



National Policies, Guidance & Standards

EVIDENCE/DOCUMENT	SUMMARY
Perinatal Pathways for Healthcare Professionals, NHS Wales. <u>Access Here</u>	Pathways into care for women and their families experiencing PMH issues based on perceived level of need. Pathways include: pre-conception, universal care, watchful waiting, emotional wellbeing visits, primary care and community services, specialist interventions, emergency assessments, inpatient admission and psychological support.
UN Convention on the Rights of the Child Access Here	Rights all children under the age of 18 are entitled to under the convention
Women's Health Plan for Wales 2025-2035, NHS Wales <u>Access Here</u>	 The NHS Wales Women's Health Plan (the Plan) is a ten-year vision (2025-2035) that outlines an NHS Wales approach to improving the health outcomes for women in Wales. Key reportings: 31.6% of women reported a mental health problem during pregnancy In Wales, 38% of single parents, the majority of whom are women, are living in relative income poverty 45% of pregnancies within the UK are unplanned or associated with feelings of ambivalence. Women who have unintended pregnancies are more likely to delay prenatal care, experience violence, and have mental health problems. 8 priority areas are menstrual health, Endometriosis and Adenomyosis, Contraception, Post-Natal Contraception and Abortion Care, preconception health, Pelvic Health and Incontinence, menopause, Violence Against Women, Domestic Abuse and Sexual Violence, Ageing Well and Long-term Conditions Across the Life Course





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Mental Health & Wellbeing Strategy, 2024-2034, Welsh Government <u>Access Here</u>	A vision for health and social care in Wales. This lays out the Welsh Government's ambitions for progress and improvement and describes the core values that underpin the health and social care system in Wales. These are: • Putting quality and safety above all else • Integrating improvement into everyday working • Focusing on prevention, health improvement and inequality • Working in true partnerships • Investing in our staff
Early Childhood Play, Learning and Care Plan in Wales, Welsh Government, 2024. Access Here	An overview of the work being taken forward by the Welsh Government and partners in the childcare, play work and nursery education sectors which comes under the umbrella of Early Childhood Play, Learning and Care. Highlights: • Care provided by parents/carers - Parenting Give it Time, accessible childcare, high quality education, Welsh Medium, connection between ACEs and development • childcare, play and education workforce - career pathways and opportunities, security and flexibility • enabling adults who are warm, attentive, responsible, skilful and knowledgeable • supporting play through quality education, care provision and out of school childcare
Well-being of Future Generations (Wales) Act 2015: the essentials, Welsh Government <u>Access Here</u>	 Guidance on Wales law to improve social, economic, environmental and cultural wellbeing. Related Wellbeing Goals - A Healthier Wales, Cohesive Communities Related National Indicators - Healthy babies, Young children developing the right skills, Satisfaction with access to facilities and services, sense of community, mental wellbeing, loneliness





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The Basics of Infant and Early Childhood Mental Health: A Briefing Paper, 2017 Access Here	An overview and analysis of the impact of ACE's and adverse circumstance on children's mental health and overall development. Key reportings include: Young children living in families dealing with issues like parental loss and mental health challenge are more likely to develop mental health issues. Early identification and response with service support can prevent and deter future mental health and/or development issues.
The Golden Thread - A Case for Developing Specialist Parent-Infant Services in Wales, 2024. Access Here	An overview of the importance of the first 1000 days in a child's life and the case for investing specialised parent-infant services. Key reportings include: The benefit of having specialised support for babies via parent-infant teams. The importance of national strategic oversight for parent-infant relationships and Welsh Government guidance and accountability to families in this area. The role of local community hubs/spaces where families can access a range of services.
Time for Parents. The Changing Face of Early Childhood in the UK. Nuffield Foundation, 2022. <u>Access Here</u>	 The changing face of early childhood is a series of short reviews, events and engagement that seeks to generate an informed debate on early childhood. Key reportings: 1 in 4 children are now being exposed to maternal mental illness. Most commonly depression and anxiety. Far lower levels of closeness and higher levels of conflict are observed among mothers with high psychological distress and young children of parents with poor mental health are 3 times more likely to have a mental health problem themselves There has been a sharp increase in relative income poverty amongst families with young children since 2013/14, with in work poverty on the rise.



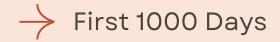


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From bumps to babies: perinatal mental health care in Wales, 2018. <u>Access Here</u>	 This report provides an overview of the findings from the Perinatal Mental Health in Wales project, a collaboration between NSPCC Cymru/Wales, National Centre for Mental Health (NCMH), Mind Cymru and Mental Health Foundation. Key reportings: Inconsistencies in availability and type support available across health boards areas around PMH, including inconsistencies in HB practices e.g whether health boards accept PMH referrals from health visitors. The vital role of peer support interventions in addressing and preventing PMH issues 90% of health professionals feel they would benefit from additional training on perinatal mental health
Children, Young People and Education Committee Perinatal mental health in Wales, 2017 Access Here	 Results and recommendations produced as a product of an inquiry into PMH provision in Wales by the Children, Young People and Education Committee. Key reportings: Strong 'invest to save' argument for further investment in PMH services Recommendation 20: Work with health boards to ensure appropriate funding for third sector provision. Statutory services should work in alignment with third sector. Mixed experiences of women being asked about their mental health between conception and postnatal period. Services express more of a focus on identifying severe PMH issues as opposed to assessing general wellbeing.
Watch Me Play! Manual for Parents, NHS <u>Access Here</u>	Play Guidance for parents. Watch Me Play! is a simple way parents to help babies. Being in tune, relaxed and playful together helps babies and children to grow up healthy and secure. Research says 10-20 minutes of this approach everyday could have long lasting positive effects for children.





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Saving Lives, Improving Mother's Care. Lessons learned to inform maternity care from the UK and Ireland Confidential Enquiries into Maternal Deaths and Morbidity 2019- 21. MBRRACE-UK, 2023 Access Here	 Deaths from mental health-related causes as a whole account for nearly 40% of deaths occurring between six weeks and a year after the end of pregnancy with maternal suicide remaining the leading cause of direct deaths in this period.
Strengthening perinatal mental health. A roadmap to the right support at the right time, 2025, Royal College of Midwives <u>Access Here</u>	 It also requires the creation of an Integrated Care Boards (ICBs) and Integrated Joint Boards (IJBs) with simplified referral pathways, community-based care, and a holistic approach where perinatal mental health is seen as 'everybody's business' Positive engagement with local and national third-sector support should be encourged to provide personalised, timely perinatal mental healthcare.





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Women's experiences of attempted suicide in the perinatal period (ASPEN-study) – a qualitative study, 2024 Access Here	Study exploring the experiences of women and birthing people who had a suicide attempt during the perinatal period and the factors surrounding this that may have contributed. Key Findings: • Where suicide attempts occurred during the postnatal period, participants reported suicidal ideation had started during pregnancy, making the antenatal period a critical period for both antenatal and postnatal suicide prevention. • All started pregnancy journey with vulnerabilities, including previous adversity and/or trauma • Other contributing themes include disillusionment with motherhood and entrapment and despair.
Babies in Lockdown - Listening to parents to build back better, 2020 Access Here	 Results of survey engagement with parents exploring the impacts of the Covi-19 pandemic on families. Key findings: Almost 7 in 10 (68%) parents felt the changes brought about by COVID-19 were affecting their unborn baby, baby or young child. One quarter (25%) of parents reported concern about their relationship with their baby, and one third (35%) of these would like to get help with this. Almost 9 in 10 (87%) parents were more anxious as a result of COVID-19 and the lockdown. Two thirds (68%) of parents said their ability to cope with their pregnancy or baby has been impacted by COVID-19. Over a third (34%) of those who gave birth during lockdown stated that care at birth was not as planned.





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HSC Public Survey 2024	 HSC large national survey to parents- 160 respondents across all local authority areas Key findings: 31% think there is not enough support for new parents in their community 67% want support with encouraging/developing parent-child bonds 81% would value help to develop skills around child development, including reading, confidence and social skills
HSC Family Case Study - Charlotte, Cardiff	"The support from the HSC Volunteer was amazing. Helped move home, visited the local area to find out where everything was, sort out settling into the new property, playing and entertaining Damilola, support me with getting out more with Damilola at play centres to show that it is ok for my anxieties were normal as a first-time mum and let them explore and not to worry they would hurt themselves." "At one point I was really unwell and ended up in a mother and baby unit to get the right care that I needed. HSC continued to visit and take Damilola out, shop with her Dad and was an amazing support as I could get updates that all was ok at home (to ease my mind)." "Without the support of HSC and other professionals' still now I could never have pulled family life together and be an active mum."
HSC Family Case Study - Naomi, Cardiff	"Around 6 months after my child was born I was struggling mentally so went to my GP. I was put straight on anti-depressants and not referred into the PMH team. I would email my Diabetes team to say I'm struggling but I just received a leaflet in the post on burnout and that was it, so I tried to carry on but things got worse. By around Sophia's first birthday I was being admitted almost every month to





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	hospital as I was now struggling with Diabulimia. I was eventually referred to my community mental health team and saw a doctor regularly but he moved on and I got lost in the system.
	I didn't know what I needed. I was reaching out to my Diabetes team and my health visitor but there was nothing they could do. My GP referred me to primary mental health but I was too complex for them. I just fell through so many gaps and ended up nowhere. I didn't know what voluntary support I could access and felt alone.
	Having support from a Home-Start Cymru volunteer was so helpful and has made a massive difference for me. Knowing I can reach out again for support if I need it again is so reassuring."





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Parenting in Wales - Strategies for Working with Fathers, Welsh Government <u>Access Here</u>	Good practice paper for practitioners working with fathers Highlights: Consider diversity of fathers Understand impact fathers have Be aware of barriers to father's involvement Assess your father-friendliness Consider strategies for engagement
Well-being of Future Generations (Wales) Act 2015: the essentials, Welsh Government <u>Access Here</u>	 Guidance on Wales law to improve social, economic, environmental and cultural wellbeing. Related Wellbeing Goals - A Healthier Wales, Cohesive Communities, more equal Wales Related National Indicators - Healthy babies, Young children developing the right skills, Satisfaction with access to facilities and services, sense of community, mental wellbeing, loneliness, people feeling involved





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Antenatal Care - Involving Partners, NICE Guideline, 2021 <u>Access Here</u>	 Key findings: Male partners regarded receiving appropriate information as an important part of their experience during the antenatal period, whilst a lack of knowledge led to feeling disengaged. Male partners often turned to the internet for information but found that information was scarce for expectant male partners. One study showed that male partners preferred to have another person, an 'expert' for example, provide them with information rather than having to seek it out themselves.
Public Health Wales- New study of fathers in prison shows how adverse childhood experiences (ACEs) continue from one generation to the next, 2024 Access Here	Report highlights: Compared to children of fathers with no ACEs, children of fathers who had experienced four or more ACEs were: • almost three times more likely to be exposed to two to three ACEs and six times more likely to be exposed to four or more ACEs • two times more likely to be exposed to domestic violence • over seven times more likely to live in a household where mental illness was present • ACE prevention and support for families to build resilience is essential to prevent generational trauma and ACEs
British Journal of Midwifery - The psychological impact of birth trauma on fathers: a narrative review, 2025. <u>Access Here</u>	A narrative literature review of father's experiences of birth trauma Highlights: Role of toxic masculinity - gendered stereotypes and suppressed emotions, exacerbated by feelings of inadequacies as a result of being excluded/isolated from the birthing experience. feeling unprepared and dealing with unexpected scenarios





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	 Negative effect this trauma had on fathers relationships with their partner, baby, friends and healthcare professionals.
Centre for Mental Health - Fatherhood: the impact of fathers on children's mental health Access Here	Briefing and literature review of the positive correlation between fathers active involvement with children and positive child development and wellbeing. Highlights: Good maternal emotional support by fathers supports mother-child bonds warm nurturing relationships encourage positive child mental health Children who have secure, supportive, reciprocal and sensitive relationships with their parents are much more likely to be well adjusted than children whose relationships are less satisfying involved and interested communication with children benefits wellbeing absent or inconsistent father-child relationships link to negative child outcomes Fatherhood and its anticipation is a golden opportunity to support positive parenting; enthusiasm is high among men at this time. barriers imposed by the workplace cited as leading factor for low paternal involvement Fatherhood, info, parenting programmes and family friendly approaches should be promoted in the workplace There should be greater focus on the mental health of the entire family by primary and specialist mental health providers.
Under 2% of working dads take shared parental leave, research finds, 2024 <u>Access Here</u>	 Highlights: Nearly two thirds (60%) of shared parental leave goes to the UK's top earners. Statutory shared parental leave pays less than <u>half the minimum wage</u> One in five working fathers (21%) report wanting to take on more of the weight of childcare and household responsibilities





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'Becoming Dad': Identifying the Support Needs of Men in Their Transition to Parenthood. PWTHB. 2020. Access Here	Research report scoping the unique needs of fathers on the parenthood journey via engagement with fathers in the Powys area: Six key themes coming from the research undertaken: 1. Being prepared - need for information and a good relationship with healthcare professionals 2. Recognising the emotional impact this period brings 3. Challenges and responsibilities- financial/provider, work life balance, perceived freedom 4. relationship with partner - being a team, time together 5. relationship with baby - attachment and bonding, quality not quantity, confidence 6. culture and the myth of being a perfect dad
From bumps to babies: perinatal mental health care in Wales, 2018. Access Here	 Research highlights: 4/6 of dads/partners who took part experienced perinatal mental health problems, including depression, anxiety, obsessive thoughts and PTSD. 1 dad/partner experienced mental health problems for the first time in the perinatal period, and 3 had a history of mental health problems which resurfaced while their partner was pregnant or in the year after they had a baby. 5/6 of the dads/partners indicated that they would have liked additional information on perinatal mental health problems. "Given pill nothing more, no groups or referrals. Felt ignored and unimportant" "I would have liked a mental health consultation and suggestions for support groups" Professionals themselves expressed frustration/dissatisfaction with the limited information they are able to offer dads/partners and the lack of services available





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Cymru Well Wales. First 1000 Days - Parental Insights, 2017. <u>Access Here</u>	 Engagement with parents within this first 1000 days of parenthood to understand experiences during this times and the areas for service development. Highlights: The lack of information and support available aimed directly at fathers in the first 1000 days came through as a gap The information needs of fathers must be considered and addressed. Frontline professionals need to ensure that fathers feel part of discussions with health professionals during the first 1000 days.
Risk of suicide and mixed episode in men in the postpartum period, 2011 <u>Access Here</u>	Study assessing suicide risk in men with mood disorders at the postpartum period. Key finding: Fathers with perinatal mental health problems are up to 47% more likely to be rated as a suicide risk than at any other time in their lives
ASSOCIATION OF PARTNER ABUSE WITH LONELINESS AND IMPAIRED WELL-BEING OF SEPARATED FATHERS IN WALES, 2022 Access Here	 Key findings: In the UK, 92% of non-resident parents are fathers Divorced men are more likely to suffer from emotional loneliness than are divorced women. Survey data confirmed low mental wellbeing scores among separated fathers in comparison to the general population. Non-resident fathers had higher levels of poverty and deprivation, and lower levels of social support, than fathers residing with their children The crime surveys for England and Wales consistently report that 33% of adult domestic abuse or partner abuse is against male victims, however, associated policy and service provision for male victims is much lower in comparison to female, and males are less likely to report incidences to the police.





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HSC Family Case Study - Gareth, Rhondda Cynon Taf	"The Friday before Elijah was born I and Jess were at POW waiting to be seen by a midwife. I remember Deb giving me a pamphlet and I immediately thought to myself – This is what I need right now. When Jess was in ITU I remembered I had this and I knew it was something that was for me and people who could help me at this really tough time. was almost in shock that me, a Dad, was given something! Normally it's all about the mother."
	"When I spoke to Deb I was coming off a really bad day. Not knowing what the future held for me, not knowing how my family was going to react to this entire trauma. But most importantly my wounds were still open and I had still not addressed them because I simply didn't have the time to."
	"Deb let me talk and let me get it all off my chest. How I was feeling, what we went through, my gripes with the system. I felt liberated immediately and certainly didn't feel like I wanted to hold anything back. I needed to talk about this to come to terms with the trauma myself."
	"The trouble is today is that Dads are expected to 'get on with it'. However nobody really wants to know how you are feeling or what you've been through as you aren't the one that has to go through childbirth etc. Having someone to talk to about the good and the bad is invaluable and should be celebrated."
	"All Dads are different and hospitals, wards, social structures need to not assume they are a certain way and 'ok'. I believe they need to be spoken to and more Dads will come forward with the proper guidance."
	"I do believe that although the staff in the NHS is simply sensational, old rhetoric assuming Dads 'don't know' or are 'in the way' is something I certainly felt during our



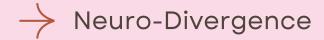


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	worst months. On occasion I felt small, insignificant and sometimes my questions weren't addressed or even had eye contact."
HSC Dad Matters Cymru. Cardiff and Vale Project Impact Report	 Key findings: Common anxieties raised by Dads: maintaining stability and providing for the family, work-life balance, wellbeing of their partner during pregnancy, living up to expectations, anticipating changes in relationship, how parenthood may impact their freedom and/or identity, uncertainty about parenting capabilities Challenges face by 'BAME' Dads: cultural stigma, lack of representation of BAME fathers in media and community platforms, obstacles in accessing mental health services, financial concerns more prominent amongst 'BAME' Dads. Many of the Dads found it more comfortable to chat while doing something, often preferring to step outside the ward for a change of scenery. Dads felt that choosing where they talked helped them express themselves better. The casual setting reduced stress levels and encouraged honesty, ultimately leading to the project's perceived success.
	Fathers' Feedback: "I feel less anxious about being a father for a second time!" "Feel validated, more part of the pregnancy." "I know where to turn to if I need support." "This needs to be proudly displayed in every hospital in Wales. Clone this bloke if you have to." "Please keep spreading the word and advocating men's roles." "This is potentially life-saving for men! It needs more respect and attention. Your worker is worth his weight in gold."





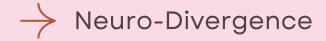
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HSC Dad Matters Cymru. Cwm Taf Morgannwg Impact Report	 Key Findings: Where volunteers had a presence in antenatal clinics and approached fathers, as opposed to fathers reaching out to the service, many responded well and high levels of engagement from fathers were observed. Referrals for one to one support by Dad Matters were facilitated by multiple strong partnerships including with health visitors, perinatal teams, GPs etc. Training rolled out to practitioners found individuals were better equipped to signpost and support fathers in a timely manner.
	Father's feedback: "The first meetings with the Coordinator were really helpful. We talked about how my mental health was affecting our kids and how it was hard for me to bond with our new baby. The Coordinator supported me emotionally and gave me advice. They helped us find other services and ways to solve problems." "I feel better at home now. I'm closer to our kids, and I'm spending more time with our baby."
	"Dad matters gave me the feeling of confidence by providing me with a safety net, someone to talk to, to discuss what I was feeling and thinking a place to check that I was doing the best for my family and that I was looking after myself."
HSC Public Survey 2024	HSC large national survey to parents- 160 respondents across all local authority areas Key findings: • 49% don't think there is enough support available for fathers in their community • 65% want direct information e.g parent courses or learning material for fathers • 63% want support for expectant fathers





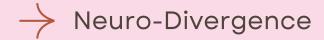
National Policies, Guidance & Standards

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Code of Practice on the Delivery of Autism Services Supporting Guidance Document 2021 Access Here	Guidance and expectations for the delivery and quality of services for autistic people by local authorities and local health bodies. The CoP has a strong focus on prevention of escalation of circumstance and family wellbeing, including need for interventions that prevent children ending up in custody and utilising and empowering third sector interventions due to their ability to support families that may not meet statutory criteria for support.
UN Convention on the Rights of the Child Access Here	Article 2: The Convention applies to every child without discrimination, whatever their ethnicity, sex, religion, language, abilities or any other status, whatever they think or say, whatever their family background. Article 23: A child with a disability has the right to live a full and decent life with dignity and, as far as possible, independence and to play an active part in the community. Governments must do all they can to support disabled children and their families. Article 28: Every child has the right to an education. Primary education must be free and different forms of secondary education must be available to every child. Discipline in schools must respect children's dignity and their rights. Richer countries must help poorer countries achieve this.
Neurodivergence Improvement Programme, Welsh Government <u>Access Here</u>	Review of current ND systems and services and plan for improved provision up to and post-March 2025
Autism spectrum disorder in under 19s: recognition, referral and diagnosis, NICE, 2011. <u>Access Here</u>	The National Institute for Health and Care Excellence (NICE) guidelines for children and young people recommend that a diagnostic assessment should be started within 3 months of a referral to autism services



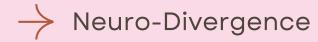


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North Wales RPB. Focus on children and young people: neurodevelopment, 2024. Access Here	 This information pack pulls together a range of evidence about the experience of children, young people and families with neurodevelopmental conditions in North Wales. Focus areas include: importance of early diagnosis of ND conditions in order to improve cognitive and behavioural outcomes. The power of advocacy for parents during times of transition Families' want for more autism outreach services and more information resources
Assessment waiting times 2024, FOI, Welsh Government <u>Access Here</u>	Health Board ADHD and ASD assessment waiting times as of 2024: Percentage of patients waiting over a year: • BCHB - 19.7% (19.5% decrease since 2022) • ABUHB - 15.2%, (14.4% increase since 2022) • C&VHB - 61.6% (29% increase since 2022) • CTMHB - 38% (11.6% increase since 2022) • HDUHB - 62.5% (10.9% increase since 2022) • PHB - 31.6% (30.15% increase since 2022) • SBUHB- 51.7% (4.4% increase since 2022)



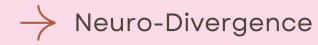


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Research and Development Project: The views of parents and professionals on specialist provisions for children with disabilities and their families in North Gwent, 2019 Access Here	Research conducted with parents and professionals across North Gwent: Key findings included: • Lack of services available across the school holidays or generally outside of term time • Lack of emotional support for families post-diagnosis and with transitionary challenges • need to increase 'provision of information, advice and signposting for families • facilitating greater integration of families into their local communities, working collaboratively with other services, and providing families with continuity
Research and Development Project: The views of families and professionals on specialist provisions for children and young people with disabilities and/or developmental difficulties, living in Caerphilly, 2021 Access Here	Research conducted with parents and professionals across Caerphilly: Key findings included: Need for more/better service provision out of working hours Need for peer support and practical training for families with ALN
Neurodivergence improvement programme: engagement events November 2022, Welsh Government Access Here	Summary of insights gathered from engagement events held with a range of stakeholders around the proposals made in Welsh Government Neurodivergence Improvement Programme Key findings included: Need for more advocacy services to support parents to access services and to also teach self-advocacy service development needed includes support after diagnosis, support for parents and various relationship support



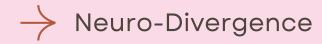


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Neurodevelopmental Services in Wales, Senedd Research, 2024 <u>Access Here</u>	 Summary of available provision in Wales and Welsh gov plans for improvement. Key facts: Getting a private diagnosis also does not guarantee that someone will be able to access treatment or medication through the NHS. Whilst some GPs will recognise a private diagnosis, others will not. Some local authorities may not accept the results of private autism diagnoses. The goal for children and young people on the ND pathway attending a first assessment is 26 weeks. There is currently no guideline for adults. In education, a diagnosis is not required before decisions are taken on whether a child or young person has ALN, and additional support is put in place
A No Wrong Door Approach to Neurodiversity: a Book of Experiences, Children's Commissioner for Wales Access Here	A summary of conversations with families and individuals to highlight the urgency of change needed within ND services to RPBs and Welsh Government. Key findings include: Schools apparently refusing to support referrals into ND pathway Many experiencing being told they have come to the wrong place for support Families needing safe spaces to talk about their circumstances without feeling judged Families wanting better/more support for transitionary period, such as moving from primary to secondary school, as well as support with IDPs.
PTSD and autism spectrum disorder: Co-morbidity, gaps in research, and potential shared mechanisms. 2018 Access Here	Report on the how presence of Autism Spectrum Disorder can be linked to higher vulnerability of developing PTSD Key findings: • Found there is a strong connection between ASD and PTSD • A strong pressing need for more research on PTSD-ASD



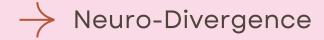


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A systematic review of quality of life of adults on the autism spectrum Access Here	 Study investigating differences between autistic and non autistic adults: Key findings: Adults with autism were found to experience higher rates of mental health challenges and have a lower quality of life. Quality of life adverse findings related mainly to social inclusion and interaction





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2024 HSC Public Survey	 HSC large national survey to parents- 160 respondents across all local authority areas Key findings: 54% of respondents waiting for ND diagnosis for their child via referral pathway. Of these respondents, 59% have been waiting under three years and 41% have been waiting over three years for an assessment. Majority of respondents said they need more ND support: 72% want help to manage their children's behaviour 66% want the chance to connect with other parents with children with ND 64% want information and guidance on their child's diagnosis 62% want access to education/learning/courses around ND 60% want good signposting to other family services 54% want support around parent-child bonds/relationships
HSC Impact Report 2023-2024 Access Here	 Family Statement: "Being able to talk to someone with experience about school and children with additional needs and just someone to chill with and vent." Impact stat: 88% of children supported showed improvements in learning and development
HSC Family Case Study: Julia & Simon, Merthyr Tydfil	"For years our concerns about our daughter weren't listened to. When she was in primary school, I was told she's absolutely fine and there's nothing to indicate she has ND. She was labelled as the quiet girl with. No one listened to our concerns or experiences. As soon as she got to secondary school, the SENCos could see straight away she likely has autism." "We struggle with her behaviours and it recently it seems like she targets Mum. She can be verbally and physically abusive when she's triggered. That's a massive element of support we got from HSC and it was difficult not getting this guidance anymore





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	when the support ended."
	"Our working hours make it difficult to attend peer support groups but we do have some friends with children with ND, which helps you to not feel as alone."
	"I think something needs to be done about primary schools' role in referring for ND. They need training to understand ND better and how to support families suspecting ND because we, and others we know, weren't listened to. It seems unless a child is disruptive, they don't want to know."
	"When we went to one parents evening, we asked about her IEP and when the next meeting to review it would be. Unbeknownst to us, they'd taken her off an IEP a year ago without telling us."
HSC Staff Quote	"I always tell our supported families that are waiting for an assessment to double check that they are actually on the waiting list. We've had so many incidents where families think they are on the list but they're actually not and have no idea."
HSC Peer Support Groups, Merthyr Tydfil	Home-Start Cymru has run co-productive activities with peer support groups in the Merthyr Tydfil area to understand what exactly families need to feel safe, secure, and for overall family wellbeing to be improved. These groups are predominantly made up by parents who have neuro-divergent children and/or have neuro-divergence themselves. Core themes coming from these discussions included:





National Policies, Guidance & Standards

EVIDENCE/DOCUMENT	SUMMARY
A More Equal Wales The Socio- economic Duty Equality Act 2010, Welsh Government <u>Access Here</u>	The Socio-economic Duty came into force in Wales on the 31 March 2021. It will encourage better decision making and ultimately deliver better outcomes for those who are socio-economically disadvantaged. The socioeconomic duty must be used to guide and inform strategic decisions
Child Poverty Strategy for Wales 2024, Welsh Government <u>Access Here</u>	 Objective 1: to reduce costs and maximise the incomes of families - Priority 1: entitlement (putting money in people's pockets) Objective 2: to create pathways out of poverty so that children and young people and their families have opportunities to realise their potential - Priority 2: creating a Fair Work nation (leaving no one behind) Objective 3: to support child and family wellbeing and make sure that work across the Welsh Government delivers for children living in poverty, including those with protected characteristics, so that they can enjoy their rights and have better outcomes - Priority 3: building communities (accessible, joined up services to meet community needs) Objective 4: challenge the stigma of poverty and ensure children, young people and their families are treated with dignity and respect by the people and services who interact with and support them - Priority 4: inclusion (kind, compassionate and non-stigmatising services) Objective 5: to ensure that effective cross -government working at the national level enables strong collaboration at the regional and local level - Priority 5: enabling collaboration (at the regional and local level)
Well-being of Future Generations (Wales) Act 2015: the essentials, Welsh Government Access Here	Guidance on Wales law to improve social, economic, environmental and cultural wellbeing. Related Wellbeing Goals - Prosperous and resilient Wales Related National Indicators - disposable household income, fair pay, pay difference, people living in poverty, people living in material deprivation, pay set by





National Policies, Guidance & Standards

EVIDENCE/DOCUMENT	SUMMARY
	collective bargaining, people in work, People not in education, employment and training, People satisfied with where they live, mental wellbeing, homelessness, housing costs, adults with qualifications, School leavers with skills and qualifications
UN Convention on the Rights of the Child Access Here	Related articles: • Article 26 - social security • Article 27 - adequate standard of living
Welsh Benefits Charter, 2024 Access Here	Commitments set up by Welsh Government to improve and ensure the accessibility of the Welsh Benefits System





EVIDENCE/DOCUMENT	SUMMARY
Relative income poverty: April 2021 to March 2022, Welsh Government <u>Access Here</u>	 In Wales, 28% of children were living in relative income poverty in FYE 2020 to FYE 2022 81% of children who were living in relative income poverty lived in working households. Lone parent households were most likely to be in relative income poverty (at 38%). 88% of <u>lone parents</u> with dependent children are women.
Feminist Scorecard 2019: Tracking Welsh Government action to advance women's rights and gender equality Access Here	 Women provide a higher proportion of unpaid care than men. A marked gender gap is notable among carers aged 25-49 and 50-64 - when caring duties are most likely to have a negative impact on employment options and earnings. women are more likely to work in occupations such as caring, sales, leisure and other service occupationsdomiciliary care and food and drink sectors are characterised by low pay, insecure contracts, and limited opportunities to progress. Black, Asian and Minority Ethnic women fare badly: the employment rate of white females in Wales is 69.9%, but only 48.1% for BAME women. The gender pay gap ranges from over 25% on the Isle of Anglesey to -0.5% in neighbouring Gwynedd, and -8.5% further along the coast in Conwy. 25% of jobs pay below the minimum wage, and low-paid, part-time or insecure jobs are often disproportionately taken up by women, due to difficulties in balancing work and caring responsibilities.
People in bad or very bad general health, Bevan Foundation, 2025 <u>Access Here</u>	Summary of BF insights around population health based on UK and Welsh Gov data Key reportings: • People who are disabled whose everyday activities are limited a lot have by far the highest levels of bad or very bad health. • High levels of reported bad or very bad health amongst specific groups: • people who are economically inactive (19.1%)





EVIDENCE/DOCUMENT	SUMMARY
	 people with no qualifications (18.1%) people in routine occupations (11.8%). Geographically, people living in former industrial areas, and notably in Merthyr Tydfil and Blaenau Gwent, have well above average levels of 4 reported bad or very bad health. People with bad or very bad health are more likely to live in deprived communities and in social housing than people with good or very good health.
'What Am I Supposed to do?' Living with no recourse to public funds in the Nation of sanctuary, Bevan Foundation, 2024. Access Here	 Key findings: No local authority in Wales has implemented a local NRPF Pathway Most local authorities in Wales exclude children from free school meals and the School Essentials Grant because of their immigration status. Some local authorities which offer free school meals to children affected by NRPF have application forms and assessment processes which make it impossible for parents to apply. People with NRPF are in urgent need of advice, support, and protection to exercise their rights and entitlements Key recommendations: All local authorities should develop a local NRPF pathway in line with Welsh Government guidance and in conjunction with specialist organisations, local services, and people with lived experience of NRPF. Local authorities should develop strong working relationships with legal providers and third sector support agencies within their local area. The Welsh Government should introduce automatic eligibility for free school meals for all children from low-income households regardless of their immigration status.





EVIDENCE/DOCUMENT	SUMMARY
Pause to Play - Evaluation Report, Save the Children, 2023 <u>Access Here</u>	Pause to Play tested the difference that can be made if we alleviate an immediate financial crisis in a family home, then provide a period of sustained support for families around their child's early learning.
Children in Wales Annual Child and Family Poverty Survey Findings 2024 Access Here	 Key findings: 95% of parents feel that their financial situation is negatively impacting their mental health 55% of parents/carers said that childcare issues stopped them working more hours and 60% of families who pay for childcare said it is causing a huge strain of finances, ability to afford basic necessities and putting them into debt. 25% of parents said their children miss school because of costs. suggestions for support: Emotional support: safe spaces, better support services and empathy and understanding Community focused: activities, support and spaces
Poverty and deprivation (National Survey for Wales): April 2022 to March 2023 <u>Access Here</u>	Main Findings: in 2022-2023 • 16% of all adults are materially deprived • 19% of working-age adults are materially deprived • 4% of pensioners are materially deprived • 9% of children are materially deprived
Fuel poverty in Wales: interactive dashboard, Welsh Government	Fuel poverty: any household having to spend more than 10% of their income to maintain a satisfactory heating regime





EVIDENCE/DOCUMENT	SUMMARY
Access Here	 Key findings: In 2021, 10% of households in Wales were living in fuel poverty In Ceredigion and Gwynedd, more than 18% of the population are living in fuel poverty. 17% of Powy's population is living in fuel poverty. 22% of people living in fuel poverty were 75 and over
Tackling Disadvantage through Childcare in Wales, Bevan Foundation <u>Access Here</u>	 Key observations: Affordability: A female worker with a child aged 2 and under, working full time at the 25th percentile of earnings must currently spend more than half her weekly earnings on the cost of childcare. Quality - one in five parents whose youngest child is aged 10 or under do not think that childcare is good quality Accessed - many disadvantaged children at risk of not being ale to access childcare due to parents a-typical hours, while low income families are locked out of the childcare offer Family-focused - little evidence around how successful Welsh childcare system is in supporting positive home-learning environments Integrated - Numerous Welsh Government childcare programmes are not well-integrated with one another, aswell as further amongst other services.
Economic and employment growth alone will not be enough to reduce poverty levels, Joseph Rowntree Foundation, 2025 Access Here	 Key findings: In the next 4 years, Wales' child poverty rate is set to rise to 34% The combined effect of the Scottish Child Payment and the commitment to reverse the 2-child limit from 2026 is to reduce child poverty rates in Scotland to around 80% of its level without either policy. To put this in context, a reduction by this proportion in the rest of the UK would equate to 800,000 fewer children in poverty across the rest of the United Kingdom in January 2029,





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HSC Public Survey , 2024	 HSC large national survey to parents- 160 respondents across all local authority areas Key findings: 22% don't have enough income to cover their essentials 50% don't have enough income to cover their essential and afford the occasional extra, such as a family day out, cinema, toys etc
HSC Family case study- Natasha, Caerphilly	"I didn't have a clue what I could access. Without Hazell, I wouldn't of known about most of the schemes I'm on now. I didn't know about the support I could get for uniform and free school meals for a while until the school told meThe winter fuel support scheme I never claimed because I didn't know how." "Things like the Healthy Start Vouchers do help; being able to get milk and vegetables, but, the truth is I'm struggling at the minute. We can't go on any holidays, or even do activities with all the kids. Even going to a family cinema I can't afford."
HSC Family Case Study - Anonymous	"People don't know what they can access and what they are eligible for. I think it is assumed people know, but we don't." "I didn't know I could access the Winter Fuel Support Scheme. Until Home-Start Cymru told me about it I had no clue. I had to rush to not miss the deadline On top of this, I only just found out support won't be given to replace free school meals through the summer. No help has been offered to me." "Trying to sort council tax reduction was an absolute nightmare. I was bounced around by so many people. I'm dyslexic so I really struggle with the online form system. My broadband is very unreliable too. I have to keep logging in and out a lot of the time as my signal just cuts."





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	"My oldest has been worrying about whether we'll be able to get her the things she needs for college. There's so much she needs for her course, like equipment and uniform, which is so expensive, but I can't get any support to make sure she's set up with what she needs."
	"When I go to get support from community organisations for things like, clothes and food, sometimes I feel am treated differently than others that look different to me. I notice they won't give me the same things or they brush me off."
HSC Family case study- Nadia, Newport	"My daughter will be 17 soon and I'm struggling. She is asking whether she can invite her friends round or have a cake. I took her to the charity shops but she couldn't find anything that was trendy. I just want the government to understand that we are equal to others, we want to be able to give our children a normal life and celebrate occasions."
	"Even if there is a system that tells me clearly what I am eligible for, I may not be able to access it anyway as I don't drive and cant afford the bus. Refugees can access free transport, but not asylum seekers."