongst children and young people in Scotland and undertakes a mapping exercise to determine levels of existing capacity spanning different disciplines across statutory and third sector mental health services.</p>	<p>We continue to monitor and evaluate the mental health and wellbeing of children and young people and to assess the impact of the COVID-19 pandemic on this and where additional support is needed.</p> <p>We do this in a number of ways, such as through supporting longitudinal surveys, including the Young People In Scotland survey and Growing Up In Scotland Survey. Also, through monitoring and evaluation of services used by children and young people, such as evaluation of mental health counsellor provision in schools. We have also worked with children and young people’s organisations to develop bespoke engagement such as support for the Lockdown Lowdown – COVID-19 survey undertaken by the Scottish Young Parliament, Young Scot and Children’s Parliament .</p> <p>The Children and Young People’s Joint Delivery Board has commissioned research into the mental health and wellbeing of children and young people so that we can better understand the impact of the pandemic. As part of this research</p>

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	<p>YouthLink Scotland, Young Scot, Scottish Youth Parliament and Young Scot engaged with almost 1000 children and young people.</p> <p>The six monthly reports provided by local authorities on the school counselling commitment provides evidence on how many young people are accessing school counselling, the impact the service is having, as well as information on the issues young people are experiencing. A summary report of this is available from Access to counsellors in secondary schools: summary report - gov.scot (www.gov.scot)</p>
<p>Child and Adolescent Mental Health Service</p>	
<p>10. Notwithstanding recent investment to increase capacity, the Committee has heard extensive evidence of persistently long waiting lists to access CAMHS and the compounded negative impact this is having on the mental health of those children and young people affected.</p>	<p>Health Boards responded creatively to continue to treat significant numbers of children and young people despite the obvious operational difficulties caused by Covid-19 and the associated restrictions. The Scottish Government's additional investment in and support to Boards to deliver service improvements recognises both longstanding and current issues. CAMHS services are working hard to increase activity levels and to deal with backlogs. We have seen this reflected in the latest quarterly statistics, with an all-time high number of children and young people beginning CAMHS treatment. It is also the highest number beginning treatment within 18 weeks since 2016.</p> <p>School counsellors form part of the strategic approach to ensuring that children and young people can access support for their mental health and wellbeing from a range of services. School counsellors provide a quicker, more effective response to some of the issues which affect children and young people's mental wellbeing. Between January-June 2021 10,029 pupils accessed school counselling, and 12,149 between July-December 2021.</p>
<p>11. The Committee recognises the turnaround in performance achieved by NHS Grampian with respect to CAMHS provision over the past ten years and would like to see this example of good practice replicated across all Health Board areas in Scotland.</p>	<p>We recognise that performance against the national waiting time standard varies across Health Boards. We are addressing this through close monitoring of the poorest performing Boards and the development of local improvement plans. Through additional investment to address long waits, direct support and sharing of good practice. We have also developed the CAMHS national specification which outlines what good looks like and the expectations of the quality of care expected.</p>

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<p>12. Based on the evidence it has received, the Committee believes that, in the short term, there is an ongoing need to prioritise investment to further increase the capacity of CAMHS and reduce waiting times. At the same time, the Committee calls on the Scottish Government, in partnership with providers of mental health services, to continue to explore opportunities to expand the use of community mental health services, third party services and preventative programmes that will further ease pressure on CAMHS.</p>	<p>We have invested around £40 million in 2021/22 to improve CAMHS and specifically, within that, have provided £3.06 million to NHS Boards to build their professional capacity to support children and young people with neurodevelopmental support needs.</p> <p>This funding will go towards:</p> <ul style="list-style-type: none"> • establishing access to CAMHS assessments out of hours; • access to specialist regional CAMHS services for children and young people with learning disabilities, those requiring secure care or with forensic needs; • increasing resources to provide access to CAMHS Intensive Home Treatment Teams, and; • supporting CAMHS liaison teams within paediatric wards. <p>We are also committed to improving access to community mental health and wellbeing support. Last year, we provided local authorities with an additional £15 million to fund over 230 new and enhanced supports and services for children and young people. Between July and December 2021, 18,500 people used the supports. We are providing a further £15 million in 2022/23 to fund the continuation and expansion of these services.</p> <p>In addition, the Bute House Agreement commits to doubling the budget for community-based mental wellbeing services for children and young people to £30 million per annum by the end of the Parliament.</p> <p>More generally, the Children and Young People's Mental Health Joint Delivery Board is overseeing a set of reforms designed to ensure children and young people receive the support they need when they need it.</p> <p>We continue to support our local authority partners with £16 million in funding to ensure that every secondary school has access to counselling services. Between January-June 2021, 10,029 pupils accessed school counselling, and 12,149 between July-December 2021.</p>
<p>13. The Committee requests regular updates from the Scottish Government on progress in piloting the DBI programme with under-16s and, towards the end of the transition period, an overview of lessons learned from the pilot, its impact and what opportunities its wider roll-out offers to ease pressure on CAMHS.</p>	<p>In September 2018 the Scottish Government's Programme for Government committed to expand the Distress Brief Intervention (DBI) programme pilots during 2019 to include people in the 16-18 age group. Referrals to DBI became available for 16- and 17- year olds across summer 2019 in all four pilots.</p> <p>In 2020 a scoping exercise took place to assess the practicability of lowering the age range further. In light of this exercise, a limited and controlled test of change began in February 2021 (in a small number of school sites in Aberdeen City and in Lanarkshire) in which DBI is available to 14- and 15-year olds who present in distress and meet the criteria for DBI. This test is still underway as at June 2022 and is to be scaled up slightly to include additional schools in both areas. Further, referrals from CAMHS to DBI are to be tested on a small scale basis in Lanarkshire and Aberdeen, beginning June 2022.</p> <p>We will update the Committee on the evaluation of these tests of change in due course.</p>

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Mental Health Workforce	
<p>14. The Committee acknowledges ongoing challenges with building capacity within Scotland's mental health workforce and the urgent need to increase workforce capacity in CAMHS in light of current lengthy waiting lists.</p>	<p>Under this Government (since 2007), the number of staff within CAMHS has almost doubled (+95.6%). The Psychology workforce has doubled (+105.9%), while the Mental Health Nursing and Consultant Psychiatry workforce have increased by 34.9% and 21.6% respectively.</p> <p>We are taking steps to grow the workforce:</p> <ul style="list-style-type: none"> ○ We are increasing the postgraduate student intake for Psychology Master's and Doctorate programmes by a total of 60 trainees by 2023. ○ In 2021/22, we increased the number of Core Psychiatry training places by five in response to increased demand for mental health services. This year we are expanding training places by a further ten, and we will consider further increases in future years ○ In 2021/22, the Mental Health nursing student intake was at a record level of 740 places, an increase of 67% since 2016. We continue to increase student numbers; the intake target for 2022/23 is 888 Mental Health nursing student places, a 100% increase on 2016. ○ We are creating new roles, such as Psychology Wellbeing Practitioners in NHS24 and Enhanced Psychology Practitioners working in Primary Care, community, early years, and school settings.
<p>15. The Committee highlights evidence submitted to the inquiry which makes the case for improved integration of the mental health workforce across multiple disciplines to optimise workforce capacity and reduce pressure on CAMHS. It suggests this approach should be a key consideration in developing the new mental health workforce plan, which has been promised in the first half of the current session of the Parliament.</p>	<p>A new National Workforce Strategy for Health and Social Care in Scotland was published on 11 March 2022 setting out a new framework to shape Scotland's health and social care workforce over the next decade, placing training, wellbeing, job satisfaction and the principles of Fair Work at its heart. The mental health workforce are an important part of this Strategy. The Strategy looks at the whole workforce journey and how we can plan for, attract, train, employ and nurture our Health and Social Care Workforce.</p> <p>We will build upon this Health and Social Care Workforce Strategy and ensure that commitments in the forthcoming Mental Health and Wellbeing Strategy are underpinned by a resilient and sustainable workforce. Following the publication of the Mental Health and Wellbeing Strategy, we will be working closely with partners, including the NHS, local authorities and the third sector, to identify short, medium and long term actions for a cross-sector Mental Health Workforce Plan, to be published in 2023.</p>
<p>16. At the same time, the Committee would argue that the urgent need to increase CAMHS workforce capacity cannot wait for the new mental health workforce plan as currently timetabled.</p>	<p>Our Transition & Recovery Plan, published in October 2020 and backed by an additional £120m of funding, is transforming services, with a renewed focus on prevention and early intervention. This funding is supporting capacity building now while we develop a new workforce plan.</p> <p>We are supporting sustainable growth across the workforce, including providing funding to enable the recruitment of:</p> <ul style="list-style-type: none"> ● 800 additional Mental Health Workers to A&Es, GP practices, police station custody suites, and prisons. ● 1,000 additional staff to ensure that every GP practice has access to a multi-disciplinary mental health and wellbeing service by 2026.

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	<ul style="list-style-type: none"> Up to 320 additional staff in Child and Adolescent Mental Health Services (CAMHS) by 2026, increasing capacity for cases by over 10,000. <p>We are currently consulting on our strategic approach to workforce planning for mental health and wellbeing, which we intend to set out in the forthcoming Mental Health and Wellbeing Strategy. We are also consulting on and have in place a series of immediate short term actions aimed at growing the mental health workforce.</p>
<p>17. The Committee therefore calls on the Scottish Government either to accelerate this timetable or to set out a separate short term action plan to expand the CAMHS workforce to meet existing high demand for these services.</p>	<p>See response to recommendation 16.</p>
<p>18. The Committee acknowledges the significant time it takes to train competent mental health professionals who are accredited and qualified to professionally accepted levels. At the same time, as part of future workforce planning, the Committee believes that the Scottish Government must also prioritise training of the mental health workforce in line with the NES knowledge and skills framework and consider strategies for actively encouraging greater diversity in recruitment of mental health professionals.</p>	<p>We are working with NES on continuing to identify ongoing training needs and will be undertaking further work as part of the development of the Mental Health and Wellbeing Strategy and workforce plan.</p> <p>It is important to remember that Health Boards as employers are responsible for the recruitment of staff and are expected to implement fair work principles as well as the Equality Duties in so doing.</p> <p>On 19 April, the Cabinet Secretary for Health and Social Care announced that Scottish Health Boards have recruited almost 200 registered nurses from overseas to help address the challenges facing the NHS. All international recruitment is in line with the Scottish Code of Practice for health and social care personnel, demonstrating our commitment to ethical recruitment to protect the healthcare systems of developing countries.</p> <p>We are creating new roles, such as Psychology Wellbeing Practitioners in NHS24 and Enhanced Psychology Practitioners working in Primary Care, community, early years, and school settings.</p> <p>We accepted the recommendations of the Expert Reference Group on Covid and Ethnicity to improve the NHS Workforce Data and are taking steps to improve our understanding of diversity in NHSScotland, these include:</p> <ul style="list-style-type: none"> Demographics questions, including on ethnicity, have been included for the first time in the 2021 iMatter Health and Social Care Staff Experience Continuous Improvement questionnaire. Working with NES and Health Boards to ensure that data on pay, promotion and recruitment is recorded in a standardised way for all protected characteristics, so it allows direct comparisons. This will help us understand where interventions are needed to improve recruitment, retention and promotion opportunities for everyone. Working with NES to scope out a comprehensive Mental Health Workforce Publication, which would include the diversity characteristics of the directly employed NHSScotland Mental Health workforce

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Stigma	
<p>19. The Committee recognises the important role of See Me as Scotland's national programme to end mental health stigma and discrimination and commends the work it has done to date.</p>	<p>It is a priority for the Scottish Government that children, young people and families have access to the right mental health and wellbeing support, at the right time, without stigma.</p> <p>The Scottish Government recognises and greatly appreciates See Me's work on mental health. As such, we view them as a key partner and have committed to a multi-year funding package, providing £1 million per annum, to support their campaigns. This funding reflects our ongoing commitment to end the mental health stigma and discrimination that exists in Scottish society.</p> <p>In addition, we have worked with a range of organisations to improve the understanding of a range of mental health and wellbeing issues amongst children, young people and families.</p> <p>This includes working with Young Scot to deliver a range of positive messages, advice and resources to young people regarding health and mental wellbeing through the 'Aye Feel' hub.</p> <p>We have also worked to provide a range of advice for parents and carers through the Parent Club website to help them support their own mental health and wellbeing and the mental health and wellbeing of their children and families.</p>
<p>20. The Committee again acknowledges the positive impact the Scottish Government's commitment to roll out school counsellors to every secondary school in Scotland will have in reducing stigma around mental health.</p>	<p>We are proud of our progress in delivering on the commitment for all secondary schools in Scotland to have access to a mental health counsellor.</p> <p>We continue to invest £16 Million per annum in providing counselling support, giving our local authority partners some local flexibility in terms of service design and delivery.</p> <p>Our counselling support commitment is part of a range of in school support for children and young people's mental health which is now in place.</p> <p>This wider support includes the provision of training and effective resources to ensure all school staff have access to the tools they need to support children and young people's mental health.</p> <p>The Mental Health in Schools Working Group have also developed a Whole School Approach Framework to assist in supporting children and young people's mental health in schools. This was published on 24 August 2021.</p> <p>We continue to monitor and evaluate the effectiveness of school counsellor provision and to respond to new and emerging issues which are highlighted through the service as these emerge.</p>
<p>21. The Committee highlights evidence submitted to the inquiry that embedding Mental Health Education</p>	<p>Learning in health and wellbeing ensures that children and young people develop the knowledge and understanding, skills, capabilities and attributes which they need for mental, emotional, social and physical wellbeing now and in the future.</p>

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<p>into the curriculum would also make an important contribution to reducing mental health stigma and to encouraging children and young people to be more open about their mental health.</p>	<p>Mental health and wellbeing is embedded within Curriculum for Excellence within mental, emotional, social and physical wellbeing as part of Health and Wellbeing Experiences and Outcomes. Further information on this part of the curriculum is available from page 2 of the Health and wellbeing: Experiences and outcomes (education.gov.scot)</p> <p>Health and Wellbeing, or Personal and Social Education as it is known in secondary settings, is also about the whole approach of the nursery, school, college or other setting.</p> <p>All adults who work in schools have a responsibility to ensure the mental, emotional, social and physical wellbeing of the children and young people in their care.</p> <p>Local authorities and schools use a range of approaches and resources to support children and young people with their mental and emotional wellbeing in line with local needs and circumstances.</p> <p>Under the experience and outcomes (HWB 06a), teachers must ensure that children and young people understand the importance of mental wellbeing.</p> <p>Children and young people should understand that it may not always be possible to enjoy good mental health and if this happens, support is available.</p> <p>While the Curriculum for Excellence framework is set at a national level, it is up to local authorities and schools to determine how they will deliver the curriculum to best suit the children and young people in their area.</p> <p>Further information is provided in response to recommendation 67.</p>
<p>22. The Committee also welcomes cross-party efforts in the Parliament to reach agreement on taking forward a self-harm strategy that would help to reduce stigma around mental health issues arising from self-harm.</p>	<p>We have committed to a standalone Self-Harm Strategy. We have created a partnership group to design the strategy development work, involving people with lived experience of self-harm including children, young people, their parents and carers, and services that support them.</p> <p>We know that stigma is a major issue for those that self-harm and because of this we are engaging with See me, Scotland's programme to end mental health stigma. We have also invested £1.5 million to test out new approaches to delivering support to people who self-harm, including three geographical test sites and a national online portal – two of the services will be available to young people of 12 and over, and all three to young people of 16 and over. It is crucial that we engage cross-party working as we all have a role to play in tackling self-harm. The Minister for Mental Wellbeing and Social care met with health representatives from the other parties earlier in the year to foster support for this approach.</p>
<p>Eating Disorder</p>	
<p>23. The Committee calls on the Scottish Government, in responding to this report, to outline what it is doing to</p>	<p>The Minister for Mental Wellbeing and Social Care announced funding of £5 million to respond to the recommendations from the National Review of Eating Disorders in 2021/22.</p>

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<p>respond to the recommendations of the National Review of Eating Disorder Services including details of any funding it is putting in place to support their implementation</p>	<p>The majority of this funding was provided to NHS boards to support them to respond to the increase in eating disorder referrals that we have seen during the Covid-19 pandemic.</p> <p>Over £400,000 was also allocated to Beat, the UK's Eating Disorder Charity, to provide a wide range of support options to families and carers affected, as well as support for children, young people and adults.</p> <p>As outlined by Recommendation 2 from the National Review, The National Review of Eating Disorder Services Implementation Group was established to take forward the recommendations made by the Review.</p> <p>The Group is jointly chaired by former MSP Dennis Robertson, who has campaigned for greater awareness of eating disorders, and Dr Charlotte Oakley, who was previously the Clinical Lead of Connect-Eating Disorders in NHS Greater Glasgow and Clyde and who co-led the National Review.</p> <p>The aim for the Group is to ensure that stakeholders, through collaboration and engagement, are empowered to provide their input, experience and expertise to play a leading role in the delivery of the recommendations in the National Review</p>
<p>Mental Health of Girls and Young Women</p>	
<p>24. The Committee has been concerned by evidence that, overall, the mental health of girls, particularly adolescent girls, is particularly poor and is deteriorating.</p>	<p>Evidence suggests that the impact of lockdown and COVID-19 has exacerbated gender-related mental health inequalities. Our Mental Health Transition and Recovery Plan, published in October 2020, recognises this and commits to making the mental health of women and girls a priority. We are engaging with women's organisations to better understand and respond to these specific needs. We have also established an Equality and Human Rights Forum, which ensures that the implementation of the Transition and Recovery Plan and wider mental health policy is informed by equality considerations and lived experience. This includes representation from women's groups.</p> <p>We continue to develop more targeted approaches to supporting young women and girls through our national conversation on body image and are listening to the voices of children and young people to develop next steps in this area.</p> <p>Our work within schools to support children and young people's mental health and wellbeing is providing support to female pupils. It is recognised within the summary report on counselling through schools that more girls than boys are accessing this support. The summary report is available from Access to counsellors in secondary schools: summary report - gov.scot (www.gov.scot)</p>
<p>25. The Committee recognises that the mental health of girls can be vastly improved by encouraging participation in sport and physical activity.</p>	<p>An ongoing priority for the Scottish Government will be to support participation across all groups and tackle inequalities in participation.</p> <p>More participation and visibility of girls and women in physical activity and sport will be a priority. We are working with Sportscotland and partners to review our investment in sport, including sponsorship, and ensure that it benefits men and women equally. We will also work with the media and sector partners through a Scottish sport media summit with the aim of significantly improving and increasing the visibility of women's sport, athletes and participants.</p>

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	<p>As is set out elsewhere within this response our work on promoting physical activity and support for mental health and wellbeing will both support girls access to physical activity and sport and support their mental health and wellbeing.</p>
<p>26. The Committee believes the evidence it has received highlights the need for a concerted strategy to tackle poor mental health amongst girls and that this should focus, amongst other things, on addressing issues around body image.</p>	<p>Improving the mental health and wellbeing of young women and girls and tackling the link between poor mental wellbeing and body image is a priority for the Scottish Government.</p> <p>We understand there is an important correlation between screen time, social media usage, mental health and wellbeing and specific issues such as body image and we are listening to children and young people to find ways to support them.</p> <p>We provided the Scottish Youth Parliament and the Scottish Children’s Parliament with over £90,000 to develop the ‘mind yer time’ web resource launched in April 2020. This online hub is specifically designed to give children and young people advice on social media use, screen time, sleep and the impacts of these things on body image and mental wellbeing.</p> <p>We have also provided over £160,000 to Young Scot to deliver a range of positive messages, advice and resources to young people regarding health and mental wellbeing through the ‘Aye Feel’ hub. This includes a range of resources, stories, blog posts and targeted social media content on body image and social media usage.</p> <p>Young scot have also worked with influencers such as Capital FM, DJ, Katy Johnston to spread messages around social media usage and body image directly to children and young people.</p> <p>We continue to develop more targeted approaches to supporting young women and girls through our national conversation on body image and are listening to the voices of children and young people to develop next steps in this area.</p>
<p>27. The Committee also believes there should be a concerted effort to tackle sexual harassment and abuse of girls with a focus on addressing male behaviours.</p>	<p>The Scottish Government is taking forward a range of actions aimed at preventing sexual harassment and gender based violence, and developing mutually respectful, responsible and confident relationships amongst children and young people through the Equally Safe delivery plan and the review of Personal and Social Education (PSE).</p> <p>The PSE review contains a number of recommendations to improve PSE, including updating the existing guidance on RSHP with an increased focus on consent; and convening a PSE Lead Officers network to develop resources to support all school staff and pupils, with an initial focus on resources to address the issue of sexual harassment in schools.</p> <p>In addition, the Scottish Government published a resource for professionals which aims to help them support young people in their understanding of healthy relationships and consent. Key Messages for Young People on Healthy Relationships and Consent sets out that relationships should be mutually respectful, consensual, positive, healthy and enjoyable.</p> <p>The support we provide through schools is complemented by the work of third sector bodies:</p>

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	<ul style="list-style-type: none"> - <u>Rape Crisis Sexual Violence Prevention Programme</u>: Rape Crisis Scotland provide a national sexual violence prevention programme to local authority secondary schools across Scotland. The programme aims to provide consistency in approaches to the prevention of sexual violence and contributes to Equally Safe (our strategy to prevent and eradicate violence against women and girls) in its aim to address the systematic inequality, attitudes and assumptions that give rise to violence and abusive behaviour. - <u>Mentors in Violence Prevention Programme</u>: Mentors in Violence Prevention (MVP) is a peer education programme that gives young people the chance to explore and challenge the attitudes, beliefs and cultural norms that underpin gender-based violence, bullying and other forms of violence. It can address a range of behaviours including name-calling, sexting, controlling behaviour and harassment, and uses a 'bystander' approach where individuals are not looked on as potential victims or perpetrators but as empowered and active bystanders with the ability to support and challenge their peers in a safe way. - The Scottish Government has also funded YoungScot to host an online resource with information on gender based violence for young people, named 'That's Not Ok'. The content has been co-designed with young survivors and specialist support organisations. <p>The Gender Based Violence in Schools Working Group are developing a framework document to help ensure consistency in messages on sexual harassment and gender based violence to everyone working with children and young people.</p> <p>The Gender Based Violence in Schools Working Group and the Harmful Sexual Behaviour Delivery Group have considered, together, the current evidence base and planned actions to address this very serious issue, and will adjust our approach accordingly. Having delivered the work of these groups, including guidance for schools, we will then commission an independent review to establish positive practice and further areas for improvement, during this parliamentary session, this is in line with commitments under The Bute House agreement.</p>
<p>28. The Committee calls on the Scottish Government, in responding to this report, to outline what progress it has made towards meeting the nine recommendations set out in report from the Advisory Group on Healthy Body Image for Young People and any areas where further progress is still needed.</p>	<p>Since the publication of the Body Image Advisory Group recommendations in March 2020 we have taken a number of steps to address the issue of social media usage and body image amongst children and young people. This includes providing approximately £250,000 in funding to children and young people's organisations for a range of initiatives to support children and young people to better understand how to manage social media use and the associated risks, which evidence suggests is linked to poor body image.</p> <p>In March 2022 we initiated a national conversation on body image and social media use with children and young people so that their voices can directly shape the our future work in this area.</p> <p>We are working with Young Scot, who facilitated the conversation to understand the feedback from this event and take forward recommendations for future work.</p>

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	<p>This national conversation will meet the National Advisory Group on Healthy Body Image for Children and Young People's recommendation that future steps are shaped by the voices of children and young people. We will ensure that future investment and targeted interventions in this area are shaped by the needs of children and young people.</p> <p>Additionally, we are working with schools and have developed new personal and social education resources which includes material on body image, social media and responding to harmful behaviour.</p> <p>The Framework for the £15 million Community Mental Health and Wellbeing funding for 5-24 year olds highlights the need for more positive mental health support, in particular to promote positive body image.</p> <p>The response to recommendation 4 sets out the contribution of schools on this matter.</p>
Mental Health Service Standards	
29. In responding to this report, the Committee requests that the Scottish Government provide an update on progress towards fulfilling the seven minimum service standards set out in the national service specification for Child and Adolescent Mental Health Services, including any areas where those services are falling substantially short of meeting those standards.	<p>As part of an additional £40m in 2021/22 for CAMHS, we have provided £16.4m funding to support Boards to implement the specification. Through this funding, NHS Boards have started to recruit additional staff to implement the Specification and to build professional capacity to support children and young people with neurodevelopmental (ND) support needs..</p> <p>The Scottish Government has established a CAMHS and ND Improvement Programme to support implementation of local, regional and national aspects of the CAMHS and ND Specifications. This work will help to improve CAMHS and ND services through: developing specialist CAMHS regional pathways for children and young people with learning disabilities, and those in forensic/secure care CAMHS; establishing three regional Intensive Psychiatric Care Units (IPCUs); enabling access to CAMHS input for out of hours/unscheduled care presentations; and addressing the backlog of CAMHS and ND cases.</p> <p>Additionally, Scottish Government is taking forward transitions work within the CAMHS improvement plans, which includes implementation of the Transition Care Plan protocols and ensuring support for targeted groups in the transition period between CAMHS and Adult Mental Health Services.</p>
The Impact of Poverty and Inequality on Health and Wellbeing	
30. The Committee has heard worrying evidence that the existing damage caused by poverty to children and young people's health and wellbeing has been made worse by the pandemic.	<p>We committed over £1 billion of additional funding in response to the COVID-19 pandemic in 2020-21 in order to protect people and communities and to strengthen public services. This included more than £140 million to tackle food insecurity, with over £51 million to enable the continued provision of Free School Meals during school closures and holiday periods. Building on learning from this period and to respond to emergent need, we have continued to invest in enhanced support for children and young people. This includes continuing to deliver alternate provision during school holiday periods for children who need it most.</p>
31. As covered in further detail later in this report, the Committee also notes	<p>We are taking a range of action to provide immediate support to families with children, this includes doubling the Scottish Child Payment to £20 per child per week, supporting around 103,000 children under the age of 6 as of March 2022,</p>

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<p>the growing impact the current cost of living crisis is having on poverty and that this situation has worsened considerably since the inquiry took evidence earlier this year.</p>	<p>providing immediate support for school age children from low income families through Bridging Payments worth £520 per year – with around 148,000 children in receipt of support as of Spring 2022.</p> <p>Further action to support families impacted by the cost of living crisis is set out at point 43.</p>
<p>32. The Committee calls on the Scottish Government to further prioritise spending to mitigate the adverse impact of poverty on the health and wellbeing of children and young people.</p>	<p>As set out in our fourth annual progress report on child poverty, across 2018-22 we have invested almost £8.5 billion targeted toward low income households, of which almost £3.3 billion benefitted children. This is significant investment, and our Resource Spending Review sets out our plans to go further – including through investment estimated at almost £1.8 billion in awards of our Scottish Child Payment across 2023-27. Tackling child poverty is a national mission for this government, and we will continue to prioritise spend and action on this important issue.</p>
<p>Poverty and Mental Health</p>	
<p>33. From the evidence submitted to the inquiry, the Committee has concluded that children and young people living in poverty are significantly more likely to have poor mental health. The Committee is clear in its view that this is because of the impact poverty has on family relationships, because their parents are anxious and stressed or they are unable to feel safe and secure. They may also experience stigma and shame from living in poverty. During the pandemic, children and young people living in poverty are also statistically more likely to have suffered bereavement within their family or local community.</p>	<p>We recognise the negative impact that poverty has on the mental health and wellbeing of children and young people as well as the stress that low income places on families. That is why we have committed wide ranging action through ‘<i>Best Start, Bright Futures</i>’ focused on increasing household incomes, tackling the cost of living and improving family wellbeing and outcomes. This includes supporting access to the holistic support services that families need to thrive, supported by Whole Family Wellbeing funding. We continue to work with partners across Scotland to put people at the heart of services, ensuring that support is dignified and tackles the stigma and shame which can be associated with living on a low income.</p> <p>We know the profound impact that living in poverty has on mental health and no system or set of actions can be successful without considering the effects of this determinant. We are also committed to delivering the Promise through our entire programme of work and to addressing the determinants of family breakdown through trauma and Adverse Childhood Experiences (ACES) work. In addition, a key focus of mental health policy is preventing and addressing at an early stage parental mental ill health and disruptions to the parent/infant relationship. We have invested in a range of approaches to support the mental health and wellbeing of children, young people and their families through our £120 million COVID-19 Mental Health Recovery and Renewal Fund.</p> <p>The Framework for the £15 million per annum Community Mental Health and Wellbeing funding for 5-24 year olds recognises that poverty contributes to poor mental health, and includes those experiencing poverty amongst ‘at-risk’ groups which should be specific consideration. The funding given to local authorities is subject to a 7% weighting for deprivation in each local area.</p>

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	<p>This provision of high quality, easily accessible, supports and services helps to ensure that poverty is not an additional barrier to children, young people and families getting the right support at the right time.</p> <p>The provision of universally accessible early intervention support, such as the provision of counselling support in school settings, is also a significant factor in ensuring poverty does not impact on the ability of children and young people to receive the mental health and wellbeing support they need. That is why we continue to invest £16 million per year to ensure that every secondary school has access to counselling services and to support mental health training for all school staff in Scotland.</p> <p>Since 2020, we have provided additional funding (£1 million in 21/22) to support the mental health and wellbeing of those experiencing relationships issues, through 'The Spark' Scotland's relationships helpline. This includes parents and carers. In 2020/21 the helpline directly supported 12,561 callers. The service also provided 5,044 free counselling appointments during this period to help mitigate the mental health impacts of pressures on families.</p>
<p>Poverty and Physical Health</p>	
<p>34. The Committee has been concerned to hear evidence that children living in the most deprived communities in Scotland are at much higher risk of obesity and poor nutrition as well as being less likely to do regular sport or physical activity.</p>	<p>The Scottish Government recognises the link between poor dietary health and poverty. Addressing obesity is a public health priority and we have set a challenging aim to halve childhood obesity by 2030. Our 2018 Diet and Healthy Weight Delivery Plan sets out a wide range of action to support children and families to eat well and maintain a healthy weight. In 2021/22 we provided £2 million to health boards for improvements to weight management services for children and young people. In addition, over £750,000 was provided in 2021/22 to eight NHS board-led projects to extend or pilot projects working with young families and communities to encourage healthy eating and good nutrition. This work includes: specialised training for practitioners, increasing physical activity, and support for those experiencing food insecurity.</p> <p>In terms of policy interventions, we know that system-wide measures are most effective at closing the inequality gap. We are therefore committed to introducing a Bill in this Parliament to restrict the promotion of unhealthier food and drink associated with poor diet and increased risk of overweight.</p> <p>We are also supporting pilots of a Whole Systems Approach to improving diet and healthy weight services, focussing on children and health inequalities. This brings together local and national stakeholders to identify, understand and tackle the causes of poor diet and inequality, enabling partners to understand the complex issues which surround health, develop action plans and adapt these to the needs of the community. As outlined in this year's Programme for Government, we are evaluating these pilots and will seek to learn how this community-based approach can be scaled-up nationally.</p> <p>The Programme for Government includes a range of actions to make physical activity and sport central to Scotland's recovery from the pandemic, with a focus on tackling inequalities and increasing participation.</p>

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	Ensuring Active Schools Programmes are free for all children and young people by the end of this parliament will ensure more children have the opportunity to be active before, during and after school. This work will particularly focus on areas of deprivation, disabled children and young people and inactive children and young people.
35. The Committee calls on the Scottish Government to work with local authorities to ensure all available opportunities are used to make healthy foods more affordable and available for families living in poverty.	<p>We are funding the Scottish Grocers Federation Healthy Living Programme to help convenience stores provide access to affordable healthier food options, especially in lower income areas. The Programme aims to increase the range, availability, quality and affordability of fresh produce and healthier products from other categories in convenience stores across Scotland, particularly in areas of deprivation.</p> <p>We are maintaining funding levels for the community food networks so that they can continue to support people struggling to access healthier food options following the pandemic. Community food networks help join up individual local initiatives to promote a healthier diet amongst disadvantaged groups, whether that be through lack of income, cultural barriers or due to poor skills.</p> <p>The Scottish Government has consulted on a draft plan on ending the need for food banks and will publish a final version of this in the Autumn. The draft plan sets out a human rights approach to the issue of food insecurity which focuses on preventing poverty and promoting cash-first responses to hardship so that households can afford food and other essentials than meet their needs and preferences. Our final plan will strengthen access to cash-first, building on work with local authorities throughout the pandemic.</p>
36. The Committee calls on the Scottish Government to collect and share best practice on flexible use of funding for local mental health services towards improving access to sport and physical activity for children and young people living in poverty. This should include action to address existing barriers to accessing sport and physical activity across local authority boundaries.	On physical activity and sport see answer to 34
37. The Committee also calls on the Scottish Government to make every effort to ensure additional funding committed over the course of this Parliament is channelled towards	On physical activity and sport see answer to 34

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<p>breaking down barriers to accessing sport and physical activity for children and young people living in poverty.</p>	
<p>Disadvantaged Groups and Health</p>	
<p>38. The Committee acknowledges that children and young people from minority ethnic backgrounds will have suffered particularly negative impacts on their health and wellbeing during the course of the pandemic.</p>	<p>The Scottish Government agrees with the Committee and recognises that some of the most significant and entrenched health inequalities in Scotland are experienced by minority ethnic groups, including children and young people from those backgrounds. This is why we are taking robust action to address racialised health inequalities and are committed to implementing the recommendations made by the Expert Reference Group on Covid-19 and Ethnicity (ERG).</p>
<p>39. At the same time, the Committee also acknowledges that, even prior to the pandemic, children and young people from minority ethnic backgrounds will have suffered particularly negative impacts on their health and wellbeing as a result of racial discrimination, a lack of cultural understanding by service providers and an increased likelihood of living in poverty.</p>	<p>We are taking robust actions to address health inequalities experienced by minority ethnic groups and to ensure that minority ethnic communities have a fair recovery from the pandemic. For instance, the Scottish Government convened an Expert Reference Group (ERG) on COVID-19 and Ethnicity in response to emerging evidence on the disproportionate impact of Covid-19 on ethnic minorities. All of the ERG’s recommendations have been accepted by Scottish Government and good progress has already been made on several commitments.</p> <p>As set out in ‘Best Start, Bright Futures’ we recognise that families from a minority ethnic background are one of the six family types at greatest risk of poverty and that families often belong to more than one of these family types – increasing their risk of poverty even further. We have committed to focusing implementation of actions to tackle poverty on these family types in particular in order to address the barriers they face and to ensure that our action reach those most in need of support</p>
<p>40. In responding to this report, the Committee calls on the Scottish Government to set out how it intends to address these issues with the aim of improving health and wellbeing outcomes for children and young people from minority ethnic backgrounds.</p>	<p>Health and wellbeing is a priority within Scotland’s curriculum and ensuring that all of our children and young people are safe from harm and experience a sense of belonging is critical. The Scottish Government recognises that tackling racism and embedding antiracism within Scotland’s schools is key to protecting the mental health and wellbeing of minority ethnic children. The Race Equality and Anti-Racism in Education Programme (REAREP) provides a strategic and coherent approach to key areas identified for reform by education and race equality stakeholders. The Programme is already having an impact – Education Scotland have launched the Building Racial Literacy professional learning programme which is improving the confidence and competence of educators to respond to racist incidents and to create anti-racist environments where minority ethnic learners can thrive.</p> <p>In addition, the Early Learning and Childcare (ELC) Directorate are currently developing a workforce strategy for the ELC sector, through which they will be addressing actions arising from the REAREP.</p>

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	We are providing two organisations with a total of £295,000 funding to improve mental health outcomes for children and young people from Gypsy and Traveller communities to improve mental health and wellbeing outcomes, recognising the role that the wider family plays.
41. The Committee also believes that the cumulative impacts experienced by those children and young people simultaneously affected by multiple disadvantages needs to be directly addressed in future policy development.	Our 'Best Start, Bright Futures' sets out wide ranging action to tackle child poverty – with a strong focus on the six priority families at greatest risk of poverty, including families from a minority ethnic background. This includes providing tailored keyworker support through our parental employability offer, linked to wider action focused on whole family wellbeing, transport, childcare and to transform our economy, including action to be taken as part of our new Ethnicity Pay Gap Strategy to be published later in 2022.
Tackling Poverty	
42. The Committee has been struck by the volume of evidence it has received showing the overriding impact poverty and deprivation has on the health and wellbeing of children and young people. This evidence demonstrates that tackling poverty has to be at the heart of an effective strategy to improve the health and wellbeing of children and young people.	Tackling child poverty is a national mission for this government and we have set out a wide range of ambitious action to tackle and reduce child poverty through our second Tackling Child Poverty Delivery Plan for the period 2022-26, ' <i>Best Start, Bright Futures</i> '. We recognise the negative impact that poverty and deprivation has on the health and wellbeing of children and young people, that is why we are absolutely committed to delivering further progress toward the targets set in statute by the Child Poverty (Scotland) Act 2017 and to breaking the cycle of child poverty.
43. The Committee has been concerned to hear evidence that, irrespective of concerted action to tackle child poverty and to ensure interim and final targets on child poverty are met, rates of material deprivation are expected to continue to increase as a result of the current cost of living crisis.	We recognise the impact of the cost of living crisis on household finances, particularly for low income families with children. We have already taken a range of steps to provide immediate financial support to low income households in Scotland, this includes: doubling the value of our Scottish Child Payment to £20 per child per week – benefitting 103,000 children under the age of 6 as of the end of March 2022; increasing the value of a further six Scottish social security benefits by 6%, including our Best Start Grants, and; delivering £290 million of support through our Cost of Living measures, including a £150 payment for 1.85 million Scottish households and £10 million for the continuation of our Fuel Insecurity Fund. These measures will provide much needed support to low income families, enabling greater access to essential items – helping to tackle material deprivation.

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	<p>We will further increase the value of our Scottish Child Payment to £25 per child, per week by the end of 2022, when the benefit is expanded to eligible children under the age of 16 and have committed up to £10 million this year to mitigate the Benefit Cap as fully as possible. We have called on the UK Government to match our ambitious action, and will continue to explore what further action we can take to support low income families impacted by the cost of living crisis and to drive progress to reduce child poverty levels in Scotland.</p>
<p>44. The Committee is particularly concerned that the impacts of the pandemic and the current cost of living crisis will make those targets substantially harder to meet and that this will have a negative impact on the health and wellbeing of children and young people currently living in poverty. Even if certain of these targets are technically met, evidence suggests that, without additional action, children and young people's experience of poverty on the ground and the negative impact on their health and wellbeing are likely to continue to intensify in line with the intensifying impact of the cost of living crisis.</p>	<p>As set out in response to point 43, the Scottish Government has taken a range of steps to increase household incomes and to support families impacted by the cost of living crisis. Through the measures outlined in <i>'Best Start, Bright Futures'</i> we will continue to go further, including by increasing the value of our Scottish Child Payment to £25 per child per week.</p> <p>In addition to enhanced support through social security we have committed to invest the first £50 million of Whole Family Wellbeing funding in 2022-23, in order to enable the building of universal and holistic support services across communities in Scotland, giving families access to the help they need. We have also committed up to £81 million in our new employability offer for parents. Through these and other actions we will continue to increase household incomes, tackle the cost of living and improve the wellbeing of families across Scotland.</p>
<p>45. In responding to this report, the Committee calls on the Scottish Government to set out in greater detail how the new Child Poverty Delivery Plan will contribute to improving the health and wellbeing of children and young people currently living in poverty and how it will measure success against this parameter.</p>	<p>As noted in the Committee's report, there is considerable evidence linking child poverty and deprivation to poorer health and wellbeing outcomes for children and young people. By taking action to lift more families out of poverty, and by improving access to the holistic and tailored support families need, we will drive forward improvements in the health, wellbeing and life chances of the most disadvantaged children in our society. As set out in our updated Child Poverty Evaluation Strategy, we have decided to do a separate periodic (every three years) review of health and wellbeing outcomes for low income households. The first report will be experimental and depending on the result and usability of outputs, we may then provide reports every three years, starting with 2022-23.</p>

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<p>46. To deliver improved health and wellbeing outcomes for children and young people living in poverty, the Committee calls for continued and concerted efforts to help families access the cash they need to provide an adequate standard of living. In particular, the Committee calls on the Scottish Government to examine what can be done to enable the wider roll-out of money advice workers in deprived communities across Scotland to help families access benefit payments.</p>	<p>We have committed to invest up to £10 million to increase access to holistic advice services in the current parliamentary term. This includes £3 million already committed to a partnership between Health and Social Security to expand Welfare Advice and Health Partnerships – placing money advisors in up to 150 GP practices in some of Scotland's most deprived areas. We will also expand further into other health and education settings, building on existing pilots and filling identified gaps. This is in addition to continued investment to support the provision of free debt advice, with up to £6.5 million from debt advice levy funding to be invested in 2022-23.</p>
<p>Young Carers</p>	
<p>47. The Committee recognises the additional burden of caring responsibilities many young carers will have faced during the course of the pandemic and the impact this will have had on their health and wellbeing.</p>	<p>See responses to 48.</p>
<p>48. The Committee believes more work is needed to achieve better integration of the different services involved in providing health and wellbeing support to young carers. The Committee also draws the Scottish Government's attention to calls made by the Carers Trust Scotland during the course of this inquiry for:</p>	<p>Service Integration: The Scottish Government has established a Young Carers Working Group which brings together external stakeholders and relevant policy officials. This will allow for easier collaboration and integration of services to support young carers, including support for their health and wellbeing.</p> <p>We will develop and publish a National Carers Strategy during 2022, with a focus on COVID-19 recovery and improving carer support in a meaningful and sustainable way. The strategy will focus on carers, including young carers, and their needs, setting out how policies across the Scottish Government can work together with other public bodies to support carers as we recover from the pandemic and beyond.</p> <p>Local carer services provide a variety of support to help carers look after their health and wellbeing. We have invested an additional £20.4 million for local carer support (for carers of all ages) via the local government settlement in 2022-23,</p>

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<ol style="list-style-type: none"> 1. Creation of a dedicated online mental health service for young carers; 2. Young carers awareness training to be rolled out to all education professionals and health and social care staff; and 3. The introduction of a right to breaks from caring responsibilities for all unpaid carers. 	<p>bringing total investment in the Carers Act to £88.4 million per year. We launched £500,000 fund in April 2022 to help local carer organisations improve their capacity to support unpaid carers, including young carers, in their areas.</p> <p><u>Mental Health Services:</u> The Scottish Government has an existing partnership with Young Scot to provide an exclusive platform for young carers with tailored discounts and opportunities. This package is available to all young carers aged 11 to 18, regardless of intensity of caring duties. The package offers high value e-vouchers, subscriptions to streaming services, wellbeing boxes and vouchers for family days out.</p> <p>We have been encouraging young carers to ensure they speak to their schools and carer centres about any concerns, as well as promoting #AyeFeel which Young Scot has been developing with Scottish Government Mental Health colleagues. Although these tools are aimed at all young people, young carers can benefit from them also. This micro site hosted by Young Scots has featured young carer specific content including this blog post Being a Young Carer and Caring For Yourself Young Scot.</p> <p>The number of children and young people, including young carers, beginning treatment under CAMHS is at an all-time high. The latest national performance data is showing that over 5,000 children and young people began treatment in the last quarter - the highest ever recorded. It is also the highest number of children beginning treatment within 18 weeks since June 2016. There has also been significant progress on improving Psychological Therapies (PT) waiting times, with a 20% decrease in long waits over one year and a 7% decrease for those waiting over 18 weeks.</p> <p><u>Young Carer Awareness training:</u> It is important that young carers are identified and supported by our education community. We continue to fund a full time Education Officer post with Carers Trust Scotland. They have been working closely with Scottish Government, Education Scotland, the GTC and SQA to ensure that education staff are aware of young carers and they are able to support them appropriately.</p> <p>We have funded NES in collaboration with SSSC and national carer organisations to update the Equal Partners in Care (EPiC) learning resource. This e-resource is primarily for workforce to help staff with carer identification and awareness.</p> <p><u>Right to Breaks from caring</u> The National Care Service Bill includes changes to the Carers Act to establish a rights to breaks for unpaid carers, including young carers. We have allocated an extra £5 million for short breaks for 2022-23, in addition to the £3 million voluntary sector Short Breaks Fund, enabling more carers, including young carers, to take a break from caring. This includes an additional £150,000 to expand Young Scot's young carers package.</p> <p>The SG-funded Young Carers Festival is a 3 day event which allows young carers from across Scotland to meet one another and have a much need break from caring.</p>
<p>49. The Committee notes that the Scottish Parliament has previously expressed its support for the incorporation of the United Nations</p>	<p>The Scottish Government remains committed to the incorporation of the United Nations Convention on the Rights of the Child (UNCRC) to the maximum extent possible as soon as practicable. .</p>

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<p>Convention on the Rights of the Child (UNCRC) into Scots law but that this is currently subject to legal challenge by the UK Government. The Committee believes that incorporation of the UNCRC into Scots law would provide a means of legally enshrining the right to health of young carers and many other categories of disadvantaged children and young people and therefore calls for the matter to be resolved as a priority.</p>	<p>On 24 May the Deputy First Minister made a statement to Parliament setting out how we propose to amend the Bill to address the Supreme Court judgement following the challenge from the UK Law Officers. To allow incorporation of the UNCRC to the fullest extent possible, our preference is to address the Supreme Court’s judgment by returning the Bill to Parliament via the Parliamentary ‘reconsideration stage’.</p> <p>We have undertaken a short period of engagement with key stakeholders to ensure that those who have lobbied passionately for this Bill have had the opportunity to understand the changes that are being made and why and to raise any concerns. We are also engaging with the UK Government and liaising with the Parliamentary authorities about the timescale for Reconsideration Stage.</p> <p>While the judgment means that the UNCRC (Incorporation) (Scotland) Bill could not receive Royal Assent in its current form, the majority of work in relation to the implementation of the UNCRC can proceed and is continuing at pace.</p> <p>We are committed to a three-year UNCRC implementation programme in collaboration with public authorities and children and young people. In November 2021, the Scottish Government published a 3-year action plan on progressing the human rights of children in Scotland. Between now and March 2024 we will invest £4m per year over three years to support the delivery of a fundamental shift in how children’s rights are respected, protected and fulfilled in Scotland.</p>
<p>Adverse Childhood Experiences (ACEs)</p>	
<p>50. The Committee has heard evidence that children and young people living in more deprived areas are significantly more likely to have adverse childhood experiences.</p>	<p>The Scottish Government takes a whole population approach to preventing and mitigating ACEs. It recognises the evidence that ACEs occur across the whole income spectrum, but that there is a clear relationship between socio-economic position and risk of experiencing ACEs. Therefore all actions by the Scottish Government and others to tackle child poverty are fundamental to the prevention of ACEs.</p>
<p>51. The Committee has also been concerned to hear evidence that the number of children and young people experiencing adverse childhood experiences may have risen during the pandemic. It calls on the Scottish Government to undertake further research to establish exactly how far the pandemic has increased adverse childhood experiences and in what ways.</p>	<p>Since the start of the pandemic the Scottish Government, Public Health Scotland and others have collated and shared evidence regarding the impact on children, young people and families. These include: COVID-19: children, young people and families - evidence summary - June 2021; COVID-19: children, young people and families - evidence summary - December 2020; COVID-19 - experiences of vulnerable children, young people, and parents: research; and COVID-19 mitigation measures among children and young people: evidence base summary, and the evidence summaries include references to several other key studies on impacts. The impacts of the pandemic to date are very mixed with variations for people in different circumstances and for the same individuals over time. There have been some positive impacts for some, but many faced increasing pressures and stresses. Sadly for some children and young people pre-existing trauma was exacerbated and some experienced an increase in traumatic experiences.</p> <p>The Scottish Government is focused on taking actions to support children, young people and families across all settings and services to mitigate the negative impacts of the pandemic and support health, wellbeing and resilience going forward. These actions are informed by evidence collated since the start of the pandemic and ongoing data and research.</p>

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<p>52. The Committee wishes to emphasise to the Scottish Government and other stakeholders involved in supporting those who have suffered adverse childhood experiences:</p> <ul style="list-style-type: none"> ○ The need to continue to prioritise a trauma-informed approach to supporting people with ACEs that focuses on the experience and effects of trauma rather than the events that have caused them; ○ The continued need to address the impact ACEs experienced by parents can have on the relationship with their own children and on their children's mental health; ○ The importance of continuing to identify examples of best practice that apply the principles set out in the Trauma Informed Toolkit and exporting these more widely; ○ The need for improved integration of education and early years services to support prevention of, and early intervention in, adverse childhood experiences; ○ The particular need for improved access to CAMHS for those people affected by ACEs, as referenced more generally elsewhere in this report. 	<p>The Scottish Government, COSLA and partners have a joint ambition to develop trauma-informed services and workforces across Scotland. This ambition is supported by the National Trauma Training Programme which has received over £5 million funding from the Scottish Government to date. The Programme is underpinned by a suite of evidence-based, accessible training resources and support developed by NHS Education for Scotland (NES).</p> <p>Current work is underway developing and testing implementation of trauma-informed approaches in particular services and settings, including: addiction services; education services; maternity services; social work services; and for people supporting care experienced children and young people.</p> <p>Plans for the Programme continue to be reviewed and refreshed, and there are a range of networks and forums for sharing best practice examples (including a network of 'trauma champions', support from NES and implementation co-ordinators, and support and publications from the Improvement Service). A set of National Quality Indicators for Trauma-Informed Services, Systems and Workforces are being developed to support consistent implementation of good practice, gauge progress, and identify areas for improvement, alongside a series of case studies to showcase tangible examples of delivery. These will be published by end of 2022. In addition in April 2023 we will publish details of the training and implementation support that will continue to drive further progress on trauma-informed workforces, services and care. This will include a priority focus on trauma training and support for adoptive parents, kinship, foster and supported carers.</p>
Care Experienced Children and Young People	
<p>53. The Committee acknowledges evidence that care-experienced children and young people suffer higher than average rates of ill health and mortality. It therefore recognises</p>	<p>All children are entitled to an initial health assessment at the point of becoming looked after as per the 2014 Scottish Government guidance on health assessments for looked after children to ensure their health needs are identified and addressed. The guidance requires that all territorial health boards nominate a Board Director who will take a corporate responsibility for looked after children and young people and care leavers. The nominated Director should ensure that the Health Board work with placing authorities in its area to ensure:</p>

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<p>the importance of a proactive and preventative approach to supporting their health and wellbeing that seeks to reduce cases of hospitalisation, acute care and, in the worst cases, death.</p>	<ul style="list-style-type: none"> • the Board is able to identify all looked after children and young people in its area, making sure there are clear procedures in place, detailing who should be informed and how structures are in place so health professionals are involved in the decision-making process regarding care placements where there are specific health needs. • there are processes and resources in place to support health professionals with the complex issue of health consent and confidentiality. • arrangements are in place for a registered medical practitioner or a registered nurse to offer a written assessment of the child's health and their need for health care within 4 weeks of notification. • that looked after children's nurses, school nurses, health visitors and paediatricians have the capacity to: <ul style="list-style-type: none"> ○ receive referrals; ○ identify health records and request them from the NHS Board in whose care they are held; ○ provide a comprehensive health assessment; ○ make sure that the looked after children and young people are engaged with primary care, secondary care and specialist care as required; ○ facilitate transfers where looked after children and young people move to another health board area, including information sharing and continuity of service delivery and care planning; ○ information and data from the health assessment is fed back into the Child's Plan. • a Lead Professional is identified to ensure the child's health needs are addressed. Where the lead professional is not from the Health Board, a key worker should be identified to liaise over delivery of healthcare arrangements are made for looked after children and young people to be provided with healthcare services, including medical and dental treatment. • the connection between the child protection processes and wider structural processes to support and plan services for vulnerable people procedures are in place so the Health Board is able to offer a mental health screen to every looked after child or young person. <p>Robust monitoring of health and wellbeing outcomes for care experienced people is needed to provide a complete picture of their quality of life. The Scottish Government is working with our partners, including local authorities to explore how we can achieve this, including looking at a potential pilot programme to improve data linkages and improving guidance as part of our broader work to keep The Promise.</p>
<p>54. The Committee believes providing proactive, targeted and preventative health and wellbeing support to care-experienced children and young people should be a key area of focus for the Scottish Government as it seeks to accelerate progress towards</p>	<p>We will work collaboratively across the Scottish Government and with key stakeholders to scope out a coherent, cross policy approach to promoting health improvements for people with care experience. We will continue to work with people with care experience to consider what is working well and where improvements are needed.</p> <p>The response to recommendation 53 regarding health assessments for looked after children applies to recommendation 54.</p>

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<p>keeping The Promise during Covid recovery.</p>	
<p>55. In responding to this report, the Committee calls on the Scottish Government to provide an update on its work to improve data gathering related to the health and wellbeing of care-experienced children and young people to support improved measurement and evaluation of the impact of The Promise and enable better targeted interventions that support their health and wellbeing.</p>	<p>The Health and Wellbeing Census, conducted throughout 2022, will provide valuable information on the health and wellbeing of children and young people to local authorities, community planning partnerships and the Scottish Government. The need for evidence by local authorities is not new, and local authorities have previously used different approaches to gather the evidence they need, such as commissioning surveys at their own cost. Whether or not local authorities choose to use the Health and Wellbeing census, they require evidence to meet their duties. Where local authorities choose not to use the census to gather the evidence, they will require a local solution to source the evidence. All this useful evidence provided by the census will not be available if Councils do not participate in the Census. They should consider opportunities to participate, whether that be through revising the questions or removing the more difficult ones. To date, 19 local authorities have confirmed they are taking part.</p> <p>Pupils participating in the Health and Wellbeing Census are asked to provide their Scottish Candidate Number. The SCN will be used to link additional socio-economic and characteristic information already shared by local authorities with the Scottish Government's Education Analytical Services Division (such as a child's ethnic background, geographical area (such as Scottish Index of Multiple Deprivation SIMD), free school meal registration status, etc). This information will only be linked in order to enable the Scottish Government to undertake statistical analysis and research based on these socio-economic and characteristics, for example to monitor and assess the impact of its policies on sub-populations and diverse equality groups.</p>
<p>56. To ensure health and wellbeing support services are designed to meet their specific needs, the Committee calls on the Scottish Government to make further efforts to encourage co-production of those services with care-experienced young people. It further calls for improved awareness and understanding in GP practices and other healthcare settings of the specific needs of care experienced young people.</p>	<p>The needs of care experienced young people were reflected within our work to introduce counselling services within schools. Following discussions with young people, the aims and principles which form the joint agreement with COSLA was adjusted to reflect the need for counselling services to be maintained during school holiday periods for vulnerable pupils, including those who are care experienced.</p>

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<p>57. In responding to this report, the Committee also calls on the Scottish Government to set out what measures it is taking to raise awareness amongst care-experienced young people of available appropriate counselling services and to improve access to them.</p>	<p>We will work collaboratively across Government, the public sector, and with other key stakeholders to scope out the feasibility of a coherent, cross policy approach to raising awareness of appropriate counselling services and how to improve access. A cross-policy approach will be required that can establish clarity and a shared understanding of what change is required to drive forward progress. The Scottish Government welcomes input and collaboration with our stakeholders, and will continue to work with people with care experience to consider what is currently working well and explore where improvements could be introduced with respect to counselling.</p>
<p>Transition to Adult Services</p>	
<p>58. The Committee recognises the crucial importance of supporting care-experienced young people to make a smooth transition into adult services and regrets that too many care-experienced young people have a negative experience of transitions that can have a severe negative impact on their health and wellbeing.</p>	<p>The Scottish Government recognises the vital role of positive, well-planned and supported transitions can have in improving outcomes for young people in care and leaving care. We will continue to work with the sector to ensure that all young people with experience of care get access to the holistic, person-centred support that they require. We are committed to the implementation of the recommendations from the Improving Care Leavers Housing Pathways and Youth Homelessness Prevention Pathway reports to improve support for young people leaving foster, kinship, residential or secure care, ensure sustainable accommodation is available and prevent them being affected by homelessness. CELCIS published Continuing Care: An Exploration of Implementation on 17 March 2022, which highlights some of the key barriers and enablers to consistent implementation of continuing care across Scotland for care leavers. We will continue to engage with stakeholders on the conclusions and recommendations of the CELCIS study.</p>
<p>59. The Committee highlights suggestions from certain witnesses that there is a need for improved integration and continuity of services to support the health and wellbeing of care-experienced people throughout their lives.</p>	<p>We recognised the need to further develop the transitions policy to include children and young people across all ages and stages (including those over the age of 18 for whom local authorities still hold corporate parenting responsibilities) when moving into, through and out of care, including residential and secure care. The focus should be on maintaining a person's important relationships and rooted in their needs with relevance to care experience rather than legal status, such as care leaver. It should consider wellbeing holistically in line with the GIRFEC national practice model and Children's Services Planning duties, and include health, employment, education, housing and finance (both universal and bespoke services).</p>
<p>60. In responding to this report, the Committee would welcome further insight from the Scottish Government as to how it expects the development of a national quality standard for</p>	<p>In 2018, we published the Transition Care Plan (TCP) Guidance describing the standards required in the planning of good transitions for young people moving from Child and Adolescent Mental Health Services (CAMHS) to Adult Mental Health Services.</p>

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<p>these services to deliver improved transitions for care-experienced young people.</p>	<p>The National CAMHS Service Specification requires a robust TCP for those children and young people who are more at risk of adversity during transitions (e.g. Looked After Children, inpatients, young offenders, young parents, young people with caring responsibilities, children supported under the ASL Act, asylum seekers and those entering further or higher education in a new health board area).</p> <p>This approach allows potential flexibility for those aged 18-25 to continue their care and treatment with CAMHS where this is in their best interests.</p> <p>The TCP approach also allows for involvement by adult mental health services for under 18s where this is in the best interests of the young adult. Evidence supports such an approach in eating disorders where first presentation is in late adolescence, and early intervention in psychosis services.</p> <p>The key principle is that the care provided, and those providing the care, should be determined by the needs, wishes and best evidence for that care, and not solely on the chronological age of the young person being supported.</p> <p>The ethos of this approach is to encourage joint planning of care for those who have mental health needs that necessitate TCPs. Decisions should be clinically led and made jointly between adult services and CAMHS to ensure smooth transitions.</p>
<p>Whole Family Wellbeing Fund</p>	
<p>61. Given the extensive evidence submitted to the inquiry in support of a whole family approach to supporting the health and wellbeing of children and young people from disadvantaged groups, the Committee strongly supports the creation of a Whole Family Wellbeing Fund.</p>	<p>Noted.</p>
<p>62. The Committee recognises the good work already carried out by a number of stakeholders to develop and deliver whole family support services on the ground. However, the Committee has also heard evidence that availability of these services across the country is limited and they</p>	<p>Programme for Government 2021-22 committed to investing £500 million in Whole Family Wellbeing Funding (WFWF) over the course of the Parliament. The aim is to transform the way family support is delivered so families, can get access to the help they need, where and when they need it. The 2022-23 budget allocated £50m for year 1 of this funding, with the intention that this would be scaled up in future years.</p> <p>Plans around how this £50 million will be allocated have been drawn up in close consultation with stakeholders to ensure it will have the biggest impact on supporting our vision for preventative, holistic whole family support. The intention is that a significant proportion of this will go directly to Children’s Service Planning Partnerships (CSPPs) to</p>

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<p>can be hard to keep going long-term due to a lack of sustainable funding.</p>	<p>both build transformational capacity, and scale and expand services that are already delivering holistic support in line with national principles. This recognises the varying stages that CSPPs are at in developing holistic whole family support, and will allow them to build on this according to local need and opportunity.</p> <p>The funding is not to be used to replace existing funding within the system, and it will only be available for the lifetime of the WFWF. The intention is that the WFWF is used as transition funding, to support local CSPPs in identifying and evidencing transformational approaches to services design and delivery which can then be sustainably embedded within their commissioning of family support services.</p>
<p>63. The Committee therefore calls on the Scottish Government to accelerate progress towards developing and delivering an action plan to use the Whole Family Wellbeing Fund to prioritise making whole family support services more widely and sustainably available across the country.</p>	<p>A spending plan for 2022-23 has been developed in collaboration with stakeholders and funding is expected to be released imminently. Scottish Government will continue to work closely with partners on plans for future years spend, which will draw on learning from the first year about how the funding can most effectively be deployed.</p>
<p>64. The Committee further calls on the Scottish Government, in responding to this report, to set out what it plans to do to properly evaluate the impact of the Whole Family Wellbeing Fund and to measure the success of specific interventions.</p>	<p>A formal evaluation of the WFWF is planned. Planning has focussed on year 1 activity to date, but work to develop a theory of change and associated long term evaluation will commence over summer 2022. We have made a commitment to undertake a rigorous evaluation of the WFWF, as a whole, up to 2025-26. It is expected that the full evaluation strategy will encompass elements of process, impact and economic evaluation, to assess longer term impacts of funding.</p> <p>Our aim is to gather initial evaluation evidence from year 1 by collecting and collating information from local partners in Children’s Services Planning Partnerships and from children and young people and their families, to understand whether the programme is achieving its intended short term outcomes, and to identify what has worked well and what could be improved in terms of delivery for the funding in 2023-26. The year 1 evaluation will consist of analysis of light touch reporting across CSPPs, and qualitative research in 6 case study areas.</p>
<p>The Role of Schools and Youth Services in Supporting Health and Wellbeing</p>	
<p>65. The Committee recognises the central and pivotal role schools have to play in coordinating a whole systems approach to supporting the</p>	<p>It is recognised that schools have a particular role in supporting children and young people’s health and wellbeing. The covering letter to this annex sets out the framework for the provision of support via schools for this matter.</p> <p>The response to recommendation 89 is also relevant.</p>

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<p>health and wellbeing of children and young people.</p>	
<p>66. The Committee calls on the Scottish Government to do all it can to facilitate multi-agency cooperation and to break down barriers to whole systems approaches to supporting the health and wellbeing of children and young people.</p>	<p>Our response to recommendation 75 on recommendation 13 of the PSE Review, provides some information on our approach to this issue via schools. Working with DYW as well as voluntary, youth work, and community organisations wishing to partner in an accredited programme.</p>
<p>67. The Committee reiterates the important role of school counsellors and other wellbeing practitioners in schools in supporting the health and wellbeing of children and young people and welcomes the additional support provided by the Scottish Government to enable school counselling services to be rolled out to every secondary school in Scotland.</p>	<p>The Scottish Government is grateful for the recognition of the impact of counsellors through school and would recognise the work of education authorities and schools and counselling services in their role in this work. It is also important to note that this work is set alongside new guidance on whole-school approaches to mental health and wellbeing and online training for school staff and those working in schools.</p>
<p>68. Once these services are in place and fully operational, the Committee looks forward to receiving an evaluation of their impact from the Scottish Government.</p>	<p>The six monthly reports provided by local authorities on the school counselling commitment provide evidence on how many young people are accessing school counselling, the impact the service is having, as well as information on the issues young people are experiencing. The summary report is available from Access to counsellors in secondary schools: summary report - gov.scot (www.gov.scot). This information will be updated regularly.</p>
<p>69. The Committee calls on the Scottish Government to develop a dedicated plan to deliver targeted training to teachers in order to give them the</p>	<p>In March 2017, the Mental Health Strategy committed the Scottish Government to a review of Personal and Social Education. The Review was undertaken over three phases, leading to the publication of 16 recommendations in January 2019. This includes recommendations:</p>

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<p>requisite skills and capacity to be able to continue fulfilling their responsibilities to work with children and young people in school with a view to monitoring, supporting and improving their health and wellbeing.</p>	<ul style="list-style-type: none"> – 4: <i>Scottish Government and Education Scotland will collaborate with COSLA, local authority partners and practitioners to co-produce a new Health and Wellbeing/Personal and Social Education Toolkit to enhance Health and Wellbeing/Personal and Social Education delivery at all stages of education, with due consideration given to the requirements of children and young people with additional support needs.</i> – 10: <i>The Scottish Government and Education Scotland, working with specialists in Career Long Professional Learning, will develop learning resources to support Health and Wellbeing/Personal and Social Education that are accessible to all teachers and school staff in Scotland.</i> – 11: <i>General Teaching Council for Scotland standards for professional learning to be updated as appropriate.</i> – 15: <i>Take steps to ensure the role of PSE/guidance teacher is recognised and promoted in the implementation of new career pathways for teachers.</i> <p>The Personal and Social Education Lead Officers Network has conducted a review of existing learning resources to identify gaps in resources and training, and devise and develop resources to fill these.</p> <p>In collaboration with the Personal and Social Education Delivery and Implementation Group, the Personal and Social Education Lead Officers Network will create a section within the Health and Wellbeing/Personal and Social Education toolkit that contains Career Long Professional Learning resources.</p> <p>The Personal and Social Education Delivery and Implementation Group is also working with the General Teaching Council for Scotland to develop a programme of appropriate professional learning.</p> <p>The Personal and Social Education Delivery and Implementation Group is also working with Initial Teacher Education institutions and the Scottish Council of Deans of Education to support raising the profile of Personal and Social Education within Initial Teacher Education programmes, including options for a Personal and Social Education teaching qualification that is inclusive of the training needs of primary teachers.</p> <p>As is noted within the response to recommendation 69 the Mental Health in Schools Working Group published a new mental health professional learning resource for all school staff to support the wellbeing of children and young people within their schools. This is available from Children and Young People's Mental Health and Wellbeing – Professional Learning Resource</p>
<p>Impact of Home Schooling During the Pandemic</p>	
<p>70. As a consequence of the COVID-19 pandemic, the Committee recognises the substantial impact the closure of school premises and the move to a prolonged period of home schooling</p>	<p>Schools were a key link for parents and carers in supporting the mental health and wellbeing of children and young people, and continued to be available to discuss any concerns with guidance staff or senior management during the pandemic. Education Scotland provided educational professionals with accessible information on resources and signposted organisations which could help to support the mental health and wellbeing of children and young people. They also developed e-learning resources and updated information on the Parentzone website to specially address the</p>

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<p>has had on the health and wellbeing of many children and young people.</p>	<p>mental health of children and young people. Wellbeing was also an important element within the Term 4 Learning Plan published by Scottish Government during the pandemic. Information and support for parents and families on coping during the coronavirus outbreak was also available on Scottish Government's Parent Club website.</p>
<p>71. The Committee is particularly concerned by the disproportionately negative impact this experience has had on children and young people from more deprived backgrounds and from other disadvantaged groups.</p>	<p>On 30 March, the Cabinet Secretary for Education and Skills launched the refreshed Scottish Attainment Challenge programme with up to £200m funding for the year ahead – part of our increased £1bn investment over this Parliament – up from an investment of £750m over the course of the last parliamentary term.</p> <p>This extensive refresh of the programme responds to the evidence of progress that had emerged over the first 6 years of the programme. Its features include:</p> <ul style="list-style-type: none"> • An expanded mission, '<i>To use education to improve outcomes for children and young people impacted by poverty with a focus on tackling the poverty related attainment gap</i>'. This recognises that schools should work with families and communities to meet the impact of poverty: schools cannot do make the changes needed on their own. • We know from Children in Low Income Families data that 59% of children living in relative poverty live outwith the 9 Challenge Authorities referenced above. From 2022 onwards, we are therefore distributing funding to all local authorities rather than just the Challenge Authorities. Over £43 million will be distributed equitably to all 32 local authorities through Strategic Equity Funding. • Headteachers will continue to be empowered to undertake approaches to tackling the poverty related attainment gap that suit their pupils and their local contexts, with the support of £130 million in Pupil Equity Funding. • In response to feedback to local authorities and schools, in order to support long term planning, allocations for both Strategic Equity Funding and Pupil Equity Funding have been confirmed for the next four years. • In partnership with local government, we are introducing a Framework for Recovery and Accelerating Progress, which includes a requirement for locally identified stretch aims for progress from all local authorities. • The programme will continue to support the educational attainment and outcomes of care experienced children and young people. <p>We continue to evaluate this work and recognise that pandemic has impacted progress in closing the poverty related attainment gap, but the recently published evaluation of the Attainment Scotland Fund highlighted that:</p> <ul style="list-style-type: none"> • Almost nine out of ten (87%) of headteachers who responded to the 2021 Headteacher Survey (597 responses, equivalent to an overall response rate of 25%) reported seeing improvements in closing the poverty related attainment gap • 94% indicated that they expect to see improvements in the next five years. • Headteachers responding to the 2021 survey were highly positive on whether PEF had provided the additional resource needed to address the poverty-related attainment gap (89%), and that PEF had been used effectively to meet their school's needs (93%).

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<p>72. The Committee calls on the Scottish Government and other key stakeholders to continue to monitor carefully the longer term impacts of schooling restrictions imposed by the pandemic on the health and wellbeing of children and young people, in particular those who will have struggled with or missed out on important milestones in their education as a consequence.</p>	<p>During the course of the pandemic, the Scottish Government has published a substantial body of quantitative and qualitative evidence of the impact of the COVID-19 pandemic on a range of different groups of learners. This includes, for example:</p> <ul style="list-style-type: none"> • the Equity Audit, comprising an evidence review and a data collection from schools from all 32 local authorities; • the Attainment Scotland Fund Evaluation, which assesses progress in closing the poverty related attainment gap and the impact of COVID-19 on school education. This includes research with head teachers and local authorities on the impact of COVID-19 on the attainment gap in their schools and communities, and the school responses to support children and young people during school building closures and remote learning. • qualitative research on the experiences of vulnerable children, young people and parents during the pandemic; and • a range of official statistics on literacy, numeracy, senior phase attainment, attendance and absence (see Achievement of Curriculum for Excellence (CfE) Levels and Summary Statistics for Attainment and Initial Leaver Destinations). <p>Those Scottish Government official statistics include breakdowns by many of the groups of interest, including e.g. rurality, additional support needs, socio-economic background, ethnicity and sex.</p> <p>In addition to those individual publications, the 2022 National Improvement Framework and Improvement Plan combines a wealth of robust national data, which includes both attainment/achievement data and wider indicators such as health and wellbeing and school attendance. To complement this, the Scottish Government commissioned Ipsos Mori to undertake research with parents to understand the impact of school building closures for themselves and their children, and on what worked well and what could have been improved in remote learning. This was published as part of the 2022 National Improvement Framework and Improvement Plan.</p> <p>Finally, Growing Up in Scotland – Scottish Government’s flagship longitudinal study following a nationally representative cohort of children – may also offer us useful information in the future on young people who have left school.</p>
<p>73. The Committee strongly supports development of an effectively targeted strategy to address and mitigate these longer term impacts as a key priority within the Scottish Government’s COVID-19 recovery plan.</p>	<p>We fully recognise the importance of monitoring and reporting outcomes in the longer term. This is crucial to ensure we maintain transparency and openness on the progress being made. The Scottish Government, and partners, have set out our commitment to this shared aim and the intention to identify at the earliest stage where any additional work or change of course is required. This is set out in the Covid-19 Education Recovery: Key Actions and Next Steps paper.</p> <p>It is right that we reflect on our vision for the future when we set the strategic direction for the next generation. Professor Ken Muir suggested a National Discussion which will seek to engage widely with teachers, parents, carers, practitioners - and most importantly learners - to shape the future based on their experiences.</p> <p>It will be an important opportunity to reset the debate on education in Scotland. It will have an impact on learners and those who teach and support them for generations to come.</p>

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Personal and Social Education	
<p>74. The Committee notes that the pandemic has resulted in delays to completion of the 16 priority actions to improve delivery of personal and social education in schools, as set out in the Scottish Government's 2019 review.</p>	<p>The response to recommendation 75 sets out the more recent progress which has been made on this.</p>
<p>75. In responding to this report, the Committee calls on the Scottish Government to provide an update on progress towards completing these actions and to set out in particular how this will help to improve PSE provision for older pupils so it better meets their needs and contributes to their improved health and wellbeing.</p>	<p>The Personal and Social Education Delivery and Implementation Group has made significant progress in taking forward the recommendations of the Personal and Social Education Review. However due to the pressures presented by Covid-19 to both the Scottish Government and stakeholders within the Personal and Social Education Delivery and Implementation Group, delivery of the recommendations in full has been unavoidably delayed. The Scottish Government remains committed to delivering these recommendations in a timely and pragmatic fashion. Scottish Government officials will publish the minutes of all Personal and Social Education Delivery and Implementation Group meetings, as well as the Personal and Social Education Action Plan here. Scottish Government officials note and agree to the call for an update on progress towards completing these actions.</p> <p>Phase 3 of the Personal and Social Education Review involved a programme of engagement sessions with children and young people, to ensure their insights and experiences informed consideration of the suite of final recommendations. Children and young people will be consulted on a regular basis throughout the programme of implementation of these recommendations to ensure Personal and Social Education provision meets their needs and contributes to their improved health and wellbeing.</p> <p>Recommendations of particular relevance to meeting the needs of older pupils are:</p> <ul style="list-style-type: none"> - 12: <i>The Scottish Government will ensure that the Health and Wellbeing/ Personal and Social Education Toolkit will build on the actions within the Developing the Young Workforce: Scotland's Youth Employment Strategy and the recommendations from the 15-24 Learner Journey Review to include clear direction for teachers on where to access support for senior phase pupils preparing for life after school.</i> - 13: <i>The Scottish Government will build on the recommendations in the 15-24 Learner Journey Review and establish a senior phase Personal and Social Education Mentoring Programme to enable pupils to design and deliver aspects of Health and Wellbeing/ Personal and Social Education whilst working towards an award.</i> <p>The Personal and Social Education Delivery and Implementation Group is working with colleagues in Developing the Young Workforce to consider what they may contribute to the Personal and Social Education Toolkit, and ensure contributions continue to align with Developing the Young Workforce Strategy and Learner Journey Review.</p>

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	<p>The Personal and Social Education Delivery and Implementation Group is engaging in conversations with the Scottish Qualifications Authority to explore options for accreditation. This includes working collaboratively to draft screening criteria/ standards for voluntary, youth work, and community organisations wishing to partner in an accredited programme.</p>
<p>Children with Additional Support Needs</p>	
<p>76. The Committee has been struck by evidence of the growing number of children and young people in Scottish schools with additional support needs including those with mental wellbeing issues leading to an additional support need.</p>	<p>We want all children and young people to get the support that they need to reach their full learning potential. Education authorities have duties under the Additional Support for Learning Act 2004 (as amended) (“the 2004 Act”) to identify, provide for and review the additional support needs of their pupils. An additional support need can arise for any reason and be of short or long term duration. Additional support may be required to overcome barriers arising from health or disability, learning environment, family circumstances or social and emotional factors. The increase over time in the number of children and young people recorded as having an additional support need, is in part, due to changes to how this data is recorded. It also reflects improvements in identifying those children and young people who need extra help at school, and allows them to access the right help, at the right time, from the right people.</p>
<p>77. The Committee has heard clear evidence of the negative impact the pandemic has had on the health and wellbeing of children and young people with additional support needs and their families.</p>	<p>We fully recognise the impact of Covid-19 on all children and young people, and the new and additional challenges that may be faced by learners as a result.</p> <p>Throughout COVID-19, we prioritised support for vulnerable children and young people, including those with additional support needs. As we continue with education recovery, education authorities and schools should continue to prioritise personalised support to meet the individual, physical and emotional needs of all children and young people, in line with the Getting it right for every child framework and their legal duties under the 2004 Act. Under this Act, education authorities can also ask other agencies - health (allied health professionals and CAMHS) and social work services for help to identify the needs of children and young people needs and provide appropriate support. This supports a partnership approach to ensure that pupils needs are identified, supported and reviewed.</p>
<p>78. In order for the health and wellbeing of children and young people with additional support needs to be safeguarded, the Committee is convinced that resources for the provision of reasonably adjusted services and supports, for additional community supports and to ease workload pressures on teachers need to be further prioritised.</p>	<p>We want to ensure we are providing the right kind of support to enable children and young people to thrive at school, at home and in their communities. This includes continued investment in education to support children and young people with additional support needs and work to ensure that professionals including teachers feel informed, prepared and equipped to provide support to learners; deployment of the £500m Whole Family Wellbeing Funding which has a strong focus on the system changes required to shift investment towards early intervention and prevention activities, to ensure families can access support before they reach crisis point; and improving access to community mental health and wellbeing support through continued funding to provide new and enhanced supports and services for children and young people.</p>

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<p>79. In responding to this report, the Committee calls on the Scottish Government to provide an update on implementation of its Additional Support for Learning Action Plan and to set out, in particular, what impact the Action Plan is expected to have on health and wellbeing outcomes of children and young people with additional support needs.</p>	<p>We are committed to improving the experiences of children and young people with additional support needs. The review of implementation of additional support for learning and the additional support for learning action plan which followed, set a clear direction in how we can continue to build on work in this area. The Scottish Government and COSLA remain fully committed to working with partners to deliver the additional support for learning action plan. While we have made progress in a number of key areas, we recognise that there is more to do. Since publication of the updated action plan in November 2021, we have been working with our partners to review the action plan and agree priorities for the future to ensure that meaningful change is realised for children and young people. We have also continued to take forward actions within the plan, seeking to improve the experiences of children and young people with additional support needs. We will publish an updated action plan in autumn 2022.</p>
<p>Promoting Physical Health</p>	
<p>80. The Committee is concerned by evidence that only a small minority of children and young people are currently meeting daily physical activity recommendations and that the average rate of physical activity is particularly low amongst teenage girls.</p>	<p>Please see the contribution above on PE and physical activity and sport at recommendation 1.</p> <p>In 2019, the Scottish Health Survey reported that 71% of boys met the Chief Medical Officer guidelines compared to 68% of girls.</p> <p>We are aware of the drop in participation of teenage girls which programmes like sportscotland's Fit For Girls (FFG) are aimed at. This programme has been delivered across the country to provide solutions workshops to girls themselves and the practitioners surrounding them to help engage the disengaged, inactive teenage girls.</p>
<p>81. The Committee is similarly concerned by evidence that fewer than half of adolescents engage in active travel to school.</p>	<p>Our national walking strategy action plan aims to create a culture of walking where everyone walks more often as part of their everyday travel and for recreation and well-being.</p>
<p>82. The Committee is equally concerned that, partly due to the scaling back and suspension of extracurricular sport programmes during the pandemic, there has been a widening gap between those children and</p>	<p>Ensuring Active Schools Programmes are free for all children and young people by the end of this parliament will ensure more children have the opportunity to be active before, during and after school. This work will particularly focus on areas of deprivation, disabled children and young people and inactive children and young people.</p> <p>We are working with sportscotland, organisations and individuals across Scotland to break down the barriers, financial or otherwise, that keep too many people from leading active lives.</p>

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<p>young people who are physically active and those who are not.</p>	<p>There is considerable work underway across clubs, communities and schools. For example, the Young Ambassadors (YA) programme is a key element of sportscotland's contribution to developing young people as leaders in sport. Through the Young Ambassador programme, there are 150 registered secondary schools. sportscotland support Young Ambassadors to promote participation in sport in their schools.</p>
<p>83. The Committee has also heard evidence that, during the pandemic, there has been a widening gap between those who can afford to take part in sporting activities and those who cannot.</p>	<p>Please see response to recommendation 3.</p>
<p>84. The Committee calls on the Scottish Government to set out what actions it intends to take to increase rates of physical activity by children and young people throughout the school day, including encouragement of active travel and active lessons as well as poverty proofing access to sport and physical activity for those from more deprived backgrounds.</p>	<p>Ensuring Active Schools Programmes are free for all children and young people by the end of this parliament will ensure more children have the opportunity to be active before, during and after school. This work will particularly focus on areas of deprivation, disabled children and young people and inactive children and young people.</p> <p>The Scottish Government are committed to becoming the first Daily Mile Nation in the world. The Scotland Daily Mile Nation Strategy encourages schools, organisations, families and individuals to embed The Daily Mile as part of their daily routine to improve positive behaviours through physical activity.</p>
<p>Healthy Eating in Schools</p>	
<p>85. This report has already highlighted the strong interrelationship between poverty and poor diet and nutrition as well as significantly increased risks of obesity and makes a number of recommendations to encourage healthier eating amongst children and young people living in more deprived communities.</p>	<p>The Scottish Government recognises the link between poor dietary health and poverty. Addressing obesity is a public health priority and we have set a challenging aim to halve childhood obesity by 2030. Our 2018 Diet and Healthy Weight Delivery Plan sets out a wide range of action to support children and families to eat well and maintain a healthy weight. In 2021/22 we provided £2 million to health boards for improvements to weight management services for children and young people. In addition, over £750,000 was provided in 2021/22 to eight NHS board-led projects to extend or pilot projects working with young families and communities to encourage healthy eating and good nutrition. This work includes: specialised training for practitioners, increasing physical activity, and support for those experiencing food insecurity.</p> <p>In terms of policy interventions, we know that system-wide measures are most effective at closing the inequality gap. We are therefore committed to introducing a Bill in this Parliament to restrict the promotion of unhealthier food and drink associated with poor diet and increased risk of overweight.</p>

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	<p>We are funding the Scottish Grocers Federation Healthy Living Programme to help convenience stores provide access to affordable healthier food options, especially in lower income areas. The Programme aims to increase the range, availability, quality and affordability of fresh produce and healthier products from other categories in convenience stores across Scotland, particularly in areas of deprivation.</p> <p>We are maintaining funding levels for the community food networks so that they can continue to support people struggling to access healthier food options following the pandemic. Community food networks help join up individual local initiatives to promote a healthier diet amongst disadvantaged groups, whether that be through lack of income, cultural barriers or due to poor skills.</p> <p>We are also supporting pilots of a Whole Systems Approach to improving diet and healthy weight services, focussing on children and health inequalities. This brings together local and national stakeholders to identify, understand and tackle the causes of poor diet and inequality, enabling partners to understand the complex issues which surround health, develop action plans and adapt these to the needs of the community. As outlined in this year's Programme for Government, we are evaluating these pilots and will seek to learn how this community-based approach can be scaled-up nationally.</p> <p>The response to recommendation 86 below sets out the contribution of schools to the overall strategy.</p>
<p>86. At the same time, encouraging healthy eating is a common goal throughout Scottish society and evidence suggests there is still significant work to be done to meet the Scottish dietary goals. In this context, the Committee recognises the critical role local authorities and their schools have to play in encouraging healthy eating by all children and young people, notably in terms of providing access to healthy foods in school.</p>	<p>School food and drink provision is designed to be balanced and nutritious and to support the health and wellbeing of children and young people. Our school food and drink Regulations are based on scientific evidence and dietary advice, including the Scottish Dietary Goals. They help ensure that children and young people are offered school meals that contain an appropriate amount of energy and nutrients to support healthy growth and development. They also help to ensure that all food and drink served in schools contain an appropriate amount of fat, saturated fat, salt and sugar as part of a balanced and nutritious diet</p> <p>In addition, Curriculum for Excellence helps ensure our children and young people are provided with the skills, experience and knowledge they need to make positive dietary choices. The 'food and health' section sets out the experiences and outcomes that pupils should have during the course of their day to day learning about food choices and the relationship to their health and wellbeing. The aim is to ensure children and young people develop a full understanding of food issues in their widest sense and can use this learning to make positive choices to support their health and wellbeing. Learning can be delivered through a variety of classes including maths, home economics and science and can include activities like a visit from a farmer or chef or even visits to farms, factories and restaurants. This learning is reinforced by the food and drink served in schools which demonstrates what a balanced and nutritious diet should look like in practice.</p>
<p>Youth Work</p>	

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<p>87. The Committee recognises the important role youth workers are already fulfilling in supporting work to improve health and wellbeing in schools. It calls on the Scottish Government to continue providing support to enable examples of best practice in collaboration between youth workers and schools to be more widely disseminated across the country.</p>	<p>The Scottish Government is committed to recognising the skills that Community and Learning Development Practitioners (CLD), including youth workers, have and recognise how these can help support the most vulnerable people in Scotland. Scottish Government remains committed to developing a professional CLD Workforce and making sure volunteers are developed, feel supported and have career long professional learning opportunities.</p> <p>Through the adult learning strategy and youth work strategy still in development, our ambition is to help CLD practitioners and volunteers to identify with a structured professional learning offer. This is what will help them to meet the needs of learners in Scotland's communities.</p> <p>We are keen to see more CLD providers achieving the CLD Standards Council mark which we hope will provide more opportunities for the development of CLD Practitioners in the future.</p> <p>We are supportive of having a system where practitioners and volunteers can benefit from having their practice verified, their identity strengthened and have access to a network of like-minded professionals who can provide ideas, inspiration and offers of help.</p>
<p>88. The Committee calls on the Scottish Government, in responding to this report, to provide an update on progress towards producing a follow-up National Youth Work Strategy. While accepting the impact of the pandemic, given the original Strategy officially expired in 2019, the Committee believes publication of the follow-up Strategy is now overdue.</p>	<p>The Scottish Government are working with YouthLink Scotland to co-produce a new youth work strategy. Central to this will be the direct engagement of young people in leading and informing this work. The strategy is scheduled for publication by late 2022.</p>
<p>Co-production – Schools</p>	
<p>89. The Committee calls on the Scottish Government to set out how it is supporting and encouraging co-production of services in and around schools to support improved health and wellbeing of children and young people.</p>	<p>The Framework for the £15 million Community Mental Health and Wellbeing funding for 5-24 year olds is clear that the needs and voices of children, young people and their families should be central to the design and delivery of services, and should be engaged in coproduction of the services and supports on a continuing basis.</p> <p>The Children and Young People's Mental Health and Wellbeing Joint Delivery Board has co-produced ongoing engagement activities with Scottish Youth Parliament and Who Cares? Scotland to feed into decision making and evaluation. This work is supported by a dedicated Participation Officer and the Board benefits from young people serving as Board members.</p>

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	<p>A key part of policy creation and development is the completion of the Childrens Rights and Welfare Impact Assessment. This involves detailed consideration of the impact policies will have on children and young people. This process includes engagement with representatives of children and young people and where appropriate direct engagement with children and young people themselves. Recent examples include the children and young peoples' consultation commissioned by the Scottish Government and carried out by a children and young peoples' representative organisation which influenced the development of the school food regulations and, face to face engagement with young people planned as part of the school uniform, school milk and school meal policy development.</p> <p>The Scottish Government encourages local authorities to involve children and young people as they develop local policies for example creation of lunch menus or design of lesson plans under Curriculum for Excellence.</p> <p>It is up to teachers (and hopefully pupils too) to decide what to study against the experiences and outcomes of Curriculum for Excellence. Schools are encouraged to do their own thing, using people and places in their local area, or the individual interests of classes and pupils to choose topics to focus on. The idea is that this will make lessons more relevant and therefore more rewarding for children. The Review of Personal and Social Education (PSE) also identified the importance of involving pupils in the design and delivery of PSE – to make learning relevant and engaging.</p> <p>In addition, the data gathered through the Health and Wellbeing Census will provide useful evidence for local authorities to design their support services around. That is why we are encouraging local authorities to consider opportunities to participate in the Census, whether that be through revising the questions or removing the more difficult ones.</p> <p>The Scottish Government will carefully consider bringing forward a national youth engagement strategy as set out in the Committee's recommendations.</p>
<p>90. The Committee calls on the Scottish Government to give close consideration to bringing forward a national youth engagement strategy to boost the proactive involvement of children and young people in the design and delivery of health and wellbeing support and services.</p>	<p>The Scottish Government are working with YouthLink Scotland to co-produce a new youth work strategy. Central to this will be the direct engagement of young people in leading and informing this work. The strategy is scheduled for publication by late 2022.</p>
<p>Data – schools</p>	
<p>91. The Committee calls on the Scottish Government to set out how it plans to address current significant gaps in</p>	<p>The response to recommendation 55 above sets out information on this.</p>

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<p>available nationally representative data to support accurate evaluation of specific interventions to support the health and wellbeing of children and young people in schools.</p>	
<p>92. The Committee also recommends that the Scottish Government should commission further research to help inform future evidence-based policy development in this area.</p>	<p>The response to recommendation 55 above sets out information on this.</p>
<p>93. The Committee recognises the particular challenges teachers face in measuring health and wellbeing outcomes as part of the curriculum, particularly in relation to mental health.</p>	<p>The Health and Wellbeing Census, conducted throughout 2022, will provide valuable information on the health and wellbeing of children and young people to local authorities and the Scottish Government. The Health and Wellbeing Census will support schools and education authorities to identify the issues that young people are concerned about and to tailor their learning in PSE, and their advice and support services accordingly.</p>
<p>Long Term Strategy and Universality</p>	
<p>94. The Committee recognises the natural tension between achieving a longer term shift towards a more preventative, early intervention approach to supporting the health and wellbeing of children and young people from disadvantaged groups and the immediate short term need to provide services and support to those who are suffering a crisis with their health and wellbeing right now.</p>	<p>Recommendation 55 sets out the approach to support improved evidence base on health and wellbeing through the health and wellbeing census to support improved identification of concerns. This approach is towards a preventative and early intervention approach and supports improved children’s outcomes aligned to Getting it Right for Every Child. GIRFEC is our national approach to improving outcomes for babies, children, young people and families. The shared model and language helps us to work across services so that support is well planned, joined up and streamlined, helping to prevent or mitigate childhood adversity and trauma. At the more strategic level, Children’s Services Planning Partnerships are the main statutory mechanism to plan and deliver local services and supports to improve the wellbeing of our children, young people and families.</p> <p>We know there are many factors that affect the lives and wellbeing of families in Scotland and we are developing an Outcomes Framework for Children, Young People and Families which will provide a holistic understanding of what we mean by wellbeing, based on what children and families have told us matters, and rooted in GIRFEC and children’s rights. Realising, respecting and protecting rights through the incorporation of the United Nations Convention on the Rights of the Child (UNCRC) into Scots Law is the foundation for wellbeing and improving outcomes.</p>

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<p>95. However, the Committee has heard evidence that breaking the cycle of investment in crisis intervention and refocusing towards a preventative, early intervention approach will ultimately yield benefits by reducing the overall need for crisis intervention in the longer term.</p>	<p>The Scottish Government is committed to GIRFEC; the approach is internationally recognised and is already well established in Scotland. The high quality universal and targeted services of education, early learning and childcare, and community-based child health services are fundamental to how we support children and families. GIRFEC is central to how support is provided from pre-birth, up to and beyond school into adulthood. It is at the joins between universal, targeted and specialised services that the GIRFEC principles of joint working, co-operation and communication between practitioners and services are crucial. This will help ensure that the child, young person and family are truly placed at the centre and involved in decision making.</p>
<p>96. In responding to this report, the Committee requests that the Scottish Government provide an update on progress with implementation of the "Right to Act" plan. This should include an evaluation of the impact the plan has had so far in encouraging a shift to a preventative, early intervention approach towards supporting the health and wellbeing of children and young people from disadvantaged groups.</p>	<p>"Ready to Act" 2016 was the Scottish Government transformational plan for CYP requiring support from Allied Health Professions (AHPs). This strategy was implemented across all Boards in Scotland and all AHP professions in CYP services underpinned by a commitment to evidencing the impact of change in shifting the culture of practice towards early intervention and community service. There are many examples of the impact of this transformational whole systems approach including the success of enquiry lines as a first point of contact for anyone concerned about a child or young person (Just Ask Highland and Fife Enquiry Line). The most significant impact has arisen as a result of a test of change in overturning the culture of referral with improved access to expert knowledge and signposting to early intervention strategies and offers developed by and supported by AHPs. The data relating to this has changed the way referrals are managed across AHP CYP services in partnership with parents carers, CYP and partners and consistently demonstrates that 40% of any request for assistance can be managed at the point of initial conversation through reassurance following discussion with an expert AHP. AHPs in CYP service in Scotland are committed to delivering to the ambitions of Ready to Act. During Covid their preparedness for continuing to support CYP through virtual resources and drop ins was enabled by the work since 2018 to extend reach, particularly to CYP living in poverty. The pressures and demands exacerbated by Covid mean that delivering to an early intervention ambition becomes increasingly difficult and support will be required to continue to meet the needs of CYP in Scotland through preventative measures in collaboration with partners. Equity for All was published in 2022 (Better Communication CiC) and demonstrates the impact of speech, language and communication needs on CYP lifelong wellbeing outcomes. There requires to be a significant support for a shift to early intervention use of current workforce to enable wellbeing and attainment outcomes for CYP in Scotland to be achieved.</p>
<p>97. The Committee calls on the Scottish Government to set out how, building on the foundations of its mental health and wellbeing transition and recovery plan and the Mental Health</p>	<p>We are committed to reviewing and producing a new Mental Health Strategy this year, which will include a focus on Children and Young People. We want to ensure that our future strategy is evidence based, informed by lived experience and underpinned by equality and human rights. It will focus on outcomes and will be driven by data and intelligence.</p>

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<p>Strategy 2017-2027, it intends to develop and bring forward an integrated long-term strategy to support, improve and sustain children and young people's mental health.</p>	<p>The scope of the refreshed strategy will be wider than before, with an increasing focus on wellbeing and prevention. We will also consider how the strategy can take account of social factors and inequalities that may impact a person's mental health and wellbeing. We have already undertaken extensive engagement with our stakeholders to help us shape our approach and have launched a public consultation.</p> <p>We will take forward further engagement activity over the summer months, including with children, young people and families, to inform this important work.</p>
<p>98. The Committee accepts that supporting the health and wellbeing of Scotland's children and young people needs to be underpinned by a universal approach, coupled with more specialist interventions for those children and young people who are disadvantaged or have particular needs.</p>	<p>Getting it right for every child (GIRFEC) is the core approach that underpins how children's services in Scotland are delivered, providing a shared language and unifying framework for working across disciplines and organisations, and supporting a holistic and rights-based child and family centred approach.</p> <p>One of the core components of GIRFEC, is a single, shared approach to planning for children and young people's wellbeing where support across services are needed. A personalised plan should be put into place when a range of extra support needs to be planned, delivered and coordinated.</p> <p>When a child or young person requires a range of extra support planned, delivered and co-ordinated, the child's plan is managed by a 'lead professional': someone with the right skills and experience to make sure the plan is managed properly. One of the key principles of the GIRFEC approach is that that the child or young person is at the centre and involved in discussions and decision making, along with their parents or carers where appropriate; and, that services will work jointly to meet identified needs or risks.</p> <p>Under the Additional Support for Learning Act 2004, education authorities have duties to identify, provide for and review the additional support needs of their pupils. Additional support needs can arise for any reason.</p>
<p>99. The Committee highlights calls it has heard as part of the inquiry for better data collection to improve evaluation of the impact of universal interventions aimed at improving health and wellbeing of children and young people.</p>	<p>The response to recommendation 55 above sets out information on this.</p>

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