

NSPCC

look say sing play

**The insights behind
'Look, Say, Sing, Play'**



EVERY CHILDHOOD IS WORTH FIGHTING FOR

About the NSPCC

The NSPCC is the leading children's charity fighting to end child abuse in the UK and Channel Islands. We help children who have been abused to rebuild their lives, protect those at risk, and find the best ways of preventing abuse from ever happening. To achieve our vision, we:

- Create and deliver services for children which are innovative, distinctive, and demonstrate how to enhance child protection;
- Provide advice and support to ensure that every child is listened to;
- Campaign for changes to legislation, policy, and practice to ensure the best protection for children; Inform and educate the public to change attitudes and behaviours.



Why we want new parents to Look, Say, Sing, Play

The critical first 1000 days of life

The first 1,000 days of child's life are a crucial period for child development and wellbeing. There is clear evidence that experiences during the early years of life play a unique role in shaping a child's brain, with long-term consequences for health and wellbeing, as well as educational learning¹.

Supporting parents to foster a secure and stable parent-infant relationship which nurtures the child is vital and should be a primary aim of Early Childhood Education and Care policy. Parent-infant interaction at this stage has a particularly important impact on the infant's developing brain². Specifically, a secure attachment between infant and parent has a demonstrable impact on the part of the brain which regulates stress, generating positive infant wellbeing in the present, while also buffering the child's brain against future harm³.

Evidence shows that parents' awareness of and ability to recognise their baby's mental states – are important to enable them to respond sensitively to their baby and form a healthy relationship. This is critical for developing a responsive and supportive caregiving style, and preventing child abuse and neglect. For example, interventions which support parent-child interactions during these early years can improve the parent-child relationship and reduce the risk of maltreatment⁴. It's vital that we give families every support at this formative stage given that early experiences of bonding can continue to shape the individual's interactions with the world around them long after infancy. Research demonstrates that attachment style affects areas such as relationship functioning, caregiving behaviour, and conflict and communication skills⁵.

While abuse and neglect can occur at any point over the life course, there is evidence to suggest that infancy represents a period of heightened vulnerability, with US government statistics highlighting that one third of children who been maltreated are between 0 and 3 years of age.⁶ There are no comparable up to date statistics for child maltreatment in England, but it's worth noting that the most recent available statistics suggest that almost 40% of children who were on a child protection plan were four years old or younger,⁷ as were 18% of children in care.⁸ This rate is comparable to Wales and Northern Ireland, however Scotland has a higher rate, with over 50% of children on child protection registers aged 4 years or under.⁹ **We know that this is preventable and that the perinatal period and infancy offers a unique window of opportunity to work effectively with families at risk of maltreatment.**¹⁰

The experience of abuse and neglect can have a profound adverse impact on a child's psychosocial development and wellbeing. Maltreatment has been shown to exert a significant negative effect on brain development leading to both physical and behavioural changes as the child tries to adapt to environmental stress factors; and if trauma occurs over a prolonged period, it can impact on the regulation of the child's internal stress system which then contributes to physical and mental health problems over the life course.¹¹ Insights from NI and Scotland around Adverse Childhood Experiences (ACEs) have evidenced this with the link to long-term impacts on an individual's health, wellbeing and life chances. A growing body of research is revealing the extent to which experiences and events during childhood, such as abuse, neglect and dysfunctional home environments, are associated with the development of a wide range of harmful behaviours including smoking, harmful alcohol use, drug use, risky sexual behaviour, violence and crime. They are also linked to disease such as diabetes, mental illness, cancer and cardiovascular disease and ultimately to premature death.¹² Disorganised and insecure attachment problems are common outcomes of childhood maltreatment and these too can heighten vulnerability to developing mental health disorders.¹³ **But with the right support at the right time, the risk of children developing adverse outcomes is significantly reduced.**¹⁴

Serve and Return interaction

When an infant or young child babbles, gestures, or cries, and an adult responds appropriately with eye contact, words, or a hug, neural connections are built and strengthened in the child's brain that support the development of communication and social skills. Much like a game of tennis, this back-and-forth is both fun and capacity-building. When caregivers are sensitive and responsive to a young child's signals and needs, they provide an environment rich in serve and return experiences. The Look, Say, Sing, Play approach encourages this interaction.

How serve and return interaction affects healthy brain development

Information from Harvard Centre on the Developing Child

Healthy brain architecture is dependent on appropriate input from a child's senses and stable, responsive relationships with caring adults. If an adult's responses to a child are unreliable, inappropriate, or simply absent, the developing of the brain may be disrupted, and subsequently physical, mental, and emotional health may be impaired. The persistent absence of serve and return interaction acts as a "double whammy" for healthy development: not only does the brain not receive the positive stimulation it needs, but the body's stress response is activated, flooding the developing brain with potentially harmful stress hormones.

Building the capabilities of caring adults can help strengthen the relationships which are essential to children's lifelong learning, health, and behaviour. A breakdown in reciprocal serve and return interactions between adult caregivers and young children can be the result of many factors. Adults might not engage in serve and return interactions with young children due to significant stresses brought on by financial problems, a lack of social connections, or chronic health issues. Policies and programs that address the needs of adult caregivers and help them to engage in serve and return interactions will in turn help support the healthy development of children¹⁵.



NSPCC research into early parent experiences

In 2018 the NSPCC commissioned research with over 2000 parents across the UK to gain insights on parent-child interactions, needs and attitudes using focus groups, surveys, digital diaries and in-depth interviews. Professionals were also consulted throughout the process.

Primary research was split into two work-streams:

Research with a general audience of parents (socio-economic groups ABC1C2D) and their support networks

- Concept development and testing the Vroom approach (qualitative)
- Finding a media hook and assessing potential partners (quantitative)

Campaign development

Consultation with specific audiences of interest

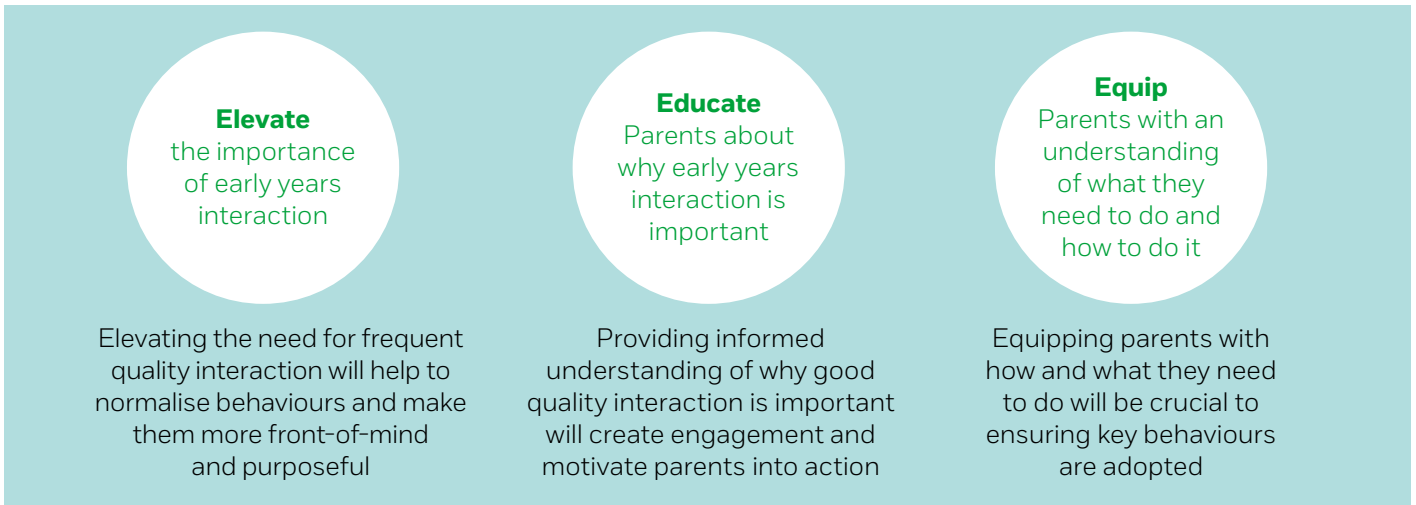
- Professionals
- Harder to reach audiences: socio-economic groups DE; people experiencing poverty and social exclusion; people experiencing common mental health issues; parents of children with Special Educational Needs

The research found that:

- Parents are interacting with their babies and young children, but it could be more *purposeful, deliberate* and *rewarding*.
- Many parents don't know *why* interaction is so important.
- Some struggle with ideas about *how* to interact in the everyday moments, beyond eye contact and cuddling, especially in the early months when they do not receive obvious feedback from their babies.
- Parents wanted a strength-based approach that was practical, not preachy – real life scenarios which reflected their experience, rather than leading with the science.
- Parents welcomed an approach that challenged the idea that you can interact too much; parents said they could use it to justify their behaviour to relatives – pushing back on any advice from families and communities which suggests too much attention can be detrimental.

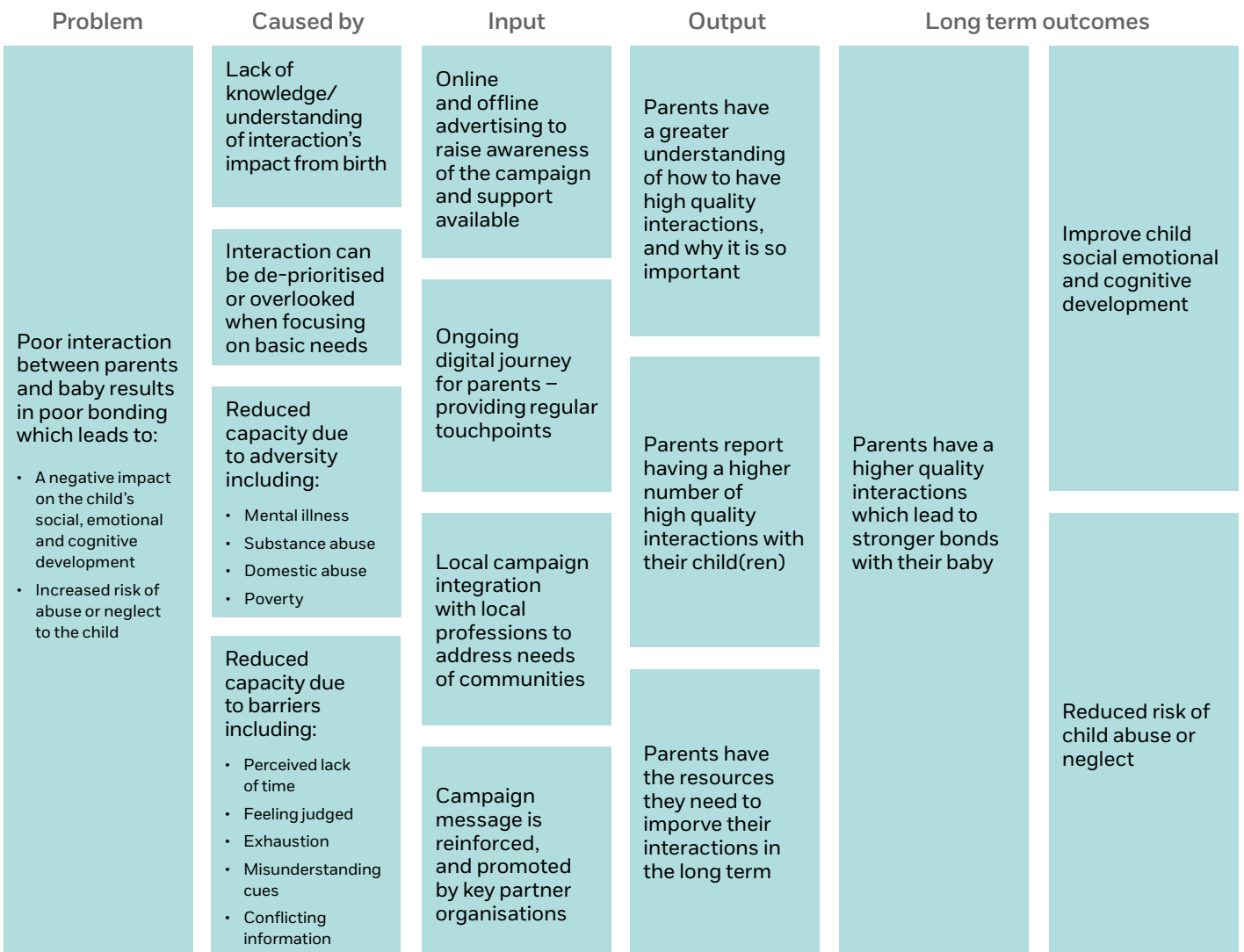


These insights provided the key principles for the Look, Say, Sing, Play campaign:



How Look, Say, Sing, Play will improve outcomes for parents and children

Theory of Change



Working with Vroom

To support our delivery of Look, Say, Sing, Play we have partnered with Vroom, an evidence-led US public health initiative which promotes positive interactions with parents to help their child's development. Vroom uses the science of early learning, and their work is based on the following evidence-led pillars:

1. *Positive connections with you help your child's brain develop and become more resilient*
2. *Back-and-forth moments with you build your child's brain in ways that help their learning, health, and behaviour both now and in the future*

Vroom's behavioural scientists have developed over two thousand tips that have been proven to lead to behaviour change. Our own research found that parents liked this approach for:

- The variety of activities and tailoring of those to their baby's age
- Tips that fit with everyday moments
- The link to brain building

You can read more about [Vroom here](#).¹⁶

Integrating Look, Say, Sing, Play in to your local offer

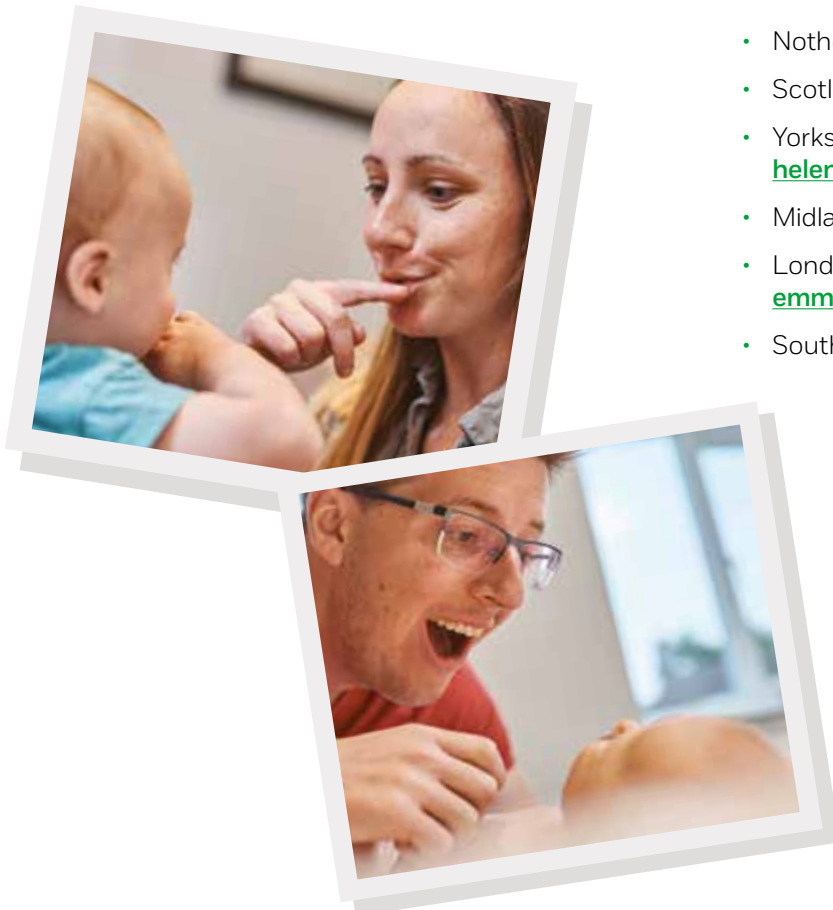
We're aware of the huge amount of work within communities to promote high quality interaction between parents and their young children, to widen children's language, vocabulary and social skills in the pre-school years and enhance the home learning environment – this has continually been highlighted throughout our research with families. With this in mind, we are keen for Look, Say, Sing, Play to integrate with existing national initiatives like the Healthy Child Programme, Infant Mental Health approaches across the UK, Early Years Strategies, as well as local initiatives, providing tools and resources to support this work – these include:

- Look, Say, Sing, Play session plan
- Online information
- Parent emails

NSPCC Local Campaign Managers are developing locally based campaigns in their areas around the 'Look, Say, Sing Play' theme and these will particularly focus on harder to engage groups. As appropriate they will work with partner organisations and local services – including [Together for Childhood](#).¹⁷

If you are interested in initiating a local Look, Say, Sing, Play campaign, please contact the relevant campaign manager across the six regions:

- Northern Ireland – margaret.gallagher@nspcc.org.uk
- Scotland – carla.malseed@nspcc.org.uk
- Yorkshire and the Humber – helen.westerman@nspcc.org.uk
- Midlands – ally.sultana@nspcc.org.uk
- London and South East – emma.motherwell@nspcc.org.uk
- South West – julie.campbell@nspcc.org.uk



Further reading

[Harvard Centre on the Developing Child](#)¹⁸

[Vroom](#)¹⁹

NSPCC service-based interventions focused on improving parents' interactions with their children

- **Baby Steps** – an intervention [tested by NSPCC](#)²⁰ which aims to strengthen the relationship between parents and their baby, starting when the baby is still in the womb and continuing after birth – encouraging and guiding parents to take a reflective stance and to be curious about their baby's feelings.
- **Video Interaction Guidance (VIG)** – aimed at improving interactions between parents and children of 2–12 years old where concerns about neglect have been noted. VIG is no longer delivered by the NSPCC, but you can [find out more about our findings here](#).²¹

References

- 1 Center on the Developing Child (2009) Five numbers to remember about the developing child. Harvard: Center on the Developing Child.
- 2 Schore AN: Relational trauma and the developing right brain: The neurobiology of broken attachment bonds. In Tessa Baradon: *Relational Trauma in Infancy*. London: Routledge 2010, p. 22.
- 3 Clinton, J., Feller, A., & Williams, R. (2016). The importance of infant mental health. *Paediatrics & Child Health*, 21(5), 239–241.
- 4 <https://www.sciencedirect.com/science/article/pii/S0145213417303435?via%3Dihub>
- 5 Tara E. Sutton (2018) Review of Attachment Theory: Familial Predictors, Continuity and Change, and Intrapersonal and Relational Outcomes, *Marriage & Family Review*, DOI: 10.1080/01494929.2018.1458001
- 6 U.S. Department of Health and Human Services, Administration on Children, Youth and Families. (2015). *Child Maltreatment 2013*. Washington, DC: U.S. Government Printing Office
- 7 <https://learning.nspcc.org.uk/media/1181/child-protection-register-statistics-england.pdf>
- 8 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/664995/SFR50_2017-Children_looked_after_in_England.pdf
- 9 Taken from – <https://learning.nspcc.org.uk/research-resources/child-protection-plan-register-statistics/>
- 10 Lazenbatt AB L, Taylor JS: The consequences of infant maltreatment on children's future health and well-being. *British J Mental Health Nursing*. 2012, 1 (3): 171–175.
- 11 Kalmakis, K. A., & Chandler, G. E. (2015). Health consequences of adverse childhood experiences: a systematic review. *J Am Assoc Nurse Pract*, 27(8), 457–465. doi:10.1002/2327-6924.12215
- 12 <https://www.local.gov.uk/adverse-experiences-childhood>
- 13 MIKULINCER, M., & SHAVER, P. R. (2012). An attachment perspective on psychopathology. *World Psychiatry*, 11(1), 11–15.
- 14 <https://www.nice.org.uk/guidance/ng76/chapter/Recommendations%23early-help-for-families-showing-possible-signs-of-child-abuse-or-neglect>
- 15 Key concepts – Serve and Return, Center on the Developing Child, Harvard University – <https://developingchild.harvard.edu/science/key-concepts/serve-and-return/>
- 16 <https://www.vroom.org/>
- 17 <https://www.nspcc.org.uk/preventing-abuse/our-services/together-for-childhood/>
- 18 <https://developingchild.harvard.edu/>
- 19 <https://www.vroom.org/for-professionals>
- 20 **Baby Steps: Evidence from a relationships based perinatal education programme**, Sally Hogg, Denise Coster and Helen Brookes – February 2015
- 21 <https://learning.nspcc.org.uk/services-children-families/past-services#improving-parenting-improving-practice>

Contact

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